

## Q 1. Why did BBAHC stand down its Incident Command on March 1, 2022?

a. BBAHC has met its goals and criteria for standing down the Incident Command in response to COVID. BBAHC will continue to participate in COVID advisory meetings and remain engaged in the region to stayed informed. That will not change.

## Q 2. Can you help BBAHC employees understand why the code green, external emergency, was cleared?

a. The code for an external emergency was cleared in conjunction with the Incident Command standing down in response to COVID. External emergencies can include natural disasters, mass casualty events, or epidemics, where the health system resources may be stretched or overwhelmed and where the organization may be part of a larger response. The code was cleared when the demand for services no longer exceeded available resources, and BBAHC had met its goals and criteria for preparedness.

### Q 3. What is HICS?

a. The HICS (Hospital Incident Command System) is designed to be scaled up and down, mobilized and demobilized in response to a variety of emergencies, which could be isolated events, or like COVID, have widespread implications locally, statewide, nationally and internationally. HICS is an integral part of BBAHC's Emergency Operations Plan.

### Q 4. Will BBAHC change its COVID procedures?

a. The demobilization of Incident Command for the purposes of responding to COVID, will not mean deactivation of the COVID procedures. BBAHC's COVID procedures will be reviewed and updated or retired as appropriate. That process we be ongoing. As changes occur, we will communicate them widely. BBAHC will continue to monitor compliance, quality patient services, and customer care and remain ready to respond to questions from our staff, patients and partners.

## Q 5. What about masking inside BBAHC facilities?

a. Hospitals and health systems have a solemn duty to prioritize the health and well-being of their patients, many of whom are immunocompromised and/or severely sick and weakened and are at a high risk of a severe reaction should they get COVID-19. In order to protect our patients during this pandemic, BBAHC has implemented various mitigation measures, including universal masking for visitors, staff and all the patients who can be. The CDC continues to recommend universal masking in health care settings and this is why many hospitals and health systems will continue to have masking policies in place even while other settings (such as restaurants, office buildings, gyms, etc.) in the community drop them. BBAHC will continue to take the steps necessary to protect our patients, especially the most vulnerable.

## Q 6. Can I still receive COVID testing, vaccinations and boosters at BBAHC?

a. Yes. Contact us at 842-5201 for more information. There is no cost to patients for COVID testing or vaccinations. If patients have insurance, insurance may be billed for these services, but no balance billing to the patient will occur.

## Q 7. Can BBAHC care for me if I become seriously ill with COVID?

a. Yes. BBAHC is prepared to care for patients who become seriously ill with COVID, administer medications to treat COVID, and transfer patients as appropriate for further treatment.

# Q 8. What other factors will BBAHC consider for activating or deactivating the Incident Command in response to COVID?

a. Similar to the CDC's new COVID-19 Community Levels tool, BBAHC is monitoring for the overall impact of COVID in the region, based on metrics that include case count and indications of health system strain. BBAHC has a detailed work plan to respond to COVID, which includes regularly evaluating our resource levels, hospitalizations, hospital capacity and capabilities to continue to offer quality patient care.

### Q 9. How will BBAHC continue to monitor for an increase in COVID cases?

a. BBAHC tracks cases through testing at village clinics and the main BBAHC campus in Dillingham. In addition, BBAHC communicates with partners in our region, who are also testing and reporting positive cases to the State of Alaska, Department of Health and Human Services. Partners include Capstone, public health, school districts, tribes, and municipalities. Finally, BBAHC is tracking all infectious diseases, including COVID, as a normal course of business through the quality healthcare services that we provide in our village clinics, outpatient clinic, and emergency room.

### Q 10. What if COVID cases increase leading up to or during fishing season?

a. BBAHC will be continuously monitoring criteria established for standing the HICS (Hospital Incident Command System) back up. BBAHC will continue to stay engaged with the State of Alaska's Fishing Industry COVID coordination call, now occurring every two weeks. Many of the processers participate in this group and have a vested interest in operating safely. An outbreak at their facility can have a devastating economic and human impact. Should cases or other metrics increase during fishing season, we are prepared to respond, together with our partners.