Study finds racial equity in crisis standard of care guidelines
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Manchanda, under-resourced communities of color typically rely on health care facilities, especially safety-net hospitals that have been hit the hardest by surges in COVID-19. Ill-equipped to handle these surges, many of these safety-net hospitals have had to cancel income-generating elective surgical procedures because their inpatient beds are filled with COVID-19 admissions.

"Safety-net hospitals thus become reliant on a tenuous stream of government funding and may be more likely to enact CSC than better-resourced facilities. Additionally, the resource constraints at safety-net hospitals in diverse communities may lead to compromised care even before CSC enactment," adds Cleveland Manchanda, who also is director for Equity Initiatives in the Emergency Medicine Department at Boston Medical Center.

Cleveland Manchanda stresses that while we are forced to activate CSC guidelines for critical care resource allocation, we must ensure that they equitably serve our most marginalized and at-risk patients populations. "Further prospective and validation studies are needed before CSC can be deemed free of racial and other biases."
