April 1, 2020 via Electronic Mail

The Honorable Jared Polis
Colorado State Capitol
200 East Colfax Room 136
Denver, CO 80203

Re: Equitable, Life-saving Care for People with Disabilities in Our State during the COVID-19 Pandemic: The COLORADO Ethics Example for our Nation

Dear Governor Polis,

Thank you again for your extraordinary leadership during this crisis. As you know, there are approximately 600,000 people with disabilities in the state of Colorado. Considering family members, friends and people whose livelihood depends on us the impact of disability exceeds 2 million Coloradans.

Over the next week you will need to approve Critical Care Triage guidelines for the state of Colorado. The Colorado Cross Disability Coalition has confirmed strong support from well over 100 disability organizations in our state (including every Community Center Board) all of whom have signed onto this summary letter corresponding to our communication on March 25, 2020.

Our stakeholders feel strongly that the Critical Care Triage Guidance for Crisis Standards of Care (CSC) must apply to all hospitals in our state or at least the guidance within the CSC specific to those with disabilities. Below is a recap of what must be included to ensure people with disabilities have equal access to other Coloradans as we all try to survive this pandemic.

Prevent and Prohibit Medical “Rationing” Based on Disability

1) Decisions are not made based on permanent disabilities or underlying conditions unless:
   (a) There is a clinically definitive terminal diagnosis and the individual meets hospice guidelines.
   (b) There is a clinically definitive diagnosis that makes it highly unlikely that the person could survive the coronavirus based on a scientifically known multiple variables (e.g. age 70+ AND severe heart or lung disease that is not reversible).

2) Restoration criteria must only look at restoration to baseline. The fact that someone will need to use medical or social resources after discharge cannot be a factor in decision-making if the person needed those resources prior to the acute treatment.

3) All hospitals must have a plan for providing effective communication to people with disabilities including a reasonable accommodation process to assist with communication.
(Examples could include materials accessible for people who are blind or low-vision, auxiliary aides and services for people with communication disabilities or Sign Language interpreters for people who are Deaf) (CDPHE should provide a resource tool kit. CCDC can assist with this)

4) The state is clear that no one who uses a ventilator on a regular basis (not related to COVID-19) will have their ventilator confiscated. Anyone already on a ventilator that is hospitalized for any other reason will be treated and the use of a ventilator will not reduce their triage score (someone already living on a ventilator may actually have greater survivability).

5) Admission, discharge and aftercare criteria will not differ for people with disabilities and people without disabilities. If someone cannot safely go home once a hospital-level of care is no longer required, placement in a rehab or nursing facility must be short term and re-evaluated every 72 hours.

There must also be an easy way to use an appeal process and we must make information about enforcement accessible as well.

Governor Polis, thank you for helping protect ALL of Colorado citizens and for ensuring our state’s leadership in ethical and accessible healthcare and civil rights protections for people with disabilities. We look forward to receiving the CSC and anticipate that it will be both a state and hospital level mandate and include these basic safeguards that are the underpinnings of our very humanity. We are humbled to work with your administration and have been proud when talking with our peers nationally that Colorado is a leader in this difficult time. We expect that once you issue an order we immediately get national attention to encourage other states to follow our lead.

Sincerely,

Julie Reiskin
Executive Director
Colorado Cross-Disability Coalition
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ADAPT – Dawn Russell
Adaptive Adventures – Chelsea Elder
ADL Mountain States – Scott Levin
Advocacy Denver – Pamela Bisceglia
Alliance – Joshua Rael (Represents 19 Community Centered Boards and 60 Program Approved Service Agencies or PASA’s)
American Liver Foundation – Juliane Swan
Anna and John J. Sie Center for Down Syndrome – Francis J. Hickey, MD
AOI Homecare – David Bolin
Arc of the Central Mountains – Jill Pidcock
Arc Thrift Stores – Lloyd Lewis
Ariel Clinical Services – Rebecca Hobart, LCSW
Association for Community Living in Boulder & Broomfield Counties – Ailsa Wonnacott
Atlantis Community, Inc. – Candie Burnham
Autism Society of Colorado – Danny Combs
Beat to your Rhythm, LLC – Amanda Ortiz
Brain Injury Hope Foundation – Gayann Brandenburg
Breckenridge Outdoor Education Center – Sonya Norris
Celebrate EDU – Linda Anderson
Center for People with Disabilities – Maria Stepanyan
Children’s Diabetes Foundation – Dana Davis
Chronic Care Collaborative – Sara Froelich
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Colorado Fund for People with Disabilities – Megan Brand
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Colorado Health Network, Inc. – Darrell Vigil
Colorado Mental Wellness Network – Hope Hyatt
Colorado Ovarian Cancer Alliance – Patrice Hauptman
Colorado Springs Down Syndrome Association – Julie Harmon
Colorado Organizations and Individuals Responding to HIV/Aids (CORA) – Barb Cardell
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ECS – Robin Stahley
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El Grupo Vida – Elisa Aucancela
Epilepsy Foundation of Colorado – Marcee Aude
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Front Range Home Care Services – Tim Thornton
Global Down Syndrome Foundation – Michelle Sie Whitten
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National MS Society – Jessalyn Hampton
National Pain Advocacy Center – Kate Nicholson
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Rocky Mountain Independence – Tara Goldsby
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