



## Fighting health crisis with solidarity

### *Managing the surge of severe patients at the start of the COVID pandemic*

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# Background

First COVID-19 wave  
Spring 2020

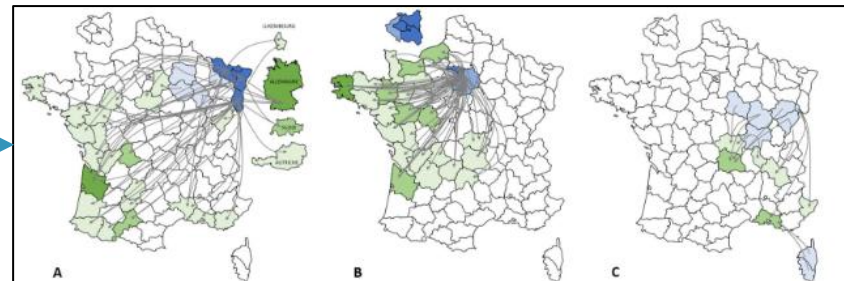
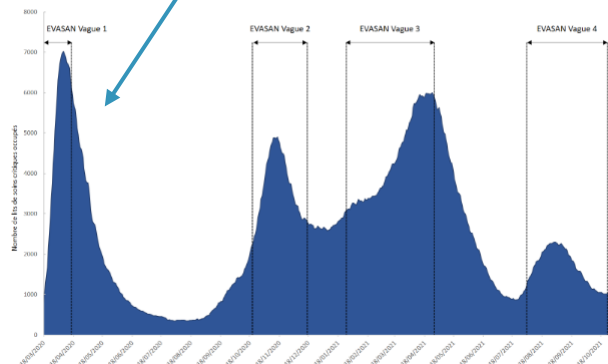
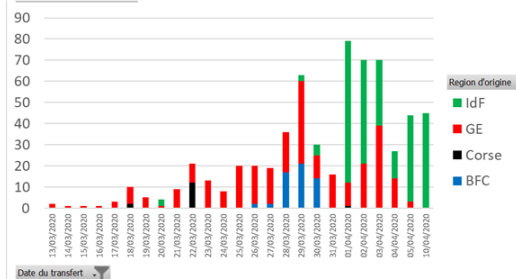


Figure 1 - Evolution de l'occupation du capacitaire de soins critiques par des patients Covid-19 entre mars 2020 et novembre 2021 en France

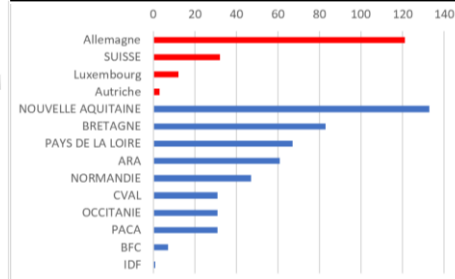


From 13/03 to 10/04/2020 : 661 Transfers  
168 international 493 *inter-regions*

Around 80 « ORIGINE » ICUs



Towards 170 « DESTINATION » ICUs



# Innovations => needs evaluation

## Innovative features:

- High intensity « Mass » transfers
- Horizontal and vertical collaborations
- Pioneering high-speed-train as vector





## Multidisciplinary evaluation of inter-ICUs transfer of COVID-19 patients

### Qualitative study

- Managerial component
- Clinical component

### Retrospect. Cohort

- Transf. vs controls
- Main outcome: 28days ICU case fatality

# Qualitative study: method

## Semi-directive interviews (n=40)

June 2020 to October 2021

Recorded and transcribed

Component	Name	nb
Managerial	Dir. Gen. Santé (national)	2
	Regional Health Agencies	9
	Army	6
	Academic Societies	7
Clinical	"Origin" (sending) hosp.	8
	"Destination" (receiving) hosp.	8

## Review of documents

## Thematic analysis

# Qualitative study: results

## Mass-transfers : success despite difficult circumstances

**Scaling up** : from “routine bi-lateral procedure” to orchestration of mass transfer at national level

A **logistical challenge** : volume of patients, distances, variability of vectors

**Organisational challenge** : e.g. new cooperation with train company (SNCF)

## Facilitating factors

The pre-existence of a **standardised transfer protocol** (Evasan)

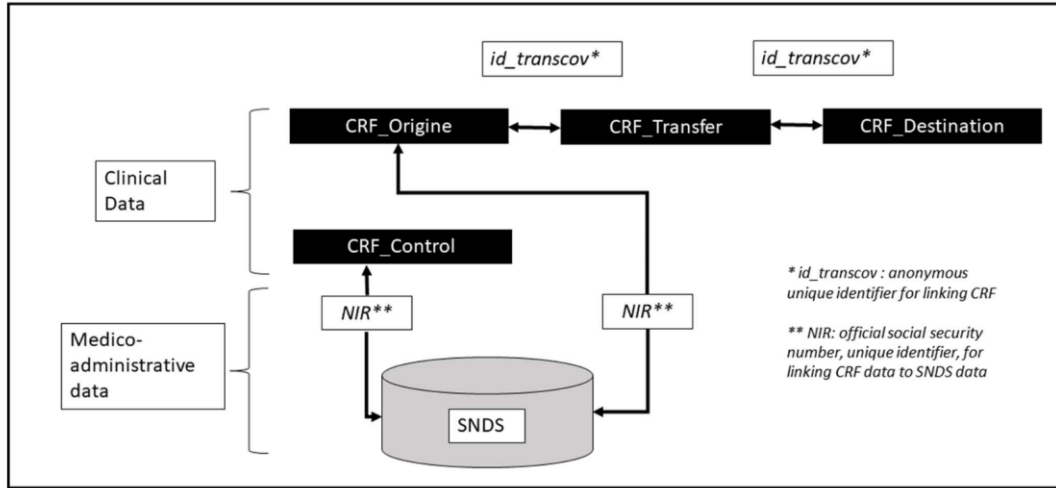
The **full-scale simulation of train transfer** in the aftermath of the 2019 terrorist attack

**Experience and trust** between crisis management professionals

The collective construction of a **common purpose/meaning** in the crisis context

See : Cucharero, Girault et al. La coordination d'acteurs multiples en situation extrême.  
Le cas des transferts extrarégionaux de patients Covid-19. (RIMHE 2022, 2023)

# TRANSCOV COHORT : method



## Participation

- 46/70 « origin »
- 65/146 « destination »

## Patients involved :

- 502 transferred
- 1280 controls



# TRANSCOV COHORT: Results

## Main results

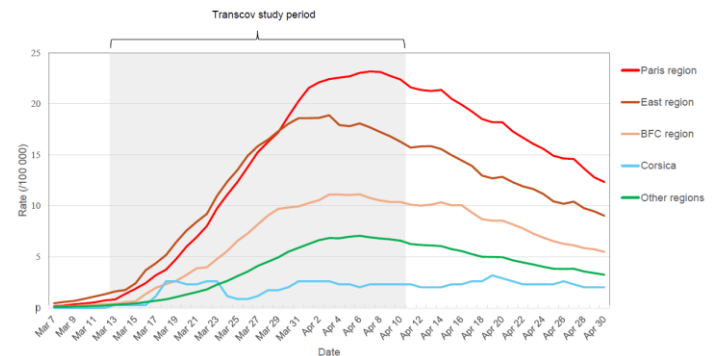
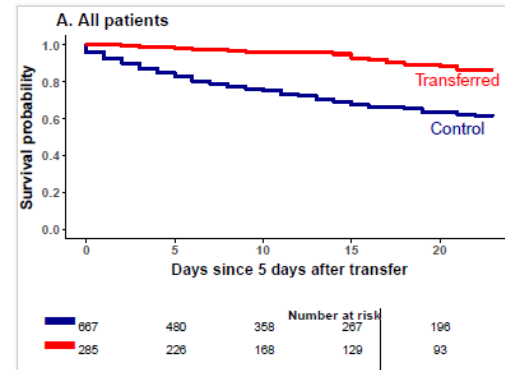
No major adverse events during and shortly after transfer

Confirmation of much lower mortality associated with transfer

## Interpretation

Selection of healthier patients for medical evacuation => better survival

Overwhelmed sending ICUs versus comparatively "idle" receiving ICUs





# Conclusion

## From a clinical point of view

- Mass transfers of severe ICU patients was safe
- Inter-regional and international solidarity saved lives
- Probably better to transfer patients as early as possible (to avoid overburden)

## From a managerial point of view

- Pre-crisis trust & cooperation between services helped +++
- Performing under overwhelming burden of care is difficult
- Even in non-crisis situations, the patient/staff ratio is a critical factor in ICU
- Need to strike the right balance between competition and cooperation

A cluster of colorful geometric shapes, including triangles and polygons in shades of pink, teal, and blue, positioned above the "THANK YOU" text.

# THANK YOU



## Acknowledgment

To all participating ICUs & interviewees

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