

Reopening: A measured approach





"A measured approach"

"Unfortunately, we have no playbook for the COVID-19 pandemic. We have adopted the philosophy that we will take a *measured* approach. We will not overreact, nor will we jeopardize the safety and well-being of our patients, associates, and communities. Hospitals have chosen to react differently, and that's fine, because there is no *one right way* to approach this public health emergency."

—CEO Todd Willert, March 19 edition of the E-Connection, our internal newsletter

COVID-19 Response Team

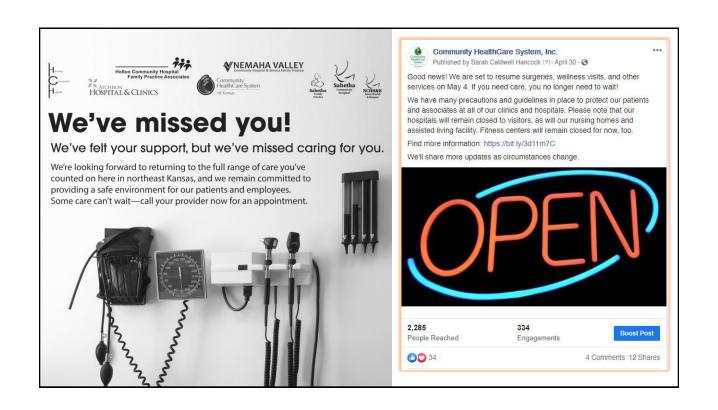
- Anticipate needs, guide organization
- Facilitate multidisciplinary communication
- Solicit medical staff input for guidance, support, validation
- Meet frequently
 - Twice weekly in March, April, first part of May; now once weekly
 - Smaller group meets daily for morning briefing



Communication: External (public)

- · Blog, newspapers, and social media
 - · Facebook Live with medical staff
 - · Radio call-in with Chief of Medical Staff
- Special joint print and radio ads with other hospitals
- Signs to direct patients and visitors
 - Update as necessary
 - · Keep to a minimum and de-clutter periodically
- Letters to long-term care and assisted living residents and families











Communication: Internal (employees)

- Daily communication and testing updates with medical staff and lead nurses
- E-Connection weekly newsletter
- Zoom meetings and Q&A with staff
- COVID-19 testing updates twice each week



COVID-19 Update

WHAT OUR ASSOCIATES NEED TO KNOW

Screening

- Maintained screening stations inside facilities
 - Patients instructed to call if displaying certain symptoms
 - Staff in PPE meets these patients outside
- Continued screening of all who enter hospitals and clinics
 - Screeners assigned through Labor Pool
 - Special training for screeners
- Continued daily screening of associates
- Temperature, travel/symptom questions, masks



Surgery/elective procedures

- 50% capacity for first two weeks (starting May 4)
- Treat all surgery patients as if they have COVID-19
- As of June 1, testing all surgery patients for COVID-19 prior to procedure
- Using a working log on pending procedures
- Waiting area reconfigured to accommodate social distancing

Clinics

- 50% capacity for first two weeks (starting May 4)
- · Waiting areas accommodate social distancing
- · Help patients feel safe
 - Separate areas in clinics for wellness visits and other non-PUI patients
 - Separate time frames for sick and well patients
- · House calls and telemedicine provided as needed
- Clinic staff contacting patients who are past due for appointments
- Clinics evaluating community landscape; evening clinics haven't reopened



Visitor policy

- No visitors March 14 through May 31
- Relaxed policy starting June 1 for non-COVID-19 patients
 - · Visitors allowed one at a time; must be screened and masked
 - · Must acknowledge guidelines
 - Pediatric patients allowed both parents; OB patients allowed one support person
 - Clinic patients allowed one support person who is screened; mask encouraged. Pediatric clinic patients allowed both parents.
 - · Restricted access to certain areas of hospital
- Long-term care and assisted living following KDADS guidance

Visitor guidelines

Hospital patients are allowed one visitor at a time. Clinic patients are allowed one support person.

- All hospital and clinic visitors and support persons must be screened
- Mask required in hospital or surgery area
- Pediatric patients are allowed both parents
- Hospital visiting hours are 8 a.m. to 7 p.m.



Thank you for your cooperation!

PPE

- Supply team
 - · Burn rate calculations
 - Track inventory with shared document
- Conservation and reprocessing
 - Training
 - Battelle
 - SteraMist
- Community engagement
 - · Reusable gowns and homemade masks
 - Other supplies and donations



Collaborations

- Pottawatomie County Emergency Operations Center
- Weekly CEO call with area hospitals
- Northeast Kansas Healthcare Coalition
- 3D printing of nasopharyngeal swabs with Kansas State University Carl R. Ice College of Engineering
- KU Care Collaborative







Fitness Centers

- Example of the measured approach
 - · Associates only at first
 - Restricted hours to protect therapy and rehab patients
- Asked how we can keep everyone safe
- Public access June 3
 - New screening and cleaning procedures
 - Restricted hours and access
 - Social distancing
 - No fans, no showering in facilities with locker room



Lessons learned

- Einstein: "In the middle of difficulty lies opportunity"
- Reopening to "the next normal"
- · Communication is crucial; address concerns and anxiety
- Flexibility and LEAN process improvement
 - · Combine policies systemwide whenever possible
 - Example: screening continues to evolve

Thank you

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"To enrich the health and lives of the people we serve."

