

COVID-19 Update & Resources

UC Health

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To: UC Health <UCHealth@UCHealth.com>;



TO: UC Health Employees and Clinicians

FROM: Dustin J. Calhoun, MD FAEMS
Medical Director, Emergency Management

Maria Friday, MS
Director, Emergency Management

George Smulian, MD
Medical Director, Infection Prevention

Laura Schuster, BSN, RN, CIC
Manager, Infection Prevention

Evie Alessandrini, MD
SVP & Chief Medical Officer

DATE: Tuesday, March 3, 2020

RE: COVID-19 Update & Resources

The World Health Organization and the U.S. Centers for Disease Control & Prevention continue to closely monitor areas of increased viral spread in South Korea, Iran, Italy and Japan while evaluating for additional concentrations. Fortunately, the number in the United States remains low (with no cases in Ohio, Indiana or Kentucky).

It is important to remember that the overall risk to any individual is far greater from seasonal influenza than COVID-19 at this time and that simple hand hygiene, respiratory etiquette and personal protective equipment are highly effective. Additionally, 80 percent of COVID-19 positive patients have a mild illness. Nonetheless, we should each have an appropriate level of understanding of UC Health's preparedness for such events as well as things we can all do to help.

Of note, we completed the CDC's recommended hospital preparedness checklist entirely with already existing plans and preparations. We are now in the process of diligently updating and adjusting as dictated by the ever-evolving situation as well as providing refresher education to employees where needed.

Patient Care

Please visit the [CDC COVID-19 website](#) for a thorough patient definition. In general, these patients demonstrate lower respiratory symptoms such as cough and shortness of breath and have experienced some exposure risk factor such as travel or close contact with another sick patient. It is important to remember that contact with asymptomatic individuals, contact at greater than six feet distance and contact while wearing appropriate personal protective equipment (PPE) are considered low risk.

We realize that there are departments and/or locations that have questions regarding their standard operating procedures. We will work with you to ensure that you know your specific protocols based on CDC recommendations and UC Health policies.

Please review your procedures for initiating airborne precautions. This should include placing a simple mask on all patients with respiratory symptoms as early as possible. Process

measures were implemented in EPIC and are being regularly updated to assist with the early identification of patients needing airborne precautions. These patients should be isolated as early as possible. Physical distancing is a powerful tool. Masking patients with respiratory symptoms and maintaining separation from them confers significant protection. As always, excellent hand hygiene is an essential part of our protective measures.

Personal Protective Equipment (PPE)

We are closely monitoring PPE stocks and at this time feel we have an adequate supply on hand. These patients require airborne + contact + droplet isolation. Proper PPE is exam gloves, fluid resistant gown, N95 facemask or PAPR, and eye protection. These are all part of normal patient care processes and should be used as they normally would be. Please take this opportunity to refresh your knowledge of the location and proper use of these supplies.

It is essential that we all do what we can to conserve the supplies; only use N95 masks when caring for patients on airborne precautions and never put N95 masks on patients or visitors. When caring for airborne precaution patients, try to minimize the number and frequency of individuals entering the patient care area while still providing appropriate medical care.

Response Coordination & Communication

A daily COVID-19 specific huddle occurs with a large number of leaders from our various sites and departments, including subject matter experts. During these meetings, CDC updates are provided and specific issues or opportunities for improvement are escalated and addressed. If you have questions about your site or department's representation on this call, please address with your manager or contact emergency preparedness and infection prevention at the contact information below.

We, the COVID-19 Core Team, will provide direction and oversight regarding system processes and protocol and will partner with the specific leaders in our various sites and care teams as those leaders refine specific to their operations.

For example: we will provide CDC-based recommendations to Ambulatory leadership; then, Dr. Forrester, Jenny Dusso and Shawna Langworthy will work with front line sites to refine and implement operational protocols specific to Ambulatory based on this information.

Personal Preparedness

As the region's academic health system, the care we provide our community is invaluable. Employees should maintain good infection prevention practices (such as hand washing, coughing/sneezing into your elbow, avoid touching your face and stay home from work) when away from work and should avoid unnecessary travel to high risk areas.

If our community identifies a large number of patients, it may become necessary for schools and nonessential businesses to close. In order to ensure seamless operations across the system, you should begin working with your teams to establish plans to mitigate the effects of such closures on our ability to care for our patients.

What's Next

A [designated channel](#) on The Link has been created as a one-stop location for resources and information. This channel will be regularly updated as needed; if there is a significant update, a systemwide email and Link notification will be sent.

Please talk to your teams about this information and ensure those that may not check their emails regularly are aware of this communication and the available resources and contacts.

Questions/Contacts

A hotline has been established for questions or immediate needs related to COVID-19. Please call **(513) 584-WASH** to reach a member of the COVID-19 leadership response team.

For less emergent questions or concerns, contact emergency management at emergency-management@uchealth.com or infection prevention at infection-prevention@uchealth.com.

Thank you for your leadership and engagement.

