



Russell Meyers, CEO of Midland Health

COVID-19 Daily Briefing: Wednesday, April 22, 2020

Transcribed from a previously recorded live event.

Mr. Meyers: Good Morning. I am Russell Meyers and this is Wednesday, April 22nd, our daily Coronavirus update from Midland Memorial Hospital. We'll start this morning with some numbers. In Texas, yesterday we went over the 20,000 mark in total confirmed cases across the state. There are over 500 deaths in the state. In Midland County, the Department of State Health Services shows 64 positive confirmed cases and we had our 4th death in Midland yesterday. An 80+ year old female from Midland Medical Lodge passed away in the hospital yesterday.

Testing from the hospital site, over 1,300 tests have been drawn. 74 positive results in that population. Some of those are duplicates. Some are from outside the county. We also are awaiting now 185 results. Most of those from the last 2 days, but a couple of them dating into last week. The hospital census today is 135. We have 14 patients in critical care. Our PUIs for COVID-19 total 17; 5 of those in critical care and 12 in medical surgical sites. 6 of those 17 are confirmed positive cases of COVID-19. The good news about those numbers is that the equivalent was 26 yesterday. We're down from 26 to 17 today. And we had ED visits of 88 yesterday continuing our trend of low volume. And we have 6 patients on ventilators as of today.

We have several things going on that I'd like to report on. One is our continuing monitoring and activity related to the Midland Medical Lodge patient population. We are still awaiting a handful of tests results, but most of them are back. So far, we have a total of 30 positives confirmed that are associated with Midland Medical Lodge. Nine of those are staff and 21 are residents in the facility. We have 7 of those patients from the Medical Lodge who are in the hospital at this time. And we have had 2 deaths associated with the outbreak at Midland Medical Lodge.

We told you, I believe yesterday that we had recognized a small cohort of positive bus drivers in the EZ Rider system. A team from the hospital went out to the EZ Rider location on Monday evening and tested 26 drivers. And we are hopeful of getting results back as soon as today to provide further guidance to the EZ Rider leadership team.

We are already starting to do some elective procedures. Today our endoscopy staff is beginning to go back to work. We had meetings earlier in the week with our gastroenterologists who do the procedures in endoscopy and we'll be slowly ramping up that procedure volume over the next few days. But they are returning to elective procedures as of today. We have gone back to essentially a full schedule of imaging procedures as well including screening procedures. And we'll be discussing today with our surgeons and our anesthesia providers what the schedule for returning to elective surgery will be. We had made plans to begin that this week. We had deferred those plans awaiting the results of the testing at the Midland Medical Lodge. Now that we have most of those results back and understand the magnitude of the challenge there, we believe we are prepared to go forward with making plans for elective surgeries. By the time we meet again tomorrow with the Unified Command Team I expect to be able to give you some details of what we'll be doing with return to elective surgery. So, stay tuned for those results.



One more thing with regard to re-opening. As you all know many of our physician practices have been severely limiting the patients that are allowed to be seen in the office. We are trying to emphasize telemedicine as much as possible for patients who need to see their physician or other providers. But over the last few days we've been talking with the practices that are managed by Midland Health and sometime this week we'll be issuing new guidelines to the physicians and the community with regard to some re-opening of the practices for real time in-person patient visits. Those rules will likely include minimizing the population in the waiting rooms, certainly continuing social distancing, and mask wearing, and careful hand hygiene, and those kinds of things. But there'll be more information to be forthcoming in the next couple of days with regard to how we will be re-opening our physician practices as much as we can.

We have spent some time in the last couple of days re-emphasizing with our own staff the importance of self-screening and being aware of their own conditions. We've emphasized this with our staff from the beginning, but we've decided it was time to re-emphasize it in the recent days. And I think this is a message that's important for all employers especially as we begin to see our work forces return and get back to their work sites. It is really important every day that our employees and everyone's employees check themselves for symptoms. If you have a cough, if you have abdominal symptoms, certainly if you have a fever, if you've been exposed to a known COVID-19 positive patient those are reasons to stay home from work. And even as we all return to work it's important to re-emphasize that. For those of us who are continuing to go to work and gather with our co-workers in our work spaces proper hand hygiene, wearing a mask when you're anywhere that's not completely alone in your work space, continuing to monitor every day your own symptoms. Those are really important elements of keeping this virus contained. And we can't lose sight of those. We are re-emphasizing that with our own employees and we should do so throughout the community as we begin to re-open.

Let's see. That last thing that I have prepared today, as we are talking about our staff, I'd like to offer a note of thanks to our entire staff, everyone who works in any Midland Health environment. Our people have been resilient, creative, they have done things that are way outside their comfort zone as the work that we do has evolved and we've had to shut down some elective work and reduce the patients we see in the physician offices. But throughout all that our people have had good spirits. They've been very positive and willing to do anything that was asked of them, even things that they are not accustomed to doing. And, you know, one great example of the engagement of our staff that I'd like to repeat, yesterday we had a town hall meeting. We did it electronically, much like what we are doing right now. We invited all of our employees to participate. We had over 350 employees, staff members who were participating live in our electronic town hall yesterday. And we posted that on our intranet for our people to continue to see. The participation, the questions, the active engagement of our work force is a further example of how involved our people are, how dedicated they are to their work, how committed they are to serving this community and I can't thank everyone here enough for continuing to stay in here, fight the good fight, do the work that's needed with good spirits and serve people the way we all know how and the way we all are accustomed to doing. So, thanks to our work force. Thank you to all of you for tuning in this morning and I'll be happy to take questions now.

Tasa Richardson, Midland Health Public Relations Manager: We don't currently have any questions, but we'll give everybody a few more minutes.



Mr. Meyers: Ok. I'll remind you that tomorrow at this time will be our Unified Command Team Briefing as we do every Tuesday and Thursday. I hope to be able to tell you some details about the reimplementation of elective surgery which we'll be working on today and also about the reopening of physician offices, at least among those that are managed by Midland Health.

Tasa: We have a question from Caitlin at the MRT. Are there any plans to retest Midland Medical Lodge residents and employees in case there are false negatives?

Mr. Meyers: I don't think we have a plan to do that right now. We have retested in very small numbers here and there when it was clinically indicated, but no we don't have an intention of retesting in case of false negatives.

Tasa: We have a question from Facebook. How long do you plan to continue providing these daily updates?

Mr. Meyers: I think that's a good question. I certainly intend to continue through this week. We will assess as the days go on and as long as they continue to have value, we'll continue to do it. I suspect that we'll be having updates on a regular basis for some time now. We might reduce them to less than daily as things calm down. I don't know, but I don't have any plans to change the schedule as of now. We'll reassess as we get to the end of this week and we'll let everyone know before we make any changes.

Tasa: We have a question from Caitlin again at the MRT. Are the residents who are asymptomatic quarantining in their rooms or are community areas still open?

Mr. Meyers: As I understand it, anyone who's positive has been asked to quarantine in their rooms. And then we are talking about the Midland Medical Lodge I presume. Our team has been in touch with them regularly, we've even had our facilities folks go over there and assess the airflow in their facility and try to assist in placing patients in the safest possible environments. So, our recommendation to them which we believe they are following is that anyone who's positive should be quarantined, maintained in their room until--

Dr. Larry Wilson, Chief Medical Officer: They're quarantined. Everybody's quarantined.

Mr. Meyers: Ok, the entire place. I'm sorry, Dr. Wilson corrected me. Every resident is asked to stay in their room and the public spaces are closed now because of the widespread nature of the outbreak. So, not just those that are positive, but everyone is being asked to stay in their rooms and avoid the public spaces. Other questions?

Tasa: We just had one from Mitch. Do you think Midland has passed its peak or is MMH preparing for more cases to appear as the economy reopens?

Mr. Meyers: Mitch, I think that's the big question. Whether we are passed our peak or not is unknown. I think we've seen a vivid illustration of how we can suddenly spike if a community of some sort has an infection that gets into the community and is quickly spread; a nursing home community. There could be other environments like a work place. So, while it appears as though we haven't had material growth in the overall community and are perhaps even on the downside of the infection rate, the possibility remains for a large-scale outbreak at any point as long as the virus is present in the community. So, I



don't think we can let our guard down. We certainly are prepared to take on more patients than we have today. And as we return to doing elective procedures, to seeing more patients in our physician's offices we have to continue to be vigilant and watch those census numbers, those positive test results in the community, and adjust our behavior accordingly so that we don't lose our ability to respond should we have one of those spikes. I think it's far too soon to be confident and certainly too soon to be complacent about the virus being on the downhill slide. I think it's too soon to say that.

Tasa: It looks like that's all the questions you have for today.

Mr. Meyers: Ok, thank you all for your attendance today and we'll be back again tomorrow at 9:00am. Thank you.