

Russell Meyers, CEO of Midland Health

COVID-19 Weekly Briefing: Monday, May 18, 2020

Transcribed from a previously recorded live event.

Mr. Meyers: Good morning everyone. I'm Russell Meyers, CEO of Midland Health and this is Monday, May the 18th, our weekly coronavirus update. To begin with this morning, we'll talk a little bit about statistics. In the state of Texas, there's over 47,000 confirmed cases now. 1,336 deaths in the state. Here at Midland Health, we continue to test on a regular basis. We've tested almost 2,300 people so far and as of this morning only 54 test results are outstanding. So, that's quite an improvement over our typical Monday morning report. I'm hoping that's an indication that we're ramping up testing capability and turn around time is improving. In the hospital, our census today is 132 total. We have 9 patients in Critical Care. A total of 15 COVID patients. That's 3 on our Critical Care cohort and 12 now on our special COVID medical unit for a total of 15, 14 of those are confirmed positive. You'll notice those numbers are down considerably from the last time we reported. You know we had had a substantial influx of positive, but asymptomatic Midland Medical Lodge patients as they went through cleaning and training of staff and the state's engagement with the Medical Lodge continued last week. So, we had as many as 30+ patients from there during the course of last week. We are down to that total of 15 now in house. 16 patients moved from the hospital back to Midland Medical Lodge through this past weekend. Those were patients who either didn't have any symptoms at all or who have recovered. So, we're really pleased and we want to say thanks to the cooperative efforts of the state's strike force, the Midland Health Department, and the leadership at Midland Medical Lodge to get those asymptomatic patients back to their homes at the Medical Lodge. They've worked with us very well and will continue to do so until we can get all of those patients returned to their homes.

Let's see. Speaking of nursing homes, as you've heard the governor issued a request for all nursing home patients to be tested in the near future and as well as staff members in nursing homes. As the week went on last week, he asked local fire departments around the state to take a leadership role in making that effort happen. And accordingly, we have had conversations now with the Midland Fire Department, with the Midland Health Department, and with the city trying to determine what's the best way to go about executing on the governor's order. We expect to continue to have those conversations in the next day or two and to have a plan to talk about later in the week. Our team from the hospital we expect will be engaged to help with the training, with the preparation at the nursing home facilities to assist the fire department and the health department in whatever way we can. One of the key concerns that we have, which we will continue to emphasize throughout this process is that as we test large numbers of nursing home residents as well as staff members who are working in those facilities, that we have a very clear plan for what to do with the patients who come up positive. If we test several hundred people in the community, the chances are very good that some of them will be positive. If they had symptoms that required them to be in the hospital we trust that they would have already alerted us to those concerns and brought those patients to the hospital, so we want to be sure that these people who are asymptomatic, who have minor symptoms that can be managed in their homes, in this case in nursing homes with self-isolation and the same kinds of things that people have been doing in the community from the very beginning, as long as those cases can be managed in those nursing homes that's what we want to happen. It is not a good scenario for the hospital to be inundated with new patients who don't need us, who are asymptomatic, who have minor symptoms who could be managed at home in the nursing homes. And so we are going to be very, very careful to plan and stay close to this

process so that as patients are tested should any of them come back positive they are managed in the most appropriate possible way and in the most appropriate setting for the level of disease that they are dealing with. So, looking forward to working with the city and the health department, the fire department over the next few days to get a clear plan in place to get all the nursing home testing done as requested by the governor.

Ok, continuing on speaking of the governor, I've not seen a schedule for him yet, but we are expecting to hear from the governor today with regard to the next round of opening up Texas. And we are eagerly anticipating what he might have to say to us and what it's impact might be on our community and on our hospital. The things we can control, we are particularly interested in elective procedures as we've updated each time I've spoken recently we've been working on elective procedure reopening for a couple of weeks now. Our team met last week and determined that not this week, but right after Memorial Day we will be prepared to further expand our elective procedures. We're doing just about all types of outpatients now. The key for us going forward is to carefully mange the inpatient elective procedures. We are trying to be very conscious of our need to keep available inpatient beds for COVID patients. We've devoted an entire floor essentially to that patient population which limits our ability to take on elective inpatients. And so, we are trying to be very careful to be thoughtful about our capacity and at what point we can open up to an expanded inpatient elective surgery schedule. It's not that we're not doing any inpatients, but we're not opening it wide to any inpatient that a surgeon needs to do. So, we're trying to still be careful about that. Meeting a couple of times a week. I will tell you that our surgeons and the other proceduralists who work in the hospital have been incredibly thoughtful and cooperative. Our anesthesia team has been right in the middle of the decision making as well. And trying to make sure that we both serve their patients who have needs for procedures so that their health can be managed. And also, we are conscious of the community's need to keep our beds available and to mange the COVID crisis. As I think I've said before and will repeat again, when we talk about elective procedures: surgeries, endoscopic procedures, heart caths, and the like those are not unnecessary procedures. They are not optional procedures. They are elective meaning that they don't have to be done immediately. But they eventually have to be done. And so, we are trying to be very conscious of getting those patients into the hospital and properly treated who have been waiting patiently for us as we've managed our way through this crisis. So, that's going very well. Great cooperation from all the people involved in surgery, and anesthesia, and GI, and Cardiology and we're very proud of the work that the team has done so far. Looking forward to getting back to a full schedule perhaps as soon as next week assuming that our census continues to decline. We continue to get patients back home to the Medical Lodge and we don't see a spike elsewhere. So, very happy to be able to report that and things are going well along those lines.

Let's see. I want to talk just briefly about our election. This is sort of COVID related and sort of not. The reason we're talking about it is COVID related. As you all know, we had an election scheduled for May the 2nd for the community to consider implementing a very small sales tax, a quarter of a percent across both the city and the county. The purpose of that sales tax is to replace the substantial amount of Medicaid funding that's going to be lost by Midland County Hospital District beginning in the next fiscal year, this October 1st and then stretching through 2024 and beyond. We hope that that sales tax will be an effective vehicle for replacing those lost funds and assuring our ability to continue to pay for indigent care and the wide variety of physicians that require support in our community and a lot of different things that the community really relies on and our resources for paying for are diminishing. The reason that's a COVID related issue is that our May 2nd election was postponed by order of the governor and it

was originally postponed to November which is very late for us in the cycle of trying to respond to these Medicaid cuts. And so, we're very fortunate that we do now have approval for a July 14th election date here in Midland County. Across the county, July 14th is election day both for the runoffs, and the democratic and republican primaries, and for our sales tax election. So, watch the news. There'll be lots more information forthcoming about the dates, about early voting which begins June 29th, just a month and a half from now and will be available in multiple locations all over the community. Of course, as all elections are, this is managed by the Midland County Elections Office. They have done a great job in working with us and being flexible to get this election accomplished even though we are in a difficult situation in our community. So, July 14th primary run offs and Midland County District Hospital sales tax election. Early voting begins June 29th. More information to come on all of that.

Now the last comment is about the next time we'll do a press event. That's a little bit open ended at this point. I know that over the next few days, our work with the fire department and the health department and the rest of the city to develop and roll out a plan for testing patients and staff in nursing homes. That plan is going to come together in the next few days, and we will want to talk about that, to answer questions about it as it becomes available. So, I would like to leave open ended for now the time of our next press event. It may include others beyond just the hospital and if you'll continue to watch our Facebook page, our Public Relations team will get the information out when we are ready to schedule the next one. Of course, next Monday is a holiday, it's Memorial Day so we will not have a regularly scheduled press event on Monday morning the 25th, but we will be scheduling something in the near future and we'll let you know. So, with that, that's all the remarks that I have to make, and I'll be happy to take questions.

Tasa Richardson, Midland Health Public Relations Manager: We have a question from Facebook. Do you believe that we have peaked?

Mr. Meyers: Do I believe that we have peaked? You know that's a tough question. One of the harder ones for us to deal with. The challenge that we face, which has been illustrated very clearly in our community with the Midland Medical Lodge situation, is that while the general level of disease in the community appears to be static, flat to slightly declining we don't know when the next outbreak in a congregate living facility or a workplace perhaps could arise. So, we're not out of the woods for having a significant nursing home outbreak which would cause our overall numbers to spike and cause the hospital's need to keep beds available and perhaps admit large numbers of new patients to come back to hurt us. So, we're not out of the woods at all overall. It feels like we've been pretty flat for quite sometime and may even be declining in the community but it's the nursing home risk, of course we don't have meat packing plants here, but you've seen what's happened in the Amarillo area where large numbers of people work in difficult conditions very close together. Outbreaks can spread very rapidly in those settings, so I don't want to pretend that we are out of the woods at all. We do want to keep delivering the same message we've been delivering day after day. Wear your mask in public. Many people are not doing that as I go around the community. And I would encourage you to remember that a mask is for your neighbor, it's not for you. It protects the person you may encounter in public from droplets that you expel coughing, sneezing, just talking, and breathing and it is an effective tool to help reduce the spread. Stay at home if you don't have to go out. Keep social distancing. Wash your hands. All the things that we've been saying from the beginning still apply. If we have peaked, if we are on a flat or declining curve it's only because we've done the work. We have to continue to do it to keep that from spiking again.

Tasa: We have a question from Caitlin from the MRT. What training will the fire department need from Midland Health to be prepared to conduct coronavirus testing?

Mr. Meyers: Caitlin, that's a good question. I don't think that we can answer it just yet. We've only just begun the conversation with them. But we have committed to them to provide whatever assistance that they need. Of course, all of us are short on personnel. We're waiting on supplies from the state and the state has promised to deliver large numbers of testing swabs so that large numbers of people can be tested in a relatively short period of time. So, all of that is yet to be worked out. We've had a preliminary conversation. We'll have more conversations in the next day or two that will lay out not only what the fire department needs, but also how best to interact with the nursing homes. How to make sure that they not only are prepared for the mass testing that we are talking about, but also that they have a plan for how to deal with the results of the testing. If they have a lot of negative tests that's great. That doesn't mean they should let their guard down, but it's good news. If they have a lot of positive tests that we haven't seen to date, then we'll need to be sure that we've all agreed on what the plan is for how they are going to manage those positive results and the patients who are associated with them. And so, there's a lot of work to be done. There's not a lot of specific answers just yet. We got a request or a mandate from the state, actually the fire departments got that request. They have turned to us for help, and we are very happy to be engaged and to help because this is all of our concern. This is the whole community's concern. And as the biggest provider of healthcare in this community we have a stake in that. So, we'll be closely coordinating with the fire department. We've talked about it a lot before. We have a great relationship with them, ongoing doing a lot of different things together. Dr. Wilson, our Chief Medical Officer is the Medical Director for the EMS service, so we have a very close and very positive relationship with the fire department. And I'm confident that we will be able to work together to get this done in a way that's prudent, that is careful in its preparation for management of the results, and is minimally invasive and difficult for the nursing homes to handle.

Tasa: A follow up question from Caitlin. Do you know when this testing would begin?

Mr. Meyers: We don't know when we'll begin just yet. As soon as is practical. We talked to the fire department this morning and while they have ordered the testing swabs, they have not received those yet. So, that's a limiting factor right off the top. We have a good bit of planning still to do. We're not going to rush into this and do it in a haphazard way that may have unintended consequences. We want to be sure that all the parties involved know exactly what we are going to do, we do it in a systematic and careful way, and we have a really clear plan for what to do with the results. So, we'll work with the fire department and make sure that it begins as soon as is practical. But we're going to be careful not to rush it and make mistakes along the way.

Tasa: We have a question from Facebook. In several of the recent confirmed cases that we've had, it's been noted that they were travel outside of the area. Do we know where they have gone?

Mr. Meyers: I don't. That's a question for the health department I'm afraid and I would encourage you to talk to them about that. As you know, travel while it's not restricted, it's being monitored carefully. The DPS is in the airports checking people for where they've been. There are still several states on the list that our state has published that require at least some evaluation upon return to the state from out of state travel. So, I would think the health department does know where these people traveled, but I do not, and I would direct that question to them.

Tasa: We have several questions on Facebook related to confirmed cases and deceased count. Could you repeat your statistics?

Mr. Meyers: Confirmed cases, you know that's not on my statistical list right now. And I think the death count is now at 12--

Tasa: 12.

Mr. Meyers: In Midland County. The confirmed cases—Can you look on the state's website Taylor? (Speaking to someone off camera) Give us just a second and we'll have that. The state if you are not aware of it, the department of state health services has a score card for the whole state. It's available on its website every day and they update it continuously. It shows you the number of cases in the state, the number of deaths in the state, and then a case count for every county in the state of Texas. So, that information is available pretty readily, I just didn't happen to look at it this morning, but we'll have it for you in just a second if we could go on to any further questions and we'll come back to that.

Tasa: On the city of Midland's case count, there are 120 confirmed cases with 12 deceased.

Mr. Meyers: Ok, very good. Thank you Tasa.

Tasa: Are you aware if we had any confirmed cases over the weekend?

Mr. Meyers: I'm not aware of any additional ones that came in over the weekend. We do have some tests outstanding of course as I said earlier.

Tasa: Ok.

Mr. Meyers: 54 outstanding tests still.

Tasa: How many of the positive cases in the past month have absolutely no tie to Midland Medical Lodge?

Mr. Meyers: You know, I don't know how many. I've noticed each day that there seem to have been a few more that did not have a tie to the Medical Lodge. I believe the last round of 4 positives, none of them had a tie to the Medical Lodge. So, hopefully that outbreak is coming under control and we have a continuing trickle of other types of cases as the state opens up.

Tasa: Do you have any updates on the status on any hospital staff that have tested positive for COVID-19?

Mr. Meyers: I don't. That's very small numbers, but I don't have an update. (Comments off camera that could not be heard) Only 1 that we know of, yeah. But I don't have any specific updates. Our employee health team is managing and tracking any employees who have been exposed. Most of those exposures have expired. They have happened in the fairly distant past and we've moved on, but we're still tracking a handful of those.

Tasa: I believe that's all the questions we have for today.

Mr. Meyers: Ok. Thank you all very much for your time and attention. We will have another briefing at some point in the not too distant future, but don't have a date for that yet. And if you will pay attention to your statements from our PR team and watch our Facebook page, we'll let you know when we are going to be up again. Thank you very much.