Mr. Meyers: Good morning. I am Russell Meyers, CEO of Midland Health and this is our coronavirus briefing for Thursday, May the 21st, 2020. I’ll start with a few numbers in the state of Texas, we have now over 51,000 confirmed cases of COVID-19. There have been 1,419 deaths across the state. Here in Midland, we have 123 positive cases to date and there have been 12 deaths. We do seem to be winding down in terms of total numbers. Last week we had 7 positives. This week so far, we’ve had only 3. One of those 3 is a Midland resident who is actually in California and has been there for an extended duration. So, we are down to just a couple of cases here in this community. Here in the hospital, we have been testing in still fairly significant quantities although the number of tests we’ve run each day is actually declining. There have been over 2,400 tests run through our sites so far and we have about 81 tests still outstanding, waiting for results.

In the hospital, our census today is 146. We have 10 patients in critical care. A total of 7 COVID patients. One of those is suspected or a PUI, the other 6 are known positives. Six of the patients are from Midland Medical Lodge. That’s down substantially from last week’s numbers and all of those patients are stable. We are hopeful of negative tests and the opportunity to get the rest of those patient’s back to their residence in the near future. Very hopeful about that.

In the hospital also, we have only 1 ventilated patient today, 1 patient on a ventilator. There were 96 patients in our Emergency Department (ED) yesterday continuing our trend of roughly half of last year’s activity, what’s normal. One point to make here that I’ve made several times now about the ED, you’re beginning to see some news about this from around the country, but it’s really important for people to understand that if you have what you believe is an emergent condition especially things like chest pain, traumatic injuries, symptoms of a stroke those things require emergent care and you should come to the ED. You should call 9-1-1 if you are in distress and not hesitate to do that. The ED is a safe place. You are not going to contract COVID-19 by coming to the ED, but you may miss the opportunity to have another condition cared for properly if you hesitate, if you delay coming in when you know you’re in an emergent condition. So, please do come in with anything that you believe requires emergency care and we will be more than happy to take care of you.

Developments here in the hospital, we are slowly increasing the elective procedure volumes. We are beginning to talk about some loosening of visitation rules. We are not ready to announce anything there yet, but in the next few days we expect to finalize some loosening of those rules and to announce those to the public. We’ll be sure to let you know as soon as that’s ready. There’s been a little bit of community concern about the severe limitations we have on visitation. We’d like to be responsive to that, listen to the families and the patients. We know that having a family member with a patient is an important part of adequate communication and the recovery process and we’re looking forward to loosening those rules in the relatively near future. It won’t be immediate, but very soon. And we’ll be able to tell you what those rules will be shortly. So, we are looking forward to that change.
I think the most important new information we have today is to talk about plans for testing of nursing home patients. As I think is well known, last week the governor asked that nursing home patients and staff members across the state be tested if they have not already been tested over the next couple of days. That became a delegated responsibility of local Fire and EMS services. And given that we have such a good positive relationship with our local Fire and EMS and our Health Department, we chose immediately to work together to try to work out the most efficient way to accomplish the governor’s directive. Over the last few days our team here at Midland Health along with leadership at Midland Fire and EMS and Midland Health Department have worked also with the local nursing homes to work out what we believe will be a very effective system to assure that those tests are carried out in a timely fashion. Just to give you a general idea, the Fire Department remains the coordinator and a key role for them is to assure that adequate supplies for testing and PPE to be used in each of the testing environments, that delivery of those supplies is coordinated with the state and that we get what we need as soon as we can get it. Our team at Midland Health has been actively engaged with the nursing homes in our community for several weeks now. We are building on those relationships and working with each of the individual nursing homes on plans that make sense for them. In most cases, those nursing homes are able to perform the actual sample collection themselves with their own staff. We have provided training both in how to properly sample, and in the proper use of PPE, the handling of the samples, etc. And our team is doing that on an ongoing basis. We are also helping the facilities to assess their physical environments assuring that they have appropriately identified the best spaces into which patients can be isolated if they turn out to be positive and making sure that there is no plan to send positive nursing home patients into the hospital for care unless they are sick enough to require hospitalization. If they can be handled in the nursing home in an isolated fashion, then that’s everybody’s preferred choice and we’re helping the nursing homes to assess their ability to handle those as well. So, there are a total of 6 nursing homes in Midland according to the state’s records. You all know the Midland Medical Lodge story. Their testing has been completed. Part of the governor’s order allowed for facilities that have tested residents and staff within 30 days not to have to re-do that. And so, the Medical Lodge is not required to participate in this process and re-do all the testing that they’ve been doing over the past few weeks. We know that Manor Park is already pretty far down the road in getting their staff and residents tested and the rest of the nursing homes in town are actively working with us on plans which for the most part will include their own staff executing the sample collection. Finally, the fire department on the back end of that process—they’re working on the front end to get supplies and testing material, on the backend they’re going to take ownership of the test delivery process. And the Health Department will be tracking the results as they do with all cases here in Midland County, contact tracing where it’s appropriate, etc. So, very much of a team effort to get this done. I continue to be very impressed and proud of the work that our team and the Fire and EMS service and the Health Department are doing together. We’ve never had anything but a cooperative relationship and that continues and will continue throughout the process of testing the nursing home patients. Finally, one thing we’ve tried to do is centralize the lab to which the samples are being sent and from whom the results will be received. Most of those tests, if not all of them, are going to go to the Lubbock branch of the Laboratory Response Network (LRN) that the state established several years ago. The Lubbock LRN has handled some of these tests already and will handle the bulk of them going forward.
So, that I believe is all of the prepared remarks that I have for this morning. And I’d be very happy to take questions if anybody has one.

Moderator: Yes, we have a question from Facebook. Is the screening of people entering MMH facilities being stopped tomorrow, particularly West Campus?

Mr. Meyers: Let’s see, I’m not certain of the date whether it’s tomorrow or after tomorrow, but we are in the process of dialing back the screening process. So, the campuses that are away from the main hospital, the West Campus and the Legends Park office complex I believe it’s after the end of the day tomorrow we will cease the screening processes at those campuses. Now, the occupants of those buildings will still have their own screening processes. So, if you are going to a doctor that’s in the West Campus, if you’re going to our Physical Therapy or Imaging Centers or one of the doctors at Legends Park they will still have expectations for screening, for your health status, wear your mask, asking you to stay in your car for the most part until you are called for your appointment. Those things will continue, but the front door screenings are being shut down. Here at the hospital we are changing our process just a little bit. At the Craddick Medical Office Building, we’ve had a screening location much like the other office building environments. We’ll be terminating that screening location. But we will keep the screening location in place at the ED and that will remain the only access point for patients coming to the hospital. Of course, I think most people know that the Craddick Office Building is connected to the hospital. We will have an attendant in the connecting corridor to redirect people who come through the Craddick Office Building. If they’re destination is the hospital, we’ll redirect them to the ED entrance for appropriate screening. So, all that is happening over the next 24 hours plus. We believe that that’s a prudent course of action not only because infections have been reduced in the community, but because we have a lot of resources devoted to screening that need to be sent back to their regular work place as the rest of our work increases, we do elective cases, we see more patients in physician offices, etc. and so it’s an important part of the evolution of reopening the community. But remember, if you’re coming to the hospital for any service provided in the hospital’s main building you have to come through the ED entrance, you will have to be screened, you will be asked to wear a mask throughout your stay within the hospital and if you are not willing to wear a mask you will be turned away. So, please keep that in mind as these changes are made. Thank you.

Moderator: We have another question from Facebook. Are you putting extra staff at the Fire Department to do these tests?

Mr. Meyers: Well, the process we’ve worked out wouldn’t indicate that our staff would be at the Fire Department. So, what’s happening is the Fire and EMS service is working with the state to secure supplies and testing materials. They are going to be providing those supplies and testing materials to the nursing homes themselves and for the most part the testing, the sample collection, the actual use of the swab to collect a sample, put it in appropriate medium, package it up to be ready to be sent off to the offsite lab, that’s going to be mostly done by personnel in the nursing homes themselves. The hospital’s team will be on the front end of that process doing training as needed both in how to do the swabs and how to properly use PPE. We’ll also be helping the facilities assess their buildings to be sure that they can properly isolate patients who can still be cared for in the nursing home environment, but just need to be separated from the rest of the residents if their positive test results come back. So, the basic question: will the hospital be putting more personnel at the Fire Department? The answer to that
is: no. But we do have people who are engaged in the process. Mostly it is going to take place directly in interaction with the nursing home personnel.

Moderator: We’ll given them just a few more minutes. I don’t have a question currently.

Mr. Meyers: Ok, I think I can probably step aside. I see that the mayor is available and ready to go so I will hand it off to Mayor Payton and if anybody has a question for me I’ll be happy to come back to the microphone when he’s finished. Thank you.

---------Comments from Mayor Patrick Payton---------

Mr. Meyers (In response to a question asked from the Moderator to Mayor Patrick Payton about Midland Fire helping with testing. These comments follow Mayor Payton’s answer to that question.): I can add a brief comment. I think I’ve described the process pretty thoroughly, but I think one thing to note throughout all this process, you know, the Fire Department is not in any way or shape shirking its responsibility here. The most appropriate thing for any of us to do in this environment is to be careful with the potential for exposure to patients, to healthcare workers, or anyone else. The nursing homes are the best equipped in every case to handle the testing. They know their staff; they know their patients. They are already working in that environment. Introducing outside folks like EMTs from the Fire Department, like any large number of folks from our hospital isn’t necessarily a positive in many of these environments that are very well controlled and locked down right now. So, we have worked together to try to do something that was smart and efficient, could be handled by people who know their responsibilities and know the patients. And I think we’ve come up with a very good plan that all of us can participate in to get the best result in a timely and reasonable fashion. So, I’m very proud of it, especially proud of the nursing homes. Everyone of them has stepped up and said they are prepared to do their part to assure that we can comply with these orders. And so, everybody’s working very well together. I’m really pleased with what we’ve seen so far.

Mayor Payton: Thanks Russell.

Mr. Meyers: It looks like that’s all we have. So, I’ll say thanks to everybody for tuning in this morning and we’ll sign off here today. The next briefing from the hospital is still to be determined. This upcoming Monday when we would normally have our regular weekly briefing is Memorial Day and we’ll not do it on Memorial Day absent some severe crisis that may come up between now and then. We’ll be back in touch with our Facebook friends and the media to let you know when we are ready to do the next one. Probably that will be in line with an announcement of any changes in visitation policy that we’ll be ready to do next week. So, thank you very much.