



Russell Meyers, CEO of Midland Health

COVID-19 Public Briefing: Tuesday, September 15th, 2020

Transcribed from a previously recorded live event.

Mr. Meyers: Good morning. I'm Russell Meyers, CEO of Midland Health. This is our Coronavirus update for Tuesday, September 15th. Today in Texas, there have been 663,000 confirmed cases, over 14,000 deaths to date. In Midland County, 3,469 reported positive COVID cases and 77 deaths to date. Here at Midland Memorial Hospital, our census today is 172 patients. We are down to 9 COVID patients in the hospital now. One in Critical Care and 8 in the Medical COVID unit. The range of ages for those patients are from the 30s to the 90s. One of those patients is from the Ashton Medical Lodge and one is from Rockhouse where we understand there have been a few positive cases here recently. The ventilator activity: none of our COVID patients are on ventilators. There are 5 other patients for a total of 5 patients on ventilators in the hospital. Well within our capacity of 44 ventilators. So, no challenges there. The Emergency Department (ED) saw 150 patients yesterday. One of the higher numbers we've seen in a while as we begin to slowly get back to normal here in our community.

Let's see. We've talked a little bit about this, but just to remind you visiting rules are largely the same as they have been for a while. We continue to wait for the state to provide less restrictive guidance on visitation in hospitals. But here we have interpreted the guidelines just a little bit more flexibly to allow clinical managers on individual patient units to make decisions that relate to the severity of illness of a patient. If a family member wants to stay with a patient who is severely ill, we will consider that, and each clinical manager has the authority to make those decisions within some new guidelines we have provided for them. So, if you believe that your family member meets those criteria, please do speak with the clinical manager on the unit where they are assigned, and we'll talk about that.

We have some good news I think on many levels. So far there has been no ED and no COVID testing activity for school aged children as we've begun to slowly move back into onsite educational functions. We've had no flu in the last week in the ED. We are expecting the flu season to ramp up shortly. We are encouraged that there are flu shots, flu vaccines available in some locations around the community. And here at the hospital, we'll be offering flu vaccines to inpatients effective October 1st, and to our workforce effective next week on Monday, September 21st. We anticipate, as we do every year vaccinating the vast majority of our workforce as long as they don't have a medical indication for why they can't get a flu shot. So, that will begin happening next week. There has been some evidence of RSV infection in the community with very small children. That's something that happens this time of year every year. So, one more reason, as if we need another reason, to practice good personal hygiene, to wash hands, to wear face coverings, to continue to do social distancing. All these viral transmissions can be improved by taking those actions and being careful not to transmit between ourselves.

Testing has continued to be a positive. In the last week, we actually began to open up a little further. For a long time, we had tested only people with symptoms. We added people who'd had a known exposure and we've added a few more folks who just believe that they need a test. If you think you need a test and you want to get tested, it is still appropriate to call 68NURSE. As we relax the guidelines, we continue to have capacity at our 2 drive through testing centers and we can get you tested with immediate turn around on those results. We tested a few more people last week than we did in the week before, but the percentage of those patients who were positive continued to go down. We were



at 7.9% positive among those tested last week and we tested about 450 people for the week. So, we'll see what this week brings with those loosened guidelines, we would expect those numbers to continue to stay low.

Let's see, a couple of quick hospital updates that I'd think might be of interest. I think we've thanked our community a couple of times in these sessions for passing the sales tax. I'll remind you that the new sales tax, a quarter of a percent across Midland County, goes into effect January 1st meaning we'll begin to get some support from that tax probably as soon as March of 2021. In recognition of that additional support that will be coming next year, our board of directors has proposed an Ad Valorem tax rate that is the no new revenue rate. Effectively what we would have called the effective tax rate last year, what that means is that on all of the existing properties in the community, we will generate no new revenue at the new rate. There has been a slight decline in property valuations, so the actual nominal rate slides up just a little bit, but that rate, the hospital district gains no new revenue from existing properties. That's the proposed rate. The board meets on September 30th to finalize a rate for the upcoming fiscal year and we'll see where that goes. But it would be no higher than the no new revenue rate; could possibly be lower.

Another update on the board of directors, I think we may have announced this, but just to reinforce. As has often been the case there has been only 1 candidate for each of the 4 districts that were up for election here this fall. So, the November election for the board of directors of the Midland County Hospital District has been cancelled. There was 1 candidate, the current incumbent for each of the 4 seats. That's Tracie Greene in District 1, Dwain Tomlin in District 2, Cari Chaplin in District 5, and Tony Miramontes in District 6. Each of those has been reelected by virtue of having no opposition and will serve an additional 4-year term beginning this November. So, the hospital district's elections for this fall are complete.

That's all I have to offer today. I'll be happy to take questions if anybody has any.

Tasa Richardson, Midland Health Public Relations Manager: We currently don't have any questions, but just to remind the media you can submit your questions through the chat bar or raise a hand function and then we are also live on Facebook. So, if the community has any questions please submit those in the comment section of the live video. We'll give it just a minute or two. It does appear that Stewart Doreen from the MRT has a question coming that he's typing out.

Mr. Meyers: Ok.

Tasa: At the same time, I'll ask a question because I've been asked about it from the media over the last week about the importance of the flu shot this year with facing COVID and the flu and can we stress the importance. Is it important or is it not?

Mr. Meyers: The flu shot remains very important. Flu shots, people talk about them every year. They're not perfect. They don't always address the exact strains that reach the community by the time the flu shots are available. But they are vastly effective. They are effective for the vast majority of people. If you've ever had the flu before, I know that I've had it once and I've never missed a flu shot since. A true case of influenza is really a very difficult thing to recover from. So, we continue to encourage people to get a flu shot if you possibly can. It is every bit as important, if not more important this year than it's ever been. We know that there is evidence that people can be infected with both

COVID and the influenza virus which would be fairly devastating for anybody who got both infections. So, there really is no reason not to get a flu shot. They are and will be widely available in the community, easy to get and very much advised to keep yourself as healthy as you possibly can be. This time of year, we actually have a protocol for inpatients over a certain age where we have a nurse driven protocol that gives flu shots if the patient consents for anybody who hasn't had one and is an inpatient. We think it's that important. So, we strongly encourage anybody who can to get a flu shot this year. So, we have Stewart's question?

Tasa: Yes, sir. Does it feel like the calm before the storm with flu season starting and Labor Day cases still not coming in?

Mr. Meyers: That's actually the last remark that I wanted to make before closing today was this is a particularly crucial week. We'll reach to 2 week point next Monday it will be 2 weeks since Labor Day. So, we're coming up on 2 weeks since Labor Day weekend. That's the outside of the incubation period. So, this week we should see if we are going to see a spike coming out of the Labor Day weekend. As more and more children are back in school, we continue to see those risks even if the risks are pretty low for the kids going to school, they remain high for all those adults who interact with them throughout the day. And so, we still have reason for caution and its cautious optimism as of now because we do continue to see hospitalizations decline, the percentage of the patients that we test is declining. So, pretty good positive numbers lately, but we want to be sure that we avoid complacency, we don't forget to wear our masks, to avoid crowds, to wash our hands, and to do all those things that have helped us reduce the transmission rate. As we go into the flu season, yes, you should absolutely get your flu shot, but all those elements of social distancing and good personal hygiene will help to reduce the spread of the flu as well and we would encourage everyone to continue to do those things that we know have worked in reducing the spread of the virus.

Tasa: We have another question from Stewart. Are there any theories that you are aware of about why there hasn't been any more spread with schools opening?

Mr. Meyers: I haven't heard any specific theories. I think there's some just sensible ones. The numbers are still pretty small, the schools have been very, very careful in setting their expectations for mask wearing, for personal hygiene, for spreading people out and avoiding closely packed classrooms and crowds. We've had lots of time to prepare. The adults in those communities have certainly been hearing the message from us for many months now about wearing face coverings and careful social distancing. So, I'm hopeful that that's what's happening. That what we have advised, what we've all learned to do works in the school setting just like it works in other settings. And we'll see. I think it's early to consider the reopening of schools to be without incident. There's still a couple of weeks before we can really feel good that we haven't had some additional transmission, but so far it looks positive.

Tasa: We have a question from Scott Pickey from CBS 7. He says: "Good morning. Do you trust the Coronavirus vaccine that's currently being made enough to take it yourself when it comes out?"

Mr. Meyers: Well, Scott that's going to be a more and more popular question as the months ahead come along; along with the ratcheting up of the political rhetoric and the pre-election noise that goes with it. Would I take the virus that's been promoted by the Russian government? No, I would not. I don't trust that one. There are multiple other virus developments happening though by a variety of companies. I think you've heard recently strong statements from the leaders of those developmental



organizations as well as from the FDA that political pressure will not trump science. And we will be very cautious as a nation, I believe, in not rolling out a vaccine that's not ready. Personally, I'll watch that closely. I'll take advice from my medical colleagues. We'll make decisions in the best interest of the community in terms of what we do here in the hospital, what we promote, and I'll comply with those decisions as I would advise other people to do. It's too soon to say whether there will be an effective vaccine and when and we are going to try our best to understand the science and when it is available and it's proven to be effective then I'll take one.

Tasa: Thank you. We have some questions on Facebook. I just want to let everyone know regarding flu shot availability in our community. And we are working to gather all those resources and we'll be putting that out to our community soon.

Mr. Meyers: Very good. Thanks, Tasa.

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

Mr. Meyers: Ok. Well, thank you all for your attention. Don't forget to wear your face covering. It's a crucial week ahead of us. And we still have a chance to keep these numbers down as the winter comes on and flu season starts. So, please do continue to be cautious. Wash your hands, wear your mask, take care of each other. Thank you.