

COVID-19 Newsletter #4- April 17, 2020

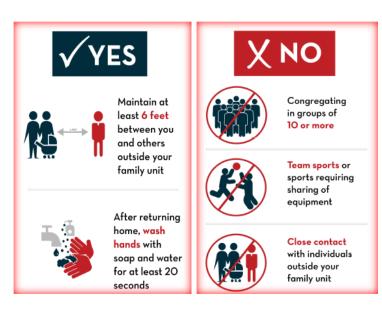
The Not-For-Profit Hospital Corporation commonly known as United Medical Center ("UMC") is dedicated to the health and well-being of the individuals and communities entrusted in our care. The medical staff, UMC Executive leadership team, and the hospital's Board of Directors are committed to providing continuous and safe quality care and truly thank you for all of your outstanding team work to implement the visitor restrictions and patient screening to help manage the spread of COVID-19 ("coronavirus"). Your participation in the process to operationalize the new steps to keep patient, visitors, and staff safe is appreciated, and your support of our commitment to quality patient care is very important.

We recognize that we have disseminated many communications and new policies over the past month and are working to streamline the flow of information. The goal of this newsletter is to provide comprehensive information on one document to make sure everyone at UMC is informed and in compliance with new policies and procedures as we continue to do our part to stop the spread of the Coronavirus.

STAY SAFE

As the District of Columbia's only public hospital, we all have a heightened responsibility to prevent the spread of COVID-19 **whether on/or off duty**. Thus, please continue to adhere to the safety, shut-in, and social distancing mandates in effect throughout the region.







On Sunday, April 12, 2020, one of UMC's own *Ms. Patricia Lyles*, lost her battle against COVID-19. "Ms. Pat" was a member of the UMC team for over 20 years. As a dedicated member of

the Food Services & Dietary team, Ms. Pat was known for her listening ear, joyful laugher, maternal nature, and mischievous but positive disposition. Ms. Pat was so dedicated to UMC she never called out and even walked to work in a snowstorm to make sure the Café was open for staff, patients, and visitors. She will be missed by all, as she was often the first and last face we saw in the Café.

More information regarding her memorial services is forthcoming. The Food Services & Dietary team is accepting donations in the Café for those who would like to contribute. *May she rest in peace.*





YOU ARE APPRECIATED

Being a healthcare professional is a calling and we are so thankful that you accepted the call. The daily demands on your physical, mental, and emotional self is more than many people will ever experience. During this COVID-19 Pandemic we just want to say thank you and ask that you STAY

ENCOURAGED.

We especially want to thank *Regina Kim*, MSG, LNHA, (SNF Administrator). Ms. Kim has instilled many positive changes in the nursing home during her two years as the SNF Administrator. She was chosen as SNF's employee of the month due to her outstanding leadership, ability to encourage and support her staff during this tough and demanding time. Staff report that she also ensures that her residents are comfortable, safe and well taken care of at all times. She puts her residents and staff first, taking very few breaks even when she works until very late at night and until the early morning hours. Her team stated, "We are all grateful for her continued support and assistance on building up SNF to where it is. We are extremely proud of how much dedication and time she consistently puts in to make SNF better and ensure high quality standards in patient care."

Congratulations Ms. Kim!!!





TAKE A MOMENT FOR YOURSELF

Remember, you can't pour from an empty cup, so take at least five minutes to care for yourself, each and every day!

UMC will empower healthcare professionals to live up to their potential to benefit our patients.



THANK YOU!!!!

We are so grateful to the District residents and local businesses who have poured out an overflow of support to UMC through donated meals and/or PPE. Please share expressions of gratitude to the businesses directly or send a note to Toya Carmichael, VP of Public Relations / Corporate Secretary @ Tcarmichael@united-medicalcenter.com. You may also follow UMC on Instagram @unitedmedicaldc.

Donated Meals

Temple of Praise Church

Monumental Sports Foundation

Donated PPE 4/11-4/16/20

Linda Fialkoff Shaundra Turner Jones / Allstate Insurance, Capitol Region





Coronavirus Data for April 16, 2020

Friday, April 17, 2020

(Washington, DC) – The District's reported data for Thursday, April 16, 2020 includes 126 new positive coronavirus (COVID-19) cases, bringing the District's overall positive case total to 2,476.

The District reported five additional COVID-19 related deaths:

- 61-year-old male
- 68-year-old female
- 72-year-old female
- 82-year-old male
- 91-year-old female

Tragically, 86 District residents have lost their lives due to COVID-19.

Below is the District's aggregated total of positive COVID-19 cases, sorted by age and gender.

Patient Age	Total Positive		Patient Gender					
(yrs)	Cases	%	Female	%	Male	%	Unknown	%
All	2476	100	1207	49	1265	51	4	<1
Unknown	1	<1	0	0	1	<1	0	0
0-18	68	3	33	1	34	1	1	<1
19-30	400	16	218	9	181	7	1	<1
31-40	511	21	244	10	266	11	1	<1
41-50	412	17	203	8	209	8	0	0
51-60	429	17	180	7	249	10	0	0
61-70	362	15	163	7	198	8	1	<1
71-80	165	7	81	3	84	3	0	0
81+	128	5	85	3	43	2	0	0

Below is the District's aggregated total of positive COVID-19 cases, sorted by ward.

Ward	Total Positive Cases	Percent
All	2476	100
1	282	11
2	207	8
3	176	7
4	423	17
5	328	13
6	337	14
7	382	15
8	316	13
Unknown	25	1

Below is the District's aggregated total of positive COVID-19 cases, sorted by race.

	Total Positive Cases	Percent
All	2476	100
Race		
Unknown	383	15
American Indian/Alaska Native	7	<1
Asian	36	1
Black/African American	1171	47
Native Hawaiian/Pacific Islander	4	<1
Other/Multi-Racial	386	16
White	461	19
Refused During Interview	28	1
Ethnicity		
Unknown	544	22
Hispanic or Latinx	403	16
NOT Hispanic or Latinx	1522	61
Refused During Interview	7	<1

Below is the District's total lives lost due to COVID-19, sorted by race.

Race	Total Lives Lost	Percent	
All	86	100	
Asian	2	2	
Black/African American	66	77	
Hispanic/Latinx	8	9	
Non-Hispanic White	10	12	
Other	0	0	

With ongoing community transmission, contact tracing is focused on positive cases associated with health care workers (including first responders), senior care facilities, correctional and detention centers, childcare facilities, and facilities serving individuals who are experiencing homelessness. Guidance has been published for healthcare providers, employers and the public to provide information on what to do if you have been diagnosed with or are a contact of someone who has COVID-19.

District residents are encouraged to STAY AT HOME and take the following actions to help prevent the spread of COVID-19:

- Stay home when you are sick
- Avoid close contact with people who are sick
- Wash hands with soap and water for at least 20 seconds. An alcohol-based hand sanitizer can be used if soap and water are not available
- Avoid touching eyes, nose and mouth with unwashed hands
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash
- Clean and disinfect frequently touched objects and surfaces

If you have to leave home for an essential purpose, practice social distancing and stay six feet apart from others. For more information on the District's response, visit <u>coronavirus.dc.gov</u>.





Where can I park?

ADMINISTRATIVE NOTICES

You may have noticed the additional tents erected in the UMC parking lot. As we continue to host our federal and local government partners providing testing to first responders and

residents, our lot will continue to fill up.

DDOT is providing on street parking to assist with parking for staff. Specifically, the locations are the west side of 13th Street SE from the second entrance to Varney Street SE and Southern Ave opposite of the hospital. PLEASE DISPLAY YOUR UMC PARKING PERMIT WHEN PARKING ON THE STREET.





Masks or face coverings do not eliminate the need for **social distancing** and staying home when sick!



Before putting on a cloth mask, **clean hands** with soap and water or use hand sanitizer.



Cover mouth and nose, make sure there are no gaps.



Avoid touching the mask when using it.



After using, toss single-use masks in the garbage or immediately wash cloth masks and clean your hands with soap and water or use hand sanitizer.



Please don't purchase N95 respirator masks, they are needed for healthcare workers and first responders.





INFECTION PREVENTION (IP) REMINDERS



DATE: March 25, 2020

TO: To All Staff

FROM: Dr. Raymond Tu, CMO

Sylvia Clagon – Infection Preventionist

SUBJECT: Re-use of N95 Respirator (mask)

Extended use has been recommended as an option for conserving respirators during previous respiratory pathogens outbreaks and pandemics.

Reuse refers to the practice of using the same N95 respirator for multiple encounters with patients but removing it (doffing) after each encounter.

- The respirator is stored in-between encounters to be put on again (donning) prior to the next
 encounter with a patient.
- CDC recommends that a respirator classified as disposal can be used by the same worker as long
 as it remains functional and is used with local infection control procedures.

Procedure for reuse of N95 respirators.

- Clean hands with so ap and water or an alcohol based sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit)
- · Avoid touching the inside of the respirator
- Use a pair of clean (non-sterile) gloves when donning (putting on) a used N95 respirator (mask)
 and performing a user seal check. Discard gloves after the N95 is donned and any adjustments are
 made to ensure the respirator is sitting comfortably on your face with a good seal
- Perform hand washing with soap and water of use alcohol-base sanitizer
- Use a pair of clean (non-sterile) gloves prior to removing N95 respirator; remove the mask using
 the straps on the side of the mask and avoid touching the front of the mask. Place the respirator
 (mask) in a paper bag for storage.

When to discard (through away) the respirator:

- Discard N95 respirator if torn, or damaged or straps are stretched out so much that they no longer provide enough tension to your face
- Discard N 95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients
- Discard N95 respirators following use during aerosol generating procedures (such as bronchoscopy)

Length of time respirator can be used:

- 3 M 1860 no limit to the length of time a respirator can be used per manufacturer
- 3 M 1870- no limit to the length of time a respirator can be used per manufacturer

UMC will improve the lives of District residents by providing high value, integrated and patient-centered services.

March 21, 2020 Guidance for Healthcare Personnel Monitoring, Restriction and





Table 1: Epidemiologic Risk Classification for Healthcare Personnel Following Exposure to Patients with 2019 Novel Coronavirus (2019-nCoV) Infection or their Secretions/Excretions in a Healthcare Setting, and their Associated Monitoring and Work Restriction Recommendations. This table was amended from its original version (provided by CDC) by DC Health to include different monitoring recommendations for Skilled Nursing Facilities and all other type of healthcare facilities in DC.

Definitions:

Self-monitoring – Taking temperatures twice a day and remaining alert for respiratory symptoms (e.g., cough, shortness of breath, sore throat) without supervision. Only report to occupational health (or alternative per facility protocol) if symptoms develop. Active monitoring – The healthcare facility establishes regular communication with exposed HCPs to assess for the presence of fever and respiratory symptoms (e.g., cough, shortness of breath, sore throat) at least once daily. If the healthcare facility cannot support this, please consult with DC Health.

Self-Monitoring with delegated supervision – Reporting to occupational health (or alternative per facility protocol) for temperature and respiratory symptom (e.g., cough, shortness of breath, sore throat) screening prior to starting work. **HCP**=healthcare personnel; **PPE**=personal protective equipment

Epidemiologic risk factors	Exposure category	Recommended Monitoring for COVID- 19 (until 14 days after last potential exposure)	Work Restrictions for Asymptomatic HCP
Prolonged close contact ² with a COVID	-19 patient v	who was wearing a facemask (i.e., source co	ntrol)
HCP PPE: None	Medium	SNFs: Active monitoring All other facility types: Self with delegated supervision	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing a facemask or respirator	Medium	<u>SNFs</u> : Active monitoring <u>All other facility types</u> : Self with delegated supervision	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing eye protection	Low	SNFs: Self with delegated supervision All other facility types: Self-monitoring	None
HCP PPE: Not wearing gown or gloves ³	Low	SNFs: Self with delegated supervision All other facility types: Self-monitoring	None
HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator)	Low	SNFs: Self with delegated supervision All other facility types: Self-monitoring	None
Prolonged close contact ² with a COVID	-19 patient v	who was not wearing a facemask (i.e., no so	urce control)
HCP PPE: None	High	<u>SNFs</u> : Active monitoring <u>All other facility types</u> : Self with delegated supervision	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing a facemask or respirator	High	<u>SNFs</u> : Active monitoring <u>All other facility types</u> : Self with delegated supervision	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing eye protection ⁴	Medium	<u>SNFs</u> : Active monitoring <u>All other facility types</u> : Self with delegated supervision	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing gown or gloves ^{3,4}	Low	SNFs: Self with delegated supervision All other facility types: Self-monitoring	None
HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator) ⁴	Low	SNFs: Self with delegated supervision All other facility types: Self-monitoring	None

² Close contact for healthcare exposures is defined as follows: a) being within approximately 6 feet (2 meters), of a person with COVID-19 for a prolonged period of time (such as caring for or visiting the patient; or sitting within 6 feet of the patient in a healthcare waiting area or room); or b) having unprotected direct contact with infectious secretions or excretions of the patient (e.g., being coughed on, touching used tissues with a bare hand).

Coronavirus 2019 (COVID-19): Guidance for Healthcare Personnel Monitoring, Restriction and Return to Work

Last Updated: March 21, 2020 at 1826

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UMC is an efficient, patient-focused, provider of high quality healthcare the community needs.

³ The risk category for these rows would be elevated by one level if HCP had extensive body contact with the patients (e.g., rolling the patient).

⁴ The risk category for these rows would be elevated by one level if HCP performed or were present for a procedure likely to generate higher concentrations of respiratory secretions or aerosols (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction). For example, HCP who were wearing a gown, gloves, eye protection and a facemask (instead of a respirator) during an aerosol-generating procedure would be considered to have a medium-risk exposure.

COMMUNITY RESOURCES

The Hospital Board of Directors and Executive Leadership Team recognizes that you are more than an employee and that as much as you care for our patients, staff, and visitors you must also care for your families at home.

Extended UMC Café Hours

To ensure all staff have access to a selection of food and beverage options throughout the day, the Café has extended its hours.

- Daily Hours will be from
 8:00AM 7:00PM Sunday Saturday
- A Breakfast Menu will be served daily from 8:00AM – 10:00AM
- A Combined Lunch/Dinner Menu will be served from 10:00AM – 3:00PM
- A Variety of Grab-N-Go items will be offered from 3:00PM – 7:00PM

Below are additional local resources and information to assist you as you deal with the realities of the Coronavirus outside of the walls of UMC.

Childcare



FREE CHILD CARE FOR FIRST RESPONDERS

While health care workers, elder caregivers and first responders are on the frontlines of the fight against COVID-19, we know you are in need of care too. High-quality, safe, and nurturing care for your own children is essential so you can get to work and have the peace-of-mind to focus on your critical job. #FirstRespondersFirst has brought together Thrive Global, Harvard School of Public Health, CAA and Bright Horizons to open special child care hubs that meet your needs...and those of your child.

With the generous support of First Responders First, a select group of Bright Horizons centers will operate with special COVID-19 protocols in place, including limited capacity and small group sizes, enhanced teacher:child ratios, and intensive hygiene and cleaning practices. Care will be available for free for health care workers, elder caregivers, and first responders who have limited access to quality child care.

To inquire about care:

email: lstreet@brighthorizons.com phone: 202-887-8433



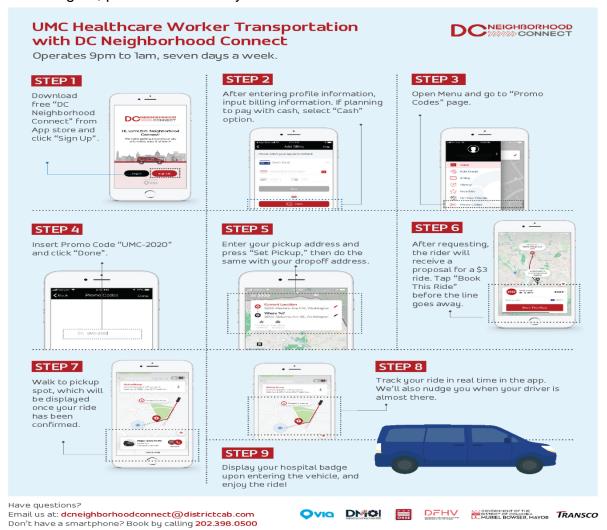
Transportation

In response to public transportation limitations during COVID-19 pandemic, UMC has partnered DC Neighborhood Connect to provide discounted for evening and night shifts during this pandemic.

The following outlines the program, please refer to the attached to use this service:

- The program begins <u>April 14, 2020 at 9 pm</u>
- Employees can access trips from Washington, DC or Prince George's County to United Medical Center
- Each ride costs \$3
- Operates from 9pm to 1am, daily
- Employees may use an app on their phone or call directly

Please refer to the attached flyer for instructions on how to use DC Neighborhood Connect. Managers, please share with your staff.



UMC will collaborate with others to provide high value, integrated and patient-centered services.

All UMC Employees have access to <u>GuidanceResources</u> (UMC Web ID: EAPComplete) or by dialing 1-877-595-5284. Guidance Resources provides information for personal and work-life issues including:

- Confidential Counseling
- Financial Counseling
- Online Will Preparation

- Legal Support
- Work-Life Solutions (Child-care, college planning, moving & relocation, etc.)

You can access additional mental health support from your respective health plan as well: CareFirst BlueCross BlueShield

- Available 24/7 soothing music and relaxation videos to help break free from stress, unwind at the end of the day or ease into a restful night of sleep
- Yoga and meditation videos
- Airplay functionality using AppleTV
- Relax 360° can be viewed in virtual reality experience
- Visit <u>carefirst.com/sharecare</u> to register
- Visit https://individual.carefirst.com/individuals-families/about-us/coronavirus-resource-center.page for additional information on resources related to COVID-19.

District Residents:

For the latest developments visit: coraonavirus.dc.gov or contact DC Health: (202) 576-1117

Maryland Residents:

For the latest updates visit: https://coronavirus.maryland.gov/ or

County	Telephone #	Telephone #
Charles County	301-609-6900	301-932-2222
Montgomery County	240-777-1741	240-777-4000
Prince George's County	301-883-7834 301-883-7879	301-883-4748 301-883-7879

Virginia Residents:

For the latest updates visit: http://www.vdh.virginia.gov/surveillance-and-investigation/novel-coronavirus/ or

County	Telephone #	County	Telephone #
Arlington County	703-228-5580	Fairfax County	703-534-8343 703-569-1031 703-246-7100 703-704-5203
Alexandria County	703-746-4996	Prince William County	703-792-7300

UMC IN THE NEWS- April 17, 2020

UMC Staff are reminded to direct **ALL MEDIA INQUIRIES** to Toya Carmichael, VP of Public Relations @Tcarmichael@united-medicalcenter.com.



The Not-For-Profit Hospital Corporation commonly known as United Medical Center ("UMC") in the news: Sometimes, "no news is good news!"