

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/covid-19-frontlines/perspectives-on-responding-administratively-to-a-pandemic-notes-from-a-childrens-hospital/11451/>

ReachMD

www.reachmd.com
info@reachmd.com
(866) 423-7849

Perspectives on Responding Administratively to a Pandemic: Notes from a Children's Hospital

Dr. Birnholz:

This is ReachMD, and welcome to COVID-19: On the frontlines. I'm Dr. Matt Birnholz. Joining me is April Taylor, the Senior Director of Improvement and Project Management at the Children's Hospital of Philadelphia and Assistant Director of Performance Improvement at the Center for Healthcare Improvement and Patient Safety at the University of Pennsylvania's Perelman's School of Medicine. Ms. Taylor, welcome to you.

Ms. Taylor:

Thank you for having me.

Dr. Birnholz:

I want to get a better sense, given your unique vantage point, administratively, on care over at Children's Hospital of Philadelphia. What is the ground situation right now for treating patients with COVID-19?

Ms. Taylor:

So, I am going to speak more globally than just pediatrics because right now, things are emerging and really developing, and a lot of what's happening is outside of the pediatrics' phase in the adult care world. And so, I would say both in pediatrics as well as in adult care there is a lot of preparation that's happening. Obviously, every organization has disaster preparedness plans. We're required to have them for accreditation purposes and for regulatory purposes, and throughout the year, we test plans for fire, we test plans for hurricanes or earthquakes, a lot of natural disasters or often times, one-time events. I think what's very different with COVID-19 is that this isn't a one-day event, it isn't a one-week event. This is something that we're really going to be managing over the course of potentially several months and we don't even have an end date in sight. And so, right now most organizations are really trying to figure out how you take plans that were developed for one day, one week's worth of events, but plan those for something that may be over the course of the next several months. And so that ranges from not only patient care, but caring for our care providers. Because certainly this is a very different environment that they are working in. And we want to make sure that we're providing a safe environment for them to continue to work at top capacity for an extremely long period of time.

Dr. Birnholz:

Yeah, I think in relation to what you just said, given your role, is very centered on patient safety. I imagine that term has had to evolve pretty rapidly. To look at the clinicians is also an important patient population for you and trying to mitigate the risk of infection for them. What kind of thoughts are going into that right now?

Ms. Taylor:

I think there's always been a focus certainly on provider or clinician wellness, but this does have a different flavor, where now we really are turning to both. Certainly things like infection threats and how do you keep providers safe. And when I say providers, I'm saying that pretty broadly because we're talking about respiratory therapists, nurses, physicians. There's lots of different care providers that are on the front lines. We're talking about our food workers and our environmental staff that are also within that care environment and needing to ensure that they stay safe and have the appropriate equipment. But I think the other piece that really comes into play here is really around mental health, and that's often something that we don't talk as much about in health care. But working long hours, working in child, that really can have a toll and impact on mental health and so, as much as you are thinking about physical surroundings, we certainly are also working and thinking about those resources for people to be able to address mental health concerns for folks to really be able to continue to come and be at their best.

Dr. Birnholz:

Yeah, really important consideration. And, on that subject of resources, what kind of accommodations are being made from a children's hospital to ensure that resources will be there or potentially even handle the influx of other patients if there needed to be an overflow from other hospitals to accommodate adult patients there?

Ms. Taylor:

I think it's really what you're seeing nationwide. I don't think that we're any different in terms of response in the Philadelphia region, where again, we're really ramping up those preparedness efforts to be ready for what may come. And again, we don't know what's going to happen and when that timeline is going to be. So having that flexibility for additional capacity that we won't really actually need it. But the truth is, we don't know, and so not knowing really just put us in that preparedness mode to be prepared for that what if. So, there's lots of scenario planning and contingency planning and making sure that there will be that ability to flex up in terms of space capacity. That there will be that ability to flex in terms of staffing to handle what may happen. And as you mentioned, that could be specifically to the pediatrics or it could be addressing adult patients and the need that is out there in the community.

Dr. Birnholz:

Really interesting. I appreciate that kind of feedback at this point. It is very hard to predict, but it sounds like your teams are trying to speculate and plan for a number of potential what ifs and I think a number of our viewers and listeners will respect and appreciate that effort because it's going on nationwide and globally as you said. Any other thoughts regarding the developments, as rapid as they've been to try to get in front of COVID-19 and try to put the right policies in place for hospitals to respond? Any thoughts that you can add to our clinical audience on things that are working for you or challenges that you're trying to overcome?

Ms. Taylor:

I think my final thoughts would be for folks to continue doing what they're doing, which is moving forward with caring for the patients that are there in their community. And to not to forget that right now, there still are lots of other patients that we need to take care of. That are still coming in for their regular conditions, and so there's this balance between being prepared and responding to the emergency situation while also keeping sort of the standard business moving. I think that healthcare organizations really are doing a phenomenal job in managing both right now. And so, I think keep doing what you're doing would be the best advice that I can give to any of the healthcare organizations now.

Dr. Birnholz:

Ms. Taylor, I really want to thank you for your time. These are great insights. We're wishing you the best in fighting a good fight. We know how busy you are in that respect. So, we'll leave you to get back to it. Thanks again for your time.

Ms. Taylor:

Thank you.

Dr. Birnholz:

This is *COVID-19: On the Frontlines*. To visit us and to learn more about the efforts that are ongoing at a national and global level, visit us at ReachMD.com where you can be part of the knowledge. I'm Dr. Matt Birnholz. Thanks so much for joining us.