# COVID-19 What Maternity and Neonatal Care Providers Are Learning

April 10, 2020 *12 – 1 pm EST* 

## **Ohio Perinatal Quality Collaborative**

Through collaborative use of improvement science methods, reduce preterm births & improve perinatal and preterm newborn outcomes in Ohio as quickly as possible.



## Today's presenters:



Mike Marcotte, MD Tri-Health Good Samaritan OPQC OB Faculty Lead



Ryan Everett, MPH The Ohio Hospital Association



James Greenberg, MD Cradle Cincinnati Perinatal Institute-CCHMC



Kay Smith, MSN, CNM ProMedica Toledo



## Welcome

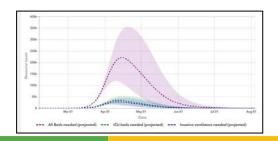
## • Goals:

- Share practicalities of implementing strategies now
- Discuss what people are doing in situations where it is unclear and guidance doesn't exist
- ALL TEACH ~ ALL LEARN
- Over 360 registrants; focused topic and scenarios are regarding Surge Planning
- Plans:
  - The slide deck and recording of this webinar will be posted on the OPQC website
  - We will provide shared resource links on the website and update regularly
- The case scenarios are from individual institution responses, not OPQC recommendation



## Data Update **April 9, 2020** WHO/CDC/ODH: COVID-19 Outbreak

WHO https://www.who.int/emergencies/ diseases/novel-coronavirus-2019	CDC https://www.cdc.gov/coronavirus/2019- ncov/cases-updates/cases-in-us.html	ODH https://coronavirus.ohio.gov/wps/port al/gov/covid-19/		
<ul> <li>Updated : 6 April 2020</li> <li>Coronavirus (COVID-19) outbreak</li> <li>1,439,516 Confirmed cases</li> <li>85,711 Confirmed deaths</li> <li>212 Countries, areas or territories with cases</li> </ul>	<ul> <li>Total cases: 427,460</li> <li>Total deaths: 14,696</li> <li>Jurisdictions reporting cases: 55</li> <li>(50 states, District of Columbia, Puerto Rico, Guam, the Northern Mariana Islands, and the U.S. Virgin Islands)</li> </ul>	<ul> <li>5,512 Confirmed Cases in Ohio</li> <li>497 ICU admissions</li> <li>1,612 Hospitalizations in Ohio</li> <li>213 Deaths</li> </ul>		
	<complex-block></complex-block>	State of Ohio COVID - 19 Dashboard         Total Cases         * Preliminary         5,512         6         5,512         6         Feb 4 Feb 14         Feb 4 Feb 14         Feb 24         Mar 5         Mar 15         Mar 25         Apr 4         Existing Case Count		



# Have you made any changes to surge planning based on new modeling data?

Yes, we have
No, we have not
Not sure

 1. Have you made any changes to surge planning based on new modeling data?

 Yes, we have
 (31) 26%

 No, we have not
 (46) 39%

 Not sure
 (25) 21%

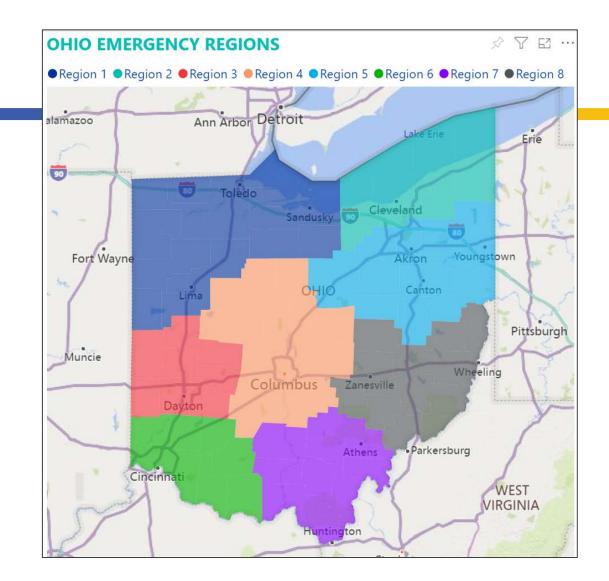
 N/A
 (17) 14%



## Surge Planning

## COVID-19 Pandemic: OHA Response

## Ohio Perinatal Quality Collaborative







COVID-19 – Quick updates OHA's and Ohio's Response

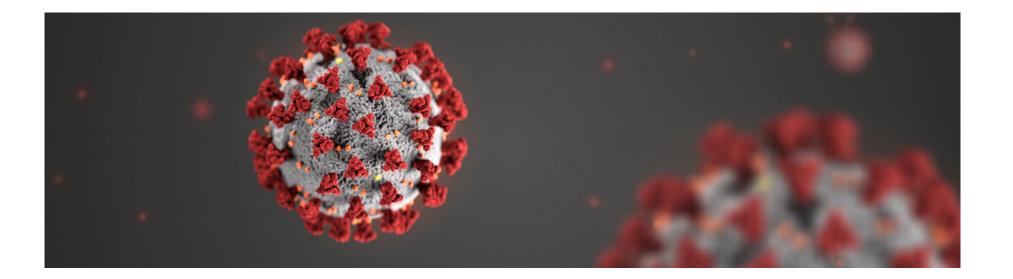
- Background
- Strategic Workgroups
- ASPR Grant
- Regional Planning
- Testing Updates





## COVID-19 Pandemic: OHA Response

## Data Collection – Decision Making







## OHA Data Collection

Resource		Max Surge Capacity	Total Capacity	Number Availabl	e	
Med/Surg Beds - Adult:	N/A					
Med/Surg Beds - Pediatric:	N/A					
Critical Care Beds - Adult:	N/A		Select the level that best represen	ts the status of each resource for your	facility.	
Critical Care Beds - Pediatric:	N/A		N95 Respirators:	Face/Surgical Masks:	Gloves:	Face Shields:
Airborne Isolation Beds - Adult:	N/A		Gowns:	Physician Staffing Level:	Nurse Staffing Level:	Ancillary Staffing Level:
Airborne Isolation Beds - Pediatric:	N/A	Enter number of patients currently admitted as an inpatient in your facility. For definitions please click here				
Ventilators:	N/A		COVID-19 Suspected Patients -	COVID-19 Positive Patients -	COVID-19 Positive Patient In	COVID-19 Positive Patient On
ECMO:	N/A		Count:	Count:	ICU - Count:	Ventilator - Count:
				Submit You	r Information	



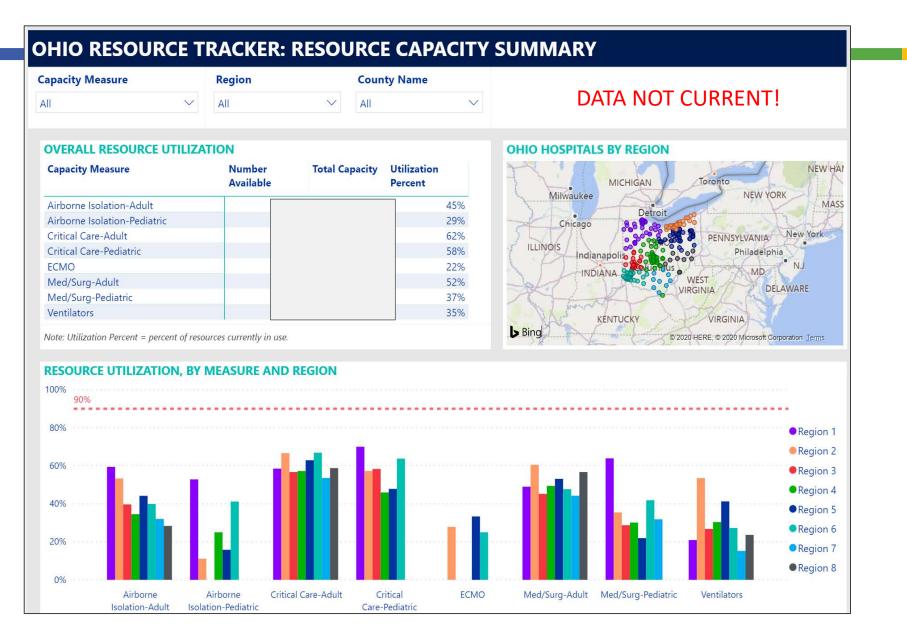


## Ryan Everett, MPH

OHIO

HOSPITAL ASSOCIATION

## OHA Data Dashboard - Resources



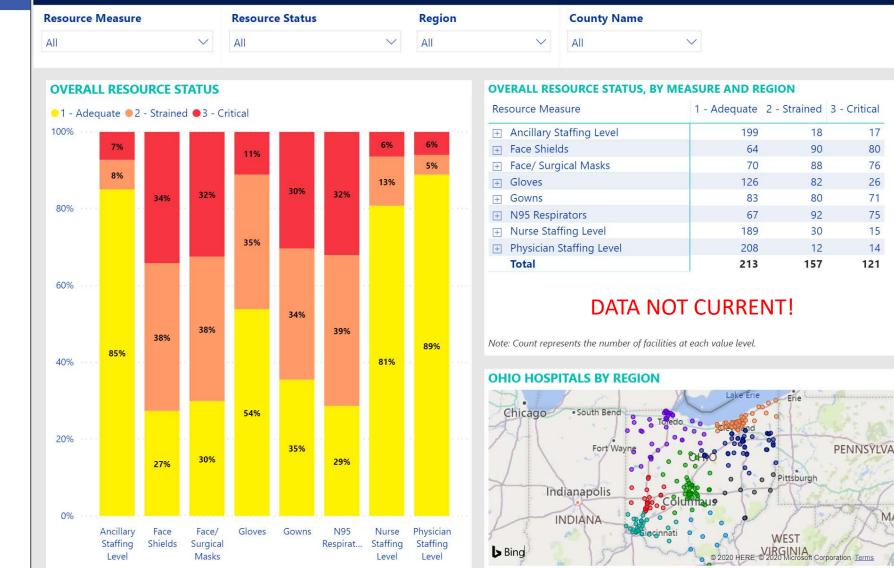


## Ryan Everett, MPH

## OHA Data Dashboard - Resources



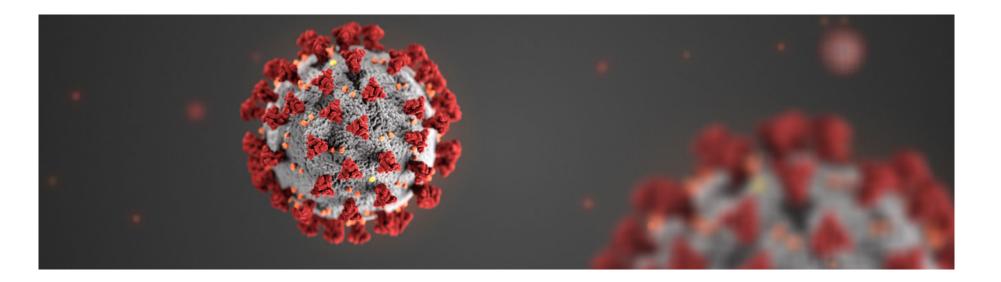
### OHIO RESOURCE TRACKER: RESOURCE STATUS SUMMARY





## COVID-19 Pandemic: OHA Response

## Modeling – Surge Planning



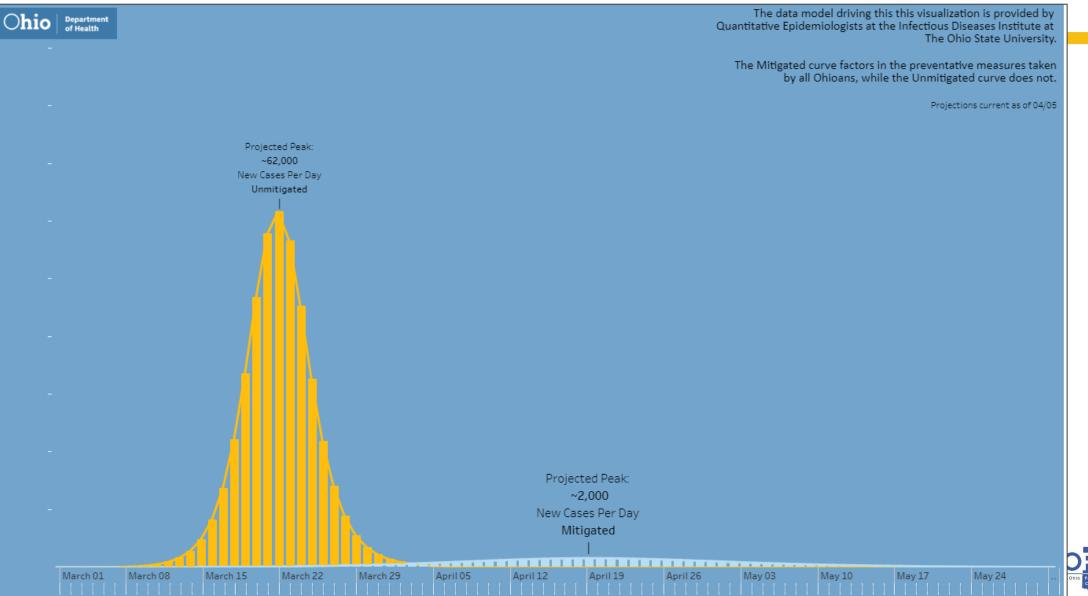




#### Ryan Everett, MPH

## Statewide Modeling - Surge Planning





## OHA Data Dashboard- Surge Planning





#### HOSPITAL SURGE PLANNING, BY REGION

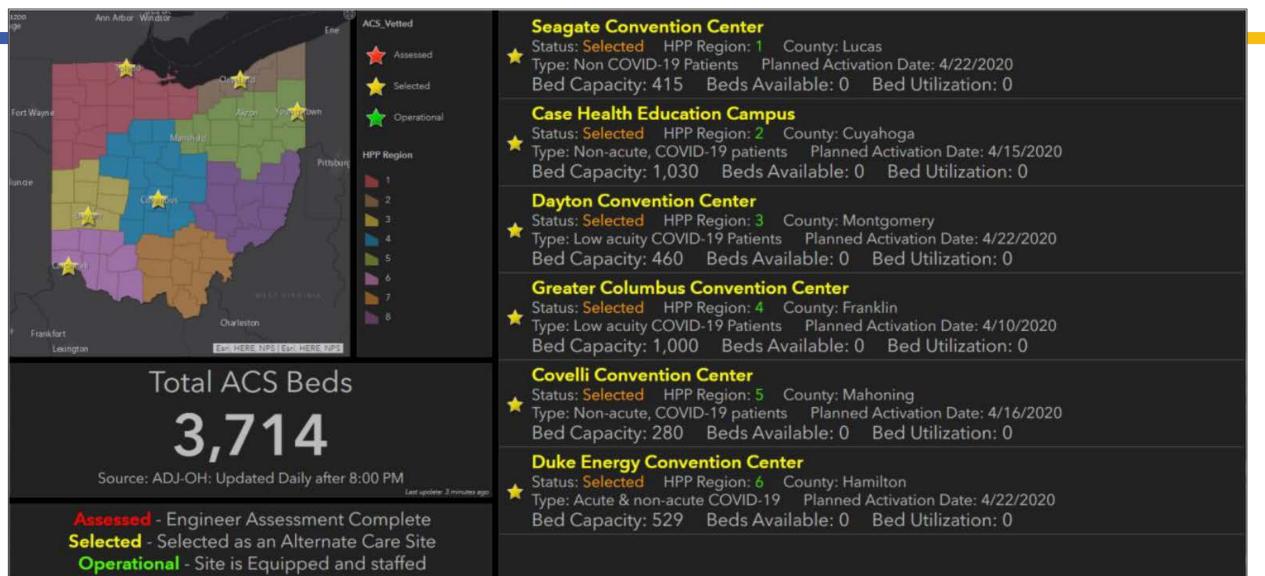
I shows statewide, and by region, estimates for all COVID-19 positive patients. The estimated hospital occupancy represents an estimate for all hospitalized COVID-19 care level). The number shown for Beds Available includes all bed types submitted to OHA through the OHA Hospital Resource Tracker.





## **Alternative Care Sites**





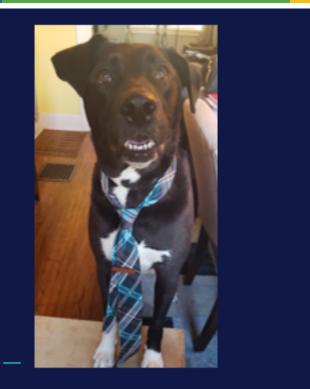
# OHA collaborates with member hospitals and health systems to ensure a health Ohio

# **QUESTIONS?**

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- F HelpingOhioHospitals
- @OhioHospitals





# Surge Planning for COVID-19: A Neonatal Perspective

Jim Greenberg, MD

Perinatal Institute

April 10, 2020

James Greenberg, MD Cradle Cincinnati; Ohio Collaborative to Prevent Infant Mortality (OCPIM) Perinatal Institute - Cincinnati Children's Hospital



## Surge Planning for COVID-19: A Neonatal Perspective

- More patients
- In non-traditional repurposed settings
- Pediatrics/neonatology less impacted by COVID, but...
  - Mothers
  - Resources

- How is Neonatology affected?
  - PPE conservation
  - Equipment
  - Attractive real estate
  - Re-deployment of hospital personnel
- Personnel







## **PPE** Conservation

- Closure of low volume delivery services (with re-assignment of staff)
- Reduction in use of PPE









- Appropriation of ventilators from level II (SCN) settings
- Potential impact:
  - -Lower threshold for transfer to higher level of neonatal care
  - -Might impact bed capacity at a level II/IV center







## Attractive Real Estate, etc.

- Repurpose level II/III space for COVID care
- Headwalls
- Personnel (?)
- Some extant infrastructure, equipment, supplies

- Staffing during transition
- Lead time
- Labor & Delivery services
- Transition to level I
- Transport
  - Capacity
  - Duration (1.5 hours/pt)







## Attractive Real Estate

- Creating a new level II or III nursery
  - Staffing: MD, RN, RT, ancillary
  - Space
  - Supplies
  - Families
  - Communication

- Cincinnati
  - One L&D service closed
  - Ventilators and anesthesia machines (C/S rooms) targeted for repurposing
  - One level II location moved to new location
  - Nursery closing: Two false starts







## Concepts

- Equipment
- People
- Places
- Collateral impact
- Inter-institutional interactions







## Outside of the Hospital

- Disproportionate impact on Black, Latino communities
- Restricted hospital visitation policies
- Masks
- Home deliveries <u>https://youtu.be/HNELmKmVLRA</u>
- Exacerbation of systematic inequities







## ProMedica Health System COVID-19 Planning



# Featured Locations •ProMedica Bay Park Hospital •ProMedica Bixby Hospital •ProMedica Coldwater Regional Hospital •ProMedica Defiance Regional Hospital •ProMedica Flower Hospital •ProMedica Fostoria Community Hospital •ProMedica Health and Wellness Center •ProMedica Memorial Hospital •ProMedica Memorial Hospital •ProMedica Memorial Hospital •ProMedica Memorial Hospital •ProMedica Toledo Hospital •ProMedica Toledo Orbipatel •ProMedica Russell J. Ebeid Children's Hospital (Formerly ProMedica Toledo Children's Hospital) •ProMedica Wildwood Orthopaedic and Spine Hospital

Kay Smith, MSN, CNM ProMedica Toledo VP Operations –Women & Pediatrics





## ProMedica Health System COVID-19 Planning

## Why designate a "COVID-19" Hospital?

In general

- Centralized location
- Favorable infrastructure
- Maintain "normal" unit function
- Public concerns for exposure
- Limiting/Managing Exposure

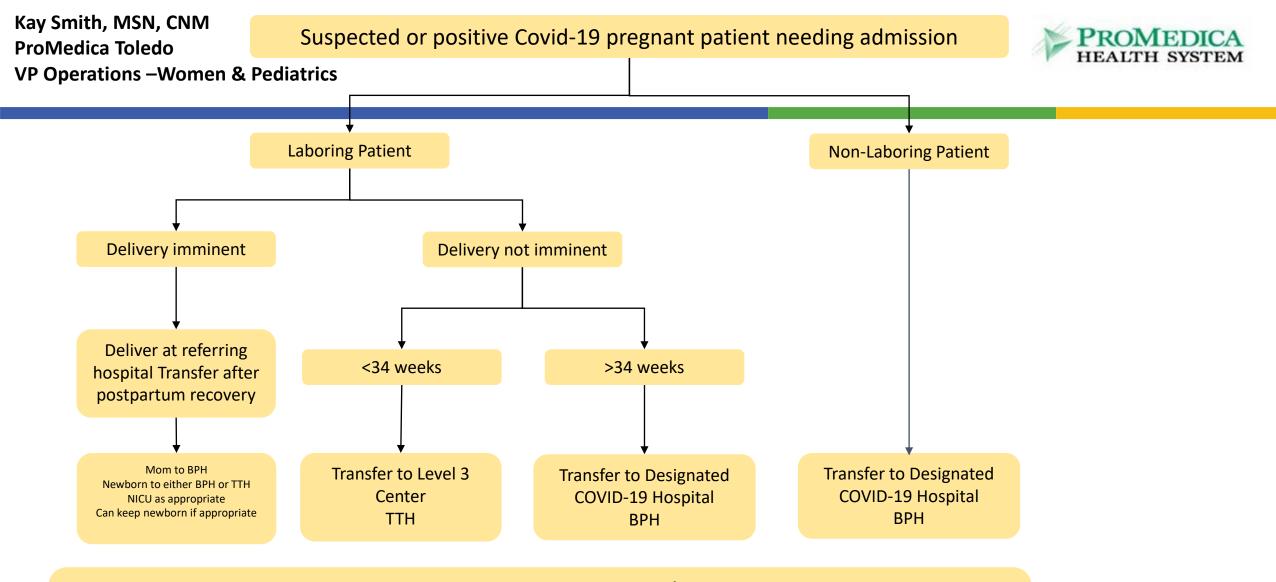
Obstetrics

- Could convert whole floor to negative pressure rooms
- Level 2 obstetrical designation
- Non COVID patients diverted to other OB units in the system
- Allow fluid access for COVID-19 positive or PUI

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#### CALL ACCESS FOR TRANSFER OF MOM AND/OR BABY

For maternal transport Consult MFM, ID, BPH Hospitalist/Intensivist Notify on MD/CNM on call at BPH Notify TTH if indicated < 34 weeks

For newborn transport Notify NICU if newborn transfer requested Notify BPH pediatrician if going to BPH BPH: Bay Park Hospital TTH: Toledo Hospital

## What ProMedica Toledo has done in Obstetrics

- In situ simulations to assess preparedness for COVID-19 patients
- Converted labor rooms and OR to negative pressure
- Screen all scheduled cesareans and induction day before admission
- Stopped use of nitrous in all OB patients
- Stopped use of supplemental O2 for fetal intrauterine resuscitation
- Use of *DEROSA* Shield for vaginal deliveries
- Stopped postpartum sterilization
- Early discharge for postpartum patients
- N95 and eye protection for all patient encounters
- N95, eye protection, gown, gloves for all COVID-19 positive or PUI



Kay Smith, MSN, CNM ProMedica Toledo VP Operations –Women & Pediatrics





## Lessons Learned in NYC-Columbia University Medical Center



Dena Goffman, MD is currently the Chief of Obstetrics and Associate Professor in Obstetrics and Gynecology at Sloane Hospital for Women at New York-Presbyterian Hospital and Columbia University Medical Center and the Associate Chief Quality Officer for Morgan Stanley Children's Hospital & Sloane Hospital for Women.



Breslin N, Baptiste C, Miller R, Fuchs K, Goffman D, Gyamfi-Bannerman C, D'Alton M. COVID-19 in pregnancy: early lessons. *American Journal of Obstetrics & Gynecology MFM*. 2020 Mar 27:100111.



Future Discussion/Webinars

## COVID-19 -What Maternity and Neonatal Care Providers Are Learning

Friday, April 17<sup>th</sup> 12N-1pm

**Goal:** Care of the critically ill COVID+ pregnant patient (case study) including use & benefit of simulation and debriefing

	April 2020							
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
			1	2	3	4		
5	6	7	8	9	10	11		
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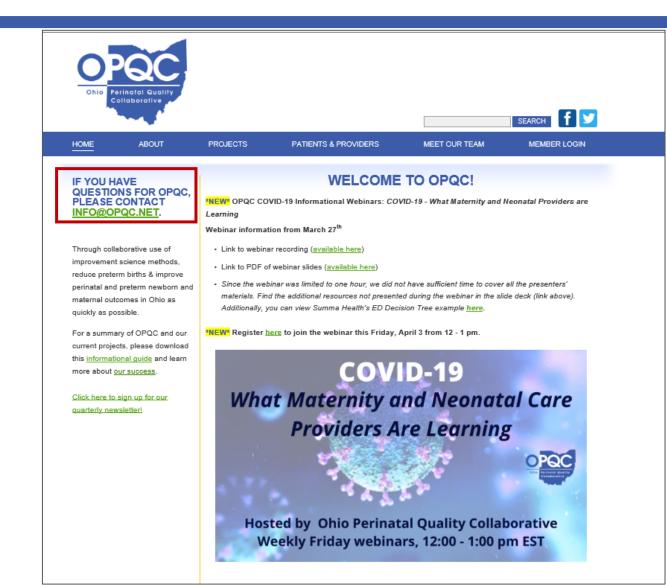


## Contact information for today's presenters

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- Dr. Jim Greenberg: <u>James.Greenberg@cchmc.org</u>
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- info@opqc.net



## **Updated Resources on OPQC Website**



The OPQC website has a list of information and resources that will be updated regularly: https://opqc.net/





# Take care out there



## It takes a village...



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