

Ops Update

For all Michigan Medicine Faculty, Staff and Learners

Wednesday, Feb. 24, 2021, 7:45 a.m.

Please share this information with your teams and front line staff, especially those who may not access emails or computers.

NEW TODAY: Here's the latest information about Michigan Medicine's management of operations:

- **COVID-19 PATIENT STATS**
- **TEAM MEMBER COVID-19 TESTING**
- **VACCINE STATS**
- **UPCOMING BLOOD DRIVES**

- **2/19 TOWN HALL FAQS**

- **US PATIENT ROOM CLOSURES**
- **HIT PAUSE: HOPE, INSPIRATION, GRATITUDE**

DAILY COVID-19 PATIENT STATS

Today's census for COVID-19 inpatients and those patients under investigation (PUI) are noted below:

	TOTAL INPATIENTS	TESTED POSITIVE	PUI	ICU POSITIVE
ADULT	25	25	0	2
PEDIATRIC	2	2	0	0

View COVID-19 Dashboard: <https://uhabccappspr1.umhs.med.umich.edu/>

COVID-19 Patient Percent Positivity (7 day moving average)

Symptomatic testing: 3.27%

Asymptomatic testing: 0.69%

Discharges: 1,812 total COVID-19 discharges to date, 3 in the last 24 hours. These numbers include patients discharged to skilled nursing facilities but excludes deaths and discharges to hospice.

Deaths and hospice: Since March 10, Michigan Medicine hospitals have had 233 total deaths or discharges to hospice, 0 in the last 24 hours.

TEAM MEMBER COVID-19 TESTING STATS*

POSITIVE	1,503
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EMPLOYEES TESTED	13,819
TOTAL TESTS	25,451

**Data from 3/10/20 through 2/23/21. The testing stats reflect just Michigan Medicine employees, not all University of Michigan employees. It also reflects only those who sought testing at or were hospitalized at Michigan Medicine or reported their testing to Occupational Health Services. Some Michigan Medicine employees may have been tested outside our system.*

Michigan Medicine Employee Rolling COVID Data	
Employees Positive Cases for preceding week (Week of 2/7 - 2/13/2021)	18
Employee Positive Cases Last 7 Days	17
Employees Tested Last 7 Days	165
Positivity Rate (Week of 2/14 - 2/20/2021)	10.30%

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Vaccination Progress to Date (as of noon, Tuesday 2/23)

Number of vaccine doses received by University of Michigan (total)* <i>Shipments occur weekly; this total now includes Pfizer + Moderna</i>	58,825 (includes 2 nd doses)
Number of first dose vaccines administered to our community (as of end 2/15)	33,921
Number of second dose vaccines administered to our community (as of end 2/15)	21,741
Number of first dose vaccines administered to our community (yesterday)	0
Number of second dose vaccines administered to our community (yesterday)	736
Number of first dose vaccine appointments scheduled tomorrow	0
Number of second dose vaccine appointments scheduled tomorrow	127

**The number of doses received and administered may differ because each Pfizer multidose vial contains a minimum of 5 doses (officially reported as received), but often our vaccinators are able to draw 1-2 extra doses from the vials. Thus our doses administered may be higher than doses received. See CDC FAQs for more detail. <https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/pfizer-bioNTech-faqs.html>*

Find the most timely and up-to-date information on the [Vaccine FAQs](#) and the [Vaccine Dashboard](#).

UPCOMING BLOOD DRIVES

The American Red Cross is holding two blood drives in the month of March:

- **University Hospital Towsley Dining Room** (available to Michigan Medicine staff, faculty and medical students)
 - Tuesday, Mar. 16, 6:30 a.m. to 6:30 p.m.
 - Wednesday, Mar. 17, 6:30 a.m. to 6:30 p.m.

· **North Campus Research Building 16, Room G064** (available to Michigan Medicine staff, faculty, or students)

○ Tuesday, Mar. 23, 9 a.m. to 3 p.m.

Appointments are highly recommended for both locations and can be scheduled on the [Red Cross website](#). To volunteer to help with check in or in the canteen or make a donation, go to the Wolverines for Life [events page](#).

2/19 TOWN HALL FAQs

Could we get an update on the financial status of Michigan Medicine?

Michigan Medicine's financial performance is back on track with pre-pandemic expectations for fiscal 2021. Back on track is measured relative to the financial outlook that is prepared several times throughout the year. The January 2020 annual update of the health system's five-year financial outlook (strategic financial framework) projected a fiscal 2021 margin of \$202 million.

Due to patient activity returning closer to normal levels earlier than expected and savings attributed to the economic recovery plans, Finance is projecting the health system will surpass the \$202 million operating margin target. The expected good financial performance for fiscal 2021, as well as the projections for continued strong performance during the remainder of the fiscal year, has enabled Michigan Medicine leadership to reinstate the retirement match and other elements of the savings plan earlier than originally anticipated.

Why was there such an immediate cash crunch in March if we supposedly had 150 days of cash on hand? How was that cash invested if it was not "on hand" and to what extent was the endowment leveraged?

Fiscal 2020 financial performance finished nearly \$200 million below expectations, a loss of \$21 million compared to the expected positive margin of \$175 million. The loss would have been \$118 million worse if not for funding support from the federal government. During the months of March and April, it was very difficult to anticipate how much government funding would be received and how long the virus, together with government imposed shutdowns, would impact operations and thus financial performance. Thus, there was a known cash crunch caused by the mandated governmental shutdowns and various projections for how long the cash crunch would be sustained. In addition to the 'permanent' relief, the federal government recognized the strain on cash and also provided support through an interest free loan that will begin being paid back in the spring of 2021. Decisions also had to be made to pause construction projects and reduce capital spending to minimum levels in order to preserve cash.

Cash is invested in a combination of long term and short term pools made available through the University. The investment mix is influenced by projected cash needs necessary to fund operations and capital.

Who manages the reports that are submitted to the discrimination and harassment reporting lines? OIE or local leadership?

The Office for Institutional Equity (OIE) manages the discrimination and harassment reports submitted via the reporting button and investigates or triages to HR or local leadership as they deem appropriate. Sexual, Gender-Based Misconduct and Discrimination and Harassment can be reported via this mechanism.

Who will receive and review the harassment/discrimination button complaints linked to the department pages? Can they be submitted anonymously?

Yes, reports can be submitted anonymously. All information shared will remain confidential to the extent permitted by law and university policy. OIE monitors the location of reports and will communicate to Michigan Medicine leadership if they identify areas with a high volume of issues. For more OIE information, please visit their website, <https://oie.umich.edu/>.

Who decides where vaccines go and how much on a weekly basis? Since we have demonstrated the ability to give vaccine quickly and appropriately, why is the state not sending us more vaccine?

When it comes to supplying health systems and local health departments with vaccine to administer, the Michigan Department of Health and Human Services (MDHHS) is currently using a model that allocates 60% to local health departments and 40% to hospitals/health systems. The state is looking to local health departments to serve in key roles administering and coordinating administration of the vaccine to the state's citizens. Michigan Medicine is not receiving a direct allocation of vaccine supply that fully utilizes our available capacity. We are identified by the state as part of the Washtenaw County regional vaccination efforts and are actively partnering with both Washtenaw County Health Department and other provider organizations in the region to optimize vaccine dose delivery to the citizens of our region.

The state has also begun allocating doses across the state using a social vulnerability index (SVI) established by the CDC. The introduction of the SVI meant a review and some shift in the way counties across the state were receiving doses. More information on the SVI and how it is used in Michigan can be found on the Michigan Department of Health & Human Services [website](#) or in this [PowerPoint presentation](#) on the site.

UH PATIENT ROOM CLOSURES

Several factors have caused condensation in a number of patient care rooms on the north side of UH, resulting in standing water in some rooms. These rooms have been closed in order to address the issue without disrupting patient care. At this time, all standing water has been removed and mitigation and drying interventions are in place.

Currently, the situation has impacted 22 beds and 13 rooms. Many of these beds may need to be closed for several days. The facilities impact of this issue will become more clear over the next few days and the anticipated impact on the clinical activity may change as we learn more.

To manage the impact of this facility issue on our clinical activities, we will be taking the following key steps:

1. We will be creating an adult service in C&W that will be staffed by MFH (hospitalist) faculty to care for general medicine patients who will be displaced from UH.
2. These patients will be accommodated on the C&W 8E unit (10 rooms). To achieve this capacity, GYN/GYO patients will be temporarily transitioned to 10 rooms on C&W 11W.
3. We will be closely monitoring transfers from outside hospitals given the significant impact on our bed capacity.
4. We will be opening the B1IR overflow unit and PACU WW overflow units given high anticipated UH activity this week.

5. The visitor policy will correlate with the patient. Adult patients in C&W follow the adult visitor guidelines.

These changes are expected to be in place by late afternoon today, Wednesday, Feb. 24.

As of now, we feel confident that we should be able to **manage our UH/CVC and C&W surgical and procedural activity as previously scheduled** and do not anticipate needing to reduce our ADP activity. We will not be cancelling any procedures or reducing the bed thresholds for our procedural areas for now. This may change if more rooms need to be closed. We will continue to closely monitor the facilities impact and will keep you informed should adjustments to this plan be required.

Important consideration for our emergency response teams (RRT and Code Teams): We will be providing care to an adult patient population (Gyn/Gyn Onc) on a pediatric unit (11W). We appreciate and expect the response of our adult RRT/code teams for this population.

We will be grateful for your help in **expediting early discharges and consideration of same day discharge for UH/CVC and C&W patients whenever safely feasible**. We may also need to accommodate patients not meeting ICU care needs in the ICUs over the next few days.

HIT PAUSE: HOPE, INSPIRATION, GRATITUDE

In this spot, we will share stories of hope, inspiration and gratitude. Take a few minutes to pause and reflect:

February is Black History Month. Celebrate by reading more about who shaped the history of Michigan Medicine with these [pivotal milestones](#).

Weekly bulletins and policies are posted on Michigan Medicine Headlines at <https://mmheadlines.org/covid-19-updates/>. Please bookmark this site and refer to it for the most up-to-date information.