

Keeping Hospitals Safe During the COVID-19 Pandemic

Finding inspiration in a father's credo

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MY FATHER SURVIVED starvation, sickness, and the death marches of the Holocaust. Growing up, he always told my sisters and I how lucky we were to be Americans. He said that the United States government allowed him to immigrate here and have a good life, so we should be humble, give back, and help the less fortunate.



The last day off I had was January 6, 2020. I am not on the front lines of the fight; instead I am charged with developing strategies to reduce the risk of COVID-19 transmission to our hospital staff and uninfected patients. Over the last nearly 30 years, the focus of my career has been on the prevention of hospital infections. During this time, I was invited to share my views at the Institute of Medicine, National Academy of Sciences regarding reducing risk of infections in healthcare workers during a pandemic due to a respiratory virus. After years of preparation and innumerable drafts of hospital plans, the gravity of the current pandemic remains daunting. Despite thinking about this for so long, writing about it, and collecting views of respected authorities, the responsibility for the health of my colleagues is, at times, frankly overwhelming. Based on past experience, I had thought ahead of time of some shortages, such as reduced availability of products used for staff to

clean their hands. However, I had not thought of national shortages in the availability of personal protective equipment worn by staff, shortages in stethoscopes used to examine patients, shortages of filters used on equipment to prevent the virus from circulating in the air, shortages of hospital disinfectants, shortages in swabs used to collect specimens to test patients for COVID-19 infection, shortages in tests used to make the diagnosis, and so much more. Yet, camaraderie among our staff has afforded us the opportunity to work together, innovating every hour of every day of every week, as much as humanly possible, to mitigate risk to those for whom we are honored to serve with and reduce risk to those who enter our hospital system for care. We have been successful in these endeavors. As Nelson Mandela wrote, "It always seems impossible until it is done."

I have been fortunate to have close friends in Europe who are opinion leaders, who have been a few weeks ahead of us in the pandemic, and whom I called upon to help troubleshoot the complexities of safety for our staff in this most challenging time. I have been fortunate to work with administrators, nurses,

physicians, supply chain staff, housekeepers, engineers, infection prevention professionals, public health professionals, and many more who have put the well-being of others before themselves. In a time of such need, the likes of which has not been seen since the 1918 flu pandemic, those who have risen to the challenge speaks of the passion and humanity they bring to work each day.

In my father's self-penned obituary a few weeks before his death, he wrote, "The only thing I take with me is my

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good name. I willfully never hurt anyone and if I did, please forgive me. My credo is be honest, charitable, don't hurt anybody and if it takes just as much effort to be good or nasty, then why not be good?" God knows, over the last several months, I have tried to live up to his credo. ❖

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