

Children's Mercy Kansas City

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Presentations

5-2021

Lessons From the Pandemic: How a Children's Hospital Responded to the Challenges of COVID-19

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A pediatric hospital's response to the COVID-19 pandemic:

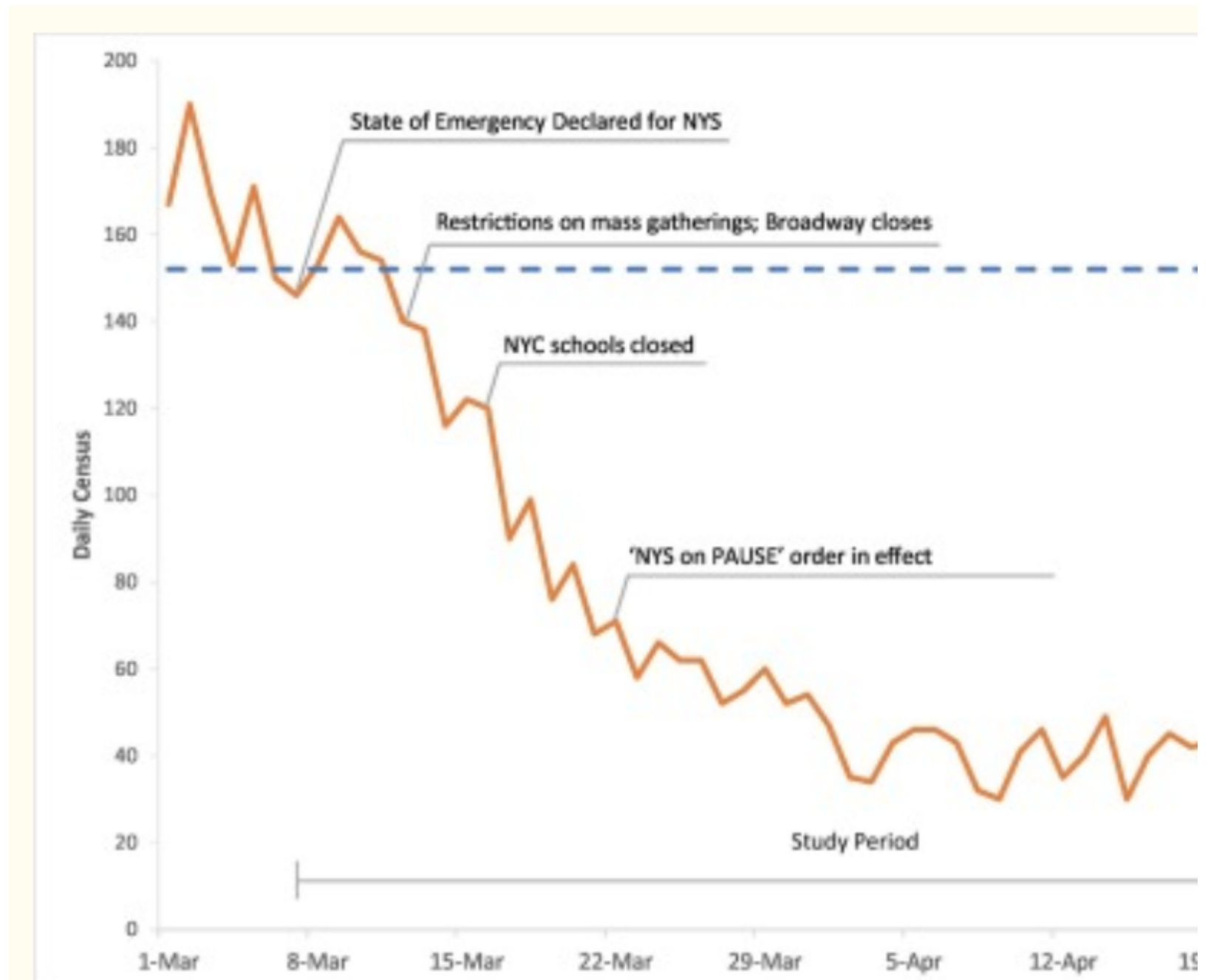
Introduction and overview

John D. Lantos MD

Children's Mercy Kansas City

May 2021/Pediatric Academic Societies

This graph of ED visits in one NY hospital could be a graph of everything during the pandemic.



"Is it safe to come to CHOP?"

Yes. We continue to safely provide care. Please don't delay a needed visit to your healthcare provider. Watch this video for a preview of what to expect when you come to our Philadelphia Campus.



Almost overnight, hospitals had to...

- develop new supply lines for PPE, drugs and devices
- develop new protocols for clinical care
- redesign family-centered care
- initiate telemedicine
- support staff morale
- manage acute budget shortfalls
- initiate regional collaborations
- allocate scarce resources
- communicate with local MDs, parents, public health, schools, and media
- participate in scientific studies
- care for sick patients with COVID and with other health problems

Employee wellness during COVID-19

The goal is to provide staff with the most recent information related to COVID-19 employee wellness. The page is reviewed at least twice a week to ensure accuracy.

NEW RESOURCES

[COVID wellness team member at your virtual huddle](#)

[Inspirational phone line](#)

[Lean On Me - suicide support and resources](#)

[1:1 support for all employees](#)

[Pandemic support group](#)

[Virtual mindfulness meditation](#)

[Virtual support groups for teams](#)



**REAL HEROES
WEAR MASKS**

Thank You

To the doctors, nurses, paramedics and all health workers that selflessly fight to protect our community against the Covid-19 outbreak,
You can help! Please visit www.website.com to know how.



The bottom right section of the image features a close-up of a healthcare worker's face wearing a blue surgical mask and a blue hairnet. The background is a mix of blue and red brushstrokes. The text "Thank You" is in a bold, white font. Below it, a smaller line of text reads "To the doctors, nurses, paramedics and all health workers that selflessly fight to protect our community against the Covid-19 outbreak, You can help! Please visit www.website.com to know how." The World Care logo, consisting of a circular icon and the text "world care", is located in the bottom right corner.

Guilt

“My experience of COVID has been this gut-wrenching, helplessness, and what I can only describe as survivor’s guilt.

I was torn between the guilt of not enduring what is happening in the hotspots and watching other nurses in the opposite situation who face furloughs and layoffs.”

Tiffany Mullen, MSN, RN, ACCNS-P, CCRN
PICU Clinical Nurse Specialist

<https://www.aacn.org/blog/survivors-guilt-amid-a-pandemic>

“Stop calling us heroes”

“We can’t justify the deaths of doctors and nurses and say, “They’re heroes...” We don’t want the recognition, we just want the support. They died because they didn’t have enough protective gear. Everytime somebody dies, I want people to think, “Somebody screwed up.”

- JA Mustapha. <https://duckduckgo.com/?q=stop+calling+us+heroes+youtube&atb=v1-1&iax=videos&ia=videos&iai=https%3A%2F%2Fwww.youtube.com%2Fwatch%3Fv%3DI2Yzqw2Keww>



ARTICLE | August 3, 2020

COVID19: Pandemic to Permanently Change How Children's Hospitals Deliver Care

Email

Print

Despite the darkness of the COVID-19 pandemic, bright spots have begun to emerge. Children's hospitals have quickly changed processes, policies and systems, which will affect how health care is delivered in the future.

By Megan McDonnell Busenbark

Redesigning family-centered care



From This

To This



Shoring up the safety net for children in the COVID-19 pandemic

Tina L. Cheng^{1,2}, Margaret Moon¹ and Michael Artman³ and On behalf of the Pediatric Policy Council

Pediatric Research (2020) 88:349–351; <https://doi.org/10.1038/s41390-020-1071-7>

Impact 1

COVID-19 Morbidity & Mortality

Grandparents, Parents

Multisystem Inflammatory Syndrome in Children

Impact 2

Community Stress:

Unemployment, Food Insecurity

Education Interruption

Health Disparities

Impact 3

Child, Adolescent, Family Trauma:

Mental and Behavioral Health

Child Abuse

Impact 4

Other COVID consequences:

Delayed care

Under immunization

Obesity

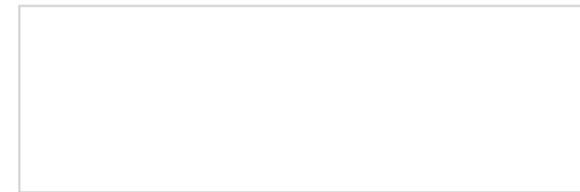
Stress on Medicaid

Home / News / Health News

Children's Hospitals Battle COVID-19, Surging Mental Health Needs

Clinician leaders from Minnesota, Texas and California share how their hospitals have responded and innovated during the pandemic.

By **Kaia Hubbard**, Contributor Jan. 29, 2021, at 3:58 p.m.



MORE HEALTH CARE NEWS

NEWS



April-June 2019 vs 2020

- 2019:
 - 24,860 patients had 38,455 visits
 - 15 (0.04%) visits were by telemedicine.
- 2020:
 - 16,359 patients had 24,073 visits (30% drop)
 - 3,372 (26.7%) visits were by telemedicine.

Positive screenings for suicide risk

- April-June, 2019: 10.7%
- April-June, 2020: 12.1%

OR 1.15, 95% CI: 1.09, 1.20; $z = 5.5$, $p < 0.001$.

Agenda

- **Introductions and Overview** | John Lantos, MD, Director, Bioethics Center
- **Prelude to COVID-19** | Paul Kempinski, MS, FACHE, President and CEO
- **Controversies in Using Scientific Data to Shape Hospital Policy** | Angela Myers, MD, MPH, Director, Division of Infectious Diseases
- **Coordinating a Regional Response** | Jennifer Watts, MD, MPH, Medical Director of Emergency Preparedness
- **Communicating with Key Audiences During a Pandemic** | Laurie Ellison, MBA, Chief Communications and Marketing Officer
- **Questions & Answers** | All



A Pediatric Hospital's Response to the COVID-19 Pandemic

May 2021 | Pediatric Academic Societies



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Prelude to COVID-19

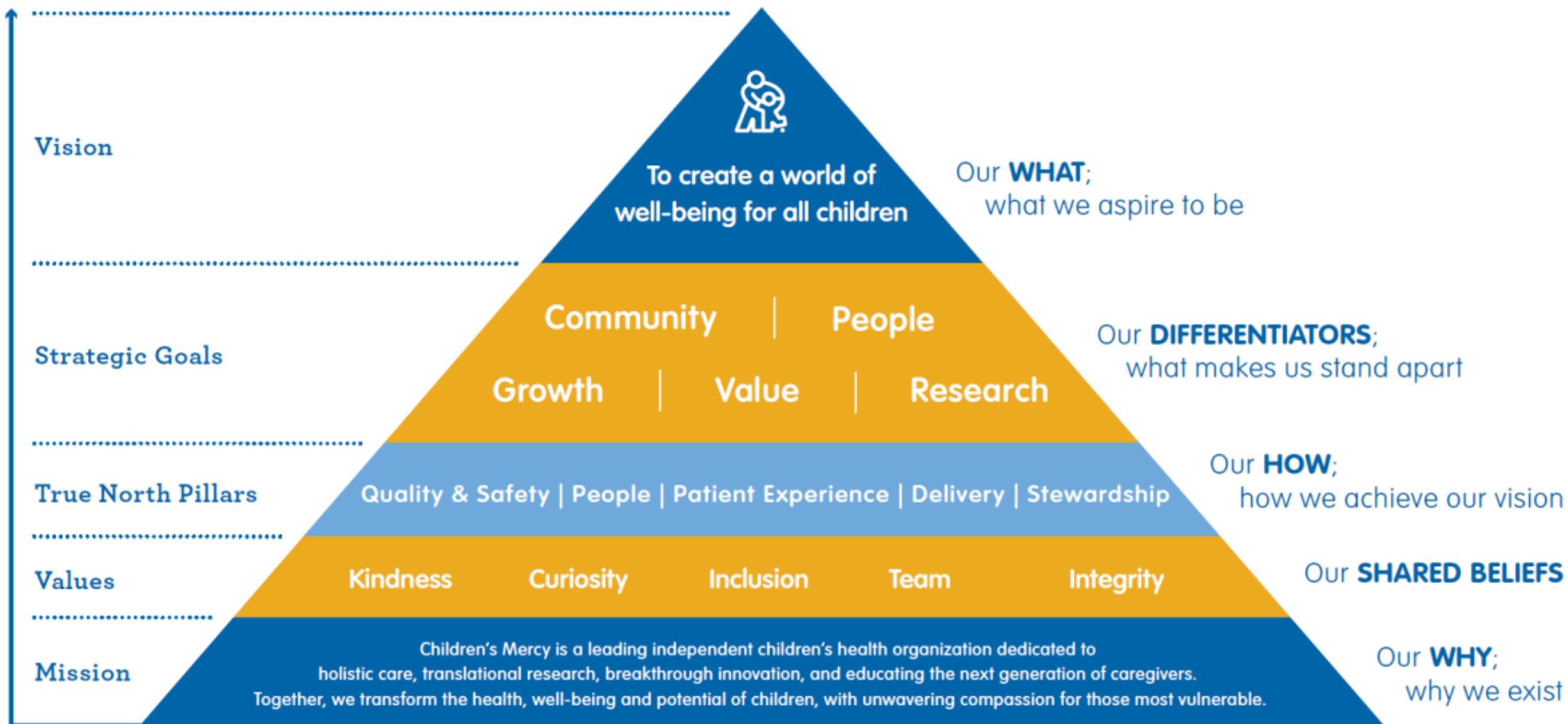
Paul Kempinski, MS, FACHE; President and CEO
Alice Berry, DDS, and Katharine Berry, MD,
Endowed Chair in Executive Leadership



Children's Mercy – Pre-COVID

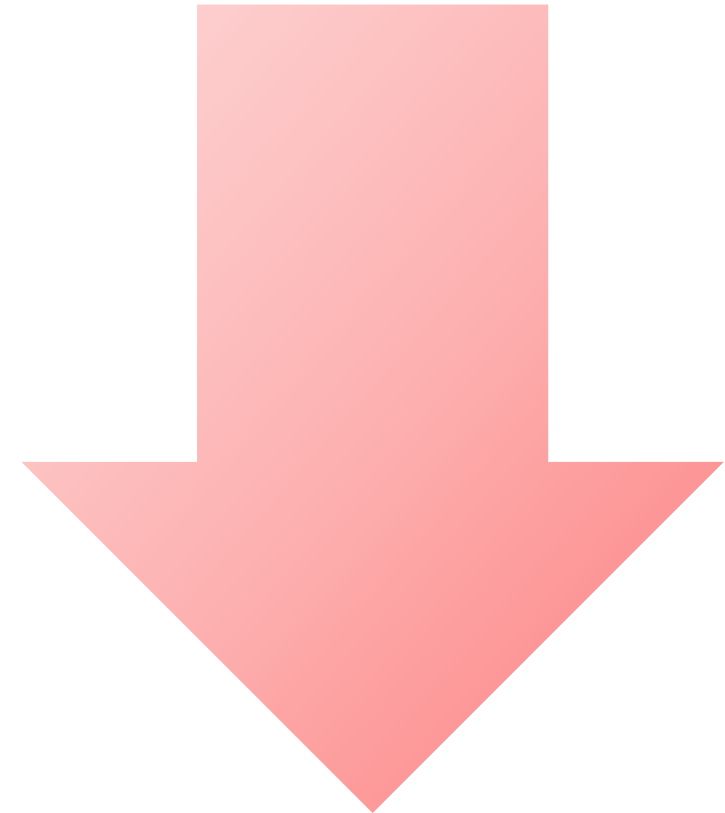
- A new roadmap to the future
- New mission, vision, values
- New True North Pillars
 - Eliminate harm and perfect the patient/family experience
 - Achieve top decile performance in Quality, Safety, and Patient Experience within five years
- New strategic plan approved by Board March 11, 2020

Transformation Model



March 15, 2020 – Shutdown Begins

- Substantial volume declines
- Net revenue loss of \$1M per day
- Furloughs
- PPE shortages
- Exacerbation of mental and behavioral health issues



Re-Imagining Our Incident Command Structure

- Virtual and ongoing
- Decisions that were evidenced-based rapidly had to consider emotional impact
- Communication was critical
- Engagement with healthcare community and state & local governments evolved rapidly
- Competition turned to collaboration

New Ways of Communicating

- “Social distancing should not mean leadership isolation”
- Virtual town halls
- CEO Live Connects
- Town halls with community-based pediatricians
- Business and civic leader virtual roundtables



How We Evolved

- Resiliency
- Nimbleness
- Collaboration
- New leaders rising above the water line



... and Now

- An intense focus on supporting the well-being and safety of our employees
- “Mission Forward, People First”





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Controversies in Using Scientific Data to Shape Hospital Policy

Angela Myers, MD, MPH, Director of Infectious Diseases

Masking

Challenges

- Changing recommendations
- Desire for additional protections
- Defining an AGP

Solutions

- Transparent guidance from CDC recommendations
- Individual group meetings to hear concerns, allay fears, & discuss options
- Include stakeholders, utilized national organizations (e.g., CHA)

Two hair stylists with **COVID-19** spent at least 15 minutes with 139 clients

EVERYONE WORE FACE COVERINGS  **NO CLIENTS ARE KNOWN TO BE INFECTED***



WEAR CLOTH FACE COVERINGS CONSISTENTLY AND CORRECTLY TO SLOW THE SPREAD OF COVID-19

*No clients reported symptoms; all 67 customers tested had negative tests

CDC.GOV bit.ly/MMWR71420 MMWR

Wearing a mask that fits tightly to your face can help limit spread of the virus that causes COVID-19

In lab tests with dummies, exposure to potentially infectious aerosols decreased by **about 95%** when they both wore tightly fitted masks

Other effective options to improve fit include:



Cloth mask over medical procedure mask Medical procedure mask with knotted ear loops and tucked-in sides Mask fitter Nylon covering over mask

CDC.GOV bit.ly/MMWR21021 MMWR

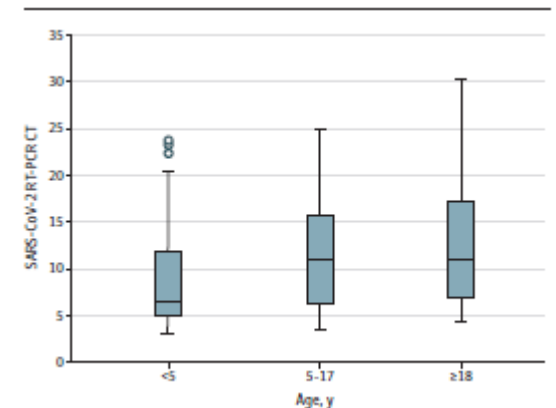
COVID-19 Testing

Challenges

- Timely diagnosis
- Supplies
- Trust in results
- Changing recommendations

Solutions

- Developed in house testing ability
- Utilized multiple testing platforms
- Provided internal PCR sensitivity data; viral loads in children
- Creation of testing flow chart & Individual team discussions regarding testing guidelines (e.g., pre-op)



COVID-19 Testing

Algorithm finalized/ revised: 10.20; 11.20; 12.8.20; 1.12.21; 2.15.21; 2.19.21; 3.1.21; 3.9.21
 Owner: A. Myers, MD

No Testing

- Any PCR test result OR positive antigen testing from outside facility with same illness (obtain results from outside facility)
- Patients who have a negative test during current admission without new CLI symptoms or new known exposures
- Patients admitted for >14 days without new CLI symptoms or new known exposures
- Asymptomatic patients with a previously positive test within the last 90 days unless new CLI symptoms ([Removing Patients from Isolation Guideline](#))
- Previously tested in the last 7 days, has sheltered at home and/or has no new COVID-19 exposures or symptoms

Routine Tests

- COVID-19 like illness (CLI) defined as one of the following ([Isolation Guideline](#)):**
- Cough OR shortness of breath/ difficulty breathing OR new loss taste/smell
- OR**
- Two of the following symptoms: fever or chills, muscle pain, headache, fatigue, sore throat, GI symptoms (e.g. nausea/vomiting/diarrhea), runny nose/congestion, or exposure to a person with COVID-19 within the last 14 days. Runny nose/congestion OR GI symptoms each count as one symptom. Patients with these symptoms need to have one other symptom to meet criteria for testing.
- OR**
- Fever or chills in a child who cannot articulate another CLI symptom (e.g. febrile infant or developmental delay)
- OR**
- Immunosuppressed and ANY COVID -19 symptoms
- OR**
- Admission with COVID-19 like illness with negative antigen test from outside facility

Other indications for Routine Testing:

- Anticipated surgery or sedation within the next 72 hours (Patient undergoing surgery with negative antigen from referring hospital should have a PCR test)
- Exposure to a confirmed case of COVID-19 (DO NOT test until at least 5 days after exposure) ([Isolation Guideline](#))
- PICU Admission
- Anticipated delivery in the FHC within the next 72 hours
- DKA Admission
- Suspect MIS-C ([Isolation Guideline](#)):
 - Fever **AND**
 - Laboratory evidence of inflammation (e.g. elevated CRP, ESR, fibrinogen, procalcitonin, D-dimer, ferritin, LDH, IL-6, neutrophilia, lymphopenia, or hypoalbuminemia) **AND**
 - Evidence of clinically severe illness requiring hospitalization, with multisystem (≥2) organ involvement (cardiac, renal, respiratory, hematologic, gastrointestinal, dermatologic, and neurological) **AND**
 - No alternative plausible diagnosis
- Neonate born to a COVID-19 positive mother
- Residing in a group home or facility placement
- Admission with tracheostomy, on non-invasive ventilation or requires [AGP \(Isolation Guidelines\)](#)

Rapid Tests

- Emergent surgery/procedure requiring sedation where procedure can wait at least 1 hour and is **necessary** before routine testing is available
- Immediate facility placement before routine testing is available
- Women in labor
- Solid organ transplant prior to graft acceptance
- ED/UCC patients or new hospital admissions who meet testing criteria

Page hospitalist COVID-19 pager (816-458-7008) for orders if meets criteria

COVID Testing Schedule*			
	Night Shift	Day Shift	Evening Shift
Monday - Friday	No testing	0600-1500	1500-2200
Saturday	0000-0400	1000-1500	1500-2200
Sunday	0000-0400	1000-1500	1500-2200

*Specimens received in Microbiology during the timeframes above will generally have results within 8 hours provided repeat testing is not warranted due to specimen or instrument issues.

Personal Protective Equipment



Challenges

- Obtaining supplies
- Fit testing
- Maintaining supplies
- Communicating supply issues



Solutions

- Tested options from multiple vendors
- Instituted “just in time” fit testing
- Created par levels on inpatient units with tracking; reduced number of people seeing each patient
- Developed a daily dashboard on website

SUPPLIES DAILY STATUS

Green: Adequate inventory with normal supplier reordering ability; good availability of substitutes.

Yellow: Low inventory with limited ability to purchase more (e.g., supplier allocations or backorders); may have substitutes.

Red: Critically low or limited inventory with no ability to get more; no availability of substitutes; significant usage changes will accelerate inventory depletion.

N95s	Yellow
PAPR hoods	Green
Exam gloves	Green
Isolation gowns	Green
Procedural masks	Green
Sanitizer wipes	Green
Hand sanitizer	Yellow
Face shields	Green
Blood bank	Green

PPE as of April 5, 2021

Blood bank as of April 6, 2021

Restrictions

Challenges

- Work related travel
- Physical distancing in the hospital
- Learner restrictions

Solutions

- Input from COVID-19 taskforce, area hospitals, and other children's hospitals
- Implemented WFH policy; creative space utilization
- Utilization of virtual learning; creation of an education task force



COVID-19 Vaccination

Challenges

- Creation of a fair system to distribute limited doses
- Responding to numerous questions/concerns
- High refusal rate in specific employee groups

Solutions

- Team decisions, prioritization of frontline workers
- Communication of data in multiple venues
- Physician attendance at team huddles, virtual meetings; video testimonials; addressed equity issues



mRNA COVID-19 vaccines are highly effective in preventing infections in real-world conditions



Nearly 4,000* health care personnel, first responders, and essential workers were tested weekly for the virus that causes COVID-19



Those who were fully vaccinated* were **90% less likely** to get infected

* Effectiveness of Pfizer-BioNTech and Moderna mRNA vaccines among 1,350 study participants in eight U.S. locations from December 14, 2020, to March 13, 2021. Participants self-collected specimens weekly regardless of symptoms and collected additional specimens if they became sick. Fully vaccinated = 2 weeks after 2nd dose.

CDC.GOV

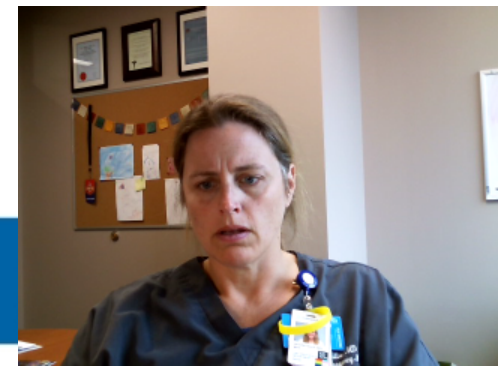
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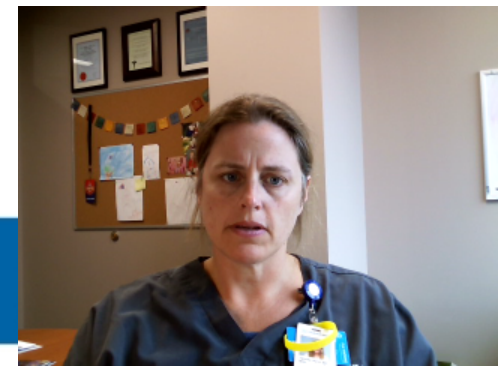
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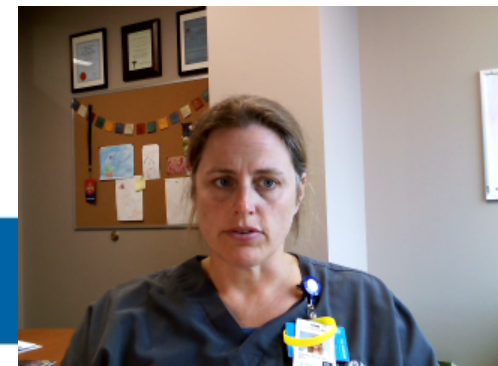
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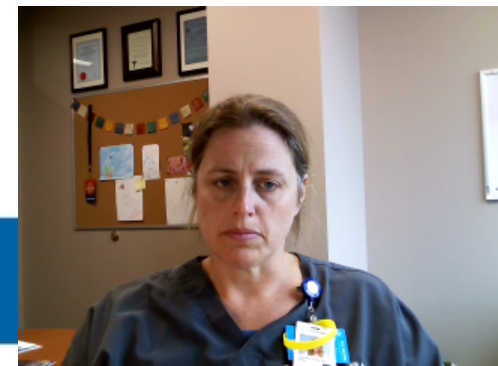
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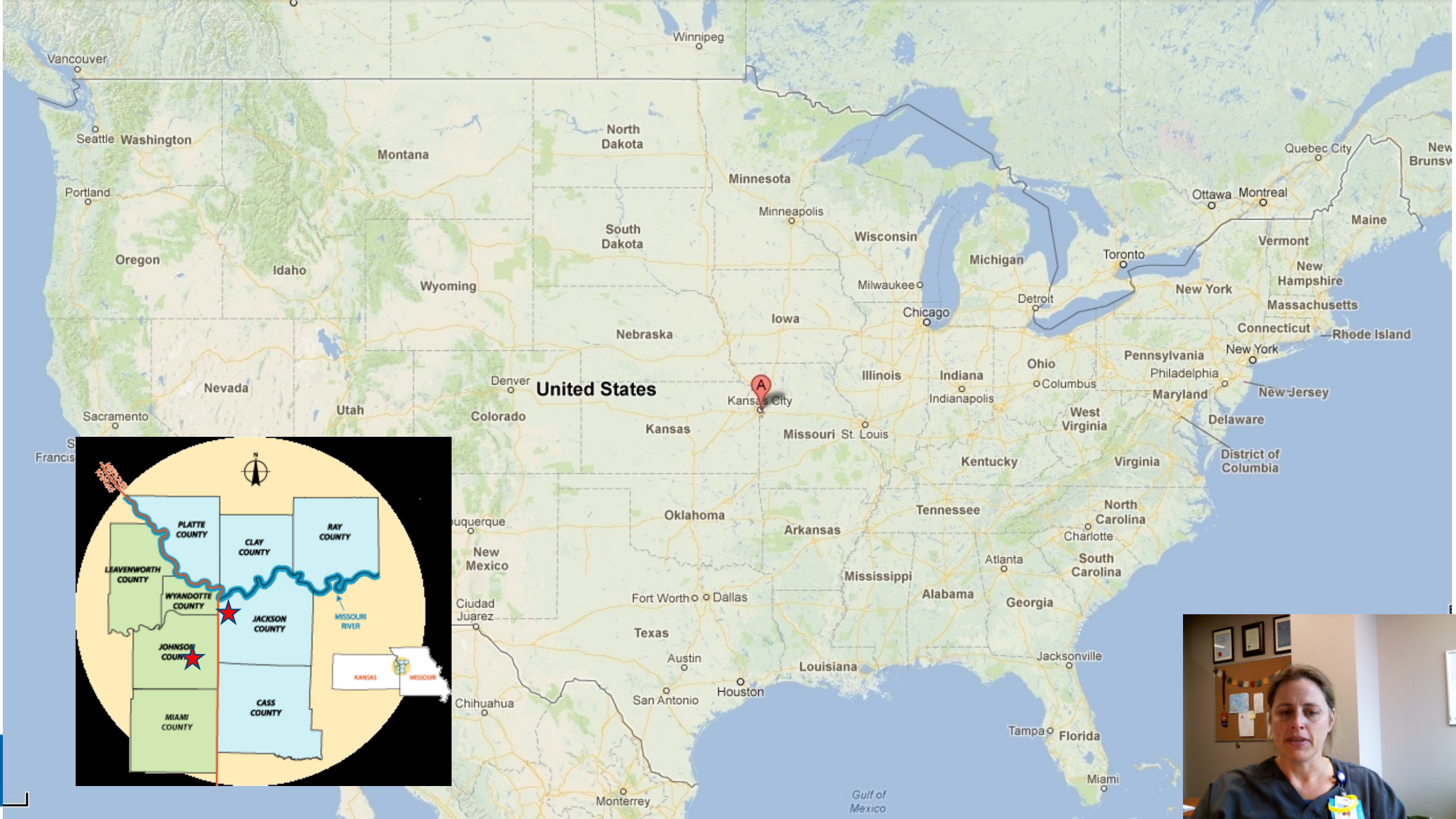


Coordinating a Regional Response

Jennifer Watts, MD, MPH, Medical Director-Emergency Preparedness







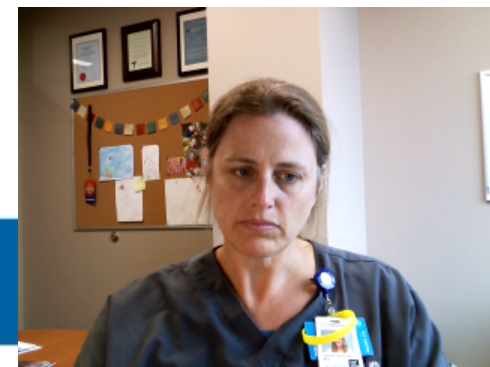
March 2020

Challenges

- Shut down
- Completely unknown expectation
- Children in virtual school post spring break
- Lack of coordination

Solutions

- Hospital preparedness for patients
- Work from home
- Employee wellness
- Lunch program
- Care for complex children with ill parents
- Compilation of community players



March 2020

Challenges

- Not a pediatric problem

Solutions

- Equipment resources
- Accepting all pediatric patients
- Increasing age
- Preparation to care for adults



Regional

- MARC

- Health Care Coalition (HCC)
- MultiAgency Core Group
- Health Department
- Superintendents

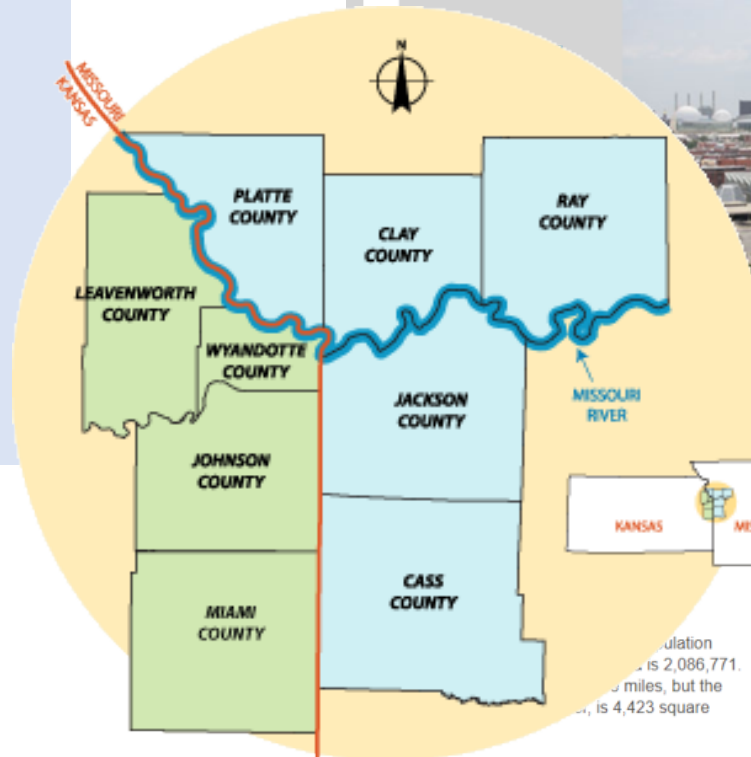
MARC
MID-AMERICA REGIONAL COUNCIL

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119 Cities | 9 Counties | 2 States | One Region

COMMUNITY DATA & ECONOMY EMERGENCY SERVICES/9-1-1 ENVIRONMENT GOVERNMENT REGIONAL PLANNING TRANSPORTATION

About MARC



Public Officials Directory

The 2019-2020 public officials directory was updated and published in the summer of 2019. MARC makes periodic updates to the directory as the year progresses, and as information changes in our local governments.



The Public Officials directory lists officials from cities and counties throughout the MARC nine-county region.

[Visit the Public Officials Directory page»](#)

About MARC

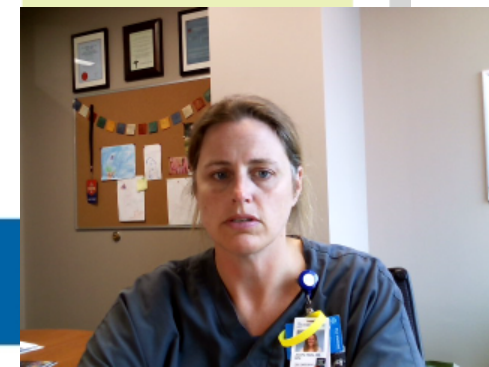
- What is MARC?
- Board of Directors
- Member Cities and Counties Committees
- MARC Community Services Corporation 501(c)(3)
- Financial Information
- Core Values
- Annual Budget and Work Plan

Find Us

- Map and Parking
- Staff Listing
- Management Profiles
- Social Media

Learn More

- Programs & Initiatives
- Legislative Agendas
- Publications
- Call for Nominations - Regional Leadership Awards
- Regional Leadership Awards
- Acronym Glossary
- Conflict of Interest Policy
- Whistleblower Policy
- Open Records Requests



Regional

- Community organizations
- Community pediatricians
- CMO/CEO
- ICU
- State level – MHA and KHA



Schools

Children's Mercy KANSAS CITY

Donate Now > Information on COVID-19

Your Visit Departments In the Community

Recommendations for a Safe Return to Sport and Physical Activity After COVID-19

Updated November 9, 2020

COVID-19

Guidance for School Re-opening During the COVID-19 Pandemic

Children's Mercy



Vaccines

Challenges

- Supply
- Eligibility Tiers

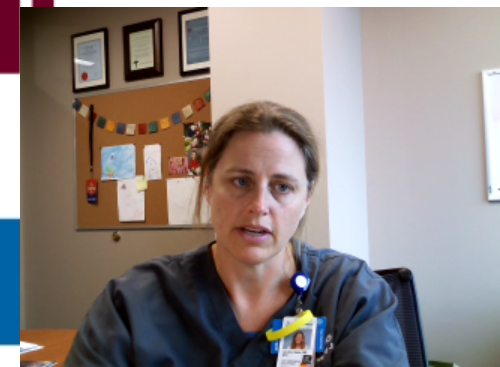
Solutions

- Employees
- Community participation
- Teens
- Educational role for pediatric vaccination



Takeaways

- Complexity
- Thinking outside the box
- Elevation of leaders
- Collaboration
- Strength in Unity





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Communicating with Key Audiences During a Pandemic

Laurie Ellison, MBA; Chief Communications and Marketing Officer

Prioritize audiences

Tier One

- Employees
- Patients and Families
- Community Providers

Tier Two

- Schools
- Health Departments
- Media

Tier Three

- Community Leaders
- Donors
- Community-at-Large

Employees

Challenges

- Keep employees educated and informed, quickly and frequently
- Reassure, minimize fear
- Build trust, confidence in leaders and our Infectious Diseases experts

Solutions

- Daily COVID-19 email
- Dedicated COVID-19 intranet home page
- Employee Town Halls with Infectious Diseases experts, leaders

The screenshot shows the Children's Mercy intranet page for COVID-19 information. The page is titled "COVID-19 Information" and features several sections:

- COVID-19 VACCINE INFORMATION:** Includes links for CM Employee COVID-19 Vaccine FAQs, COVID-19 Vaccine Clinics for Patients, COVID-19 Vaccine Information, COVID-19 Vaccine FAQ - childrensmercy.org, COVID-19 Vaccine FAQ (Spanish) - childrensmercy.org, and Employee registration for COVID-19 vaccine.
- COVID-19 COMMUNICATION:** Includes links for COVID-19 Communication, COVID-19 Videos, and Messages from leaders.
- PPE QUICK REFERENCE:** Includes links for List of Aerosol Generating Procedures (AGP) and Additional PPE Information.
- DAILY PAUSE:** Resources available for well-being and emotional support.
- AREA-SPECIFIC INFO:** Includes links for COVID-19 Accessible Resources, COVID-19 employee screening and testing, COVID-19 patient screening and testing, COVID-19 standard work and job aids, Educational activities, Employee well-being and emotional support, Infection Prevention and Control, Intimate Partner Violence, Medications, Multisystem Inflammatory Syndrome in Children (MIS-C): ED, Multisystem Inflammatory Syndrome in Children (MIS-C): Inpatient, PPE, Research, Resources for families, and COVID-19 Support Plan.

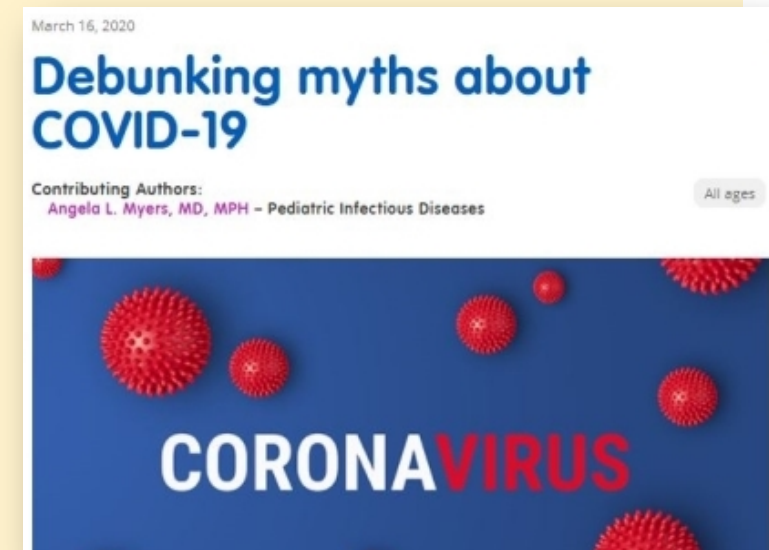
Patients & Families

Challenges

- Sharing timely changes to how CM was operating
- Myths and misinformation about COVID-19 in the community
- Communicating with our growing Spanish-speaking population

Solutions

- Dedicated COVID-19 section of the website – English and Spanish
- Video series with hospital experts – shared on social media and the website
- Routinely updated regular communications channels



Community Providers

Challenges

Provide community providers with the timely answers and information they need about COVID-19 to better manage their practices and patients/families

Solutions

- e-Newsletter to 3,100 providers
When surveyed, 95% of respondents rated these communications as “valuable” or “extremely valuable.”
- Eight Virtual Town Halls
When surveyed, 98% rated the town halls as “valuable” or “extremely valuable.”
- Provider FAQs page on [childrensmercy.org](https://www.childrensmercy.org)

Schools / Health Departments

Challenges

- Helping schools get kids back in the classroom safely.
- Working in conjunction with the local health departments.

Solutions

- Created an online portal for school districts and early childhood centers to request assistance/submit questions.
- Developed a Return to School guidebook available on our website.
- Developed an email newsletter distributed every other week

Returning to school during COVID-19

Information for educators and school health professionals

Children's Mercy is committed to helping children return safely to school during the COVID-19 pandemic. We have compiled resources for school healthcare professionals to help children as group activities and facilities re-open.



Guidance for school re-opening

As a community, we're facing decisions about returning to school while our community is still experiencing rises in COVID-19. Experts at Children's Mercy developed resource to help the community - both families and administrators - navigate school reopenings during COVID-19.

[Read the guidebook >](#)

Local and Regional Media

Challenges

- Controlling the narrative
 - First COVID-19 patient
 - Furloughs
 - Getting Back to Getting Better
- Getting updated/timely information to the community and patient population

Solutions

- Announcements/updates were first posted in CM's newsroom and shared on our social media platforms followed by a news conference
- Created a COVID-19 "update" graphic for social media to alert media of new information
- Shared videos of our experts answering FAQ




Community Leaders / Donors

Challenge


- Keeping community leaders and donors understanding our financial challenges and maintaining their support

Solutions

- Roundtables for select business and community leaders
- Town Halls for donors
- E-Newsletters geared specifically to business leaders and to donors



Children's Mercy
Updates from CEO
Paul Kempinski

 Children's Mercy

April 13, 2020

COVID-19 Updates from Children's Mercy

Partnering to Meet the Challenge Ahead

I am pleased and encouraged to see the progress being made on both sides of the state line to prepare our communities for the anticipated surge of COVID-19 patients. To meet this unprecedented challenge, hospitals and health systems throughout the region are working together to increase bed capacity. At Children's Mercy Kansas City, we've developed a three-tiered plan to help.

First, as announced this week by Kansas Governor Laura Kelly, Children's Mercy Kansas City has offered to receive pediatric patients from across Missouri and Kansas in order to allow for immediate local bed availability for those adult facilities where surge requirements are likely to be the greatest.

Secondly, we are preparing to accept young adult patients up to age 26 who may be able to be appropriately cared for by us at Children's Mercy. As the surge evolves, we are recommending that hospitals who currently have hospitalized pediatric and young adult patients coordinate with us by calling 1 (800) GO-MERCY / 1 (800) 466-3239 for transfer of those patients.

Finally, we also have offered to temporarily convert our 52-bed hospital in Overland Park,

Questions & Answers



Children's Mercy
KANSAS CITY

Questions and Discussion

- **Introductions and Overview** | John Lantos, MD, Director, Bioethics Center
- **Prelude to COVID-19** | Paul Kempinski, MS, FACHE, President and CEO
- **Controversies in Using Scientific Data to Shape Hospital Policy** | Angela Myers, MD, MPH, Director, Division of Infectious Diseases
- **Coordinating a Regional Response** | Jennifer Watts, MD, MPH, Medical Director of Emergency Preparedness
- **Communicating with Key Audiences During a Pandemic** | Laurie Ellison, MBA, Chief Communications and Marketing Officer
- **Questions & Answers** | All