

# CEO News & Views

*an update from Bruce Schroffel*



**September 9, 2009**

This Week

[Bob Anderson retires  
\(below\)](#)

[Left off the list  
\(below\)](#)

[Caring for more  
patients with fewer  
people?](#)

[Preparing for a surge](#)

[Preparing yourself for  
a surge](#)

[No confirmed cases so  
far](#)

[UCH goes to bat](#)

## Bob Anderson retires

Today Dr. Bob Anderson, chairman of the Department of Medicine, announced his retirement, effective June 30th, 2010. Bob has been with the University for 40 years, two of them as interim chair of the department and the last five as chairman. He took over as chair at a time of great

## Facing a threatening flu season

Flu season is officially here, and we're told this one may be particularly threatening. The H1N1 "swine flu" virus, which though relatively benign in most cases is different from the seasonal flu we cope with each year, has been spreading around the world since the beginning of 2009. As summer ends, there are concerns it will flare up here.

This virus differs from normal seasonal flu - which accounts for some 200,000 hospitalizations and 36,000 deaths annually - in that it involves vomiting and diarrhea. Fatalities have begun to mount. Spain (where the death toll now totals 25), India (111), and Taipei (seven) all reported deaths in the past week. (The photo above is from last spring's outbreak in Mexico.) There have been recent flu-related deaths,



too, in Hawaii, Florida, Louisiana, California, Alaska, Texas, Kentucky and West Virginia. Every state in the union, including those under our regional umbrella, has already reported H1N1 cases. Colorado's Department of Public Health counted a total of 70 H1N1 cases in the state from April 9 through August 29.

All this obviously represents a potential threat to the public health, and a very significant challenge to hospitals like ours.

## Caring for more patients with fewer people?

Last Friday, for example, our inpatient pavilion had its highest census ever, with 391 patients in our care. None was a H1N1 case, but that was a full house. All systems were operating at capacity.

Historically, even normal flu seasons increase our volume. An abnormally busy flu season, in other words, threatens to push us over capacity.

At the same time, some predict that as many as 40% of us - either ourselves or with members of our families - personally could be coping with



transition for the department, the university and the hospital itself. He was a "pioneer" when he was among the first clinicians to come to what was then the Fitzsimons campus, and has been a great leader for this entire new campus.

While he will remain in his position for many months, I want to rush to note that Bob has been a terrific partner and adviser to me personally. I am already mourning his loss to our community. On the other hand, his contributions will have a lasting impact, and he well deserves the next stage in his life.

Some time before Bob leaves, Dean Krugman will announce a transition plan.

*Making things possible*

## The inadvertently forgotten

I think it's critically

this illness before it runs its course.

**Special demands.** That means we are either feeling ill ourselves or are taking PTO to care for a stricken loved one.

Whatever the reason or however severe the attrition rate among us may be, it threatens to leave us short-handed even as the community's demands on us escalate. Since we really are all brothers under the skin, such a virus doubtlessly would affect all our clinical as well as non-clinical operations.

And it would mean special demands - compensating for our co-workers' absence; overtime; pitching in in unfamiliar areas - on those of us who evade the virus.

## Preparing for a surge

As I've noted before, the hospital's Pandemic Flu Task Force (led by physicians Michelle Barron and Charlie Little) has been convening regularly since mid-March, when the original strain showed up in Mexico City.

We have been stocking inventories of supplies we'd need to treat a surge of flu patients, forging routes for finding more if we need it, posting staffing as well as clinical protocols, and finding multiple ways we can track the virus's progress.

**Swabs, masks, protocols and updates.** There also are valuable tools for coping with a pandemic on both Hub, our internal Web site, and the external site at [www.uch.edu](http://www.uch.edu). The guides on Hub are at <http://hub.uch.edu/news/2009/h1n1-information.aspx>).

The guides include clinical protocols and policies, updates on the virus's progress, instructions and reminders for how to recognize, when to test and how to test for swine flu. There are guides to what kinds of swabs to use, which kinds of masks to wear, where to get additional flu prevention and patient instruction signage for your unit, even how to sneeze and, perhaps most importantly, how to prevent the spread of the virus among our patients as well as ourselves.

**Contingency plans.** We've crafted various contingency plans that include, if necessary, repurposing areas of both the AIP and AOP, routing less-critical cases to the satellite clinics, even setting up a temporary off-site clinic in cooperation with Children's, the Medical Center of Aurora and Aurora's city government.

Certainly not least, there's a "Daily H1N1 Flu Update" on Hub, plus clinical briefings that include national swine flu developments appearing on both Hub and the external Web site.

important to recognize UCHers' great work, and I reserve space to do it despite being haunted by two ongoing worries. One, in a top-performing organization of some 4,500 employees and partners, I know I'm not aware of all the good works going on around here. The other is that I fear inadvertently leaving someone out when I'm citing big teams of people. And in the last CEO News & Views, I did.

Worse yet, it was Mark Wesling, a 30-year employee and senior systems engineer in Technology Support. Mark was an important part of the team that so flawlessly prepared and managed the complex upgrade of the IDX computer hardware during a grueling weekend in August.

I also need to thank Ross Logsdon, another member of the IDX team and the senior systems architect in Technology Services, for noting my most-unintentional

And, after all that, I encourage those who have any questions about the virus to contact Infection Control at 87987.

## Preparing yourself

I strongly urge you to make your plans, too, for elder, child and pet care on that chance that you may fall ill yourself.

There is also the possibility that you will be needed at work for extended hours. If, for example, the problem grows beyond the scope of any one hospital to treat, we would go into a "disaster mode." In that case, responsibility for minute-to-minute operations goes to our UCH "command center" that, in turn, will work with other hospital and government command centers to organize and distribute public health resources.

Tips for "What to do if you get sick" will soon be available on the Hub. They will include guidelines for when and how to return to work, how long you should take off, impacts on your productivity standards and PTO inventories, what managers should do if they have colleagues who exhibit flu symptoms, and more.



We will also be creating a bulletin board on Hub that allows you to set up exchanges to care for each others' loved ones.

## No confirmed cases here so far

With luck, the most complex scenarios will not play out for our country, our community or our hospital.

But our own Emergency Department has seen a small but increasing number of patients presenting with self-described "flu-like" symptoms and asking to be tested. As of this writing, we've seen no confirmed cases at any of our Anschutz campus facilities.

Trying to orchestrate this big, unruly group of unknown players and factors adds up to a daunting professional and personal challenge for each of us.

I think we can all feel good about how the University of Colorado Hospital community has rehearsed. Now, one way or another, the beat promises to get faster for a while.

Sincerely,

Sincerely,  


omission of Mark's name.

Bruce

## Something On Your Mind?

[Talk to me](#)

### UCH Night at the Rockies

We've had a special hospital night at Coors Field every September for three years, and this year's is going to be a big one. On September 25, the Rockies take on the St. Louis Cardinals at 6:10 p.m. If today's standings hold for the next couple of weeks, the Cardinals would be our opponent in the playoffs' first round.

I'm apparently not the only one going a little nuts about the Rockies' great season. Employee ticket sales for the game are already 20% higher than last year.

To get the special discounted tickets, go to [coloradorockies.com/groups](http://coloradorockies.com/groups), type in user name uchospital and, as your password, gorockies.

[Forward email](#)

✉ [SafeUnsubscribe®](#)

This email was sent to uch-publications@uch.edu by [talktome@uch.edu](mailto:talktome@uch.edu).  
[Update Profile/Email Address](#) | Instant removal with [SafeUnsubscribe™](#) | [Privacy Policy](#).

Email Marketing by



University of Colorado Hospital | 12401 E. 17th Ave. | Leprino Building, 10th Floor | Aurora | CO | 80045