

So our first question comes from Bud Foster at KOLD TV in Tucson. What are the mitigation measures you want the governor to impose which he is not doing now?

So as I alluded to previously and in previous press conferences, we have sent a letter to Dr. Chris in Arizona Department of Health Services outlining mitigation requests, as did the Greater Phoenix Health Care Task Force sent a letter as well. Within that were a couple of requests and recommendations that come from literature of what mitigation activities could be undertaken. Those include things such as reducing gatherings, such as enclosed environments. The list of those can be found with a copy of that letter and the [INAUDIBLE] letter that went out previously.

Thank you, Dr. Bessel. Our next question comes from Nicole Garcia at Fox 10 in Phoenix. Can you define what operating at 150% or above 100% capacity means?

So as I've spoken about before, when the health care system gets stressed by having significant volumes of patients, other resources become strained, such as our nursing staffing, our respiratory therapy staffing, and our physician staffing. When we go above 100% occupancy or when we are at 160% of ICU regular peak winter occupancy, it placed considerable strain on those resources.

In addition to that, as I've spoken about here and in previous press conferences, I also want to make sure that we understand that these COVID-19 patients are very ill. They take a lot of care, a lot of our resources, a lot of nursing time, a lot of respiratory therapy time, and a lot of physician time to be taken care of. So one COVID-19 patient is not equal to a non-COVID-19 patient.

Nicole Garcia again from Fox 10 asks, can you be more specific about ICU capacity? How many beds are open?

I do not have those numbers exactly available. We can follow up after the press conference. But what I do want to state is that we actually continue to expand our ICU capacity. We are doing things such as placing two patients in a room where normally we would have one. We continue to expand into other areas where we previously have not always had ICU patients.

So we continue to expand to meet the community need, which, again, places stress on the health care system. It requires more nursing care, more respiratory therapy care, and more physician care. We will continue to expand as best as we can. But we're asking all of you to help reduce the spread of this virus. Please, during this holiday season, shrink your circles and wear your mask. Please help us.

And another question-- Nicole Garcia at Fox 10 asks, how many ICU beds would be open but are not staffed?

I do not have that specific statistic available with me today. We can follow up and give you some additional statistics around that. But what I would say is the following. We continue to expand our ICU capacity. As I spoke about just a moment ago, we are doing things like placing two patients in a single patient room. We are opening up areas that have not previously been utilized for ICU care to meet the demand of the COVID-19 patients.

Every single one of the patients that are in our hospitals at this time are, of course, staffed. There is nursing care, respiratory therapy care, and physician care assigned to those individuals. But the strain and the stress on our health care system is significant. We need everybody to do their part. Please, as you go into the holiday season, shrink your circle and wear your mask. Please help us.

Chris Plante from channels 3 and 5 here in Phoenix asks, what is the update on the use of refrigeration trucks as makeshift morgues?

Thank you. Let me just refer to my notes here. So last press conference, we spoke about our expansion of more capacity. And I do want to be very specific on this. This is the morgue capacity for our Banner hospitals. At this time, we have about two to three times the normal bodies that we are storing. Our volume is significantly high. And about half of those are related to COVID-19-positive individuals who have died from their disease.

Colleen Sikora at 12 News here in Phoenix asks, talking to state modelers, they're expecting for the beginning of January to be worse than what we're seeing right now. With how things are right now at Banner Health facilities, what are your top concerns for patient care, staffing, and other key areas going forward?

So we also do modeling that is very much in alignment with that. It is our expectation that early and mid January, we are likely to hit the peak of this surge of COVID-19, again, right past holidays. We're going to ask all of you to help us. Shrink your circle and wear your mask.

The biggest concerns as we go into that significant surge and experience that post-holidays in January will be continued strain on our health care system. As I've already spoken about here today, we've had to take steps to reduce or stop elective surgeries and procedures. These are patients that need these procedures.

In addition to that, as we have significant more surge forecasted to happen in January, it will cause additional strain on our staffing. We've spoken about bringing external contracted labor, different models of care that we're utilizing, corporate deployment of individuals to go assist in the field. All of those tactics will be put into place to meet the demands of the surge. But you can help us reduce that surge and reduce the stress on the health care system. Please wear your mask and shrink your circle.

Nicole Garcia at Fox 10 asked two questions, so I'll ask you the first question. Has Banner had to bring in more refrigerated trucks?

As I spoke about at the last press conference, we have expanded our morgue capacity with refrigerated trucks. At this time, we have not had to bring in any other additional trucks. As I previously stated-- and I'll just refer to my notes again-- we are experiencing two to three times the normal number of bodies that we store. Again, these are for our own morgue capacity at Banner Health. About 47% of those are COVID-19-positive individuals who have died from their disease.

And the second question from Nicole at Fox 10-- can you comment on whether this surge is more deadly than the summer surge?

I can't comment on that at this moment, and I'll tell you why. Number one, when we start having an increase in hospitalizations, that is more of a moderate indicator of the COVID-19 spread in our community. Lagging behind that, our patients that go to the ICU that need to be on ventilators for those prolonged periods of time that I spoke about. And then lagging behind that is the death rate.

Because we're still surging and we have not yet hit the peak of our surge, we won't really know what the death rate from this surge will equate to. That is something that we won't know until the months of probably February or even into March. So that would be a follow-up question as we go through the surge. Again, death rate is a lagging indicator of the surge that we are experiencing, and we haven't finished our surge yet.

Tucson Weekly asks, Pima County has imposed both a mandatory mask mandate and curfew. Do you feel these actions are effective, and do you encourage other counties to impose mitigation efforts in the absence of state action?

So I do want to congratulate Pima County and the mayor of Tucson for taking mitigation efforts. We need mitigation efforts here in the state of Arizona, just as the White House Corona Task Force indicates on their weekly reports for our state. There is a ton of evidence that shows that masking will help reduce spread. There is also great literature that shows that mitigation efforts, which can include curfews, can have a good effect on reducing the spread of the virus.

I want to thank Pima County and the mayor of Tucson for taking mitigation steps and also applaud others who have done some similar activities. For instance, the Phoenix Council, Mayor Gallego, they have both taken some steps to reduce congregations, for instance in sports tournaments. All of those can have a good positive impact on reducing the spread of this virus.

Carissa Planalp from Channels 3 and 5 here in Phoenix would like to know about any staffing updates we may have at our hospitals.

So as I spoke about previously, we continue to bring in external contracted labor that are coming from out of state to assist us in the staffing of the surge. Being a holiday week, we have a little bit less number of individuals that have come to us this week, but those numbers will increase next week and the following week. I can bring some specific numbers to share with you next week.

In addition to the external contracted labor that we're bringing in to help augment staff at the bedside to take care of the surge that we are experiencing, we also continue to do upskilling of individuals. So that's maybe taking somebody who normally works on a med surg floor and helping them be able to assist an ICU nurse, for instance, in an intensive care unit setting. In addition to that, we are doing corporate deployment activities to take those of us that work in a corporate setting and get us out there to do more clinical or clinical helping hands activities. We expect to continue doing all of that for the upcoming months until we're over the surge.

Bud Foster, KOLD TV Channel 13 in Tucson asks, some hospitals have stopped elective surgeries. Where is Banner right now in terms of elective surgeries? And are you considering ending them at this time?

So as I stated previously, we have had pressure on our hospitals and we have had to already halt or significantly reduce elective surgeries and procedures. At this time we are making those decisions on a hospital by hospital basis. We continue to monitor our census hourly and daily, and expect that we will continue to have to make some additional adjustments. This is a very dynamic process and we make adjustments to best meet the needs of the community.

I do also want to reiterate that these surgeries or these procedures for patients are medically necessary. So when we have to halt those or have to delay them, there is a patient and a family on the other side of that decision who needs and wants to have that care. It is our intention to do as much of this as we possibly can while meeting the surge demand, and also as soon as we can get over this peak of the surge, to get back to serve those patients as well. It is our intention to take care of both COVID-19 patients as well as the non-COVID-19 patients, all of whom need our care. Please help us do that. Shrink your circle this holiday season and wear your mask.

Colleen Sikora at 12 News in Phoenix. Can you speak about when hospitals are running at such high capacity, how that impacts patient care?

So when our health care system is stressed with these high volumes of patients, it causes us to have to do things differently than in normal operations. For instance, I just talked about how we staff. That we stretch our ratios, that we have individuals come and do helping hands. They get up-skilled and go work in another area. Or some of us as corporate employees go and provide helping hands at the bedside. All of this creates strain and stress for the entire health care system.

We continue to provide high quality care to all patients that are coming to see us. It is our intention to continue to provide great care for those who need us. And we do want to remind you that if you need care we are a safe place to come get care. Please, if you need to go to an urgent care, if you need emergency department services, we're here for you and we do want to see you. We're here to take care of you.

Carissa Planalp again from Channels 3 and 5. Is there anything different about the types of patients hospitalized with COVID? For example, are we seeing younger individuals, people who are relatively healthy but struggling with the virus?

At this time I don't have any statistics that would say that we're seeing anything significantly different than what we have had in previous surges. As I stated in my answer previously about mortality rates, those are things that we won't know until we're many more weeks down this surge. We can bring those statistics in a future press conference, but again there's quite a significant delay.

In addition to that, what we are seeing for those that come and seek care for us is that there is really large spread in our communities. We don't know for sure where all these individuals are actually getting infected, but we do know by looking at literature and statistics that we can help reduce the spread. So please shrink your circle this holiday season and wear your mask.

Colleen Sikora, 12 News asks, while I know you've talked about some things like doubling up patient rooms, where are we on the crisis standards of care?

So the crisis standards of care was put into place-- in this example, in the state of Arizona-- in the summer, that would allow health care organizations to make modifications to how we usually provide care. As part of that, it allows us to do things such as double bunking individuals in single rooms, taking staff who might work in one particular area and have them work in another area of the hospital, and also streamline our documentation and our electronic medical records. At this time, under the crisis standards of care, we are not doing triage activities and we certainly hope to never get to that. You can help us out. Please shrink your circle this holiday season and wear a mask.

Carissa Planalp from Channels 3 and 5 asks two questions, so I will ask you the first question, Dr. Bessel. So she says, this is a follow up to your comments on staffing. When you say corporate staffers are assisting with clinical duties, what does that look like?

So in our corporate environment we have physicians like myself, we have nurses that do other types of activities as their usual and full time job. This can include things like working on policies, procedures, implementations. Working on things in our informatics electronic medical records work and the like. These are individuals that are licensed and they have a clinical background.

What we're doing as we go into the surge is we're asking those individuals, myself included, to take a pause on some of their regular duties and go out to the bedside. They're doing things like helping us do vaccinations. They're doing things like going into our hospitals to assist with patient duties. All of this is in an effort to meet the surge and the demand that's placed upon us in a way where we can best take care of patients. There is more to come on that as we go into the largest part of this surge, which we believe will hit us in those first and second weeks of January.

So the second question that she asks-- and I believe you might have already answered this, Dr. Bessel, but she does ask-- are these staffers who have medical backgrounds?

They are. So these are individuals that both have a medical or a clinical background, as well as many of them, of course, have a license or certification. And those are the types of individuals that are being redeployed to do things like vaccinations or go into the hospitals to assist with patient care or assist the staff who's doing that bedside patient care in ways that can help reduce the stress on our nurses, our respiratory therapists, and our physicians.

Thank you, Dr. Bessel. And that is the last question. So we have reached the end of our press conference. Thank you all for joining us this morning. As a reminder, a high resolution video, transcript, and any materials shared with you during this press conference will be available at bannerhealth.com/newsroom. Please allow two hours for us to post all these materials. Please send any follow up questions that you have to media@bannerhealth.com. Thank you