



A Message from Auburn Community Hospital CEO Scott Berlucchi

Auburn Community Hospital (ACH) will resume elective surgeries and medical procedures for patients this week. This decision was made as soon as the NYS Department of Health approved our plan to resume elective procedures. It was also made in careful and deliberate consultation with our physician, infectious disease experts, our medical director, and surgeons.

Given the current data and guidelines, ACH is ready to see patients who have delayed elective procedures. Since the beginning of the coronavirus crisis, ACH has sufficiently managed the number of COVID-19 cases in our facilities. Over the course of the last 60 days, the hospital has only admitted 5 positive cases of Covid-19.

ACH formed a Surgical Leadership Team weeks ago to prepare for the reopening of elective surgeries. The team's goal was to develop and implement the tightest health and safety standards that will meet or exceed the needs of our elective surgery patients.

Safety is our first priority for our patients and our staff.

To protect everyone who enters our facilities, all patients, team members and physicians are screened at the entry doors. In addition, surgical patients are tested for COVID-19 prior to surgery. The plans incorporate recommendations from the following healthcare organizations:

- New York State Department of Health
- American College of Surgeons
- American Society of Anesthesiologists
- Association of periOperative Registered Nurses
- American Hospital Association

To ensure patients can have elective surgeries as soon as safely possible, the following process developed by the NYS Department of Health will guide patients and staff on how Elective Surgery and other health care will be prioritized and scheduled:

1. General hospitals should establish a prioritization policy committee consisting of surgery, anesthesia and nursing leadership to develop a prioritization strategy appropriate to the immediate patient needs.
2. Hospitals must test all patients receiving outpatient elective surgeries and non-urgent procedures for COVID-19 and patients must test negative for COVID-19 using a

molecular assay for detection of SARS-CoV-2 RNA prior to any such surgery or procedure. The test must be administered no more than 3 days prior to the surgery or procedure. Hospitals should counsel patients to maintain social distancing as described in the directive for the 14 days before the surgery or procedure.

3. General hospitals must have adequate PPE and medical surgical supplies appropriate to the number and type of procedures to be performed, including at all stages (pre-operative and post discharge) of care associated with the procedure and the needs of the patient and health care personnel. Adequate PPE means that a hospital has at least a seven (7) day supply of PPE on hand, and the hospital's supply chain can maintain that level without resorting to contingency or crisis capacity strategies based on the Center for Disease Control's Strategies to Optimize the Supply of PPE and Equipment, or requiring distribution of PPE from government emergency stockpiles.
4. Eligible hospitals resuming elective outpatient surgeries and non-urgent procedures must ensure sufficient staffing appropriate to the surgery or procedure, and must take into consideration the time needed to repatriate staff to ambulatory and non-urgent care settings.

We understand that the COVID-19 pandemic is ever-changing, so policies and procedures will be adjusted as needed.

Remember, during the pandemic plenty of things are on hold - your health should not be one of them.

We are deeply committed to ensuring the safety of patients and team members and to making sure that patients feel comfortable coming in for their care. ACH, now more than ever, are here to care for our community.

Sincerely,

Scott A. Berlucchi, FACHE, NHA

President and CEO