August 26, 2020

To St. Michael Medical Center,

Thank you for your ongoing collaboration in containing the current outbreak at St. Michael Medical Center, Bremerton (SMMC). As you know, the Kitsap Public Health District (KPHD) has worked closely with your team since this outbreak was identified on August 14. At that time KPHD recommended prompt, open and transparent notification of all potentially affected staff and patients, broad testing throughout impacted units, enhanced screening of all healthcare workers, discontinuation of non-essential aerosol-generating procedures, and careful review of infection prevention practices. On August 21, KPHD sent a letter to SMMC detailing our recommendations going forward (see attached).

Over the last week, we have worked closely with the Washington State Department of Health to notify the public when the earlier recommended broad testing revealed the extent of spread throughout other units in the hospital. We also arranged a site visit from Washington State Department of Health Healthcare Associated Infections team, at which I participated yesterday.

In conjunction with Kitsap County's Emergency Operations Center (EOC), over fifty people have been mobilized to support efforts to get SMMC employees tested in a timely fashion and we have recommended and helped obtain testing from a regional laboratory which can provide prompt testing results. These efforts were successful in obtaining specimens for laboratory testing on more than seven hundred SMMC employees on August 25. The EOC has offered and will continue to offer to provide large amounts of personal protective equipment should you develop any need for this.

Kitsap Public Health staff is working hard to help identify all staff and patients at SMMC with confirmed COVID-19 infection or significant exposure to it. To facilitate our timely public health case investigation and response, we need the following information from your organization:

kitsappublichealth.org

IMMEDIATE, AS SOON AS POSSIBLE:

1. **An electronic list of all employees and patients who have been tested with the following details:**
- Full name, First and Last
- Staff or patient designation
- Date tested
- Test result

2. **For any individual testing positive, we also need the following:**
- Staff:
  - Personal phone number
  - Address
  - Date of Birth

- Patient:
  - Bed number(s) and hospital unit and dates on those units
  - Personal phone number
  - Address
  - Date of Birth

3. **Post to your website and update regularly, a list of all units affected and dates of potential exposure on those units. Please let us know if you are unable to do this within the next 24 hours.**

4. **Initiate communication between your Incident Commander and our Incident Command staff to discuss establishing a Unified Incident Command Structure.**

WITHIN ONE DAY OF REQUEST:

5. **We will follow up with an additional request for information related to individuals with positive COVID-19 test results to facilitate contact tracing.** For staff, this *may* include dates and shifts worked, patients care for, other staff in close contact. For patients, this *may* include dates of stay on which unit and staff caring for the patient and their PPE.

DAILY:

6. **Electronic list of inpatients with diagnosed COVID-19. List to include:**
- **Unit(s) and dates of current stay prior to transfer to COVID-19 unit**
- **Notification of date of discharge for all COVID-19 patients**
- **KPHD requests that SMMC test all patients at discharge if their last COVID-19 test was done three or more days prior. Any patient discharging to a congregate living setting, to include long term care, homeless shelter, etc., should await results prior to discharge.**

7. **Daily electronic list of staff placed under quarantine due to COVID-19 by your organization to include:**
- Full name, First and Last
- Dates of quarantine
- Reason for quarantine
- Personal phone number
- Address
- Date of Birth

IN RESPONSE TO THIS LETTER AND UPON FUTURE REQUEST:

8. **Written plan for ongoing COVID-19 testing of staff and patients. Who, when, and how often.**

9. **What does use of CDC guidelines look like in your organization? Please share any written policies and procedures for determining healthcare risk.**

10. **Policies and procedures for staff return to work following COVID-19 testing and/or exposure.**

11. **Electronic copies of all communications (email, letters, phone scripts) shared with staff or patients related to this event.**

We appreciate the complexity of this request and situation, please contact us if you need additional support.

Gib Morrow, MD MPH
Health Officer