

## Banner Health | 1-11 Press Conference Transcript\_2

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And then the second question this reporter asks, what is causing the rise, and what do ask of the public at this time?

So the rise in cases that we're seeing is related to the omicron variant. It has come into the United States, as it has in other countries around the world, in a very fast and furious rate. We are experiencing that right now, and specifically the state of Arizona is experiencing exponential increase of cases. We are not yet at the peak.

And as I mentioned in my previous comments, the vast majority of our patients who are in our hospitals with COVID right now are the unvaccinated. Approximately 90% of our sickest patients in the hospital are unvaccinated. We ask our communities to help us, and these things will help keep you safe as well.

If you're not yet vaccinated, please do so. If you are eligible for a booster, please obtain one. When you're out in congregate settings with other individuals, please wear a well-fitting mask, like a KN95. And if you do feel ill, please stay home.

Erica Carbajal from *Becker's Hospital Review* asks, are you noticing any clinical presentation trends related to omicron?

So I'll answer that in two parts. So, again, for those patients that are requiring hospitalization, what we are seeing for the most part, the vast majority of those individuals are unvaccinated. So you can do your part to avoid coming into our hospitals for COVID hospitalization by getting vaccinated and getting boosted. For those cases that are more mild, the omicron variant is presenting somewhat similarly to the other variants, with mild illness, things like a cough, a runny nose, et cetera.

And of course, we also have other winter pathogens that are with us, including influenza at this time. So you can do your part to stay safe, which is to get vaccinated, boosted, and wear a mask. And of course, if you're feeling ill, please do not go out.

Steve Nielsen from Fox 10 Phoenix asks, do you know the number or percentage of Banner employees out of work with COVID-19 right now?

I do not have that number with me today. But what I will say is that similar to what we have seen in other parts of the pandemic, when the surge occurs in the community, our own employees also get ill. So we are seeing an increase now of our team members who are becoming ill. And we ask you to do your part to help them. Please get vaccinated and boosted. Wear a well-fitting mask. And if you are not feeling well, please do not go out.

Taylor Tasler from KTAR News asks, what is the rate of COVID-19 infection for people coming into the hospital for reasons other than COVID? If so, is this impacting the hospital's care for other coronavirus patients?

So I'm going to answer this in a way that I think is what the question is about, and what I stated previously to one of the prior questions. I do not have the statistics today of who is coming in testing positive for COVID as their primary reason for hospitalization versus those that are testing positive for incidental. What I will say is that all patients who are in our hospitals have a medically necessary reason to be hospitalized.

And even if a patient comes in for something that is not a primary COVID reason and incidentally tests positive for COVID, we will continue to take precautions, and have them in a specific setting, and have our team members wear specific personal protective equipment so that they will not become infected by caring for that individual.

Nicole Feltman from *Tucson Weekly* asks, what does the returning process look like? Can you give a deeper look into what the strict process is?

I believe you're asking about the return-to-work process. So as I stated previously, Banner Health continues to look to the CDC to guide us for our responses during the pandemic. The CDC did change return-to-work criteria at the end of December, which Banner did adopt. Our current return to work process includes allowing individuals to come back to work if they are asymptomatic or mildly symptomatic after a COVID-positive test and infection on day five. Our return to work process includes those individuals going through a screening, through an occupational health process, to make sure that they are well enough to return to the workplace.

As I also stated previously and was asked by another individual, we are aware of other health care systems, both within the states that we operate, as well in states outside where we operate, who have taken additional steps to maintain adequate staffing. Banner Health has not done that at this time, but we'll continue to evaluate on a day-by-day basis our responses to the pandemic, so that we can best meet the needs of our communities who require our care.

Stephanie Innes from the *Arizona Republic* asks a couple of questions, so I will read the first one to you. You said that more than 90% of your COVID-19 patients are unvaccinated. Does unvaccinated mean they have not received a full course of a vaccine series, or does it mean they may have been vaccinated but not yet received the booster?

It means that they are unvaccinated and have not completed their series.

And then the second question from Stephanie Innes, since the booster seems to be protective against omicron, wondering if your data team is tracking which hospitalized COVID-19 patients have received the booster dose.

We do have some access to that data. And it is somewhat manual process for us to do that, so we will take that offline and see if we can pull that data for a future press conference.

Kitty Davis-Young at KJZZ Radio here in Phoenix asks two questions. I will read the first. Can you provide any numbers regarding how many nursing positions are vacant?

I don't have those numbers here today. We can follow up with you offline as well.

And then the second question, how many workers are currently out due to COVID isolation?

I don't have the exact numbers today of who is off, but I will provide some general statement around that question. So just as we have seen with other surges during the pandemic, our team members, which includes our nurses and other staff that are here to care for patients and support those that are on the front lines, do get ill at a higher rate, just like the community gets ill at a higher rate when we are surging.

And so at this time the omicron variant is surging in our marketplaces, and we are starting to experience increased illness and call-offs from our team members. As I've stated in some of the other questions here today, Banner Health continues to operate and evaluate our situation on a day-by-day basis. And we continue to manage and make adjustments to make sure that we're here to meet the needs of all of you in our communities that need care from us.

Perla Shaheen from KGUN 9 in Tucson asks, why are N95 masks necessary for this variant but wasn't for others? Are other masks insufficient?

So one thing that we've learned throughout the pandemic is that we continue to learn throughout the pandemic, and that guidelines and recommendations do continue to change and morph. That is due to more understanding about the virus, as well as the fact that we have experienced different variants that appear to operate in our communities in a different way.

What we currently know about the omicron variant is that it is highly contagious. And it's acting like an airborne transmissible disease, versus prior variants that acted more like a droplet transmissible disease. And for that reason is the reason that we have adjusted our masking approaches to this, which is why we are having our team members wear N95 masks when they're caring for those patients, because they offer more protection and are appropriate for airborne disease.

In addition to that, I would just remind all of us of where we started in the pandemic, which was severe shortage and scarcity of personal protective equipment for our team members. Back at the beginning of the pandemic we did not have enough N95s for everybody, and we had to allocate those scarce resources in a way that could best protect everybody. We have much more and better supplies than we did at the beginning of the pandemic, including the N95 masks.

Paul Ingram from *Tucson Sentinel* asks, an email went out from Banner saying that the organization could no longer cover \$300 million per pay period for travel nurses. Is Banner no longer paying for travel nurses, and how does this affect staffing issues?

I'm not familiar with the email that's being spoken to in that question, but I will respond in this way. Banner Health has thousands of external contracted labor individuals who are currently working in our care settings. This is in addition to the core staff that we also have in place to meet the needs of our communities. We expect that we will have continued external contracted labor needs throughout the rest of this surge and the winter pathogen season and, again, continually evaluate what our needs are on a day-by-day basis and manage and make adjustments accordingly.

Bailey O'Carroll from KOLD News 13 in Tucson asks, recently we have heard a lot about many hospitals being at crisis level and at a breaking point. Given that we have not reached the omicron peak, are you worried about how much worse things could get? And what is Banner doing to avoid that breaking point?

So as I've stated in my comments and throughout many of the press conferences, Banner Health continues to be very busy, and that is absolutely true today. We are busy in our clinics. We are busy in our urgent cares. We're busy in our emergency departments. And we are busy in our hospitals. We also understand that we are not yet at the peak of the omicron variant, and that will come in the upcoming weeks to the markets where we operate.

We ask all of you to help us. As I stated in my other comments, about 90% of our sickest patients who have COVID in our hospitals are unvaccinated. About one third of our patients in our hospitals have COVID. You can help us not reach that breaking point, avoid the breaking point, push it off into the future, by helping to take care of yourself. Please, get vaccinated if you have not yet done so. If you're ready for a booster and you haven't gotten one, please do. Wear a well-fitting mask, like a KN95. And please, if you are feeling ill, stay home.

Brittini Thomason from *Arizona's Family* asks, is Banner following the crisis mode set forth by the CDC for work restrictions for employees?

I'm going to answer it this way, which I think is what the question is, is Banner Health is following the CDC change for return to work for health care workers at the crisis level of staffing. That includes what I spoke about previously on another question of a return-to-work process that allows individuals who have tested positive for COVID, who are asymptomatic or mildly symptomatic, to return on day number five after being screened through our occupational health department.

Nicole Feltman from *Tucson Weekly* asks, what is your comment on the open letter health care workers have created to address the health care system crisis in Arizona's hospitals?

I have not seen that document recently. So if we want to provide a comment to that, please send that to our Public Relations department, and we'll take a look at that letter.

Perla Shaheen from KGUN 9 in Tucson asks, what is considered a medically necessary surgery?

Thank you. We have spoken about that in some of our other press conferences. And I want to reiterate what the surgeries are that we do at Banner Health. These are medically necessary surgeries and are scheduled ahead of time to fit that definition of elective surgery. We are not doing cosmetic surgeries at Banner Health hospitals.

The medically necessary surgeries are things like individuals who need joint replacements who are under severe pain, individuals who may have been diagnosed with breast cancer who need a mastectomy, individuals who may be having chronic abdominal pain and are found to have gallbladder disease and need their gallbladder removed. It's just a short list of example of medically necessary surgeries that we perform in our hospitals, both before the pandemic as well as during the pandemic. We ask you to help us make sure that we can maintain all of our services to patients who need us by getting vaccinated or boosted if you are able to.

Lindsay Walker from *Independent Newsmedia* asks, does Banner track how many hospitalized COVID-19 patients also have comorbidities?

Yes. We maintain a problem list for all patients that come in. That includes their other illnesses, as referred to in your question about comorbidities.

Brittini Thomason from *Arizona's Family* asks, is Banner allowing COVID-positive patients to get surgeries while they are still positive for the virus?

Yes, there are some situations where patients have COVID or test positive for COVID that need an emergent surgery. And so individuals who are in that type of situation will proceed with surgical care if needed. If a patient can have their surgery delayed until they recover from their COVID illness or COVID infection, that is always more ideal for the patient, as we know that individuals that go into a surgical procedure with any type of infection, COVID included, will generally do better and have a better recovery if they can delay their surgery until they are no longer infected.