Patient safety & COVID-19 in South Korea

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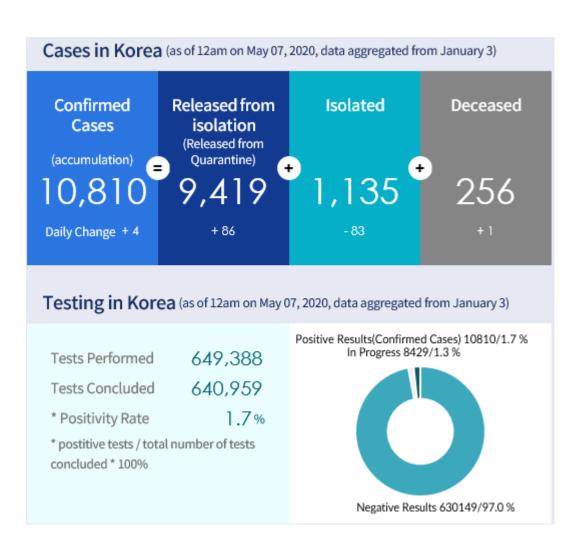


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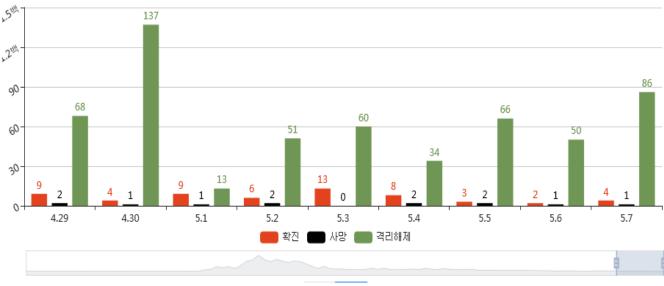
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Current Covid-19 in Korea



대한민국 코로나19(COVID-19) 추이

총 확진자: 10,810명, 사망: 256명, 격리해제: 9,419명 질병관리본부 2020-05-07 00:00 집계 기준



confirmed cases

deceased

released from isolation





Seoul

Capital city of Korea 24 boroughs

Population: 9,736,962

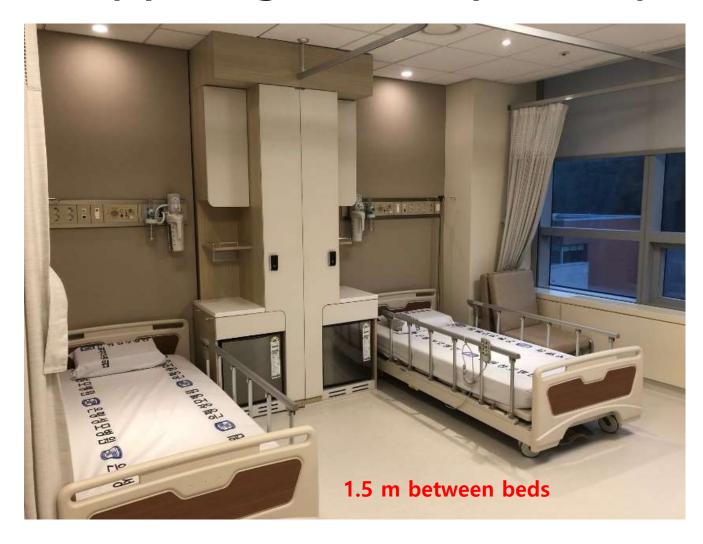
Eunpyeong-Gu

Northwest part of Seoul Population : 478,019

Organ Transplantation within 100 days after



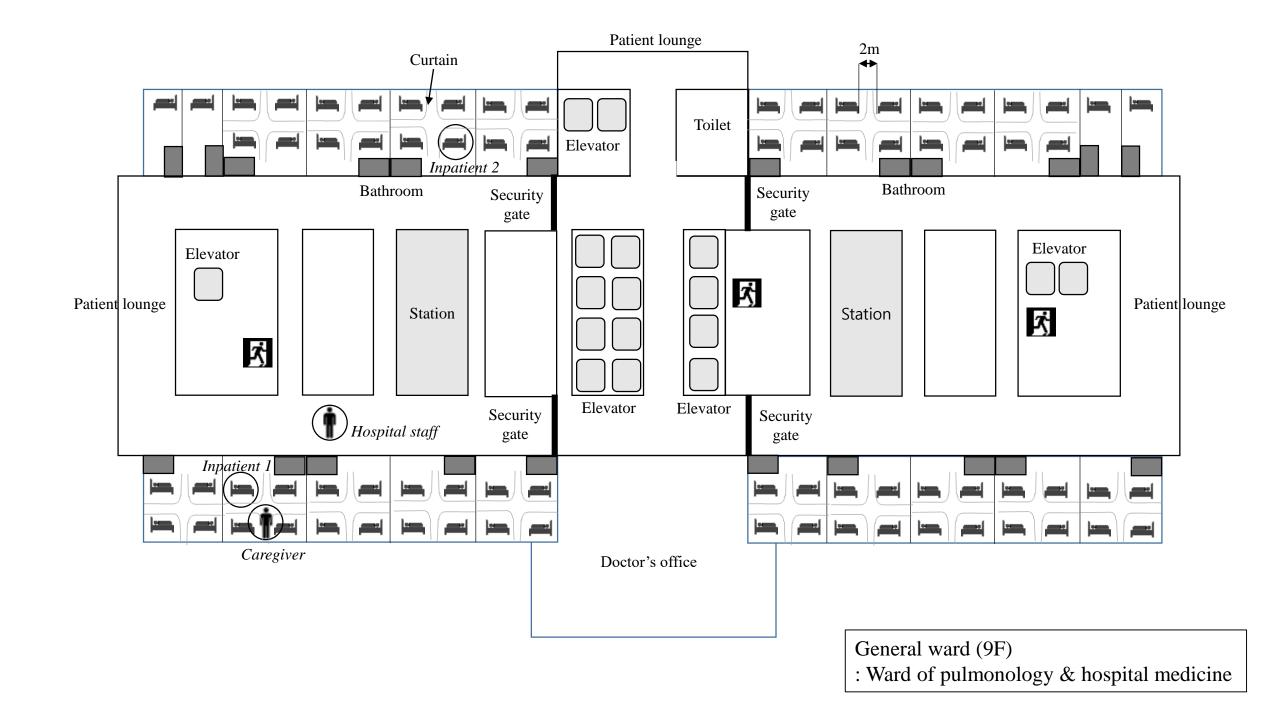
| | Types | No. Beds | Remarks |
|----------------|--------------------------|--------------------|---|
| Permitted Beds | 4 beds in a room | 672 beds/168 rooms | |
| | VIP room | 33 beds | |
| | Isolation room | 35 beds | 5 negative pressure rooms |
| | Room for HSCT | 2 beds | |
| | ICU | 64 beds | MICU 12, SICU 10 CCU 10, NCU 14 PICU 3, NICU 15 (3 negative pressure rooms |
| | Total | 778 beds | |
| | Operation rooms | 19 rooms | 1 or 2 negative pressure rooms |
| | Emergency medical center | 36 bed | 2 negative pressure rooms |

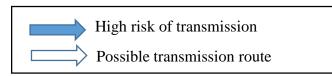


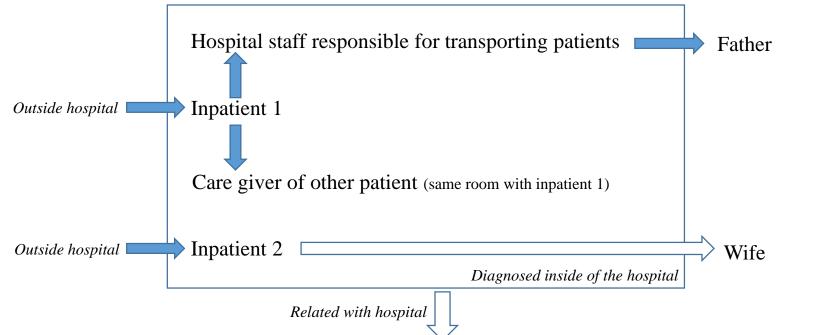
- Most common type of hospital room (4 beds in a room)
- Most patients cared by caregiver by hired by themselves

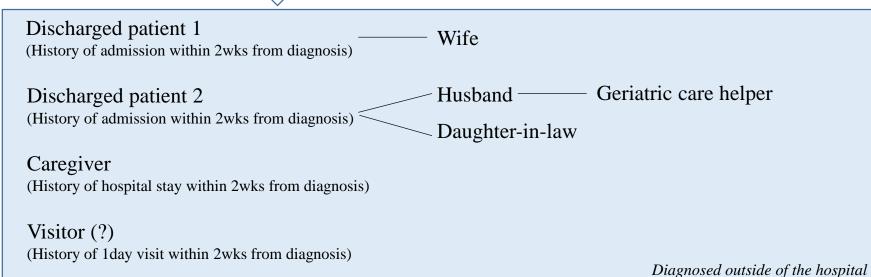
Total closure of hospital

- Period : Feb 21, 2020 ~ March 8, 2020 (17 days)
- Cause: 4 cases of Covid-19 diagnosed in the respiratory diseases ward
 - 2 community acquired Covid-19 patients (#1, #2) in the respiratory disease ward who admitted in early & mid Feb.
 - 1 hospital staff (transporter of patients)
 - 1 caregiver of other patient in the same room of patient#1









During closure

- Every event was controlled by Covid-19 response headquarter (composed of government and hospital members)
- RT-PCR was done for all in-patients, health-care personnel, other employees, and caregivers of each patient
- Application of enhanced infection control practice by KCDD guidelines
- In-patient management (including caregivers)
- Management of all employees
- Development of treatment protocols for suspected or confirmed cases in various departments
- Prepare the ward for Covid-19 confirmed patients
- Education of hand hygiene, PPE and new guidelines
- Mock training for various situation

Covid-19 Response Headquarter (hospital side)

Comprehensive management Team

Reopening Preparation Team

In-patient management

Out-patient management

EMC management

Cleaning & disinfection management

Visitor management

Infection Control Surveillance Working Group

Monitoring team #1

Monitoring team #1

Infection Control Team

Comprehensive ICT team

Employee ICP team

In-Patient ICP team

Administrative Support Team

Planning team

Human resource team

General affair team

Information management team

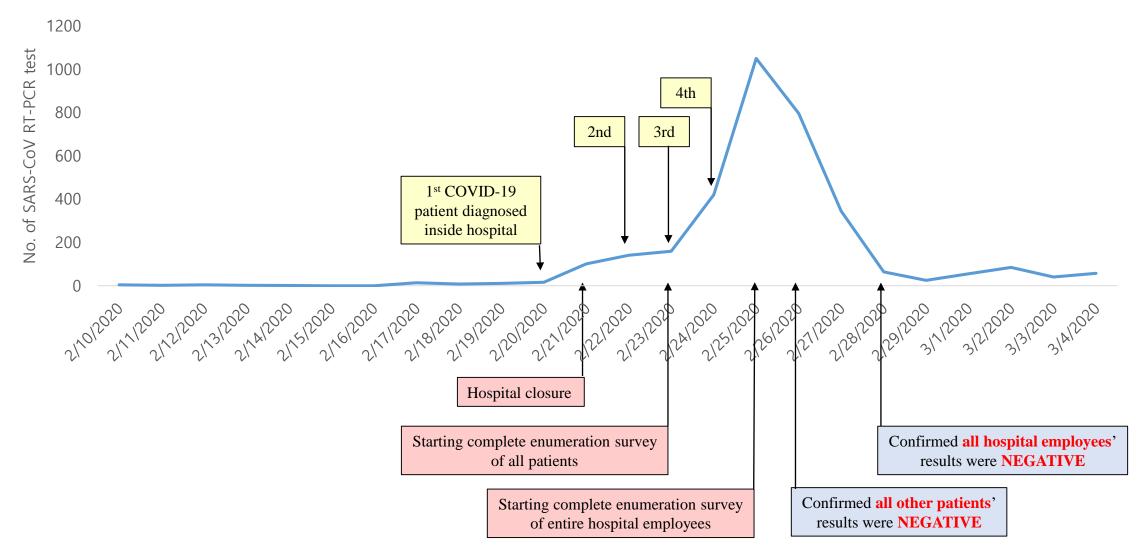
Information security team

Public relation & marketing team

Purchase management team

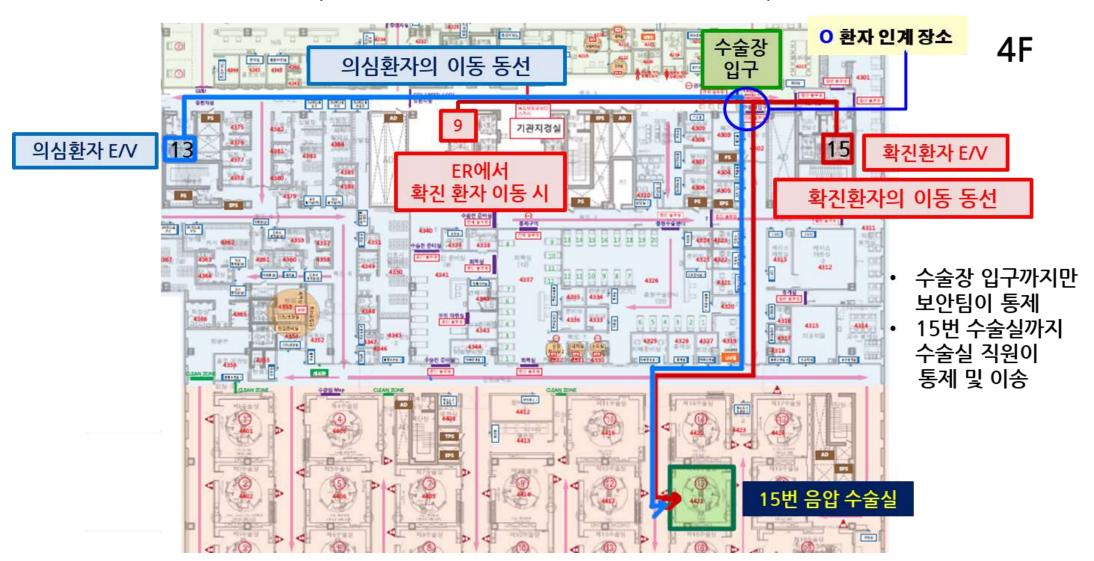
Care expenses management team

RT-PCR for all in-patients & employees after detection of Covid-19 patients in hospital



New protocols

Ex) Route of suspected (blue) & confirmed (red) cases to operation room



New protocols

Hemodialysis room

코로나바이러스 강염증-19 지칭

인공신장실 코로나-19 확진환자 프로세스

| 朝 | 48 | |
|-------------------------|--|--|
| 경사 경소 | CRRT: 해당병동(응급의료센터, 83병동) 음압격리실에서 시 행 HD: 추후 논의해정 • 확진과 발생시 83병동에는 투서용 위한 패권시설이 없어 이동용 투석기를 여용한 투석진명은 여러용 | |
| 개인보호구 작용 | 구 착용 역료관: Level D 착/달의 장소: 음압격각실 전실 | |
| 기구 및 물등관리 | 열회용 물품사용으로 사용 후 배기 투석기: 건실에서 밀배용기 표면 재야염소산나트륨 (1000ppm)을 적신 타슈로 표면소독 | |
| 환경관리 의료제기문 세탁문 관리 | 응급에로센터, 83병동 자침에 따름 | |

Operation room

코로나바이러스 감염증-19 지침 수술실 코로나-19 확진환자 프로세스



수술설 입실 후 음압 베드 겉부분을 표면소독하고 복도 대기(수술실 감염 표지만 표식)

| 함옥 | 149 | |
|--------------|--|--|
| 개인보호구 작용 | 수술, 마취 경역인력 : Level D + PAPR(2시간 이상 수술) 용품 Support 인력 : Surgical mask, 모자 | |
| 가구 및 물품관리 | 수술에 필요하지 않은 물품은 이동, 이동 불가시 비닐로 덮음 가능한 1회용 기구를 사용하고 재사용 기구는 소독 후 밀군 ① 바이오스팟(1000ppm)을 작신 타슈로 1차 오염 제거 ② 오염기구 전용용기에 담아 중앙공급실로 운반 | |
| 환경관리 | ① 차마염소산니트룹(1000ppm)으로 수술실 바닥과 환경 청소 ② 이동 불가한 수술실 물품, 장비는 모두 비닐로 포장 ③ 환자 퇴실하고 소독배기 전환 후 차마염소산나트룹(1000p 으로 수술실 바닥과 환경 청소 ④ 필요 시 훈증 소독 의회 | |
| 의료폐기물 | 격리의료체기물로 처리 체기물 무입 전과 후, 전용용기 같면 총 3번 소득처리 후 "교로나" 표 하여 체기물 보관설로 이동 | |
| 세탁을 관리 | 일회용 시트 사용 등 제략을 발생을 최소학 설 불가되하게 발생할 경우 격려의로레기울로 레기 | |
| 검색 관리 | 3중 모장 및 걸면 소독 후 '코로나 -19' 표기 | |

্বি গাঁৱপাৰ প্ৰত্যাপ্ত বাংলার

Angiography room

혈관조영실 코로나-19 확진환자 프로세스

코로나바이러스 감염증-19 지침



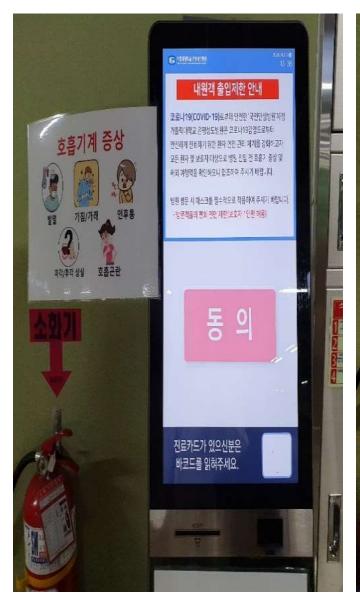
• 화자 시속 후 이송진임 이게 저 유안돼도 건보부유 표미스도하고 이게(이동 시 주비오면반지)

| 항목 | 48 | | |
|-----------|---|--|--|
| 개인보호구 착용 | 사술참여 의료전 : Level D, 납고균 또는 face shield, (소요시간 2시간 이상일 경우 PAPR) 조정실 : Dental mask, 모자 환자: 이동 시 응압베드 이송직원: Level D 보안직원: N95마스크, AP가운, 경갑 1) 가능한 한 일회용 기구를 사용하고 테기 2) 사술실 내에는 필요한 의료기구 및 물품만 최소화로 배지 3) 멸균의뢰 의료기구 ① 바이오스팟(1000ppm)을 직신 티슈로 1차 오염 제거 ② 오염기구 전용용기에 담아 중앙공급실로 운반 | | |
| 기구 및 물풍관리 | | | |
| 환경관리 | 자아염소산나트룹(1000ppm)으로 표면소독 필요 시 훈증 소독 의뢰 | | |
| 의료폐기물 | 제리의료폐기물로 처리 폐기물 투입 전과 후, 전용용기 같면 총 3번 소독처리 후 "코로나" 표기 하여 폐기물 보관실로 이동 | | |
| 세탁물 관리 | 일회용 시트 사용 등 세탁을 발생을 최소화 불가리하게 발생할 경우 격리의료배기물로 배기 | | |

After reopening – at OPD

- Questionnaire before enter the hospital by KIOSK or written form
- Check body temp. before enter
- Screening clinic (triage) for Covid-19 (neg. pressure facility)
- Respiratory disease clinic for patient who has not infected or not suspicious of Covid-19 (neg. pressure facility)
- Usual care who has no epidemiological relevance and no Covid-19 associated symptoms
- Code APPLE for alert and prompt response at OPD who has fever or respiratory symptoms found at out-patient zone or laboratory area

KIOSK





Questionnaire for foreigners

For COVID-19 Visitor Questionnaire Updated as of April 23, 2020

The safety of our patients, our employees and visitors remain Europyeong St. Mary's Hospital's overriding priority. As the coronavirus disease 2019 (COVID-19) outbreak continues to evolve and spreads globally, Our hospital is monitoring the situation closely and will periodically update hospital guidance based on current recommendations from the Korean Centers for Disease Control and Prevention.

Pursuant to Article 11 and Article 76-2 of the Act on the Prevention and Management of Infectious Diseases (information request, etc.), personal information of patients and their guardians is as follows for prevention of new coronavirus infection, prevention of infection transmission, epidemiological investigation, etc. We want to collect, use and provide it to third parties.

| | ☐ Foreigner registration number or | | | |
|---|------------------------------------|--|--|--|
| Name: | □ Passport number | | | |
| | | | | |
| Address in Korea | Personal phone number | | | |
| | | | | |
| Self-Declaration by Visitor | | | | |
| 1. Have you experienced and cold or flu-like symptoms? | | | | |
| A. Fever (37.5°C higher) □ Yes (body temperature: °C), □ No | | | | |
| Did you take any fever reducer? □ Yes □ No | | | | |
| B. Do you have respiratory symptoms? | | | | |
| □ Yes [□ cough, □ difficulty breathing, □ phlegm, □ sore throat] □ No | | | | |
| C. Do you have symptoms of taste or smell disorders? | | | | |
| □ Yes □ No | | | | |
| 2. Have you and your cohabitants returned from any of the countries, or were hospitalized at a | | | | |
| hospital of domestic collective outbreak areas(Daegu, Gyeongbuk) or Busan Medical Center within the | | | | |
| last 14 days? | | | | |
| □ Owner □ Cohabitant | □ Yes □ No | | | |
| 3. Are you or your cohabitant a Shincheonji churchman? | | | | |
| ☐ Owner ☐ Cohabitant | □ Yes □ No | | | |
| 4. Have you and your cohabitants had close contact with or cared for someone diagnosed with | | | | |
| COVID-19 within the last 14 days? | | | | |
| □ Owner □ Cohabitant | □ Yes □ No | | | |
| | | | | |

Personal information shall be collected and used without the consent of the information subject pursuant to Article 15 (1) 2 of the Personal Information Protection Act.

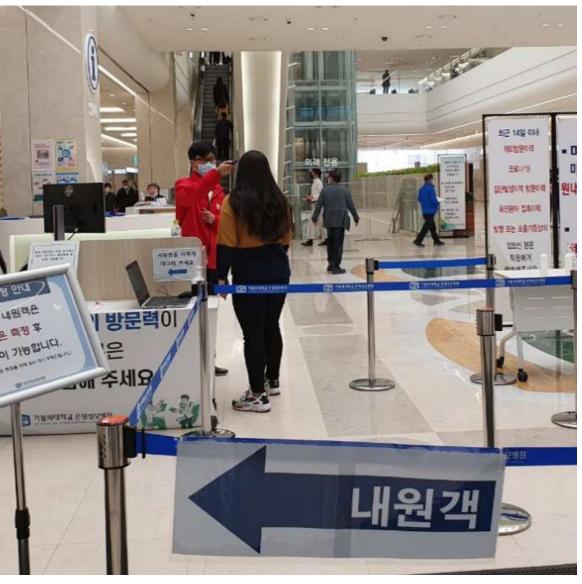
The above information was written by you as true, and you can take legal responsibility for the false facts, and we will discard it after achieving the purpose of use.

Date:

^{가톨릭대학교} 은평성모병원

Checking body temp.



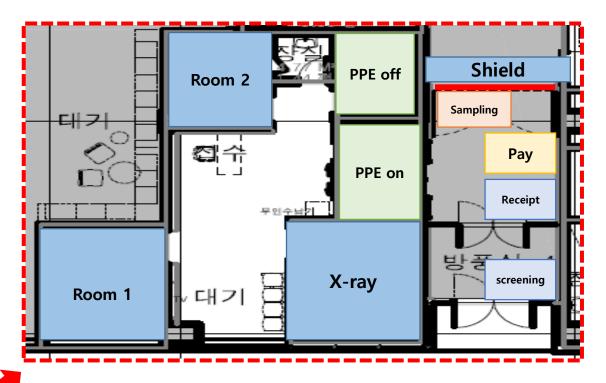


Triage for COVID-19



Respiratory disease clinic (temporary)





- Inside the hospital building
- Negative pressured facility of whole area
- Prepared for infectious diseases patients from the design stage

After reopening – at wards

- Pre-admission RT-PCR & chest PA within 72 hr before admission
- Ward for patients who has respiratory diseases with negative Covid-19 RT-PCR
- Permitted only 1 caregiver who tested RT-PCR
- No in-patient visits
- In-patient management (including caregivers) who has new fever or respiratory symptoms or pneumonia
 - immediately isolate and RT-PCR and chest X-ray again

Ward for Covid-19 confirmed patients

- 4 negative-pressure single rooms (with anteroom) in restricted ward
- Educated and dedicated medical staff
- 5 patients (4 discharged, 1 in hospital) treated
- Educate and monitoring donning & doffing of PPE
- Enforced management of environment
- Periodic RT-PCR and antibody test for health-care personnel



After reopening – employees

- Wear mask properly! Always!
- Wash hands as frequently as you can!
- Immediate report if fever or respiratory symptom
 - exclude from work and test (RT-PCR & chest PA) at triage clinic promptly
- Repeat educate and training
- Postpone or stop all conferences in the hospital
- Keep social distancing out side the hospital

PPE education & mock training













미화

After reopening - monitoring

- ICC (Infection control coordinator) working group
 - hospital rounding 2 times per week
 - monitoring performance of new protocols, enforced infection control practice etc.
 - feed back to each dept. and monitoring improvement





After reopening – environment manage

Cleaning and disinfection by KCDC guideline



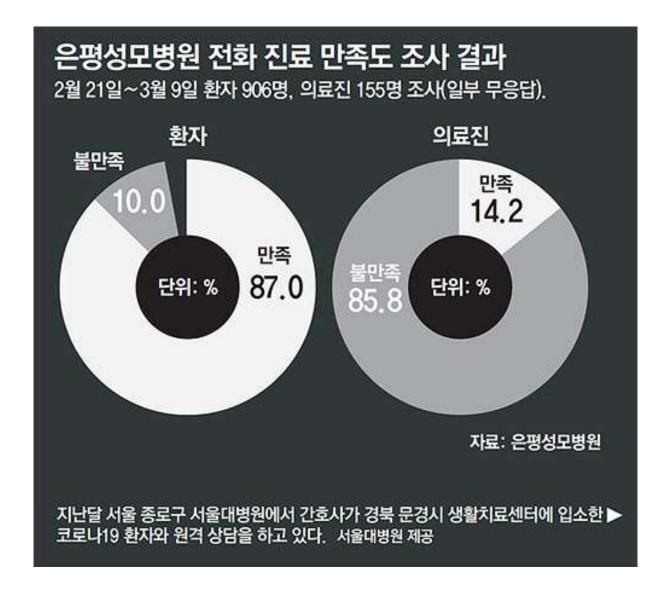




Dilemma - patients

- Reluctant to visit the hospital due to excessive concern about the risk of Covid-19
- → Treatment of severe, urgent illness maybe delayed
- Resistance or complaints about the RT-PCR test for hospital use
- Not permitted caregiver
- → As in Korea, the likelihood of accidents in hospitals increases in hospitals that require caregiving by guardians.
- Telemedicine
- → Certain parts are helpful for patient care and patients are satisfied, but safety needs to be systematically supplemented.

Telemedicine



Duration: 21. Feb ~ 9. Mar

Survey target: telemedicine serviced

during total closure

Patients (n=906): 87% satisfied

Doctors (n=155): 14% satisfied

http://www.donga.com/news/article/all/20200502/100883349/1

Dilemma – hospital workers

- Increased fatigue
 - Combine their professional work with circular work (eq. triage clinic)
 - Heavier education schedule about new protocols & guidelines
 - Not permitted academic meetings
- Anxiety about being infected during work in hospital
- Worry about their family members esp. who works in the Covid-19 ward
- More strongly recommended social rules than general population
- Not enough support for their mental, financial and physical support

Dilemma – hospital executives

- How to supply the necessary medical equipment without shortage
 - some PPEs are breathtaking esp. N95 mask, long-sleeve gown
- How to overcome financial difficulties in hospital management, in particular, temporarily closed hospital
- How to boost employee morale in a stagnant atmosphere
- How to keep and promote hospital's safety
- How to prepare the coming 2nd wave
 - making and managing more safe zone in the hospital &
 - hire and train more specialized staff for emerging infectious diseases

