

They continue to provide this care while simultaneously preparing for the potential of receiving more COVID-19 patients.

"The VA has been very progressive in its approach to the COVID-19 pandemic," Cari said, pointing to the many rooms converted to negative pressure protective environments. Ongoing training and education, and providing the nursing staff with powered air-purifying respirator systems when working with COVID-19 patients, help ensure both staff and patients are protected.

"Plenty of staff and support staff are available to help properly don and doff all equipment," Cari added. "All staff have been trained in the proper way to use the PPE and be 'the expert observer' for the staff in the COVID-19 rooms."

Working to help veterans during a global health crisis isn't where Cari envisioned herself at the onset of her career path, yet she said she feels like "my entire life has been preparation for this work at the VA."

Her original plan was to design prosthetics as an electrical engineer. Her desire to have more direct contact with patients led her to a physician assistant program instead. Cari went on to become a certified nurse aide, an EMT and a home health aide before leaving the health care field for a period of time, which included raising and homeschooling her children.

When her eldest son joined the Marines and was deployed overseas, she said she wanted to better understand the military and decided it was time to serve veterans.

Her personal journey has, indeed, positioned Cari for the work of a lifetime at the VA during the COVID-19 pandemic. It is a daily learning process, but those days of simulations now serve her well in her current role.

"I am used to a great deal of information being taught and applied immediately," Cari said.

The VA has also been focused on following Centers for Disease Control (CDC) guidelines and supporting staff in adapting to them.

"We have all had to be flexible to deal with the daily changes," said Cari.

New pandemic-related protocols — all based in CDC advisement and research - are put into place as quickly as possible after they are received. The VA education department and directors provide videos, fliers, one-on-one instruction and other reference materials to keep staff up to date.

As the situation continues to unfold, however, there are still many unknowns. To cope with this, Cari turns to even more education.

"I spend a lot of my days off watching videos, taking webinars and reading articles from the American Nurses Association, National Institutes of Health ... and other medical professional organizations with hope of finding evidence-based ideas to treat the uncommon presentations of this virus," said Cari.

With the landscape evolving so rapidly, the entire staff works as a team to support each other "not just with the changes, ideas or with our daily tasks," said Cari, "but also when we feel discouraged if a patient got sicker and had to be sent to the ICU, or that we just couldn't help."

Cari and her colleagues do everything they can to keep patients connected with their families as the visiting regulations have become stricter.

"It's hard for them to not be together during a scary situation," she said. "I spend more time on the phone with families keeping them involved and updated, and a lot of time using FaceTime so they can visit."

She takes comfort in her own family. "My kids are very proud of me," Cari said. "Sometimes they fear for my health and theirs, but they are mostly proud of their mom."

To protect himself, Cari's significant other moved out of their apartment. For her own protection, Cari takes several precautions after completing a shift.

"I change my shoes three times before getting home, "she said. "And I strip my scrubs off before I enter the apartment to immediately shower. I sanitize everything before I bring it in, even my keys."

Despite the current uncertainty, Cari is energized about nursing and her future. In a post-pandemic world, she has her sights set on joining the VA disaster team (the Disaster Emergency Medical Personnel System), which helps the hardest hit areas.

Resolved, she is already in the process of applying.

"I am doing exactly what I wanted to be doing, and will be doing it until I can't anymore," she said. "I have been training my whole life for this."



Cari Gavin (L) with classmates and faculty member Joann Sands (center) at the 2018 NY Hope exercise organized by the Consortium for Humanitarian Service and Education.

UB SON ALUMNA AND HOSPITAL COO'S

MISSION DURING COVID-19

-By Terra Osterling

At the time of Dorothy Urschel's interview, New York state was five weeks on-pause as COVID-19 continued to grip the world.

For many years, **Dorothy Urschel**'s **+---** email signature was simply: "For our patients, Dorothy."



This uncomplicated personal mission remained constant throughout her three-decade career, but perhaps no more poignantly than now — Dorothy Urschel, DNP, MS, MBA, ACNP-BC, FNP-BC, RNFA, CCRN, NEA-BC, became COO of Columbia Memorial Health on Jan. 1 of this year.

Within weeks, the COVID-19 pandemic became a critical issue.

Urschel's years in education — she earned her Doctor of Nursing Practice degree from University at Buffalo, where she was previously an adjunct professor — taught her to think in a reality-based way and to expect a pandemic eventually. But nothing, she said, could have fully prepared her for COVID-19.

"Organizationally speaking, this is by far the most difficult situation I've had to deal with, personally and professionally," she said.

When she began her career 30 years ago as a nurse and nurse practitioner in critical and acute care, Urschel cared for HIV and AIDS patients. She sees some parallels in terms of not yet fully understanding the virus, how it spreads, and being extra cautious with personal protective equipment (PPE) and personal cleanliness. But COVID-19 is vastly different.

"For now, we are focused on basic symptomatic treatment and trialing different treatments," she said, "but we are dealing with something that needs antibody testing."

In her role as COO, Urschel connects
Columbia Memorial Health system with its
affiliate offices, clinics and laboratories.
Promoting patient service and quality is at
the foundation of her core responsibility of
contributing to the development of strategic
goals and objectives for the hospital
system, which is located south of Albany,
New York. Now her work guiding all staff
in "lockstep" service to the community has
taken on new meaning.

"We have a great need for critical care nurses and physicians, as well as for highly-trained medical nurses, so we staffed-up and redeployed staff to help in other areas," said Urschel. Columbia Memorial Health has set up COVID-19 testing centers and ramped up telemedicine to continue to serve all other patient needs as appropriate. "We had to quickly become agile," she added.

While the influx of COVID-19 patients was surging, the norm was executive leader conference calls seven days a week, often hourly, with state agencies, Gov. Andrew Cuomo and other regional hospitals. These included managing guidelines and directives coming from the Centers for Disease Control (CDC), Healthcare Association of New York State (HANYS) or World Health Organization (WHO), and region-based calls to put together plans of action. It has been common for rapidly changing guidelines to require attention

mid-call as the entire medical system across New York evaluates what to do next.

"We needed to work together to be efficient and to not confuse patients," said Urschel as she described regionalizing care standards and supply efforts.

It was a daily learning process.

"One lesson learned was that the supply chain was not as robust as we thought," said Urschel.

Columbia Memorial Hospital, normally a 192-bed facility, established two COVID-19 units: one 10-bed ICU unit and one 24-bed general medical unit. Both units are — by state mandate for a surge capacity plan — prepared to double in capacity if necessary. The hospital also moved to increase stocks of PPE and added negative pressure rooms and equipment.

This efficient response positioned the Capital Region to be the first to take patient transfers to relieve the pressure on New York City hospitals, with many patients receiving care at Columbia Memorial Hospital.

Urschel noted all these efforts required everyone.

"A hospital is not run by one person," said Urschel. "It is a cast of thousands — everyone from housekeepers to doctors, putting their lives at risk and doing their jobs in unison."

She works every day to support them all, including nurses who are holding patients' hands and using their personal devices to keep patients connected with families.

"I'm so proud of the people I work with," she added. "This team brings tears to my eyes."

