

# **Urgent COVID-19 Prevention: Safety and Health communication**

As Nantucket Cottage Hospital's President and in lock step with our Chief Medical Officer Dr. Diane Pearl, we know there is some confusion about what to do next in the midst of this unprecedented response to the outbreak of the coronavirus (COVID-19) and widespread social disruption. To that end, this is our blended and well-informed opinion with insight from Asaf Bitton, MD, Assistant Medical Director of Internal Medicine at Brigham and Women's Hospital, regarding steps we must take together as a community moving forward.

What we do, or don't do, over the next week will have a massive impact on the trajectory of coronavirus on Nantucket. We are only about 10 days behind Italy and generally on track to repeat what is unfortunately happening there, as well as much of the rest of Europe very soon. At this point, containment through contact tracing and testing is only part of the necessary strategy. We must move to pandemic mitigation through widespread, uncomfortable and comprehensive social distancing. That means shutting down work places (as much as possible), group gatherings and public events. It also means making daily choices to stay away from each other as much as possible to Flatten The Curve.

Our regional health system, and our island hospital in particular, simply will not be able to cope with the projected numbers of people who will need acute care should we not muster the fortitude and will to socially distance each other starting now. Our new community hospital is very well suited to delivering routine care and standard surgeries and procedures, but is not an Intensive Care Unit. Even moderate projections suggest that if current infectious trends hold, our capacity (locally and nationally) may be overwhelmed in the near future. Thus the only set of interlinked strategies that can get us off this concerning trajectory is to work together as a community to maintain public health by staying apart.

So what does this enhanced form of social distancing mean on a daily basis, when schools are cancelled?

We can suggest the following:

1. **No playdates, parties, sleepovers, or families visiting each other's houses.** This sounds extreme because it is. We are trying to create distance between family units and between individuals across those family units. It is uncomfortable, especially for families with small children or for kids who love to play with their friends. But even if you choose only one friend to have over, you are creating new links and possibilities for the type of transmission that all of our school/work/public event closures are trying to prevent. The symptoms of coronavirus take 4-5 days to manifest themselves. Someone who comes over looking well can transmit the virus. Sharing food is particularly risky - I definitely do not recommend that people do so outside of their family. We have already taken extreme social measures to address this serious disease - let's not actively co-opt our efforts by having high levels of social interaction at people's houses instead of the schools. Again - the wisdom of early and aggressive social distancing is that it can flatten the curve, give our health system a chance to not be overwhelmed, and eventually may reduce the length and need for longer periods of extreme social distancing later (see what has transpired in Italy and Wuhan). We need to all do our part during these times, even if it means some discomfort.
2. **Take walks/runs outside, but maintain distance (ideally 6 feet between people outside your family).** Try not to use public facilities like playground structures as coronavirus can live on plastic and metal for up to 3 days, and these structures aren't getting regularly cleaned. Try not to have physical contact with people outside of your family. Going outside will be important during these strange times, and the weather is improving. Go outside every day if you can but stay physically away from others. Try not to have kids play with each other (even outside) if that means direct physical contact. Even basketball or soccer involve direct contact and cannot be recommended. If people wish to go outside and have a picnic with other families, we strongly recommend keeping distance of at least 6 feet, not sharing any food at all, and not having direct physical contact. Invariably, that is hard with kids, so these shared, "distant" picnics may be tricky.

Do not visit nursing homes or other areas where large numbers of the elderly reside, as they are at highest risk for complications and mortality from coronavirus. We need to find alternate ways to reduce social isolation in these communities through virtual means instead of physical in-person visits.

3. **Reduce the frequency of going to stores/restaurants/coffee shops for the time being.** Of course trips to the grocery store will be necessary, but try to limit them and go at times when less busy. Consider wearing gloves (not medical - but perhaps washable) and of course washing hands before and after really well. Leave the medical masks and gloves for the medical professionals - we need them. Maintain social distance from folks. Take-out meals and food are riskier than making food at home given the links between the people who prepare food, transport the food, and you. It is hard to know how much that risk is, but it is certainly higher than making it at home.
4. **If you are sick, definitely stay home and contact a medical professional.** If you are sick, you should try isolate yourself from the rest of your family within your house as best as you can. If you have questions about whether you qualify or should get a coronavirus test, you can call your primary care provider. Don't just walk in to the clinic - call first. Obviously if it is an emergency, call 911.

We realize there is a lot built into these suggestions, and that they represent a real burden for many people, businesses, and communities. Social distancing is hard and may negatively impact others, especially those who face vulnerabilities in our society. We recognize that there is structural and social inequity built in and around social distancing recommendations. We can and must take steps to bolster our community response to people who face food insecurity, domestic violence, and housing challenges, along with the many other social inequities.

We also realize that not everyone can do everything. But we have to try our absolute best as a community, starting today. It is a public health imperative. If we don't do this now voluntarily, it will become necessary later involuntarily, when the potential benefits will be much less than doing so right now.

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