

Responding to Disruptive Events

EXAMPLES FROM THE 2019-2020 COVID-19 PANDEMIC

Associations Bringing out the Best

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**Responding to Disruptive Events:
Examples from the 2019-2020 COVID-19 Pandemic
Updated 04/14/2020**

This is an eclectic gathering of ways in which associations innovated to provide information, programs and services to assist members and the broader community during the Coronavirus pandemic of 2019-2020. ***While specific examples may not be relevant to others, the underlying themes are universal.***
This examples in this document are intended for potential use in subsequent .orgSource content.

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Seek collaboration: You can't do it alone

Organizations should explore collaborations to address common issues and overlapping constituencies. Each participating organization in a collaborative should build on its own strengths while complementing those of other organizations.

The Society of Critical Care Medicine (SCCM) and the American Society of Anesthesiologists (ASA)

<https://www.sccm.org/disaster>

Two associations whose members are directly involved in the care and treatment of patients formed a collaboration to address the COVID-19 crisis. Key elements of their collaboration are:

- Rapid development of focused training for anesthesiologists. We have created a joint work group consisting of representation from ASA's Committee on Critical Care Medicine, SCCM's Anesthesiology Section, and the Society of Critical Care Anesthesiologists.
- Expansion of critical care capacity by conversion of anesthesia machines to ventilators. This will include development and communication of technical requirements and training resources as well as outreach to manufacturers. These activities will be carried out by the joint work group and supported by equipment experts from ASA and the Anesthesia Patient Safety Foundation.
- Development of training resources for respiratory therapists.
- Initiative to identify anesthesia machine capacity outside the hospital setting that can be converted to increase ventilator capacity. This includes ambulatory surgery centers, research facilities, and veterinary facilities.
- Addressing the shortage of personal protective equipment through coordination of guidance to members and advocacy organizations for adequate supplies.

An example of an initial outcome of their collaboration is a Consensus Statement on Multiple Patients Per Ventilator (<https://www.sccm.org/Disaster/Advocacy/Joint-Statement-on-Multiple-Patients-Per-Ventilator>).

Provide timely, relevant and reliable information

When disruption occurs, members should be able to turn to their association for information they can trust. While this may include information reposted from other sites, it also should include timely, relevant and reliable information tailored to the specific needs and concerns of the membership.

American Speech-Language-Hearing Association (ASHA)

Source: [COVID-19 and Audiology: Closed Practices, Empty Campuses, Halted Research](#) appeared first on [Leader Live — Happening now in the speech-language-hearing world](#). March 31, 2020 (also sent to members via email).

Included links to a variety of knowledge resources included those related to telepractice and social distancing resulting from COVID-19:

ASHA: Telepractice (COVID-related)

[Telepractice Resources During COVID-19](#)

[5 Steps to Get Started in Telepractice](#)

[Payment and Coverage Considerations for Telepractice Services During Coronavirus/COVID-19](#)

[Your Top 3 Telepractice Questions Answered](#)

[COVID-19: Use of Telepractice and Telesupervision](#)

[Medicare Telepractice](#)

ASHA: General Telepractice

[Practice Portal: Telepractice](#)

[Evidence Map: Telepractice](#)

[State licensing boards](#)

American Academy of Audiology Clinical Recommendations

[COVID-19 and Clinical Recommendations](#)

Infection Control and Social Distancing

[ASHA: Infection Control Resources for Audiologists and Speech-Language Pathologists](#)

[CDC: Prepare to Care for COVID-19: Get Your Practice Ready](#)

[Information for Pediatric Healthcare Providers](#)

[Risk Assessment Guidance for Healthcare Personnel](#)

[Guidance on preparing workplaces for COVID-19 \(OSHA\)](#)

[OSHA's Guide to Workers Rights](#)

Ethical Considerations for Audiologists and Speech-Language Pathologists

[Audiology Service Delivery Considerations in Health Care During Coronavirus/COVID-19](#)

Make information accessible, tailored to differing needs

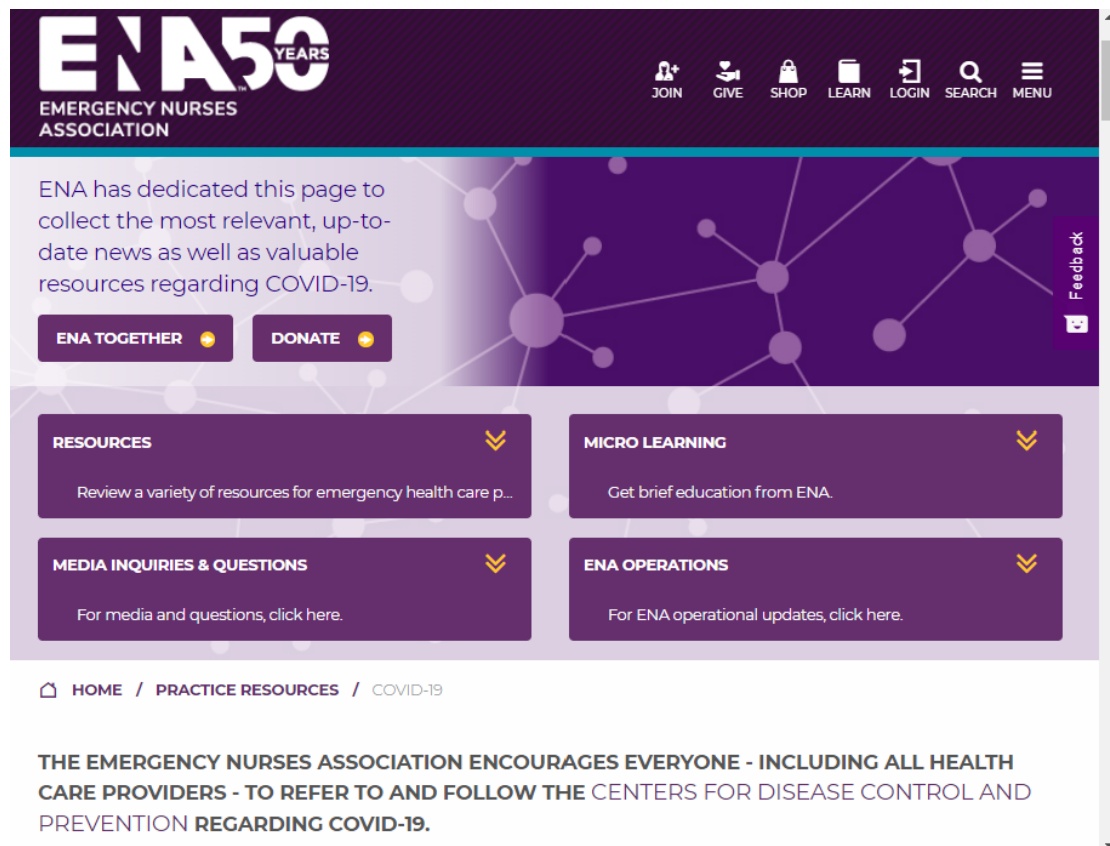
Great information is only valuable if it is accessible. That means it is both easy to find and delivered in a way that is “digestible” by the user.

Emergency Nurses Association (ENA)

<https://www.ena.org/practice-resources/COVID-19>

ENA’s COVID-19 Information page has a wealth of information on a wide-variety of clinical topics and related information drawing upon both internal and external resources such as the CDC. Topics are organized by a limited number of major areas and can be easily scanned on the page.

The page also offers links to information in a variety of formats, including “micro learning” (brief education), visual abstracts for quick reference, and podcasts.



April 6, 2020

Offer frequent updates: Daily Huddle

The nature of the pandemic, emerging patterns and knowledge about appropriate responses literally changed daily. In such a situation, the scheduling of short, focus, frequent communications become critical.

ACA International

<https://www.acainternational.org/login>

<https://www.acainternational.org/assets/about/huddle-invite.pdf>

An international association of credit and collection professionals, ACA developed a daily “Huddle” to keep members up to date. The concept of a huddle also has a long history in the medical field, where daily “stand-up” meetings are held among the care team to review patient status and coordinate activities.



The flyer is titled "ACA International" at the top left and features the ACA logo at the top right. The main title "Daily Huddle" is prominently displayed in large white letters on a green background that resembles a football field. Below the title, it states "Everyday at 11 a.m. Central". The "Monday's Topic" is "Understanding the Political Landscape Shaping the COVID-19 Regulatory Reactions". A section for text alerts includes a smartphone icon and the text "To receive Daily Huddle notices and other ACA COVID-19 Related alerts by text. Text: HUDDLE to 77513 Text Sponsor: Solutions by Text". The "Speakers" section lists the ACA Advocacy Team, Dan Gans, and Bryan Cunningham. It also includes a line for "To join the session", a placeholder for WebEx directions, a paragraph encouraging members to log into the Webex site for chat participation, and a line for "Audio conference information".

ACA International

Daily Huddle

Everyday at 11 a.m. Central

Monday's Topic:
**Understanding the Political Landscape
Shaping the COVID-19 Regulatory Reactions**

To receive Daily Huddle notices and other ACA COVID-19 Related alerts by text.
Text: **HUDDLE** to 77513
Text Sponsor: [Solutions by Text](#)

Speakers:

- ACA Advocacy Team
- Dan Gans, Principal & Founder, Polaris Consulting, LLC
- Bryan Cunningham, Co-Founder & Principal, Polaris Consulting, LLC

To join the session

<Insert directions to WebEx meeting here>

While we encourage all members to log into the Webex site to get the maximum benefit from the event, including the ability to see and participate in the chat, we understand that you are not always near a computer. Therefore, we also have a call-in only option:

Audio conference information

April 14, 2020

Ask yourself what your organization can DO to help

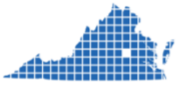





Beyond information and knowledge resources, some organizations challenged themselves to ask what they could do to help ameliorate the situation. That involves identifying a specific need, developing the solution, and gathering the resources to operationalize the initiative.

Virginia College of Emergency Physicians (VACEP)

<https://www.vacep.org/intubationbox>

VACEP identified a shortage of intubation boxes, the “hood” that covers the patient’s head and shoulders during intubation, a high-risk procedure for medical professionals due to the aerosolization of the virus.

COVID-19 RESOURCES FOR EMERGENCY PHYSICIANS

**Virginia College of
Emergency Physicians**

ORDER AN INTUBATION BOX

Minimize the risk of spreading COVID-19 during intubation

- One free box for all Virginia hospitals, thanks to donors
- \$180 for additional boxes and for hospitals outside Virginia
 - All boxes self-assembled with zip ties
- Box self-assembly instructions: [Click Here](#)

Why are intubation boxes needed? The New England Journal of Medicine offers a video simulation of what happens to clinicians without a protective barrier enclosure during endotracheal intubation. [See the video here.](#)

VACEP was able to provide a free intubation box to every emergency department in Virginia. Due to high interest in the project, VACEP subsequently began selling additional boxes at cost (\$180 for materials and labor only; no profit).

VACEP President Dr. Scott Hickey compiled the team of local contractors that built the intubation box, adapted from a design by Dr. Hsien Yung Lai in Taiwan.

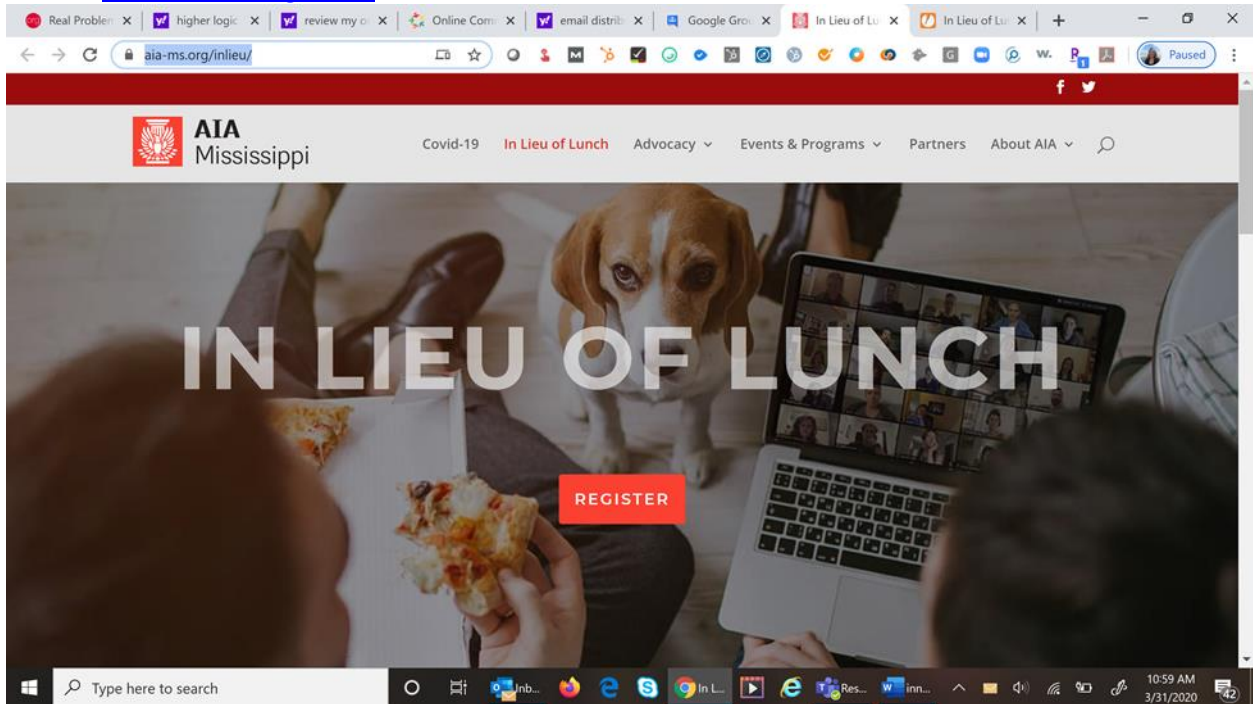
April 14, 2020

Provide opportunities to problem solve together

Treat “new realities” as opportunities to share experience, learn from each other and form new bonds among members.

The American Institute of Architects | Mississippi Chapter

Source: www.aia-ms.org/inlieu



Wednesdays at noon | starting April 1st (not kidding!)

Precisely at the halfway bark each week, AIA Mississippi invites you to a midweek dose of optimism as we break bread together (virtually). We'll gather questions in advance and post so members can join, ready to share their experiences.

Dress quarantine casual :: Pets encouraged. :: [Register at this link](#)

Grab some takeout from your closest locally owned restaurant. We'll have a moment where we display their logos and get a screenshot for our digital outlets so THAT'S YOUR HOMEWORK.

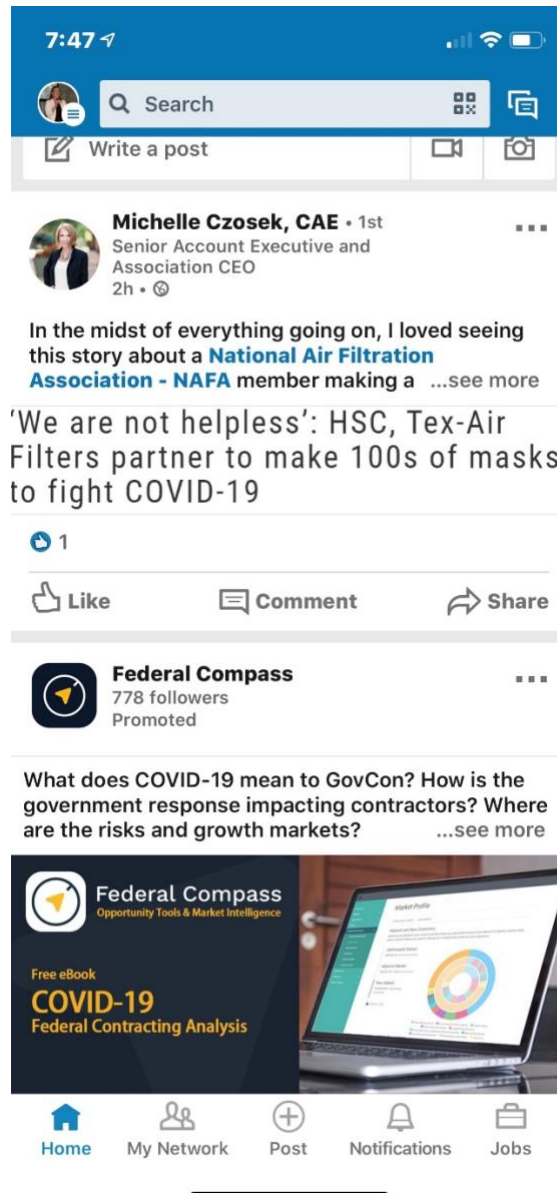
April 1, 2020

Publicize Contributions of Member Organizations

In addition to overall association responses, individual member organizations make significant contributions to dealing with the Covid-19 pandemic. Highlighting such efforts serve to recognize the value provided by member organizations, as well as stimulate other member organizations to act.

National Air Filtration Association (NAFA)

<https://www.nafahq.org/>



April 8, 2020

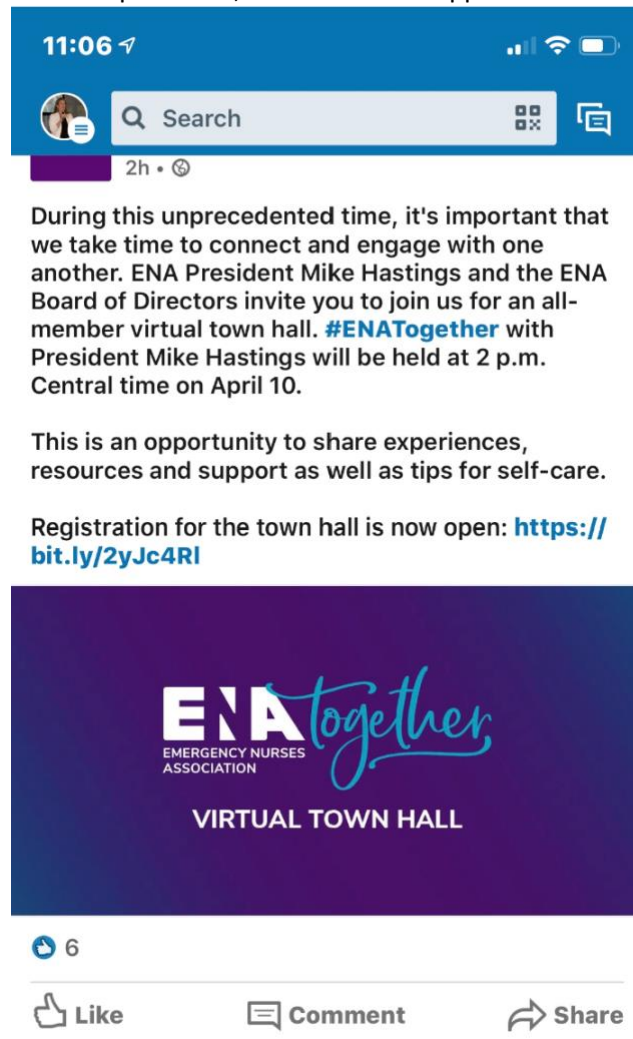
Ensure Leaders Connect with Members

During a crisis it is imperative that leaders act quickly. But they also need to take time to connect with members and other stakeholders to assure that actions are meeting real needs and priorities. It is critical that efforts include tactics to avoid narrowing of inputs and the isolation of leadership.

Emergency Nurses Association (ENA)

<https://www.ena.org/membership/get-involved/state-regional-conferences/event/2020/04/10/ena-events/ena-together-virtual-town-hall>

Among the ENA's communication efforts was an "ENA Together Virtual Town Hall" that was open to all members. The town hall was hosted by ENA President Mike Hastings and the ENA Board of Directors, was designed as an opportunity to share experiences, resources and support as well as tips for self-care.



April 10, 2020

Demonstrate empathy: Tell compelling stories

Personalize the stories of members, showing a range of experiences, from short statements highlighting attempts for normalcy to longer stories focusing on challenge and perseverance.

American Speech-Language-Hearing Association (ASHA)

Source: ['Not Just Dots On a Map': SLPs Speak Their Truth From the COVID-19 Battlefield](#) appeared first on [Leader Live — Happening now in the speech-language-hearing world](#). April 1, 2020.

Sample story (one of several in the issue):

Linda (name changed), Midwestern city

At the Midwestern hospital where Linda works, leadership have instructed SLPs not to provide direct services to patients under investigation for COVID-19, or to patients who have tested positive.

However, staff are still not protected from patients who may have the virus but are asymptomatic or not yet showing symptoms. For example, a patient Linda recently saw for a swallowing evaluation began showing symptoms right after the procedure. Per the hospital's direction, Linda continued seeing patients. But she worried that she might infect them as—for four days—she awaited the patient's COVID-19 test result. Fortunately, it came back negative.

"It's a situation that raises ethical questions on both sides," says Linda. "Continuing to treat patients means possibly being exposed. But not doing so means we leave people with legitimate needs for care without care."

And, due to the PPE shortage, most SLPs at her hospital aren't wearing masks. This makes virus exposure inevitable. Another patient Linda evaluated also just underwent COVID-19 testing, again triggering worries about viral transmission. Per hospital protocol, Linda is self-monitoring for temperatures above 100 and other symptoms for 14 days. She continues working but is required to mask. If the patient's test comes back positive, she will await instructions.

"When we do swallowing evaluations, people cough and sneeze, greatly raising our exposure risk," Linda says. "We can significantly reduce that risk when we are able to use PPE." As a workaround, many staff save their highest-risk patients for day's end: "So we can immediately shower off and scrub down with high-level disinfectant."

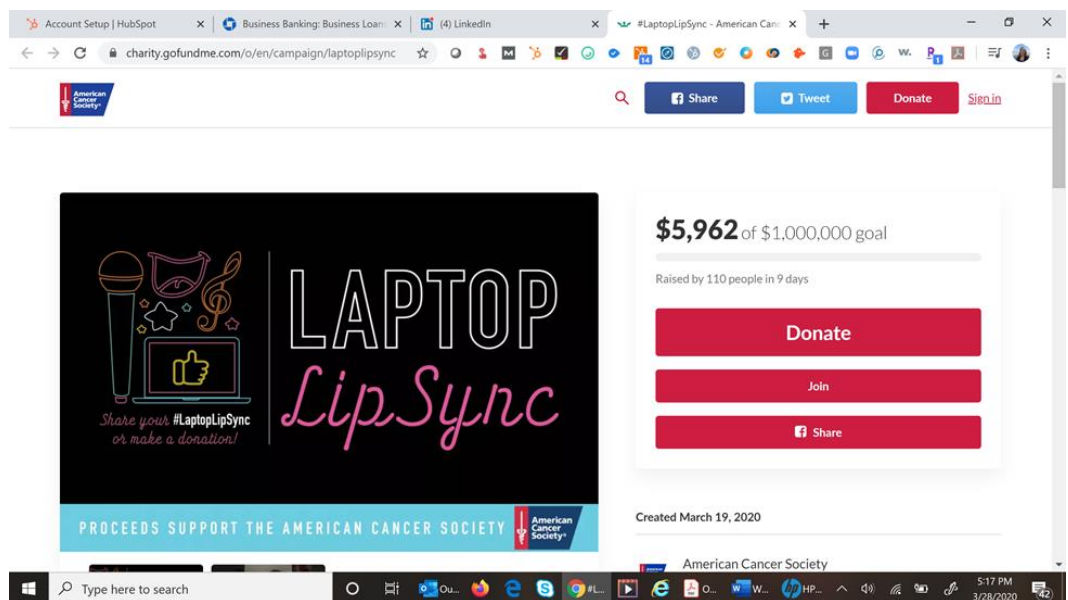
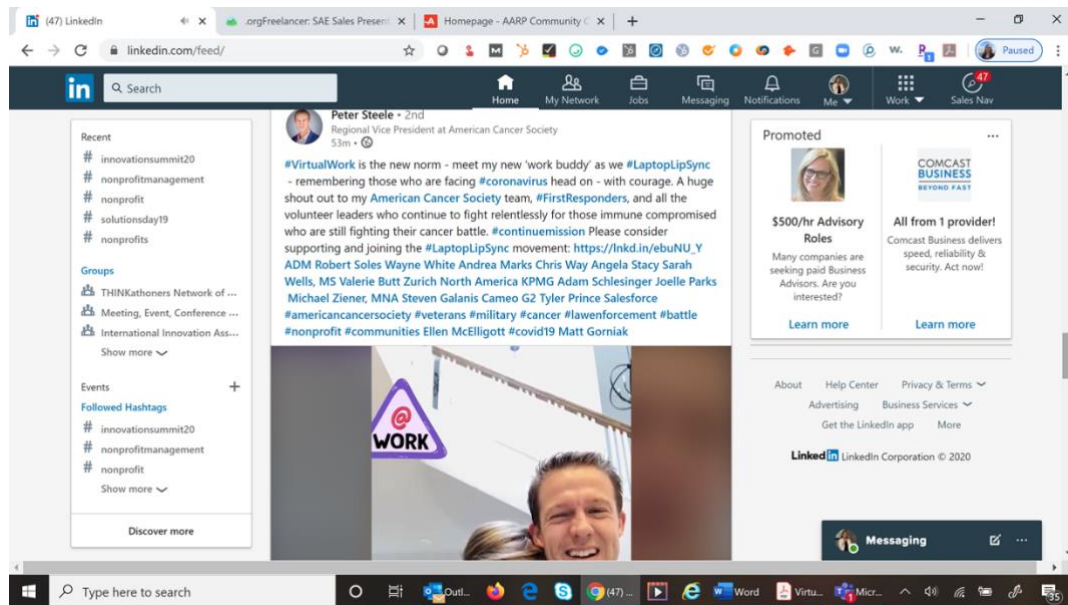
Given the risks, Miller would prefer to see SLPs virtually guiding other medical personnel—who are prioritized to wear PPE (that is happening in some places). Nevertheless, she's impressed with how hard her rehab team is working to keep one another and their patients safe. She urges fellow SLPs to self-advocate for PPE. "I have asked that all SLPs where I work be allowed access to masks during clinical swallowing evaluations," she says. "So far this has not been approved."

Show appreciation

Not only show appreciation to the work being done by your team but also consider the field you represent and all your stakeholders.

American Cancer Society

LinkedIn message from Peter Steele, regional vice president, American Cancer Society, highlighting Laptop LipSync campaign, March 23.



March 28, 2020

Thank each other: Foster camaraderie

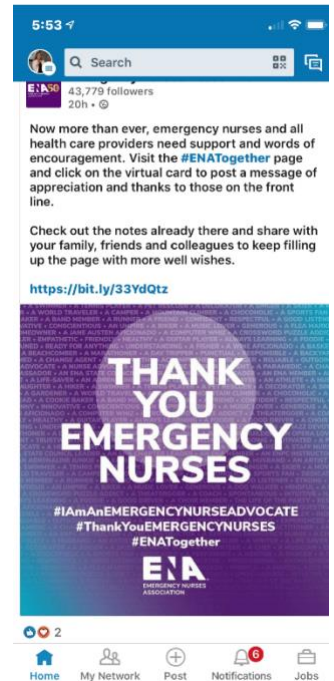
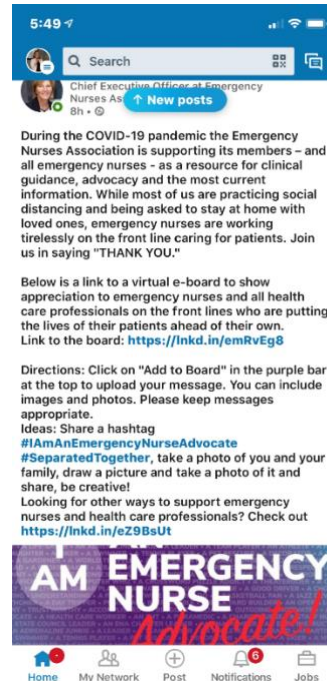
There are a wide range of ways to show appreciation, strengthen the sense of community and foster camaraderie among members. Social media provides powerful tools to enhance such efforts.

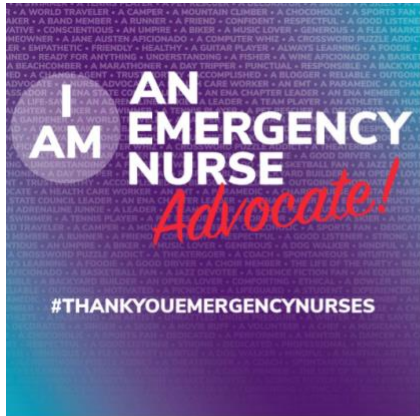
Emergency Nurses Association (ENA)

ENA used social media such as LinkedIn to invite members to participate in a virtual e-board to show appreciation to emergency nurses and all health care professionals on the front lines:

<https://lnkd.in/emRvEg8>.

[ENA also established a parallel campaign at #ENATogether.](#)





Thank you to all emergency nurses and health care professionals who are exposing themselves daily in order to save our lives. You are all an inspiration and we are forever grateful. #Stayhome #SeparatedTogether #IAMAnEmergencyNurseAdvocate

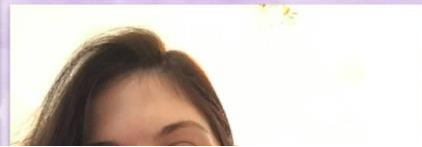
From Alicia Belcaster



Thank you for the sacrifices you make every day in the ED and beyond. We are so grateful for your strength, love, commitment and support always...be safe. 💜

#ThankyouEmergencyNurses #IAMAnEmergencyNurseAdvocate #SeparatedTogether #GetUsPPE

From Kathleen Kaminski



So many of you wouldn't even consider NOT being on the front lines. Thank you for all you do despite the uncertainty, fear, and risk!!

From K C

Hello Nurses! You all do so much, everyday for your patients, your loved ones and your family. Thank you for the time you are taking, especially now, away from the people you love most to care for people who need you at work. Your colleagues need you, your patients need you. This "call" that you feel in your soul, in your gut, to serve others with your knowledge and love is why we are grateful to you.

Thank you, be safe and we at home are so lucky to have you doing your best every day.

Makayla

From Makayla Johnson

To all of the nurses who put themselves second to all of their patients. Words are not enough to express our thanks for the countless hours and time you give to help others. We truly appreciate all that you do. So THANK YOU!! for everything you do.

<https://www.kudoboard.com/boards/9KMdfo4t>

04/07/2020

Create visibility in innovative ways

Consider innovative ways to visibly acknowledge and recognize the value provided by association members.

Emergency Nurses Association (ENA)

<https://www.ena.org/practice-resources/covid-19/ena-together>

ENA Foundation has a partnership with Popsockets through their charitable giving called Poptivism

We need YOUR help! We are looking for individuals to submit popsocket designs on behalf of ENA Foundation to raise funds to help emergency nurses during this time of crisis.

- **How it works?** [Click here to submit](#) your idea for your design on behalf of ENA Foundation. Then, Popsocket will bring your design to life and make it available for purchase.
 - If anyone purchases your design, 50 percent of the proceeds from those sales benefit ENA Foundation and the emergency nurses we serve.
- **Don't want to design but still want to help?** Purchase one the of popsockets already designed! [Click here to purchase](#)



April 13, 2020

Support your workforce

The COVID-19 pandemic resulted in large segments of the population experiencing enormous economic hardships. Not only are organizations impacted, but their entire workforce is affected. Supporting an industry involves both the organizational level and the individuals comprising the workforce.

National Restaurant Association Educational Foundation

The NRAEF is the philanthropic foundation of the National Restaurant Association. It created the Restaurant Employee Relief Fund ("Fund") to help restaurant industry employees experiencing extraordinary hardship in the wake of the coronavirus disease (COVID-19) outbreak. Through this Fund, grants will be made to restaurant industry employees who have been impacted by COVID-19, including a decrease in wages or loss of employment. <https://rerf.us/>



RESTAURANT EMPLOYEE RELIEF FUND

The Restaurant Employee Relief Fund ("Fund") was created to help restaurant industry employees experiencing extraordinary hardship in the wake of the coronavirus disease (COVID-19) outbreak. Through this Fund, grants will be made to restaurant industry employees who have been impacted by COVID-19, including a decrease in wages or loss of employment. Grants will be awarded as soon as possible to those individuals who meet the prescribed eligibility criteria, as reviewed and verified by the National Restaurant Association Educational Foundation (NRAEF). This Fund is operated by the NRAEF, whose mission is to attract, empower and advance today's and tomorrow's restaurant and foodservice workers.



DONATE NOW!

APPLICATION INFORMATION

"Restaurant Relief America" Campaign Raises \$10 Million in 10 Support Restaurant Workers

<https://news.yahoo.com/restaurant-relief-america-campaign-raises-225400719.html>

April 7, 2020



Days to

Address immediate needs/resource gaps


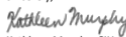

The pandemic revealed many shortcomings related to preparedness. One way associations can help is by focusing on needs that their members and stakeholders might directly impact.

The American Industrial Hygiene Association (AIHA) and the American College of Occupational and Environmental Medicine (ACOEM)

AIHA and ACOEM joined efforts with the American Hospital Association (AHA) to urge members to facilitate an in-kind donation of any surplus PPE to help healthcare workers who are on the front lines through the COVID-19 pandemic stay safe and healthy.

https://acoem.org/acoem/media/PDF-Library/AIHA_ACOEM-joint-letter-donation-PPE-vFINAL.pdf

March 25, 2020

<div data-bbox="305 787 751 842"></div> <div data-bbox="318 858 738 892"><p>AIHA / ACOEM Joint Letter on Donation of Surplus Masks and Respirators for Healthcare Workers COVID-19 March 2020</p></div> <div data-bbox="256 907 339 921"><p>March 25, 2020</p></div> <div data-bbox="256 934 485 951"><p>Dear AIHA and ACOEM Members and Friends,</p></div> <div data-bbox="256 963 800 1066"><p>As you are aware, health care workers, first responders/firefighters and others on the front lines of the COVID-19 pandemic are facing a critical shortage of infection control personal protective equipment (PPE). We believe that industrial facilities may have excess stock of PPE that could be donated. The American Industrial Hygiene Association (AIHA) and the American College of Occupational and Environmental Medicine (ACOEM) have joined efforts with the American Hospital Association (AHA) to urge you to make an in-kind donation of any surplus PPE to help healthcare workers who are on the front lines through the COVID-19 pandemic stay safe and healthy.</p></div> <div data-bbox="256 1081 349 1094"><p>WHAT IS NEEDED</p></div> <div data-bbox="256 1108 779 1140"><p>In the news, the N95 mask seems to be all that is talked about; however, there are several others that can save lives during this crisis: P95, N99, N100, P95, P99 or P100.</p></div> <div data-bbox="256 1155 794 1228"><p>To combat the current shortage, the Occupational Safety and Health Administration (OSHA) is now allowing the use of industrial-style filtering facepiece respirators. Many facilities have stock of N-95 and P-95 respirators that are distributed as voluntary comfort masks. Facilities prepared to meet requirements of the OSHA Silica Standard may have extra industrial style respirators. These masks will provide a life-saving barrier from COVID-19 for the workers battling this deadly pandemic.</p></div> <div data-bbox="256 1241 792 1346"><p>On March 14, 2020, OSHA issued a directive that provides guidance on expanding the supply available to health care providers: "respirators of equal or higher protection, such as N99 or N100 filtering facepieces, reusable elastomeric respirators with appropriate filters or cartridges, or powered air purifying respirators (PAPR)" should be donated. (https://www.osha.gov/memos/2020-03-14/temporary-enforcement-guidance-healthcare-respiratory-protection-annual-fit) Also, respirators marked P95, P99 and P100 meet this standard of protection ("P" simply means they are oil proof). https://www.cdc.gov/niosh/nppt/topics/respirators/disp_part/p99list1.html</p></div> <div data-bbox="256 1358 350 1373"><p>HOW TO DONATE</p></div> <div data-bbox="256 1386 800 1417"><p>Per the American Hospital Association, AIHA and ACOEM recommend the following ways to ensure the proper medical supplies are delivered to areas with the greatest need:</p></div> <div data-bbox="274 1432 790 1491"><p>1) National Voluntary Organizations Active in Disaster (NVOAD) is a longtime NFP partner of the Federal Emergency Management Agency (FEMA) which facilitates donations of time, money, and goods for emergencies. Their website has been retrofitted to accept donations of goods relevant to COVID-19 treatment: https://www.nvoad.org/howtohelp/current-responses/.</p></div>	<div data-bbox="883 793 1412 970"><p>2) Organizations with regional or national scope would be better served working with larger group purchasing organizations (GPOs) such as Premier and Vizient. Byron Jobe, CEO, Vizient Byron.jobe@vizientinc.com and Blair Childs, SVP, Premier susan_devore@premierinc.com</p><p>3) If you choose to donate these supplies directly to your local hospitals, AHA recommends contacting the administrative offices (procurement officer or supply chain manager) first.</p><p>4) Visit https://www.donateppe.org/takeaction to search PPE donation opportunities by state.</p><p>5) Another option is to make a monetary donation to Direct Relief, a charity that will buy and donate various medical supplies to any healthcare centers that need supplies: https://www.directrelief.org/emergency/coronavirus-outbreak/.</p></div> <div data-bbox="865 997 1354 1012"><p>Whatever you and your company can do to help will be most appreciated. We are in this together.</p></div> <div data-bbox="865 1026 924 1041"><p>Thank you.</p></div> <div data-bbox="865 1073 917 1087"><p>Sincerely,</p></div> <div data-bbox="865 1087 990 1144"><p> Kathleen Murphy, CIH President, AIHA</p></div> <div data-bbox="1044 1087 1247 1144"><p> Stephen A. Mancoske, MD, MPH, FACOEM President, ACOEM</p></div> <div data-bbox="865 1173 937 1186"><p>About ACOEM</p></div> <div data-bbox="865 1186 1409 1283"><p>The American College of Occupational and Environmental Medicine (ACOEM) is the pre-eminent physician-led national medical society representing 4,500 occupational medicine physicians and other health care professionals. ACOEM provides leadership to promote optimal health and safety of workers, workplaces, and environments by educating healthcare / occupational health professionals and the public; enhancing the quality of OEM practice; guiding workplace and public policy; and advancing the field of occupational and environmental medicine. www.acoem.org www.acoem.org/statement-on-coronavirus</p></div> <div data-bbox="865 1308 925 1323"><p>About AIHA</p></div> <div data-bbox="865 1323 1391 1457"><p>Founded in 1939, AIHA is a nonprofit organization serving professionals dedicated to the anticipation, recognition, evaluation, control, and confirmation of environmental stressors in or arising from the workplace that may result in injury, illness, or impairment, or affect the well-being of workers and members of the community. AIHA provides comprehensive education programs and other products and services that help its members maintain the highest professional standards. More than half of AIHA's nearly 8,500 members are Certified Industrial Hygienists, and many hold other professional designations. AIHA serves as a resource for those employed in the industrial, consulting, academic, and government sectors. www.aiha.org www.aiha.org/public-resources/consumer-resources/coronavirus-outbreak-resources</p></div>
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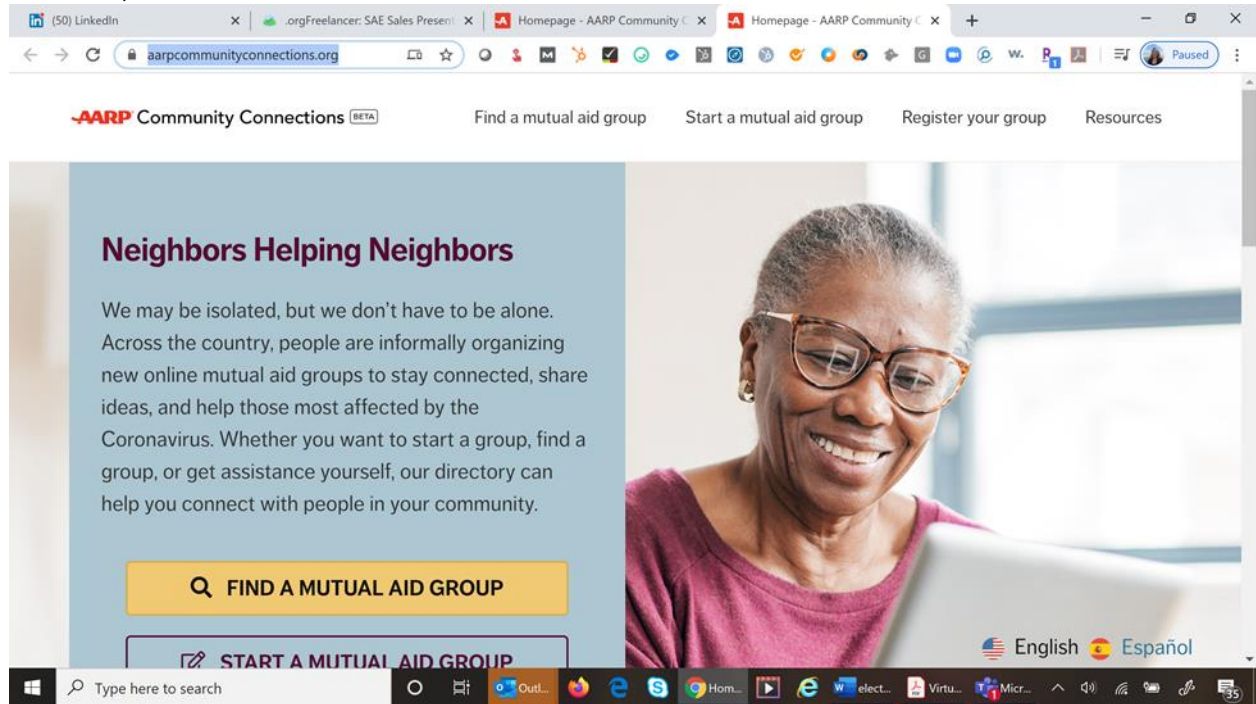
Structure pathways for community involvement

Whether literally isolated or working the “front lines,” individuals’ prior community ties and relationships are disrupted. Associations can support community linkages and provide new pathways to social integration.

AARP: Community Connections

www.aarpcommunityconnections.org

March 18, 2020



Resources include links to topics such as:

- AARP Coronavirus News & Guidance
- The Mighty: Online Community Discussion
- Official CDC Site
- Hear from a Friendly Voice (phone call form AARP volunteer)
- Experiencing anxiety of emotional distress?
- Need to Coordinate help for a friend or family member?

Be nimble—and be quick

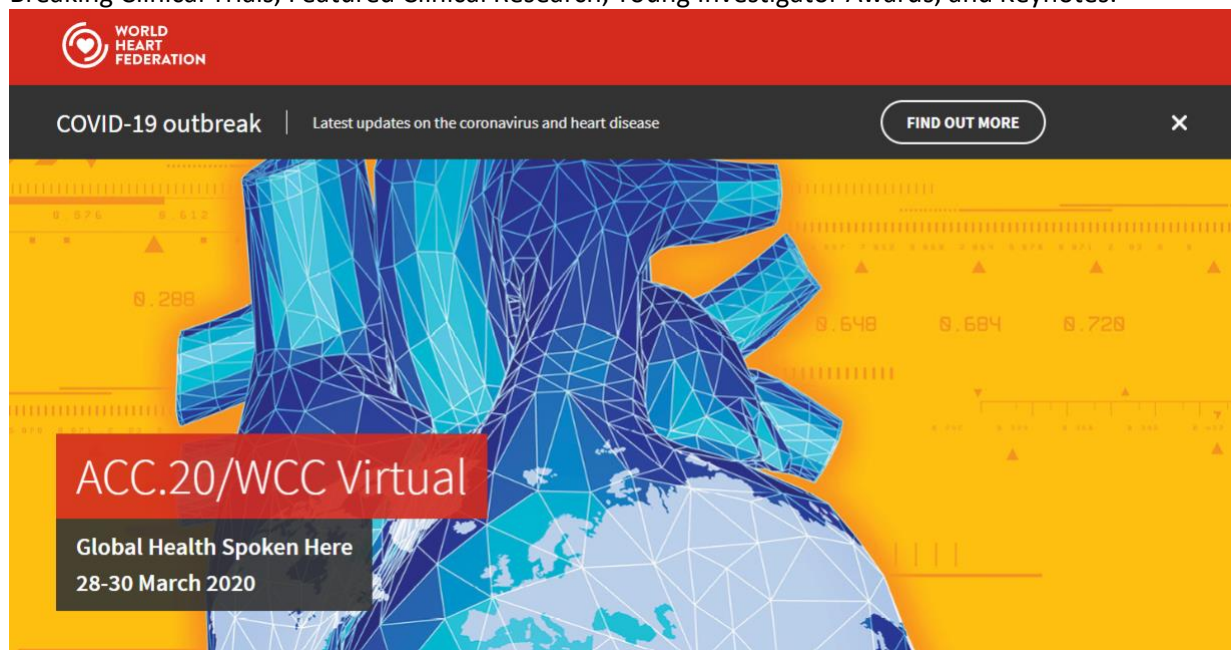
It is self-evident that during a disruptive event such as the COVID-19 pandemic, things move quickly. Many associations were caught short when major events such as annual meetings needed to be cancelled, rescheduled, or changed to virtual events. While the specifics of the COVID-19 scenario could not be predicted, organizations that do best undertake contingency modeling and have invested in a robust infrastructure that allows them to be nimble and pivot to new solutions.

World Heart Foundation

<https://www.world-heart-federation.org/congress/>

<https://www.world-heart-federation.org/news/acc-20-wcc-goes-virtual/>

Weeks before ACC.20/WCC was to be held in Chicago, the organization decided to cancel the in-person meeting and “go virtual.” The free ACC.20/WCC virtual experience kicked off on Saturday, 28 March and offered three days of science and learning. The meeting featured “live” access to 23 education sessions including Late-Breaking Clinical Trials, Featured Clinical Research, Young Investigator Awards, and Keynotes.



Supporting story at: <https://ceoupdate.com/articles/news/groups-quickly-transform-big-meetings-virtual-events>, Marcy 27, 2020 (subscription required).

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