

Sun Belt hospitals are feeling the strain from virus' surge — and bracing for worse



Health-care workers hold a protest outside St. Petersburg General Hospital in Florida this week where, across the state, new coronavirus cases continue to surge. (Octavio Jones/Reuters)

By **Griff Witte** and **Rachel Weiner**

July 16, 2020 at 8:01 p.m. EDT

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In California, doctors are shipping patients as many as 600 miles away because they can't be cared for locally. In Florida, nurses are pouring in from out of state to reinforce exhausted medical workers. And in Texas, mayors are demanding the right to shut down their cities to avoid overwhelming hospitals.

In a nation gripped by [a record number](#) of coronavirus cases — with severe outbreaks across multiple states and regions — medical systems are increasingly showing the strain, with shortages of critically needed personnel, equipment and testing.

And officials on Thursday said they are concerned that hospitals will soon hit a breaking point if the trajectory of ever-growing caseloads doesn't change.

"We can withstand a surge. We can withstand a disaster. But we can't withstand a disaster every single day," said Jason Wilson, associate medical director of the emergency department at Tampa General Hospital. "How many jumbo jet crashes can you handle before you run out of capacity? That's what we're facing."

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The peril was reflected in another grim set of data out of Florida on Thursday, with the state reporting a record number of deaths — 156 — and adding nearly 14,000 new cases, its second-highest total to date. Across the state, nearly 9,000 people remain hospitalized for treatment of covid-19, the disease caused by the [coronavirus](#).

With patients flooding into emergency rooms, Miami Mayor Francis Suarez said the city's hospitals were at 95 percent capacity.

"We're running pretty full now," said Mark Knight, chief financial officer for Miami's Jackson Health System.

Knight said there were 420 covid-positive patients in the hospital Thursday along with another 175 "persons under investigation" who are suspected of having the virus and awaiting test results. That is many more than the peak of 167 positive patients the three-hospital system had experienced previously, he said.

Wilson, who is also a professor at the University of South Florida, said hospitals across the Tampa area were adding [ICU capacity](#) by the day and shifting staff from other areas to meet the growing demand for care. With the average covid-19 patient staying in the hospital for 12 days, Wilson said, doctors were trying to treat patients remotely if at all possible to free up space.

The situation in Florida on Thursday was replicated, at least in part, across a broad swath of the country. Particularly in the South and the West, caseloads have grown exponentially in recent weeks as economies have reopened following the spring shutdown.

In California, the worst effects were being felt in the southern part of the state, where hospitals have been inundated. In Imperial County, along the Mexican border, doctors have been so overwhelmed by the demand for care that they have begun sending patients as far away as Sacramento — a nine-hour drive to the north.

"We're going to do everything we can to stretch the pipeline. But at the end of the day there are only so many patients you can push through at a given time," said Carmela Coyle, chief executive of the [California Hospital Association](#).

Coyle said she was particularly concerned that hospitals across the Southwest are all being pressured at the same time — or are bracing for it — making it more challenging for them to help one another.

"Our systems are built to address emergencies that are localized or regionalized. But in a pandemic like this, everybody is stressed," she said. "Places cannot send help and assistance when everyone is bracing for the same experience."

With medical staff in especially short supply, Defense Department teams began

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deploying to California hospitals this week to bolster the response. Florida Gov. Ron DeSantis (R), meanwhile, requested that the Federal Emergency Management Agency (FEMA) send 1,500 nurses. Across Texas, mayors of some of the state's biggest cities — including Houston and Austin — are so worried about staffing needs at local hospitals that they have asked for the authority to reimpose [stay-at-home orders](#).

Bill McKeon, CEO of Texas Medical Center, said his massive hospital complex has room for more covid-19 patients — in a normal year they see 10 million people. But even they can't handle a surge that goes on forever, largely because of staffing. "Hopefully we're peaking; we're hoping it's not the new normal. That's the real concern the strain this puts on any hospital system," he said. "No place can have endless capacity."



Health-care workers speak with a patient in the covid-19 unit at United Memorial Medical Center in Houston earlier this month. (Mark Felix/AFP/Getty Images)



Houston is on the verge of being overwhelmed by the coronavirus surge in Texas. (Mark Felix/AFP/Getty Images)

The current crisis across the Sun Belt recalls the [early days of the pandemic in New York City](#), when overwhelmed hospitals canceled all but the most urgent surgeries, brought infected medical workers back without two-week quarantines and declined to attempt resuscitation on some patients who had stopped breathing or went into cardiac arrest.

The military stepped in then, too, but struggled to [scale up](#) makeshift facilities fast enough to ease the burden.

"It's very intense," said Cindy Zolnierrek, CEO of the Texas Nurses Association. "When you have demands that exceed your resources, it's not a good place to be."

Ambulances are sometimes stuck waiting at emergency rooms because a hospital has no capacity for another patient. Rural hospitals, she said, can be overwhelmed when even a few fall ill with covid-19.

Zolnierrek said the nurses association is advocating for the state to adopt crisis standards of care, which allows hospitals to triage resources based on patients' likelihood of survival. Several localities in the state have already begun putting such plans in place, she said.

"If you don't have enough resources, you do have to make very difficult decisions, even in terms of who gets the ICU bed," Zolnierrek said.

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Darrell Pile, CEO of the SouthEast Texas Regional Advisory Council, said that has not been necessary in part because the state asked and received the same military support that came to New York.

But, he said, “there are multiple hospitals on saturation, which means they are indicating to our ambulance companies that they are full.”

To meet the surge, some hospitals are reopening vacant wings or putting more beds in the emergency room or recovery rooms.

[Arizona](#) has already moved to a crisis-care model, although Arizona Medical Association President Ross Goldberg said he did not believe any hospitals had yet had to triage care at patients’ expense. Hospitals in other cities that became overwhelmed were able to transfer patients to Phoenix, where Goldberg practices surgery at Maricopa Medical Center.

“Any hospital is used to pushing volume when they need to,” Goldberg said. “We’re almost moving the ceiling as we go.”

His biggest concern is not equipment, but people.

“We’re really worried about running through our staff,” he said. “You can put physical beds anywhere. But do you have quality people to man them?”

The well-being of those people is also a serious concern, said Saskia Popescu, a University of Arizona epidemiologist, who noted that a fast-climbing death toll has damaged the morale of exhausted doctors and nurses.

“[Medical workers] have been doing this since February, March. They’re tired and right around the time we were hoping things would slow down is when we reopened and started to see this massive spike,” she said.

Health-care workers are also starting to get sick themselves, she said, as the virus spreads: “Staff are part of the community, and when you have transmission in the community that also impacts them.”

Goldberg said many Arizonans still refuse to accept that the virus is real and dangerous. One of his surgical patients fired him, he said, after he went on television to advocate mask-wearing.



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A family pulls up to a drive-through testing site in Phoenix late last month. (Matt York/AP)

Most states now have rules requiring that [masks be worn](#) in public, with the governors of Colorado and Arkansas on Thursday making their states the latest to adopt such restrictions. The governors of Arizona and Florida — both Republicans — have pointedly refused to join in.

Late Wednesday, Georgia Gov. Brian Kemp (R) went so far as to strike down mask ordinances adopted by local authorities, a decision condemned by mayors and health experts.

National retailers continued Thursday to join the ranks of those that insist on masks: Publix, one of the largest supermarket chains across the South, said shoppers will be required to wear face coverings. Walmart, Kroger and Kohl's had all said the same earlier this week. Many have cited the strain on health systems from raging covid-19 outbreaks.

Those outbreaks are not only hitting the biggest of the Sun Belt states. They are increasingly impacting smaller states with rural populations that had once been relatively insulated.

In Mississippi, 10 ICUs have no beds available and the lack of capacity “is harming patient care,” state Health Officer Thomas Dobbs said at a news conference.

Tim Moore, president of the Mississippi Hospital Association, said that, as in other states, the leading concern was not beds but people, although gloves and face shields have also been in short supply.

“We’re going to use a lot of hospital beds in Mississippi that have not been used in a long time,” he said, especially in rural areas.

Moore said he heard from one hospital where a patient waited in the emergency room for three days because there was no space for him in the ICU.

Mississippi is trying to bring in more nurses, but they are competing with other Southern states and wages are rising fast. Moore said one company has offered contract nurses \$100 an hour — twice the normal rate and more than any hospital in Mississippi can afford to pay.

As for the nurses already in the state, many are nearing a breaking point.

“We’ve worn people down,” Moore said. “I’m real worried. The stress level, the emotional strain that our health-care professionals are starting to experience is going to start showing. You can only do this for so long.”

Lenny Bernstein and Jacqueline Dupree contributed to this report.