

Honoring CIC and a-IPC Preventionists during COVID-19

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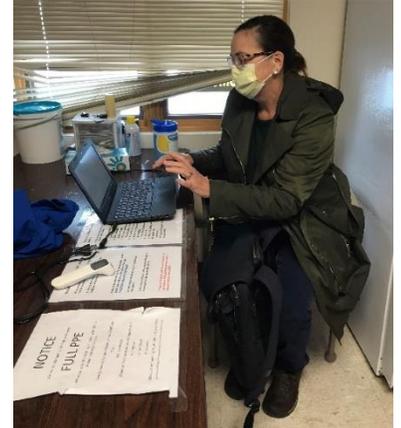
Company/Organization: CBIC

CIC a-IPC

First Certified: May 2018

My awareness of COVID-19 began in January 2020 when I read a very brief APIC Advocacy blurb about a pneumonia outbreak in China. The announcement said CDC was closely monitoring the outbreak and that there were no cases in the United States or other countries. During the first week of February 2020, I was in the Occupational Health Service Clinic in Atlanta, Georgia being fit tested for an N95 respirator just in case I might deploy in response. My supervisor's words, "This thing could really go pandemic" were concerning. News of United States citizens exposed to the virus and quarantined on a cruise ship alongside many ill people in Japan brought greater concern. As plans to bring these citizens home swung into action, I deployed with a CDC team on a repatriation mission to a military base in Texas. After a long flight on a chartered airplane, about half of the American cruise ship passengers arrived in Texas. They stayed in military barracks for a 14-day quarantine. We worked closely with the Texas Center for Infectious Disease; a hospital designed to care for tuberculosis patients. Every room was an airborne infection isolation room. The hospital administrators and the State of Texas opened their facility to provide care for any quarantined person that developed illness. The personnel at the facility could not have been more professional, more prepared, and more patriotic than any I have ever met. It was a pleasure to work alongside Disaster Medical Assistance Teams (DMAT) and other emergency responders to care for the repatriated citizens. The DMAT created a mission medal featuring Gummy, "because you have to be flexible."

At the time I thought, "I will know this is big if the South by Southwest music festival in Austin is cancelled," (it was) and "I will know this is big if the Strategic National Stockpile is distributed" (it was gone in a matter of days). While our team was on the repatriation mission CDC learned about people ill with SARS-COV-2 that had not traveled outside of the United States. This was devastating news as we knew community spread was already happening. For the duration of the pandemic my work has taken me to areas with high transmission. To maximize our resources, my team developed ways to do remote assessments of facilities to help facilities across the United States implement CDC guidance. I enjoyed working with the Indian Health Services; I learned that there are 569 sovereign nations within our borders. This has forever changed the way I will think of the United States and health equity. The emergence of SARS-CoV-2 has emphasized the need for competency-based infection prevention training for all healthcare personnel, in all settings, in all geographical areas. From my perspective I was able to see the work done by many facility Infection Preventionists and I admire the everyday courage, tenacity, and resolve to save lives that Infection Preventionists proudly display.



Janet Glowicz completing symptom screening prior to entering a long-term care facility.

