JFK Leadership

Lynette J. Taylor, RN Deputy Network Director, Veterans Integrated Service Network 12 Incident Commander

VA-VHA

Years of Service: 25 years



Summary:

Ms. Taylor established, coordinated and activated the Veterans Integrated Service Network (VISN) 12 incident command team that oversaw the COVID-19 response for eight Veterans Affairs (VA) medical centers in the Midwest. As the incident commander, there were several branches established with leading subject matter experts: Workforce, Logistics, Strategic Planning and Medical Branch. Ms. Taylor led this team, introducing a plan at the height of COVID -19 pandemic in March/April 2020 to decompress medical beds from urban VA hospitals in Milwaukee and Chicago to the less-impacted rural VA facilities of Tomah, WI, and Danville, IL. This action allowed two VA medical centers (Jesse Brown and Hines) in the City of Chicago to support a federal mission assignment from the State of Illinois to provide care to civilian humanitarians. Ms. Taylor led the tabletop exercise that prepared all eight VA facilities for the distribution of emergency use authorization (EUA) COVID-19 vaccine. Two recommended sites, Milwaukee and Hines, were among the first VA hospitals to receive and administer the Pfizer COVID-19 vaccine to Veterans in December 2020. Ms. Taylor had the honor of leading a strong team that provided outstanding care to Veterans and civilians during the peak of the pandemic in 2020.

Description: As the Deputy Network Director, Ms. Taylor serves a dual role as incident commander for emergency events that impact eight VA medical centers in Illinois, Wisconsin, and the Upper Peninsula of Michigan. In March 2020, as the incident commander and in response to COVID-19, she oversaw the establishment of several branches with leading subject matter experts (SMEs) in the areas of Workforce, Logistics, Strategic Planning and Medical. These branches were capable and empowered to provide guidance and education on a new disease that was unknown to medicine and information changing daily. Because of the risk of COVID-19, the incident command identified two individuals to lead the branches for succession planning. It is not easy to lead alpha leaders and especially during a crisis, but Ms. Taylor established an incident command team that met five-days-a-week and focused on open communication and sharing of information. This was necessary as these leaders were the SMEs for the eight medical centers within VISN 12. She guided the incident command team to speak with one agreed-upon opinion to various COVID-19 topics. An additional daily meeting was then held with the eight medical center directors to share information and address any frontline concerns. Establishing frequent meetings with medical center leaders ensured accurate, timely sharing of everchanging and dynamic CDC information and federal guidance.

Ms. Taylor introduced the proactive plan in March/April 2020 at the height of the COVID pandemic to decompress medical beds from urban VA hospitals in Milwaukee and Chicago to the less-impacted rural VA facilities of Tomah, WI, and Danville, IL. Under incident command, the Workforce and Medical Branches were empowered to implement the plan. The team, consisting of nurses, doctors and business managers, divided the VISN into Northern and Southern tiers. The team identified how surge beds could best be utilized in anticipation of the COVID-19 wave expected to reach Milwaukee and Chicago in mid-April 2020. The decompression plan was successful and allowed for the expansion of surge beds to receive COVID-19 inpatients in the urban cities. By June 30, 2020, VISN 12 had 1,176 Veteran cases of COVID-19 and 333 COVID-19 inpatients.

In April/May 2020, Chicago (per the State of Illinois) asked for federal assistance to provide inpatient care to civilians. Chicago was nearing 85% ICU capacity and asked to have the two Chicago-area VA Medical Centers (Jesse Brown and Hines) provide beds for civilian humanitarians under FEMA. Ms. Taylor, as Incident Commander, coordinated the mission assignments. The medical branch established a triage team that prescreened civilians and determined the appropriate level of care for 45 med-surgical and 15 ICU beds. This collaborative effort with the Chicago public hospitals coordinated care for 41 civilians.

Ms. Taylor as the incident commander during the COVID-19 pandemic demonstrated strong leadership, flexibility and adaptability. She trusted in her team to pull together, assess and determine the appropriate actions to keep Veterans, employees and each other safe in uncertain times.