

**T. Harry Williams Center for Oral History Collection**

**ABSTRACT**

**INTERVIEWEE NAME:** Ryan Landry

**COLLECTION:** 4700.3193

**IDENTIFICATION:** Senior director of nursing and service line and cardiovascular at Our Lady of the Lake

**INTERVIEWER:** Alyson Neel

**SERIES:** Our Lady of the Lake, “Under Pressure: A Louisiana Hospital’s COVID-19 Experience”

**INTERVIEW DATE:** July 9, 2024

**FOCUS DATES:** 2020-2022

**ABSTRACT:**

**Tape 5250**

Introduction; Landry is senior director of nursing and service line and cardiovascular at OLOL; born at Woman’s Hospital in Baton Rouge in 1981; parents’ occupations; grandparents are from Iberville Parish; his first job at OLOL was as a courier for the pneumatic tube system during high school; worked as a pharmacy technician through college; liked the mix of hands-on and thoughtfulness that nurses needed; what he likes about nursing is the “opportunity to serve a community at a level that is different than any other type of customer service-related field. And the concept of serving those most in need is real. We get to see it every day.”; Landry always gravitated toward the sickest people in the hospital; likes to make a difference in the lives of patients and/or family members; likes the close-up humanness of the work; has worked in every hurricane that hit the area since 1999; preparing for inclement weather protocols; description of how the hospital deals with hurricanes; COVID was much different than hurricanes, because of so many unknowns; his work with heart patients had a predictable clinical pathway; “Coming from cardiovascular, we didn't have the depth of sickness that we saw in COVID.”; first heard about COVID in January 2020; in March, realized it would be a big deal; anticipating the spread: “We are in Louisiana. It's a very social state. People like to congregate.”; describes the fear that COVID patients felt when they came to the hospital desperately ill; a typical pre-COVID day in his work—admin tasks, rounds, meetings, program development, clinical work; he consulted on the most difficult cardiology cases and gave spiels to patients going home after surgery; describes operating room scrubs he wore during pandemic; typical day during the pandemic; using floor seven as a COVID unit; staffing in ICU during pandemic; at the time, his wife was staying at home with their one-year-old child; spent a lot of time at the hospital during pandemic; description of “cluster care”; explanation of how they worked together to keep exposure to a minimum; nurses going beyond their usual scope of work; how protocols were determined;

learning to properly use PPE; involvement of army in hospital; describes document instructing people in use of PPE; protocols seemed to change every other week; explanation of stretching staff through “pod staffing”; patient to staff ratio; long hours he put in during pandemic; acquiring more staff; some nurses were afraid to work during pandemic; many nurses returned to bedside nursing during pandemic; in August of 2021, disaster medical assistance team [DMAT] arrives at OLOL; Neel describes the COVID stats at that time during the Delta variant; “I had been by that time, the COVID king around here as far as opening units and shutting them down.”; working with the DMAT; geographical makeup of DMAT members; coordinating hotels and transportation for DMAT; “It was unbelievable to see how quickly executive, middle management, frontline staff could really move whenever you remove a little bit of the red tape.”; converting the pediatric intensive care unit to a COVID treatment area; adding windows to doors to see patients; what they learned from DMAT, who were very professional; DMAT helped them increase patient load; adapting to changing protocols; staff’s level of fear in early months of pandemic; protocols at home to keep family safe; some staff members lived apart from their families; fear of infecting people; system of attaching long lines to IVs so drips could be adjusted without entering patients’ rooms; using disposable plates for patient meals; system of proning ventilator patients; skin care for immobile patients; staff temperature checks; limiting access points to hospital; “having to spend fifteen minutes to get in the door. Because you have a line, everybody six feet apart, you’re getting your temperature taken.”; colored sticker system to be sure staff complied with health checks; people should be confident in the protocols rather than driven by fear; communication between hospitals is more important than competition; at the beginning of pandemic, nurses were treated as heroes and the public sent food donations to hospitals; the bonding that happens during emergencies; feels good that OLOL could care for 300 COVID patients at once; appreciated community support; “I think these types of times remind us that this is really how people are. We’re here to help and band together.”; explains the coins he got from DMAT that celebrate their COVID operation.

**TAPE:** 1 (T5250)

**TOTAL PLAYING TIME:** 1 hour, 7 minutes

**# PAGES TRANSCRIPT:** 29

**OTHER MATERIALS:** None

**RESTRICTIONS:** None