What is the field learning from COVID-19, and how will it change health care and community well-being forever?

Mikelle Moore SVP, Chief Community Health Officer at Intermountain Healthcare

On Monday, March 16, Intermountain Healthcare postponed all non-urgent elective procedures to ensure the availability of resources to focus on the coming pandemic, as well as to guarantee the highest levels of safety for our patients, caregivers and community. As a former hospital administrator, I understood deeply that postponing all non-emergent surgeries and elective procedures would have a significant financial impact on our hospitals; however, it was clear that this was the best decision for the overall health and wellness of the community.

My thoughts immediately went to all the Intermountain caregivers across the system. I was concerned about what the future would bring. How can we support our staff through these uncertain times? How can we safely navigate this unpredictable pandemic storm? What will our health system look like when this is over? Would the shock of Wuhan, Rome or New York come to Idaho, Utah and Nevada?

As we navigate so many unknowns, one thing is certain: The pandemic has challenged us to transform health care rapidly to be more consumer-oriented, more equitable and more equipped to address our community's needs.

COVID-19 also has amplified the need to improve the mental well-being and support for our caregivers in new ways.

Before COVID-19, approximately a quarter of the adult population in Utah was experiencing poor mental health. This is a staggering statistic that we were working to address through several initiatives. As COVID-19 becomes the new normal, that number is rising with a greater number of individuals needing mental well-being support.

Intermountain worked with community partners to set up a COVID-19 information hotline in Utah in less than 24 hours as the crisis emerged. Having nurses and care navigators available as a resource for the community has been very useful, but it wasn't enough. Additionally, Intermountain set up the Emotional Health Relief Hotline. Repurposing our caregivers from specialty positions to staff the hotline was a creative solution that provided a valuable resource to people across the Intermountain service area in Idaho, Utah and Nevada.

To support our caregivers, we proactively established new programs and policies to maintain pay, allow for paid time off deficit flexibility, establish an employee assistance fund, and allow caregivers (who were able) to work from home. Also, instead of laying off or furloughing our caregivers, we looked at an individual's broad skill set and temporarily repurposed them according to emerging

needs. Intermountain's staff members are our number one resource, and it is vital that we take care of them so they can take care of our patients and community.

COVID-19 means health systems must pivot quickly to address local needs.

Early in 2020, Intermountain repurposed a decommissioned rural outreach recreational vehicle to be a mobile collection unit for our moonshot project HerediGene. When COVID-19 surfaced, we put this HerediGene population study on hold, redesigned the RV, and turned it into a mobile testing unit to reach out to surge pockets within our services areas. This enabled us to connect with rural areas and underserved populations to provide vital access to testing.

COVID-19 has organizations partnering for progress.

Since the outbreak, we also have started to look at non-traditional partnerships to leverage the power of collaboration to create the maximum impact in the community. We partnered with the University of Utah Health (our traditional competitor) to create joint testing sites staffed by members from both systems. This partnership allowed both Intermountain and University of Utah to offer higher levels of service to our communities than either could offer alone.

We coordinated with the Mexican Consulate in Salt Lake City to help get up-to-date information translated to Spanish to ensure this segment of the community was not overlooked. Cultural differences shouldn't be a barrier to accurate and timely health information. Empowering diverse groups of people helps make everyone healthier and safer.

In that regard, Intermountain believes strongly in being inclusive of the needs of diverse demographic groups in our community, such as individuals with disabilities, LGBTQ+ people, those with low incomes, immigrant populations and the elderly. Outreach through community partnerships expands the reach of medical services and increases the health of vulnerable populations. Some of our other partnerships efforts include:

- Sending 100 Intermountain caregiver volunteers to New York to help during their surge in hospitalizations;
- Joining the American Hospital Association and the federal government's dynamic ventilator reserve program to help organizations as they experience surges; and
- Working with Latter-day Saint Charities, the State of Utah and the University of Utah Health in Project Protect to engage individual volunteers in making more than 5 million masks, along with gowns and face shields, for clinical and personal use.

COVID-19 has accelerated changes to make health care better.

As we navigate in the new COVID-19 reality one thing is certain: The pandemic has challenged us to transform health care to be more consumer-oriented, more equitable and more equipped to address our community's needs. We have been supported in these changes by incredible community partners who leaned in to offer resources and hopes. In addition to our traditional partnerships, COVID-19 has pushed us to think outside the box and form cross-sector collaborations with businesses, schools and government in new ways. The relationships, programs and changes we've

made as a result of COVID-19 will position us well in the future to be able to respond to complex community health issues like social determinants of health, mental health and inequity.

And if you see the stay-at-home haircuts I gave my children while hair salons were closed, I hope you'll look the other way.

Mikelle Moore is the senior vice president and chief community health officer at Intermountain Healthcare.