Hospitals work to ensure patients a safe return for needed care

The pandemic has given high-risk patients cause for concern about returning to health care providers for routine care. The impact of this medical distancing won't be fully understood for some time but, in the meantime, hospitals and health care systems face yet another significant hurdle in a year that has been replete with challenges: how to assure patients that returning for needed tests and treatment will be safe.

The stakes are high in this rapidly changing environment. A Washington Post analysis of federal data found that thousands more people died in March, April and May of heart disease, stroke, diabetes and other diseases in a five-state area including New York than historical averages. And there are fears this could be repeated in hot-spot states like Texas and California. Now, some are wondering how many of the deaths from cancer may have been avoidable if patient safety concerns about returning to health care facilities were addressed.
Health care organizations have taken a wide variety of actions to respond to consumers’ concerns, including fundamental steps like placing tape on floors to show patients where to walk and to stand to allow proper social distancing. Many are requiring masks of everyone entering their facilities as well as taking their temperatures, and placing plexiglass barriers between patients and receptionists.

Henry Ford Health System in Michigan went a step further by implementing a just-in-time, patient check-in process to be completed online or in exam rooms to eliminate a stop in waiting room areas.

Memorial Healthcare System in Hollywood, Fla., recently held a press conference to share its plan: separating COVID-19 patients from others, banning visitors, reconfiguring waiting areas to allow for social distancing, testing everyone for the virus in a preadmissions center and requiring everyone in the hospital to wear masks. Cleveland Clinic Florida sent 1.2 million emails to patients across the system that explained the safety processes the organization put in place and filmed a patient safety announcement from its president and CEO, Wael Barsoum, M.D.

The AHA’s Pathways to Recovery report provides comprehensive information and resource links to internal and external communication tools that can help members set the right tone in their patient outreach efforts. The report also includes a framework through which all messaging around reopening should be considered as well as guidance on a wide array of other recovery issues like supply chain, plant operations/environment of care, financial management, risk management and governance considerations.

Health insurers like Humana are also working to assist patients in their decision to return to their doctors and to ensure that they take important diagnostic tests. The company recently sent more than 1 million preventive care screening kits at no charge to Medicare Advantage and eligible Medicaid members — triple the number it sent last year — to help identify complications related to diabetes and colon cancer sooner.

William Shrank, M.D., Humana’s chief medical officer, says that during these complex times, patients should not be distancing themselves from their physicians.

Boston Consulting Group says providers can influence about 50% of the conditions affecting a patient’s willingness to reschedule. In a recent survey report, it noted that health care providers should communicate a clear plan and timeline for rescheduling care and should assure patients that testing protocols and procedures for care — as well as the safety of facilities and staff — meet or exceed expectations.

The report also noted that communications should be clear about what’s being done to ensure social distancing and a sanitary environment, and to assure caregivers that they will have access to personal protective equipment.
Just like hospitals and health systems, physicians are taking a significant financial hit from COVID-19 and it may result in a rise in physician practice acquisition and consolidation as well as changes in physician compensation plans.

More than half of independent physicians reported concerns about whether their practices will survive during the pandemic, according to a recent McKinsey & Company survey.

The consulting firm surveyed physicians nationally in 2019 and again six weeks into the pandemic to gauge physician sentiment. Much had changed in that short time. In 2019, three-quarters of responding physicians said they preferred to join an independent physician group. Six weeks into the pandemic, nearly 90% of respondents said they would opt to join an independent group. Nearly 70% of respondents who said they were looking for a partner cited financial support as the primary reason.

If the current surge in COVID-19 cases continues and provider organizations are forced to cancel elective procedures, there could be additional negative financial repercussions for physicians, Dave Hesselink, a principal at the workforce consulting group SullivanCotter, recently told Modern Healthcare.

He notes that if hospitals and health systems are forced to cancel elective procedures due to another surge of the pandemic, they will be less likely to protect physicians financially. Some health systems already have started asking how to realign their compensation models now that volumes have dipped significantly, he adds.

We want to hear from you! Please send your feedback to Bob Kehoe at rkehoe@aha.org.