



The Human Side of Us: The COVID-19 Experience from My Inpatient View of the Pandemic Response

CAROL A. CUNNINGHAM, MD, FAAEM, FAEMS
STATE MEDICAL DIRECTOR
OHIO DEPARTMENT OF PUBLIC SAFETY
DIVISION OF EMS

The Human Side of Us

Posted on the Journal of Emergency Medical Services website (jems.com) on April 12, 2020

<https://www.jems.com/2020/04/12/the-human-side-of-us/>

Ohio Department of Public Safety, Division of EMS:

COVID-19 Resources

<https://www.ems.ohio.gov/>

The Journey

Original Plan: One week of post-operative physical therapy at an inpatient rehabilitation facility followed by outpatient physical therapy

Effect of COVID-19: Lockdown with no visitation permitted less than 48 hours of arrival
Subsequent “stay at home” order temporarily closed home health agencies, including those that provided outpatient physical therapy

COVID-19 OUTBREAK AT NEARBY NURSING HOME

Mandatory 14-day quarantine (in the assigned patient room) for all new admissions

Mandatory use of face masks outside of room for all patients, twice daily temperature checks, designated wing for patients undergoing 14-day quarantine

Day 41: Discharge to home, sweet home!

The Human Side: Healthcare Staff

Fear of the unknown is a natural reaction and should not be suppressed or criticized

Transparency, particularly in a dynamically changing scenario, is both informative and calming

Security and safety of an employee's family plays a key factor in healthcare worker resiliency

- ❖ Adequate provision of support (e.g., meals, toilet paper, diapers, disinfectants) during off-duty hours is a critical element of workforce retention
- ❖ Affordable or complimentary child care, elder care, and alternative housing
- ❖ Flexibility in staffing to accommodate varying family structures and needs

The Human Side: Patient

Fear of the unknown is a natural reaction and should not be suppressed or criticized

Security and safety of the patient's family plays a key factor in resiliency and recovery

Patient isolation can lead to new , medical, behavioral and/or mental health conditions

Special needs populations (e.g. pediatric, geriatric, hospice patients) need additional support

Transparency, particularly in a dynamically changing scenario, is both informative and calming

Pearls of Wisdom

EMS and long-term care facility staff are members of the healthcare system

All employees at healthcare facilities are vital members of the team

Protection of manpower must be a top priority and inclusive of all members of the team including, but not limited to, personal protective equipment training

A protected resilient healthcare workforce enhances patient care and safety

Generation of policies must include the goals and needs of EMS

Challenges in the Future

HEALTHCARE SYSTEM

Preparing for surge with less resources

Encompassing all healthcare providers in the response plans

Economic decline resulting in closure or reduced capabilities of healthcare facilities

Management of a larger uninsured patient population with reduced access to healthcare

EMS

Equity with the other sectors within our healthcare system

Education

Recruitment and retention

Mental health resiliency

Adequate support and resources for rural and volunteer EMS sector

Innovation for the Near Future

Crisis standards of care plans on the local, regional, state, and national levels

Revise administrative and operational structure in advance of upcoming economic impacts

Prepare for a reduction in manpower and increased demand in resources

Plan for participation in mass vaccination campaigns

Expansion of telehealth and mobile integrated healthcare resources

Permit the utilization of telemedicine for compliance with EMTALA regulations for patients presenting to emergency departments