

On March 13th, President Donald Trump declared a national emergency over the novel coronavirus, making \$50 billion available for aid and required all hospitals to enact their emergency preparedness/operations plans while lifting some regulatory barriers to care delivery that might impede successful crisis response.

This response triggers a cascade of activities hospitals must undertake to activate new protocols and committees, shore up resources and materials, establish communication plans, and incorporate a myriad of other steps to transition into emergency mode.

COPE Health Solutions is ready to partner with you and your team to overcome the upcoming challenges during the next several months with turn-key services and support.

Hospital Pain Points from COVID-19	Questions to Consider	How COPE Health Solutions Can Help
<p>Staffing Shortages</p> <ul style="list-style-type: none"> Absenteeism may occur due to self-quarantine, fear of coming to work, school closures resulting in need to provide child care and the need to care for sick family and friends Increased volumes for emergency department (ED), ICU, respiratory care etc. may overwhelm existing staff Increased non-clinical administrative work to coordinate: triage, transport patients and intake, etc. Potential lack of ability to reassign staff from areas impacted by lower utilization to areas with higher volume Need for temporary staff and overtime will cause increases in costs while more lucrative electives may go down 	<ul style="list-style-type: none"> Are you prepared for an increase in your ED, in-patient or out-patient clinic volumes in the coming weeks? Do you have a high volume of staff and providers calling in sick or unable to show up? Are you expecting the potential for high-cost temporary or registry staff? How will you transition staff and units to adapt quickly to the changing demands? Do you have adequate staffing to collect and organize data from new processes and procedures, including staff and patient assignment? Do you have adequate staff for patient transport? Do you have the ability to remove from clinical staff any possible activities that can be performed by entry level, non-licensed staff? Do you have a shortage of housekeeping to clean and turnover rooms? 	<ul style="list-style-type: none"> Provide on-site staff support that are pre-screened and trained to provide support for transport, front-line staffing and required repositioning of equipment, supplies and patients Provide both licensed clinical and non-clinical staff to support interaction with patients via an application with tablet or smartphone capabilities Document and launch of new workflows, staff reassignments, unit conversions, patient access protocols and monitoring programs outside of “brick and mortar”
<p>Administrative Overload</p> <ul style="list-style-type: none"> New temporary projects, vendors, testing facilities/stations etc. will need support for initial launch and ongoing organization and oversight Consistent and efficient need to oversee and optimize redistribution of resources Interim coverage provided for key leaders who are unable to work 	<ul style="list-style-type: none"> Do you have adequate administrative and leadership bandwidth to handle ongoing day-to-day operations as well as develop, execute and organize specific new COVID-19 response requirements? Do you have guidelines for high-risk team members to reduce risk for your workforce? Do you have adequate internal project management office (PMO) and project management (PM) capability? Do you have challenges in recruiting or onboarding temporary workers? Do you have flexible staff and support for on-site patient navigation? 	<ul style="list-style-type: none"> Support establishment of on-site or remote project management office (PMO) Provide project management (PM) support, including either dedicated or access to pooled resources – remote or on-site Provide seasoned health care hospital operations and strategy executives to give remote subject matter expertise and support, in tandem with PMO or PM support as needed
<p>Communication</p> <ul style="list-style-type: none"> Capability to digest and interpret information quickly (e.g. changing federal, state, county and local protocols and how they translate to operations) Both patients and staff are receiving varied sources of information National trends may not be reflective of local realities but national news may be all that people know Staff confusion can complicate decision making and safety, especially when clear protocols are not yet known or established Patient confusion and panic can lead to overwhelming resources, utilization and spread of disease in the community 	<ul style="list-style-type: none"> Do you have the capability to develop communication materials and FAQ sheets for disseminating to staff, patients and community? 	<ul style="list-style-type: none"> Provide interim staffing and experienced professionals to support the design of communication strategies, including social media messaging Provide interim staffing to answer questions on an information hotline, as well as make outbound calls to self-quarantined individuals and families