ADFM

What We Have Learned from the COVID-19 Stress Test on Primary Care

February 19, 2021



The Punchline

You grow well in the wild Social justice is strong Personal doctors are mission driven

This is good... I want more



Primary Care



Worthy of your trust
Safe to be vulnerable
Wholeness of your dignity
Patients come first

Societal investment in this basic good



Enter a Pandemic:

What will happen to primary care and how will we know?

The cost of lack of investment

No national office for primary care

No national database for primary care

No information exchange that reflects primary care

What we needed to do

Develop a network and information exchange

Gather the data to make primary care visible

Provide primary care with data and outlet



Quick COVID-19 Survey:

It should help and it shouldn't be hard

Our commitment to participants

3 minutes to complete

Only the data we can immediately use

Responsive to the pandemic and to practice

Categories of questions

Basic demographics – responsive to use

Flash questions – responsive to the pandemic

Clinician questions – responsive to participants





Timeframe: March 13 – the present

- ~ 26,000 clinician surveys
- ~ 10,000 patient surveys



Funded by AHRQ, Morris-Singer, Samueli

Green Center

Typical Distributions (approx)

Sample size

~ 1000, range 550-3131 50 states, (CA, CO, RI, NY, OR, WA, TX, VA) > 95% unique settings

Disciplines

70% family medicine15% internal medicine5% ea pediatrics and geriatrics

Settings

20% rural, 15% CHCs, 5% ea DPC/ofc/schools 40% ea indept/system, 7% urgent/retail

Practice size

35% 1-3 clinicians, 35% 10+ clinicians

DURING COVID, primary care reinvented itself overnight.

In Practices

- >80% adopt new platforms
- 2/3 increase in outreach



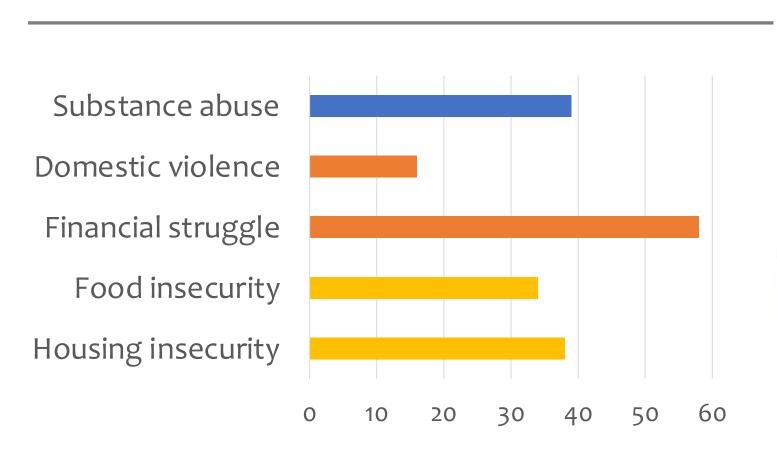
• Drop in FTF visits

Paid <50% of work

Furloughs/layoffs



FOR PATIENTS, inequities are growing ...







... and health is dropping.

Chronic conditions are worse

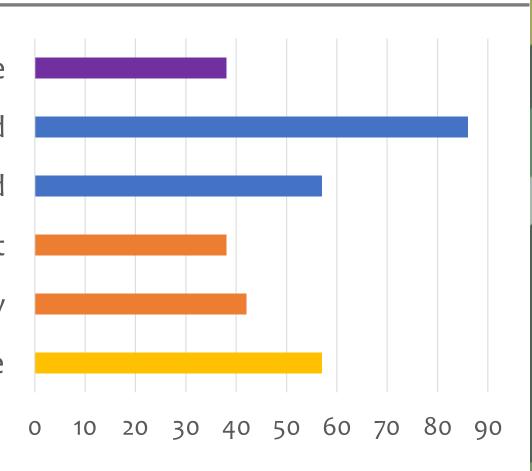
Mental health has decreased

Physical health has decreased

More complaints per visit

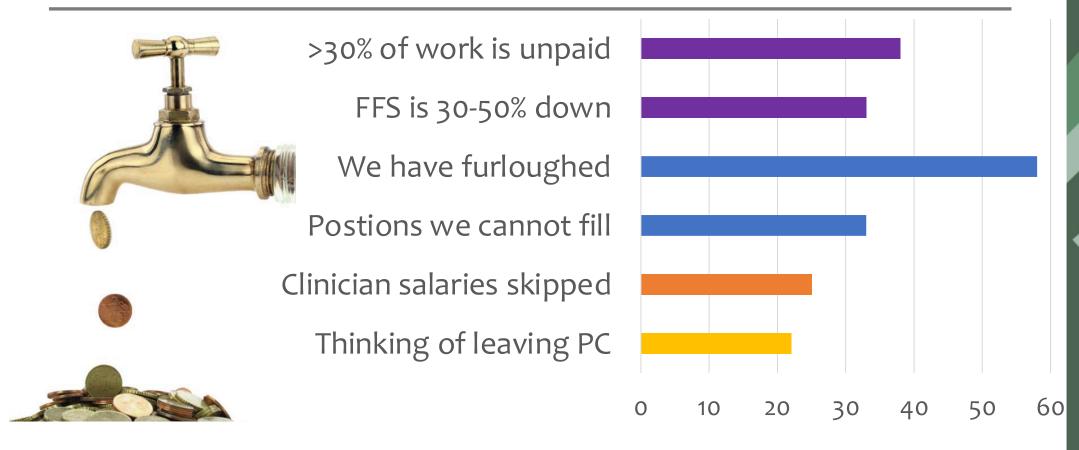
Visits have greater complexity

Reduction in self care noticeable



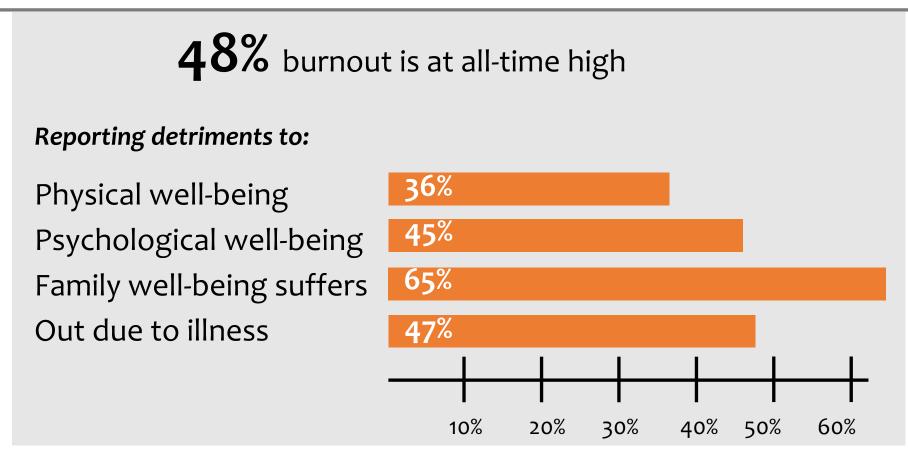


FOR PRIMARY CARE, finances are strained...



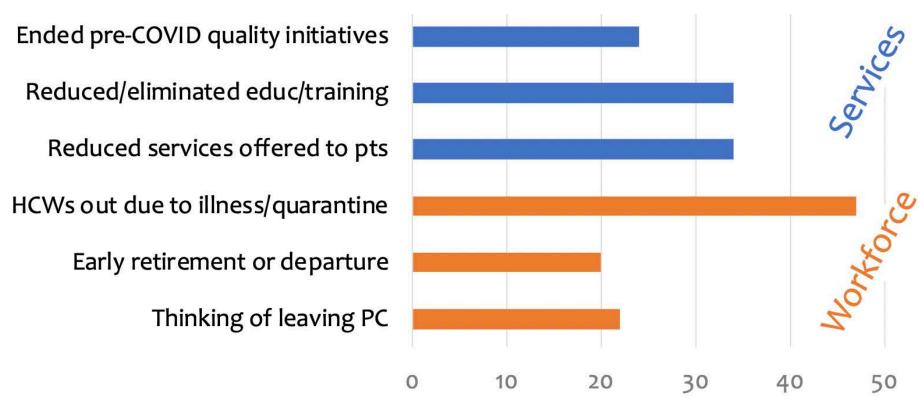


FOR PRIMARY CARE, the mental strain is palpable...





... and practice is shrinking.





So what did we do with that?



Where did we go?

Stop the hemorrhaging

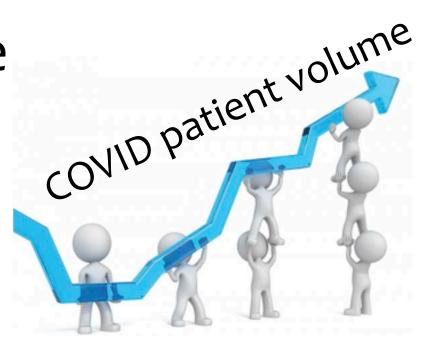


Wherever the wild things were...



Remember who you are

2019... 42% – at least once COVID... 53% – 2x in 8 weeks





Possibility of losing their doctor?

- 32% panic, heartbroken
- 39% upset, lost



Know the social contract is sound

Valued Relationship

Patients say: 77%

79% being seen ~ feel better 85% helps make sense of things 76% I can ask about anything 82% this is someone I trust











Where did we go?

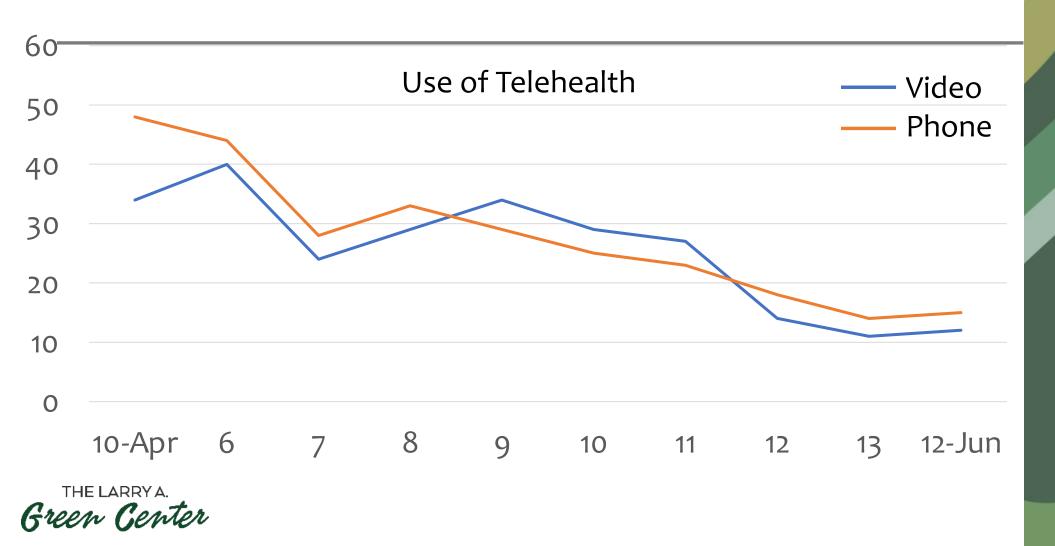
Stabilize practice



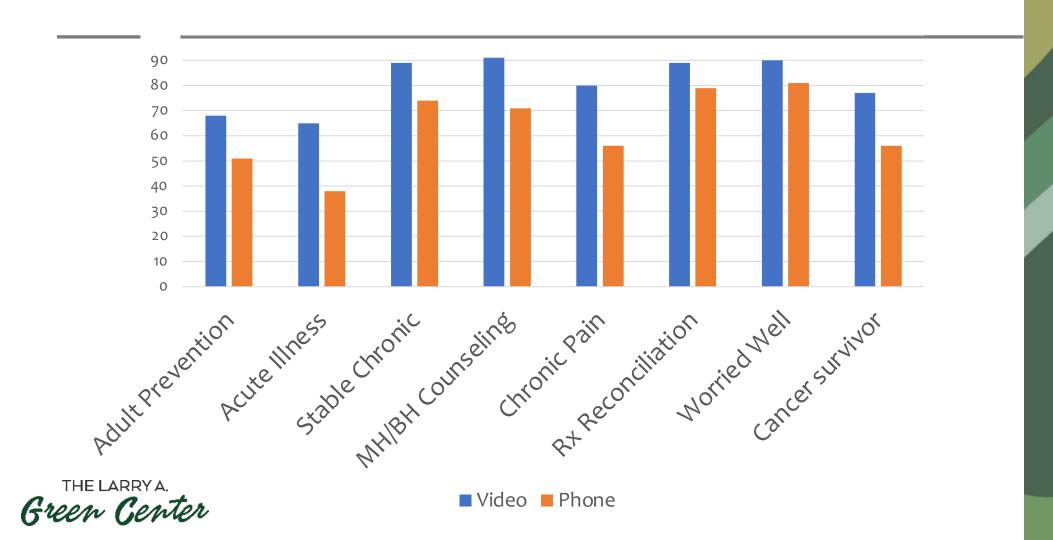
Wherever the wild things are...



Remember who you are teaching... ... and when



Telehealth has shown benefits...



Is telehealth...



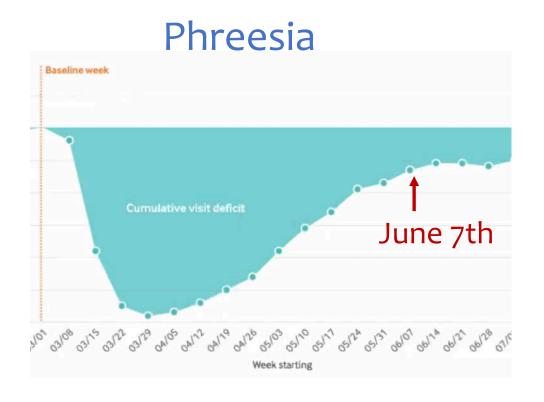
FTF down, contact at 37% all-time high patients struggle with 52% isolation patients with anxiety or depression lack tech access 22% needed insurers have pulled 21% back on funding clinician pull back on 52% use

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or spix.



Remember Evidence Based Practice Is about practice-based evidence

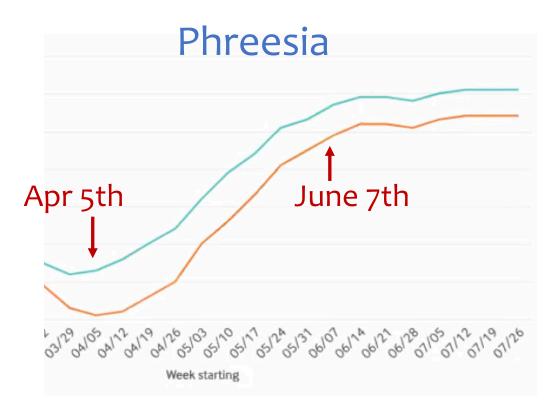


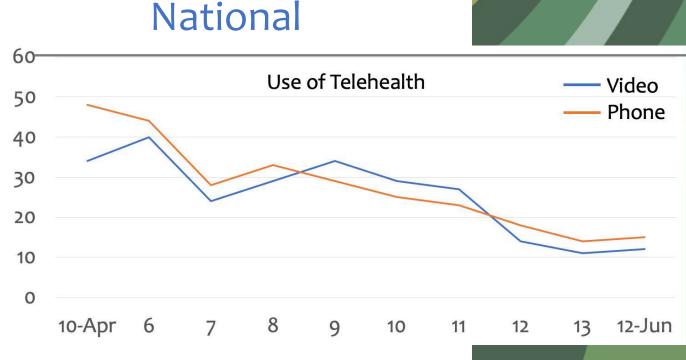
National

	FFS w/n 10%	FFS down >30%	FTF w/n 10%	FTF down >30%
Aug 21		28%		46%
Sep 4	26%	33%	28%	48%
Sep 18	23%		32%	



Remember Evidence Based Practice Is about practice-based evidence







Remember ... the patient is not a dirty window





Racism impact on patient health

Patients said

28% Physical health

56% Mental health

23% Primary care helped



Where did we go?



Strengthen by investing in the future



Key Takeaways:

- Neglect led to unnecessary vulnerability
- Lack of data was a handicap
- Trust deficit was a significant obstacle ... and yet...
- Primary care flourishes in the wild
- It is worthy of the public's trust
- It is founded in relational learning and leadership
- What we can't articulate, we may lose



Questions / Comments

Rebecca Etz, PhD rebecca.etz@vcuhealth.org www.green-center.org



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