

# VMG COVID-19 UPDATE

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Issue # 50

Good afternoon and happy Wednesday.

I'm sure it's occurred to you that the pandemic has changed many things, seemingly forever. Even after we have a vaccine that works, some changes will remain. But which ones?

Worldwide, we can expect changes maybe greater than what we saw from 911. Air travel will certainly be different, and not just from the sustained financial effects of the business interruption. More screening at the airport seems highly likely. Temperature checks, medical history questionnaires and screening, antibody certificate/passports? Cruise ships???

Schools and colleges will change for at least a year. For schools, consider how hard it will be to get second graders, for instance, on and off a bus while social distancing. And how about getting kids to wear masks? And what about the lunch lines?

Colleges will be challenged to pay their own bills and maintain their physical plants with fewer on campus activities and classes. What will students and parents be willing to pay for on line classes?

Most other institutions will be (or should be) forever changed. Think of Nursing Homes and other long term care. Jails and prisons have been crying out for change for a very long time. Hospitals are already changing as are our outpatient facilities.

Public transportation will need to look different with better service (to avoid crowds where possible).

The Governor got a haircut yesterday. Here's his description: "It wasn't a typical visit," the governor told reporters. "I showed up at 7 a.m. They took my temperature," Baker said. "The place where I got my hair cut had Plexiglas between the chairs. I had to wet my hair before I got there." Baker said he wore a mask the entire time and the man who cut his hair also wore a mask and a gown. "I was out in 20 minutes."

In medicine, telehealth is certainly here to stay, at least in some form (and that's good – more convenient for patients, better access, and many providers really like it). How will it be paid and regulated? So far, because of the pandemic crisis, we have a pass on (most) restrictions. In time, will more telehealth mean that we will see sicker patients in the health centers? How will we orchestrate the telehealth and in person visits? A lot to think about and implement in a relatively short period.

How will we manage our specialties that require physical presence (think about PT and Optometry, for instance) with the patient over time? And for those that don't require physical presence, under what conditions do we actually see patients (during and "after" the pandemic)?

I got an email today from Affordable Funeral Supplies asking if we needed to purchase PPE and Body Bags.

We've had dozens of emails about "contactless patient experience" platforms.

These are just some examples. Perhaps the biggest "system" that desperately needs changing is the way we finance and access healthcare. With job loss from the pandemic, millions of people lost employer sponsored health insurance. Many states were not ready to, or did not want to, expand Medicaid.

The debacle in supplying hospitals (aside from the political theatrics) is one effect of our uncoordinated, one person at a time, healthcare system. This pandemic should, if we are all paying attention, trigger a really serious look at a plan to create a coordinated health system at the national level.

This does not have to be controversial. There are dozens of models all over the world. Some are government run and some retain elements of private insurance (and even some employer payments). But they all are capable of coordinating responses and insuring everyone. **Oh, and, they all get better results (clinical and financial) than we do.** This is my opinion. But think about this as you think about voting. And whether you agree or disagree, get the facts and talk with friends and family. (If you want to read more about this, start with a very readable book written by T.R. Reid called *The Healing of America*. It reads kind of like a novel or investigative journalism. I have copies and I'm happy to lend them.

### **At VMG**

Remember our goals: provide the right clinical care at the right time in the right way while keeping patients, staff and practitioners as safe as possible.

We are continuing to work on developing "VMG Outdoor Office." The "tent" is up in the main parking lot of GHC. You'll see work on this at your health center soon. We're already expanding lab draws outside. We're already doing pediatric wellness visits and immunizations and we'll be bringing back adult wellness visits soon. The ASPC has a tentative start date for high risk colonoscopy of June 15.

We want to see all of our patients in the best way possible. We have multiple groups working on this objective now.

We will be sending the second edition of our VMG Patient Newsletter on June 1 to make sure our patients know what we can do for them.

OK. That's it for today. One last Goat Rodeo song, *Farewell Angelina*, a Dylan tune.  
<https://www.youtube.com/watch?v=QoULbn-P4d0>

And, my usual message (and I really, really mean it), please wash your hands (a lot), don't touch your face, maintain social/physical distancing (it works), **wear a mask** (it is not a political statement; it's a public health good), continue to be in touch with and take care of each other, and help to educate everyone.

Be well,

Joel  
*Be patient; be mindful*

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