

Letters to Leaders, Volume 6

A Strong Reliance on Each Other – Lessons Learned from COVID-19

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In a matter of months, COVID-19 swept across this nation, exposing crippling gaps in the U.S. healthcare system and, more broadly, deficits in the supporting social infrastructure. The response to this pandemic has also revealed the strong reliance that we, as individuals and organizations, have on each other and the insufficiency of formal systems to facilitate effective collaboration. As a public health professional and healthcare strategist, watching the pandemic unfold has been both a rude awakening and a striking illustration of the benefits of local, state, national, and international partnerships.

Partnership, or lack thereof, is perhaps one of the most critical and recurrent themes across active response efforts to date. During these unprecedented times, we have both celebrated successful partnerships and observed the devastating consequences of disconnected systems. The lessons learned from this crisis are endless and far reaching, but by focusing on successful and unsuccessful partnerships, I hope to highlight three lessons learned from response efforts to offer some insight into how we, as organizations, can improve as we move forward into recovery and beyond.

Here are three lessons from COVID-19 to consider:

- **Unconventional partnerships have helped protect and support the healthcare workforce.**
- **Advancing new and innovative partnerships can help protect outpatient and mental health capacity.**
- **Public health partnerships are critical.**

Unconventional partnerships have helped protect and support the healthcare workforce. Across all levels of emergency management, successful active response involves a large degree of partnership. For provider organizations and health collaboratives, this means having and implementing robust disaster plans that are inclusive of relevant community partners and stakeholders, with emphasis on protecting and supporting frontline staff. One of the biggest failures in response to COVID-19 has been a lack of Personal Protective Equipment (PPE) for our healthcare workers. Due to an inability to protect our frontline workers, we have seen [cases of crumbling partnerships](#) between health systems and their staff. In part, this failure can be attributed to a systemic lack of preparedness at the federal level. Fortunately, its impacts have been somewhat cushioned by strong community and public-private partnerships. From stories of [apparel companies manufacturing gowns and masks](#), [make-shift face shield factories](#), and [at-home mask production using 3D printing](#), to the [Ford and General Electric ventilator](#) partnership, these unconventional, albeit effective, partnerships have been a saving grace in times of crisis and have quickly filled the gap left by distressed supply chains.

Advancing new and innovative partnerships can help protect outpatient and mental health capacity. While policies and public discourse have remained focused on hospital care for COVID-19 patients, disruption of outpatient care has been pervasive. Despite explosive growth in the adoption of telemedicine, outpatient visit volume is still [more than 50% below pre-outbreak levels](#). This decline in volume can put outpatient practices at financial risk, potentially limiting access to care moving forward. As discussed in an earlier volume of “Letters to Leaders,” deferred care may result in a [“second surge”](#) of post-pandemic demand for outpatient care. Together, this dangerous combination of decreased supply and increased demand will likely have a negative impact on community health.

Front Line Focus

In this edition, we are remembering E.R. physician Dr. Lorna Breen at NewYork-Presbyterian Hospital, who the healthcare community tragically lost last week. Read [her story](#) in the New York Times.

How can we protect and expand outpatient services to meet the impending demand? Perhaps we can learn from the initiatives that have been launched during this crisis. For example, in [a study conducted by the Commonwealth Fund](#), nearly 30% of all visits at over 50,000 ambulatory practices were conducted via telehealth. Prior to the pandemic, that percentage was zero. COVID-19 has forced insurance companies to re-think and [amend their telemedicine policies](#), with many insurance companies waiving cost-sharing and some reimbursing telemedicine at in-person rates. Bolstering partnerships with telemedicine providers may not only be an interim fix, but in coordination with other supportive government policies, could be a long-term solution for protecting and expanding access to outpatient care. Similarly, “Stay at Home” orders have thrust mental health concerns to the forefront. Accordingly, we have seen partnerships emerge across the public and private sectors to offer mental health resources, such as [Headspace](#), [PsychHub](#), and free COVID-19 mental health hotlines, to the general public. These partnerships were born out of crisis, but they also teach us that pushing for new and innovative partnerships may be a solution to filling gaps across the care continuum, and improve access to care as we move forward.

Public health partnerships are critical.

Personally, I have found it most upsetting to witness the lack of resources that are available to help vulnerable populations navigate this pandemic – namely, poor access to care, social services, food, housing, greenspace, educational services, and unemployment services – and the provision of accurate information and coordination of these resources for those who need it most. COVID-19 has underscored the importance of public health and revealed the fragile, and sometimes broken, network of organizations working to support the health and well-being of communities. This is not a new concept; these are the core tenets of public health and we know that we can do better. Last week, Lucania’s founder and CEO, Michael Zaccagnino, discussed the emerging [“Health Collaborative”](#), describing the protective effects of provider and community-based partnerships. These types of partnerships are critical for shielding those we serve from future crises, and most importantly, for continuing to improve population health outcomes.

In closing, although this is a trying time with many teachable moments for all of us, it has also been a time of impressive collaboration between organizations, governments, companies, neighbors, strangers, family, and friends. This cooperative spirit and commitment to each other are the foundation of partnerships to come, and I am hopeful that the silver lining of this crisis will be a more connected and collaborative future.

Wishing everyone a safe and healthy week,



About Letters to Leaders

Letters to Leaders is a series written by team members at Fund Love and Lucania Partners. Each week we do our best to offer some perspective on the challenges we all face as leaders. We also pause to reflect and thank our industry’s frontline leaders and staff, for showing us the way during this unprecedented period. We share our ideas and appreciations from a place of good fortune, gratitude, and humility.