

Backlog Demands

Meeting the Challenges Posed
by Backlogs of Care



Poorly managed backlogs can have long-term implications for patients whose non-acute conditions have subsequently been exacerbated, many of whom will continue to avoid treatment for fear of exposure to COVID-19.

How to Manage Them

Backlogs of care pose a tremendous challenge to health systems and providers as they try to address them in the midst of caring for patients with COVID-19. To halt the spread of COVID-19, many hospitals, health systems, and providers postponed elective and non-emergency patient procedures. There is now a significant backlog of care that, if not managed correctly, has the potential to overwhelm existing capacity.

Health systems, hospitals and providers should:

- Have a measured, prioritized plan for addressing their deferred patient care, while minimizing the potential for exposure to COVID-19.
- Communicate clearly with patients and the communities they serve on the safety procedures and precautions that they are taking to minimize exposure.
- View the backlog as more than a financial optimization exercise and acknowledge the underlying issues of equity and access for those patients who may have greatest needs and lowest ability to pay.

Addressing backlog demand in this way may help to improve resiliency for future emergencies by optimizing resources and patient access, satisfaction, and trust.

Effectively managing the backlog of care caused by COVID-19 will help protect health care systems from being overwhelmed in the near future.

1 Develop a localized or regionalized model for the resumption of elective and non-emergency medical procedures and services that is based on established standards.

- For example, the Joint Statement: Roadmap for Resuming Elective Surgery after COVID-19 Pandemic, which was authored by the American College of Surgeons, American Society of Anesthesiologists, Association of Perioperative Registered Nurses, and American Hospital Association.

2 Understand the local facility capabilities as well as potential constraints.

- The assessment of current capabilities on a regular basis will allow for resumption planning accordingly to assist with efficient backlog demand management.
- Capabilities: bed availability, testing capacity, operating room access/readiness, PPE inventory levels, etc.
- Constraints: workforce, supply chain issues, etc.

3 Monitor and consider local COVID-19 testing availability and lab result times.

- Craft appropriate testing policies for patients (e.g., pre-operative testing of patients scheduled for surgery), facility, and staff (e.g., screening and testing guidance).

4 Think about utilizing advanced analytics to assess the incidence of disease and local community risk factors.

- Conduct readiness analyses around ramp-up/ramp-down feasibility that will inform planning and direction for the resumption and sustainment of safe patient care.

5 Consider conducting scenario planning of both deferred care backlog and anticipated future demand using objective priority scoring.

6 Develop a tactical plan to address current demand in alignment with facility capacity and ramp-up/ramp-down scenarios.

7 Prioritize non-emergency medical procedures and services based on case type, urgency, and patient comorbidities.

8 Review the supporting infrastructure required to enable ramp-up/ramp-down scenarios and inform policies and procedures.

- For example, human resources, bed capacity, patient demand, support services, etc.

9 Review and consider developing or revising, monitoring, and measuring facility-specific safety status.

- Collect feedback on current patient and employee safety concerns and adjust approaches accordingly.

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For more insight, download the whitepaper:
COVID-19 Lessons Learned: A Resource for Recovery
by Deloitte & Joint Commission Resources



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