

EFFECTIVE COMMUNITY PARTNERSHIP DURING THE PANDEMIC

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Effective Community Partnership During the Pandemic Patient Advocacy, as a profession, was born out of the need to assist individuals in navigating our increasingly complex healthcare system, often

working with community partners such as care facilities and in-home supports. The current COVID-19 pandemic has added one more layer of complexity to the maze, totally disrupting communication once a patient enters the hospital system.

Efforts to control the spread of the virus have forced hospitals to severely limit access to patients once admitted. This is true whether or not the patient has been infected by the virus. Overworked staff barely keep their heads above water just taking care of their patients, much less have time for any systematic updates on patient conditions. This is exacerbated when the patient has no relatives or family in the immediate area or has not designated someone to act as medical power of attorney.

We recently supported a patient who was hospitalized with several non-COVID issues. The patient had no immediate family in the area and no healthcare power of attorney. His fiancé was his local contact, but without a POA, she could not get any information on his condition. Dissatisfied with his care and exasperated by the complete lack of communication by hospital staff, she wanted to get him discharged and transferred to an assisted living facility. The hospital resisted, claiming he was not capable of making his own decisions at that point. The fiancé worked for two weeks to obtain this information and then contacted us for assistance. We were retained to determine what was happening with the patient and were also stonewalled when we tried to obtain his records. After another 10 days, during which we collaborated with social work, compliance and safety, and finally hospital legal counsel, we were ultimately able to get his records released to us and get him safely and appropriately discharged into an assisted living facility. Two things to note: we did this 100 percent remotely, and we brought an appropriate resident to the assisted living facility that was not already on its radar.

Skilled private patient advocates can help with these types of proactive steps, such as implementing a communication

protocol regarding care plans during hospitalizations leading up to discharge, as well as continuing to follow the patient outside hospital walls. Professional advocacy support leads to better patient outcomes, increased satisfaction of patient care received, and less likelihood of hospital readmission. We are also a valued community partner to care facilities and in-home supports. This is a win/win for all involved — primarily patients and families, but also healthcare systems, payor sources, and community partners.

Of course, the reader asks, “How can I be part of the solution? As a provider, our regulatory process is complaint driven, families are often overwhelmed, and medical professionals are short on time.” Given this, here are a few suggestions for being a good advocate in your facility and the larger care community — especially during these complicated times:

- Guide newly admitted residents in obtaining critical advance directives. This will save time and energy for all parties and will help manage the census, especially during a time of reduced admissions during COVID-19. Don’t assume that all current residents have their directives in place.
- Any time a resident or tenant experiences a change in condition, double check to ensure that all advance directives and POAs are current or updated. It’s always okay to ask outside sources to help.
- “Follow” your residents or tenants when they are hospitalized to promote clear communication. Proactive engagement helps ensure the transition back home is well managed. When possible, be a part of the care plan discussions. In cases where a return is not possible, engage all parties and, as needed, community partners to ensure the resident/tenant remains at the center of the conversation(s).
- Build community collaborative connections prior to point of need. Home health, hospice, hospital discharge teams, and advocates are among a few of the resources that can help promote resident-centered care.

As an assisted living provider, building and maintaining your census are no small tasks. The combination of a skilled advocate in the larger community and your intentional efforts in your setting can make all the difference.