

KNOCK-ON EFFECTS OF COVID-19 ON ESSENTIAL CHRONIC CARE

AND WAYS TO FOSTER HEALTH SYSTEM RESILIENCE TO SUPPORT VULNERABLE NON-COVID PATIENTS: A MULTI-STAKEHOLDER STUDY

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INTRODUCTION

The unprecedented pandemic prompted a collective shift towards immediate care for COVID-19 patients.

This resulted in considerable reorganisation of healthcare services, in particular chronic care. For example, clinic appointments and ancillary services were either postponed, or operated with minimum human resources.

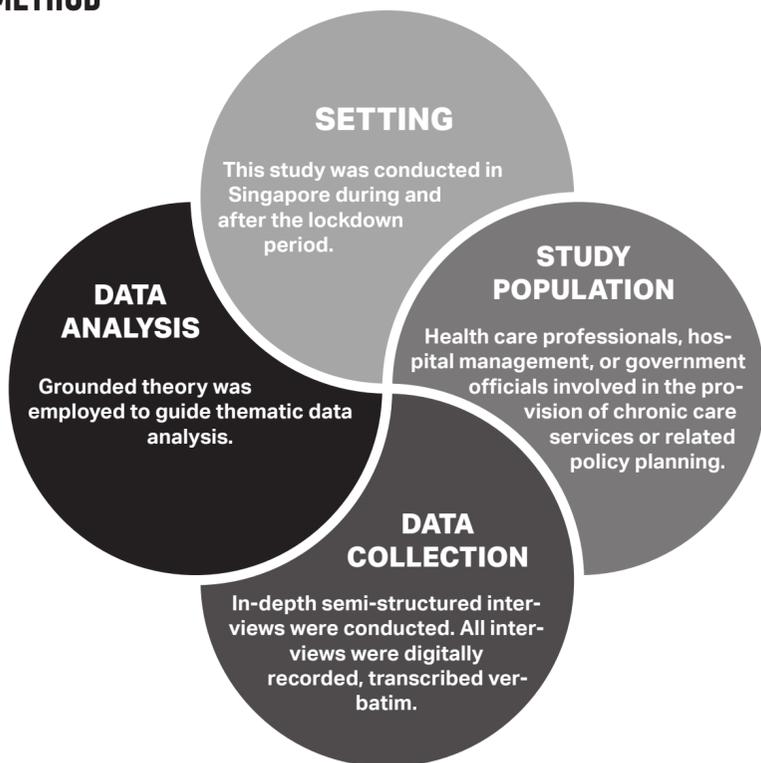
Such disruptions could have a knock-on effect on continuity of care. However, to date, little empirical research exists on how key stakeholders perceive the indirect effects of COVID-19 on non-COVID chronic patients.

OBJECTIVE

This study aims to:

- 1 Explore stakeholder experiences of the impact of COVID-19 on chronic care delivery.
- 2 Explore the evolving modalities of care.
- 3 Collate suggestions to improve health system resilience.

METHOD



RESULTS

Diagram 1. Characteristics of participants (n=51)

Characteristics	N (%)
Ethnicity	
Chinese	35 (68.6)
Malay	9 (17.7)
Indian	7 (13.7)
Gender	
Female	29 (56.9)
Male	22 (43.1)
Profession	
Doctor	20 (39.2)
Nurse	17 (33.3)
Allied Health Professional	3 (5.9)
Hospital Management Official	6 (11.8)
Government Official	5 (9.8)
Stakeholder Grouping	
Micro (program management)	37 (72.4)
Meso (organisation)	7 (13.8)
Macro (policy)	7 (13.8)

A total of 51 stakeholders participated in the one-on-one interview. Participants were of different designations and seniority levels to better capture a holistic view on the knock-on effects.

Diagram 2. Knock-on effects of COVID-19 control measures on routine chronic care

THEME	SUBTHEME
Workforce adjustment and its effects on routine practices	Disruption to communication and teamwork rendering less efficient patient care and rescheduling.
	Uncertainty in clinical decision making due to revision of treatment protocol and suspension of laboratory services.
	Unprepared to handle patients' emotional responses.
Diminished support and management of patients	Reduced access to routine therapy and diagnostics.
	Limited access to community social services.
	Longer waiting time for treatment or surgery and rejection of admissions.
	Discontinuity of care between hospital and community.
Adverse patient outcomes	Deterioration of existing conditions.
	Social isolation

Based on the stakeholders' experiences, knock-on effects can be defined as disruptions caused by COVID-19 on three aspects of routine clinical practices in chronic care.

Diagram 3. Evolving modalities of care amidst the COVID-19 pandemic

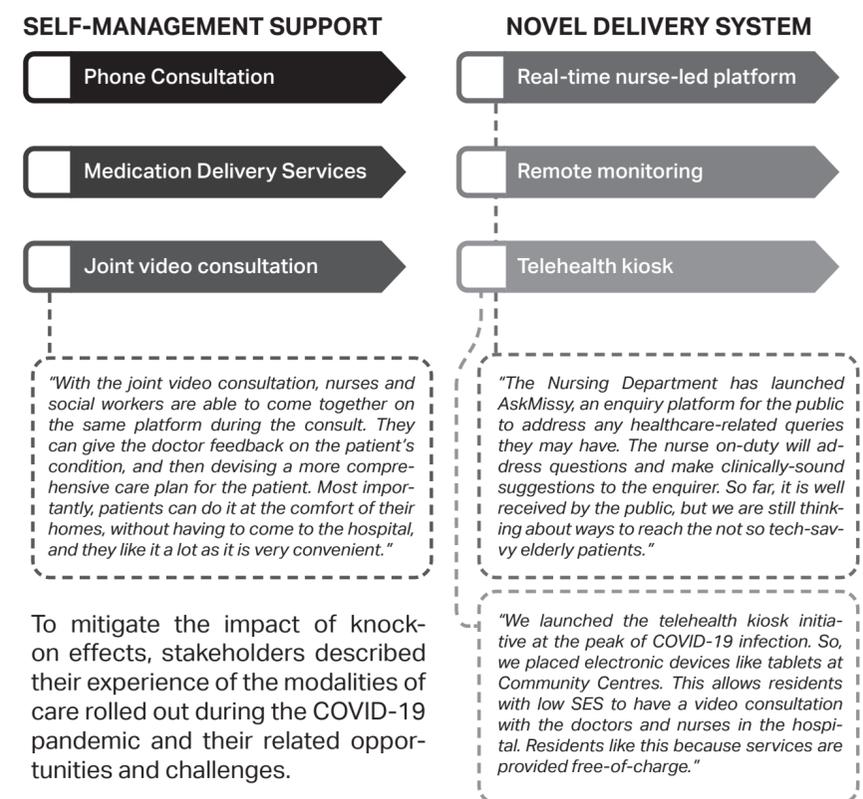
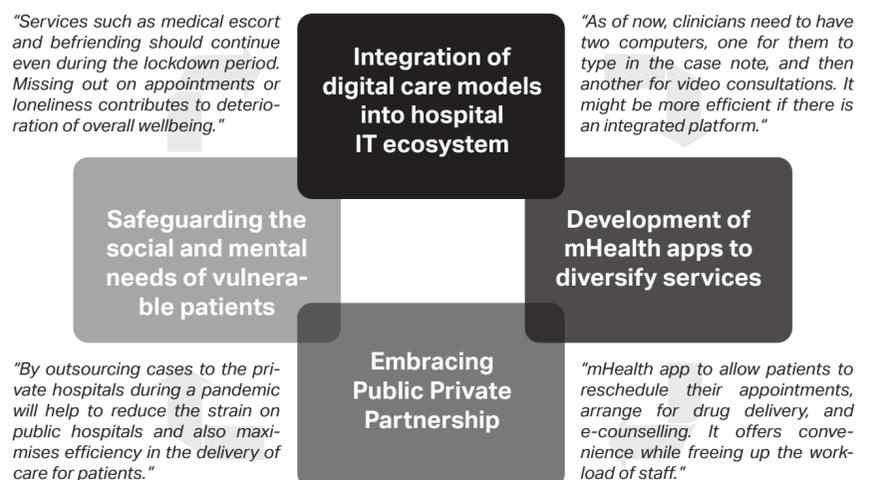


Diagram 4. Strengthening healthcare system resilience



To strengthen healthcare system resilience, stakeholders expressed an urgent need to leverage on technology, reconfigure existing institutional arrangement, and preserve holistic care.

CONCLUSION

- COVID-19 control measures had knock-on effects on chronic care in the areas of **team communication, clinical decision making and care continuum**.
- Digital innovations supported chronic care for some patients.
- However, there were concerns that ‘**digital divide**’ would remain.
- Integration of digital care into **IT ecosystem, strategic partnerships, and a holistic approach** in the provision of psychosocial and community services strengthens healthcare system resilience.