

## 3 big challenges to team-based care during the pandemic

APR 27, 2021

**Sara Berg, MS**

Senior News Writer

---

Telehealth was thrust into the spotlight during the early days of the pandemic as people were urged to “stay home and save lives” and physician practices, hospitals and health systems canceled elective procedures. But as patients flocked to telehealth, it was not without challenges to team-based care.

“Over the weekend of March 13 through 15, our operations team worked countless hours throwing our standard operating procedures out the window and writing a new script for all of our outpatient practices,” AMA member Kevin Hopkins, MD, primary care medical director for Cleveland Clinic Community Care, said during a recent AMA webinar on challenges to team-based care during the pandemic. “Our ambulatory primary care volume decreased by nearly 40% and virtual visits went from 3.2% in that week of early March ... to being 61% of our total visit volume literally overnight in the span of four weeks.”

“The proportion of Cleveland Clinic outpatient visits that were provided virtually increased from 2% across the whole of our enterprise to 75% and to just over 90% in primary care,” said Dr. Hopkins. “This shift was seismic. It was game changing in every single meaning of that phrase and with that came a great opportunity, a steep learning curve and some significant challenges.”

### Maintaining physical distancing

“One of the big challenges to operating in this type of health care delivery system and patient flow system is the need for physical distancing,” said Dr. Hopkins. “In our system, standard exam room sizes are 10 foot by 10 foot or 10 by 12.”

“That allows enough space for essentially two to be in there and maintain six feet of physical distancing,” he added. “Certainly, we provide masks, face shields and goggles to our caregivers, but we also want to be mindful of the need to maintain safe physical distancing.”

“We had to really think differently about our team-based care model in this new era relative to these specific challenges,” said Dr. Hopkins.

## Completing handoffs

“There’s also the need to sanitize shared tools like computers, instruments and other tools that may be utilized during patient encounters,” said Dr. Hopkins. “It’s caused us to think about how we do handoffs between one caregiver and another, and how we communicate back and forth.”

“Pre-COVID we would hand the demographic page back and forth clipped to a clipboard,” he said. But “when you have a worldwide pandemic of an infectious disease, it all of a sudden seems like a bad idea to do that.”

“We’ve had to find different ways to do that” such as using the “sticky note function within our EMR system and utilizing things like instant messaging features,” said Dr. Hopkins.

Watch this episode of “AMA COVID-19 Update” about implementing team-based care effectively within telemedicine.

## Sustaining team approach

“The doctor does it all mentality is no more sustainable in a telemedicine environment than it is in a traditional in office practice model,” said Dr. Hopkins. “Yet we’ve quickly reverted to that mentality when the sauce hit the floor and we needed to do something different.

“Though it felt like forward movement in many ways, because it leveraged technology, in some ways we took steps backward,” he added. “Everyone knows that it’s dangerous to text and drive. When you’re multitasking and distracted, your reaction time is longer. Your attention is divided and there’s more opportunity for bad things to happen.”

“The same things can happen when our attention is divided when we’re taking care of patients,” said Dr. Hopkins. “We’re inherently aware of the perils of this time pressured divided attention—the risks of skipping steps, taking shortcuts, miss typing or clicking, incomplete ordering or placing the wrong



order, documentation inaccuracy, working in the wrong patient's chart, inadvertently sharing protected health information with the wrong patient.

“These are all things that can happen when we're distracted, shifting tasks frequently and don't have our full complement of team support,” Dr. Hopkins added.

Learn more from the AMA STEPS Forward™ webinar series, which focuses on physician well-being, practice redesign and implementing telehealth during COVID-19.