Submission Id: 3454

Title

Primary Care Workload Experience

Priority 1 (Research Category)

COVID-19

Presenters

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Abstract

Background: In spring 2021, outbreaks of new variants of SARS-CoV-2 and vaccine resistance disrupted hopes that the pandemic was waning. New cases overwhelmed inpatient services, often shifting care of very ill patients to outpatient services. Methods: A primary care learning collaborative within a large health system conducted a member survey to study the impact of the pandemic on workload demands during winter 2021-2022. Members were asked about their experience with very ill patients in the outpatient setting and whether their ability to admit or transfer patients was impacted. Survey recipients were asked to rate the importance of planning for future unexpected medical crises. Results: 192 surveys were sent, 85(42%) responded. Of the 79 providing Primary Care outpatient services, nearly 1/3 reported a slight to significant increase in patient acuity. This was more pronounced in rural practices (44%) compared to those in non-rural practices (35%; OR= 1.29). 86% reported caring for very ill patients in the office in the two weeks preceding the survey, with 26% caring for 6 or more. Clinicians reported caring for the following problems: cardiovascular (76%), respiratory (47%), infectious disease (41%), gastrointestinal (26%) and mental health (26%). They reported difficulty admitting patients (76%), transferring patients (86%), prolonged emergency room stays (70%), and difficulty transferring to long term care (80%), without variation by hospital type (tertiary, secondary, critical access). Overall, 69% of members ranked the question on the importance of future preparation from 8-10, however, those in urban areas were less likely than their peers to do so (64% v 72%; OR 0.89). Discussion: During the COVID surge of 2021-2022 overwhelmed inpatient units, often a safety net for the very ill, shifted care back to outpatient management. Together, these elements served to further stress an already overworked primary care system.