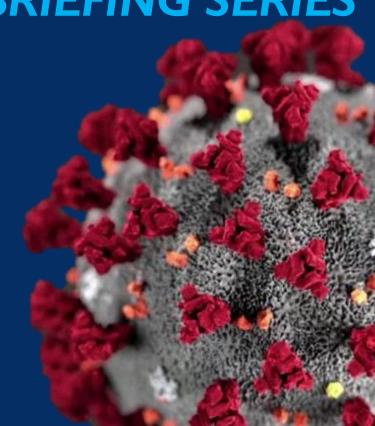


**SESSION 4** 

Dealing with the New Normal

August 26, 2020 7:00 PM - 8:15 PM EDT www.NHMAmd.org





# Welcome

## Yvette Peña

Vice President, Multicultural Leadership Hispanic/Latino Audience Strategy AARP





# Elena Rios, MD, MSPH, FACP

President & CEO

National Hispanic Medical Association

National Hispanic Health Foundation

# **Housekeeping**

- Presentations to be followed by 10-15 minute discussion
- Microphones will be muted
- Type questions in chat box
- Recording available next week at www.NHMAmd.org

# COVID-19 Cases in CA, NY, and TX

National Hispanic Medical Association

Total U.S. Cases 1: 5,715,567

Total Deaths<sup>1</sup>: 176,617

Number of cases by state <sup>1</sup>						
California	New York	Texas				
668,615	431,335	580,384				

Percent of Hispanic/Latino cases & deaths by state							
California <sup>2</sup>		New York Department of Health only reports cases of death by race/ethnicity	NYS excl. NYC <sup>3</sup> New York Department of Health only reports cases of death by race/ethnicity	Texas <sup>4</sup>			
Cases	Death	Death	Death	Cases	Death		
59.5%	48.1%	34%	14%	39.9%	54.5%		
38.9% population		29% population	12% population	18% population			

- 1. <a href="https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html">https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html</a> (as of August 25, 2020)
- 2. <a href="https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Race-Ethnicity.aspx">https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Race-Ethnicity.aspx</a> (as of August 24, 2020)
- . <a href="https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no&%3Atabs=n">https://covid19tracker-Fatalities?%3Aembed=yes&%3Aembe
- 4. https://txdshs.maps.arcgis.com/apps/opsdashboard/index.html#/ed483ecd702b4298ab01e8b9cafc8b83 (as of August 25, 2020)





- Mission: to improve the health of Hispanics and other underserved
- We encourage you to enroll and inform others about the clinical trials for COVID-19 Vaccine
  - Minorities tend to be less represented at <10 percent of trials</li>
  - 2 injections, 4 follow-up visits
- www.CoronaVirusPreventionNetwork.org
  - Moderna Vaccine Clinical Trial Locations
- www.COVIDVACCINESTUDY I.com
  - Pfizer Vaccine Clinical Trial Locations
- HispanicHealth.info



# Dealing With The New Normal

David R. Grube, MD

National Medical Director

Compassion & Choices



(take a moment ...)

# **Plan Your Care**

© & choices



Compassion & Choices is committed to empowering people to get the care they want during a serious illness or at the end of life. One way we do that is by helping people plan well and become good advocates for themselves and their loved ones.

Visit our Plan Your Care Resource Center

# Plan Your Care Resource Center

Compassion & Choices is committed to empowering people to get the care they want during a serious illness or at the end of life. One way we do that is by helping people plan well and become good advocates for themselves and their loved ones.

# End-of-Life Decisions Guide & Toolkit →

Download our thorough end-of-life planning guide and toolkit to help you navigate your end-of-life choices

#### Take Control of Your Care with Tools to Finish Strong →

Explore our Tools to Finish Strong, including the new Dementia Values & Priorities Tool and Dementia Decoder.

#### Doc2Doc Consultation Program →

Doc2Doc offers practicing physicians free, confidential telephone consultation with one of our seasoned medical directors

#### COVID-19 Toolkit

COVID-19: Understanding Your Options

COVID-19: Using Telehealth to Reduce Your Risk

COVID-19: Advance Care Planning

COVID-19: Addendum to your Advance Directive

COVID-19: Dying in the Age of the Pandemic

<u>Juego de Herramientas del</u> COVID-19

COVID-19: Impact on Underserved Communities



# **COVID-19 Toolkit**

COVID-19 has given us a new awareness of our own mortality, making end-of-life planning more important than ever. With that awareness is a new set of challenges: confusion over treatment options and concerns about dying in complete isolation from your family — exactly the death many of us have always feared most.

To help sort through these confusing topics, Compassion & Choices is hosting <u>a series of webinars</u> to help you navigate your care preferences at life's end, in order to realize a dignified death and to ultimately Finish Strong. As part of that series, these resources answer some questions you may have about end-of-life care during the COVID-19 pandemic.

**COVID-19: Understanding Your Options** 

COVID-19: Using Telehealth to Reduce Your Risk

COVID-19: Advance Care Planning

COVID-19: Addendum to Your Advance Directive

COVID-19: Dying in the Age of the Pandemic

COVID-19: Impact on Underserved Communities

Juego de Herramientas del COVID-19

# COVID-19: UNDERSTANDING YOUR OPTIONS

- Who is most effected by the coronavirus?
- What are the symptoms of COVID-19?
- What do I need to think about if I become seriously ill with COVID-19?
- What do I need to know about different treatment options?

Non-invasive respiratory care

Feeding tubes

Intubation and ventilation

Cardiopulmonary resuscitation

Comfort-focused treatment

# COVID-19: USING TELEHEALTH TO REDUCE YOUR RISK

- What is telehealth?
- What are the benefits of telehealth?
- What type of healthcare visits can telehealth replace?
- How can I use telehealth?
- What if I don't have insurance?

# COVID-19: ADVANCE CARE PLANNING

- What should I be telling my loved ones, when I am well?
- What are the steps to take to create a plan?
  - Make a telehealth ACP appointment with your health care provider
  - Choose a healthcare proxy
  - Complete an Advance Directive
  - Complete a COVID-19 Addendum
  - Determine whether a POLST form is necessary
  - Print, video record, and distribute your wishes

# COVID-19: ADDENDUM TO YOUR ADVANCE DIRECTIVE

## COVID-19 Advanced Directive Addendum: Documenting Your Preferences

Please attach this form to your advance directive and date and sign. Then have it signed by witnesses in accordance with witness signature requirements for your state's Advanced Directives. Please note, this Advance Directive is only intended to provide instructions in the event that this person has COVID-19.

• If your oxygen levels are dropping, do you want to go to the hospital or would you prefer to try to get non-invasive respiratory care at home?

 If you are not able to receive non-invasive respiratory care at home, do you want to go to the hospital?

• If the care that is available to you at home can keep you comfortable, but cannot save your life, is your preference to stay at home? Or do you want to go to the hospital?

# COVID-19: DYING IN THE AGE OF THE PANDEMIC

- Avoiding the hospital
- Saying Good-bye
  - When you are sick
  - When you are well
- Memorializing your loved-one

# COVID-19: IMPACT ON UNDERSERVED COMMUNITIES

Hispanics/Latinos have a greater share of confirmed cases compared with their share of the total population in several states; for example in Wisconsin (26% vs. 7%), Delaware (26% vs. 9%), Arkansas (24% vs. 8%), and Iowa (21% vs. 6%). Certain local areas also show higher than normal percentages of cases, such as southern Texas and the east coast of Florida.

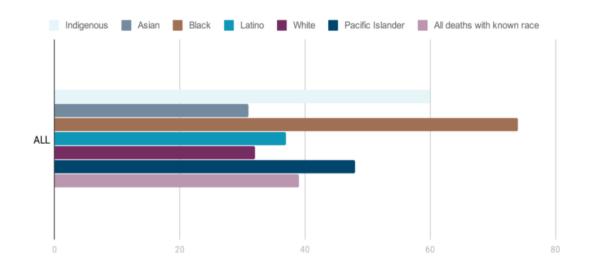
Know your risk.

Reduce your risk.

Get care safely

Plan your end-of-life wishes

# COVID-19: IMPACT ON UNDERSERVED COMMUNITIES



# Juego de Herramientas del covid-

COVID-19: Conociendo Sus Opciones

COVID-19: Utilizando la Telesalud para Reducir Sus Riesgos

COVID-19: Planeación de una Directiva Anticipada de Salud

COVID-19: Anexo a su Directiva Anticipada de Salud

COVID-19: Muriendo en la Era de la Pandemia

COVID-19: Impacto en las Comunidades Marginadas

One does not ask of one who suffers: What is your country and what is your religion?

One merely says: You suffer, this is enough for me; you belong to me and I shall help you.

LOUIS PASTEUR, MD 1886





# COVID-19 and the New Normal: N

Winifred V. Quinn, PhD, FAANP (hon)

Director, Advocacy & Consumer Affairs
The Center for Champion Nursing in America
AARP

# **Future of Nursing: Campaign for Action**

#### **FUTURE OF NURSING™**

Campaign for Action



**Education** 



**Practice & Care** 



Leadership



**Diversity** 



Interprofessional Collaboration



**Data** 

#### **Health tied to:**

- How much money people make
- How much school they've completed
- Neighborhoods they live in
- High Speed Internet/Connectivity?



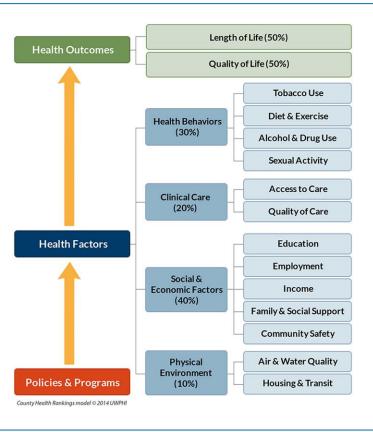
Copyright <2009> Rodger Tully

The choices we make are based on the choices we have

# **Many Factors Affect Health**

#### **FUTURE OF NURSING™**

Campaign for Action



## **Improve Workforce Diversity**

# Nurses should reflect the population in terms of gender, race, and ethnicity.

- All nurses should provide culturally competent services and care.
- Greater workforce diversity may help to reduce health disparities and improve health outcomes in diverse communities.
- Achieve Health Equity.

### **Equity, Diversity & Inclusion Steering Committee**

#### **FUTURE OF NURSING™**

Campaign for Action









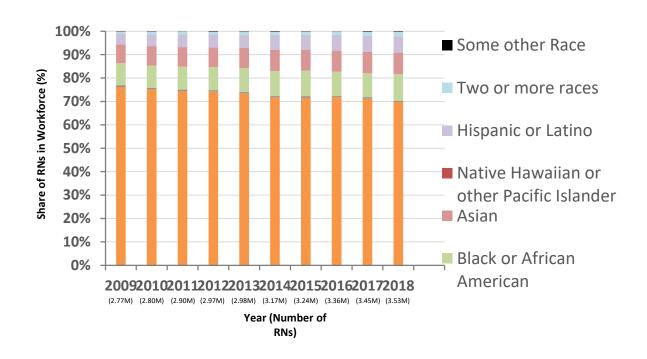




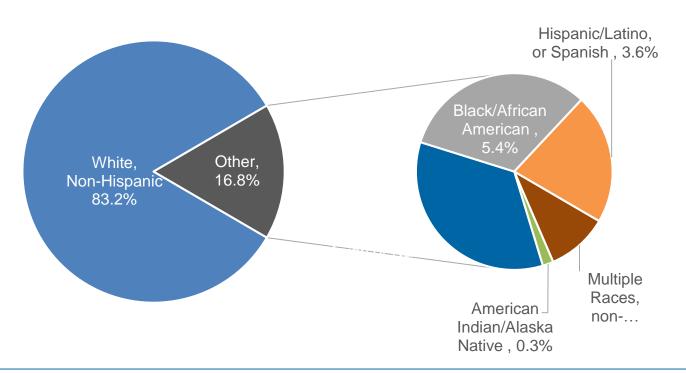




# RN Workforce by Race/Ethnicity, United States, 2009-2018



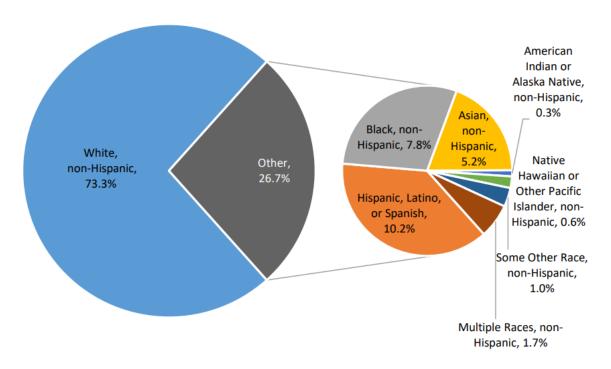
# Distribution of RNs by Race and Ethnicity 2008 NSSRN



# Distribution of RNs by Race and Ethnicity 2018 NSSRN

#### **FUTURE OF NURSING™**

Campaign for Action



## **Action Coalition Diversity Efforts**

#### **Action Coalitions:**

- Partner with orgs representing historically marginalized communities including HBCUs & other schools of nursing educating diverse students
- Create a diversity manual of best or promising practices.
- Develop a toolkit for ethnic minority recruitment of faculty and students.
- Testing Health Equity Toolkit



## **Why Mentoring**

- Reports of Recidivism (& Recruitment for Some Populations)
- Retention & Graduation
- NCLEX Passage Rates Improvement
- Supporting Each Other
- Creating a Culture of Cooperation
- Creating a Professional Progressive Culture of Mentorship



#### White House Initiative on HBCU's



#### 2019

- Invited
- "Nursing Track" =
  - Reception
  - Training
  - Panel



### **Ongoing Work**

- Learning Collaborative with HBCU's
  - Peer to Peer Sharing
  - Resources to Funding Strategies
  - Introductions to Funding Sources
- Hispanic-Serving Schools
  - Co-Sponsored and Planned with NAHN
  - Planning Committee
- Native American Serving Schools
  - Co-Sponsored and Planned with NANAINA
  - Planning Committee



#### **Short-term Successes**

#### FUTURE OF NURSING™ Campaign for Action

- Cooperation & Grant \$
  - Maryland HBCU's
  - Action
     Coalitions and
     HBCU's
- Adapting to Practice Environment
  - Cone Health,
     NC
    - Staff Nurses,
       SDOH,



Campaign for Action

#### **New Normal Needs: HBCUs, HSIs, Native American**

- Simulation
  - Free Resources
  - Recent Webinar
- PPE for students
- Racial and Social Justice & Equity Resources
  - Especially requested by White faculty



# FUTURE OF NURSING™ Campaign for Action

#### **New Normal Telehealth**



Numerous federal & state policy changes to accommodate more telehealth. AARP continues to assess.

- It's all about home and community
- Need to meet people where they are
- People are using it more, including older adults

However, AARP June research:
 H/L less likely (lack of broadband



# **Help Shape the Future of Health Care**



- Join or support an Action Coalition.
- Sign up for our email alerts and newsletters.
- Visit our website.
- Educate your organization about the Campaign.

www.campaignforaction.org

thttp://facebook.com/campaignforaction www.twitter.com/campaign4action



## Dealing with the New Normal

## Alison Whelan, MD, FACP

Chief Medical Officer

Association of American Medical Colleges

- Switch to online and virtual classroom learning
- Disruption of clinical rotations
- Highlighting of SDOH gaps and education gaps
- Highlighting of SDOE and support gaps



### Switch to online and virtual classroom learning

#### Innovations

- Virtual anatomy expanded
- True anytime and anywhere collaboration
- Enhanced use of simulation
- Re-thinking of lectures vs. reading
- Creation and sharing of curricula across schools

### Challendes

- Costs of high-tech simulations and VR anatomy
- Lack of experts in instructional design
- New challenges for some students with learning disabilities
- Bandwidth and privacy issues with work from home



### Disruption of clinical rotations

#### **Innovations**

- Telehealth/telemedicine
- Telelearning
- Use of simulation
  - VOSCES (virtual OSCES)
- Increased attention to competency-based education (CBE)

### Challenges

- Education gaps in telehealth
- New ethical concerns
- Need for more and better CBE assessment seen as critical



Disruption of clinical rotations

#### **Innovations**

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### Challenges

- Education gaps in telehealth
  - New ethical concerns
    - Need for more and better CBE assessment seen as critical



## **Education Gaps: Telehealth**



Conducted online survey of curriculum leaders at LCMEaccredited U.S medical schools (Nov. – Dec. 2019)



Respondents were asked about several aspects of telehealth curricula, including

- extent to which telehealth was included;
- exposure to various telehealth modalities;
- methods for teaching and evaluation;
- and barriers to introduction or expansion of telehealth curricula



About half of U.S. medical schools offered some form of telehealth education in 2019, and there was large variation in types of instruction



## **Telehealth Competencies**

- Developed by leaders from across the medical education and clinical practice communities.
- Add depth to selected areas to help guide curricular and professional development, formative performance assessment, cross-continuum collaborations, and, ultimately, improvements in health care services and outcomes.
- A guide for everyone who develops curricula within the field of medicine and for people learning to practice or continuing their professional development.

Pre-Publication Release (end of August 2020) with report in Winter 2020



## **Ethical Challenges**



Placing public health and HP safety above individual learning needs



Placing service needs above learning needs—at what cost?



- > Redeployment:
  - Personal safety vs. Clinical need
  - Competence for new scope of practice



## Highlighting of SDOH gaps and education gaps

### Need for new curriculum and learning experiences

- Understanding of the new virus—rapidly evolving
- Enhanced population health
- Enhanced focus on social determinants of health
- Anti-racism and bias training (Equity, Diversity and Inclusion)

### **Need for true Competency-Based Education**

- Graduate competent, confident students despite disruption
- Redeployment of residents and faculty: public trust and physician confidence

Can the Med Ed community continue the new collaborative sharing?



## Highlighting of SDOH gaps and education gaps

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### **AAMC** Resources

- MedEdPORTAL Anti-racism in Medicine Collection
- Equity Diversity and Inclusion Competencies across the continuum
- Med Ed Senior Leaders working group on Anti-racism



### **AAMC** Resources

### MedEdPORTAL Anti-racism in Medicine Collection

The Anti-racism in Medicine Collection provides educators with practice-based, peer-reviewed resources to teach anti-racist knowledge and clinical skills, elevates the educational scholarship of anti-racist curricula, and aims to convene a community of collaborators dedicated to the elimination of racism within medical education.

#### MedEdPORTAL actively seeks teaching activities or assessments related to:

- Racism
- Microaggressions
- Trauma-informed care
- Implicit bias, health disparities, and/or social determinants of health where racism is a significant component

www.mededportal.org/anti-racism



### **AAMC** Resources

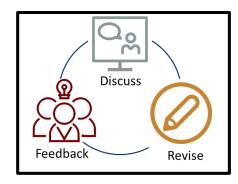
## Diversity Equity and Inclusion Competencies across the continuum

Educators, their diverse healthcare colleagues, including patients, can use the competencies as a starting point for conducting collaborative discussions on topics related to equity, diversity, and inclusion.

**Expert EDI Advisory Committee helping to write and refine competencies** 

#### Timeline for external stakeholder review and feedback:

- Draft 1: External Feedback (September 2020)
- Draft 1: Revisions (October 2020)
- Draft 2: External Feedback (November 2020)
- Draft 2: Revisions (December-January 2020)
- Pre-Publication Release (Winter 2021)
- Report Release (Spring 2021)





## Highlighting of SDOE and support gaps

#### **Individual Learners:**

- Greater personal and community impact of COVID on our URM learners
- Students of lower SES face more barriers for effective online learning
  - Cost of technology
  - Physical setting
  - Geography (esp. rural students)
- The simultaneous trauma of police violence

#### **Schools and Programs:**

- Costs of switching delivery
- Impact on patient populations
- Relative instructional design and other support
- Financial and person resources to provide needed support.

Can the Med Ed Community share best practices in supporting students?



## Dealing with the new normal.....



## Dealing with the new normal.....

**Lessons from** 

and ever changing non-normal



## Lessons from our ever changing non-normal

Nimbleness, Innovation

**Collaboration** 

**Humbleness, Openness** 

No status quo

Focus on core values

Its all about the <u>patient</u>.
And the <u>learners</u>.
And the health care <u>team</u>.





## A VIRTUAL CHAPTER POLICY FORUMS

Thursday, September 10: Boston & Phoenix Chapters

Diabetes in the Latino/Hispanic Population–Challenges &

Opportunities

7:00 PM - 8:15 PM ET

Wednesday, September 16: Chicago & Indianapolis Chapters

COVID-19 & Diversity in Health Care

7:00 PM - 8:15 PM ET

**Wednesday, October 14**: New York City & Philadelphia Chapters

COVID-19 Impacts on Latinos & Reflections from the

Frontlines

7:00 PM - 8:15 PM ET

Thursday, October 15: Gulf Coast Chapter

Update on Latest Science on COVID-19: Results of Research

Trials from Academic Centers in the Region & Response of Medical Training Programs

7:00 PM - 8:15 PM ET

**Thursday, October 15:** El Paso, Rio Grande Valley, & San Antonio Chapters

Impact of COVID-19 on Border Communities

2:00 PM - 4:00 PM ET

Tuesday, October 20: DC Metro Area Chapter

COVID-19 & Health Literacy

7:00 PM - 8:15 PM ET

Thursday, October 22: Miami Chapter

Physician Activists for Immigrants

in Detention Centers

7:00 PM - 8:15 PM ET

Thursday, October 29: Northern & Southern California

Chapters

COVID-19, Heart Disease, & Health Care Workforce

6:00 PM - 8:00 PM ET

Learn more about NHMA chapters here: http://bit.ly/NHMAPolicyForums2020