Impact of COVID-19
What Does It Mean For Nurses and Health Systems?

We are at a loss for words during this COVID-19 crisis. A crisis on this scale that will change society in dramatic ways...for better or worse. The rapid growth in the number of coronavirus cases, approximately 11,662,574 cases worldwide with 539,764 deaths (Worldometers, 2020), is affecting several sectors from the financial market to the health of the population. This is a crisis with implications for the economy, health systems, and patient care delivery. The purpose of this editorial is to explore the impact on nurses and health systems.

The pandemic raises questions about the ability of the health care system to remain financially solvent in the middle of changes in care delivery. As the outbreak has infected more than 2,953,423 persons across the United States, resulting in 130,546 deaths so far, health systems have tested and treated hundreds of thousands of Americans in an effort to save lives and minimize the virus’ spread (American Hospital Association, 2020). By one estimate, the United States has already spent more than $6 trillion with the COVID-19 pandemic, and that number will grow. With a shrinking economy—where the projected global growth is anticipated to decrease to 1.8% for the year 2020, decreasing inflation due to loss of wages (approximately 30 million unemployed in the United States), lower oil prices, and overall reduction in global growth (Swonk, 2020)—we are in an unprecedented and precarious position.

What is being done to help? For one thing, the Federal Reserve has announced extensive measures to support the economy, purchasing $500 billion of Treasury securities and at least $200 billion of mortgage-backed securities (Swonk, 2020). In addition, a $2 trillion federal stimulus package was passed on March 27, 2020, with bipartisan support, termed the Coronavirus Aid, Relief and Economic Security (CARES) Act (Sarbanes, 2020). The CARES Act also includes funding for public health preparedness through the Centers for Disease Control and Prevention and $250 million to the Hospital Preparedness Program (Veenema & Meyer, 2020). These actions provide essential measures to respond to the economic crisis and hospital-based education and training for staff caring for patients with COVID-19.

The overall economic impact of the pandemic is badly affecting not only health systems but health care workers across the country. Health systems use a variance analysis to determine the variation between the actual and planned costs and charges (Mose et al., 2019). Currently, the amount of money being spent was not included in budgeting at the beginning of the fiscal year, which started last July. The health systems budgets did not take into account closing money-making units, such as operating rooms, interventional radiology, and outpatient services, nor had they planned for many months of high burn rates of personal protective equipment (PPE), medications, and other supplies that are difficult to obtain and much more expensive at this time. For example, the cost of surgical masks has increased by six times their pre-COVID-19 normal value, gowns have doubled in cost, and N95 respirators have tripled (World Health Organization [WHO], 2020). Therefore, the current pandemic places health systems under a huge unfavorable variance analysis, which affects two central issues: nursing staffing and supplies needed for the massive influx of patients with COVID-19, and later, an additional return to elective procedures and more patients coming back for routine care.

How are nurses faring? The American Nurses Association (ANA; 2020) conducted a survey in March-April 2020 of 32,000 nurses and found that 87% feared going to work, 36% have cared for an infectious patient without having adequate PPE, and only 11% believed they were well-prepared to care for patients with COVID-19.

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the decision to leave the profession (ANA, 2020).

Nurses are part of society, too—the COVID-19 pandemic has rapidly disrupted our everyday lives. We do not need to get sick to be rocked by a radical change in reality. Uncertainty about the future, fear for ourselves and our loved ones, and stressful difficulties, such as unemployment, unstable finances, feelings of isolation, and loss, are all around us.

As frontline health care professionals, nurses are the true heroes who risk everything to care for patients. They are an important part of health systems, as they handle this crisis and develop strategic planning processes for the future. These processes set objectives, allocate resources, and establish policies that are the framework of the organization and will determine the degree of financial success and quality of care (Mose et al., 2019). Nurses will continue to provide care and do the right thing, even in the face of fear and concerns about safety.

During this time of fear and stress, practicing nurses have worked long shifts. Despite the stress and anxiety generated by the workplace environment, they are often not provided with adequate emotional support (Veenema & Meyer, 2020). The physical and mental exhaustion, lack of knowledge, and in many cases, lack of skills to care for patients can lead to negative emotions and psychological trauma (Sun et al., 2020). Under these conditions, the WHO recognizes the importance of nurses’ mental health and well-being. Therefore, nurses need supportive psychological interventions to promote emotional release and improve their mental health.

How will the COVID-19 pandemic impact the future of nurses and nursing? Asking many questions in the present can be very effective for the future. According to Dr. Mary Glasgow, Dean of Nursing at Duquesne University (Kirkland, 2020), “in times of devastation, the world can see how critical the nursing profession truly is.” And we hope that better support; adequate supplies, including PPE; and fair compensation will be key factors considered in strategies to increase retention of nurses, gain more competencies to handle complexity, enhance decision making and critical thinking, promote better communication with patients and health care professionals, develop leadership skills, and be better prepared to work in changing environments. We need to step up quickly if we are going to be able to meet the needs of persons who need our care.

REFERENCES


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