Introduction:

The Healthcare Workforce Team and Systems Transformation Team consist of representatives from community-based and governmental organizations, including primary care and behavioral health providers, community advocacy organizations, local Coordinated Care Organizations, Law Enforcement/First Responders, United Way, Lane County Public Health, and Lane County Health & Human Services. The Teams identified both strengths and needs associated with recovery from COVID-19 and the resulting economic downturn, as well as resources and recommended practices. The Team also identified the stresses and loss points that most affect this population. The work of the Team will continue with periodic updates and additional material added to the Toolkit as the pandemic continues.

Major Conclusions:

1. The COVID-19 pandemic and 2020 economic downturn has wrought considerable change in the way healthcare services are delivered; these changes are inconsistent and may not address needed population issues.
2. Innovation in the behavioral health system has been driven by change at every level, including workforce and delivery systems.
3. Resource and delivery disparities are affecting every level of the healthcare workforce and the people they serve.
4. First Responders are addressing a variety of challenges, especially with unhoused and impoverished individuals who have few resources to maintain themselves and are unable to maintain COVID-19 related safety precautions.
5. Entry-level and low paid essential workers with families who have the fewest resources have the greatest need for services and assistance to replace resources that are commonly provided through schools.
6. Healthcare workers may experience reduced hours, furloughs and layoffs due to changed nature of access and work tasks during this time.

Identified Stress/Loss Points for Healthcare Workforce and Systems Transformation issues:

- Front line workers are affected by inconsistent safety protocols
- Isolation due to work safety considerations
- Lack of Personal Protective Equipment (PPE)
- Overworked or underworked due to systems changes and procedure variations
- Economic business models under stress
- Employment instability; insecure attachment to job
- Childcare inconsistency, loss of in-person schooling for children's education
- Loss of contact with loved ones due to quarantine, travel limitations
- Fear of passing the virus to family members
- Coworkers may not be careful with using available PPE
- Social Justice movement interacting with healthcare concerns
- Traditional Healthcare Workers' low entry level salaries have limited the opportunities for those workers to maintain employment and care for their families
- Prevention and well-checks for patients have been limited
- Limited access to mental health crisis services and supports puts more stress on First Responders
- Limited access to substance use treatment services, with more challenging patients seeking emergency medical services or at risk of incarceration
- Lack of internet and technology resources, phones, tablets, phone chargers, and minutes/bandwidth for internet connectivity for patients and remote workers