What Will It Take To Reopen

--Tom Bell, President and CEO, Kansas Hospital Association

Another week where COVID-19 trends, information and policy developments have dominated not only the media coverage but also most of our thinking and actions. Again this week, there have been stories of locations across the country where the healthcare system and the people who work within the system are literally overwhelmed. But there also have been many instances of the incredible work that people in our hospitals are doing every hour of every day. And importantly, there have been an increasing number of stories about individuals who have recovered from their hospitalizations—people who, in every case, were cared for by healthcare heroes.

This week, there have been increasing discussions about when and how we move forward. National think tank groups like the American Enterprise Institute and Center for American Progress jump started the discussion when they put out detailed proposals suggesting what "reopening" entail.

The Centers for Disease Control and Prevention and the Federal Emergency Management Agency also put together a public health strategy to reopen parts of the country. The plan cites three phases: a national communication campaign and community readiness assessment through May 1; increased emergency funding and production of testing kits and personal protective equipment through May 15; and staged reopenings depending on local conditions.

Also this week, President Donald Trump issued a set of guidelines with his ideas about reopening the economy based on a three-phase plan. The first phase largely urges existing measures to remain in place while allowing certain businesses, such as gyms, to reopen if social distancing is possible. The second phase makes recommendations for states and regions with no evidence of a rebound of COVID-19 and that have twice satisfied the initial criteria on cases, hospitals and testing. The third phase, which is recommended only for states that have shown no signs of a spike in cases after restrictions are lifted and have satisfied the initial criteria a third time, allows public interactions and visits to nursing homes to resume and lets bars and restaurants expand their capacity. The third phase still encourages individuals to socially distance when possible and limits time in large gatherings, while allowing employers to resume unrestricted staffing in the workplace. The president's guidelines leave much discretion to individual governors.

Closer to home, Governor Laura Kelly said this week she is working on a plan to move forward gradually after the first part of May. However, she warned that "If we don't do this right, we will do more damage to the economy than we can imagine." The governor said she is consulting with other states in the region about best practices for how states can address the recovery from the economic fallout of the pandemic while protecting the health of the general public. Nearly the same time, the Kansas Chamber of Commerce released a recovery plan that included
a number of recommendations, including allowing so-called nonessential businesses to open if they follow certain safety guidelines.

In looking at all these plans and recommendations, I'm struck by the similarities. At the core of nearly all of these discussions is the conceptual framework that truly "re-opening" the economy depends on helping people to feel safe, and that is done only through a thoughtful process that includes widespread testing, more effective contact tracing, new and better treatments, responsible and reasonable social distancing and ultimately some kind of vaccine. There seems to be widespread agreement that if it is done in haste and without careful planning, "re-opening" could have the unintended consequences of protracting our economic pain, not to mention the health costs.

This is an important and welcome discussion. Engaging in it certainly does not mean that we are done fighting this virus. In fact, it means the opposite. It means that effectively continuing to battle COVID-19 and getting back to "normal" go hand in hand. But perhaps more importantly, it represents a sign of hope and optimism. It acknowledges that we have been through much in the last month. It recognizes that we all have sacrificed, some much more than others, and we are perhaps beginning to see some light at the end of the tunnel. It is a sign that we are moving from one reality into which we were thrust, to a new reality that we cannot yet see-- but where we know planning will be key.

About the Author:

Tom Bell is the president and CEO of Kansas Hospital Association, a voluntary, non-profit organization existing to be the leading advocate and resource for members.

KHA membership includes 220 member facilities, of which 123 are full-service, community hospitals. Founded in 1910, KHA’s vision is: “Optimal Health for Kansans.”