Editorial

Time for a reset and recalibration: Healthcare in the post COVID era

Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2), the virus that causes coronavirus disease 2019 (COVID-19), has changed the world forever, accelerating a myriad of issues. COVID-19 has sent shock waves around the world and there is almost no dimension of our lives that has not been touched by the pandemic’s reach. Although society has been ravaged by pandemics over centuries, it is the 1918 influenza pandemic that provides us with recent learning and guideposts for what the future will look like [1].

Many of us, particularly in developed economies such as Europe and the United States, are stunned at how unprepared we have been for this pandemic [2]. Scientists have warned us about the threats of future pandemics and in particular the ravages of respiratory driven, airborne viruses. Countries with greater experience of Severe Acute Respiratory Syndrome (SARS), and Middle East Respiratory Syndrome (MERS) were better prepared but, for many countries, it has been both a rude shock and an awakening.

Beyond the ravaging impact on health, economic disruption has dramatically affected individuals, families and societies. Borders have been closed, families are separated and many lives remain in limbo. What has been made explicit and real in the context of the pandemic is that business and health are inextricably linked. The United States has been the worst-hit nation in the world by case count, with nearly 30 million infections to date. The impact on the economy has been profound, with the full magnitude yet to be realized [3].

For most nurses, we have changed our ways of working. In some instances these changes have been perceived as positive, in others negative. Personal protective equipment (PPE) is a daily feature of our working day and nurses cautiously tend to patients often with fear of infection. The restriction of visitors and interaction has challenged many nurses, who see communication as essential and critical skills. In contrast, telehealth has been embraced at unanticipated levels, allowing access to valuable health services [4]. To meet the urgent needs of society and the changing preferences of patients, many organizations are investing resources in telehealth and governments and funders are decreasing barriers, such as licensing. Increasingly, telehealth is being seen not as an optional extra but as an embedded fixture of service delivery and will likely be a legacy of the pandemic. Science has triumphed through international collaboration, in spite of global geopolitical tensions [5]. Vaccination has brought immense hope across the world with consistent progress towards herd immunity and restoration of the new normal, in whatever form it may take.

Building on 2020 as the Year of the Nurse and Midwife, the World Health Organization (WHO) has designated 2021 as the International Year of Health and Care Workers, to recognize the work to address the COVID-19 pandemic. This year-long campaign has the theme Protect. Invest. Together, highlighting the need to invest in health workers. The COVID-19 pandemic has identified many frailties in our health systems and exposed the vulnerability of health care workers. This is a time for reset and recalibration, not just for healthcare systems, but society as a whole. We must leverage the pandemic as an accelerant, fanning the flames of change needed to support nursing education and practice. As nurses, we need to reach beyond our immediate world, our hospitals, community centers and universities to see our role within the broader health ecosystem. This will require a pivot, reframing and developing strategies that are interdisciplinary, collaborative and innovative. Discussing these strategies will help move us forward.

1. Collaboration is key to a successful pandemic strategy

Collaboration within and across sectors is crucial in all aspects of pandemic control. A review of previous pandemic performance had identified that heightened cooperation, the building of trust, the sharing of resources and the building of consensus in decision making is critical [6]. This is necessary across all levels of society, government, non-government and business sectors as well as civil society. Global collaboration across nation states is also necessary. For example, COVAX is one of three pillars of the Access to COVID-19 Tools (ACT) Accelerator, created by the WHO, the European Commission and France in response to COVID 19. Bringing together governments, scientists, private sector, business, civil society and philanthropy, has been important in accelerating access to diagnostics, treatments and vaccines.

2. The economy and health are inextricably linked

Pandemics have devastated populations across history. Discussing COVID-19 as a purely health issue, and not a political, economic or social concern, is at our peril. Debate and discussion has focused on whether rigid shut downs were necessary at the expense of the economy. Despite being the first place to be stricken by COVID-19, China activated resources quickly to control the pandemic. China’s rigorous lockdowns have resulted with a comparatively low death toll and caseload and provide an illustrative case study in coordinated emergency response. Exemplars of countries that have done well demonstrate intensive screening, contact tracing, restriction of movement and the wearing of masks. Our next steps require a considered approach for greater alignment and messaging with
communities, ensuring access to accurate and contemporaneous information. We also recognize the critical importance of supply chain management, securing ready access to diagnostics, PPE, therapeutics and vaccines [7].

3. Workforce planning and coordination are imperative

Across the world, the shortage of nurses and lack of infrastructure in public health services has been evident. The devastation of COVID-19 highlights the importance of not only having an adequate international nursing and health care workforce, but also sufficient collaboration, governance and communication to mount a response to a truly global health emergency. The WHO State of the World’s Nursing Report has provided recommendations for increasing the nursing workforce capacity, particularly focusing on educational preparation and leadership development [8].

4. Vulnerable populations need special attention

The COVID-19 pandemic has exposed health inequities, amplifying health disparities and areas of needs. The very elderly, poor, vulnerable and marginalized in society have been most impacted by the virus. Essential workers, Indigenous populations and people in congregate living facilities such as nursing homes and prisons have been excessively impacted [9]. This has caused deep introspection in many settings, punctuating the urgency to address racism and other structural factors as quite literally a life-or-death matter for our collective society.

5. Leadership, stewardship and coordination

The markers of institutional and organizational success in the management of COVID-19 are reflected in the quality of their leadership [10]. COVID-19 has created additional need for nursing leaders who can advocate for patients and their staff [11]. Nurses need to be wherever patient care and operational decisions are made, be it the bedside or the boardroom. This requires strategies that promote the role of nurses as well as providing them with education and skills to deal with these challenges.

6. Innovation and discovery is necessary

The urgency of tackling COVID-19 has led governments in many countries to increasingly focus on innovation and discovery. All trends point to an increased focus on digitalization and the use of technology. But equally important will be a focus on work streams and health systems. As in all health crises, nurses are playing a leading role in innovation and discovery [12]. Nursing partnerships with colleagues in engineering, information technology and other disciplines will bring unique patient care ideas forward, from incubation to implementation, benefitting us all.

7. Conclusion

COVID 19 has been hugely disruptive across the world and, undeniably, healthcare will look different in the future. In spite of the death, devastation and suffering, nursing has emerged as an important value proposition not just in terms of clinical care but leadership and innovation. However, it has also exposed our vulnerability and weaknesses. Ensuring we face the future courageously and look beyond our silos to cross-sector and international collaborations will be imperative to ensuring we face future stressors to our health systems and societies from a robust position of scientific evidence, confidence and recognition of the power of nursing.

Declaration of competing interest

None.

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