

## MEASURING DEFERRED CARE RESULTING FROM THE COVID-19 PANDEMIC

Mari Tietze, PhD, RN-BC, FHIMSS, FAAN, Judith Brandon, RN, FNP, PhDc, Sondantre Thompson, RN, FNP, PhDc. [Acknowledging support of Erin Fisher, MPH]

### ABSTRACT

#### Background

Actionable data through visualization.

Trends in pre-COVID-19 service delivery data can be compared to post-COVID-19 service delivery data. The delta, or change, for example by ZIP code, can be used as a target for course of action to take as a result of the delta. This poster provides a step-by-step analysis of deferred care delivery for such an action-oriented project.

#### Purpose

Provide the participant with the tools and analysis steps to conduct an action-oriented project to address deferred service delivery.

#### Project Description

The summary report of the deferred care analysis will be provided to organizations interested in improving the COVID-19-oriented impact of deferred healthcare service delivery.

#### Summary of Response

Action items were taken as a result of COVID-19-oriented deferred healthcare service delivery. This approach can be used to address where to apply needed resources and as a tool for ongoing monitoring of these trends.

### BACKGROUND [Diabetes]



Living with diabetes is complex and can be overwhelming. Add a global pandemic to the already monumental expectations placed on us to live healthily and maintain glucose levels in range, and it's not surprising that many people with diabetes are finding these trying times especially difficult.

### BACKGROUND / LITERATURE REVIEW

COVID-19 has exacerbated many factors involved in diabetes care and increased stress. Uncertainty around the new virus is frightening, and many people have the additional worry of loss of income. The pandemic has severely disrupted routine diabetes self-management, including:

- Food – Scarcity of healthy foods, as well as having to change diets, makes consistent diabetes management challenging. Certain products are not available. Many restaurants and stores have closed or changed their hours.
- Medicine – Going to the pharmacy or seeing your doctor has become more difficult, and some people have reported problems when trying to refill prescriptions. Due to the risk of exposure to the virus, people are concerned about attending appointments, opting for telehealth/telemedicine when possible.
- Physical Activity – There are obstacles to maintaining exercise, an essential element in diabetes therapy. Space is limited in our homes, parks and gyms are closed and many people face restrictions to leaving the house.

### DATA SOURCES

Texas Health Care Information Collection (THCIC) data set was used as the data source. Specifically, 2019 quarter 4 for outpatient records were extracted. A total of 50,396 records were identified as having a principal diagnosis of either Type 1 or Type 2 diabetes mellitus.

### FINDINGS

**Results:** Prior to the COVID-19 pandemic, the pattern of diabetes 1 and diabetes 2 outpatient visits in Texas and surrounding states was clear. Clinics report a dramatic degree in cases beginning in the early months of 2020. Similarly, the distribution of age and sex was known in 2019 and then found to decrease in 2020, suggesting deferred care.

### ACTIONABLE APPROACHES

#### Final Step:

Quantitative results indicated that knowledge and experience with analysis of care delivery trends before the COVID-19 pandemic will help providers understand the patterns of deferred care. Thus, the final step in its analysis is to match the clinic visit patterns of principal diagnosis, race, sex and age to the pattern before the pandemic timeframe. The decrease in count by the patient characteristics will provide insight into actionable approaches for mitigation of deferred care.

#### SDoH:

By focusing the analysis of variables on the SDoH, approaches to mitigation of deferred care patterns can be more specifically identified and more specifically corrected. For example, knowing the zip code pattern and the age pattern of deferred care for diabetes Type 2 can quickly identify areas of greatest need.

References available upon request

### SOCIAL DETERMINANTS OF HEALTH IMPACT

Social determinants of health (SDoH) are the conditions in which we are born, we grow and age, and in which we live and work. The factors below impact our health and wellbeing.



Source: NHS Health Scotland

