



Three Questions for Froedtert Hospital Care Managers

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1. What has surprised you most about the COVID pandemic?

How quickly and rapidly COVID-19 spread. When I first heard about COVID-19 via the media, I thought the media was blowing it out of proportion to scare the public. However, that thought quickly changed when I saw the number of patients admitted to ICU and number of deaths that occurred in such a short time. It didn't matter if you were young or old.

COVID-19 was getting to everyone including patients that were healthy with no underlying issues.

The lack of preparation at skilled nursing facilities. The first discharges were a constant struggle with facilities not having policies in place for how/when they would work to take their resident's back.

How unprepared the hospital/medical system as a whole seemed to be for the pandemic. The shortages of PPE were especially scary as that is the only way to protect the staff here. Skilled nursing facilities, assisted living facilities, group homes and other living environments did not seem to know what to do and were getting little direction from government/health agencies on what to do if/when they had a positive resident or staff member for the first few weeks of the pandemic.

On a positive note, the outpouring of support from area businesses, restaurants, and residents of Milwaukee and the surrounding areas was amazing. I worked on a COVID-19 unit and we received food and/or other items (lotions, tea, energy bits, care packages, etc.) almost every day. We received countless thank you letters, as well. It really meant a lot to all of us to get that kind of support.

Since I've never lived through a pandemic, I honestly didn't really know what to expect. I still don't know how to emotionally comprehend some of it. I'm so sad for all the providers who've dealt with so much death and the family members who've lost their loved ones and not gotten to say goodbye. It's all been a new journey to navigate.

2. What new challenges have you faced in supporting COVID patients in the hospital?

Patients not being able to see their loved ones and the touch of a loved one. We used FaceTime video chats for patients, but the touch of a loved one can't be felt over a video. It was sad to see a patient dying with no loved one by their side. We saw a lot of death in such a short time.

The staff became each patient's loved one and provided comfort. Initially, we were not giving end of life quilts to COVID-19 patients, however, we quickly realized those quilts provided comfort to staff, as well.

The fear from the families of the patients. There were many families that were not willing to care for their loved ones that were diagnosed with COVID-19. Constant discussions/reassurance was needed to explain to family that they need to be there for their loved ones. It was very difficult to build relationships with the patients to help facilitate the discharge process via phone.

New discharge challenges that I hadn't seen before. Coordinating returns to facilities, group homes, and assisted living was more complicated, especially in the beginning of the pandemic when the CDC guidelines were ever-changing.

Transportation has also been a challenge as many transport companies are hesitant to transport a COVID-19 patient. Those that need transport to/from dialysis were the most complicated and sometimes had no options once ambulance companies filled up with re-occurring rides to/from dialysis.

Family members not being able to see their loved ones. I've spent lots of time with my patients and their families using my iPhone to FaceTime with them. In addition, I'm a therapeutic toucher and it was super tough not being able to hug patients or hold their hands during difficult conversations or through the sadness and loneliness they've been experiencing.

3. Is there something from your experience that you will bring forward as we enter into recovery?

A new appreciation for the importance of family members and friends in a patient's recovery. As a social worker, I need to make sure I am advocating for families and the importance of visits. Never take anything for granted, things can change in a blink of an eye. **To always be thankful for what I have.**

Taking the time to have as much face to face or over the phone contact with patients as I can. Many were feeling especially isolated while the visitor restrictions were in place so spending that extra ten minutes talking to a patient really made an impact. It was a good reminder. I think

sometimes in the craziness that is my typical day on a medicine unit that extra time with patients can get lost.

Not taking for granted the things that I so easily once did – especially spending time with my family and friends in the same room, hugging each other and sitting close to each other. **Life sure is short** and if anything, I've truly realized the importance of that statement.