Technology expands access and reduces public health service challenges



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digital services took off during the pandemic and were instrumental in addressing service delivery challenges during lockdowns. Yet these tools had unintended consequences, exacerbating preexisting inequities in our society and broadening the digital divide. In health care, the people who most needed health services were often the least likely to have technology

access or least able to use technology

to receive these services digitally.

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In the United States, non-Hispanic white (39.2%) and non-Hispanic American Indian or Alaska Native (40.6%) adults were more likely to use telemedicine compared with Hispanic (32.8%), non-Hispanic Black (33.1%) and non-Hispanic Asian (33.0%) adults, according to the Centers for Disease Control and Prevention.

Along with the gaps exposed by such lack of equity, the pandemic created a twin set of problems within health care. The first is a staffing shortage, as nearly 334,000 physicians, nurse practitioners, physician assistants and other clinicians left the workforce, according to Definitive Healthcare, either taking early retirement or quitting due to burnout. Now there simply aren't enough health care professionals to hire.

The second, and interrelated, problem is the backlog of screening,

surgeries, treatments and routine vaccinations caused by the disruption of normal services.

Rather than pretend we can return to a pre-pandemic "normal," the most practical and effective way forward is to leverage the technology investments made during the pandemic.

DIGITIZATION DONE WELL

It's ironic-- the technology that exacerbated healthcare delivery inequities is also the best option to expand access, address staffing shortages and service backlogs, and tackle inequities.

The transformed approach includes more user-friendly and accessible, personalized services, available around the clock when feasible. Expanded services also include omnichannel outreach so citizens can access health services through their preferred delivery mechanism.

Digitization helps health workforce challenges as well as addressing the service backlog and supporting expanded access. Digital service delivery is far more efficient, freeing up clinician time to deliver health care in-person for patients who are unable or unwilling to access services digitally or when virtual encounters are not the most appropriate channel.

And digitization done well provides rich, real-time data to better understand gaps and inequities and thus improve

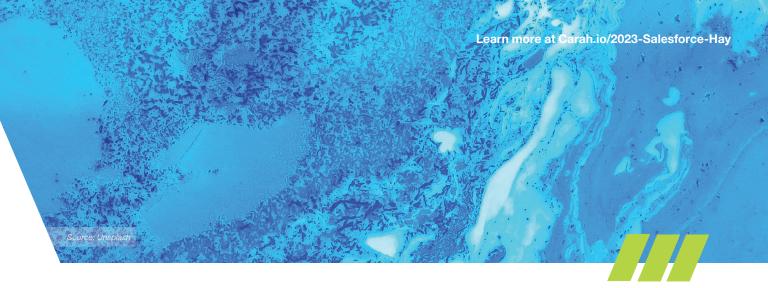
digital services and inform timely program and policy development.

INNOVATING WITH MINIMAL RISK

Having spent 20 years in public health, I recognize that government agencies don't have a high tolerance for risk. But for us to meet immediate challenges head-on and begin addressing deeper, long-standing gaps, an aggressive move toward digitization is essential, as long as we are comfortable with change and willing to learn from the outcomes.

An agile and iterative delivery approach on a data-driven platform allows us to build in rapid cycles to learn, improve and deliver something much better at the end. Certain nonnegotiables such as security and patient privacy need to be maintained, of course. And because we have a diverse community of constituents, a human-centered design approach (e.g., running focus groups, especially with users where English is not their first language) is always a good idea. The lesson here is how far we can go with rapid releases based on user feedback. There's much more trust in the system if people feel they're being heard.

The New Zealand Ministry of Health is an excellent example of digitization done right. In just 10 days during the pandemic, the ministry turned a cloud-based system developed for a nationwide bowel screening effort into the country's initial contact-tracing



system. In the uncertain early days of the pandemic, the New England Journal of Medicine and other outlets around the world highlighted the system as a premier example of how to eliminate COVID-19 transmission. The ministry has since added border management tools, vaccine distribution, and a booking and scheduling feature. What started out as an emergency solution has evolved into an end-to-end service delivery platform that provides every citizen and health care professional with real-time access to the information they need.

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