

## The Lived Experience of COVID-19

### Cancer program staff have been *tested*.

- The COVID-19 pandemic strained the resources of cancer programs. Patient volume and revenue dropped dramatically in the first COVID-19 wave. Workloads increased and provider and staff roles and responsibilities expanded.
- Mandatory physical distancing contributed to social and emotional isolation for many staff and patients. Providing support for staff became a full-time occupation for many leaders and managers.
- Information flow and exchange was severely disrupted in 2020. Cancer programs and practices spent more on resources to support COVID-related safety protocols and telehealth.



### COVID-19 *transformed* the dynamics of clinical and operational practices.

- The shift from being in the clinic to remote work was seismic. Financial navigators, oncology social workers, genetic counselors, administrators, and other staff worked remotely more than physicians and nurses, who often had to be in clinics and infusion centers. This shift reshaped communication between clinicians, staff, and their patients and colleagues.
- Cancer programs and practices identified new operational approaches to address disruptions.
- Telehealth became more prominent in 2020, often despite lack of infrastructure and multiple implementation barriers. Members are hopeful that relaxed regulations introduced in 2020 will remain and emphasized the potential for telehealth to improve health equity by removing transportation barriers, particularly for those in rural and underserved communities.
- Flexibilities established in clinical research have long-term potential to reshape the design and conduct of clinical trials and potentially address health inequities.



### Cancer program staff have shown remarkable *resilience*.

- Cancer care teams acutely felt the loss of in-person social connection and the disruption of everyday professional and personal life.
- COVID-19 reinforced the importance of face-to-face communication for clinical practice and financial navigation. Oncology staff found new ways to communicate and connect—with each other and with their patients.
- To bolster this resiliency, cancer programs and practices repurposed conference rooms and other areas as designated staff spaces; got innovative with staff recognition and perks, like hosting milkshake and ice cream bars; developed robust buddy systems; sent daily supportive messaging and shared positive stories and accomplishments; and reinforced a “speak up” culture, especially when issues and challenges arose.

