

Opening Statement of Ranking Member Morgan Griffith
Subcommittee on Oversight & Investigations Hearing
“Lessons from the Frontline: COVID-19’s Impact on American Health Care”
March 2, 2022
As Prepared for Delivery

Thank you, Chair DeGette, for holding this hearing.

Understanding the lessons learned from the COVID-19 pandemic is crucial for future decision making. Americans will need to learn to live with COVID-19, and the federal government will need to learn to better prepare and handle future pandemics.

It is our duty in Congress to oversee the federal government’s COVID-19 response—to examine what worked and what did not. From listening to the frontline workers in my district, I have heard about both the successes and the failures we have experienced. Today, I’m going to tell you a little about both.

One of the best things to come out of the pandemic for my district is telehealth. As residents were shuttered into isolation during the pandemic, doctors and nurses used telehealth to reach their communities and provide care. From mental health appointments to cardiology checkups, doctors and patients alike were appreciative for the ability to use at-home equipment for monitoring and testing.

During COVID-19 surges, many hospitals across the country had to think on their feet—often surprising themselves on what solutions they had created. For example, Ballad Health, a health care system that serves the Tri-Cities, Eastern Tennessee, and Southwest Virginia, created a “Safe-at-Home” program. This program helped health care workers monitor COVID-19 patients at home by providing kits with a thermometer and a pulse oximeter. Nurses called patients to help monitor them from home and helped schedule follow-up appointments for further care when necessary based on patients’ self-monitoring. The Ballad Health system cared for thousands of patients this way. By screening patients at home and preserving precious resources in the hospital for the sickest patients, this program helped keep patients out of hospitals and decrease the strain put on hospitals during the pandemic.

Despite the advancements of telehealth, there were also setbacks in my district. The decision to delay elective procedures eventually backfired for hospitals. On the surface, the decision to divert resources and care for COVID-19 patients seemed like a good idea. But the delay of treatment resulted in patients arriving to hospitals in worse conditions due to postponed care. People often think an “elective” surgery means cosmetic surgery. However, the term is broad, covering many critical procedures, including cancer screening, hip replacements, hernia repair, or removing kidney stones or an appendix. Over time, health care

systems saw the negative impacts from delaying surgeries. A temporary fix to manage staff shortages and the influx of COVID-19 cases ultimately left patients frustrated, nervous, and in weakening health.

Other challenges to our nation's health care systems were self-inflicted. Vaccine mandates made people choose between personal choice or their livelihood, which may have made existing problems in recruiting and retaining health care workers in rural areas. Amid federal COVID-19 vaccination mandates for health care facilities, health care workers have been fired for noncompliance, and some have resigned or quit. In a rural hospital, this loss of staff is not only noticeable, but damaging. No matter the total number of resignations, any loss of staff is detrimental to rural hospitals.

Furthermore, according to a survey by AMN Healthcare, a health care staffing company, 95 percent of health care facilities reported hiring staff from contract labor firms, with respiratory therapists being the primary need for many hospitals.¹ Contract nurse positions often receive higher pay than that of hospital staff positions. Thus, nurses left staff position jobs to apply for contract nurse

¹ *Data Brief: Workforce Issues Remain at the Forefront of Pandemic-related Challenges for Hospitals*, American Hospital Association, available at <https://www.aha.org/issue-brief/2022-01-25-data-brief-workforce-issues-remain-forefront-pandemic-related-challenges>.

positions. This further diminished the nurse supply and increased the demand for contract nurses.

Through this pandemic, our nation's health care workforce has learned that it is possible to be resilient in a crisis. Even the smallest changes to care can have the biggest impact on keeping a hospital running and continuing to care for patients. This is especially true in rural districts with smaller staffs, where each person plays an important role in keeping hospitals running.

It is critical that we take a close look at the experiences of frontline workers and examine lessons learned as we discuss solutions to face the next pandemic. I look forward to hearing from our witnesses discuss today on what they experienced on the frontlines, and what we can do to incorporate their voice as we make changes to the U.S. health care systems.

Thank you. I yield back.