THELARRYA Green Genter

... remained the same

o ... minimally reduced (<15%)

QUICK COVID-19 PRIMARY CARE SURVEY

SERIES 18 FIELDED AUGUST 7 - 10, 2020

You said - ask this: How have our work hours and salaries been effected during the pandemic?

Have your weekly hours worked... Please choose best possible answer.

1. OVER THE LAST 4 WEEKS, compared to pre-pandemic levels, how have your work hours been effected?

	0	moderately redu	ced (15-30%)				
	0	significantly red	uced (31-50%)				
	0	dramatically red	uced (>50%)				
	0	increased minim	ally (<15%)				
	0	increased moder	ately (15-30%)				
	0	increased signific	cantly (31-50%)				
	0	I have not worke	d				
	0	Other (please speci	fy)				
2.	OVER	THE LAST 4 WEEKS,	compared to pre	-pandemic lev	els, how has y	our compensation beer	n effected?
	Has yo	our compensation I	Please choose be	st possible ans	wer.		
	0	remained the sar	me				
	0	minimally reduce	ed (<15%)				
	0	moderately redu	ced (15-30%)				
	0	significantly red	uced (31-50%)				
	0	dramatically red	u ced (>50%)				
	0	increased minim	ally (<15%)				
	0	increased moder	ately (15-30%)				
	0	increased signific	cantly (31-50%)				
	0	I have not been p					
	0	Other (please speci	fy)				
3.		THE LAST 4 WEEKS, on your practice?	have COVID-19 r	elated change	s and pressure	es in your practice put u	nusual
		o 1- no impact	0 2	0 3	0 4	o 5- severe impact	
4.	OVER	THE LAST 4 WEEKS,	have any of thes	e things happe	ned in your p	ractice? <i>Please check al</i> l	l that apply.
	_	Our practice has be	d lavoffe/furleus	the of clinician	or staff		
	0	Our practice has ha				did are pendemie	
	0	Patients have a larg	ger number of co	mpiaints per v	isit than they	did pre-pandemic	

o Our staff and colleagues require more psychological support to get through the day

o Patient visits are more complex than they were pre-pandemic

We've had patients die from COVID-19

o Our patients are carrying a heavier than usual mental health burden

There is noticeable increase in practice stress because of a COVID-19 surge

- We have clinicians/staff members out due to illness or self-quarantine
- o Lack of staffing has made it harder to meet patient needs
- We lacked PPE
- o None
- **5. OVER THE LAST 4 WEEKS,** if all hours worked add up to 100%, what percentage of your time has been spent in...

	0%	1-15%	16-30%	31-45%	46-60%	>60%	Don't know	Can't answer
in-person visits with							KITOW	answer
patients								
video visits with patients								
phone visits with patients								
non-visit clinical work (e.g.								
answering patient questions,								
documenting in EHR)								
trying to find COVID-19								
supplies (e.g. PPE, swabs,								
reagents)								

- **6. FLASH QUESTION A: OVER THE LAST 4 WEEKS,** what has most **enabled** your care of patients? (e.g., received critical loans, funding of telehealth, team camaraderie, sense of purpose, etc.)
- 7. FLASH QUESTION B: OVER THE LAST 4 WEEKS, what has most hindered your care of patients?

So that we can better understand your answers, please respond to the following:

8.	\sim	 M K O	C+1	ce

- o ... owned by you?
- o ... independent but part of a larger group?
- o ... owned by a hospital or health system?
- o ... a government owned practice?
- o None of the above

9. Is the size of your practice...

- o ... 1-3 clinicians?
- o ... 4-9 clinicians?
- o ... greater than 10 clinicians?

10. Is your practice setting...

- o ... a primary care setting?
- o ... primary care and a convenience care setting (retail, walk in, urgent?)
- o ... direct primary care or membership-based practice?
- Other (please specify)

		>10%	>50%	Don't know	N/A
M	edicaid				-
M	edicare				
lo	w income patients				
no	on-English speaking patients				
ra	ce/ethnic minority patients				
pa	atients with multiple chronic conditions				
0	is your specialty? Family medicine				
0	Internal medicine				
0	Pediatrics				
0	Geriatrics				
	Mental/Behavioral Health				
0	Pharmacy				
0	Other (please specify)				
locate What	is your zip code? If multi-state, please of the anything else you would like us to kn	inswer for the s	tate in which	n your practice is lo	cated.
Would	d you like to receive an email invitation	to this survey	each week?		
	YesNo				
	e enter your email address here to receing thing else and it will not be shared for a	=	invitation. <i>V</i>	e will not use your	email ad

Larry A. Green Center: www.green-center.org

11. Is your practice... Please check all that apply

o ... a community health center?

o ... designated patient-centered primary care home?

o ... a rural practice?