QUALITY AND RISK

COVID-19 LESSONS CHART A PATH TO A BETTER HEALTHCARE SYSTEM

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a this article

The leases from CDED-19 outline a path favored sound austriable, high-quality healthcare. Physician healers should lead this evaluation.

THE CONTRACT PARADEMIC UP-CHOICE

gar in America, forevers, following begand the revolution efforts of completes disrupt the facility, are forces those are tecomis the physician feedback of the UT multispecially matical groups and integrated featility options that form the

Council of Accountable Physical Plactices CWPI couples to provided our experiences during/CWE-III have taught us. http://dw.iii.org/iii.com/ii

WHO IS TAKEN BEST DURING COVER AND THAT

There is no argument that this pandemic is a devastar critic in some of its impact on some and its impact on healthcare spike. While all occiding immediate, softer in the weight of the public feelff critic, some are taking the face offices. Those medical groups and health systems in here critical flooridations in provide integrated care on the face critical flooridations in provide integrated care on the face critical flooridations in provide integrated care on the face critical flooridations in provide integrated care on the face.

- Rapidly edigit to pandents, conditionally implemently me may to safety definer care through tol.
- health, drive-through serving sites, and alternative serves such as hospital at home.
- health management and predictive analytic tools so these patients; can be safely monitored and treated.
- Implement union-change reports, including innosations that generally would have labor months or years, due to large equilibried ultimate of leadership.

systems face much energy antious challenges. Many last the technology or the data to reported adequately as cottos. When or present exists and delivers surginess are process, the puse takes. The present and the process of the puse takes.

practice — a concert within our profession for decades? No.