Written by By Holly J. Wagner Sun Correspondent Friday, 18 February 2022 05:53







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Technology is a double-edged sword. Lately, Rehoboth McKinley Christian Health Care Services management and patients have been learning that lesson the hard way.

Amid escalating tensions between some members of the community and hospital management, phone outages at the College Clinic were the last straw. Patients vented on Facebook about problems reaching their care providers and making appointments.

Eventually, they organized and took to the streets in protest, braving the wind and snow Feb. 2, and coming out again on Feb. 9, under sunnier skies.

"When the protesters came out it was on the heels of a couple of weeks of frustration with the phones," RMCHCS Interim CEO Don Smithburg said this week. "I'm assured we have a temporary fix now."

Rose Eason, an RCMHCS patient and mother of two pediatric patients (both born at RMCH), was among the protesters. She joined up with the informal organization, Community Health Action Group, after weeks of problems trying to make appointments and reach her children's doctors at College Clinic.

"It's scary to not be able to call your kid's doctor or to feel like the administration does not care about patient access," she said.

She confirmed Feb. 8 that she was finally able to get through after RMCHCS got a temporary fix into place.

CHAG organizer Constance Liu, OB-GYN, who works at Gallup Indian Medical Center, said the phone issue was the immediate problem, but CHAG also wants a more productive relationship with the hospital.

"The immediate goal is to make sure that people who have been reaching out to us reporting

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that their access to care is suboptimal are able to make appointments again, when sick children can see their pediatricians, when elderly folk can get their prescriptions refilled and not have to come in to make an appointment," she said.

"At the heart of it, we believe that a hospital, to succeed, needs to be patient-centered and patient-focused. We see a lack of community or patient representation on the hospital board of trustees," she continued. "Our organization's goal is to continue to be positive, be solutions oriented, and ultimately to show that there is great value to patient suggestions and dialogue with the community."

The clinic's issues arose when the new technology collided with outdated infrastructure, which included a 1970s phone system.

Smithburg said the tech overhaul entails building a whole new phone system that will integrate with the existing computer system. And while workers were running new cable and making adjustments above the ceiling and below the ground, it caused problems with the phone lines.

"We have a temporary fix in now," he said. "By April it should all be a digital system, fully integrated with our regular patient care and financial computer systems. I haven't heard a complaint in a several days, and we're monitoring it very closely."

Meanwhile, Smithburg acknowledged that the communication gap needs to be tightened between the hospital and members of the community.

"Things happen at a hospital that are really good and we don't announce it to the world because it's our mission," he said. "Sometimes things happen that are annoying that we are working on fixing and it's inconsistent. Maybe that's a lesson learned."

Some patients felt the phone outage left them with nowhere to turn, and a promise that everything will be sorted out by April was of little comfort.

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So, where can community members air a grievance in the meantime?

The hospital has a patient liaison, Wonda Johnson, whose job it is to help patients with issues. She can be reached at (505) 863-7206. Patients may also email comments or complaints to <u>comments@rmchcs.org</u>.

The hospital also uses an outside hospital accrediting agency, DNV-GL Healthcare. If the patient advocate fails to resolve an issue, patients may register quality of care complaints with that organization by calling (866) 523-6842 or sending an email to <a href="https://doi.org/10.2016/no.2016

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