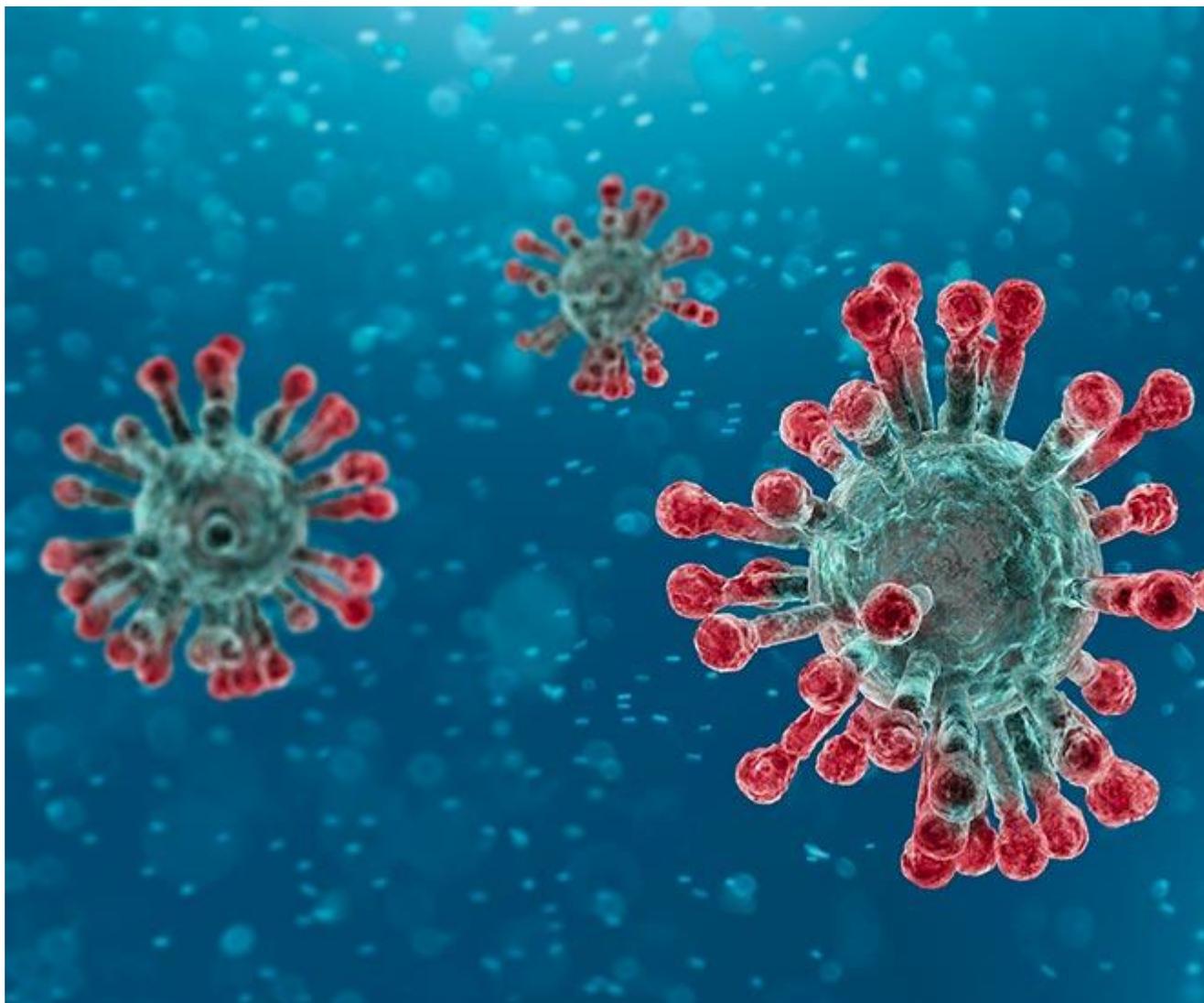

COVID-19 Impact on the O&P Profession



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AMERICAN BOARD
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ORTHOTICS • PROSTHETICS • PEDORTHICS

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INTRODUCTION

The American Board for Certification in Orthotics, Prosthetics and Pedorthics (ABC) serves a critical role in the orthotic, prosthetic and pedorthic (O&P) profession. It establishes the standards by which certified individuals and accredited practices provide care to patients in need of O&P services. Due to its position in the profession, ABC has access to a broad group of professionals and practices.

The ABC board of directors recognizes that the COVID-19 Public Health Emergency (PHE) continues to have a significant impact on all ABC credential holders. State and local ordinances remain in place across the country, and increased study is given to the possible negative effects this outbreak has on practices, individual credential holders in the profession and the patients they serve. In April 2020, a preliminary survey was sent to a small group of ABC stakeholders, to set an early benchmark on how the pandemic was affecting the profession.

This survey was administered in July 2020, to a much larger, diverse and representative subset of all ABC certified individuals, in order to ascertain the effects felt both at the height of the pandemic, and identify the steps being made towards recovery.

As in the initial survey, there were two distinct paths based on how the survey respondent classified themselves: as an Employee (Path 1) or as an Owner/Practice Manager (Path 2). The focus of the survey questions was aimed at identifying impacts on clinicians as individual employees, and on overall practice operations, including patient volume, staffing and finances. The employee respondents were also asked about any perceived negative physical impacts to patients as a direct result of the pandemic.

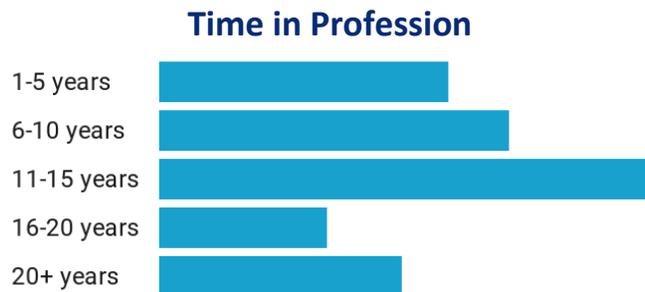
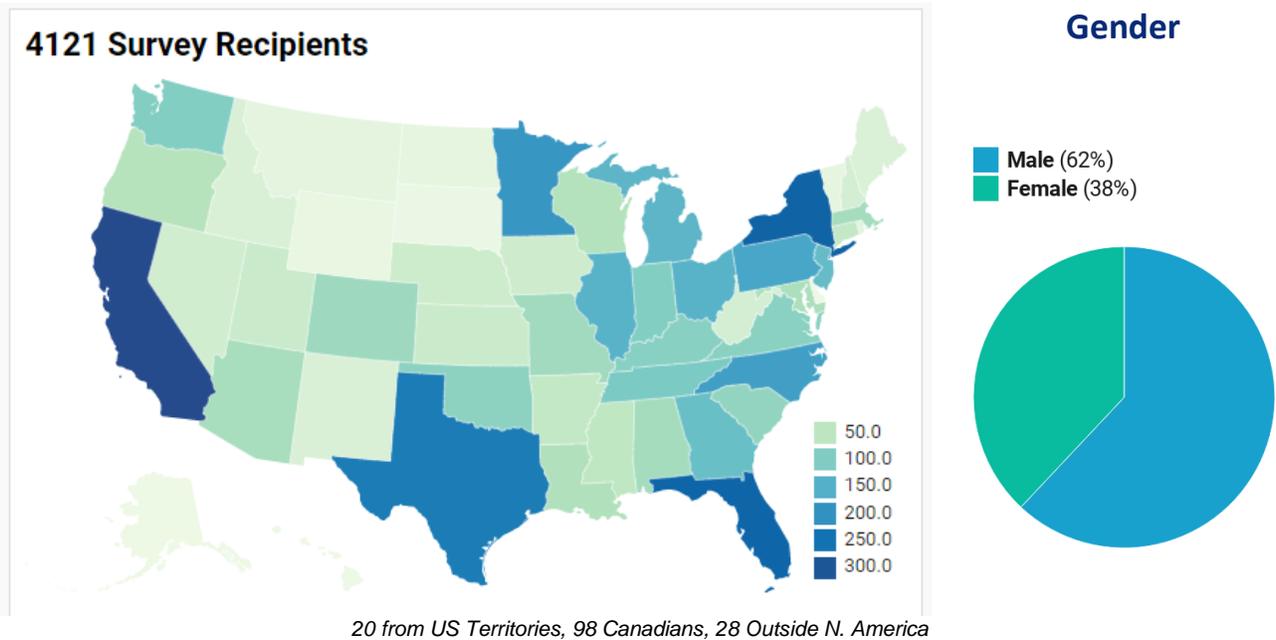
EXECUTIVE SUMMARY

Recipients

The survey recipient list was derived from a list of all active ABC certified individuals. In order to avoid multiple responses by employees from the same facility, only one person was chosen per each company location. For multi-location practices, one person was selected for each state; for even more numerous locations, one person per each city was identified.

Instrument

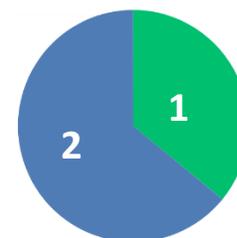
Survey Monkey was utilized for this project. In total, **4121 individuals** were sent the survey, and **933 responded**. The overall return rate was 22.6%.



Respondents The breakdown of respondent types was:

36% Clinician/ Employee (**Path 1**)

64% Practice Owner/ Manager/ Administration (**Path 2**)



Impacts on Clinician/Employees

When asked about the pandemic's effects on their clinics' operations, 85% confirmed there was a reduction in patient volume. Since the peak of the crisis, 65% report seeing an increase in patient volume, with the majority returning to nearly pre-pandemic volumes. The same is true of clinic staffing levels, although a residual effect is still apparent: all staff levels lag a bit behind their pre-COVID levels, and the number that now have less than 5 staff has increased. The Path 1 respondents were also asked if any of their patients developed physical problems as a direct result of the pandemic. While 57% said they saw no such problems, 36% observed mild-moderate problems and only 7% reported significant problems in one or more patients.

The Path 1 respondents were also surveyed about how they were affected as individuals. Respondents indicated that 60% experienced reduced working hours-- 24% to part-time or less, 22% furloughed, and 6% laid off. At the time of the survey though, 75% are working full-time, 17% remain part-time, a few remain furloughed and 5% reported still being laid-off. They were also asked about any pandemic-related financial aid. 10% stated their employer continued to pay their full salary despite reduced hours while 38% confirmed they received a Federal relief payment. One person indicated they took out a loan to replace their lost wages. The remainder reported they received no assistance (45%) or simply declined to answer (11%).

Impacts on Owner/Managers

Nearly all (93%) of the Path 2 owner/managers reported a moderate-to-severe reduction in patient volume at the height of the crisis. Today, 73% see a significant increase, with the majority reporting a return to 50-75% of pre-COVID patient volume levels, with 60% of owner/managers reporting no staffing reductions during the crisis. Of the 40% who reported they did make reductions: 20% reduced some staff to part-time or less, 18% furloughed some staff and 13% laid off some staff. This group reported the same status about recovering staffing levels as those in Path 1; all the staff sizes still lag a bit behind their pre-COVID levels and the number of those that now have less than 5 staff has increased. Finally, the owner/managers were asked about the pandemic's effect on the practice's finances. A small group (5%) reported no impact at all. Two-thirds reported seeing a drop in revenue of less than 50%. The other third reported a greater revenue drop.

The owner/managers were also asked to share information about any pandemic-related financial assistance they may have applied for and received. Around half indicated they successfully applied for and received both a payment based on 2019 Medicare reimbursements and a Paycheck Protection Plan loan from the Small Business Administration.

Conclusions

The impact of the COVID-19 PHE on ABC credential holders is evident. The reduction in patient volume itself represents a direct reduction in revenue for almost all practices. This survey did show that the reduction was not as significant as the initial survey indicated. In the first survey, 100% of the Path 1 respondents and 96% of the Path 2 respondents indicated a reduction in patient volumes. In comparison, only 85% and 93% of the Path 1 and Path 2 respondents in this survey reported a reduction of patient volume at the height of the shut-down. Even more encouraging is how this survey revealed that a large percentage of respondents reported that the volume of patients they are seeing has recovered. More than 50% of Path 1 respondents stated that patient volumes are either 75% of pre-COVID levels or back to pre-COVID levels. Path 2 responses were not quite as positive, however 43% reported having patient levels 75% of pre-COVID levels or better.

This survey asked each group a question about their financial situation related to the COVID pandemic. Path 1 respondents were asked if they received any financial assistance directly related to the pandemic. The responses were mixed, which made it difficult to interpret. On one hand, 43% said they have not received any financial assistance. It is possible that some portion of these respondents may have not received financial assistance due to a lack of need. It was encouraging to see that 38% received funds from the CARES Act and that 10% report being paid their full salary despite working less hours.

Path 2 respondents were asked to describe the financial impact to date from the COVID outbreak. Nearly two-thirds reported a mild or moderate drop in revenue. This is a significant departure from how the initial survey respondents anticipated a drop in revenue. 57% of the responses from the first survey stated that they anticipated a high or severe drop in revenue. In this survey that number dropped to 33%. In both surveys about 5% of respondents reported no anticipated or realized drop in revenue due to the pandemic.

Next Steps

The ABC board of directors will continue to reach out to its stakeholders within the profession to gain an understanding of any long-term affects from the COVID pandemic. One element of the staffing aspects of the surveys that was not specifically identified was the impact on residents. Path 2 respondents were asked to include residents in their answer to the question about any reduction in staff due to the pandemic. 4% reported that they are not accepting new residents at this time. With over 40% of the respondents stating that they have reduced staff, it is likely that current residents have been impacted.

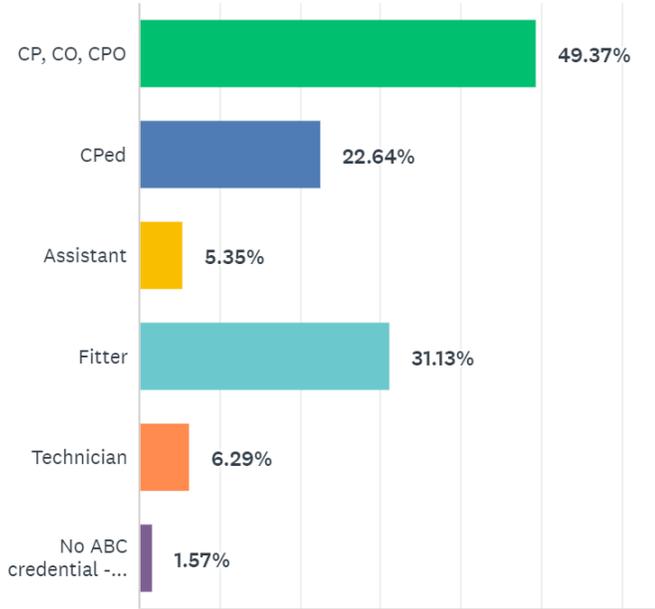
While no future surveys are currently planned, ABC will respond to changes within the profession to assure practices are able to serve patients in need of orthotic, prosthetic and pedorthic services.

RESPONDENT DEMOGRAPHICS

PATH 1

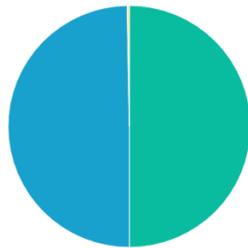
PATH 2

Credentials / Role in Practice

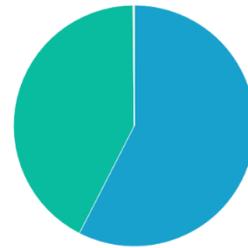


Gender

Female (50%)
Male (50%)
Other (0.3%)

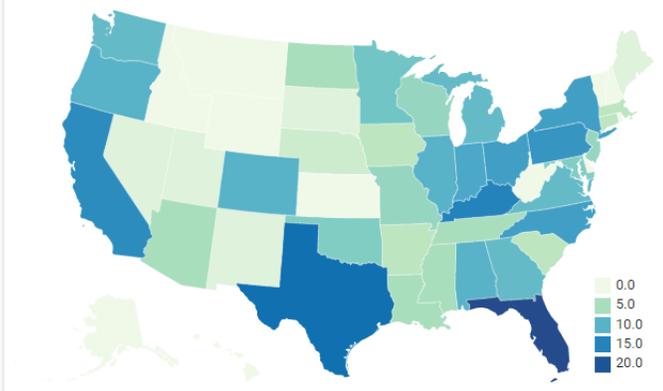


Male (58%)
Female (42%)
Other (0.2%)



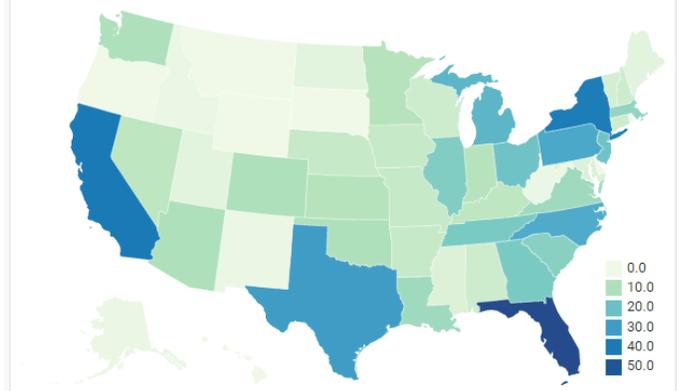
Location

335 Survey Respondents - Path 1



1 from US Territories, 4 Canadians, 5 Outside N. America

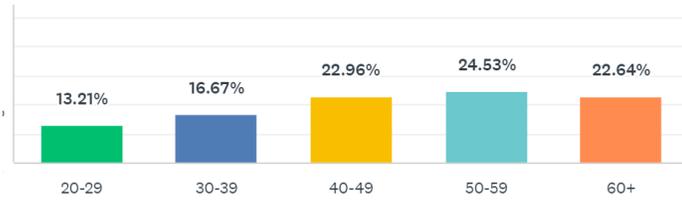
598 Survey Respondents - Path 2



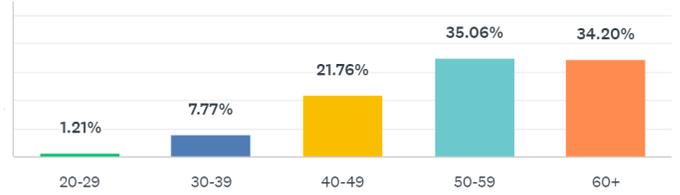
2 from US Territories, 17 Canadians, 11 Outside N. America

PATH 1

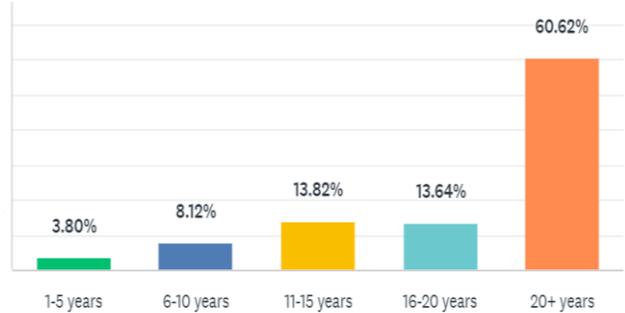
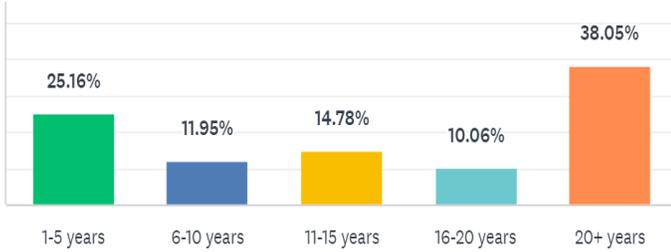
Age



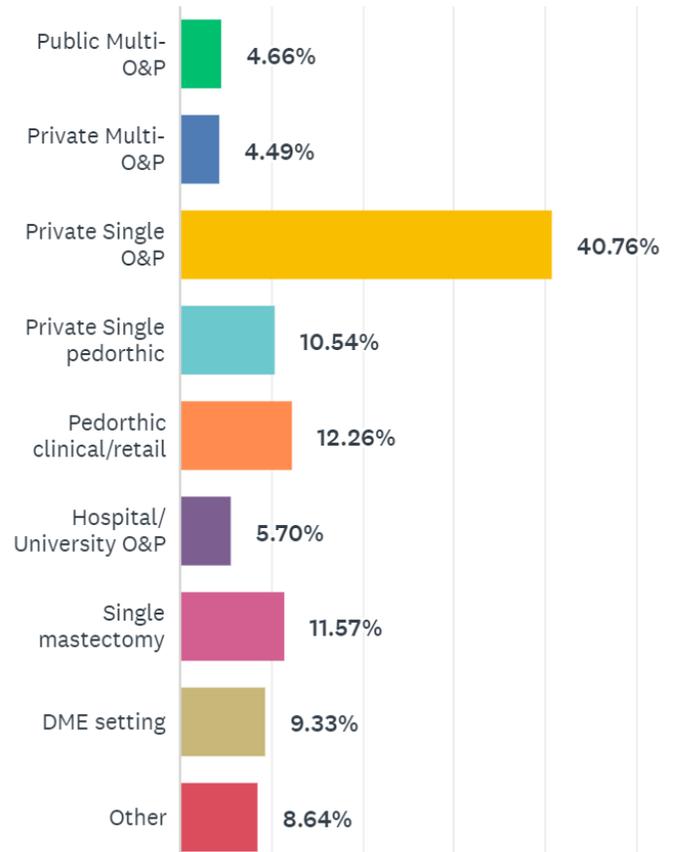
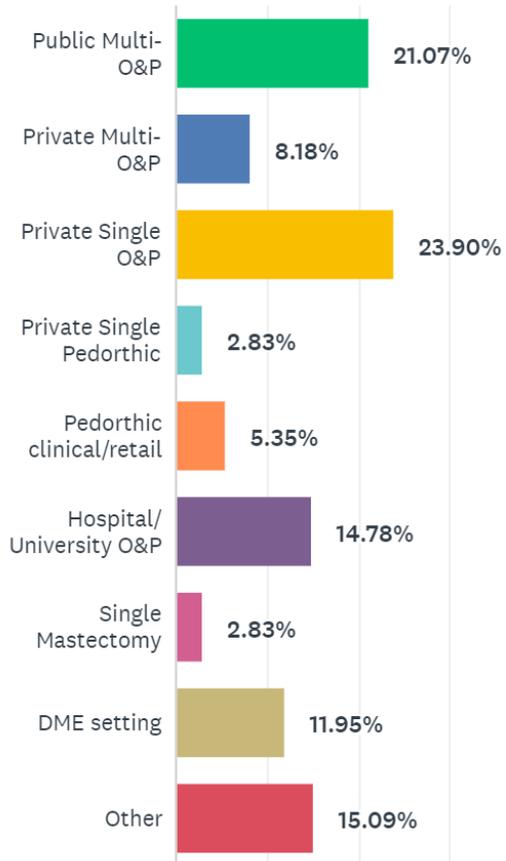
PATH 2



Time in Profession



Practice Setting



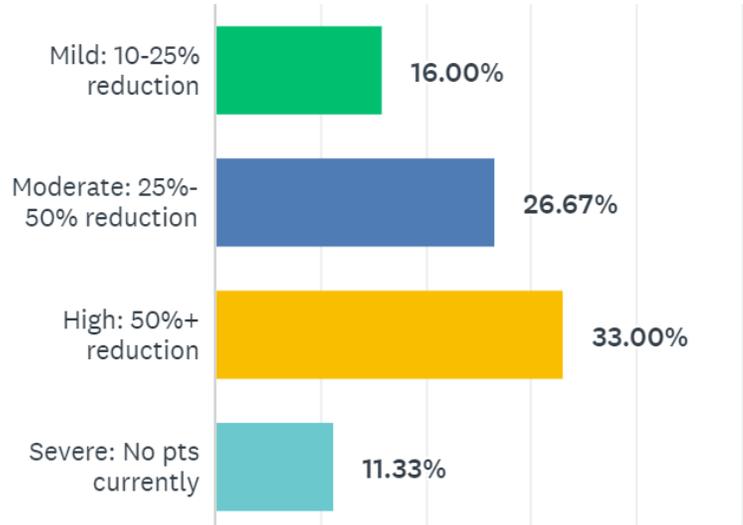
PATH 1 -- EFFECTS ON CLINIC OPERATIONS

Has COVID-19 reduced the number of patients you see in your practice per day?

YES: 85.67% (257)

NO: 14.33% (43)

If Yes: At the height of the shutdown, what was the most significant impact on the number of patients seen per day?

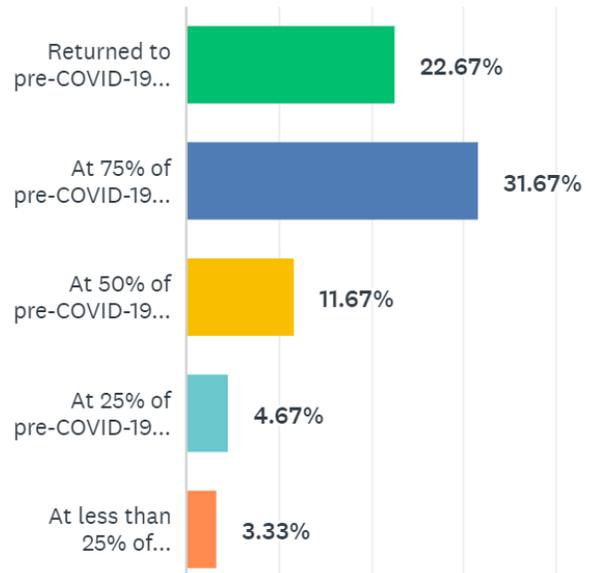


Since the height of the shutdown, has the number patients you see at your location increased?

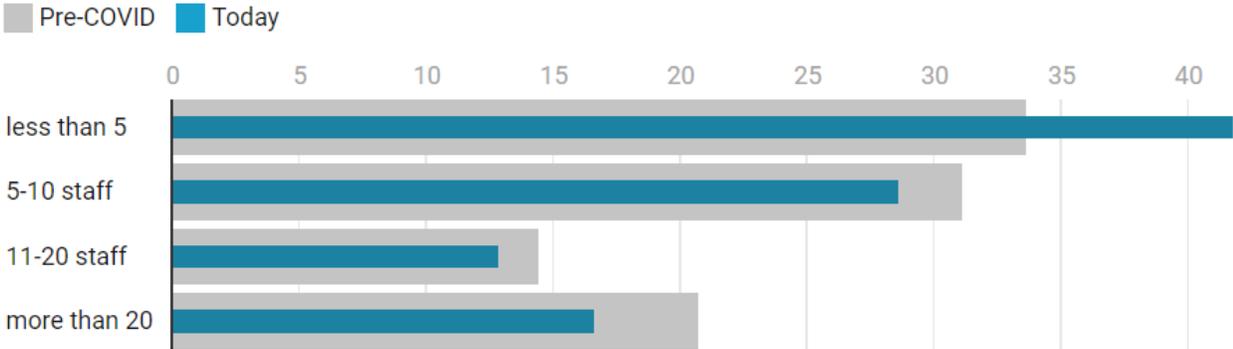
YES: 64.33% (193)

NO: 35.67% (107)

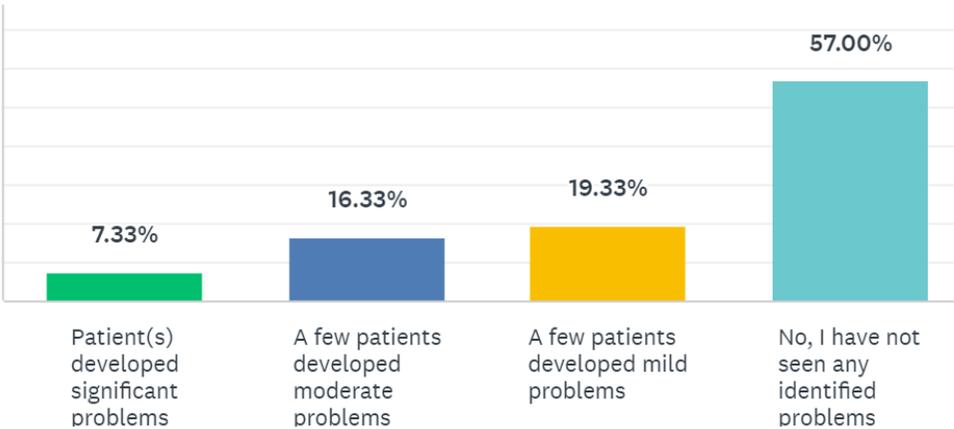
If Yes: What is the current volume of patients now being seen at your location?



How many total full-time employees worked in your facility/location *prior* to the COVID-19 outbreak? And how many work there *today*?



Did the shutdown create any identified physical problems for your patients (e.g. developed a contracture while waiting to receive care, developed a skin problem because they could not be seen, etc.)?



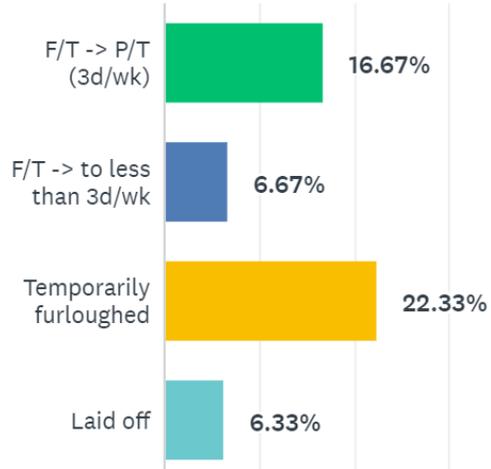
PATH 1-- EFFECTS ON INDIVIDUAL PRACTITIONERS

Were your work hours reduced at some point as a direct result of COVID-19?

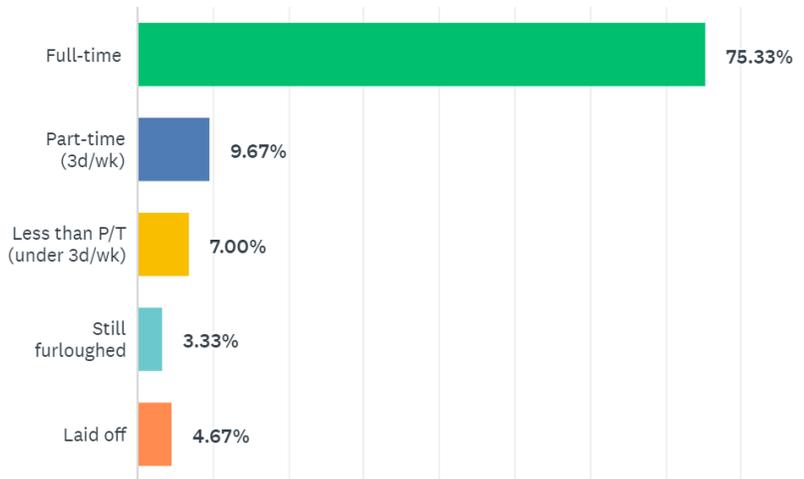
YES: 57.00% (171)

NO: 43.00% (129)

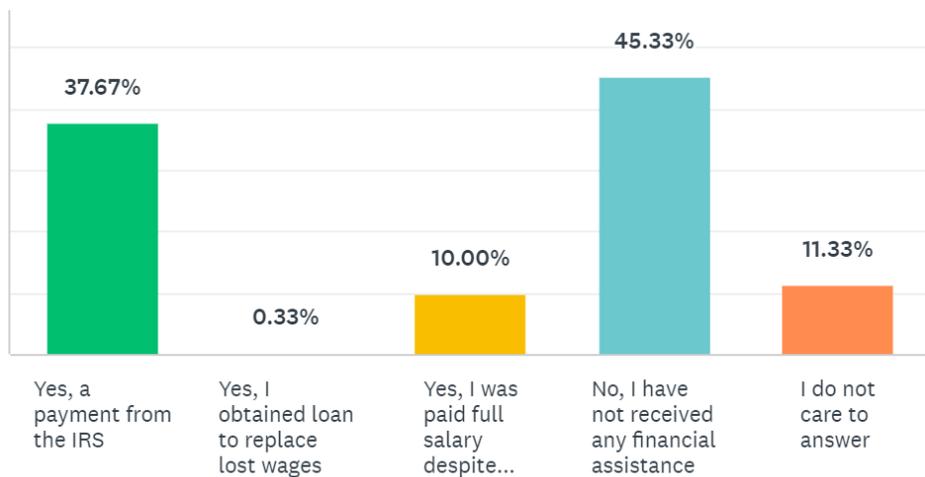
If Yes: What was the reduction?



What are your current work hours?



Did you receive any financial assistance directly related to the pandemic? (Choose all that apply)



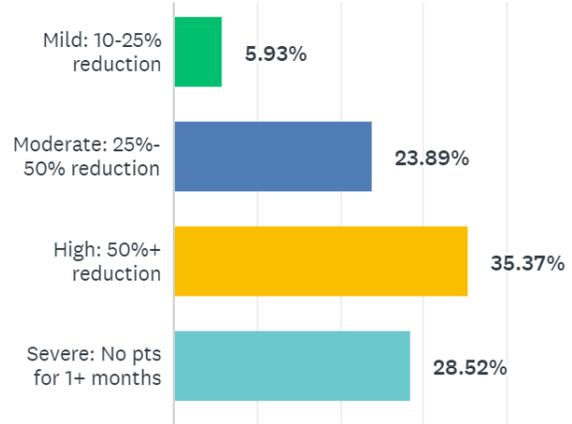
PATH 2 -- EFFECTS ON PATIENT VOLUME

Did COVID-19 reduce the number of patients you see in your practice per day?

YES: 93.52% (505)

NO: 6.48% (35)

If Yes: At the height of the shutdown, what was the most significant impact on the number of patients seen per day?

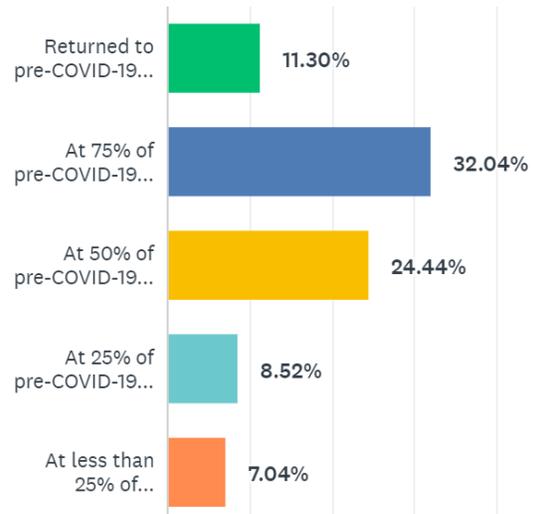


Since the height of the shutdown, has the number of patients seen at your location increased?

YES: 73.33% (396)

NO: 26.67% (144)

If Yes: What is the current volume of patients now being seen at your location?



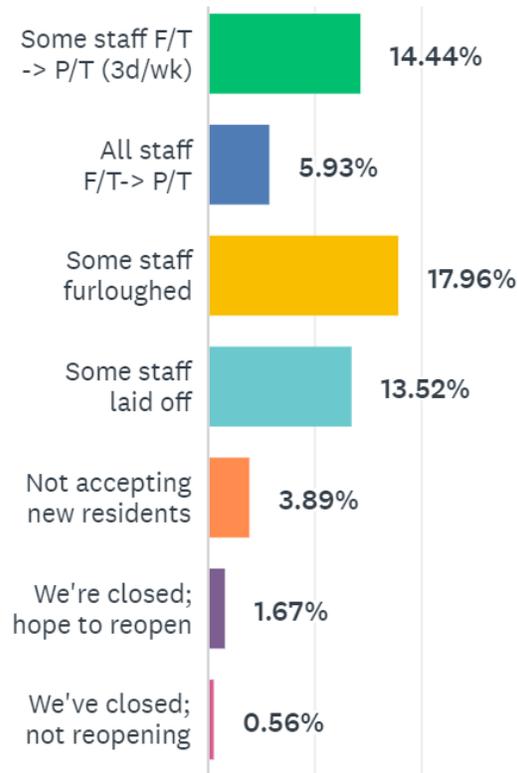
PATH 2 -- EFFECTS ON STAFFING

Has the size of your staff, including residents, been reduced as a direct result of COVID-19?

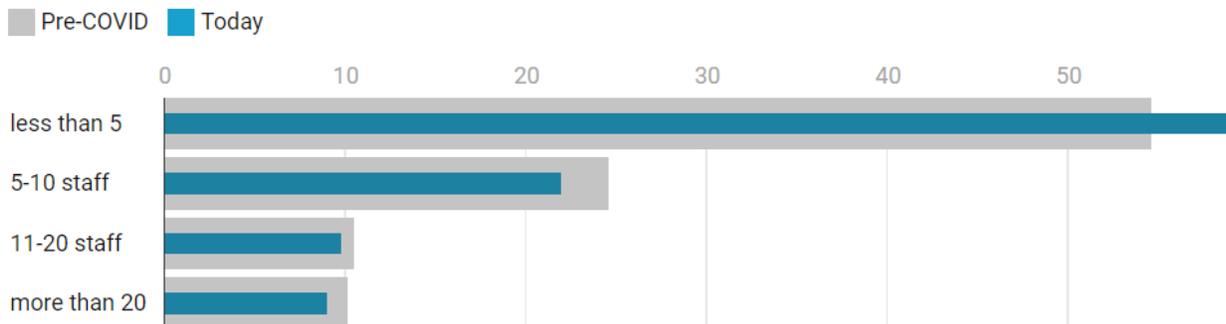
NO: 58.70% (317)

YES: 41.30% (223)

If Yes: What was the reduction? (Choose all that apply)

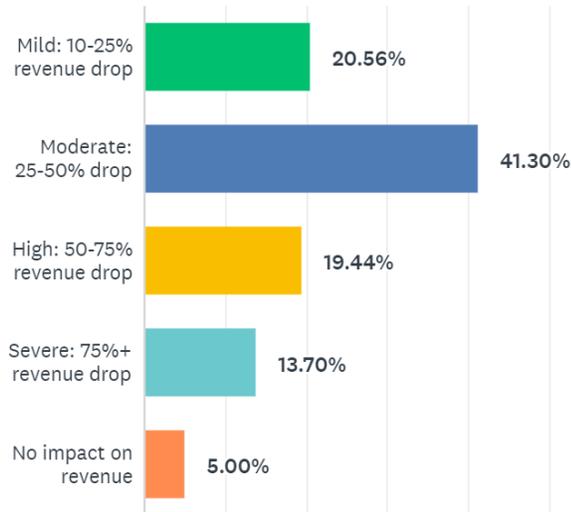


How many total full-time employees worked in your facility/location *prior* to the COVID-19 outbreak? And how many work there *today*?

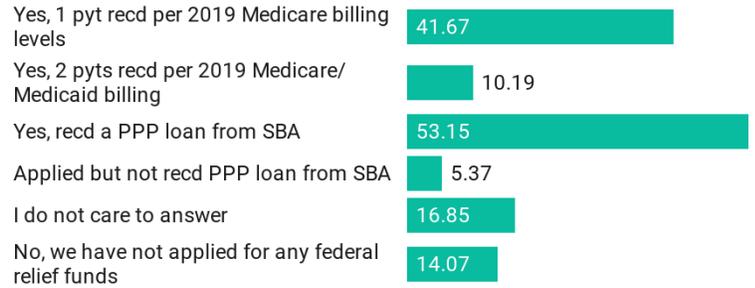


PATH 2 -- EFFECTS ON FINANCES

Which of the following best describes the financial impact on your practice, to date, from the COVID-19 outbreak?



Did your business apply for any federal relief funds? (Choose all that apply)



If not, why not?

- No Need (19)
- Altruistic (1)
- Process or qualifying was too cumbersome/unsuccessful (9)
- Funding would be insufficient (2)
- Dislike Debt (5)
- Dislike Govt (2)
- Closing clinic (3)
- N/A because...
 - State/Hospital-run (17)
 - Non-US facilities (9)
 - Cited personal/individual reasons (3)
- Other (3)

Full text of 73 comments follow

NO NEED
We were able to navigate with our current finances. Did not feel the need to rely on government to help me on this. We had managed our resources well to weather the storm.
We felt we would be ok without government loan
We have been fortunate. We are a very small 2 man practice with controlled costs; otherwise, we would have been more adversely impacted. Uncertainty is an everyday concern.
Didn't make Sense.
Because we had a strong fourth in first quarter
Not needed
Not needed
At the moment we are holding our own due to retails sales of DME
Was not needed.
not needed
i was able to maintain being open even though revenue was down.
Had already set money aside in savings.
No need we have reserve
We are a super-small "mom & pop" operation without the burden of high overhead and pay-roll.
managed to take some phone reorders to keep afloat
Unnecessary
our business overheads is not overwhelming
There was no need to do so
not needed
ALTRUISTIC
Let others who have a greater virus impact to be funded
PROCESS/QUALIFYING WAS TOO CUMBERSOME OR UNSUCCESSFUL
Process unknown
NOT APPROVED
Did not qualify
too many requirements
Too small
did not meet the criteria of loss of revenue/hardship
Funds were not available
Didn't qualify
I had recently moved my business out of our retail store location (Six months) where all its expenses were part of a larger Outdoor Specialty Retail location. So I had no real history of revenue that could be claimed for the new location/business. I had not even started paying myself a salary yet. I was investing in my start up.
INSUFFICIENT
does not cover enough of the rent and overhead
After reading all the information we found that it wouldn't cover us in the long term and staff would still be let go. a month and a half worth of funds doesn't cover 5+ months of being impacted.
DISLIKE DEBT
Don't want any increase in debt
I Didn't want a loan that I may not be able to pay back
Too small to qualify, hate borrowing
Not a leech
Do not need to borrow any money that I may have to pay back !

DISLIKE GOVERNMENT
reluctant for Government assistance
Our Federal Gov. is corrupt to the core. I do not endorse or want their help.
CLOSING
We closed the practice
This is going to close my practice. Can't get my continuing education either.
We will be closing our facility the end of this year as pre-COVID previously planned
N/A – State/Hospital-based
hospital owned practice
State owned facility
part of a hospital
We are a Federal facility (Veterans Affairs Medical Center)
I work in a government hospital.
Hospital owned
VA
N/A I work for the VA
We didn't but the parent company (17 hospitals) did apply.
Federal Facility
VA hospital so I do not know
this is not handled directly by our department and would have been handled by higher administration in the university.
hospital based received hospital funds
Because I work for the Dept of Veterans Affairs in Podiatry
Hospital based practice
Charity clinic
education program
N/A – Non-US Facility
we received some wage and rent subsidy in Canada
The above funds do not apply to Canada.
We are not in US
Our practice is in Canada
not available in my location
it is different in Canada personnel on employment insurance and practice on rent relief and loans
Canadian funds received
Headquartered outside the US
Applied for wage subsidy in Canada
N/A – Personal/Individual Reasons
Just COVID-19 Cares Act
We start not even a year and I didn't make any profit from my business so I didn't get my pay check
not Working
OTHER
I am not sure if we applied for relief funds
Didn't
Did not want to get into this

