ORGANIZATIONAL DEVELOPMENT INTERVENTION ON THE IMPACT OF COVID-19 ON A MENTAL HEALTH MEDICAL GROUP IN THE USA

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ABSTRACT
This inquiry concerns managerial adaptability and strategic planning of a mental health organization attempting to adapt to the marketplace and business disruption of COVID-19. The medical group has seen a noteworthy decreased in revenue of more than three-quarters (80 percent). It is for this reason, that it is imperative for the MHMG to carefully examine the presented issue and immediately strategize ways to address such issue. This analysis intends to review the literature and engage in action organizational development research to provide an understanding of the issue, its severity and spread as well as propose appropriate recommendations that could alleviate the business complexities that have been created by the pandemic.

KEYWORDS:
Health management, organizational strategy, organizational culture, strategic change, health administration

1. Introduction
While demand for mental health services has increased due to COVID-19, providing mental health care services for patients has been extremely difficult since patients are unable to physically attend routine therapy sessions. In efforts to mitigate the negative effects of the pandemic, governments have adopted measures that include social distancing, lockdowns and other, limiting the patients’ ability to attend in office visits. Mental Health Medical Group (MHMG), as many other businesses, has been significantly affected by the COVID-19 pandemic. The medical group has seen a noteworthy decreased in revenue of more than three-quarters (80 percent). It is for this reason,
that it is imperative for the MHMG to carefully examine the presented issue and immediately strategize ways to address such issue. This analysis intends to review the literature to provide an understanding of the issue, its severity and spread as well as propose appropriate recommendations that could alleviate such matter.

According to Jeffs (2008), Strategic management is fundamental to any organization. It provides the direction for an organization that involves environmental scanning, strategy formulation, implementation, and evaluation to determine the activities of competitors for the purposes of developing competitive advantage. Both Senge (2006) and von Bertalanffy (1969) speak to this idea of “wholeness” when referring to systems as well as paints the picture of using systems thinking as the proverbial act of seeing the forest through the trees. Thinking about business entities as operating systems presents a unique opportunity for organizations to thoroughly evaluate what their competitive advantage is in a marketplace that is full of competitors (Aaker, 2001). One way of creating this advantage is using strategic positioning (Aaker, 2001). Strategic positioning simply means the process in which a business as whole can distinguish itself in a valuable way from its competitors (Aaker, 2001). When thinking about strategic positioning and its benefits to the overall financial health of a system the strategic positioning process needs to translate into revenue generation, increased efficiency, organizational growth, or cost effectiveness (Aaker, 2001).

The union of strategic planning and OD is simple as both interventions are a phased approach with concurrent deliverables at each phase of the cyclical process. Specifically speaking to the phases of OD the eight identified phases are to help practitioners and clients to navigate the consultancy process (Cheung-Judge & Holbeche, 2015). The OD consultancy process is different from other processes because of its commitments to achieving mutual understanding, the collaborative relational dynamics pertaining to data analysis and feedback, it is willingness to confront issues by increasing knowledge throughout the process and its reliance on the members within the system (Cheung-Judge & Holbeche, 2015).

The process of organizational diagnosis is both interested and fundamental in the implementation of organizational change. It has been argued that the purpose of organizational change is to gather information needed to make informed decisions throughout the duration of the intervention phase (Cheung–Judge & Holbeche, 2015). It is common practice for OD practitioners to use diagnostic models to identify what is “wrong” within an organization. For this process to be completed efficiently and effectively, organizational leaders must ensure that key stakeholders are engaged throughout the process thus increasing their commitment to process of implementing change initiatives (Cheung-Judge et al., 2015). Organizational diagnosis is the collaborative process of looking at the organization to determine gaps between current and desired performance to identify action steps which the organization can achieve outcomes (Cheung-Judge & Holbeche, 2015). The issues identified in the case study indicate systemic issues (Cheung-Judge & Holbeche, 2015). The macro models of diagnostic assessment, such as the Burke-Litwin, is most appropriate for identifying and addressing the issues in case study one (Cheung-Judge & Holbeche, 2015).

Cheung-Judge and Holbeche (2015) emphasize that this diagnosis stage is fundamental to understanding who the real client and the prevailing political conditions is for formulating an effective strategy. Therefore, understanding power and the various ways that it impacts organization performance is necessary during the diagnosis stage. The following questions can guide the analysis of power dynamics during diagnosis:
Who are the primary decisionmakers? Where are they located in the managerial hierarchy? How are their decisions typically made? What sources of power does a client manager appear to have? How does the informal network operate and how effective is it in getting things done? What type of alliances currently exist and what are their views towards the change area? Who are the informal power leaders other than those who hold the formal titles in each division?

2. Method

The approach is an action research case study which uses an organizational development framework and a content analysis of current literature. According to Stringer and Genat, (2004) Action is a method well suited for organizational development consulting. An organizational development action research intervention has a combination of the following steps:

1. Identify a problem.
2. Develop questions that help in understanding the nuances and complexities of the problem.
3. Assess the dynamics of the problem and collect data.
4. Evaluate the data and engage in a level of impact analysis.
5. Combine data analysis with that from professional literature.
7. Take informed action or craft specific plans for action (Stringer & Genat, 2004).

The content analysis used the key words COVID-19, Coronavirus, Tele-health, Tele-counseling, Telemedicine, organizational development, and organizational change. The databases and their hosts (shown in parentheses) included Academia.edu, ResearchGate, ProQuest, ACM Digital Library, Web of Science, Baidu Scholar, Publons, DOAJ (Directory of Open Access Journals) and Google Scholar. Usage of these databases allowed a degree of assurance about the authority of the data retrieved with relevant and current.

3. Literature review

According to the World Health Organization (WHO), 93 percent of countries worldwide have seen a disruption in mental health care services due to COVID-19. To mitigate the effects of COVID-19, countries around the world have adopted guidelines that include social distancing, closure of businesses and even lockdowns. As a result, patients are not able to receive in-office therapy sessions. Mental health conditions have been triggered or exacerbated by the isolation, loss of incomes, fear, and bereavement that many individuals have experienced (WHO, 2020).

The mental health care of so many individuals around the world has been disrupted when it is needed the most (WHO, 2020). Pertinent psychological reactions to COVID-19 include uncontrolled fears associated with the infection, persistent anxiety, frustration, boredom, and loneliness (Serafini et al., 2020). Likewise, risk and protective factors associated with COVID-19 include alexithymia, inadequate supplies, inaccurate information, and resilience (Serafini et al., 2020).

Some elements related to COVID-19 that have a significant effect on the population include the loss of freedom, separation from loved ones, feeling of helplessness and uncertainty about the disease and its progression (Saladino et al., 2020). These can lead to horrible consequences such as increase in suicide rates or suicidal behaviors (Saladino et al., 2020). Segments of the population considered at risk for developing or having an increase in anxious symptoms include children and young adults, comprising college students, and healthcare workers (Saladino et al., 2020).
et al., 2020). Healthcare workers are at risk for developing symptoms such as burnout syndrome, dissociation, depersonalization, physical and emotional exhaustion, and post-traumatic stress disorder (Saladino et al., 2020). According to Saladino et al. (2020) health professionals also develop secondary traumatic stress disorder and obsessive thoughts due to fear of contagion.

A first step in a strategic thinking and planning involves the constant analysis of the external environment also taking into consideration in the internal corporate climate (Cheung-Judge & Holbeche, 2015). It is for this reason that action research theory is significant for organizational development and strategic thinking and planning (Stringer & Genat, 2004; Cheung-Judge & Holbeche, 2015). Action research entails important points worthwhile mentioning such as the need for understanding of the causes and dynamics of social issues and change, need for collaboration and it is data driven which increases motivation for change (Cheung-Judge and Holbeche, 2015). Considering this, it is vital that when thinking strategically and planning accordingly, leaders consider the ever-evolving environment due to social change, technology, and the fact that humans are constantly developing and evolving (Cheung-Judge & Holbeche, 2015). Simultaneously, leaders should also pay close attention to the internal environment strategizing for ways to have every organizational member involved in some part of the strategic implementation process. This will aid in ensuring a successful implementation (Cheung-Judge & Holbeche, 2015).

Cheung-Judge and Holbeche (2015) introduces the concept of living at the edge of chaos and change, which depicts organizations patterns or a state of stability and instability where the opportunity agility and resiliency exist. As presented in case study one, the scenario depicts an organization that is living on the edge of chaos and change (Cheung-Judge & Holbeche, 2015).

Organizations living on the edge of chaos and change are invested in changing behavior and require a new pattern of interaction (Cheung-Judge & Holbeche, 2015; Burrell, 2020). The concepts of changing behavior by changing language and leveraging group dynamics to shift behavior offer an alternative for changing behaviors in organizations (Cheung-Judge & Holbeche, 2015). Organizations that invest in behavior change and change process do so to create stability, agility, and resilience but, most importantly, develop a competitive advantage (Aaker, 2001).

Cheung-Judge and Holbech (2015) defined agility and resilience in terms of “change-ability” or capacity to adapt. Agility and resilience are characterized by flexibility, innovation, a razor sharp customer focus and the capacity to respond quickly to changing needs (Aker, 2001; Cheung-Judge & Holbech, 2015). The Resiliency Agile Model included strategizing, implementing, linking, people and culture (Cheung-Judge & Holbech, 2015). This model is powerful in that it redefines strategy in terms of an ongoing process that considers paradox as the norm, looking outside of the organization and experimentation. A value added would include the integration of elements within the model that supports organizations that are more tightly coupled for the benefit of the overall mission, as is the case with national defense. This integration would have provided a more broadly applicable framework from which to build (Aker, 2001; Cheung-Judge & Holbech, 2015).

4. Organizations as open systems
Burke (2018) describe a tightly couple system as primarily a hierarchy with high levels of interdependence amongst units, whereas a loosely coupled system is described as a network and has little hierarchy and interdependence. Burke (2018) notes that networks are composed of nodes, when pivotal people serve as connectors. Given the lack of
interdependence loosely coupled system do not expect units in an organization to have a shared response to organizational intervention (Burke, 2018). Understanding the type of organization that one is consulting with is a pivotal part in understanding how to proceed in terms of developing organizational interventions (Cheung-Judge & Holbeche, 2015). Understanding the cultural and the levels at which the deep structure stem from gives the consultant a great foundation to begin to build rapport and creates the safe space needed to facilitate a change process (Burke, 2018; Burrell, 2020). Looking at an organization and its typologies may also serve as a guide to choosing which model of change would be most appropriate in terms of organizational fit (Cheung-Judge & Holbeche, 2015).

Human organizations are open systems that depend on the constant interaction with the environment (Burke, 2018). Open-systems theory proposes that organizations take in energy from the environment, which is transformed into a service or product that is then returned to the environment (Burke, 2018). Friedlander and Brown’s (1974) organizational development framework, reflective of an open-system approach, proposes that organizations include people, processes/structure, and technology, which interact in technostructural and human-processual systems to achieve human fulfillment and task accomplishment. The authors further emphasize the importance of the interaction between the environment and these components in terms of organizational inputs and outputs (Friedlander & Brown, 1974). Since organizational processes and structures are embedded in one another, it is extremely difficult, or almost impossible, to create long lasting change in one without modifying the other (Friedlander & Brown, 1974). This model can aid in the understanding of the issues faced by MHMG due to the major environmental disruption provoked by the COVID-19 pandemic.

Furthermore, behavioral systems analysis posits that organizations are behavioral systems with complex behavioral interactions between organizational members and the environment (Lutwig, 2015). Lutwig and Houmanfar (2010, p. 85) explain that “systems are adaptive entities that survive by meeting environmental demands (consumers, completion, economy, governmental policies, etc.) through the development and maintenance of subsystems that encompass complex patterns of behavioral interactions among its members and the environment”. Similarly, the organizational level of performance, part of the total performance system (TPS), emphasizes the relationship with the environment, internal structure, and allocation of resources (Lutwig, 2015). Lutwig (2015) explains that the largest consideration should be focused on the delivery of quality services to customers. Therefore, the promotion of psychological interventions that include digital technologies can provide appropriate interventions to reduce anxiety and stress and treat the other patient symptoms previously mentioned (Saladino et al., 2020).

5. The use of technology in behavioral health

The use of technology in psychotherapy is not without precedent. Online therapy or tele-psychotherapy is not new. For several years, psychotherapists have provided therapy sessions online patients to individuals in rural or remote areas, those who traveled and for those with physical disability that makes traveling to an office difficult (Bekes & van Doorn, 2020). It has increased in popularity over the years as a convenient option compared to traditional psychotherapy however the pandemic has forced many clinicians, who may have been previously reluctant, to
abruptly make a switch from face to face to on-line as part of public safety protocols (Bekes & van Doorn, 2020).

Although the use of on-line psychotherapy has increased within the last several years, the obstacles that behavioral health professionals now face because of the pandemic raises distinct challenges. Previous literature points out that conducting therapy as a crisis / disaster such as mass shootings, natural disasters, etc., can be a helpful resource (LoGiudice, 2020; Hughey, 2020). The current situation is different because of the significance of the impact of the current health crisis, in addition to political and social unrest, and economic crisis all happening simultaneously.

Furthermore, the mandated requirements of social distancing and stay at home orders makes it difficult for people to access the thing that they may need most; the personal face to face contact that can provide support and connection that cannot always be conveyed electronically (LoGiudice, 2020; Hughey, 2020). Sometimes the emotion, intensity, and ability to empathetically connect with a patient is disrupted due to bad internet connections, incoming phone calls (switch blanks out the screen) or delay / lag in conversations.

Some researchers have noted other challenges that some patients cannot use video platform because the patients may not have access to a computer, internet services or privacy (LoGiudice, 2020; Hughey, 2020). Tele-mental health is only a useful viable option if you know how to use it. Education, mental state, and age can also become a barrier (LoGiudice, 2020; Hughey, 2020). Although virtual or telephonic sessions can be a valuable solution especially during an immediate crisis, it is important to emphasis that it is not a magic bullet and fix all.

While considering immediate alternative ways to provide continuum of care during COVID-19 is important, leadership should also decide if such changes will also be part of the organization’s future. The behavioral health market has evolved over the last several years (LoGiudice, 2020; Hughey, 2020). Companies have launched therapeutic and self-help apps or short-term on-line therapy services that have changed the current landscape (LoGiudice, 2020; Hughey, 2020)

Apps can target broader audiences in a quicker way than traditional therapy (Chiauzzi & Newell, 2019). Transitioning to tele-behavioral health may be necessary to stay competitive in the long run.

6. Evaluating options & strategic framework

To determine next steps, the Ansoff Matrix was utilized (Ansoff, 1957). The matrix is an appropriate and effective framework because it focuses on strategic options for business development (Ansoff, 1957). It is a strategic planning tool that connects an organization’s marketing strategy with its vision and direction (Ansoff, 1957). It looks at organizational approaches and operations in a holistic approach in a way that allows organizations to better respond to changes in the external and competitive environment. It is an analysis applied to products and markets proposed of Igor Ansoff who is known to be the father of strategic management (Loredana, 2017). Ansoff’s Matrix is useful for organizations who want or need expand or change by helping organizations evaluate their markets (Ansoff, 1957).

The four possible strategies are (1) Market Penetration – focus on existing products or services in existing markets. (2) Market Development – focus on developing new markets or market segments for existing products or services. (3) Product Development – focus on developing new products or services for existing markets. (4) Diversification – focus on the development of new products and enter new markets (Loredana, 2017). From a business perspective, an organization’s decision to stay with existing products and services in an existing market, indicates low
risk because it is familiar territory with very few surprises (Ansoff, 1957). Organizations simply choose to stay where they are and ride things out. Alternatively, organizations can choose to change strategies by changing markets or product/service development which yields higher risks (Yin, 2016). In short, Ansoff Matrix gives small business leaders a quick and simple way to develop a strategic approach to sustainability and growth (Ansoff, 1957). For this reason, this tool was utilized by consultants as part of the strategic decision making process.

In addition, a patient survey was conducted. Patients were asked about the current crisis, their mental health status and needs, employment status, and preferences. They were also assessed on their desire/readiness to move forward. Based on results, approximately half patients reported that they were not prepared to continue for various reasons. Of the remaining, a small portion expressed wanting to continue but reported losing health insurance due to loss of job. All patients reported not being familiar with tele-psychotherapy and have not participated in on-line therapy in the past. Discussions and education on confidentiality, risks, and platforms (i.e., zoom, google duo, etc.) were given.

7. Telehealth and telepsychology: considerations

Telehealth has become a vital component of healthcare during this pandemic (American health and drug benefits, 2020). According to the American Psychological Association (2014), telehealth is “the provision of medical care services using technological modalities in lieu of, or in addition to, traditional face-to-face methods.” Telepsychology or tele-mental health, on the other hand, involves the delivery of behavioral and/or mental health care services using technological approaches (APA, 2014).

Teletherapy has been found to be effective and provides many advantages with access to care (Burgoyne & Cohn, 2020). Chat and video-audio consultation, via tools such as Skype, are just a few instruments that can assist in providing patients with tele-counseling during this pandemic (Saladino et al., 2020). Online psychological services can reduce the issue of barriers such as social distancing, closure of physical offices, and lockdowns and can be utilized in the future, if needed, in conjunction with traditional psychotherapy (Saladino et al., 2020). To adopt online psychological services, psychologists, psychotherapists, and other mental health care providers would have to be trained to develop the skills needed and thus perform at an optimum capacity (Saladino et al., 2020). Patients will also need to be sensitized to the online therapeutic relationship, benefits, and rules (Saladino et al., 2020).

The benefits of online psychotherapies are various. First, the anxiety due to risk of contagion is decreased in both patients and psychotherapists (Saladino et al., 2020). Other advantages of telepsychology include decrease in waiting for consultation, less travel, and costs in rental and other office expenses (Saladino et al., 2020). Most importantly, online psychotherapy can ease the expression of problems and feelings since patients are in their comfort zone when receiving therapy (Saladino et al., 2020). Lastly, this tool allows for psychotherapists, with the patient’s consent, to record sessions that can be used to compare each session to the previous one and evaluate the success of the therapeutic process (Saladino et al., 2020).

Online psychotherapies include chats, video-audio sessions as well as telephone-delivered psychotherapy. Patients can receive therapy services via any of these methods. Brenes et al. (2011) indicate that telephone-delivered psychotherapy has both positive outcomes and high client acceptance. Additionally, this method is very convenient for clients as it provides flexibility in appointment scheduling and
location as patients can receive therapy from the convenience of their homes (Brenes et al., 2011). The authors also argue that this treatment option can be less threatening than face to face interactions, which can sometimes intimidate patients (Brenes et al., 2011). A wide range of populations can benefit from telephone-delivered psychotherapy including older adults, individuals with chronic illnesses, military members, incarcerated individuals, and many other individuals who may not be able to receive traditional mental health care (Brenes et al., 2011).

Additional factors worth mentioning when considering telephone-directed and online therapies include the following. First, according to Brenes et al. (2011) 96 percent of U.S. households have either a telephone line or cell phone and 62 percent has access to the internet. Patients in both urban or rural areas can use either a land line, cell phone, chat, or video-audio service for their psychotherapy sessions. Additionally, telephone services do not typically require costly set up and patients and mental health professionals do not require training on how to use the system (Brenes et al., 2011). Third, individuals who decide to utilize videoconferencing services can do it from the convenience of their homes via skype, zoom or another conferencing tool. Lastly, it is worth mentioning that videoconferencing services can provide some challenges due to technological issues that may hinder the quality of the image (Brenes et al., 2011). Nevertheless, the proper steps can be taken to prevent these difficulties from disrupting the overall quality of the therapy session and provider-patient relationship.

8. Recommendations

Action research, as a data driven tool, can be utilized to enhance the understanding of the dynamics of social issues presented earlier as well as the need for collaboration and change (Cheung-Judge & Holbeche, 2015). Since the environment has provided with unprecedented change, it is essential that MHMG consider the environment and social changes encountered and utilize technology as a tool to combat company profitability decline.

Based on the discussed research and information, the first and most important strategy to consider is that MHMG contemplate the implementation of telehealth, telepsychology, and online psychotherapy platforms to continue providing care to established patients as well as new patients. Furthermore, adopting a system’s theory approach can further help MHMG be intuned with the external environment and thus provide changes and adaptations where necessary to ensure that patients receive the care they need without disruptions (Cheung-Judge & Holbeche, 2015).

The implementation of such programs would incorporate obtaining regulatory experience such the maintenance of medical records and understanding the complexities involved, as this is significant when incorporating or developing a Telehealth platform (American health and drug benefits, 2020).

Factors to consider when implementation such strategy include the coverage for patient expenses for online psychotherapy and telepsychology sessions. The Centers for Medicare & Medicaid Services (CMS), for example, have expanded coverage for telehealth services (American health and drug benefits, 2020). Individuals who are currently being treated for a mental health condition and / or substance use disorder are covered for telehealth services from Medicare (U.S. Health and Human Services, 2020). According to Dr. Ira Bergman (2020) from the American Psychiatric Association, Managed Care Organizations are more than ever partnering with providers who provide low-cost access to care. Lastly, affordable care should be provided to patients without insurance coverage who would be paying out of pocket.
Other factors to consider, utilizing Lewin’s change theory of group dynamics, is to ensure that every mental health care provider, management, support staff, and every other member of the organization is on board with understanding the need to transition to a new way for providing patient care as well as how their actions and collaboration determine the success of implementing such strategy (Cheung-Judge and Holbeche, 2015, p. 33).

9. Changing current behavior
Lewin’s three step model, unfreeze, change, and refreeze, can be utilized to aid in adopting the proposed changes. The first step, unfreeze, involves unfreezing the “present level of behavior” (Burke, 2018). Actions that could provide positive outcomes during this stage include communicating with organizational members by presenting data, in a clear and concise manner, that detail the organization’s loss of revenue and the need for change. The second step, change, “is to move toward the new, desired level of behavior” (Burke, 2018). Implementing the actual change takes place in this stage and to so successfully, the proper action plans must be executed. These include training staff on how to use the new technology, integrating purchased telehealth platform, and other tools such as phones and computers as needed. Lastly, the final step involves refreezing the accepted changes. Measuring performance and installing new rewards systems could be utilized in this step to reinforce the new change (Burke, 2018).

10. Ethical considerations
The American Psychological Association has not yet published ethical guidelines for providing telepsychology services, however, the APA does psychologists to provide these services within the scope of the APA Code of Ethics (Brenes et al., 2011). Elements to consider when providing such services include appropriate technology use, ethical and legal requirements, informed consent and disclosure, secure communication and transfer of patient information, access and storage of communications, fees and payment arrangement discussed before service is provided, proper supervision and any assessment issues or limitations due to online administration (Brenes et al., 2011). Lastly, mental health care providers must check for any licensure issues that could potentially prohibit the provision of services if a patient is in another state (Brenes et al., 2011).

11. Conclusion
The Burke-Litwin model addresses the external drivers that impact the macro and micro issues presented in the case study and provides the organization's impetus to change (Cheung-Judge & Holbeche, 2015). Additionally, the Burke-Litwin model provides insight into the type of systemic issues, i.e., processes, people capability, culture, system, or structure that will need to be addressed in the case study (Cheung-Judge & Holbeche, 2015). Organizations must engage in the strategic planning and strategic change process to develop stability, agility, and resistance (Cheung-Judge & Holbeche, 2015).

Organizational leadership and organizational strategy during a pandemic or instance that can disrupt normal operations must be (a) extremely alert and responsive, (b) exceedingly elastic and adaptive to changing circumstances and atmospheres, (c) reflective and poised, (d) authentic and transparent, (e) steady and engaged, (f) compassionate and empathetic, (g) collaborative and culturally sensitive, (h) globally-minded and ethical, (i) reasonably utilitarian, (j) systems-thinking and sense-making oriented, (k) instinctive and open to learning, and (l) simultaneously calm and resilient during challenging, uncomfortable, and non-linear change (Shufutinsky et al., 2020).

Strategic change and for organizational decision making to be operative in times of
shattered change and pandemonium, in times of crisis, leaders need to be able to reach within and employ these diverse leadership qualities, styles, and actions as they adjust to a chaotic and shifting environment (Burrell, 2020). Leaders that can adapt to highly frenzied and shifting circumstances, and surge forward to do this effectively, are shock leaders (Shufutinsky et al., 2020).

Organizational assessment, diagnosis, and intervention can create a strategic framework for organizational cultural change to a Shock Leadership culture (Shufutinsky et al., 2020). Shock Leadership fitness and execution can offer advanced stages of organizational dynamics concerning situational awareness, enhanced collaboration, unit interconnection, and teamwork, reduced response and decision-making time, expanded organizational surge capacity, generate enhanced inter-organizational interoperability, and propel leader elasticity and tractability, all of which are critical in dealing with extreme, highly complex environments with unstable conditions and variables (Shufutinsky et al., 2020).

Applying a Shock Leadership framework requires the development of adaptive strategies that can respond to changing needs and dynamics because of COVID-19. The everyday lives of individuals have been disrupted by this pandemic causing feelings of frustration, loneliness, increased anxiety, and fear and many other (Serafini et al., 2020). While the need has certainly increased, many organizations, such as the Mental Health Medical Group (MHMG), have seen a decreased in revenue due to social distancing, lockdowns and other measures taken by local and state governments to mitigate the effects of the pandemic.

A review of the literature and organizational diagnosis has been conducted to strategize for ways to alleviate the issue faced by MHMG. Proper recommendations aligning with the findings discussed have also been provided. Since patients are unable to receive in-office care for their mental health, it has been recommended that MHMG adopts a new way for providing patient care including the use of telehealth approaches such as telepsychology and online psychotherapy. The adequate training and precautions have been considered to ensure that mental health care providers and support staff are able to successfully provide the patients with the care they need. Factors that may influence the strategy, such as insurance coverage, out of pocket coverage and team understanding and collaboration have all been discussed. Ethical considerations and potential issues that may arise have been considered. Lastly, adopting telehealth as new treatment modality can help MHMG recover from the financial struggles that it is currently facing as well as consider this a new line of business that could provide with additional revenue in the future. In a post-COVID-19 world, MHMG may continue to provide telepsychology and online psychotherapy services, which would only be of benefit to the medical group, community members and society.

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