

THE YEAR 2020 NEVER CEASES TO AMAZE ME



DOWNTOWN MARKETING & DEVELOPMENT By Barry Cassidy

The shutting down of restaurants and bars has had a lethal effect on small towns that have a healthy food and beverage industry as part of their revitalization strategy.

The atmosphere, the events, and the areas used as a common gathering space for festive recreation add to why downtowns have been successful.

The Governor issued an order, and it should be obeyed. If the evidence shows a threat, perhaps it is a good action, and I will not go through the dynamics of the spread of the disease. My ideas are not mainstream and not intended to get too Thomas Dolby with everyone.

As a career government and nonprofit administrator, I look at service delivery and effectuating large scale implementations of programs. It appears that the root

of the current problems is available hospital beds and Intensive Care Unit (ICU) facilities.

The nature of the disease is that it affects people differently and depends upon underlying conditions and genetic makeup. So, the number of people getting the disease is spread to the subset of vulnerable people, and the vulnerable people need to be hospitalized.

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DOWNTOWN MARKETING & DEVELOPMENT

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Available hospital beds seem to be the metric, and of course, that is a function of how many vulnerable people need to occupy beds. The second part of that is the disease seems to come in waves. This last one happened right before we were going to vote and then again right before Christmas. The initial wave was sometime in March that overwhelmed hospitals in New York City.

It occurred to me that there should have been a different approach from a service delivery perspective. Suppose centers were set up in vacant warehouse space around the different metropolitan and rural areas. In that case, the treatment could have been segregated from the regular hospital crowd that provide regular 24-hour emergency care for the people. This action would have also centralized the equipment and care.

My wife told me that Temple created a facility, but it was not used much. Once the initial wave of infections died down, people were not crowding the hospitals. There would be an inefficient use of labor for the downtimes. For the staffing reason alone, I feel that all of it should have been a federal initiative. They had to know there would be subsequent waves... the

“trust the science” argument.

I also believe this disease should have been taken out of the insurance system. This event was too big not to have centralized intake and delivery. Let the health care system function for true medical emergencies and illnesses, cancer, and the like. The federal government could have relied on military personnel to function as support staff. The military is being paid anyway, and they would only be used during the wave to augment the medical staff that would be hired full time.

The care would be uniform, with a consistent medical procedures and operational plan for transport and supply delivery. I believe between March and November, that could have been accomplished. It would give the pork to consultants to train people and develop a consistent care pattern to fit in with what we know about government today. The vaccine is on its way, and the centers could have been used to distribute the vaccine on an egalitarian basis. I am not so sure that will happen through the current health care system.

I started to have this column update my train project, but something hap-

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pened on Thursday that made me start over again and write about the hospital bed issue. Thursday, I was scheduled to meet Connor, one of the owners of Molly Maguires Pub in Phoenixville, for some snacks and drinks. When I got there, I had no sooner got an eggroll in my hand, and the Governor came on TV and said he was shutting down the bars and restaurant dining. The pending scarcity of hospital beds had driven the system over the edge.

As we ate our wings, cheesesteak eggrolls, and big pretzels, Conner said to me that the bartender was crying. I can't hear very well, and he had to repeat it a couple of times. I realized that here we were a couple of weeks from Christmas, and she was unemployed. This same scenario played out across the Commonwealth when people found that they had an interrupted income source right before the holiday. Waitstaff, chefs, and the owners were all in a precarious position before the surge.

I was sad for her and the situation. I mustered up enough energy to down the second shot of tequila and thought about the situation. I pondered the thought that although the virus was surging, it was the subset of the surge,

hospital beds' availability that made this an urgent decision.

I honestly do not think it should have come to this end. When something like the virus happens, there will be a need for universal service delivery that has to be utilitarian and financially feasible. There is little utility in the current method of dealing with the virus. Oh, I wear my mask every day even when people make fun of me because I am careful. I wash my hands too much because my wife yells at me if I don't. I am one of the vulnerable people, and I try to be responsible for myself as I like my life.

I had planned to die a Godfather III ending with a glass of red wine on the beach at Rossella Ionica in Calabria, Italy... but the virus took that from me. This dream was not the only dream interrupted; this last year has been an unprecedented attack on the small business owner. Riots and looting robbed many of their livelihood. The spread of the virus calmed expectations for earnings. Now the closure of sector hospitality right before Christmas. These are real arrows injuring real people, and it appears very well organized.

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