

Telehealth: Why It's Still Important Even Without COVID

Disclaimer:

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Telehealth at FLCH:

- Direct To Consumer:
 - Real-time video conferencing visits are done at the patient's location.
- Internal Telehealth:
 - Real-time video conferencing visits are done within the system.
- External Telehealth:
 - Real-time video conferencing visits done with collaborating partner



Direct To Consumer:

- The Provider can be in the health center or at home, while the Patient is at their location.
 - There may or may not be peripherals at the originating site (Patients location)
 - There may or may not be support for the Provider
- Benefits:
 - Meeting Patients' needs and/or barriers to care
 - Keeping Patients engaged in between in-person visits



Examples of Direct To Consumer:

- Patients' home
- Residential housing
- Daycare centers



Internal Telehealth:

- The Provider can be in the health center or at home, while the Patient is at their location OR in a health center location.
 - A telepresenter can assist with the clinical assessment with the use of peripherals.
- Benefits:
 - A controlled environment
 - Labs can be drawn
 - Workforce flexibility



Examples of Internal Telehealth:

Quality of Care:

- •Provider is located at home or another health center location and needs to provide care to Patients that have been identified as being more successful in a health center environment rather than through direct-to-consumer visits.
- •Sending the telepresenter with the appropriate equipment for telehealth visits to the Patient location.

• Capacity:

•The business can employ a full-time provider, providing services in-person and via Telehealth throughout the system.



External Telehealth:

- The Patient is at the health center location, seeing a collaborating partner through telehealth.
 - A telepresenter can assist with the clinical assessment with the peripherals.
- Benefits:
 - A controlled environment
 - Labs can be drawn
 - Address barriers to care
 - Team approach
 - Workforce expanded knowledge



Examples of External Telehealth:

- Tertiary care services that are not provided or need higher level of care in the organization:
 - •Infectious Disease
 - Transgender Care
 - Neurology
 - Pediatric Dentistry
 - •Behavior Health services provided in the preferred language of the Patient.



Process:

- Telepresenting level visits:
 - •Level 1: Patient is given access to video conferencing equipment. There is no need for a licensed clinical staff for the rooming process.
 - •Level 2: A Licensed Practical Nurse (LPN) or higher is needed to support the distant Provider.
 - •Level 3: A Registered Nurse (RN) or higher license is needed to support the distant Provider.
- Virtual Visits:
 - •Direct to consumer video conferencing visits, there is no professional support at the originating site. The originating site may not be a controlled environment and may not have peripherals.
- Telehealth Visits:
 - •Video conferencing visit in a controlled environment with a telepresenter and peripherals.



Why it works:

- Structured training for all staff:
 - Onboarding
 - Competencies
 - Quarterly trainings
- Streamline process:
 - •The telehealth clinical process has the same basic process. Adjustments may be done based on specific clinical service
- Streamline equipment:
 - •Every health center has the same video conferencing technology.



Video Conferencing and Workforce:

- Video conferencing is used for daily business activates:
 - •Interviews
 - •Staff meetings
 - •Staff trainings
 - •One on one supervision (1:1)
 - Staff collaboration
 - •Increase communication



Teleworking:

- Workforce catchment area can expand
- Keep staff that move out of the area employed
- Reduce brick and mortar space
- Increase mobility within the health system



Teleworking Considerations:

- Supervisors:
 - Training/ awareness of teleworker needs
 - •Resources that can be used to make stay connected
 - •Awareness of friction between teleworkers and onsite staff
- Teleworkers:
 - Isolation
 - •Self-awareness
 - •Resources to stay connected



Benefits:

- Patient Engagement:
 - Decreased no-show rates
 - •Increase quality metrics
 - Value based care
- Staff Engagement:
 - Ability to keep good staff
 - Life-Work balance
 - •Collaboration between departments or other organizations





































Brick and mortar set up





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Thank you!

