



## Breakout Session: Increasing Provider Readiness for Telehealth

January 21, 2021 at 3PM ET/12PM PT

### Learning Objectives

By the end of this session, participants will be able to:

- Describe strategies for engaging healthcare providers in telehealth delivery
- Discuss how to obtain buy-in from healthcare staff at their organizations
- Describe workflow changes associated with a shift to telehealth service delivery
- Integrate lessons learned from another healthcare organization in their preparation of providers for telehealth delivery

*Submit questions through the Q&A chat box. Questions will be facilitated at the end of the session.*



## Introductions - Speakers



**Nicki Perisho, BA, BSN, RN**  
Program Director  
Northwest Regional Telehealth  
Resource Center



**Michael Murphree, LICSW**  
Chief Executive Officer  
Medical Advocacy and Outreach

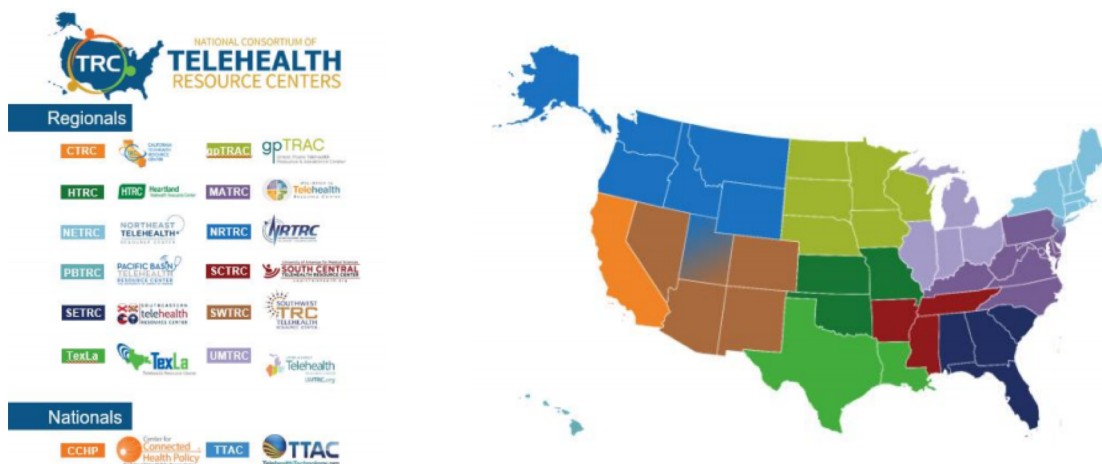


## Increasing Provider Readiness for Telehealth

Nicki Perisho, NRTRC Program Director



## The National Consortium of Telehealth Resource Centers



## Northwest Regional Telehealth Resource Center (NRTRC)

- HRSA funded cooperative agreement managed by the Office for Advancement of Telehealth (OAT)
- One of 12 TRCs in the Nation
- Provide telehealth technical assistance and training to providers and patients in AK, ID, MT, OR, UT, WA and WY.



[www.nrtrc.org](http://www.nrtrc.org)  
[www.telehealthresourcecenter.org](http://www.telehealthresourcecenter.org)



## Telehealth Acceptance

### Objectives

- Engage providers in telehealth delivery
- Workflow changes
- Telemedicine buy-in from clinic staff
- Telehealth educational opportunities



## Access Core Readiness

### Organizational Leadership Support

- Financial considerations
- Operations
- Staff engagement
- Patient readiness





## Provider Engagement

- Provider champions
- Patient engagement/readiness
- Telehealth roles



## Address Workflow Changes

- Operational
  - Billing/Licensing
  - Technology
- Scheduling
- Clinic workflow
- Patient documentation
  - Consents
- Communication between staff
  - Update, update, update!

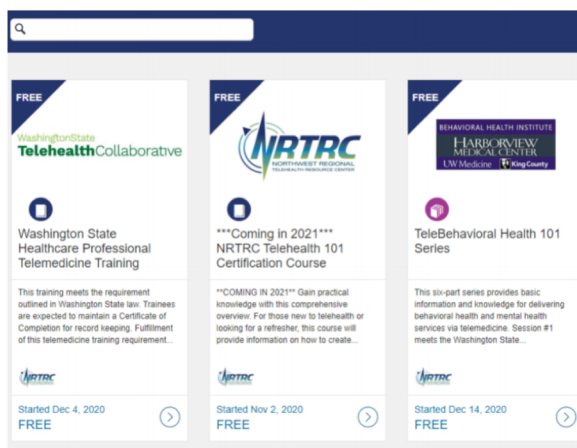


## Engage Clinical Staff

- Staff knowledge
- Solicit staff input
- Determine innovators



## Best Practices for Healthcare Professional Telemedicine Training Opportunities



[www.nrtrc.catalog.instructure.com](http://www.nrtrc.catalog.instructure.com)



## Telehealth Resources

### **National Consortium of Telehealth Resource Centers**

<https://www.telehealthresourcecenter.org>

### **Center for Connected Health Policy (CCHP)**

[www.cchp.org](http://www.cchp.org)

### **Centers for Medicare and Medicaid**

<https://www.cms.gov>

### **Telehealth Technology Assessment Resource Center**

<https://www.telehealthresourcecenter.org/ttac>



## Thank You

**Questions:** [nicki@utn.org](mailto:nicki@utn.org)

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# Telehealth Service Delivery in Alabama: Medical Advocacy & Outreach

*Presented By:*  
**Michael Murphree, LICSW**  
*Executive Officer*



Medical Advocacy & Outreach

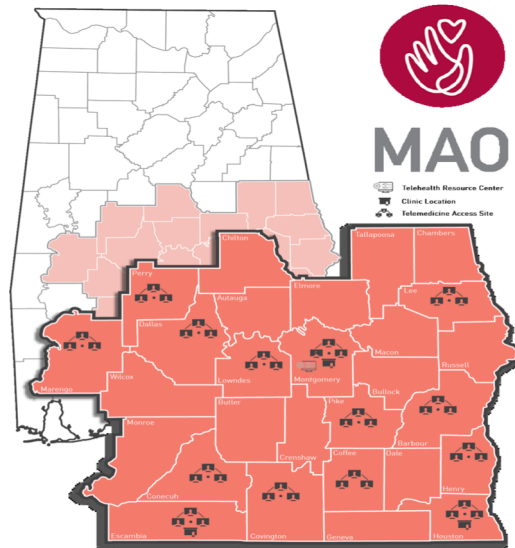


## SUMMARY OF MAO

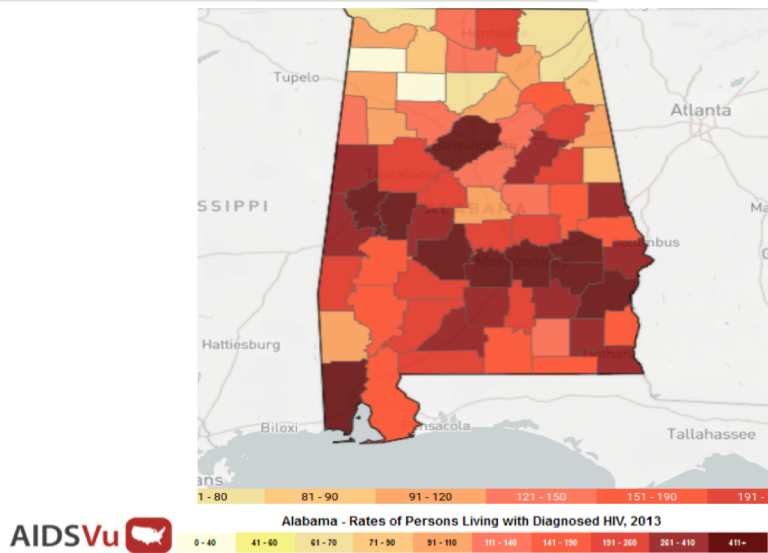


- Nonprofit, 501(c)3 organization established in 1987 that expanded from a small, volunteer-based agency to a large full-service regional program.
- Ryan White Part C grantee, Part B provider and Part D provider.
- Provider of Medical, Social, Behavioral and Education Services to rural communities.

## SERVICE AREA



## HIV IN ALABAMA



## TRADITIONAL RURAL HIV CARE



Alabama  Health





## **TELEMEDICINE AT MAO**



- Service delivery using a video chat environment between provider and patient with nurse assisting.
- High definition camera and video screen with 1080p capability
- Bluetooth peripheral equipment
- Maximum security: MAO Telemedicine matches the level of encryption used by the DOD



## **MAO TELEMED/TELEHEALTH SERVICES**



MAO Telemedicine/Telehealth supports:

- Direct Practice Clinical Care
- Preventative Treatment (i.e., PrEP monitoring)
- Tele-Behavioral Health Counseling
- Social Services Support
- Virtual Training and Community Education
- Agency Planning & Communication

## **TELEHEALTH DELIVERY CONCERNS**



- \* Protection of Patient Information (HIPAA Compliance)
- \* Telehealth with Little/No IT Support.
- \* Transition from In-person to Telehealth.

## **TELEHEALTH DELIVERY CONCERNS**



- \* (Medical) Provider Confidence
- \* Commitment to the Use of Technology
- \* Adjustment Time



## PREPARING FOR TELEHEALTH

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Using the **CHARTS** acronym will help your team with the transition:

- \* **C – Coordinate** with service partners and staff to discuss telehealth delivery objectives.
- \* **H – Host** meetings to discuss concerns and objections and have open and honest dialogue.
- \* **A – Assemble** a team of champions to include patients that will ensure the success of your telehealth program.

## PREPARING FOR TELEHEALTH

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- \* **R – Rehearse** and practice with peripherals. The equipment and website needs are very important for a fluid telehealth encounter.
- \* **T – Train** everyone to be able to access websites, place calls, and use the peripherals, so if your normal telehealth people are out, the consultations can continue.
- \* **S – Solicit** feedback from your team and your patients. Celebrate what you are doing effectively and change what you are struggling with. Remain open to receive feedback and make changes to move forward.

## OUR FUTURE



The more options available to recipients/patients, the better chance that they will find the delivery system that fits their lives.

### MAOI's Plan:

- Traditional Face-to-Face
- Direct Practice Telemedicine Satellite Clinics
- Telehealth Options
- Telephone Option
- Direct Practice "Suitcase Units"
- Mobile Medical Clinics



Medical Advocacy & Outreach  
**MAOI.ORG**

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Executive Officer

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**For More Information about TeleHealthHIV:**

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[www.HealthHIV.org/TeleHealthHIV](http://www.HealthHIV.org/TeleHealthHIV)