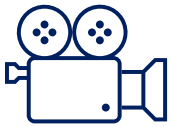
CALIFORNIA HEALTH CARE
SAFETY NET INSTITUTE

Designing the Future State: How a Mixed Model Approach Can Optimize Virtual Care for Patients

March 30, 3-4 pm



Recording Link

Agenda

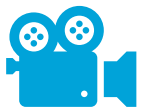
Time	Topic	Facilitator(s)
5 min	**Welcome and Housekeeping**	Thuy-Ann Le *SNI*
20 min	**Hybrid Template Update: Contra Costa Health Services**	Dr. Yoshi Laing Ambulatory Care Telehealth Lead *Contra Costa Health Services*
20 min	**Virtual Care Zoom Clinics: West County Health Centers**	Dr. Jason Cunningham Family Physician, CEO *West County Health Centers*
10 min	**Whole Group Discussion**	Thuy-Ann Le
5 min	**Wrap-up & Announcements** • Upcoming Events • Post-Survey	Thuy-Ann Le

Housekeeping

Rename yourself to include your name and organization

Feel free to speak up or chat in responses at any time

You're encouraged to turn on video for peer discussion



This meeting is being recorded and will be posted online

Materials will be available at SNI Link/Virtual Care

Average Scores for Each Category

BASIC (score 1-3) | **INTERMEDIATE (4-6)** | **ADVANCED (7-9)**

1 2 3 4 5 6 7 8 9

5.7 Cybersecurity Support
5.6 Core Telecommunications Platform
5.1 Virtual Care Devices
4.9 Leadership
4.7 Technology Support
4.6 Provider/Staff Engagement
4.5 Operational & Clinical Standards
4.1 Health Equity - Action
4.0 Patient & Family Engagement
3.9 Health Equity - Awareness
3.9 Governance

SNI Virtual Care Learning Series

Measuring Success in Virtual Care

- Peer Sharing: Virtual Care Measures of Success at Public Health Care Systems.
- Virtual Care Measures of Success: 3-Month Check-in

Operations & Clinical Standards

- **Designing the Future State: Mixed Model Approach to Optimize Virtual Care**
- Virtual Care Intake and Social Needs Screening

Patient & Family Engagement

- Integrating Navigation & Virtual Care
- Access and Digital Literacy
- Remote Patient Monitoring

Hybrid Template Update: Contra Costa Health Services

Dr. Yoshi Laing, Ambulatory Care Telehealth Lead
Contra Costa Health Services

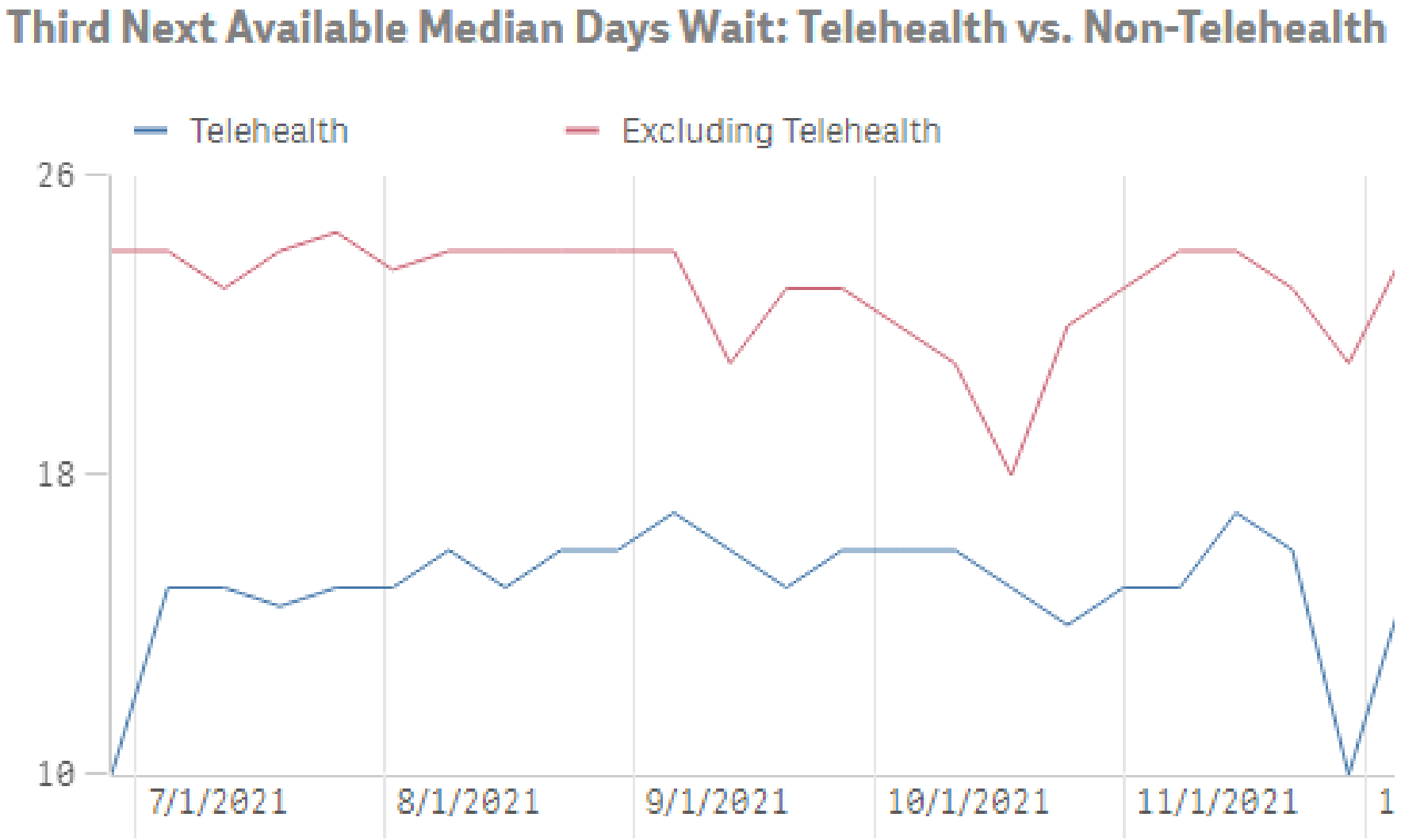
CONTRA COSTA
HEALTH SERVICES

HYBRID TEMPLATE UPDATE

SO FAR, SO GOOD

B. Yoshi Laing, MD, MPH
Ambulatory Care Telehealth Lead
March 2022

DISPARITIES IN ACCESS



Hybrid model: The best of Both Worlds

Family Medicine Clinic Template

Standard Office Template	Hybrid Template
8:00 am	8:05 am – tele (nurse calls pt at 8am)
8:15 am	8:20 am – tele (nurse calls pt at 8:10am)
8:30 am	8:35 am
8:45 am	8:50 am
9:00 am	9:10 am
9:20 am	9:30 am
9:40 am	9:50 am
10:00 am	10:10 am
10:20 am	10:30 am
10:40 am	10:50 am
11:00am	11:10am

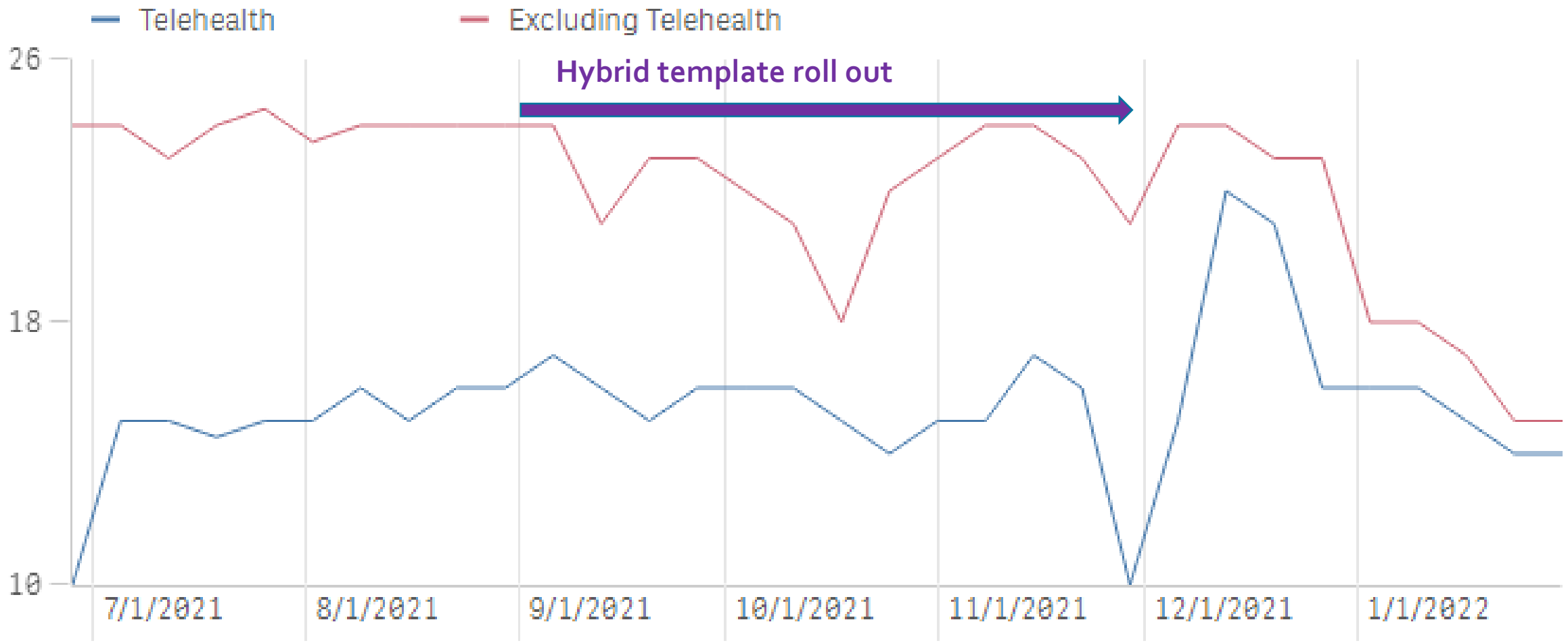
Hybrid Vigor!

We had 3 physician leaders pilot this

- Feedback was overwhelmingly positive e.g. **"pretty much my dream template"**
- Providers reported staying more punctual throughout the clinic *and* finished on time
- Nurses were also enthusiastic about this model because clinic stayed on time
- Telehealth access is distributed throughout the week rather than limited to a single half day
- Unfilled telehealth slots open up for in person visits 48 hours ahead of the appointment time

Impact on ACCESS?

Third Next Available Median Days Wait: Telehealth vs. Non-Telehealth



Is THE HYBRID TEMPLATE MORE EFFICIENT?

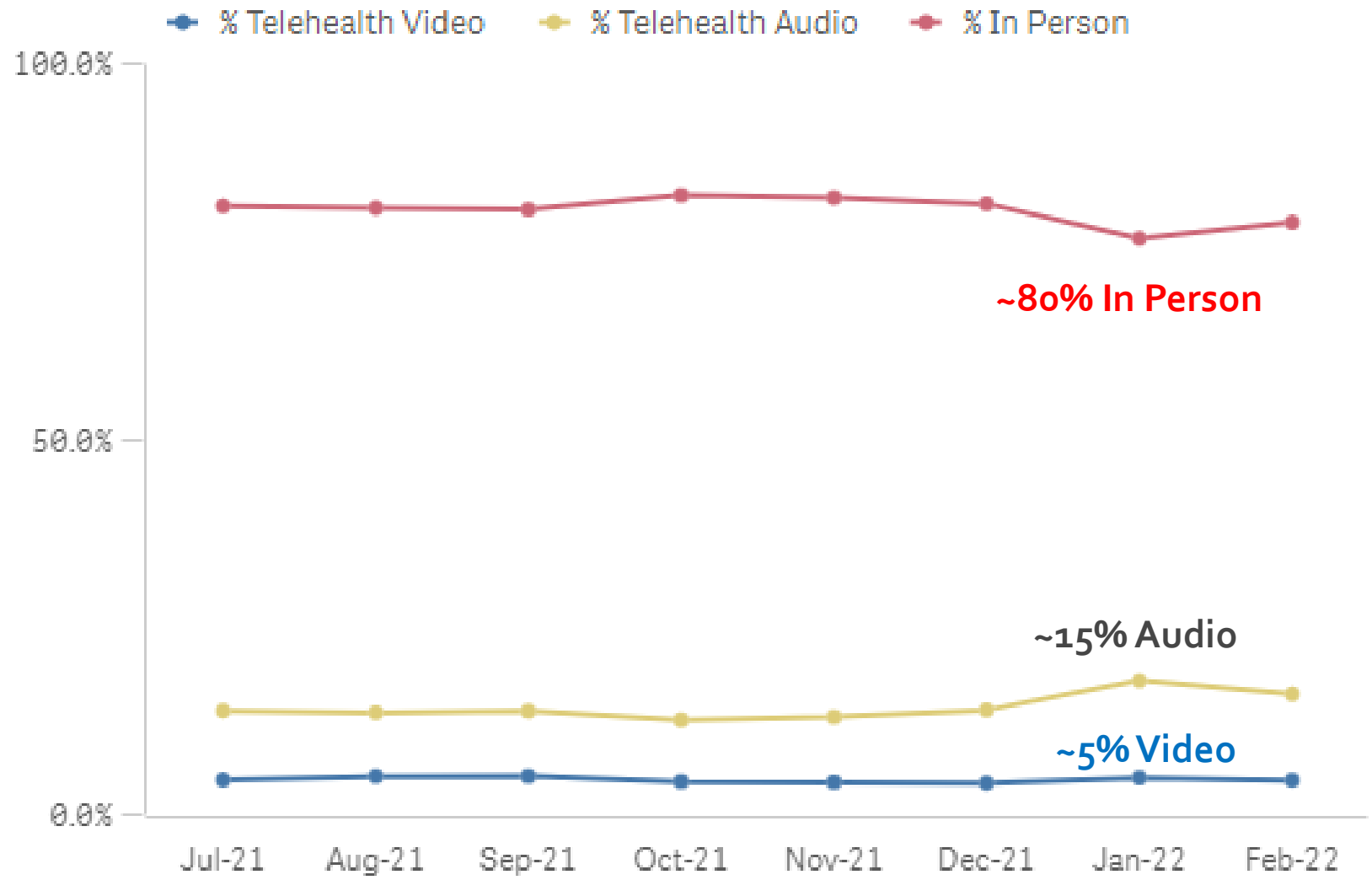
We measured timeliness of clinic end time:

Ex. Last AM patient checked out at 11:55am means clinic finished 5 minutes early

On average, we are seeing that providers:

- **finished ~5 minutes early with standard template**
- **finish ~8 minutes early with hybrid template**

Percent of Video, audio, & In person visits remained FAIRLY steady



I.T. CONSIDERATIONS

I.T. had a lot of work leading up to this

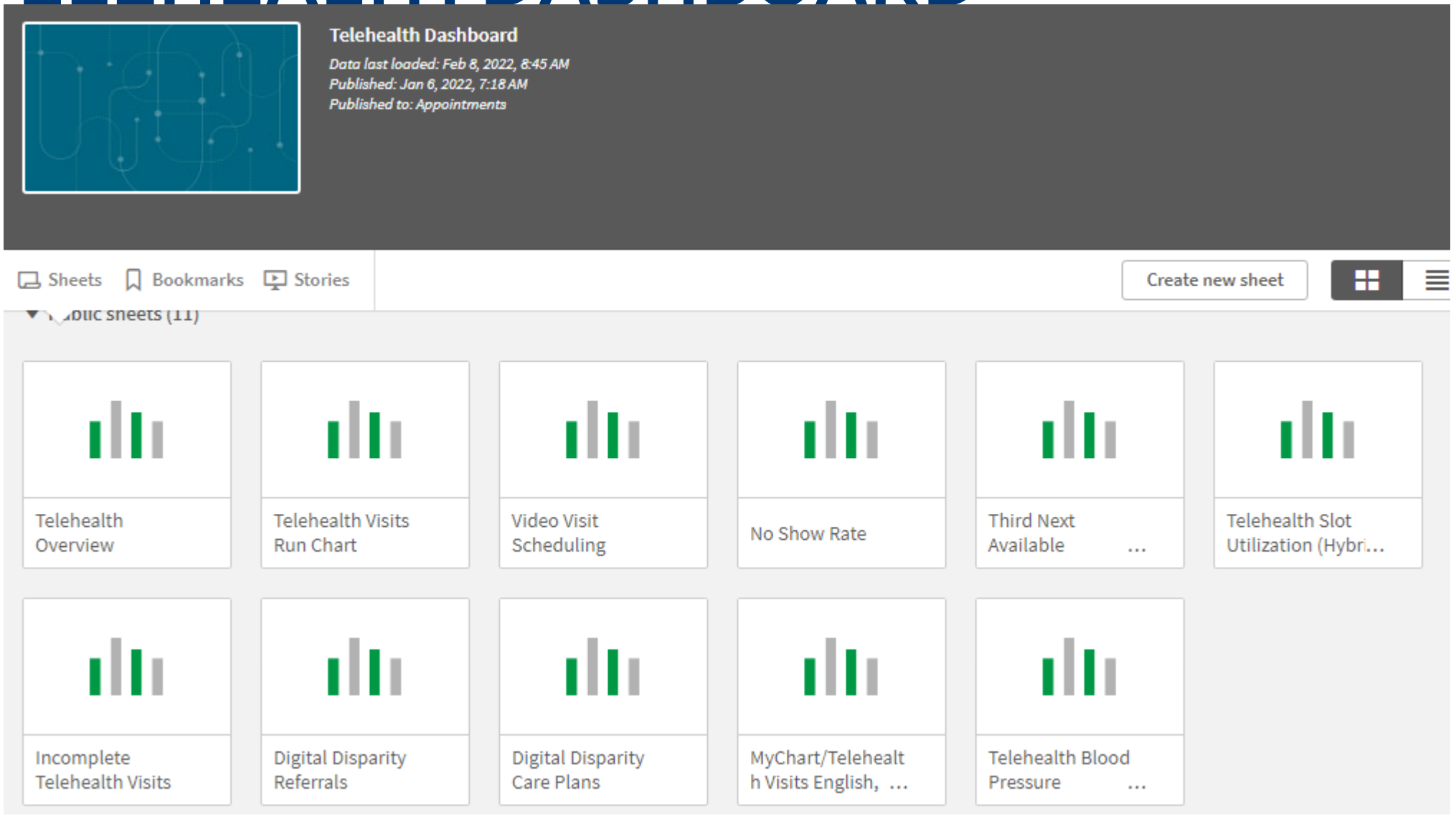
- installed USB webcams and headsets in all exam rooms
- tested network bandwidth to anticipate high volume of simultaneous video visits
- some clinics have phones in the exam rooms and we're aiming to do this for all clinics
- We are working on a solution re what to do when a patient needs to reach their provider for a TH visit e.g. they missed the call*

CHALLENGES ETC.

- A few providers are arriving to clinic late. Some have called patients while driving into work.
- A few providers note a brief lull between the second telehealth patient and the first office visit.
- There's been no significant change in our patient rating of provider (former QIP metric).
- We have payment parity for the foreseeable future in CA

Questions?

TELEHEALTH DASHBOARD



Referrals, Care plans, MyChart

Average 60 referrals & 30 care plans per month completed to address digital disparities!

Percent of Empaneled Patients who have MyChart activated
Comparing July 2020 → February 2022 (+ percent relative increase)

- English 41%→75% (+83%))
- Vietnamese 32%→63% (+97%)
- Spanish 15%→45% (+200%)

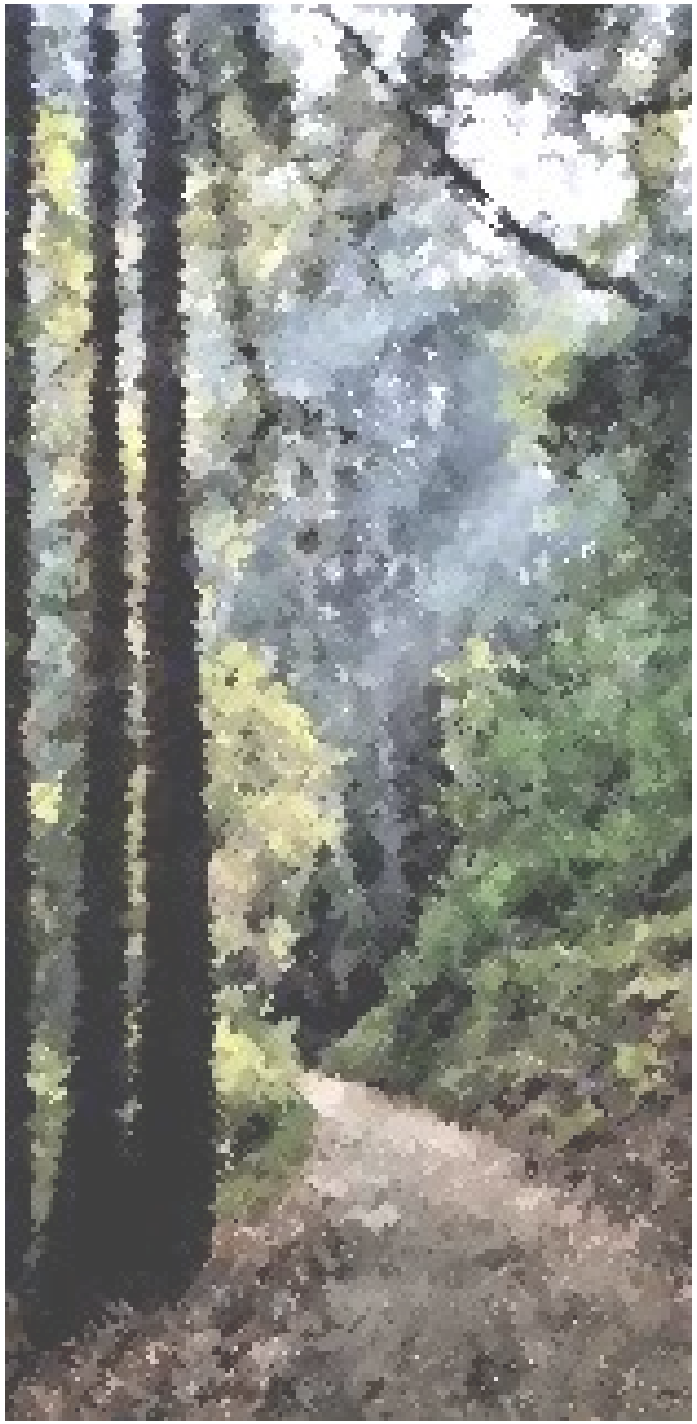
Virtual Care Zoom Clinics: West County Health Centers

Dr. Jason Cunningham, Family Physician, Chief Executive Officer
West County Health Centers

Jason Cunningham, Family Physician, CEO

West County Health Centers

West County Health Centers
Caring for our Communities
a california health center

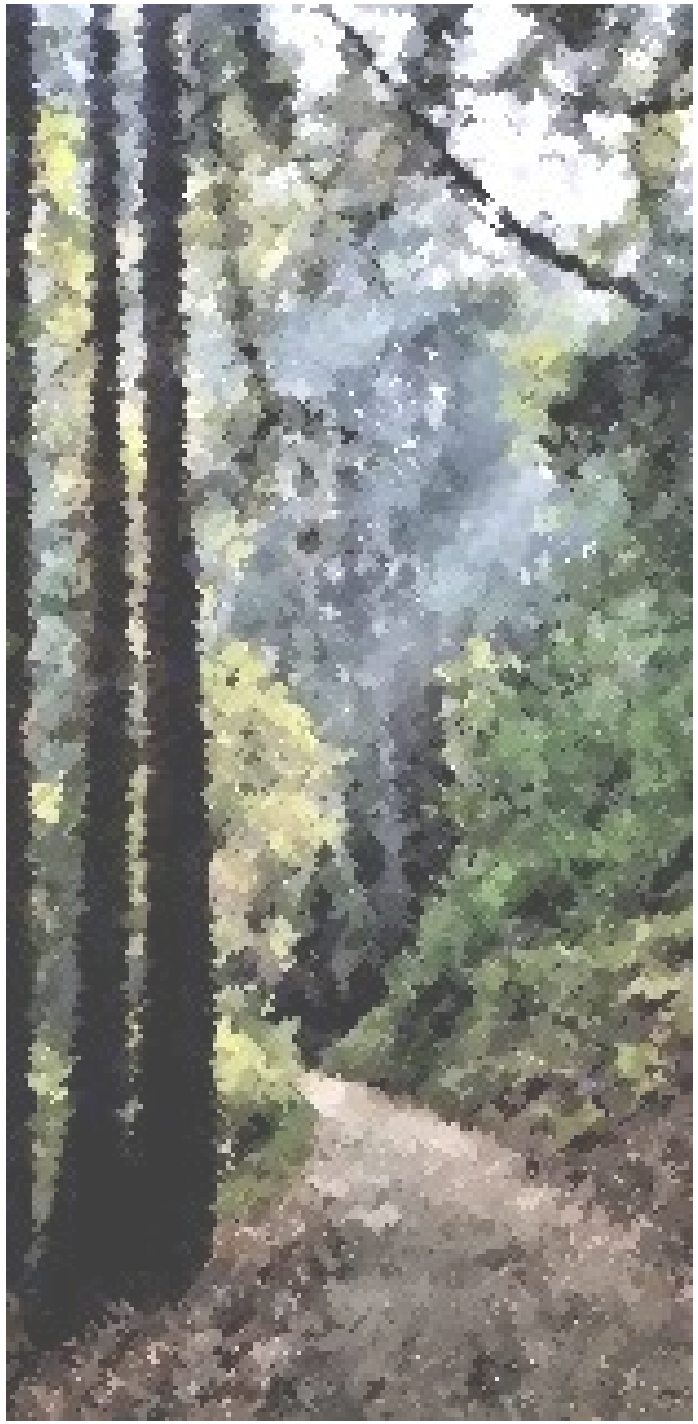


West County Health Centers

- *3 Primary Care sites*
- *1 Dental*
- *Teen Clinic*
- *Third Street House*

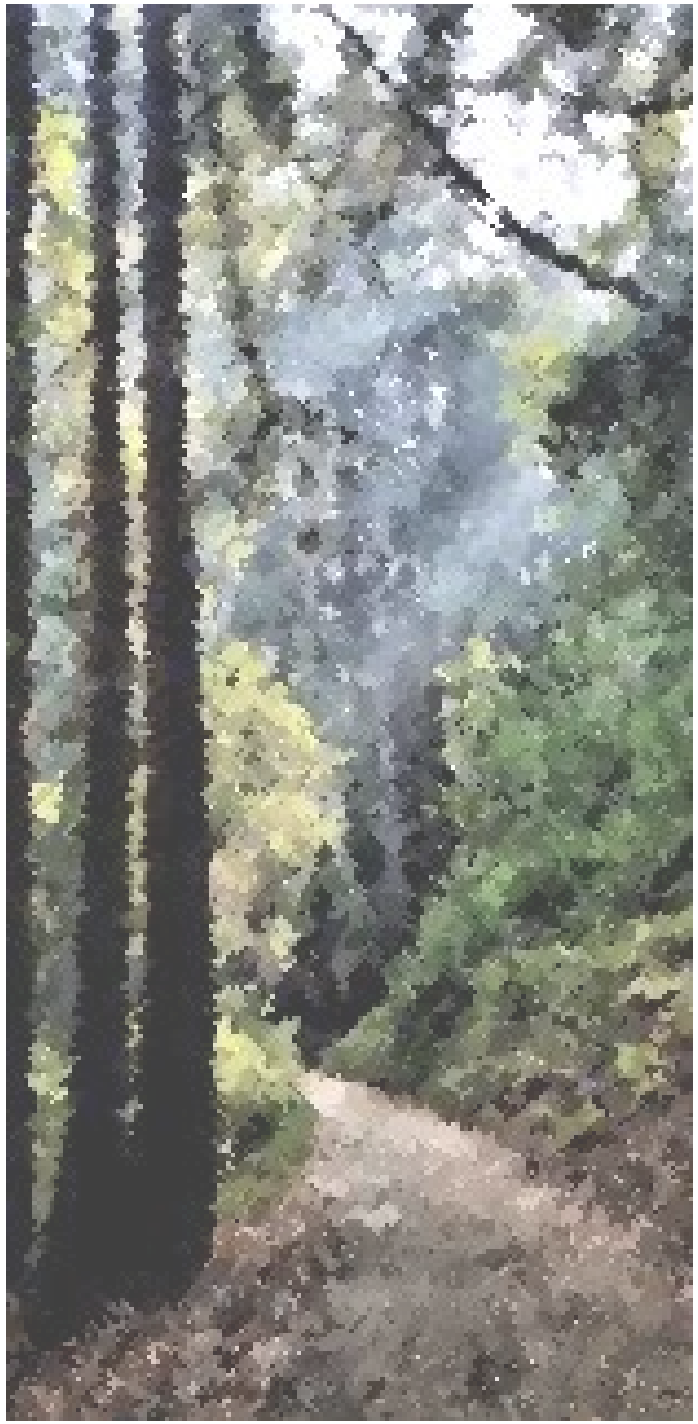
- *EHR: eClinicalWorks*

- *Gender specialty services, Wellness Services including but not limited to: OMT, Acupuncture, Herbal Consults, HeartMath, Ayurveda consults, Nutrition Consults, and Group medical visits*



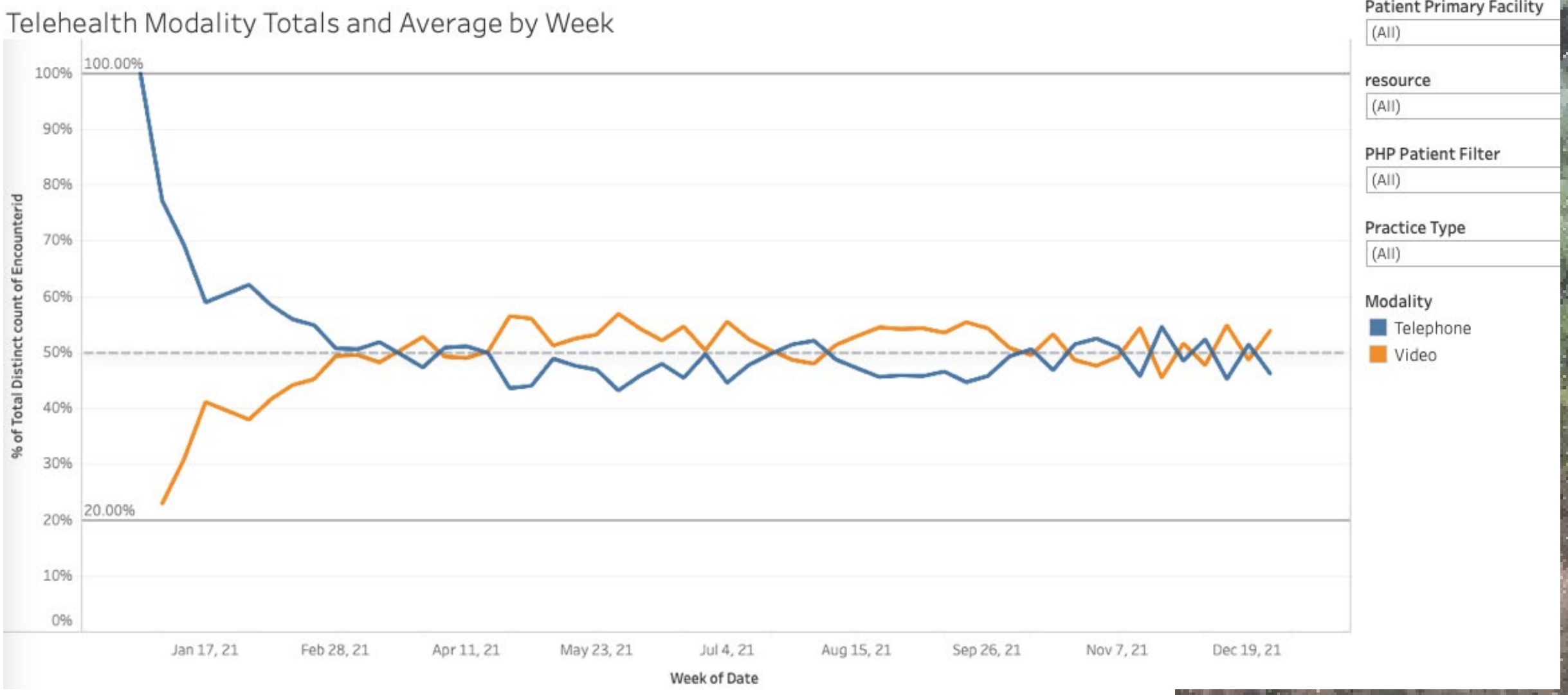
Data and Types of Telehealth

- *Current State (Feb 2022)*
  - *34.4% In-Person Visits*
  - *30.5% Phone Visits*
  - *35.1% Video Visits*
- *Used Modality structured data to capture video vs phone vs in-person*
- *Telehealth Hybrid*
  - *Provider is remote, patient comes into office depending on reason for visit.*
  - *Patient does not have device or internet to conduct a video visit*



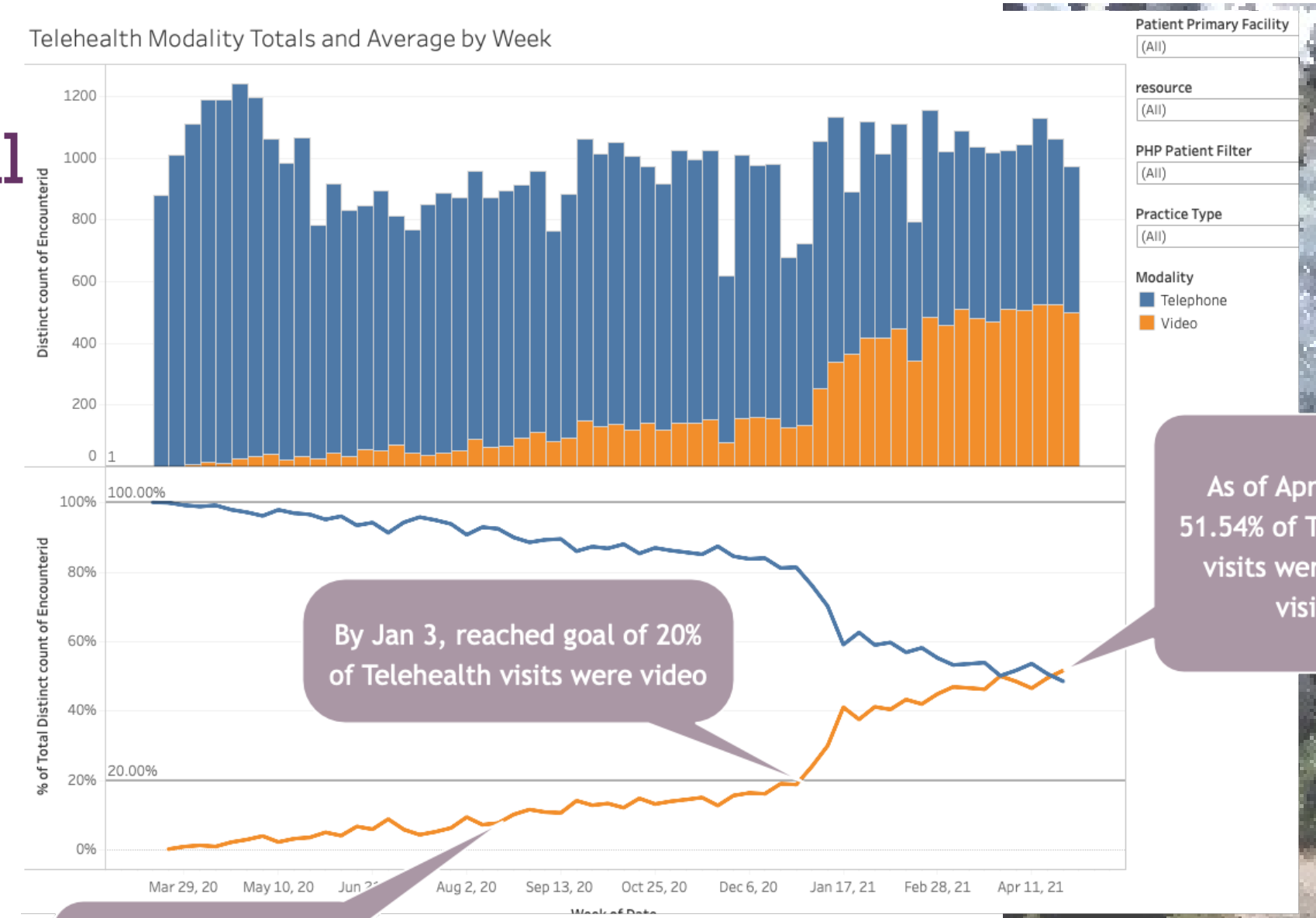
Current Data thru Dec. 26th

All Visits:



Historical Data

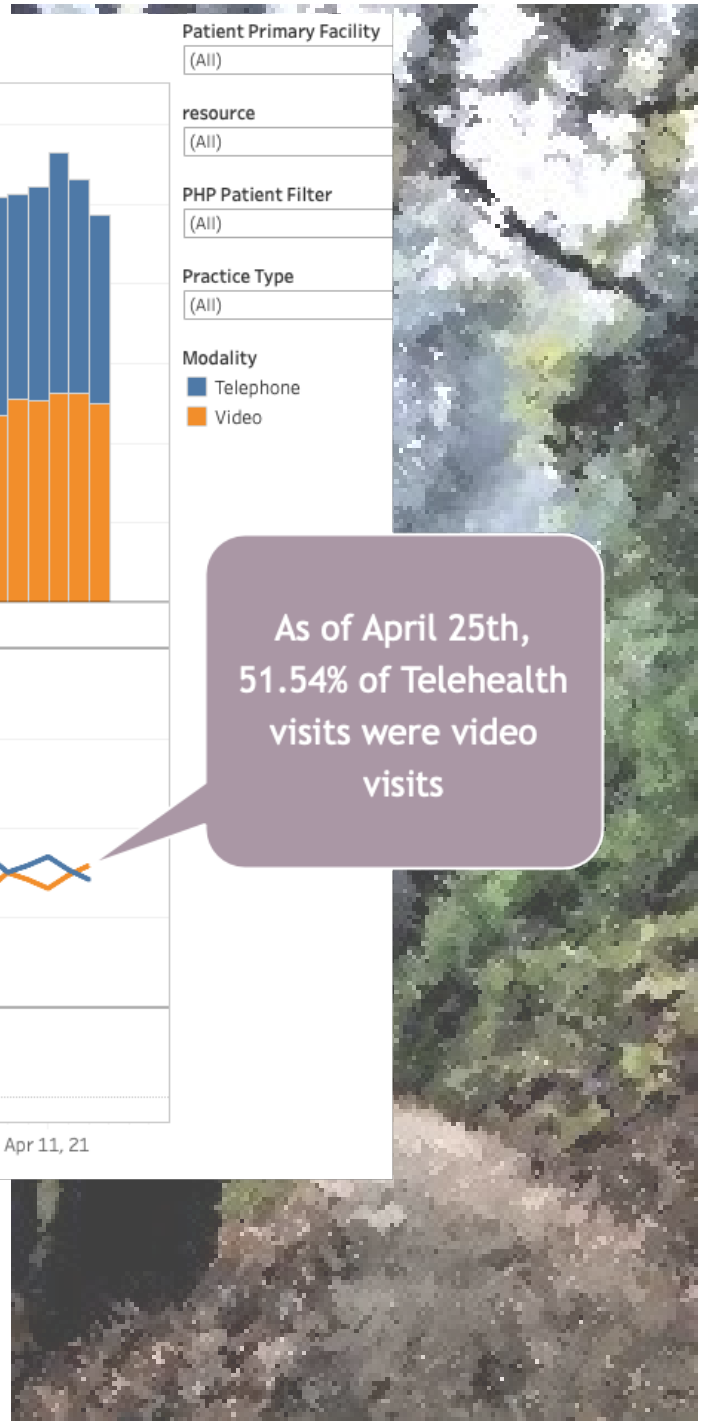
All Visits:



By Jan 3, reached goal of 20% of Telehealth visits were video

As of April 25th, 51.54% of Telehealth visits were video visits

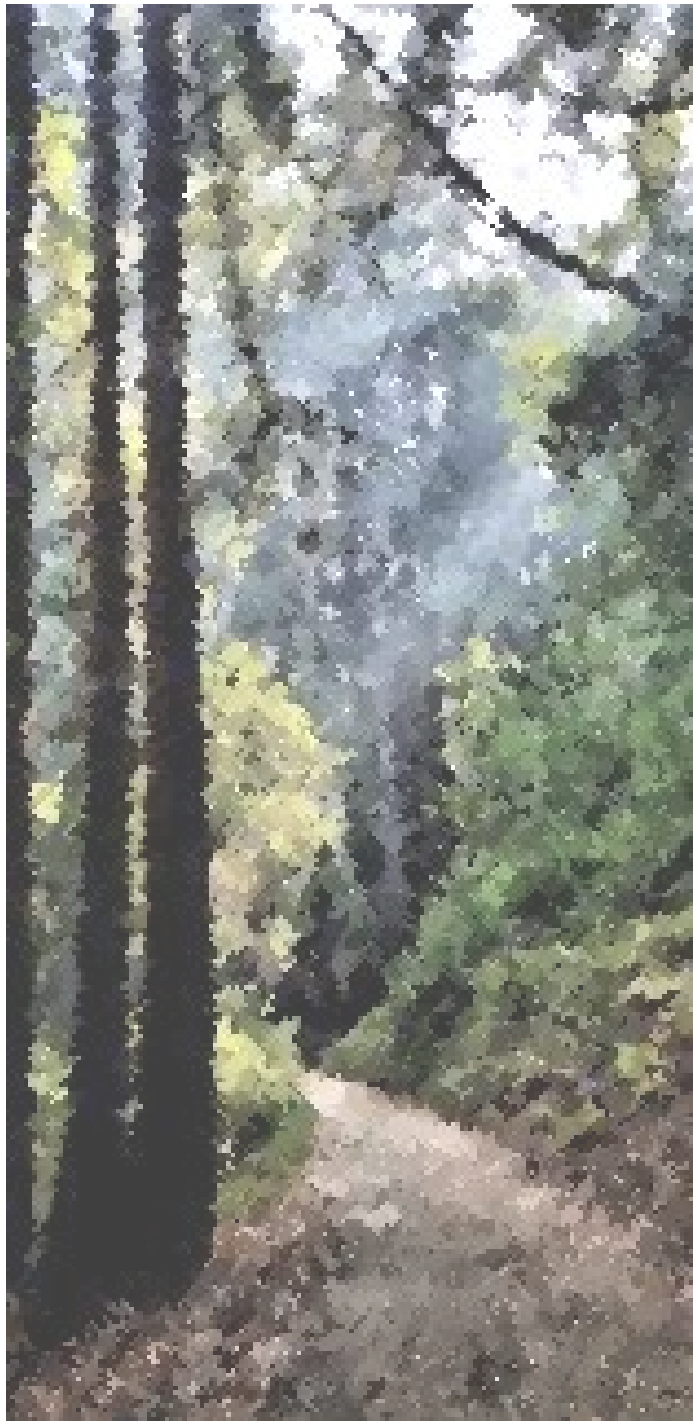
August started the Zoom Clinic Pilot. At this point we were at 6% video



The Challenge

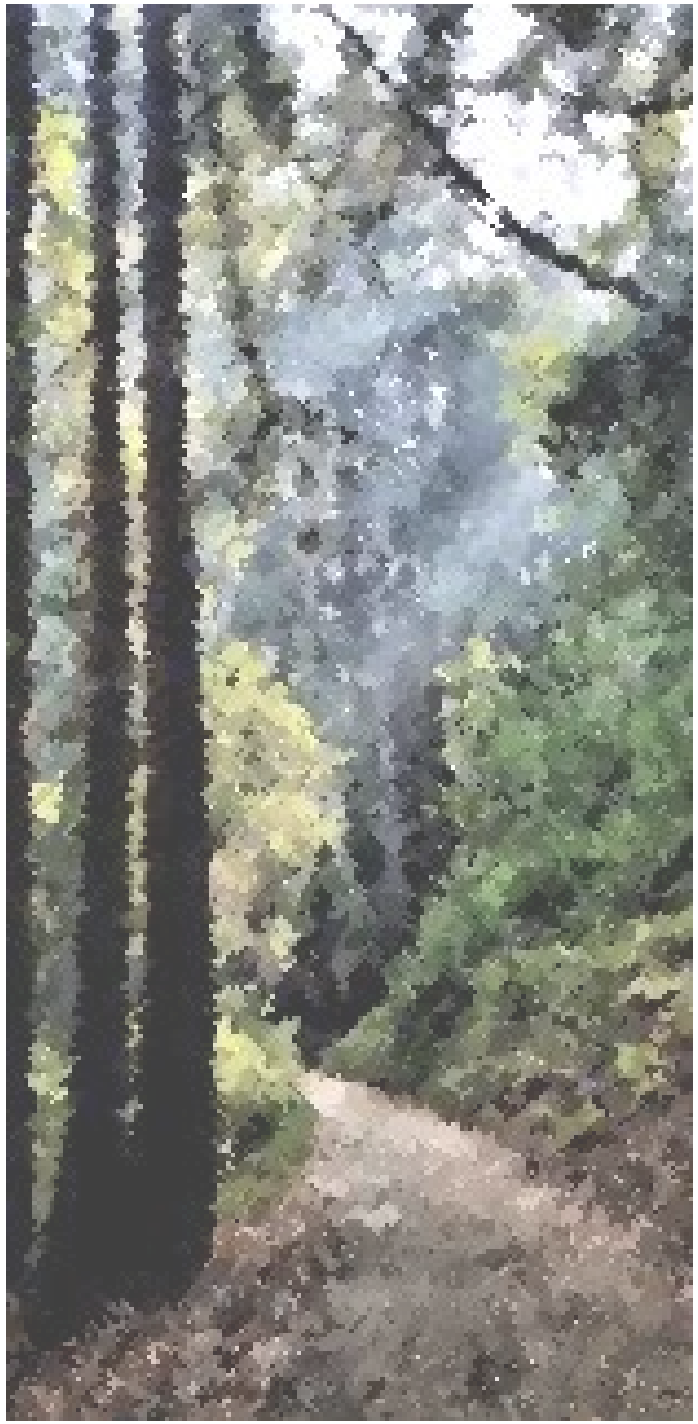
- How to mimic in-person clinic using Zoom's 'breakout room' feature.

- Key Objectives:
  - Ensure HIPAA Compliance
  - Utilize an existing employee/role for the "waiting Room Concierge" role
  - Maintain Care Team communication and collaboration
  - Good relational care



What We Tried

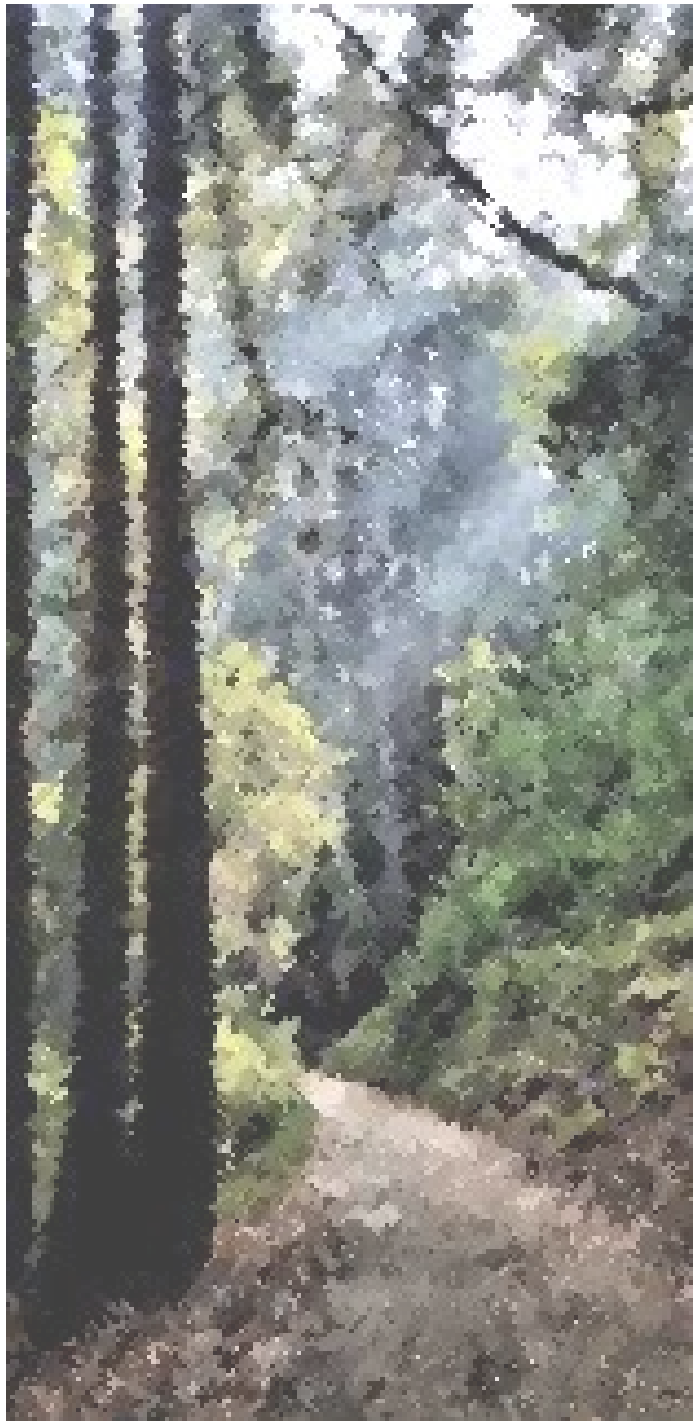
- eClinicalWorks Tele-visit feature
  - Issues connecting for both staff and patients
- Doximity
  - Only provider to patient
- Individual Zoom License's
  - Behavioral Health Visits (current for majority of BH Providers)
  - Use's zoom waiting room feature
- Clinic Based Zoom License's
  - Every Provider scheduled under that facility for remote visits
  - Started to included BH Provider at one site
  - Utilizing the zoom "waiting room feature"



What Happened

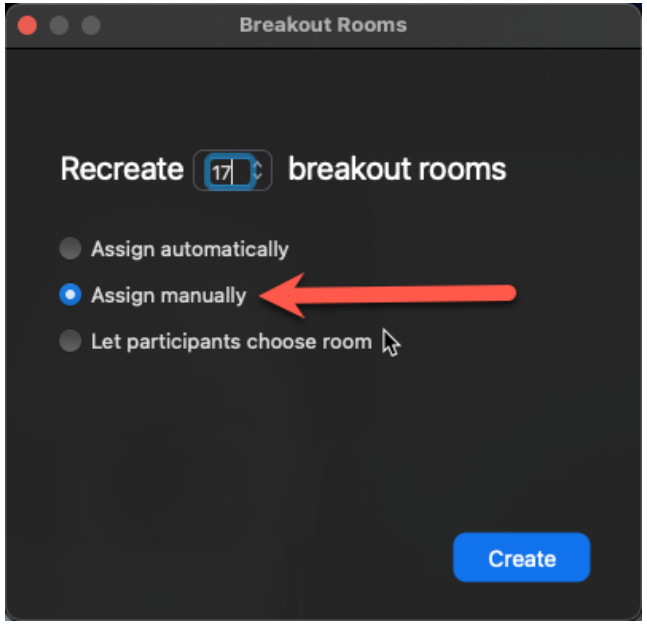
What Worked

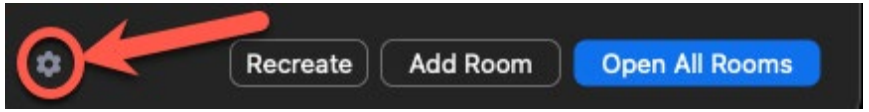
- Zoom Pro license per Primary Care sites
  - Whole Care Team joins is given co-host rights and remains on Zoom while the Provider see's patients
    - Provider/MA have majority interactions with patients, but other staff are on and ready if the need arises
  - Reception role took on managing the zoom "waiting room"
- If telehealth visit, booked as a video visit, with the understanding we would fallback to a phone visit if needed
- Offering of additional IT Equipment
  - Monitor (for dual setup) and headsets

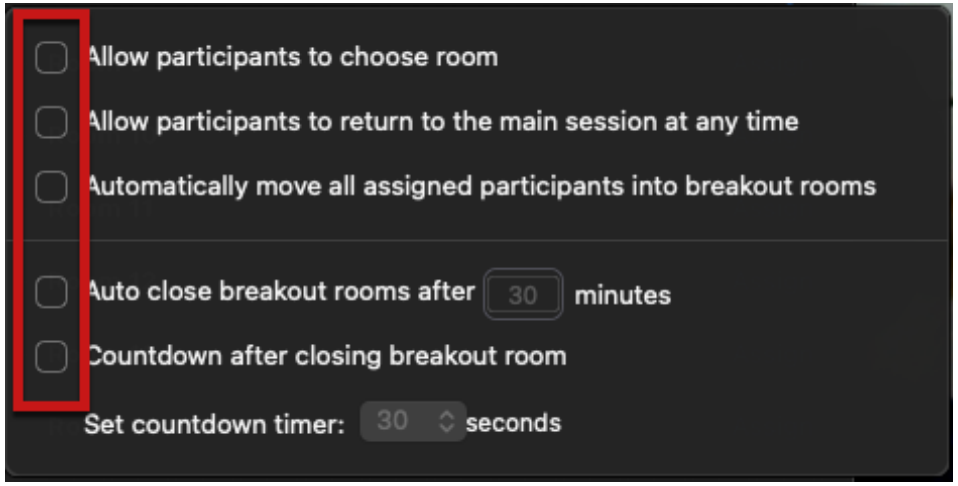


Lessons Learned: Breakout Room Settings

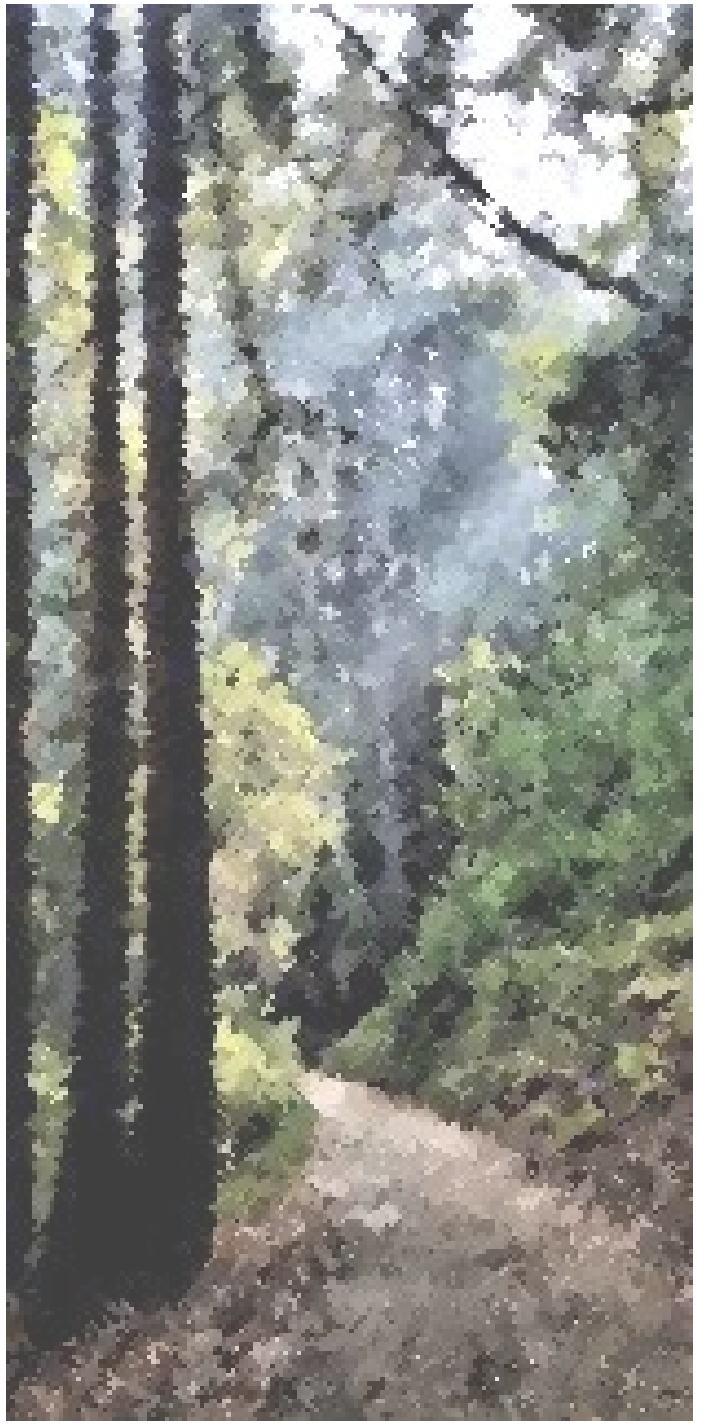
WCHC Standard settings checked daily



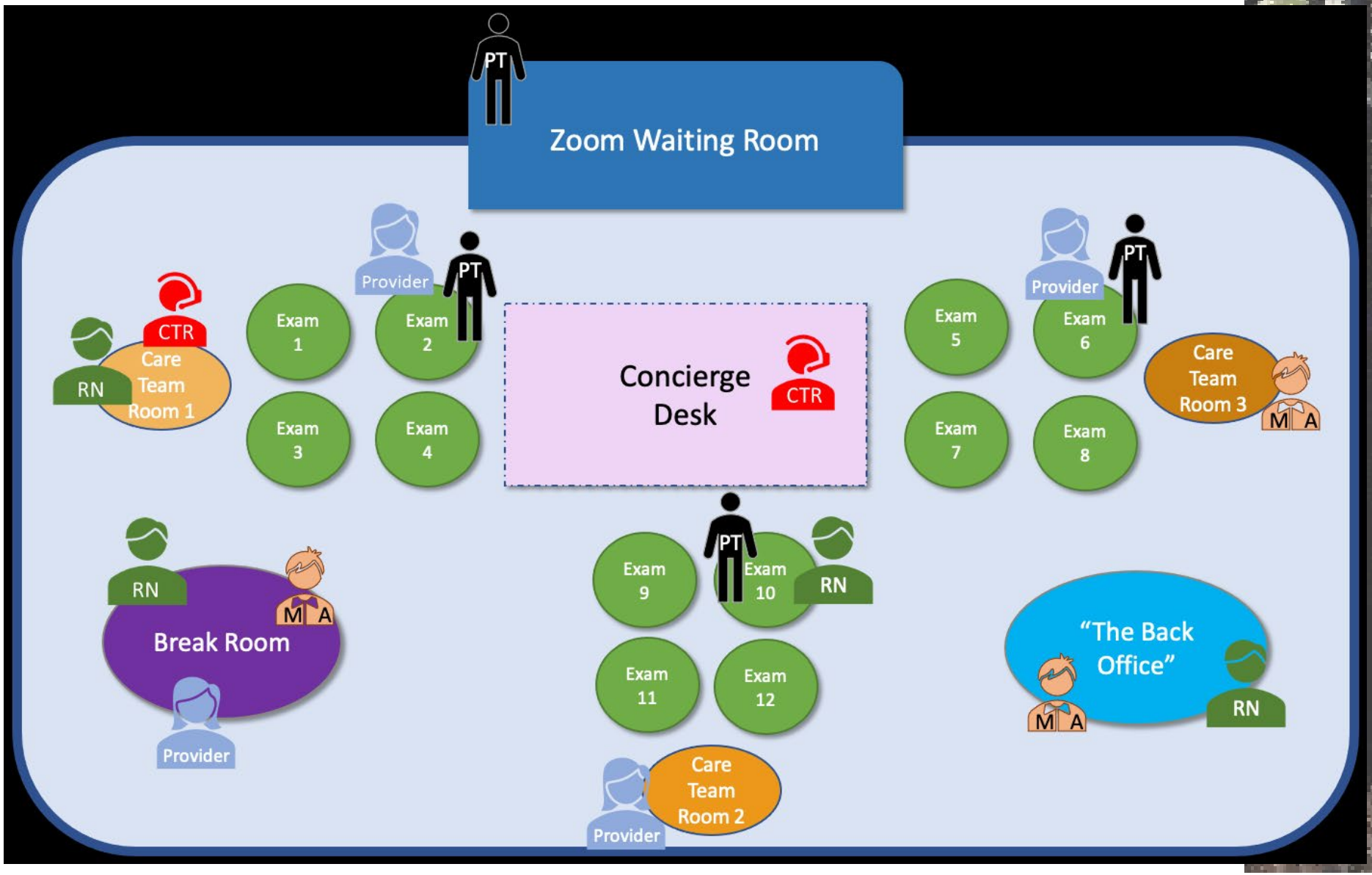




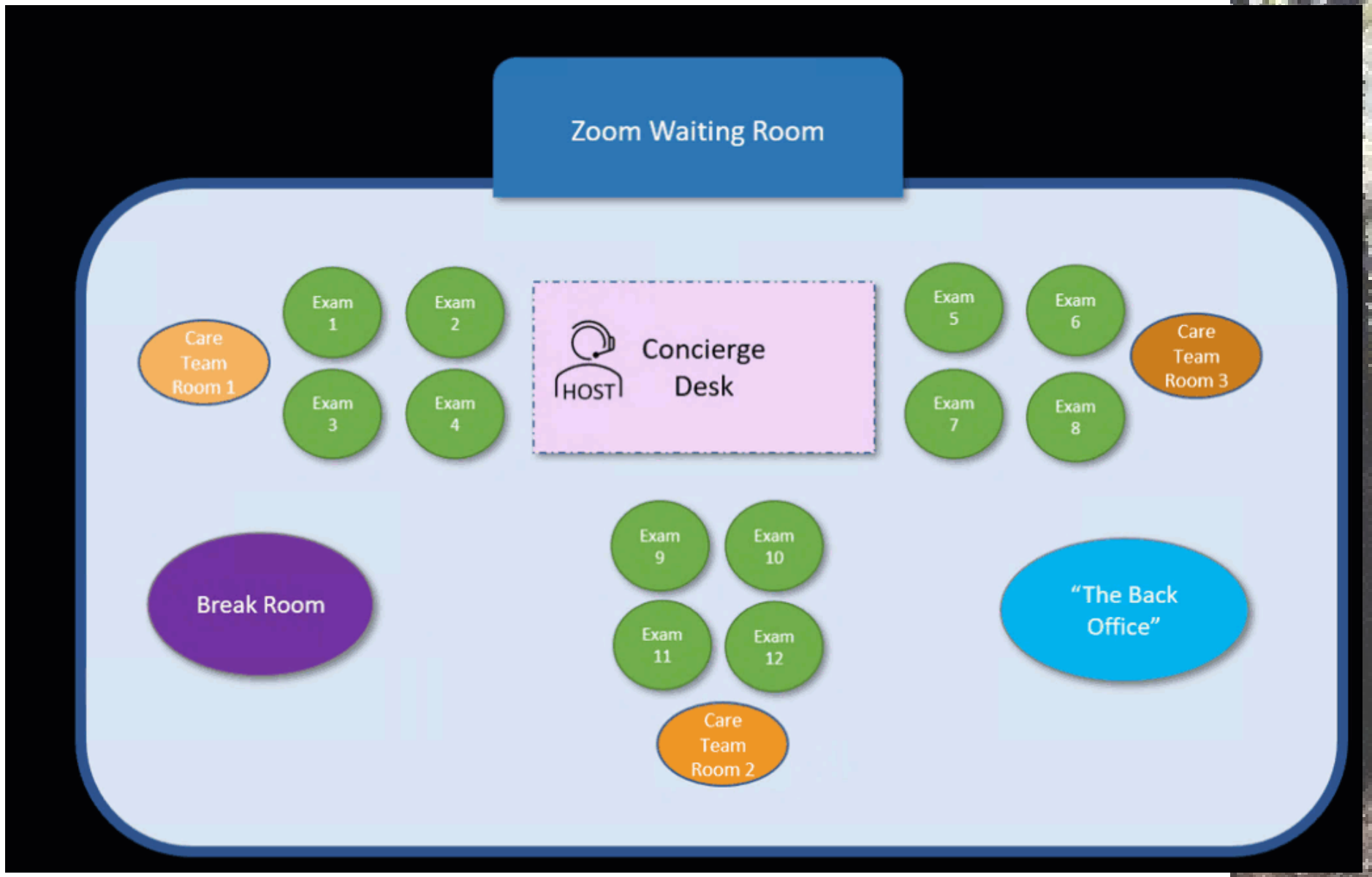
A Zoom update auto checked the setting that allowed patients to exit their Exam Breakout room, back to the Main session. Now the Host creating the breakout rooms daily, check these settings.
Number of rooms depends on how many providers are on that day.



Zoom Clinic:


PT
Zoom Waiting Room
Provider
PT
CTR
Care Team Room 1
RN
Exam 1
Exam 2
Exam 3
Exam 4
Concierge Desk
CTR
Exam 5
Exam 6
Exam 7
Exam 8
Provider
PT
Care Team Room 3
M A
RN
M A
Break Room
Provider
PT
Exam 9
Exam 10
RN
Exam 11
Exam 12
Provider
Care Team Room 2
"The Back Office"
M A
RN

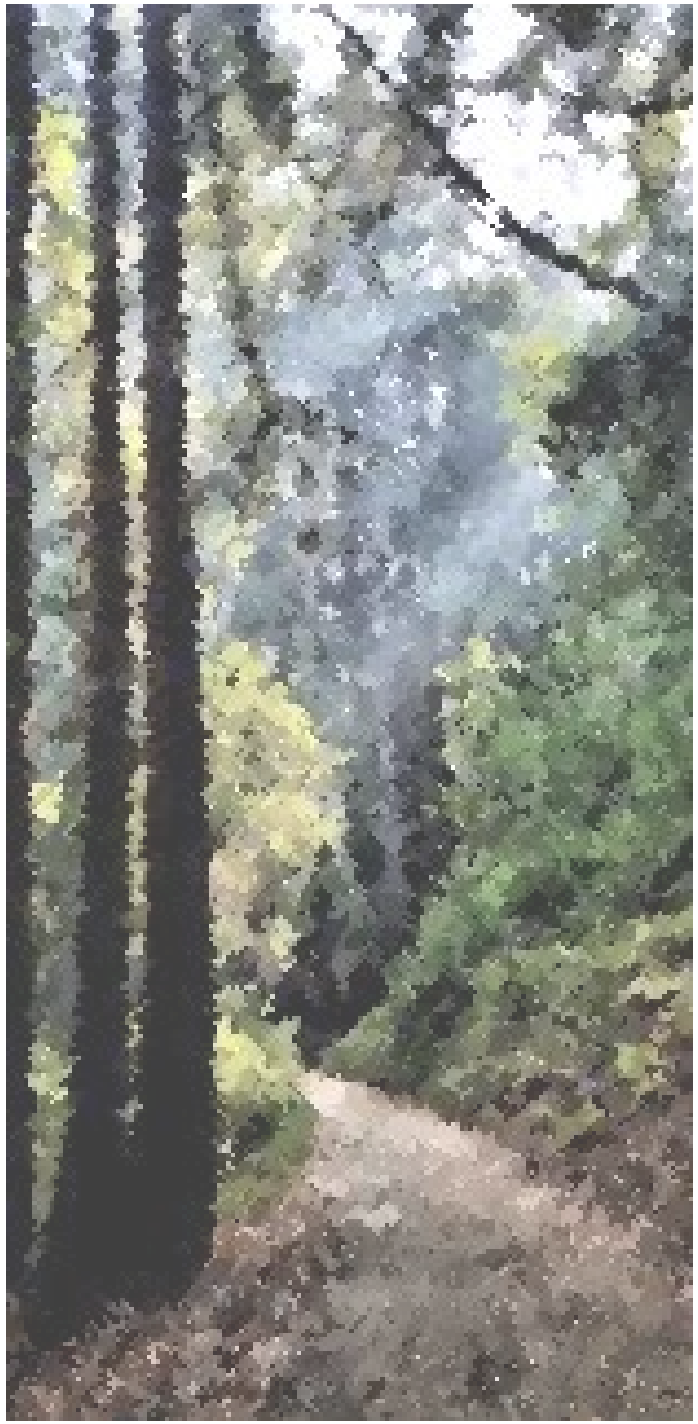
Zoom Clinic:


Zoom Waiting Room
Exam 1
Exam 2
Exam 3
Exam 4
Care Team Room 1
HOST
Concierge Desk
Exam 5
Exam 6
Exam 7
Exam 8
Care Team Room 3
Break Room
Exam 9
Exam 10
Exam 11
Exam 12
Care Team Room 2
"The Back Office"

What Happened

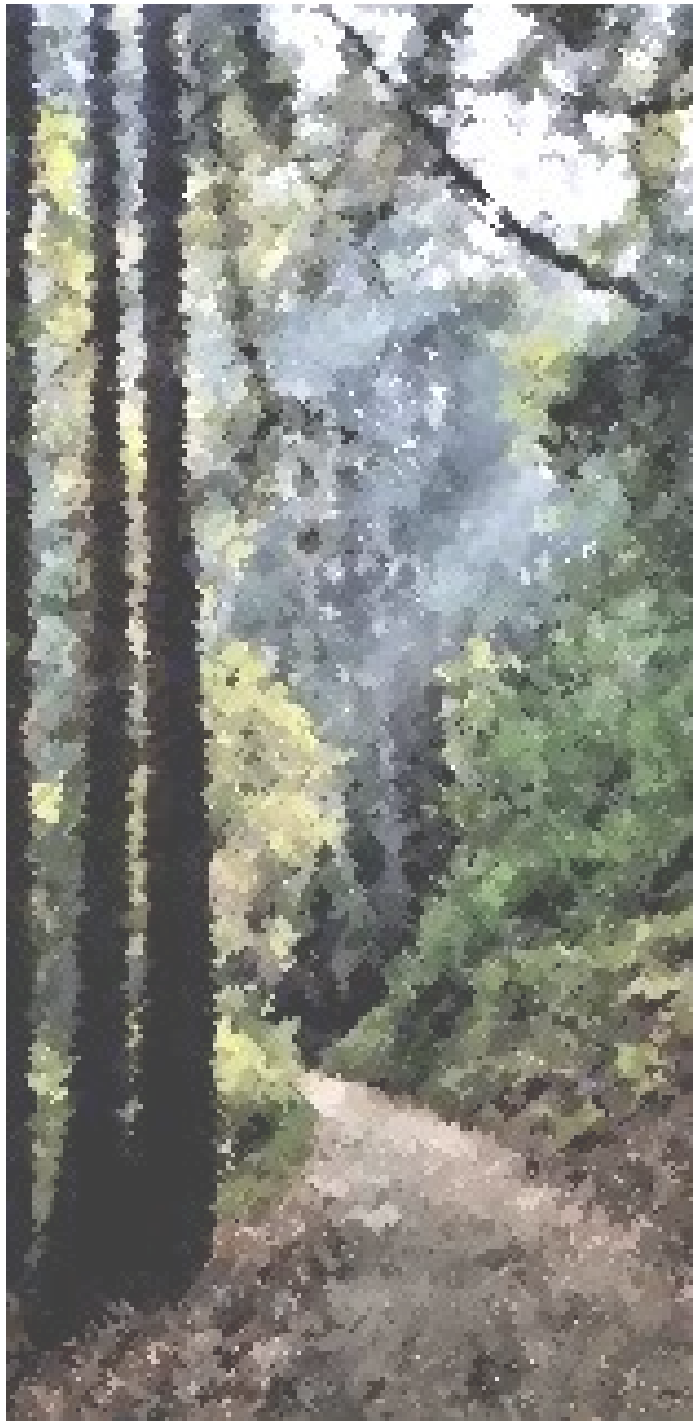
Challenges And How We Addressed Them

- Reception role hesitancy/pushback using new IT platform
  - Remote elbow support, using Teams share screen, and being a “Jiminy cricket” in the user's ear
- IT Support
  - Had IT Volunteer for limited time
  - Focused on improving website page, and including link in the appt confirmation text, and training clinical support roles
- Patient technical barriers/Reason for visit needs patient to come into office
  - All sites have at least one exam room with iPad setup for patient to come in and conduct video visit with remote provider
    - MA’s will room take vitals and/or urine as needed



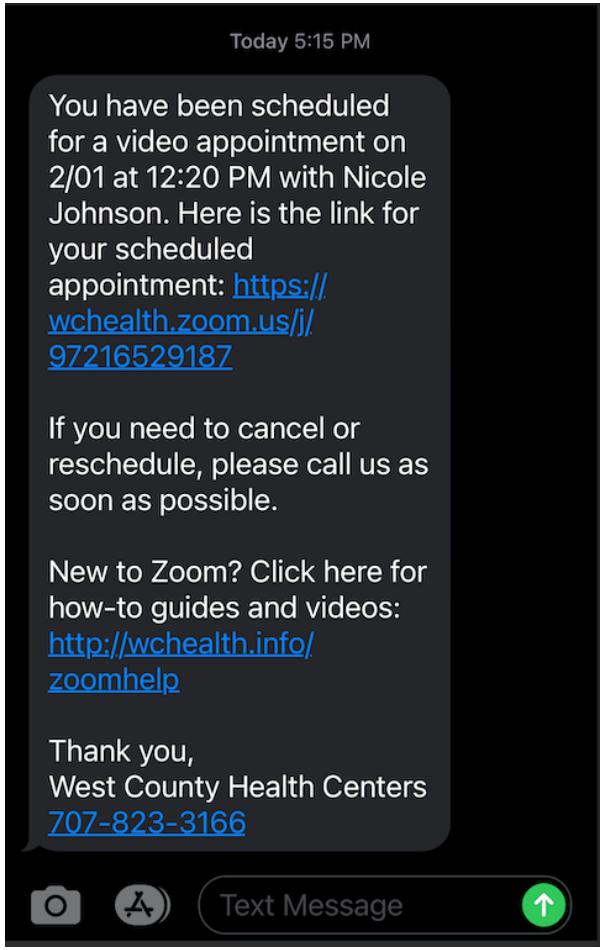
Lessons Learned

- Phased approach worked well for us
  - Training Care Team by Care Team, focusing on care teams for one site at a time
  - IT Staff vetted the lift of Hosting, to see if new role was needed/recommended
- Staff hesitancy can be overcome with enough training and support
- Wireless headsets were provided for Reception staff who are also checking in the in-person appointments
- All staff need to be marked as Co-Hosts
- Zoom settings, to ensure HIPAA compliance
  - Uncheck “allow participants to leave breakout room and return to main room
  - Disable chat feature - the history remains

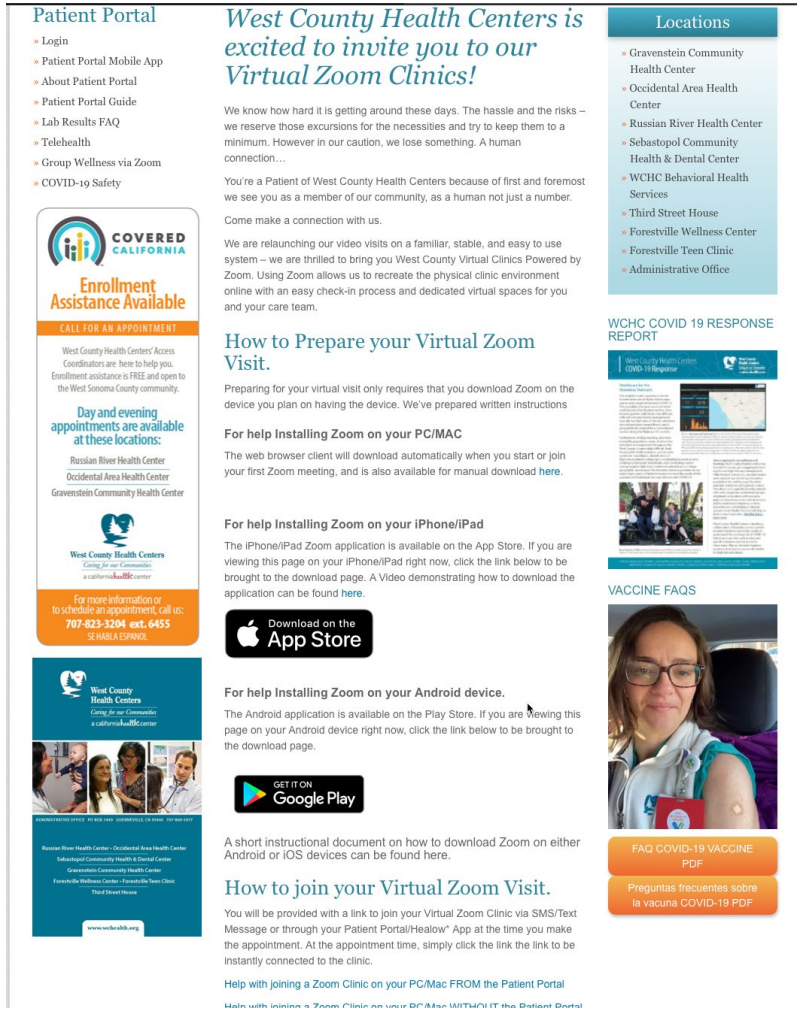


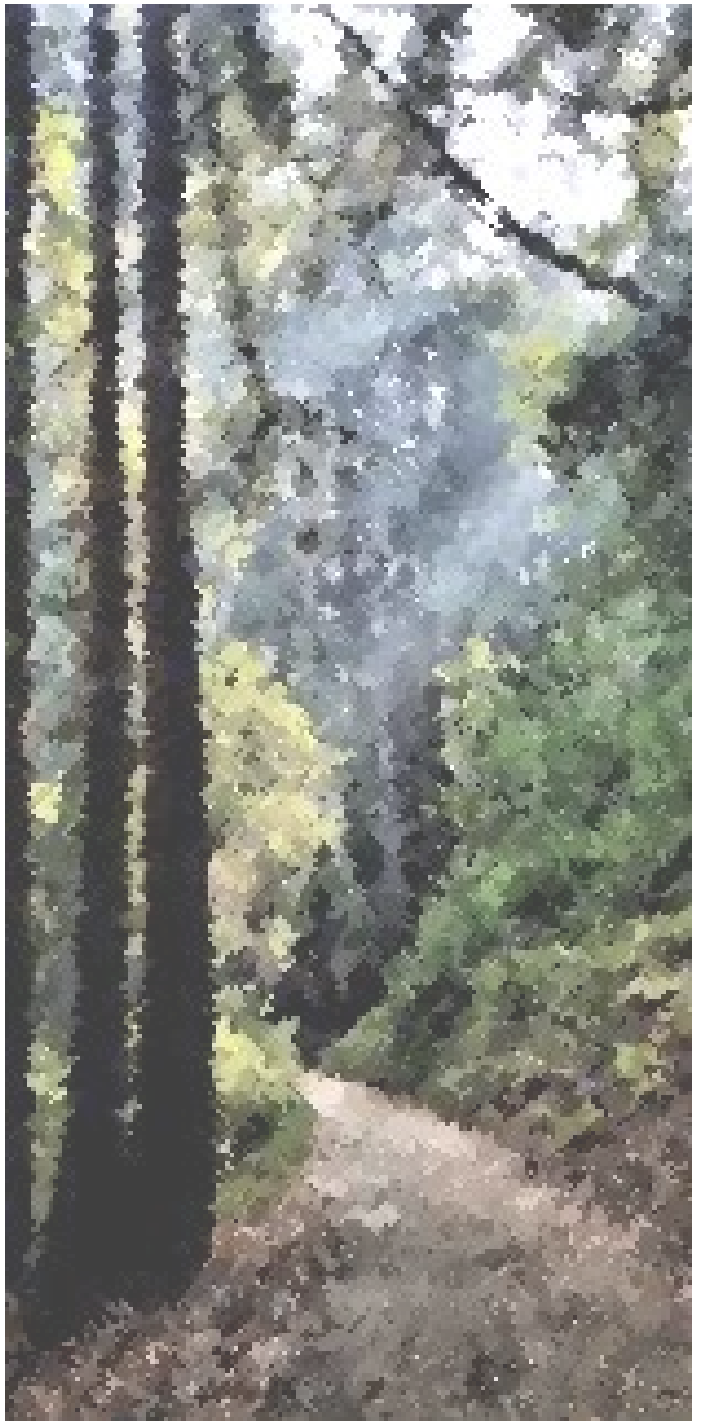
Patient Communication images:

Appt confirmation

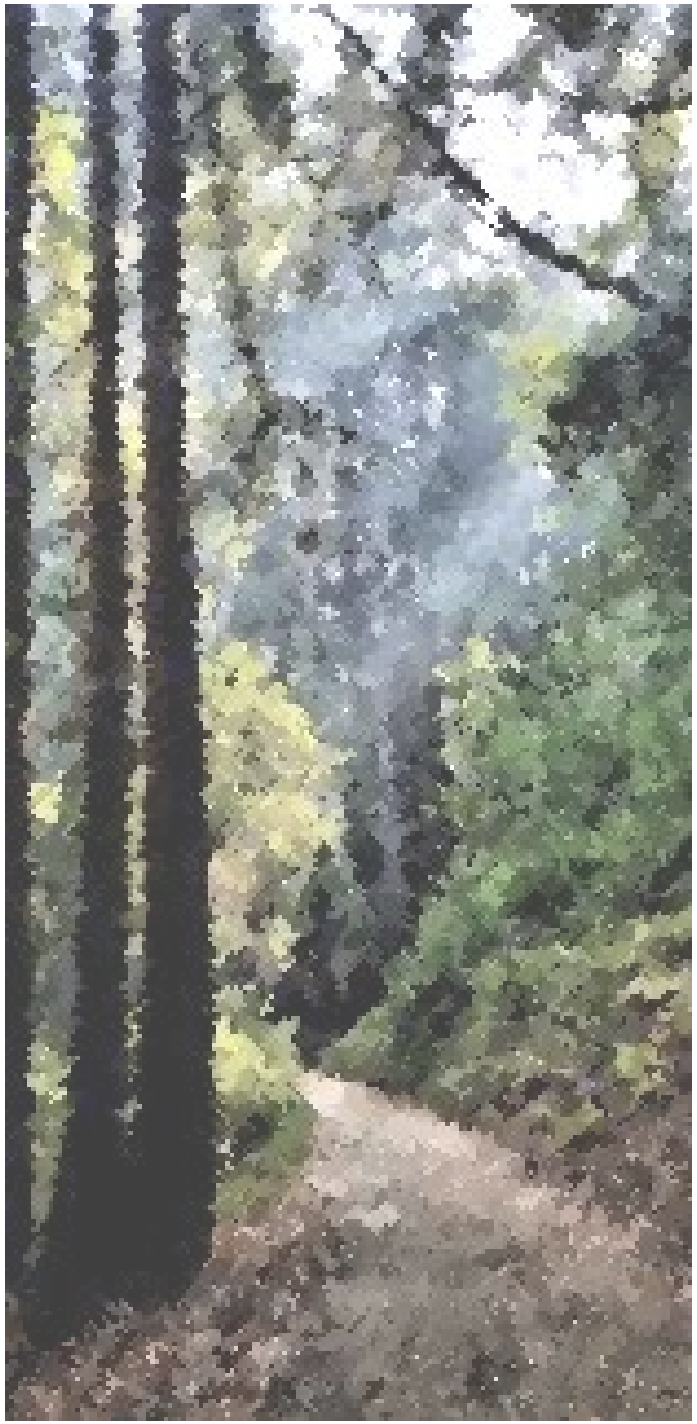


New to Zoom link:



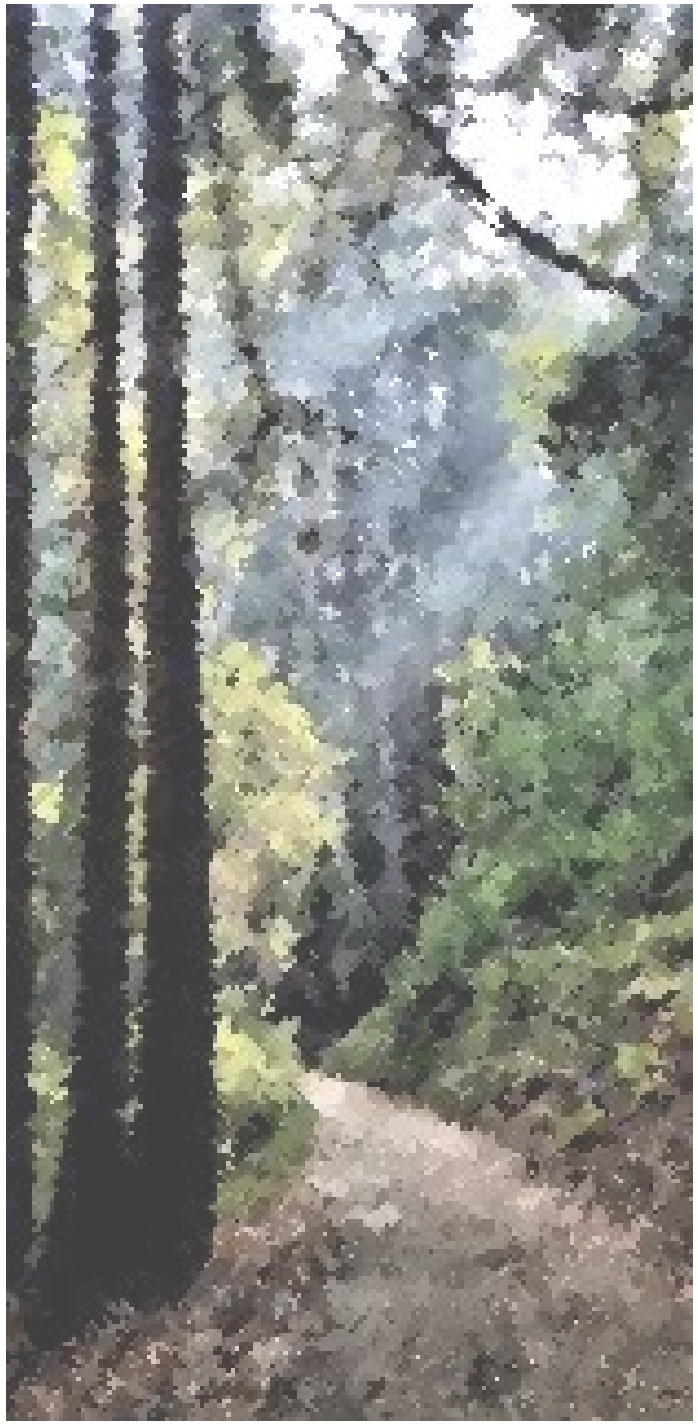


Q&A



Thank You

jcunningham@wchealth.org
Summer Penn (IT Director):
spenn@wchealth.org



Whole Group Discussion

Wrap-up & Announcements

Upcoming SNI Offerings

Up Next

Operations & Clinical Standards

- Designing the Future State: Mixed Model Approach to Optimize Virtual Care
- Virtual Care Intake and Social Needs Screening

Patient & Family Engagement

- **Integrating Navigation & Virtual Care: How to Improve Patient Access and Sustain Virtual Care Teams**

- Access and Digital Literacy
- Remote Patient Monitoring

Upcoming SNI Learning Opportunities

Reframing the Pandemic Response: UCSD Health's Framework for Endemic COVID-19 Operating Procedures

April 13, 1-2pm

Please Register Here

Integrating Navigation and Virtual Care: How to Improve Patient Access and Sustain Virtual Care Teams

April 14, 12-1pm

Please Register Here

Thank you!

Please don’t forget to fill out the survey

Thank you!

Contact Thuy-Ann Le
Associate Director of Programs, SNI
tle@caph.org