



National Hospice and Palliative Care Organization
Palliative Care Resource Series

**BEST PRACTICES FOR USING
TELEHEALTH IN PALLIATIVE CARE**

Lori Bishop, RN, CHPN
Tammy Flick, RN, BS, CPEHR, CTC
Vicki Wildman, MSN, Edu

INTRODUCTION

According to the American Telemedicine Association, telehealth refers to a broad range of services that include telemedicine and other remotely provided services such as:

- clinical education programs
- patient support and education
- health information exchange
- clinical decision support
- electronic health records and laboratory systems
- disaster response support

Telehealth uses medical information exchanged from one site to another via electronic communications to improve a patient's clinical health status. It includes a growing variety of applications and services using two-way video, email, smart phones, wireless tools and other forms of telecommunications technology. Telehealth can be used for the monitoring of symptoms or video consults, visits, or family meetings.

This paper will describe guiding principles for implementing a new telehealth program; explore connectivity considerations; discuss expected benefits and describe issues and challenges of adopting a new telehealth program. It is a reference for best practices with telemedicine guidelines. Specific steps are provided for administrative, clinical, information technology, financial, training and education, and marketing teams. Please refer to American Telemedicine Association and state policies related to telemedicine at www.americantelemed.org/policy/state-policy-resource-center#.VdHegE3JDDc

TECHNOLOGY GUIDING PRINCIPLES

The following questions should be asked when deciding which aspects of technology are to be included in a new telehealth program.

Ease of use:

- Is it intuitive for use by physicians, clinicians, staff and patients?

Compatibility:

- Can it interface between multiple end users and facilities, both technically and operationally?

Ability to drive access:

- Does it increase use of telehealth and utilization of services?

Conforms to industry standards:

- Does it comply with industry protocols and federal regulations?

Promotes sustainability:

- Is it cost effective and does it contribute to increased revenues or cost avoidance?

CONNECTIVITY CONSIDERATIONS

Connectivity and access by the consumer and healthcare team is an important consideration. When planning program implementation, locations of the technology to be accessed and adequate support are important considerations. Another issue concerns the various locations and types of connections for the program.

Locations:

- *Home/community*
Patient-owned devices, organization assigned devices with wireless connectivity options.
- *Outreach clinics*
Designated room for technology, peripherals and technical assistance available for roaming and scheduling.
- *Emergency department/inpatient connections*
Designated cart, access to bandwidth and Wi-Fi connection.
- *Long-term care*
Mobile cart with technology and peripherals (BP cuffs, stethoscopes, high-definition web camera) and trained technician to facilitate scheduling and use of the equipment.

Types of Connections:

- *Web-based applications*
Patients can download web-based applications to communicate and monitor their health virtually. Examples may include accessing the internet as a patient portal for education, reporting blood pressure, weight or glucose levels.
- *Remote patient monitoring*
Patients can use mobile devices or applications to monitor their health in the community or home. The patient can communicate with the health care team regarding his/her health care status. Examples may include a patient monitoring weight, blood pressure, and glucose levels and sending information by a web-based application to his/her primary care provider.
- *Store and forward*
Provides the ability to capture video, image, or photo and store the information for the health care team to access in order to provide virtual healthcare. One example would be to take a photo of a wound and have a provider access the patient's medical record to review and provide evidence-based treatment recommendations.

EXPECTED BENEFITS

The use of telehealth has many benefits for patients and healthcare organizations. Many patients experience the immediate benefits of telehealth when they can connect to their healthcare team and participate in achieving their healthcare goals.

Improved Access: Service to the patient and family is real-time and expands reach to the provider. There is an increase in ability for rural practitioners to access specialist health services in another location. The provision of services in rural and remote communities becomes feasible.

Cost Efficiencies: Telehealth reduces cost of care and increases efficiency through better management of chronic illness and timely access to providers. Telehealth programs can also significantly reduce and/or eliminate travel time.

Improved Quality: Timely intervention in a patient's home improves clinical outcomes and increases patient/family satisfaction due to real-time connection.

KEY ADOPTION ISSUES/CHALLENGES

Resource Capacity to Support Telehealth

- Availability of both clinical staff delivering services and telehealth support staff (i.e. technology support)

Difficulties Using the Telehealth Technology

- Demands on clinical time for organizing and using telehealth technology, (i.e. getting equipment connected between sites, and integration of clinical information systems and peripheral devices to support telehealth interactions).

Lack of Reimbursement Models for Telehealth Services

- Rural community network hospitals, and the physicians who provide telehealth/telemedicine consultations for them, bill and receive reimbursement for providing these services. Physicians are reimbursed just as if they were seeing the patient physically in their offices. However, expanded Medicaid and Medicare reimbursements are needed.

Lack of Funding to Start or Keep Program Going

- Grant funding is limited and access to technology/equipment and staff can be costly.

Lack of Standardized Program Guidelines, Change Management and Training

- Availability of guidelines, training programs, and standardized procedures for using telehealth technology and services are lacking.

TELEHEALTH TOOLKIT

Steps For Implementing a New Telehealth Program: ADMINISTRATIVE

1. Form Project Steering Committee

The Steering Committee will oversee all pilot efforts; help to start developing the business plan; and provide overall guidance to the project team. The team may include representation from clinical, finance, IT, and administration.

2. Form Core Project Team

The core project team will serve as the "boots on the ground". Be sure to include a super user or champion for the project who is an end user.

3. Confirm scope of project

Determine which patient populations will be included in visits. Will telehealth be offered at certain physical locations and for specific patient populations? Will it be diagnosis related? How long will the visits last? How frequently will telehealth be utilized for those patients? Who will provide the care? Will there be an attendant with the patient who is connected to the provider or another patient care member?

4. Determine locations for use

Will the visits take place in a patient's home, long term care setting, in-patient facility, other setting, or all of the above?

5. Add physician/provider leaders to core pilot project team

This step is the key to ensuring that providers and end users create appropriate workflows and timelines that meet the needs of all care providers.

6. Develop documentation standards

Determine where and what will need to be documented for telehealth visits. Keep in mind that reporting and creating discreet data will be important so standardizing documentation is critical. Also consider information that will be necessary for billing and coding as well as transition of care and continuity of care.

7. Determine metrics that will be used for quality reporting and overall success

Align with both organizational and national standards to create specific goals and quality metrics that allow success measures to be captured and reported.

8. Set short-term goals for 90 days post go-live and long-term goals using the established metrics

Set short term goals and review at 30, 60, and 90 day increments to ensure success in meeting criteria set forth in the goals. Reviews should also include revisions of goals, when necessary, as more information from visits becomes available. Begin developing long term goals during review periods of short term goal timelines as data and statistics become available. Ensure that goals are specific, measurable, attainable, relevant, and timely.

9. Confirm that there is no risk management, compliance, licensure, or credentialing issues or concerns

Follow appropriate approval processes within your organization for legal, risk management, compliance, licensure, and credentialing procedures. Involve key stakeholders and experts in these areas early in the planning process and ad hoc throughout implementation and post implementation to remain compliant in all areas.

10. Patient Consent Form

Determine the process for obtaining patient consent and ensure it is compliant with all organizational, state, local, and national standards and requirements. Determine if telehealth consent will be separate from general consent or an addition to general consents. Consider and plan for necessary teaching for patients and families prior to consent signing. Risks and benefits should be reviewed with patients and families.

11. Policy and Procedures

Ensure compliance with all state and local laws and regulations for telehealth including clinical, billing/financial, privacy and security and patient rights.

12. Develop patient and staff feedback procedures and protocols

Determine a mechanism for feedback from patients and staff to create an atmosphere of continuous process improvement.

Steps For Implementing a New Telehealth Program: CLINICAL

1. Determine who will actually provide care as attendant and provider

Attendant will be at the patient site and provider can be remote. Patient may not need to have an attendant present should he/she have the ability to utilize the technology without assistance.

2. Determine initial set of acceptable diagnoses/visit reasons

Determine patient population who will utilize telehealth. This may be based on physical location, primary care provider, diagnosis, payer, or other criteria set forth in your program goals.

3. Develop workflow for conducting a visit (standard forms, demographic information gathering, etc.)

Create step by step instructions that align with standard documentation for your organization as well as "tip sheets" for staff to follow during initial implementation and new hire orientation.

4. Develop triage protocols

Determine which patients will be a priority for telehealth visits and time that will be allotted with providers. Create protocols for staff to follow and schedule visits.

5. Develop telehealth treatment protocols that comply with NHPCO standards and protocols of care

Utilize telehealth technology to enhance and expand care for patients while complying with NHPCO standards and protocols for care.

6. Develop follow-up protocols

Be certain to close the loop on care and follow up on telehealth patients as needed. Create a standard operating procedure for these protocols to make certain that patients receive the care they need and do not “fall through the cracks”.

7. Scheduling

Be sure to create a schedule for providers and for any equipment such as portable tablets or laptops necessary for telehealth visits.

8. Infection control and cleaning of equipment

Establish policies and processes for cleaning the equipment and include these with any facility policy and procedures. Also include the policies in workflow documentation for end users and staff or those designated to clean hardware and equipment.

9. Engage patients and family in the care process

Engage patients and families early in the telehealth care planning process. Obtain consent for telehealth visits and explain the process thoroughly and answer any questions. Developing a brochure on telehealth for patients and families is strongly recommended.

10. Compliance with Joint Commission

Joint Commission Standards should be met if they are the certifying body of your organization.

Steps For Implementing a New Telehealth Program: INFORMATION TECHNOLOGY

1. Purchase and install all necessary equipment

Confirm an inventory of current equipment that is available to ensure that expenditures are not duplicated for equipment that could be utilized or repurposed from other areas. Obtain a list of compatible hardware and software from vendors to reduce the risk of technical issues during implementation.

2. Ensure necessary software is installed on equipment

Work with vendor to install software, plug in's, and any other necessary 3rd party applications necessary to provide technology for telehealth visits.

3. Set up end user devices

Set up and test any end user devices and/or peripheral devices needed to perform telehealth visits.

4. Internal IS/IT resource

Make certain there is an internal IT resource that is a super user for the technology and who can address any issues, concerns, or provide troubleshooting assistance in addition to the vendor. He/she will be your first line of assistance along with the trained super users.

5. Determine wireless needs and settings if necessary

Work with a vendor and set up wireless connectivity, if needed, to test for adequate connection speeds and to verify that audio and video is adequate. This is key for successful telehealth visits. It is imperative to verify and test in true end user settings prior to going live.

6. Establish privacy and security protocols

Align telehealth with your organization's protocols; include use of technology in a remote setting to these protocols. Use of telemedicine may take place in non-traditional care settings for both the provider and the patient so this must be considered when implementing a telemedicine program.

7. Ensure HIPPA and Memorandum of Understanding (MOU) compliance with vendor and IT staff recommendations and guidance

Best practice is to have an MOU with the vendor due to the possibility of Personal Health Information (PHI) being transmitted and potentially viewed and stored via telemedicine. Work with your privacy and security officer and IT staff to validate compliance. Agreements to comply with HIPPA and privacy and security protocols with the providers who may be providing care at a distance should be considered if there is not already an agreement in place.

8. Build or align with existing Help Desk infrastructure

Coordinate help desk structure depending on process for internal vs vendor support for your telehealth solution. Provide support contact information to end users.

9. Test the telemedicine solution in true end use settings

Test connections and functionality in true end use settings. Using mock trials to provide real life scenario testing is recommended. This will allow trouble shooting, if needed, prior to going live.

Steps For Implementing a New Telehealth Program: FINANCIAL

1. Determine Return on Investment (ROI)

Consider cost savings and avoidance as well as reimbursement rates for telehealth. Become familiar with coding process for Medicare and Medicaid as well as private insurance coverage of telehealth services.

2. Secure funding for both technological and any necessary staff resources

Explore grant opportunities such as United States Department of Agriculture Distance Learning grants (USDA DLT), and other funding sources. Determine both capital and operational expenses when planning.

- 3. Establish long term and monthly budgets**
Budget for both capital and recurring monthly fees as well as depreciation and replacement costs.
- 4. Capital expenses**
Review which expenses may be capital vs which are recurring operational expenses.
- 5. Equipment maintenance/repair/replacement and depreciation**
Allow for budgeting of standard maintenance, repair, and replacement of equipment. Allow for budget to cover needs for hardware and software updates, replacements, and repair.
- 6. Software licensing including 3rd party**
Request information from vendor on both software license costs as well as any third party vendor costs that may be associated with your telemedicine hardware and software.
- 7. Supplies**
Include batteries, cords, cleaning supplies, cases, covers, barriers for keyboards, and other supplies necessary for telemedicine processes.

Steps For Implementing a New Telehealth Program: TRAINING AND EDUCATION

- 1. Develop training module/program for all in-scope clinical and technical staff**
It is recommended that you create your own custom training materials which include step by step instructions and screen shots of application. This allows the end user to follow along as well as conform to the processes outlined in your planning process for your telehealth visits. Create quick start guides and patient friendly education materials.
- 2. Establish "super users" to assist with education and "train-the-trainer" approach**
Super users can be utilized to assist end users and problem solve prior to calling support. They can also train new users and provide assistance with mock trial training sessions. Be sure to train super users for all shifts where telemedicine is provided. Use teach-back approach to demonstrate proficiency and competency.
- 3. Schedule and conduct trainings with all in-scope ED staff**
Staff should be required to sign up for training sessions and it is recommended they have hands on learning. Allow staff to practice and use the equipment during training sessions. Have staff sign off on their training session as part of their competency for their positions. Have super users available to train new patient end users if they are part of your telehealth workflow.
- 4. Perform mock trial sessions prior to go live**
Best practices include providing mock trials of the workflow to allow for any adjustments necessary and to test both equipment and workflow for any issues or concerns. Utilize non-clinical volunteers to trial the equipment. This creates a better gauge as to whether or not the processes will work well in a clinical setting when technology is live.

5. **Perform periodic refresher sessions for users who may not use the technology frequently**
Providing refresher classes during staff meetings and having quarterly mock trials for staff will give those who infrequently use the technology an opportunity to have a refresher.

Steps For Implementing a New Telehealth Program: Marketing

1. **Website Integration**
Embed advertising of program, surveys and patient facing brochures.
2. **Community Kiosks**
Provide increased access for aging community residences to connect with your telehealth program.

BACKGROUND

UnityPoint at Home began utilizing telehealth more than ten years ago to enhance its vision of the best outcome for every patient every time. Aware of future healthcare issues with staffing resources, inefficient access to healthcare services and the need for efficient use of nursing visits, UnityPoint at Home had the vision to leverage telehealth technology. The ability to monitor patients' biometrics remotely increased timely response to changes in their conditions and provides efficient use of nursing visits. Telehealth is a tool that engages chronically ill patients in successful self-management. UnityPoint at Home is now expanding the use of telehealth in Palliative Care to virtually connect patients with members of the interprofessional team thereby allowing timely intervention in the home while eliminating the burden of travel to a clinic, urgent care, or emergency room for the patient and his/her family.