Teladoc HEALTH | FORUM

Reimagining the Inpatient Experience: The Value of an In-Room Telehealth Strategy

Speakers:

Adam Cherrington
Research Director of Patient Engagement at KLAS Research

Chris Meyer
Director of Telehealth at Marshfield Clinic Health System

Becky Harless
Associate Administrator at Charleston Area Medical Center

Tammy Cress
Director of Inpatient Care Solutions at Teladoc Health

Provider insights into streamlining inpatient telehealth

Hospitals and health systems are reimagining the inpatient experience with an in-room telehealth strategy. In this session at Forum 2021, panelists discussed how fully integrated telehealth capabilities can deliver sustainable growth models with the potential to transform the experience of both the patient and the care team.

Adam Cherrington is Research Director for Patient Engagement and Telehealth at KLAS, an independent research organization that is mission-driven to help healthcare providers make sense of emerging healthcare technologies. He opened the conversation by highlighting some of KLAS's 2021 research findings. "Healthcare is shifting," said Cherrington, "and the theme coming about is meet patients where they are." Patients have had a taste of ways in which healthcare can be better, and organizations will need to build virtual capabilities that can enable a better patient experience.

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> **Adam Cherrington,** Research Director for Patient Engagement and Telehealth at KLAS

Prioritizing virtual capabilities strategically

To successfully meet patients where they are, organizations need to be deliberate about thinking through the problems they are trying to solve—and leverage virtual in a way that delivers value to both patients and providers. Becky Harless, Associate Administrator of the Ambulatory Division at Charleston Area Medical Center, said that her organization is using virtual care to create what she coined "connected facilities." With four different specialty hospitals in the organization's system, trying to match the physician experience in each one of those hospitals is often a challenge. "How do you make that patient experience look and feel the same for the patient at each one of those hospitals?" she asked. Telemedicine offers a solution: "[it allows us to connect patients] through hospital lists, an in-room service, or telemedicine service," said Harless.

Chris Meyer, Director of Telehealth and Virtual Care at Marshfield Clinic Health System, echoed Harless's remarks. "One of the goals we have in our health system is to make sure that no matter where you come, you expect the same level of care, whether that's at a critical access hospital in a very rural area, or a tertiary hospital here in Marshfield," he said. But ensuring consistent service can be costly, especially in rural areas. "Using a VITA robot from Teladoc Health, for example, our MD hospitalists at our tertiary hospital can round on patients at least once per day. They're also available for consults as needed. And extending that telehealth service into the patients' rooms means that we can be rounding with an MD hospitalist on the robot." For Marshfield Clinic Health System, virtual services help keep operating costs down, while still providing patients with access to high-quality care.

CONNECTED FACILITIES
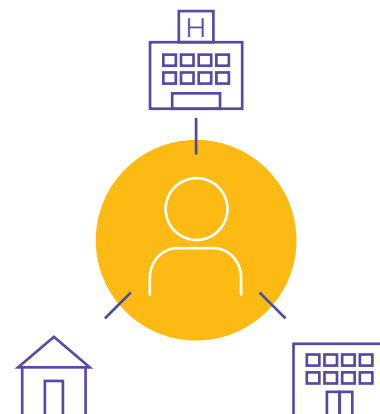
Virtual care can help make the patient experience feel the same, no matter where the patient receives care

Inpatient virtual solutions help address care gaps and provider shortages

Panelists also shared how in-room solutions are fitting into their organization's efforts, and the ways in which they are reconceptualizing the potential of virtual care. "When you think about traditional telemedicine, you think doctor, patient, or specialist" said Harless. "We're going beyond that and thinking nursing, thinking dietary, thinking sitters." This ability to leverage the entire care team when designing their virtual care solutions has allowed the Charleston Area Medical Center to tackle care gaps, citing their nursing shortages as one of them. "How can we fill in those gaps with technology?" she asked. The answer for her team, she shared, lies in in-room telehealth solutions. "I'm really excited to get a hold of it and get it in. It's part of our initiatives and on our strategic plan for the end of '21 and into '22." But telehealth can also help with staffing shortages in a different way—panelists shared that for some specialties, like behavioral health, virtual services help with recruiting efforts. Not having to ask providers to relocate gives them an opportunity to meet staffing goals, especially for hospitals in rural areas.

Another way in which telehealth can address care gaps and improve the patient experience is by simplifying traditionally tedious processes. Discharging a patient, for example, can take hours—you might be waiting for a pharmacist to come into a pharmacy console and ensure you know how to take your medications, or you may be waiting for your hospitalist to come and do their final consult. "There's no reason these things couldn't have been done via video," said Meyer, "with everybody popping onto the screen as they are available." Panelists said that these types of efficiencies will lead to a more seamless care experience and higher levels of patient satisfaction.

EXPANDING ACCESS TO CARE

Leveraging the entire care team can help hospitals and health systems overcome care gaps

Humanizing the healthcare experience

One of the most impactful benefits of inpatient virtual solutions, panelists agreed, was the ability to connect patients with an emotional support system. "It was heartbreaking when you saw people going through very difficult life situations without access to their family," shared Meyer. This was especially salient during the pandemic and opened a lot of health systems' eyes to the importance of staying connected to family in a patient's healing journey.

The value of enabling virtual visitations among family members is not limited by just the pandemic. A parent who is hospitalized and whose children go to college in California can have a virtual visitation that overcomes geographical barriers, giving the patient access to caregivers outside the traditional clinician staff. "That was one of the biggest bullet points I saw on the in-room TV solution. This was a way for patients to stay connected while they're in the hospital, and as important as anything, it requires minimal or no nurse involvement," says Meyer. It is also central to patient engagement models, said Cherrington. "Family engagement was one of the top 12 things that vendors, providers and patients…" indicated should be included in any patient engagement strategy.

CONNECTING PATIENTS WITH AN EMOTIONAL SUPPORT SYSTEM

Inpatient virtual solutions can improve the patient experience by enabling connections between patients and their support system outside the four hospital walls.

The road ahead

While inpatient virtual health has taken off, there are still challenges to overcome. Panelists shared some of their outlooks on the road ahead, and offered advice on how to best navigate it. One of the concerns discussed was the speed of telehealth growth. "The faster you grow, sometimes you focus less on making sure all the I's are dotted and T's are crossed," shared Meyer. At Marshall Clinic, their strategy to minimize this revolves around robust partnerships—"we continue to prioritize our vendor relationships so that we have deep relationships with a handful of vendors, rather than a lot of relationships with a lot of vendors. Teladoc Health is one of those vendors for us," he shared.

Another important area to consider when developing a virtual care strategy are the stakeholders you include in the process. Panelists emphasized the importance of multidisciplinary teams so that nobody feels left out. "Make sure you have the right people at the table," offered Tammy Cress, Director of Inpatient Care Solutions at Teladoc Health—if you want complete buy-in, and a better final product, you need to include people across the organization who can bring different perspectives to the solutions being built.

Finally, panelists underscored the importance of pushing virtual care forward, and not falling back into old habits in the way we provide and consume care. "The work that is in front of us is transformational, it's change, and it's hard," says Cress. "I encourage each of us that has drunk the Kool-Aid to not look back, to not slip back into old patterns…that will not carry us into the future or allow us to scale healthcare better and differently." She also urged listeners to think of their virtual care strategy beyond the limitations of COVID, to think and brainstorm about what can be achieved with no limits—only then will we be able to truly envision the transformative potential of virtual care.

Visit our **Resource Center** to learn more about the power and potential of whole-person virtual care.

Actionable takeaways

1 Be patient-centric as you design, plan and create virtual care solutions to successfully meet people where they are.

2 Engage in blue-sky ideation when thinking about ways in which virtual care can transform your organization.

3 Leverage multidisciplinary groups to define your virtual strategy for a stronger commitment across the organization.

Speaker bios

Adam Cherrington

Adam Cherrington is a research director for KLAS, a research company dedicated to helping healthcare providers make informed decisions by measuring the performance of technology vendors. In this role, Adam plans, executes, and oversees all KLAS research and projects in Patient Engagement and Telehealth; and has overseen many other areas at KLAS, including Clinical Decision Support, Pharmacy, Labor and Delivery, and Surgery Management. Adam is the author of several recent KLAS reports on Patient Engagement. Along with his "KLAS mates" he has worked intimately with and provided consulting to most of the largest Healthcare IT firms in the world. He has also presented KLAS findings for many national organizations, including the Scottsdale Institute and at the annual national HIMSS meeting.

Adam has worked in healthcare for the last 14 years and had experience with an electronic claims clearinghouse before joining KLAS in 2012. He holds a Marketing Communications degree from Brigham Young University, and an MBA from the University of Utah. He enjoys competing in triathlons, playing racquetball, volunteering for his church, and traveling with his family.

Chris Meyer

Chris Meyer is the Director of Telehealth at Marshfield Clinic Health System, an integrated health system serving 350,000 patients in central and northern Wisconsin. Before this role, Chris worked in the field of Information Technology for over 20 years. Chris has an undergraduate degree in Business Administration and Economics and a graduate degree in Behavioral Economics. Chris lives in Marshfield with his wife Jodi and their four children.

Becky Harless

Rebecca Harless is a telehealth professional working at Charleston Area Medical Center to transform health care in a rural setting to a virtual platform.

Tammy Cress

Tammy Cress is the Director, Inpatient Care Solutions for Teledoc Health. Before joining Teladoc Health, Tammy worked as a telehealth consultant, and before that built the telehealth division from the ground up at Providence St. Joseph Health. Tammy has a demonstrated record of leading strategy, operations and transformative initiatives with deep telehealth subject matter expertise across inpatient care solutions.

Tammy completed her undergraduate education at the University of Maryland, and earned a Master's of Science in Nursing from Seattle Pacific University.

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