

## Progress Report #4

### Providing Responsive Care Through Telehealth Strategies to Reduce Hospital Admissions and Enhance Quality of Life

CMP Grant – LeadingAge Ohio, Optimized Care Network  
April 1 – June 30, 2018

The following outlines the progress made on the above-named grant from April 1 through June 30, 2018:

1. On April 26 a site visit was held at the Ohio Eastern Star Home. During this visit the project leadership team gained a better understanding of the challenges being encountered with the implementation of telehealth at this site; challenges include 1) an ongoing lack of understanding of the grant requirements by leadership and, therefore, 2) an ongoing lack of understanding by the day-to-day by users of the technology, and 3) staff scheduling difficulties (and unexpected FMLA by the DON) that thwart consistent application of the technology. In addition, a change in Medical Director seems to have derailed previous protocols in place for utilization of the technology. All have combined to foster an environment of resistance to the changes needed to effectively incorporate telehealth into patient care.
2. On May 8, a conference call was held between the leadership of LeadingAge Ohio, the Optimized Care Network and representatives of the Ohio Department of Medicaid to provide a “heads up” regarding difficulties with telehealth utilization at the Ohio Eastern Star Home. To date, they had cared for 3 residents through the utilization of telehealth care. LAO and OCN committed to keeping the Ohio Department of Medicaid apprised of the progress through additional email or voice communications as well as through these quarterly reports.
3. The nursing staff at the Ohio Eastern Star Home has required ongoing training (both in-house and by grant partners) in order to foster understanding of the technology and associated approach to care through telehealth.
  - a. On May 25 another on-site nurse training session was provided by the grant partners to provide additional telehealth super-user training to designated nursing and administrative staff so they could continually support and train nurses in-house. Two nurses were trained as super-users -- one of these nurses (the Director of Nursing) had received dedicated training previously and one nurse was new to the staff; this new nurse was very enthusiastic about the integration of technology into care. The third participant was the Administrator. Although this additional training should be helpful, there were fewer nurses involved in this training session than anticipated.
  - b. The Administrator has taken on leadership of the on-site integration of telehealth care, expressing a strong commitment to a personal goal of meeting the expectations of the project over the term of the grant.
  - c. A weekly check-in call was established between the Administrator and the Optimized Care Network (OCN) to monitor progress with telehealth re-training and delivery; if OCN is unavailable, LeadingAge Ohio and OSU provide the check-in support for the Administrator.
  - d. The Administrator has been offering re-training sessions on a regular basis to nursing staff as they're available. The Administrator reports that timing is the biggest challenge right now—when the Administrator is free the nurses are not, and vice versa.
  - e. The Administrator reports that the staff is not opposed to usage of the telehealth technology; however, she points out that they have an older workforce who resides in a

rural area and she believes that combination makes them less familiar with technology. For these reasons she feels one-on-one training offered repeatedly is more effective.

- f. Additionally, the Administrator has been proactive in recruiting STNA's for training so they can be of assistance to the nursing staff when telehealth is utilized with a resident. She feels this group of employees are more receptive to and familiar with technology and therefore could become good support for the other nurses.
  - g. The Administrator has also established a more centralized location for the telehealth cart with the hope it will become more institutionally recognized and accepted. She has also proposed that the STNA's take charge of positioning the telehealth cart with the patient, logging in to streamline the incorporation of the telehealth equipment by the nursing staff in healthcare encounters.
4. As reported previously, a change in the Medical Director position at the Ohio Eastern Star Home occurred which affected 24/7 availability and on call staffing that diminished the use of the telehealth equipment for patient assessment during the night-time hours. The leadership of the organization addressed this situation and set protocols to insure the 24/7 involvement of the Medical Director for telehealth care aligned with the grant requirements. Additionally, the Administrator has worked with the Medical Director to further establish his communication guidelines for "when to call" and "when to utilize telehealth" for the nurses.
  5. On June 6 LeadingAge Ohio and the Optimized Care Network organized a collaborative joint meeting with Green Hills Community and the Ohio Eastern Star Home to share the experiences each organization has had with telehealth use and to review the strategies used to gain support and enthusiasm for telehealth at Green Hills which could be translated to the Ohio Eastern Star Home situation. The meeting was a very positive shared learning experience for both organizations.
  6. Additional technology training and support for clinically-oriented telehealth questions continues to be readily available to both communities through the Optimized Care Network.
  7. Technical/equipment support needed for onside operability is available 24/7, with 24-hour parts' replacement after phone diagnosis.
  8. To date, telehealth care has been incorporated in the care of 25 residents at Green Hills Community and approximately 12 residents at the Ohio Eastern Star Home. Usage at the Ohio Eastern Star Home has not been consistently tracked due to changing responsibilities and the nurse manager's extended maternity leave. They have committed to better record-keeping moving forward.
  9. With the assistance of the grant leadership team, each of the organizations is conducting surveys of the Medical Director, clinical staff, Administrators and residents/families with regard to their perspectives on telehealth care. These surveys are to be completed and incorporated into the mid-year report scheduled for submission in August by the analysis team.
  10. Data collection guidelines and protocols have been developed for the compilation of historical data (as well as data for the project period of 18 months starting November 1, 2017) from nursing facility resident/patient records at Green Hills Community and Ohio Eastern Star Home who received care for congestive heart failure, COPD, pneumonia or stroke in the 18-month period prior to the implementation of this project.
  11. Green Hills Community has provided their historical data to the analysis team, and although Ohio Eastern Star Home (OESH) had provided their data previously, it was determined that the format and some of the content was not useful for analysis. OESH has received additional training from their EMR provider (Matrix) and is working to provide their historical data in the new revised form as this report is written.

12. Optimized Care Network staff, Green Hills Community IT staff, and GlobalMed continued to refine the technology capabilities resulting from the earlier tech refresh to enhance connectivity capabilities with families and specialists through the telehealth platform and provide troubleshooting support at Green Hills. These technology revisions produced some interruptions in telehealth delivery at Green Hills during this timeframe.

The following provides insight into example telehealth scenarios and outcomes at Green Hills Community.

A short-term resident who was going to be discharged prior to the next scheduled doctor rounds was able to see the doctor through telehealth. The Director of Nursing stated that It was a very easy visit. The resident enjoyed the visit and thought the equipment was “pretty neat.”

During weekly rounds by the doctor, the family of a resident was concerned that their mother’s hearing was declining. They wanted to send her out to have her ears examined. The doctor was able to take her and the family to the telehealth room and examine her ears with the camera. He showed them that her ears looked normal and stated that he would continue to monitor for any new issues.

Resident was seen by the doctor on telehealth due to an acute illness that needed addressed. The nurse manager was able to utilize the stethoscope and the doctor was able to listen to resident’s lungs and heart from his office. This resulted in the doctor starting the resident on an antibiotic quickly, avoiding further decline.

EKG was done on a resident and the cardiologist was very impressed at how fast the staff was able to have results back to the specialist. Nurse Manager was able to take the new RN into the telehealth room with her for training.

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