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Family Planning Team Staffing Models to Support Telehealth Delivery

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Learning Objectives

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By the end of the office hour, participants will be able to:

- Describe potential challenges for communication and team-based care models of service delivery in a virtual environment.
- Identify strategies to address challenges for communication and team-based care models in a virtual environment.
- Identify practical implementation strategies to address timing or flow with virtual care.

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Hear From You

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What is your current staffing model for telehealth visits?

What is working well?

Team Based Care

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*Team-based health care is the provision of health services to individuals, families, and/or their communities **by at least two** health providers who work **collaboratively** with patients and their caregivers — to the extent preferred by each patient — to accomplish **shared goals** within and **across settings** to achieve **coordinated**, high-quality **care**.*

from Core Principles & Values of Effective Team-Based Health Care,
National Academies of Medicine

Team based care in the virtual environment

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Did this start with the transition to EHRs?

What does our experience with EHRs tell us about communication through, with and around technology?

Examples:

- Huddles
- Case rounding
- Informal connections

What is necessary for high levels of team functioning?

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"4Cs"

- Coordination (implicit vs. explicit)
- Cooperation (trust vs. documentation)
- Cognition (shared understanding of how team works together)
- Communication (huddles, curbside consults)

(Mitzel et al., 2021)

What does it take in the virtual environment to make 4Cs happen?

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- Intentional time/space for teaming
  - bring back the huddle
  - bring back social time
  - training in person though working remote
- Layering on technology to support real time communication
- Explicit naming, documentation of team norms (knocks on the door, urgent needs, etc.)

In your experience, what else is needed?

Operationalizing Team Based Care in the Virtual Environment

Rethinking roles

EXAMPLES OF NEW FUNCTIONS, WORKFLOWS, AND OPPORTUNITIES

CARE TEAM MEMBER	NEW FUNCTIONS, WORKFLOWS, AND OPPORTUNITIES
Community Health Worker	• Provide patient education and support for telehealth visit, including technology assistance • Virtually accompany patients to telehealth visits • Conduct virtual chronic disease check-ins • Understand community technology needs and gaps
Medical Assistant	• Provide patient education and support for telehealth visit, including technology assistance • Reach out to patients with chronic diseases and care gaps who have not been seen • Room patients virtually
Primary Care Provider	• Lead the virtual huddle • Utilize eConsults as needed for specialist consults • Conduct more shared visits

CHW Models of Care

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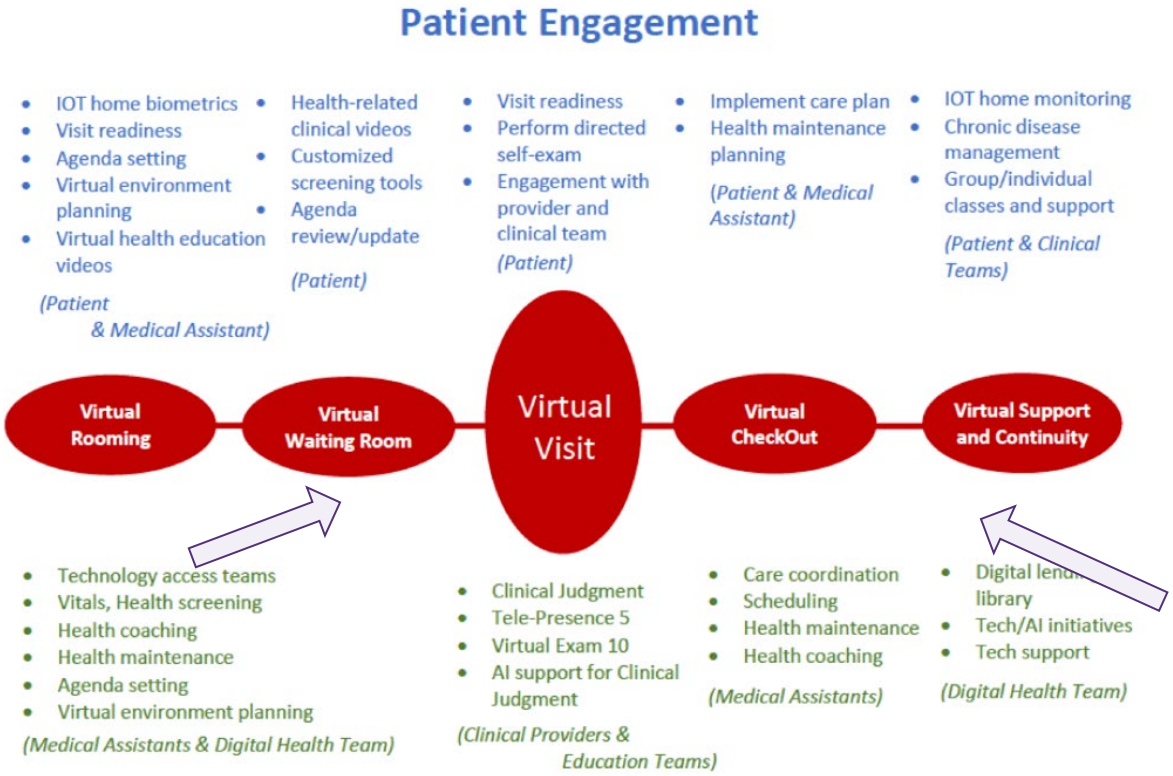
TABLE 7. CHW MODELS OF CARE CATEGORIES

Model of Care	Description	References
Member of Care Delivery Team Model	CHW works with a lead provider, typically a physician, nurse, or social worker. CHWs provide health education and informal counseling to patients/clients through individual and group sessions.	McElmurry, Park & Buseh, 2003
Navigator Model/Care Coordinator	CHW works with individuals (and their families) from cultural and linguistically different backgrounds who face barriers in obtaining and seeking timely health care to help coordinate care for complex disease and address disparities.	Palmas et al., 2012
Screening and Health Education Provider	CHWs use their social embedded-ness and personal network to reach isolated individuals. CHWs deliver health education focused on healthy behavior and prevention, administer basic screening instruments (e.g. rapid diagnostic tests) and measure vital signs. This model requires competent supervision and additional training to ensure CHWs stay within their scope of practice.	Prezio et al., 2013 Hamer et al., 2012 Yeboah-Antwi et al., 2012
Outreach Enrolling-informing Agent	CHWs conduct intensive home visits to deliver psychosocial support, improve maternal and child health, perform an environmental health assessment, offer one-on-one counselling, and make necessary referrals	MN CHW Alliance
Community Organizer / Capacity Builder Model	CHWs work as catalysts to encourage community action or as negotiators for creation of change. CHWs may be *employed* by a health care provider or may be acting as a committed *volunteer*.	MN CHW Alliance
Promotora de Salud/Lay Health Worker Model	Lay health workers offer a link between providers and underserved minority community members. CHWs receive training based upon theoretical frameworks, including social support, social learning theory, empowerment model and/or health belief model, in which CHWs are empowered to create their own action plan regarding the community's *perceived health needs*. Rhodes et al. (2007) identified six primary roles of a LHW: 1) being involved in recruitment of community members and data collection, 2) serving as traditional health advisors/educator and referral sources, 3) distributing health-related materials, 4) being role models, 5) serving as community advocates to ensure culturally and linguistically tailored interventions for their community members, and 6) being involved in relevant parts of community-based participatory research projects including designing research question, developing appropriate methodologies for data collection, and disseminating research findings.	Palmas et al., 2012 Getrich et al., 2007 McElmurry, Park, & Buseh, 2003 Rhodes et al., 2007
Community Health Representative (CHR)	CHRs are a trained, medically guided Tribal or Native community-based health care worker who may include traditional Native concepts in his/her work. Funding and training provided by the Indian Health Service	IHS, 2016

Synchronous: Care Delivery Model

Stanford Virtual Health Clinical Process Model

The Stanford Virtual Health Clinical Process Model considers key activities to promote high quality Virtual Health care, including activities by patients and separately, by providers, staff, and the health system.



Source: The Authors

Asynchronous opportunities

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- Zoom education (1:1 and for groups)
- Remote care coordination
- Remote navigation
- Remote training for staff

For more case examples: Rural Health Information Hub

Discussion

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What are ways we can integrate additional staff into telehealth beyond the provider during the telehealth visit?

References

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- Srinivasan , M. et al. (2020). Enhancing patient engagement during virtual care: A conceptual model and rapid implementation at an academic medical center. NEJM Catalyst. https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0262

Resources

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- MHP Salud: Community Health Worker Clinical Integration Kit (p. 23 for Telehealth strategies)
- Rural Health Information Hub
- Braun, R., Catalani, C., Wimbush, J., & Israelski, D. (2013). Community health workers and mobile technology: a systematic review of the literature. PloS one, 8(6), e65772. https://doi.org/10.1371/journal.pone.0065772
- FQHC Telehealth Playbook (See “Clinical Integration” section)

Thank you!

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