How to Provide Home-Based Primary Care Using Telehealth: Direct-to-Patient Model

Health care providers are facing increasing challenges in caring for the medical needs of their senior population in response to COVID-19. In efforts to reduce transmission of the virus, medical providers have cancelled or delayed many appointments and home visits. However, seniors continue to need medical care. Telehealth gives providers a safe and effective way to provide that care to their patients while maintaining social distancing guidelines. This model describes a telehealth video visit between patient/caregiver and provider. Follow these steps to implement a direct-to-patient telehealth model for the seniors you serve.

STEPS	IMPLEMENTATION CONSIDERATIONS
Train Staff	1. Run a few hands-on training sessions during which staff practice logging in and out of the telehealth system. 2. Have staff initiate calls with each other to learn how to use the technology. 3. Encourage staff to engage in practice calls with their friends and family and compare successes and challenges with each other. 4. Make sure your electronic medical record or documentation system is set-up for telehealth documentation and billing. 5. Train staff in use of telehealth specific note / encounter for documentation and newly expanded telehealth billing codes. Make sure provider understands newly expanded telehealth billing codes.
Pre-Visit: Administrative Staff Role	**Prepare Patient for Video Visit:** 1. A few days to a week prior to video visit, phone the patient to schedule visit and obtain and document verbal consent. During public health emergency, verbal consent is permitted. Written consent is needed otherwise. 2. Identify how patients will connect to video, if they have correct equipment (camera and microphone) and if caregiver should be present during video visit. (*NOTE: Majority of telehealth applications are quick to install. If you need same day appointment, it can be possible complete following steps quickly*) 3. Give patient or caregiver instructions how to download, test and connect to the video visit. If providing instruction over the phone, make sure you have instructions in front of you to help describe the steps. If possible, send easy-to-understand instructions with screen shots to patient or caregiver electronically 4. Provide information about the video visit, including: (1) name of provider (2) duration of the call, and (3) what to do if the video becomes disconnected. 5. If possible, call the patient a few minutes before the scheduled video visit to confirm that they have successfully connected to the software. 6. Preferably, perform mock video visit with the patient or connect with the patient via video prior to the provider joining the call to work out any technical difficulties.

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Conducting the Visit: Provider	1. Prior to video visit, verify patient consent has been obtained and documented.
	2. Identify a quiet space with minimal interruptions for your video visits.
	3. Have a solid and stationary background when conducting the video visit. Avoid background movement that can be distracting. Avoid clothes with patterns.
	4. Speak clearly and with enough volume but do not shout.
	5. Maintain eye contact with the patient. Practice where to look on the screen with a friend or coworker prior to speaking with patient. Tell patient if you need to look away from the camera. Limit movement during video visit.
	6. Providers should initiate video visit only once they are in a quiet, private location and when they can concentrate on the call without outside distraction.
	7. Start the call with introducing yourself to the patient, show them your ID badge and tell them how much time you have with them today.
	8. Tell the patient what to do/expect if the video visit becomes disconnected. Options can include:
	   a. Phone call to patient. Verify with the patient that you have the right phone number to call if needed.
	   b. Restart of the video application
	9. End the call with repeating care plan instructions to patient.
	10. Document telehealth visit. Some details to include:
	   a. A statement that the service was provided using telemedicine
	   b. The location of the patient
	   c. The location of the provider
	   d. The names of all persons participating in the telemedicine service and their role in the encounter

Post-Visit Evaluation	1. Gather user experience from patients and/or caregivers and staff (such as via surveys) to understand what worked well and what might need refinement. 2. Collect process measures that can help determine how well the technology was connecting and what fixes are needed such as (a) number of successful connections, (b) number of failed connections, (c) number of attempts to connect and (d) total number of scheduled video visits 3. After completion of several telehealth visits, conducting a Plan-Do-Study-Act (PDSA) cycle is recommended to improve workflows and user experience.