

HEALTH INFORMATION TECHNOLOGY,
HITREQ
EVALUATION, AND QUALITY CENTER

Telehealth for Vulnerable and Special Populations

October 15, 2020

Telehealth Considerations and Strategies for Special and Vulnerable Populations

October 15, 2020

2 pm EDT/ 1 pm CDT

Register at

<https://bit.ly/3jXDztc5>



Today's Presenters



The HITEQ Center



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*National Center for
Equitable Care for Elders*



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*National Center for
Farmworker Health*



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*The Corporation for
Supportive Housing*

About The HITEQ Center

The HITEQ Center is a HRSA-funded National Training and Technical Assistance Partner (NTTAPs) that collaborates with HRSA partners including Health Center Controlled Networks, Primary Care Associations and other NTTAPs to engage health centers in the optimization of health IT to address key health center needs through:

- A **national website** (www.hiteqcenter.org) with health center-focused resources, toolkits, training, and a calendar of related events.
- **Learning collaboratives, remote trainings, and on-demand technical assistance** on key topic areas.



HITEQ Topic Areas

Access to comprehensive care using health IT and telehealth

Privacy and security

Advancing interoperability

Electronic patient engagement

Readiness for value based care

Using health IT and telehealth to improve Clinical quality and Health equity

Using health IT or telehealth to address emerging issues: behavioral health, HIV prevention, and emergency preparedness

About National Center for Equitable Care for Elders (NCECE)

Who We Are: Established in 2017, the National Center for Equitable Care for Elders (NCECE) is a training and technical assistance Center that provides innovative and culturally competent models of care, inter-professional training and educational resources to health care professionals providing care to older adults.

Our Mission is to build strong, innovative and competent health care models by partnering with CHCs, PCAs and FQHCs to provide quality and inclusive care for older adults.

Stay Connected With NCECE:

- **Twitter:** twitter.com/NationalECE
- **LinkedIn:** [linkedin.com/company/ncece](https://www.linkedin.com/company/ncece)
- **Website:** ece.hsdm.harvard.edu
- **Email:** ece@hsdm.harvard.edu





The National Center for Farmworker Health is a private, not-for-profit corporation located in Buda, Texas, whose mission is "To improve the health of farmworker families."

Programs, products, and services in support of our mission, include:

- Population specific resources and technical assistance
- Governance development and training
- Program management
- Staff development and training
- Health education resources and program development

Sign up for our monthly newsletter and connect with NCFH at:

Website: www.ncfh.org

Facebook and Twitter: [@NCFHTX](#)

Linkedin: [company/national-center-for-farmworker-health-ncfh-/](#)



Advancing Housing Solutions That...



Improve lives of vulnerable people



Maximize public resources



Build strong, healthy communities

Supportive Housing is the Solution

Supportive housing combines affordable housing with services that help people who face the most complex challenges to live with stability, autonomy and dignity.

Housing:
Affordable
Permanent
Independent

Support:
Flexible
Voluntary
Tenant-centered
Coordinated Services





What is telehealth?

When discussing telehealth in this context, what are we referring to?

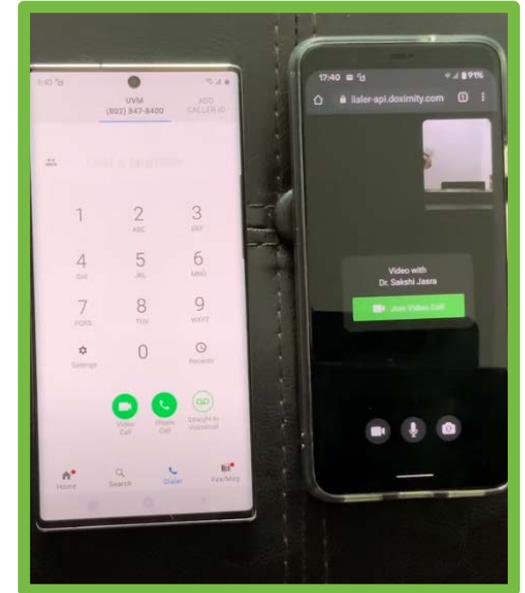
Rapid Evolution of Telehealth in Health Centers



Prior to 2020: Telehealth visits were in clinic, Telemedicine carts and peripherals



Early 2020: Very rapid adoption during COVID-19, using what was readily available and serving those able to access.



Mid-2020 and beyond: Moving to strategic, sustainable approaches to serving all patients.

What is Telehealth?

Live Audio/ Video

Remote Patient Monitoring (RPM)

Mobile Health

Store-and-Forward

Other Remote Technology-Based Communication

1

Live Video is two-way interaction between a person (patient, caregiver, or provider) and a provider using audiovisual telecommunications technology. This type of service is also referred to as “real-time” and may serve as a substitute for an in-person encounter when it is not available.

2

RPM uses digital technologies to collect health data from individuals and electronically transmit that information securely to providers in a different location for assessment and recommendations, allowing the provider to continue to track healthcare. RPM can collect things such as vital signs, weight, blood pressure, blood sugar, blood oxygen levels, heart rate, and electrocardiograms.

3

Mobile health or mHealth, a relatively new and rapidly evolving aspect of technology-enabled health care, is the provision of health care services and personal health data via mobile devices. mHealth often includes use of a dedicated apps downloaded onto devices. Apps can range from targeted text messages or tracking that promote healthy.

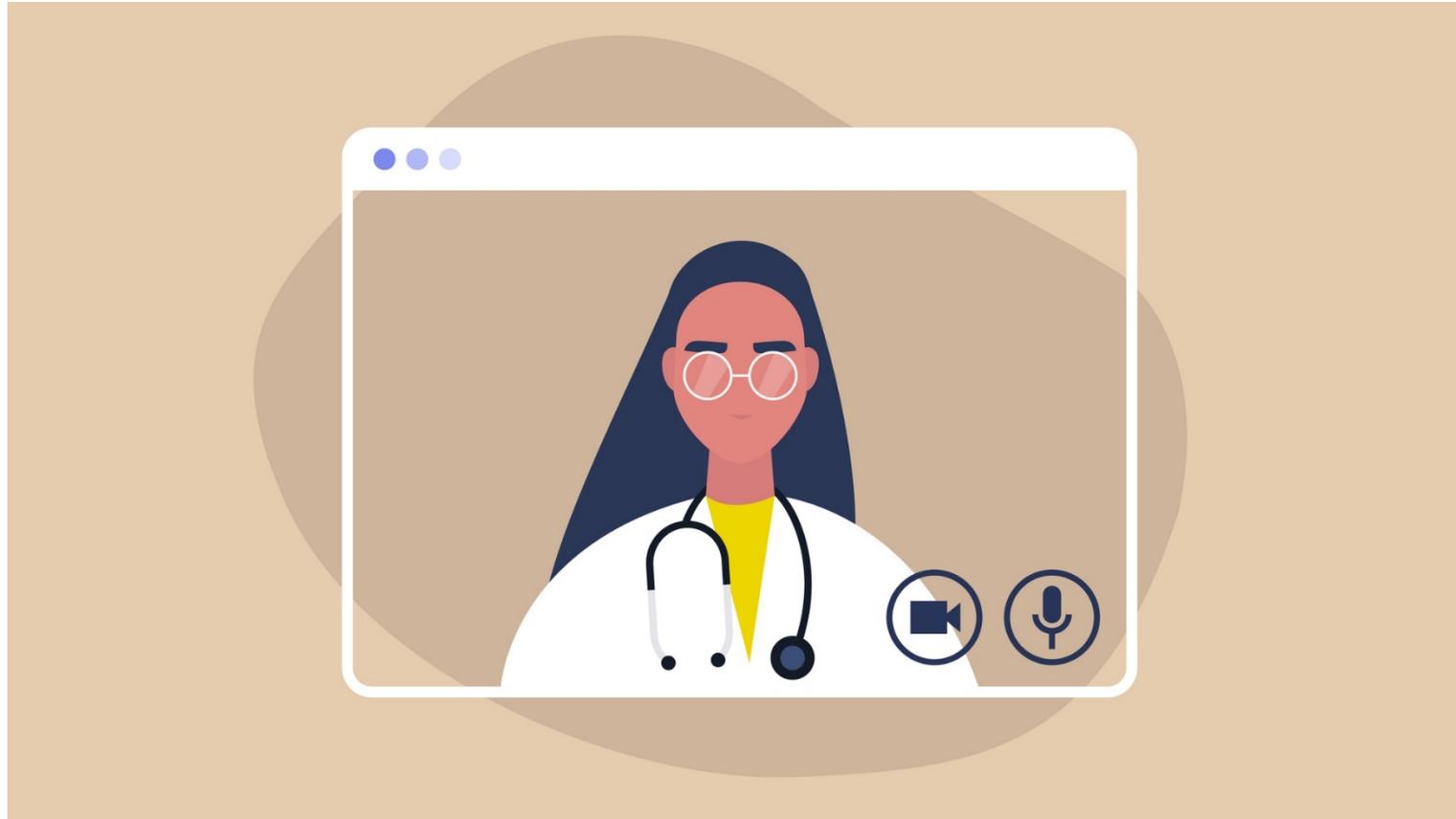
4

Transmission of recorded health history (e.g., pre-recorded videos and digital images) through a secure electronic communications system to another practitioner, usually a specialist, who uses the information to evaluate the case or render a service outside of a real-time or live interaction.

5

Services not specifically defined as telehealth, because they don’t have an in-person equivalent, but are functionally similar– including virtual check-ins, remote evaluation of pre-recorded patient information, transitional care management/ chronic care management, E-visit/ digital evaluation.

Source: Center for Connected Health Policy’s [About Telehealth](#); Visit www.cchpca.org for more.



Primary Focus Today: Live Audio/ Video Telehealth

While the other types of telehealth offer a great deal of opportunity, live synchronous is the primary form of telehealth that is currently reimbursable for health centers and is currently widely used for patient visits.

Rapid shift to telehealth

In 2019, less than **2%** of visits nationally were virtual, according to CY 2019 UDS data.



In late April/ early May of 2020, **more than 50%** of all health center visits were conducted virtually, according to weekly HRSA COVID-19 Survey.



What are special and vulnerable populations?

Health centers serve a huge and diverse population, including populations that are often underserved and harder to reach.

1 in 8
children



1 in 5
rural
residents



1 in 3
living in
poverty



1 in 5
Medicaid
recipients



398K+
veterans



885K+
served at school-
based health
centers



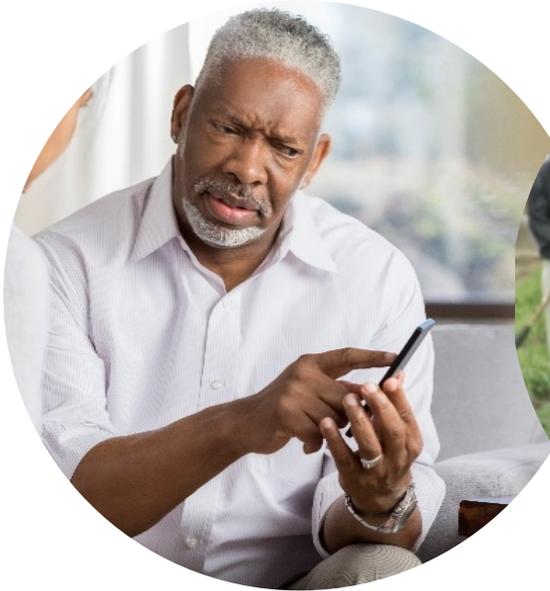
1M+
agricultural
workers



1.4M+
homeless



What patient populations are we talking about?



Older Adults, Migrant, Seasonal, and Agricultural Workers, People experiencing homelessness or housing instability, People with limited English proficiency, and People who live in rural areas with limited broadband.

These groups, of course, are not mutually exclusive. People can fit into several of these groups, adding additional consideration and complexity.

**What
populations
have you found
harder to serve
or reach with
telehealth?**

- Older adults
- Migratory, Seasonal, and Agricultural Workers
- People experiencing homelessness
- People with limited English proficiency
- People who live in rural areas
- Other

**What
populations
are you
seeking to
further engage
with
telehealth?**

- Older adults
- Migratory, Seasonal, and Agricultural Workers
- People experiencing homelessness
- People with limited English proficiency
- People who live in rural areas
- Other

Addressing the Needs of Special and Vulnerable Populations

- Further [health center fundamentals](#):
 - Deliver high quality, culturally competent, comprehensive primary care, as well as supportive services such as health education, translation, and transportation that promote access to health care.
 - Develop systems of patient-centered and integrated care that respond to the unique needs of diverse medically underserved areas and populations.
- Address social determinants of health or social risk factors that your patients are experiencing
- Further health equity

**There is
some
balancing
between
privacy and
access.**

- Many strategies for increasing access are can be less private.
- Considering how to maximize privacy while maximizing access is important.
- For example, increasing access may require using shared devices or networks so it will be important to provides tips for keeping their information private.

Considerations for Older Adults

- Approximately 77% of older adults are living with at least two chronic conditions. (NCOA)
- Older adults are a diverse population (race, socioeconomic status, sexual orientation, etc.)
- Some are still actively working or are family caretakers, while others need advanced degree of care
- Discussions around COVID-19 risk or allocation of treatments often devalue the lives of older adults, even as a "reasonable sacrifice"

Considerations for Agricultural Workers

- 80% are Hispanic
- 72 % are male, 28 % are female
 - Recent increase in H2A visa program solo males
 - Recent increase in more seasonal vs. migratory workers
- 44% are under age 35
- Spanish is the dominant language
- Average 8th grade education level

1. National Agricultural Workers Survey (NAWS) 2013- 2014.

2. Kandel W. *Profile of Hired Farmworkers, A 2008 Update*. Economic Research Service, US Department of Agriculture; Washington, DC; 2008. Economic Research Report No. 60.

* Note: Kandel uses a combination of NAWS and others data.

3. Martin P. Immigration reform: implications for agriculture University of California, Giannini Foundation. *Agricultural and Resource Economics Update*. 2006;9(4).

Considerations for Agricultural Workers

- Additional SDOH factors to MSAW population:
 - Limited “Digital Literacy” (particularly now with COVID-19)
 - Lack of/ Limited access to Internet
 - Lack of/ Limited access to device/smart phone
 - Not accessing healthcare services in general
 - Discomfort in sharing personal information

1. National Agricultural Workers Survey (NAWS) 2013- 2014.

2. Kandel W. *Profile of Hired Farmworkers, A 2008 Update*. Economic Research Service, US Department of Agriculture; Washington, DC; 2008. Economic Research Report No. 60.

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Considerations for People with Limited English Proficiency

- In 2018, about **24%** of patients served by the health center program were best served in a language other than English.
- In section 1557 of the Affordable Care Act, HHS mandates that **healthcare professionals make reasonable language accommodations for people with Limited English Proficiency**, which also applies to telehealth services.
- People with limited English proficiency are historically **less likely to visit the doctor** and **less likely to get preventative care services**, even when controlling for literacy, health status, health insurance, regular source of care, ethnicity, and economic indicators.
- With the rapid move to telehealth, there is concern that **these patients may be left further behind because of limited ability to address language needs via telehealth.**

Considerations for People who are homeless or in supportive housing

- Homeless and vulnerable tenants in supportive housing already isolated in many ways in which COVID-19 pandemic and social distancing has intensified
- Many rely on case managers to connect them to necessary services and supports
- Beyond primary care, a large portion of this population also deals with behavioral health and substance use issues that they may or not may be actively receiving services for
- Many do not have the technology resources needed to receive care through telehealth or a private situation to receive care

Addressing the Needs of Special Populations in Three Areas

Increasing **awareness** of telehealth as an option.

Increasing **knowledge** and **ability** to engage in telehealth, before any appointments.

Increase **utilization** of telehealth to successfully provide care.

Strategies to inform these groups that the health center is offering telehealth and they can access care through telehealth

Strategies to build interest and knowledge about telehealth for special populations to engage in telehealth visits when the need arises.

Strategies to increase the capacity of special population patients and providers to successfully engage in telehealth and successfully complete telehealth visits.



Increasing Awareness

Strategies to inform these groups that the health center is offering telehealth and they can access care through telehealth

Awareness: Older Adults

- Phone screen patients to identify who may have difficulty with video appointments
- Remember that technology use can be a cultural change: understanding graphics, multiple screen transitions, handling device that is too small or too large
- Involve caregivers in the conversation early & often
 - Are support services/resources available to them?
- Recognize that for older adults who are isolated or living with dementia, in-person visits (home or clinic) may be necessary

Awareness: Homeless and Vulnerable Populations in Supportive Housing

- Homeless and vulnerable tenants in supportive housing already isolated in many ways in which COVID-19 pandemic and social distancing has intensified- Many rely and case managers to connect them to necessary services and supports
- Outreach and engagement on the use of telehealth
 - Use social workers, case managers, community health workers to outreach and engage homeless and supportive housing patients on the use of telehealth
 - Care coordination with community case managers to outreach and engage with their clients and tenants on use of telehealth

Awareness: Agricultural Workers

- Increased patient communication about services and/or changes to service delivery through:
 - Community Health Workers
 - Adapted patient education materials
 - Health Center website
 - Social media platforms (Facebook, twitter, Instagram)
 - Telephone calls
 - Flyers/ paper mail outs
- Partner with other community agencies to promote clinic information at health events/fairs, while distributing PPE and food, etc.

Awareness: Agricultural Workers

SÍNTOMAS DEL COVID-19

TOS FIEBRE CANSANCIO

DOLOR DE CABEZA DOLOR DE GARGANTA SECRECIÓN NASAL

CONGESTIÓN NASAL FATIGA DIFICULTAD AL RESPIRAR

DIARREA

NO SIEMPRE SE PRESENTAN TODOS LOS SÍNTOMAS. EN ALGUNOS CASOS NO APARECE NINGUNO... SI USTED PRESENTA ALGUNO ESTOS SÍNTOMAS SE RECOMIENDA BUSCAR ATENCIÓN MÉDICA

NDLON NATIONAL DAY LABORER ORGANIZING NETWORK

DALE DAY LABORERS ORGANIZATION

COVID-19

Detenga la propagación de microbios

Ayude a prevenir la propagación de virus respiratorios como COVID-19 y la gripe.

¿Cuáles son los síntomas?

Fiebre Tos Falta de aire

¿Cómo se previene?

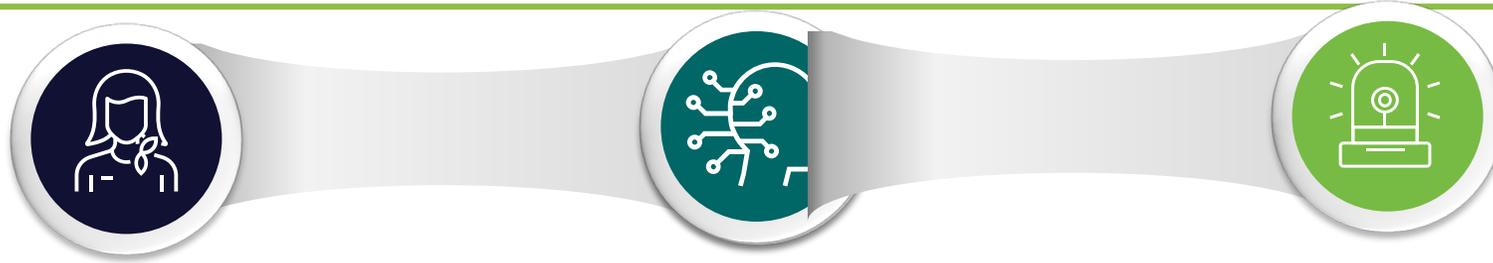
Lávese las manos con frecuencia Evite tocarse los ojos, la nariz o la boca con las manos sin lavar Evite el contacto con personas enfermas

Quédese en su casa mientras está enfermo/a y evite estar en contacto con otras personas Cúbrase la boca/la nariz con un papel tisú o con la manga de su ropa al toser o estornudar Limpie y desinfecte los objetos y las superficies que se tocan frecuentemente

dhec Healthy People. Healthy Communities.

Si tiene alguna pregunta en general acerca del COVID-19, llame a la línea de atención del DHEC al 1-855-472-3432 entre las 8 a.m. y las 6 p.m. todos los días. Visite el sitio web scdhec.gov/COVID19 para más información.

Summary: Strategies to Increase Awareness



ENSURE REPRESENTATION

If information is not representative of the patient, they may think telehealth is not *for* them. Share information in a way that is linguistically and culturally appropriate for patients.

USE NON-TECH APPROACHES TO INCREASE AWARENESS

Email and texting campaigns work well for some patients, but may not work as well for special populations. Build awareness in phone or visit contacts or through physical promotion like flyers or signs.

SHARE INFORMATION WITH CARE PARTNERS

Caregivers, case managers, community health workers and others can recommend telehealth when appropriate if they are aware of it. They can also help patients navigate some questions they may have.



Increasing Knowledge and Ability

Strategies to build interest and knowledge about telehealth for special populations to engage in telehealth visits.

Knowledge and Ability: Older Adults

- Offer video visits without requiring patient portal enrollment
- Provide accommodations for vision & hearing impairments
 - Print materials, captioning services, headphones or landline use for audio
- Develop or locate training materials as a guide for patients and caregivers
 - Community resources for digital literacy
- Remember that technology use can be a cultural change: understanding graphics, multiple screen transitions, handling device that is too small or too large

Knowledge and Ability: Agricultural Workers



- Community health workers modeling/providing demos- to increase comfort level
- Health Education and “Navigating Technology” Workshops
- “Town Hall Meetings”
- Social media posts, live events, etc.
- Text message campaigns
- Using apps/platforms familiar to patient population
- Targeted outreach in the community to strengthen partnerships

Knowledge and Ability: Homeless and Vulnerable Populations in Supportive Housing

- Many do not have the technology resources needed to receive care through telehealth or a stable situation to receive care
 - Asses access, need, and comfort in using technology
 - What technology do they have and what support may they need?
 - What is their comfort level and how best do they want to communicate?
 - Do they have health insurance to support?

Knowledge and Ability: Limited English Proficiency

- **Identify or create resources that assist patients with limited English proficiency with use of telehealth.** Resources in languages other than English to raise awareness about the efficacy and ease of telehealth. Here are some examples for common health center EHRs and/ or telehealth platforms:
 - Doximity, a telehealth platform, offers [patient-facing instructions in several languages](#).
 - eClinicalWorks offers [videos](#) for patients on how to use Healow Telehealth in Spanish.
 - Examples from health centers: LA LGBT Center, a health center in Los Angeles, has [written and video instructions](#) in Spanish as well as English on how to download Allscripts FollowMyHealth patient portal to access video visits. El Rio Health, a health center in Tucson, offers a [Patient Quick Start Guide](#) in Spanish and [flyer](#) for using Otto, their telehealth platform with NextGen.
 - See [instructional videos on how to download Zoom](#) in more than ten languages.

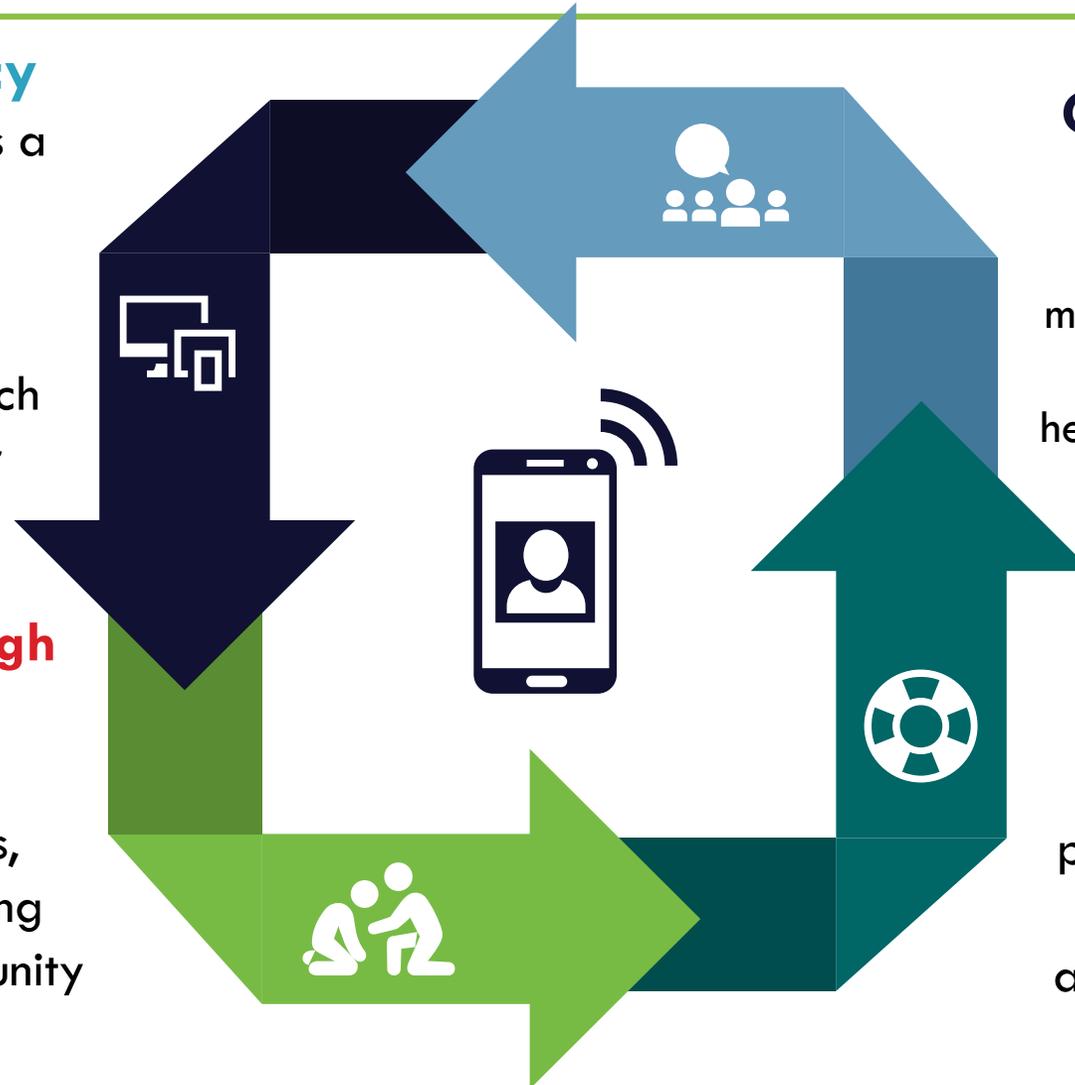
Summary: Strategies to Increase Knowledge and Ability

Develop Digital Literacy

Accessing telehealth involves a certain level of comfort with technology; offering technology support (such as assessing and addressing tech needs while calling for other information) can help.

Targeted Outreach through Existing Touchpoints

Community partners, care coordinators, case managers, care givers, and other existing touchpoints offer an opportunity to build patient's comfort.



Consider Platforms that are Familiar

Platforms that patients may be more familiar with, some of which are allowable during the public health emergency (e.g., FaceTime, Facebook Messenger Video), could be better to start with.

Provide Accessible Instructions

When promoting telehealth, provide accessible instructions (illustrations, linguistically appropriate) along with other information.



Improving Utilization

Strategies to increase the capacity of special population **patients** and **providers** to successfully engage in telehealth.



Increasing Patient Capacity

Strategies to increase the capacity of patients belonging to special populations to successfully complete a telehealth appointment.

Utilization: Older Adults

- Use 4M's Age-Friendly framework to discuss: What Matters; Medication; Mentation; Mobility
 - What is helping a patient reach their goal? What is making it more difficult?
- Discuss social isolation & loneliness (and the impact of COVID-19)
- Consider health literacy- universal precautions approach
 - Assume that all patients may have difficulty understanding health information and accessing health services

Utilization: Rural Patients

- Successfully completing a telehealth visit in a rural area where broadband and/ or LTE data access is less, is more likely with the following strategies:
 - **Plan ahead to make the most of broadband available:** Some strategies to maximize available bandwidth are to turn off the connection on unused devices, move as close as possible to the wireless router, and/or, if using a computer, plug directly into the router with an Ethernet cable.
 - **Consider telehealth options that allow for separate phone and video, so if the video cuts out the visit can still continue.** Two potential approaches:
 - Use platform that either has a call-in number (such as Zoom) or where the video can be shut off if need be and continue as audio only (FaceTime, Zoom, etc.)
 - Call the patient directly by phone, and then use video separately on a separate device.

Utilization: Patients Experiencing Homelessness

- Patients experiencing homelessness or housing instability may be more likely to need to use a shared device to access telehealth or be in a shared location.
- Patients may benefit from knowing telehealth is still an option with a few caveats and strategies:
 - The patient should tell their provider that it is not their device, nor a private device and therefore the provider should not follow-up or send additional information to that device. (*and the provider should ask this question!*)
 - The **patient can enable privacy features**, such as private browsing and clearing any stored information after the visit, as well as by deleting any app, text messages, and related browser history.
 - **Use headphones for more privacy!**
 - [Helpful resource for patients](#) from Focus:PHI, the center of excellence for protected health information.



Increasing Staff Capacity

Strategies to increase the capacity of providers and staff to help special populations successfully complete a telehealth appointment.

Serving Older Adults

- Minimize background noise and objects, balance lighting
- Cue patient to involve others in the home if desired, or move to a private setting if possible
- Help patient feel understood by validating positive and negative emotions
- Non-verbal: allow for pauses, look directly into the camera. Look for signs that patient could be uncomfortable with the conversation
- Wind down conversation mindfully

Serving Agricultural Workers



- Understand the unique challenges of the population (especially now with COVID-19)
- Assess and obtain additional funding to facilitate telehealth service delivery
- Increase workforce training on communication, patient engagement, and telehealth equipment
- Assess patients readiness to engage in Telehealth and then adapt services
- Increase knowledge of patient population
- Increase appointment reminders and patient follow up via text/phone calls
- Incentives to staff!

Serving Homeless and Vulnerable Populations in Supportive Housing

- Beyond primary care, a large portion of the this population also deals with behavioral health and substance use issues that they may or not may be actively receiving service for, and may be reluctant to engage via “telehealth”.
 - Start small and move from there
 - Check-ins to say Hi
 - Asking what they need
 - Provide routine telehealth calls/ visits
 - It is their “visit”

Serving Patients with Limited English Proficiency

- **Increase skill with interpretation features of telehealth platforms:**
- [Zoom Language Interpretation](#) allows the host, such as the provider, to designate a participant as a translator, such as an health center interpreter on staff or third party interpreter. Then, if desired, Zoom projects audio in the participant's dominant language from the interpreter instead of the speaker's language (e.g., so the patient would hear the interpreter speaking in Spanish instead while the provider is speaking in English).
 - *Instructions for enabling this functionality:* To enable the feature, sign into your Zoom web portal (for example, [examplehealthcenter.zoom.us](#)), then click **Settings** in the navigation panel on the left side of the screen. Then click **In Meeting (Advanced)**, then look for **Language Interpretation**, and click the slider to move it to the right and make it blue, showing the feature is enabled. See [full instructions](#) from Zoom.
 - *Instructions for using interpretation feature in visit:* When the session starts, the Zoom host (e.g., the provider) can start the interpretation feature by clicking **Interpretation** (globe icon), then add interpreters, including naming the interpreter and starting the interpretation session from that menu. **Attendees (e.g., patients) can select an audio channel to hear their language of choice.** Attendees will hear translated audio and can choose to hear original audio at a lower volume.
- *Adding Interpreters in Other Telehealth Platforms:*
- **Doxy.me:** Using a Professional or Clinic account, it is possible to have an interpreter or translator join a call using the [group call feature](#). First, the patient checks into provider's room, then the interpreter checks into provider's room, then the provider starts group call with both patient and interpreter. **Doximity:** Doximity's Dialer Video allows one click video calls, where a [third-party, such as an interpreter, can be added via email or text message](#).

Summary: Strategies to Successfully Utilize Telehealth



Plan for Common In-Visit Challenges

Internet stability issues, video cutting out, poor lighting and other challenges are very likely. Strategize with the patient what you will do if/ when any of these happen. Agree that these are no one's fault, just the perils of technology!



Build Provider Skills to Use Helpful Features

Telehealth platforms may have features that can assist with including interpreters or caregivers, as well as options to interact. Building provider comfort with these features can increase success of telehealth for both provider and patient.



Be Proactive on Stability + Privacy

Patients may have complex situations that they are navigating, discussing how to plan for success including strategies to maximize stability of internet connection and how to maximize privacy are important.



Build "Web-side Manner" to Increase Comfort

Telehealth really puts the focus on facial expressions and words, which is all the more important when working with patients who may not feel comfortable or may have a harder time communicating.

Resources

- [Telehealth for Supportive Housing Providers: Guidance for Providers Looking to Adapt and Consider Billing for Themselves](#) (CSH)
- [Supporting Tenants During COVID-19 Using Technology-Based Strategies](#) (CSH)
- [Telehealth Basics for Supportive Housing Providers and their Health Center Partners: Guidance for Providers Looking to Support Residents Getting Connected to Telehealth](#) (CSH)
- [Building the Plane While Flying It Case Studies on COVID-19, Telehealth, and Health Care for the Homeless Centers](#) (NHCHC)
- [Telehealth Strategies for Health Center Patients with Limited English Patients](#) (HITEQ)
- [Telehealth Strategies for Rural Patients served in Health Centers](#) (HITEQ)
- [Fostering Human Connection in the Covid-19 Virtual Health Care Realm](#) (NEJM Catalyst Innovations in Care Delivery)
- [Using Telehealth to Improve Home-Based Care for Older Adults and Family Caregivers](#) (AARP)
- [Tips to Keep Your Telehealth Visit Private](#) (Focus: PHI)

Telehealth Considerations and Strategies for Special and Vulnerable Populations

Thanks for
joining us today!
Questions or
comments?



HEALTH INFORMATION TECHNOLOGY,
HITEQ
EVALUATION, AND QUALITY CENTER

Please complete the evaluation! Also, reach out to any of the NTTAPs featured for additional support!

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