

Healthy at Home

Background and What to expect

Healthy at Home Background : A Provincial Initiative

- Healthy at Home supports vulnerable or patients with pre-existing conditions at home with virtual/digital tools during COVID-19.
- Goal: Monitor and intervene early to prevent deterioration, and keep patients out of clinical settings to reduce exposure to COVID-19 and care for unstable patients in their home instead of hospital.
- Office of Virtual Health is collaborating closely with several high priority clinical programs to determine their clinical priorities to ensure we keep patients healthy at home.

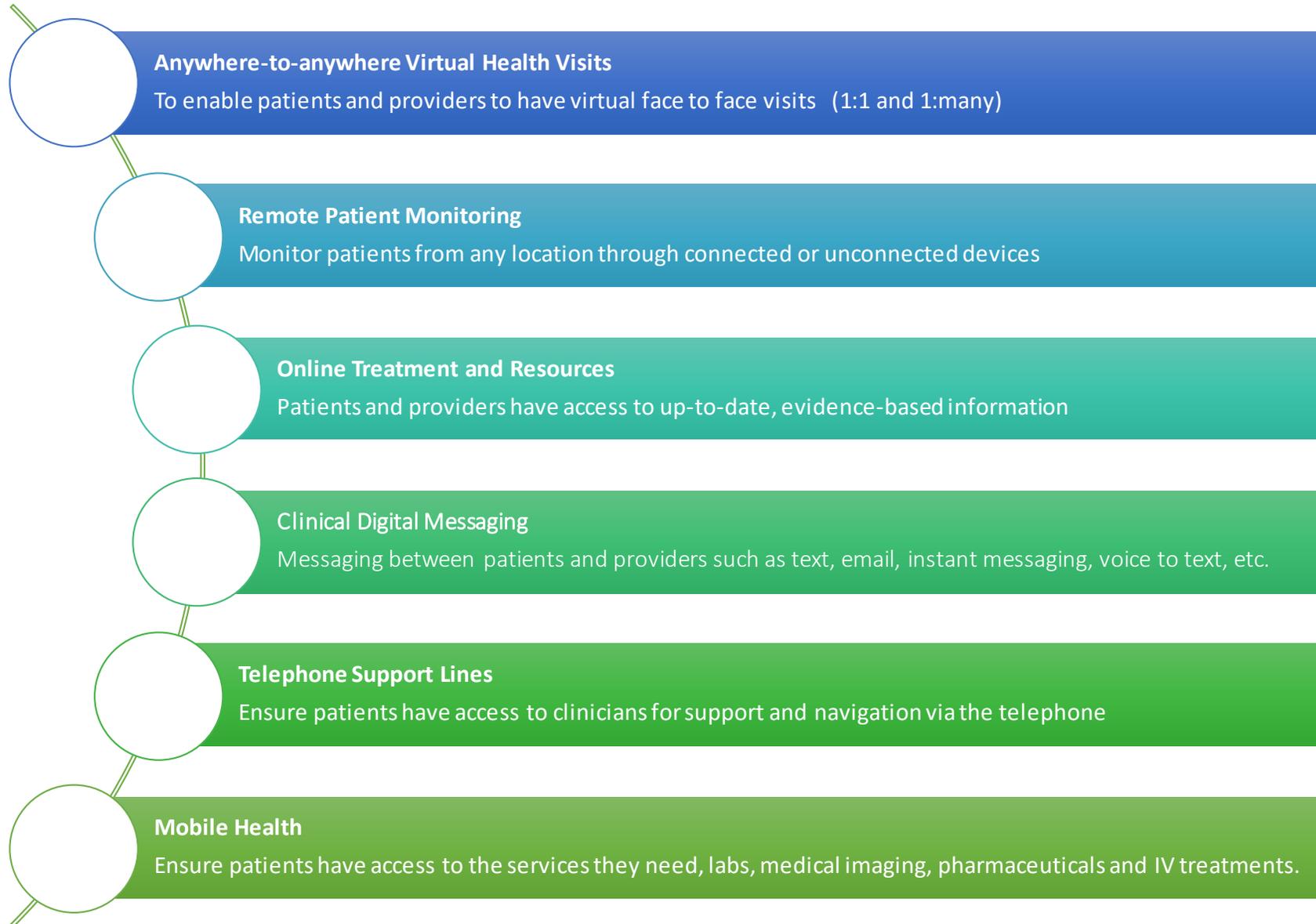


Healthy at Home Background

We began by working with the following program areas to determine their clinical priorities

- BC Cancer
- BC Renal
- BC Transplant
- Cardiac Services BC
- Respiriology (a new informal network created for COVID-19)

Healthy at Home Clinical Priorities Identified



PHSA Virtual Health initiative lifecycle - what to expect with this work

Engagement

Discovery

Planning

Execution

Evaluation

Scale

Meet with clinical program leaders to define the clinical need and confirm potential use of virtual solutions



Completed with BC Renal leadership team and various stakeholders across the province.

Develop a clear understanding of the proposed initiative, including feasibility and readiness

Now here! Starting with SPH, VGH & RIH KCC. Engaged with the Regional Health Authorities virtual health departments. Work will be collaborative – to honor clinic differences but attempt to align across the province as best as possible. Understand each clinic's needs, and guide towards the best solution to address those needs.

Create a detailed plan outlining how and when to execute the virtual health initiative



Mapping workflows – what are you currently doing, what do you need to continue doing, what might change and determine how this will all happen. What is the best way to ensure we continue to provide high quality patient care

Implement detailed project plan to execute the project. Include tracking, reporting and improving



Getting the ready to use virtual visit solution – training on the new workflows that have been designed and the platform and preparing clinicians for a new way of providing care.

Use the evaluation framework to measure results of the project and share results in a detailed report



Check in to see how things are going, what may need to be changed. Establish evaluation metrics prior to the execution so that we can measure how we are doing.

Identify opportunities to scale across other clinical programs. Use lessons learned and tools built, to streamline future initiatives



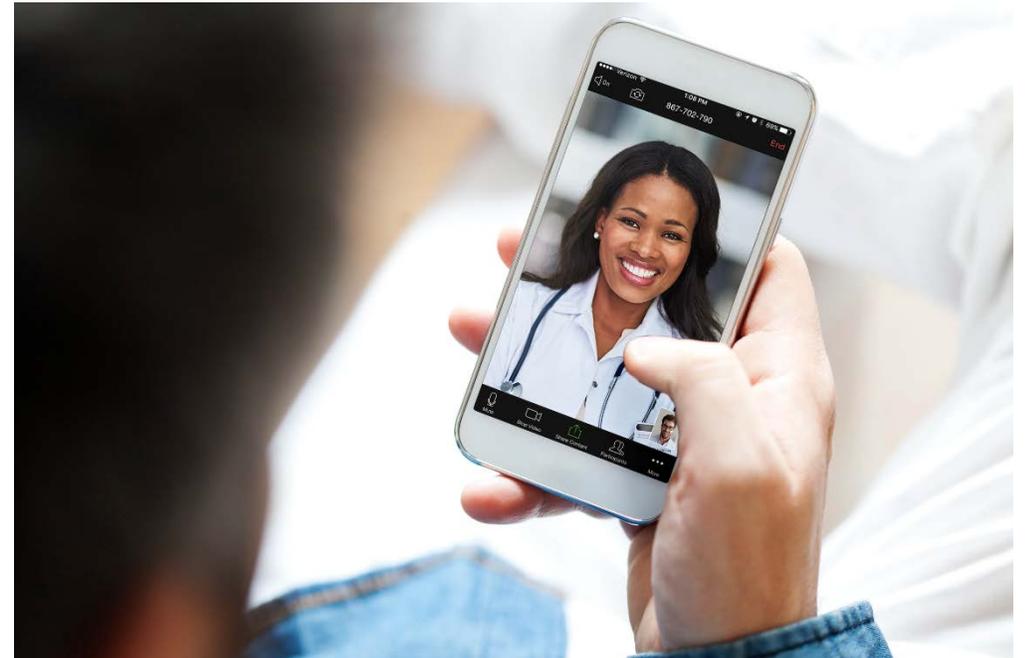
Looking into the future

Virtual Visits

Potential Solutions



Zoom for Healthcare is a popular video conferencing software used in a variety of industries, and is available for providing Virtual Health in British Columbia.





Key Features:

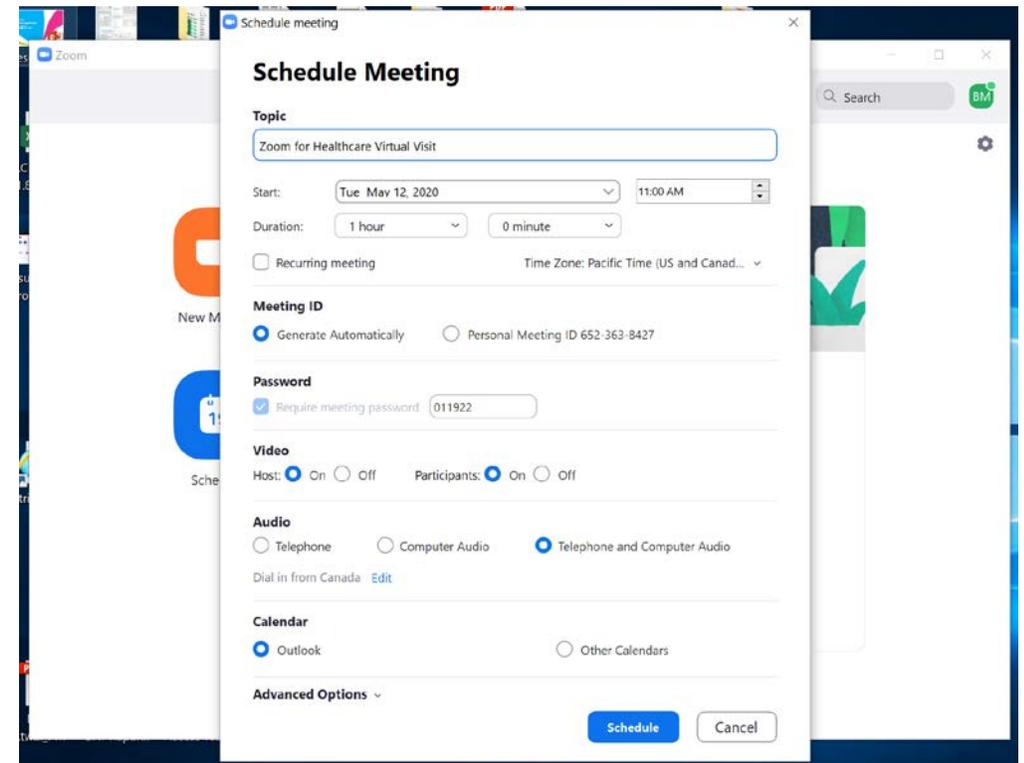
- 1:1, 1:Many, Many:1 capabilities
- Providers & patients can dial into visits Webinars allow for effective health education for staff and patients
- Technical Support for providers by PHSA service desk (patient support coming soon)
- Provider to patient screen sharing





Limitations:

- Scheduling relies on additional platform (ie. Outlook)
 - May require extra steps to avoid exposing employee contact information
- Waiting Room is more a privacy feature, not as functional as other solutions
- Meeting reminders for patients/providers



InTouch



InTouch is a virtual visit tool that is specifically modeled to assist health care.

A screenshot of the InTouch Solo software interface. The interface is divided into three main sections: a left sidebar, a central patient queue, and a right-hand patient profile view.
Left Sidebar (Navigation):

- Dashboard
- Queue (0 / 16)
- Schedule
- Care Locations
- Imaging
- Analytics
- Smart Notes
- Waiting rooms
- My Apps
- Add waiting room +

Central Patient Queue (July 11):

Patient Name	Age	Gender	Care Location	Status	Time
Morgan, Ashley	27	f	West Side Medical C...	Waiting	1 m
Tucker, Vincent	0	f	Forum Emergent Lit...	Scheduled	04:00 AM
Craig, Gladys	-	f		Scheduled	05:40 AM
Guille, Norma	30	f	Emergency Room Lit...	Scheduled	11:25 AM
Hernandez, Carmen	50	f	Emergency Room Lit...	Scheduled	07:25 PM
Aaron, Blake	20	f		Complete	05:52 AM
Craig, Gladys	-	f	Patti Bath SP	Complete	06:15 AM
Green, Peter	20	f	Patti Bath SP	Complete	06:31 AM

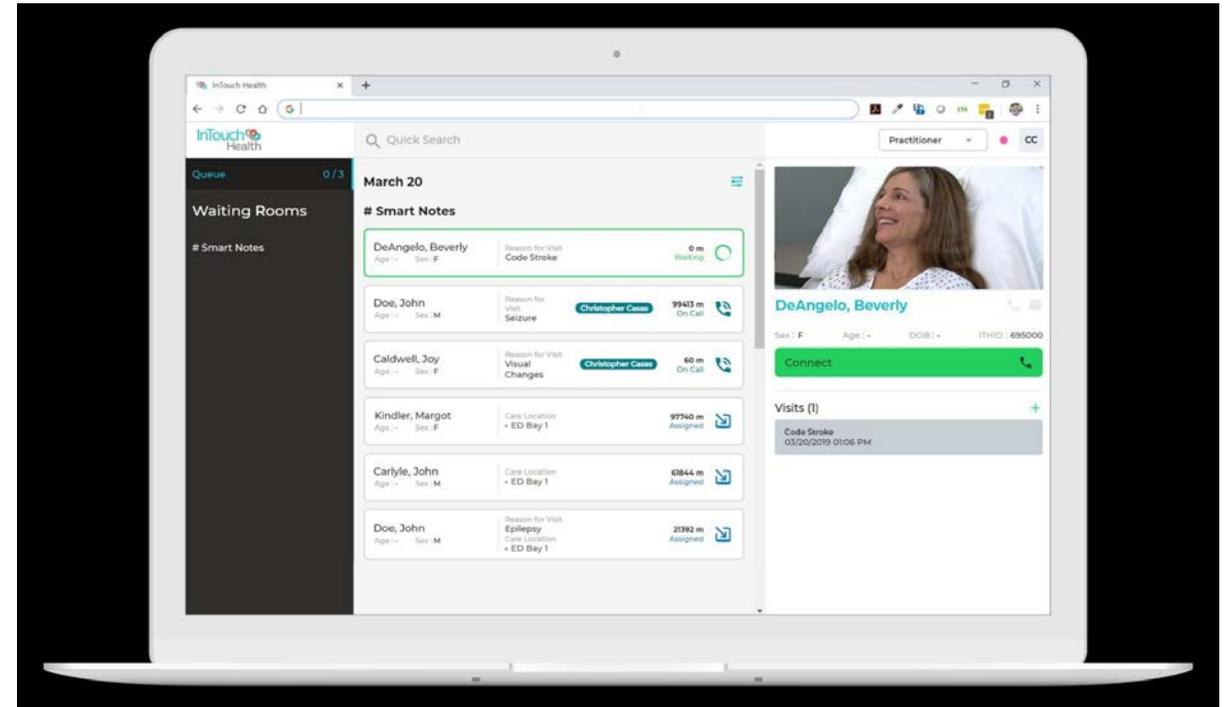
Right-hand Patient Profile (Morgan, Ashley):

- Imaging Search
- Connect
- Visits (7) Upcoming (1)
- Back Pain (08/26/2019 08:15 AM)
- 08/21/2019 07:30 AM
- 08/21/2019 07:00 AM
- Documents (8)
- Short Patient Intake (08/26/2019 08:15 AM)



Key Features

- 1:1, 1:Many, Many:1
- Allows both patients & clinics to schedule appointments
- Flexible appointment reminders
- Allows clinical documentation
- Surveys & questionnaires





Limitations:

- Not an option to dial into visits
- Recommended that patients & providers use desktop/mobile apps





Doxy.me is a telemedicine solution designed for practices of varying sizes. It's a ready-to-use tool that allows patients to start sessions by clicking on a URL shared via email or text.



Strengths:

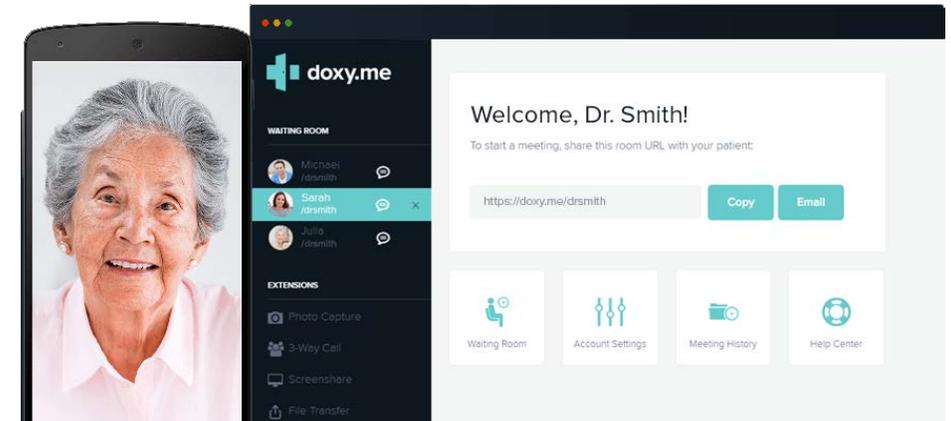
- Simple to use
- Provider/patient friendly, no app needed to download
- Has waiting room that allows providers to message patients
- File sharing





Limitations:

- Video Quality (related to product not having app), struggles with 1:many visits
- Uses same link for meetings, potential privacy risk
- No technical support offered by PHSA Service Desk at this time



What's Next

What's Next

- We will be working with the first 3 clinics (RIH, SPH and VGH), and the regional virtual health departments through the life cycle
- We will build workflow templates that can be used as starting points for working with all other clinics around the province
- Clinics (after RIH, SPH, VGH) can then use the template and determine where it makes sense to keep certain steps, and what might need to change
- We will also work with all clinics to determine educational and support needs to ensure all clinicians and support staff are able to work optimally.

What You Can Do Now

What can you do now?

Determine and work on your readiness

- COVID-19 has made us move forward with virtual visits within a very short time frame
- Take some time to think about the following categories (next slide)
- We will be helping you with a lot of these categories, but if you are able to come with thoughts and ideas and as a clinic work through these categories it will help the process

What can you do now?

Current state

- We will ask what you were doing pre-COVID and what are you doing now, gather a good understanding of who is doing what within the clinic?
- Reflect on what is working well and what you want to change

Staff and Leadership

- Who will work with our teams? Who can speak to the different aspects of your current workflow and help brainstorm what the new workflow could look like?
- Who needs to be the approver of any changes?

What are you wanting to achieve?

- Re-creating pre-COVID in person workflows?
- Looking at new ways that certain aspects can get done?

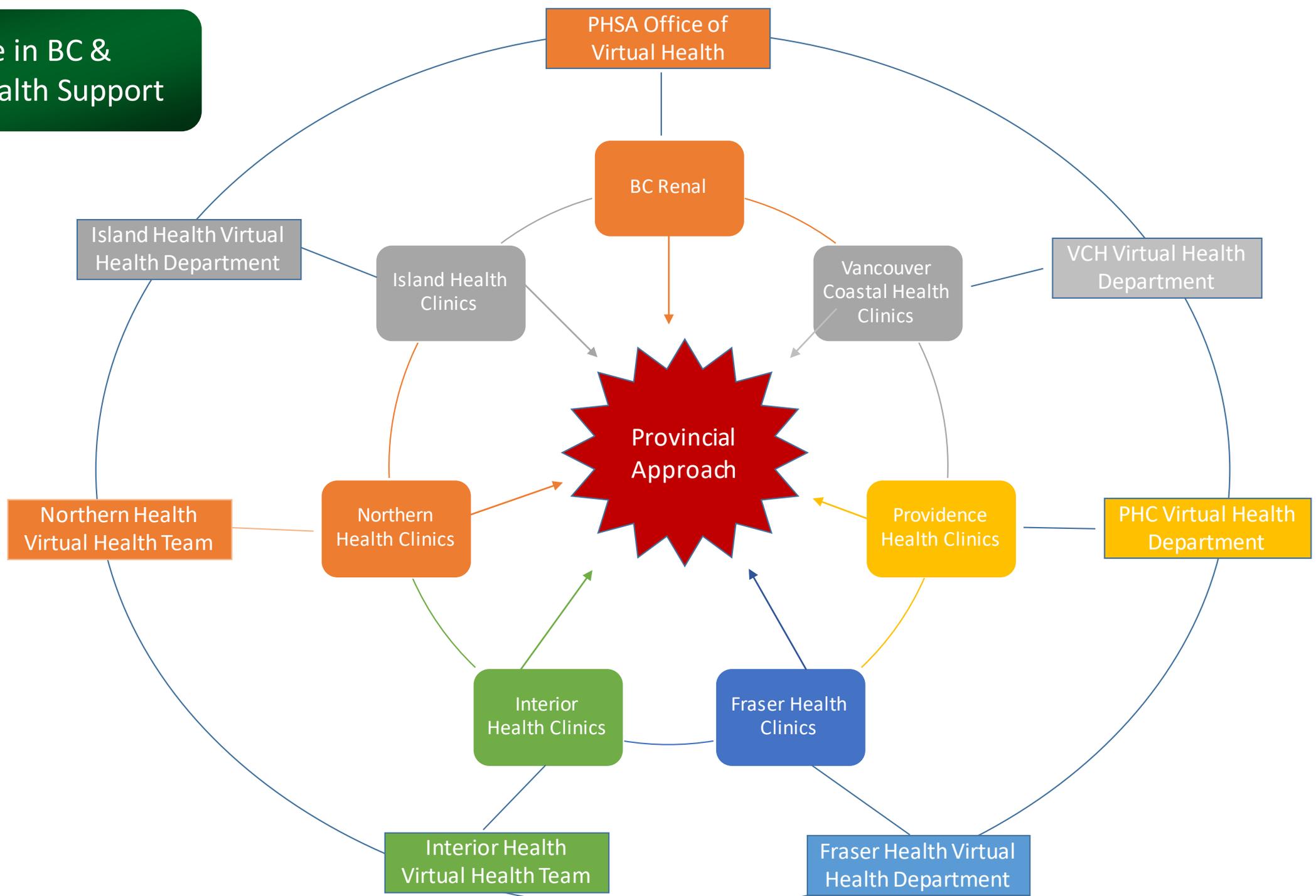
Metrics

- Do you have any current metrics that you collect that can help us measure how we are doing with virtual visits?
- What are some new metrics you may want to use to measure this? How will we gather that information?

Patient involvement?

- Do you have patient or family advisors that you would want incorporated into this work?

Renal Care in BC & Virtual Health Support



Virtual Health Contacts by Health Authority

We will be working with all the regional health authorities virtual health teams, and they are available for you to reach out to. Here are the contacts for each one.

Health Authority	Key Virtual Health Contact
Vancouver Coastal Health	Heather Boersma
Fraser Health	Rafael McRaven
Interior Health	Shawn Berglund
Northern Health	Frank Flood
Island Health	Margarita Loyola
Providence Health	Margot Wilson
First Nations Health	Megan Hunt
Provincial Health Services Authority	Emily Hamilton



Thank You!