

Division of Services Improvement, Clinical Technical Assistance Project
Technology-Assisted Care
Community Health Center, Inc. (CHCI)
Call Summary
August 21, 2014 • 9:00 am ET

Submitted to: Dina Passman, Kasey Harding-Wheeler

Date of Submission: August 21, 2014

Attendees

Substance Abuse and Mental Health Services Administration (SAMHSA): Dina Passman

Community Health Center, Inc. (CHCI): Kasey Harding-Wheeler

JBS International (JBS): Dave Wanser, Leslie McElligott, Iris Chai

Meeting Purpose

The purpose of the follow-up call was to get an update regarding Community Health Center's program activities and implementation progress.

Grantee Progress

TECHNOLOGY - Telehealth

- The Technology-Enhanced Access to Coordinated Healthcare and Buprenorphine Maintenance Therapy (TEACH BMT) program began providing telehealth services to clients at the Waterbury location approximately two weeks ago. Dr. Marwan Haddad (CHCI) is delivering telehealth services to assist with the caseload of one of the practitioners who is currently on maternity leave.
- The iPads initially purchased for training the clinical staff is now also being used to provide telehealth services.
- [Zoom](#), a cloud meeting company that provides video conferencing, online meetings, and mobile collaboration, provides the platform to implement telehealth.
- The program is planning to expand telehealth to sites that have limited suboxone services.
- Similar to in-person sessions, the telehealth sessions last an average of 20 minutes.
- Generally, it has been found that patients prefer to see a provider via the convenience of telehealth, rather than schedule limited in-person sessions. There has only been one client who did not want to participate in the technology assisted sessions. As a result, the staff found alternative approaches that would work best for the individual.
- The process used to begin a telehealth session includes having a nurse provide the patient with informed consent forms and setting up the technology (iPad) for the provider, Dr. Haddad. When requested by the client, the nurse stays in the exam room to assist the client with the technology. The nurse's schedule is blocked for this appointment if assistance is needed.
- Challenges in using telehealth include:
 - Clients failing to inform the nurse that the session is finished. Currently, the nurse has to go into the exam room to check with the patient and Dr. Haddad.

- Not all clients feel comfortable using technology.
- Positioning, exam room background, and placement of the technology in relation to the session participants are some of the issues that need to be addressed to help the clients feel comfortable in their sessions.
- Reading body language is difficult via technology. Fortunately, the nurse is able to share observation notes with the provider through the electronic health record.
- Telehealth is not yet reimbursable in Connecticut; however having the leadership's support has helped advocate for telehealth reimbursement for the state.
- Dave Wanser (JBS) suggested documenting workflow lessons learned. As telehealth is expanded at CHCI, this information will be helpful in managing the future workflow as well as orienting and training staff. Given the short time the use of this technology has been in place and limited exposure to other clinical staff, it may be premature to draw conclusions about its acceptability by clients. As intakes increase to projected levels, addressing the scalability of the project can help the program prepare for expansion demands. With an increase in intakes, follow-ups, and teaching and coaching of practitioners, demands on the current staffing level will quickly exceed their available hours.

GPRA

- The program has experienced a productive recruiting season over the summer months.
- To date, approximately 321 individuals have been recruited into the project; however the GPRA intakes are lower, with about 33 intakes completed in the past month.
- The program is confident that they can meet its target for Year 2, particularly with the implementation of telehealth.

OTHER

- Kasey Harding-Wheeler (CHCI) submitted a request for approval to the Institutional Review Board regarding completion of a study around client satisfaction and improvement that can help make telehealth services seamless and comfortable for the client.
- Project ECHO is going well. The staff feels the program is helpful and informative. A provider satisfaction survey was completed recently, with positive feedback on the didactic sessions and the Motivational Interviewing (MI) training session.
- CHCI anticipates providing the MI training on a bi-yearly basis due to its success and positive feedback from the providers. Dave suggested analyzing the impact of the MI training by conducting a pre/post-test with providers to see how patient participation changes (i.e., reduction of no shows and client dropouts).
- Project ECHO shared perspectives with another program that uses an effective behavioral intervention on suboxone.

ACTION ITEMS

- Dave suggested considering the use of other technologies. Ultimately, the organization will be interested in a toolbox of technology tools (e.g., a portal and mobile apps). In addition, expanding telehealth utilization should remain a priority for the program. Please let JBS know how we may assist CHCI with interest in other technology tools.