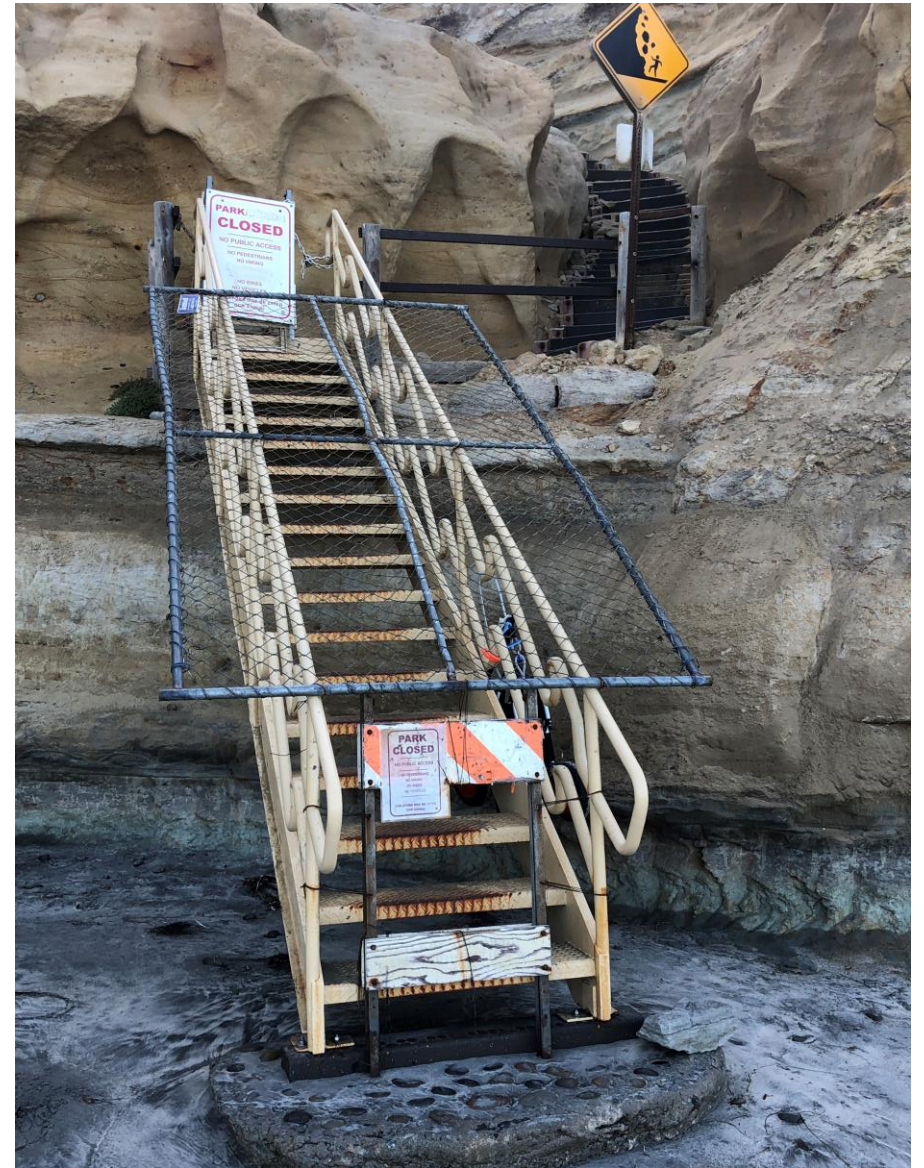Market share leader and the only health system in San Diego County
that increased market share each of the past 18 years

Torrey Pines State Beach
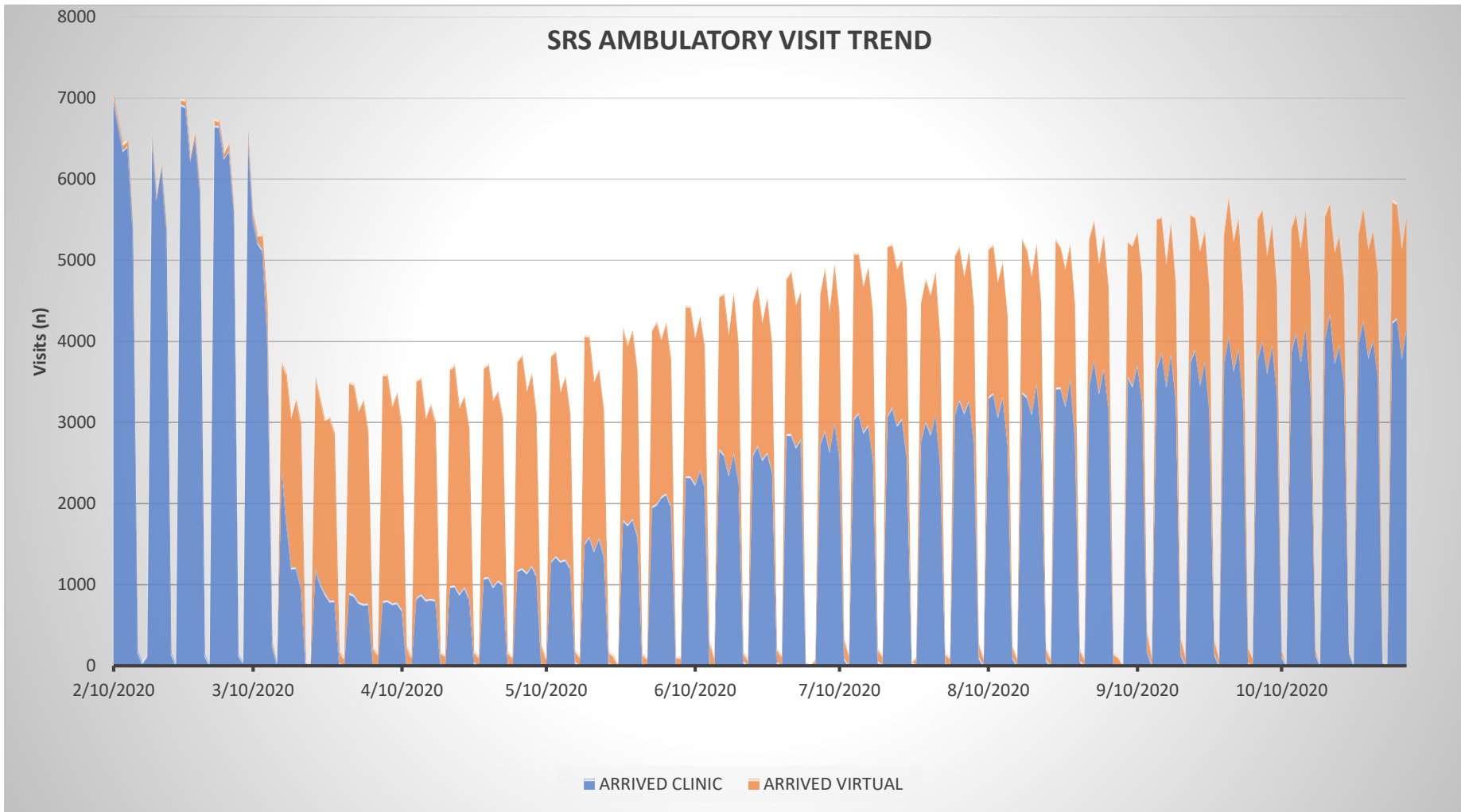
When one path closes…

COVID-19 – Telemedicine Catalyst

SRS AMBULATORY VISIT TREND

Urgent Virtual Visits

The right care, right now

In most cases, your doctor is your best first step for care. For immediate needs, we're here for you.

Virtual urgent care

Care from the comfort of home.

Begin virtual visit

What's treated ⌄ $$

Urgent care

Quick care for sudden health concerns.

Check wait times

What's treated ⌄ $$

Emergency care

24-hour care for serious medical issues.

**Find an ER near me**

What's treated ⌄ $$$

⚠ For medical or psychiatric emergencies, call 911 immediately. If you have COVID-19 symptoms, learn how to seek care.

The Problem:

SRS AMBULATORY VISIT TREND

- COVID-19 hit and immediately caused long wait times for triage

- Calls increased 400%

- Increase in calls to our 6 Triage RN's

- Contact center wait times greatly exceeded 90 seconds

- Physicians and APPs were displaced from their clinics

SHARP® Rees-Stealy Medical Group
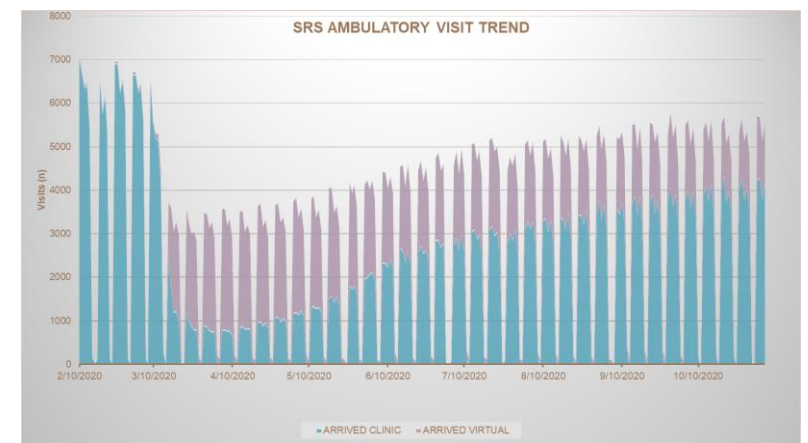
The Solution:
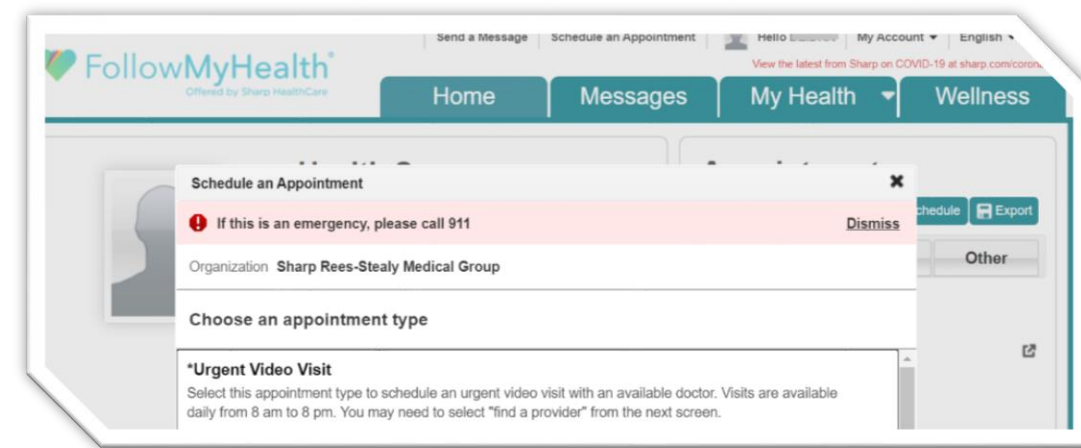
- ...w service line "Virtual Urgent Visits"
- ...le 7 days a week 8am-8pm
- ...Health
- ...Virtual Urgent Care Scheduling
- ...Sharp Health Care Consumer 2020 strategy

SHARP® Rees-Stealy Medical Group

What are we going to cover today?

3 Key Takeaways (your consultation)

- Take vital signs

- Run diagnostics

- Apply therapy

What are we going to cover today?

We are here!

Session 1:
Provider Wellness
Taking care of yourself first to be the best for your patients.

Session 2:
Virtual Presence
Look great, feel great, be great.

Session 3:
Preparing for the visit
Ensuring the right information is gathered and prepared prior to the visit.

Session 4:
Conducting the visit
Building rapport, setting the agenda and delivering **The Sharp Experience**

Session 5:
Closing the Visit/Care Coordination
Ensuring the care plan is documented and shared with the patient.

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Virtual Presence– why is this important?

- Build patient trust and confidence in virtual care experience

- Virtual visits are just as valuable as in-person visits

Look <u>GREAT</u>, feel <u>GREAT</u>, be <u>GREAT</u>!

SHARP® Rees-Stealy Medical Group

1. Test your equipment

- Test your audio and video settings
  - Test your connection PRIOR to starting sessions
  - Test your audio in video visit platform at start of day

- Check your video frame
  - Make sure you're centered in frame
  - Camera should be eye level or a touch higher
  - Looking down at your camera is not a flattering angle
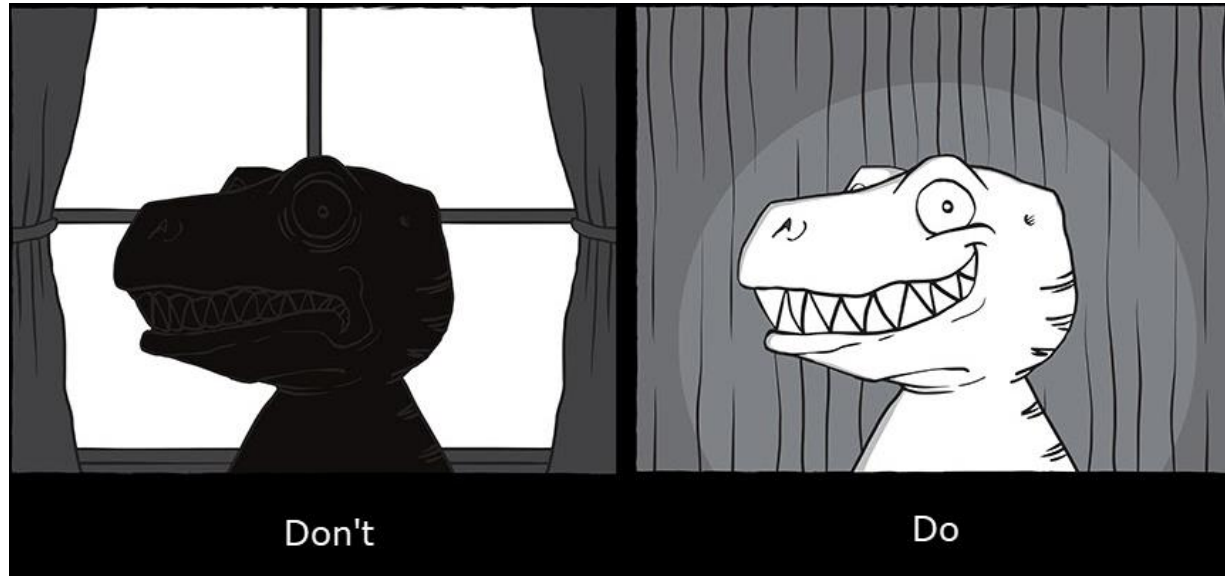
SHARP® Rees-Stealy Medical Group
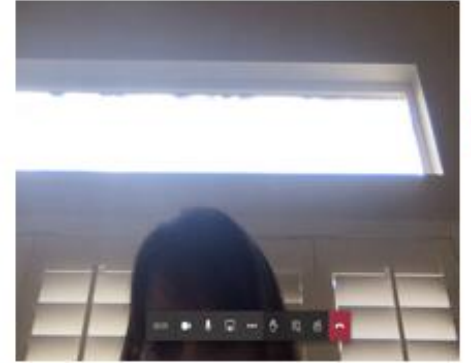
2. Provide great virtual environment

- Clean up background clutter
  - Remove personal items you don't want others to see
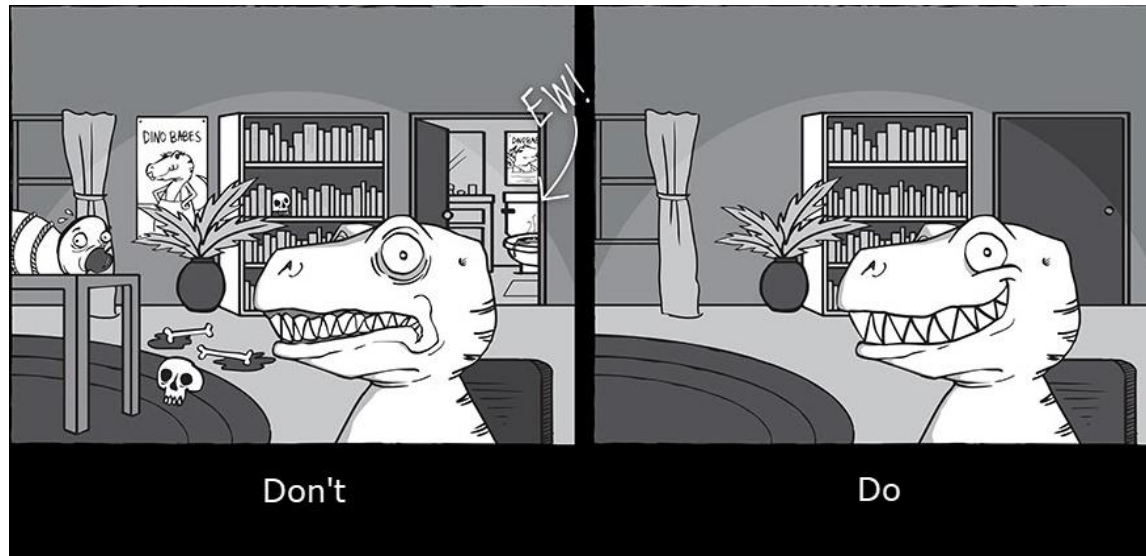
2. Provide great virtual environment

- Ensure good lighting
  - Bright lighting in the background will make it difficult to see you
  - Consider a ring light on your face

3. Professional appearance

- Wear a white coat
- Engage with the camera
  - For dual monitors, position your camera over the monitor that you are using.
  - Eye contact – look directly into the lens when speaking to the patient

2. Empower your clinical staff to help prepare for visit

- If possible, ensure all pre-visit tests have been completed
- Gather additional information - think "virtual rooming"

1. Reason for the visit?
2. Additional concerns?
3. Medication & pharmacy \ reconciliation
4. Other applicable information

Tip: clinical staff should be an extension of the doctor... TEAMWORK.

Press Ganey Question: how well the doctor and care team work together.

Team

3. Identify any magic moments – personalize the visit

- Birthdays, anniversaries, significant milestones, etc.

  Hint: you can keep track of these things in the patient's chart.

- These things make an enormous difference to patients.

What are we going to cover today?

1. Patient environment

- Encourage the patient to stay in one location, typically indoors, during the visit.

2. Authenticity: voice and tone, warm, friendly, enthusiastic

- Expert advisor to pay extra attention to your body language and demeanor.

- Be enthusiastic and if on video, smile more when appropriate.

Nothing GREAT was ever achieved without enthusiasm
Emerson

3. Set agenda with patient upfront

- Acknowledge any pre-work that has been done and build upon foundation

- Solicit all of the patient's concerns up front – reflective listening for 2 minutes (Do not to interrupt)

- Prioritize patient's concerns and set expectations (manage patient's and your agenda)

- It is OK if can't get to all concerns – but discuss a plan with the patient to address them

Press Ganey question: Concern the provider showed for the patients concerns or worries, took time to listen

1. Summarize the care plan with the patient

- Write the plan as though you are speaking to the patient, rather than to a colleague

- Have the patient repeat the care plan back to you and show empathy– does the care plan work for the patient?

  – Tip: remind the patient it is available on FMH

- Develop a closing checklist for the patient

- For complex patients, communicating the care plan via FMH is a great option

Press Ganey questions:
- Explanations of problem/condition
- Explanations of treatment –options, risks/benefits, follow up
- Efforts to include in decisions

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2. Complete all actions directly after the visit

- Enter all orders
- Send tasks for follow up actions immediately following the appointment.

Tip: try scheduling your own follow appointments. Many providers have found this very helpful.

Watch a short "how to" video

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3. Thank patient for entrusting us with their care – they have choices

- Thank the patient!

PEOPLE WILL FORGET
WHAT YOU SAID,
PEOPLE WILL FORGET
WHAT YOU DID,
BUT PEOPLE WILL
NEVER FORGET HOW
YOU MADE THEM FEEL

MAYA ANGELOU

Patient thank you letter template

Microsoft Word Document

4. Build relationships and patient loyalty even in FMH Portal messages (Sharp voice and tone guide)

- Simple
- Authentic
- Empathetic
- Reassuringly Honest

More tips and tricks

Adobe Acrobat
Document

Insurance Coverage

EXPANSION OF TELEHEALTH WITH 1135 WAIVER: Under this new waiver, Medicare can pay for office, hospital, and other visits furnished via telehealth across the country and including in patient's places of residence starting March 6, 2020.

Before: Coverage was very limited, typically rural areas
Now: Coverage is more consistent, copays, co-insurances may apply

https://www.medicare.gov/coverage/telehealth

Emerging Trends

https://www.amazon.com/dp/B07QK955LS?ref_=ods_surl_dn

https://www.macrumors.com/2018/12/06/apple-watch-ecg-no-us-region-changing/

https://www.bestbuy.com/site/tytocare-tytohome-remote-exam-kit-white/6332714.p?skuId=6332714&ref=212&loc=1&ref=212&loc=1&ds_rl=1262689&gclid=CjwKCAjwzvX7BRAeEiwAsXExoz73oOi3aqMxan-IMMj7eBOb_PV05rhqzxHVGXM_HkdoSATNli0ZoRoC5DsQAvDBwE&gclsrc=aw.ds

Polling Questions / Thought Starters

1. What do you think is the "right" percentage of telemedicine visits and in-person visits?

2. At your medical group, can physicians do an entire clinic day from home using telemedicine?

3. Have you seen an increase in patient emails (secure messages) with COVID? If so, what is your group doing about the increase?

4. What do you think (currently) is the #1 issue contributing to physician burnout? What is your organization doing about it?

5. What is your organization doing to balance the demands during COVID caused by school closures for your clinical staff (nurses, medical assistants, front desk)?

6. What is the #1 new technology you are most interested in to help you achieve your strategic goals?

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