

Welcome!

Connected Care Accelerator

CCI & CCHE

November 2, 2020



Provider & Care Team Survey Design Session



Agenda



Program Reminders



Open Discussion

Provider + Care Team Survey Design



CCI Opportunities

Program Reminders

Save the date!

Optional
Drop-in Office Hours

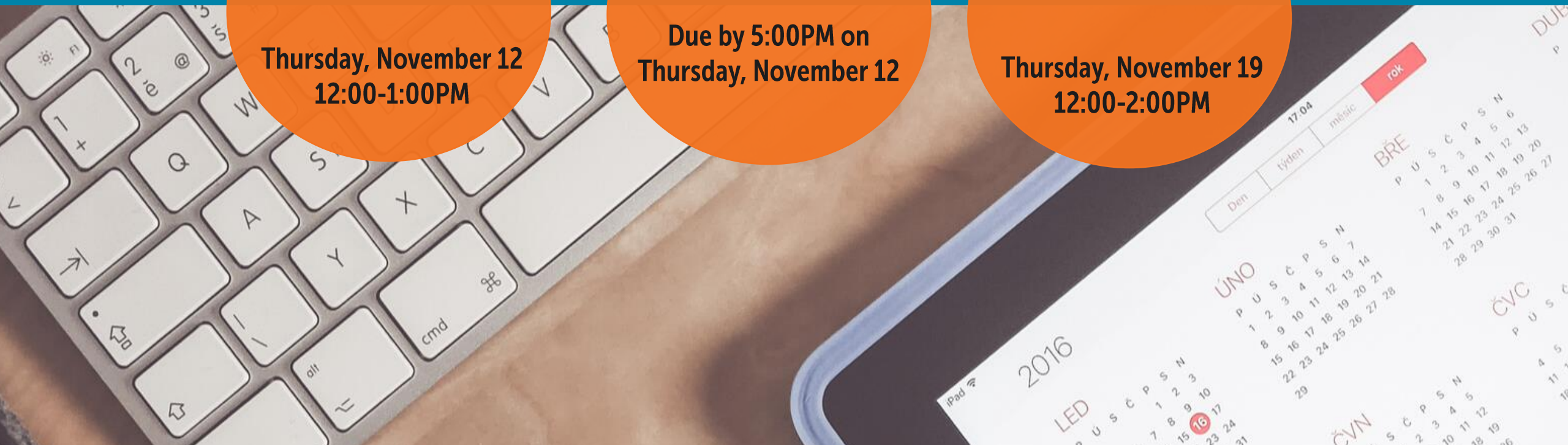
**Thursday, November 12
12:00-1:00PM**

**Homework
Assignment #3**

**Due by 5:00PM on
Thursday, November 12**

**Content
Virtual Event #2**

**Thursday, November 19
12:00-2:00PM**



Connected Care Accelerator's Innovation Learning Collaborative

Provider & Care Team Survey Design Session

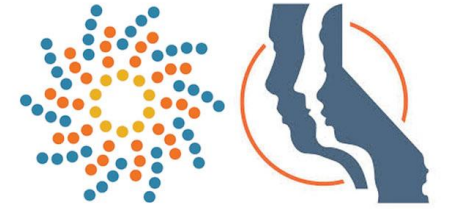
Nov 2, 2020

Agenda for today

- 1 Reminder about evaluation goals & timeline
- 2 Goals of the provider & care team survey
- 3 Introductory questions
- 4 Content of the survey
- 5 Administration of the survey
- 6 Summary & next steps

Evaluation Team

The Center for Community Health & Evaluation (CCHE)



Maggie Jones
Director



Abbie Lee
Evaluation & Learning Associate
/ Project Manager



Natasha Arora,
Evaluation & Learning
Associate / Clinical Data
Lead

Goals of the Evaluation



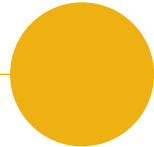
- Assess **changes in organizations' telehealth capacity**, including
 - Telehealth utilization
 - Promising practices
 - Facilitators and barriers to telehealth.
- Assess the **experience of providers and care teams in delivering telehealth**.

- Understand the contribution of the **learning collaborative** to organization's progress
- Provide **real time information to CCI** about program progress and participant experience.
- **Synthesize and communicate** results and learnings from the program to key stakeholders.

Upcoming Evaluation Activities

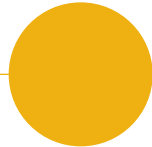


Sept/Oct 2020: Baseline
Clinical Data reporting
and sharing

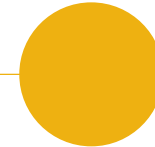


Oct/Nov 2020: Baseline Team
Interviews (In progress)

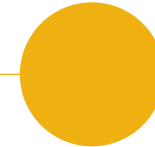
January 2021:
Provider & Care
Team Survey



March 2021: Mid-point
Clinical Data reporting
and sharing



April 2021: Mid-point
Team Interviews





Overall Goal of Staff & Provider Survey

Understand the experience of providers and care teams in delivering virtual care

- Job satisfaction
- Clinic culture and team functioning
- Telehealth implementation
- Access to care and ability to meet patient needs
- Quality of care and population health management

We want your ideas and feedback!



Goals of today's co-design session

- Share a few learnings from literature reviews and your grantee interviews
- Determine what types of questions and data from providers/care teams would be most useful to you
- Learn about most practical ways to administer a survey at your health center

What do you most want to know about telehealth from your providers and care teams?



Participate today using menti

- Go to menti.com in a browser window or on your smartphone
- Enter the code: **32 15 45 1**
- Answer the icebreaker questions you see on the screen
- Keep the window open throughout today's session – we'll be using it periodically



What do we already know?

- Most research on telemedicine acceptance and use among providers was conducted pre-COVID, under a different set of circumstances than today
- Limited research explores the roles of care team members aside from providers
- Past research under more “normal” healthcare circumstances has shown overall high levels of satisfaction with telehealth for both patients and health care organizations (Becevic 2015)



What do we already know?

Research demonstrates that the following factors predict providers' use and acceptance of telemedicine

- Perceived usefulness of the telemedicine service in improving treatment outcomes
- Perceived ease of use of the technology
- Accessibility of medical records
- Providers' belief that telemedicine would increase contact with underserved patients
- Physician self-efficacy
- Regulatory factors (e.g., reimbursement)

Citations: Chuttur 2009, Rho 2014



What do we already know?

From interviews we've conducted with this cohort, we're learning about:

- Changing role of medical assistants, health educators, volunteers, and other staff to enable successful telehealth implementation
- Importance of leadership and clinical champions in encouraging adaptation of new technology
- Varying degrees of provider and staff comfort with different types of technology
- Different implications for patient access and quality of care depending on patient populations and specialty or type of care



What do we want to learn?

Understand the experience of providers and care teams in delivering virtual care

- Job satisfaction
- Clinic culture and team functioning
- Telehealth implementation
- Access to care and ability to meet patient needs
- Quality of care and population health management

Identify factors that influenced successful adaptation to telehealth



What do we want to learn?

Job Satisfaction

- Impact of telehealth implementation on job satisfaction and stress
- Provider and care team self-efficacy
- Stress associated with change and acquiring new skills
- Stress associated with telehealth workflows
- Workload
- Personal connection with patients



What do we want to learn?

Clinic culture and team functioning

- Clinic culture around quality improvement and team-based care
- Changing roles of care team members
- Leadership engagement



What do we want to learn?

Quality of care and population health management

- Ability to successfully determine when to use telehealth
- Ability of provider to obtain information needed in a clinical encounter (e.g., visual information)
- Perceived usefulness of telehealth in achieving desired clinical outcomes
- Ability to provide preventive care and screening
- Ability to manage chronic conditions



What do we want to learn?

Access to care and ability to meet patient needs

- Overall access to care during COVID-19 pandemic
- Potential for access to care after pandemic
- Access for patients age 65+
- Access for patients experiencing homelessness
- Access for patients with limited English proficiency
- Access for rural populations
- Patient access to technology and bandwidth



What do we want to learn?

Telehealth implementation

- Ease of use of telehealth equipment/platforms
- Ease of setting up telehealth appointments
- EMR integration
- Fit of telehealth into clinic workflows
- Process standardization and planning
- Feedback and response from patients
- Patient difficulties with technology



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Who?

Providers & care team members

- Providers (primary care & behavioral health)
- MAs?
- Nurses?
- Health educators?
- Other?

Considerations

- More diversity in who is included may make it more difficult to identify common questions
- Broader representation may place more burden on your teams to complete
- Broader representation would provide more inclusive insights as to impact on different staff

To what extent? (defining the sample)



	Description	Considerations
Small sample	Each team would identify ~5 people from each role to participate in the initiative survey	Results would be aggregated across the initiative, but not provided back to the individual organizations because of small sample size
More robust sample	CCHE would provide guidance to identify a meaningful, random sample of staff/providers (size of sample would depend on organization size)	Need to determine sampling strategy; more administrative burden to define sample; could receive organizational results back
All providers/staff in certain roles	Invitation to participate would go out to all providers/staff in certain roles, no sampling.	More inclusive; no need to determine sampling strategy (less administrative burden); burden on your team may be greater

How? (best way to administer)



	Description	Considerations
Paper/in-person	CCHE would provide a PDF that could be printed to administer the survey in-person. Completed surveys would be returned to CCHE either by mail or scanning/emailing completed surveys	Teams likely have limited in-person meeting time. Administrative burden on teams to submit surveys back to CCHE.
Email – sent by teams	CCHE would provide survey language & draft email intro, and teams would distribute to the sample of people in their organization	Teams would own communication & reminders (with support from CCHE); internal email may increase response
Email – sent by CCHE	Using email addresses provided by teams, CCHE would send the survey to potential respondents directly, and manage reminders/follow-up communication	Teams would need to provide email lists of staff/providers to CCHE; CCHE could manage reminders & messaging; unknown sender may impact response rate (teams would still be asked to send a pre-email to provide context for the survey before it goes out)



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Summary & next steps



Instructions

1. Take 1-2 minutes to type your answer to the following prompts
2. Do NOT push enter until we tell you...

In the chat, please comment on

- 1 piece of advice that you have for us as we move forward with survey development
- Any outstanding questions that you have about the survey

Thank you!



Questions or additional feedback, please reach out to our team:

Natasha Arora – natasha.b.arora@kp.org

Maggie Jones – maggie.e.jones@kp.org

Abbie Lee – abbie.n.lee@kp.org

CCI Opportunities

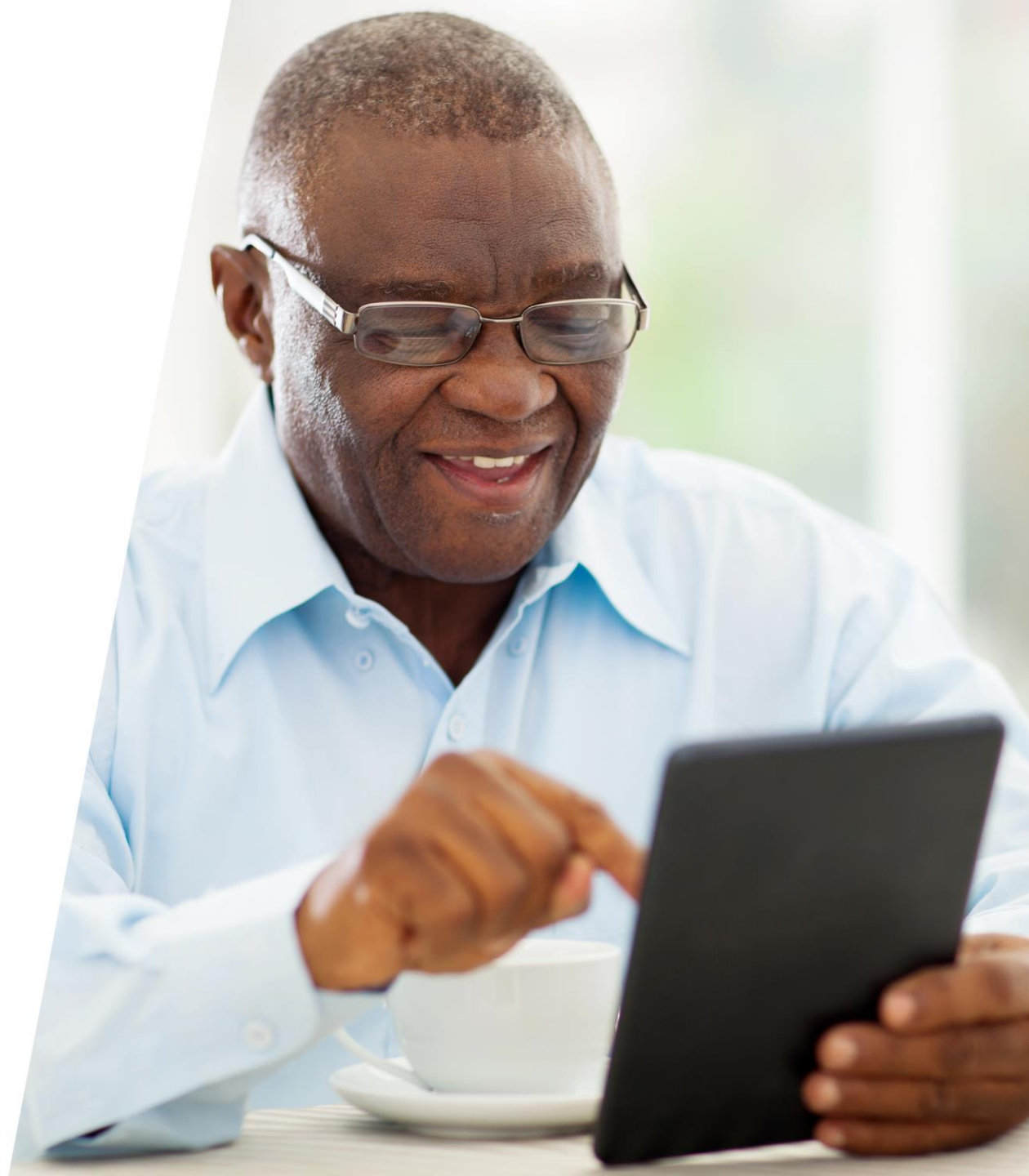
Virtual Care Innovation Network

A Community Health Collaborative
Founded by Kaiser Permanente

APPLY BY

NOVEMBER 25, 2020

careinnovations.org/virtual-care-2020



Thank you!

For questions contact:



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