

Clinicas de Salud del Pueblo

Report for Telehealth Workflows

Workflow and Improvement Gap
Analysis, Assessments, and
Recommendations

September 2018

WORKFLOW ASSESSMENTS, RECOMMENDATIONS AND GAP ANALYSIS

Goals

- Review current state of the telepsychiatry workflow
- Evaluate and discuss barriers specific to these metrics, and their appropriate documentation for reporting purposes.
- Engage clinic staff and identify gaps in workflow process, responsibilities, and resources.
- Analyze potential solutions and optimizations.

Telepsychiatry Workflow

Themes

Clinicas de Salud del Pueblo (Clinicas) is currently conducting telehealth visits at 4 of their sites, full time. The Clinicas telehealth program has partnered with 3 organizations, University of California San Diego (UCSD), University of California Riverside (UCR), and TeleMed2U (TM2U). The patient population is largely Spanish speaking. However, not all 3 telehealth partners have specialists who speak Spanish. As a result, Telehealth technicians (Telehealth tech) at Clinicas assist with translation for most telepsychiatry visits. There are also inconsistencies in process among the 4 telehealth sites. Telehealth techs, medical assistants (MA) and front desk staff complete different tasks at different sites such as reminder calls, patient scheduling, and rooming. A large area of inconsistency is among the telehealth partners. Specifically, UCSD is not writing medication prescriptions and only conducting follow-up psychiatry visits. Dr. Camacho, Director of Behavioral Health, was left with the responsibility of completing the initial evaluation for those patients to be scheduled with UCSD. Scheduling in a timely manner became difficult with just one provider completing the initial assessments. Clinicas recognized these bottle necks in the process and is currently negotiating a new contract with UCSD to include prescriptions and initial assessments. Lastly, primary care providers (PCP) are ordering referrals to Dr. Camacho instead of ordering the appropriate referral for either therapy or telepsychiatry. Clinicas would like to have complex patients referred to therapy first.

Recommendations

- Train PCPs to order appropriate referral, therapy or telepsychiatry.
- Assign patient representative (PR) to call telepsychiatry no-show patients.
- PR to complete reminder calls for all appointments, including telepsychiatry.
- Hire, contract or utilize telephone translation services for Spanish speaking patients.
- Train and utilize front desk staff to schedule all telepsychiatry appointments.
- Complete contract negotiations with UCSD to include medications prescribing and initial assessments.

Gap Analysis Matrix for Telepsychiatry

Current State	Impact	EOI*	Gap	Recommendations
PCPs ordering referral for Dr. Camacho.	High	Mod	Dr. Camacho has a limited scheduled and cannot see all patients that are referred to him.	<ul style="list-style-type: none"> • Train PCP to order referral for therapy or telepsychiatry, as appropriate. • Complete contract renewal with UCSD to include initial assessments.
Telehealth techs are needed for translations during the telepsychiatry visit.	High	Mod	Telehealth techs are unable to assist the next patient while translating for the telehealth specialist.	<ul style="list-style-type: none"> • Contract with a translation service or utilize a telephone translation service to assist patients and specialists. • Indicate if a patient needs an interpreter in patient chart.
Inconsistency in scheduling telehealth visits.	Med	Mod	Differences in staff at each site and lack of training.	<ul style="list-style-type: none"> • Train front desk staff to schedule both initial telehealth appointment and all follow-ups during check-out.
Patients that do not arrive for their telepsychiatry appointments are not called to reschedule.	Med	Easy	A PR is not assigned to follow-up with telehealth patients.	<ul style="list-style-type: none"> • Assign a PR to call telehealth no-show patients. • Determine no-show policy for telehealth patients. Refer patient to case manager after 2 no-show telehealth appointments and advise patient to come into the office. • Have PR conduct reminder calls for the next day's telehealth appointments.

*Ease of Implementation