



MWAETC Implementing Telemedicine Webinar Series

Session #4: Technology

John Scott, MD, MSc, FIDSA
Medical Director, Digital Health
UW Medicine

Last Updated: Jul 10, 2020

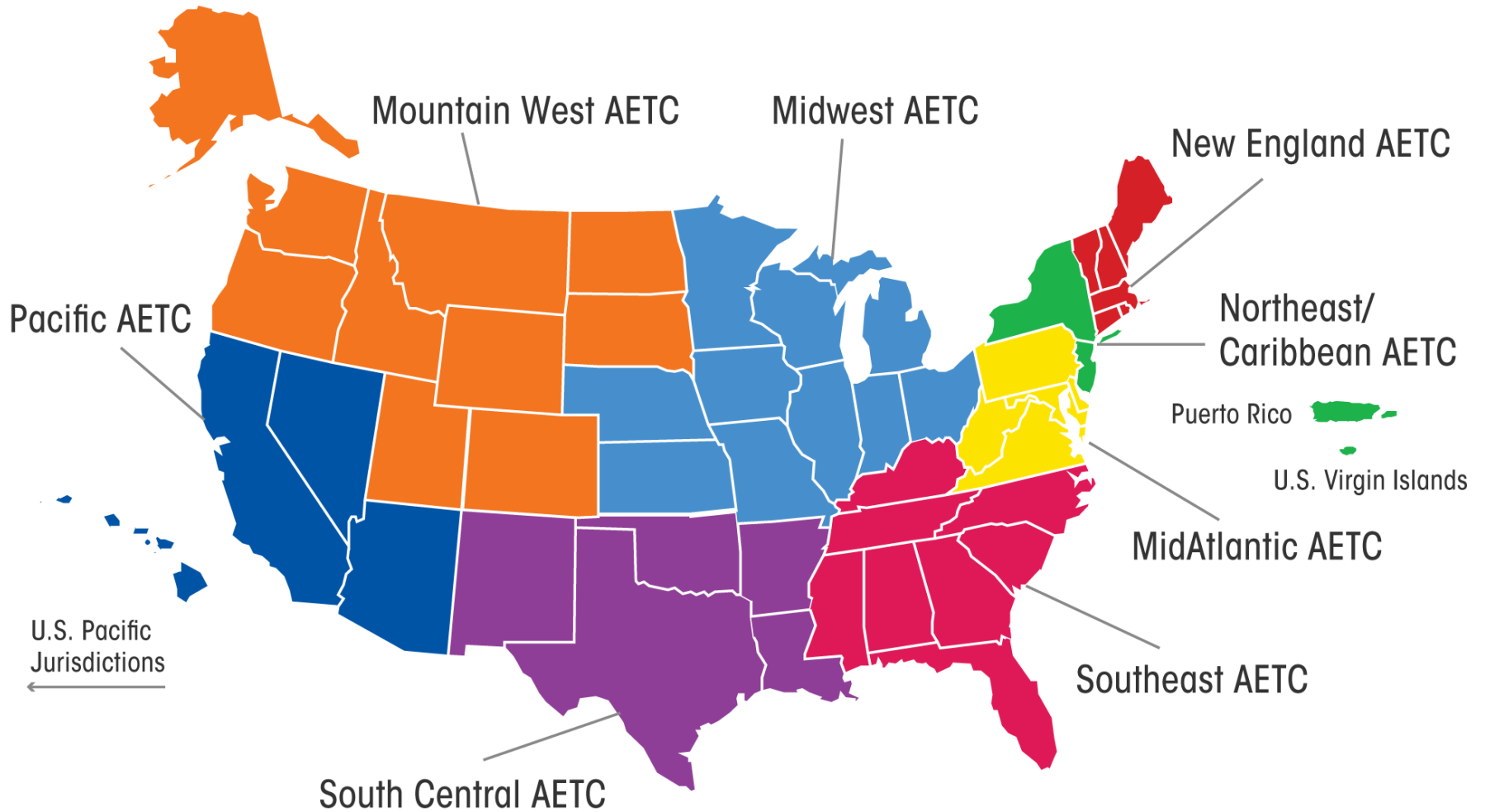
Acknowledgement

- This telemedicine webinar series is being supported with federal resources from the Coronavirus Aid, Relief and Economic Security Act, otherwise known as the CARES-ACT and the HRSA Ryan White Program.

Logistics

- This webinar is being recorded.
- All participant microphones are muted.
- Type in questions or comments through the Q&A box to **Everyone** or to **Laurie Sylla**. Laurie Sylla, our director, will be compiling the questions and sharing them with our presenter during the Q&A portion of the program. Please do not submit your questions directly to the presenter. He will be not be monitoring the Q&A box.
- After today's session you will receive an email with a link to an evaluation for today's session- we would appreciate you filling this out, and another link to a portal where you will be able to submit questions for an FAQ that we will post on our website, or request an individualized technical assistance session with our presenter and his team members.

AETC Regional Training Centers



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**SESSION #4:
TELEHEALTH TECHNOLOGY**

**John Scott, MD, MSc, FIDSA
Medical Director, Digital Health
UW Medicine**

Disclosures

In the last year, I have served as a consultant to Gilead Sciences and Premera.

Format for webinar and office hours

- Theme of the week
 - Clinical Best Practices (Jul 20)
 - Miscellaneous (Jul 27)
- 15-20 min didactic
- Q&A for remaining time: Please type in questions into Q&A now!
- Posting of recording and Q&A to AETC website
- Request 15 min block for technical assistance

Objectives

- To describe an evaluation process for telemedicine technology
- To list elements of a successful technology platform

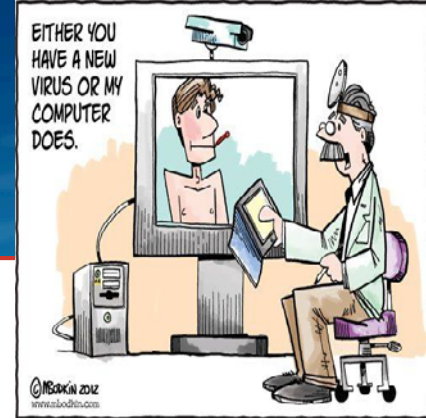
Who are the players?

Providers

- Zipnosis, **AmericanWell**, TelaDoc, DocOnDemand, 98.6, MDLive, SOC Telemed, CirrusMD, PlushCare, HelloMD
- Amazon Care
- PushDoctor, Docly, accuRx -UK
- Instant Consult, Doctoroo, iCliniq - Australia

Platforms

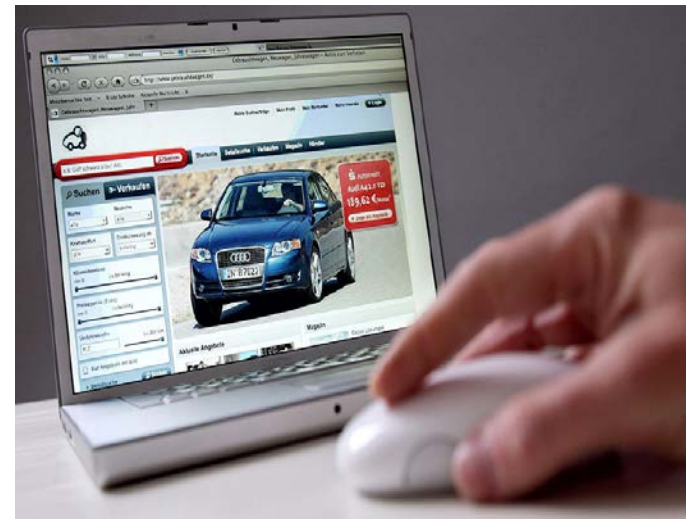
- Cisco, MS Teams, **Zoom**, **InTouch**, GlobalMed, Iron Bow, Vsee, Doxy.me, SwyMed, Otto, Mend, **BlueJeans**, **Skype**, Insight, Philips, GoToMeeting, Honeywell, TytoCare, AliveCor, **Vidyo**, **WebEx**
- Facetime, WhatsApp, Doximity, Google Hangouts/Meet



Note: highlighted vendors were the most popular platforms in a survey of 20 AMCs I did in April 2020, a non-scientific convenience sample!

What's important in technology?

- Ease of use
- Reliability
- Security/privacy
- Cost
- Function in low bandwidth situations
- EMR integration
- Screen share function
- Multipoint connections
- Mobile app
- Other uses/applications



Please check out Telehealth Technology Assessment Resource Center (TTAC):
<https://www.telehealthresourcecenter.org/ttac/?Center=TTAC>

Sample Rubric for Evaluation of a Vendor

Tech Needs	Vendor A	Vendor B	Vendor C
Simple, easy to use	+++ (comments)	++	+
Reliability	++	+++	++++
Security/privacy	++++	++	+
Cost	++	+++	++++
Function in low bandwidth settings	++	++	+++
EMR integration	++	++	+++
Share screen functionality	++	+++	+
Multipoint connections?	++	++	++++
Mobile app	++++	++	-
Compatible with other uses, like regular meetings	++++	+	-

Other Tips and Suggestions

- Don't overspend on technology!
- Try to use as few vendors and platforms as possible, leverage what you have, ask for improvements
- Don't get locked into long-term contracts
- Does your EMR offer good enough technology?
- How good is the vendor with relationship (ask around)?

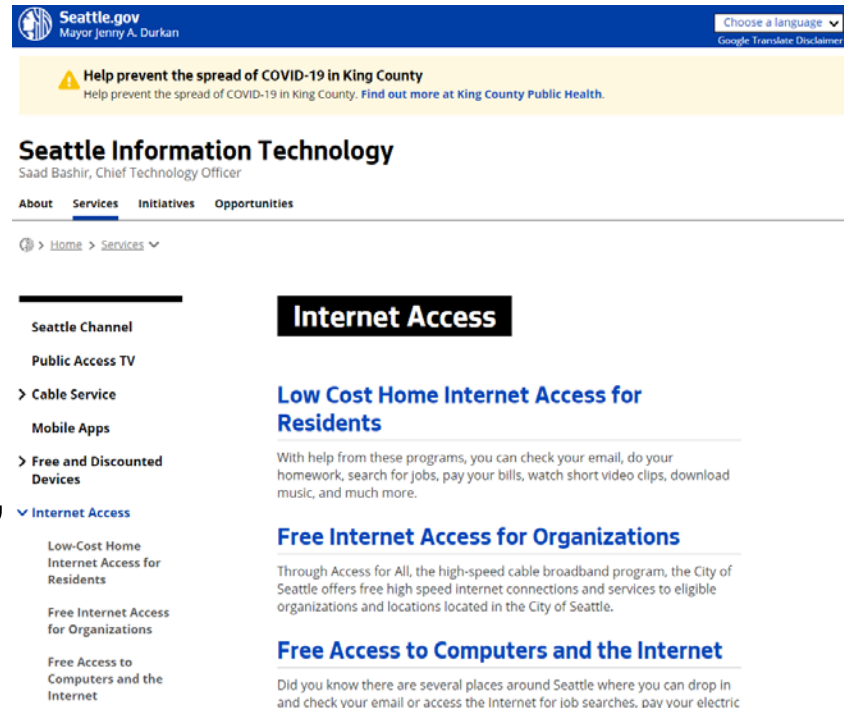


Technical Requirements for Providers

- **Internet Speed:** You need at least 1.2 mbps upload/download speed if using a laptop and 600 kbps if using a mobile device. Please do a speed test by going here: <https://www.speedtest.net/>.
- **Device:** If using a PC, you should have at 2GHz processor with 4GB of RAM. A mobile device should have a 1 GHz processor. Your device should have a screen that is large enough to allow you to clearly view the patient.
- **Device Set Up & Configuration:** Ideally, you would have two monitors connected to either a desktop or laptop. One screen to display video of patient, the other for the EMR.
 - If dual screens are not possible, a 21"-23" screen which would allow for both video and EMR on same screen.
 - Otherwise, a standard sized screen by itself or paired with a mobile device running video can be used. Larger screen is preferred.

Working in Low Bandwidth, Low Tech Access Scenarios

- There are many new programs for low cost or free devices and broadband during COVID19
 - Local government, Medicaid, Internet service providers
- Many students have received tablets and laptops for schoolwork, could they be used for a video visit?
- Kiosk or hub and spoke model
- Piggyback on other infrastructure

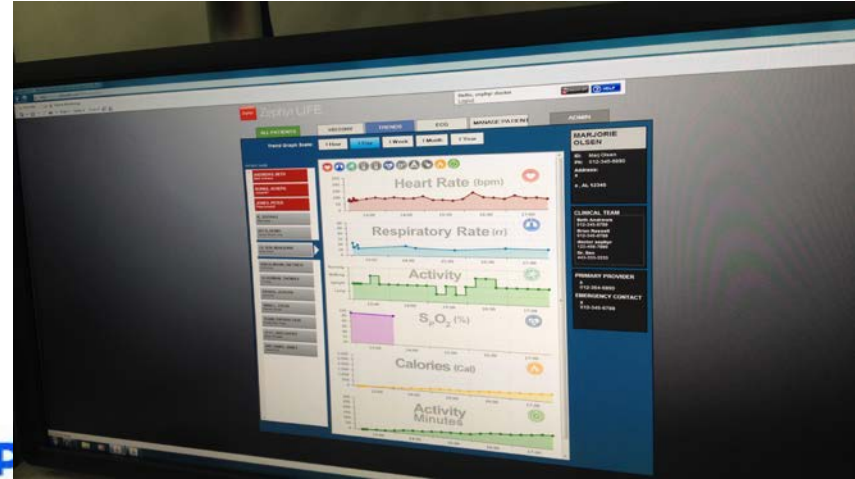


The screenshot shows the Seattle Information Technology website. At the top, there is a blue header with the Seattle.gov logo and Mayor Jenny A. Durkan's name. Below the header is a yellow banner with a warning icon and the text "Help prevent the spread of COVID-19 in King County". The main content area is titled "Seattle Information Technology" and lists various services. A sidebar on the left contains a navigation menu with items like "Seattle Channel", "Public Access TV", "Cable Service", "Mobile Apps", "Free and Discounted Devices", and "Internet Access". The "Internet Access" section is expanded, showing sub-items: "Low-Cost Home Internet Access for Residents", "Free Internet Access for Organizations", and "Free Access to Computers and the Internet". The main content area features a "Internet Access" heading followed by three sub-sections: "Low Cost Home Internet Access for Residents", "Free Internet Access for Organizations", and "Free Access to Computers and the Internet". Each sub-section includes a brief description of the service.

<https://www.seattle.gov/tech/services/internet-access>; <https://www.phila.gov/2020-03-25-staying-connected-during-covid-19/>



Remote Patient Monitoring



Communication Hub Weight Scale BP Monitor Pulse Ox ECG/Rhythm Strip Recorder

Plugged Patients					
Name	Room	Device	Status	Device	Status
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
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Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring

Patients with Plugged Device					
Name	Room	Device	Status	Device	Status
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
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Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring
Carroll, Ann	423 104 107	201201014	Monitoring	Monitoring	Monitoring

Digital Divide is Real

- People of color and limited English proficiency have shorter visits
- Providers have more anxiety about interacting with patients of color
- Providers commit microaggressions towards patients
- Seeing patient's home environment is known to trigger inaccurate stereotypes, prime implicit biases, and affect provider behavior
- We need to acknowledge, reach out to communities of color and LEP and work towards common solutions

References

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Questions?

Reminder

- Evaluation
- Submit Additional Questions
- Request Individualized Technical Assistance

Session #5: Clinical Best Practices for Telemedicine

Monday, July 20, 2020

9:30 AM (AKDT), 10:30 (PDT), 11:30 (MDT), 12:30 (CDT)

REGISTER HERE

https://mwaetc.org/event?ER_ID=39113

Implementing Telemedicine Webinar Schedule

Session #6: Telemedicine Q&A

Monday, July 27, 2020; 9:30 AM (AKDT), 10:30 (PDT), 11:30 (MDT), 12:30 (CDT)

Acknowledgement

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