



11:00 a.m. Patient experience story with telehealth

Linda Radach from Washington Advocates for Patient Safety started the meeting with her experience with telehealth. She felt the experience was positive and raised some concerns including:

- Need to have an advocate present with elderly or patient with cognitive limitations
- Traditional assessment methods may not be effective
- We underappreciate the impact of poor technology on the experience

A discussion followed flowing into the next topic

11:15 a.m. UW MHA fall project on telehealth and patient safety

Project description: *Telehealth and Patient Safety. As state spending on health care continues to increase, policymakers look for ways to ensure access to care in a cost-effective manner that improves health for their constituents. Enhancing and increasing access to health care services through telehealth is widely viewed as one strategy to help address workforce shortages and reach patients in rural and underserved areas. The COVID-19 pandemic has dramatically increased telehealth's use. Telehealth goes by many synonyms: telemedicine, connected health, eHealth, mHealth, etc. Telehealth tools include diagnosis, health monitoring, and patient communication; the traditional model of episodic and hospital-based care is being replaced by a patient-centric approach, with patients constantly connected to their health care providers. "Televisits" inherently raise questions about quality and safety. Telemedicine has evolved from simple telephone communications to more complex algorithmic-driven smartphone-based applications. Many developers lack medical training, and some fail to involve clinicians in the development or implementation of mobile applications. Many applications are also marketed directly to consumers without any formal safety or efficacy testing.*

What are the main quality and safety concerns raised by increased use of telehealth? What are the current rules dealing with quality and safety issues in telehealth, in state or federal regulations or accreditation standards and how effective are they? Identify best practices for assuring the quality and safety of telehealth services and make recommendations regarding policy initiatives to do so.

Group discussed the project and offered suggestions to help focus the students. These include:

- Patients home setting and the impact on privacy, security
- The role of technology on the experience – connectivity is an issue
- Providers can often be interrupted
- Challenge of doing physical assessments – including the training of and limitations to the patient being an extension of the physician
- Connectivity and security of data
- Role of advocates

Discussed challenges of patient conveying correct (or not) information/data (temp, weight, HR, etc.)

The group offered research help:

- Contact institutions and interview providers for real world experiences
- Io offered to talk with them about the patient advocacy aspects. make the connections if they contact her. She also recommended SIDM and will make the contacts there. Steve will pass on Io's contact info to the students.
- AHRQ, PSNET

11:15 a.m. Workplan update

KP educational series

- Had call with KP. The educational series would include:
 1. Provider education, get WSMA involved. **To-do: contact Jessica Martinson (Steve)**
 2. SureNet, how test results are recorded and acted upon in 2 or 3 webinars
 - Overview and why to SureNet
 - Targeted to IT and how to implement. **To-do: contact state CMIO's group with Jeff Clark. (Randy)**
 - Targeted to users of system.
 3. Patient education and preparation tools

Next steps:

1. **Steve will provide MHA students with information discussed including Io's contact information. Io will wait to hear from them.**
2. **Determine next steps and dates with KP. (Steve and Trish)**
3. **Contact Jessica Martinson at WSMA about participating with WSHA & WPSC on the provider education webinar. (Steve)**
4. **Contact state CMIO group with Jeff Clark to discuss KP SureNet webinar and market it to group**