WASHINGTON STATE
UNIVERSITY

Telehealth in North Central Washington

North Central Accountable Community of Health (NCACH)

Project Team

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Overview

- Project Methods
- Results
- Recommendations and Discussion

Methods (1/3)

Semi-Structured Interviews

- Initial list over of >300 organizations
- 4 priority groups
- 3 waves of invitations
- Interviews conducted over Zoom
- 28 participants

Libraries: Key Informant Interview and Survey

- Regional library representative interviewed
- Survey distributed to libraries via email
- 18 respondents (about half of libraries in study region)

Methods (2/3)

Group Concept Mapping: A multi-step participatory method

- Brainstorm approaches to providing or accessing telehealth in their community
- Sort all collected ideas into groups
- Rate ideas on three criteria

  Feasibility Impact Cost

- Statistical analysis of the grouping and rating
- Generates thematic groupings of ideas
- Allows for identification of the ideas that were rated most feasible and most impactful

Methods (3/3)

End-User Survey

- Survey of community members
- Shared via email and social media
- Both English and Spanish versions
- 493 English survey respondents
- 133 Spanish survey respondents

Secondary Data Analysis

- Used existing data sets
- Census data
- CMS
- Allows for zip code-specific data

Results

Semi-Structured Interviews

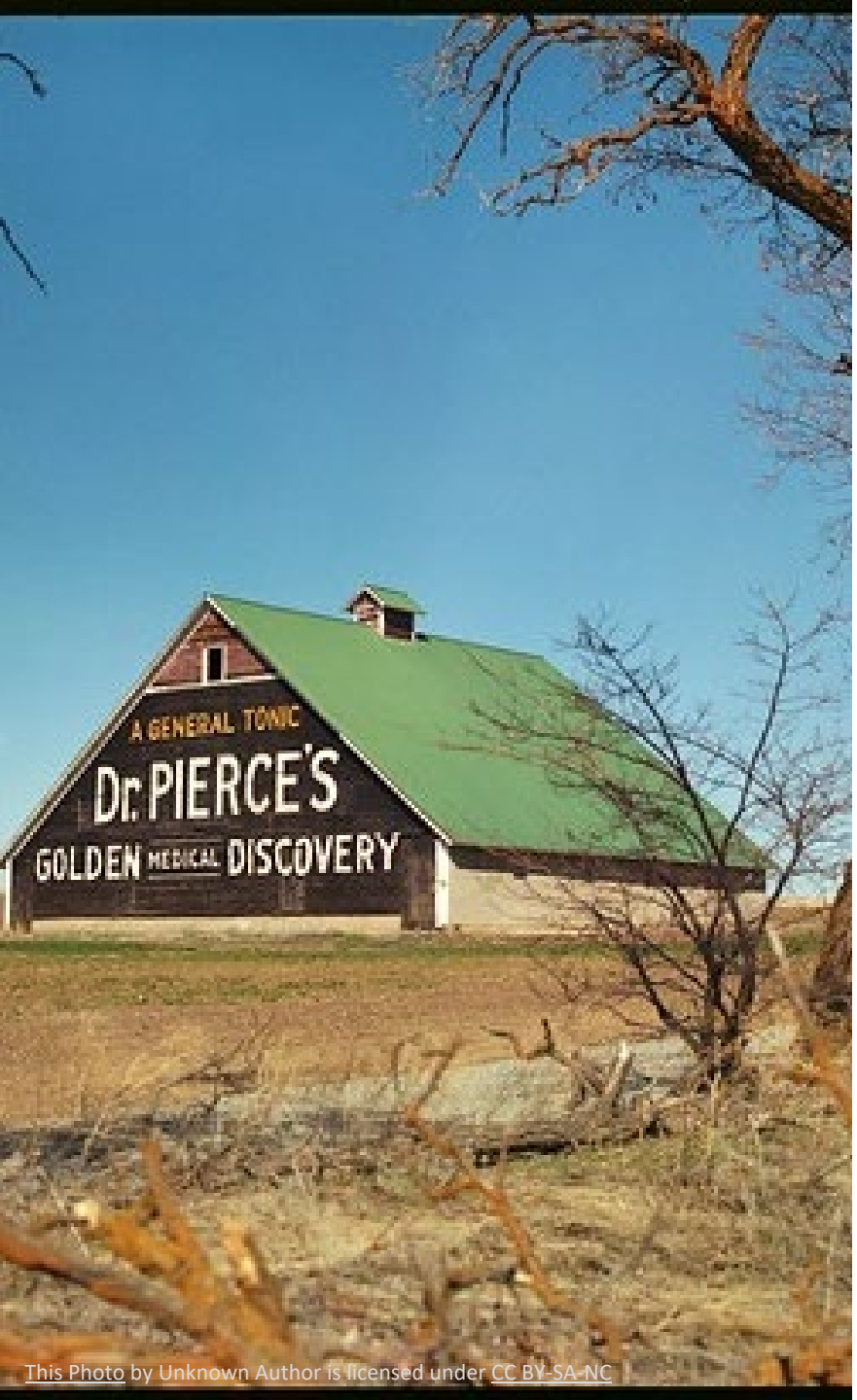
Type	Number
Healthcare-related organizations	4
City governments	7
Non-government organizations	16
Public Utility District	1

Telehealth is Needed

Increases access to medical care

- Distance to services
- Lack of specialists
- Not a panacea

Government Employee	"We need, we want, we deserve a telehealth service."



Challenges to Telehealth

- Broadband access
- Technology
  - Access and knowledge
- Security and trust
- Outreach and awareness

Okanogan Participant

"There are still connectivity issues in our area, though central WA has one of the better systems in the country."

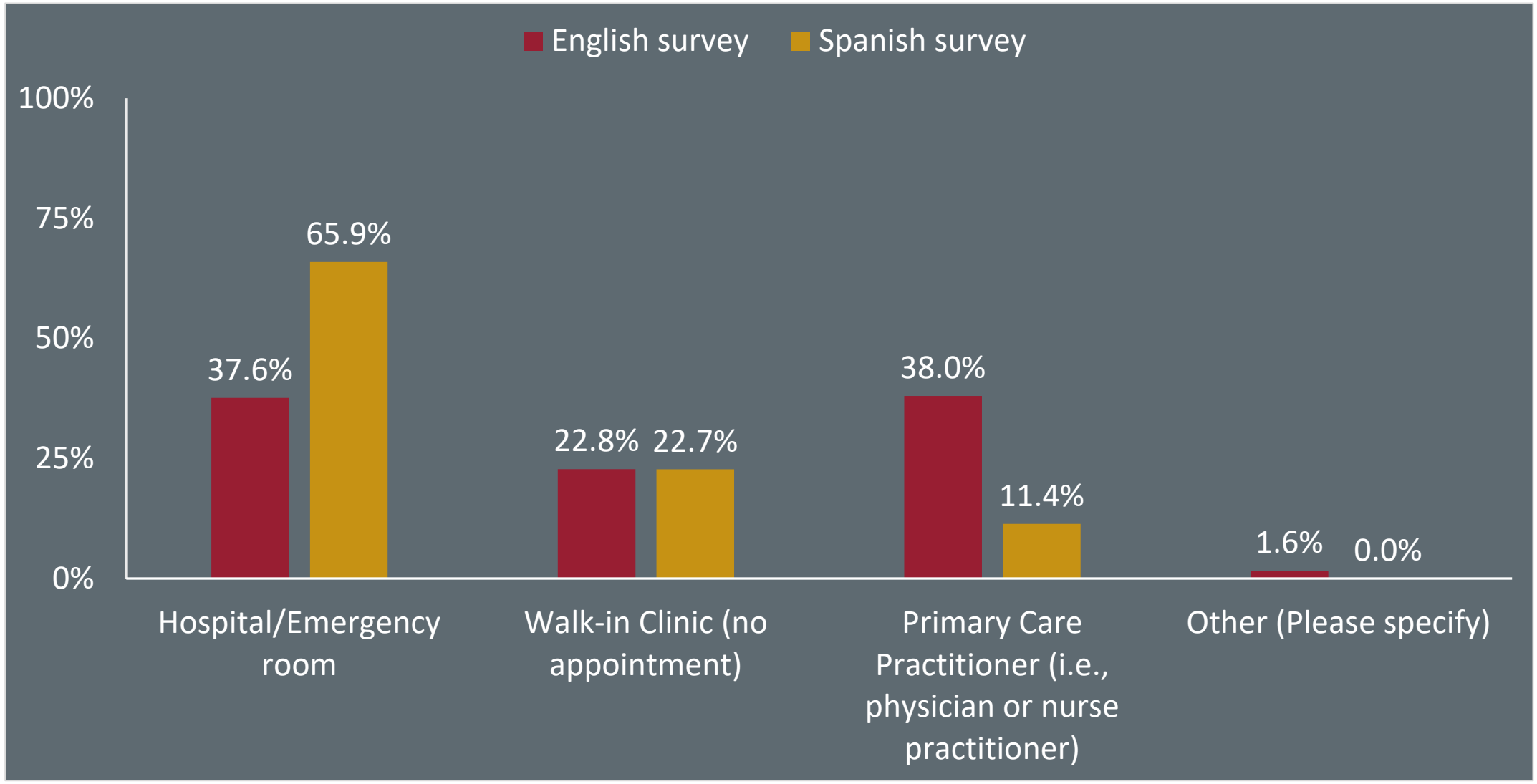
End-user Survey

Number of respondents English survey (Spanish survey)
493 (133)
Total: 626

County of residence	Number of respondents
Chelan	45.8% (45.9%)
Douglas	25.6% (27.1%)
Okanogan	9.5% (2.3%)
Grant	15.4% (24.8%)
I live outside of these counties	3.6% (0.0%)

- Respondents tended to be younger
- Respondents tended to be more affluent
- Some differences between respondents to English and Spanish surveys

Usual Source of Medical Care

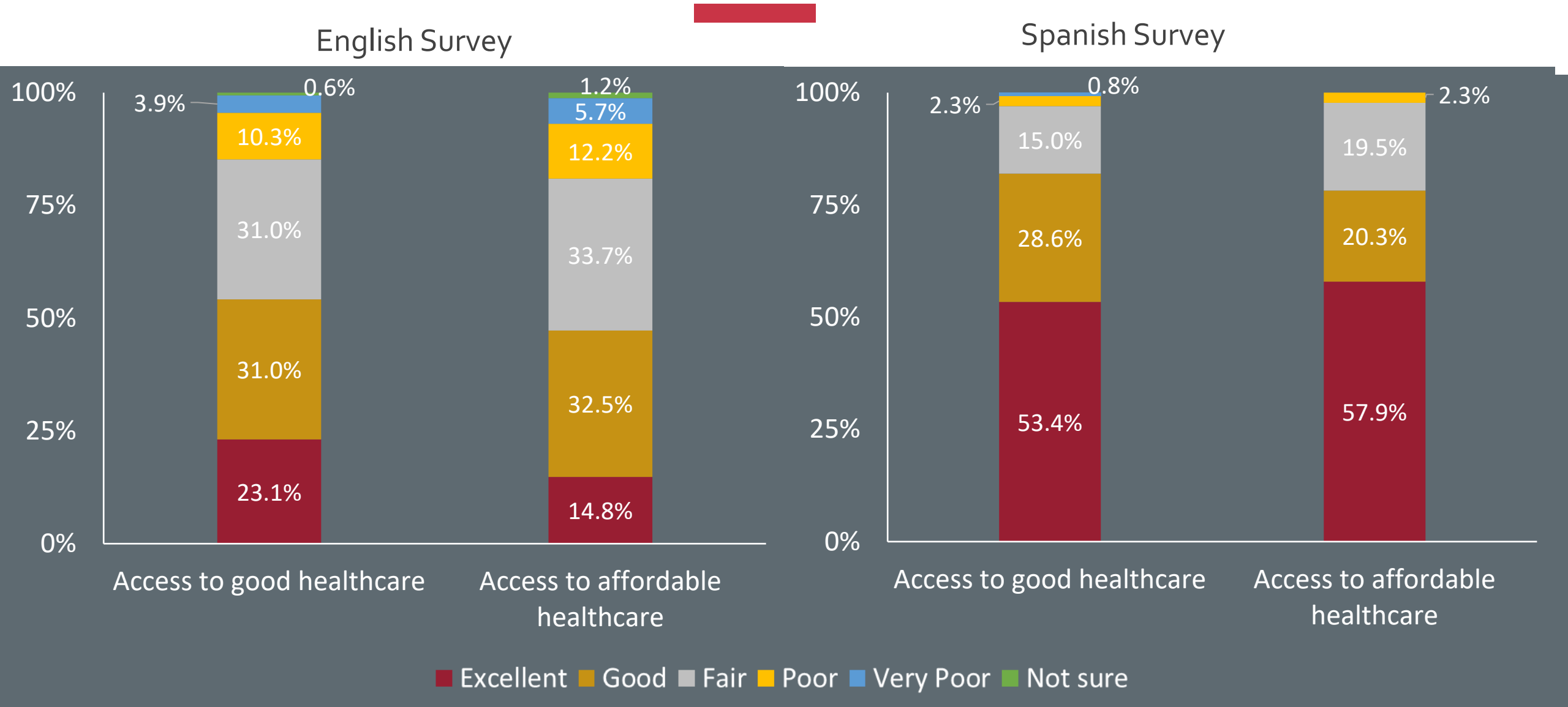


Perceptions of Current Health Care Access

- Majority of respondents rate current access to good quality and affordable health care positively.
- Many respondents feel that they there are not enough specialists or primary care physicians in their area
  - Behavioral/Emotional Health
  - Cardiovascular
- Many respondents have a health care need that is hard to get care for in their community

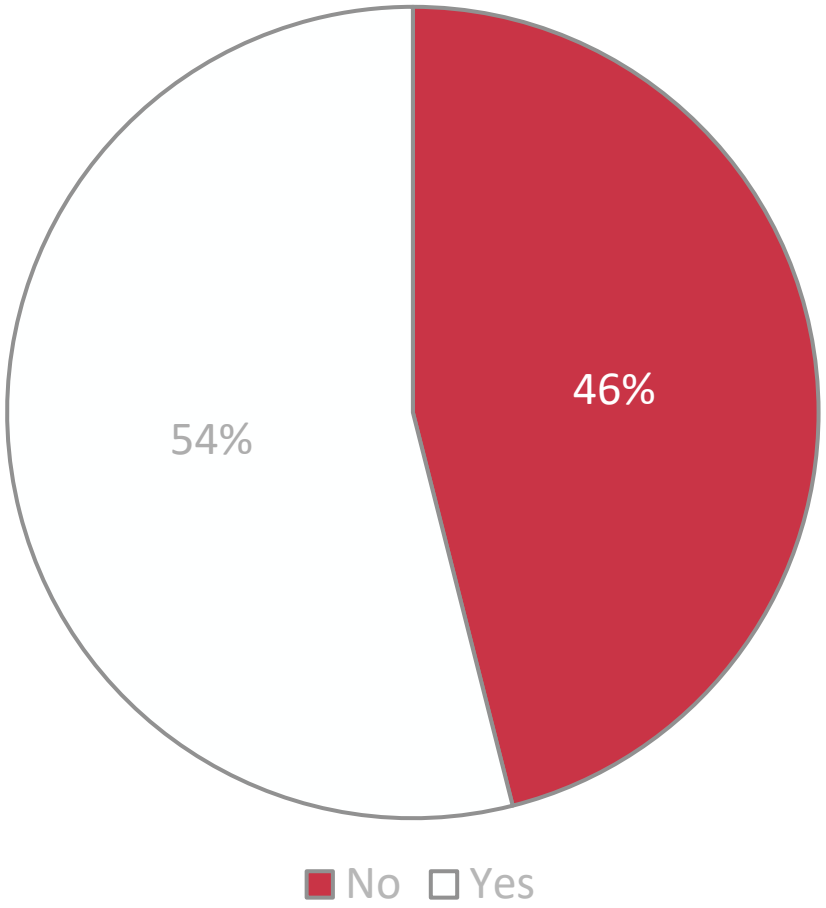
End-user survey

Perceptions of Access to Good and Affordable Healthcare

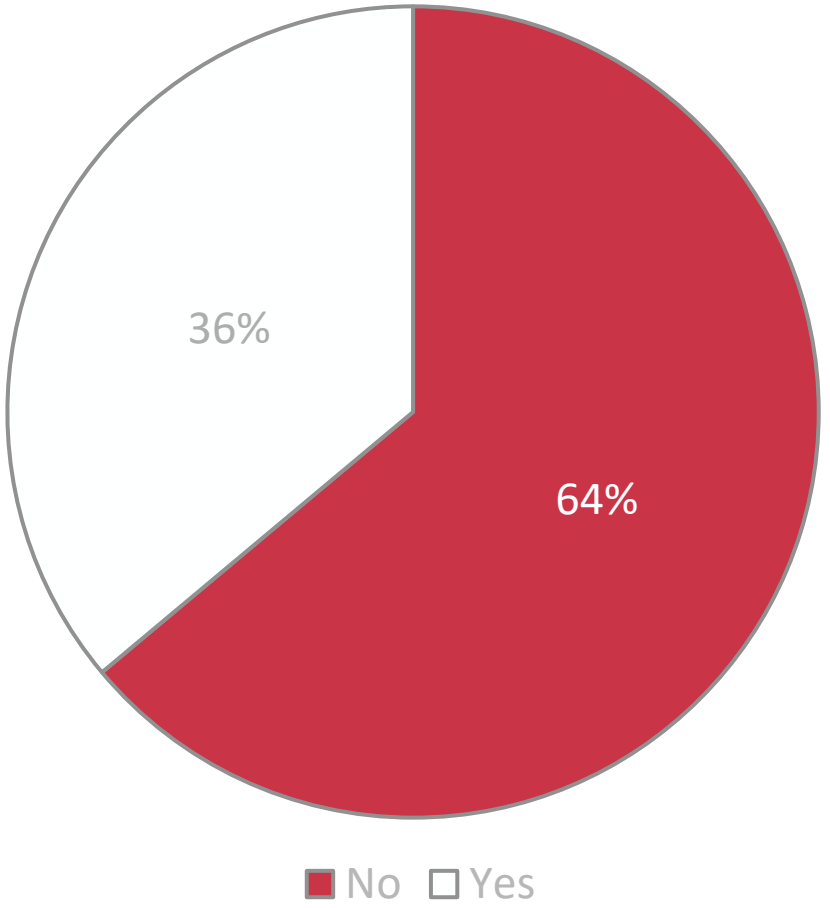


People with Healthcare Needs that have Difficulty Finding Care

English Survey



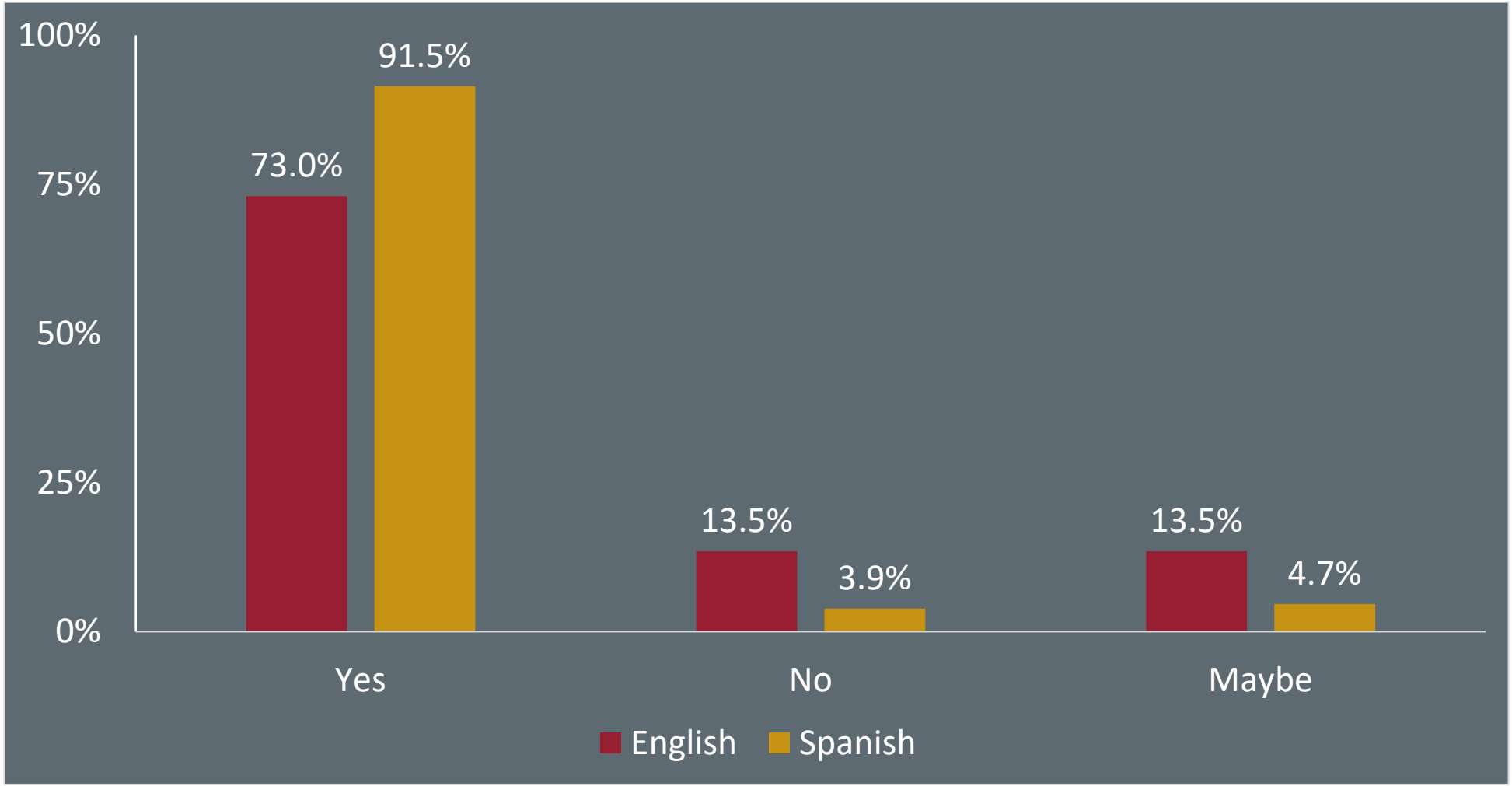
Spanish Survey



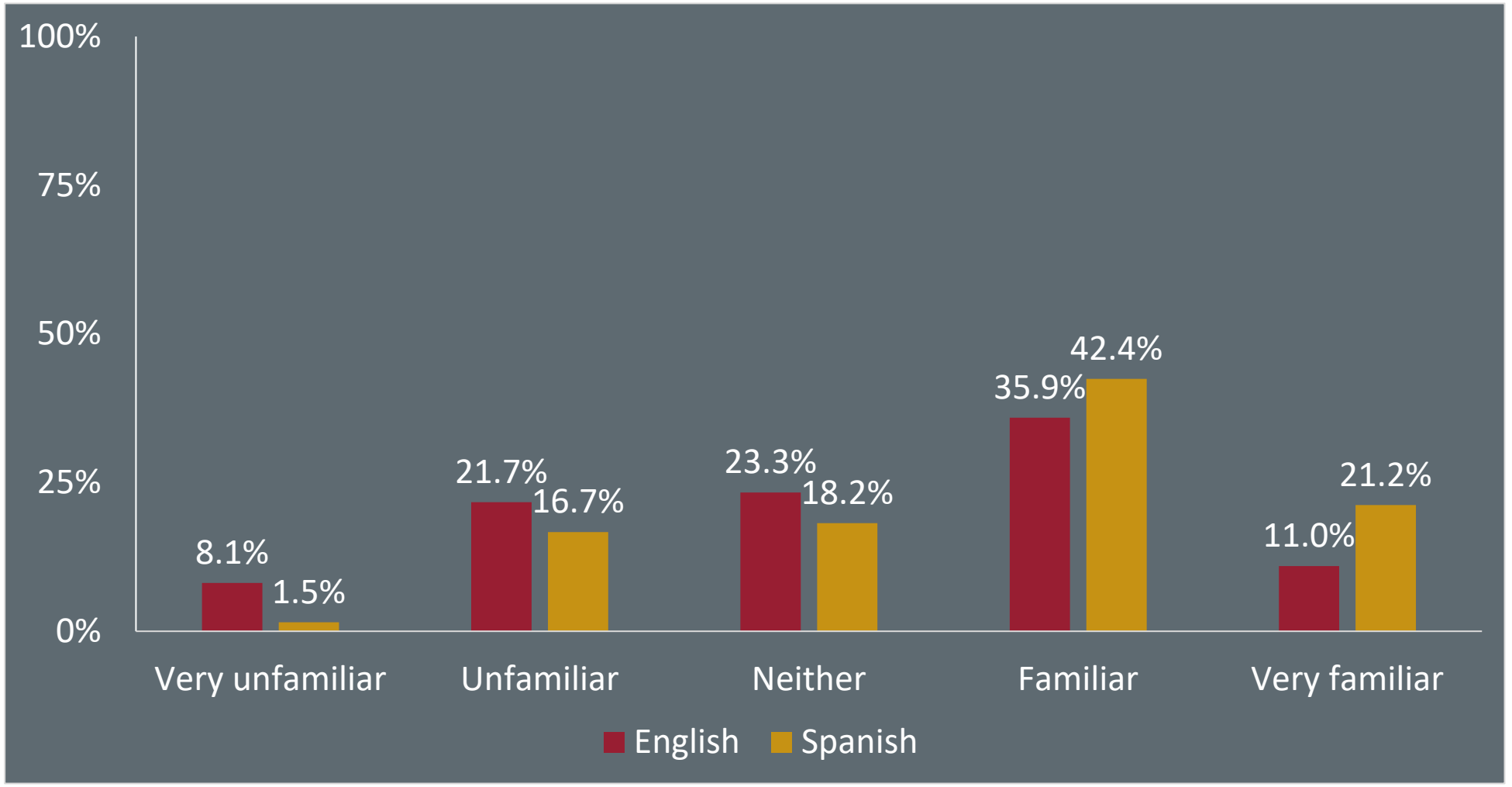
Perceptions of Telehealth Services

- Most participants think that expanding telehealth will meet healthcare needs in their community
- Most participants are familiar with telehealth, have used it in the past and are willing to use it in the future
- The most preferred types of telehealth are video appointments and phone appointments
- Concerns with telehealth expansion include:
  - Internet access and reliability
  - Privacy
  - Technology access
  - Quality of care

Will expanded telehealth options help meet healthcare needs in your community?



Familiarity with Telehealth

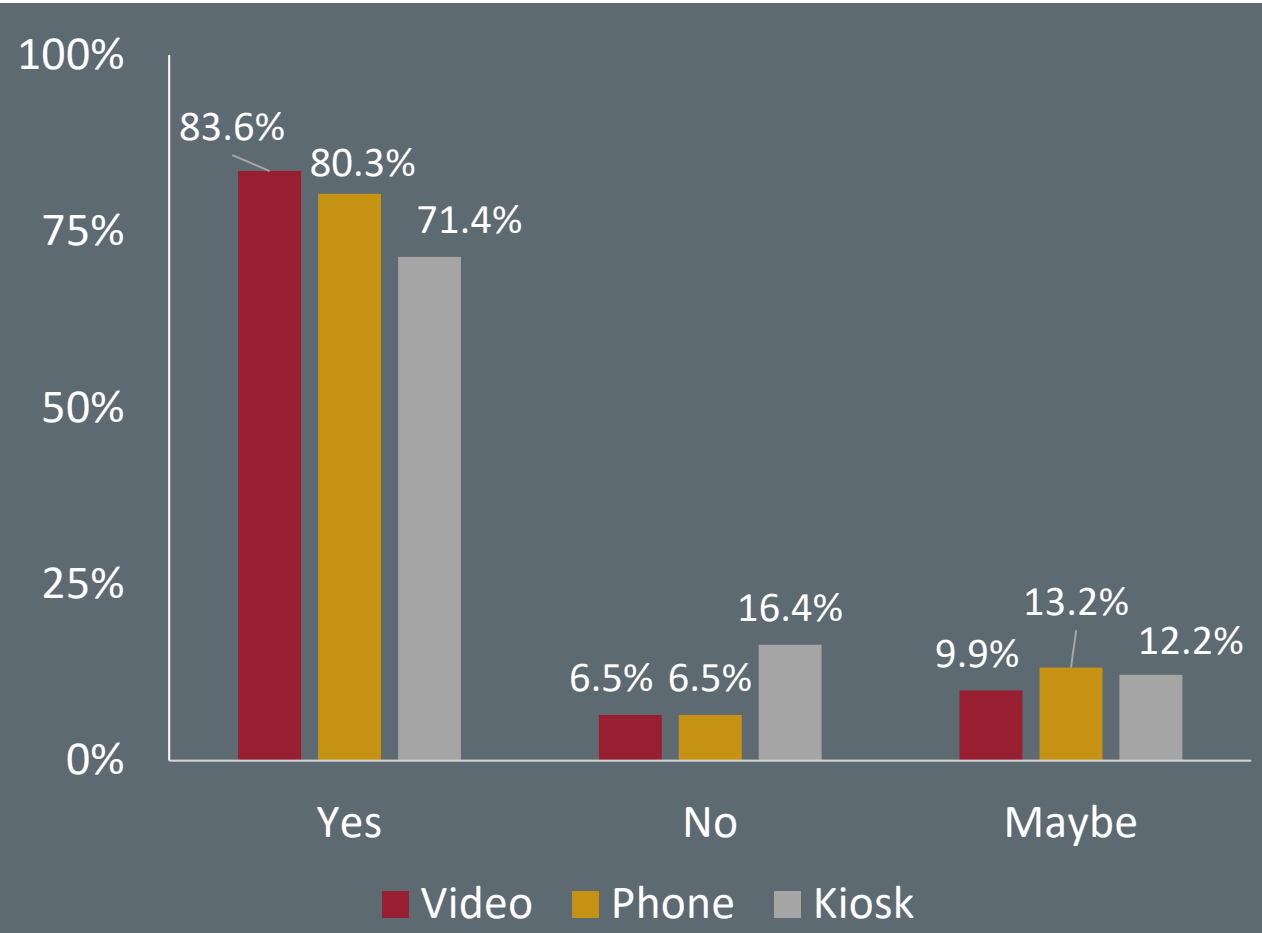


Use of Telehealth Before and During COVID-19

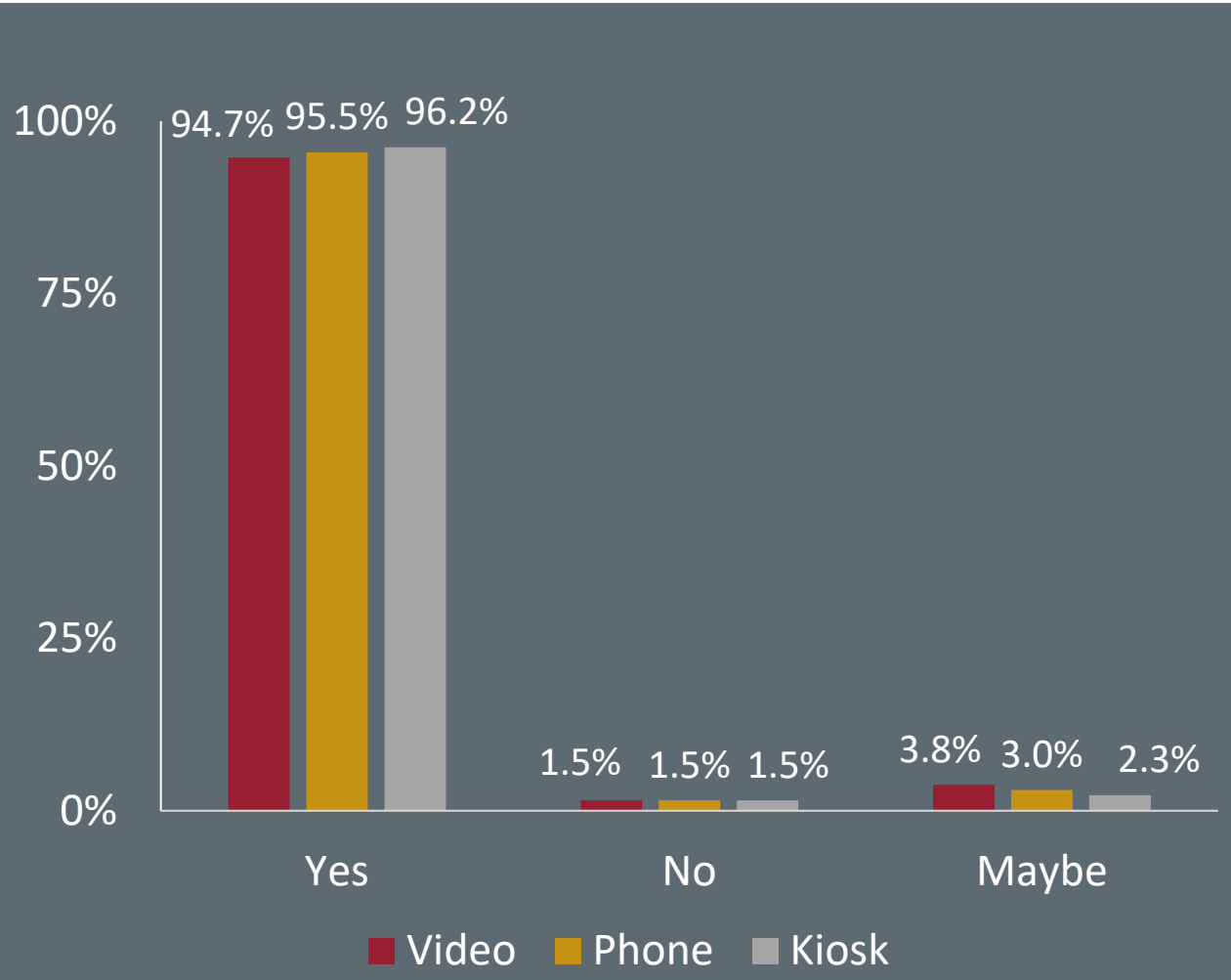
Service Type	Prior to COVID	During COVID
Online Video Appointment	36.3% (49.6%)	48.7% (54.1%)
Phone Appointment	33.3% (31.6%)	49.3% (66.9%)
Tele-cart	28.2% (38.3%)	40.2% (60.2%)
Mobile Health Clinic	35.3% (32.3%)	31.8% (68.4%)
Self-service kiosk	30.0% (36.8%)	29.6% (60.2%)
Telehealth technology	28.6% (38.3%)	37.3% (57.1%)
Other	1.0% (12.8%)	2.6% (16.5%)

Willingness to Use Telehealth Services in the Future

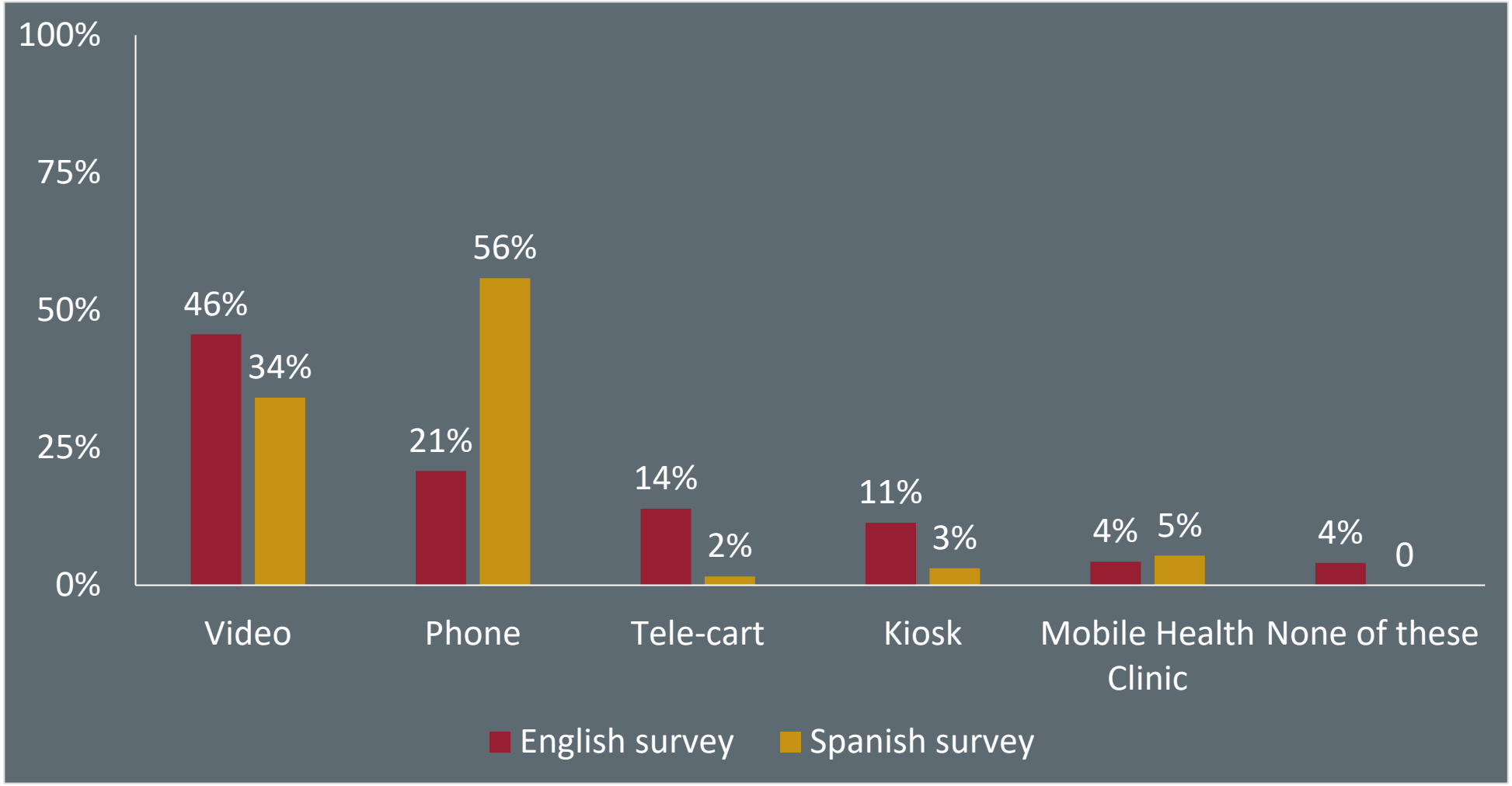
English Survey



Spanish Survey



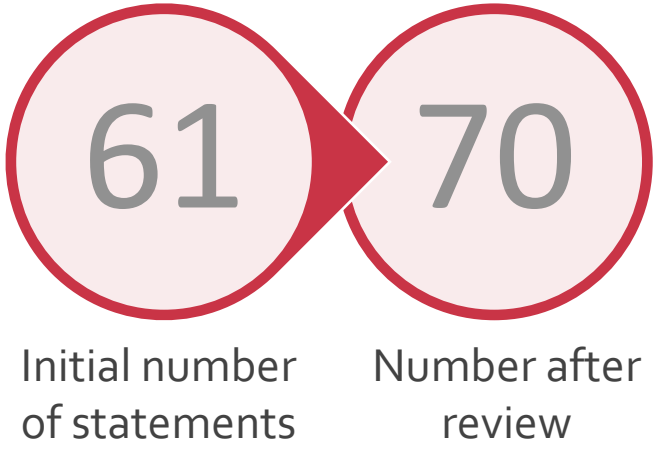
Ranking of Telehealth Service Types



Group Concept Mapping

Group Concept Mapping Step	Number of respondents
Brainstorming	14 + ideas from interviews
Sorting	16
Rating	16

Brainstorming Step



Examples of Statements from Brainstorming

Possible approaches to providing or accessing telehealth in northcentral Washington communities include…

Establish telehealth centers with privacy booths/rooms at central locations in town

Provide transportation to locations with telehealth access

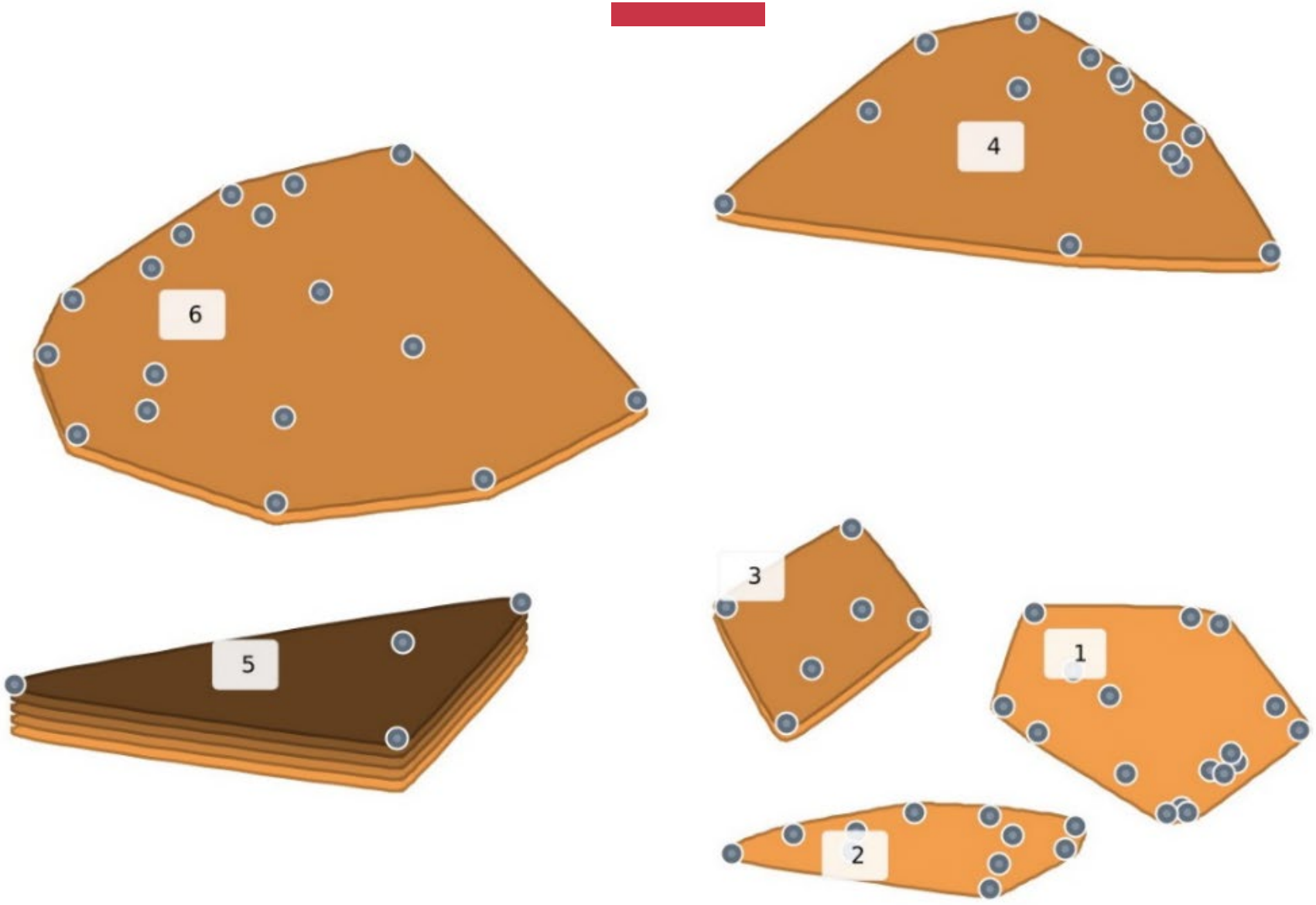
Provide solar-powered picnic tables that have free Wi-Fi and a place to plug in a laptop

Expand broadband access in rural areas

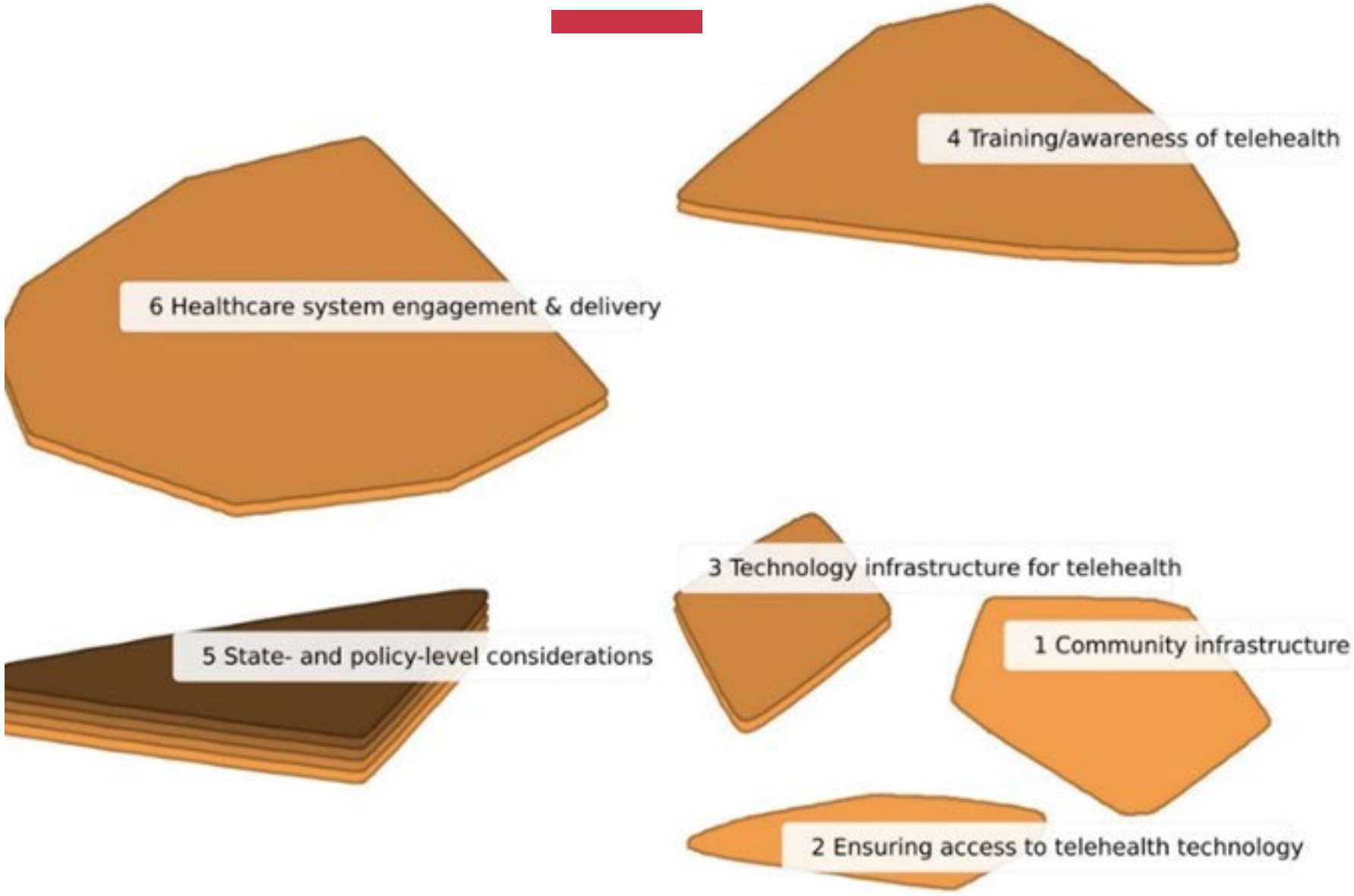
Point Map

Stress value: 0.21

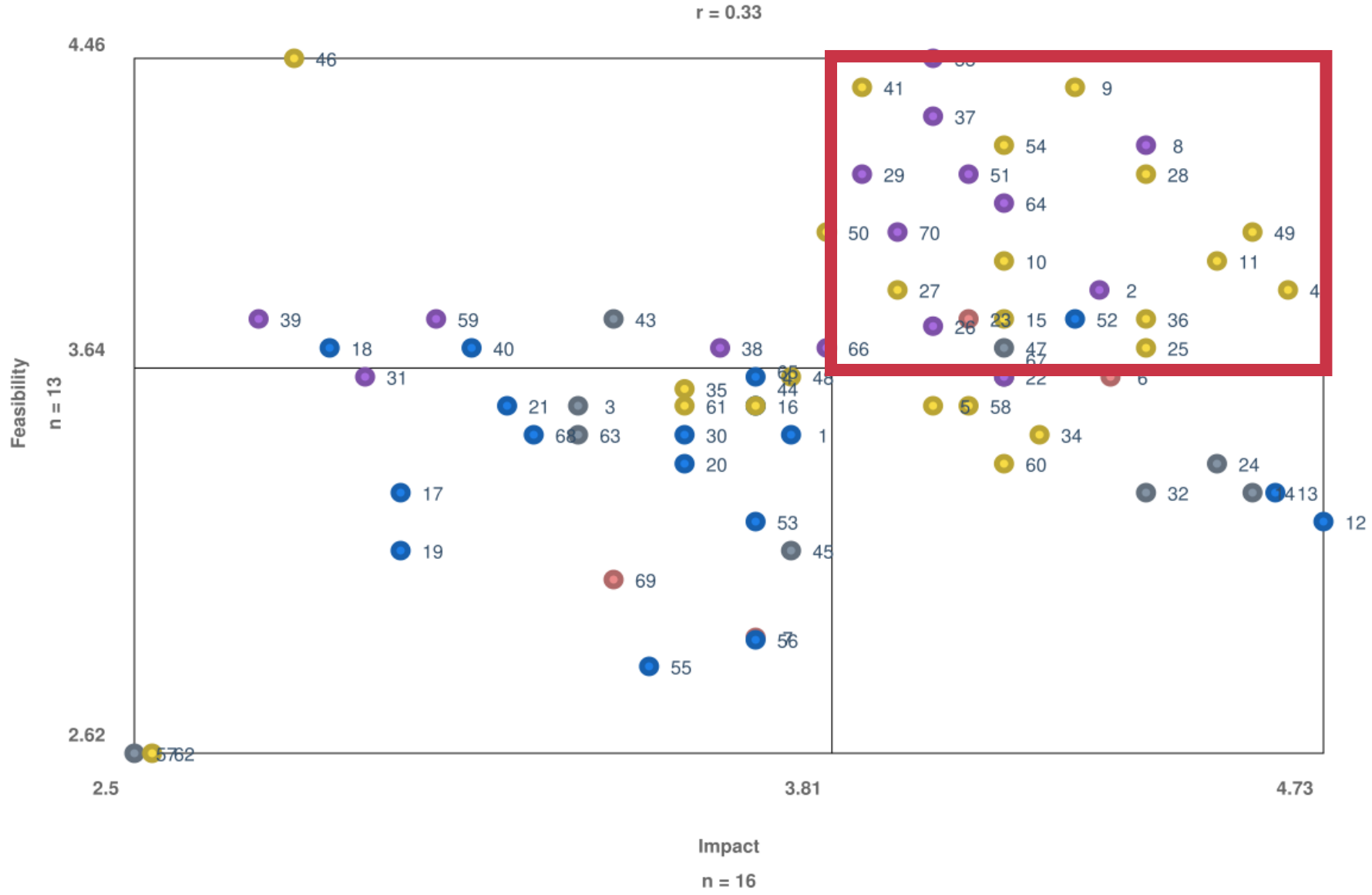
Point Cluster Map



Cluster Solution with Labels



Go-Zone Map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3.64
2.62
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n = 13
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Impact
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Statements with high impact and high feasibility

Cluster 1: Community infrastructure	
52	Provide telehealth stations through partnerships with agencies that meet families where they are (e.g., Community Actions, Food Banks, DSHS, schools, Early Learning).
Cluster 2: Ensuring access to telehealth technology	
47	Provide mobile hotspots for rural residents to make access more reliable.
Cluster 3: Technology infrastructure for telehealth	
10	Ensure a telehealth program has a schedule and an option to contact by phone if patients need assistance in connecting.
15	Ensure the telehealth platform has the ability to translate into a number of languages to reach all demographics.
Cluster 4: Training/awareness of telehealth	
2	Engage home-visiting nurses and outreach workers to assist with telehealth use within patients' homes.
8	Educate community members that telehealth is an easy, reliable, convenient, and private way to access healthcare.
26	Have trusted messengers provide technology support to those needing it.
33	Increase community awareness of telehealth opportunities and benefits.
37	Provide community training on how to access healthcare remotely.
51	Provide opportunities to teach the community how to use the technology/software being used for telehealth.
64	Utilize outreach workers to educate and bring resources to places, such as orchard and migrant camps.
70	Provide training for community members to use telehealth technology.

Statements with high impact and high feasibility (continued)

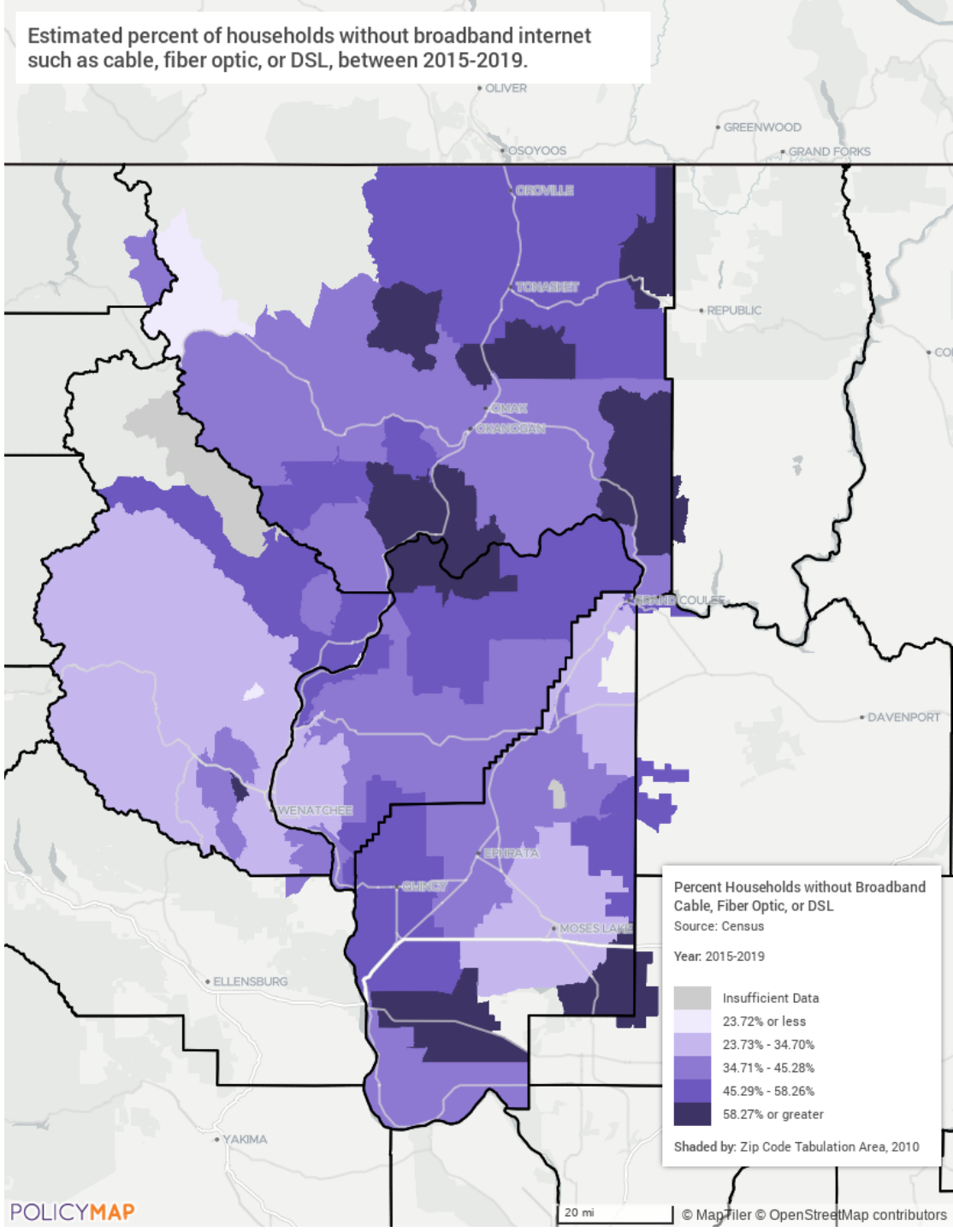
Cluster 5: State- and policy-level considerations	
23	Expand "telehealth" to include other health and social services in the community (e.g., chronic disease management, meeting with DSHS, etc.).
Cluster 6: Healthcare system engagement & delivery	
9	Engage with clinics and providers on overcoming barriers to implementing telehealth services.
11	Ensure providers can bill for services provided via telehealth
25	Generate buy-in from providers who serve rural areas that lack universal access to internet or computers.
27	Help healthcare organizations develop processes and identify key staff members to make the process streamline for the patient from start to finish.
28	Help healthcare organizations identify which services are most appropriate to utilize telehealth, and what the benefits are for the organization, as well as the provider, and patient.
36	Provide affordable and standardized telehealth platform(s) that are simple to use.
41	Provide training for local healthcare providers specifically in telehealth.
42	Work with the small public hospitals and small-town clinics to develop the infrastructure needed for telehealth.
49	Ensure local health clinic staff is on board with telehealth as an alternative platform to provide services.
54	Provide training to providers and clinic staff on telehealth administration and billing.

Secondary Data Analysis

- Many residents do not have a broadband internet subscription, varying by location, income and race
- Some do not have access to any computer, including cellular phone
- A subset of the population are non-English speakers
- Lack of insurance is an issue for some residents

Broadband Access

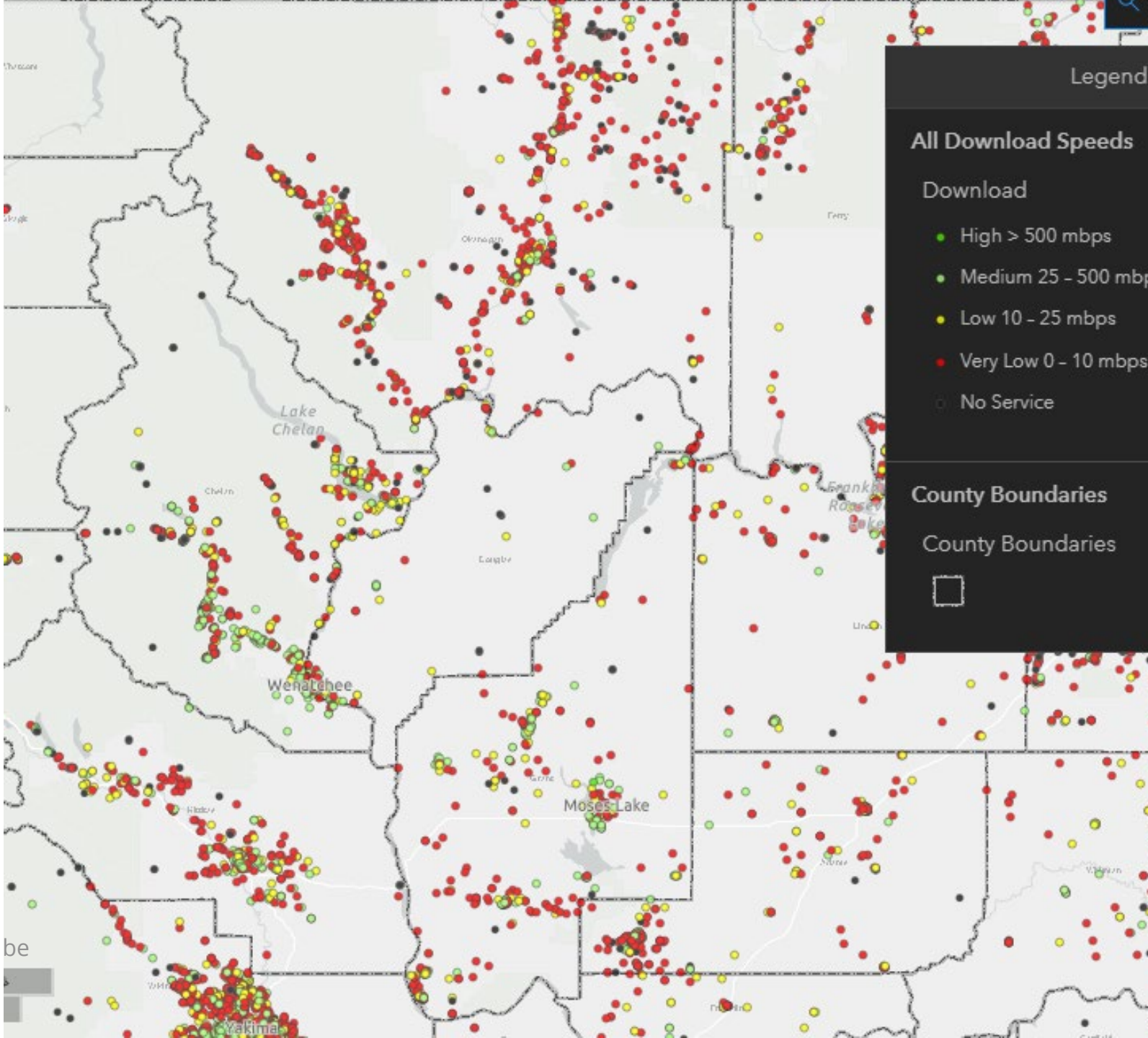
- Based on Census Data
- Over 50% of households in some zip codes do not have broadband
- Varies by income and race
- Reinforces findings from other methods that broadband access is an issue



Speed and Reliability

- Washington State Broadband Office
  - Over 44,000 speed tests completed state-wide
  - Local data available
- Over 50% of households in some zip codes do not have broadband
- Reinforces findings from other methods that broadband access is an issue

The Washington State Broadband Access and Speed Survey can be found at https://www.commerce.wa.gov/building-infrastructure/washington-statewide-broadband-act/speedtestsurvey/



Broadband Access by Household Income

	<$10,000	$10,000 - $19,999	$20,000 - $34,999	$35,000 - $49,000	$50,000 - $74,999	>$75,000
Okanogan	42.3%	42.7%	35.9%	18.5%	13.4%	7.5%
Chelan	37.0%	39.3%	34.2%	18.8%	17.2%	5.6%
Grant	47.7%	40.7%	27.1%	20.1%	9.6%	5.7%
Douglas	39.3%	55.7%	36.9%	19.8%	15.1%	8.1%

- Clear correlation between income and broadband access
- Implications for best approach to providing telehealth

Discussion and Recommendations

Broadband Access

Key findings

- Broadband access and reliability is a key issue identified across all methods
- Access varies across location, income, race
- "Pockets" of low access

Recommendations

- Participate in coordinated efforts to address broadband access
  - Participate with Broadband Actions Teams
  - Connect with State Broadband Office
- Secure funding
  - Subsidize a grant writer
  - Including a plan and partnership for expanding telehealth access can increase competitiveness of grant proposals

Technology Challenges

Key Findings

- Access issues
  - Over 10% of population has no computer at all
- Knowledge Issues
  - How to use
  - Security measures
- Access varies across county, income, race
- Over 70% of population has a smartphone
  - Data plans are variable

Recommendations

- Provide access and education resources for technology
  - Libraries/NGO's can provide connection to community, space, education expertise, etc.
- Coordinate with existing organizations and institutions to coordinate efforts
- Make services accessible via mobile devices

Telehealth Preferences

Key Findings

- Telehealth delivered via Video (English survey) and Phone (Spanish survey) are the most preferred options
- Most would be willing to use kiosks and telecarts
- Kiosks were not rated as highly in impact and feasibility as other strategies
- Interviews and GCM show support for health stations in partnership with schools or community organizations in specific areas.

Recommendations

- If broadband connection is available, video is most preferred
- Other strategies must be used
  - Areas without widespread broadband
  - In service of those without access to internet or technology
- Health stations may still be needed in specific communities
  - Partner with schools, libraries and established organizations

Community Education and Building Trust

Key Findings

- Distrust of telehealth is a barrier to uptake
  - Privacy, security, language and cultural barriers
- Outreach is key to uptake
  - Awareness
  - Building trust
  - Adapt to all audiences
- Highly rated in impact and feasibility

Recommendations

- Partner with local organizations
  - Train the trainer "Trusted messengers"
  - Leverage existing relationships
  - Many are ready to help
- Ideas in the Go-Zone
  - Utilize outreach workers to educate and bring resources to places of employment

Overall Recommendations

Key Findings

- Distrust of telehealth is a barrier to uptake
  - Privacy, security, language and cultural barriers
- Outreach is key to uptake
  - Awareness
  - Building trust
  - Adapt to all audiences
- Highly rated in impact and feasibility

Recommendations

- Partner with local organizations to reach diverse communities
  - Many expressed willingness to provide outreach, space, and other resources
  - Many are experienced in training and education
- Ideas in the Go-Zone
  - Have trusted messengers provide technology support
  - Utilize outreach workers to educate and bring resources to places of employment

Potential First Steps

- Initially focus on providing behavioral and emotional health services via telehealth
  - Fills a need
  - Build trust and knowledge of telehealth
- Partner with agencies to provide telehealth stations in key communities
  - Use Pateros Brewster Community Resource Center as an example
  - Relatively inexpensive
  - Allows for recruitment of providers
  - Builds trust and experience

Questions and Discussion