

# Bringing Cancer Care Closer to Home for Veterans: Our Telehealth Experience

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Jordan Schmitt, MD

VA Medical Oncology Section Chief

# Financial Disclosure:

# None



# Outline

- Definitions
- History of Telehealth at the VA
- Applying telehealth to your practice
- Barriers to telehealth
- Lessons learned
- Future Directions
- References

# Definitions

## Modalities

- Video Conferencing
- Clinical Video Telehealth (CVT),
- VA Video Connect (VVC)
- Store and Forward (not used in our practice)

# Video conferencing

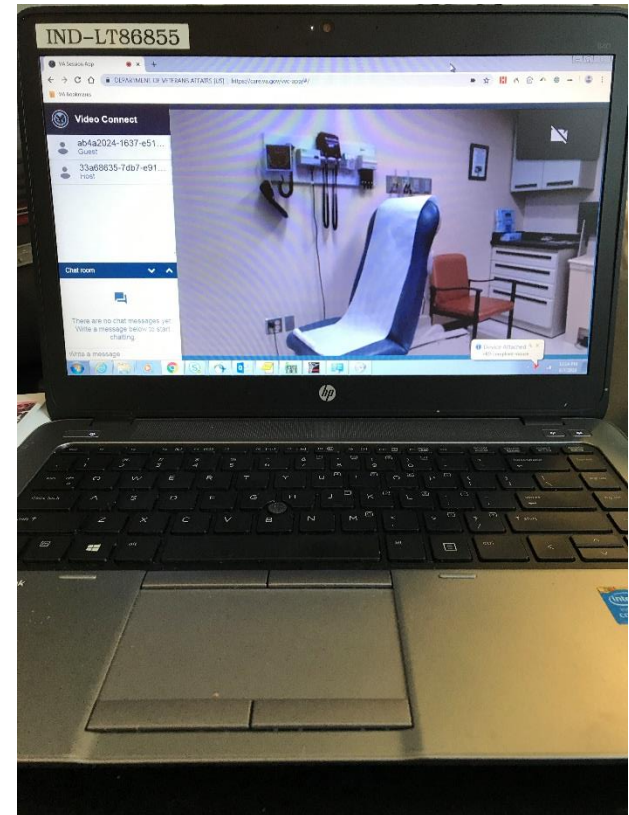


# Clinical Video Telehealth (CVT)





# VA Video Connect (VVC)



# Store and Forward Teledermaology/Teleretinal Imaging



## TeleDermatology Imaging





# Definitions

- **Types of Care**

- Teleconsultation

- Teleprovider does not assume responsibility for patient care and they do not write orders or prescriptions. The consult is completed by providing guidance and advice to a referring provider on subsequent care.

- Telemedicine

- Teleprovider is responsible for writing orders, prescriptions and other aspects of care. The referring provider may or may not assume responsibility for ongoing treatment of the condition.

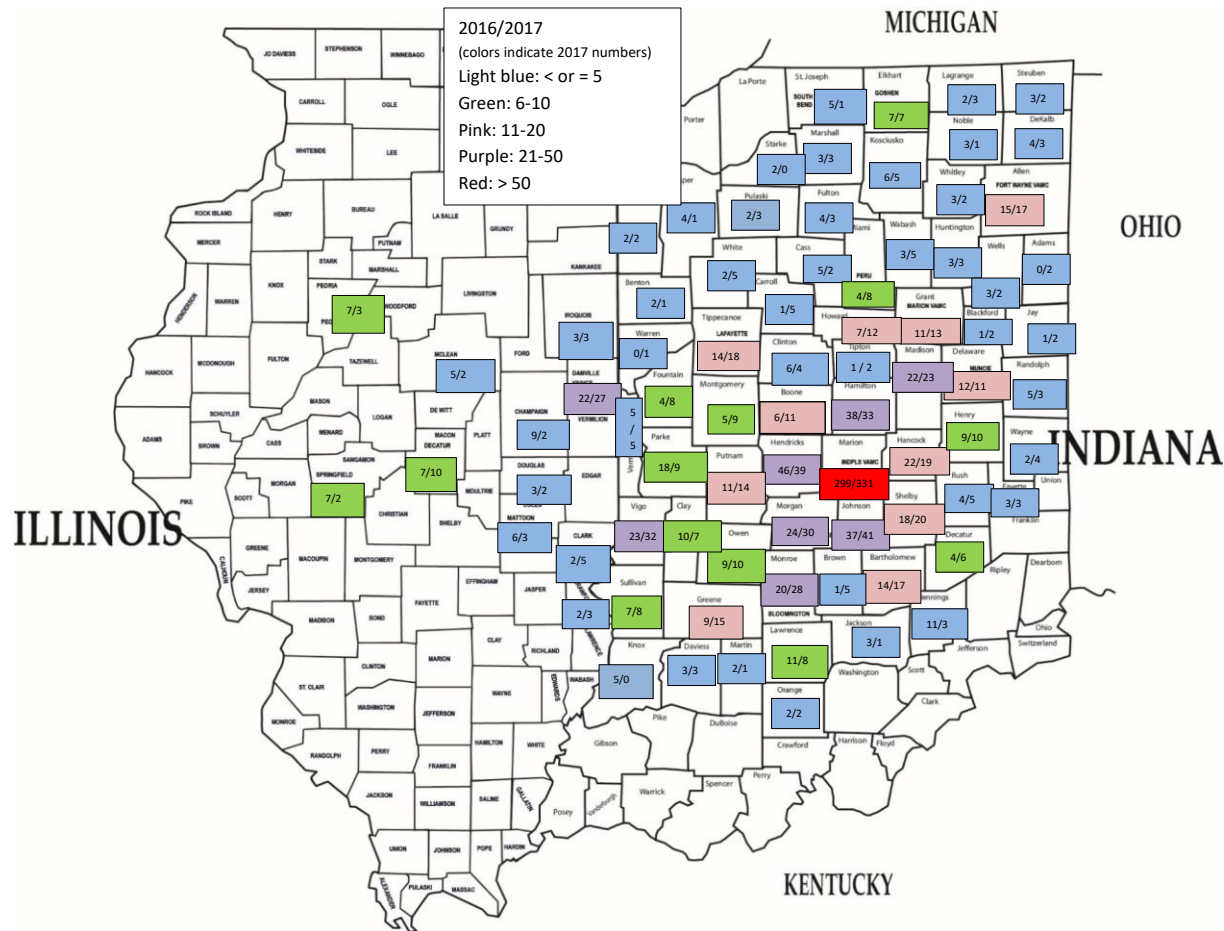
**Note:** *Clinic Based Telehealth (CBT) encounters can be within a facility or health care system (intrafacility), between facilities or health care systems (interfacility), or the Veteran patient may be located at a non-VA clinical setting.*

# Our History of Telehealth at the VA

- Home Telehealth (HT)
- Teledermatology/  
Teleretinal Imaging
- Clinical Video Telehealth (CVT)- 2013
- TeleOncology/ Hematology Operations  
Manual Development Group – 2015
- VA Video Connect (VVC)- 2019



# Why Telehealth?



# Is Telehealth right for your practice?

The screenshot shows the SAP SuccessFactors Learning interface. The user is logged in as JORDAN SCHMITT. The page displays 'Completed Work Details' for a course titled 'CVT: Core Competencies'. The course is from the Department of Veterans Affairs 23393, Revision 1, and was completed on 2/16/2018. The status is 'VA-Complete'. The 'Completed Work Details' section shows a grade of 'Pass', total hours of 1.00, credit hours of 1.00, learning hours of 1.00, and training non-duty hours of 1.00. The 'Accreditation Details' section shows an external accreditation from EES-AMCC, with a provider of Employee Education Center and 1.00 credit hours. A 'Print Accreditation Certificate' button is visible.

The screenshot shows the SAP SuccessFactors Learning interface. The user is logged in as JORDAN SCHMITT. The page displays 'Completed Work Details' for a course titled 'CVT Telehealth Skill Assessment'. The course is from the Department of Veterans Affairs 14760, Revision 1, and was completed on 12/17/2018. The status is 'VA-Complete'. The 'Completed Work Details' section shows a grade of 'Pass', total hours of 0.00, credit hours of 0.00, learning hours of 1.00, and training non-duty hours of 1.00. The 'Accreditation Details' section shows no external accreditations available.

The screenshot shows the SAP SuccessFactors Learning interface. The user is logged in as JORDAN SCHMITT. The page displays 'Completed Work Details' for a course titled 'Telehealth to Home Using VA Video Connect Provider Training'. The course is from the Department of Veterans Affairs 427941, Revision 1, and was completed on 11/22/2017. The status is 'VA-Complete'. The 'Completed Work Details' section shows a grade of 'Pass', total hours of 0.00, credit hours of 0.00, learning hours of 1.00, and training non-duty hours of 1.00. The 'Accreditation Details' section shows no external accreditations available.

# Applying telehealth to your practice

## General Clinical Opportunities Telehealth provides:

- Multi-disciplinary, multi-location case conference
- Pre-screen and determine if a referral is necessary without requiring the patient to travel.
- Evaluate, manage, and treat patients, including most initial or consultative visits and follow-up visits depending on clinical needs/ monitoring.
- Reduce travel for Bedridden or stretcher-bound patients or those with transportation barriers
- Limit contact of immuno-suppressed patients with others.

[www.va.telehealth.gov](http://www.va.telehealth.gov)

The development and maintenance of this document is the responsibility of the Veterans Health Administration (VHA), Office of Health Informatics: Connected Care/Telehealth.

# TeleHematology/Oncology

**Supplement**  
**August 2019**

The purpose of the TeleHematology/Oncology Supplement is to provide standard clinical guidance to implement and monitor quality delivery of care to Veterans via Telehealth technology. The Supplement applies to the changes in operational and clinical practices that allow for integration of Telehealth services into Hematology/Oncology services and identifies the resources needed to support safe, quality TeleHematology/Oncology services. for the development and management of TeleHematology/Oncology programs.



# Services more specific to TeleHematology/Oncology

- Clinical trial recruitment
- Surveillance/slow progressive disease monitoring, regular follow up, stable therapy monitoring
- Surgical oncology candidacy/pre-surgical evaluation
- Pre-treatment assessment/new patient triage/evaluation
- Supportive care (Palliative Care, Nutrition, Social Work, Oncology Psychology, Oncology Nurse Navigators)
- Survivor groups
- High risk screening and counseling
- Genetic testing
- Molecular/target therapy/drug therapy evaluations/counseling referrals
- Tumor board

# Applying telehealth to your practice

- Know your patient population and their barriers to care
- Which services does your institution offer?
- What clinical needs do specific patients have for evaluation/ management?
- Example: CVT vs. VVC
  - Identifying the types of care that can be done with a telepresenter or with no on-site clinical assessment.
  - Establishing patient's access to and comfort with technology
  - Ensuring procedures for contacting emergency personnel in the Veteran's community are available (VVC)

# Applying telehealth to our practice

- Services or diagnostic groups that may be offered under TeleHematology/Oncology (per 2019 supplement)

Type of Visit/Service/ Diagnostic Group	Modality	Description of Visit/Service/Diagnostic Group
Service	Synchronous Asynchronous	Description
Hematology/Oncology Initial Evaluation	Synchronous (CVT, VVC)	Intrafacility care or interfacility care for hematology and/or oncology services.
Hematology/Oncology Follow Up Visits	Synchronous (CVT, VVC)	Intrafacility care or Interfacility care for ongoing hematology and/or oncology services.
Tumor Board	Video Conferencing	Multidisciplinary case management.

# Applying telehealth to your practice

## **Getting Started**

- **WHO**
  - Identifying patients
  - Training providers (on both sides of the camera)
- **WHAT**
  - Equipment needs
  - Templates/ Charting needs
  - Scheduling plan
  - Billing plan
- **WHERE**
  - Office Space
  - Exam rooms
  - Home/ mobile equipment

Type of Visit/ Service/Diagnostic Group	TMP Resources	Clinical Resources	Business ResourcesT
Hematology/Oncology Visits	<p><b>Patient Site:</b> Clinical Cart with Exam Camera, Codec with Far End Control, Camera with Pan, Tilt, and Zoom, Stethoscope.</p> <p>Typical patient exam room</p> <p>For VVC visits, patient site will connect using a personal computer, laptop, tablet, or smartphone or VA furnished tablet with peripheral equipment.</p> <p><b>Provider Site: CVT:</b> Monitor with codec. <b>VVC:</b> computer/ smart device with webcam/camera capabilities and VVC app.</p>	<p>Pre-visit vital signs (including blood pressure, pulse oximetry, and weight) taken by the TCT or a nurse.</p> <p>TelePresenter qualifications must be identified by the Hematologist / Oncologist (TCT, RN, NP, PA.)</p>	Support staff to close out patient / provider appointments.
Tumor Board	Video conferencing equipment for all participating locations.	Telepresenter	

# Barriers to telehealth

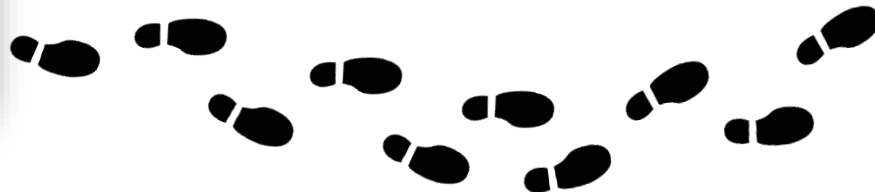
- High acuity or multiple high acuity diagnoses may require detailed examinations that require specific TelePresenter skill levels, or face-to-face appointments
- Need for same day labs, imaging, or infusion services
- Lack of equipment, personnel, or comfort with technology
- Multi-disciplinary care
- Consent/ education process
- Patients with management issues, such as pain contracts or disruptive behavior, may not be suited for telehealth due to potential staff safety issues







# Lessons learned



- Telehealth is well-received by most patients
- Different clinical scenarios lend best to different applications
- Telehealth appointments can be integrated into clinic work flow
- Providers can predict patients' openness to using telehealth
- The possibilities are endless!

# Future Directions



- **Expansion of our VVC program**
  - Interim symptom assessment study
  - VVC on demand visits during infusion
  - Increase VVC use in our high-risk screening & Counseling referrals
  - Identify patient interest/ access early
- **Pre-screening program**
  - MVOC- Midwest VA Oncology Consortium
  - Targeted therapy testing & counseling

# References

- 2018 Richard L. Roudebush VAMC Cancer Program Annual Report
- Telehealth department presentation for PACT teams
- TeleHematology/Oncology Supplement August 2019
- [www.va.telehealth.gov](http://www.va.telehealth.gov)



Questions? Email [Jordan.schmitt@va.gov](mailto:Jordan.schmitt@va.gov)