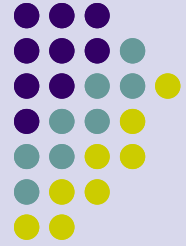


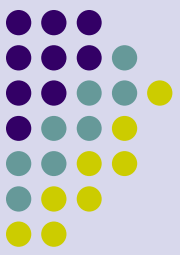
# Establishing Telehealth Services in Rural Communities

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Presented by  
Dan Peterson

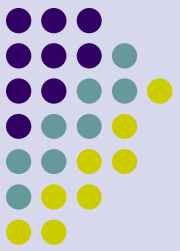
Manager, Oregon Washington  
Health Network, Pendleton Oregon



## A. Introduction

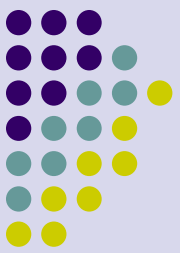
- In 2012, Yellowhawk Tribal Health Center (YTHC) of Pendleton approach 5 agencies about submitting Federal Suicide Grant
- Upon notice of award a community task force was established with YTHC serving as lead agency.
- As a result of this collaboration the 5 organizations decided to form a rural health network that became known as OWhN.

# A. Telehealth Introduction - Continued



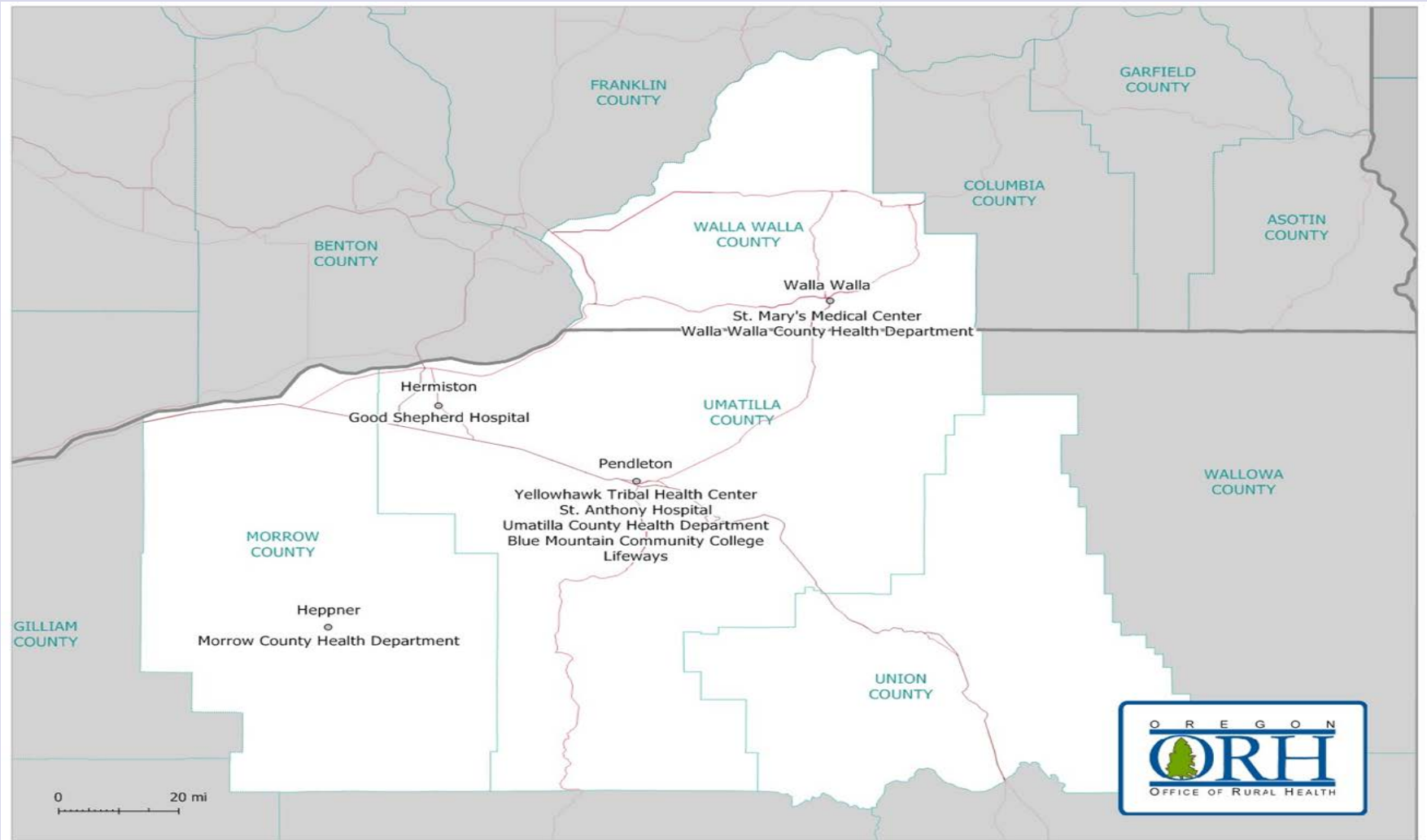
- In 2014/15 the network expanded to nine (now 10) members and YTHC completed a HRSA planning grant for the network.
- In 2015, YTHC received a 3-year outreach grant to address gaps in current services.
- Goals of the grant were: provider recruitment, training, chronic disease, & behavioral health.
- Telehealth was also determined to be a regional need of the across the network.

# A. Telehealth Introduction - Continued

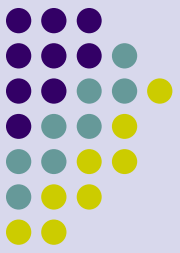


- In 2016, YTHC on behalf of OWhN received a two year grant from Cambia Foundation to develop a regional telehealth system.
- The project had three goals:
  - Establish a regional telehealth system
  - Train providers and staff to use telehealth equipment including managing referrals
  - Research/establish required procedures

# Map of OWhN Service Area

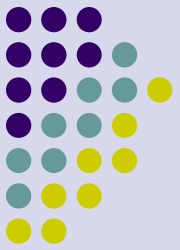


# B. Health Care Needs of Northeast Oregon



- OWhN's service area includes 3 Oregon and one Washington County
- The region generally has high rates of chronic disease.
- The largest single need is poor access to primary and specialty care
- All Oregon Counties are health professions shortage area; geographic for dental and MH

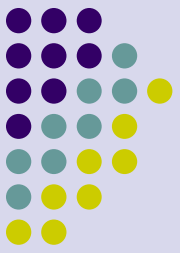
# Chronic Disease Prevalence of NE Oregon Counties 2010-13



Chronic Condition	Umatilla County	Union County	Morrow County	State of Oregon
Cancer	6.2%	11.2%	11.5%	8.5%
Arthritis	23.9%	28.5%	24.8%	24.5
Angina (Heart Disease)	2.2%	7.2%	6.8%	3.6%
Cardio Vascular Disease	8.0%	9.7%	9.6%	7.0%
Chronic Obstructive Pulmonary Disease	5.3%	9.7%	10.4%	5.7%
Diabetes	7.4%	8.7%	14.8%	8.2%
Heart Attack	5.0%	6.4%	8.1%	3.4%
Stroke	2.9%	No Data	3.8%	2.5%

Source: Oregon Health Authority

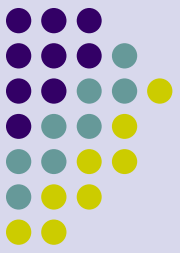
## B. Health Care Needs of Northeast Oregon



- Pendleton is short 5 primary care providers; half of current providers will retire by 2020
- There are numerous shortages in specialty care inc. pediatrics, cardiology & dermatology
- Currently many patients travel to Walla Walla; Richland & Portland to receive specialty care
- Other gaps in services include substance abuse treatment, dental, and mental health

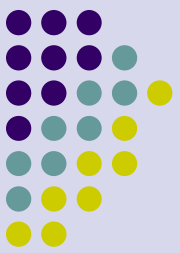


# C. Planning Process used in Telehealth Development



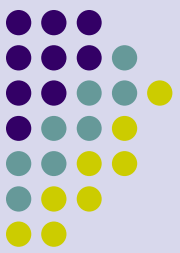
- Meetings were held with all partners to define expectations; use of equipment
- Meetings were arranged & held with telemed providers in Oregon, Washington, & Idaho
- Price quotes were acquired from 3 vendors
- Meeting was held with state licensing board to determine licensing & credential process
- Three network meetings discussed options

# D. Training of Medical and Information Technology Staffs



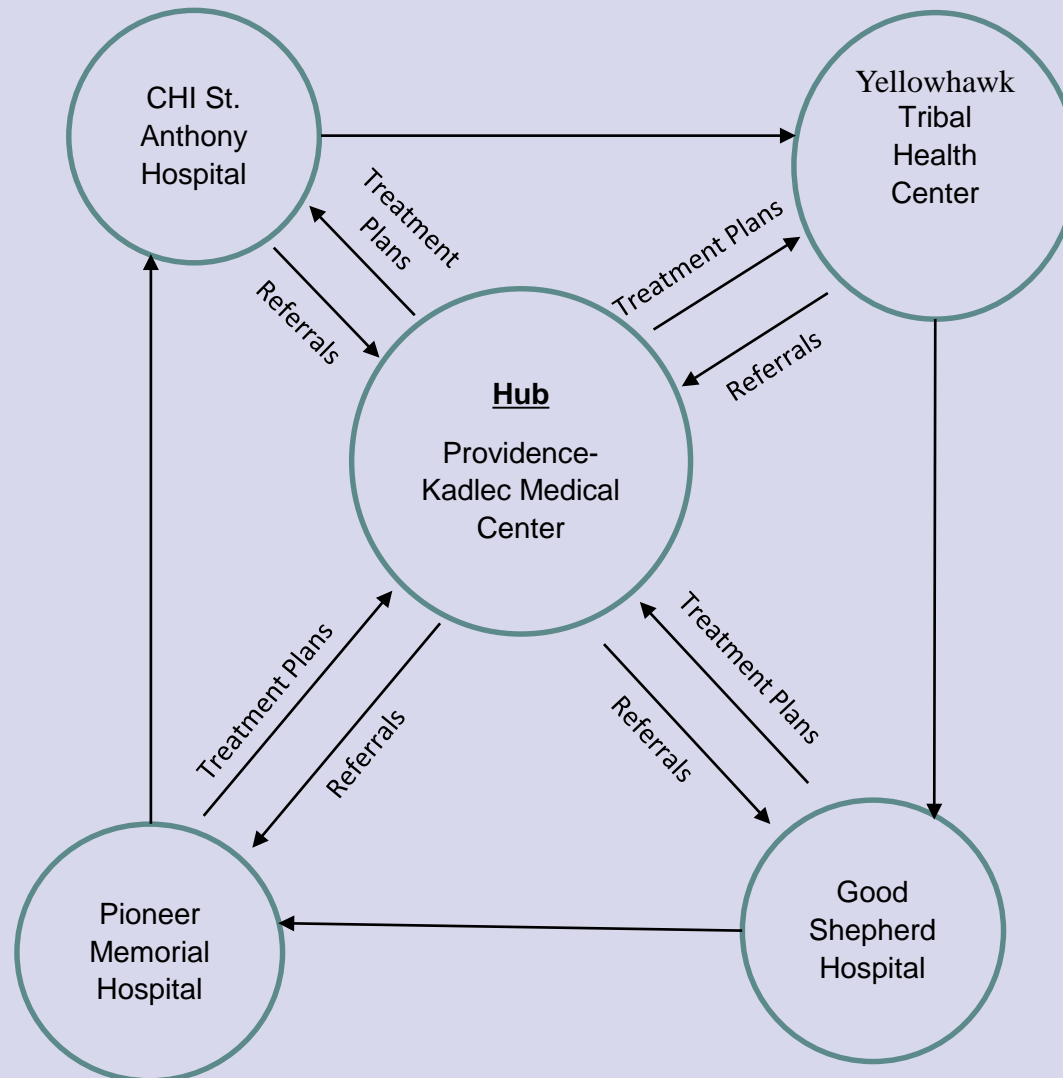
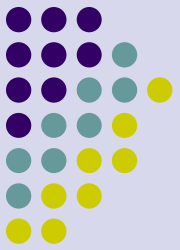
- Training of providers and staff including IT may be the most important step in development of telehealth system.
- Three types of training needed.
  - Initial training of users on telehealth equipment and practices
  - Skill building of staff prior to start-up
  - Technical IT staff training incl. software

# E. Contracting HUB Services from Telehealth Providers

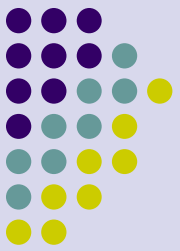


- It is most important to contract with your facility's "natural referral source"
- If they are not a telehealth providers, establishing a shared system with them should be explored
- Broad based contracting is recommended
- HUB provider contract should clearly state costs, services, procedures, and training to be provided

# Planned Northeast Oregon Telehealth System

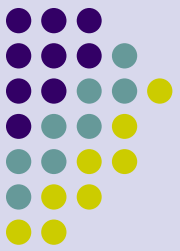


# F. Telehealth Equipment Considerations



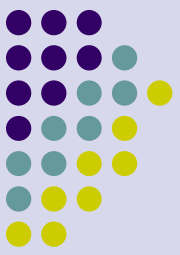
- There are numerous equipment providers and many cart options including peripherals
- There are two major types of equipment: proprietary and standards based
- Proprietary allow providers to communicate with similar types of equipment
- Standards based allows facilities to interface with any other standards based system

# G. Internal Procedures used for Telehealth Services

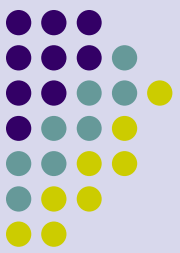


- Patient care protocols based on the services to be procured under contract
- Patient consent forms including HIPAA
- A description of the services to be provided to the patient including treatment planning
- Record Keeping – It is not necessary to have the same electronic health records system
- Credentialing/privileging done by host agency

# H. Telehealth Evaluation and Reporting



- Data collection important to justify continued use of telehealth services
- Both clinical (utilization, diagnoses) and non-clinical data (patient surveys, training evaluations) needs to be collected
- Evaluation should address: clinical outcomes of services; ease of use of equipment; is equipment incorporated into daily routine; cost effectiveness; patient satisfaction



# I. Conclusion

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- The bottom line is whether the telehealth system has improved access to care.

I'm Glad to take your questions Now!