

# VA Mobile Discussion Series

## September 2019 Webinar:

VA's Mobile Discussion Series is a monthly webinar featuring a variety of topics focused around app development and mobile health at VA.

*Micah Azzano:* Hello everyone. Welcome and thank you for attending our Connected Care discussion series webinar. This month's discussion is Connected Care Highlights Telehealth Tools and Technologies. My name is Micah Azzano and I'm going to run through a few brief technical reminders before we begin.

Your phone lines are muted so we are taking questions in the chat feature. The chat function is available to you in the right of your screen, and if you're experiencing technical difficulties, please use the chat and someone will be with you to assist.

If you would like to view this presentation in the future, the full presentation will be available at a later date on the Discussion Series webpage. Today, we welcome our presenter, Sherron Olliff, training specialist, Connected Care Home Telehealth Training Team.

During the webinar today, we will be discussing telehealth and looking at the telehealth website, tools, programs, and technologies. Again, we are taking questions periodically throughout the webinar, so please type them into the chat feature at any time. And with that, I will turn it over to Sherron.

*Sherron Olliff:* Thank you very much. My name is Sherron Olliff, and I am a social worker by profession. I work with the Office of Telehealth, Home Telehealth as a training specialist, and I am so glad to be with you all today. Before we get into the heart of the presentation, I just wanted to go briefly over a little bit of history. I'm not sure our population attending these calls, so I don't want to assume that everybody knows what and how the Office of Connected Care has come to be.

Where have we been and where are we going? Well the Office of Connected Health and the Office of Connected Care Services merged in 2016. There are four signature programs that are incorporated and part of Connected Care. That's the VHA Innovation. Now this program may be moving to another reorganization location, but they're still listed with us. There is a My HealtheVet, which I hope you all are very familiar with. There's the Telehealth Services, and there's VA Web and Mobile Solutions.

Under Connected Health, we all are one big family and we all share a lot of resources and all share the same vision of doing the very best we can for our veterans. I just wanted to show you that this is the website for Connected Care. You can go here and you can see those ... The screenshot I showed you a minute ago came from there, and you can get all kinds of links that actually go to all of those programs from that particular website. This is the telehealth website that we're going to be talking about today. There's that website for you.



You're going to be hearing an awful lot of different terminology and I think some of the times that's one of the things that challenges us the most as to putting the pieces together, and that is understanding the acronyms. But who are we and what do we do? Well we're evolving. We are anywhere to anywhere care. Telehealth is using technology to provide clinical care in circumstances where distance separates those receiving services and those providing the services. And one of the biggest initiatives that all of this is coming out of is improving the access of veterans to care in VA.

And again, very briefly, let me just share with you the modalities that are within telehealth. We have three specific modalities in telehealth services. In 2003, began the Home Telehealth program, and that is a case management program that uses technology to give veterans every day a message asking them about their condition, monitoring their vital signs and their mood and whatever condition that they've been assigned to. Nurses and social workers receive those replies and they provide case management and close monitoring for our high-risk patients. That's Home Telehealth.

In 2004 was Store and Forward. Store and Forward performs images and they forward to clinical providers, and that is very involved in diagnostics and treatment purposes. In 2006 came on the Clinical Video Telehealth, CVT, and in the beginning years, that was providing provider care to our veterans at a distance, mostly at clinics. And our newest initiative started in 2017, which is the VA Video Connect, VA video care into the home. A lot of you, again, depending on your role, will have various understanding of these programs.

Let me tell you a little bit how we're organized. At the top of the Office of Connected Care is Dr. Neil Evans, the chief consultant. Then we have the national telehealth staff. The chief consultant is Dr. Kevin Galpin. The Home Telehealth lead is Cathy Buck. Our training director is Rita Kobb. We also have a very strong quality management team. All of the telehealth programs fall under the Conditions of Participation, and so these programs are held to standards, just like the Joint Commission standards that are held for hospitals and outpatient clinics, our Conditions of Participation have standards as well, and they closely monitor all the programs that we've mentioned today. Our quality managers are Claire Marty, Carla Anderson, Guerce Jean-Baptiste, and Paddy McVeigh. They are very involved with all of what telehealth does.

This is the training team. You can see Rita is at the top left. To the right of that is Home Telehealth trainer Elaine Owens. To the right of Elaine is Matt Squires. Now Elaine does Home Telehealth. Matt does Store and Forward. Then you see Sherron Olliff, myself, and I'm Home Telehealth. On the bottom left you see Tammy Stuvey, and Tammy is a CVT trainer and she's been with the office for a long time, and I must say, she just retired this past week, so we are happy to still have her on our website and we are going to miss her terrible. To the right of Tammy is Robin McCollester. She does much of the CVT at this point and we know there's going to be someone coming on board to help her in Tammy's absence. And then on the right you see Elaine Thomas. Elaine is our program support. She does an awful lot of working with the clinical video telehealth staff with their skill assessment and does an awful lot of things for our office.



So let's take a look at how we're organized. At the VISN level, telehealth programs have VISN leads. These are program managers. They're very involved in monitoring and the expansion and the quality of all of the telehealth services in their VISN. We meet closely with them on a regular basis and collaborate, and they're very involved in the development and implementation of new and ongoing services that are occurring. Some important roles to be aware of in telehealth. There are facility telehealth coordinators. They're probably the glue to our programs at the local level. They really take on the coordination of services at the facility, gather those clinical champions, work with the staff to make sure that they are getting the technology and the services that they need.

Then you've got the TCTs. These are our boots on the ground folks that are out there working with the equipment, working with veterans from the remote sites and working with providers as they work remotely. Program support is also very involved. Program support staff in-home telehealth are very involved in making sure that the veterans receive the equipment they need and supporting the care coordinators. And then in-home telehealth are our care coordinators, and since we do case management in that program, there is a whole team. All across the country we have home telehealth programs at every medical center and multiple sites. Care coordinators manage a panel of anywhere between 50 and 100 per care coordinator, and the last I looked, we had about 72,000 veterans enrolled in home telehealth. Let's find out a lot of more about the web. So stand by, I'm going to share my screen.

*Micah Azzano:* And Sherron, I'm just going to jump in while you're moving over to sharing your screen real quick.

*Sherron Olliff:* Alright.

*Micah Azzano:* I saw the question in here about the download. We did add that download just now. I do want to be clear that it's not the FOIA-compliant PDF. We will be putting that on the website, on the discussion series webpage at a later date.

*Sherron Olliff:* Alright. Now I'm moving this little pod out of the way. You all see my screen well? Can you verify you-

*Micah Azzano:* Yes, we can see it.

*Sherron Olliff:* Great. Okay, everybody. So this is really what you came for today. This is the telehealth website, and before I get into the details of it, I'd like to recognize David Palazzolo. Dave Palazzolo is our webmaster. I have been with home telehealth and telehealth services since 2001, its original pilot, and as Dave has developed this website, it's a very, very dynamic website. For those of you that want and need to know more about anything to do with telehealth, you will be able to find it here. It's always growing and evolving.

The easiest way in what you do, and I regularly train staff on the website, is go over what you're seeing. Across the top, you have your different tabs. The first one you come to is roles. That's exactly what it speaks to. So here, you can see under the roles, you've got the TCTs, which we



mentioned a few minutes ago. They're the on-the-ground people. You click on TCTs, and it takes you to this TCT homepage. Now all of these have a similar look, and what you're going to find on all of the roles pages, it will give a description of the role. On the right-hand side, it's going to give you resources. We have a master document library that's interactive between the roles and the different programs where you can go and find documents. You can find your operations manuals there. You can find training plans for that role. You can go to the training calendar if you want to see if there's any trainings going on. For the TCT, if you want to contact another TCT across the VA, you can do that. I'm going to show you some of these things separately in a minute.

The one thing that's kind of challenging about this website is when you go over to a location such as the training plan or the training calendar, it takes you to a SharePoint, so you leave the website. You have to go back and forth, and I don't want to do that right now. Another thing that's really fabulous about this website is there's videos embedded, and there's all kinds. I'll show you those too as well. So, if you wanted to learn more about any of the TCT or some of these programs, all of these are videos that you can listen to. You can use them also as marketing with your staff. You can use it for sitting down with patients even. If you want to show them, if they want to know what it's like or what a program's like, you can show them that video.

So going back to Roles, here's the telepresenter role. We'll go to the telepresenter website and here you can see all of the information on telepresenter. It even has links to begin training on the website. Again, over here, you've got some of these will look the same. Some of them different from program to program. Now I'm going to go down, we'll show you ... Let's look at teleproviders. I don't know how many providers we have on the call today, but this will be of particular interest to our clinicians, because this is where you learn about your role as teleproviders. We have been advocating and we all want everyone to be video-capable, and that's one thing the telehealth office has been very involve in doing. It's one of the mission critical efforts of VA is to get our providers all video capable so that we can do that just-in-time care, and we'll talk more about where to learn more about that as well.

This is the teleprovider page. Talks about the program being veteran-centric and helping improve access. Here is a direct link to training. I'm going to ... I don't want to leave the page, but I'm going to link to some of those in just a minute. Again, here is your training plan. Our staff are on each one of the pages. The staff vary a little bit. There's Carla Anderson. She's one of the quality managers. This is Denise Landreth. She's very involved in getting our operations manuals written and updated and revised and works very hard, because we're constantly changing, evolving. If you can imagine what that means for keeping operations manuals current.

So I'm going to go down here to home telehealth and show you the care coordinator role page. This is where it talks about the care coordination program, the home telehealth programs. Again, there's the similar links that you see. Some of these documents are going to be a little unique. Here you see some links directly to documents on the Conditions of Participation or



participation guidance for people in the program. A technology page and how to order technology is then unique to some of these roles.

We just added to this website asynchronous, so I'm going to show you some of the asynchronous or Store and Forward webpages. Here's a teledermatology imager page. You go here and there you are. It describes to you what's going on with teledermatology. It has links to their specialty supplements. There's that link to the training plans, and it talks, and you got all these pertinent resources for you on this side. It talks about the requirements and additional requirements for our teledermatology imagers. Here you can find it for the readers, for the imagers and teleretinal, and so this is very, very important for those of you that want to learn more about that.

Now with leadership, there's a page for the FTCs and what the role of the FTC is, which we talked about a few minutes ago, and some of the pertinent documents that a FTC would need. Then we've got, if it's going to work on me. It just stopped. Isn't it funny how it does that? It got stuck. The VISN leads. This talks about the role of the VISN lead. Now this is another thing that we were over here on Roles, but there's not ... You've got programs. You've got roles, specialty, programs, quality, guidance, resources, and about us. Under specialties, you're not going to see Store and Forward. You're not going to see Clinical Video Telehealth. Those are modalities for delivering these kinds of programs and services. Under programs, you will see asynchronous and synchronous, and so it sometimes gets confusing trying to remember which one is which. Of course, synchronous is real-time and asynchronous is that delayed or the Store and Forward.

Specialty is exactly what it says. So here's telecardiology, telechaplain, teledentistry, and a lot of these trainings and ops manuals are all ... We call them the telecourses, are all, are being revised, and you're going to be seeing a lot of work done on those. So I'm just going to go into telecardiology, if it opens. So there's telecardiology, and you can see the telecardiology supplement and some of those similar looks that we saw on those other pages.

Under Programs, let's take a look at asynchronous, asynchronous telehealth. This is Store and Forward. Again, this is one of the newer pages to our website. It talks about Store and Forward and some unique issues. There's the new Store and Forward lead, Sara Derycke. Junius Lewis is very fundamental and instrumental in our office, and there's Matt again. Explore these sites and see what is in there.

I'm going to go down here to synchronous. I'm going to go to VA Video Connect. Now this is probably some of our highest volume sites in interest and training, because this is the VA Video Connect. This is where folks are coming to and need to come to when it comes to being able to know how to connect virtually with a veteran. It has the information, the telehealth manuals. It's got the VA Video Connect supplement. It's got the what to dos and how-to dos and how does it work. I'm not going to be training you today on that. That's not my area of expertise, but I can tell you that this is where you can go and find out what you need to know. It explains to you how it works, when you should use it. It talks about how you schedule visits with your veterans, either a scheduled visit or a video-on-demand visit. It talks about the virtual medical room which is where you go to have your visit. It explains to you what kind of equipment you



need in order to be able to do this, and it gives you a step by step on how to get started. Tells you how to do an encounter, all about workload. This website is really fundamental and important for folks to know. Here's some videos that you can watch that talk about various aspects of VA Video Connect.

Here's the VA Video Connect for coordinators. This is a page about the VA Video Connect being an integral part of our vision and that staff are essential for helping that to happen and what the VA Video Connect coordinators will be helping to do, and they'll be helping with an awful lot of issues related to making VA Video Connect successful, coordinating it, promoting it, supporting staff out there doing it, sharing updates.

Here is that telehealth coordinator's guide to telehealth expansion. Let's just open that and see how that works. Telehealth coordinator's guide to telehealth expansion. And by the way, there is federal legislation that came out guiding our expansion as well. We'll be able to see that. It's probably going to take ... Oh there it goes. Open up. There's that Word document. Telehealth expansion fact sheet. This is a wonderful resource.

I hear some noise. Does someone want to say something?

*Micah Azzano:* Sherron, I was just going to jump in really quick. The resource didn't quite pull up, so just wanted you to be aware. There might have been a slight delay there.

*Sherron Olliff:* Okay. Well let me open it back up. Let me know when you see it. It's opening on my screen.

*Micah Azzano:* No, it's still not showing up, so we can just continue on and note those resources for later.

*Sherron Olliff:* Yeah, that's interesting to know that that kind of thing probably is not quite the way we would like it to be when we're sharing desktops.

I'm going to go back over here to programs, and we were over here on this side. We were looking at VA Video Connect for schedulers. You all can look at that. Let me show you one of the newest items that Robin has been very involved in, has been doing a lot of showcasing of the Virtual Care Manager. It's nice, because Dave has put these little new buttons on here, so when you go into the site, if there's been something that's been added, then you will see that little new button pop open. You can immediately go in and see, "Oh, let me go look at that," because you may go into the website a month ago and come back in and find that there's a lot of new and different things in here. So if you want to learn about Virtual Care Manager, there's a program and a page right here for you to use as a reference. There's even a video demo that you can look at. Again, this goes into how to get started and gives you that training that you need. There's Dr. Leonie Heyworth. She's very involved, and she's our national lead.

Back over at programs, this Remote Patient Monitoring. Now Remote Patient Monitoring is evolving as a program designation for certain programs. Home Telehealth has been around for



a long time. You will begin to hear this being referred to as Remote Patient Monitoring Home Telehealth, and that is the case management program that I mentioned as one of the primary three modalities of Telehealth Services. This is about the program. Here you can get to those links on the technology, what kind of technology does Home Telehealth when they're enrolling their veterans. You can go in and link in to see, "There's Medtronic and there's 1Vision. I wonder what 1Vision does?" It will take you to the 1Vision website. Can you all see that? Micah, does that show up?

*Micah Azzano:* Yeah. We can see that clearly.

*Sherron Olliff:* Great. The website's very, very super interactive. Let me go back up to Programs. A new program that we have, remote patient monitoring, is called L2, Low Acuity/Low Intensity. So when you say, "Well where does the L2 come from?" because we had two, a low acuity, low intensity. One, two. It took me a lot of to quite get that. This is our new program. It operates similar to Home Telehealth. Veterans get enrolled in the program, but it's designed for those folks that maybe are newly diagnosed diabetes, they don't have a lot of complex problems, they have a couple disease management programs that they can be enrolled into. They do their sessions on their devices maybe once or twice a week, and it's geared more towards patient self-management.

This is just now being rolled out as we speak, so if you want to learn more about L2, you can read up on it but then go to your STC or your Home Telehealth site and find out if the L2 program is being done at your site. If you want to know more about Home Telehealth in terms of disease management protocols, you can go to those pages.

Now we have some more programs. This is another new, that doesn't have the red flag anymore, I guess because it's not as new as it was. About a month ago it was listed as new. This is ATLAS, and I'm going to open up ATLAS for you. This seems to ... See if we can get this one to open. I'm getting a question mark in there. I'm not sure what that means. ATLAS is our program where we are beginning to offer care for veterans at remote sites like Wal-Mart or the VFWs. Again, I don't really know why that link is acting the way it is. You can go back and ... It's a very exciting program.

All right. I'm going to go over here to the quality tab, and I not going to spend a lot of time here other than to ... If I knew I was speaking to Connected Care Telehealth Services staff, I would. This is really the location of all our data and our quality analytics and our Conditions of Participation links. I'm not so sure that's a focus with the population we have today.

The guidance tab, this may be very helpful for you. There you go. It popped open. Quality, this is the quality and performance tab, our quality managers that you want to know what the Conditions of Participation is and what those standards are. You can go in there and pull those documents.

Under our guidance tab, there's places for frequently asked guidance like the Ryan Haight Act. We had this referenced a number of different places, but it's under guidance as well for folks



that want to know how to approach and deal with the Ryan Haight Act and the prescribing of narcotics for virtual care. It's in our guidance documents but it also has been put in here as a separate, its own guidance document for you. Seems the streaming is a little slow on the website right now. I'll move on over to resources.

This is a very, very good place to become familiar, talk about the tools. This is the location on the right-hand column is the document library. You can go in there and get all kinds of documents and tool kits. Here's the image library, but I want to show you the video library. Some of these you saw when we went into the roles page. They had some videos, but this is all the videos that telehealth has been involved in making. Sometimes it's best just to start there. If you're brand new or if you want to know about something you really don't know much about, start with that video and take a look at that. It's broken down into informational, technical, and then it also has YouTube. Dave has built YouTube into this location and you can go in and see way back years ago all of these ... It goes back to 2009 of various publications. And it talks to how you can even-

*Micah Azzano:* Sherron.

*Sherron Olliff:* Yeah?

*Micah Azzano:* Sorry I just want to jump in with a quick question here. So obviously there's so many resources and so much great information on the site. Where would you suggest someone getting started onto the internet site, just so they don't get overwhelmed at first with resources where you would direct them to if they're just getting familiar with the site?

*Sherron Olliff:* Well, do you know what role they're currently in?

*Micah Azzano:* No, I was thinking-

*Sherron Olliff:* Do they have any idea what kind of telehealth they're interested in?

*Micah Azzano:* No, I just was thinking of a more just to bring them in and get them more familiar with the site just in general, where you would direct people to get started.

*Sherron Olliff:* I'm trying to get to the home page. Hold on. I would start with the home page. Again, that's a real hard question to answer without knowing that a doctor's clerical staff ... I can't get back to the home page. There it is. Home. So our home page of course would be the most likely place to begin. This has buttons that go either side. That's why I was going through these tabs at the top. If you want to know something about ... If your interest is in a particular kind of telehealth, you can start there. If you're interested in maybe working in telehealth, you may want to start with the role.

The home page itself, you can look at the advances on each side of the screen. There's not an introduction to telehealth specifically. You land here. This is the home page. This is not designed for just anyone coming in and looking at it. We have, and let me go to that one, we



have an internet site that is more generic. This is more specific for people that are likely to be going to work and using telehealth modalities. I don't know if that answered your question.

*Micah Azzano:* It did, thank you.

*Sherron Olliff:* Okay. Alright. We have roles, we have the specialties, we've got the different programs. Our quality and scorecards. Again, that guidance, if you're interested in whether you can FaceTime with somebody, there's a standard on FaceTime and we don't do FaceTime. If you want to know about care across state lines for providers, you can read. This is the guidance tab.

I guess another thing that may be really helpful is the about us tab. That may be a good place to start. If you go to about us and click that, now this is just updated. There's that little red flag. This is about us, about Telehealth Services, and what the term is and technologies and how we utilize technology to care for a veteran. So I guess this would be a good place to start, Micah, right here, all about telehealth. It goes into the telehealth strategic plan and it goes into telehealth fact sheets. Now the Word document did not open up a minute ago, but I want to see if this PDF will, because this is a very, very important resource that most anyone on this call may want to be aware of and potentially view. I've clicked that to open. Let's see if it'll open for us today.

Fact sheets are put out every year and they summarize the work that Telehealth Services has been doing, and it's a great resource if you are wanting to understand the breadth and depth of telehealth and the kind of encounters that have been done and where we're going. There we go. It's opening. Let me know when you see it.

*Micah Azzano:* It's up.

*Sherron Olliff:* All right. So this is the latest fact sheet that's come out, and you can see here it's giving you information about how Telehealth Services is increasing access. It talks about the wide use of technologies. It talks about the synchronous, the real time. The asynchronous is Store and Forward, and it talks about the Home Telehealth, remote monitoring, and emphasizes the outcomes on that. I'm not going to go into details. That's not what we're doing. We're sharing resources. You can see, if anyone wants to know if a program is successful, this is where you'll find it out.

I believe that all of our programs, the outcomes have been just outstanding in terms of increased use of Clinical Video Telehealth, VA Video Connect, VA Video Connect into the home, the initiatives of getting everyone video capable, and getting providers the equipment they need and the training they need to be able to care for patients remotely. It has a whole section here on telehealth outcomes, and it talks about regionals and hubs, which is another whole part of telehealth where we're sharing resources across VISNs to connect for complications and filling gaps of services for folks that maybe are short a specialty and they want to use the specialty and do a remote consultation.



Let me go back to the website, and I wonder how long it'll take me. Hopefully it'll be just a second. It usually pops back in. You can go into those fact sheets. They're listed in there back from years ago so you can even see the growth. Link back in this way. That's one of the disadvantages with doing live. When you link out of the SharePoint, sometimes you link out.

I'm going to go back to about us. Again, you've got ... Here's mental health, mental health fact sheet. Here's one communication tool. Here's the VA partnership with T-Mobile. This was a big deal about folks being able to get VA Video Connect without using their plans. That explains all of that here. Let's see if that ... I want to show all this, but I guess I'm going to have to stop, because it's just going to take too long.

All right, here's about us, and again, this talks about CVT and the numbers of veterans that are receiving care through this modality. There's 136,000 on Home Telehealth. Clinical Video has 393 encounters. A total of 782,000 veterans who ... there's the video for Mobile. There's Dr. Heyworth. This is on a commercial. She was on TV, so you can go back and look at this YouTube. Can you see that, Micah?

*Micah Azzano:* Yes. Your screen's sharing perfectly right now, and now we're out of screen share.

*Sherron Olliff:* Okay. Stand by.

*Micah Azzano:* There's some really great resources, and I think when we go back in, if you want to copy that link and post it to the chat, I think that's a page that people would really like to go in and view and download those fact sheets that we're having a little trouble accessing right now.

*Sherron Olliff:* Okay.

*Micah Azzano:* And while we're waiting, Sherron, I have a question that I know you mentioned VVC as being really popular, but in your experience, what are some of the other popular tele-resources and what tools, are there any that you feel are useful and feel people should use more?

*Sherron Olliff:* I was focusing on getting this back. Repeat the question?

*Micah Azzano:* Sorry about that. I was just wanting to know ... I know you mentioned VVC as being really popular, but in your experience, what are some of the other popular tools or ones that you feel are really useful that you think people should use more?

*Sherron Olliff:* Well, the use of tools is really relevant to your situation. Clinical Video Telehealth, I think VA Video Connect is probably the most universal. In terms of, and this is not just telehealth, but My HealtheVet is just an amazing tool that I think we all need to be using and promoting, because it has and integrates an awful lot of features. With ... telehealth, using Clinical Video, you've got telemed people using Clinical Video to deliver TeleMOVE! to. You've



got all different disciplines now that are connecting for consultations. Social workers are getting involved, pharmacists are getting involved, and as we do VA Video Connect into the home, they're even expanding, and that's what this expansion is all about, is that they're expanding their ability to reach veterans through these modalities.

*Micah Azzano:* Excellent, thank you. And I want to remind everyone that if you do have any questions, you can enter them in the chat, especially right now while we're working on getting the screen share back. If you want to put in some questions, we can always ... There it goes.

*Sherron Olliff:* All right. Okay, about us. I want to show something else that's very, very special. The contact us is just you know how to reach us. Let me show you staff contacts, because a lot of people ask this question, "What if I want to network with someone that's doing, say, VA Video Connect into the home from another VISN or another place? How can I find these people?" You go here, to ...

*Micah Azzano:* Sherron, your screen is blank again. It's not showing. It started to go back, and it looks like it's frozen again.

*Sherron Olliff:* Well, Matt always said that this is not as easy on Adobe as it is in Skype. Let me ... What are you seeing on the screen?

*Micah Azzano:* Just right now we have a blank box, similar to what we did last time. And Sherron, we are coming up pretty close to the end of the hour.

*Sherron Olliff:* Okay.

*Micah Azzano:* So why don't we exit out. We can open it up to questions, have a little bit more of the discussion part before we start wrapping up.

*Sherron Olliff:* That sounds good. I think I'm out of the room.

*Micah Azzano:* Right now I'm not showing us as back in the actually in the Adobe platform. I'm still showing the screen share attempt. While you're working on that, I do have ... There we go.

*Sherron Olliff:* There we go.

*Micah Azzano:* I'll start things off with a quick question here while we're waiting for people to type in their questions. With all these discussion series, we would like to highlight some success stories or things that you've found were really interesting or positive feedback you've gotten. Do you have any of those that you can share and highlight for us?

*Sherron Olliff:* Positive experiences, I think probably the ability for veterans to get the care they need when they need it. I can give you lots of stories on Home Telehealth where that connection, ongoing with the care coordinator. We've had great and wonderful experiences with suicide prevention, being there just in time for them. Mental health has been using



telehealth probably more than any other specialty, and they do thousands of clinical video visits and allows therapy to be done in multiple different situations, and that opens up that immediate care and allowing those people that wouldn't normally be able to come to the medical center because they're working or the distance is a barrier, and they're able to connect directly with their providers.

And I know one of the amazing stories too is our program, the emergency plan, where Dr. Heyworth, they have their team that expands to emergencies, and during the hurricane in Houston, they were able to go into some of the shelters and actually deliver care remotely, see a veteran with maybe a wound problem somewhere else and be able to look at it and prescribe it. There's just a lot of amazing stories out there. TeleMOVE! is another great program. TeleMOVE! provides the MOVE! program directly to patients. They can go in every day and they can get their MOVE! assignments. They put in their weight. There's been hundreds and hundreds, and hundreds of pounds lost by veterans doing TeleMOVE! and then doing the clinical video into for MOVE! and there's just so many situations.

*Micah Azzano:* Thanks, Sherron. I'm pretty sure I know the answer to this, but just I'm going to go ahead and pose the question to you anyway. Who can access these websites?

*Sherron Olliff:* Who can access them? This is an intranet site for VA staff. I was going to try and find, there is a VA website that's open that's internet and there is a link on that site from the telehealth website, but I wasn't able to grab it during my demonstration. But there is one and I did not put that up. I would have to get that unless Matt, you know where that is? Is that the one you just put up, Matt? That's a generic site for anybody to see.

*Micah Azzano:* Excellent, thank you. Right now, we don't have any additional questions, so Sherron, I'm just going to ask. Is there anything else that you want to add that you think it's really important for people to know about the telesites and what you presented today?

*Sherron Olliff:* Well I think I covered things. I think what's important is that everyone should stand back and think, "How much of this do I know? How much of this do I not know?" because my experience has been you may be thinking telehealth and the only thing you think about is the doctor seeing the patient remotely, but you may not think about the groups that can be done. You may not be thinking about Home Telehealth where they can be referred for case management, or knowing that on My HealtheVet, there's a health assessment that anyone can go in and do.

All these modalities of Connected Care, we're putting together more and more trainings that integrate, and that's something else I'd like to really mention. This should be integrated into our clinical practice. Clinical Video Telehealth does not just belong to this group of people. Telehealth Services has so many tools and modalities, we want people to fully understand what they are so that they can begin using them, and it needs to become part of the continuum of care.



For example, if you've got someone with PTSD and they walk into the PAT team, what are some of the things that happen there? Is the PAT team thinking about all the resources that this veteran needs and can use? Are they thinking about and making sure that that veteran knows about My HealthVet? Does the team think about well, what apps would really help this veteran? What telehealth modality would really help this person? Do they live remotely? Would they benefit? And are they video capable?

We're really trying to get veterans video capable so that if a provider wants to connect with the patient where they are, they can easily go in and they can look and see if the person's capable of video. One of the newest kids on the block that we have is that we have made available a location in CPRS where you can download a clinical reminder into CPRS that identifies if your veteran is video capable. The process for going through and having that entered goes through a step-by-step question to that veteran so that you're assured that yes, they're video capable. If the team, the PAT team, designates that as one of the questions when they first come in and check into their appointments, that's the kind of processes that hopefully will begin being integrated into our whole continuum of care, that we begin to think about what, other than sitting down and prescribing a hypertensive medication, what other tools and what other things can we use to help all of our veterans better self-manage? The tools are just growing by leaps and bounds.

*Micah Azzano:* Okay, Sherron. I see someone still typing right now, so we'll give people a few more minutes to ask some questions. I do want to direct people here to the last slide. There is a link to a survey there. You can give us feedback on how we're doing and also propose topics for upcoming discussion series, so I'm going to leave that up there for just a second.

Okay. I don't see any additional questions coming in at this time, so with that, again, I'm going to direct everyone to the survey on the screen. If you want to click that link and let us know how we're doing, share your thoughts, we really appreciate the feedback. We'll be leaving this up for a few minutes after we end the session. And again, I want to thank Sherron for presenting and thank you for everyone for joining us today. I encourage you to go to the discussion series webpage and check out our past webinars as well as check back frequently for updates on ones to come. We'll be doing one again next month. So with that, thank you, Sherron.

