WELCOME!

Emily Kane, MPA
Senior Program Manager
National Nurse-Led
Care Consortium

Saqi Maleque Cho, DrPH
Director of Research, Policy, and Health Promotion
National Center for Health in Public Housing

NATIONAL NURSE-LED CARE CONSORTIUM

The **National Nurse-Led Care Consortium (NNCC)** is a membership organization that supports nurse-led care and nurses at the front lines of care.

NNCC provides expertise to support comprehensive, community-based primary care.

- Policy research and advocacy
- Technical assistance and support
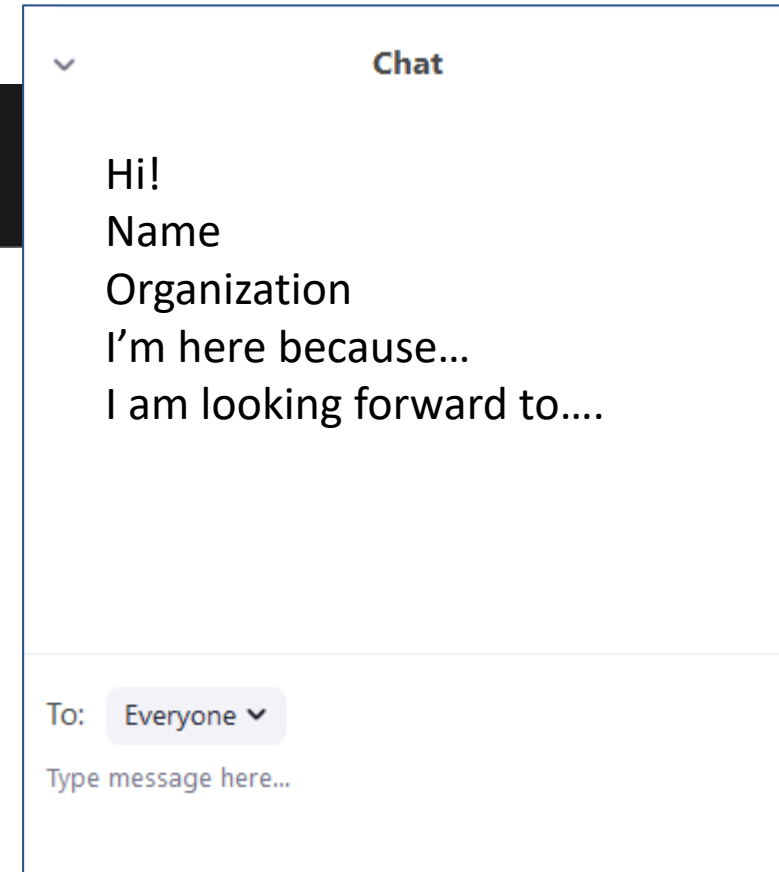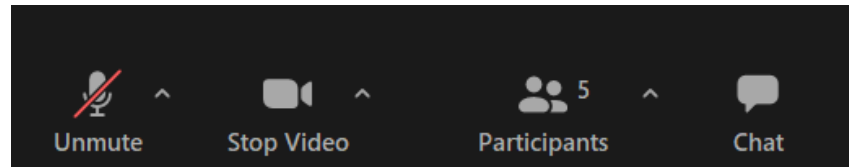- Direct, nurse-led healthcare services

HOUSEKEEPING

Zoom Tips
- Videos on!
- Mute when not speaking
- Engagement
- Breaks when you need them

Follow-up Items
- Brief survey poll at the end of the module
- CME/CNE credit link to be shared in chat and on Bridge
- "Pitch" your partnerships!

Chat

Hi!
Name
Organization
I'm here because…
I am looking forward to….

To: Everyone ∨

Type message here…

BRIDGE

Welcome Packet: Community Partnerships
Completed an hour ago

Introductions: Community Partnerships
Completed an hour ago

Module 1

Featured health center: TCA Health

Module 1: Partnerships to address Social Determinants of Health
1 Session / Beginning October 22, 2020 / Web Conferencing Available /
Step 3 in Community Partnerships to Address the Consequences of the COVID-19 Pandemic among Residents of Public Housing

REGISTER NOW

Module 1: Slides and Recording (10/22)
Due tomorrow / Takes about a few seconds

Module 1 Discussion Forum: 10/22
Due in 6 days / About a minute remaining

Module 2

Featured health center: Lancaster Health Center

Module 2: Partnerships to address Adverse Health Behaviors
1 Session / Beginning November 5, 2020 / Web Conferencing Available /
Step 5 in Community Partnerships to Address the Consequences of the COVID-19 Pandemic among Residents of Public Housing

REGISTER NOW

DISCUSSION

➢ Pitch a Partnership
  ➢ Why you're looking to partner,
  ➢ Who your partner(s) will be, and
  ➢ What you hope to achieve through the partnership(s)

➢ Guiding Questions
  ➢ What's one promising practice you took away from today's presentations?
  ➢ What could you see as a barrier for implementation for your health center?
  ➢ Who in your community could you approach to create a partnership(s) like the one(s) described today?

UTILIZING TEHNOLOGY IN PARTNERSHIPS: Bridging the Digital Divide During the COVID-19 Pandemic

Thursday, December 3rd
1pm – 2pm

Saqi Maleque Cho, DrPH, MSPH
Director of Research, Policy, and Health Promotion
National Center for Health in Public Housing

Bridging the Digital Divide:

Using Technology to Improve Access to Health Care for Public Housing Residents

April 2020

National Center for Health in Public Housing

NCHPH

Agenda:

- Digital needs and challenges of public housing residents
- Risks and benefits of using technology to improve patient care
- Recommendations on how to prepare health centers and patients to optimize digital tools, improve access to care, and enhance efforts through partnerships to bridge the digital divide
- Impact of COVID-19

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DIGITAL HEALTH LITERACY IS THE ABILITY TO SEEK, FIND, UNDERSTAND, AND APPRAISE HEALTH INFORMATION FROM ELECTRONIC SOURCES
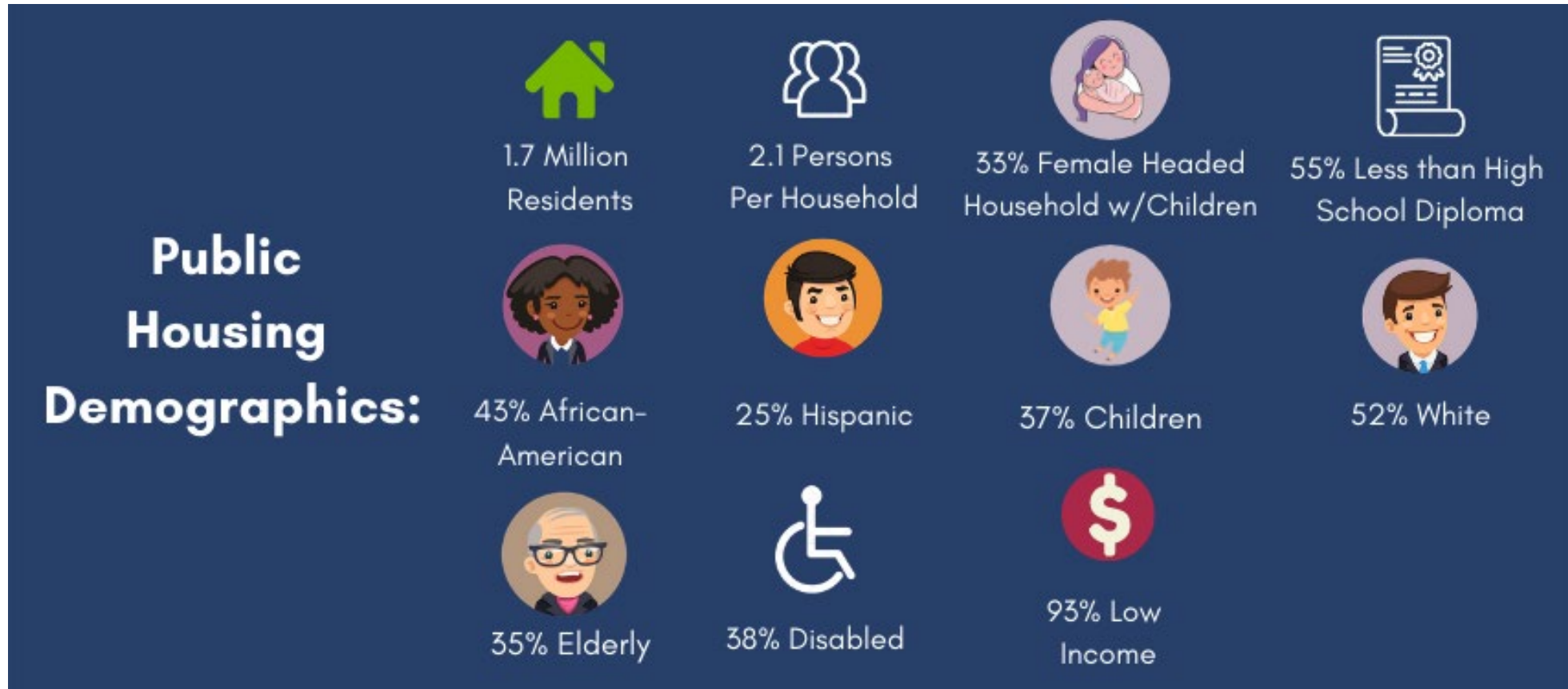
Why Use Technology to Improve Health of Public Housing Residents?

Digital Disparities

- Low-income individuals are less likely to have adopted or utilize a digital health communications system to track, monitor, or maintain their health.

- Elderly populations with low education are more likely to have lower levels of digital literacy.

- Patients with low health literacy are less likely to use health information technology tools.

- Disabled Americans are about three times as likely as those without a disability to say they never go online.

In 2020, there were roughly 1.7 million residents of public housing. Approximately 93% were living below poverty, 33% were headed by a single female, 37% of the households had children, and 38% had a member that was disabled. (Source: HUD)

Public Housing Demographics:

- 1.7 Million Residents
- 2.1 Persons Per Household
- 33% Female Headed Household w/Children
- 55% Less than High School Diploma
- 43% African-American
- 25% Hispanic
- 37% Children
- 52% White
- 35% Elderly
- 38% Disabled
- 93% Low Income

Source: HUD Resident Characteristics 2020

Smartphone dependency by income

% of U.S. adults who do not use broadband at home but own smartphones, by income

Legend: Less than $30,000 — $30,000-$49,999 — $50,000-$74,999 — $75,000+
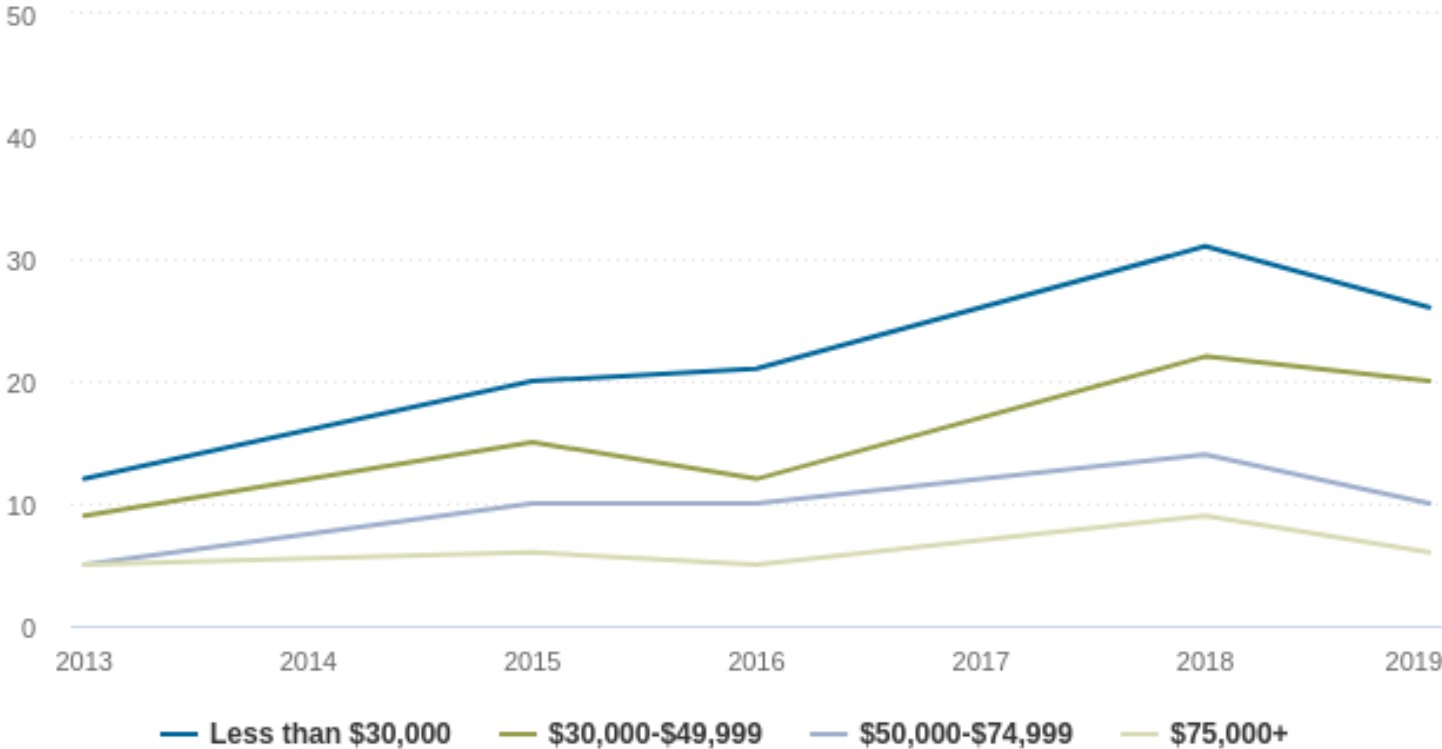
Low-income individuals are less likely to have broadband internet.

WIRELESS TECHNOLOGIES ARE PRACTICAL AND COST-EFFECTIVE METHODS FOR MONITORING CLINICAL OUTCOMES AND INCREASING PATIENT ADHERENCE TO TREATMENTS.

Tech benefits for diabetes management:

- email and text messaging can help facilitate patient self-management of diabetes

Tech benefits for behavioral health interventions:

- ability to capture data regarding engagement with and adherence to a program more frequently, which enables evaluation of a program's outcomes and modification of the program over time

"TECHNOLOGY ALLOWS PEOPLE TO CARRY THEIR SUPPORT NETWORK AND PROGRAMS QUITE LITERALLY IN THEIR POCKET. IT ALSO EXTENDS THE WORK OF CARE MANAGERS AND SPONSORS, GIVING THEM A SCALABLE WAY TO MONITOR AND COMMUNICATE THROUGHOUT A PATIENT'S JOURNEY."

CHIPPER STOTZ AND MEGAN ZWEIG, ROCK HEALTH

#1. Make the most of Electronic Health Records for SDOH

- [Capturing Social and Behavioral Domains in Electronic Health Records: Phase 1](#), the IOM committee identified the social and behavioral domains to be considered in all EHRs; criteria for deciding which domains to include; and domains for specific populations or settings defined by age, socioeconomic status, race/ethnicity, disease, or other characteristics.

- The second report, [Capturing Social and Behavioral Domains and Measures in Electronic Health Records: Phase 2](#), pinpoints 12 measures related to 11 of the initial domains and considers the implications of incorporating them into all EHRs.

- The eHealth Literacy Scale (eHEALS) is an 8-item scale developed to measure consumers' combined knowledge, comfort, and perceived skills at finding, evaluating, and applying electronic health information to health problems.

> "It's not only access to housing, food, pharmacy, but also things like lacking broadband service or text-messaging services; those can have severe impact on the patient engagement side."
>
> CIO, SBH Health Systems

Poll Question #1:

Do you screen /assess digital health literacy?

PHPCs may consider the following metrics on digital literacy and broadband access:

1

DO YOU CURRENTLY HAVE ACCESS TO HIGH SPEED INTERNET ON A COMPUTER OR TABLET IN YOUR HOME?

2

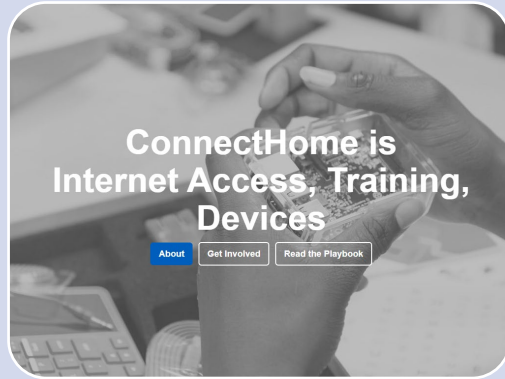DO YOU USE A SMARTPHONE FOR ACCESSING THE INTERNET?

3

DO YOU VISIT A SCHOOL OR LIBRARY WHEN YOU NEED INTERNET ACCESS?

4

HOW COMFORTABLE ARE YOU WITH FINDING HEALTH INFORMATION OR ACCESSING PATIENT PORTALS?

#2. *Increase digital health literacy and partner with other organizations to improve broadband access*

ConnectHome is Internet Access, Training, Devices

About | Get Involved | Read the Playbook

LEAP

LITERACY FOR EVERY ADULT PROGRAM

discussion information healthcare dialog
Digital Health literacy
IC-Health
ideas EU platform connection
improving health exchange

HUD developed a new pilot initiative called ConnectHome that engages PHAs, city municipalities, and private sector stakeholders to close the digital divide by providing digital literacy training, broadband access, and digital devices.

The Richmond Library and Cultural Services Department's Literacy for Every Adult Program (LEAP) created The Digital Health Literacy Project to provide low-income Richmond, VA residents with tools and skills needed to access online information to improve their health.

IC-Health Consortium, which consists of 14 partners from seven countries in Europe, developed a series of 35 open access online courses (MOOCs) in eight languages.

Poll Question #2:

Are you partnering with an organization to improve digital health literacy or broadband access?

3. Increase telehealth services

telephone call

online support group

obtaining health information and self-management tools online

online communication with providers
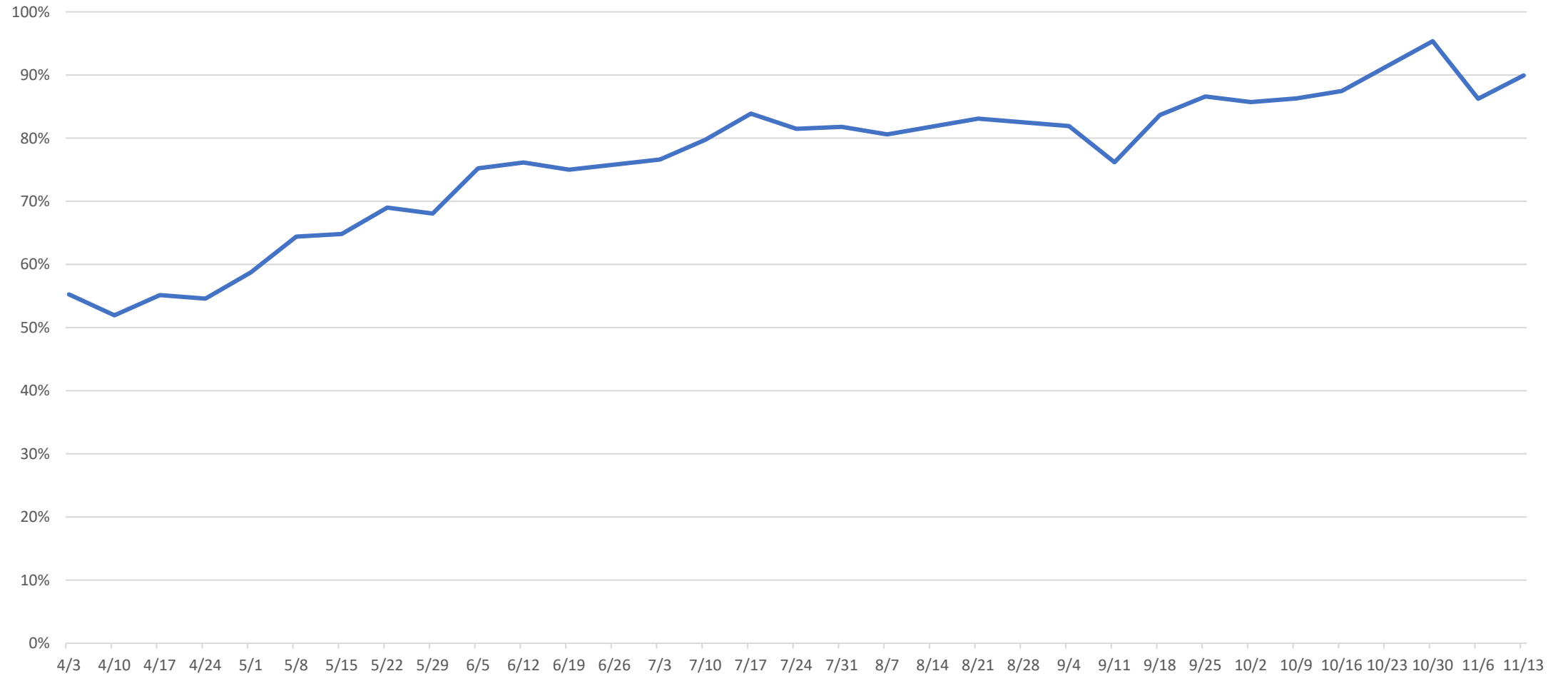
EHR

remote monitoring of vital signs and symptoms

video consultations

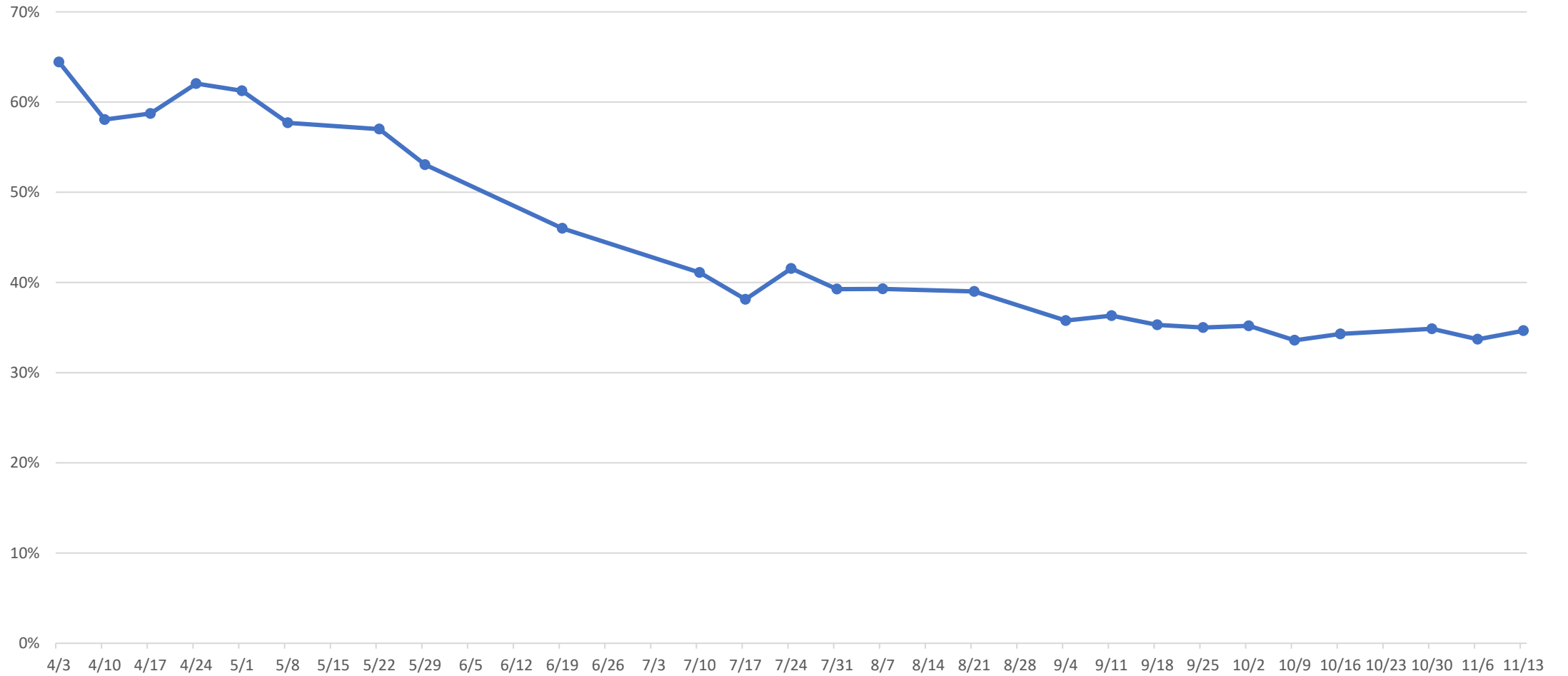- 2018 UDS: 42%

- 2020 HRSA Survey: **96.67%**

IMPACT OF COVID-19

Percent of PHPC Health Center Visits Conducted Virtually

TODAY'S PARTNERSHIP SHOWCASE

Dr. Deborah J. Smith, M. D.
VICE PRESIDENT - CHIEF MEDICAL OFFICER

Ms. Karen Parker
VICE PRESIDENT OF SPECIAL POPULATIONS & INNOVATION

- Private, non-profit federally qualified health system formed in 1977
- 24 health centers (including 2 mobile units)
  - Joint Commission Accredited since 1998
- Primary Care Medical Home (PCMH) Certified since 2013

Scope of Services

Quality of Life
HEALTH SERVICES INC.

- Medical/Primary Care
- Dental
- Optometry
- Podiatry
- Behavioral Health/Psychiatry/MAT
- Lab/Radiology
- Pharmacy
- Health Education/Nutrition
- Enabling Services (i.e., interpretation/translation)

3 Key Champions for Telehealth Success

CHIEF MEDICAL OFFICER

#1 Program Champion

- This provider is the greatest influence to gaining clinical team buy-in
- Makes the program credible

STAFF

- Health Center Providers
- Clinical Support Team
- Program Director
- IT Support

PATIENTS

- Speak to program's success
- Lend credibility to program, which increases acceptance and interest

"Let's grow together as we work together, so we can WIN together!"

School-Based Telehealth Network

Telehealth equipment was upgraded and installed on Mobile Units. Over the course of the project, equipment was also installed in select rural schools.

Telehealth Via Mobile Units

We connect students to services using Mobile Units equipped with telehealth systems to bring medical, dental, optometry and behavioral health services to schools (Pre-COVID)

TELEHEALTH VIDEO

(Introduction to Telehealth)

Onboarding and New Employee Engagement

COVID-19 PANDEMIC

The onset of the coronavirus (COVID-19) pandemic has forever changed how we deliver health care. We have experienced a dramatic impact in our operations, staffing, delivery of care, and budget, and we remain challenged in determining how to continue to provide health care services in the safest way possible.

COVID-19 PANDEMIC IMPACT

Quality of Life
HEALTH SERVICES INC.

- Temporarily closed 13 sites in March 2020

- Approximately 30% staff temporarily laid off in March 2020

- Rapid move to telehealth and phone care only services

- Decrease in patient visits

- Decrease in patient revenue & collections

- Frequent COVID-19 exposures at sites

- COVID-19 testing at locations

- Lack of personal protective equipment (PPE)

COVID-19 PANDEMIC STRATEGIES

- Enhancing telehealth services to improve access to quality health care

- Developed strategies to identify which patients can be managed by telephone, face-to-face or emergency care

- Revised policies and procedures to accompany new protocols and workflow processes

- Created spacing in waiting areas at sites for social distancing

- Installed air purifiers for waiting rooms

- Implemented wellness checkpoints at each location

COVID-19 PANDEMIC STRATEGIES

- Placed protective barriers at front desk

- Provides patient, community, and staff education and training on risk, safety and security processes

- Encourages frequent handwashing and require masks to be worn by employees and patients

- Enhances cleaning protocols

- Maintains adequate supply of PPE and cleaning supplies

- Uses supplemental funding to test, prevent and respond

COMMUNITY TESTING DAYS

Quality of Life
HEALTH SERVICES INC.

We offer the flu shot and COVID-19 test at all locations. Special initiative for community flu shot & COVID-19 test were conducted on the following days:

October 17, 2020 – Etowah County

October 29, 2020 – Chambers County

November 13, 2020 – Etowah County

GROWTH & OPPORTUNITIES

Over the next two years (Corporate Strategic Plan), we will continue to strive to improve quality performance and increase our level of care. Our goals are increasing capacity, improving access to care and promoting safety, expanding telehealth services, and improving quality care and performance.

Increase Capacity → **Improve Access to Care & Promote Safety** → **Expand Telehealth Services** → **Improve Quality of Care**

GROWTH & OPPORTUNITIES
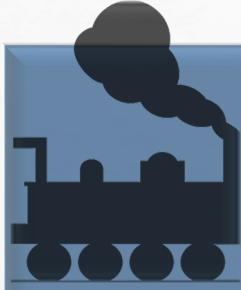
Build a Culture of Trust and Engagement

Deliver Effective Communication & Build Relationships

Invest in the Future of Health Care

Quality Improvements in Healthcare Systems

Remote Patient Monitoring Implementation

Improve Patient Outcomes & Compliance

Quality of Life
HEALTH SERVICES INC.

Get Onboard or Get Left Behind!

Telehealth is Moving at the Speed of Light - We Must Move With It!

Technology (and the COVID Pandemic) is Driving Health Care Reform – There Is No Getting Around It!

CONTACTS

Dr. Deborah Smith

VP Chief Medical Officer/Chief of Pediatrics

256-439-6397

deborah.smith@qolhs.com

Karen Parker, MSW

VP Special Populations & Innovation

256-439-6308

karen.parker@qolhs.com

What could you see as a barrier for implementation for your health center?

Who in your community could you approach to create a partnership(s) similar to the one(s) Dawn described?

THANK YOU!

- Complete the post-test: https://www.surveymonkey.com/r/ZF5KLJN

- Complete evaluation poll

- Post in discussion forum on Bridge