



Adirondack Health Institute

Lead • Empower • Innovate

“Relieving the Pressure” with Telewound Care

Panelists:

Amanda Waite, Administrator, Fort Hudson Nursing Center, Inc.

Holly Vaughn, RN, Director of Nursing, Fort Hudson Nursing Center, Inc.

Patricia Ross, RN, Nurse Manager, Fort Hudson Nursing Center, Inc.

Dr. Jitendra Singh, Plastic Surgeon, Singh Plastic Surgery

Moderator:

Katy Cook

Telehealth Project Manager, AHI

Sept. 27, 2018



North Country Telehealth Partnership

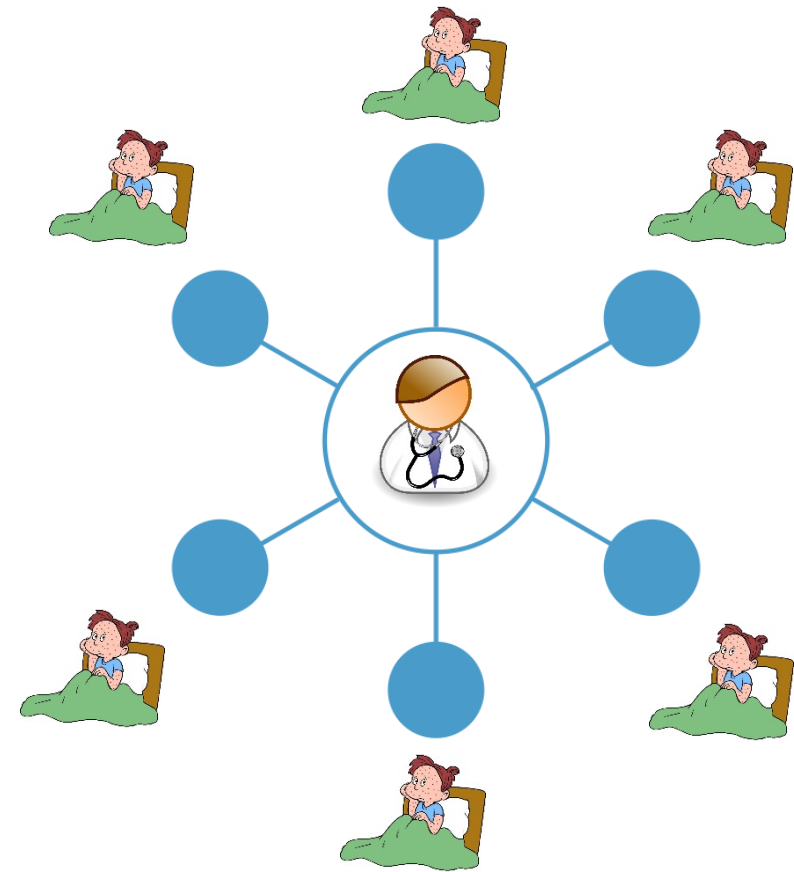
The **North Country Telehealth Partnership**, a joint venture of **Adirondack Health Institute (AHI)** and **Fort Drum Regional Health Planning Organization (FDRHPO)**, is northern New York's leading agency focused on increasing access to health care through the innovative use of telehealth and telemedicine technology. The Partnership is funded through a Rural Health Network Development Grant through the New York State Department of Health.





Telehealth Versus Telemedicine

- NYS definition of Telehealth
- NYS definition of Telemedicine
- Hub (Distant/Provider Site)
- Spoke (Originating/Patient Site)





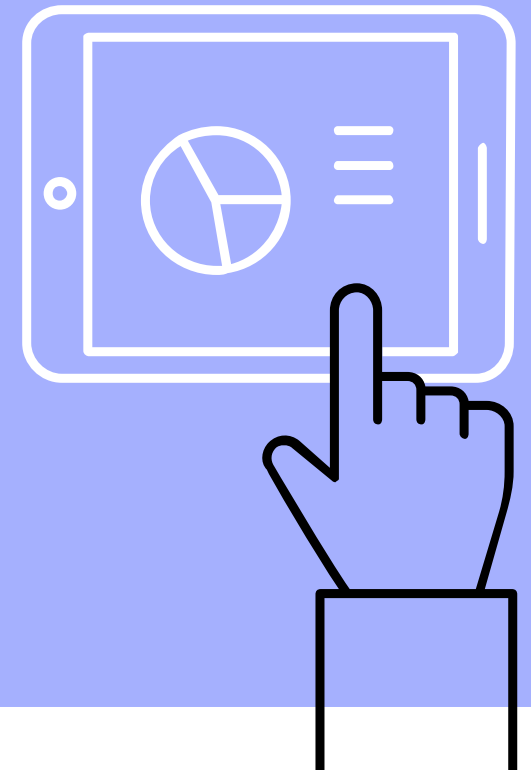
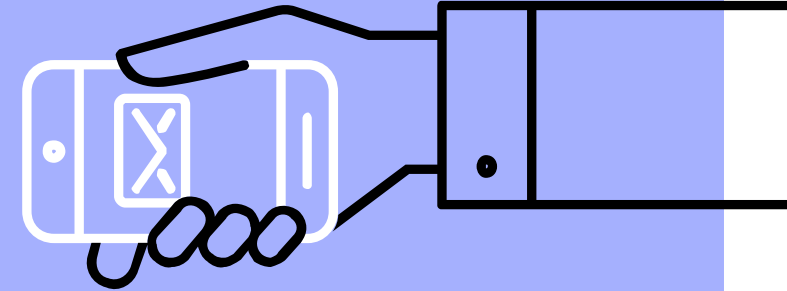
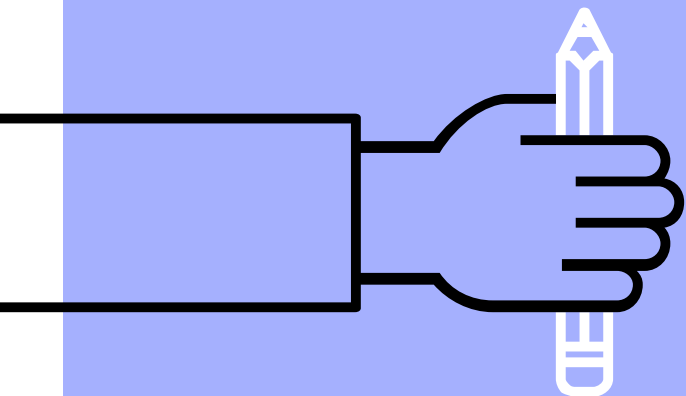
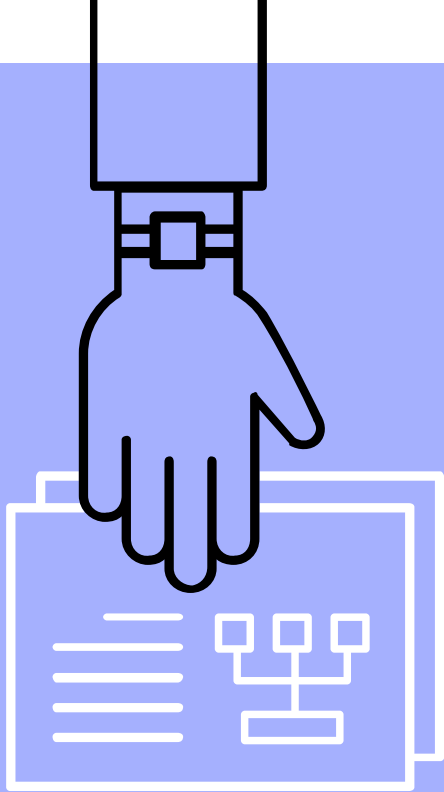
Why Telewound Care?

When it comes to healing chronic wounds – for those that have not mended within three weeks, telewound care cannot only speed up the healing process, but cuts costs and reduces wait times to see an experienced clinician.

The advantages of telewound care include:

- Decreased wait time to see an expert physician
- Timely follow-up on chronic or post-surgical wounds
- Convenience from patients' bedside vs. being transported
- Improved clinical outcomes and enhanced quality of life

Relieving the Pressure with Telewound Care



OVERVIEW

1. Who we are...

... and why do this?

...For your residents?

...For your staff?

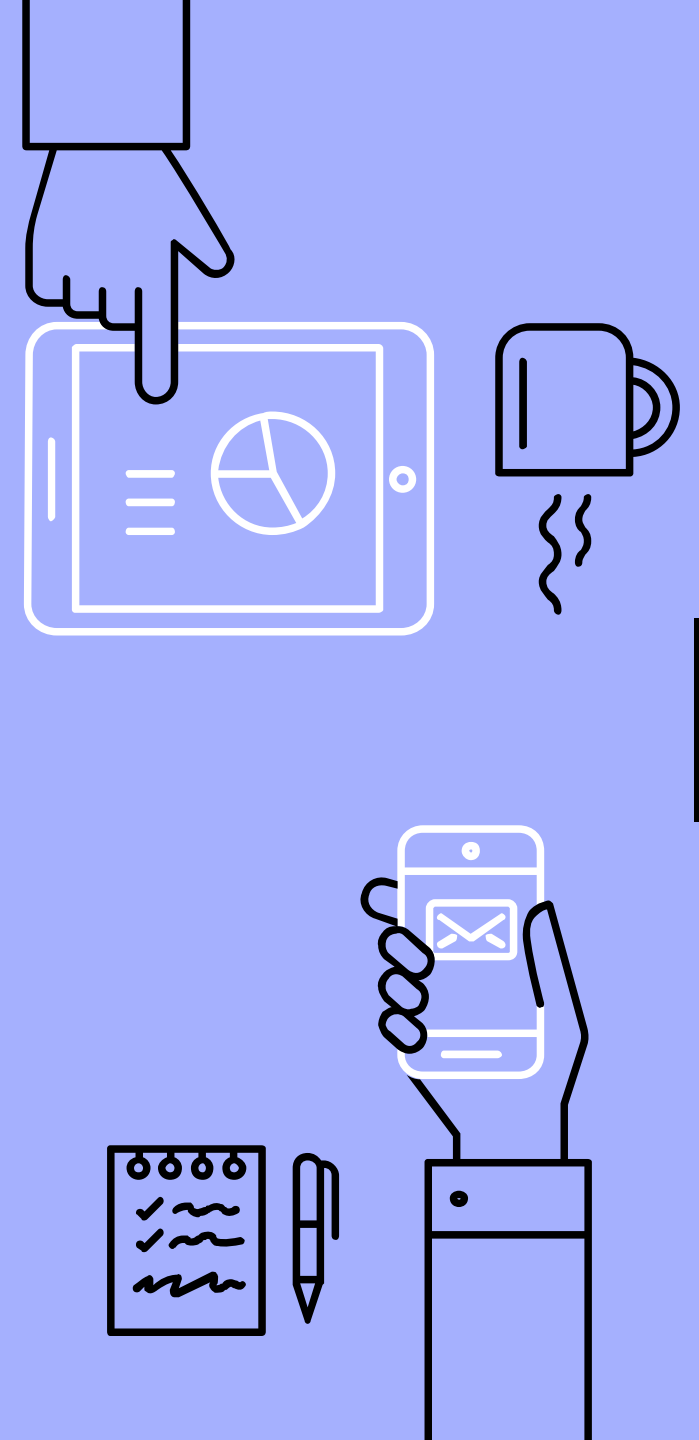
Is there actually a
business case for
Telewound Care?

2. How?

The nuts and bolts of
how Fort Hudson
Nursing Center got this
program off the ground.

3. Case Study

Our Facility Champion,
Patricia Ross, RN, shares
the experience.



Fort Hudson Nursing Center

- 196-Bed Skilled Nursing Facility
- Located in Fort Edward, NY
- 30 minutes south of Lake George
- Not-for-profit established in 1969
- Original affiliate of Fort Hudson Health System
 - Medical Day Care
 - Social Day Care
 - CHHA Services
 - LHCSA Services
 - Care Management
 - Independent Senior Apartments

Team Members Here Today

- Amanda Waite, *Administrator*
- Holly Vaughn, *Director of Nursing*
- Patricia Ross, *RN Manager*





100+
PARTNERS

- ♦ *Community-based organizations*
- ♦ *Primary care providers*
- ♦ *Hospitals*
- ♦ *Mental health treatment providers*
- ♦ *Substance abuse treatment providers*
- ♦ *Skilled nursing facilities*
- ♦ *Home and community providers*



\$187 MILLION
PERFORMANCE-BASED FUNDING



9
COUNTIES

- ♦ *Clinton*
- ♦ *Essex*
- ♦ *Franklin*
- ♦ *Hamilton*
- ♦ *Warren*
- ♦ *Washington*
- ♦ *Fulton (portion)*
- ♦ *Saratoga (portion)*
- ♦ *St. Lawrence (portion)*



11
PROJECTS

- ♦ *Build care management infrastructure.*
- ♦ *Enhance disease management programs for targeted chronic conditions.*
- ♦ *Build population health management infrastructure.*
- ♦ *Improve population health.*



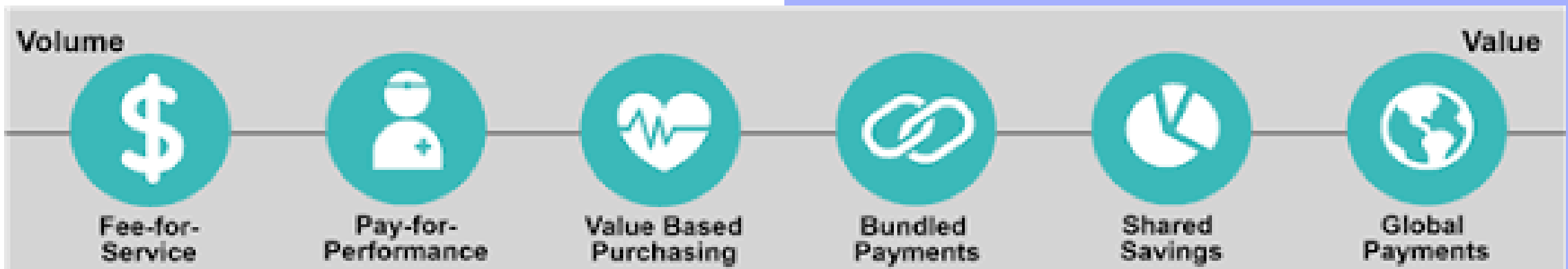
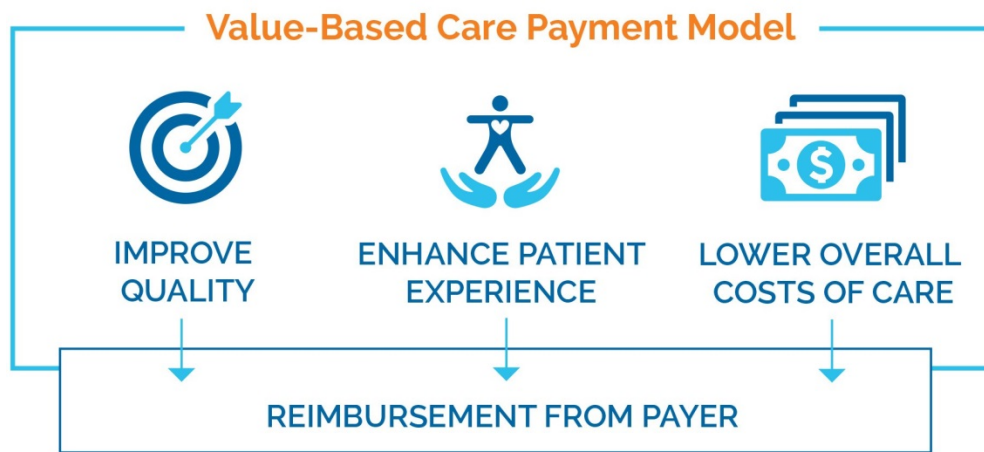
25%
REDUCTION IN AVOIDABLE HOSPITAL USE



5
YEARS
2015-2020.



DSRIP
Workforce



Who wants to the play in the sandbox with us?





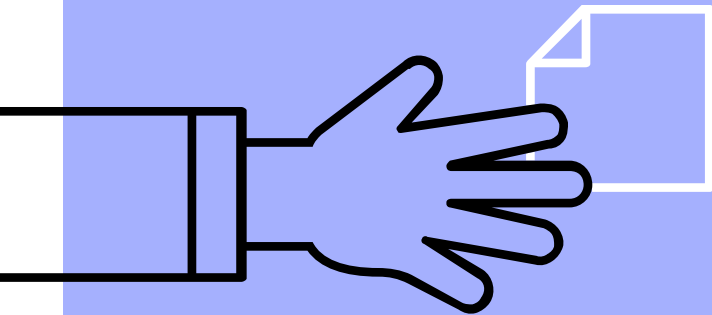
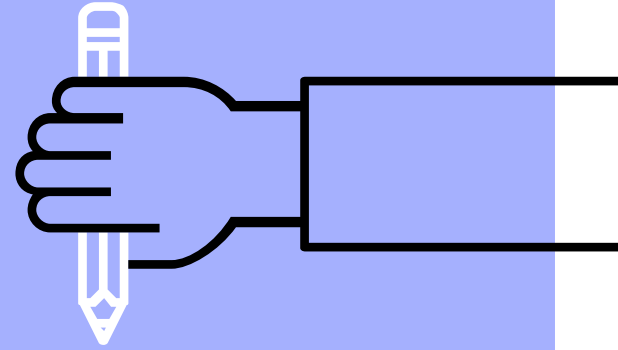
“

It all started with our friend here from AHI, Katy Cook...She introduced us to the concept of Telehealth and even brought the expert, Dr. Jitendra Singh, M.D., P.C.



1. Why Telewound Care?

Let's start with the basic facts...





“

“The majority of wounds encountered in a nursing home setting can be evaluated and managed visually by a wound expert within minutes.”

- Dr. Singh



BIG CONCEPT

Guess the average
time a chair
dependent nursing
home resident sits in
one position to go
from our facility to
the local wound
center?



THREE HOURS!



“

*“The **LEADING** cause of pressure is immobility.”*

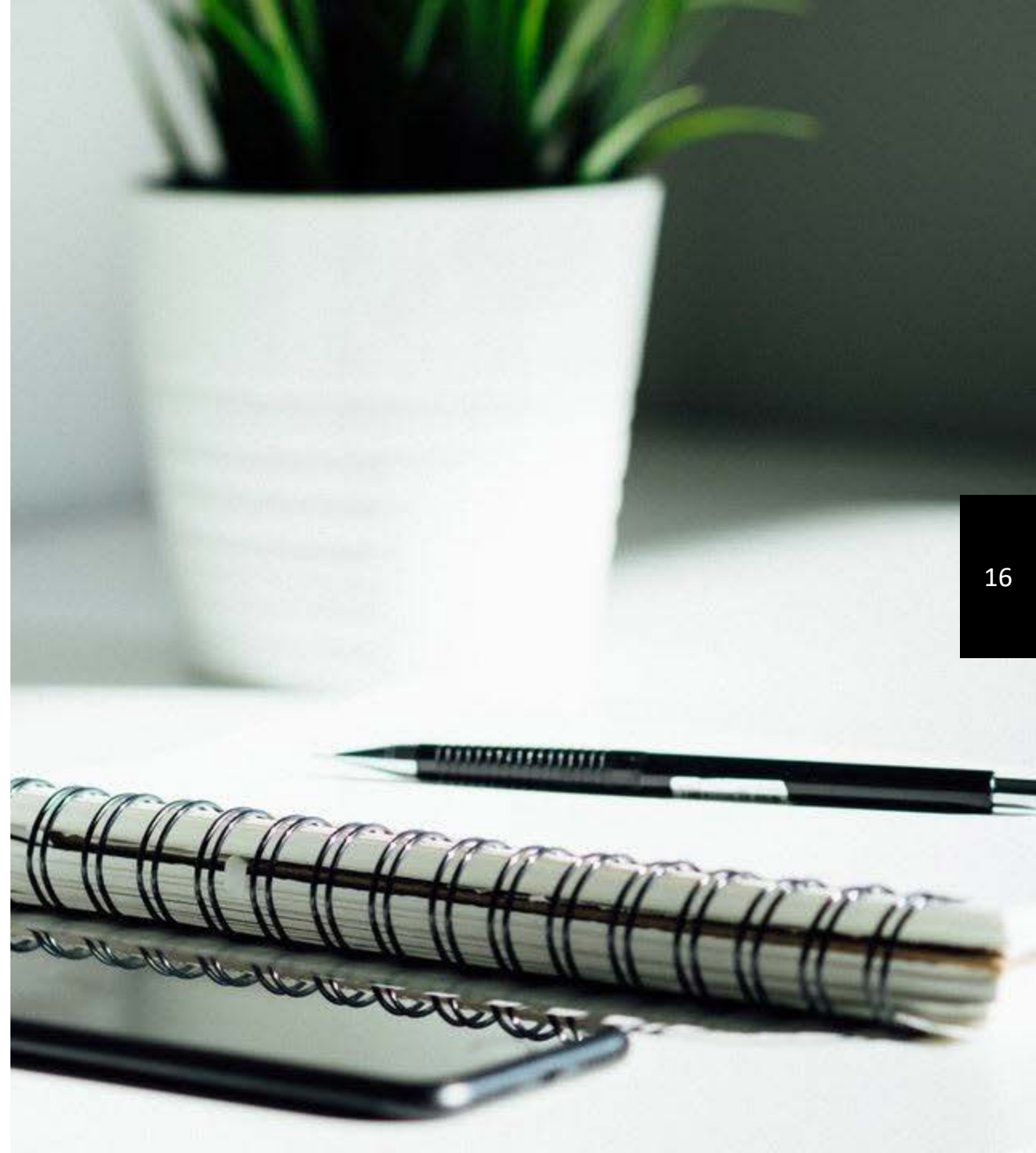
“According to Johns Hopkins Medicine, a sore can develop if blood supply is cut off for more than 2 to 3 hours.”

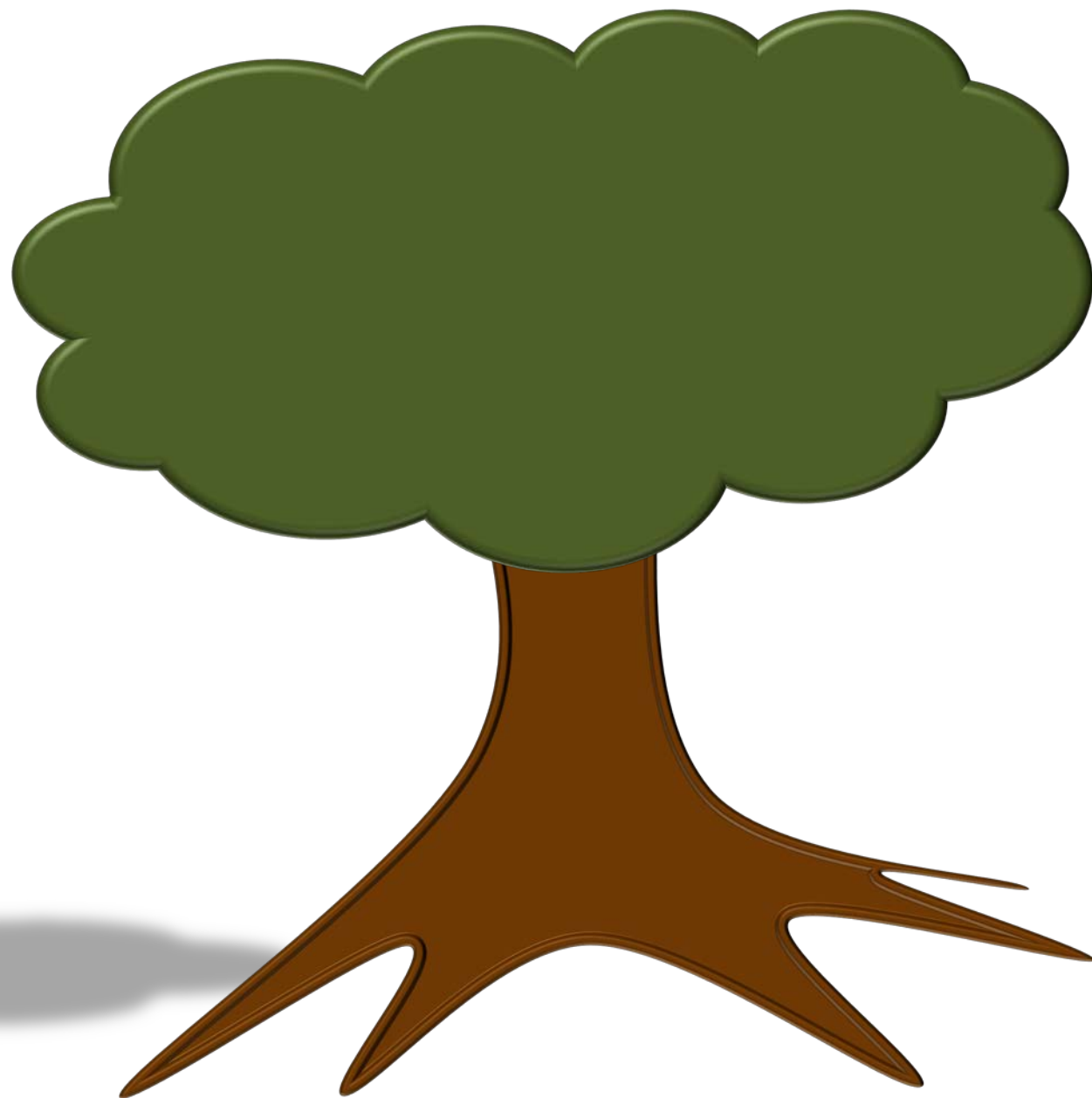
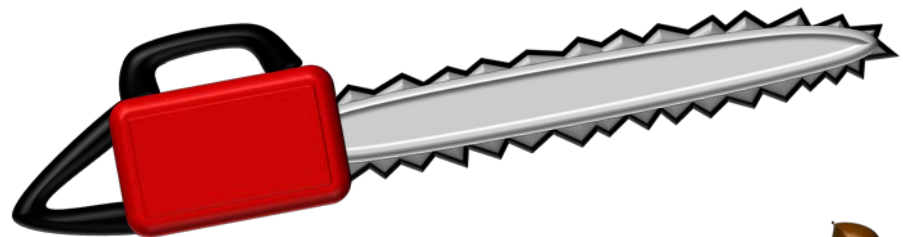


Thanks to Telewound Care...

Fort Hudson residents can opt to go to a private office in the facility or stay in bed in their pajamas!

Dr. Singh can sit at his office in Glens Falls between in-person office visits and see 3 long-term care residents in 20 minutes using his iPhone or laptop.





Transportation Savings

Before...

One wound care resident typically requires a driver (12 minutes there and back = 24 minutes) and an aide escort (3 hours) so that the driver can continue with other medical appointments.

= \$57 in labor for the basic wound center appointment
+Plus -- van depreciation/gas

Now...

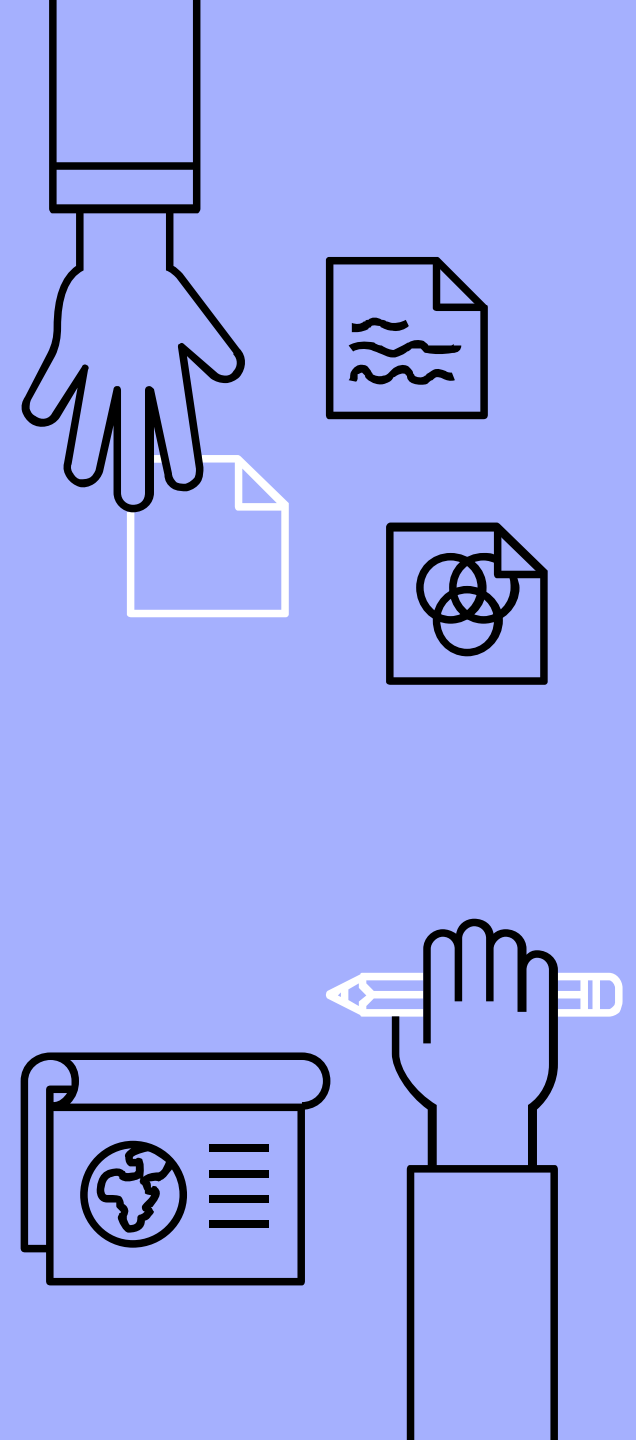
\$0 dollars spent

Telewound Care eliminated the need for a driver, C.N.A. escort, a transport van, and gas!



NO MORE WAITING FOR AN APPOINTMENT!

- ▶ The average Fort Hudson resident waited in 2017,
30 - 45 days
- ▶ to be seen at the Wound Center.
- ▶ Today as soon as **ANY** staff member in the building reports redness or skin risk, Dr. Singh can see that resident in
24 - 48 hours



The Unforeseen Benefits

No more phone tag

An RN typically has to call, post out-of-facility consult to clarify orders. It's not atypical to experience a 48-hour delay.

Direct contact between the RN and MD

Cut out the Wound Center Office RN.

Dr. Singh is in the medical record

Typing his notes and assessments directly into PointClickCare so nothing is ever lost or needs to be filed/scanned.

Education at the bedside

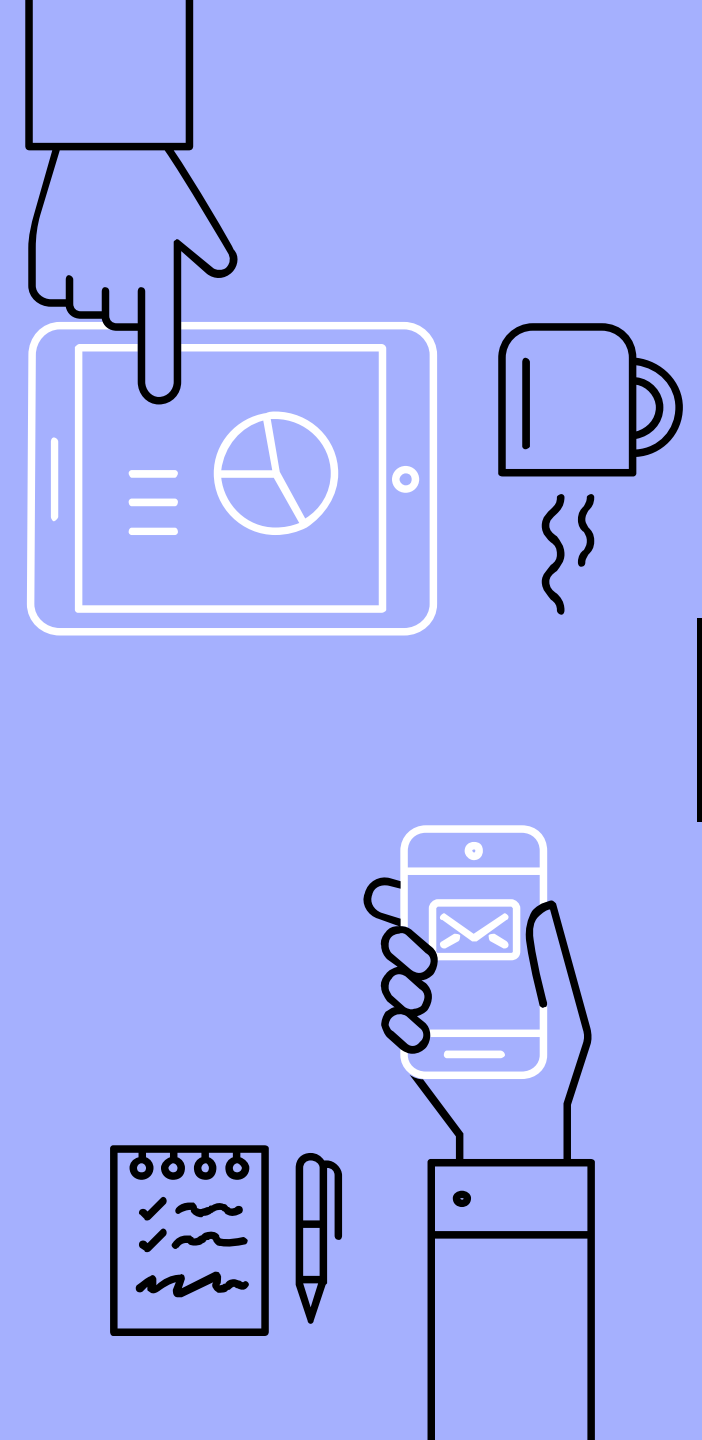
There is more time afforded to ask questions/for the MD to teach/conduct root cause analysis.

Great perk to advertise!

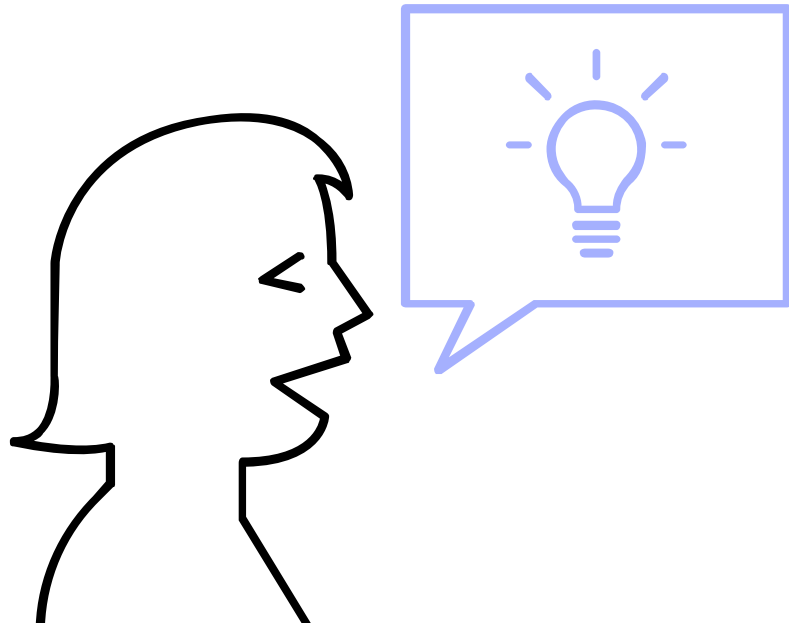
We have a credentialed Plastic Surgeon who rounds at our facility. Unheard of in our circles!

Affirmation at the bedside

Sometimes the care team just needs to hear it directly from the expert that they are doing everything right. This goes a long way in boosting morale!



The Random Bumps in the Road



Hospice R e f e r r a l s

...And the importance of working closely with your Hospice Medical Director in the name of the resident.

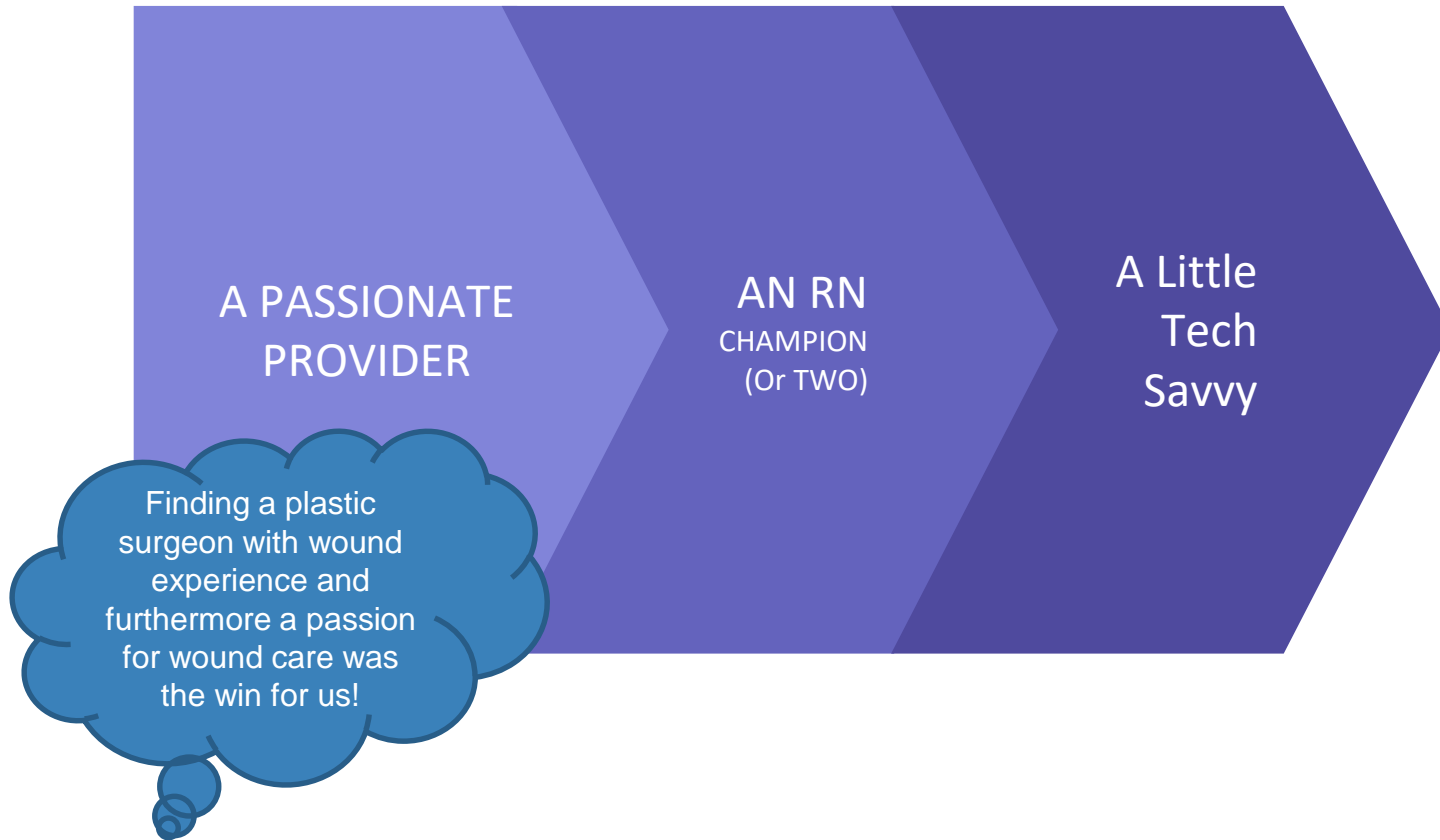
Lighting

...Nothing a Lowe's head lamp can't fix!

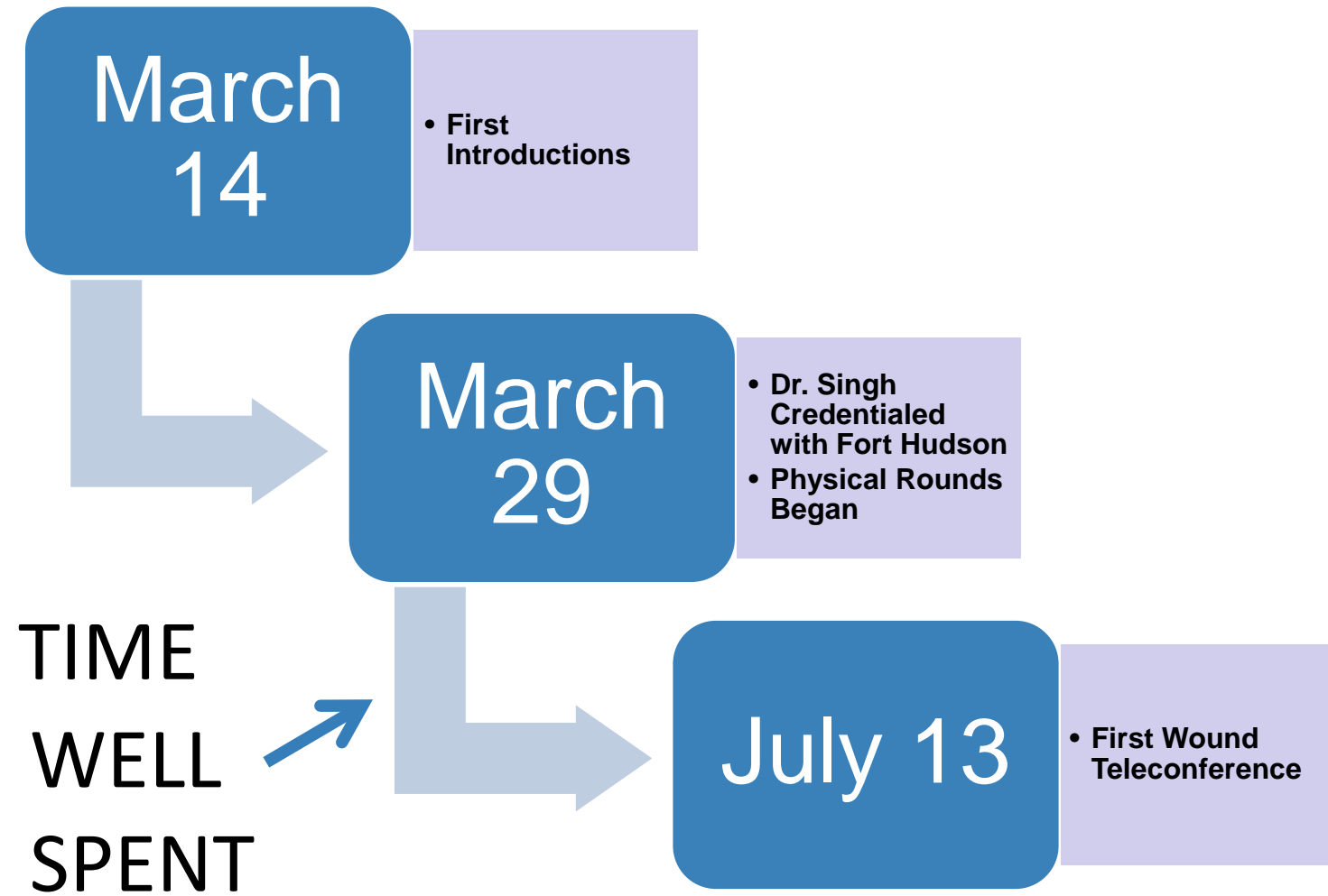
We're not rural?

...grant funding implications.

The Nuts and Bolts of Telewound Care and How We Did It...



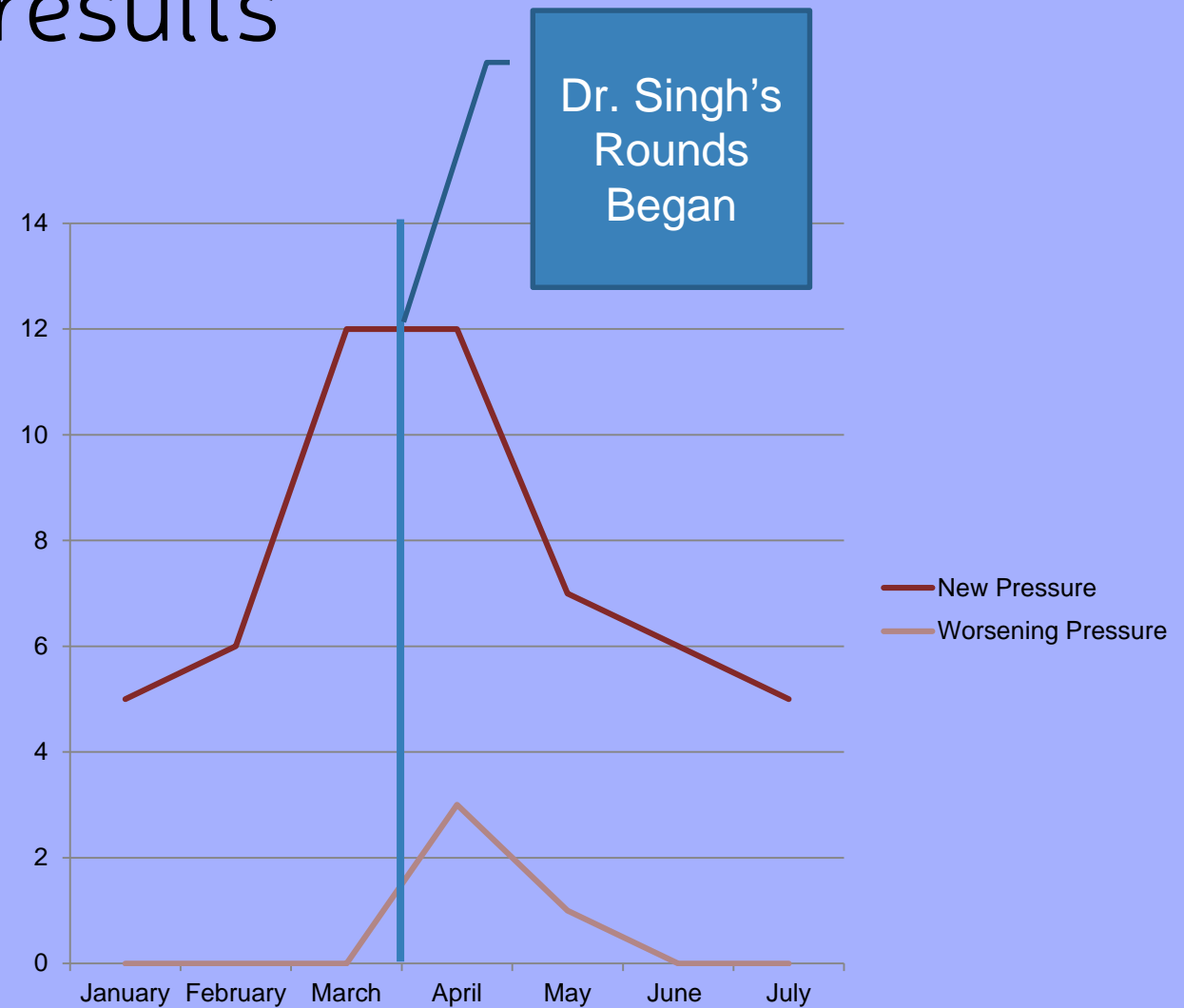
Implementation Timeline



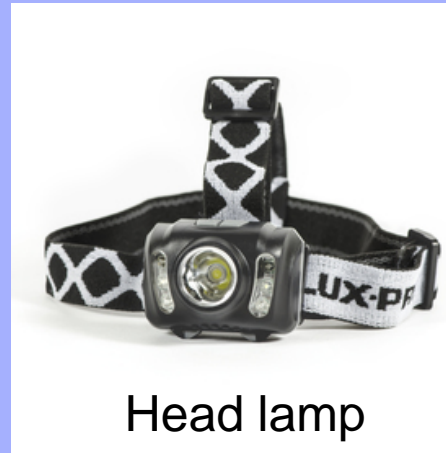
And the preliminary results
are in...

17

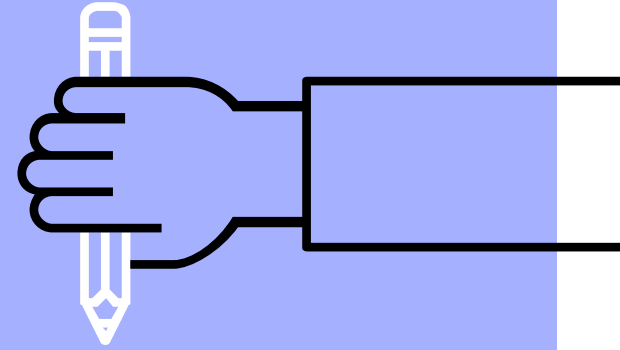
Total Wound Visits Made At
Fort Hudson
Between March 29, 2018 and
August 2018



Dell Latitude E5470

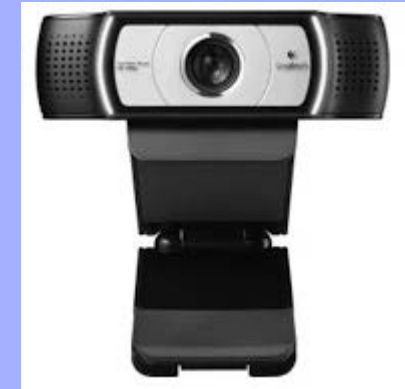


Head lamp

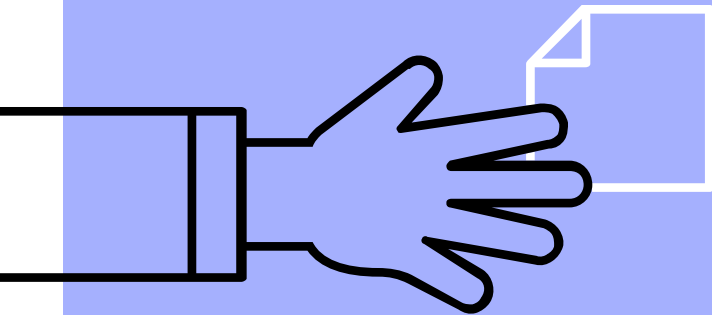


Facility Tools

= \$1,241 investment



Logitech C930e 1080P HD Video Webcam - 90-Degree Extended View, Microsoft Lync 2013 and Skype Certified

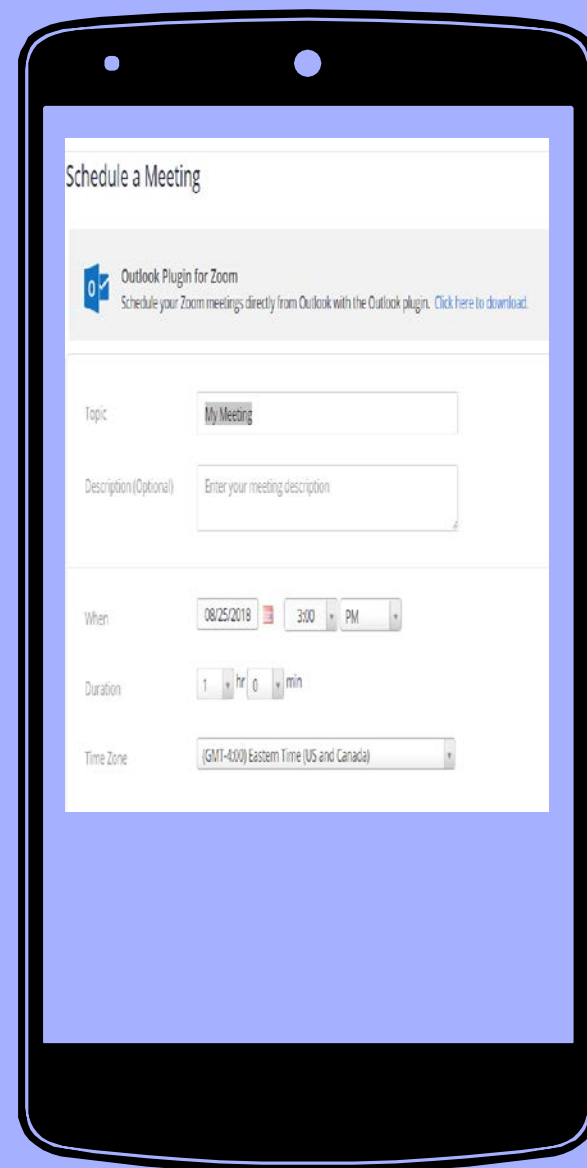
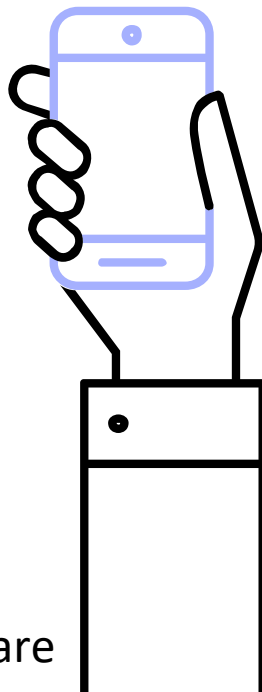




ZOOM VIDEO COMMUNICATIONS

\$1,999.00 PER YEAR

ZOOM is the only video conferencing software that will sign a HIPAA Business Associate Agreement (BAA), meaning they are responsible for keeping our residents' information secure and reporting security breaches involving personal health care information. They cannot access PHI and they protect and encrypt all audio, video, and screen-sharing data.



LIVE DEMONSTRATION

Schedule a Meeting



Outlook Plugin for Zoom

Schedule your Zoom meetings directly from Outlook with the Outlook plugin. [Click here to download.](#)

Topic

My Meeting

Description (Optional)

Enter your meeting description

When

08/25/2018



3:00

PM

Duration

1

hr

0

min

Time Zone

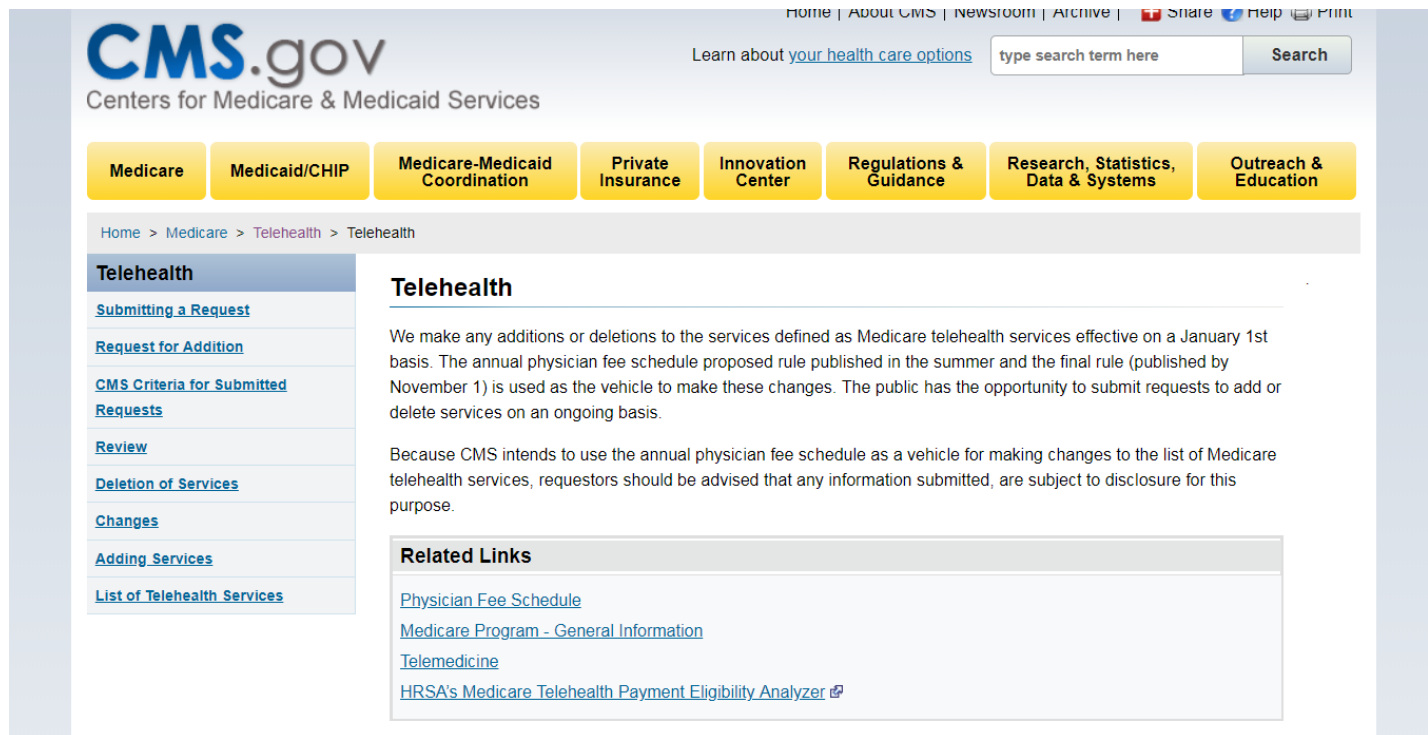
(GMT-4:00) Eastern Time (US and Canada)

Who wants to show
off their beauty
mark?



A Note on Billing

Reimbursement is usually \$40 - \$120 depending on the consult level billed.



The screenshot shows the CMS.gov website. At the top, the CMS.gov logo is displayed with the tagline "Centers for Medicare & Medicaid Services". Navigation links include Home, About CMS, Newsroom, Archive, and a search bar. A horizontal menu contains buttons for Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education. The breadcrumb trail reads: Home > Medicare > Telehealth > Telehealth. The left sidebar lists Telehealth links: Submitting a Request, Request for Addition, CMS Criteria for Submitted Requests, Review, Deletion of Services, Changes, Adding Services, and List of Telehealth Services. The main content area is titled "Telehealth" and contains two paragraphs of text. The first paragraph states that Medicare telehealth services are updated annually based on the physician fee schedule. The second paragraph explains that CMS uses the annual physician fee schedule to make changes to Medicare telehealth services. Below the text is a "Related Links" section with links to the Physician Fee Schedule, Medicare Program - General Information, Telemedicine, and HRSA's Medicare Telehealth Payment Eligibility Analyzer.

CMS.gov
Centers for Medicare & Medicaid Services

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[Medicare](#) [Medicaid/CHIP](#) [Medicare-Medicaid Coordination](#) [Private Insurance](#) [Innovation Center](#) [Regulations & Guidance](#) [Research, Statistics, Data & Systems](#) [Outreach & Education](#)

Home > Medicare > Telehealth > Telehealth

Telehealth

- [Submitting a Request](#)
- [Request for Addition](#)
- [CMS Criteria for Submitted Requests](#)
- [Review](#)
- [Deletion of Services](#)
- [Changes](#)
- [Adding Services](#)
- [List of Telehealth Services](#)

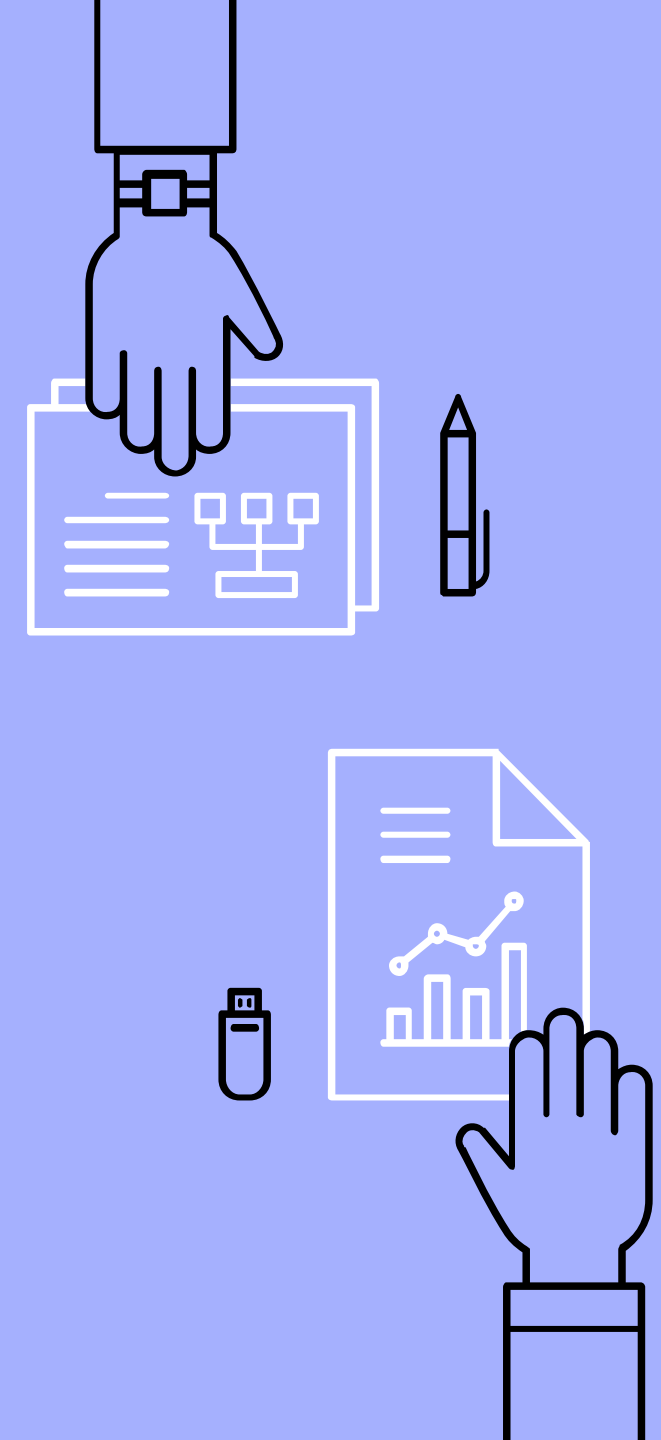
Telehealth

We make any additions or deletions to the services defined as Medicare telehealth services effective on a January 1st basis. The annual physician fee schedule proposed rule published in the summer and the final rule (published by November 1) is used as the vehicle to make these changes. The public has the opportunity to submit requests to add or delete services on an ongoing basis.

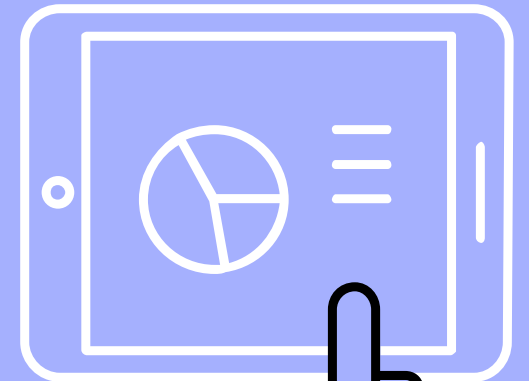
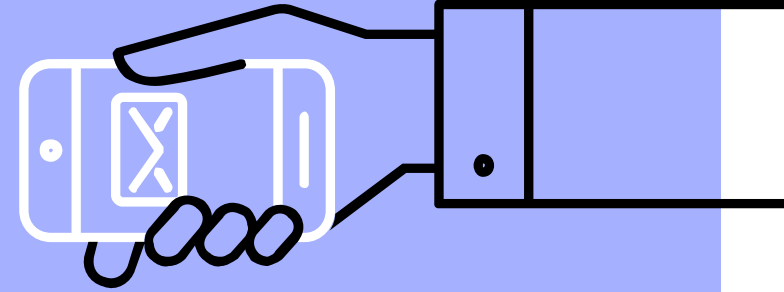
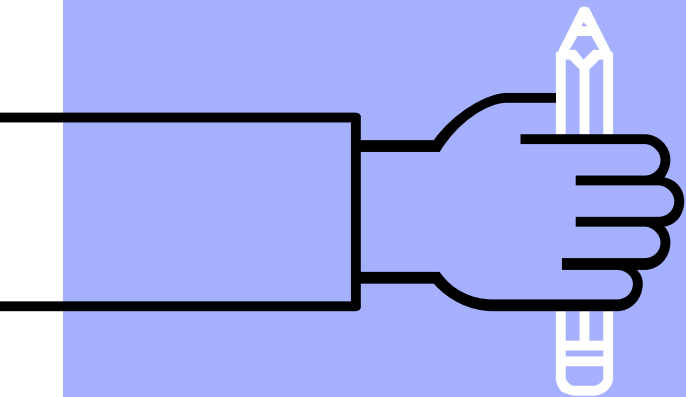
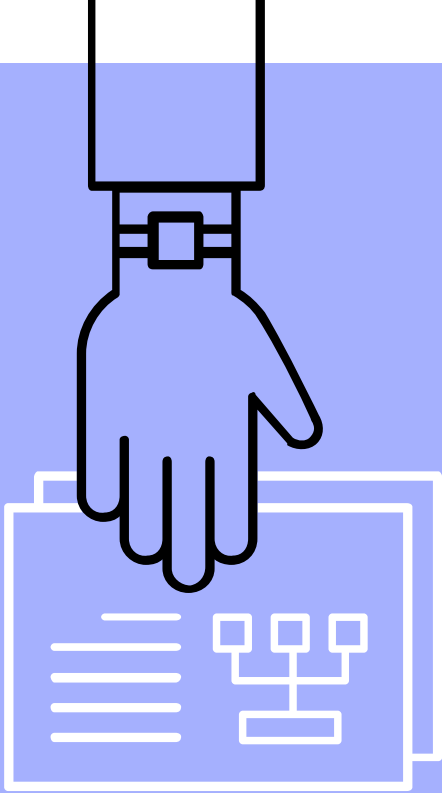
Because CMS intends to use the annual physician fee schedule as a vehicle for making changes to the list of Medicare telehealth services, requestors should be advised that any information submitted, are subject to disclosure for this purpose.

Related Links

- [Physician Fee Schedule](#)
- [Medicare Program - General Information](#)
- [Telemedicine](#)
- [HRSA's Medicare Telehealth Payment Eligibility Analyzer](#)



A Case Study



Ms. IR

- ❖ 97 years old
- ❖ Wheelchair-bound, mechanical lift transfer
- ❖ Admitted to FHNC 2/2015
- ❖ A snapshot - What telewound care meant for Ms. I. R. in her last three months of life.



THANKS!

Any questions?

You can find us at:

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<http://www.drjsingh.com/>

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