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Preparing for Launch: Early Lessons Learned from Health Centers on Selecting New Technology and Tools for Virtual Care

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Through the Optimizing Virtual Care (OVC) program, the Health Resources & Services Administration (HRSA) funded 29 health centers to develop, implement, and evaluate innovative evidence-based virtual care strategies that:

- Expand on the national surge in synchronous, real-time telehealth utilization at health centers in response to the COVID-19 public health emergency
- Optimize the use of virtual care to increase access and improve clinical quality for communities who have been historically underserved and those facing barriers to care
- Can be adapted and scaled across HRSA's Health Center Program

This program is the first in the Quality Improvement Fund, HRSA's investment to activate and accelerate innovation. During the first six months of the OVC program (March to August 2022), awardees prepared to implement new or enhanced virtual care strategies. Awardee activities addressed four key OVC program objectives:

- 1) Increase access to care
- 2) Improve clinical quality and health outcomes
- 3) Enhance care coordination
- 4) Promote health equity

This brief is part of a series of OVC Implementation Toolkit materials released by HRSA to share innovative strategies and actionable tips from OVC awardees to support other health centers in planning virtual care approaches in their communities. For more information or to access other briefs and OVC resources, visit the OVC webpage.

Capturing Insights on Selecting New Technology and Tools for Virtual Care

OVC awardees are currently piloting new self-reported measures that capture information about virtual care implementation successes, challenges, and lessons learned to improve access to care. From March to August 2022, all 29 OVC awardees completed monthly reports to describe key activities and progress made toward achieving project objectives.

During the early months of the OVC program, the top three most reported awardee activities were:

- 1) Selecting new technology and tools
- 2) Virtual care staffing
- 3) Patient outreach and engagement

This brief highlights prevalent activities and pressing issues that OVC awardees reported on selecting new virtual care technology and tools during the early phase of implementing virtual care strategies.

To select and implement the right virtual care technologies for their patients, OVC awardees created multidisciplinary teams to tap into expertise within and beyond their health centers. Patients were key partners for technology selection and implementation. During this phase of the OVC program, OVC awardees selected several different types of new virtual care technologies and tools, including:

- Synchronous, real-time audio-only visits (e.g., phone calls)
- Synchronous, real-time video visits (e.g., community kiosks to conduct video screenings)
- Mobile health (mHealth) (e.g., smart phone applications, phone notifications)
- Remote patient monitoring (e.g., continuous blood glucose monitoring)
- Store-and-forward technologies (e.g., automated chatbot messaging for patient intake)
- Other asynchronous tools (e.g., machine learning-based patient screening tools)

For more information on types of virtual care technologies and tools visit: telehealth.hhs.gov



OVC awardees invested considerable time in selecting the appropriate technologies to implement virtual care strategies that addressed their patients' needs, supported the OVC project objectives, and were compatible with their existing technology systems.

Collaborating to Select and Integrate New Technologies

OVC awardees created multi-disciplinary teams to identify and implement telehealth technologies for the OVC project. Awardees attributed early telehealth planning achievements, in part, to teams that worked collaboratively, engaged patients, and maintained clear communication.

Examples of multi-disciplinary team members involved in technology selection:

- Technology Experts: Telehealth vendors and consultants | Information technology (IT) staff, including data management teams
- Leadership: Directors | Administrators
- Care Teams: Health care providers | Front-line administrative staff | Medical assistants
- Strategists and Navigators: Digital health strategists | Community health workers | Clinical operations staff
- Legal and Financial: Compliance officers | Finance managers
- External Partners: Partner health centers | Patient advisory boards | Community organizations

Involving multi-disciplinary team members during early planning helped OVC awardees:

- Consider competing priorities across the health center organization
- Respond to pressing patient needs (e.g., health, digital, social needs)
- Accurately assess workflows needed to implement new technology
- Promote early provider and staff buy-in
- Prepare health center teams for future implementation of technology

Recommendations for Promoting Person-Centered Care

As the end user for health centers' virtual care delivery, patients are critical partners in the selection of new technology and tools. Patients shared feedback with OVC awardees on potential virtual care technology and tools by participating in patient advisory boards, focus groups, and individual interviews, and by completing surveys.

Patients' previous virtual care experiences also help to inform technology selection. Assessing patient preferences (e.g., preferred device types or software platforms) and past challenges accessing virtual care (e.g., lack of broadband or wi-fi access) can help ensure selected technology and tools address patient needs.

Patients shared perspectives on existing virtual tools with OVC awardees by:

- Completing patient satisfaction surveys similar to the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) patient experience surveys
- Sending messages through a patient portal
- Talking directly with providers and staff when having trouble using a specific virtual care tool or technology during a scheduled visit
- Participating in pilot programs for virtual care tools such as remote patient monitoring devices

For more resources on patient and person-centered care visit innovation.cms.gov.

Key Health Center Considerations for Selecting the Right Virtual Care Technology



Health Equity Priorities

- ✓ Capacity to support health centers in assessing and reporting differences in technology utilization across various types of users.
- ✓ Equitable Accessibility to health centers, providers, patients with the greatest anticipated needs



Person-Centered Approaches

- Availability of technology on devices and digital platforms that patients can access
- Availability of resources for technical support
- Compatibility with patients' readiness to use technology (e.g., patient comfort with devices)
- Accessibility for patients with varying languages and abilities
- Responsiveness to patient concerns about information privacy and security



Health Center Operations

- ✓ Financial sustainability
 of technology (e.g.,
 acquisition, customization,
 maintenance costs)
- ✓ Scalability across the health center organization
- ✓ Feasibility with existing health center staff capacity
- Compliance with health center's privacy and information security standards
- Compatibility with health center's broadband access
- Capacity to provide data to support quality assessment



System Integration

- ✓ Compatibility with health center's existing technology infrastructure (e.g., interfaces with the Electronic Health Record (EHR) system)
- ✓ Flexibility for technology to adapt to health center needs across various workflows, patient populations, and site locations
- ✓ Alignment with IT teams' support capacity



Tip: Consider the health equity implications when selecting technology or tools. For additional resources for technology selection visit:

- The Center for Care Innovations
- Health Information Technology, Evaluation, and Quality Center (HITEQ)

For further information on the OVC program, please visit https://bphc.hrsa.gov/funding/funding-opportunities/optimizing-virtual-care