

April 2023

Preparing for Launch: Early Lessons Learned from Health Centers on Staffing and Patient Engagement for Virtual Care

U.S. Department of Health and Human Services
Health Resources & Services Administration
Bureau of Primary Health Care



HRSA
Health Resources & Services Administration

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 New Insights on Virtual Care Staffing and Patient Engagement

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 addressing staffing challenges and improving patient outreach and engagement during the early phase of implementing virtual care strategies.

To support new and ongoing virtual care strategies, OVC awardees reported hiring new staff and expanding the responsibilities for existing staff despite challenges such as workforce shortages, recruiting and onboarding delays, and staff turnover. Providing ongoing training to all virtual care staff prepared them to better support patients in using virtual care and champion new and ongoing virtual care initiatives. OVC awardees expanded their community and patient outreach efforts to collect relevant feedback for improving virtual care delivery approaches and to promote new and existing virtual care services.



OVC awardees adopted creative approaches to address staffing challenges and progress towards virtual care implementation.

Staffing is a key activity for implementing new virtual care strategies. Twenty-one of the 29 OVC awardees reported delays in their planned project implementation activities due to staffing challenges. Awardees adapted strategies for recruitment and hiring, expanded staff roles, and provided new trainings for health center teams to implement virtual care strategies. Depending on current health center operations and resources, some awardees established dedicated virtual care teams while others integrated virtual care staff across existing teams.

Staffing in Preparation for Virtual Care Implementation

Awardees largely attributed staffing challenges to ongoing healthcare workforce shortages exacerbated by the COVID-19 pandemic. Despite these challenges, awardees successfully implemented several strategies to support onboarding staff for virtual care programs.

OVC awardees' staffing strategies included:

- Recruiting internal staff already familiar with the health center and patients to shorten time needed for project onboarding
- Prioritizing hiring for critical positions first to avoid bottlenecks
- Hiring community health workers able to support multiple roles in virtual care program activities
- Starting recruitment early to avoid delays in activities resulting from the time needed to onboard new staff
- Centering equity in the project staffing model by aligning job descriptions to equity goals and considering patients' location, cultural representation, and language needs to expand efforts to promote equity

Examples of new virtual care staff hired:

- Community health workers (*serving as virtual care coordinators and navigators*)
- Program coordinator
- Digital (or Online) marketing strategists
- Nurses (*at varying levels of licensure*)

In addition to hiring new staff, OVC awardees expanded the roles for existing positions.

When leveraging existing staff for new virtual care responsibilities, OVC awardees cautioned the importance of offsetting their other job expectations to prevent burnout.

Examples of new virtual care responsibilities for existing staff in the first 6 months:

- **Front desk staff** – Recruiting and enrolling patients in virtual care programs
- **Care teams** – Offering new virtual care services and evaluating virtual care data submitted to their electronic health record (EHR)
- **Community health workers** – Informing local community about available telehealth services, enrolling patients in virtual care programs, distributing virtual care devices to patients, reviewing data from virtual devices and providing tailored technical support

Ongoing Training is Critical for Virtual Care Implementation

Awardees described the importance of providing sufficient virtual care training as they hired staff to fill new positions and expanded capabilities for existing positions.

Awardees leveraged training resources to support:

- Providers using virtual care technology for patient care
- Patient-facing staff providing basic technical support to patients
- Technical support staff using new software
- Informatics and software development teams using clinical code sets and tools to integrate new technologies with existing health information technology systems



Tip: Awardees reached out to partner health centers and advisors for help in developing job descriptions for new telehealth roles.

For additional resources related to telehealth training and workforce development, visit telehealth.hhs.gov



OVC awardees developed strategies to increase community awareness and patient engagement with innovative virtual care

In early efforts to increase community and patient engagement in virtual care, awardees assessed patient needs, partnered with community organizations, collaborated with health center staff to increase program engagement, and launched communication and marketing campaigns.

Assessing Patient Needs to Tailor Communication and Outreach

Tip: Consider assessing the barriers patients face in accessing care to ensure virtual care programs meet patient needs

OVC awardees' patient assessment activities included administering patient surveys, conducting qualitative interviews, reviewing existing health center patient records, and monitoring usage of the program's social media pages or websites. Additionally, at least one awardee implemented machine learning technology to help anticipate the health-related social needs of their patient population. Awardees reported that early assessments helped them to identify patients' health care needs, habits, culture, language spoken, geographic locations, and access to technology to tailor communications and patient engagement strategies.

Some awardees shared challenges conducting quantitative and qualitative assessments, including incorporating needs assessment data into their EHRs and boosting patient survey response rates. Awardees addressed these challenges by providing patients different survey formats (telephone or text-based), surveying providers on their patients' virtual care experiences, and interviewing a patient panel.

OVC awardees leveraged community partnerships to expand reach and amplify patient-focused messaging. Awardees worked with a wide range of new and existing community partners. Health centers' collaborative patient engagement with community partners included:

- Installing telehealth kiosks in community locations for easy patient access
- Exchanging information and best practices with other health centers implementing virtual care strategies with similar patient communities
- Offering cross-referrals between clinical and social support patient services
- Launching a remote patient monitoring pilot program with support from a partner university medical school
- Training medical and public health students from a partner university as patient navigators and matching students to health center patients eligible for virtual care services
- Referring patients to a digital literacy class for older adults hosted by a community center and providing laptops to those who completed the class

Examples of community partners:

- Shelters
- Food banks
- Other health centers
- Aging and disability network organizations

OVC awardees collaborated with health center staff across departments and programs to gain support for virtual care strategies. Awardees described strong communication and relationships within the health center as critical for obtaining the staff buy-in needed to implement virtual care programs. OVC awardees built and strengthened relationships internally by:

- Sharing information with staff about the virtual care programs offered at the health center and how they may enhance patient care (e.g., internal town hall meetings presentation)
- Training providers to connect patients to telehealth via live sessions or sharing instructional materials
- Training key staff to demonstrate virtual care technologies and tools offered at the health center
- Conducting provider surveys to capture feedback on available telehealth services

OVC awardees launched communication and marketing campaigns to reach new patients.

Awardees employed creative outreach strategies to make more people aware of their virtual care offerings and engage patients in virtual care services. Early outreach strategies included:

- Launching social media campaigns (e.g., Facebook, Instagram, Twitter) to increase virtual care enrollment
- Leveraging experienced community health workers and navigators familiar with the patient population to develop training guides to help staff provide better person-centered virtual care
- Developing and sharing patient-facing educational materials (flyers, posters, videos) and websites

Tip: Some OVC awardees reported using dedicated marketing and communications staff to support outreach strategies



Tip: Consider the following strategies when planning to promote virtual care programs.

1. Create virtual care strategy teams that include diverse groups of patients and staff from across the organization to support equitable care.
2. Ensure key players within the health center (e.g., leadership, providers, non-clinical staff) have sufficient and timely information about the virtual care options offered to support buy-in for new virtual care activities.
3. Develop tailored messaging and coordinate internal and external communication strategies to improve community awareness of virtual care offerings.

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