


Gloria J McNeal, PhD, MSN, ACNS-BC, FAAN
Associate VP Community Affairs in Health
National University

Improving Healthcare Access Using Telehealth Technologies

AACN Transform 2021 Conference
Emerging Solution Session
December 3, 2021


1

NUNMC Team




Angela Williams PhD, FNP-C
PROJECT COORDINATOR

Project Coordinator and Nurse Practitioner for the NUNMC. She is a nationally certified nurse practitioner and clinical nurse leader. She has over 25 years of clinical experience with underserved populations. She is a tenured track Assistant Professor at California State University, Los Angeles.




Arnetta Finney, PhD, FNP-C
PROJECT MANAGER

Project Manager for the NUNMC. She holds a doctoral degree in nursing and national board certifications as a nurse practitioner, wound care specialist and clinical nurse leader. She has presented at national and international conferences and has published in data-based articles in high impact professional journals.



Gloria J McNeal, PhD, FAAN
PROJECT DIRECTOR

Dr. McNeal is a nationally certified advanced practice nurse with more than 30 years of academic and clinical experience in nursing. She is widely published in the field of nursing on issues related to cultural competence, telehealth care, and the utilization of interdisciplinary primary care delivery models.



page 2

2

Objectives

One

To prepare a culturally competent health professions workforce

Two

To foster community involvement and empowerment in the processes of health education, assessment, outcome reporting, and referral

Three

To improve access to care and to remotely monitor clinical data



- The National University Nurse-Managed Clinic – Interprofessional Collaborative Practice (NUNMC-IPCP) initiative was operationalized at the National University Los Angeles Campus, serving as the home office location.
- The targeted patient populations residing in Watts, Inglewood and Compton experience high rates of serious chronic and acute health problems with notable poor healthcare outcomes.
- While there is an existing network throughout LA County of community-based health centers, federally-qualified health centers, and hospital-based clinics, the communities served remained designated as a medically underserved area/



ABOUT US

Embedded within churches, drug rehab centers and Salvation Army locations, NUNMC created public-private partnerships and a unique model of care delivery



THE PROBLEM



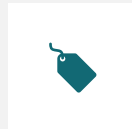
PRIMARY CARE SERVICES
 Deliver primary and behavioral health care services in underserved communities



TELEHEALTH
 While still limited in use virtual platforms are revolutionizing the delivery of healthcare and education



TRUST
 Establish relationships with community-based organizations to create a sense of trust



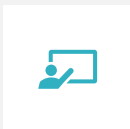
COST
 Implement a nurse-led initiative to delivery cost effective services



IPE
 Despite repeated reports on the advantages of IPE, there remains few opportunities for students in the academic setting

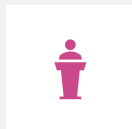


THE SOLUTION



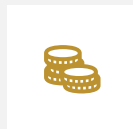
IMPROVE ACCESS

This nurse-led clinic improved access by delivering care deeply embedded in the communities served



DECREASE COSTS

This nurse-led clinic innovatively delivered care at no cost to the patients served



PATIENT EXPERIENCE

Using CHAPS survey data, this initiative documented the satisfaction levels of the patients served rating the experience at the highest levels




SOLUTION

The goal of the IHI Quadruple Aim is to enhance patient experience, improve population health, reduce costs, and improve the work life of health care providers, including clinicians and staff.


Provident, I.M., & Lape, J.E. (2020). Demonstrating Occupational Therapy's Distinct Value: Addressing the Quadruple Aim of Health Care Through Doctoral Capstone Projects. The Open Journal of Occupational Therapy, 8, 1-8.





UNIQUE

Use of telehealth technologies to monitor symptoms remotely




TRUSTED

Nurses remain the most trusted profession according to WHO




FIRST TO MARKET

Establishing a nurse-led telehealth model of care delivery



COMMITMENT

Our interprofessional team is committed to addressing the health care needs of the underserved



CLINIC SERVICES


Our caring team of Board-Certified Nurse Practitioners and Health Professionals are proud to serve our local communities by providing prompt and courteous treatment at any of our clinic locations.

<p>TREATMENT OF:</p> <ul style="list-style-type: none"> - Infections - Colds and Flu Symptoms - Diabetes - High Blood Pressure - Asthma <p>SERVICES PROVIDED:</p> <ul style="list-style-type: none"> - Physical Examinations - Behavioral Health Screening - Vision and Hearing Testing - Women's Health Assessment - HIV/sexually Transmitted Infection Testing and Counseling - Dental Assessment and Referral - Social Service Referrals 	<p>CLINIC LOCATIONS AND HOURS:</p> <p>Waco Tuesdays & Thursdays - 9am-2pm Thee of Life Missionary Baptist Church 1502 South Industrial Ave., Los Angeles, CA 76798</p> <p>Compton Wednesdays - 9am-2pm The Salvation Army 701 E. Compton Blvd., Compton, CA 90221</p> <p>Inglewood Fridays - 9am-2pm The Salvation Army 124 E. Queen St., Inglewood, CA 90501</p>
---	--

FOR MORE INFORMATION
 (310) 662-2052
**ARNETA FINNEY,
 CLINIC MANAGER**



NATIONAL UNIVERSITY
WORLD MANAGED CLINIC



Veterans Founded. Nonprofit. | nu.edu



page 7

7



HEALTH FAIRS

Bringing health education directly to the community : nutrition, stress management, HIV testing, vision and hearing, blood pressure screening

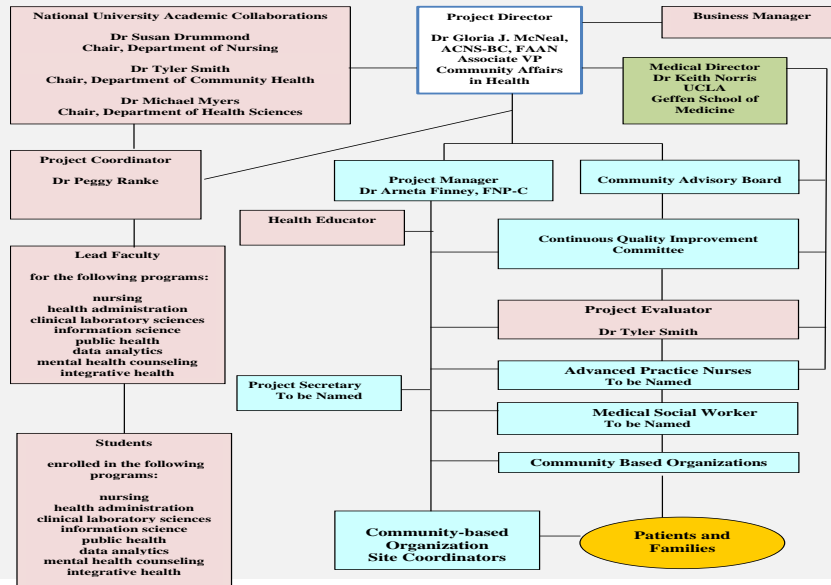


page 8

8

NUNMC Organizational Chart

NATIONAL UNIVERSITY NURSE MANAGED CLINIC ORGANIZATIONAL CHART



OUR SERVICES



Extended Virtual Office Hours

Mon - Fri: 6:00AM to 9:00PM
Sat: 8:00AM-7:00PM



Call-in GP Consultation Available
24/7 On-Call Answering service



Primary Care Services

Treatment for infections, colds and flu symptoms, diabetes, high blood pressure, asthma, vision and hearing testing, women's health assessment, HIV/Sexually Transmitted Infection, dental assessment and referral, and social services referral



Prescriptions

Electronically transmitted to your local pharmacist

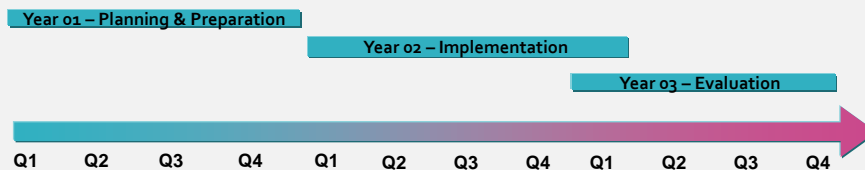


Mental Healthcare Services

Behavioral Health screening
Tele-counseling Services
Treatment for stress, anxiety, depression, addiction, and other mental health disorders

PROJECT TIMELINE

- Phases of Project Development



Project Outcome Measures:

- Decrease in mortality/morbidity rates associated with ambulatory care sensitive (ACS) conditions in clients served as measured by clinical data;
- Increase in referrals for follow up care as measured by percent of return visits;
- Increased community involvement as measured by number of MOUs executed;
- Increased patient satisfaction as measured by surveying instruments; and,
- Increased dissemination of health information as measured by number of health packets distributed

11



11

NUNMC-IPCP OUTCOME MEASURES

The NUNMC outcomes measured with well-established, valid and reliable instruments:

- Biometric data derived from the EHR (BMI, blood pressure, pulseox, blood glucose),
- Clinical data to assess changes in chronic diseases
- Self-reported (SF-8, Audit-C, DAST 10, PHQ-9)
- Clinician/Group-level Consumer Assessment of Health Care Providers and Systems (CG-CAHPS) surveying instrument used to measure satisfaction with health care delivery
- ACE-15 to assess team readiness

12



12

NUNMC INTERPROFESSIONAL COLLABORATIVE PRACTICE ACTIVITIES

- The NUNMC-IPCP initiative:

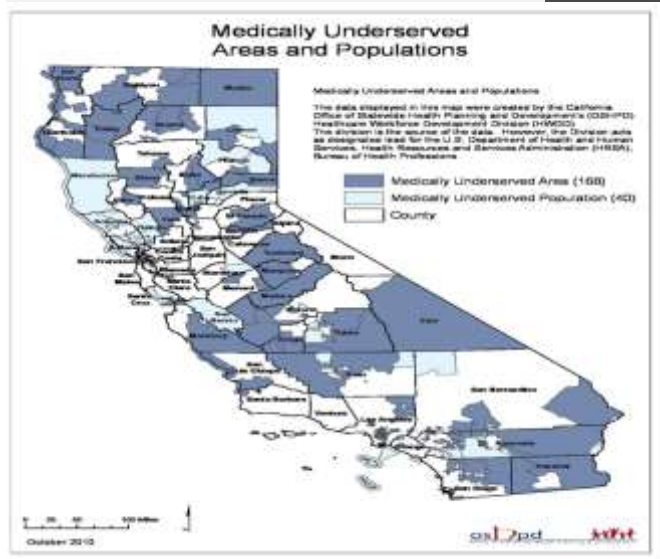
Is cost effectively utilizing faculty-supervised nursing and health professional students

Collaborates with a full-time interprofessional healthcare team, consisting of eight healthcare disciplines : nursing, public health, information science, mental health counseling, data analytics, allied health, health administration, integrative health programs of study

Works in collaboration with a Community Advisory Board, CBOs , faculty and students in departments of nursing, community health and health sciences

13

MEDICALLY UNDERSERVED



Watts, Inglewood and Compton Communities



page 14

14

COMMUNITY ENGAGEMENT

Canon Human Services is a substance abuse treatment center that provides both outpatient and short-term residential treatment of drug addiction. Multiple payment plans are available including military insurance (e.g., VA, TRICARE); self payment; and sliding fee scale (Fee is based on income and other factors)



17

17

COMMUNITY ENGAGEMENT

The Salvation Army, an international movement, is an evangelical part of the universal Christian Church. Its message is based on the Bible. Its ministry is motivated by the love of God. Its mission is to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination. For more than 125 years, The Salvation Army of Southern California has provided services and hope to those in need from San Luis Obispo to Orange County. The Salvation Army's history of public service dates back to 1865, over the years it has since evolved into a social service provider of unmatched scope and breadth - delivering assistance to those in need without discrimination. The Salvation Army currently has representation in more than 125 countries worldwide, in addition to nearly 8,000¹⁸ centers of operation across the United States.



18

COMMUNITY ENGAGEMENT

Healthy African American Families II (HAAFII) was founded in 1992 by the late Dr. Loretta Jones. It was originally funded by the Center for Disease Control (CDC) to investigate low birth weight and infant mortality in African American women in Los Angeles. Since then HAAFII has grown into a multi-faceted community agency. Part of its mission is to ensure research is being done ethically and equitably in community. HAAFII supports a bidirectional learning model, where all knowledge is important and it holds all partners accountable for reporting back and creating wins for both academia and community. Its mission is to improve the health outcomes of the African American, Latino, Korean, and other minority communities in Los Angeles County by enhancing the quality of care and advancing social progress through education, training and collaborative partnering with community stakeholders, academia, researchers, and government. HAAFII is widely regarded in the community as an advocate voice, and source of education and training around disparities and research, for the local community. Its partners include Charles R. Drew University of Medicine & Science, the University of California, Los Angeles, the RAND Corporation, and over 150 community based organizations. As such, it is dedicated to addressing social, institutional and policy determinants of health equity.



19*

19

PROJECT SUSTAINABILITY

Extramural Revenue Generation

- **Fed Qualified Health Center (FQHC) Look-Alike Designation**
- **Third Party Reimbursement**
 - **Corporation/ Employer Insurance/ Private Insurance**
- **Charity Care**
- **External Funding Mechanisms**
 - **Federal/ State**
 - **Foundations**



20

20

PROJECT COMMUNITY SUPPORTERS

- The Black Community Health Task Force
- Salvation Army
- Canon Human Services
- Tree of Life MB Church
- Healthy African American Families
- Health Net Connect HNC
- The National University Office of the Chancellor



21

21

McNeal, G.J. (1978). Twenty-four hour ambulatory monitoring: A new electrocardiographic tool. *Nursing Clinics of North America*, 13(3), 128-132



Taking Critical Care Monitoring from the ICU to the Community

Improving Access to Care for Underserved Communities



page 22

22

Transformation: Earlier Research on Telemetric Remote Monitoring of Critical Care Data

Published Articles

Nursing Clinics of NA

AJN

Critical Care
Nursing Clinics of NA

Twenty-Four Hour Ambulatory Monitoring

A New Electrocardiographic Tool

by LUDWIG, MARSHALL, BA, M.Sc.

With the advent of ambulatory electrocardiography (ECG) monitoring, the physician is no longer limited to the hospital setting. The use of a portable ECG monitor allows the patient to be monitored in his or her own home. This is particularly useful in the patient who has a history of arrhythmias or who is at high risk for developing an arrhythmia. Through the use of a portable ECG monitor, the physician can detect arrhythmias in the patient's home, which may not be detected in the hospital.

DISCUSSION

The ability to monitor a patient's heart rate and rhythm in his or her own home is a significant advance in the field of ambulatory electrocardiography. This is particularly true in the patient who has a history of arrhythmias or who is at high risk for developing an arrhythmia. Through the use of a portable ECG monitor, the physician can detect arrhythmias in the patient's home, which may not be detected in the hospital.

© American University of Health Sciences, 1983. All rights reserved.

For patients who need to be monitored closely, hospitalization has always been necessary. Today that is changing. This feature demonstrates the effectiveness of out-of-hospital monitoring for cardiac patients, those at risk of succumbing to sudden infant death syndrome, and newly diagnosed diabetes. The possibilities for preventive health care, increased patient and family participation, and realistic cost containment are all apparent in these articles, which extend . . . beyond the hospital.

Tracing Arrhythmias



For patients who need to be monitored closely, hospitalization has always been necessary. Today that is changing. This feature demonstrates the effectiveness of out-of-hospital monitoring for cardiac patients, those at risk of succumbing to sudden infant death syndrome, and newly diagnosed diabetes. The possibilities for preventive health care, increased patient and family participation, and realistic cost containment are all apparent in these articles, which extend . . . beyond the hospital.

Telecommunication Technologies in High-Tech Homecare

by [unreadable]

Telecommunication technologies in high-tech homecare are revolutionizing the way we care for our patients. These technologies allow us to monitor our patients in their homes, providing us with real-time data on their vital signs and symptoms. This information can be used to detect potential problems before they become serious, allowing us to intervene early and prevent hospitalization. Telecommunication technologies are also making it easier for patients to manage their own health, providing them with the tools and information they need to make informed decisions about their care.



Transformation: Earlier Research on Telemetric Remote Monitoring of Critical Care Data

Published Articles

Critical Care Nurse

Critical Care Nurse

Critical Care Nurse

High-Tech Home Care: An Expanding Critical Care Frontier

The use of high-tech home care is expanding the critical care frontier. This technology allows us to monitor our patients in their homes, providing us with real-time data on their vital signs and symptoms. This information can be used to detect potential problems before they become serious, allowing us to intervene early and prevent hospitalization. High-tech home care is also making it easier for patients to manage their own health, providing them with the tools and information they need to make informed decisions about their care.



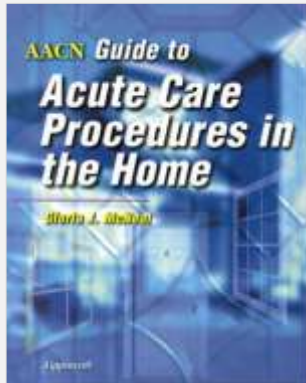
Transformation: Earlier Research on Telemetric Remote Monitoring of Critical Care Data

Published Articles

Computers in Nursing



AACN Guide



AACN Bold Voices



IOM, AAN, and NAM More Recently Published Recognition

Report, Press Release, and Podcast

Institute of Medicine
Future of Nursing Report
2009




American Academy of
Nursing Press Release
2020



National Academy of
Medicine Podcast
2021






USE OF TELEHEALTH CARE TECHNOLOGIES

To monitor:

- Blood pressure
- Heart rate
- Lung sounds
- Body weight
- Body temperature
- Oxygen saturation


VA Home Telehealth - Washington DC VA Medical Center




page 27

27

Communication Linkages



- Telehealth Peripheral Devices
- Cell Phone
- Laptop
- Tablet
- Faxing capability
- ECG Transmission



28

NATIONAL UNIVERSITY VIRTUAL NURSE MANAGED CLINIC

Blood Pressure Apparatus



Weight scale



Spirometer



12 lead ECG



Pulse Ox



Telestethoscope



Thermometer



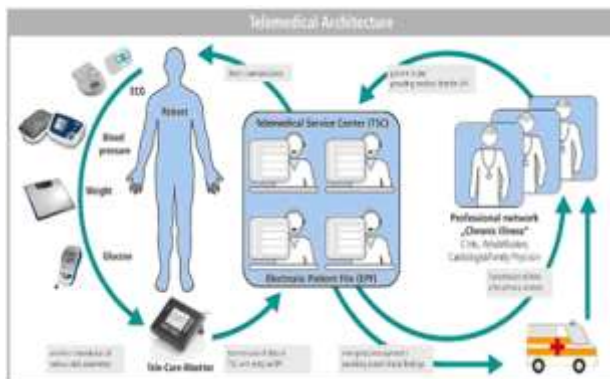
HNC Tablet



TELEHEALTH TECHNOLOGIES

Remote Biometric Monitoring Devices

Telemedicine Bangladesh (telemedicinebd.blogspot.com)



Remote Biometric monitoring using medical apps embedded in mobile kiosks used to transmit clinical data to the tablets, hand-held devices or laptop computers of the clinicians for frequent assessment and documentation in the EHR:


- Blood pressure [tele-sphygmomanometer]
- Glucose [tele-glucometer]
- Weight [tele-scale]
- Heart sounds [tele-stethoscope]
- Lung sounds [tele-stethoscope]
- Bowel sounds [tele-stethoscope]
- FEV₁ [tele-spirometer]
- ECG [tele-cardiology]
- PT/PTT/INR [tele-INR station device]
- O₂ Sat [tele-pulse ox]
- Mental Health [tele-counseling]





CONCEPTUAL FRAMEWORK

Person-Centered Care served as the theoretical construct for our model of care



page 31

31



DISSEMINATION OF FINDINGS

Published outcome data



page 32

32

Nursing as Teamwork

The team of the University of Pennsylvania School of Nursing and the University of Pennsylvania School of Medicine have teamed up to create a new interdisciplinary approach to patient care.

A nurse and a physician are working together to provide the best care for their patients. This is the future of healthcare, and it's happening now.

The team is working on a new model of care that will allow patients to receive the best care from a team of professionals. This is the future of healthcare, and it's happening now.

The team is working on a new model of care that will allow patients to receive the best care from a team of professionals. This is the future of healthcare, and it's happening now.



PENN MAGAZINE

Nursing As Teamwork



page 33

MAJOR COMPETITORS



MINUTE CLINIC

Minute Clinics are staffed by nurse practitioners and physician assistants. Services offered by Minute Clinics include Vaccinations, such as influenza, tetanus-pertussis, pneumovax, and Hepatitis A & B, sports and camp physicals, Department of Transportation physicals, sexual transmitted disease testing and treatment, contraception services, smoking cessation, and TB testing. Local Convenient & Quality Family Health Care Walk-in CVS MinuteClinic | CVS Health



WALGREEN HEALTHCARE CLINIC

The Healthcare Clinic nurse practitioners and physician assistants are part of a network of more than 70,000 healthcare professionals across Walgreens pharmacy, Walgreens Infusion Services, Walgreens Specialty Pharmacy and other lines of business. Walgreens rebrands its in-store 'Take Care' clinics as 'Healthcare Clinics' - Industry News (healthcarefaciliestoday.com)

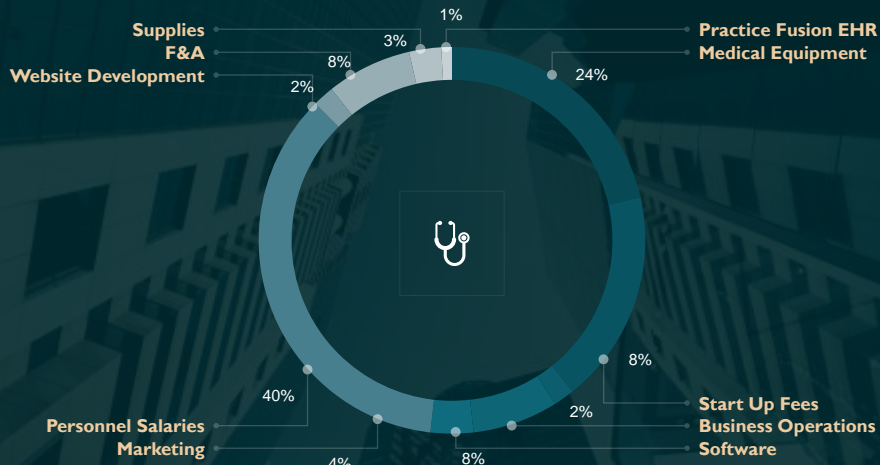


CONVENIENCE CLINICS

Convenient care clinics are often referred to as walk-in clinics and are typically located within a drug store such as CVS or Walgreens. These clinics were initially intended to serve the uninsured or underinsured, providing a more affordable option for basic medical services than a visit to the emergency room or even urgent care center. Urgent Care VS Convenient Care | How They Are Different | UrgentWay

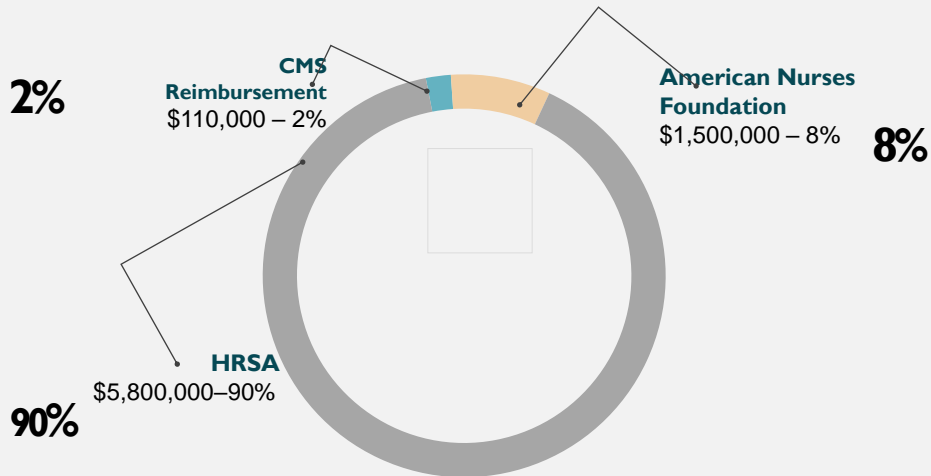


REQUIRED FUNDING



35

POTENTIAL FUNDING



36

HOW DATA DRIVES NEW CARE DELIVERY MODELS AND IMPROVEMENTS IN HEALTHCARE

BACKGROUND

- In underserved communities, the absence of clinics, pharmacies, physicians, and other healthcare services directly translates into poor healthcare outcomes

PURPOSE

- This project was implemented to shift the paradigm for the provision of primary care services by taking a mobile nurse-led interprofessional health care team directly to the community, to decrease the number of ER visits for the patients served

METHODS & DATA

- A descriptive study design was used to examine the health records of 477 patients treated by the nurse-led team, to extract demographic data, determine cost effectiveness and calculate loss to follow rate of return



page 37

37

SELECTED OUTCOME DATA

Table 1: Patients by FPL

Income as Percent of Poverty Line	Number of Patients n (%)
100% and below	293(61.4%)
101-150%	13(2.7%)
151-200%	6(1.3%)
Over 200%	16(3.4%)
Unknown	149(31.2%)
Total	477(100%)

Table 2: Patients by Race

Race	Hispanic /Latino	Non-Hispanic/Latino	Total n (%)
Asian	0	19	19(4%)
Native Hawaiian	0	0	0%
Pacific Islander	0	1	1(0.2%)
Black	0	235	235(49.2%)
Am Indian/Alaska Native	0	0	0%
White	109	27	136(28.5%)
>one race	2	4	6(1.3%)
Unreported	0	0	80(16.8%)
Totals	111	286	477(100%)

Table 3: Follow Up Rate of Return

Dx	# Visits	# Pts	Follow Up Return Rate	Confidence Intervals
BMI >25	158	114	44/114 = 38.6%	95% CI [29.6%, 48.2%]
Depression	75	34	41/34 = 100%	100% follow up
Asthma	32	28	4/28 = 14.3%	95% CI [4.0%, 32.7%]
Diabetes	92	26	36/26 = 100%	100% follow up
HBP	130	67	63/67 = 94%	95% CI [85.4%, 98.4%]
Totals	457	269	188/269=69.9%	95% CI [64.0%, 75.3%]



38

Future of Healthcare Education

Mixed Reality



<https://youtu.be/KGv2iRzQzQg>



39

Mercy Virtual Hospital



<https://www.youtube.com/watch?v=jAQuEZUdB-A>



40

Telecommunication Technologies



<https://www.hfmmagazine.com/articles/2272-mercy-virtual-expands-its-network-of-telemedicine-partners>

- Telemedicine
- Telenursing
- Teleinfusion
- Teleradiology
- Telespirometry
- Telehealth
- Robotics
- Remote monitoring
- Teleconferencing



41

Telehealth Monitoring

- Teleconferencing technology



<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.canstockphoto.com%2Famerican-american-doctor-video-conference-82670347.html&psig=AOvVaw1zrFSnDcEkg6-jg5-88ppQ&ust=1636506008684000&source=images&cd=vfe&ved=0CAgQjRxxqFwoTCJcqt56KivQCFQAAAAAdAAAAABAE>



42

Televisit



https://www.google.com/url?sa=i&url=https%3A%2F%2Fcapitaldiabetes.org%2Ftelevisits%2F&psig=AOvVaw0W1rk613zrL502C_hpyWCu&ust=1636506276421000&source=images&cd=vfe&ved=0CAgQjRxqFwoTCLi4I56LivQCFQAAAAAdAAAAABAE



43

Telehealth Monitoring

■ Tele-otoscope



https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.arkansasonline.com%2Fnews%2F2016%2Fnov%2F25%2Frural-schools-to-go-telemedicine-route-%2F&psig=AOvVaw0_gBpie1Ow7hWaPjmv3I2J&ust=1636506482803000&source=images&cd=vfe&ved=0CAgQjRxqFwoTCJCC7-6LivQCFQAAAAAdAAAAABAJ



44

Telesensor

- Monitors body temperature, blood pressure, blood glucose levels and transmits results to mobile phone



45

Telestethoscope



https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.ekuore.com%2Fhow-integrate-ekuore-pro-electronic-stethoscope-in-telemedicine-project%2F&psig=AOVVaw1yEPMamXcm9wt4_kGHedCe&ust=1636506719216000&source=images&cd=vfe&ved=0CAgQJRxqFwoTC KD12fCMivQCFQAAAAAdAAAAABAD



<https://www.aarp.org/ppi/info-2017/gloria-mcneal.html>



46

Robotics



https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.pinterest.com%2Fpin%2F540150549030685701%2F&psig=AOVvaw0HPVx2EQ42bb_BrqbX0yig&ust=1636506881321000&source=images&cd=vfe&ved=0CAgQjRxqFwoTCjCbr8ONivQCFQAAAAAdAAAAABAE



47

Web-enabled Teleconferencing Technology

- From the point-of-care to the desktop or hand-held device of the clinician



<https://www.google.com/url?sa=i&url=https%3A%2F%2Fwww.ortechology.com%2Fen%2Fproducts%2Fhuman%2Fdicompacs-mobileview.html&psig=AOvVaw3PAMzyA8DwoYf2FUBfwhTC&ust=1636507270878000&source=images&cd=vfe&ved=0CAgQjRxqFwoTCJidooCPivQCFQAAAAAdAAAAABAD>



48

- The majority of patients treated represented ethnically diverse groups, who are often lost to follow up due to barriers to access
- The study findings support primary care treatment at a nurse-led clinic as a strategy to reduce costs when compared to ER utilization rates
- This project was able to foster community involvement and place desperately needed health services directly at locations people in the community trust and frequently visit
- The use of telecommunication technologies improves access to care especially for the residents of underserved communities



SUMMARY

- Improve Access
- Reduce Cost
- Enhance the patient experience



page 49

49

Salvation Army Partnership - Inglewood California - National University

https://www.youtube.com/watch?v=86_15M_yi6Q

NUNMC GRAND OPENING

Salvation Army Inglewood California

50

ACKNOWLEDGEMENT STATEMENT

- The grant funded project reference in this article is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UD7HP28533, NEPQR-IPCP for \$1,549,656, and is supplemented with 53% of nongovernmental sources, including in-kind support. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

