



Leadership Perspectives on Telemedicine Implementation in the Los Angeles Safety Net during the COVID-19 Pandemic

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BACKGROUND

- Safety net health systems disproportionately serve uninsured, Medicaid, racial/ethnic minority, low-income, and Limited English Proficient patients
- Safety net patients with chronic conditions are at increased risk for adverse outcomes and face barriers to healthcare access
- Safety net patients also experience a “digital divide” that may prevent them from using telemedicine services and exacerbate disparities
- The start of the COVID-19 pandemic led clinics to dramatically scale back on in-person visits and abruptly transition to telemedicine services
- Therefore, it is important to understand telemedicine implementation from the perspectives of safety net health systems, as telemedicine services expand in the safety net

OBJECTIVES

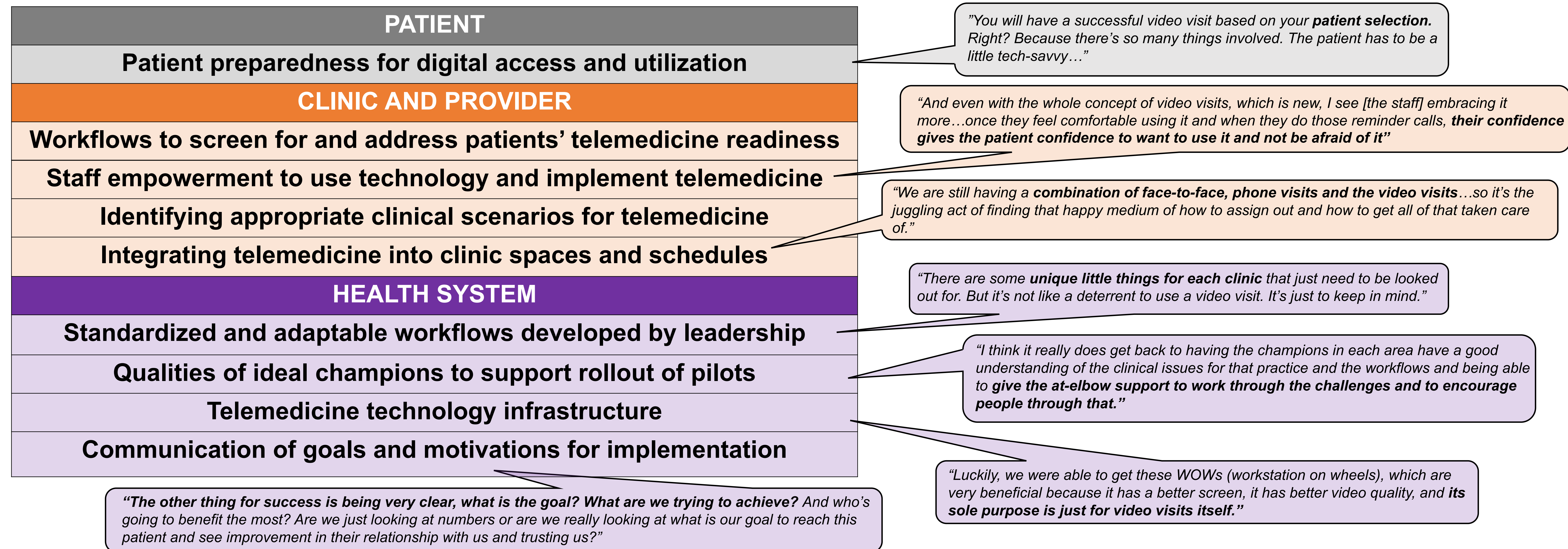
- The Los Angeles County Department of Health Services (LAC DHS) is the second-largest safety net health system in the United States
- Our aim was to examine attitudes and perspectives of LAC DHS leadership and frontline healthcare workers regarding telemedicine implementation in the safety net (with a focus on video visits)
- Another goal was to develop an initial conceptual framework for “ability to complete telemedicine encounters” which include relevant facilitators and barriers at each step (process map)

METHODS

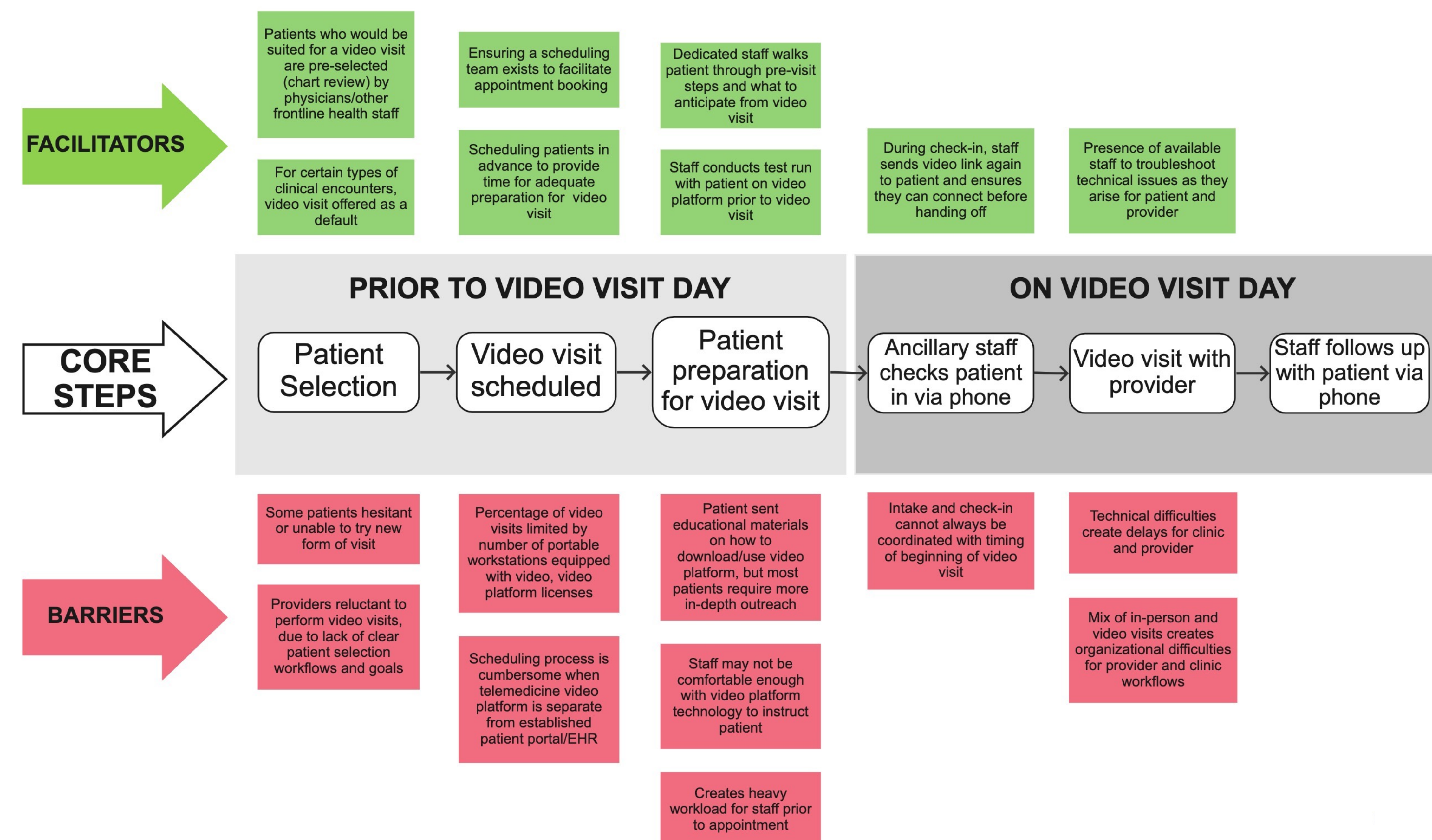
- Semi-structured interviews were conducted by UCLA research team via Zoom in the fall of 2020
- 20 participants included physicians, nurses, clinic medical directors, nursing directors, and LAC DHS administrative leadership: each of the 5 major LAC DHS hospital centers and clinics from the Ambulatory Care Network (ACN) were represented
- Interviews were digitally recorded and transcribed
- 10 out of 20 interviews were read for initial descriptive summary on major narratives using deductive and inductive approaches
- A process map was developed to describe the core steps, facilitators, and barriers of a telemedicine patient encounter at LAC DHS

RESULTS

Multilevel Narrative Themes with accompanying Exemplar Participant Quotations



Process Map for a LAC DHS Telemedicine Encounter (Video)



CONCLUSIONS

- Telemedicine implementation in the safety net setting will require a team-based approach
- Patient, clinic, and health system level themes must be considered when disseminating telemedicine services across safety net settings
- Facilitators/barriers of a telemedicine encounter are unique to clinics’ capacity and resources
- Future research should focus on patient experiences with telemedicine access/quality

POLICY RECOMMENDATIONS

- Establish robust workflows tailored to each clinical setting that define roles for each team member
- Assemble a multidisciplinary team in order to incorporate various perspectives into workflows and improve their feasibility
- Recruit champions in each clinical setting to disseminate information to peers/other clinics and provide ongoing support
- Prioritize high-touch efforts to enroll patients in the patient portal and provide education on how it can be used in conjunction with telemedicine visits