INTEGRATION OF PALLIATIVE CARE IN RURAL COMMUNITIES USING TELEHEALTH CASE CONSULTATION

PAT JUSTIS, MA
How can the State Office of Rural Health add value to telehealth?

Work through a specific “use case” and use that to assess local capacity and access technical assistance for all steps in the process.
Why palliative care?

"You've got six months, but with aggressive treatment we can help make that seem much longer."
Building the vision: PC-RHIAT

- Chartered Palliative Care-Rural Health Integration Advisory Team
  - Phase 1-concept
  - Phase 2-pilot planning and testing
- A public private partnership with over 24 different organizations
- Composed of rural health early adopters experts in palliative care, experts in telemedicine, assorted others
Led by Washington State Department of Health State Office of Rural Health

Advisors, supporters and participants include:
Stratis Health, Amerigroup/Anthem, University of Washington (WWAMI, Family Medicine, Palliative Care), Washington State University Elson S. Floyd College of Medicine, Providence St. Joseph Health, Northwest Telehealth at Inland Northwest Health Services, The Northwest Regional Telehealth Resource Center, Heartlinks Hospice & Palliative Care, The Lookout Coalition, Jefferson Healthcare, Columbia County Health System, Newport Hospital and Health Services, Pullman Regional Hospital, Columbia Basin Hospital, Whitman Hospital and Medical Center, Home Care Association of Washington, Northwest Rural Health Network, Washington State Hospice and Palliative Care Organization, Qualis Health, Washington State Hospital Association, Molina, Coordinated Care, Regence Blue Shield, and Washington State Health Care Authority.

Community team contributors include:
Whitman Public Health, Walla Walla Community Hospice, Friends of Hospice, Assured Home Health and Hospice-Moses Lake, Aero Methow Ambulance, Confluence Health, Frontier Home Health and Hospice, Family Health Centers, McKay Healthcare and Rehab Center, Rural Resources, Pullman Family Medicine, Palouse Medical, Kindred Hospice, Pullman Fire, Bishop Place Senior Living, Regency Senior Living Care, Columbia Basin Family Medicine, Three Rivers Hospital, Mid-Valley Physician Group, Confluence Health, Blue Mountain Counseling, Elk Drug, Dayton Food Bank, Providence St. Mary’s Palliative Care, Home Health, Aging and Long-Term Care, Dayton Christian Church, Dayton Methodist Church, Walla Walla Community College, Redeemer Lutheran Church of Dayton, and Coolidge House.
Washington Rural Palliative Care Initiative
objectives

- Assist rural health systems and communities to integrate palliative care in multiple settings, to better serve patients with serious illness in rural communities.
- Move upstream to serve patients with serious illness earlier in their experience of illness.
- Develop funding models for sustainable services
Washington Rural Palliative Care Initiative Model

- Community engagement
- Clinical skills and culture change
- Fiscal sustainability
- Clinical telemedicine
- Telehealth case consultation
Levels of expertise in palliative care

Direct telemedicine to patient and family in clinical and home settings

Case consultation via telehealth

Build skills and services in rural community

Tertiary

Clinical complexity and level of expertise in palliative care

Secondary

Primary

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The Telehealth developmental path...

Team-based case consultation/training

Health organization sited direct clinical telemedicine

Home based
Northwest Telehealth
Clinical coordinator
7 rural teams
Expert panelists
DOH Project Management and leadership
Creating Connections:
Addressing the Needs of Children with Autism and Other Developmental Disabilities Using Telehealth
Funding and Disclosure

- This work is supported by a grant from U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA): State Implementation Grants for Improving Services for Children and Youth with Autism Spectrum Disorders and other Developmental Disabilities (Grant number: H6MMC30385).

- I have no conflicts of interest.
Autism Spectrum Disorder and other Developmental Disabilities (AS3D) Grant aimed to:

- Improve access to interventions for children and youth with ASD/DD and families, in medically underserved and rural areas
- Strengthen the policies and systems-level integration
What AS3D Telehealth activities were accomplished?

- Convened a telehealth ad hoc committee
- Participated in a statewide community of learners – Peer-to-Peer meeting – focusing on telehealth
- Completed a Telehealth Capacity Assessment including parent and provider surveys
- Developed a Telehealth Strategic Plan
- Contracted with partners to pilot telehealth within their service delivery and mentor other partners
- Developed new partnerships and opportunities
- Explored sustainability and new opportunities
Agency leader is both director and health officer (2)

Washington State Total Population (estimate) April 2018: 7,427,570
Source: Office of Financial Management

Public Health Department (8)
Multi County District (3)
Single County District (8)
Departments that have combined public health with human services (16)

Washington State Population Served

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- Association of Maternal and Child Health Programs – AMCHP
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- Deb LaMarche, Northwest Regional Telehealth Resource Center
- Providers and families who were willing to explore telehealth
Questions?
Washington State Department of Health is committed to providing customers with forms and publications in appropriate alternate formats. Requests can be made by calling 800-525-0127 or by email at civil.rights@doh.wa.gov. TTY users dial 711.