

## Leading Change: Innovating Prenatal Care With MyChart Video Visits Team Members: Brent Davidson, MD, Women's Health Services; Cathy Fulea, MSN, CNM, FACNM, Midwifery; Marie Lee, PMP, MEd,

eam Members: Brent Davidson, MD, Women's Health Services; Cathy Fulea, MSN, CNM, FACNM, Midwifery; Marie Lee, PMP, MEd Virtual Care, Taylor Collins, BBA, Virtual Care; Kyra Watts, MBA, Performance Improvement Women's Health Services



### AIM

Develop and successfully implement an innovative outpatient care pathway model that would allow HFHS Women's Health Services to integrate virtual visit technology. This pilot is offered for low risk expectant mothers across their outpatient prenatal care continuum to improve patient experience and satisfaction.

#### **PLAN: CURRENT STATE**

- The Certified Nurse Midwife (CNM) team wanted to determine ways in which virtual care technologies could be used in the pregnancy care continuum for low risk expectant mothers to:
- Facilitate compliance with recommended encounters while overcoming barriers to care (i.e. time, travel, distance, child care)
- Improve patient experience with pregnancy care
- Increase patient satisfaction
- Women's Health Services partnered with Virtual Care to review technology and the current clinical workflow to determine how to enable Mobile OB Video Visits
- The CNM team reviewed the patient population and developed a plan for:
  - o Patient recruitment
  - Criteria for safe/appropriate enrollment
  - Patient identification, introduction to partial virtual option, and enrollment

#### DO: CORRECTIVE ACTIONS / INTERVENTIONS

- Developed a virtual care (telemedicine) prenatal program via the MyChart app/video visit through Epic as part of the prenatal visits, alternating between in-clinic and video visits
- Conducted a pilot with 10 patients and 1 certified nurse-midwife (CNM) as the provider
- Educated Obstetrics (OB) intake nurses to identify appropriate candidates and offer video visit option
- Equipped patients with fetal Doppler and blood pressure cuffs to monitor fetal heart tones and patient's blood pressure on video visits
- Equipped CNMs with standard telemedicine equipment and required software to facilitate quality, secure, real-time audio and video connection with patient
- Educated patients on MyChart Mobile app for access to video visits
- Educated midwives and clinic staff on scheduling video visits in Epic

## **CHECK (EVALUATION OF CHANGES)**

- Program experienced some challenges initially to recruit 10 patients (using 1 midwife) which required a review of the eligibility criteria as well as the training and communication plan for staff
- Patients experienced some initial difficulty using the Fetal Doppler, which was identified as an opportunity to perform hands-on teaching with patient during in-person visit
- Overall experience with initial patients and midwife was reviewed to determine additional training and troubleshooting that needed to be documented and communicated to team
- Identified additional midwives to perform video visits and added locations to increase pool of patients from which to recruit
- Examined enrollment trends and continued to monitor eligibility criteria to ensure care quality and patient safety

# ACT: SUSTAIN AND SPREAD

- Continue offering video visits to appropriate patients, train additional midwives and expand total number of patients using service, expand hours offered to include non-traditional office hours
- Provide regular updates to clinical staff to encourage referral of new patients to program
- Engage marketing in an attempt to gain additional market share in Women's Health Services (virtual option = market differentiator)
- OB Video Visits may encourage patient use of additional virtual offerings (Lactation consults, Pediatric meet and greet, Behavioral Health Services, etc.)
- Incorporate survey of patients for satisfaction and overall experience with video visits as follow up after delivery

### MyChart Video Visit with Smartphone





Figure 1. Patient with Fetal Doppler during MyChart video visit with Midwife Figure 2. Patient view of video visit on smartphone

# **KEYS TO SUCCESS / LESSONS LEARNED**

- Success is very dependent on intake RNs promoting the program to patients; determine way to incentivize staff
- Clearly educate staff on program details, technology, patient eligibility, and expectations
- Provide patients with a text link to virtual midwife for rapid response to questions and help with connectivity issues
- Ongoing risk assessment at each virtual and in-person visit to ensure pregnancy remains low risk and remains eligible for virtual visits
- Equitable patient care for in-person visits and video visits ensure patients receive same care regardless of care pathway/modality
- Clear line of communication between in-person provider and midwife offering video visits to ensure continuity of care

### MEASURES

- As of January 11, 2019, there have been 83 completed MyChart Video Visit encounters, with 29 unique patients.
- Several patients in the pilot and initial roll out of this program have been employees and employee relatives.
- Anecdotal feedback received to date indicate patients have a high level of satisfaction with the virtual visit option, stating the remote video visit option is convenient, saved time, and reduced time away from their job.
- Patient survey data will be collected to more formally document patient satisfaction and overall experience after delivery of their baby. Patient feedback will be essential to the ongoing continuous improvement and adoption of the program.

