

## Background

- Many Community-Based Palliative Care (CBPC) programs are considering or implementing telehealth visits to expand access to services
- No-show rates for palliative care clinics can be high (range 16-70% for our clinic), due to physical and psychosocial challenges
- Patients who rely on safety-net health systems or who have low income are less likely to report having access to a smartphone, computer, tablet, or home broadband service
- Little is known regarding the implementation of telehealth palliative care services for a diverse, low-income patient population

## Study Goals

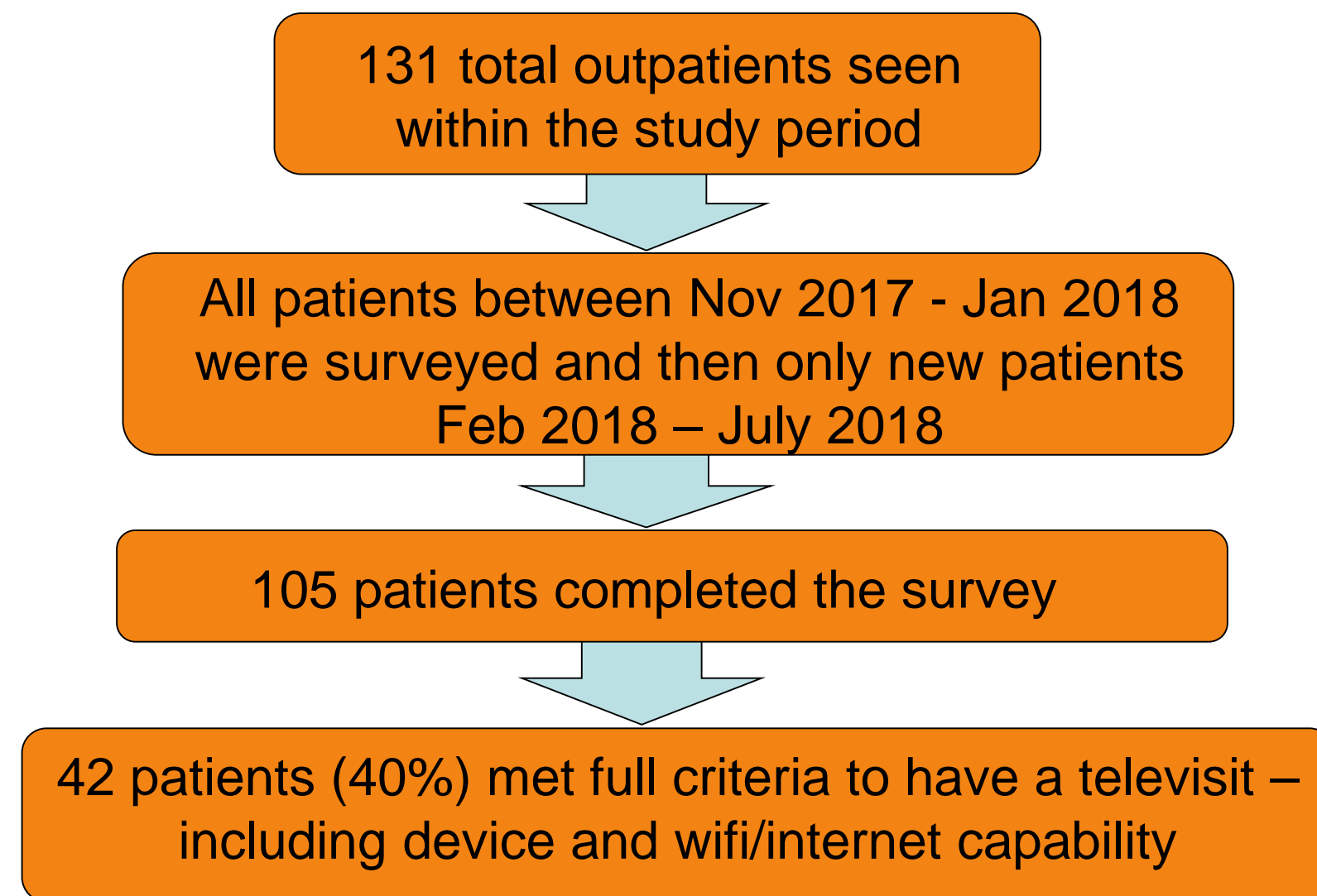
*Explore the feasibility of implementing telehealth visits in an urban, safety-net palliative care clinic*

## Methods

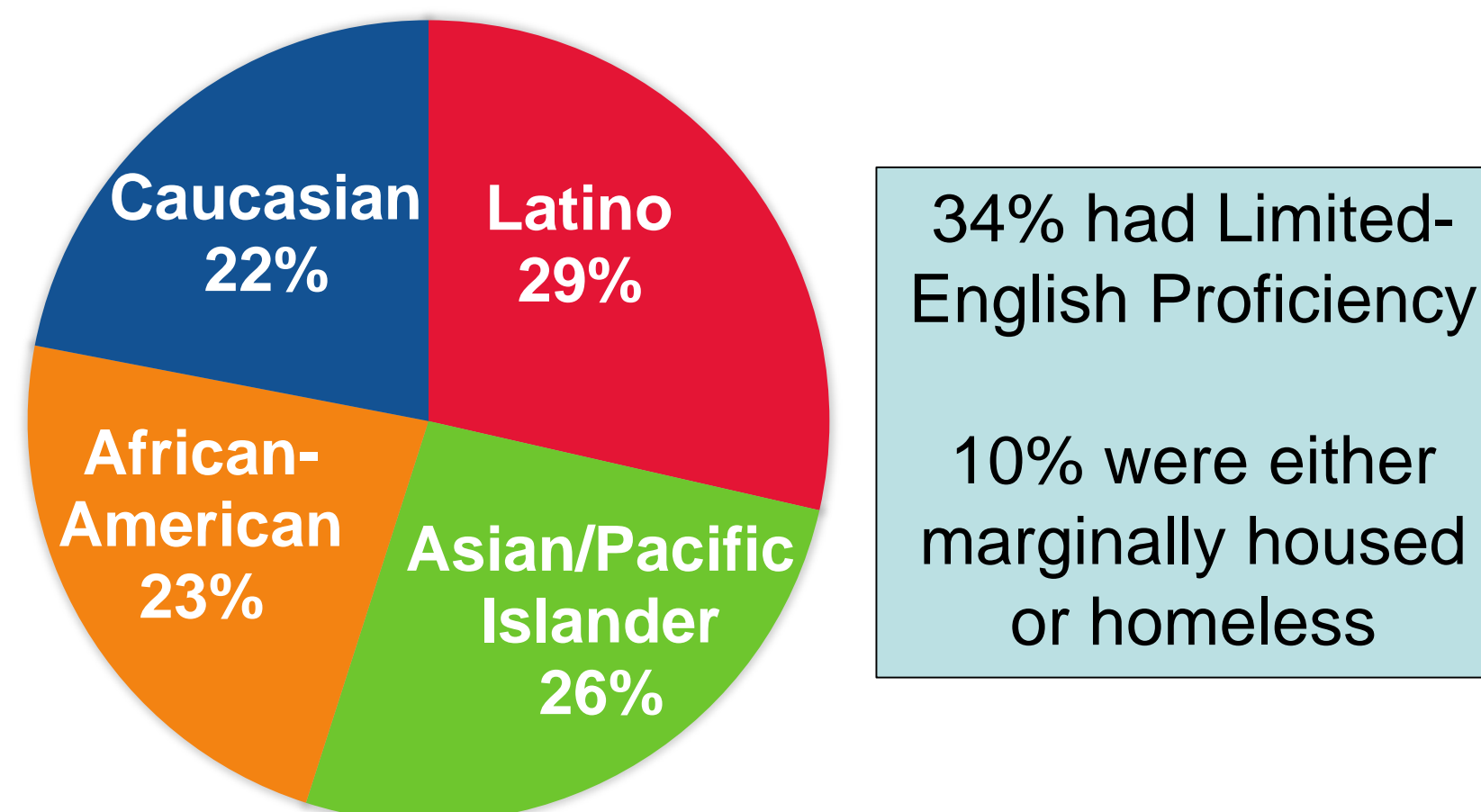
- We surveyed all patients seen in our palliative care clinic, between November 2017 and July 2018, to gauge their access to necessary technology, capability, and interest in attempting telehealth visits
- Surveys were provided in English, Spanish, and Chinese
- For patients with the necessary access, capability, and interest, we offered training to use the Zoom platform and scheduled patients for telehealth appointments

## Results

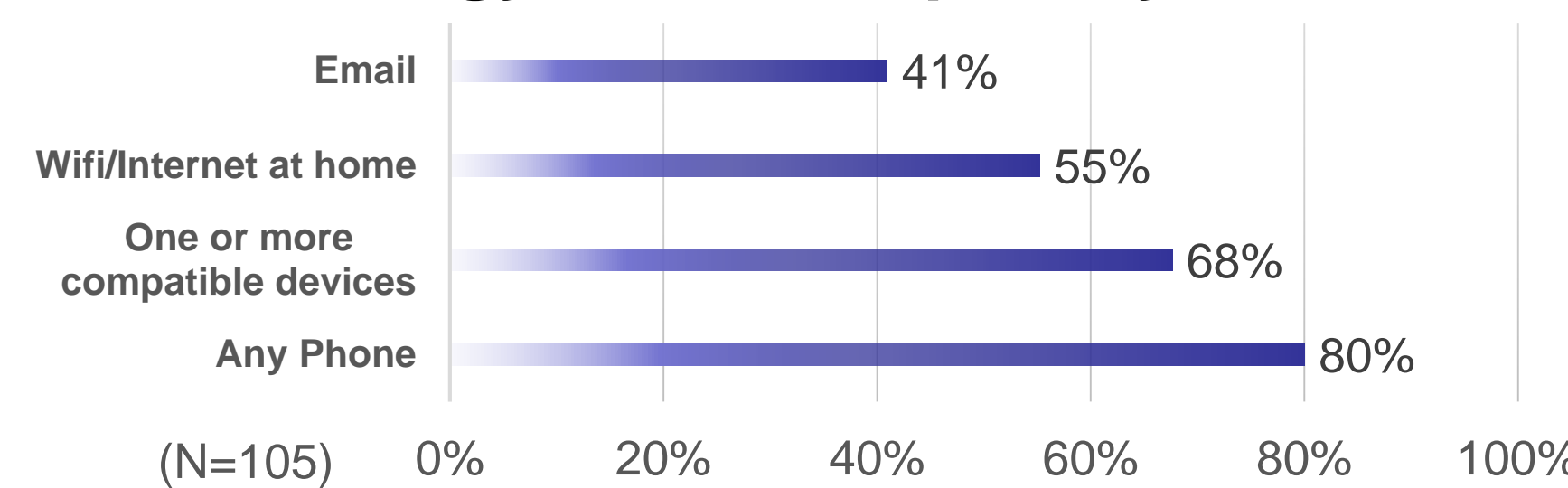
### Survey Data



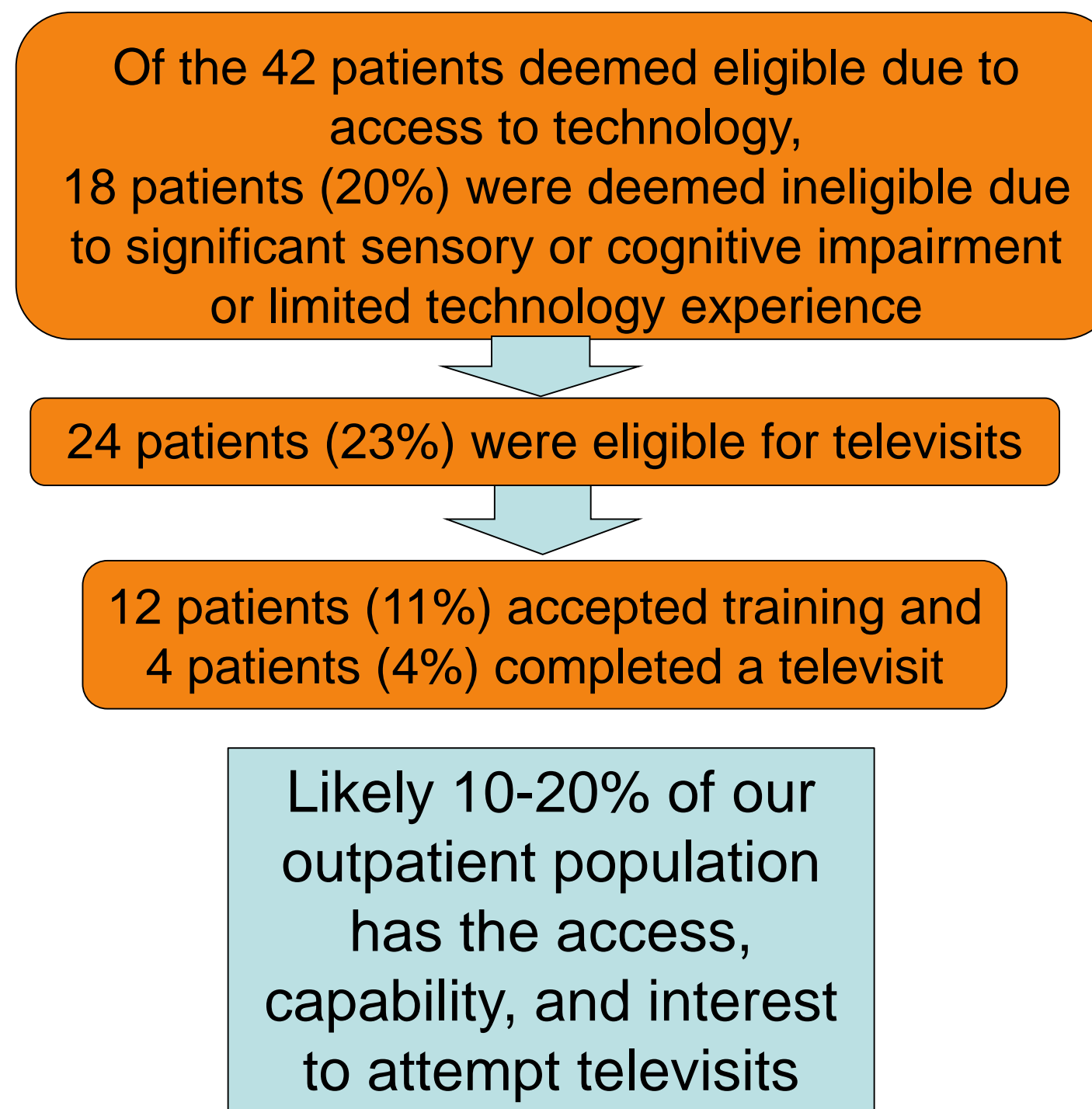
### Patient Demographics



### Technology Access Capability



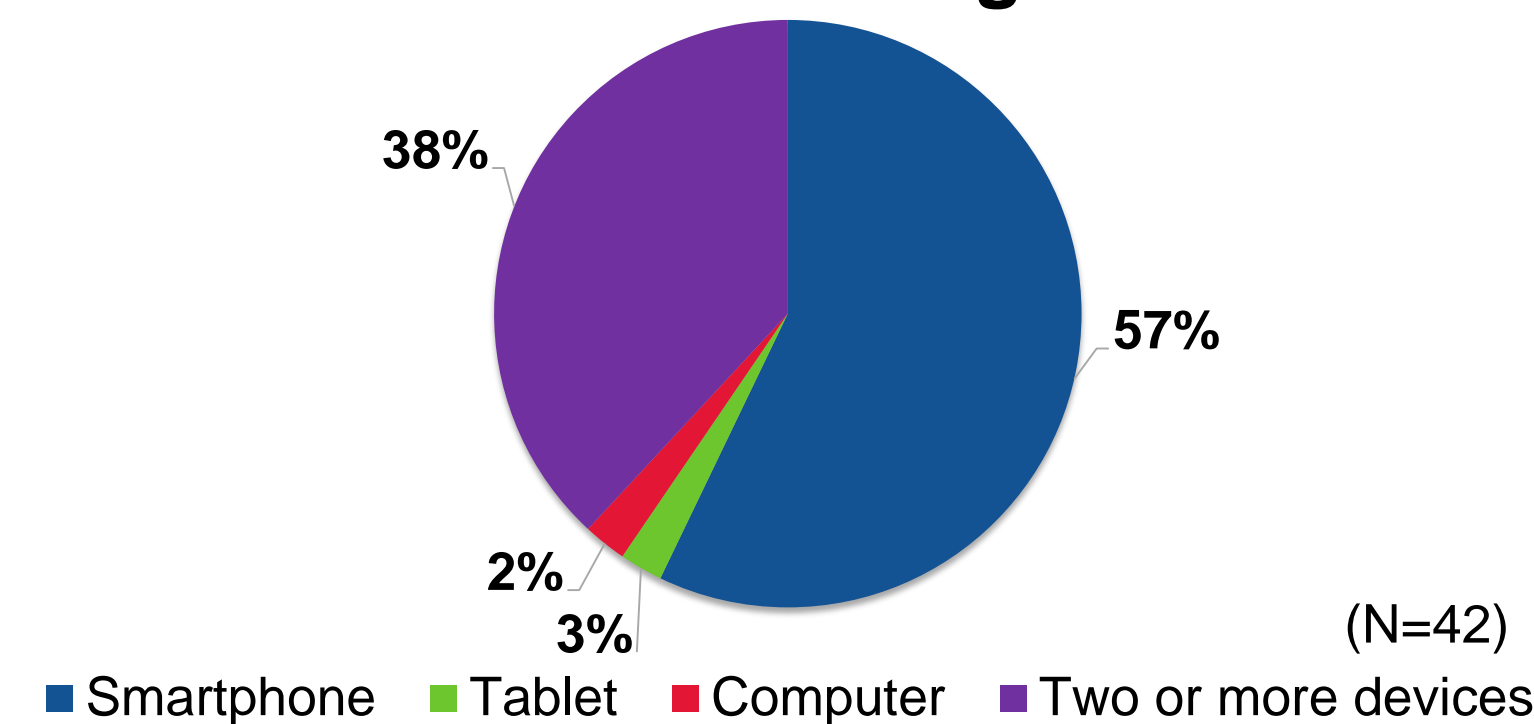
### Pilot Visit Data



### Reasons Patients Declined Telehealth Visits

- Lack of stable wifi/internet access
- Limited technology literacy
- Concern about cost/data plan
- Preference to come to appointment

### Device Breakdown for Eligible Patients



## Conclusions

- Our patient population is less likely to have access to the necessary technology for telehealth visits, compared to higher income populations, though over half could be eligible to attempt telehealth visits
- We estimate that 10-20% of our patient population may be able and willing to complete telehealth visits
- 23% of patients declined telehealth visit scheduling or training stating a preference for in-person visits, while 66% of patients failed to provide a documented answer
- In our small pilot of telehealth visits, no-show rates for telehealth visits were lower than for in-person visits (20% vs. 26%)
- Both providers and patients who completed visits reported satisfaction with the service, and were able to identify unique benefits

## Next Steps

- We are redoubling our efforts to reach more of our patients capable of performing telehealth visits
- We have rebranded as “video-visits” and developed easy-to-read patient materials in different languages to introduce these visits from the time of referral
- Patients with access to the necessary technology and capability are encouraged to try one video-visit on the 3<sup>rd</sup> appointment (“opt-out” approach)
- Staff workflows have been refined to include video-visits as an option when patients need to reschedule appointments

