Conclusions

• The percentage improvement for outcome evaluation questions raised the value of quality patient experience, ease of use, reduced call-volume, wait-time, and successful attempts to follow-up virtual appointments.
• New support process implemented 6/15/21

Role of technology in interprofessional practice facilitate effective utilization of nurses and healthcare providers quality time to impact patient care outcome.

Background

• The novel COVID-19 pandemic impacted the healthcare system with unprecedented challenges.
• Rapid adoption of virtual care services.
• Interruption with continuity of care due to failure patterns.
• Patterns of failures identified: high call volume, wait time, canceled visit, access, no attempts, ease of use, and successful attempts to follow-up virtual appointments.
• Retrospective studies cited technical, usability, and organizational challenges with virtual care adaption.
• New support process implemented 6/15/21


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Background

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Aim Statement

To evaluate the new technical support process for patients and health providers in the virtual setting at M.D. Anderson Cancer Center (MDACC) by the end of the twelve-week evaluation period

Methods

Mixed approaches: Pre-and-post data collection June to December 2021
• Agency: monthly call volume
• Clinic: wait-time, access, ease of use, canceled visits, no attempts, successful connection.
• Pre and post data collection on access to clinic follow up virtual visits June - Dec 2021
• Clinic bases post survey.
• Unstructured observation.

Evaluate program outcome and effectiveness

• Utilized CDC evaluation framework
• Compared percentile value of pre-and-post data

Survey Results

• 50-75% indicated neutral response (neither agree or disagree) to patient and provider satisfaction
• 50% were neutral to improved quality
• 50% were not informed of the new technical support process
• 31% were confident about the new technical support process

Lessons Learned

• Engaging stakeholders throughout the evaluation process
• Establishing meaningful indicators to achieve primary purposes.
• Proving feedback to engage inter-collaborative team readiness to enhance workforce support.
• Disseminating evaluation findings and using tailored communication strategies for improved patient-centered care

Conclusions

• The percentage improvement for outcome evaluation questions raised the value of quality patient experience, ease of use, reduced call-volume, wait-time, and successful connection effectiveness of the new technical support services at the system level.
• Role of technology in interprofessional practice facilitate effective utilization of nurses and healthcare providers quality time to impact patient care outcome.

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