

TeleHealth Case Study

BACKGROUND

Client is a large, comprehensive health care facility in the Midwest with more than 600 beds, a complete range of medical services, numerous inpatient and outpatient facilities, and a main “campus” of six buildings plus an additional five outside facilities.

From 2001 to 2005, the facility had an internal team looking into ways to respond to growing requests from rural hospitals for services. In 2006, an internal Innovations Committee was looking at meeting efficiency and how to link conference rooms. The team reviewed hardware-based offerings from Polycom and Tandberg, but the financial investments needed to bring those systems online were too great. In 2007/2008 one member of the innovation committee built a case study around the use of software-based video conferencing and obtained approval from the Director of Physician Relations, then the Chief Medical Officer and finally the hospital CEO. Originally viewed as simply a conference room solution, numerous follow-on applications for Veamea’s flexible software have emerged.

Current Status

Though the software was only installed in January of 2009, its use and benefits have been growing steadily. The typical goal of a telemedicine project is to improve efficiency and reduce, or avoid, costs. Implementing Veamea has not only achieved these objectives, but has resulted in an increase in inpatient volumes and revenue growth as well.

Key Success Factors

- Easy to Deploy – new users are quickly and easily activated, limited end user training is required due to the intuitive interface and support can be done by PC support rather than a dedicated AV Tech
- Low cost of entry – software and hardware commitments are dramatically lower than traditional videoconferencing
- Flexibility and functionality – runs on existing networks using existing equipment and provides more capabilities than traditional videoconferencing systems

INSTALLATION AND ROLL-OUT

Continuing Medical Education

CME was the first application beyond conference rooms. In prior years, to keep their skills up to date nurses would have to take time away from their hospitals, drive to the main campus, and stay in a hotel to attend a CME seminar. With the Veamea platform, CME is delivered via Webcasts that last year had 27 remote attendees. (The remote sites have proctors assigned to ensure that attendees stay for the full session so that credit is given only for those who truly “attend”)

The success of the CME program and growing familiarity with Veamea’s capabilities spawned multiple additional applications:

Urgent Care Clinics

Urgent Care used to be staffed by MDs. Taking advantage of Veamea’s intuitive video conferencing infrastructure, the hospital will staff most of its Urgent Care locations with mid-levels, greatly reducing expenses. For the most difficult cases, remote clinics will use video conferencing to consult with Physicians in the central clinic, ensuring highest quality patient care.

Tele Psychiatry

The hospital is partnering with a County behavioral health facility, to provide Psychiatric services via video conference, saving both patient and doctor time and travel.

Medical Education

Residents used to commute from the hospital to classes at a nearby University. With Veamea, those classes are being brought in to the hospital via video conference, saving both the commuting time for the residents and making them more available at the hospital to see patients and deepen their experience base.

Another project in this area is Virtual Grand Rounds: attending physicians use video conferencing to receive patient updates from residents and provide insights/guidance without having to be in the hospital. Students can participate in more patient cases, and learn without a large group imposing on the privacy of a patient’s room.

Tele Cardiology

Existing patients can do follow-ups at a hospital close to them, avoiding a trip to “the city” and reducing congestion at the main hospital.

An additional service is a remote General Consult from a staff cardiologist to get clearance for surgery at one of the allied rural hospitals.

Wound Care

Rather than force a patient to return to the hospital for follow-up visits, wound healing can be reviewed remotely and patients can have their questions answered while avoiding a trip to the city.

Tele Pathology

Pathology slices can be reviewed by a remote lab, greatly reducing the time required to physically send tissue samples from an operating room for analysis, allows the pathologist an interactive conversation with the surgeon and reduces the risk of infection introduced by sending someone out of the sterile environment.

**Video Enabled
Robotic Surgery**

Three Stryker surgical suites, including DaVinci robotic surgery devices, have been installed. By integrating these technologies with Veamea, video from the surgeries can be shared in real-time for medical education and supervision, as well as recorded for post-op review and risk management.

