A Telehealth Clinical Learning Solution in the COVID-19 Pandemic

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Purpose
To rapidly deploy a telehealth clinical experience for medical and nursing students that met emerging needs in patient care delivery and facilitated critical academic progression during the early days of the COVID-19 pandemic.

Background
• In the spring of 2020, the COVID-19 pandemic required sheltering-in-place while health care systems prepared for anticipated surges in demand for emergency and intensive care services.
• Routine and elective care services were limited.
• Students in the health sciences were abruptly removed from clinical settings.

Telehealth
• Telehealth, an underutilized and under-resourced tool until March 2020, became the primary mode of health care delivery and clinical education practically overnight.
• MHealth Fairview went from delivering seven virtual health visits on March 23, 2020 to over 1,050 virtual visits on April 6, 2020. By June of 2020, 80% of the ~40,000 health system visits were virtual.

Project Methodology
Faculty in the Medical School and the School of Nursing developed a telehealth clinical rotation including an online orientation curriculum, scope of practice for the medical students and advanced practice nursing student (FNP, AGNP), and a supervised/precepted clinical schedule with primary care providers.

Telehealth Care Delivery
Clinical resources that aligned with the primary platforms used to deliver telehealth services were compiled and posted on a shared web platform. Three telehealth delivery services were utilized: the GetWell Loop, the OnCare online care site, and the health system virtual care platform. An online orientation module provided:
• an overview of telehealth
• platforms navigation
• CDC COVID-19 screening/testing and care recommendations
• practice partner COVID-19 guidelines
• HIPAA guidelines

Scope of Tele-Practice
• Students were precepted according to standard practices by interprofessional preceptors.
• Students monitored and responded to patient inquiries on the GetWell Loop regarding testing/screening, signs and symptoms consistent with COVID, follow up, and CDC recommendations on quarantine, referral, and return to work.
• Students used the OnCare platform to conduct online primary care encounters.
• Students used the virtual MHealth Fairview platform as a virtual urgent care where students addressed a variety of patient conditions via telephone.

Timeline
Students participated in telehealth care delivery from mid-March to mid-July 2020.

Outcomes
103 learners and 15 supervising faculty worked 5-7 days/week seeing an estimated 5,500 patients between mid-March and mid-June 2020.

“I learned so much – not just about telehealth but about the healthcare infrastructure.”

Conclusions
• Rapid development and implementation of a new telehealth clinical learning experience by an interprofessional faculty team is possible when crises require a pivot.
• Future telehealth education and care delivery should be planned, not only response to crises.
• Curricular gaps in telehealth care delivery were and continue be apparent in all health sciences programs.
• Future health care professionals need to be comfortable delivering telehealth care, which requires curricular, faculty, and preceptor adaptations.

Student distribution by discipline

Acknowledgements
MHealth Fairview Practice Partners

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