

TELEHEALTH PROJECT SUMMARY TEMPLATE

Please provide information on all major projects in the last ten years (1998-2008) and any planned future projects

SUMMARY WRITER: **Lianne Hasegawa, MS, CGC**

PROJECT NAME: **Hawaii Practice Model**

ORGANIZATION/AGENCY (and primary contact): **Western States Genetic Services Collaborative**

FUNDING (source and amount): **HRSA (federal) - \$5,000.00 (not including in-kind DOH contributions)**

START UP FUNDS:

REIMBURSEMENT (submitted/not submitted): **Submitted**

DURATION (start time and date): **February 2006**

PURPOSE/INTENT (100 words maximum):

The purpose of this project is to increase access to genetic and hematologic services to neighbor island families through the use of telemedicine. Satisfaction surveys, completed by families, specialists, and onsite facilitators, record satisfaction with the services, and results are compared to similar surveys completed by families and specialists participating in in-person neighbor island outreach clinics. Time and cost data is also being recorded for both telemedicine and outreach clinics and will be compared.

MAJOR CRITICAL ACCOMPLISHMENTS:

Fourteen telemedicine sessions have been completed so far to follow up on positive newborn screening or genetic testing results. Satisfaction survey results show that families are very satisfied with the telemedicine services.

CRITICAL SUCCESS FACTORS:

Our specialists are very willing to participate in telemedicine. We have excellent onsite facilitators to help the families on the neighbor islands, and to help schedule the telemedicine clinics--these are the social workers at the DOH's District Health Offices.

CRITICAL BARRIERS (overcome or not):

Telemedicine equipment used by the specialist is located off-site, so the specialist must drive between her clinic and the telemedicine site. We must compete for the telemedicine site with other DOH programs and cannot always have our first choice of dates. Connections do not always work and have failed twice. Resolution is not great. Reimbursement is poor. PCPs do not always know that telemedicine is an option, so uptake is lower than expected.

MAJOR LESSON LEARNED:

We need telemedicine equipment installed in the specialist's office so that the sessions can be worked into the regular work flow.

CURRENT STATUS (active, planned, dormant, completed, other?):

active

PARTNERING ORGANIZATIONS:

Hawaii Department of Health provides telemedicine facilities and connections. Hawaii Pacific Health will be providing the equipment and connection in the specialist's office.

IS THERE A CLINICAL CHAMPION OR A COMMITTEE OVERSEEING THE TELEMEDICINE PROGRAM?

Sylvia Au, the PI of the Western States Genetic Services Collaborative, oversees the telemedicine program.

TECHNOLOGY USED: