Integrating Telehealth Planning Considerations for Healthcare Coalitions

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Introduction

The Western Regional Alliance for Pediatric Emergency Management (WRAP-EM) was founded with the goal of developing a "coordinated, collaborative and sustainable regional pediatric disaster planning and response capability." These planning considerations provide a foundational framework to assist healthcare coalitions (HCCs) ensure that hospitals and clinics in their region capabilities during an emergency. Particular to these emergency plans is the integration of telehealth capabilities for disaster preparation and response. A key driver in WRAP-EM's development of this document is to encourage multi-disciplinary (primary care, acute care, pediatric specialties, mental health, etc.) collaboration to capture holistic care in emergencies. This guidance outlines considerations for the initiation, planning, implementation, and monitoring and control of telehealth for disaster preparedness.

Initiation

- Define where and how telehealth services can help deliver and improve existing goals of disaster preparedness
- Designate key leaders and contacts for telehealth services, including: emergency preparedness managers, telehealth clinical champion (e.g. medical director), technology expertise (implementation, testing, maintenance, redundancy), and telehealth operations
- Identify key specialist needs (e.g., emergency medicine, mental health, burn, pediatric ICU, pediatric infectious disease, etc.) that may serve as consulting providers/physicians
- Develop organizational charter (if applicable) of participating hospitals that would provide services in disasters/emergencies
- Identify likely and potential "originating" sites where telehealth services might be needed (e.g., receiving hospitals, shelters, etc.)
- Create central list of key stakeholders, contacts, and coordinators at major hospitals

Planning

- Identify major hospital, clinic, and provider groups with existing telehealth capabilities that could serve as "distant" site providers (specialists)
- Identify hospitals, clinics and shelters that might serve as "originating" sites in need of regional expertise, triage, coordination, and clinical support
- Define scope of telehealth services and referring site services
- Identify technology needs including device/technology endpoints, broadband needs and capacity, and identify areas with significant broadband issues
- Take inventory of technology and software platforms among participating sites
- Identify potential security/information threats to patient information and tracking
- Consider developing telehealth service agreements
- Review existing state limitations on telehealth and cross-state services
- Review of historic telehealth waivers granted during emergencies/disasters
- Test and establish connectivity between "originating" and "distant" sites
- Clearly define roles and responsibilities
- Integrate hospitals and emergency plans with input from key community facilities such as schools, fire departments, libraries, etc.

Implementation

- Determine allocation of resources (devices, technology, broadband, personnel, etc.)
- Test the management of resources (devices, technology, broadband, personnel, etc.)
- Develop contingency plans (includes weighing risks based on severity and likelihood of occurrence)
- Develop workflows to test systems among various hazards
- Develop regional exercises to identify opportunities, barriers, threats to telehealth workflows
- Ensure the maintenance of management plans and evaluation of systems in place
- Develop joint contact list of key telehealth coordinators
- Evaluate exercise results to ensure adherence to plans and reduce risk/disruption in an actual emergency event
- Development of reports highlighting deviations from workflows (e.g., staff creating work-arounds), technological and connectivity issues, etc.
- Assess deviations and develop corrective plans
- Implement intermittent drills to test technologies, staff, and organizational readiness
- Validate exercise activities to gauge accuracy and correctness of telehealth-delivered care
- Review and evaluate emergency plans on a quarterly basis with key stakeholders

Monitor and Control

- Evaluate exercise results to ensure adherence to plans and reduce risk/disruption in an actual emergency event
- Development of reports highlighting deviations from workflows (e.g., staff creating work-arounds), technological and connectivity issues, etc.
- Assess deviations and develop corrective plans
- Implement intermittent drills to test technologies, staff, and organizational readiness
- Validate exercise activities to gauge accuracy and correctness of telehealth-delivered care
- Review and evaluate emergency plans on a quarterly basis with key stakeholders

Additional Resources

- Western Regional Alliance for Pediatric Emergency Management Resources:
  - ◊ [WRAP-EM Hospital Reception Site Planning Template](#)
  - ◊ [Tele-critical Care Checklist](#)
  - ◊ [Pediatric Readiness in the Emergency Department (NPRP)](#)
  - ◊ [WRAP-EM Legal Resource Guide](#)
  - ◊ [Just In Time Handbook: A Quick Pediatric Reference Guide for Adult Healthcare Providers](#)

- Emergency Medical Services for Children Innovation and Improvement Center (EIIC) Resources:
  - ◊ [EIIC's Prehospital Pediatric Readiness Toolkit](#)
  - ◊ [EIIC's Pediatric Disaster Preparedness Toolkit](#)
  - ◊ [EMS Education for the Pediatric Emergency Physician – Training Module](#)

- American Academy of Pediatrics (AAP) Resources: • Telehealth Implementation Strategies from the AAP's Supporting Pediatric Research on Outcomes and Utilization of Telehealth (SPROUT) program:
  - ◊ [Core AAP Telehealth Playbook](#)
  - ◊ [How to Prepare Families for a Telehealth Visit](#)
  - ◊ [Telehealth and Adolescent Health Care: What Can Pediatric Clinicians Do?](#)
  - ◊ [PediaLink Course: Providing Telehealth and Distant Care Services in Pediatrics](#)

- Telehealth Implementation Strategies from the AAP's Supporting Pediatric Research on Outcomes and Utilization of Telehealth (SPROUT) program:
  - ◊ [SPARK Trainings](#)
  - ◊ [Ensuring Equitable Access to Telehealth for Diverse and Underserved Communities](#)
  - ◊ [How to Sustain Telehealth Within Your Pediatric Practice](#)
  - ◊ [Virtual Office Hours – Telehealth (Recordings)](#)
  - ◊ [Strategies for Integrating Mental Health Follow-up in Pediatric Primary Care](#)
  - ◊ [Considerations for Safety and Suicidality in a Telehealth Environment](#)
  - ◊ [Using Telehealth to Improve Access to Sexual and Reproductive Health Care for Adolescents](#)
  - ◊ ["The Quest for Privacy" – Finding a Private Location for a Telehealth Visit](#)
  - ◊ [A HealthyChildren.org article and video titled "How to Have a Telehealth Visit from College"](#)

- [National Emergency Tele-Critical Care Network (NETCCN)*](#)
  - ◊ [Clinical Guidelines for NETCCN Providers](#)

NETCCN is adult-focused and does not have pediatric capabilities