

Improving Access to Care for Native American Patients Experiencing Homelessness: A Pilot Study of Outreach-based Telehealth

Innovation Grant Application Medical Student

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Description

This pilot project will involve NACC's outreach team (including medical student) visiting parks or encampments, then setting- up real-time telehealth visits for patients that indicate a health need with a provider on-site at NACC. We are aiming to answer one primary question: is an outreach-based telehealth model a feasible approach for providing care to patients in outdoor community settings?

Background

Native American people in Minnesota have long been impacted by health disparities, including HIV, overdose, chronic diseases, and COVID-19. Since 2020, Hennepin and Ramsey counties have also observed Hepatitis A, HIV, and opioid overdose outbreaks on top of the COVID-19 pandemic that has predominantly affected Native- identified individuals. The Native American Community Clinic (NACC) has served the Twin Cities Native community for nearly 20 years, and recently identified the need to better reach people in parks, encampments, and other outdoor community settings.

Innovation

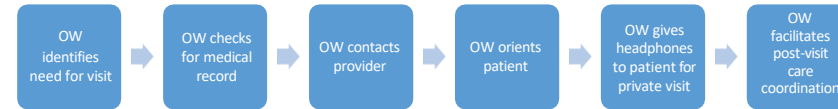
Around the U.S., healthcare systems are trying to figure out to reach unstably housed patients safely during COVID-19. This project reflects a timely initiative to engage patients that may have delayed care due to the pandemic and long-standing structural inequalities. This project builds on NACC's established outreach and relationships with the Twin Cities Native community, and a recent partnership with the Midwest AIDS Training and Education Center (MATEC).

Importance to family medicine

Family physicians tend to the needs of whole communities, beyond clinic walls. Outreach-based telehealth allows us to bring services directly to the encampments and parks where people congregate. The project can improve patient health through increasing receipt of timely assessment and treatment for medically and socially complex Native patients.

Methodology

Proposed Outreach-based Telehealth Model



The NACC outreach team – including outreach workers (OW) and the medical student – will visit parks and encampments, weather permitting, on Thursdays during the project period. OWs will identify patients with health concerns appropriate for telehealth (e.g., medication refill, suboxone interest), check if they have a NACC medical record, and set patients up for telehealth visits with NACC provider(s) using NACC's existing iPads and single-use headphones afforded by this grant. After the visit, the OW will help the patient with any post-visit care coordination (e.g., scheduling).

Project Timeline

June 2021-October 2021

- Implementation of telehealth-based outreach on Thursday afternoons
- Brief interviews and observation forms to assess feasibility (see below)
- Continuous quality improvement throughout – biweekly reviews of data collected to guide ongoing adjustments of protocol

November 2021-February 2022

- Review of all evaluation and electronic health record data and incorporation into finalized outreach-based telehealth protocol

March 2022

- Share findings at MAFP Innovation and Research Forum or other venues

Project Evaluation

We will evaluate the feasibility of outreach-based telehealth through:

- *Brief participant interviews* will allow us to understand how acceptable patients found the telehealth process and whether it was deemed effective in addressing their health concern.
- *Brief observation forms* completed by the medical student or OW for each outreach will allow the outreach team to record notes regarding implementation successes/challenges (e.g., logistics, roles) over time.
- *Electronic health record review* by the medical student and NACC staff will allow us to understand and ultimately describe # of telehealth visits, concerns addressed, referrals made, etc. during project period.

Mentor and partners

Kari Rabie, Chief Medical Officer

Shannon Fahey, Chief Information Officer, NACC; MATEC

Budget (up to \$2,000)

Single-use headphones for patients to use for confidential telehealth visits.

\$15.00 * 30 headphones \$450.00

Gift cards to incentivize participation in brief interviews regarding patients' experience with telehealth.

\$10.00 * 20 gift cards \$200.00

Outreach support supplies (e.g., snacks, water bottles) that the outreach team can bring to sites to facilitate connections with community members.

\$350.00

Total \$1000.00

Why this project

As a previous NACC volunteer, I staunchly believe in their mission for culturally-centered care. This project will allow me to witness and support an innovative model to improve access to care for a resilient, yet historically underserved, patient population.