

Virtual Health Opportunities

Rural Access

Urban

Leverage the Power of "Virtual"

Suburban

Neighborhoods

Employers

Health Patient Peers

This paper aligns with <u>telehealth</u>, <u>remote patient</u> monitoring, <u>chronic care management</u>, <u>home healthcare</u>, and <u>virtual hospital</u>.

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Introduction: Virtual Health Opportunities

This informal paper provides ideas for people using "real-time" communications tools between physical locations. Our society can deliver healthcare services to improve healthcare outcomes to people in many different locations: home.community.centers, employment.sites, schools, neighborhoods, non-profit organizations, nursing homes, hospitals, and clinics. We can neighborhoods, non-profit organizations, nursing homes, hospitals, and clinics. We can neighborhoods, non-profit organizations, nursing homes, hospitals, and neighborhoods, non-profit organizations, nursing homes, hospitals, and neighborhoods, nursing homes, hospitals, and neighborhoods, nursing homes, hospitals, and neighborhoods, neighborhoods, nursing homes, hospitals, nursing humanizations, nursing humanizations, <a href="huma

These tools can also be used by <u>healthcare peers</u>; example heart patients can use virtual tools among themselves to discuss their strategies for staying on track, and getting back on track, to achieve their health goals.

Using virtual tools is not a new idea. Millions of people use Zoom, Cisco Webex, Microsoft Teams, Google Meet, and Adobe Connect. **And yet as a society, we can do much more with these virtual tools.**

All things are possible. We start with imagination and then add belief. We develop a vision. We add motivation to act by understanding benefits and consequences of not doing more. We visualize what we want to do and the actions we need to take. We add people to the team. We learn new skills and expand our comfort zones.

We begin, we learn, we measure, we adjust. We are resilient and keep at it even when there are setbacks. We keep our vision.

I'm a heart patient and I know that virtual tools are a must-have. Telehealth and remote patient monitoring are essential to me and my wife.

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Research

Telehealth in Response to the Rural Health Disparity (2022)

https://pmc.ncbi.nlm.nih.gov/articles/PMC9392842/

"Telehealth is capable of bridging the gap of lack of access and transportation for individuals in rural areas to meet their healthcare needs in a timely fashion in the coming years."

"In a rural Tennessee-based study of a Tele oncology program, 95% of patients who initially saw the oncologist in person and had audiovisual conferencing for half of their visits reported that their experience was as good as or better than an in-person appointment."

Digital Health Interventions for Heart Failure Management in Underserved Rural Areas of the United States: A Systematic Review of Randomized Trials health in Response to the Rural Health Disparity (2024) https://pmc.ncbi.nlm.nih.gov/articles/PMC10926837/

"Heart failure disproportionately affects individuals residing in rural areas, leading to worse health outcomes. Digital health interventions have been proposed as a promising approach for improving heart failure management. This systematic review aims to identify randomized trials of digital health interventions for individuals living in underserved rural areas with heart failure."

An Overview of Telehealth in the Management of Cardiovascular Disease: A Scientific Statement From the American Heart Association (2022) https://www.ahajournals.org/doi/10.1161/CIR.000000000001107

"It has been shown that information delivery, diagnosis, disease monitoring, and follow-up care can be conducted remotely, resulting in considerable changes specific to cardiovascular disease management."



Lack of Broadband-Quality Internet Undercuts Uptake of Cardiac Rehabilitation (2023)

https://consultqd.clevelandclinic.org/lack-of-broadband-quality-internet-undercuts-uptake-of-cardiac-rehabilitation

Using Telehealth to Disseminate Primary, Secondary, and Tertiary CVD Interventions to Rural Populations (2021)

https://pmc.ncbi.nlm.nih.gov/articles/PMC8477387/

"Studies focused on the reduction of CVD risk factors and mitigation of disease progression among rural populations using telehealth are limited in number but appear to be increasing in the last 5 years. These studies suggest primary-, secondary-, and tertiary-level interventions can impact CVD risk and management. The current review found more studies addressing primary CVD intervention strategies, although the evidence for efficacy at all intervention levels is in the early stages."

A Randomized Controlled Trial Comparing Telehealth Self-Management to Standard Outpatient Management in Underserved Black and Hispanic Patients Living with Heart Failure (2019)

https://pmc.ncbi.nlm.nih.gov/articles/PMC6784489/?utm_source=chatgpt.com

Telemedicine-Supported Intervention Versus Standard Care for Managing Cardiovascular Risk Factors in a Socially Deprived Urban Population: A Prospective Study (2025)

https://www.mdpi.com/2227-9032/13/17/2202?utm source=chatgpt.com

"Cardiovascular disease (CVD) remains a leading cause of morbidity and mortality, particularly in socioeconomically disadvantaged populations. Telemedicine offers a potential strategy to support risk factor management in such groups with limited access to care. Our aim was to assess the effectiveness of a telemedicine-supported intervention compared to usual care in improving cardiovascular risk parameters among adults from a socially deprived urban population."



From ChatGPT

Short summary of research showing how telehealth (telemedicine, remote monitoring, etc.) helps improve urban access to cardiac care — with citations.

Key Findings

- Improving Attendance / Access in Urban Cardiology Clinics
 A study at the University of Florida (Jacksonville) looked at a cardiology fellows' clinic before vs after telehealth implementation. PubMed+1
- After introducing telehealth (audio/video), there was a 7.2% increase in appointment attendance during the post-telehealth period. PubMed+1
- Telehealth encounters accounted for ~15% of clinic visits during the post-telehealth 6month period. <u>PubMed+1</u>
- Certain insurance types (e.g. "City-Contract" plans) had higher odds of attendance via telehealth, suggesting improved access among those otherwise potentially underserved. PubMed+1

Effectiveness of Telehealth for Hypertension, CVD and Equivalence to In-Person Care

- A systematic review/meta-analysis of U.S.-based telehealth interventions (2011-2021) assessing hypertension and cardiovascular disease found: PubMed+1
- Telehealth (remote patient monitoring, videoconferences, etc.) led to significant improvements in blood pressure control comparable to in-person care. PMC+1
- Some interventions also reduced all-cause mortality vs usual care. PubMed+1
- Outcomes related to hospitalizations were mixed. PubMed+1

Reduced Readmissions and Mortality in Heart Failure with Telehealth Monitoring

- A study of patients with heart failure (retrospective, matched groups) using telehealth care (including remote monitoring, Bluetooth-enabled devices) saw: <u>PubMed</u>
- Reduced all-cause mortality and fewer readmissions over a one-year period compared to control (usual care) group. <u>PubMed</u>
- Lower rates of heart failure–related readmissions. PubMed



Reducing Hospital Bed-Days and Lengths of Stay via Home Telehealth for Heart Failure

- In a Veterans Affairs program, home telehealth monitoring for patients with heart failure was associated with: PubMed
- Significantly fewer total hospital days per patient in the year after enrolling in telehealth vs previous year. PubMed
- Shorter lengths of stay for hospital admissions and fewer admissions. PubMed

Improved Outcomes in Urban, Socially Deprived Populations

 There's evidence that even simple, low-cost telemedicine (telephone support, etc.) interventions in socially deprived urban settings can improve outcomes: e.g., better control of diastolic blood pressure, LDL-cholesterol, and reaching treatment targets within 3 months. MDPI

Scientific Consensus and Policy Statements

- The American Heart Association has published statements summarizing that telehealth can reduce barriers to access (including for urban, under-served populations), enable remote monitoring, follow-up, and chronic disease management. <u>AHA Journals+1</u>
- These statements also caution that disparities (like broadband access, digital literacy, structural or socioeconomic barriers) may limit benefit if not specifically addressed. <u>AHA Journals+1</u>



Virtual Health Opportunities: Discussion Questions

Make a list of ideas on how to leverage, or better leverage, Video Conferencing to accomplish your virtual health goals?			
What are the benefits of leveraging, or better leveraging, Video Conferencing?			

Transformation

Napoleon Hill

First comes thought; then organization of that thought into ideas and plans; then transformation of those plans into reality. The Beginning, as you will observe, is in your imagination. (BrainyQuote)

Wayne Dyer

Transformation literally means going beyond your form. (BrainyQuote)

Maya Angelou

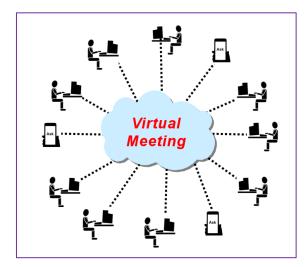
We delight in the beauty of the butterfly, but rarely admit the changes it has gone through to achieve that beauty. (AZQuotes)



Using Different Virtual Healthcare Setups - A







Opportunities

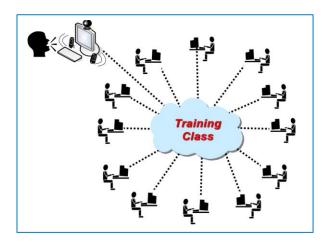
- Heart dietician teaches and advises one or multiple patients and caregivers.
- A cardiologist consults a patient.
- Heath Patient Peers diabetes patients meet with each other to discuss how they manage their sugar intake, maintain exercise, take meds on time, and keep their spirits up.
- Heart patients same as above, manage their sodium intake.
- After hospital discharge, a transition nurse listens, provides emotional support, and provides advice.
- A multi-disciplinary health team meets.
- Rural health officials collaborate with an urban or university healthcare program.

Location Examples

- The patient is in a rural location with little access.
- The patient is in an urban area with little access.
- Workshops are delivered for Executive Health Programs.
- Program managers, representing different organizations, hear a presentation about starting a heart or diabetes health prevention program.



Using Different Virtual Healthcare Setups - B



Consider two SME's or a SME and a virtual meeting producer or facilitator.

Subject Matter Expert (SME)

- A heart dietician teaches a class.
- A diabetes dietician teaches a class.
- "Stay out of the Hospital" virtual classes are delivered to patients, caregivers, and family members.
- Training is provided on "how to use" a new device or an AI app.
- A Remote Patient Monitoring company teaches a class to patients and caregivers.
- A Telehealth company:
 - Delivers a marketing seminar about their prevention service.
 - Facilitates a class where patients and caregivers work on group activities and ask questions.
 - Teaches a class to a nonprofit organization's chapters in different cities.
- Patients in different hospital rooms participate in a virtual care program.
 (There is no human being at the bedside.)
- Caregivers participate in workshops specific to their role with chronic care patients.

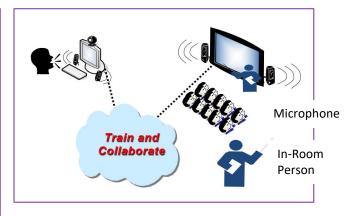


Using Different Virtual Healthcare Setups - C

Classes and Programs are located in <u>libraries</u>, <u>schools</u>, <u>banks</u>, <u>companies</u>, <u>government offices</u>, <u>community centers</u>, nonprofits, religious centers, and so forth.

Topics

- Heart Health
- Senior Health and Wellness
- Nutrition and Sodium
- How To Read Nutrition Facts Labels
- High Blood Pressure (Hypertension)
- Self-Motivation
- Mental Health
- Positive Thinking and Resiliency
- Taking your Meds (on time)
- Advocacy for Yourself and Others
- Mental Health for Caregivers
- Diabetes
- Gratefulness
- Prevent Falling (Canes and Walkers)
- Cancer
- Preparing Healthy Meals
- Looking Out For Each Other, Building your Support Network
- Transportation
- Shopping for Food
- Telephone Scams, Internet Security
- Relaxation Techniques



Subject Matter Expert (SME) with In-Room Coordinator, Facilitator or Teacher

- A cardiac nurse is remote and nursing students are in the room. Participants ask questions of the cardiac nurse.
- A telehealth company teaches a class to hospital employees about their prevention services.
- A Remote Patient Monitoring company teaches a class to patients and caregivers.
- A Chronic Care Management or Virtual Hospital expert gives a presentation, using breakout rooms and Q&A.
- A county health employee delivers a program to people in the community.

Learn How to be Glitch-free and High Quality. Be successful with this setup!

Contact me.



Using Different Meeting Setups – very large audience

Henry was a Table Facilitator in Columbia, South Carolina for this program.

- 3,500 people connected across 57 sites via satellite and Internet. Participants used touchpads for voting. Participants were a diverse and representative group.
- Goals included: engage each other, discuss the issues, no one person dominates the discussion, and people leave the town hall meeting feeling they were listened to. Participants were given materials during the meeting and they also had a pre-meeting assignment. Recommendations went to government officials.
- The program was sponsored by AmericaSpeaks. The Lead Facilitators were Carolyn Lukensmeyer and Greg Hodge. Program: "Our Budget, Our Economy" (June 26, 2010). Table Facilitators completed a training program.

Pictures from YouTube: https://www.youtube.com/watch?v=DfOqh_yKPR0 and https://www.youtube.com/watch?v=sODpGx8lo-o





Virtual Healthcare Connect: Urban ... with ... Rural

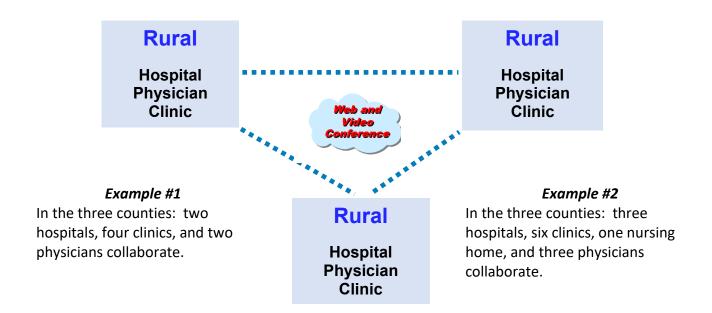
LEFT-column (<u>Urban</u>) represents people and organizations that are in urban and suburban areas.

RIGHT-column (Rural) represents people and organizations in rural areas.

Urban	Rural
 Physicians Nurses Dieticians Telehealth employees Remote Patient Monitoring employees Chronic Care Management companies Behavioral Health Specialists Researchers State and federal health departments State Govt. Rural Health Offices Instructors, Faculty, Teachers, Colleges and Universities Wellness Coaches 	 Individuals – patients, caregivers, families Physician Offices, Clinics, Hospitals, and Individuals Veterans Organizations, Senior Centers Employers Rural Healthcare and Regional Medical Centers Community Organizations & Technical Colleges Medicaid Offices Homeless and Poverty Programs Youth Organizations Schools and Public Libraries Lions Clubs, Rotary Clubs Faith-based organizations



Virtual Healthcare Connect: Rural . . . with . . . Rural 3 Counties



Example #3 - Telehealth

Telehealth company connects with their clients in three counties at the same time.



Using Purposeful Design to Achieve Quality Patient Experiences

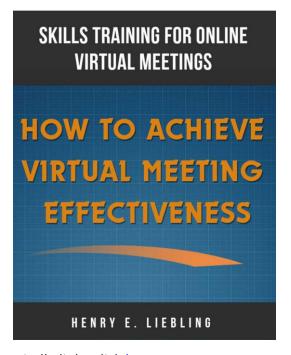
Give thought to the design of virtual meetings and virtual classroom teaching and learning. Be purposeful when considering your objectives, your participants, and the different ways in which people can communicate and collaborate with each other using virtual tools. With purposeful design, you can have great meetings. What does "great" mean to you? What do you want participants to say about their experience?

Consider these questions when planning your virtual healthcare events:

- 1. What are the objectives?
 - Learning objectives? Brainstorming? Informing? Round Robin discussion? Making a group decision? Meeting new people? Getting agreement? Small group discussions? Clarifying a problem or project plan? Giving a demo?
- 2. What experience do patients and caregivers have with virtual meetings? Will they be using a webcam or smartphone?
- 3. What preparation is needed by the presenters and facilitators? Are you using a virtual producer? In the past, what worked? What did not work?
- 4. What "participant experience" do you want people to have? High engagement? Some engagement? Complete assignments? Breakout rooms? Answer poll questions? Mostly listen? Will there be an assignment before the virtual experience?
- 5. What meeting tools will you use? Are there meeting tools you could be using? What meeting tools need to be practiced to build comfort and confidence?
- 6. Would it be helpful to have two facilitators? Will you be using SME's (subject matter experts)?
- 7. What engagement skills do presenters and group facilitators have for the virtual environment? What skills do they need?
- 8. Follow-up? What does that look like?



Enhance or Refresh Your Virtual Skills with Practice Most people underutilize the available tools.



Overview of eBook (Amazon Kindle) (2020)

Gives you a vision of **WHAT** you can do and **HOW** you can do it with Web and Video Conferencing software and technology, for virtual meetings and virtual classroom teaching and learning.

Provides a short refresher course on **soft skills**, such as **communications and active listening**.

There are **more than 100 skills to practice**. Most of the skill practices take just a few minutes.

By practicing these skills, you will gain comfort and confidence. You will be able to apply your software technology knowledge and soft skills to your online virtual meetings.

Kindle link: click here

Click <u>here</u> for an explainer document that give you tips for practicing – personally and with others.

"What you practice, you get good at." anonymous

"With repitition, you develop new habits and a new comfort zone."

Founder, The Pacific Institute Community (an affiliate company of The Pacific Institute)



Additional Resources

Telehealth-Virtual Care-AI Report: Heart edition (2025)

Please request: <u>hliebling@morevirtual.com</u>

Telemedicine Telehealth Report (50 pages)

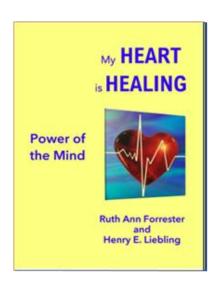
Please request: <u>hliebling@morevirtual.com</u>

2021 – Great Practices Podcast: The PMO Leader
"Keeping Your Virtual Meetings Real with Henry Liebling"
https://www.thepmoleader.com/the-pmo-leader-podcast Speaker (Episode E05)

Henry E. Liebling

Hi, I am also a heart patient.

My wife and I co-authored a book about our experience, "My Heart is Healing: Power of the Mind." Our web site is: https://www.myheartishealing.com



Book Excerpt *click here*

Testimonials click here



Click <u>here</u> 10 minutes