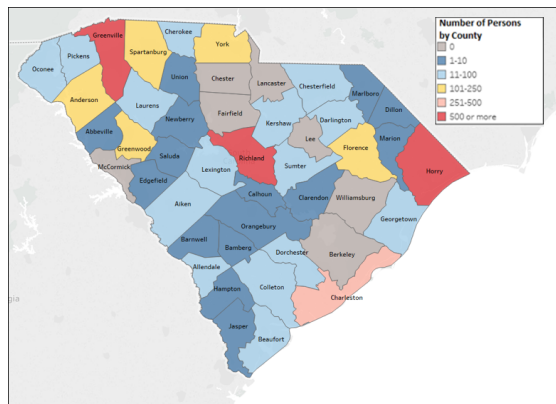


Using Telehealth to Overcome Healthcare Barriers for Individuals Experiencing Homelessness (IEH)

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Background

- More than 2 million people in the US experience homelessness each year¹
- Nearly 4,000 South Carolinians go without a home on any given night²
- Individuals experiencing homelessness (IEH) are:
 - 3 to 6 times more likely to experience illness
 - 4 times more likely to be hospitalized
 - 3 to 4 times more likely to die prematurely³
- IEH encounter barriers to healthcare access and challenges in all domains of the social determinants of health, resulting in poor health outcomes
- Telehealth is a promising approach to improve access for this population



Homelessness by County in South Carolina²

Objectives

- To compare care delivered in person versus via telehealth for non-emergent primary care, using questions adapted from the previously validated Service User Technology Acceptability Questionnaire (SUTAQ)⁴
- Main outcome measures:
 - 1) Telehealth feasibility for patients and providers
 - 2) Telehealth acceptability for patients and providers
 - 3) Impact of telehealth on healthcare access

Setting and Data Collection

- The CARES 529 Meeting Street Clinic is a collaboration between the Medical University of South Carolina Department of Family Medicine and Military Community Connections Navigation Center
- The Navigation Center provides a variety of resources for IEH including non-emergent medical care via the CARES 529 Meeting Street Clinic



529 Meeting Street Navigation Center

- Family medicine physicians see patients at the CARES 529 Meeting Clinic on-site or via telehealth to the site
- Anonymous computer-based surveys are administered (via REDCap) to patients and providers for both in-person and telehealth visits to characterize the care experience and visit outcomes



Exam Room and Telehealth Equipment

Results

Figure 1: Patient Surveys by Visit Type

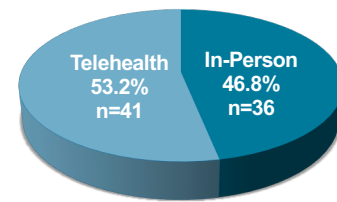


Figure 2: Provider Surveys by Visit Type

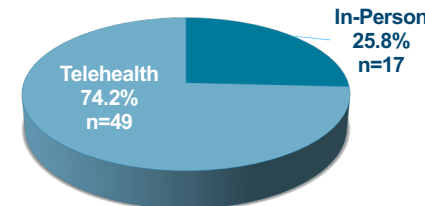


Figure 4: Patient Survey Results

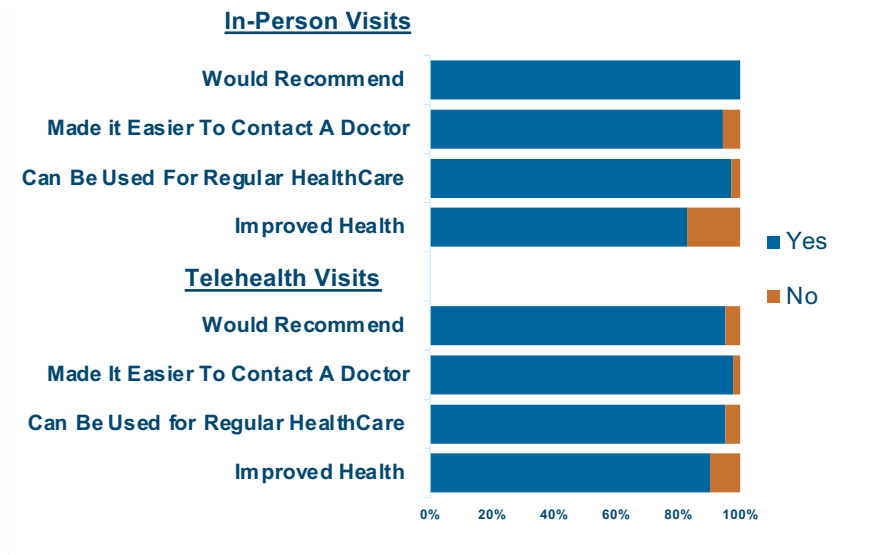
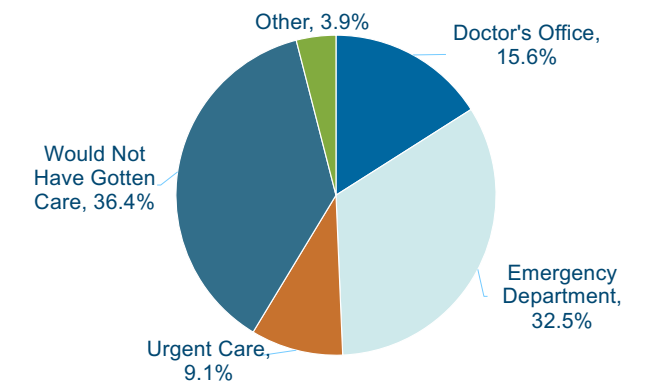


Figure 3: Provider Survey Results

Visit Outcome	In-Person Visits (%)	Telehealth Visits (%)	All Visits % (n)
New Rx	41.2%	38.8%	39.4% (26)
Refill Rx	58.8%	44.9%	48.5% (32)
Outpatient Referral	41.2%	16.3%	22.7% (15)
ER or Hospital Referral	5.9%	0.0%	1.5% (1)
Tests Ordered	0.0%	2.0%	1.5% (1)
General Counseling	17.6%	55.1%	45.5% (30)
Other	5.9%	4.1%	4.5% (3)

- Providers agreed/strongly agreed that they were able to communicate adequately with patients (100% telehealth, 94.1% in-person, p<.26)
- Providers agreed/strongly agreed they made a positive impact on patients' health (91.3% telehealth, 64.7% in-person, p<.03)
- The majority (71.8%) of providers who saw patients via telehealth disagreed/strongly disagreed the visit would have been better in person
- Of patients who did not need follow-up after their visit, most were seen via telehealth (84.2%)

Figure 5: Patient Reported Alternative Source of Care if CARES 529 Meeting Street Clinic was Not Available



Conclusion

- Telehealth is a healthcare delivery method that is feasible, is accepted by patients and providers, and increases access to healthcare for the IEH population
- Using telehealth to increase access to care has the potential to reduce disparity in health outcomes for this vulnerable population and modify high cost healthcare utilization patterns

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