

## OHSU Richmond COVID-19 Workflows

### Schedule Scrubbing Protocol as of 4/1/20

#### Key Points:

\* PAS will scrub schedule daily visit for all in-person visits scheduled during 8a – 10a “well hours” and asking COVID Screening questions. Routes “positive screening” patients to RNs for triage in a phone encounter. RNs triaging before in-person visits.

\*MAs WFH scrubbing future (next day and after) schedules to auto-convert to phone or Video Visit.

\*Providers to scrub individual schedules to identify patients to reschedule, or move to phone/video. **Route message or encounter to PAS Pool to cancel/reschedule.**

#### F2F Clinic Visits Schedule Scrubbing:

- **PAS will call all in-person visits scheduled during “well hours” 24 hours in advance of appointment and ask COVID screening questions:**
  - PAS scrub all appointments (including RN/MA/Lab) during the well hours of 8a – 10a. If patient gives positive response to any screening question, will forward to RN Advice for triage and add **BLUE DOT**.
  - PAS will document in Appt Note: “Screen OK on X Date” or “RN Triage Needed”.
    - If no answer, leave detailed message to call back about important appointment details.
    - Remind all patients that visitors (including other children or people from household cannot be in clinic)
- **Front Desk check-in will ask Epic screening questions** upon all patient arrivals. If positive, Front Desk will ask patient to mask and wait outside for RN Triage.
- **RNs continue to screen need/request for appointment.** If RN advises and schedules patient for in-person visit, RN will route triage phone encounter to Visit Provider as FYI. RNs will scrub for **BLUE DOTS** daily and change to **WHITE DOT** if pt OK to come to visit.

#### Appointment Schedule Scrubbing Protocol:

- **MAs WFH** are primary role for future scrubbing schedules and will automatically convert patient to phone or video visit:
  - If patient has MyChart, will convert to Video Visit. If no MyChart, will convert to Phone Visit.
  - Use “Virtual Visit-Phone Workflow\_3-27-20” as guide. In email titled “MA Toolkit for Virtual Visits”.
  - Pay attention to dot system – especially yellow, green, red.
- **Providers scrub own schedules minimum 48 hours** and do the following:
  - Use dot system to indicate if scheduled in-person visit should be converted to Phone or Video Visit
  - Route to PAS Pool any patients to cancel/reschedule for future date. See Emily Myers email on 3/30.
  - Note: MAs will scrub for dots and visits to convert (see above).

## Dot key for phone and video visits

Revised 3.31.20

-  BLACK: provider would like to cancel appointment
-  WHITE: provider OK with visit, pt to come into clinic
-  YELLOW: provider advises a phone visit
-  BLUE: RN triage needed- RN will advise scheduling
-  GREEN: provider advises video visit
-  RED: pt contacted; did not answer call

NO DOT: visit has been changed, no action needed

**Providers & MA's - Day of Clinic Visit:** Huddle before each session to scrub schedule and plan for phone vs video visit. MA working with Visit Provider will outreach to any patient on schedule where visit has not been converted.

## Modified Phone/Video Visit (VV) Workflows – As of 4/1/20

### Key points:

- **MAs are primary for contacting pt about Video Visit;** PAS are primary for rescheduling or cancelling visits.
- **TCs are primary for outreaching to patients to enroll in MyChart.**
- Document both in a phone encounter and in the Appt Notes for ease of finding info

MA Process	What to Do	Additional details
<b>Scrubbing schedule to convert to VV</b>	<p>MA scrubs at least one day in advance. Add MyChart status to schedule view.</p> <p>If MyChart Status active:</p> <ol style="list-style-type: none"> <li>a. Call patient and convert to VV. Use process for “how to change an existing appointment to video(virtual) visit”. Document in phone encounter.</li> <li>b. If no answer, leave message using .COVIDAPPTCHANGE and document in phone encounter. OK to leave detailed message saying you are calling about visit – see the .phrase below.</li> <li>c. Instruct patient on what to expect and getting ready for visit.</li> <li>d. Tell patient visit will occur within 45-60 minutes of appointment time, but could also be on time.</li> <li>e. Confirm accurate phone number for pt, just in case!</li> </ol> <ol style="list-style-type: none"> <li>2. If MyChart inactive keep as phone visit. (TC will be outreaching to patients to sign-up)</li> <li>3. If patient or provider wants to cancel visit, cancel appointment and contact patient. Leave detailed message.</li> </ol>	<p>MAs should scrub schedule for pod providers, not just provider they may be working with.</p> <p>Add to beginning of appt notes:</p> <ul style="list-style-type: none"> <li>• “VV CONFIRMED” if pt switches.</li> <li>• Type in preferred phone # in Appt Notes.</li> <li>• “LM” if patient contacted and no answer</li> <li>• “Declined VV” if only wants phone visit or can’t use MyChart</li> </ul>

<p><b>Day of Video Visit</b></p>	<p><b>Conduct session huddle with provider you are working with. Discuss how you will communicate with each other and individual patient needs.</b></p> <p><b>Before Visit:</b> Call patient 20 minutes before appointment to make sure ready for video appointment and logged into MyChart using the app.</p> <p><b>Quick Steps for Starting Video Visit:</b></p> <ol style="list-style-type: none"> <li>1. Have patient on the phone.</li> <li>2. MA confirms pt's identity (last name + DOB)</li> <li>3. Does pt have the Mychart app? If not, needs to download. Connecting through mobile phone is preferred.</li> <li>4. Open up encounter to precharting. Click on "Start the encounter" at the top of the page.</li> <li>5. At this point, patient will need to put the call on speaker phone so MA can continue to provide instructions for the mobile app.</li> <li>6. MA confirm Chief Complaint for visit and document in precharting.</li> <li>7. MA can verify meds with the patient by having patient click on the "Medications" icon from the Mychart homepage.</li> <li>8. Record vitals if possible (patient-reported weight, BP, pulse, pain score).</li> <li>9. Review questionnaires with patient if applicable and enter in flowsheets.</li> <li>10. Walk patient through check-in process. Have them follow the prompts.</li> <li>11. Tell the patient "You are now set up and ready for the provider to connect with you. Our provider is still on the line with another patient. Please note that we have been experiencing technical difficulties with the audio. If this happens, please stay on this video and expect to receive a call from the provider so we could also hear you."</li> </ol> <p><b>If visit ends up being Phone Only:</b> If patient not signed up for MyChart, call patient after phone visit to enroll. Warm hand-off to TC if needed.</p>	<p>TCs can support MyChart sign up; Skype or Inbasket, or verbally warm hand-off or have them contact the patient.</p>

## How do I schedule a virtual visit?

1. Ensure the patient has an active MyChart account
2. Schedule the appointment normally, using the visit type "virtual visit" [21008]
3. Once you schedule the visit, create a HAR

## How to change an existing appointment to a virtual visit

1. On Appt Desk, click on "Change Appointment" at the bottom of the screen



2. Change visit type to "virtual visit" [21008] and add "virtual" to beginning of the Appt Notes

A screenshot of the "Change Appointment" form. The "Visit type" dropdown menu is open, showing "VIRTUAL VISIT [21008]" selected. The "Notes" field contains the text "VIRTUAL - dm check". Other fields include "Date" (4/9/2020), "Arrival time" (08:00 AM), and "Start time" (08:00 AM). A table at the bottom shows the "Department" as "1 FM FGHC RICHMOND OHSU [225700002]" and the "Provider" as "SOSA, SONIA [4055]".

3. Then click "change"

**Script for Preparing Patient for VV:** "I am calling about your upcoming video visit with (PROVIDER), a (CLINIC) provider. For your video (aka virtual) visit appointment please plan to use the MyChart app on either a smartphone or tablet if available. Please give us a call back at 503-418-3900 if you have any questions or need to reschedule your appointment. If you need help with MyChart, call 888-895-3603.

If you are interested in viewing instructions on how to access your upcoming appointment please visit:

[www.ohsu.edu/virtualprep](http://www.ohsu.edu/virtualprep).

## Reminders for Patient Day of VV:

"You have a virtual visit using OHSU MyChart. Log in 10 minutes before your appointment to test the video connection and check-in." You will be asked a few questions before the system will connect:

*Do you consent to sharing your location?*

*Do you consent to sharing your video?* **Patient must answer "yes" to both questions or visit cannot occur.**

**Remind patient to stay connected in case provider is running behind schedule. Let patient know a MA will be calling to inform patient of any delays.**

Use **.COVIDAPPTCHANGE** below for Phone Call Encounter Documentation:

Option 1: **Appointment cancellation needed**

Left message letting pt know we cancelled their appointment on xx/xx per their provider's request due to COVID precautions, and that we will call back in the future to reschedule.

Sent myself a future in-basket as a reminder to call back in 2 months to reschedule.

Option 2: **Appointment conversion needed**

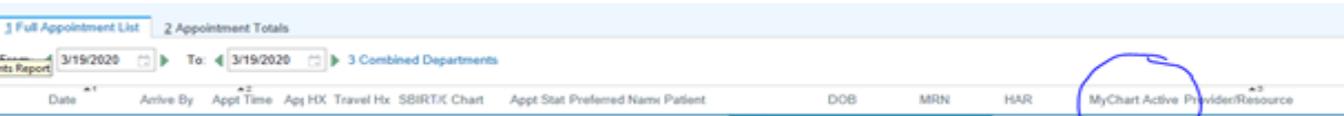
Left voicemail to let pt know that we need to change office visit to a phone or video visit [DELETE ONE OPTION].

PAS: if pt returns call, please confirm preferred phone number and put it in the Appt Notes, then update the visit type and dot color. If pt declines phone visit, please send encounter to appointment provider to triage.

## Virtual Visit Conversion Guide

### 1. Pre-work:

- Familiarize yourself with the tip sheet: <https://www.ohsu.edu/sites/default/files/2020-03/OHSU-Virtual-Visits-telehealth-instructions-March2020.pdf>
- Watch both videos for helping pt with virtual visit: <https://bridge.ohsu.edu/cs/itg/services/telemedicine/SitePages/Virtual%20Visit%20Training%20Resources.aspx>
- Add “MyChart Active” column to the schedule view (it may also appear as MyChart Status”



d. Can use test patient: Test, Test 07626932

### 2. For any PHONE VISIT, call patient and ask if we can convert to virtual visit.

- If MyChart status is activated, ask if they have the app then skip to step 4. Virtual visits work best in an app on phone or tablet.
- Pending activation means they were given an access code at one time, but never created an account. Patient will probably need a new activation code. If their activation code has not expired yet, you can give them their activation code and MRN over the phone to assist with sign up.
  - If the patient already has a MyChart ID code you can help them reset their password through the MyChart Utilities > MyChart Administration> Reset Password. This will allow you to give them a temporary password (i.e. 12345) and then they can change the password once they log in with the temporary one.
- Patient declined- if they have only declined once, offer it to them again. If they have declined multiple times, leave as phone visit

### 3. To help sign the patient up for MyChart, follow instructions here:

<https://bridge.ohsu.edu/cs/itg/services/telemedicine/ED/MyChart%20Signup%20Enhancement.pdf>

### 4. If patient agrees and has MyChart access on an app, change visit type to Virtual Visit

**Change Appointment**

Use patient preferences

Visit type:  Note

Date:

Arrival time:

Start time:

Department	Provider
1 FM FQHC RICHMOND OHSU [225700002]	MYERS, EMILY K

### 5. MA: Hello {insert patient name}, We are now offering video visits at our clinic. {Insert provider name} thinks that your visit scheduled on {insert date} would work well this way. You can do this visit from your home on your own mobile device. Does this interest you?

- If no – Thank you. We will keep your visit as phone visit/ in person visit.
- If Yes – That is great. Before I change the appointment, I need to go over a few things to make sure it is a good fit.

- i. Do you have a smart phone or tablet? I see you currently have a MyChart account. The visit will take place in MyChart using the MyChart app.
  - ii. Are you able to download the MyChart app to your phone before the day of the visit? Sounds good. On the day of the visit, please log in at least 30 minutes before the visit starts to check in and test your phone equipment.
  - iii. You can test the equipment anytime by finding the appointment in your MyChart app. If you need help before your appointment, please contact MyChart Help Desk at 833-895-3603 or visit [www.ohsu.edu/mychart](http://www.ohsu.edu/mychart)
  - iv. During pre-check in, you will be asked if you are in Oregon, but that is no longer a requirement for virtual visits. Most insurance companies cover virtual visits the same way they cover in person office visits.
  - v. Do you have any additional questions for me?
6. Troubleshooting:
  - a. Patients may have ID already especially if they used MyChart during OCHIN. MA's can reset passwords for people who don't know their log in info anymore
  - b. If patients have been using MyChart at multiple facilities (i.e. Providence) it may be linked to their SSN. If they are having trouble linking all of their MyCharts we may need to have SSN on file for them, so send them to Registration.
  - c. OHSU does not record the virtual visit, per Compass training video

### MA Workflow – Virtual Visits (Quick Steps)

1. At the start of the day, MAs and providers huddle and run through the schedule before clinic starts. Provider can review with MA how they are to communicate (e.g via text, skype, phone, etc). Providers can also review with MAs what additional screenings/questionnaires MAs should complete during “virtual rooming” time
2. 20 mins prior to scheduled appointment, MA will call patient
3. MA confirms pt’s identity (last name + DOB)
4. Does pt have the Mychart app? If not, needs to download. Connecting through mobile phone is preferred.
5. Open up encounter to precharting. Click on “Start the encounter” at the top of the page.
6. At this point, patient will need to put the call on speaker phone so MA can continue to provide instructions for the mobile app.
7. MA can verify meds with the patient by having patient click on the “Medications” icon from the Mychart homepage.
8. Record vitals if possible (patient-reported weight, BP, pulse, pain score).
9. Review questionnaires with patient if applicable and enter in flowsheets.
10. Walk patient through check-in process. Have them follow the prompts.
11. Tell the patient “You are now set up and ready for the provider to connect with you. Our provider is still on the line with another patient. Please note that we have been experiencing technical difficulties with the audio. If this happens, please stay on this video and expect to receive a call from the provider so we could also hear you.”

See Virtual Visit MA Workflow for Screenshots for complete instructions.