# Stakeholder Meeting

Student's Name: Institutional Affiliation: Course Code/Name: Professor's Name: Due Date:

#### Key stakeholders Expected to Attend the Meeting

- The director- Medhill mental health clinic
- The director- PTSD department
- ► The director Medhill ICT department
- Director of nursing- Medhill mental health clinic
- ► The Chair- Medhill mental health clinic Quality control department
- HIPAA compliance officer
- The community youth groups representatives
- The youth director- local Faith-Based Organization

#### **Meeting Announcement**

- ► Good afternoon, ladies and gentlemen,
- We appreciate your response and concern about this proposed telehealth project
- You have been identified as an essential stakeholder in the Introduction of the telehealth program in Medhill's PTSD department.
- The telehealth program involves the Introduction of videoconferencing at Medhill's PTSD department, targeting to increase mental health care access for teens and young adults aged 18-24 in the community.
- > The meeting covers areas of the telehealth technology program in detail
- Find attached the meeting's agenda and discussion in the power-point presentation
- For any queries, concerns, or clarifications, please email us at <u>medbilltelehealthteam@medhill.org</u>
- ► Thank you.

#### **Meeting Agenda**

- Welcome note- Presenters' introduction
- Exploration of the telehealth technology to be introduced-videoconferencing
- Ways it will enhance patient outcomes
- Ways it will improve organizational effectiveness
- Outcome measures to be used in assessing the effectiveness and efficiency of the telehealth program
- > Patient privacy and confidentiality concerns and the measures to be taken.
- Process and timeline for deployment of the telehealth program
- conclusion

## The Telehealth Program To Be Introduced Into Medhill's System

What telehealth program is:

The delivery and facilitation of health services such as medical care, provider-patient education, health information services, and self-care remotely using digital communication technology (NEJM Catalyst, 2018).

Why use video conferencing telehealth technology

Videoconferencing enhances individual care delivery without having to travel to the mental health clinic.

Increases access to mental health services and promote better care.

Benefits of using videoconferencing while targeting youths with PTSD

Youths have access to mobile phones, laptops and they are more likely to seek mental health help using them compared to in-person

Use of videoconferencing in other departments

Videoconferencing technology has been used successfully in different departments at Medhill.

## Role Of Videoconferencing In Enhancing Improved Patient Outcomes

- The Introduction of videoconferencing to the PTSD department will improve access for youths with PTSP and who are reluctant to seek mental health help (Vasco et al., 2020)
- The program will enhance better and quality mental health access since the PTSD department will effectively attend to the patients from any location
- The videoconferencing care platform will help patients save on time, costs, and waiting hours, thus improving patient satisfaction

## Videoconferencing In Enhancing Organizational Effectiveness

- Videoconferencing will enhance improved decision-making and diagnostic accuracy for psychiatrists and nurses
- The platform will also ensure that Medhill mental health clinic serves more patients by bridging the geographical gap and using the platform as a health promotion platform
- Videoconferencing will reduce barriers to health service provision, thus enhancing Medhill's care provision capacity and reputation

> Follow-ups for youths with PTSD will be made easier.

(Chiauzzi, Clayton & Huh-Yoo, 2020)

## Outcome Measures To Determine The Effectiveness Of The New Videoconferencing Technology

- The Medhill mental health clinic will determine if the telehealth technology program has had a positive outcome using the following measures
- 1. Increased number of PTSD youth patients accessing care
- 2. Improved care quality from patients' feedback
- 3. Youths describe improved care experience
- 4. An improvement in program effectiveness in care provision
- 5. Reduced cost of care

#### Patient confidentiality and Privacy Concerns

- The PTSD department will ensure the privacy and confidentiality of the patients are enhanced by maintaining the following:
- 1. The staff is retrained on patient privacy and confidentiality
- 2. Private and conducive spaces are set apart for the professionals who will be using the videoconferencing to attend to the patients
- 3. Have an end-to-end encryption system where only the patient or the care provider can access the patient information using valid logins
- 4. Ensuring patient information is only shared with the patients' consent
- 5. Set policy measures to ensure patient privacy and confidentiality are maintained

#### Process of deploying videoconferencing technology in Medhill mental health PTSD department

- To deploy the new videoconferencing technology in Medhill's PTSD department, the team will follow the following steps
- 1. Mobilize a diverse team to work with
- 2. Conduct a needs assessment
- 3. Set the goals for deploying the telehealth technology
- 4. Get buy-in from the hospital leaders and other stakeholders
- 5. Identify the resources required and where to acquire the technology from
- 6. Train the personnel who will be using videoconferencing
- 7. Implementation of the program
- 8. Encourage feedback from patients and the care providers
- 9. Monitor, evaluate and assimilate required changes to the program.

## Time Required To Deploy Videoconferencing Technology In Medhill's Mental Health Department.

- The deployment of the videoconferencing technology will require an approximate three to six months
- The time will be used for training, acquiring video conferencing equipment, implementation, and assessing how the program will perform.
- The timeline is based on the assumption that the resource required will be available, there will be no delays in delivering the equipment, and there will be no staff reluctance to change (Childs, Unger & Li, 2020).

#### Conclusion

- The understanding of telehealth has emphasized the importance of introducing video conferencing into Medhill's PTSD department.
- The integration of videoconferencing will improve access to mental health care for teens and young adults with PTSD, especially in rural areas.
- It will also enhance better care quality through unlimited access to PTSD care services.
- Using videoconferencing technology will improve patient outcomes for youths with PTSD and also enhance organizational effectiveness
- The outcomes of the videoconferencing program will be measured to ensure its effectiveness.
- Medhill mental health clinic will consider patient confidentiality and privacy in the program implementation.
- The implementation will follow the above steps to ensure the program's effectiveness and success.



#### References

- Velasco, A., Cruz, I. S. S., Billings, J., Jimenez, M., & Rowe, S. (2020). What are the barriers, facilitators, and interventions targeting help-seeking behaviors for common mental health problems in adolescents? A systematic review. *BMC psychiatry*, 20(1), 1-22. <u>https://doi.org/10.1186/s12888-020-02659-0</u>
- Catalyst, N. E. J. M. (2018). What is telehealth?. NEJM Catalyst, 4(1). <u>https://catalyst.nejm.org/doi/full/10.1056/CAT.18.0268</u>
- Chiauzzi, E., Clayton, A., & Huh-Yoo, J. (2020). Videoconferencing-based telemental health: important questions for the COVID-19 era from clinical and patient-centered perspectives. *JMIR Mental Health*, 7(12), e24021. <u>https://doi.org/2020/12/e24021</u>
- Childs, A. W., Unger, A., & Li, L. (2020). Rapid design and deployment of intensive outpatient, groupbased psychiatric care using telehealth during coronavirus disease 2019 (COVID-19). *Journal of the American Medical Informatics Association*, 27(9), 1420-1424. <u>https://academic.oup.com/jamia/articleabstract/27/9/1420/5873874</u>
- Kuhn, E., & Owen, J. E. (2020). Advances in PTSD Treatment Delivery: the Role of Digital Technology in PTSD Treatment. Current Treatment Options in Psychiatry, 7(2), 88– 102. <u>https://doi.org/10.1607/se0501-020-00207-x</u>
- Shigekawa, E., Fix, M., Corbett, G., Roby, D. H., & Coffman, J. (2018). The current state of telehealth evidence: a rapid review. *Health Affairs*, 37(12), 1975-1982. <u>https://doi.org/10.1377/hlthaff.2018.05132</u>