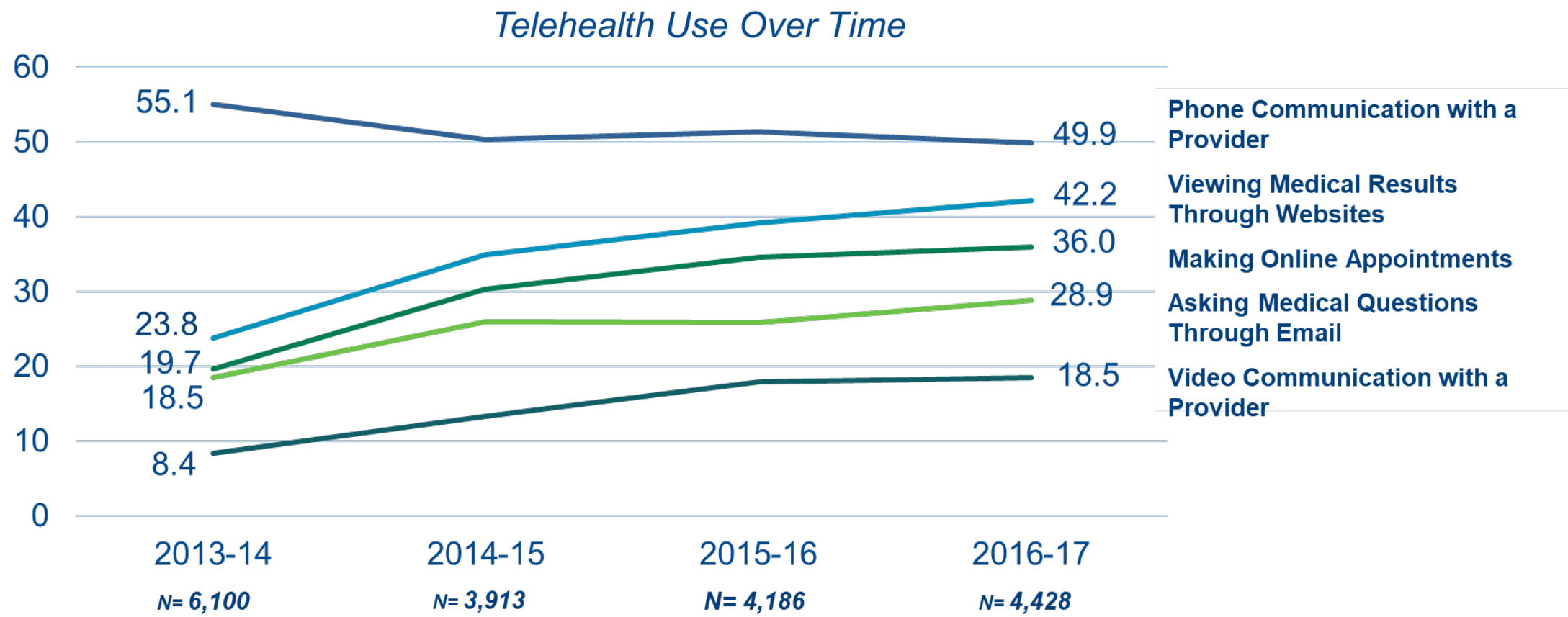


The AAMC Telehealth Educational Competencies – Preparing our Fellows for the Delivery of Telehealth Medicine

Elizabeth A. Krupinski, PhD

**Department of Radiology & Imaging Sciences Emory University
Southwest Telehealth Resource Center Arizona Telemedicine
Program University of Arizona**

Patient Use Telehealth Pre-COVID

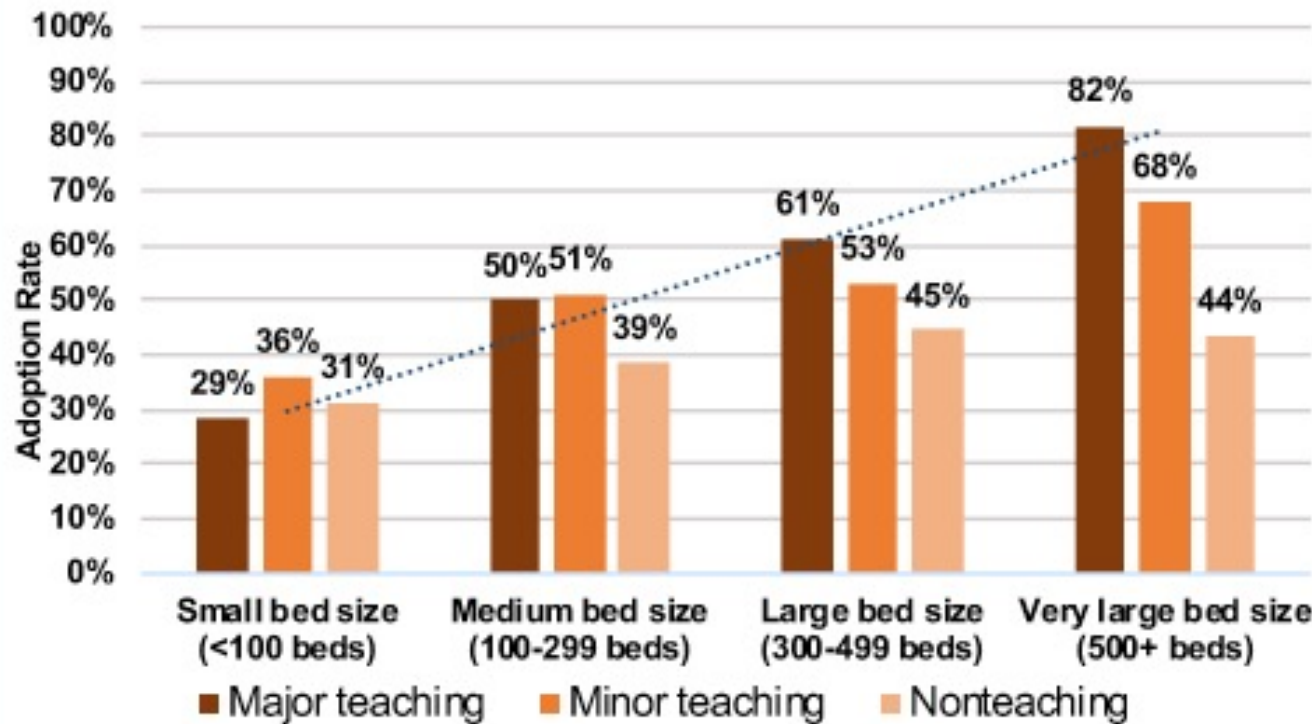


Source: AAMC Consumer Survey of Health Care Access

Telehealth Adoption Pre-COVID

Large, major teaching hospitals have high telehealth adoption rates.

Telehealth Adoption Rate by Hospital Bed Size and Teaching Status



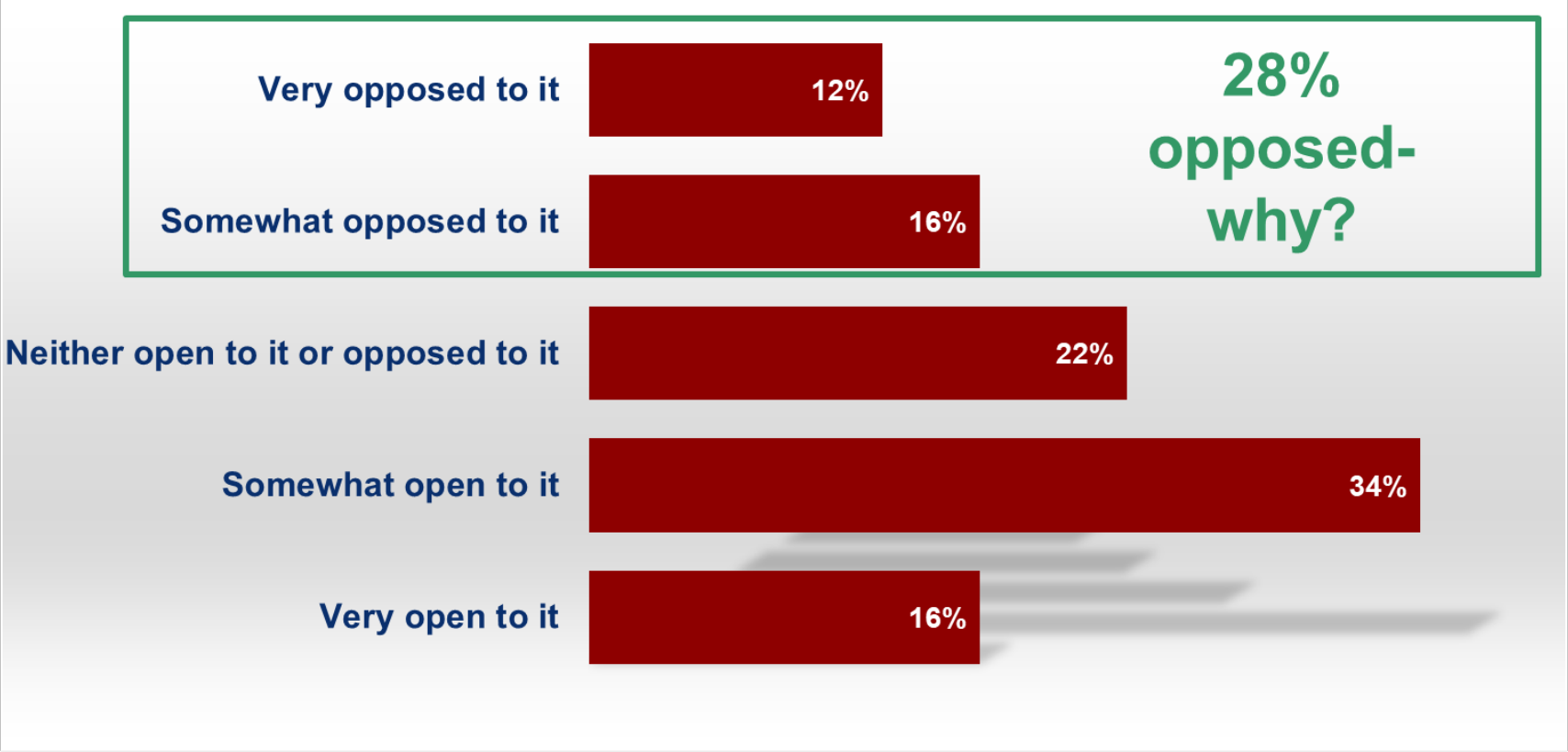
Key Findings

- Large and very large minor and major teaching hospitals have the highest adoption rates — higher than nonteaching hospitals of similar size.
- Among hospitals with 500 or more beds, 82% of major teaching hospitals and 68% of minor teaching hospitals report offering some telehealth service.
- The difference between teaching and nonteaching hospitals grows more substantial as hospital bed size increases.

Source: <https://www.aamc.org/system/files/2019-12/hca-data-snapshot-teaching-hospitals-lead-in-telehealth-adoption-12-10-19.pdf>

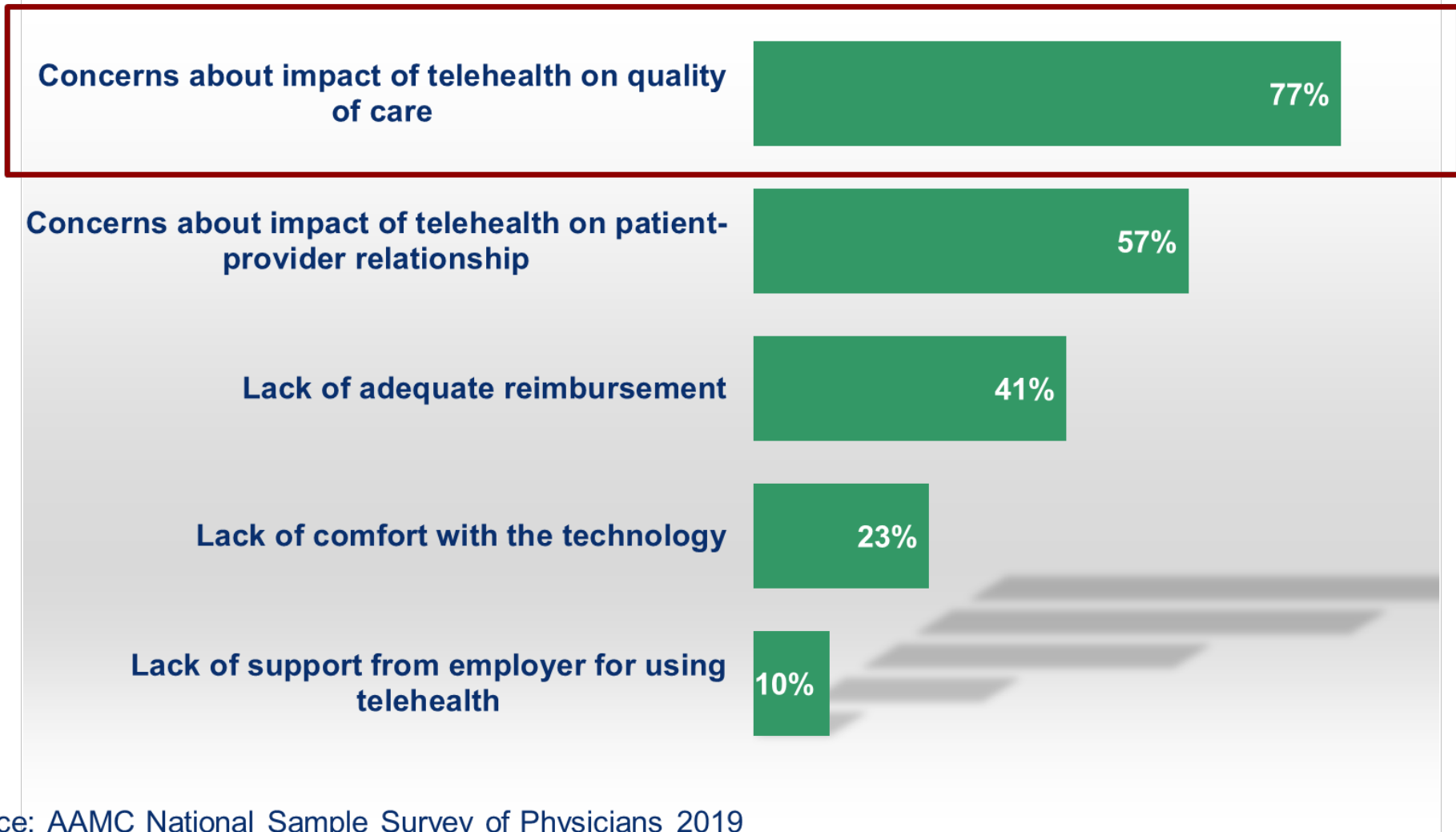
Physician Perspectives Pre-COVID

As telehealth practice expands, how open would you be to shifting more of the care you deliver to telehealth and away from in-person visits?



Source: AAMC National Sample Survey of Physicians 2019

Physician Concerns Pre-COVID



Source: AAMC National Sample Survey of Physicians 2019

Pre-COVID Telehealth in Medical Curriculum

- **Preliminary data indicate approx. 54% yes, 40% no, 6% unsure whether curriculum includes any learning opportunities in telehealth**
- **Have plans to integrate or enhance telehealth in curricula approx. 52% yes, 7% no, 41% unsure**

Opportunity is ripe for guidance regarding suggested competencies!



AAMC Telehealth Advisory Committee



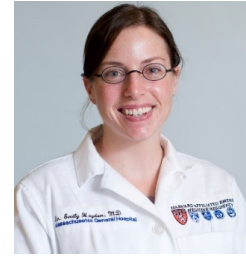
Shruti Chandra, MD, MEHP
Thomas Jefferson University MD
VHA



Neil Evans,
MD
VHA



Kevin Galpin, MD
VHA



Emily M. Hayden, MD, MHPE
Massachusetts General
Hospital



Kristi Henderson, DNP, NP-BC
Optum Health / Dell Medical School



Andrea
Borondy Kitts
MS, MPH
Lahey Hospital
/ Patient
Advocate



Elizabeth Krupinski, PhD
Emory University



Joseph Kvedar, MD
Partners HealthCare



CT Lin, MD,
FACP
UCHealth



Curtis Lowery, MD
University of
Arkansas



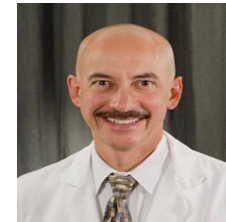
James Marcin, MD,
MPH
UC Davis



Karen Rheuban,
MD
University of
Virginia



Neal Sikka, MD
GW Medical Faculty
Associates



David Lambert, MD
University of Rochester



Ariel Santos, MD, MPH
Texas Tech University Health Sciences
Center

AAMC Telehealth Competencies

- Free download from AAMC store: <https://www.aamc.org/data-reports/report/telehealth-competencies>
- Domains:
 1. Patient Safety and Appropriate Use of Care
 2. Data Collection and Assessment of via Telehealth
 3. Communication via Telehealth
 4. Ethical Requirements and Legal Requirements for Telehealth
 5. Technology for Telehealth
 6. Access and Equity in Telehealth

DOMAIN

TIERS

Competency

Domain II: Access and Equity in Telehealth

To promote equitable access to care, clinicians will understand telehealth delivery that addresses and mitigates cultural biases as well as physician bias for or against telehealth and that accounts for physical and mental disabilities and non-health-related individual and community needs and limitations (Table 2).

Table 2. Domain II: Access and Equity in Telehealth

Entering Residency (Recent Medical School Graduate)	Entering Practice (Recent Residency Graduate) <i>All Prior Competencies +</i>	Experienced Faculty Physician (3-5 Years Post-Residency) <i>All Prior Competencies +</i>
1a. Describes one's own implicit and explicit biases and their implications when considering telehealth	1b. Describes and mitigates one's own implicit and explicit biases during telehealth encounters	1c. Role models and teaches how to recognize and mitigate biases during telehealth encounters
2a. Defines how telehealth can affect health equity and mitigate or amplify gaps in access to care	2b. Leverages technology to promote health equity and mitigate gaps in access to care	2c. Promotes and advocates the use of telehealth to promote health equity and access to care and to advocate for policy change in telehealth to reduce inequities
3a. When considering telehealth, assesses the patient's needs, preferences, access to, and potential cultural, social, physical, cognitive, and linguistic and other communication barriers to technology use	3b. When considering telehealth, accommodates the patient's needs, preferences, and potential cultural, social, physical, cognitive, and linguistic and communication barriers to technology use	3c. When considering telehealth, role models how to advocate for improved access to it and accommodates the patient's needs, preferences, and potential cultural, social, physical, cognitive, and linguistic and communication barriers to technology use



Didactic



Simulated Patient



Simulated Provider



Observers



Summary

- **AAMC Telehealth Competencies can serve as foundation for developing new curricula &/or modifying existing curricula to integrate telehealth**
- **Metrics & evaluation methods need to be developed & implemented**
- **Unresolved whether different specialties (residents & fellows) require additional/different competencies**
- **Prospective cohort training & programs more straightforward than training already practicing cohorts**
- **Rapidly changing technologies etc. may necessitate periodic updates**

ekrupin@emory.edu

@EAKrup @SWTRC1

