



#### Introduction

Telehealth is transforming health care.

Maternal morbidity and mortality in NJ was among the poorest in the country.

Racial disparities and inequalities are among the widest of all states.

Nurses are vital team leaders in service delivery innovation.

### AIMS:

Obtain a baseline assessment of NJ perinatal nurses' attitude, use and readiness for telehealth. Mixed-methods cohort survey.

Secondary aims:

Impact of COVID-19 on perinatal telehealth practice

Identification of roles nurses play in implementing telehealth.

Recommendations for policy, practice, quality, education and economic considerations.

"Telehealth can help alleviate fear when patients can have access to a live provider" Survey responder

Results N=52 respondents, 25% of sample size, 42% completion rate (n=22). Majority were full time (87%), hospital-based (62%) RNs (49%) with Masters Degree (56%) and aged 45-74 (53%). 60% worked with  $\leq$  50 people. 53% APN/CNM/ Mangers or Administrators 77% felt technology was necessary skill; 78% disagreed or strongly disagreed technology makes them feel stupid. "Almost Ready" aggregate Telehealth Readiness Assessment score.

## Telehealth Revolution: Attitudes, Use and Readiness of New Jersey Perinatal Nurses

## Elizabeth Talmont, DNP, ANP-BC, Tracy Vitale, DNP, RNC-OB, C-EFM, NE-BC, and Rita Musanti, PhD, APN-C

/leasures/Analysis /lethods		R	
	Online survey of self identified NJ perinatal nurses 90 questions covering: <ul> <li>Demographic</li> <li>COVID-19 Impact</li> <li>Technology Attitude Survey</li> <li>Telehealth Readiness Assessment</li> </ul>	Pi Ra yo	
	Snowballing technique used		
	Qualitative data synthesized, triangulation technique and consensus among three independent reviewers decided on themes.		
	Recommendations for policy, practice, education and service delivery were made upon consensus of authors.	ation Vi Ha a	
		100%	
		80%	
		40%	
		20%	
		0%	
	addition and attack	V n	i e
		(s	
		D	
		D	(

37.50% (12)

#### esults

### Discussion

#### ractice





#### ideo telehealth

las your workplace stared or expanded telehealth as result of the COVID-19 pandemic?



#### isparities and equity

o you think telehealth can help reduce perinatal health care disparities and improve health equity?





### **Implications for Practice:**

#### Policy:

Reimbursement, incentives and support for perinatal telehealth in all forms, must be made available to implement and sustain the practice.

#### Practice:

Nurses use technology and bridge the provider patient gap. Nurses can lead implementation teams and are poised to be telehealth champions.

Nurses must be educated on telehealth and to help increase access, monitoring, communication between provider and patients to improve health equity and maternal

outcomes.

### $\bigcirc$ Quality:

15-30% of all perinatal visits are currently online. Nurses can triage, monitor, educate and evaluate patients through telehealth, saving the patient time, energy, expense and effort. Telehealth may be able to improve maternal outcomes in NJ.

### **Reference List:**

Available upon request

#### **Contact Information:**

Elizabeth Talmont, MSN, ANP-BC etalmont@gmail.com



- $\bullet$ 2020.

- doi:10.1097/00006223-200605000-00007
- Attitude Survey.
- $\bullet$

# References

Amnesty International. (2010). Deadly delivery: The maternal health care crisis in the USA. Amnesty International Publications. Aerny-Perreten, N., Domínguez-Berjón, M. F., Esteban-Vasallo, M. D., & García-Riolobos, C. (2015). Participation and factors associated with late or non-response to an online survey in primary care. Journal of Evaluation in Clinical Practice, 21(4), 688-693. doi:10.1111/jep.12367 Beaton, T. (2017). 71% of healthcare providers use telehealth, telemedicine tools. *mHealthIntelligence*, Retrieved from https://mhealthintelligence.com/news/71-of-healthcare-providers-use-telehealth-telemedicine-tools Bradley, E. H., Sipsma, H., & Taylor, L. A. (2017). American health care paradox - high spending on health care and poor health. QJM: Monthly Journal of the Association of Physicians, 110(2), 61-65. doi:10.1093/qjmed/hcw187 Coombs, B. Telehealth visits are booming as doctors and patients embrace distancing amid the coronavirus crisis. CNBC Published April 4,

Creanga, A. A., Berg, C. J., Syverson, C., Seed, K., Bruce, F. C., & Callaghan, W. M. (2015). Pregnancy-related mortality in the United States, 2006–2010. *Obstetrics and Gynecology, 125*(1), 5-12. doi:10.1097/AOG.0000000000000564 FAIR Health Indicators. (2019). FH healthcare indicators and FH medical price index 2019: An annual view of place of service trends and medical pricing. Nonnenhorn: TCP Terra-Consulting-Partners. Retrieved from https://www.fairhealth.org/market-reports/medical-price-index Maag, M. M. (2006). Nursing students' attitudes toward technology: A national study. Nurse Educator, 31(3), 112-118.

Maryland Health Care Commission. (2019). Telehealth readiness assessment tool. Maryland Health Care Commission. Retrieved from https://mhcc.maryland.gov/mhcc/Pages/hit/hit/hit documents.aspx

McFarlane, T. A., Hoffman, E. R., & Green, K. E. (1997). Teachers' Attitudes toward Technology: Psychometric Evaluation of the Technology

Mcinerney, J., & Druva, R. (2019). Clinical educators' attitudes towards the use of technology in the clinical teaching environment. A mixed methods study. Journal of Medical Radiation Sciences, 66(2), 72-80. doi:10.1002/jmrs.335 Raosoft [Computer Program]. (2004). Retrieved from <u>http://www.raosoft.com/samplesize.html</u> • Schwamm, L. H. (2014). Telehealth: Seven strategies to successfully implement disruptive technology and transform health care. *Health* Affairs (Project Hope), 33(2), 200-206. doi:10.1377/hlthaff.2013.1021 Holdt, Somer, S. J. H., Sinkey, R. G., & Bryant, A. S. (2017). Epidemiology of racial/ethnic disparities in severe maternal morbidity and mortality. Paper presented at the *Seminars in Perinatology*, 41(5) 258-265.

Westerlund, A., Nilsen, P., & Sundberg, L. (2019). Implementation of implementation science knowledge: The Research-Practice gap paradox. *Worldviews on Evidence-Based Nursing, 16*(5), 332-334. doi:10.1111/wvn.12403