Video BP Visit Overview

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Overview

The Video Blood Pressure Visit (VBPV) project is a three-year Enterprise-Wide Initiative funded by the Office of Rural Health (ORH) and coordinated through the Office of Primary Care.

Video Blood Pressure Visits (VBPV) allow patients to receive **high-quality nursing care for chronic diseases** such as hypertension **in their homes or their location of choice**.

Video Blood Pressure Visits-

➢ Save the patient the risk of exposure to infectious diseases, the time and cost of travel, the cost of childcare or time off work, and the copay for the visit.

➢ Provide an opportunity to expand PACT VVC utilization– building the foundation for other virtual PACT team visits.

➢ Allow for entry of visualized, tele-blood pressure measurements into the medical record for clinical and performance reporting. It counts!

Video Blood Pressure Visits
Making It Count!!!

On 25May18 **VACO Performance Accountability Workgroup** approved entry of visualized, tele-blood pressure measurements into the medical record for clinical and performance reporting.

Hypertension Clinical Reminder Updates

- HEDIS recently updated the reminder to include patient self-reported BP readings.
  - Self-reported readings will meet the EPRP & eQM measures if the reading is the **most recent and <140/90**
  - EPRP changes have been made but eQM changes are still pending
  - Self-reported readings recorded in the national Clinical Reminder from 11/30/20 onward will be accepted.

- Face to face readings and readings visually observed are entered into the VS package.
  - Observed in real time, using a VA issued device, clinician ensures proper technique and visualizes the measurement
- Patient reported BP readings (includes those transmitted directly via Home Telehealth) are NOT to be entered into the VS package, only in narrative notes and the national HTN Clinical Reminder.

So why are Video BP Visits still important?

- Not on the cover sheet = less value added for everyone (team + Veteran)
  - Gap between visits increased during COVID
  - Provides meaningful addition to keep care on track (titrations, renewals)
- Combine both clinic and home measurements- complete the clinical picture
- Video visit quality
  - Assessment
  - Engagement
  - Education Cues
- Great way to start! For both VA staff and Veterans
- The Why- What is the *best* thing for the Veteran?

Innovative Implementation Experience

Nursing Process as the Change Process

- Assessment-
  - Current state evaluation
  - Gap assessment
- Planning
  - Short term/long term goals
  - Disconfirming currently held beliefs
  - Providing psychological safety
- Intervention
  - Sharing information
  - Coaching
  - Changing team dynamics
  - PDCA
- Evaluation
  - Apply to Proficiency

Nursing Professional Development

- RN **and** LPN focus

- Emphasis on how each stage applies to nursing practice and VA nursing career ladder

- NPSB education

- Completing a performance improvement project
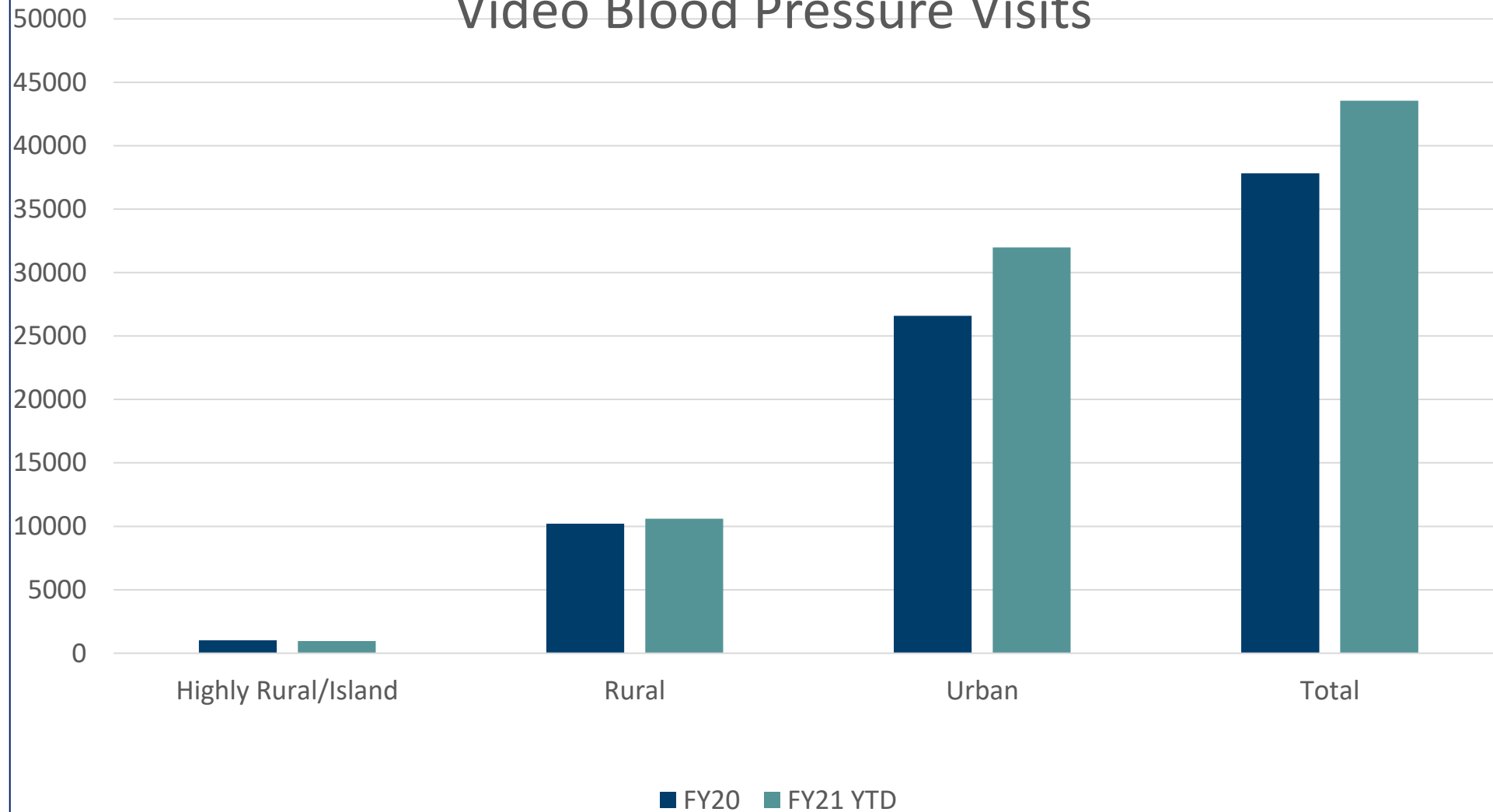
- Applying experiences to proficiency

A great place to start…..

Imagine the possibilities once PACT clinicians have acquired the skill of virtual care

- Same day urgent care
- WAVE/Nursing Intervention visits for chronic conditions
- Virtual warm hand offs to extended PACT
- Post hospital discharge
- Medication review
- Improved suicide risk assessment through evaluation of environment and resources
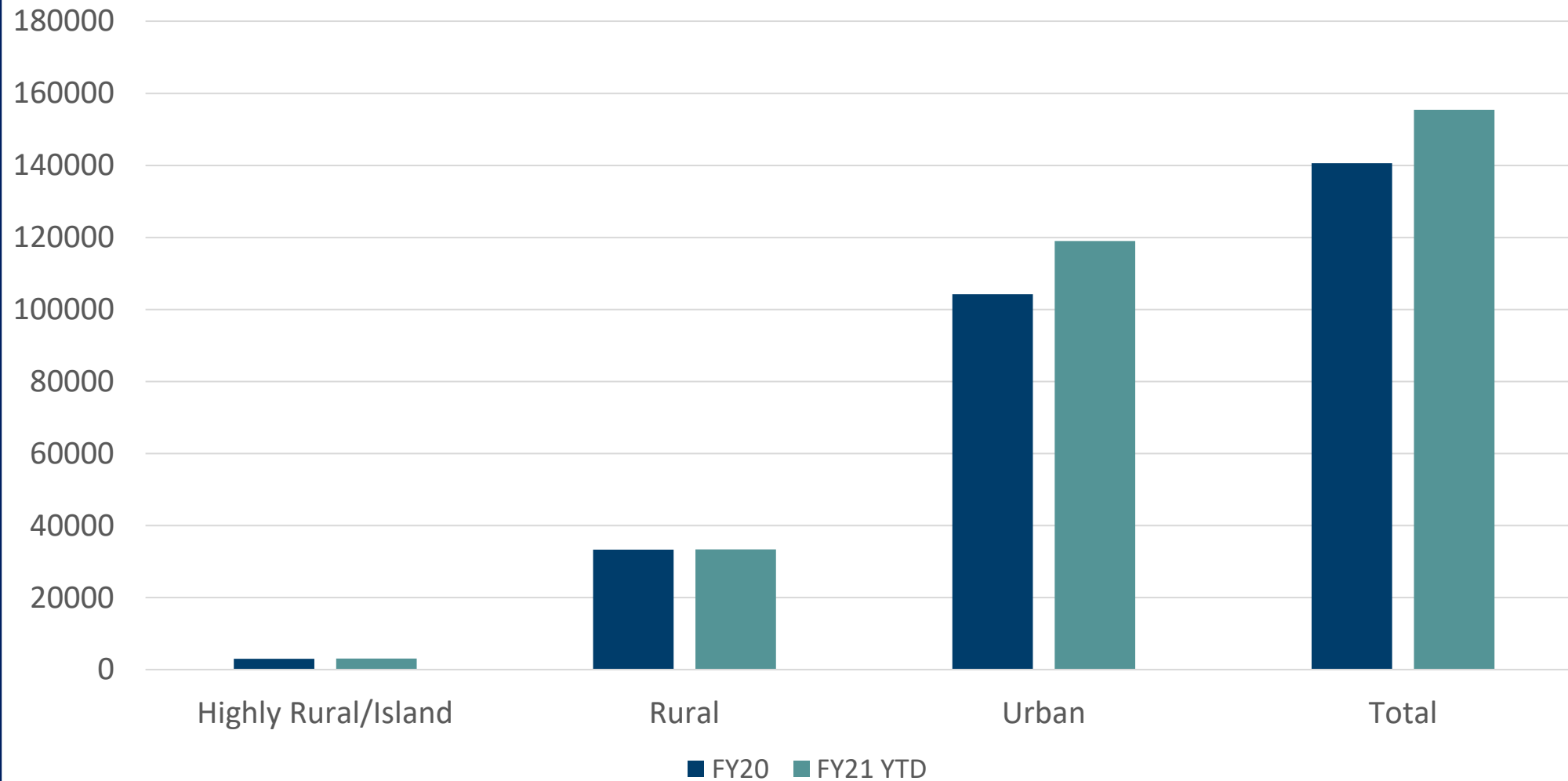- Social Work home assessments

Blosnich J, Montgomery A, Dichter M, et al. Social Determinants and Military Veterans' Suicide Ideation and Attempt: A Cross-Sectional Analysis of Electronic Health Record Data. *Journal of General Internal Medicine*. November 19, 2019; Epub ahead of print.
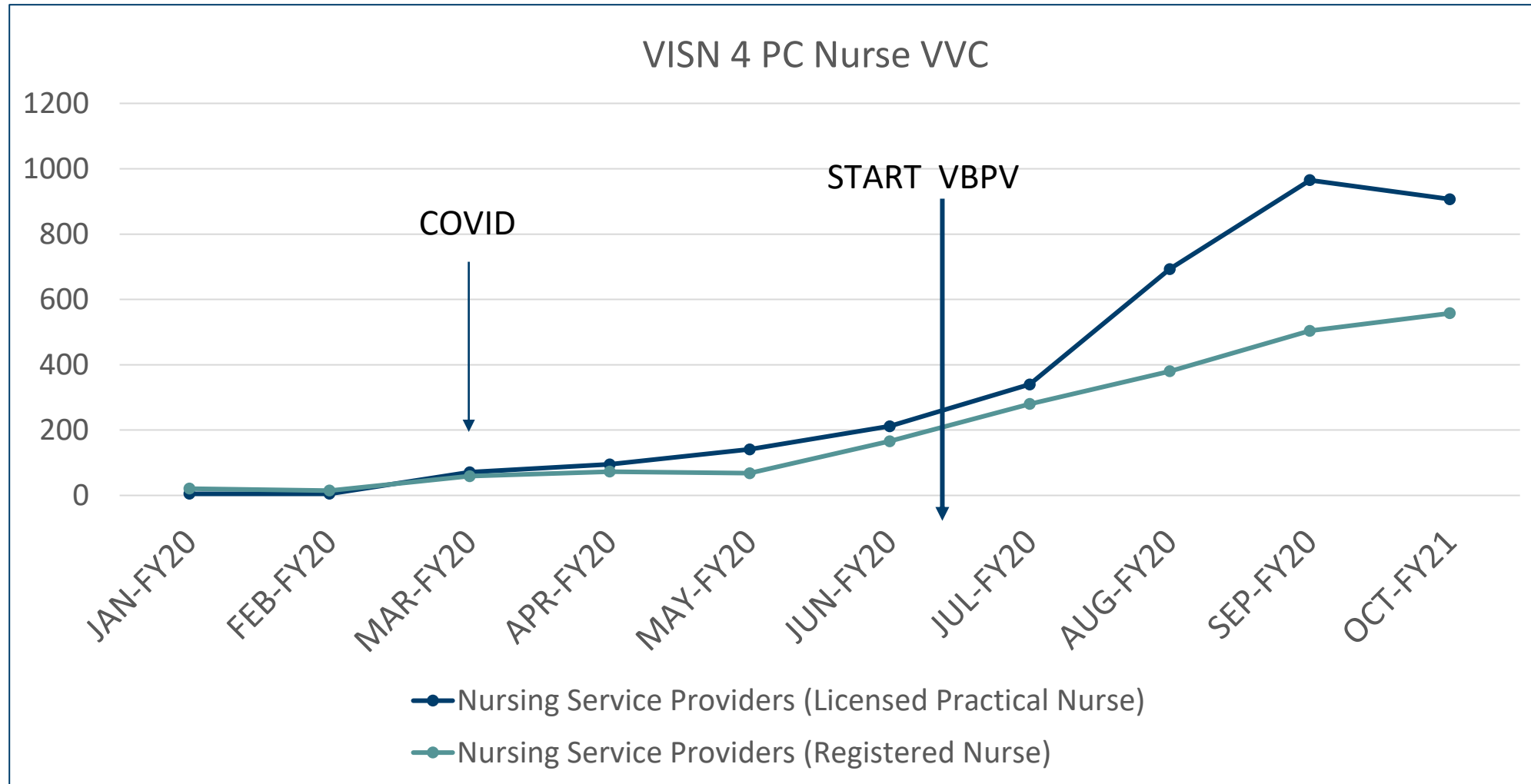
Video Blood Pressure Visits

Encounters as of 3/19/21	Highly Rural/Island	Rural	Urban	Total
	VBPV			
FY20	1010	10203	26601	37814
FY21 YTD	954	10597	31990	43541

Primary Care Nurse Video Visits

Encounters as of 3/19/21	Highly Rural/Island	Rural	Urban	Total
	PC Total Nursing VVC			
FY20	3027	33316	104230	140573
FY21 YTD	3068	33397	118999	155464

VISN 4 PC Nurse VVC

National Video Blood Pressure Visit Note Template

ChooseVA

Progress Note Properties

Progress Note Title: VIDEO <VIDEO BLOOD PRESSURE VISIT>
VIDEO <GERIPACT VIDEO CONNECT STL>
VIDEO <HT VIDEO VISIT NOTE>
VIDEO <NHD VIDEO CONNECT STL>

A national note title (VIDEO BLOOD PRESSURE VISIT) and template has been released for upload by Clinical Application Coordinators at all facilities.

Reminder Dialog Template: VIDEO BLOOD PRESSURE VISIT MA

Video Blood Pressure Visit template version 1.2

Telehealth Disclosure:
   Visit conducted by clinical video telehealth. Patient verbal consent
   obtained. Location/emergency number confirmed.

Template includes required documentation for telehealth encounters

**Enter the most clinically relevant BP here to document in the
   vitals package in the format "xxx/xx".

   Most clinically relevant BP: _____

The BP entered here transfers to the VS package and is counted for HEDIS (emeasures & EPRP)

Potential Implementation Benefits for Facilities

- RN/LPN VBPV can be used to extend empaneled patients
  - Patient must be assigned to RN/LPN in PCMM & an encounter must be completed

- Improve HEDIS outcomes

- Proactive panel management strategies (eQm outliers, patients with BP meds due for renewal soon via renewal report, High Risk ACSC patients)

- Teaching VVC using a BP visit prepares the patient to use VVC with ease when more urgent needs arise (easier to learn when not stressed)

- Incorporating VBPV into PACT care has been demonstrated to increase virtual care integration with PACT overall, even to extended PACT team members

Ideal Implementation Model & Benefits for Designated Champions

- Identify at least 1 champion per site
  - 2 hrs of dedicated time per week for 8 wks

Benefits for designated champions

- Ideal project for motivated nurses working toward promotion
- Mentoring support will be provided to:
  - Touch on each element of nurse practice standards
  - Develop problem/response/outcome statements specific to the champion's site/experience
  - Determine next steps for project sustainment as a facility subject matter expert
- Be part of a new community of practice for the nursing profession

8 Week Implementation Timeline

1. Introduction
2. Review Baseline Data, make an action plan
3. Appointment Roles and Flow
4. Checkpoint- revise the plan
5. Virtual Population Management
6. Coding and Billing 101
7. Nursing Development/Proficiencies
8. Final Review and Sustainment Strategies

Questions?
Feel Free To Email Or Skype

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Video BP Visit TEAMS