SIGNIFICANCE: Nurses are actively participating in tele-healthcare on six of the seven continents (Bartz, 2017). Fifty percent of the United States population suffers from one or more chronic diseases which are associated with more than 70% of deaths and approximately 75% of health care expenses (Schaffer, 2012). Researchers have found a reduction in health care costs and improved access to care when using telehealth as compared to traditional services for care of chronic diseases (Brown, 2013; Nelson, 2017). Telehealth has an enormous potential to increase both access and health care quality with rural populations as there is limited access to providers in rural areas (Nelson, 2017). This is especially true for the 5% of people who live in rural Arizona where lack of access to health care has been well documented (Rural Information Hub, 2016). Insurance companies are currently considering expanding reimbursement for telehealth providers in an effort to improve access to care (United States Senate Committee on Finance, 2015). As the future of health care delivery changes, providers need to be educated in telehealth to provide care (Edirippulige & Armfield, 2017). Therefore, it is critical that such training become part of NP education to prepare our students to be provider in the 21st century (Rutledge et al, 2017). PURPOSE: Educate DNP students to conduct patient interviews and collaborate interprofessionally using telehealth technology METHODOLOGY: Eighty-three (83) doctor of nursing practice students completed the first offering of telehealth modules and simulation experience. The developed modules addressed an overview of telehealth, ethics, privacy and confidentiality, technology and equipment, provider and patient issues. Students were taught strategies for assessing patients using simulation with patient “actors” and communication with colleagues using technology for collaboration. At the conclusion of the modules, students were given a six item survey using Likert structured responses and five questions for free text responses. Ninety-four percent of the students completed the survey and of these, 16% felt prepared to interview the patient while 17.5% feel prepared to lead an interprofessional meeting. Text responses were consistent in favorable comments for exposure to telehealth technology and potential application in future practice. Human factors or user-technology issues made up the items students liked least of the course. For example, some had trouble with patient visualization, not performing a “hands-on” exam, need to use “all my senses” for the exam, reliance on the patient’s senses for the exam, technical difficulties. Simulated patient “actors” also completed a 13 item close ended question survey on student as well as completing 4 open ended questions to evaluate the program Text responses suggests they too had technology issues, however, were very comfortable with the examinations. CONCLUSION: The evaluation from the students and simulated patients indicated that both appreciated the ease and convenience of interviewing patients through technology. They also appreciated the need for this technology if providers were not available to them and they were able to see each other instead of working through the issues on a telephone. They both struggled with issues related to the technology itself and the need to have backup systems available to support the process. The students struggled with the inability to use touch to assess the patient’s physical complaints. The modules were then redesigned to address the identified issues and facilitate future students’ education using 21st century technology.

Title:
Using 21st Century Technology for DNP Student Patient Interview and Interprofessional Care Coordination

Keywords:
Telehealth, nursing students and simulation
Abstract Summary:
Telehealth training should be incorporated into DNP education to prepare students as providers in the 21st century since six of the seven continents have nurses participating in telehealth. This presentation provides lessons learned from the development and simulation of telehealth modules and student experiences of patient interviews and interprofessional collaboration.

Content Outline:
Introduction:
A. Access to healthcare is limited in rural locations
B. Chronic diseases are a large expense within the healthcare system
C. Telehealth has shown to improve access and quality of care while decreasing cost
D. Six of the seven continents are using nurses in tele-healthcare

Purpose:
Educate DNP students to conduct patient interviews and collaborate interprofessionally using telehealth technology

Design:
A. Eighty-three DNP students completed telehealth modules and simulated patient interview
B. Patient interview was reported to a collaborating provider using telehealth
C. Sixteen percent of students felt prepared to interview the patient and 17.5% feel prepared to lead an interprofessional meeting
D. Favorable comments by students for exposure to telehealth technology and potential application in future practice
E. Human factors or user-technology issues made up the items students liked least of the course such as not performing a “hands-on” exam
F. Simulated patient “actors” expressed user technology issues, however, were very comfortable with the examinations

Conclusion:
A. Students and simulated patients indicated that both appreciated ease and convenience of interviewing patients through technology
B. They appreciated visual technology instead of audio technology to address issues
C. Both struggled with issues related to the technology itself and the need to have backup systems available to support the process
D. Modules were redesigned to address the identified issues and facilitate future students’ education using 21st century technology.

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