

Telehealth Best Practices:



Tips & Tricks

- Opening pitch is REALLY important
 - Introduce yourself, the program, and be straightforward about goals of the program
 - Who are you? What do you do? Your intention is? Program's intention? How can you help them?
 - Set call expectations up front
- Asking permission at the beginning of a call- is it a good time to talk? How much time do you have?
- The "good house guest rule" and establishing early on how much time people are available (Observe Normal Routine)
- Allow the patient to take the lead
- Gauge when to be more structured or more informal to build relationship
- Traditional Enrollment forms are too lengthy over the phone. Be creative in how you collect the information you need
- Video call when possible for added face to face connectivity
- keep calls timed to assure goals can be met
- questions can often spark up topics that can lead to lengthy, emotional conversations.
- have a set of questions for each Domain
 - This is key for time, organization, note-taking, as well as noting their level of excitement for certain goals will help you prioritize (Create a Care Plan)
- The most effective way to show you are serious is to set an example like calling a resource, applying, or researching solutions for their situation (Assume a Coaching Style)
- Lifting up and applauding efforts is powerful. This helps keep folks motivated and interested in continuing to talk (Highlight Effort with Data)
- Be aware of Boundaries, sometimes it's hard telephonically as things are moving fast
- Culture shift in how systems/orgs view telephonic engagement
 - currently there are time constraints, volume to hit each day is high, questionnaires that need to be asked are often times asking useless information, calls are based around audits, not patient centered, very disease specific, don't incorporate SDOH, don't allow for AHR, very surface
- Multiple calls may be needed to build AHR and get to the root of complexities and pt. priorities