BACKGROUND:
Spinal Cord Injury /Disorders (SCI/D) patients often have complex medical and psychosocial health care needs. Health care may consist of rehabilitative (after initial injury), medical-surgical (i.e. pressure injury management, neurogenic bowel and bladder management, spasticity etc.) behavioral (individual/family), and vocational support.

Additionally, there are care management challenges in this population which include:
A) Limited availability of Specialized Care in community settings, notably in rural areas
B) Majority of SCI/D trained clinicians practice at medical centers, usually located in large cities.
C) Primary/other providers may not be comfortable in provision of care for patients with SCI/D
D) Facility’s physical environments may not be optimal in accommodating powered or manual chair mobility devices. With these limitations, veterans are not interested to establish primary/continuity care services in residing community and travel several hours and sometimes hundred of miles for their desired care.

To solve this problem, the VA SCI&D system of care created a Hub and Spokes Model that can help coordinate the care of our veterans in the community.

MODEL:
Veterans Affairs (VA) SCI&D Hub (Specialty) & Spoke (Primary) Care Models:
- Interprofessional Practice (IP) Specialists at Hub coordinate with dedicated local providers at Spokes Facilities to provide integrated health care including wellness-illness continuum.
- Goal: consistent, uniformed, efficient, enhanced quality, improved agile healthcare
- Richmond Network: McGuire VA Medical Center (Richmond, VA) serves as Hub Center for 14 participating Spoke Facilities in the Mid-Atlantic region.

Virtual Care Services Offered:
- Clinical Video Telehealth: Modality- Facility-to-Facility & Home/Mobile Video Service - Brings Specialist to Primary Provider at Spoke Site & Veterans Home Setting
- Electronic Consultation (E-Consults) & Interfacility Consults – utilized for Pre-Admission Screening; Transition of Care – communicate updates to health care treatment plans during patient’s acute care stay & return to community
- Store and Forward: Pressure Injuries Digital Images, are captured by Patient Site or Client/ Caregiver and uploaded into Electronic Health Record for Review by Wound Specialty Team.
- Secure Messaging (Patient Portals) - bidirectional information exchange patient and provider, for care planning, visit summaries, bladder /bowel/spasticity diary worksheets sent, home evaluation, pre-visit health history data collection.

RESULTS:
Initial data revealed an increase in utilization of Telehealth since 2011. Our observation:
- Facilitated communication between Hub and Spokes providers which led to improved care coordination when veterans return in the community.
- Improved timeliness of services rendered in the community since team identifies the needs prior to veteran’s return in the community. However, further observation and data analysis remains a continued commitment.
- Although this doesn’t replace a face to face encounter, our team embraced this technology in our Hub and spokes network of care.


INTEGRATION OF VIRTUAL CARE SERVICES INTO A VA SPINAL CORD INJURY & DISORDERS SYSTEM OF CARE: HUB & SPOKES NETWORK

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NON-VA CENTER - New SCI / Provider
CVT (Veteran’s computer) Secure Messaging
Preadmission Planning:
Identify rehab goals and needs
Set expectations on what we can offer
Meet the Team prior to transfer.

SCI SPOKE
Patient and PCP/Local SCI
E Consult
CVT
Store & Forward
Consultation
Preadmission Planning
Admission and Discharge
3 month Post-Rehab Follow-up
Specialty follow-up

VA SCI CENTER
Specialty Care

COMMUNITY BASED OUTPATIENT CLINIC
Patient/PCP
E Consult
CVT
Care coordination Follow-up

E Consult
CVT
Store & Forward Secure Messaging
Assess Rehab needs
Preadmission Planning
Follow-up:
3 month post rehab
Spasticity/Bladder/Bowel Diaries/Wounds
Home Care: RN with IPAD in home → SCI Provider/ Pharmacy/Rehab /Respiratory/Nursing/ Nutrition/Psychology
Multiple Sclerosis/Amyotrophic Lateral Sclerosis

HOME: Patient & Caregiver

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(October 2018 to March 2019)