ONE Team Nursing Teleconferences

We’ve given birth, now we’re growing up ...

Our state-wide nursing teleconference, ONE Team, has enjoyed collaborating with you to provide education by nurses and for nurses for over three years. We have enjoyed serving obstetric, neonatal, and advanced practice nurses.

Recently in collaboration with Arkansas Children’s Hospital, we have added pediatric nursing teleconferences on the fourth Friday of every month from noon to 1 pm.

Our first pediatric nursing teleconference was January 22: Those Vitals Can’t Be Real! Early Detection of Pediatric Emergencies and was presented by Aimee Brown, MNSc, APN with the ACH Pediatric Intensive Care Unit.

The schedule for upcoming teleconference topics is available on the ANGELS website at http://www.uams.edu/angels (Teleconferences and Guidelines section).

Come join us and earn 1.0 nursing contact hour during your lunch break!

To register for an interactive video site near you and for more information, call (501) 526-7178, or e-mail SmithBarbaraL@uams.edu.
Tele-nursery Update

by Julie Hall-Barrow

Tele-nursery now consists of 18 sites that house a telemedicine unit in their Nursery/NICU, which includes UAMS and ACH. Of these outside sites, six of these staff a neonatologist; St. Vincent, Wadley Regional, St Michael, St. Edward, Washington Regional and Willow Creek. Whit Hall, M.D., the lead on tele-nursery, conducts a brief census rounds three times a week with all of the sites connected interactively. Along with these rounds, education, collaborative communication and guidance from subspecialist are available.

The goal is to promote regionalization of care. Hall’s evidence-based data shows that delivering very-low-birth-weight (weighing less than 1,500 grams at birth) babies in smaller nurseries adversely affects outcomes and increases infant mortality. The plan is to work with participating hospitals on appropriate maternal transports for delivery in a perinatal center and to facilitate appropriate back transports of these infants to their home hospital.

In September, 2009, we began working with Angel One dispatch to become interactive with neonatal consults/transports from the participating tele-nursery sites. When the call comes in to dispatch, they work with our ANGELS call center in making video connections with all parties involved. The neonatologist can now view and assess the neonate, and work with the referring physician on transfer, if needed, or can make recommendations based on viewing neonate and X-rays.

TOUCH Update

TOUCH adds the component of the telemedicine unit to the labor and delivery, along with the nursery unit. TOUCH is now in the final stages, with data collection wrap up on March 30. There are nine TOUCH sites: Jefferson Regional in Pine Bluff, Mercy Medical in Rogers, National Park Medical in Hot Springs, Ouachita County Medical in Camden, St. Bernards Medical in Jonesboro, St. Edward in Fort Smith, St. Michael in Texarkana, Washington Regional in Fayetteville, and Willow Creek in Johnson.

William Greenfield, M.D., heads this portion of the grant, which consists of census rounds twice a week with these sites. As with tele-nursery, the rounds include collaboration with referring sites regarding OB patients. Updates on patients who have already been referred to our center can also be given at this time. In December, we began a pilot of nurse-to-nurse report with two of the sites. A referring physician contacts our call center to transport an OB patient and the patient is accepted for transfer. Then when the outside nurse calls to give a report to our labor and delivery nurse, the call center makes a video connection for report, and our staff can see and talk with the patient. Informational packets were given to these sites to give to families and patients who are being transferred. This includes maps and information on lodging, visitation, hospital information and dining. This should promote patient satisfaction and help with better patient understanding of the reason for transport, and possibly alleviate any fears.

With these projects we always promote our telemedicine based education that is offered through ANGELS and the Center for Distance Health.
The end of the Diwali celebration in India marked the beginning of Telemedicon 09. Telemedicon was the first telemedicine conference hosted in India’s eighth largest city, Pune. The conference included participants from around the world both in person and via video conferencing. Arkansas Children’s Hospital (ACH) and the Center for Distance Health (CDH) were front and center!

Drs. Vyas Himeshkumar and Whit Hall both gave brief testaments to the benefits of telemedicine in today’s medical world, and discussed clinical applications utilized by physicians at ACH and UAMS. After introductions, Dr. Vyas preformed a live heart echo transmitted over video to the participants in Pune in real time. Lori Heil, R.D.C.S., with ANGELS provided assistance in the demonstration.

The entire conference was a great success and our small part here in Little Rock was played to perfection. The technical expertise of Dustin Vance and the entire CDH video team was appreciated. This opportunity could not be achieved without assistance from CDH, the ACH heart echo staff, ACH media services, ACH networking and the very willing young son of Dr. Vyas who stayed up past his bedtime and provided the role of patient for Dr. Vyas’ live echo.

ANGELS continues to reach our local Arkansas communities via Telemedicine with as many health care services as possible. To assist us in providing great care, we are proud to announce two additions to our ANGELS family.

Takina Boykin, Administrative Assistant III, is our newest ANGELS Appointment Center member. She will be assisting our customers with scheduling in our women’s clinics and telemedicine clinics. Additionally, Stacie Ford, RN III, BSN, is working with OB Telemedicine as a Clinical Telemedicine Nurse and Outreach Facilitator. She is bringing more than 12 years of Obstetrics and Gynecology expertise to the program.

The research team continues to expand the ANGELS database which includes data linked from Medicaid claims, birth certificates, and hospital discharge reports. We are linking 2006 data to the existing data set which will allow us to expand the scope of post ANGELS analyses.

The research team also has been working to create a database of all papers, abstracts, and presentations that have incorporated data from the ANGELS program. With this tool in place, stakeholders will be able to determine which article and author to consult if they wish to investigate a particular topic. Additionally, they will be able to tell at a glance which topics have been addressed in previous research and which topics are ripe for further examination.
The Call Center continues to buzz with business. Many of our new programs that are still in infancy are steadily growing. Our call volume continues to increase and OB transports have seen a steady increase over the last several months.

I would like to thank all the Call Center staff for their hard work and continued ability to be flexible in the multifaceted type of calls they handle on a daily bases. The response I always get from new staff that has transferred from other areas of the hospital, or even our own OB department is ‘I had no idea that the nurse in the call center handled so many different types of calls.’ Also the high acuity and stress of many of the calls they triage, including emergent maternal transports, patients with severe postpartum depression, suicidal patients, patients with a pregnancy or neonatal loss, frustrated patients and physicians when the system doesn’t work, and more. My hat is off to you all for a continued job well done!

New Call Center staff include:

Debbie Lane, P.S.C.; Tina Butler, A.P.N.; and Susan Marsden, R.N.

Program update:

Some of our newer programs are:

- **Psych TLC**: This is a program with UAMS PRI; the program allows Arkansas psychiatric providers to obtain a telephone child psych consult for children and adolescents age 2 to 12. Consults result in referrals telemedicine consultation, PRI clinic appointment or recommendations for treatment with a local physician.

- Angel One at ACH is also now notifying the ANGELS Call Center when a **Neonatal consult or Transport** is needed at a referring nursery with telemedicine capabilities through the ANGELS TOUCH grant. The ANGELS Call Center makes the multisite interactive video connection between the remote facility and all ACH staff who would participate in the NICU transport (which includes dispatch, transport team and the neonatologist). The multisite telemedicine connection allows for the consulting neonatologist to visually assess the baby and to guide procedures if necessary.

- **OB Transports** using interactive video for nurse-to-nurse report. This program is just beginning and only has a few connections under its belt. The goal is to enhance the transport experience to UAMS by allowing the patient to be introduced to staff and welcomed to UAMS, to give the family hospital information packets prepared by ANGELS and to facilitate the nurse-to-nurse report process.
Following Baby Back Home
by Shannon Lewis

This is a program through UAMS ANGELS and KIDS FIRST. It involves a home visiting and case management service for families of medically complex infants following their discharge from the NICU.

Goals include decreasing hospital readmissions, assisting with patient adherence to medical appointments, and encouraging families to obtain immunizations on schedule.

These services are offered to families who live within a 30-mile radius of one of the 10 KIDS FIRST clinics outside Little Rock, with the focus on the northwest region, northeast region and south region. The staff includes the medical director, Patrick Casey, M.D, Martha Parker, R.N., project director, and Phyllis Wilkins, L.C.S.W., care coordinator supervisor. There is also an R.N. and a social worker assigned to each region. The project began accepting referrals Oct. 1, 2009. At the end of 2009 there were about 80 referrals from around the state.

A Word From Outreach
by Michael Manley

Health care reform is a general rubric used for discussing major health policy creation or changes — for the most part governmental policy that affects health care delivery in a given place. Health care reform typically attempts to:

- Broaden the population that receives health care coverage through either public sector insurance programs or private sector insurance companies
- Expand the array of health care providers that consumers may choose
- Improve the access to health care specialists
- Improve the quality of health care
- Decrease the cost of health care

While everyone else has been talking, ANGELS has been showing results. The past six years has shown that ANGELS and the Center for Distance Health can meet most of the demands that are continually being put on the health care system. We were recently able to share this information with U.S. Sen. Mark Pryor and Chairman Julius Genachowski for the Federal Communications Commission (FCC) in December. We choose to look at it as a patient issue, but are very cognizant that the system plays a vital role as well. The system has to meet the patients’ needs to be effective and can’t work in a silo.

We are excited about what 2010 brings for ANGELS. We are looking forward to Pat Magann, M.D., joining the OB/Gyn department full time starting in March. This will allow us to open up a few more slots for patients starting with El Dorado and Pine Bluff AHECs. And as usual, when we aren’t having high-risk OB clinic, those facilities will be able to use the equipment for other subspecialties in the near future.

Outside the state we are continuing to receive calls to learn more about our ANGELS model. We have already scheduled a visit with a rural clinical group from Virginia in February, beginning talks with Tacoma General Hospital in Washington, and have been approached by a private hospital group looking at starting telemedicine in their two facilities in the Virgin Islands area.

All of this happens because of the ANGELS team work. Everyone involved in ANGELS is an outreach coordinator in some fashion. Every contact we make, whether it’s a senator, a physician or a billing professional in a hospital, is important for our success. Hold on tight because 2010 proves to be as interesting and busy as 2009!
High-Risk Infant Monitoring Program (HRIMP)
by Shannon Lewis

Easter Seals in collaboration with ANGELS is providing HRIMP for a baby being discharged from the NICU that is considered high risk due to prematurity and other conditions. The area serviced is within a 50-mile radius of Little Rock.

The focus of the program includes evaluating all areas of development, including gross motor, fine motor, language, and self-help skills, as well as oral motor skills. These evaluations are done in the home or at Easter Seals. The team includes the medical director, pediatric physical therapist, pediatric speech-language pathologist and pediatric occupational therapists. The goals are to prevent hospital readmissions, reduce risk of failure to thrive, increase physical and developmental functioning of baby, decrease need for long-term therapies, and provide parents with training and support to help maximize the health of their baby.

OB-Gyn Grand Rounds

Good news early risers!
The UAMS Obstetrics and Gynecology Grand Rounds lecture series has moved to 7:00 AM. We’ve had suggestions that an earlier conference start time would have fewer workday conflicts for participants and we listened! Mark your calendars and join us at our new time each Wednesday morning.

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