

DIGITAL INNOVATION

Dignity Health is Designing the Digital-First Future of Medicine

By [Lilly Milman](#) | May 28, 2020

Preparing for a major digital transformation in a healthcare system is a lot like getting ready for a marathon, according to [Christine Braid](#): The key to success is training, training, training.

Braid is the newly-appointed Medical Director of Virtual Care Services at California-based [Dignity Health](#), the fifth-largest hospital system in the nation. She has been working alongside [Bita Farhadpour](#), Virtual Care Administrative Leader at Dignity Health, to make online visits possible for all of the physicians in the system in only a few weeks time.

In recent months, Dignity Health has seen a spike in telehealth visits. In January 2020, only 337 patients took part in virtual visits throughout all of Dignity Health's medical groups, according to data from the company. By May 5, the number of virtual visits had raced past 82,000.

These numbers reflect a national trend in telehealth services. According to an October 2019 survey conducted by consumer insights company J.D. Power, fewer than 10 percent of Americans reported having used telehealth services. About three quarters of those surveyed responded that they were unaware of, or did not have access to, such services. More recent data from consulting firm Frost and Sullivan reports a 50 percent increase in telehealth visits in March alone — an increase attributed to both social distancing guidelines and the expansion of Medicare to cover such services.



Dr. Christine Braid, Dignity Health

Developing Training Materials for Different Types of Learners

While Braid, a family medicine doctor, has been doing virtual visits with patients for over a year, the digital experience was new to most of her colleagues. After deciding on Zoom as their platform — the video-conferencing service is one of a few that is HIPAA compliant — Braid and Farhadpour set up an online session to train 782 members of staff at once. A step-by-step training sheet was then created for both physicians and clinical staff.

“The first thing we learned is that we need to train more, and not just with a PDF,” Farhadpour says.

Braid and Farhadpour’s training plan targeted different learning styles: in addition to recording a video of Braid conducting a mock virtual session in its entirety and distributing the training sheet in print form, they also worked with a team of developers to create an interactive e-learning lab website.

“Learning is not the same for everybody,” Braid says. “You need to do [a different style of training] for every type of person. There’s people who like muscle memory...to click through and actually feel the site [we use]... For that, we have the e-learning lab... There are still people who love paper documents,



Bita Farhadpour, Dignity
Health

so we have our entire toolkit in a PDF and paper document... And then we have people who like things given to them in video form.”

While creating the resources, they also had more than just the Dignity Health network in mind.

“We are also teaching to the entire country,” Braid adds. “Outside our network of physicians, we also want to teach the community as well... [These training modules] are not branded, and they’re not necessarily specific to a type of platform. We want to make sure that we have the learning available...We want to make

sure that everybody has the capability to do these video visits.”

Braid and Farhadpour emphasize that, outside of understanding the platforms, the burden of delivering technical support to patients does not fall on the physicians. So they also developed patient-centric materials — 30-second how-to clips, and documents optimized for iPhones, Android devices, and computers — and trained medical assistants to ensure the video visits run smoothly.

Getting Patients More Involved in Their Healthcare

In addition to being cost-effective and safer for patients, who can avoid crowded waiting rooms, telehealth visits can also give physicians the opportunity to hone important skills like listening to their patients, Braid says.

“I actually feel like the video [visit] is giving us more time to really listen to the patient. We have to use our diagnostic skills to lean in a little bit and take time to ask the questions,” Braid says. “Physical exams and diagnostics and all the things that we do are important, but...if we let the patient tell the story, ask them questions...and listen...then we’re going to be better diagnosticians overall.”

Not only is Braid learning more through careful observation during video visits, but she is teaching her patients to assist her with physical exams. She recommends this practice to other physicians as well.

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— **Bitra Farhadpour**

“I teach the patient to be your own doctor, and then that helps the patient then know more about themselves,” she says. “[I say] ‘I’ll show you where your stomach is. Feel your rib. Underneath the rib on the left side is your stomach.’ And they go, ‘I thought it was in the middle!’ ... I think that there’s not a ton taken away [from in-person visits].” The goal is to help patients report pain or symptoms that the physician may not be able to see on camera.

The Digital-First Future of Doctor’s Visits

Farhadpour and Braid both believe that telehealth is a big part of the future at Dignity Health, and for the healthcare system at large.

“COVID expedited our healthcare system by 10 years in two weeks, at least from the telehealth standpoint... There’s no way we can come back [to the old

model,]” Farhadpour says. “Our virtual care services are a main part of our future.”

Virtual visits are embedded in Dignity’s recovery operations plan, Braid echoes. In a post-COVID world, when patients request appointments, Dignity Health staff will first determine whether or not the visit can be virtual. If not — given certain required procedures or other complications — only then will they be asked to come into the office.

Farhadpour anticipates this will benefit patients, whom she believes will begin to prefer the convenience of virtual visits. Braid sees the benefits for physicians, who are able to enjoy greater flexibility with virtual visits. In addition to being able to work during evening and weekend hours more easily, physicians are also being allowed to work from home.

“I don’t know how often I’ve heard [the word] telehealth in the last six weeks, [given that] I had not heard it at all, except in my own conversations, years ago...Now it’s just part of casual conversation. This is woven into our every day... Sometimes it takes...tragic things to happen, but it just shoots technology forward,” Braid says

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