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Telepresence And Provider Communication Predict Satisfaction With Telestroke

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Abstract:

Background: In 2016 the Veterans Health Administration implemented the first nationwide Telestroke program; 800 consults were completed in the first 18 months. Preliminary analysis showed Veterans reported high satisfaction and acceptance of the program. This study sought to understand patient, provider, and hospital-level factors associated with patient satisfaction. **Methods:** Patients who received a Telestroke consultation were eligible for a phone interview two weeks later, including standard questions about technology quality, telepresence (how much the encounter felt like face-to-face), Telestroke provider communication, and overall satisfaction. Satisfaction scores ranged from 1-7, (higher = more satisfied), and for analyses were dichotomized as 6-7 indicating high satisfaction vs. < 6. Patient variables including stroke severity (NIH Stroke Scale) were obtained from study records. We used Student's t-tests and Chi-square tests to compare variables related to patient-reported satisfaction, and used a logistic regression model to determine factors independently associated with high satisfaction. **Results:** Over 18 months, 208 interviews were completed and 156 (75%) reported high satisfaction with Telestroke. Patients with more severe stroke were less likely to recall the consultation ($p = 0.01$). Factors significantly associated with patient satisfaction were higher ratings of the technology ($p < 0.0001$), telepresence ($p < 0.0001$), provider communication ratings ($p < 0.0001$) and overall VA satisfaction ($p = 0.01$). Among 13 providers with at least 10 consultations, there was no difference in mean patient satisfaction scores. In the multivariate model, telepresence (OR 3.10, 95% CI 1.81-5.31) and provider communication scores (OR 2.37, 95% CI 1.20-4.68) were independently associated with satisfaction. **Conclusion and Potential Impact:** Provider qualities, including telepresence and provider ratings, were associated with overall Veteran satisfaction with Telestroke. Technology quality may be necessary but not sufficient to impact patient experience. Training providers to improve telepresence and communication skills could improve patient experience with Telestroke consultation.