

	Appointment Making	Appointment Confirmation	Day of Visit Support	Patient Visit	Post Visit Follow-Up
Goals	Staff schedules a patient with a video appointment.	Staff verifies consent and confirmation that the patient has agreed to have a video visit.	Staff ensures that the patient is checked in and prepared for a video visit.	Staff conducts a video visit with the patient to cover their clinical needs.	Staff provides necessary information and next steps to the patient.
"Who"s / Actions	<pre> graph TD A([Call Center / FDS / Other staff encounter patient requesting appt]) --> B([MA / Nursing team needs to schedule patient for follow up]) B --> C{If appropriate, patient is offered 1) an in-person appt or 2) a telemed appt} C -- In-person --> D([End]) C -- Phone --> E([End]) C -- Telemed --> F{If telemedicine, patient is offered phone or video} F -- Video --> G[Staff briefly reviews workflow with patient and collects verbal telemedicine consent to document in chart] G --> H[Staff schedules patient in EPIC under "Telemedicine Consult Long" visit type] </pre>	<pre> graph TD A([Days prior to appt, MA calls patient for chart prep / appt confirmation]) --> B{Did patient answer within 3x?} B -- No --> C([End]) B -- Yes --> D[MA conducts clinical chart prep] D --> E{Is there a telemedicine consent?} E -- No --> F[MA collects verbal consent and documents in chart] E -- Yes --> G[MA sends patient Doxy.me link via text or email from website] G --> H[MA documents confirmation, consent, and that a link was sent, in Appt Notes] </pre>	<pre> graph TD A([FDS calls patient 10 min. prior to the video appt]) --> B{Did patient answer within 3x?} B -- No --> C([End]) B -- Yes --> D{Is there a telemed consent?} D -- No --> E[FDS collects verbal consent and documents in chart] E --> F[FDS registers patient and verifies information] D -- Yes --> F F --> G{Can patient connect to virtual waiting room?} G -- No --> H[FDS troubleshoots with patient] H --> I[If connection issues cannot be resolved] I --> J([FDS switches visit to phone]) G -- Yes --> K[FDS instructs the patient to wait in the virtual waiting room for the provider and wait for a call from MA] K --> L([FDS arrives patient]) </pre>	<pre> graph TD A([MA calls patient to initiate appointment]) --> B[MA completes screenings SHA, TB, PHQ2, etc.] B --> C{Is patient in the virtual waiting room?} C -- Yes --> D[MA instructs patient to wait in virtual waiting room for the provider] D --> E[MA ends phone call with patient] E --> F[Provider joins virtual room to conduct the visit with the patient] F --> G[Provider may send links, take pictures, etc. during visit] G --> H[Provider informs patient an MA will call for follow-up] H --> I[Provider ends video call] C -- No --> J[MA troubleshoots with patient] J --> K[If connection issues cannot be resolved] K --> L[MA informs patient the visit will be conducted by phone and informs provider] L --> M([End]) </pre>	<pre> graph TD A([Provider will notify MA of follow-up instructions]) --> B[MA reviews visit for discharge instructions] B --> C[MA calls patient for follow up] C --> D{If administrative support is needed enrollment, demographic changes, etc.} D --> E[MA sends in-basket to staff pools as needed] C --> F{If follow-up appointment is needed} F --> G[MA offers and schedules follow-up appt with the patient] E --> H[MA ends the phone call] G --> H H --> I([Visit is complete]) </pre>
Thoughts / Feelings	<ul style="list-style-type: none"> Confused about when telemedicine is most appropriate "I don't know what it looks like on the patient end, but I still explain it to them" Fatigued / unmotivated to offer telemedicine because of the lengthy process Indifferent about telemedicine benefits 	<ul style="list-style-type: none"> Frustration when being unable to contact the patient Blame / lack of clarity related to having to provide consent to patient when it was previously supposed to be collected 	<ul style="list-style-type: none"> Frustration when being unable to contact the patient If troubleshooting issues occur, it may be easier to "just switch to phone" Pressured to conduct daily activities and also assist patient to log in to Doxy.me 	<ul style="list-style-type: none"> "Why wasn't this already done earlier?" Stressed and pressured on time, because of the amount of time and effort required to assist patient Fatigued / unmotivated to continue with video process Frustrated with limitations of patients who are not tech-savvy (even after being able to log in) 	<ul style="list-style-type: none"> "How do I get this information to you?" Lack of clarity if not able to connect to the patient for follow-up (patient can be lost)
"Bumps" in the Journey	<ul style="list-style-type: none"> There are multiple competing priorities on workflows to remember, that screening for or promoting telemedicine goes to the backburner Staff may face difficulties explaining what telemedicine / video is 	<ul style="list-style-type: none"> Patients do not always answer phone calls, and we cannot always ensure successful prep work Because staff do not have many video appointments, some steps have been missed (ex. lack of notes) Time / effort required for providing patient education No current way to give consent via chat box 	<ul style="list-style-type: none"> Not all staff are comfortable / familiar with how to troubleshoot Doxy.me, and therefore cannot provide assistance If patient disconnects or missed FDS call, they end up contacting Call Center 	<ul style="list-style-type: none"> Multiple handoffs mean there are more opportunities / risk of the patient disconnecting There is also a concern for providing assurance on a privacy during the visit, if in shared administrative spaces Connectivity issues Patient may simply leave the room due to waiting in an unknown amount of time 	<ul style="list-style-type: none"> No way to provide follow up documentation for patients who are not active in MyChart Another handoff after provider ends the call could mean the MA now has to reconnect with the patient; this leaves room for patient to be lost to follow-up