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THE VIRTUAL ROUNDING PLAYBOOK:

A PRACTICAL GUIDE TO KICKSTARTING DIGITAL HEALTH ON MICROSOFT TEAMS

A turning point for digital health

In the days that followed the COVID-19 health crisis, something incredible started to happen in major hospitals across the world. For the first time since the mid-19th century, the practice of clinical rounding was undergoing major, substantial disruption. It was going virtual.

The stakes were high. Health care organizations were in a race against time to protect front-line workers, patients and critically limited supplies of personal protective equipment (PPE). All of a sudden, Virtual Rounding had become a strategic and public health necessity.

IT'S TIME TO RETHINK HEALTH CARE

All signs indicate that we're beginning a massive and concerted effort to transform virtual health care in earnest. It's a game-changing moment, considering health care is one of the most risk-averse, change-resistant industries.

Which is why we created this guide. In it, we provide a strategic roadmap to responding, resetting and renewing your approach to Virtual Rounding. We lay out the solution components, the keys to success and the major roadblocks. By following these insights, not only will you be better prepared to lead a successful Virtual Rounding transition. You will build the foundation you need to support a larger digital health and patient care evolution.
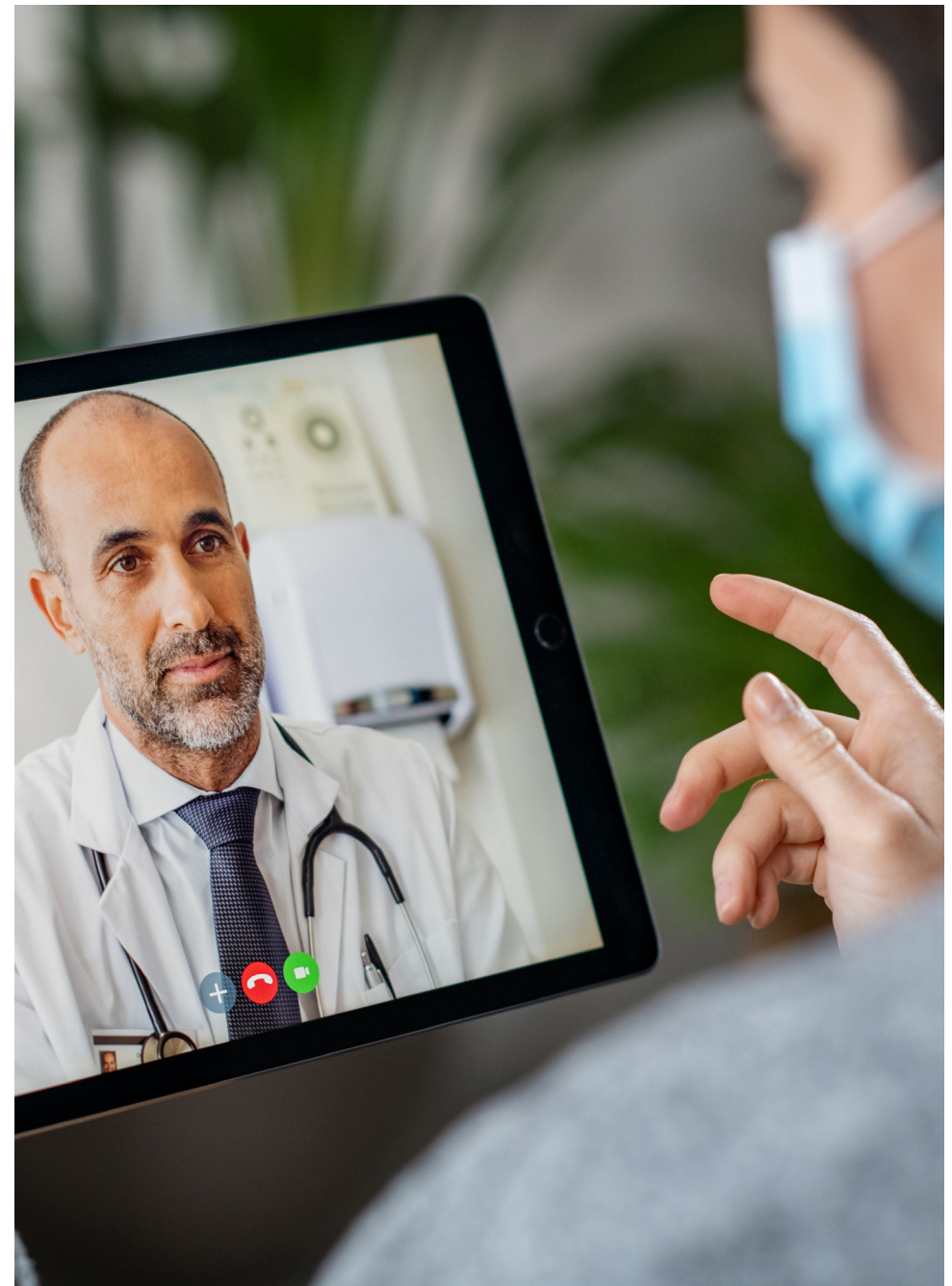
The situation – An inflection point for Virtual Rounding

The practice of clinical rounding has remained relatively unchanged since its formulation in the late 1800s.

Decades of initiatives and professional critiques, aiming to improve efficiencies and agility with modern technologies, led to no major upheaval. Even as the same health care professionals became reliant on virtual communications outside of clinical settings – from online shopping, to video chats and instant messaging – rounding never went virtual. That is, until the pandemic came.

COVID-19 put hospitals and health care professionals on the front lines of the battle – making them simultaneously one of the public's most essential and most at-risk service groups. Aside from the real and acute dangers of exposing healthy individuals to infection, hospitals struggled with major shortages of critical supplies, namely medical-grade masks, scrubs and other high-demand, high-cost PPE.

With governments enacting strict physical distancing guidelines to combat the spread, providers were left with little choice. Abandon the practice altogether or find a more secure and feasible alternative. The answer was Virtual Rounding.
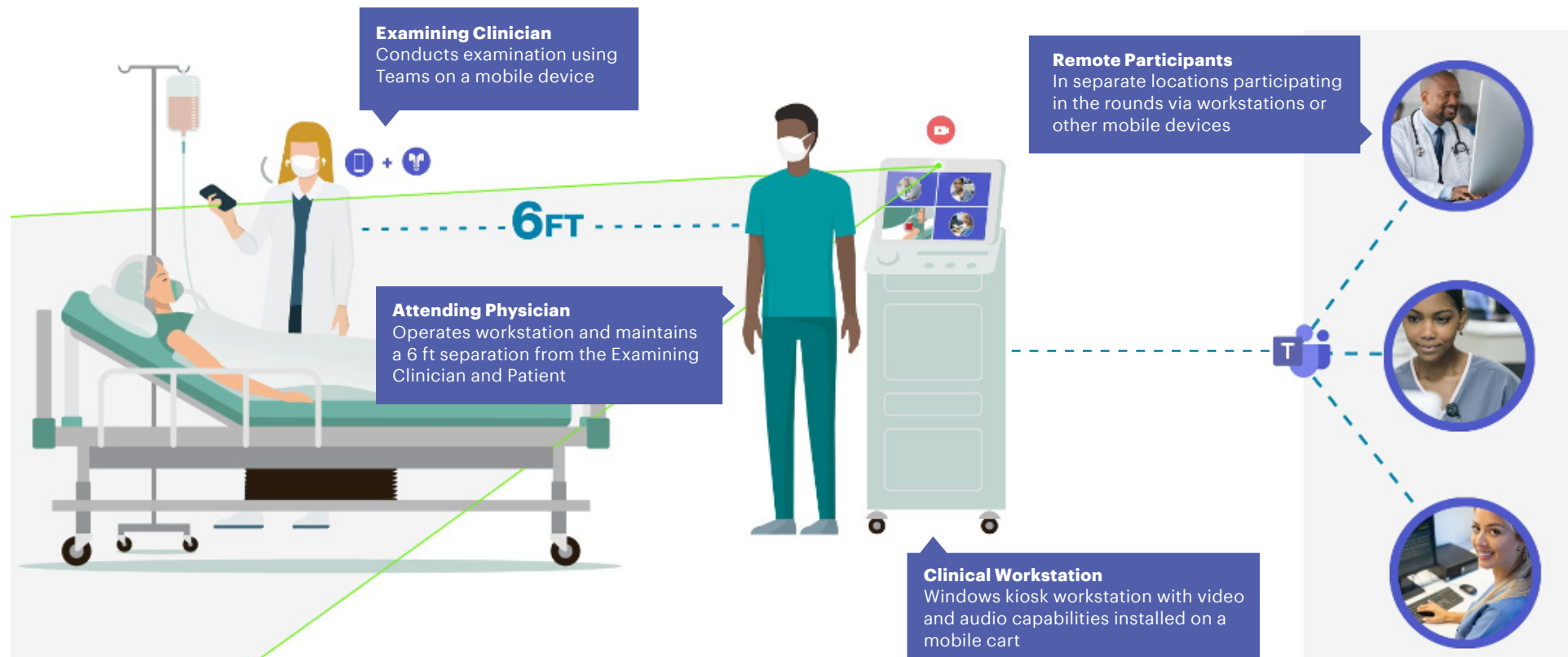
The solution – Anatomy of a virtual clinical rounding solution

Virtual clinical rounding enables physicians to collaborate through group videoconference and screen sharing, allowing providers to practice physical distancing while treating patients and reducing the number of providers entering a COVID-19 patient's room.

With it, a single doctor can see patients and collaborate with the rest of the team through connected devices, such as a smartphone, laptop and a clinical workstation or kiosk. One person handles the in-person checkup, while remote participants can place orders, write progress notes and suggest treatment.

Virtual Clinical Rounding Configuration

Selected configuration with two clinicians present to examine and operate the Microsoft Teams-enabled workstation and remote devices

Examining Clinician
Conducts examination using Teams on a mobile device

Attending Physician
Operates workstation and maintains a 6 ft separation from the Examining Clinician and Patient

6FT

Remote Participants
In separate locations participating in the rounds via workstations or other mobile devices

Clinical Workstation
Windows kiosk workstation with video and audio capabilities installed on a mobile cart

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People power: Who does what for Virtual Rounding?

It's important to think of Virtual Rounding as a team effort. While everyone has their traditional duties to perform, participants must also don new roles and responsibilities to make things work, smoothly and sustainably.
In general, you'll find four distinct groups of users:

Super user

This is your Virtual Rounding pro. The super user is responsible for teaching, troubleshooting and communicating best practices and tips to the rest of the team. They are the first line of support when a problem arises. They get trained during initial adoption preparations ("train the trainers").

Patient-facing clinician

This is the person in charge of conducting the in-person examination. This user can leverage a mobile device, logged into the Virtual Rounding meeting, to show and share exactly what they're seeing, while interacting directly with the patient.

Attending physician

That "workstation on wheels" (WoW) can't move around by itself – not yet anyway. The attending physician adds operating the WoW to his/her list of duties.

They're charged with ensuring remote participants can see and hear everything relevant in the patient's room and vice versa. They're also on point for sanitizing and maintaining the WoW and equipment before and after each patient visit.
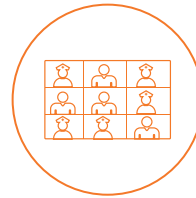
Remote participants

Whether logging in from home or in a breakout room down the hall, these are the students, consultants and specialists who do not need to be in the room physically.

Everyone in this group has a new role as well: taking notes, sharing relevant information and avoiding unnecessary distractions to the rest of the callers. Your app has a mute button. Learn to use it and avoid the other virtual etiquette faux pas, which we've listed in the following section.

The complications – Getting to virtual, securely and seamlessly

As with all workplace transformation initiatives, there are numerous roadblocks on the path to digital transformation. Health care is no exception.

An Avanade survey of 95 health care organizations identified the following top barriers to digital transformation in health care: hiring and training people with the relevant skills; integrating new technologies into legacy systems; lacking the tools needed to transform; and struggling to modernize legacy processes.

All of which reflect the key obstacles to Virtual Rounding. To guarantee a successful implementation, leaders from across IT, operations and the front lines will need to overcome this and more. Below, we cover the most common issues and share some strategies to address them.

The most common barriers to Virtual Rounding adoption

Supporting your people on a difficult road

With an industry famous for its resistance to change, preparing your people for this shift is the most critical key to success. Your Virtual Rounding solution hinges on the ability to educate and inspire your clinical team to embrace a new way of doing things – and to do it effectively, with as few headaches and as little confusion as possible.

To get there, you will need to execute a dynamic and ongoing change management program. It begins by identifying your user groups, including your super users. It continues by training the trainers, engaging leadership for high-visibility support and a robust communications plan. Interactive videos, live training seminars and regular communications are all essential building blocks on your change management strategy.

Security, compliance and software selection

As you kick off your Virtual Rounding project, IT must lead the organization in selecting and provisioning a collaboration and video conferencing solution that aligns to HIPAA, HITRUST and other compliance needs. IT should also quickly assess if existing licensing agreements provide entitlements at little or no additional costs versus purchasing a new solution unnecessarily.

Many organizations already have Microsoft Teams entitlements built into existing licensing agreements, for example. There are also numerous promotions on offer to health care institutions to make it easier to acquire and deploy enterprise-grade, compliance software. A partner such as Avanade can help you navigate the best licensing path to meet your compliance requirements and user needs.

Hardware and device gaps

Organizations are not always aware of the major role hardware plays in making Virtual Rounding work. You'll need adequate microphones and headsets, for example, beyond the proper laptops, tablets and smartphones. As you map out your strategy, take into consideration where and how your participants will be logging in to your virtual meeting.

BYOD is a valid strategy, but considerations need to be made to protect data and maintain compliance. Your "workstation on wheels" is another core building block. We've seen everything from a laptop being rolled around on a trolley to a tablet attached to an IV pole. There's nothing wrong with being creative and resourceful. Just do so in a way that will meet your needs and maintain security, safety and control.

Location, location, location

It might be a virtual conference, but it relies on access to quality real-world locations. Participants will require onsite or offsite breakout rooms, where several can join together to watch and take part in the virtual visits taking place in the hospital room. These conference hubs need quiet and privacy, as well as a reliable broadband internet connection, capable of streaming live video without issue.

Participants may also opt to dial in from home, especially if they're currently in quarantine or under protective isolation. Communicate early and often the added responsibility for these users to ensure their home Wi-Fi connections are protected, and that they can set up a quiet and distraction-free place to dial in. The last thing you want is for an unintended guest to make an appearance in the background, as clinicians review sensitive patient data.

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Virtual Rounding etiquette: Avoid these faux pas

Is there an echo in here?

Audio echo is the number one distraction when it comes to virtual meetups. The simple fix: Everyone uses headsets and the mute button! The only person not muted should be the person speaking.

The uninvited guest

Working at home has its perks. But inviting your loved ones into the background of a highly sensitive medical exam is not one of them. Keep your home office door shut and let your family know when it's off limits.

Chat first, questions later

Avoid unnecessary interruptions by leveraging the chat function. You can @ mention specific users if your question is only relevant to them. Also, don't go overboard. Chats should be limited and relevant to the conversation in progress.

Scheduling chaos

There are countless ways little scheduling hiccups can get in the way of a productive round. From scrambling last minute to find meeting dial-in info, to not knowing how to invite a new participant or how to schedule around people's availability.

Everyone on your Virtual Rounding team needs to be well versed with scheduling features. You'll also want to add predictability – creating recurring meeting times and adding key details in the location and meeting description is a key feature toward ensuring success.

The pay off – Safety today, agility tomorrow

As a response to a public health crisis, Virtual Rounding has clear and immediate benefits to health care organizations. However, it also provides an opportunity for leaders to build momentum and then transition to a much larger, longer-term transformation of health care as we know it.

THE IMMEDIATE WINS: FIGHTING CONTAGION, SAVING LIVES AND RESOURCES

Hospitals where Virtual Rounding on Microsoft Teams has been implemented have seen real and immediate benefits.

Combatting contagion

It protected thousands of clinicians and patients from the risk of contagion and significantly reduced exposure of front-line workers.

Flexibility and speed

These enhanced workplace safety measures gave hospitals more flexibility to tailor responses as the situation evolved, day to day.

Adopting the new

Change management initiatives also supported the rapid and successful adoption of a new way of working with users who, for decades, were extremely change averse.

Supply management

Last, but certainly not least, limiting the amount of in-person contact gave hospitals the ability to drastically reduce the use of highly expensive, hard-to-acquire PPE, as the world faced shortages and revenues tumbled.

The long view: A foundation for the future of health care

If there is a silver lining to emerge from the pandemic, it's that health care has finally received the push it needed to start moving toward true digital health innovation. With clinicians and patients now being exposed to a working and effective Virtual Rounding model, the momentum is there to support a series of other critical and promising transformations.

"The mainstreaming of digital health tools and collaboration software will be one of the few positives to come from this pandemic," write the authors of a Lancet article on the topic of virtual care during the pandemic, published in May 2020. Many of the new digital skills and innovations are likely to remain long after the pandemic has resolved.

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Our health-care system will have taken a giant step towards modernization, with the potential for greater efficiency in care delivery and increased value in health care.

– The Lancet

SO, WHAT'S NEXT FOR DIGITAL HEALTH?

Virtual triaging, home medicine, artificial intelligence, the list goes on. If you've been waiting for a way to pursue digital transformation in your health care organization, the time is now to act. You might start with Virtual Rounding. From there, a new era of digital health is yours for the taking.
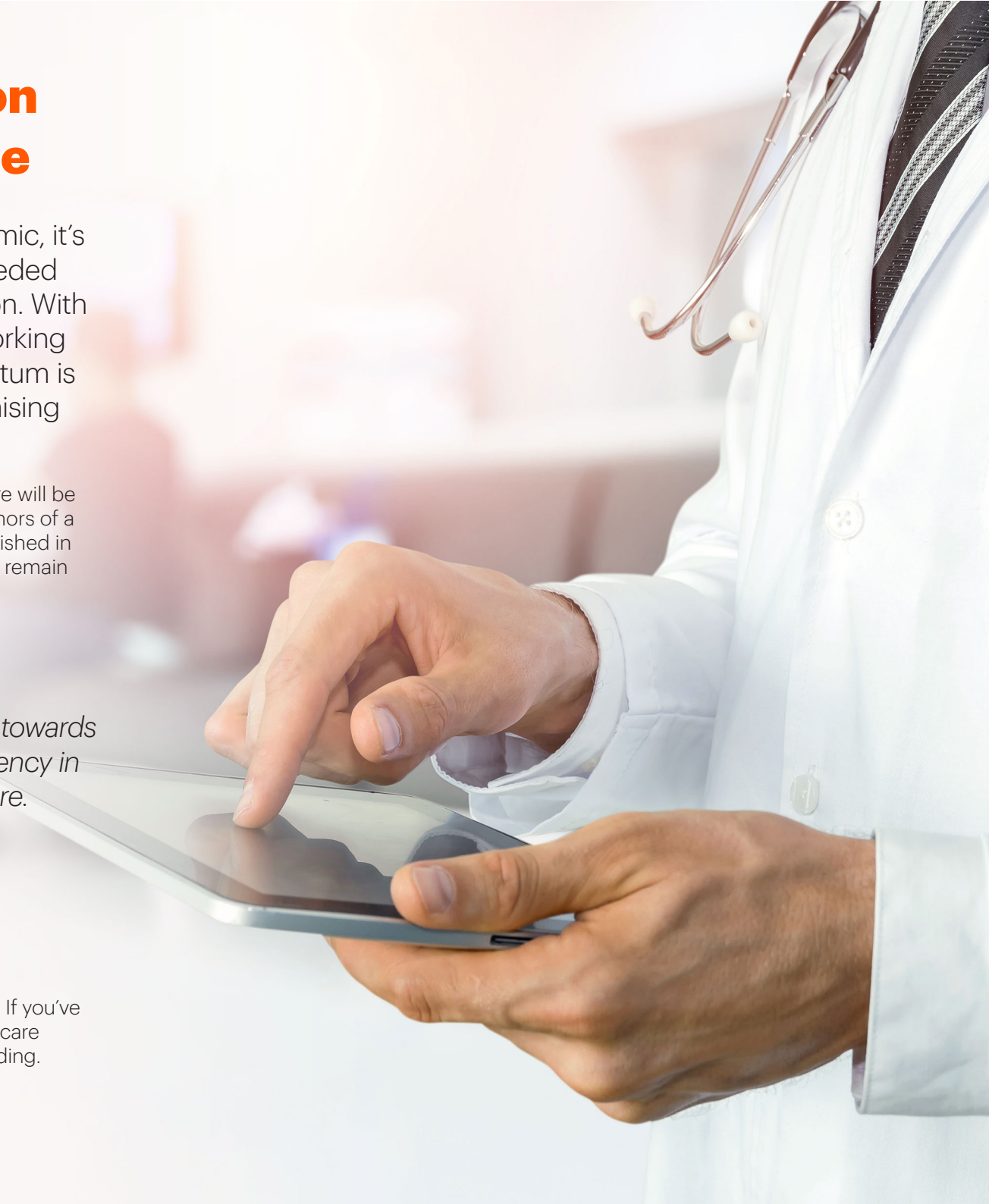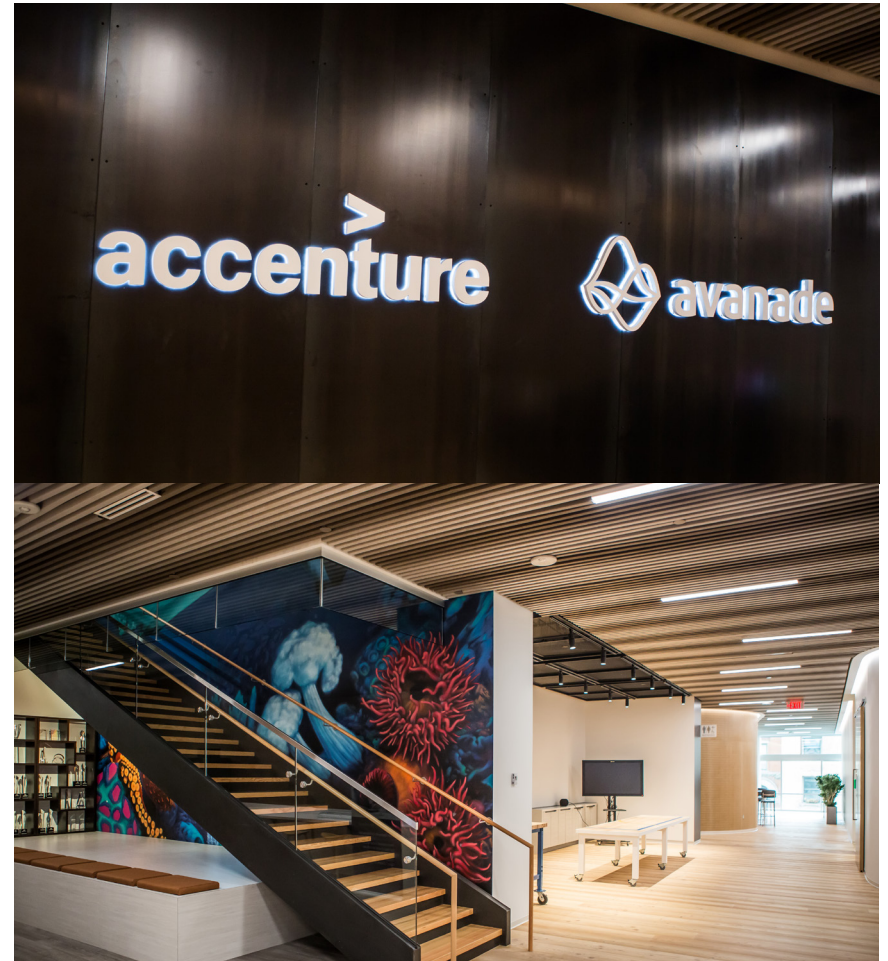
Start planning your journey, today.

Learn more about Avanade's digital health solutions and see our Virtual Rounding on Teams in action by visiting our website: www.avanade.com/en-us/industry/health

ABOUT AVANADE

Avanade is the leading provider of innovative digital and cloud services, business solutions and design-led experiences on the Microsoft ecosystem. Our professionals bring bold, fresh thinking combined with technology, business, and industry expertise to help make a human impact on our clients, their customers and their employees.

We are the power behind the Accenture Microsoft Business Group, helping companies to engage customers, empower employees, optimize operations, and transform products; leveraging the Microsoft platform. Avanade has 38,000 professionals in 25 countries, bringing clients our best thinking through a collaborative culture that honours diversity and reflects the communities in which we operate. Majority owned by Accenture, Avanade was founded in 2000 by Accenture LLP and Microsoft Corporation.

Learn more at www.avanade.com