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Modern Healthcare

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Commentary: Telehealth holds promise, but human touch still needed

Dr. Todd Czartoski



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Telehealth has unparalleled capabilities for improving health, including greater access to life-saving specialist care in medical emergencies. But it isn't a cure-all. It's critical to have appropriately trained clinicians on both ends of the camera.

By now, many of us are familiar with the story of a California patient who was informed he was near death from a physician on a video screen. While we don't know all the details, it's a powerful reminder that human care and technology are intersecting at greater speed, and finding the proper nexus can be challenging.

As a practicing neurologist and chief medical technology officer for one of the largest telemedicine networks in the country, I know firsthand about the benefits of telemedicine for patients and organizations. I also know how important it is to maintain a personal touch to comfort patients, especially in our nation's increasingly tech-driven health system.

More providers are using telemedicine. By the end of 2020, the global market for telemedicine is projected to surge past \$34 billion, up from \$6.3 billion in 2016. There's good reason. Telemedicine allows care professionals and specialists to consult, diagnose and treat patients, virtually, in real time—no matter where they're located, making care more accessible and convenient.

Telehealth has unparalleled capabilities for improving health, including greater access to life-saving specialist care in medical emergencies such as stroke and mental illness. Consumers who want immediate answers also favor telemedicine. And for rural and underserved communities, telehealth is a proven lifeline and a solution for the national shortage of specialists. But it is not a cure-all for clinical scenarios. At its core, telehealth remains a synergistic extension of the care team, and hospitals and providers are still learning how to best deploy virtual solutions to improve patient care.

Reliable, secure technology is required to build a virtual care network, but it is not the most important component. Given the nature of a remote encounter, it's critical to have appropriately trained clinicians on both ends of the camera.

Although there's no set standard for telehealth, we believe that a quality evaluation is safe, secure, and patient-centric and leans heavily on a robust tele-presenter training program. We've trained more than 6,000 tele-presenters. Physicians are trained in camera etiquette, while tele-presenter training focuses on facilitating the history and exam and walking the patient and family through each step of the encounter.

Our organization has built more than 60 clinical use cases—offering everything from tele-ICU and telestroke to behavioral health, tobacco cessation and wound care. Last year, we had more than 40,000 telehealth encounters and continuously monitored more than 40,000 patient days at the 118 hospitals and clinics where we deliver virtual care.

We recognize that getting to know a person's needs has historically been associated with physical presence and proximity. To be sure, telehealth does not solve all aspects of getting to know patients' values, preferences and priorities. Moving forward, we need to continue to improve our ability to identify and fill gaps in clinical knowledge specific to really understanding a person in a virtual environment.

Providence St. Joseph Health's Institute for Human Caring, founded in 2014, grapples with these complex modern-day problems. The institute leverages technology, such as offering videos delivered to patients' computers or smartphones, which help explain certain treatments. It also teaches doctors, nurses, chaplains and social workers how to have difficult and meaningful conversations with patients and loved ones about serious illness.

We are still learning how to administer the best care possible for the body, mind and spirit, with the help of modern technology.

As we venture through this exciting new territory of telehealth, none of us will always do it perfectly. In this new world, we will sometimes misread the best way to be attentive to all of peoples' needs. However, we must remember that at the other end of the screen are patients with their own stories and their own set of goals and fears. It's up to us to learn and teach others how to use these new tools while protecting our precious humanity.

Inline Play

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