



# Society for HEALTH PSYCHOLOGY

## ***THE STRENGTHS & STRESSES OF TELEHEALTH***

Survey responses and comments indicate the shift to telehealth is stressing primary care clinicians. Many cite a reduced joy of practice, sense of connection to patients and colleagues with telehealth. Uncertainties regarding financial implications and the duration of the pandemic contribute to an overall sense of frustration. While primary care advocacy organizations work to secure reimbursement and clinical leaders develop appropriate workflows and team-based participation, we offer these strategies to reduce the negative impact of telehealth on clinical practice and on clinicians' wellbeing.

- 🌀 **Create purposeful connection:** Connection with patients and colleagues is the heart of primary care. However, it can get lost with technology. To mitigate, start each day by contacting your team members - even through technology (e.g., text or call or video huddle). Set aside time in each encounter to personally connect with the patient while noting this "personal time" will be limited. For example, "Before we start our appointment today, I want to spend a few minutes to check in on how you're doing in general." Be mindful of time and overtly shift into "appointment mode" to help yourself stay on schedule.
- 🌀 **Consider adding mental health screening.** Research indicates that mental health issues are on the rise. Many practices utilize the PHQ 2 or PHQ 9 during the check in process. Screening results help you prioritize mental health issues when needed. If biomedical issues are pressing, have a follow up encounter focused on the patient's coping, supports, and mental health.
- 🌀 **Increase continuity to increase connection.** The patients' "cost of entry" to attend telehealth visits is significantly lower than for typical office visits – no time traveling, waiting, etc. Seize this opportunity to work closely with patients who previously struggled to follow through. Regular visits with complex patients and those struggling with chronic disease management can improve outcomes. They also enable the clinician to "pick up where you left off," increasing engagement and reducing the stress of managing complexity in stand-alone visits.
- 🌀 **Specifically cue in on loneliness.** Loneliness is a major health problem in the US, exacerbated by COVID, and especially for older adults. Specifically ask patients about their social connection. Create a local resource list of ways to connect during the pandemic (e.g., online activities at the Y or local library or recreation center, public calendars of online activities, interactive courses through local colleges, etc.). Connect with patients via your patient portal.
- 🌀 **Be aware of your telehealth "set up:"** Improve the experience with good lighting and an inviting, comfortable private space to facilitate concentrating on your patient. If working from home, stick to a routine and compartmentalize set up to create "work space" and "home space"
- 🌀 **Take telehealth breaks:** Use breaks for physical activity. Work to restore the level of movement you have when working in a regular clinical environment. Don't forget to hydrate and nourish yourself. Create COVID free time each day to connect with your own family and friends and to increase your physically and emotional fuel tanks.

Providing primary care during this pandemic is a marathon, not a sprint. Telehealth may be here to stay even after the pandemic, so now is the time to make telehealth work for you.