ABSTRACT: 2023 ELAM Institutional Action Project

Project Title: Advancing Neurologic Care and Outreach in the Hudson Valley through the Use of Tele-neurology

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Topic Category: Clinical (and Educational)

Background, Significance of project:

Purpose/Objectives: The purpose of this initiative is to expand neurologic care options for our patients using tele-neurology.

- 1) A weekly tele-neurology clinic will be established as a neurology resident continuity clinic
- 2) Residents will identify patients who are appropriate to receive follow-up care in the teleneurology clinic
- 3) The clinic utilization rate will have 90% fill rate and a 30% no show rate.

Methods/Approach/Evaluation strategy:

The resident continuity clinic timing was changed from a weekly half-day continuity clinic to a every 6th week full week of outpatient neurology curriculum which includes a half-day tele-neurology clinic. The residents received education regarding tele-neurology and are now able to select patients most appropriate for this clinic based on patient diagnosis, location, and preference. Phase One of the project involves establishing the telephone based tele-neurology clinic and appropriately scheduling residents and patients. The initial evaluation strategy is reviewing the resident milestone achievement in this clinic, clinic fill rate and no-show rate.

Outcomes/Results: The tele-neurology clinic was started August 2022, however it was not until January 2023 that patients were consistently scheduled. Fifty-one patients have been seen. 41/51 were primarily Spanish speaking and a phone interpreter was successfully utilized during the visit. The fill rate has been improving from an initial rate of 33% the first two months to a rate of 73% for the past 2 months. The no-show rate has declined from an initial rate of 100% to a rate of 50% for the past 2 months. Headache diagnostic codes are the most frequently utilized (82% of patients). Residents have only started identifying appropriate patients in the past month to schedule in this clinic. Resident education based on the Neurology Milestones included: patient care (history taking, formulation, diagnostic and management of neurologic disease in the outpatient setting, interpretation of neuroimaging), medical knowledge (diagnostic investigation), system-based practice (quality improvement, system navigation for patient care, physician role in the healthcare system), problem based learning (evidence based and informed practice), interpresonal and communication skills (patient and family centered communication, barrier and bias mitigation).

Discussion/Conclusion with Statement of Impact/Potential Impact: A tele-neurology clinic for primarily Spanish speaking patients utilizing telephone interpreter has successfully delivered care to patients with

a chief complaint of headache. The curriculum addresses multiple Neurology Milestones in resident education including barrier and bias mitigation. Phase 2 of the project will continue to address the initial goals as well as expand to: 1) offer an option of video tele-neurology in addition to telephone; 2) include a transition in care clinic for inpatient to outpatient care post stroke.