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| Office of Graduate Management Studies  Self-Directed Managerial Applications Component Proposal/Learning Contract Attach Proposal/Learning Contract to all SMACs  Attach the Abilities Recap form from MGT 500 to this form |
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| **Course:** Health Care Services and Systems  **Proposed title of project:** At NY Presbyterian, the effect of how Telehealth is Transforming How Care is Done |
| **Issue/Problem/Task to be Addressed**  The project aims to solve the problem of high number of diabetes patients not going to hospitals for fear of contracting COVID-19. Diabetes patients are more prone to COVID-19 deaths because the virus damages their breathing system. Consequently, many patients fail to go to hospital for fear of contracting the deadly virus. Statistics shows that 34.2 million Americans had diabetes in 2018 (American Diabetes association, 2020). Out of this population, 7.3 million were not diagnosed. The prevalence of the disease is high in seniors aged 65 years and above (American Diabetes association, 2020). Because of the fear of going to hospitals, the probability is that the country will record more deaths. Therefore, the project seeks to set-up telehealth to solve the problem of not going to the hospital.  Although the healthcare sector is undergoing challenges due to COID-19, hospitals, such as New York Presbyterian should apply technology to ensure populations access quality services. Besides, quality of care is dependent on accessibility, affordability, timely diagnosis. Telemedicine enhances these three attributes by overcoming geographical barriers, allowing access to specialist care without traveling (video conferencing and telephone consultations), and reducing the cost by cutting on travel and accommodation costs for both the provider and the patient. In the wake of the current global health crisis posed by the Covid-19 pandemic, wide-scale adoption of telemedicine could have come in handy. Telehealth makes healthcare services available to the entire population, including diabetes patients.  Telemedicine may be a remedy to the global health specialist shortage, with one specialist offering services to multiple patients from varied regions. For example, one doctor can hold a video conference with many diabetes patients and offer appropriate services to improve their health conditions.  However, telehealth may not be without its fair share of challenges as stated earlier, especially being in its inception stage in most areas. The effect of telehealth touches on the healthcare providers, the patients, and the management of the health facilities. The concerns of data security, safety, privacy and confidentiality; loss of one-on-one interaction; availability of infrastructure to support telehealth, and patients' expertise in telehealth interaction are some of the notable challenges that may affect the effectiveness of telehealth services. However, the hospital should install appropriate security systems to ensure adequate protection of patients’ data.  Therefore, the primary purpose of this project is to implement telehealth to solve the business problem of people not going to NY Presbyterian. |
| **Topic(s) from Functional Knowledge Area Related to the Issue/Problem/Task**  The areas or topics of focus in this SMAC will include installation of technology in the hospital, educating patients how to use the technology and privacy system to guarantee safety of patients’ data. Also, the project will address potential challenges, particularly its cost, integration with the overall business model and expected target patients. The scope will also entail computer-assisted diagnosis, electronic prescription filling, electronic health records, patient data protection, and remote monitoring. Moreover, the advantages and disadvantages of telehealth at NY Presbyterian from the providers, patients, and management perspective. |
| **Anticipated Managerial Abilities to be Developed**  **Adaptability** – I intend to develop managerial skills particularly the ability to respond to different situations. The project will help to develop personal responsibility of seeing an opportunity in every challenge. Opportunity in this context is the adoption of telehealth that is cost-effective to patients and the hospital. Therefore, the project will improve my flexibility skills, depending on prevailing circumstances to ensure business sustainability.  **Systems thinking** – I will develop systems thinking by developing skills of consulting stakeholders, such as patients and the availability of network that would influence telehealth. The cost of components, such as network providers and type of healthcare services provided would also influence adoption of telehealth. Therefore, the effective development of systems thinking requires the application of holistic approach. |
| **Proposed Project Design/Plan**  The project design will highlight the elements required in the completion of the project. The project design or plan will outline the steps which will be followed informing the project, highlighting the vision, problem, required resources, project goals, contingency plan, evaluation plan, budget, and the project proposal. NY Presbyterian has not effectively adopted technology in its operations. In this era of COVID-19, telehealth would improve accessibility of healthcare services to populations, such as diabetes patients. |
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| **Resources**  Some of the useful literature sources already identified include;  Alvandi, M. (2017). Telemedicine and its role in revolutionizing healthcare delivery. *The American Journal of Accountable Care, 5*(1); e1 – e5. https://www.ajmc.com/journals/ajac/2017/2017-vol5-n1/telemedicine-and-its-role- in-revolutionizing-healthcare-delivery  American Diabetes association. (2020). *Statistics about diabetes.* <https://www.diabetes.org/resources/statistics/statistics-about-diabetes>  Bashshur, R. L., Shannon, G. W., Smith, B. R., Alverson, D. C., Antoniotti, N., Barsan, W. G., Bashshur, N., Brown, E. M., Coye, M. J., Doarn, C. R., Ferguson, S., Grigsby, J., Krupinski, E. A., Kvedar, J. C., Linkous, J., Merrell, R. C., Nesbitt, T., Poropatich, R., Rheuban, K. S., Sanders, J. H., … Yellowlees, P. (2014). The empirical foundations of telemedicine interventions for chronic disease management. *Telemedicine Journal and e-Health: The Official Journal of the American Telemedicine Association, 20*(9), 769– 800. https://doi.org/10.1089/tmj.2014.9981  Board on Health Care Services & The Institute of Medicine (2012). *The Role of Telehealth in an Evolving Health Care Environment: Workshop Summary*. Washington (DC): National Academies Press (US). https://www.ncbi.nlm.nih.gov/books/NBK207146/  Burke, B. L., Jr, Hall, R. W., & SECTION ON TELEHEALTH CARE (2015). Telemedicine: pediatric applications. *Paediatrics*, *136*(1), e293–e308. https://doi.org/10.1542/peds.2015-1517  Hersh, W. R., Wallace, J. A., Patterson, P. K., Shapiro, S. E., Kraemer, D. F., Eilers, G. M., Chan, B. K., Greenlick, M. R., & Helfand, M. (2001). Telemedicine for the Medicare population: pediatric, obstetric, and clinician-indirect home interventions. *Evidence Report/Technology Assessment (Summary)*, (24 Suppl), 1–32.  Ray, K. N., Ashcraft, L. E., Mehrotra, A., Miller, E., & Kahn, J. M. (2017). Family Perspectives on Telemedicine for Pediatric Subspecialty Care. *Telemedicine Journal and e-health: The Official Journal of the American Telemedicine Association*, *23*(10), 852–862. <https://doi.org/10.1089/tmj.2016.0236>  Russo, L., Campagna, I., Ferretti, B., Agricola, E., Pandolfi, E., Carloni, E., D'Ambrosio, A., Gesualdo, F., & Tozzi, A. E. (2017). What drives attitude towards telemedicine among families of pediatric patients? A survey. *BMC pediatrics*, *17*(1), 21. https://doi.org/10.1186/s12887-016-0756-x  Zanaboni, P. & Wootton, R. (2012). Adoption of telemedicine: from the pilot stage to routine delivery. *BMC medical informatics and decision making*, *12*, 1. [https://doi.org/10.1186/1472- 6947-12-1](https://doi.org/10.1186/1472-%096947-12-1) |
| **Ethical and Social Responsibility** |
| Although telehealth seeks to improve accessibility of healthcare services, some patients can pretend to have symptoms so that they get medicine for their loved ones. The dilemma in this context is whether healthcare providers should provide medication to all patients with or without critical evidence about symptoms. The practice can be common since there is no evidence or personal examination to determine the extent of the symptoms. However, this could happen when some individuals with insurance pretend to have symptoms so that they get medication for their friends without medical insurance. Nevertheless, the hospital will implement a follow-up plan to ensure accountability and be ethical in the medication process. |
| **Individual Project or Team Project *(****Degree candidates are required to complete at least two SMACs as a team with other students from the course).*  V |
| *Is it your intent to present this SMAC to your company?* **Yes No** √ |
| **Due Date** |
| **Student Signature(s)** |
| I (we) agree to uphold the College’s core value of academic integrity. I (we) pledge that this SMAC will not contain one or more sections, in whole or part, that have already been included in another SMAC without the instructor’s explicit approval. Any violation of this provision constitutes Academic Dishonesty.  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Instructor’s Approval \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 8/11**  **(**The approved Learning Contract must be submitted with the SMAC**)** |