

INTRODUCTION

- During COVID-19, there was an unprecedented increase in telehealth services across all available VA platforms.
- Without effective delivery of care that is appropriate for the wider VA audience, the utilization of telehealth services could be temporary.
- There is a need to understand how different patient characteristics and experiences with telehealth visits during the rapid expansion of telehealth services impact preference of clinical video telehealth (CVT) in contrast to in-person visits at the Veterans Health Administration.



Patient Characteristics and Experiences Impacting Visit Modality Preference

Objective: Evaluate patient characteristics and telehealth experiences of veterans endorsing clinical video telehealth (CVT) preference in contrast to in-person visits.

RESULTS

Figure 1. Patient preference after video visit in primary care during COVID-19

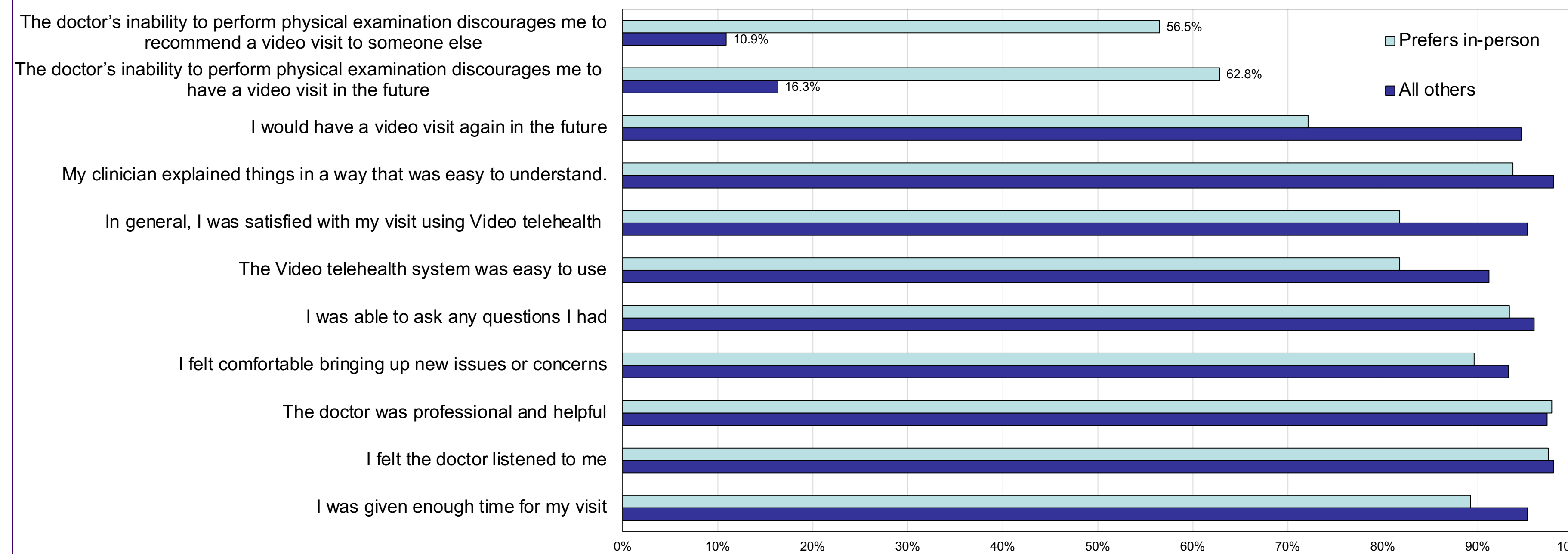
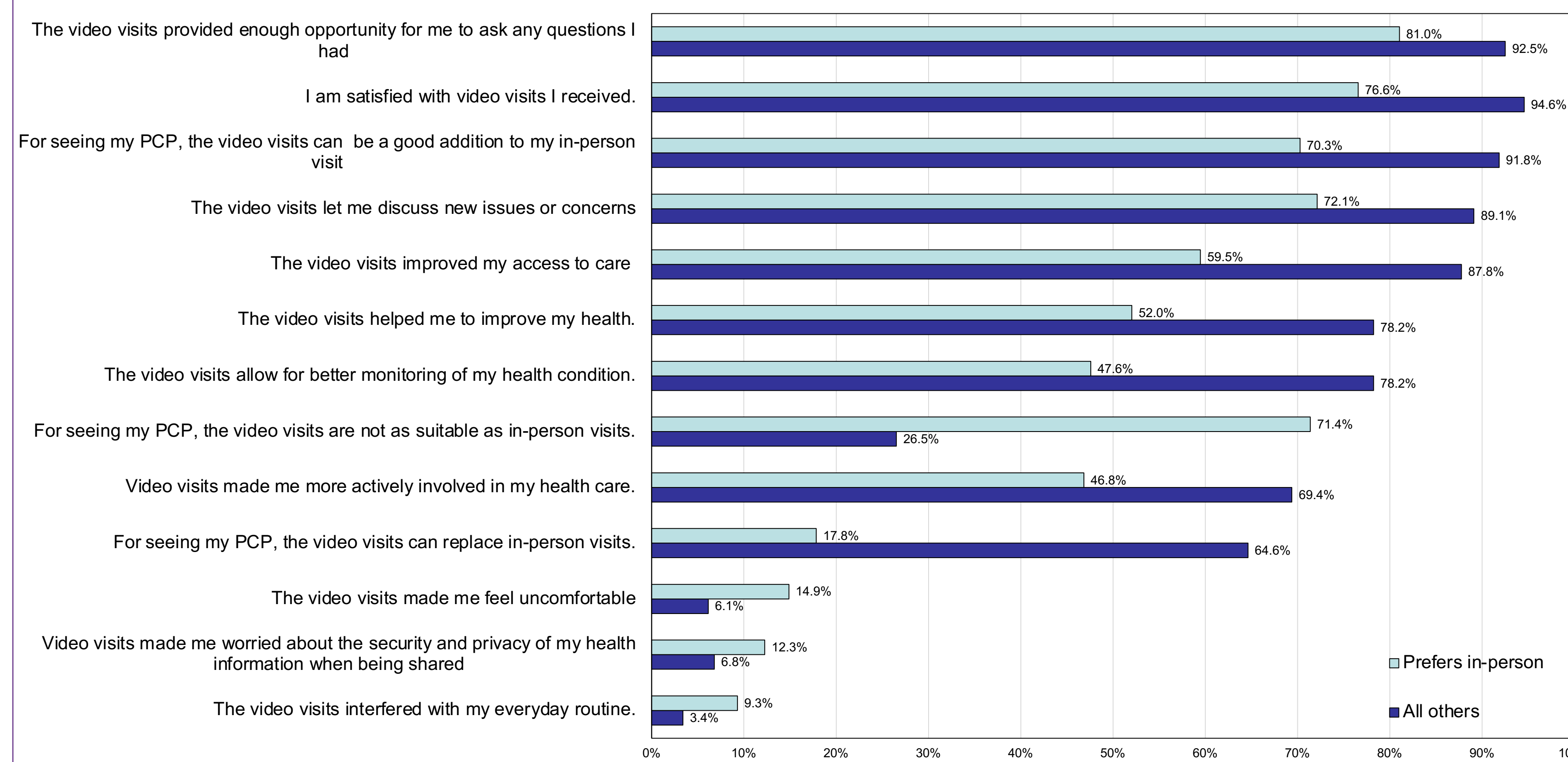


Figure 2. Patient preference in relation to overall satisfaction with video telehealth



MATERIALS & METHODS

Patient surveys (n=405)

- Patient surveys mailed to Veterans between May 2021 and October 2021.
- Eligibility criteria:
 - ≥ 1 Primary care CVT visit from 3/2/2020 – 12/31/2020
 - Phone and address available in EHR
 - NYH or SD listed as patient's primary VA center

DISCUSSION

- There is very high satisfaction with CVT, but most veterans still prefer in-person visits overall.
- Age and internet accessibility appeared to be veteran characteristics effecting preference of CVT or in-person visits.
- Lack of physical exam during CVT seemed to be an experience associated with preference of CVT or in-person visits.

ADDITIONAL INVOLVEMENTS

Drug Use Among Nightclub and Dance Festival Attendees in New York City

METHODS

Randomly select venues in NYC and survey participants outside of parties (N=4160). Collect hair samples from willing participants to test for unintentional drug use.



EDM Nightclub and Dance Festival Party Attendees and Drug Use Risk

Objective: Examine the prevalence of new psychoactive substances and other drug use, risk factors for use, self-reported adverse outcomes, trends in use, and adverse outcomes.

Maximizing the Value of Sharing PGHD with HealthCare Providers in the Setting of Weight Management at the VA

METHODS

Conduct semi-structured interviews with MOVE! and PACT providers of different disciplines to understand their experiences and preferences using PGHD from FitBit.



Value of Sharing Patient Generated Health Data (PGHD) in Weight Management

Objective: Evaluate best practices for sharing and utilization of PGHD to optimize its use and maximize its impact for weight management at the Veterans Administration.



ACKNOWLEDGEMENTS

A special thank you to Dr. Omar El Shahawy, Dr. Melanie Jay, Andrew Nicolson, Dr. Joseph Palamar, and all the members of the IDEAS Lab and MOTIVATE Research Lab at NYU Langone Health for their support.