

**Submission Id: 3267**

**Title**

*Federally qualified health center patient telehealth experiences in the early stages of the COVID-19 pandemic*

**Priority 1 (Research Category)**

Survey research or cross-sectional study

**Presenters**

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**Abstract**

Context: Primary care healthcare settings rapidly converted from in-person to telemedicine visits due to the COVID-19 pandemic in early 2020. Federally qualified health care settings (FQHCs) faced unique challenges in this transition, including patient access to and understanding of telemedicine.

Understanding patient access to and desire for telemedicine will help FQHCs target their resources for improved patient care. Objective: This study aimed to determine patient access to telehealth capable devices, desire for audio versus video visits, and satisfaction with previous telehealth visits in an urban FQHC in the early stages of the COVID-19 pandemic. Study Design: Patients were surveyed via telephone after meeting inclusion criteria. Setting or Dataset: The study site is the largest safety net clinic in Northern California, serving over 90,000 individual patients over three counties. Sixty-four percent of the clinic's total patients are Latinx identifying and over 95% are uninsured or receive Medicaid. A random sample of 360 patients were called between June and August 2020. 97 patients agreed to participate without an incentive. Population Studied: All patients with a diagnosis of type 2 diabetes or pregnancy within the last year were included in the initial sample. Instrument: A phone survey collected demographics and assessed three areas: 1. Access to video capable devices, and access/familiarity with internet navigation 2. Patient interest with telehealth and 3. Satisfaction with the most recent visit for those who had already experienced a telehealth visit. Results: Participants were 79.6% Latinx and 82% female. Most patients owned a smartphone (90.3%) and less owned a computer (45.7%). Most patients accessed the internet/video applications through their smartphone (74.6%) and only 52.5% had access to internet at home. Most patients with a recent telehealth visit were either satisfied or extremely satisfied (63.5%). Thirty-six percent of patients noted they would want all visits to be in-person, despite the pandemic. Conclusions: In a mostly Latinx low-income setting, most patients have access to a smartphone that could be used for a video telehealth visit, yet about half of patients do not have internet access to limit data burden. However, most patients would be open to having video visits with their clinicians. Thus, FQHCs should work with patients to increase knowledge of video applications on their smartphones and the resulting data usage.