



# 2024 SCIENTIFIC SYMPOSIUM

## From Data to Policy

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# Characterizing the Telehealth Nursing Workforce in 2022

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Background

A nurse in blue scrubs is looking at a computer monitor. The monitor displays a medical image, possibly a chest X-ray. The nurse has a stethoscope around her neck. The background is a clinical setting with a window and some equipment.

The provision of nursing services, or communication with a patient or client located somewhere different from the provider's location,

# Telehealth After Lockdown

- Telehealth expanded significantly after the outset of the COVID-19 pandemic as social distancing policies were set in place, and regulations on telehealth were eased.
- Since the acute phases of the pandemic, telehealth usage has waned, but remain above pre-pandemic levels.

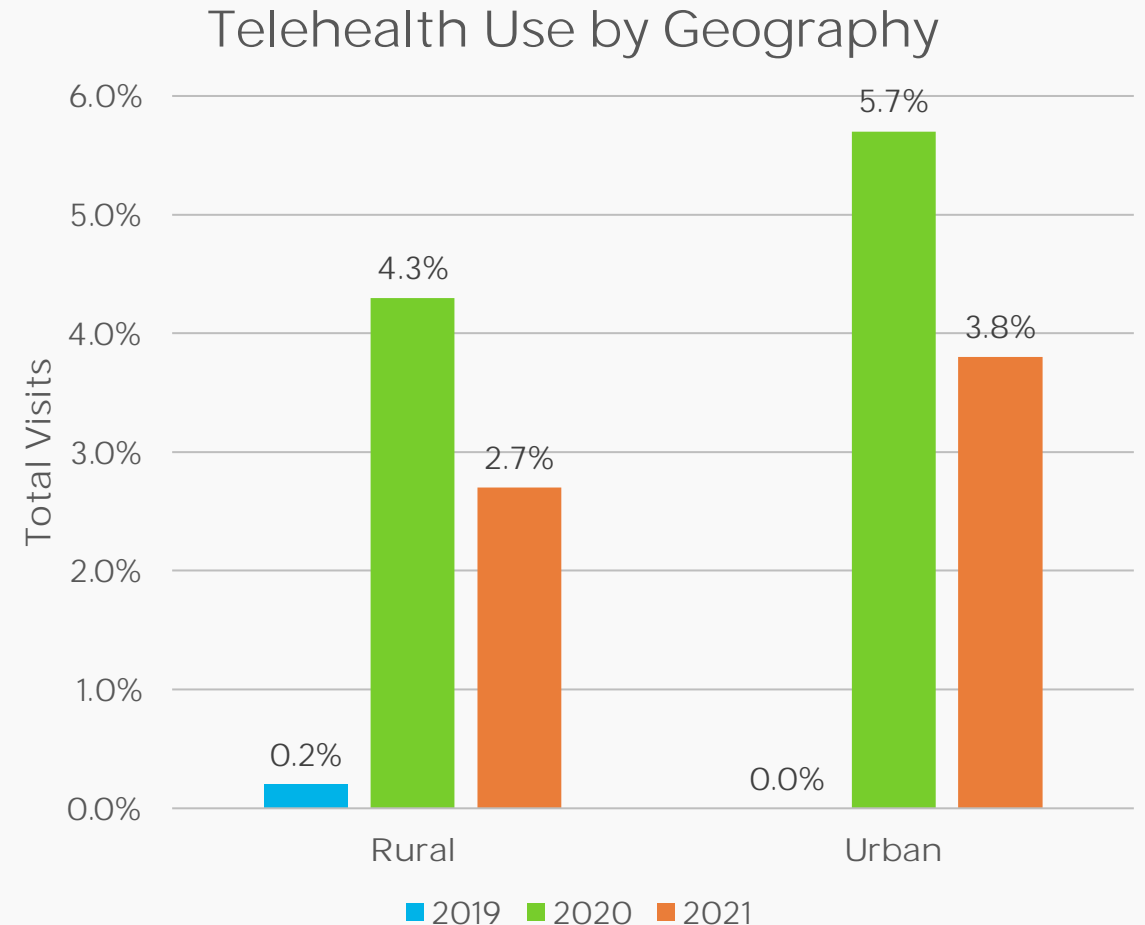


Lok Wong Samson, Wafa Tarazi, Gina Turrini, Steven Sheingold



# Telehealth After Lockdown

- Since the acute phases of the pandemic, telehealth usage has waned, but remain above pre-pandemic levels
- Telehealth appears to be used differently after COVID-19 lockdowns than it was prior



# Questions

- Who makes up the telehealth nursing workforce?
- How much does the use of telehealth in nursing differ based on position, setting and specialty?
- How is interstate telehealth practice affected by licensure compacts?



# Methods



# 2022 National Nursing Workforce Survey



# Telehealth Questions

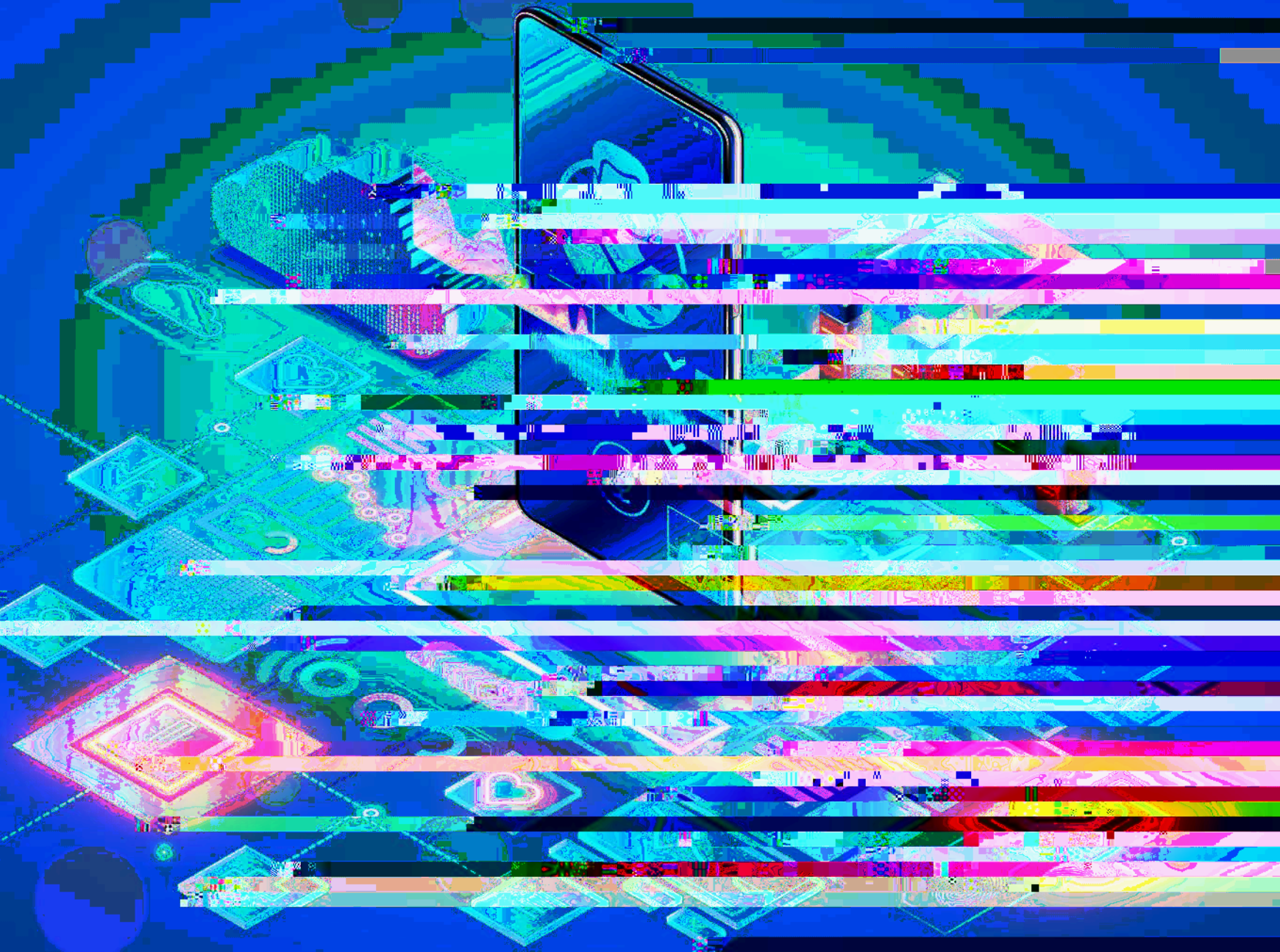
- Estimate what percentage of your work time do you provide nursing services in a patient or client in a different location, via phone or electronically
- What percentage of this remote communication is
  - Across **state borders**
- Select the mode(s) of communication you use to provide nursing services, or communicate with, a remote patient or client.
  - Electronic messaging (text message, instant message)
  - Virtual ICU (tele-ICU, remote ICU, eICU)
  - Telephone
  - Email
  - Video call

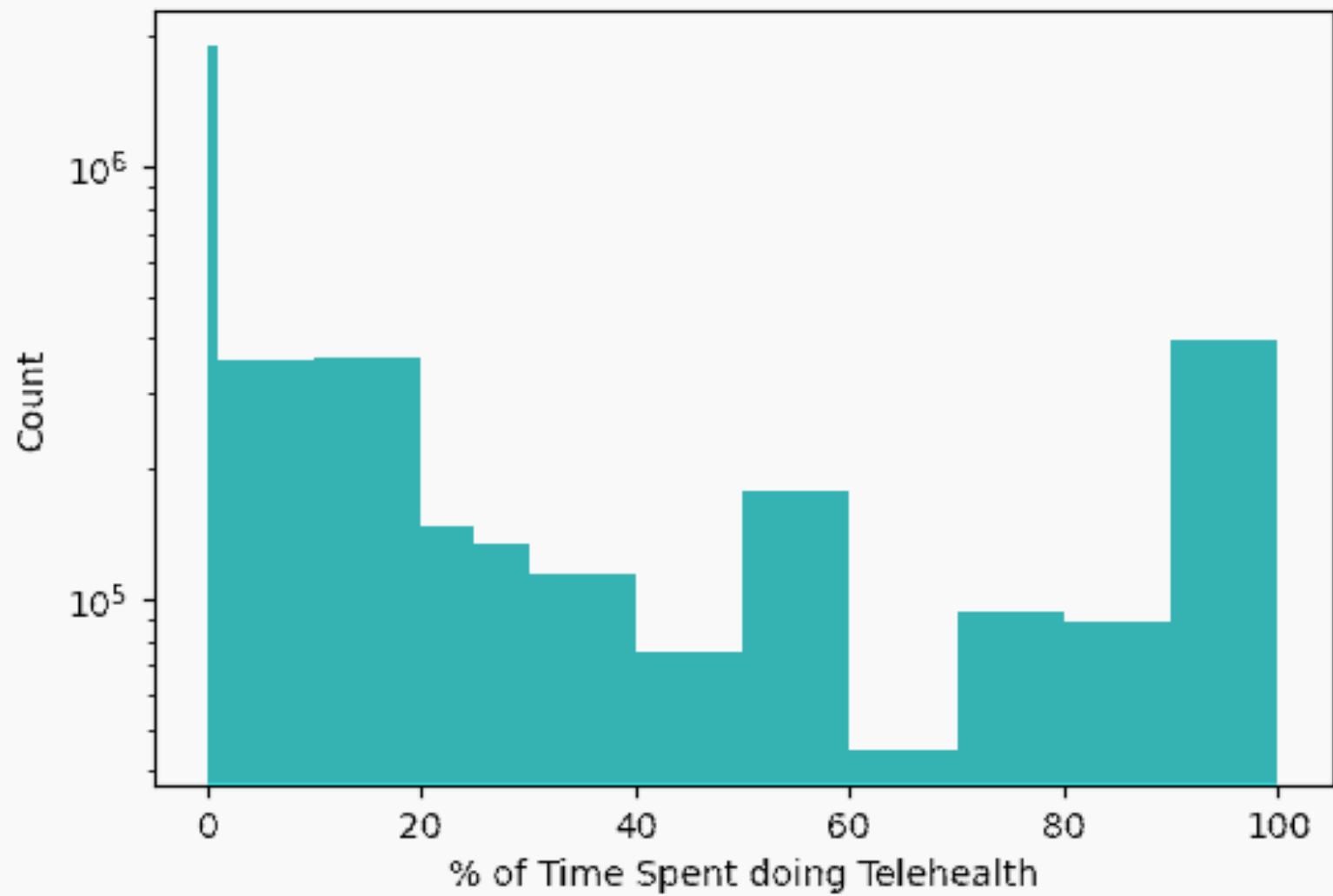


# Methods

- Respondents were weighted via jurisdiction, age, and gender, based on formal nonresponse bias analysis.
- 22,817 RNs and 18,227 LPN/LVNs answered the telehealth questions, so are considered in this study.

# Results





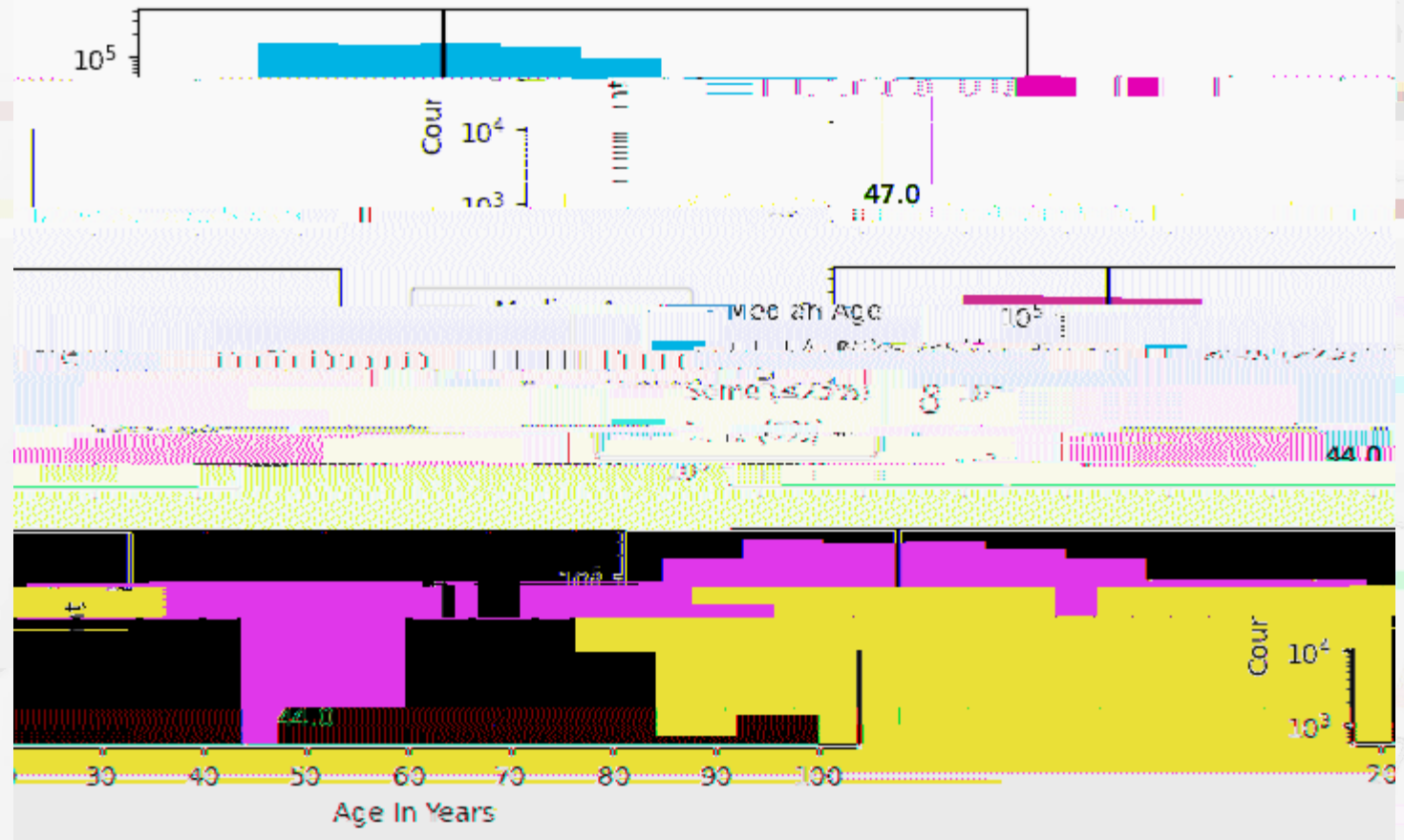




# Telehealth Provider Demographics

The three telehealth groups generally do not differ on demographic lines:

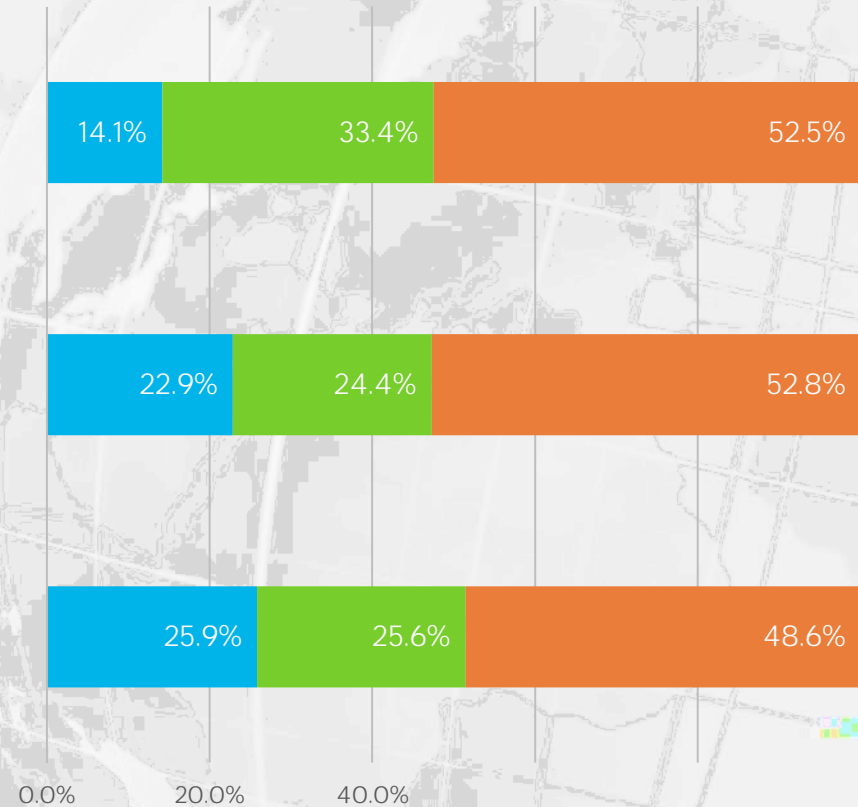
- Broadly similar ages.





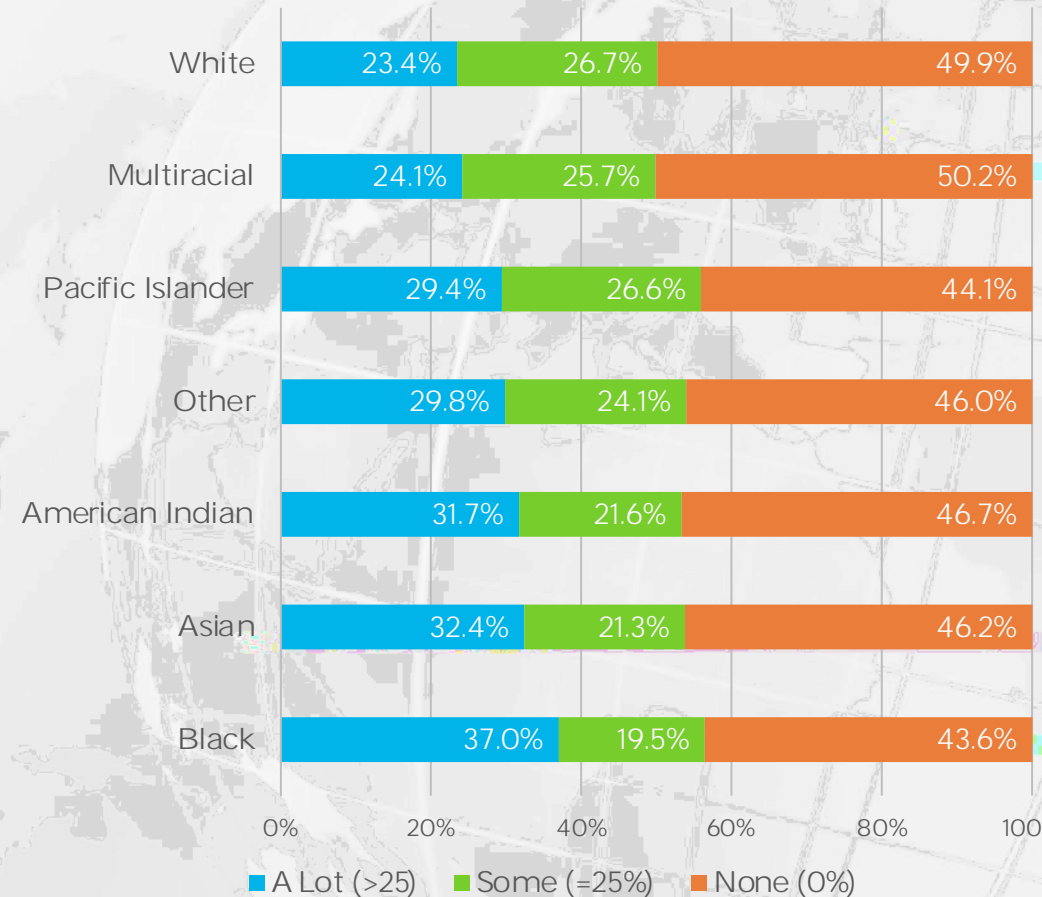
The three telehealth groups generally do not differ on demographic lines:

- Broadly similar ages
- Respondents who identify as female tend to do slightly more telehealth.

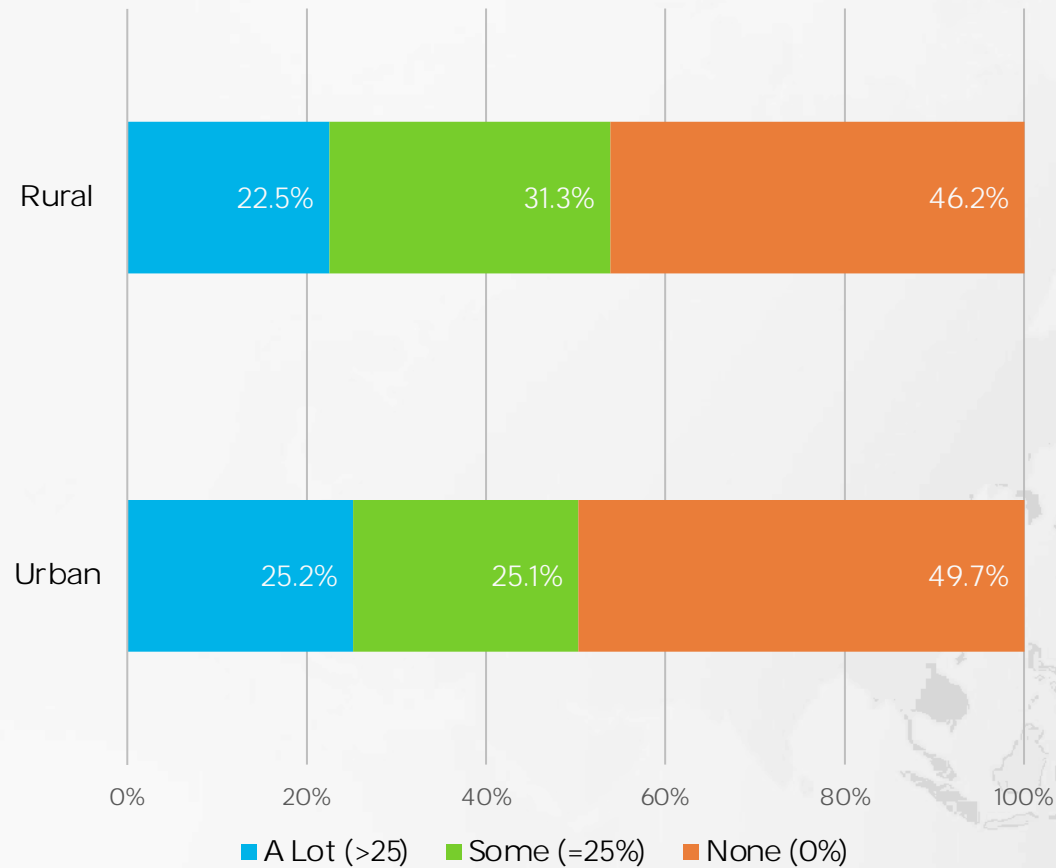


The three telehealth groups generally do not differ on demographic lines:

- Broadly similar ages
- Respondents who identify as female tend to do slightly more telehealth.
- White respondents are less likely to spend >25% of their time on telehealth.

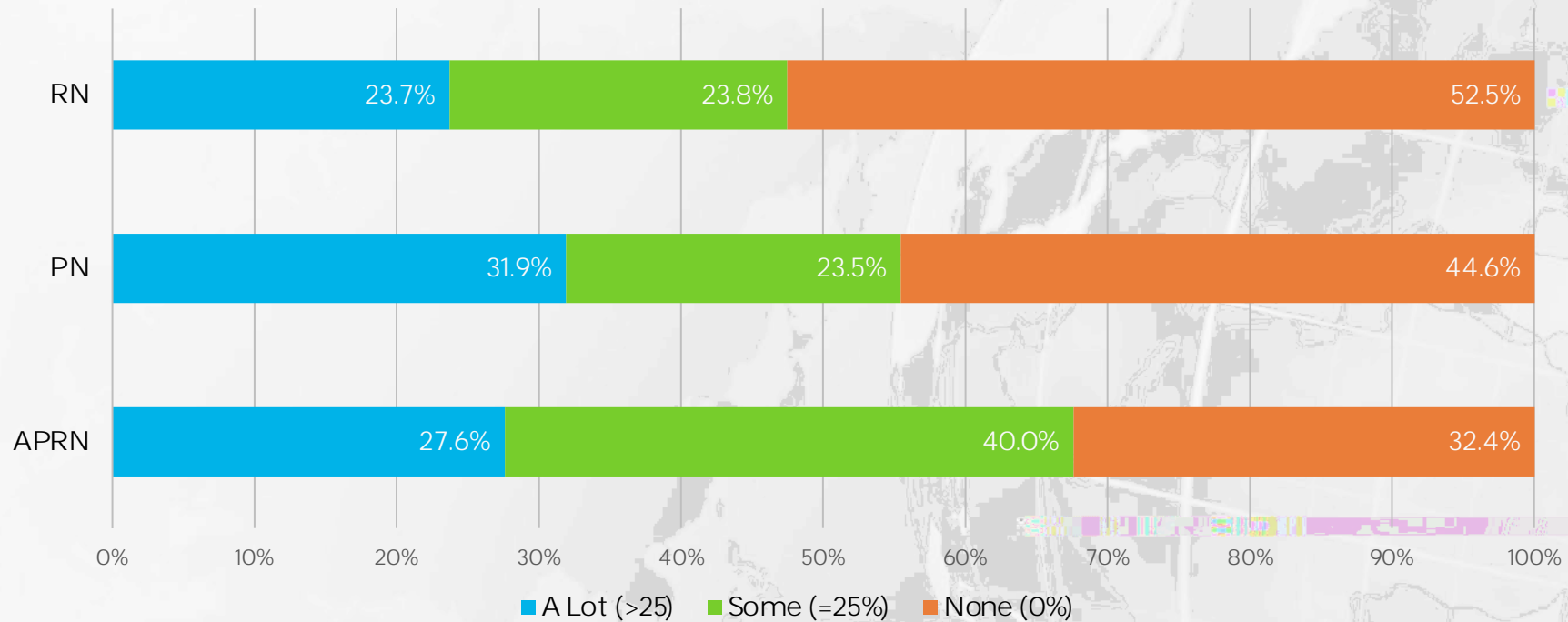






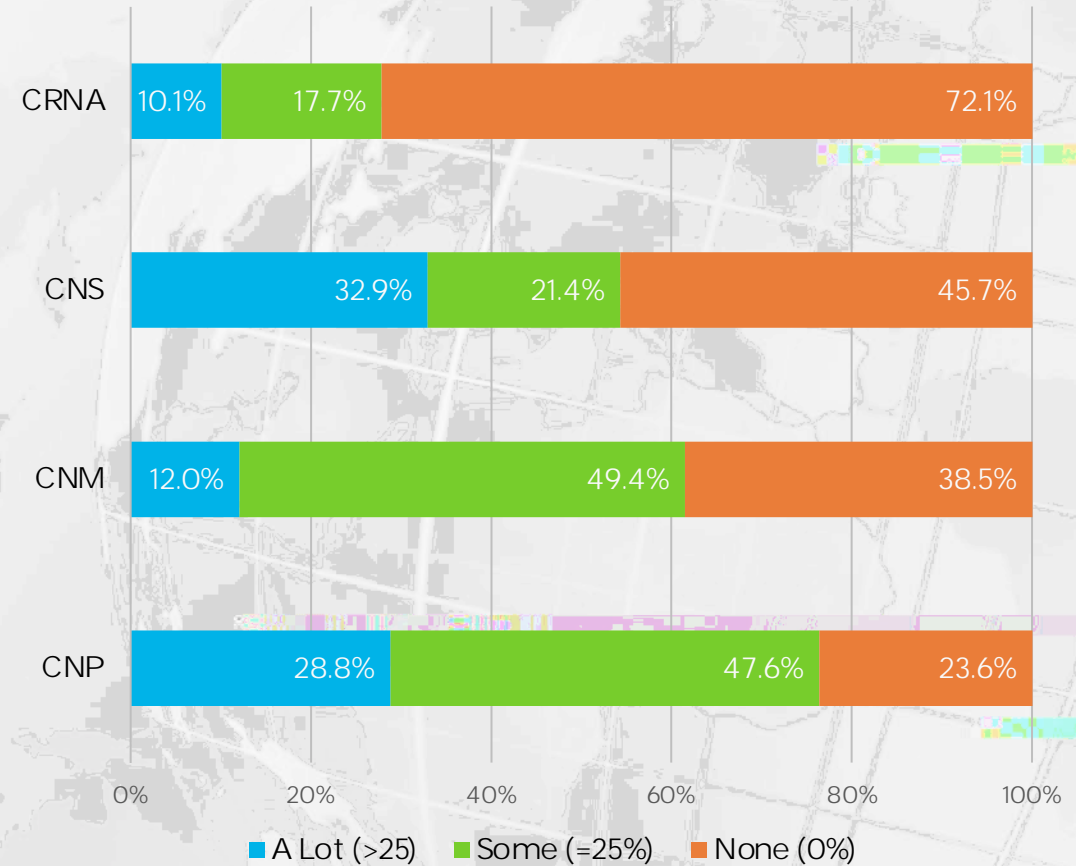
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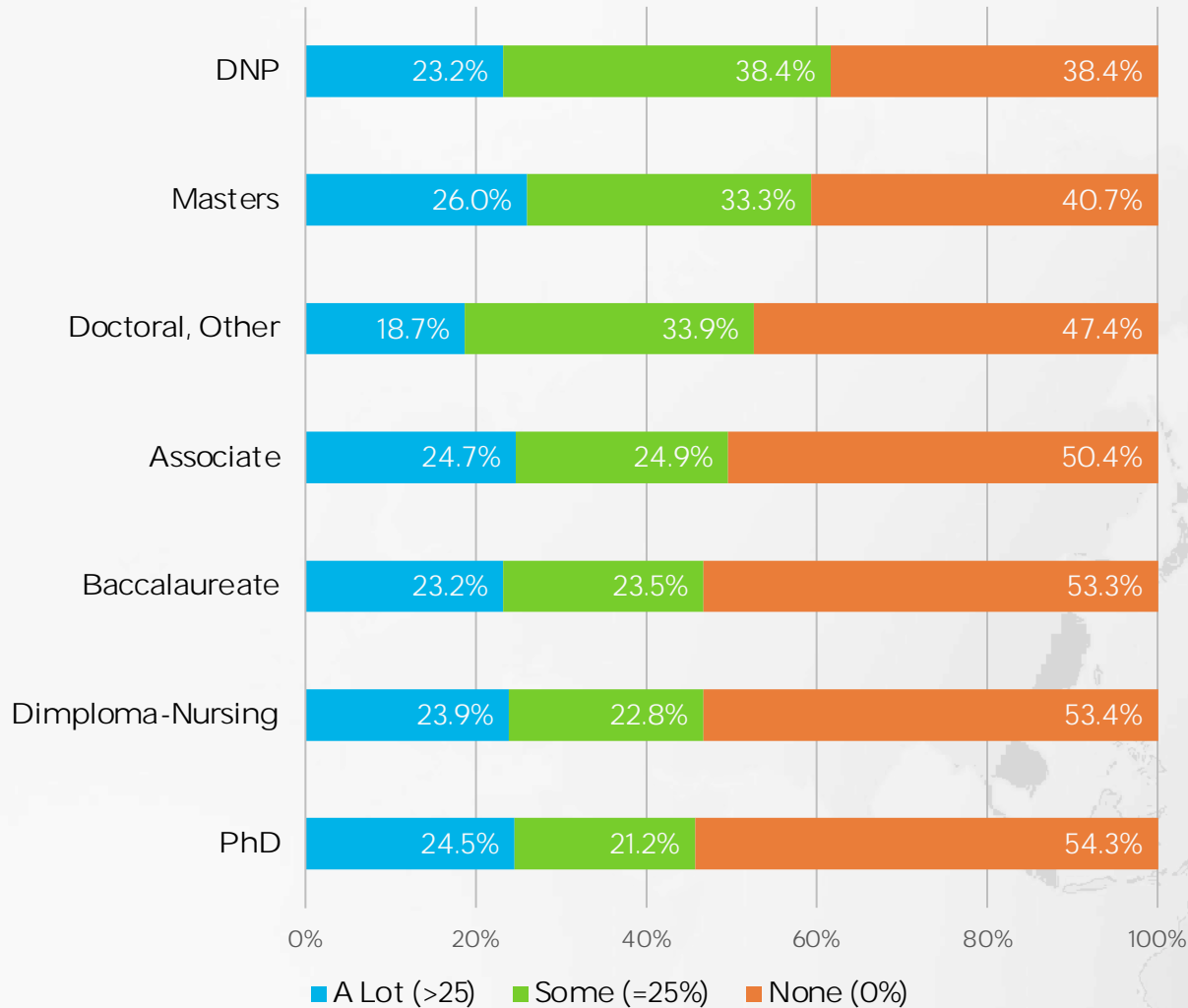
- Urban nurses are more likely to spend a lot of their time on telehealth, but also more likely to do 0 telehealth.



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- Driven by Nurse Practitioners,  $\frac{3}{4}$  of who spend at least 1% of their time doing telehealth.
- RNs with Master's or DNP degrees are more likely to do telehealth.





# Video Callers

- RNs who are much more likely to do Video Calling than average, but perform other types of telehealth around the average.
- Least likely to do 0 telehealth
- Titles: APRN
- Specialties: Psychiatric/Mental

# Remote Workers

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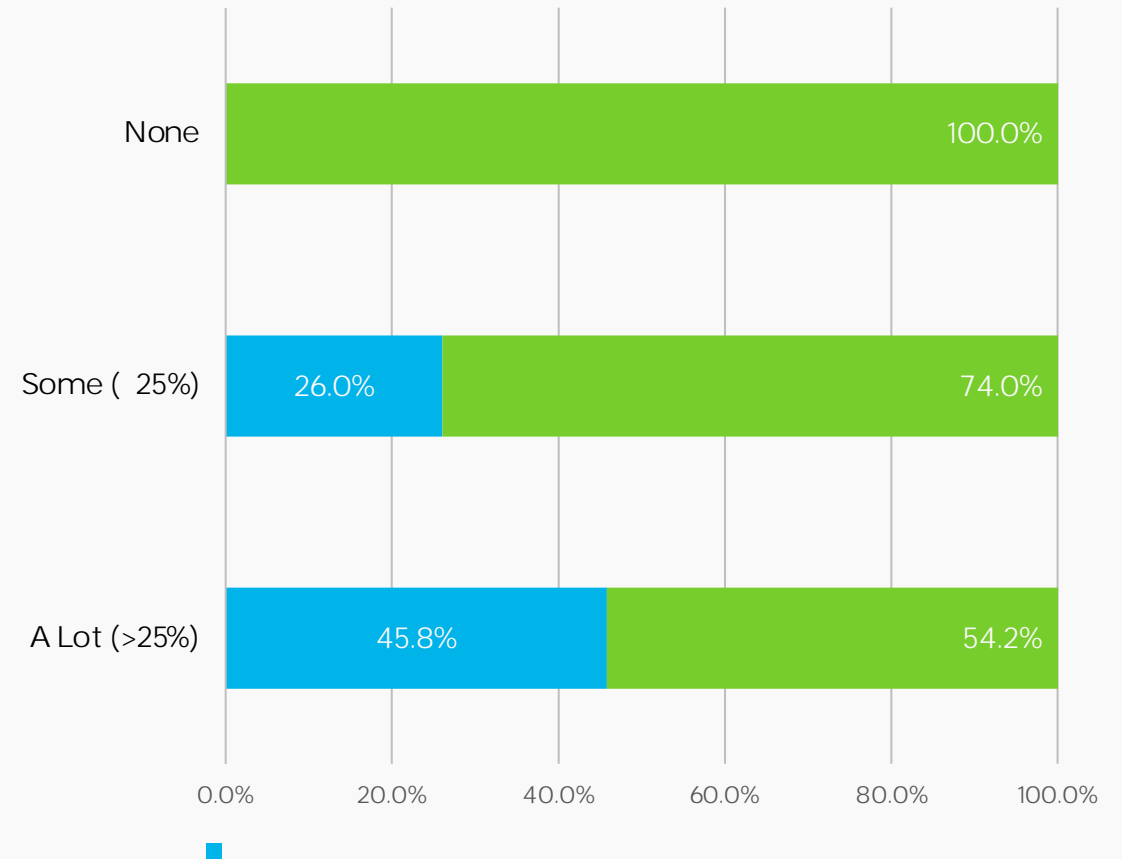
# Frontline Workers

- Significantly less likely to use telehealth generally, and most telehealth modalities, though more likely to use Virtual ICU systems.
- Titles: Staff Nurse
- Specialty: Acute Care/Critical Care, Medical Surgical, Emergency/Trauma
- Setting: Hospital



# Interstate Telehealth

RNs who spend >25% on telehealth are more likely to do interstate telehealth than those who do less than 25%.





# Discussion

- The NLC facilitates nurses practicing telehealth in multiple states.
- These results suggest that the majority of RNs working in more than 3 jurisdictions using an NLC license are performing telehealth.
- Interstate telehealth providers who practice in more than 3 jurisdictions are twice as likely to hold NLC licenses than the RN population at large.
- This suggests that the lack of an NLC license serves as a barrier to particular roles that involve telehealth across many jurisdictions.

# Discussion

- Norris and Nandy (2023) examined insurance claims data from 2019 and found that the proportion of telehealth from out-of-state providers did not differ significantly in jurisdictions that were members of the NLC vs those that were not members of the NLC.
- Our data suggests that this may have changed since the post-pandemic expansion of telehealth.

# Limitations

- Telehealth questions were limited to states surveyed via e-mail or mail-



# Takeaways

- Telehealth providers are more likely to identify as women, Hispanic, and as members of racial minorities.
- Telehealth providers are a heterogeneous group.
  - The way RNs use telehealth differs based on their specialty, title, and setting.
  - We can identify at least three groups of nurses who perform telehealth differently: Nurse Practitioners and other Video



Questions