

SHOULD HEALTHCARE PROVIDERS IN THE VA HEALTHCARE SYSTEM TELECOMMUTE?

Michelle Bergman Brittany Miller Vida Passero Enrique Mu ¹	mlbergman@live.carlow.edu blmiller@live.carlow.edu vapassero@live.carlow.edu emu@carlow.edu
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ABSTRACT

This paper proposal will examine, using an AHP approach, the decision behind whether or not Veterans Affairs (VA) healthcare providers, namely physicians, should telecommute as part of the clinical video telehealth visit.

Keywords: Telehealth, Telecommuting.

1. Introduction

Clinical video telehealth already exists in the VA. Currently during the clinic video telehealth visit, the patient is at home or in a satellite clinic and the healthcare provider consultant is at the main hospital or clinic. As a result, patients overcome access barriers and do not have to drive to VA Pittsburgh to see their subspecialty provider for some, but not all, diseases.

2. Literature Review

For this decision, telecommuting literature as well as VA experts' judgments will be considered.

3. Hypotheses/Objectives

In this decision approach, the goal is to examine whether healthcare providers, namely physicians, could be at home instead of on-site at the hospital or clinic while conducting the clinical video telehealth visit. The analysis will consider different stakeholders' perspectives..

4. Research Design/Methodology

1 Corresponding Co-author and faculty sponsor. All participants are affiliated with Carlow University, Pittsburgh, PA. USA.

AHP Stakeholder analysis will be used to analyze the decision. In particular, the perspectives corresponding to the VA hospital administration, VA healthcare providers and VA patients will be considered.

5. Data/Model Analysis

Three AHP models will be used. Each corresponding to each of the perspectives.

6. Limitations

Given that this study is currently under development, we cannot determine any specific limitation yet.

7. Conclusions

Our analysis should allow us to conclude whether telecommuting for VA healthcare providers should be implemented or not.

8. Key References

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9. Appendices

n/a.