



## A model for dispersed healthcare

***Hospitals leverage power of IP video network to link hospitals, consultants, specialists and patients to extend reach of healthcare in rural eastern Washington.***

Healthcare organizations are facing the same challenges as corporate America – do more with existing resources, or in some cases, do more with less. In 1994, two major hospitals in Spokane, Wash., formed Inland Northwest Health Services (INHS), a non-profit organization that would cast aside the competition each faced and focus on areas of collaboration. The goal was to provide better quality of service and extend the reach of healthcare services to rural communities, while also looking for areas where they could reduce expenses.

Today, INHS oversees a range of organizations providing comprehensive healthcare services, including Northwest TeleHealth Services (NTS), which links 32 rural hospitals, five Spokane hospitals, clinical and educational consultants, and condition specialists over a private, secure network. NTS recently migrated from ISDN to an IP video network and has installed a Polycom Video Multipoint Control Unit (MCU) and Gateway, along with Polycom ViewStation FX group video communications systems on roll-about carts, which allows video conferencing from multiple locations throughout the 37 hospitals. NTS has also deployed five rack-mounted Polycom VS4000 systems in fixed locations for educational centers and content providers.

Recently, NTS launched a new program enabling physicians to participate in patient consultations directly from their desktop using Polycom ViaVideo systems. Currently more than 15 physicians are actively participating in the program with significant results.

“Before we converted to video over IP, we had very limited physician involvement in conducting patient consults over our network, because it involved leaving their office to go to a hospital site with a video unit and taking x-ray and patient file information with them in paper form,” explained Margie Lockyear, project director for INHS. “*Since deploying the ViaVideo systems, physician participation has increased dramatically because they are able to participate by video from their office with immediate access to patient records, x-rays and lab results over our secure network.* This saves precious time for the physician and also saves patients from traveling back to the physicians office which may be a 300- mile round-trip for some rural communities.”

**In 2001, INHS estimates that it served more than 6,500 patients through NTS and saved rural hospitals and patients more than \$320,000.**

In one example, a neurosurgeon in Spokane holds weekly clinics with post-op patients in Okanogan County, located more than 140 miles away. Using a Polycom ViewStation FX system in the rural community at the patient’s local hospital, connected to the physician’s ViaVideo system over NTS, the physician is able to see the patients and review their progress and records simultaneously. This set up is less disruptive to the patient, who may be still recovering from surgery, as the patient can drive to a local hospital instead of traveling several hours in the car for weekly meetings with the surgeon.

According to one doctor in the program, his patients have been very pleased with the results and the fact that he’s able to meet with them on a regular basis without the need for them to travel to Spokane. *Using interactive video communications saves everyone time, and his patients show progress equal to or better than the patients he sees in his office.*

Through the use of video communications and the NTS network, INHS is now positioned as a national model for meeting the growing needs of healthcare and addressing national issues such as bio-terrorism response, quality healthcare access for rural communities and reducing the impact of shortages in healthcare professionals.