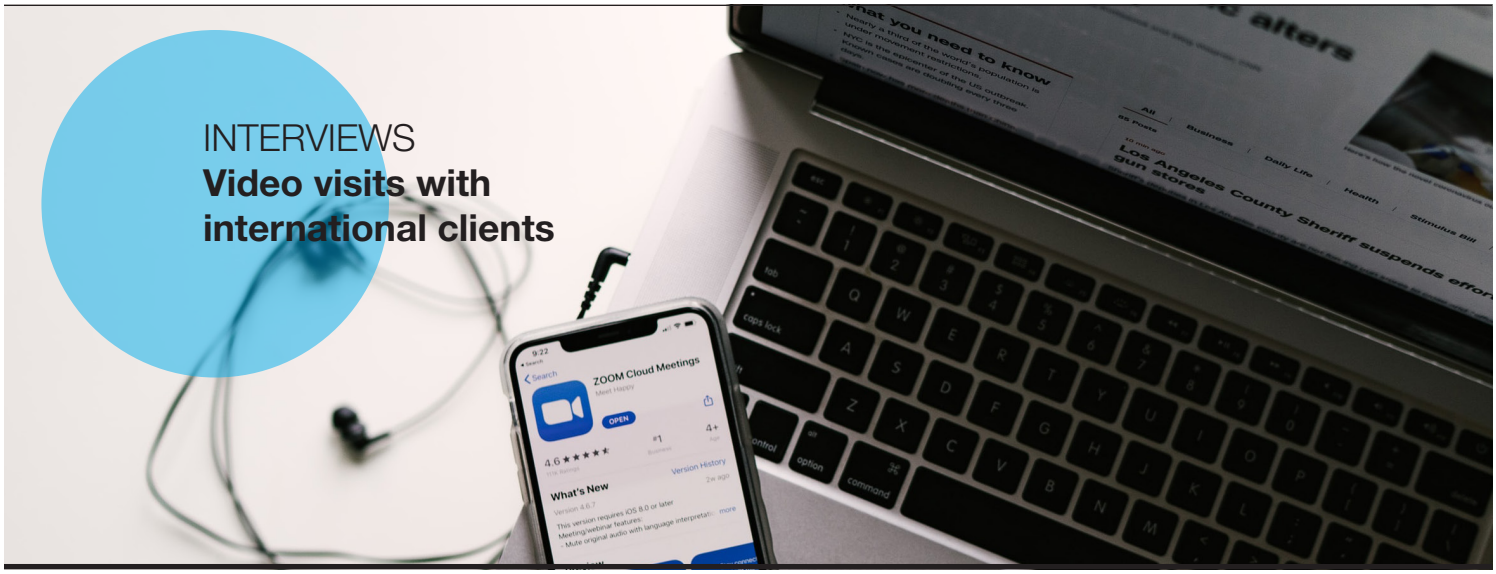


INTERVIEWS
Video visits with international clients

Due to COVID-19, patients living abroad were unable to travel to receive medical care at Mayo Clinic US campuses. Mayo Clinic began offering video visits April 29, 2020. Interviews were conducted to better understand if video visit processes posed any challenges to international patients, and to determine if expectations were fulfilled.

Interviews were conducted by Mayo Clinic International with the assistance of Mayo Clinic Language Services.

OVERVIEW

WHY: The purpose of the interviews was to answer the following questions:

- Are international patients able to prepare for video visits easily with what we've given them?
- Do the video visits fulfill international patient expectations and provide value that secures our relationship with them?

WHEN: Interviews targeted those who participated in the very first international video visits:

- International patients with at least one video visit scheduled between April 29 and May 19, 2020.

WHO: We reached out to 59 international patients who had at least one video visit scheduled:

- 38 patient interviews were completed.

In general, international patients used the following words to describe their experience with video visits:

professional, smooth, easy, customized, straight-forward, necessary option.

VALUE PROPOSITION

International patients were asked: **what did you want from the video visit and did you get what you wanted?** We learned that, in general, they got what they wanted. Here are the values they expressed:

+ **Safety from Covid-19:** the sense of safety patients got with video visits translates in trust in Mayo Clinic and Mayo as a world-class brand.
+ **Decision-making:** Covid-19 has closed many medical opportunities for international people seeking complex care. Video visits puts them back in the game.
+ **Making ends meet:** Patients can't always travel and find that video visits help them get answers, have hope and partner meaningfully with their local physician.
+ **Relationship-building:** video visits gave patients the opportunity to feel a sense of connection with Mayo physicians and Mayo at large. Video visits are personal in ways that in-person visits and phone calls are not; Mayo is in their home with them.
+ **Assurance and confidence:** video visits offers a gamble-free way of gaining familiarization with Mayo Clinic and their own health situation. With gained confidence, patients report being more willing and enticed to travel for in-person visits.

For Mayo Clinic, the value proposition for video visits can translate to patient **LOYALTY** and **IN-PERSON VISITS**.

LOGISTICAL CHALLENGES WITH VIDEO VISITS

International patients were asked if they had logistical hardships with preparing for and having a video visit. Generally speaking, patients reported experiencing very little logistical troubles. Here's what they had to share with us:

Communications & instructions

Patients spoke of receiving information via the patient portal, phone calls and emails. They described communications as **simple, clear, and well prepared**. Some challenges patients faced:

+ OSMs hard to send, doctor didn't have them. "Very frustrating."
+ Not clear if additional set up is needed for the second video call (UI doesn't indicate whether or not it's ready to go).

Setting up the patient portal

Most were established patients who already had the patient portal set up. Those setting it up for the first time generally felt **it wasn't hard and they were well supported**. Those with challenges reported:

+ Mismatch of data entered compared to what was entered in Epic made it impossible for patient to set up successfully independently.
+ Some patients reported Mayo staff calling to help them. Bogota, Columbia and Mexico Mayo Clinic representatives were very proactive.
+ A few patients called Mayo help lines while others relied on family members to do it for them.

Answering questionnaires

The majority of patients described questionnaires as **'manageable'** but others described the following issues:

+ Lack of usefulness.
+ Inability to complete long questionnaires prior to video visit, had to abandon mid-way through to join call.
+ Answers were not available to doctor during video visit (med list).
+ Some patients think some of the questions on the questionnaires are rather intimate.
+ Long questionnaire, lots of questions, too many details. "I answered some and ignored a lot of them. Didn't see the point in it."

Joining the Zoom call

Most said they had **no issues joining** and the doctor came quickly. Those who experienced challenges described the following:

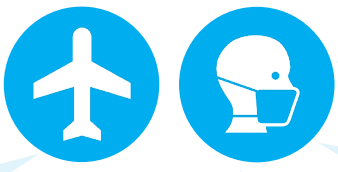
+ No shows:
  - Expected to be called.
  - Wasn't aware they had a video visit.
  - No link available on the portal to start the video visit.
+ Interpreters: some patients spoke of this as if it were up to them to ensure there was someone there to interpret.
+ Loss of sound, had to restart and switch to phone.
+ After an unsuccessful first attempt at joining, the link was no longer there (another person reports ability to rejoin after unsuccessful first attempt).

FROM VIDEO TO IN-PERSON VISITS

International patients were asked: **If you plan to visit Mayo in person, what are your two top concerns given the Covid-19 pandemic?** To quote one patient's summary: "I won't go until I feel it is safe to go." Patients are juggling the decision between seeking care for the medical condition they have (go to Mayo in the US) and the potential for getting an additional medical condition that terrifies them (don't go). They also seem to be juggling their confidence in Mayo vs their lack of confidence in social adherence to CDC protocols. Some have perceptions that US hospitals are overwhelmed with Covid-19 patients. The two main reasons they won't come to Mayo now: 1) many can't, their borders are closed, and 2) they don't feel Covid-19 is contained.

"I wouldn't dare enter an airplane."

"My son and I used to go every 3-6 months. But now, I'm concerned about airports. What are the recommendations to give to us to travel?"



"I'm pretty confident in Mayo's protocols, but the vice president not wearing a mask ... I'm afraid of rogue people not wearing masks."

"I shouldn't be afraid because I expect Mayo Clinic to be the best and do all that is required to stay safe." ... "We are proud of what Mayo is doing."

"I'm afraid of getting sick from doctors or staff."

"They are making it a big deal, which it is, but we don't know how to deal with this big deal."

"I did go in person ... I expected it to be more strict. There was no social distancing in the cafeteria. At the door they had screening. Didn't say anything about the mask, just asked if you had one but didn't show you how to use it. Some people wore them but didn't cover their nose."

REFLECTIONS & CONCLUSION

The majority of international patients interviewed reported that they did not have logistical troubles with video visits, however the challenges that were uncovered represent opportunities for product maturity, greater integration and expansion to related services.

+ Talking with international patients about their video visit experience gave clues to new opportunities:
  - **Continuum of Care:** Video visit touchpoints offer flexibility that eases existing rigid processes resulting in greater care coverage and continuity in the patient experience,
  - **Expanded interactions:** Video visits can be considered for a wide range of situations in which Mayo serves international patients, including social work, finance, etc. resulting in easing the pressure of 'condensing the schedule.' More things can be taken care of before/after the trip to the US.
  - **Partnering:** In Mayo's efforts to focus on serious and complex care, video visits offers a mechanism to be inclusive of patient's local physicians and primary MDs. There is also opportunity to hand off or coordinate local testing.
  - **Hospital at Home:** With video visits, hospital at home has begun, albeit without designing the experience and extent of that offering.

+ Video visits have reduced or eliminated the gamble international patients take when deciding if they want to choose Mayo Clinic for their medical care, and if travel will be worth it. Video visits create a connection with Mayo that entices patients to come in person for treatment.

+ Many international patients see video visits as a supplement to their in-person visits; they would continue to travel to Mayo Clinic for in-person visits.

+ Family decision-making and care is prevalent among international patients. Video visits allow greater flexibility for family to be involved.

+ Global coordination and local presence helped make video visits successful. Mayo Clinic Referring Facilitation Offices (RFOs) in Latin America were a reliable resource for patients in that region, and helped make video visits a success.

+ In general, video visits helped establish positive feelings international patients had for physicians ("*my* doctor"), for having access to expertise ("professional"), and for Mayo Clinic overall as a brand ("state of the art", "proud of Mayo Clinic").

+ International patients leveraged Mayo resources when they got stuck, and were thankful for pro-active support given by Mayo Clinic International Centers.

+ Video visits turn a potentially resentful situation into a value-add situation for patients who didn't need to travel for the kind of care they ended up getting.

+ International patients want video visits to continue to be an option in the future.

+ Mayo Clinic must continue to earn trust in in-person visits with screening, education and enforcement of Covid-19 protocols.