

Pediatric telehealth: Push is on to make it equitable for all kids

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COVID-19's arrival accelerated what pediatricians were able to learn about how kids and their caregivers interact with telehealth. The explosion of visits allowed them to gain knowledge and data it may have otherwise taken a decade to gather, experts say.

Now they are looking at the experiences and finding ways to make pediatric telehealth more equitable from a socioeconomic, cultural and medical perspective, pediatricians and those who oversee pediatric telehealth said during a recent virtual health panel, "Equity for Pediatric Telemedicine." The AMA's director of digital health and operations, Stacy L. Lloyd, MPH, moderated the panel hosted by KidsX, which brings together children's hospital and digital health company experts to build, test and deploy software for better pediatric care.

Panel participants said the increase in telehealth visits this year amplified a number of inequities that they believed existed when it came to patients accessing care from home and helped them see other pitfalls. But they noted that there were also a number of positives for patients that should be explored further.

"The future of digital medicine is just so promising for being able to provide care and get patients to appointments," said pediatrician Christina Jung, MD, medical director of informatics at Children's Hospital Los Angeles AltaMed clinics, which now have about 2,000 to 3,000 virtual visits weekly. "The best thing we are doing now ... is really figuring out what our baseline is and what all our issues are before trying to come up with a lot of solutions."

The AMA's Telehealth Implementation Playbook walks physicians through a 12-step process to implement real-time audio and visual visits between a clinician and a patient.

Spotting, nullifying inequities

Not surprisingly, pediatric telehealth experts from across the nation saw that inequities arose when families did not have broadband internet access or have a desktop or laptop computer to connect to online appointments. Connections to telehealth were less stable and images clinicians saw were not as clear.

“I read a very interesting quote not too long ago saying that the same places that have food deserts, have a digital desert ... We heard about it in the news with kids just not being able to access class and those are the same families that we have been trying to reach out with for our telehealth,” said Stormee Williams, MD, medical director and vice president of network development and innovation at Children’s Health System of Texas, a job that includes overseeing telehealth and equity.

Other areas that need to be addressed include:

- Removing language barriers. Practices are finding ways to integrate interpreter services into telehealth calls, but more must be done to make the telehealth platform appear in languages other than English and Spanish.
- Determining more about who has access and who doesn’t have access to digital care.
- Helping grandparents and others who are less tech-savvy to more easily navigate telehealth appointments.

Building on the positives

While experts determine how to ensure everyone has access to digital care equally, they also need to look for ways to build on the positives that have come out of telehealth.

No-show rates have gone down. Now physicians get a glimpse of a patient’s home environment. Multiple people can be part of a visit no matter where they are physically located, which applies to physicians from multiple disciplines being able to part of one visit and to parents who can’t take time off work to physically be in the doctor’s office. In rural states, it prevents people from having to drive long distances to receive care.

And for autistic children who perform better in their home environment and for children who cannot easily leave their home to get care, telehealth is a way to provide them more equitable care, said pediatric otolaryngologist Patrick Barth, MD, medical director for specialty care of telehealth at Nemours Children’s Health System in Delaware.

“We need to keep our focus on the children and provide them the highest level of care and telehealth is a tool to do that,” he said. “So, we just need to continue to innovate and use that technology to provide that care.”



Systemwide bias and institutionalized racism continue to contribute to inequities across the U.S. health care system. The AMA is fighting for greater health equity by identifying and eliminating inequities through advocacy, community leadership and education.