Telehealth is not a new concept for Eastern Maine Medical Center’s Way to Optimal Weight (WOW!) program. In fact, the TeleWOW! team, led by Dr. Valerie O’Hara, has been a regular “customer” of the Northeast Telehealth Resource Center (NETRC) for a number of years, requesting technical assistance with technology and the complexities of the telehealth policy landscape. Subsequently, TeleWow! team members have become telehealth champions, partnering with the NETRC and others to share their expertise and resources through regional and national webinars, conferences and other events.

With the arrival of COVID-19, Dr. O’Hara and her team had to quickly adapt their previously “well-oiled machine” to accommodate patients and families now accessing TeleWOW! services within the home environment. With five years of successful telemedicine under their belt, the TeleWOW! team saw an important opportunity to help others looking to rapidly launch telehealth to sustain access to medical and behavioral health services, both during and beyond the pandemic. The team worked quickly, and in collaboration with the NETRC, to compose an article, which was published in Pediatric Obesity in July, 2020 which describes core program components and outcomes (e.g. increased access and reduced stigma), and lessons learned with respect to implementation of a multidisciplinary telehealth program, pre/post COVID-19. The article also shares key resources, including strong mention of the HRSA funded Telehealth Resource Centers, and recommendations to “reimagine telemedicine going forward to expand effective, coordinated care, particularly for patients with the chronic disease of obesity”.

Also see September, 2019 mHealth Intelligence article: Maine’s TeleWOW Program Uses Telehealth to Take On Childhood Obesity for key program details and outcomes.

In order to assist other regional stakeholders with their telehealth journey during the pandemic, Dr. O’Hara and her team also joined the NETRC’s weekly Telehealth Office Hours to share expertise and resources specific to implementation of multidisciplinary care models via telemedicine.

“They get to see the same people each time” even on a video screen, says Johnston. “That familiarity is important. It helps them open up.”

“We need to be able to bring care to these patients rather than having them come to us,” says O’Hara. “There’s a need for this everywhere.”