

Implementing Telehealth Services with the B.E.L.T.™ Tool: A Commentary

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COMMENTARY ON

B.E.L.T.™: Arnaert A, Debe Z. BELT™: Framework for Nurse Champions to Successful Implement Sustainable Telehealth Services. *Iris Journal of Nursing and Care* [Internet]. 2019 [cited 2020 nov 25];1(5). Available from: <https://pdfs.semanticscholar.org/3659/c19d1c2d19cf35fee334b4fd261790edc934.pdf>

SUMMARY

As technology takes on an increasingly important role in our everyday lives, the concept of telehealth is taking form in healthcare. Indeed, evidence shows that it can facilitate and improve access to quality care. This commentary offers a synopsis on the development of the B.E.L.T. mnemonic, to be used by nurse champions to structure the implementation of telehealth services. Later research indicates that additional testing is needed to adapt and further validate the tool. The COVID-19 worldwide pandemic has provided the ideal opportunity to investigate this tool given the widespread and rapid implementation of telehealth in different settings worldwide.

KEYWORDS

B.E.L.T.™, Telehealth implementation, Nursing framework

1 | IMPLICATIONS FOR PRACTICE AND RESEARCH

- Use the B.E.L.T. framework to facilitate the use and uptake of telehealth services.
- The worldwide COVID-19 pandemic indicates the need for a quick systematic approach to implementation of telehealth services across healthcare disci-

plines.

2 | CONTEXT

Technology is widely used in health care and allows for improved access to care with minimal cost and need for travel. Putting in place a telehealth system and adapt-

ing it to a specific clinical context may be complex and require a systematic approach. Therefore, the use of a framework would be beneficial for nurse champions undertaking such implementation. (1)

3 | METHODS

Drawing from their previous telehealth experiences, Arnaert and Debe (2019) share their narrative on the development of the B.E.L.T. framework to complement existing guidelines and recommendations and showcase its application for the provision of telehealth services. Arnaert and Debe (2019) discuss the successes and challenges encountered when usually launching telehealth services and from these delineate the core elements necessary for a health care organization to achieve and sustain telehealth services.

4 | FINDINGS

The B.E.L.T. mnemonic integrates these core elements into a “checklist” for nurses establishing telehealth services. The mnemonic is as follows:

B: Bandwidth/Broadband: Assess appropriate internet connection and speed needed to ensure uninterrupted transmission of information.

E: Education/Environment: Develop protocols and tailor the education according to the socio-cultural environment of the patients and professionals.

L: Leadership: Assign a nurse champion to be the leader, coordinator and advocate.

T: Technology: Assess the variety of technology and available infrastructures for implementing telehealth.

This mnemonic has been summarized as an infographic by the author of this commentary to encourage use (Figure 1).

5 | COMMENTARY

The B.E.L.T. framework complements the existing guidelines for telehealth implementation and serves as an

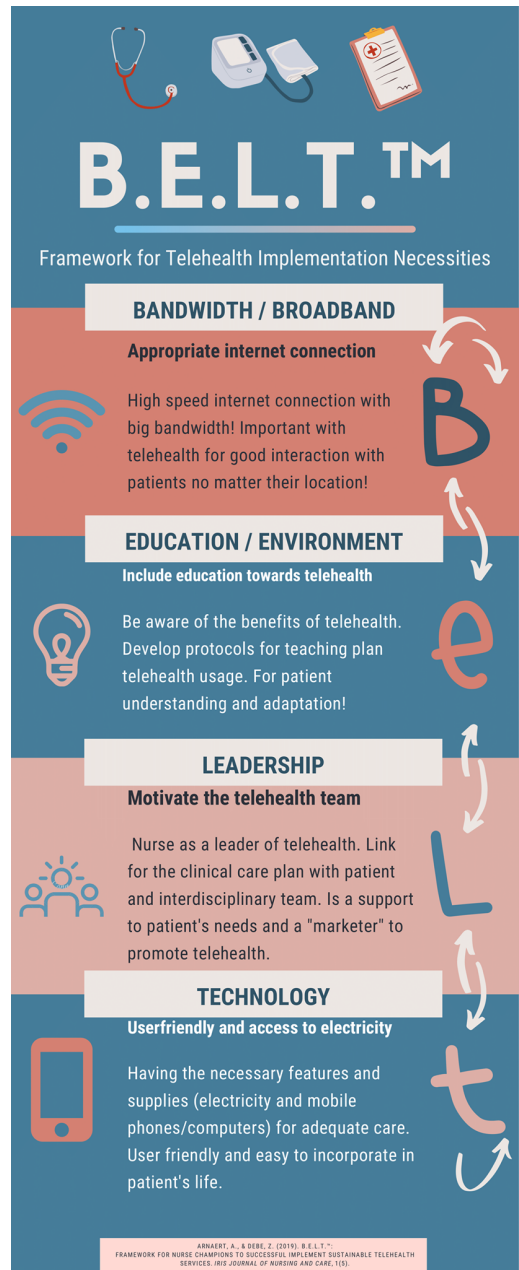


FIGURE 1 Infographic of the B.E.L.T.™ Framework

easy-to-use checklist for nurses to facilitate the use and uptake of telehealth services in health care organizations. (1) Arnaert et al (2019) used the BELT frame-

work to implement a telehealth pilot project for screening and monitoring pregnant women in Rural Burkina Faso, Africa. While the mnemonic served as the initial step to guide the implementation of this program, Arnaert et al (2019) identified other factors to consider such as conducting an assessment of the region's rural context and demographics prior to implementation. (2) Within the current context of the COVID-19 pandemic, person-to-person contact should be avoided when possible. The utilization of telehealth services has therefore increased since March 2020 and has become imperative to consultations with non-urgent clients as well as meetings with caregivers unable to accompany hospitalized/institutionalized patients. (3, 4) Finally, although the B.E.L.T. framework can be an essential tool for developing and implementing telehealth services, further research is necessary to validate this framework in other clinical settings.

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