

# Connecting Right to a Nurse From Your Chest or Arm

SAN DIEGO, CA—Home health patients are typically individuals who have been discharged from the hospital to recover at home under the supervision of a home health agency. That means personal visits to the patient sometimes several times a day.

However, patients do have situations arise when the home health nurse is not present that call for immediate answers. Patients can pick up the phone to connect with their home health nurse, but it may take some time for a callback.

San Diego-based Homestead Health, a wholly owned subsidiary of the medical alarm company Safe Guardian LLC, has come up with the CareCaller™, a device that patients can wear around their neck, on their arm, or attached to their clothing that allows instant communication with a nurse. It allows patients to call for assistance just by pressing a button.

Typically, when patients use a medical alarm company they press a button and it goes to a monitoring center. With the CareCaller device, there is no need for the monitoring center, says Exec. Director Thomas Franks. The call goes straight to a nurse. It can be the patient's own home health nurse, their backup nurse or the nurse triage call center that is backing up the home health company.

"The device acts like a cell phone," he says. "It has its

own telephone number." Patients can use the device for immediate reporting of an emerging medical situation that needs attention thereby hopefully avoiding an EMS dispatch, emergency department visit and hospital admission. It can also be used for non-immediate concerns such as confirming medications or scheduling/rescheduling appointments.

---

*"By far, the biggest operational challenge is communication and missed visits. Too often, clients wouldn't answer their phones when clinicians called to confirm appointments..."*

---

"Typically, the home health agency purchases the device for \$99 or less and provides it to the patient at no charge," Franks says. "The agency pays a low monthly service fee of around \$15 each ..... Once the patient is done with home health, it is the agency's call to either repurpose the device for another patient or give it to the original patient. Patients (or their family) pay \$29.95/mo for the continued service.

The company recently implemented a pilot with Accessible Home Health Care

of Houston. The home health agency provided a selected group of high-risk clients the device at no charge. Accessible CEO Randy Paramore was quoted in a case study paper about how it used to be before CareCaller.

"By far, the biggest operational challenge is communication and missed visits. Too often, clients wouldn't answer their phones when clinicians called to confirm appointments, even 15 minutes before the scheduled time. This resulted in a significant number of missed appointments and missed appointments can have a significant impact on the patient's health. When the patient doesn't receive his or her treatment as prescribed, the risk of readmission is increased."

In a follow-up interview, Paramore says that his interest in CareCaller was piqued because the population the agency served "was an older adult group that, for the most part, did not have previous knowledge of complicated IT tools. We wanted to find something that was simple, would solve operational issues in the home health environment and would have a positive impact on readmissions."

The agency uses its business system software and data from its own clinical team to classify its patients from the most critical stage down to those it supports with non-

medical services. "The initial population for the first round was our most critical patients," he says. "We had 25 patients in that group. Sixty-to 75 percent of them used the CareCaller to talk with a nurse. For the second round, we used the next level down of our most critically ill patients. There were 20 patients in that group." For them, the percentage that used the device to contact a nurse was similar to the first round group.

One important goal was to improve the missed appointments metric. With the nurse's voice right in front of the caller, the idea was that there would be a greater chance of the patient answering. And, it was

answered. After six months, the number of missed visits recorded by the home health agency was reduced by 50 percent, he says.

Additionally, for these two groups the initial data on readmission shows a reduction of 1 percent. Not all of the missed visits and readmissions reductions were due to the CareCaller-some were a result of changes in internal processes- but the pilot was successful enough that it is now being rolled out to every client, regardless of severity of their medical status, he says.

Paramore's agency is a franchise of a national brand. He is working with Franks to hopefully roll out the CareCaller to all of the parent

organization's franchises.

In addition to offering the patient an instant connection to a nurse for an immediate question or concern, there's also another potential use. Franks says that patients who use CareCaller as an ongoing service can give this phone number to the hospital upon admission and therefore receive their post discharge call (s) on that number. That, hopefully, provides a better chance that the phone will be answered by the patient.

Franks says that the two year old company's primary line-up of customers is home health entities with a secondary market of caregiver companies. ■

## Forging That Personal Relationship Between the Call Center and the Practices

**WILMINGTON, DE-**For the virtual front office call center, maintaining a harmonious working relationship with the medical practice community is vital. Toward that end, some call centers will periodically visit the practices and invite the practices to come to the call center.

Few might have as extensive a program as the virtual front office call center serving The Medical Group of Christiana Care, a part of the Wilmington, Delaware-based Christiana Care Health System. "We are three and a half years young," says Sean Gallagher, Director, Medical Group Access Center. "Right now, we are handling seven

primary care practices and one specialty practice (75-80 doctors)." Altogether, there are 15 practices in the medical group and the goal is to eventually serve all of them.

Within this access center every agent has been trained to handle any phone call. That organizational format plays into how it forged that ongoing relationship with the various practices. As has occurred in other similar scenarios throughout the country, when this access center was established, there was some initial physician pushback. The way the access center has mitigated this is to visit the individual offices on an ongoing basis. The visits are

intended to spread the message that the partnership between the offices and the access center is designed to "to ensure our patients have a positive interaction with The Medical Group and Christiana Care, whether it's over the phone or in person," he says.

Call volume patterns are analyzed and during times of lower call volume, which tend to be Thursdays and Fridays, the access center sends two to three agents at a time along with a supervisor to visit a practice location.

It is not an ordinary meet and greet and see you later kind of visit. Rather, "we are there for two to four hours," he says. "We're there to