



April 2017 Commitment to Care Quality Topic of the Month

Telemedicine – Creating a Culture of “Care in Place”

Innovative Uses of Technology Spells Increased Quality and Satisfaction for Nexion Facilities

The dwindling revenue streams and influx of more clinically complex SNF/LTC admissions forced the Nexion Team to think differently and find a new practice model that would meet their needs with a relatively cost neutral solution. They found that Telemedicine (TM) bridges that gap; by linking the residents and their clinical practitioners with staff and at times families to provide improved quality of care.

Why did Nexion choose to implement Telemedicine?



Return on Investment: Is the bottom line

Leadership of the Nexion Team found that the value of TM implementation for managing unnecessary Return to Acute (RTA) is reflected in quality of life improvements.

In addition early physician intervention leads to the reduction in incidence and severity of common hospitalization diagnosis of associated conditions/comorbidities including:

Sepsis - \$31k per episode
UTI - \$23k per episode
Respiratory exacerbations - \$30k per episode
Myocardial Infarction - \$37k per episode
Stroke - \$29k per episode
Pneumonia - \$22k per episode

References: Governing.com 2011 Study. For conditions outline above Texas averaged 4th – 6th highest per episode per condition cost in the US: ncbi.nlm.nih.gov.

Med PAC estimated that 75% of re-hospitalizations are avoidable and cost up to \$44 billion annually.

With this data in hand it seemed obvious that this was the way to go. Keeping residents in their home while meeting their needs under their physician's direction, appeared to be the best solution available.

Challenges and the steps to getting started

There were three significant challenges that Nexion had to overcome in each of their facilities in order to implement the TM system they chose.

1. Overcoming staff fear of new technology,
2. Physician and extender buy-in, and
3. New wiring and increased bandwidth in order to run the new technology.

Nexion tackled the above challenges in this order:

1. Telemedicine set up – contract, startup related tasks, equipment procurement, Wi-Fi support and data streaming with the internet provider;
2. Staff Competency – Monthly return demonstration sessions;
3. Electronic Medical Record (EMR) – integration;
4. Satisfaction – Resident/Family and Physician surveys monthly;
5. QAPI

How Ridgecrest Healthcare & Rehabilitation Center uses their TM system

Last summer the Team Ridgecrest Healthcare & Rehabilitation Center (Ridgecrest) implemented their TM system. Both primary care physicians that see residents in their center were supportive of the new technology and had their personal technology (Smart Phone) configured to support the use of their system for communication.

Currently Ridgecrest uses the system; which is on a portable rolling cart, easy to transport to and from resident rooms as needed, starting on admission. When the resident presents at the center for admission the facility nurse sends an electronic notice to the primary care physician (PCP) to let them know that the resident is there. If the PCP is available they can choose to connect with the center to take part in the admission process and discuss the residents' plan of care. The TM system is also equipped with a webcam so that all can be involved including the resident, family and center caregivers. If the physician is not available immediately he can respond to the initial notification by making an appointment for the facility to contact him for the Admission TM session. In addition should the physician want one of their extenders (nurse practitioner or physician's assistant), to manage the TM session he can indicate that by messaging the center, who then simply contacts the extender to perform the TM session.

“Telemedicine enables me to extend myself further as a provider. With my busy schedule I am unable to be at the facility physically on a daily basis. Telemedicine helps me circumvent this reality by allowing me to lay eyes on and interact with my patients at any time. Therefore making better informed decisions about their care and hopefully preventing any unnecessary rehospitalizations,” stated Dr. Samuel Mitz



Jami May, RN, DON at Ridgecrest Healthcare & Rehabilitation Center with the Telemedicine Unit.

“Families like the TM system because they see that they are going to get quicker access to the residents PCP using the technology”, stated Ms. Jami May, Director of Nursing at Ridgecrest.

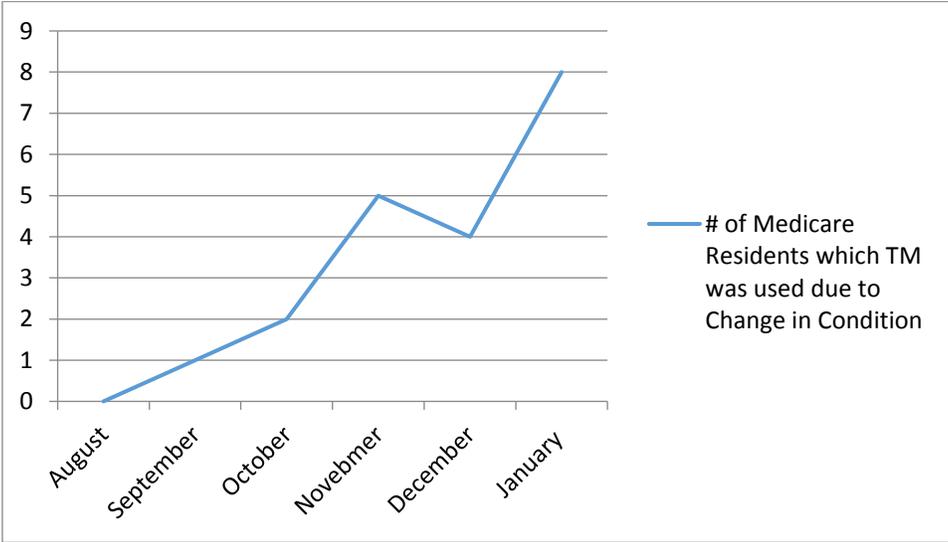
Ridgecrest is fortunate that their PCPs are in their center very frequently therefore their TM system is not used as much for change of condition. Ms. May said their short term goal is to work with their Specialists in order to use the TM system for follow up care, thus reducing the need to transport the resident. The webcam enables physicians to see incisions, wounds etc. allowing for a complete comprehensive assessment. The center will also be getting a stethoscope and BP extension so that physicians will be able to hear lung and heart sounds through the system.

“With patients coming to us sicker the TM system has been a wonderful tool to help us provide more timely patient care and enables us to provide better continuity of care”, stated Ms. May, “another benefit is that our nurses are learning assessment skills directly from the Physician; as he asks them assessment questions during a live TM session”

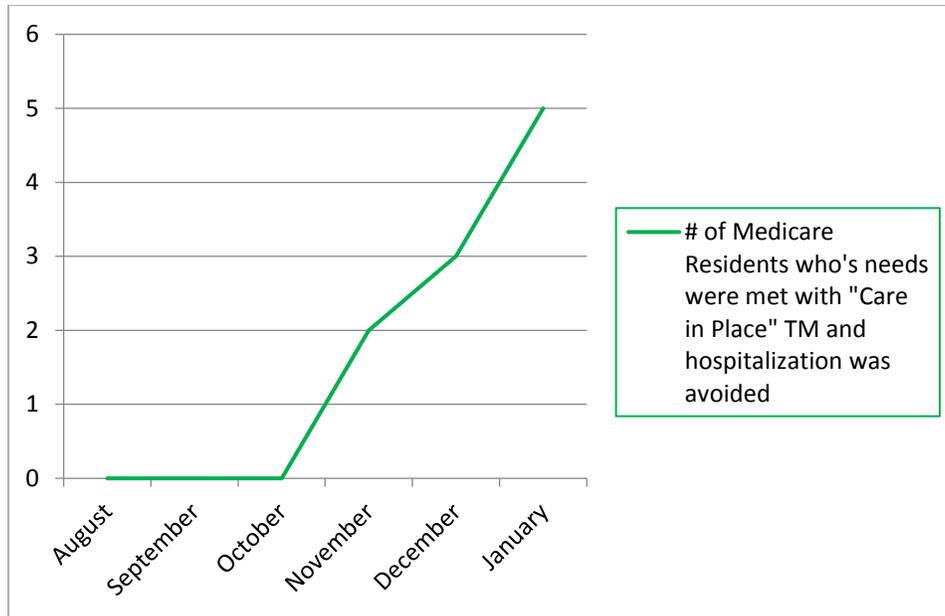
TM usage data

Unlike Ridgecrest, Millbrook Healthcare & Rehabilitation Center (Millbrook) another Nexion facility uses their TM system more for managing change of conditions.

TM used for Medicare Residents with Change in Condition at Millbrook



TM usage resulting in avoidable hospitalization or “Care in Place”



“Not only has our Telemedicine System helped us in preventing potential bounce backs to the hospitals, the iDocsWeb system has also helped in giving our nurses the needed confidence to perform clinical assessments on complex residents’ change in conditions – confidence gained by observing the physicians during several iDocWeb sessions.” stated Chudy Uchegbu, Administrator of Millbrook Healthcare & Rehabilitation Center

Benefits of Nexion’s TM system

- Improved Quality of Life for residents, which has led to overall stakeholder satisfaction;
- Increased clinical confidence in the facility staffs ability to ‘Care in Place’;
- Increased resident confidence in facility care and referral source satisfaction;
- Mitigating return to acute (RTA)-reduce unnecessary hospitalizations.

Long Term Benefits Nexion still hopes to see:

- Ability to avoid penalties
- Ability to use the system for follow up care instead of transporting compromised residents

So what is the bottom line?

Of course, there is a cost for startup and a monthly fee for the TM system that Nexion uses. However, after the second resident has successfully been managed in the facility and avoided hospitalization the company breaks even on the service and actually saves money on every subsequent resident that benefits by having their needs met in the center. In addition to financial benefit Ridgecrest has gone from being a Three STAR facility to a Five STAR since last year.

“Our Telemedicine platform equips our physicians, clinicians and administrators with a progressive and thoughtful approach to managing and ensuring the Quality of Life of our residents. As an Operator I feel I have provided my team with an extraordinary tool to take on unnecessary hospitalization maximize internal expert resources and achieve stakeholder satisfaction. iDocsWeb offers a solution to our strategic plan to advance our Quality goals and achieve Operational efficiencies at the same time”, stated Meera Riner, COO, Nexion Health Management

Having the TM system just makes good sense all the way around. It's a Win!