


The Simple Cell Phone: **A Point of Care Solution for a Hospice in Texas**

By Scott Hermann & Victoria L. Jingle

Two leading innovators in the world of hospice automation came together in early 2007 wanting to help hospices by providing an automated service for their mutual clientele field staff care givers. They started by using GPS cell phones at the point of care to help their clients automate and eliminate costly manual paper processes. This team has now produced an automated process for collecting field staff data, in real time, from the point of care for the Community Hospice of Texas (CHT) in Fort Worth.





This is the story of how it all came about. The technology and the application have been welcomed by field staff and is the number one reason that CHT has seen a large increase in their field staff's productivity and visit record compliance, while reducing costs for their agency.

The story begins in 2007 with three companies trying to get better accountability for field staff at a hospice in central Texas. Suncoast Solutions, CHT, and CellTrak came together with a plan to help increase compliance and productivity while potentially reducing the current rising costs of doing business. The first step in the process was to make sure that the front and back office software and the cell phone servers could exchange data in a fashion where the client, CHT, would not be burdened with double data entry or have to re-key information from one place to another. It took a few months, but the engineers made choices and used client input to complete the mission. All of the clinical data in the client's patient scheduling servers could be exported to the ASP servers in Illinois. The field staff data, which includes time and attendance, miles traveled as well as the visit record, could be imported back into the CHT servers located in Texas. Clinician data could be entered into servers (as it always had) and data would get returned, so CHT could run its business better than ever before. Those business processes included completing payroll in a timely manner with fewer errors, and being able to access point of care information in real time anytime they chose. CHT was now ready to become the test/pilot for the new technology and automation at the point of care.

The next step in the process was to decide how many users and what location would make the most sense for CHT to launch the pilot. CHT has staff in seven locations covering 25 counties in central Texas. Some of the decision criteria for what location to choose included finding which counties had the best cell phone coverage areas, as well as how the administrators and corporate folks at CHT could monitor the pilot and be able to help if problems were to arise. The corpo-

rate location in Ft. Worth was chosen. The main client server was hosted nearby, the largest administrative staff to support the pilot was located there, and the executive staff would be able to see first hand how the pilot and its results impacted their day-to-day 24/7 operation. In August 2007, 10 certified nursing assistants (CNA's) went out on a warm Monday morning equipped with their new cell phones, loaded with the point-of-care application, and their normal paper charts to be used as a backup, in case the service or any of the technology failed.

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Human nature then took over as it does with any new project or program that uses a new technology or application. The administrative support staff got calls from the field when a staff member forgot to start or end a visit when they arrived or left a home. These calls were accepted as part of doing things a new way. The good news was that with the administrative tools that the cell service has, adjustments were allowed to be made to the visit records so that those trips were not a waste of time and effort. A few other minor problems occurred in those first few days, but the results were fantastic overall. By day four, the staff knew to start the cellular application while still at home every morning. This way they started their day, and probably their coffeepot too, while the cell phone would pull in their daily schedule.

They now understood that once they left home, they no longer had to enter or even look at their odometer since the automated paperless service with built in GPS and mileage management features was gathering that data for them. What time did they arrive and leave was also no longer an issue once at the patient's home. The service starts and marks their start time as they said hello to their hospice patients. Once they "punched in" on the cell phone at the home, the cell phone automatically pulled the patient specific plan of care that was developed by CHT's clinicians. The clinicians were only entering data into the client's server, but their care plan was getting out to the cell phones in the vast territory those first 10 aides were covering. Once it reached the phone, the CNA could now read exactly what they needed to do for that patient and go about their work. Once a task was addressed, they could enter whether the task was completed, not completed, or if the family or patient declined the task/

service. They added a few patient specific notes, entered their travel time, and went to the next scheduled patient. Simple, easy, and the information could now be accessed in the office by administrators and used to update nurses and doctors of a patient's current status.

All in all, the service began to become known in the other office locations at CHT, and as more folks heard about it, they wanted to know when they could throw away their paper records, too. After only 10 days with the initial pilot group, the results were better than expected so CHT decided to move forward and roll out their point of care automation solution to all of its offices and locations. They added an additional 25 phones in September, 20 more in October, and today have over 65 aides using the service on two different cell phone networks, and are using Blackberry™ devices in one location. With the improved productivity, CHT now benefits from accurate real time information from the field, integrating back into their Suncoast Solutions software program. This eliminated waiting on paper to arrive from the field by hand delivery, fax, or snail mail. The fact the automated service and the solutions software had built the proper import and export means that no one had to re-key information from paper into the any servers. This helped eliminate errors that occur while reading paper records or errors from fatigue when typing data into the patient record, or the staff's payroll and reimbursement accounts.

The new service helps CHT with the quality of patient care documentation. The automated service with its configurable parameters has also helped CHT with increasing their visit compliance. CHT becomes one of the first hospices in the nation to move forward with this next generation in home health and hospice management solutions. The easy to use service has helped eliminate mental and physical entry errors into the data base system.

CHT feels that the automated service provides field staff with built in safety features in case of traffic accidents, inclement weather, or vehicle break down. They know where their staff is and can send help if needed. CHT has also gained both strategic and economic advantages for their hospice. Since CHT has successfully deployed its real time point of care solution, they have increased productivity to the point of adding staff without extra administrators, while also taking on additional billable patients.

"It was very important for us to have a service available 24/7 so that our staff and patients receive up to the moment changes to care plans as well as schedules that routinely occur in hospices today," said Viki Jingle, CHT Executive Vice President. "CellTrak along with the

Suncoast Solutions Hospice software enables our field staff to quickly enter data at the point of care, and we get that information back to our offices after each visit. The days of waiting for the paper to arrive with the details of each hospice visit are long gone here in Central Texas. We are reducing our costs by eliminating manual administrative work, and we gain significant savings on mileage reimbursements. Our compliance is increasing and ensures that we have the details required for CMS regulation CR5567."

David Swart, CHT Senior Director of MIS, mentioned, "CHT is pushing to add new features to their service, and we feel it has the right platform in place to continue advancing its service in the years to come. We have no idea how we managed our business on paper the last few years prior to implementing this service."

As you now know, this story has a very happy ending for everyone involved. The solution works and automates the field staff at the point of care with a very easy to use application working on a simple cell phone. It can be used by any home care or hospice agency, and it also proves how far we have come in the home health and hospice world. We can now start to use emerging technologies, or even simple ones like a cell phone, to improve patient care, gain better productivity, and implement a program that can save time and money for home care and hospice agencies.

We as leaders in our industry need to continue to push the envelope to obtain services to better help our patients and reduce costs as regulators and insurance companies cut back on their services and the fees paid to our agencies. The most amazing thing about 21st century medicine is it is seemingly held together with paper records and processes. This can change overnight if we in the industry allow it.



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