

Parkview Medical Center Increases HCAHPS with PatientTouch® First Dose Education

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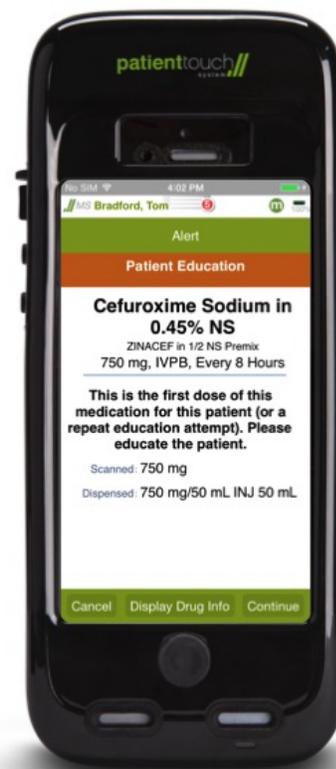


Patient experience is more crucial to hospitals today than ever before. The value-based purchasing (VBP) program, launched in 2012, bases as much as 30 percent of a hospital's incentive payment on patients' evaluation of its performance in the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS).¹

One hospital tackling this challenge is Parkview Medical Center, a 350-bed nonprofit hospital in Pueblo, Colorado, whose vision statement is, in part, to "provide healthcare experiences that exceed the expectations of our customers."

This dedication is part of the reason why over the last eight years the organization has equipped its clinicians with PatientTouch, a smart mobile point-of-care solution that orchestrates people, data, and processes in real-time. Over the years, one of the many safety benefits the technology has brought to Parkview is automating the hospital's bar-coded medication administration (BCMA).

More recently, Parkview expanded the PatientTouch application with the recently introduced First Dose Education, a workflow support module that automatically detects when the first dose of a medication is being administered and notifies the clinician before the BCMA to educate the patient and inquire about questions or concerns. From the mobile technology, the clinician can then fully document this engagement-driving interaction in the electronic health record (EHR).



Since implementation, Parkview's HCAHPS scores have increased, including the particularly challenging medication communication metric, which rose by 50 percentage points. This kind of improvement is crucial because the Centers for Medicare and Medicaid Services' (CMS) VBP program reimbursement evaluates both a hospital's HCAHPS internal improvement and its performance against other hospitals.

Apart from the patient experience improvement, Parkview clinicians report that PatientTouch and First Dose Education helps them deliver safer, higher quality care that improves their patient communication and engagement and strengthens collaboration with the care team.

Patient safety essential to experience

Ensuring a positive patient experience starts with safety on all levels. Medication errors, such as omission, wrong dosage and infusion rates, are among the most common mistakes that lead to longer hospital stays, increase treatment costs and severely impact the patient's and family's experience.

To reduce these errors, in 2007, Parkview automated its BCMA process with PatientTouch. Operating on an intuitive, Apple iOS or Android platform, PatientTouch automatically guides clinicians through safety checks at the point of care to administer and document medications through positive patient identification.

The PatientTouch handheld scans and links barcodes on patient wristbands and medications to ensure that the right person is receiving the right medication or service at the right time. PatientTouch also scans the barcode on the

¹ Press Ganey Associates. White Paper: "The Rising Tide Measure: Communication With Nurses," 2013. <http://www.pressganey.com/researchResources/white-papers/white-papers-for-hospitals/communication-with-nurses-rising-tide-measure.aspx>

clinician's ID card to log in and record the nurse's identity, provide care team members with access to real-time patient data, and enable clinicians to upload information from the bedside into the hospital's information systems.

Since the PatientTouch implementation, medication errors significantly reduced at Parkview from 20 percent to 8 percent. In addition, the number of serious errors (for example, the wrong patient, drug or dose) reduced from five to zero.

Education and communication drive satisfaction

Several years later, when the First Dose Education workflow support module became available, Parkview expanded the functionality of its PatientTouch mobile application. Leaders agreed that the patient education and engagement tool would positively impact the hospital's BCMA process and patient outcomes considering that research shows as much as 80 percent of medical information provided by clinicians to patients is immediately forgotten.²

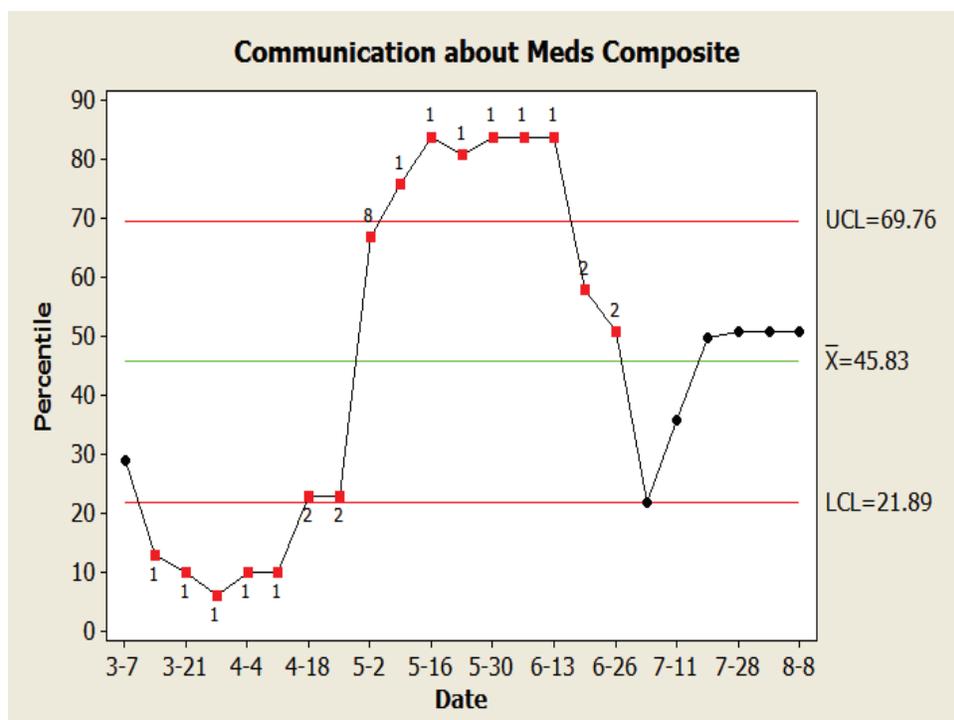
With First Dose Education, this challenge can be overcome by ensuring patients' questions and concerns are immediately addressed. With true point-of-care access to data from the eMAR and the EHR, the new medication reminders can be customized, while reference tools are available at clinicians' fingertips. Automated data analysis and reporting detects if clinicians have been delivering the education as well as documenting patient questions or concerns. Prior to implementation, clinicians charted after the administration without notes, which led to an increased risk for incomplete or inaccurate documentation. First Dose Education integrated in PatientTouch streamlines the process so every relevant detail is captured at bedside.

Following the rollout of First Dose Education, ratings from HCAHPS evaluations showed significant improvement. Most notably, gains were achieved in the category, "Communication About Medicines"—the second lowest scoring domain on the survey—raising satisfaction scores from about 20 percent to 70 percent. Even when First Dose Education was briefly offline at Parkview due to an unrelated system upgrade, the organization noticed an impact to the HCAHPS metric during that time period.

Clinician experience also improved

Not only have HCAHPS scores and the patient experience improved with PatientTouch and First Dose Education, but Parkview clinicians also prefer the technology. Before PatientTouch, clinicians were required to carry multiple devices, such as VoIP phone for voice calls, a pager and a barcode scanner.

Parkview introduced the First Dose Education feature on the PatientTouch mobile devices over two weeks in two hospital units. Clinicians enthusiastically adopted the functionality, which was then rolled out to the rest of the hospital with similar acceptance levels.



² Kessels, Roy P C. "Patients' Memory for Medical Information." Journal of the Royal Society of Medicine. May 2003. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC539473/>

In an internal survey, more than 80 percent of Parkview clinicians agreed PatientTouch and First Dose Education improved their ability to communicate patient information, while nearly as many agreed they feel more connected to their care team.

The majority of nurses and phlebotomists reported the technology improved response time to patient requests and half of the clinicians agreed PatientTouch, First Dose Education and the technology's clinical communications capabilities reduced interruptions. Of the phlebotomists who were surveyed, 75 percent agreed PatientTouch also reduced labeling errors and just as many reported that response time to urgent specimen collections improved.

Satisfied clinicians empowered with tools to help them provide safer, higher quality and more efficient care can only translate to a positive patient experience.

Patient-clinician communication is key to HCAHPS success

Although it is often called a "satisfaction" survey, many of the 22 HCAHPS evaluation questions (not including the 5 demographic questions) do not ask if patients were satisfied, but rather if and how often they experienced effective clinician communication and adequate information sharing.

To cost-effectively improve these metrics, as Parkview Medical Center did, equipping clinicians with mobile, easy-to-use informational tools can help them efficiently and completely address patient questions and concerns. These interactions need to be conducted at the bedside, not with the clinician standing at a computer terminal or leaving the patient room where they will likely be interrupted.

Providing a smart mobile overlay to the EHR and eMAR, such as PatientTouch First Dose Education, allows clinicians to access clinical data in context, educate and engage patients at bedside, capture richer data and securely communicate with the trans-disciplinary care team.

With PatientTouch First Dose Education, hospitals can ensure best practices are followed and wasteful variability of care is reduced, both of which will be financially rewarded under value-based payment models.

Start earning a real ROI from your EHR and eMAR by calling PatientSafe Solutions today to learn more about PatientTouch First Dose Education.

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PatientSafe Solutions has mobilized clinicians and redefined clinical workflows for more than a decade. We are committed to the transformation of care delivery through the convergence of consumer mobile technologies and enterprise clinical systems. With intuitive, mobile-enabled workflows, we can build on existing EHR infrastructure to drive measurable results across patient safety, clinical quality, and care team effectiveness.

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