C A S E STUDY

Contributor:

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LeadingAge® CAST
center for **aging services technologies**

The LeadingAge Center for Aging Services Technologies (CAST) is focused on accelerating the development, evaluation and adoption of emerging technologies that will transform the aging experience. As an international coalition of more than 400 technology companies, aging-services organizations, businesses, research universities and government representatives, CAST works under the auspices of LeadingAge, an association of 6,000 not-for-profit organizations dedicated to expanding the world of possibilities for aging.

For more information contact:

ConstantCare
TECHNOLOGY™
Connecting Your Care

Reducing Admissions from Nursing Homes by Use of Electronic Collection of Vital Signs

Categories:

Health Outcomes (Blood Pressure, Vitals)
Staff Efficiencies
Cost of Care and ROI to Providers
Hospital Readmissions

Organization Name

Camelot Brookside Care Center
Central Control, Inc.

Organization Types

Skilled Nursing Facility

Other Partners

Provider Health Services, Constant Care Technology

Organization Description

Central Control is the recognized provider and employer of choice in the markets it serves. CCI operates seven skilled nursing facilities in Louisiana, a hospice division in Arkansas, a national nurse practitioner placement firm and has launched a telehealth software product line.

Project Description

Faced with a $5,000 monthly loss of revenue, Camelot Brookside implemented a multi-faceted approach to attack the cause: preventable hospital readmissions. Unacceptable readmission rates hovering at 26% in 2014 were diagnosed and remediated with a system of early intervention that included the CareConnection Vitals Integration to Camelot's EHR system (PointClickCare), the addition of advanced practice nurses and focused daily meetings.

Telehealth and RPM System Type

Store and Forward; Biometric Patient Monitoring; Real Time; Immediate, wireless documentation from bedside directly to resident's record in provider's EHR.

Telehealth and RPM System Embodiment

Staff operated Multi User Mobile vitals cart and touchscreen device.

Business Model

Hospital readmission reduction program initiated at Skilled Nursing Facility level

Implementation Approach

As a part of an overall project to reduce re-hospitalization rates at Camelot Brookside, the staff, Advanced Practice Nurses (APRNs), and physician identified several key issues, among them the absence of immediate relevant history when nurses communicate with attending physicians and APRNs. It was apparent that caregivers were not able to accurately capture and document vitals in a timely manner--and the accuracy of that documentation was actually questioned.   In addition, the time required to take vitals using manual methods--and the potential for measurement inconsistency--led the team to seek an automated vitals monitoring and documentation tool. Camelot Brookside chose to implement Constant Care Technology's CareConnection system--a turnkey solution that included not only automated vitals equipment and scales, but also the software integration to our EHR to ensure that measurements would be documented automatically and in real time without any error. Those measurements would be available for medication administration, nursing staff review, physician review, and dashboard alerts within minutes instead of the normal lag time of several hours.

Our nursing team initiated more frequent vitals trending review now that data was more readily available. When warranted, they were able to identify and aggressively intervene on changes in condition much more rapidly. This led to immediate consults with the APRN and physicians, which, in turn, resulted in prompt interventions that prevented hospital readmissions.

Outcomes

The results of the new protocol yielded a decrease of the starting readmission rate more than half, bringing the new average down to 10.4% from the starting 26.3%--an astounding reduction in a short timeframe with minimal investment. Prevention begins with timely information and proactive intervention.

Challenges and Pitfalls to Avoid

Change is tough--and asking our CNA staff to completely revise their vitals capture and documentation methods added to their stress. We had to embrace with open arms and support the new technology at the management level-- sometimes having to insist that CNAs adhere to the new processes.   We promised our team that they would save time and their jobs would become easier. Now they wouldn't consider being without!

Lessons Learned/Advice to Share with Others

Communication is the key to preventative, exceptional care for our residents. We started with automated communication of vital signs to the resident's record in our EHR--but soon learned that the actions based on that accurate and timely data were the key to success.   We recognize that daily meetings, enhanced relationships with our APRNs and physicians, as well as improved communication between our CNAs and nursing staff, have all played a significant role in improving our level of proactive care. Our commitment is to enhancing communication pipelines and further reduce hospital readmissions in our organization.