Reducing hospitalizations for Skilled Nursing Facilities and their Medical Directors

66% of facilities saw improvements in ER visits and hospitalization rates

About the Facilities

Multiple Skilled Nursing Facilities and their Provider Group partners are seeing the benefits of Hucu's intelligent communication and its ability to aid in reducing ER visits and hospitalization rates for short-stay residents. The 19 of 29 (66%) facilities in this analysis and seeing improvement include Skilled Nursing and Rehab centers ranging in size from small (under 20 beds) to relatively large (greater than 175 beds), with occupancy rates ranging from 40% to over 85% during the assessed period. "Days in Residence" ranged from 34 days to 108.

Situation at a Glance

The facilities all recognized that communication challenges were creating numerous issues in terms of efficiency, clinical outcomes, and staff satisfaction & burnout. One of the goals they shared in terms of implementing Hucu was to streamline communication with the objective of reducing the need to transfer patients to the ER or hospital. The challenges they faced prior to Hucu included:

Challenges

1

Disparate Communication Tools

Prior to Hucu, each of the facilities leveraged multiple modes of communication, including: Email, Fax, Phone (and voice mail, answering service), the EHR itself, and texting. Texting was not necessarily endorsed by the facilities as it was recognized as not being secure or HIPAA compliant. But it was widely used due to convenience.

2

Delays in Response

The variety of modes and tools of communication widely led to inconsistency among staff of knowing which to use, when. This led to a common challenge of messages being sent but recipients not seeing them in a timely manner. Additionally, staff would commonly use a mode of communication not collaboratively aligned to the necessity of urgency for a response. For example, calling a provider's answering service with something urgent when the provider may not check their service for an hour or more.

3

Strained Partnerships

Lack of alignment on use of communication modes and tools with the physicians, nurse practitioners, and others supporting the facilities as "partners" who share responsibility in serving patients was straining these partnerships. For example, a staff nurse in the facility recognizing a potential wound infection calls the patient's surgeon (provider of record) answering service for direction, and leaves a message for that specific provider. However, the provider is in surgery and the message goes unattended for several hours. The patient's temperature continues to rise, and the facility has no choice but to transfer the patient to the ER for attention. This upsets the surgeon as their NP could have provided the direction had that NP gotten the message, avoiding the transfer.

4

Lack of Visibility for Continual Improvement

The diversity of tools being used for communication combined with the reality that few of them provided any visibility into usage patterns prevented leadership from having the necessary information to identify which staff used which tools, when, and for which reasons. This hampered any efforts to align policies and procedures with optimal performance and outcomes.

> Our ER and return to hospital is virtually 0 because we have real-time care, through Hucu...Our resident care is much improved...Our residents are much happier, our families are much happier, our staff's much happier...I'm very proud to be working with Hucu in meeting our resident needs.
>
> *Genettia D. Administrator*

Solution: Hucu as a Centralized Solution for Streamlined Communication and Scalable Care

A Single, Centralized Communication Solution

Hucu’s intelligent communication platform unifies all modalities of communication. This includes text-like messaging, voice, and video all in a single solution that is secure & HIPAA compliant. Text-like messages support easy sharing of images (i.e., of a wound), forms (i.e., consents and assessments), and documents (i.e., SOPs, educational materials, etc.). □□This enabled facilities and members of each patient’s care team to approach communication in a strategic way, starting with text-like messages as more efficient, less disruptive and less synchronous-demanding as telephone or video communication

Flagging & Alerting

Hucu's ability to easily add Flags to a patient channel as a way of conveying urgency, or otherwise invoking automated escalations and alerting led to proactive management of communications, rather than simply sending a message and hoping for a time-appropriate response.

Patient-Centered Design; Patient-Specific Care Teams

Hucu establishes individual channels of communication for each patient, and then embraces the easy inclusion of all care team members in each channel. This meant that facilities could invite into each patient's channel not only that patient's assigned staff, but the external partners into that specific channel. This enabled optimized alerting & notifications, leading to:

Faster responses

Rather than all staff or members of a partner organization being alerted for every message, use of Hucu's flags and defined alerting & escalation protocols meant that care team members were more efficiently alerted to messages requiring urgent responses.

Reduced Alert/Notification Fatigue.

Hucu's unique way of notifying users in each channel means each user can clearly see the messages requiring their personal attention rather than all new messages. into enabled managers to track caregiver engagement and recognize good work directly within the platform, fostering a supportive culture and improving job satisfaction that led to reduction in turnover.

Improved Visibility for Improvement

Hucu's robust reporting & analytics enabled facilities to easily recognize patterns among users, locations, patient condition & acuity types, and other criteria allowing them to continually improve performance.

Conclusion

Hucu's intelligent communication solution enabled these facilities to simply speed responsiveness to clinical (and other) needs. Faster and more appropriate interventions led to demonstrable improvements in the need – real or out of a sense of caution – to transfer the patient to the ER or hospital. Reductions over the 19 facilities not only have a direct impact on clinical outcomes of patients and the speed with which they recover from their conditions, but satisfaction of both staff and patients / family and the facilities' bottom-line economic performance.

Key metrics

Within couple of months of implementing Hucu, The Facilities saw dramatic improvements

Up to 9% Reduction in Hospitalizations:

With an average of 5%

Up to 23% Reduction in ER Visits:

With an average of 11%

Success Videos

Hucu speeds care delivery through Improved Communication with Field Staff

David Southerland – People and Services Logistic Analyst

Hucu's Advanced Communication Leads to Organizational Growth and Staff Retention

David Southerland – People and Services Logistic Analyst

Improved Communication Streamlines Management of Patient Scheduling and boosts Staff Efficiency

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