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Mobile technology gives home-care managers access to real-time data

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By Dave Webb

With the increasing demand driven by Canada’s aging population, home care organizations have to wring more and more efficiencies out of a mobile and often remote workforce. Despite the obvious opportunity for mobile technology to streamline workflow, until recently, home care has been a largely paper-and-fax-based industry.

That’s changing.

At Revera Inc., which serves 25,000 clients a week in six provinces, nurses, therapists and personal support workers (PSWs) relied on a labour-intensive system for scheduling and tracking home care visits. Check-ins and checkouts at patient homes were handled by phone. Client data and appointment-related data, like directions and contact information, were tracked on paper.

(Revera’s home health division was acquired by Extendicare Inc. in January.)

“A couple of years ago, (Revera Home Health) started on a plan to move from a very manual base, where we had less than 10 percent of our staff on any kind of mobility solution, to moving toward 100 percent mobile,” says Jo-anne Stone Burke, national director of strategic and operational transformation for RHH.

Revera rolled out a fleet of BlackBerry Z10 and Z30 smartphones to its frontline workers, using the Mobility Plus mobile healthcare management application from GoldCare. RHH was already using GoldCare’s scheduling application; the Mobility Plus solution was an add-on, says Stone-Burke.

Registered nursing staff are also equipped with Android tablets for better access to client documentation.

On the backend, Revera is migrating to BES12 to manage and secure the devices. Though the BlackBerry and Android applications might access the server in different ways, the BES12 server attaches an additional layer of security based on the e-mail address of the devices. Security of a patient’s healthcare information is critical. But the benefits of the solution go far beyond that. Time-keeping and verification are real-time, instead of based on time sheets or telephony. That’s particularly important with “not seen/not founds,” says Stone-Burke.

“If you’re waiting for a timesheet to find out if a visit was actually made, that’s a little too late,” she says. By having the technology in their hands and having them check in as soon as they walk into the home ... if somebody was supposed to be seen at two and it’s 2:15, it flags on the desktops of the co-ordination staff that somebody is not where they’re supposed to be. You can escalate and find out why they’re not there and reschedule if required.”

Oakville, Ont.-based Acclaim Health went a different route to mobilize its nurses and PSWs. Rather than migrate to a new in-house server, Acclaim elected to go with a cloud-based platform from Toronto startup AlayaCare Inc.

“We had a mobile documentation system for our nurses, which we quite liked – we weren’t unhappy with it. It’s just that we were looking for an end-to-end solution, something that could do our scheduling for us, documentation, and mobile time and attendance,” says Angela Brewer, Acclaim Health’s CEO. Before, scheduling and documentation were on different systems that didn’t interact, and Acclaim had no mobile time and attendance solution at all.

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And elements of the pre-existing solution lived on different servers: one onsite, one hosted on an external server. Bringing together a single solution in a cloud environment at a facility in Montreal gave Acclaim more flexibility and redundancy, Brewer says.

AlayaCare bills its cloud platform as an end-to-end solution – from scheduling, time-reporting and documentation, through remote patient monitoring and patient-facing health portals.

Extending the platform to in-home patients is a natural evolution of mobile home care, says Saint Elizabeth Health Care CIO Roy French, who adds that the non-profit organization is in its "Mobility 2.0" phase, and looking to the future.

Before Saint Elizabeth started leveraging mobile technology, "there was a lot of paper flying around," French says. Mileage, hours, schedules and care plans were captured on paper, faxed back and forth, and manually entered into spreadsheets and sent to head office. The first step on Saint Elizabeth's mobile journey was to equip frontline workers with BlackBerrys. Scheduling information was pushed out (and updated every half-hour), and time and mileage pulled in, through an application suite supplied by CellTrak.

"We eliminated a whole bunch of old, tired, manual processes and automated them," French says. "So the turnaround for expense for mileage and travel time was a lot faster than it used to be in the past."

That was about five years ago. Now, Saint Elizabeth is rolling out a pilot project, handing 5,000 of their frontline workers Samsung Galaxy Tab S 4G tablets. "(The tablets have) given us a great deal more real estate to work with," French says. "The little two-by-two window on the BlackBerry does not lend itself well to doing complex assessments."

The tablets' larger screens also allow Saint Elizabeth to roll out more applications to its nurses and PSWs – a learning portal with documentation and video, self-serve access to HR platform PeopleSoft, the ability to view pay stubs online, and a social media "suggestion box" platform called SoapBox among them.



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