Article

VoiceFriend

Improving your discharged patient management isn't just good for your patients—it's good for your business

Reducing hospital readmissions starts with strengthening your ability to ensure care plan compliance for discharged patients.

A few years ago, the *Journal of the American Medical Association* published the results of a groundbreaking study of rehabilitation facilities conducted by the University of Texas's Division of Rehabilitation Sciences. Researchers examined the readmission rates for rehab patients from the six most common impairment groups.[1]

The study found that the 30-day readmission rates among these discharged patients averaged close to 12%—and as high as 18.8%—for the six impairment groups. Given this high readmission rate, it's no surprise that the hospital readmission of older adults is now a $20 billion annual expense for Medicare.

The COVID-19 pandemic placed further stress on skilled nursing communities to better manage and track their discharged patients. It also made it abundantly clear that improving discharged patient outcomes requires the ability to ensure that discharged patients are consistently in compliance with their care plans.

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[1] Ottenbacher KJ, Karmarkar A, Graham JE, et al. Thirty-Day Hospital Readmission Following Discharge From Postacute Rehabilitation in Fee-for-Service Medicare Patients. JAMA. 2014;311(6):604–614. doi:10.1001/jama.2014.8

The challenges of manual wellness and care plan compliance checks

Even today, many communities are still using manual processes for following up with and tracking discharged patients—processes that are inefficient and rarely effective. These manual processes are challenged by a number of issues:

- They take a lot of time, requiring staff to make phone calls to discharged patients in the hope of reaching them at the right time.
- They rely on an overburdened and/or overworked staff—making it easy to forget the wellness and care plan follow-up calls or leaving them incomplete.
- The effort keeps staff from more pressing high-priority needs.
- Manual check processes are prone to human error. It doesn't help that nurses typically dislike the task, and the process often results in reporting inaccuracies (or missing report data).
- They rely on the discharged patients' answering their phones—something people are less apt to do these days—making the process ineffective.

Formulating the ideal discharged patient management process—a hybrid approach

Discussions with skilled nursing executives revealed that an ideal solution would be an automated messaging system to contact discharged patients with a simple list of wellness questions. The system would then identify patients who are at risk or need follow-up attention. Using this approach, the nursing staff has to make follow-up calls only to those discharged patients who are deemed in need of attention.

This would be a more efficient process—significantly reducing the time the wellness staff spends on calls. It also reduces the tediousness of the effort for staff members by allowing them to focus their time more efficiently on discharged patients in need of follow-up.

The vital need to survey discharged patients

This hybrid approach—combining automation with manual follow-up calls—would require a unique system designed with this flexibility. It would have to allow the skilled nursing staff to not only automate outbound wellness check calls that could be customized to different types of patients, but also to survey the discharged patients with a customized set of important wellness related questions ("How are you feeling?" "Are you following your care plan?" "Would you like to talk to a nurse?" etc.)

This vital ability to collect custom survey data was sorely missing from most automated messaging solutions, which allow facilities to send out pre-recorded messages automatically but fail to offer the kind of automated two-way survey capability necessary for this more ideal hybrid approach to discharged patient management and tracking.

It simply was not enough for skilled nursing communities or rehab centers to confirm that their discharged patients were okay. They needed to collect additional details from their discharged patients to ensure they were compliant with their care plans and free of complications that could put them back into the hospital. And they needed the ability to quickly identify at-risk patients who would require immediate attention and follow-up.

Building a better, more complete solution for discharged patient management and tracking

As a leading developer of innovative voice communications solutions for skilled nursing and rehabilitation communities, VoiceFriend has years of experience working with thousands of communities. This allowed us to fully recognize the inefficiencies of all-manual wellness compliance checks for discharged patients. We understood the vital need for this hybrid approach that would automate the discharged patient management and tracking process while integrating it with a manual follow-up process focused on patients at risk or in need.

Working closely with some of the leading post-acute care providers to gain valuable insights and feedback, VoiceFriend developed our Discharged Patient module to extend the capabilities of our premier VoiceFriend Integrated Messaging and Engagement (IME) solution.

Our goal was to develop an easy-to-use solution using this hybrid approach that would allow providers to easily combine nurse calls with automated call scheduling to identify at-risk patients before they require hospital readmission. This included a simple, color-coded dashboard to highlight at-risk individuals, enabling care providers to respond with prompt intervention—along with useful analytics to help assess patient calls and responses to better optimize discharged patient outcomes.

With our new Discharged Patient module, skilled nursing or rehab centers can now ask important follow-up questions of a discharged patient such as:

- "How are you feeling?"
- "Are you following your care plan?"
- "Do you have questions about your care plan or medicines?"
- "How much pain are you in?"
- "Have you missed any dosages of your prescribed medicines?" "Do you need assistance?"
- "Do you need supplies?"
- "Would you like someone to call you to discuss any other questions or issues?"

The VoiceFriend solution then automatically notifies the nursing/rehab center staff about which discharged patients have or have not updated their wellness status on time, along with the patients' responses to the custom follow-up questions. This greatly reduces the number of manual wellness checks and human error.

Better reporting and analysis that can lead to more hospital network referrals

One of the additional major benefits of using VoiceFriend's Discharged Patient module is its automated reporting and data analysis capability. Not only does it allow easy data collection for automated wellness checks, the VoiceFriend Discharged Patient module also provides easy reporting for your nursing staff's manual follow-up efforts. Easy-to-use analytics allow you to more quickly and accurately report on your discharged patient management success—with the ability to issue the kinds of reports that can help hospital networks select you as a preferred provider.

The VoiceFriend Discharged Patient module is launched

After successful beta testing by leading post-acute care providers, VoiceFriend launched its Discharged Patient module in the spring of 2021. This first-of-its-kind module was specifically designed to help optimize discharged patient engagement, better ensure patient well-being and satisfaction, and meet hospital network requirements—all while boosting census and increasing referrals.

The many benefits of more effective discharged patient management

VoiceFriend has been tracking feedback from its customers on the new Discharged Patient module with exciting results. “We fully expected to see meaningful improvements in discharged patient communications and engagement,” explains Bruce Baron, CEO of VoiceFriend. “But the benefits that our post-acute care providers are seeing have really extended well beyond the ability to more effectively manage critical communications for discharged patients.”

The many benefits of the new Discharged Patient module are already making measurable, meaningful differences for post-acute care providers:

- More effective critical communications with patients (where applicable), their families and staff
- Improved discharged patient compliance to care plans, leading to reduced hospital readmissions
- Increased accuracy and timeliness of discharged patient wellness status
- Ability to quickly and effectively identify at-risk patients in need of attention
- Reduced labor time and costs spent on manual checks
- Improved staff focus, placing attention on high-priority needs and tasks
- Reduced opportunity for human error and its serious potential consequences
- Stronger discharged patient and family satisfaction (boosting census and referrals)
- Useful analytics and reporting needed to convince hospital networks to make you their preferred care provider

Real results at Nexion Health

“Nexion Health manages approximately 1,100 discharged patients using VoiceFriend’s Discharged Patient module. We have been delighted by the results we have already seen,” says Ronda Marsh, Director of Physician and Post-Acute Relationships at Nexion Health, a leading provider of post-acute care in Texas. “It’s going to help us maximize communication and engagement with our residents when they discharge home. And we are fully expecting to see reduced hospital readmissions post-discharge for our facilities and increased satisfaction results with residents and families. Best yet, VoiceFriend’s simple analytics allow us to provide the reports needed to help us become the preferred care provider of hospital networks.”

Better for your patients. Better for your business. And at no additional cost.

The development of VoiceFriend's Discharged Patient module is part of VoiceFriend's ongoing commitment to deploy innovative voice technology to help post-acute care providers communicate more effectively with patients, families and staff while boosting wellness, quality of care, satisfaction, and census. For care providers who are already using the VoiceFriend Integrated Messaging and Engagement (IME) solution, there is no additional cost for the Discharged Patient module. It's a fully integrated component that is available for immediate use.

To learn more or schedule a demo, contact us today at inquiry@voicefriend.net, 781.996.3123 or visit www.voicefriend.net.

"The ability to leverage VoiceFriend's innovative voice technology to improve the safety and wellness of our seniors is truly an exciting advancement.… It gives seniors and their loved ones peace of mind as it enables our staff to better identify and assist seniors in need."

—Rhonda Glyman, Executive Director, Harvard Medical School's affiliate, Hebrew SeniorLife

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