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## VITAS and Centric Consulting Create Award-winning Mobile Solution to Improve Patient Care

BY VANESSA ORR

In January, VITAS Healthcare, the nation's leading provider of end-of-life care, won a 2018 Process Excellence Network (PEX) award for its mobile solution to improve the patient experience. And while Patrick Hale, CIO, EVP, is certainly happy with the recognition, he's even more proud that the company's foray into the mobile environment has made patients' and clinicians' lives easier.

"Providing the most efficient and best care for our patients is our mission and passion, and the mobile app helps us do that," he said. "It allows our clinicians to spend time engaged with patients instead of on technology, and that improves the quality of experience at bedside."

VITAS' mobile solution, which they developed in partnership with Centric Consulting, won in PEX's best technology-enabled process improvement project category. The award recognizes success in projects where processes are improved and enabled by technology, and are judged on initial implementation success, future sustainability, governance and business impact.

VITAS first began working with Centric, a business consulting and technology solutions firm, about five years ago with the goal of putting mobile devices into the hands of its field staff to make it easier and faster to relay important daily care information. "Our goal was to reduce time incurred during the patient admissions process and increase speed to bedside by VITAS clinicians," said Hale.

"We reached out for the best talent we could find, and we loved the team that Centric brought," he added. "They really meshed well with our team, and their technology expertise is unsurpassed."

Chris Martinez, technology practice lead for Centric Miami, met with VITAS executives and clinicians to understand how their system worked, and to create a roadmap that would help the technology team convert VITAS' paper processes into digital.

"At the time, nurses in the field were taking reams of forms with them to admit patients into care, and we decided to transfer this information to iPads to help them do the same process, only more quickly," he explained.

"The initial challenge was to make sure that we had the right subject matters in place, and that the 5,000 end-users could understand the technology," he added. "Many people already used iOS devices in their personal lives, so switching them to iPads and iPhones was pretty easy."

The tech team set out to create an app that would collect the information needed while not affecting the bedside experience. "Using this technology, the clinician doesn't turn their back on the patient while collecting information; the iPad or iPhone basically disappears out of the equation," said Hale. "It's easy to set it down to hold a hand or to provide treatment."

The app is extremely user-friendly, featuring a real-time interface so that clinicians don't have to remember to store and then later forward



**Patrick Hale**

information. A "body picker" enables users to simply click on an on-screen body part, such as the left arm, and enter a pain or wound score, and the app also has a voice dictation feature.

"We created an app that is very familiar to our clinicians; when they open it, it looks like a chart," said Hale. "They can point, click and swipe, and because the app translates touch to text, it eliminates 60 to 70 keystrokes."

The app has created other efficiencies as well. In the past, when a patient or caregiver first called VITAS, that call would be sent to one of three nationwide centralized call centers. The center would call the local program and share information on the patient's medical history and requirements, which required a lot of calls back-and-forth.

"With the iPhone and iPad apps, we were able to drop outbound calls by 40 percent over a year-and-a-half period, which has had a profound impact on clinical operations," said Hale. "In 2014, we had 918,000 calls; in 2016, that number was 554,000. We also saw a 21 percent decrease in inbound calls. The result is that our nurses and clinicians are getting to the bedside faster."

VITAS also saved \$2.2 million by switching to the iPhone 6+, because the phones cost about 35 percent less than PCs with the appropriate software and security. "In 2014, the cost to arm each caregiver with the right equipment was \$71.25; now it's \$43," said Hale. "We've seen a 15 percent reduction on cost per referral—in 2016, that was a savings of \$908,000. This process is much faster and more effective."

The amount of training required has also been reduced—by 20 times. "Pre-mobile, it required 23 hours of training before nurses could use the system; mobile device training takes one hour," said Hale. "A brand new nurse to VITAS gets a phone, which self-configures, and after an hour of watching tutorials, he or she can be off and admitting."

After the 18-month pilot program proved such a success, the technology team moved ahead with adding new features and functions. "Every piece of technology we layer on builds on how the system works," said Hale. "We want to continue to leverage the power of mobile devices every day to make clinicians' lives easier. By eliminating the technology burden, we make it more about patient interaction and clinical experience."

To learn more, visit VITAS at [www.Vitas.com](http://www.Vitas.com) or Centric at [www.CentricConsulting.com](http://www.CentricConsulting.com).

