

3 Ways to Grow Your Home Care and Hospice Business Faster



 Home Health Care News



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In light of rising numbers of individuals accessing hospice and home care in the U.S., agencies should be well positioned for growth. Yet their growth potential is often stifled by administrative burdens, staff turnover and lackluster patient satisfaction ratings.

Technology solutions, as well as management practices geared toward today's workforce and customer base, can help resolve these issues and allow management to turn their focus to opportunities, rather than challenges, to take advantage of a marketplace that is ripe for growth.



There are **three key areas** where agencies are concentrating their focus to improve operations and position themselves for growth:

- **Administrative Processes**
- **Clinical Staff Workload**
- **Patient Experience**

1. Improving Administrative Processes

In-home healthcare and hospice providers tend to be focused on one primary objective: care. Typically, these organizations do not have an in-depth understanding of where time is lost throughout the caregiving process, nor do they have tools in place to identify common pain points that arise during the course of business.

Thankfully, there are many efficiencies to be gained. In fact, by implementing advanced queue management for fielding calls from patients and their families, many organizations are finding they can achieve multiple aims—including cost reduction and improved operational processes during patient care interactions. With the adoption of a more specialized technology, agencies can identify where they may be falling short by tracking call codes, call volume and call quality.

By implementing advanced queue management for fielding calls from patients and their families, many organizations are finding they can achieve multiple aims—including cost reduction.

After adopting the patient experience platform and mobile application offered by CareXM, Hospice of Siouxland took full advantage of the software's data recording capabilities to gradually reduce spending on supplementary phone support, ultimately achieving 52 percent in cost-savings.

Another organization, Bristol Hospice, with headquarters in Salt Lake City, Utah, also sees future expense reductions. Since implementing services with CareXM, Bristol Hospice has managed to keep costs flat while achieving a 10 percent growth rate, according to Bristol Hospice CEO Hyrum Kirton.

"Once fully adopted, we're expecting to save about 30 percent over our prior triage and on-call expenses," Kirton says.

The patient experience platform provides robust business intelligence – delivering data in seconds with on-demand reporting. Most home health and hospice organizations (or agencies) do not have an analytical understanding of how, when or why a patient calls, but with this technology, agencies are given access to invaluable data and reporting, making it possible to identify target areas for improvement. This enables organizations to continually refine internal protocols and procedures to cut extra spending on supplementary after-hours support.

The system also streamlines the entire call process, improving the overall call experience for staff, patients and family members.



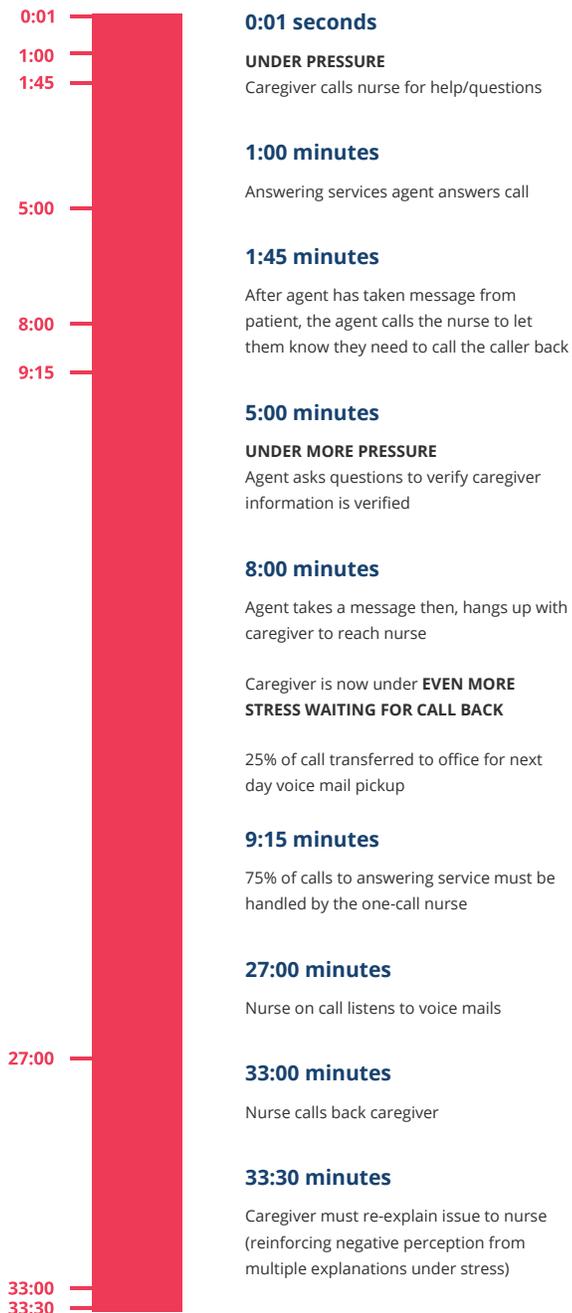
52% Cost Savings

After adopting CareXM, one Midwestern U.S. hospice achieved 52% cost savings.

Time Saving Benefits of Automated Systems

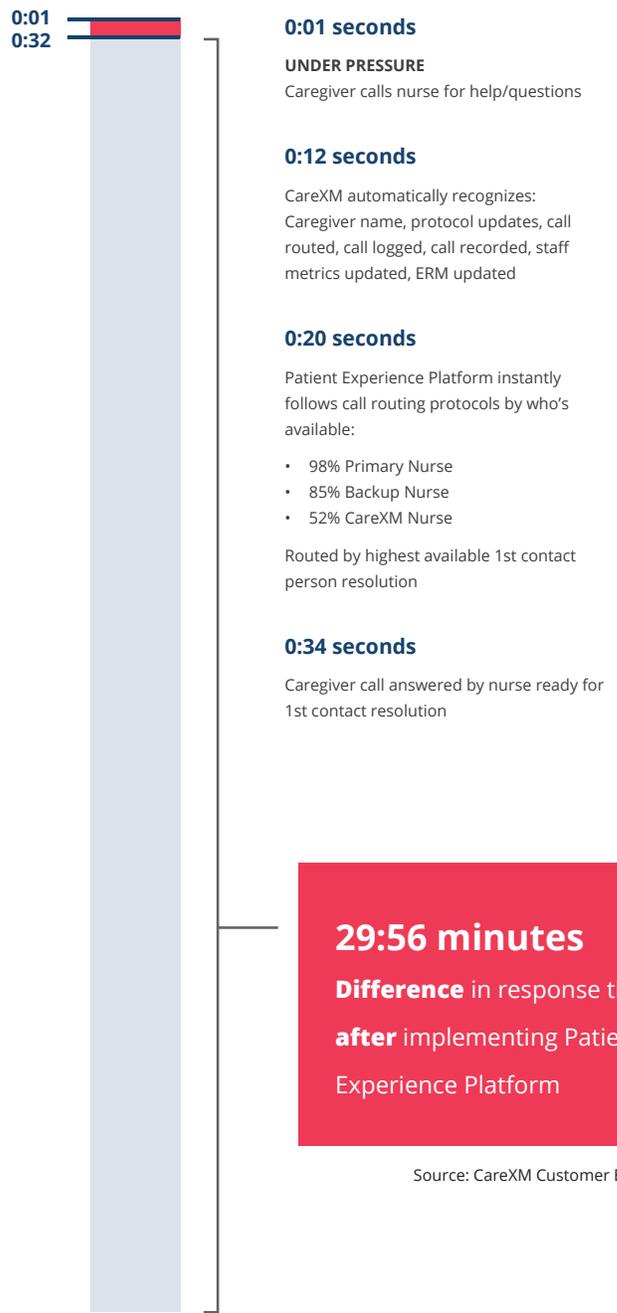
Normal Non-Automated Systems

Nurse burnout pressure raised, caregiver negative reinforcement lowers CAHPS and social review scores



Patient Experience Platform

Nurse interaction pressure lowered, caregiver positive reinforcement for higher CAHPS and social review scores



Source: CareXM Customer Experiences

2. Easing Clinical Staff Workload

Home health and hospice agencies across the country provide a vital service for individuals facing recovery after a hospital stay or during end-of-life care. Often, these individuals face diagnoses that may require support with complicated in-home treatment plans, or urgent answers to address acute changes in a patient's status. The need for this clinical support is not limited to business hours, meaning patients and their caregivers need just as much support in the evenings and across the weekend as they do during the week. Coordinating and ensuring appropriate, timely patient care with these uncertain timelines can be a challenge for management and staff.

If all calls are directed to a single triage line, the staff covering those lines can feel overwhelmed by the call volume, particularly across the night and weekend shifts. If patients choose to contact their Case Managers directly outside normal working hours, this can further expedite the nurses' burnout. With finite resources, and especially for the organizations operating in multiple states and time zones, these challenges may be amplified.

Hospice of Chattanooga, a not-for-profit hospice organization which operates in 18 counties across Tennessee and Georgia, has experienced this staff burden firsthand.

"Patients who called with questions outside business hours in the past would often face wait-times as long as 10 minutes due to the ratio of available staff to the number of callers," says Hospice of Chattanooga Senior Vice President and Chief Information Officer Denise Dye.

The company previously relied on two staff members answering calls for 400 patients. If a call resulted in the need for an in-home visit, these patients then waited up to an hour or more for a nurse to arrive, as visit nurses were doing their best to juggle the needs of multiple patients. Moreover, patients were calling 2.4 times per week on average, which is twice the average of typical hospice agencies. Dissatisfied clients are known to lead to dissatisfied staff, as the relationship between nurse and patient is compromised when a patient has been waiting for a period of time to be seen.

"We previously had issues for coverage where, if a triage staff member needed the day off, or it was a holiday, or heaven forbid there was a sickness, it was often a struggle finding somebody at the last minute," Dye says.



Improving 10 minute hold times

Before CareXM, patients who called Hospice of Chattanooga after business hours could face hold times **up to 10 minutes**.



In December 2017, Hospice of Chattanooga implemented CareXM's patient experience platform to enhance after-hours triage process. Since then, caller wait-times have significantly decreased, costs within the organization have fallen as a result of shifting staff members to new positions and census has grown by 30 percent.

"We surprised ourselves with how well we acclimated to the new process," Dye says.

The platform "sits between" caregivers and hospice organizations. When a caregiver places a call, CareXM's system immediately and automatically follows predetermined advanced call-routing protocols to identify any available nurses who could potentially answer the phone call. Ninety-eight percent of the time, a primary on-call nurse will pick up.

But if a primary on-call nurse isn't available, the call will then pass to a backup nurse or, as a final fallback option, a CareXM registered nurse. During the initial implementation of the service, CareXM nurses may receive a higher percentage of the calls, but as the agency further trains its staff and becomes accustomed to the new process, the agency's nurses will continue to answer more and more calls while the CareXM nurses answer fewer.

The process of routing a new inbound call takes a total of roughly 30 seconds. Hospice of Chattanooga's average wait time dropped from about 10 minutes to now less than one minute. Most recently, the organization's call answer rate is about 15 seconds. The nurses with Hospice of Chattanooga maintain an average answer rate of 85-90 percent, answering calls before they are deferred to CareXM support. Staff members are even having fun with the results: they now hold internal competitions amongst the teams across the different branches to maintain their answer rate, receiving prizes when they do.

CASE STUDY:

Providence Hospice of Seattle

Adopting new care technology can be a challenge, particularly among a staff population that is primarily focused on care.

But Providence Hospice of Seattle, a regional hospice provider in the Seattle area, found such success after implementing CareXM that the organization plans to roll out the platform to its sister organizations as a result.

With roughly 200 staff members and more than 700 patients spanning adult and pediatric hospice services, as well as palliative care, Providence found once its staff became acquainted with the platform, first piloted in November 2017, its quality metrics and administrative processes improved substantially.

“The reason we instituted the program is we had a problem with timeliness of care,” says Mackenzie Daniek, director of hospice. “We have seen almost immediate results because of this. We won’t see our Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey results for three months, but we are starting to get data on that and we are encouraged.”

With dozens of calls placed during day and night shifts, the organization is utilizing CareXM to route calls depending on time of day. Currently, daytime calls are routed to the company’s reception, which can then identify available clinicians. If no clinicians are available, the call is routed to a CareXM nurse.

Overnight and during the evening, there are staff triage nurses who receive the calls based on a numerical system. Answering calls promptly is paramount, Daniek says.

“Since we have gone live with the platform, we have had a hard line that we are not taking messages. We will meet the callers wherever they are.”



ADDED BENEFIT

One unexpected area of benefit for Providence is that employees have experienced fewer driving-related accidents because they are not fielding calls while in the car. The organization has enforced a policy that care staff must make themselves unavailable while they are driving.

LESSONS LEARNED

5 Tips from Providence based on its rollout of CareXM

1. Communicate upfront with telecom providers and create a plan so the provider is on the same page as the organization.
2. Paint a picture for staff. Explain why the technology is being implemented and which organizational challenges it will address.
3. Spend time on forming good habits. The mobile platform is intuitive, but it requires staff to take action on a daily basis.
4. Incorporate into onboarding. Providence introduces new staff to the platform on Day 2.
5. Practice before going live. Staff members practice using the platform during onboarding without actually routing calls.

“Knowing that the person answering the call is going to be the same person coming out if a visit needs to be made strengthens that continuity of care even more.”

Denise Dye, Senior Vice President and Chief Information Officer, Hospice of Chattanooga

3. Improving Patient Satisfaction and Quality Metrics

While streamlined operations and staff retention are important goals, patient care and satisfaction are ultimately the most important considerations for home health and hospice providers. A technology platform to coordinate communications ultimately leads to better patient care, and subsequently, higher quality scores.

Patients and caregivers who have worked with hospice providers utilizing CareXM solutions have communicated common, positive after-hours experiences, such as:

- Reduced hold times
- Direct line to registered nurses
- Faster response time among care staff who respond in person

“Knowing that the person answering the call is going to be the same person coming out if a visit needs to be made strengthens that continuity of care even more,” Dye says.

Hospice of Chattanooga has improved its operations to the point where patients are actually calling less frequently. Since implementing CareXM services, the average patient calls Hospice of Chattanooga staff 0.77 times per week versus its former average of 2.4 times.

Traditional, non-automated systems typically see an anxious caregiver calling the hospice office, but instead of a nurse answering the phone, a non-clinical answering service agent picks up the call and takes a brief message that will then be passed on to a nurse. The call ends, and this anxious caregiver must then wait for a nurse to call back.



Reducing call frequency

After implementing CareXM, patient calls **dropped** from an average of **2.4 times** per week to **0.77 times** per week.

“With hospice care, we don't get many do-overs, and we've got to make sure that right out of the gate, we are superior in our service delivery.”

Denise Dye, senior vice president and chief information officer, Hospice of Chattanooga

Commonly, by the time a nurse returns the call to the caregiver, nearly 33 minutes have passed. Even more worrisome is the fact that nearly 25 percent of similar calls are transferred for next-day voicemail pickup — an unacceptable percentage for families with loved ones on hospice services.

Instead, with CareXM solutions, the process takes a mere 30 seconds to complete.

“Families are very pleased with our responsiveness to them,” Dye says.

A New Era for Hospice and Home Care Agencies

As hospice and home care agencies struggle to balance the need to both answer calls and visit patients after hours, leveraging technology that can help refine processes to ensure patients receive the proper, timely care they need makes sense.

“With hospice care, we don't get many do-overs, and we've got to make sure that right out of the gate, we are superior in our service delivery,” Dye says.

Dozens of hospices have taken a proactive approach to utilize a cloud-based application to reduce call hold times, reduce costs and decrease staff compassion fatigue.

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