

TELEHEALTH PROJECT SUMMARY

SUMMARY WRITER: Dale Vincent, MD

PROJECT NAME: Home Outreach Project for the Elders (H.O.P.E.): The Economic and Quality of Life Impact of Remote Technologies on High Risk Patients and Their Caregivers

ORGANIZATION/AGENCY (and primary contact): Steven Berman, MD
St. Francis Healthcare Foundation
808.547.6208

FUNDING (source and amount): Pacific Telehealth and Technology Hui

DURATION (start time and date): June 2008 – Nov 2009

PURPOSE/INTENT: This research aims to reduce the need for emergency room and hospital care in high-risk dialysis patients utilizing clinical interventions in the home with remote technology (RT) and demonstrate that the approach is both effective and cost efficient. The RT intervention employs interactive televideo capability using telephone or high-speed internet lines. Home monitoring includes a scale, blood pressure cuff, glucometer, oxymeter, stethoscope, and an electronic questionnaire.

Measures of healthcare resource utilization will include emergency room visits, hospitalizations, hospital days, antibiotic usage, and mortality, and quality of life. Economic evaluations will calculate marginal cost-effective ratios for RT.

MAJOR CRITICAL ACCOMPLISHMENTS: Preliminary data collected so far suggests that using home monitoring lowers healthcare resource utilization.

CRITICAL SUCCESS FACTORS: Having an enthusiastic care manager who is able develop a personal relationship with the patients in the RT group.

CRITICAL BARRIERS (overcome or not): This is a randomized trial comparing RT, Usual Care, and Home Health Care (HHC). Surprisingly, many of the patients were wary and viewed outside assistance from HHC as intrusive and a potential loss of independence. This was less of a problem with the RT group.

MAJOR LESSON LEARNED: We have adapted our discussions with the patients and their families to address the concern of potential loss of privacy and independence. We have found that word-of-mouth discussions between the patients and peers who have been successful subjects have been very helpful. Patients have not had a problem with the requirement to upload data into the remote device. Although the process of patient-centered home monitoring may create self-empowerment over time, we have been impressed with the amount of personal interaction that has been necessary. A positive result has been that this interaction has helped to build trust in the patients.

CURRENT STATUS (active, planned, dormant, completed, other?): Active

PARTNERING ORGANIZATIONS: St. Francis Healthcare Foundation

IS THERE A CLINICAL CHAMPION OR A COMMITTEE OVERSEEING THE TELEMEDICINE PROGRAM? No

TECHNOLOGY USED: ViteINet ViteICare Turtle 800