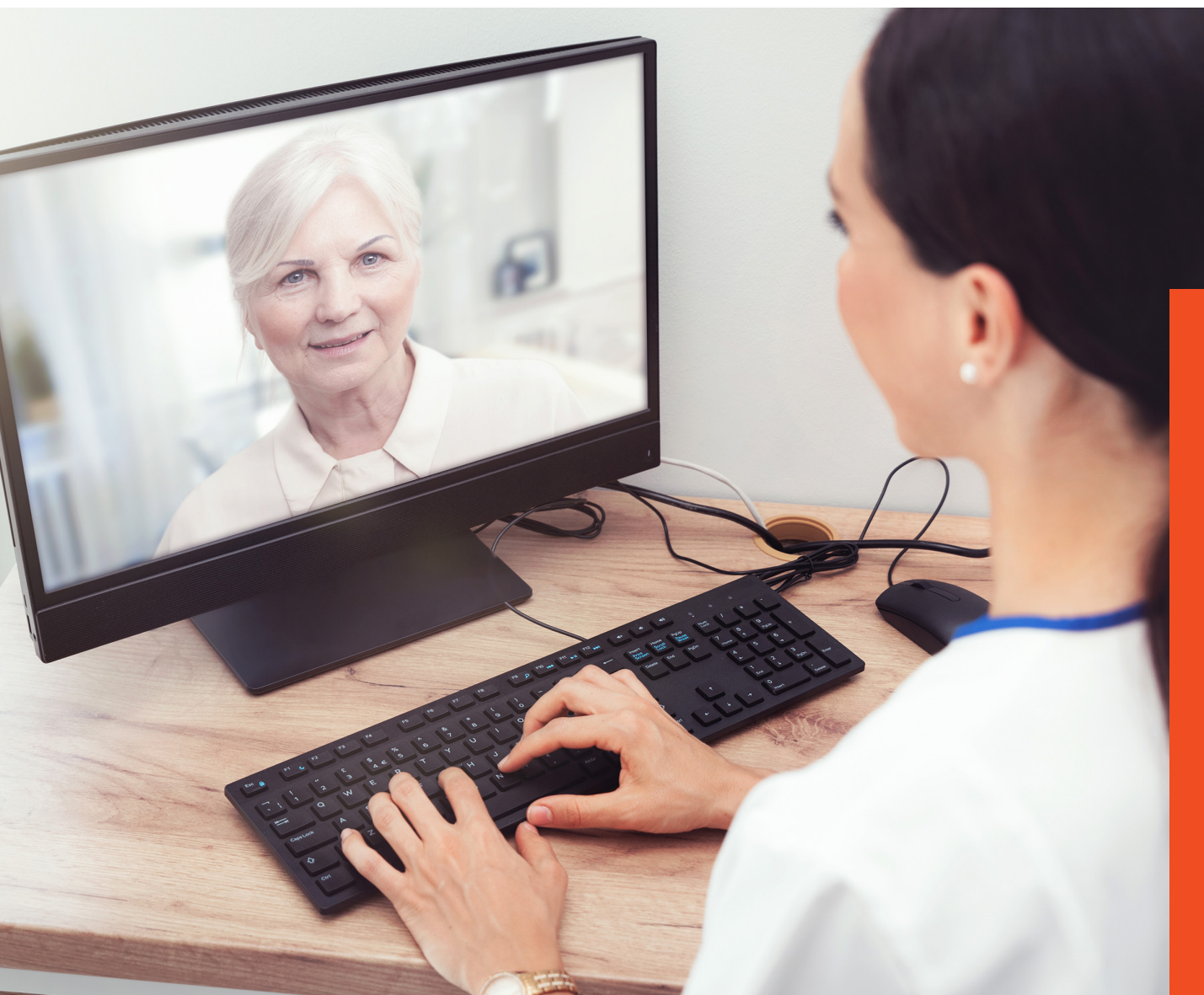


WHITE PAPER

The Complete Care Collaboration Platform

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Introduction

It's easy to measure the negative effects of inefficient clinical communication. A recent Sentinel Event Alert from The Joint Commission cited a study that finds communication failures in U.S. hospitals and medical practices contributed to 30% of all malpractice claims, resulting in 1,744 deaths and \$1.7 billion in malpractice costs over five years.¹ Gaps in communication also hinder care transitions and contribute to hospital readmissions, causing a financial burden for hospitals and negative outcomes for patients.²

With the Centers for Medicare & Medicaid Services (CMS) requiring hospitals to send admission, discharge, and transfer (ADT) event notifications to all providers responsible for a patient's care, efficient care collaboration is more important than ever, and is vital to the successful shift to value-based care.³

So why are healthcare organizations still using unsecure, inefficient technology such as fax machines, telephones, and email to collaborate on patient care? And why are so many patients and their caregivers still left out of the communication loop? Ironically, the healthcare crisis caused by the Coronavirus pandemic have brought about necessary changes that help solve these questions. When the pandemic hit, healthcare providers suddenly had a new challenge: how to reach their patients and deliver medical care without face-to-face interactions.

DrFirst launched the Backline[®] care collaboration platform in early 2020, just in time to support hospitals and private practices as they shifted models of care—nearly overnight—to combat the pandemic. Here are six ways leading health systems are using telehealth, secure messaging, and clinical communication to connect care teams and patients to the right information at just the right time.



6 Ways to Connect Care Teams and Patients with the Clinical Information They Need, Precisely When They Need It



Speed ED-to-Bed Time

Patients often experience long waits in the Emergency Department (ED) before being admitted and transferred to an open bed on the hospital floor. Prolonged wait times cause patient discomfort, dissatisfaction, and treatment delays, and create a cumbersome process for physicians, nurses, and transport staff.

Catawba Valley Medical Center in North Carolina had three objectives for its ED-to-bed wait reduction initiative:

1. Timely notification to the administrator on duty when a patient is to be admitted
2. Tie into ADT feed to ensure administrators receive admission requests only for their units
3. Streamline workflow for various types of admissions to reduce ED wait times

To achieve these goals, the hospital integrated Backline in the Bed Management module of its MEDITECH electronic health record (EHR) system. Using Backline's mobile functionality, administrators on duty could receive admission requests no matter where they are working. Once notified, they can quickly respond with a bed match and transition the patient to an inpatient room. Within two months, the hospital decreased time from ED arrival to departure to a room by nearly 97 minutes per patient.

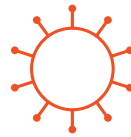


Ease Transitions of Care

Once your hospital gets a patient into a hospital bed, collaboration starts to prepare him or her for discharge. Some hospitals still require case managers to print the patient census at the beginning of each shift to track daily admissions, discharges, and transfers. By switching from paper-based systems to digital tools, case managers can access real-time clinical information and prevent the costly delays and errors that can lead to avoidable readmissions.

With Backline, case managers can use secure, patient-centered text messaging from any location at any time between payers, providers, care teams, non-clinical staff, family members, and even patients. Shifting to HIPAA-compliant messaging helps track all communication around each patient, avoids the hassle of call-backs, and supports working on the go.

Signing of paper documents presents another challenge. Many primary care physicians, hospices, skilled nursing facilities, and other providers don't use the same technology as your hospital, and may not want to sign up for additional tools. Backline lets you send forms electronically, and anyone with a mobile device and SMS messaging can complete, sign, and return them without downloading an app or logging into a portal.



Create COVID-19 Workflows

The pandemic caused numerous challenges based on the need to accommodate more patients while preventing staff and patient exposure to the virus, preserving personal protective equipment, and finding new ways to connect remotely.

East Tennessee Children's Hospital was already using Backline to improve collaboration between care teams working in different inpatient units. When the pandemic struck, the hospital suddenly had new communication needs. Carol Smith, Nurse Manager of the Emergency Department, explains, "We use Backline for communication from our COVID alternate care site tent to our Emergency Department and ED registration. The camera on a clinician's phone is used to take pictures of doctor orders for COVID testing, and they are sent securely to the department to be scanned into the medical record."



Close Provider-to-Patient Communication Gaps

Removing communication barriers is essential to keep patients and their caregivers informed about care plans. But seamless communication is even more important when patients can't speak for themselves. East Tennessee Children's Hospital adopted Backline in the Neonatal Intensive Care Unit (NICU) to keep parents involved in their babies' care.

"Babies can be in our NICU for months," says Rick Simpson, Clinical Applications Manager. "Our NICU nurses now send daily messages to parents. For example: 'Baby is doing well. She fed three times and gained an ounce. Color looks good.'"

Such seamless communication helps staff quickly and efficiently update parents and answer queries on anything from the timing of planned procedures to whether it's a good day to bring grandma for a visit.

The hospital routinely conducts post-visit satisfaction surveys. "Parents love it," says Simpson. "We're planning to use Backline in our new surgery suite when it's finished. The ability to securely message parents whose children are in surgery will be a huge benefit."



Speed Time to Care by Connecting with EMS

Collecting important medical information from patients during emergencies is challenging. The Backline EMS solution lets first responders scan the barcode on the back of a patient's driver's license to access medication history for the last six months. Having this critical information onsite—even if patients are unconscious or unable to remember their medications—helps paramedics avoid dangerous medication reactions.

The Queen Anne's County Department of Emergency Services in Maryland uses Backline to give emergency medical technicians (EMTs) onsite access to patient medication histories and the ability to send secure messages to local hospitals en route. "Knowing a patient's medication history on the spot can aid EMTs with patient assessment accuracy and critical decision-making where minutes matter," says Joseph Ciotola, M.D., Medical Director for Queen Anne's County. "The instant collaboration via remote updates from EMTs can improve Emergency Department readiness too. When patients are not able to communicate or are hindered by their condition, this means faster, safer treatment."

In Lake County, Illinois, five fire and emergency medical services agencies were awarded participation in an innovative

pilot program offered by the Centers for Medicare & Medicaid Services (CMS), which aims to improve efficiency and enhance the quality of care for seniors. CMS introduced the Emergency Triage, Treat, and Transport (ET3) pilot program in 2019, allowing ambulance teams to transport patients to care sites other than the emergency department, such as an urgent care center, primary care office, or a community mental health center. They can also treat these patients onsite, with a qualified healthcare provider either at the scene or via telehealth. The five county agencies are using Backline for a secure video telehealth connection with emergency medical staff at Advocate Condell Medical Center and Northwestern Medicine Lake Forest Hospital.



Prepare for Network Disruptions

When your health system's network goes down—whether due to a cyberattack, severe weather, or other disasters—it's vital to ensure the disruption doesn't bring your hospital to a standstill or put patient safety at risk. Because Backline can be used as a cloud-based stand-alone solution in addition to integrating with an EHR, you can rely on it during times of crisis.

When a land-line phone outage hit parts of Connecticut, Nuance Health patients were unable to reach the hospital or their physicians. Fortunately, the health system had a back-up plan in place.

"Within 23 minutes of our request, DrFirst sent a broadcast message to 127,000 patients via the Backline care collaboration platform," said Albert Villarín, M.D., FACEP, Chief Medical Information Officer. "Being able to quickly send a text message with alternate phone numbers for inbound calls meant that our patients could reach us despite this major outage."

When a health system in New York suffered a network outage due to cyberattack, it used Backline to automatically transmit forms and orders to process admissions, bed management, and discharges without resorting to paper records. At an Idaho hospital, when a solar flare caused a power outage, administrators used Backline for secure broadcast messaging to keep staff informed.



Telehealth – and So Much More!

While basic telehealth apps focus on video chat sessions, Backline goes beyond telehealth visits to enable a wide range of care collaboration functions on one secure platform.

By combining telehealth with secure texting, file transfer, electronic forms and signatures, automated alerts, and broadcast text messaging, Backline connects doctors and nurses with patients, no matter where they are. Physicians can keep patients informed and care teams in sync by improving communication around the patient visit, including automated notifications and follow-up. The fact that patients don't need to sign up or download an app is a game-changer. A provider simply invites a patient to Backline via text message or email, and the patient taps the link to connect instantly via computer, smartphone, or tablet.

The HIPAA-compliant platform integrates easily into existing clinical workflows in EHR systems, or it can be used as a stand-alone solution to align clinicians on services provided and next steps of care.



About DrFirst

Since 2000, DrFirst has pioneered healthcare technology solutions and consulting services that securely connect people at touchpoints of care to improve patient outcomes. Headquartered in Rockville, Maryland, DrFirst creates unconventional solutions that shatter information silos and solve care collaboration, medication management, price transparency, and adherence challenges in healthcare. Our technology can be used as stand-alone solutions or integrated within the workflow of electronic health records and health information systems. DrFirst solutions are used by nearly 325,000 healthcare professionals, including more than 220,000 prescribers, 71,000 pharmacies, 300 HIS/EHRs, and 1,500 hospitals in the U.S. and Canada.

Our growth is driven by our commitment to innovation and our passion for improving healthcare by connecting providers with the information they need, exactly when they need it. The Healthiverse™ is our vision of a healthcare universe where everyone is connected in real time to each other and to the information they need, so patients get the best care. The vast Healthiverse includes patients and family caregivers, medical professionals, hospitals, pharmacies, EHRs, payers, HIEs, pharmaceutical companies, and more.

At DrFirst, we consider ourselves Guardians of the Healthiverse—dedicated to creating revolutionary products and services that close the gaps between information and people so that all sectors in healthcare can create better outcomes together.

Sources:

1. Sentinel Event Alert, The Joint Commission Issue 58, September 12, 2017, jointcommission.org
2. Readmissions and Adverse Events After Discharge, September 7, 2019
3. Centers for Medicare & Medicaid, <https://www.cms.gov/Regulations-and-Guidance/Guidance/Interoperability/index>



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