

Technologies for Improving Post Acute Care Transitions: Examples from the Trenches

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CTA Grants that Aim to Reduce Hospitalizations

Medication Optimization Technologies

- American Society of Consultant Pharmacists Foundation
- Caring Choices
- Connecticut Pharmacists Foundation
- VA Central California Health Care System
- Visiting Nurse Services of New York

Remote Patient Monitoring Technologies

- AltaMed Health Services, Stamford Hospital
- California Association of Health Services at Home
- Centura Health at Home
- New England Healthcare Institute
- Sharp HealthCare Foundation
- HealthCare Partners
- Catholic Healthcare West

Personal Health Records Technologies

State Units on Aging and ADRCs in:

- California
- Rhode Island
- Washington

Evidence-Based Care Transitions QI Evaluation Technologies

State Units on Aging and ADRCs in:

- Indiana
- Texas

ADRC = Aging and Disability Resource Center

Veterans Health Administration (Central CA)

CTA Grant Project

Focus Area	Medication Adherence, Remote Patient Monitoring
Population	Vets with CHF, hospitalized within past year
Technology	Health Buddy using POTS, Med Adherence Algorithm, weight scale, BP cuff
Expected Benefits	Reduce hospital/ED visits; improve patient activation, QOL & satisfaction
Workforce Issues	Care coordinator (RN), MD oversight, Automated clinician alerts, enabled patients/informal caregivers
Organizational Readiness	VHA: world's largest telehealth user, rural health = telehealth



Washington State Unit on Aging

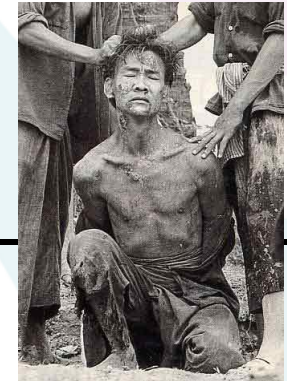
CTA Grant Project

Focus Area	Improving communications, coordination, self-management during care transitions
Population	Patients recently discharged from hospital that are participating in the Care Transitions Intervention program
Technology	Shared Care Plan EHR/PHR Utilizes Microsoft HealthVault
Expected Benefits	Reduce hospitalizations/re-hospitalizations, improved patient self-management, improved communications
Workforce Issues	CTI coach, connected clinicians, increased engagement of patients and caregivers
Organizational Readiness	An early adopter, Whatcom County, WA started project in 2001



Connecticut Pharmacists Foundation

CTA Grant Project



Focus Area	Remote Medication Therapy Management
Population	Older Cambodian-Americans w/ history of torture/trauma, high incidence of chronic illness and low literacy rate
Technology	Video conferencing, spoken format technology, EMR
Expected Benefits	Reduce hospital/ED visits; improve meds use; improve access to culturally concordant providers
Workforce Issues	Remote pharmacist visit, patient is accompanied by community health worker. Few providers trained in special needs of this population.
Organizational Readiness	Connecticut partner, Khmer Health Advocates, is the only Cambodian health organization in the US

Lessons Learned

- Stakeholder readiness to adopt
- Business model/payment model
- Technology/Intervention model
 - Evidence base/relative advantage
 - Compatibility
 - Complexity
- Policy issues



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