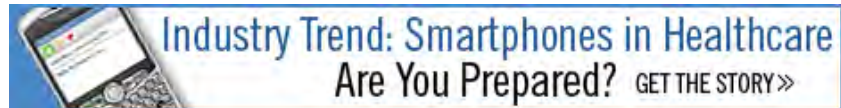


# MEDICAL CALL CENTER NEWS

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## Text Messages Remind Grandpa to Take His Meds

*Mobile health technology is another way medical call centers can keep older adults healthy and living independently.*

A Los Angeles-based retirement home company, Front Porch Center for Technology Innovation and Wellbeing, has been awarded a \$77,150 grant from the nonprofit Center for Technology and Aging for a project that will enable older adults to use cell phone text messaging services to help them remember to take their medication.

Under the new initiative, Front Porch Center will work with CareSpeak Communications, which provides a two-way short message service (SMS)-based medication reminder service. Seniors will be able to use CareSpeak's medication reminder service with their mobile phones via a texting plan as part of the "Minding Our Meds" project.

The new initiative will engage 150 adults age fifty and older living in Front Porch Center communities to input information regarding their medication regimen into a dashboard. The data will include dosage amounts, what time the medication needs to be taken, and whether pills should be taken before or after a meal.

Additionally, the user will enter the name of a caregiver who can be alerted via text message if the user doesn't respond to the text reminder. The caregiver (who could also be a relative or a friend) can call the user to monitor and follow up with them. CareSpeak can also send medication refill reminder alerts to ensure uninterrupted therapy and allow users to view their adherence calendar online.

"The solution is designed to be simple. A medication reminder text message will prompt you to reply to CareSpeak with a one-digit number to confirm that you took your medicine," Davis Park, director of the Front Porch Center said in an interview. "A nonreply will trigger a text message to the caregiver after a certain designated amount of time. The CareSpeak dashboard is accessed via the Internet to first set up the medication schedule and, if desired, to later review medication adherence results."

CareSpeak's service allows users to:

- Receive timely reminders to ensure medication is taken as prescribed
- Log medication intakes by response text and view an adherence calendar online
- Get timely refill reminder alerts to ensure uninterrupted therapy

- Involve caregiver(s) by having them receive escalation alerts so they can call if a patient misses an alert

"We hope to demonstrate that this low-cost, affordable solution on a ubiquitous technology platform, SMS-based texting on cell phones, will help promote independence, wellness, and a high level of comfort with technology. We want to learn how a simple consumer product can indeed help increase medication adherence in a population that badly needs it," Park said.

Mobile health, or mHealth, has captured the attention of the Department of Health and Human Services as a way to use new technologies to advance healthcare. In September, HHS' Text4Health taskforce issued recommendations for health text messaging on mobile phones.

Excerpted from the October 18, 2011, Information Week [article by Nicole Lewis](#).

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### **Healthcare Employment Soaring**

Amid healthcare reform changes to promote healthcare integration and national deficit reduction to save, healthcare jobs are projected to soar, according to a report by Bipartisan Policy Center Health Professional Workforce Initiative with The Deloitte Workforce Initiative. However, the healthcare industry needs more data to determine the mix of healthcare professionals to meet demands.

The study, titled *The Complexities of National Health Care Workforce Planning*, examined the current workplace landscape as well as the future. It also focused on incentives and innovations being implemented by caregivers. The growth of jobs for healthcare professionals examined in the study included registered nurses, licensed nurses, home health aides (a group that will grow by 50 percent by 2018), nurses aids, orderlies, physicians, and surgeons. Overall, healthcare employment is targeted to grow by 23 percent.

The study found that, in order to make sure there is an adequate and effective workforce in the U.S. healthcare system, a new, fresh approach is required, especially in the areas of training and education. Paul Keckley, the lead author of the report and executive director of The Deloitte Center for Health Solutions, said, "The U.S. health care industry is capital intense, highly regulated, and labor intensive. A coordinated workforce planning framework and infrastructure that recognizes the differing needs of geographic areas and links research and planning in the health and higher education sectors is critical."

Taken from an [article by Karen Cheung](#), October 20, 2011, from Fierce Healthcare.

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## "Language of Safety" to Save Lives, Reduce Costs

A new report on safety for healthcare organizations calls on healthcare executives to embrace "the language of safety" for both patients and employees. The new report, "The Language of Safety: Driving Safety for Patients and Employees," says that healthcare executives can reduce injuries and expensive insurance claims by making patient and employee safety part of their organization's mission and values. The report is written by Lori Severson, a Lockton, Inc., loss control consultant.

Severson writes, "To improve less-than-stellar employee injury records, healthcare organizations must change how they are driving and communicating the value of employee safety." One way to do that, she says, is "by ensuring that the language employees speak and hear every day includes messages about their own safety, not just patient safety."

Severson also urges healthcare executives to have zero tolerance for either unsafe working conditions or silence about mistakes. "Violence within healthcare and against healthcare employees and the silence culture of not admitting mistakes due to fear of recourse can result in deaths to patients and employees. It's critical that all incidents are considered an opportunity to be valued for learning."

Severson's full commentary, including a five-step process to drive a safety program, is available free from Lockton at <http://bit.ly/nxBcbn>.

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## Pharmacies Reducing Costs through Generic Drugs, Counseling

The National Community Pharmacists Association (NCPA) announced the results of a comprehensive survey of the current state of independent community pharmacies. It finds that independent community pharmacies continue evolving to meet patient health needs, reduce costs, and remain a viable small business model amid a tough economic landscape, declining prescription drug reimbursements by public and private health plans, and rising expenses, such as employee salaries.

"*The 2011 NCPA Digest*, sponsored by Cardinal Health, offers further proof of the adaptability and innovation of independent community pharmacists as they try to overcome significant challenges to keep serving patients," said B. Douglas Hoey, RPh, MBA, and NCPA executive vice president and CEO. "By offering a variety of patient-friendly niches to complement the prescription drugs they dispense, independent community pharmacies continue to distinguish themselves from their competitors and win kudos from patients."

"Community pharmacists continue to play a vital role in improving health outcomes while reducing costs. First, the *Digest* indicates that community pharmacists reached new highs in promoting the appropriate use of lower-cost generic drugs. Second, they are providing critical, face-to-face patient counseling on the proper use of medications and on combating diabetes and other common conditions. These clinically trained, small business healthcare providers stand ready to reduce costs further, such as through coordinated care models, so long as the unsustainable rate of reimbursement cuts ceases."

[Read the full article.](#)

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## Five Things You May Not Know About Second Opinions

When facing major medical decisions, sometimes the treatment is clear-cut, but when it isn't, getting a second opinion is recommended, notes the October 2011 issue of the *Harvard Health Letter*. Second opinions can lead to less expensive tests and treatments, so insurers have an incentive to allow – and may even encourage – second opinions. But the *Health Letter* editors advise insured patients to check with their health plans to make sure the consultation and any associated services are covered. Here are five other observations about second opinions from the *Health Letter* editors:

- 1) **Second opinions are less common than you think.** Seventy percent of Americans don't feel compelled to get a second opinion or do additional research.
- 2) **Your doctor won't be mad.** It can feel awkward to bring up, but doctors generally welcome having their patients seek second opinions.
- 3) **You may need to make your priorities known.** Although your primary-care physician may know you well, a specialist providing a second opinion may not and may focus on different aspects of the treatment.
- 4) **The first opinion may affect the second.** Researchers found that orthopedic surgeons were more likely to recommend a more "interventionist" treatment if they knew the first physician had advised one, and they leaned toward a more conservative approach if the patient hadn't yet received an opinion.
- 5) **You may need to bridge a communications breakdown.** Prior to their appointment, patients should contact the office of the doctor providing the second opinion to see what medical records they should bring with them or have sent.

Subscribe to the *Harvard Health Letter* at [www.health.harvard.edu/health](http://www.health.harvard.edu/health) or 877-649-9457.

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## Hospitals Expand Geographic Competition

Despite the economic downturn's severe fallout on Miami's tourism, real estate, and construction sectors, some hospitals are expanding beyond their traditional geographic markets to compete for privately insured patients, according to a new Community Report released today by the Center for Studying Health System Change (HSC).

While hospital competition for well-insured patients is intensifying, county-owned Jackson Health System continues to struggle financially. Jackson is the major provider of inpatient care to Miami's low-income residents and provides specialized services – including trauma care, burn care, and organ transplants – to the entire community.

Miami hospitals suffered financially to varying degrees during the economic downturn. Hospitals with leverage to negotiate higher private insurer payment rates emerged with positive margins, although not without adopting cost-cutting measures. For example, the area's dominant hospital system – Baptist Health South Florida – benefits from its location in the relatively affluent southern Miami-Dade region and remains financially strong, while largely inner city Jackson struggles.

"Miami really is a tale of two cities, with the mainstream hospitals expanding and competing to attract well-insured patients and the major safety net hospital on the brink financially," said HSC President Paul B. Ginsburg, PhD.

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## **Americans Encouraged to Cook Simple, Affordable, Healthy Meals**

The Walmart Foundation and the American Heart Association have launched a program that encourages Americans to cook low-cost, heart-healthy meals at home. Simple Cooking with Heart is teaching Americans how to cook more at home by giving them tools, basic skills, and techniques to start and be inspired – and have fun. Program components include live demonstrations, online how-to videos, tips, recipes, and free downloadable “host kits” which encourage people to host in-home parties to practice cooking simple, affordable, and healthy meals with family, friends, and neighbors.

Traditional home-cooked meals are becoming increasingly rare, as more people are eating at full-service and fast-food restaurants for taste and convenience. Typically, restaurant food contains more saturated and trans fats, cholesterol, sodium, added sugars, and calories, with less fruits, vegetables, and whole grains than home-cooked meals.

In the late 1970s, American children ate 17 percent of their meals outside the home and fast food accounted for 2 percent of total energy intake. By the mid-to-late 1990s, 30 percent of meals were eaten outside the home and fast food contributed to 10 percent of overall energy intake. Away-from-home food also accounts for at least half of all total U.S. food expenditures.

“We know that meals prepared at home tend to be more nutritious than restaurant meals, but many American families lack the fundamental skills to prepare healthy, home-cooked meals,” said Rachel K. Johnson, PhD, RD, an American Heart Association spokesperson and the Bickford Professor of Nutrition at the University of Vermont.

For more information, visit [www.heart.org/simplecooking](http://www.heart.org/simplecooking).