Family Health Team extends care with Telehomecare

A small-town Family Health Team introduced Telehomecare for chronic and complex patients and eliminated ER visits and admissions for these patients.

Dr. Izabella Kogan, Alliston Family Health Team

Alliston Family Health Team (AFHT) provides care to 11,000 patients in a small town and surrounding rural area about 100 kilometres north of Toronto. Dr. Izabella Kogan is the lead physician of AFHT. She is also a physician lead for the South Simcoe Northern York Region Health Link. In 2013, she was awarded the Dr. Alexander MacIntyre Award for Excellence and Education in the Community and Medical Field, a community award in the region.

Practice Challenges

In Alliston and the surrounding area, many of the residents are seniors living with chronic diseases such as Congestive Heart Failure (CHF) and Chronic Obstructive Pulmonary Disease (COPD). Few of these patients drive and, as there is no public transportation, it is difficult for them to access healthcare services.

When Dr. Kogan’s patients experienced an exacerbation, they either called an ambulance to take them to the local hospital’s Emergency Room or called her.

“Many patients are unable to come to the office because they don’t drive. To properly care for them, I had been doing home visits.” Her patients live anywhere from a few blocks to miles away on a farm. “Distances are vast and after a full day in my practice, with four children waiting at home, I had to spend an hour on the road to check someone’s blood pressure.

“The husband of one of my patients called to tell me his wife was short of breath. She has four or five conditions which can cause shortness of breath. As I listened to him, I was thinking, ‘Do I increase her medication? Is there room?’ I’m sitting at home on a Friday night, and I don’t have the data I need to make a good decision or give advice.”

It was clear to Dr. Kogan that AFHT needed a better way to ensure that its chronic and complex patients got the care they needed, delivered in a sustainable way.

Solution

Through Health Links, Dr. Kogan learned that a new service – OTN Telehomecare – was available in the Alliston region of the Central Local Health Integration Network (LHIN) where it is delivered by host organization Southlake Regional Health Centre.

A six-month program, Telehomecare offers remote monitoring and health coaching at home for patients with CHF and COPD. It is designed to empower patients with chronic diseases to better manage their health.

While Dr. Kogan immediately saw the potential, there was some resistance from the team. “When we first discussed it, one of my colleagues was skeptical. He was concerned that he was being replaced. But I didn’t have any reservations. Having someone to tell me what my patients’ vitals are gives me the information I need, helps me adjust medications and saves me time; it sounded like a godsend!” Telehomecare would help her keep her eye on these patients, ensuring that they were stable and taking their medications.

Dr. Kogan reports that, after the initial hesitation, integration of Telehomecare into the practice was straightforward. Physicians – or other members of the care team – refer patients directly to Telehomecare. Dr. Kogan and the team “prescribe” Telehomecare for patients based on the program’s
eligibility guidelines, which specify patients with chronic disease who have the potential to improve their quality of life, as well as reduce exacerbations, readmissions and the likelihood of later disease stages. “We started with our CHF and COPD patients who were discharged from hospital or who’d recently visited ER. We also included a couple of patients directly from the office. Our goal was to try and ensure all those at risk of hospital admission be immediately connected with Telehomecare.”

AFHT currently has 20 patients enrolled in Telehomecare with a number having already “graduated”.

The Details
Telehomecare combines remote monitoring and health coaching, both of which are based on best practice guidelines and delivered by a team with specialized training in home care and self-management support.

Telehomecare installs remote monitoring equipment – including a tablet, blood pressure cuff, weight scale and pulse oximeter – in patients’ homes and teaches them how to take their vital signs each day. The vital signs are monitored by a Telehomecare registered nurse or respiratory therapist.

Once a week, the Telehomecare clinician calls the patient for a health coaching session. The sessions are customized to each patient’s particular needs, preferences and goals. Dr. Kogan reports that Telehomecare helps her patients learn how to manage their disease, to notice when something has changed and learn what they can do to improve their health. “The nurse will say, ‘Do you see how your blood pressure went up?’ or ‘Did you notice you’ve gained four pounds?’ It helps them to see what’s going on and - with the nurse as guide - make changes, like taking a water pill, not eating as much salt or being sure to take their medications or exercise.”

Dr. Kogan says it’s been easy to interest patients in Telehomecare. “When they realized it was a free service, most were immediately interested. And patients really appreciate having someone keeping tabs on them each day.”

Patient satisfaction and successful outcomes increase as the program progresses. “We’ve discovered that they are fond of the clinician who does the coaching, saying it’s clear she likes her job and really cares for the patients. She gets to know them and they trust her – and, over time, learn and change their behaviours.”

The Telehomecare clinician provides regular updates to Dr. Kogan and consults her as required. “If everything is within normal range, I receive a weekly report with a graph of blood pressure and vitals. If anything is out of proportion – maybe the oxygen level drops or their blood pressure is high – I get a fax or a call from the nurse or respiratory therapist alerting me that something is happening and my patient needs an intervention.”

Telehomecare is currently provided by host organizations in seven LHINs across Ontario and is expected to be available province-wide.

Results
AFHT’s impressive results surprised even an early adopter like Dr. Kogan. “Before Telehomecare, a couple of patients in my own practice of 1,500 patients would be admitted each year and there would be four to five ER visits. With Telehomecare, none have been admitted in the last year.”

The Ontario Telemedicine Network
The Ontario Telemedicine Network (OTN) is an independent not-for-profit corporation funded by the Government of Ontario and Canada Health Infoway. OTN is the global leader in telemedicine, partnering with one of the largest groups of healthcare providers in the world.

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