Remote patient monitoring benefits patients and healthcare system

Today, telemedicine is making its way into patient homes with Telehomecare, a program of the non-profit Ontario Telemedicine Network (OTN).

The largest service of its kind in Canada, Telehomecare couples remote patient monitoring with health coaching by telephone. It provides patients with Chronic Obstructive Pulmonary Disease (COPD) and Chronic Heart Failure (CHF) with coaching in self-management and daily remote monitoring of vital signs.

Patients also respond daily to a few simple questions about how they are feeling. A specially-trained clinician – a registered nurse or respiratory therapist – monitors their signs and symptoms in order to prevent exacerbations that would lead to an Emergency Department visit or hospital admission.

“Telehomecare patients feel well-supported and confident as they learn how to live their best possible life through weekly health coaching,” says Laurie Poole, RN, who is vice-president of Telemedicine Solutions at OTN. “And they know that a specially-trained professional is monitoring their blood pressure, heart rate and weight,” she says. “They feel reassured, knowing that their vital signs will alert the clinician if things are not as they should be. And they know their doctor will be informed if they need a medication adjustment or a visit to the doctor.”

Patients – who must have been hospitalized within the last year for COPD or CHF to be eligible for Telehomecare – can be enrolled in Telehomecare by their family doctor, nurse practitioner or specialist or enrolled at discharge from hospital or through a self-referral.

Piloted in 2007, with provincial implementation beginning in 2011, Telehomecare is delivered in Ontario’s Local Health Integration Network regions by Community Care Access Centres (CCACs), hospitals or Family Health Teams. Seven of Ontario’s 14 LHINs are already participating with others expected to come on stream in coming months.

The program is already delivering results that are attracting the attention of doctors and hospitals across the province.

Telehomecare patient visits to Emergency Departments have been reduced by more than 37 percent. Hospital admissions have been reduced by more than 44 percent.

Data from William Osler Health System, which delivers Telehomecare in the Central West LHIN, shows that six months after discharge from the six-month Telehomecare program, inpatient visits from Telehomecare graduates is 70 percent lower than pre-Telehomecare. Emergency Department visits are reduced by 53 percent.

Toronto Central CCAC, which delivers Telehomecare in Toronto Central LHIN, also measured patient satisfaction. Eighty-seven percent of patients would definitely recommend Telehomecare to others and 98 percent said their Telehomecare nurse understood what is important to them.

“Telemedicine has already become normalized in our hospitals and, now, it is increasingly being normalized in our homes. Remote patient monitoring means the doctor is always in – in our computers, on our phones and, most importantly, in our living rooms and kitchens,” says Dr. Ed Brown, OTN’s CEO.

“The patient doesn’t have to get in her car to go to healthcare. It comes to her. This means better health for the patient. It also means better health for the healthcare system itself. It means we actually have a chance to maintain and improve our cherished universal healthcare system in spite of the rising tide of chronic disease that we know is just over the horizon.”

Beyond the patient interface, the technology platform is being enhanced so that Telehomecare data can be integrated with the CCAC Client Health and Related Information System and physician’s Electronic Medical Records.

And, finally, Telehomecare is likely to be expanded as a care pathway for other conditions. A diabetes pilot is already underway.

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