White Paper

Integrated Software Supports Patient Advocate Nurses

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In the 1930s, about 40 percent of doctor-patient visits in the United States occurred in patient homes. Better known as "house calls," this kind of healthcare accounted for only 0.6 percent of healthcare visits by 1980.

As healthcare became institutionalized and medical staff were asked to improve patient turnaround times, some relationship-building experiences that were part of routine care and patient advocacy were lost.

Patient Advocate Nurses: A Critical Role in Patient Care

In response to this crucial gap in care, a movement to establish a liaison between patients and hospitals began in the 1970s. During this time the Association of Patient Service Representatives was formed, and a model of the Patient Bill of Rights was

established. Other societies took root and one became today's Society for Healthcare Consumer Advocacy (SHCA).

There can be hundreds of different jobs within a hospital system, and thanks to patient advocacy programs, professionals with backgrounds in counseling, nursing, social work, and others are providing enhanced services to patients with an extra focus on patient advocacy.

Nurses are uniquely qualified to serve as patient advocates. Studies indicate that nurses spend more time with patients than other healthcare providers and their care has a direct correlation to patient outcomes. Nurses are also able to navigate the healthcare system and ask questions on behalf of their patients. As a result, many healthcare systems are designating a new role for some nurses called a Patient Advocate Nurse, or PAN.

Overworked Nurses and Patient Safety

Nursing is a complex, high-stress, and demanding role. Researchers observed a cross-sectional group of six U.S. hospitals. They found that, on average, nurses perform 84 different types of activities, including patient examinations, medication review and administration, communication with other medical staff, patients, and families, and more. During an eight-hour shift, a nurse performs an average of 100 tasks with frequent interruptions.

Even though nurses are ideally suited to take on additional duties as a PAN, many find it is a challenge to provide patients with quality care in today's healthcare setting. The Institute of Medicine (IOM) published Keeping Patients Safe: Transforming the Work Environment of Nurses. The report states, "the typical work environment of nurses is characterized by many serious threats to patient safety."

Busy PANs and Communication Gaps

A major healthcare system in the Midwest was experiencing a communication gap with their patient admitting process. When one of their affiliate clinics determines that a patient needs to be

admitted to a hospital, the clinic calls the nearest or appropriate hospital within the system for assistance.

When clinics call the admitting number, they are actually speaking to Patient Advocate Nurses (PAN), who are also trauma nurses. In addition to receiving trauma and emergency calls, the PANs are often away from their desks to locate doctors, rooms, and equipment, help patients check in, and more.

These nurses are handling multiple tasks and triage and need to stay mobile. Instead of using a desk phone to take calls, they often used their cell phones. However, using cell phones presented multiple challenges and caused delays in patient services, inefficient staff time, and loss of referral income.

When the "Solution" is a Problem

The solution of using cell phones gave rise to new problems. This particular hospital system records every call. When a call was transferred from one of their clinics to the hospital, there wasn't a way for the cell phone to continue recording the call. This meant the clinic representative had to stay on the call to capture the recording.

Cell phones couldn't connect to EMR data to retrieve electronic medical health records, or have access to the hospital's system to see if a room was available. PANs had to use Microsoft OneNote™ to make notes about each cell call they took. These notes were then entered into the system later, which used up staff time and allowed for potential errors to be made.

Typically, there would be only one PAN on duty, and cell phones can only handle two phone calls at once. If the nurse was on a call with a patient and needed to call a doctor, both lines were used up. If a clinic called during this time and couldn't get through, the caller would contact a different hospital. This caused a delay in patient care and a financial loss to the hospital due to losing the referral.

Helping PANs with Integrated Communications Software

Amtelco suggested replacing cell phones with laptops or tablets and installing them with their desktop agent call center software. Using the highly portable laptop instead of a cell phone enabled PANs to maintain mobility and offered the flexibility of transferring calls from a desktop to a tablet when needed.

The PANs now have all of the resources available to them that a hospital call center agent would have, including access to electronic health records in the EMR database, call recording, call look-up, the ability to handle up to six calls, the use of call scripts, reporting, and more.

If a PAN is called away or their shift is ending, they can transfer calls with all documentation and history or pass a call to another PAN. In practice, the PAN is just transferring a voice but in actuality all of the notes, reporting, on-call info, history, and messages are also being transferred.

Improving Workflows with Technology

Technology can assist nurses with their enhanced roles and help them provide the best patient experience possible. Using customized communications software to consolidate and improve processes enables staff to do more while easing the strain of additional job duties. Patients benefit from the effects of streamlined workflows and accurate transfer of health record information.

Hospital systems are under increasing pressure to do more with less. Integrating enterprise-wide communications tools help healthcare systems operate more efficiently, lower operating costs, and lead to better outcomes.