

New Consumer Research Reveals Hospice Communication Strategies Lag Consumer Expectations

8 Out of 10 Family Caregivers Would Choose One Hospice Provider Over Another Based on the Ability to Communicate Effectively in Real-Time

For the past decade, hospice providers have been investing heavily in modernizing their clinical systems, care pathways and staff technologies. However, new research reveals that most hospice providers are falling short when it comes to what really matters to those who make the ultimate decision on choice of provider and serve up hospice satisfaction scores – the hospice consumer.

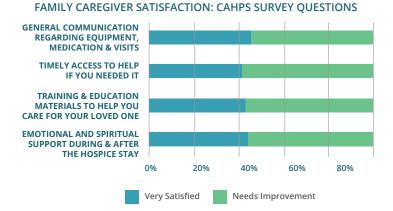
CitusHealth and Porter Research recently conducted the groundbreaking research study of 300 family caregivers who had a loved one under hospice care within the past 12 months regarding their experiences with hospice provider communication. The results indicate that most hospice providers are using outdated communication mechanisms, such as phone and insecure text messages, to connect with family caregivers outside of the in-person visit. Hospice provider communication choices are directly impacting the Consumer Assessment of Healthcare Providers and Systems (CAHPS) hospice survey results and heavily influencing choice of hospice provider.

Respondents overwhelmingly demand more real-time communication and are willing to choose a hospice provider that can deliver by using more advanced technology platforms.

This report demonstrates the influence that a hospice provider's method of communication can have on family caregiver satisfaction and lays out a roadmap for hospice providers that want to improve the family caregiver experience. The good news is that solving for these challenges is completely in a hospice provider's control. Implementing a virtual patient care strategy that utilizes technology to specifically address the most important communication needs will have a dramatic positive impact on quality of care, family caregiver satisfaction and CAHPS survey results.

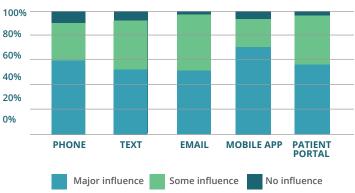
Family Caregivers are not Very Satisfied with Hospice Communication

On average only 43% of family caregivers claimed to be "very satisfied" with their hospice providers on the four CAHPS survey questions most impacted by communication: (1) communication with family, (2) training family to care for patient, (3) getting timely help, and (4) emotional and spiritual support, with only a slight variance in response for each question. The majority - 57% - indicated that providers have room for improvement (responses that included "somewhat satisfied" to "very unsatisfied"). The biggest need for improvement is delivering timely access to help, which should be a red flag for hospice providers that want to avoid unnecessary ER visits and hospitalizations.



Method of Communication Has a Major Influence on Family Caregiver Satisfaction

Across all methods of communication, over 90% of family caregivers indicated that the method of communication influenced their overall satisfaction scores. If family caregivers are not receiving immediate responses, are forced to play phone tag and send several communications to make their loved one comfortable during one of the most stressful times in life, they will respond with low satisfaction scores.



COMMUNICATION METHOD INFLUENCE ON SATISFACTION

Conversely, family caregivers that receive timely communication in their preferred mode give higher hospice satisfaction scores. The research found that in general

family caregivers that reported being "very satisfied" on the CAHPS survey questions said the method of communication had a major influence on their satisfaction.

The dominant three communications methods came up short in their ability to enable hospice clinical teams to immediately respond to urgent family caregiver needs.

Outdated Communication Methods Holding Hospice Providers Back

Since method of communication is tied to suboptimal family caregiver satisfaction, we need to understand the most common methods used outside of the in-person visit. It should not be surprising that phone, text and email were used 80% of the time by hospice providers.

While this may be expected, it highlights that hospices are falling behind the rest of the world when it comes to implementing customer-centric communications strategies. And, contrary to traditional views, these outdated communication methods are not always able to facilitate immediate responses.



There are several inherent challenges with these communication modalities. Phone, while great when you can reach someone on the first try, often results in missed calls, voicemails and many times requires several calls to accomplish one task because of its linear, one-to-one nature.

One family caregiver relayed a story about asking the visiting nurse to help him acquire a hospital bed for his father. To make that happen, it took seven back-and-forth phone calls over two days between the nurse, the case manager, the DME company and the caregiver to finally coordinate a delivery time for the bed. Not only is this inefficient, but it can cause unnecessary grief for the family caregiver and delays care. Text messaging, while it may be more "instant" if the right person is reached at the right time is often not secure, leaving the provider at risk for HIPAA violations. In addition, if the text goes unnoticed because the recipient is not looking at the work phone, it will not be escalated to another team member and therefore can be missed.

Email, also not secure, is the least "instant" communication method and given the sheer amount of email sent and received during the day can be easily missed.

There are better options available such as secure, real-time group messaging solutions that include the care team, family caregiver and external partners, but the incentive to upgrade to this communication technology has not been sufficient, until now.

Real-Time Communication Translates to More Patients and Grateful Families

In an age where technology satisfies consumers' need for instant communication, family caregivers expect the same from their hospice providers.

Eight out of 10 family caregivers indicated that they would (1) choose a hospice and (2) give a hospice better survey scores if they employed more advanced communication technologies that resulted in real-time, two-way communication. 78% OF FAMILY CAREGIVERS WOULD CHOOSE A HOSPICE

THAT ENABLES INSTANT COMMUNICATION THROUGH COMPUTER, TABLET, MOBILE OF FAMILY CAREGIVERS WOULD GIVE HOSPICES THAT PROVIDE INSTANT COMMUNICATION THROUGH COMPUTER, TABLET, MOBILE PHONE HIGHER

SATISFACTION SCORES

Optimizing Family Caregiver Satisfaction Starts Here

To better serve patients and families, hospices must make family caregivers a high priority. The first step is to invest in technology that breaks down communication barriers to facilitate real-time communication with family caregivers in the mode they prefer. Unfortunately, according to the CitusHealth / Home Health Care News Family Engagement Report, today only 26% of providers are satisfied with their current technology investment.

The most likely reason for dissatisfaction is that providers invested in technology, such as electronic medical record (EMR) systems, that are focused on communication with clinical staff and office staff but have neglected their most important audience – family caregivers. As a result, their technology investment is not improving the family caregiver experience.

If providers are not satisfied and family caregivers are not satisfied, the time to change is now.

Hospice providers must adopt the right virtual care technology and process to meet the most important family caregiver needs. The top five reported needs provide the roadmap for successfully optimizing family caregiver satisfaction.

Roadmap for Success: Family Caregiver Communication



IMMEDIATELY RECEIVING A RESPONSE TO AN EMERGENCY OR URGENT QUESTION.

While phone or text are typically used in an emergency, this research shows that family caregivers do not always receive an immediate response. A timely response can obviously make the difference between a family caregiver allowing the hospice agency to solve a problem instead of calling 911. Advanced solutions that are device-agnostic and employ auto-escalation technology to ensure that the appropriate person receives and can immediately respond to an emergency, decrease the likelihood of an unnecessary ER visit or hospitalization and resulting revocation of the hospice benefit

SPEAKING WITH OR VIDEO CHATTING DIRECTLY WITH THE HOSPICE MEDICAL DIRECTOR.

Medical Directors have a ton of responsibility yet very little time; however, family caregivers want more from the relationship. Technology that enables a video "face to face" interaction, rather than text or phone, results in more personal relationship and assurance that the MD is available for the patient. Video visits enable the MD to "meet" with more patients and family caregivers, even on the fly. While the future of reimbursement for this service is unclear as of the writing of this report, the impact on quality of care and family caregiver satisfaction is crystal clear.



CONDUCTING A GROUP CHAT WITH THE HOSPICE NURSE AND THE ENTIRE FAMILY.

Communicating with geographically dispersed families is a challenge for hospice clinical staff. Typically, the family caregiver shoulders the responsibility for relaying important information to the concerned family including siblings or children who may have a different perspective. Inevitably this means the family caregiver is playing traffic cop between the care team and other family members. Advanced solutions that enable nurses to address the entire family at once in secure message groups facilitate a clear and efficient communication flow, reduce confusion and back-and-forth. The result is less stress on the family caregiver and more time a nurse can spend caring for patients.



COORDINATING MEDICATION AND EQUIPMENT NEEDS.

The example of DME equipment coordination explained earlier in this report applies to any situation where third parties must be coordinated. If it takes two phone calls to coordinate medication or equipment, that may be two calls too many, since communication delays during end of life care cause friction and pain. Today's more sophisticated solutions can instantly connect clinical teams, physicians, DME suppliers, pharmacies and others to quickly coordinate the order, delivery, and pick-up of these essentials via secure, instant message. The result is less work for the family caregiver and clinical staff and more expedient care for the patient.



KNOWING ABOUT SCHEDULE CHANGES SUCH AS NURSE OR AIDE VISITS.

Family caregivers understand that emergencies happen, and schedules change frequently, but they still need to be in the loop. Solutions that can efficiently alert family caregivers and other care partners to a change in schedule allow these stakeholders to plan their day accordingly and avoid long waits for a nurse or aide. Instead of calling or texting individuals, one quick, group message can alert all critical stakeholders.

Real-Time Communication Technology is Now a "Must Have"

A patchwork of technologies such as video chat and secure messaging were hastily adopted by many hospice providers in 2020 to overcome lack of in-person visits. In a July 2020 Home Health Care News / CitusHealth survey, we saw that 74% of hospice providers viewed technology as a way to improve patient and family caregiver satisfaction.

Now, with a deeper understanding of family caregiver needs hospice providers can confidently invest in new technologies that enable real-time communication with these critical stakeholders in the mode they prefer. Hospices that implement these virtual patient care technologies will have a competitive advantage in the market as they become the "preferred" choice for families and receive higher CAHPS survey scores. Referral sources will recognize the higher CAHPS survey results and have the assurance that the hospice provider is investing in patient and family caregiver satisfaction.

Finally, the right investment in family caregiver engagement can increase productivity and allow more time for clinical staff to care for patients. With staffing shortages and increasing clinical staff burnout, a streamlining of communication with advanced technology that makes nurses' lives easier would be a welcome change and may even lead to happier staff and lower turnover.

ABOUT CITUSHEALTH

CitusHealth offers the only completely integrated virtual patient care platform solution that removes barriers to communication to immediately improve your patient and family caregiver experience. With built in HIPAAcompliant, secure features like auto-translated multilingual instant messaging, real-time video visits, customizable forms and surveys, and an education center, the CitusHealth solution enables real time communication between your clinical staff, care partners and family caregivers.

Communications via the CitusHealth platform can be delivered to the family caregiver through smart phone, computer, or tablet, based on the caregiver's preference, and can even be via secure "app-less technology." And with its auto-escalation technology, family caregiver communications are immediately routed to the proper clinician resulting in immediate response to patient needs. The result is better care, greater efficiencies and grateful patients and families. We believe that when we're better connected, everyone wins.

To learn how CitusHealth can help your organization improve the family caregiver experience and CAHPS survey results while easing the workload on your clinical staff, visit www.citushealth.com/hospice.

ABOUT PORTER RESEARCH

Porter Research works with healthcare and IT companies to develop and execute market research programs and create strategies using market intelligence uncovered. With 30 years of experience, we have worked with more than 300 IT companies, and complete thousands of interviews each year. This means we know your industry, we know how you need to use the data, and we execute the right research program to uncover what you can't find on your own. For more information visit www.porterresearch.com.

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