

Virtual Patient Advocates

To Be . . . or Not to Be?

A virtual patient advocate can be the bridge to providing proper care and guidance to a patient and care post discharge. It makes sense that having this extra effort would put a patient's mind at ease and allow them the freedom to reach out if they have a question they'd like answered.

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As a speaker and consultant on ways for medical personnel to be more effective communicators with their patients, I am often described by people as a patient advocate. That I am not – it's not because I don't believe

patient advocacy, but it simply wasn't my experience or my own ability to advocate for myself because of the emergent nature of my organ failure and subsequent surgery and treatment. I was fortunate to be conscious when I



Similar to another type of patient advocate, a VPA is someone who helps to support a patient when they're no longer under the daily watch of a doctor, healthcare system, or hospital. Ideally, as a patient or family member, you want to have a certain amount of trust in that person and feel confident that he or she is willing to assist you as well as be an effective communicator with members of your healthcare team of physicians and nurses.

An advocate may be a member of your family, such as a spouse, a child, another family member, or a close friend.

It can be a challenging time for patients and care givers after leaving a hospital setting. However, with the help of a VPA, you are offered accessibility to a medical professional who can:

- Obtain information for you when you have specific questions or concerns in mind
- Help to overcome your fears by letting you know that your wishes, challenges, successes or setbacks will be articulated to your team and potential solutions will be discussed and addressed in a timely manner
- Clarify your options for hospitals, doctors, diagnostic tests, and procedures or treatment choices when necessary
- Keep track of information that you receive from your medical team with instructions on what might be expected of you as a patient to continue your healing process
- Be someone to talk with regarding your procedure, and treatment moving forward
- Discuss treatment decisions and changes in your condition? Test results? Keeping track of medications?

Make sure your doctor and nurses have your advocate's phone number and make sure your advocate has the numbers for your providers, hospital and pharmacy, as well as anyone else you may want to contact in the case of an emergency. ▶

entered the hospital and I changed my healthcare proxies to be my parents, rather than my estranged husband who it would have defaulted to.

Having an advocate when you're a patient is crucial, and to the degree that

you are able to advocate for yourself, even better.

Today, there's a trend among insurers and hospital systems to provide patients with a virtual Patient Advocate (VPA) post-surgery and or hospitalisation.

The landscape of healthcare is changing at an amazingly fast pace. With emphasis on value-based care, while simultaneously keeping costs in check, technology is and must play a critical role.

As a long-term proficient communicator turned patient within the past 13 years (emergency live transplant 2005), I can tell you that nothing replaces a face-to-face interaction with another human being. Nothing. However, moving toward a hybrid model of delivering care is necessary for both healthcare systems as well as patients.

Timothy Bickmore, PhD, assistant professor of computer and information science at Northeastern University in Boston, developed the concept of being a virtual patient advocate. He did this during a clinical trial at Boston University Medical Center to increase a patient and family member(s) understanding of instruction after being discharged from the hospital as well as what was expected from them in their own care routines.

My article in *Asian Hospital & Healthcare Management* issue 40 was *Discharge Begins at Intake* that speaks to this topic precisely – but perhaps in reverse order – by helping to educate patients and families from the prior to a hospitalisation if at all possible. Patients and care givers are people who need and want instruction on what they should be doing upon being discharged from a hospital. Providing as much information available and delivering it to each patient and caregiver from the get go is a wise idea. At a minimum, when patients are leaving, clearly stated expectations and instructions should be provided.

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on how best to care for themselves, or simply want to double check something they may have misunderstood earlier, etc. Because of my experience of more than a decade of being a patient myself, I feel at ease reaching out to my medical team (nurse practitioner most often now) to have a question answered – but it's taken years.

In the early days, when my parents were helping me after leaving the hospital they were less likely to pick up the phone and call a member of my team for a variety of reasons. If they had a VPA, they would have been more likely to do so because their understanding would be that it is that person's job to assist them and patients post-discharge.

A year and a half ago, I had a hip replacement due to steroids I had received during two rejection episodes early on after my liver transplant. The x-ray and MRI showed that I had Avascular Necrosis and I would need a total hip replacement. After a brief hospitalisation, I was released and it was my insurance provider, Blue Cross Blue Shield of MA, who had a virtual patient advocate call me to check in and see how I was doing physically – as well as emotionally and mentally. She seemed more like a health coach and it was comforting to know that I had

someone I could talk to post surgery – when you feel almost forgotten or alone. BCBS is a bright organisation and I'm sure they – like other providers – would find value in offering this kind of support post-discharge as not only a great service to the patient, but as a way to curb increasing costs. Perhaps if questions are answered after a patient returns home, there's a less likely chance that a patient or care giver would feel that only going back to the hospital or doctor's office would be the only option. I can't help but believe it's the payer's desire to curb hospital readmissions as well as unforeseen or necessary visits to a doctor when a brief conversation might be all that is needed.

It seems that preparing patients to take the best possible care of themselves when they are home has a positive impact not only on the patient, but also providers and insurers. Makes sense. That's why I was provided with a virtual patient coach and I'm certain the field will grow and expand to help patients and caregivers at the onset of a hospitalisation as well.

It's every medical system and professional's goal to meaningfully engage with patients and caregivers before, during and after a hospitalisation. Sadly, this isn't always the case. Virtual patient advocates could work through each part of this process. Before, by reaching out after a pre-op appointment to make sure the patient/caregiver understood the directions of how to prepare for their hospital stay. During a patient's hospital stay, it might be nice for someone to check in with the patient or caregiver to check in on them and see if they need something or to talk with someone as well as begin to prepare them for the transition back home. Finally, a virtual patient advocate could work to help them transition to a home setting where the patient and caregivers are more comfortable, the cost is significantly reduced making all parties view this as a win-win-win. Win for patients. Win for providers. Win for

payers.

Physician's medical rounds can be quick and less frequent than what most patients or caregivers need or want – so using a virtual patient advocate could help in these situations as well. Obviously, upon discharge it makes sense to have this kind of support available for patients and family members or friends who are helping to care for the patient. More communication is far better than less in most circumstances – especially in ones dealing with an individual's health and well-being.

Other educational tools are used virtually after patient discharge in the form of mHealth and telehealth tools including wearables, web-based learning, and the ability to call a healthcare professional with a question. According to a recent survey of more than 900 health plans by Gartner and DirectPath, there's an increasing number of employers who are making telehealth a part of their health plans and encouraging their employees to opt for telehealth before visiting their doctor or ER/urgent care centre. Clearly, this is a strong indication that employers are thinking very seriously about decreasing medical expenses, but also acknowledging employee's desire for a greater selection of healthcare service options that are easily accessed.

That's the take-away from a study in the "2018 Medical Trends and Observations Report", 55 per cent of those surveyed are now offering telemedicine in their health plans –

this is a dramatic increase from the approximately 33 percent who offered the service in 2017."

From 2002 – 2012, I worked with a big box office supply retailer who hosted a Web Café series specifically for their small business customers – my area of expertise at the time. I produced (recruited authorities on various topics that were important to their customers/viewers, helped to create their decks, wrote the Top 10 Takeaways from the webinar – and even hosted or presented occasionally. In 2002, it was innovative and unique to provide content via the web to your consumer-base. Today, it's not so much.

This has changed and continues to a rapid pace and healthcare is catching up in a big way. It's no longer viewed as going above and beyond to provide additional information or greater "access" to the brand of a service provider or product line. As consumers, we assume it's part of what comes with the sale. I realise many people in medicine don't like to consider patients as customers . . . but, we are and this trend will continue as more and more patients become e-patients.

Being ill is incredibly stressful – for both patients as well as their families. Caring for the ill is quite trying as well and there are plenty of opportunities for situations to escalate. Having a virtual patient advocate can help to alleviate an influx of questions, concerns or

challenges from a patient or family member that can decrease some of these tensions.

As a patient, whether your entry into a hospital is an expected one – or an emergent one – oftentimes, plans fall short of expectations. To say that you're not at your best is an understatement. Another relatively easy fix for this is to post-discharge services is to assign a Virtual Patient Advocate. It could be a much more desirable option for the patient and their caregivers, as well as decreasing hospital readmissions and insurer's responsibility for paying for a much more expensive option of healthcare. It allows patients to still feel cared for and connected to their medical team after they leave the hospital.

AUTHOR BIO

In 2005, **Nancy** was the picture of success: a sought-after business speaker, the president of her own company, and a mother of three. Suddenly, Nancy found herself in a health crisis that would twice nearly end her life. Miraculously, her extensive rehab left her with no residuals; but, Nancy's life – and the message she wanted to bring to her audiences – were irrevocably changed. Nancy can be reached at nmichaels@nancymichaels.com

