

When a hospice patient is taken to the hospital, the transition can result in unwanted or unnecessary care. Gilchrist's nurses use real-time admission alerts to intervene at the point of care to help manage the patient's treatment according to his/her predetermined care plan. These alerts are delivered through the Encounter Notification Service® (ENS®) powered by Audacious Inquiry.

### Background and the Need

Despite having a care plan specifying treatment in a hospice setting (either in-home or inpatient hospice), hospice patients may end up in the emergency department (ED). These instances often arise as a response by worried family or friends, or from a sudden worsening in patient health status. In such situations, physicians may lack information on patients' preferences for care, which can result in unwanted treatment and/or a hospitalization that does not match the patient's care plan.

Gilchrist, which offers both inpatient and home hospice care services, previously lacked a timely way of knowing when patients were taken to the ED, and therefore could not ensure that the treating physician was aware of the patient's predetermined care plan. When patients' care plans do not follow them through the healthcare system, it can result in unwanted hospitalizations and treatment as well as unnecessarily prolonged hospital stays for admitted patients.

"When hospice patients are taken to the emergency department, communicating their care plan is vital to ensure the care they receive aligns with their wishes. With ENS, Gilchrist's hospice nurses are alerted to patient admissions in real time, allowing them to respond immediately to ensure the patient receives the care they want in the manner and setting they choose."

W. Anthony Riley, MD | Gilchrist Hospice Care  
Chief Medical Officer

### Current State

With ENS, an electronic alert is sent to Gilchrist's 24/7 hospice nurse hotline when one of their patients enters the ED, enabling a nurse to provide timely outreach at the point of care. This real-time alert allows a nurse to intervene immediately in the ED to discuss the patient's predetermined care plan and current options with the treating physician.

The hospice nurse can also discuss these options with the patient or the patient's caregivers and help them decide whether they prefer to be discharged to inpatient hospice care or discharged to their home with increased home hospice services to suit their present medical needs.

### The Benefit

#### To the Patient

- With timely notifications, hospice nurses can respond in real time to communicate with ED physicians, who are often uncomfortable initiating end-of-life care and may be unaware of the patient's intended care plan.<sup>1</sup>
- By discussing the patient's intended care plan and treatment preferences with physicians and discussing options with the patient and the patient's caregivers, nurses can help patients avoid unwanted hospitalizations and treatments and decrease length of stay for those who are admitted.<sup>2</sup>

#### To the Hospice Organization

- Timely notifications allow hospice nurses to contact ED providers to relay patient care plans in real time, ensuring the patient's wishes are respected.
- Through early intervention in the ED, hospice case managers can decrease transitions of care for hospice patients, which are associated with higher medical costs and poorer clinical outcomes.<sup>3</sup>
- Knowing about a patient's hospital encounter in real time allows Gilchrist nurses to reach out in a timely fashion and intercept patients who do not need to be admitted to the ED, reducing avoidable ED utilization.

<sup>1</sup>Smith AK, Fisher J, Schonberg MA, et al. Am I Doing the Right Thing? Provider Perspectives on Improving Palliative Care in the Emergency Department. *Annals of Emergency Medicine*. 2009;54(1):86-93. doi:10.1016/j.annemergmed.2008.08.022.

<sup>2</sup>Lamba S, Quest TE. Hospice Care and the Emergency Department: Rules, Regulations, and Referrals. *Annals of Emergency Medicine*. 2011;57(3):282-290. doi:10.1016/j.annemergmed.2010.06.569.

<sup>3</sup>Grudzen CR, Richardson LD, Hopper SS, Ortiz JM, Whang C, Morrison RS. Does Palliative Care Have a Future in the Emergency Department? Discussions With Attending Emergency Physicians. *Journal of pain and symptom management*. 2012;43(1):1-9. doi:10.1016/j.jpainsymman.2011.03.022.

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Gilchrist is a nationally recognized, nonprofit leader in serious illness and end-of-life care. With elder medical care, counseling and hospice, we help people at every stage of serious illness live life to the fullest and make informed choices about their care.

[gilchristcares.org](http://gilchristcares.org)



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