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CENTER FOR TECHNOLOGY AND AGING REPORT EXAMINES TECHNOLOGIES THAT HELP IMPROVE TRANSITIONS FROM HOSPITAL TO HOME AND REDUCE READMISSIONS

OAKLAND, Calif., Sept 16, 2010 – Every day thousands of patients are readmitted to hospitals because they did not get adequate follow-up care following their previous hospitalization. In fact, 18% of patients are readmitted to a hospital within 30 days of discharge – and as many as 76% of these readmissions are preventable. The most recent national figures on health care expenditures indicate that unplanned hospital readmissions cost Medicare \$17.4 billion in a single year. In its latest report, “Technologies for Improving Post-Acute Care Transitions,” the Center for Technology and Aging examines how the use of a variety of existing technologies could dramatically reduce readmissions.

“Several technologies are widely available and have potential to support post-acute care transitions, but they are underutilized,” said David Lindeman, Ph.D., Director of the Center for Technology and Aging. “Home-use technologies help decrease readmissions in a variety of ways, including engaging patients and caregivers in ways that promote better communication, medication adherence, and monitoring of chronic conditions.”

The complete report is available for download at www.techandaging.org,

The report covers four post-acute care transition (PACT) technology focus areas. Included is information such as technology definitions, how they are used in the home, their impact on readmissions, and charts that compare basic features of various technologies.

- Medication adherence technologies
 - Non-adherence is responsible for 33% to 69% of medication related hospital readmissions.
 - Four categories are described in a chart that lists sample technologies, pros/cons of each, market stage, economics, and what function each fills in the medication adherence spectrum.
- Medication reconciliation technologies
 - “Med-rec” seeks to reduce adverse drug events. Twenty percent of discharged patients experience an adverse event and 2/3 of those are medication related.

- A chart lists seven tools that help patients maintain an accurate list of medications, a description of each tool, and the organizations sponsoring them.

(More on medication optimization technologies is available in the Center's report, "Technologies for Optimizing Medication Use in Older Adults.")

- o Remote patient monitoring (RPM) technologies
 - A chart shows RPM capabilities and applications.
 - A discussion of the VHA's use of and research on Health Buddy.
 - A chart describing seven popular remote patient monitoring devices: Health Buddy, Telestation, Genesis DM, Intel's Health Guide, LifeView, Ideal LIFE Pod, and Healthanywhere.

(More information is available in the Center's report, "Technologies for Remote Patient Monitoring in Older Adults.")

- o Health information and communication technologies (ICT)
 - Personal health records and information – includes a description of the Stepping Stones Project of Whatcom County.
 - Web-based social networking – including a description of Tyze, www.tyze.org, which provides secure, online personal support networks.
 - Remote training and supervision technologies – includes a description of Rest Assured, and a Visiting Nurse Service of New York demonstration project.

According to the report, ICT enables timely access to vital health information. It points out that when ICT is used in conjunction with devices that monitor health parameters in the home, care becomes continuous rather than episodic. And, according to Dr. Lindeman, "care becomes patient-centered, rather than facility-centered."

The report includes a description of four well-known care transition models with varying use of home-based technologies. The models are: the Care Transitions Intervention (www.caretransitions.org), Guided Care (www.guidedcare.org), the Transitional Care Model (www.innovativecaremodels.com/care_models/21/overview), and Geriatric Resources for Assessment and Care of Elders (www.medicine.iupui.edu/iucar/research/grace.asp).

The Center for Technology and Aging (www.techandaging.org) supports more rapid adoption and diffusion of technologies that enhance independence and improve home and community-based care for older adults. Through grants, research, public policy involvement and development of practical tools and best practice guidelines, the Center serves as an independent, non-profit resource for improving the quality and cost-effectiveness of long-term care services. The Center was established with funding from The SCAN Foundation (www.thescanfoundation.org) and is affiliated with the Public Health Institute (www.phi.org) in Oakland, CA.

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