

**MEAVITA**

## A Dutch Case Study

### Remote Care From concept to reality

Rolien de Jong RN MSc

Nursing Informatics Symposium  
Copenhagen, 3 November 2008

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## The Case: Meavita



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**MEAVITA**

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## Meavita



**DELIVERS**

- homebased care
- institutional care
- education and prevention

**TO**

- 350.000 clients

**WITH**

- 20.000 employees

**TURNOVER**

- € 400.000.000

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**MEAVITA**

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## Rolien de Jong, nurse



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## Strategy Meavita

**Challenges**

- increasing amount of chronically ill people
- labourmarket shortage for nurses

**Vision on remote care**

- selfmanagement by empowerment
- create energy by leadership

**Focus**

- choose your own tool
- take the lead

**Implementation**

- take it step by step
- bring solutions not problems

**Result**

- altered need of professional care
- redesign healthcare organisations
- reduce costs



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## Remote Care at Meavita today

**Networks**

- 1 active network (350 patients)
- 1 sleeping network (150 patients)
- 1 shutdown network (109 patients)

**Experience**  
3 years of experience

**Participation in**

- national network of remote care
- national care transition programme



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## Telesens

2004

initiative of healthcare delivery organisation

substitute for (unplanned) nursing care



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## Telesens Results

experimental funding by the government

patients feel safer with Telesens

after initial testing, low frequency of use.



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## TVfoon

2005

initiative of healthcare delivery organisation

broadconcept of support platform

monitoring chronically ill patients  
- diabetes type 2  
- COPD

supporting selfmanagement and knowledge competencies



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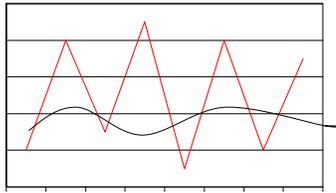
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## TVfoon Telehealth-results

Intensifying relationship brings increase in quality of treatment



1 jaar

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## TVfoon Results

NIVEL monitor

- 33% population experience increase in safety
- 25% population feel more selfsufficient
- evidence shows that we can expect a decrease in the amount of hospitalizations and the duration of hospitalization
- nurses find their work more varied
- half of the population experience an increase in workload



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## KOALA

2005

combined initiative of healthcare delivery organisation, healthinsurance company, telecommunication company

substitute for nursing care

monitoring of chronically ill patients on vital signs



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## KOALA Cure

- **COPD: 25 participants**
  - Monitoring (CCQ questionnaire, check vital signs, contact/referral if necessary)
  - Report to professionals
  - Care (medication, coaching)
- **DM: 58 participants**
  - Monitoring (self-measurement, check vital signs, contact/referral if necessary)
  - Care (medication, coaching)
  - Report to professionals
- **CHF: 155 participants**
  - Monitoring (self-measurement, follow-up alerts, check measurements, contact/referral if necessary)
  - Care (mainly technical nursingcare)
  - Report to professionals

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## KOALA Care

219 patients

- in need of nursing care
- via medical call centre
- planned and unplanned care



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## KOALA Results

University of Groningen (RUG)

- Substitution of nursing care is possible
- 30% reduction of costs in this study
- patients feel safer
- patients feel more self sufficient
- quicker implementation of new medication
- patient empowerment

Small market detected for care

- funding
- no acute care

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## Management and leadership

### TAKE RESPONSIBILITY

- base yourself on a strategic plan
- address the culture
- take the lead
- communicate on all levels
- dare to take a risk



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## Education

### Professional resistance

- innovation and technique will not work for older patients
- my office will be more like a cockpit than a consultingroom
- screen-to-screen consults seem fine, but you miss many non-verbal signals and complications
- the intensive support of patients that becomes possible through technique, may lead to high expectancies with patients, eg. that they can reach you 24/7



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## Education

### Toolkit

- professional groups
- managers
- new students
- employees



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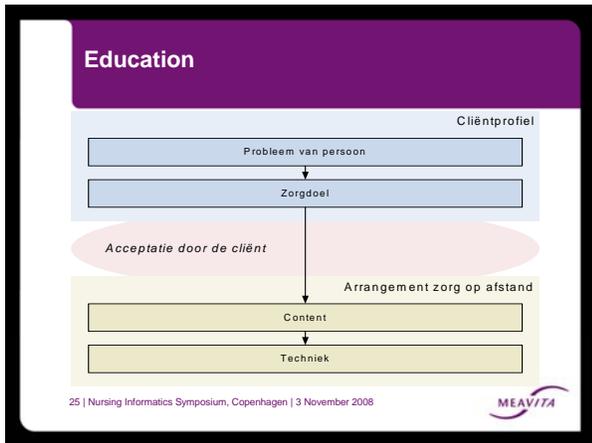
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## Education

**Care goals**

- retain quality of life
- compensate restrictions
- get your life in order
- making life tolerable
- retain balance
- supercede the problem
- change lifestyle
- stay healthy



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## Education

**Remote Care Packages**

- smart 'n easy
- finger on the pulse
- virtual chain
- surveillance
- safety
- compensation
- participate



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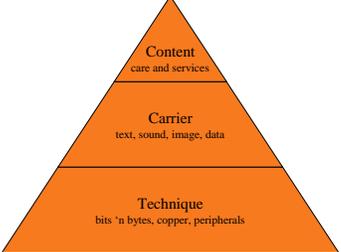
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## Communication & Collaboration



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## Communication & Collaboration

Communication	Monitoring
Fellow-sufferer forum Looking by social carer Regular contact with children Remote consultation Goodmorning, goodnight Remote coaching by nurse Periodical checks	Social alarm Remote door-opener Bloodpressure Passive alarm Fall detection Hart rhythm Camera surveillance
Information transfer	Tools
Personal carepage View EPD Information about homebirth Local agenda Advice and instruction on lifestyle Dietadvice	Order services Diabetes diary To do list Games

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## Informatics Design

- Evidence-based where possible.
- Systems are no problem for users.
- Scaling is a problem.
- Preliminary fear of use presumed.
- Interoperable is a wish but not reality.



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## Information Technology



Whose responsibility is the infrastructure?

Who should pay for it?

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## Policy

### Create an experimental environment

- funding
- align the initiatives
- minimize bureaucracy
- controlled competition.



### Post experimental fase

- define roles and responsibilities
- support stakeholders in taking roles and responsibilities
- funding for new initiatives



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## Culture

### TRUST

#### Work needed

- professionals and IT care  
eg create rolemodels
- Balanced collaborations  
eg The Hague
- National EPD takes a long time
- Market entry by technology vendors
- collaboration academic institutions



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## Towards a better reality

"This is not the end,  
it is not even the beginning of the end.  
But it is,  
perhaps,  
the end of the beginning."

*Winston Churchill*



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