Secure Texting Helps Pediatric Hospital Communicate With Parents

East Tennessee Children’s Hospital Deploys Backline® for Use in Multiple Departments

Case Study

150-Bed Acute Care Pediatric Hospital | Knoxville, Tennessee | Comprehensive Regional Pediatric Center
96,415 Outpatient Visits | 5,983 Admissions Annually | HIS: MEDITECH 6.0

“It’s a little thing that’s not such a little thing,” says Rick Simpson, Clinical Applications Manager at East Tennessee Children’s Hospital. “Using secure communication to keep our patients’ parents in the loop had an immediate impact: it eases parents’ minds, and keeps them involved in their children’s care.”

The provider–family connection is essential in a pediatric hospital, as children may be admitted for weeks or even months at a time. And, unlike community hospitals, families often must travel extended distances from home to be with their child in the hospital. This additional travel burden on parents requires even more time and planning to support and assist their child and their child’s caregivers, making communication and coordination with the hospital even more important.

At East Tennessee Children’s Hospital, Simpson and his team identified multiple departments where implementing Backline®, DrFirst’s secure communication and care team collaboration tool, will help close hospital-to-parent communication gaps.

In the NICU: Two-Way Secure Messaging

“Babies can be in our NICU for months,” said Simpson. “Our NICU nurses now send daily messages to parents. For example: ‘Baby is doing well. She fed 3 times and gained an ounce. Color looks good.’ Such seamless communications help staff quickly and efficiently update patient parents and answer queries on anything from the timing of planned procedures to whether it’s a good day to bring grandma for a visit.

“Due to the fact that we’re a pediatric hospital, our policy specifies that we don’t share staff full names with parents,” said Simpson. “So, we set up suitable Backline accounts to communicate with them. This works well with our nursing staff since they rotate in and out of their shifts, unlike the provider who is normally assigned directly to the patient.”

The biggest impact of this type of communication is that it really keeps the parents involved. In the past, parents would call in to the NICU periodically, but many times they were reluctant to call even when they wanted to. Removing those communication barriers helps parents be a part of their child’s care instead of feeling like outsiders.
Radiology: One-Way Secure Messaging

Depending on the test being ordered, sessions with radiology can take extended time, and parents often don’t know when their child will be done. The resulting uncertainty leads to parents’ reluctance to leave the radiology area.

East Tennessee Children’s Hospital uses one-way texting via Backline to send parents a secure message. Radiology technicians can send a one-way alert to parents when radiology has finished with the child’s tests, leaving parents free to go to the cafeteria to get something to eat or make a phone call.

Family caregivers frequently report problems attending to their own health and well-being while managing caregiving responsibilities, according to the Family Caregiver Alliance. This includes sleep deprivation, poor eating habits, failure to exercise, postponement of their own medical care, and increased risk for depression. East Tennessee Children’s Hospital’s use of Backline helps parents retain a sense of control and make time to take care of themselves.

Breaking Barriers to Staff Adoption of Secure Messaging

“My advice to any hospital looking to adopt secure texting is look at your policy now,” continued Simpson. “You’ll have an easier time with adoption if you address gaps in your BYOD policy before rolling out a secure messaging tool.”

Many hospital ‘Bring-Your-Own Device’ policies were created years ago, in some cases even before the advent of smartphones. “Our existing cell phone policy for nursing has been our biggest barrier to adopting Backline as fully as we’d like to,” said Simpson. “Our policy prohibits cell phone use in front of patients and their families. Originally, that policy helped ensure that our nurses were fully focused on patients, but when we wrote the policy, cell phones were only used for calls. Now we recognize that smartphones can be advanced tools for communication, plus they can provide access to references like Lexicomp and Lippincott. We’re revising our policy to specify that phones can’t be used for personal use, like Facebook.”

The hospital has also implemented Backline in their Emergency Department, where it’s used for real-time care team collaboration. In addition, the ED uses it to communicate with community primary care physicians and specialty providers.

Notably, East Tennessee Children’s Hospital’s use of Backline is now spreading virally as staff learn about its availability and functionality. “We’ve been getting requests from many other areas of the hospital to use Backline as they hear about the NICU’s experience with it,” said Simpson. “It’s one of the first times we have had people coming to us asking to use something new.”

Looking Toward the Future

When parents have better, more timely information about what’s going on with their children during their hospital stay, they’re more fully engaged in their children’s care. “Parents can become overwhelmed and stressed out when their children are hospitalized,” added Simpson. “When we can add a tool like secure messaging into our workflow, which helps make their lives a little easier, that’s good for both the parent and the child.”

East Tennessee Children’s Hospital routinely conducts post-visit satisfaction surveys. “Parents love it,” says Simpson. “We’re planning to use Backline in our new surgery suite when it’s finished this Fall. The ability to securely message to parents whose children are in surgery will be a huge benefit.”

“We’ve been getting requests from many other areas of the hospital to use Backline as they hear about the NICU’s experience with it. It’s one of the first times we have had people coming to us asking to use something new.”

– Rick Simpson, Clinical Applications Manager