Faster is Better: How Has Healthcare Communication Changed Over the Last 10 Years?
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Mobile, text-based communication has evolved from primarily one-way pager even beeper (numeric only) technology to full two-way text communication that encompasses not only pagers but also cell phones, smartphones, tablets, and computer pop-ups. It was not very long ago that you had to turn off your phone when you entered a hospital now their use is standard.

Other major advancements use integrations for automatic communication for critical results, patient placement, system alerts, even cardiac events. These, along with device advancements have introduced speed and accuracy not available 10 years ago.

While text messaging has clear utility as a fast, direct, and simple workflow compared to the “send a page and wait for a callback” model, it has serious implications for physicians. When PHI is transmitted in an electronic form, the sender must comply with the requirements of HIPAA and HITECH.

In response to HIPAA regulations, The Joint Commission has effectively banned physicians from using standard text messaging for communication that contains ePHI data or that includes an order for a patient. There are meaningful penalties that begin with a $50,000 fine for a single violation for unsecured communication and they go up from there. These regulations put a heavy burden and complicate the communication paradigm.

As long as there is no PHI in a message there are no HIPAA restrictions. Some organizations go to great lengths to eliminate private data by sending cryptic messages but this has its own problems and can cause confusion and lead to mistakes.

The Joint Commission did not ban all text messaging solutions, however it has established Administrative Simplification Provisions (AS) that serve as guidelines for developing secure communication systems. There are four major areas are critical to compliance:

- **Secure data centers** with physical security as well as policies for controls
- **Encryption** both in transit and at rest
- **Recipient authentication** when, and to whom a message has been delivered
- **Audit controls** ability to create and record an audit trail of all ePHI activity

Under these regulations and organization must use a smartphone app in order to comply.

Today’s technologies can support not only encryption and authentication but can also have complete control over the application and the data that is stored. This can give patients peace of mind that not only is their information is safe and but, their physician has the latest technology to be able to respond to their needs.

According to a report issued by The Joint Commission in 2011, a breakdown in communications could be tied to more than 60 percent of all reported sentinel events. In other surveys conducted, most
organizations cited a breakdown in communication, most often with or between physicians, as a major problem.

Advanced information sharing can result in faster and better decisions by informed clinicians, coordinated care for the patient, and ultimately safer care.

In the ever increasingly mobile world, messaging technology will revolutionize the quality of how health care is delivered. Physicians will have more, complete information available to them wherever they are with the ability to securely coordinate with other clinicians and physicians with little delay. The communication will be automatically populated into electronic medical records systems for a complete picture by other providers. Advancements will allow the physician to securely communicate directly with a patient and have the patient send updates electronically for immediate analysis.

Right now the easiest and most widely available method of sending an SMS to a colleague is not appropriate in many cases due to HIPAA regulations. Doctors have their hands tied and are experiencing great frustration in their efforts to provide faster, better care. The challenges that need to be addressed are getting doctors on to the same, secure system with easy access to other clinicians. Communication pathways to support include nurse to physician, physician to physician and other clinicians, coupled with automatic, secure alerts from monitoring systems.