



A Brief Overview of **LivingWell@Home**

By monitoring personalized data trends, The Evangelical Lutheran Good Samaritan Society's (the Society) LivingWell@Home (LW@H) program helps to keep people informed of their wellness and, if needed, provide early intervention to help maintain their overall well-being. The LW@H program research hopes to demonstrate the ability to lower healthcare costs, reduce hospital visits and perhaps even save lives.

Program Overview

"I think it's a wonderful way to
humanize technology,"

Margie Spanier, 67
Good Samaritan Society - Loveland Village, CO

The information provided by the LW@H program keeps caregivers informed about potential, emerging health conditions. The **LivingWell Center** is the Society's own unique centralized hub where all the clinical and activity data is electronically transmitted and reviewed by nurse specialists.

Technologies available in LW@H program include:

Sensor Technology uses non-invasive, wireless sensors that are installed in a client's home. Sensors detect changes in normal day-to-day patterns like sleeping behaviors, movement around the house, bathroom trips and bathing habits.

Telehealth is a remote care delivery system. A client can measure vital signs, such as, blood pressure, heart rate, oxygen levels, and weight.

Personal Emergency Response (PERS) is a system which notifies family or professional care givers in the event of an adverse event such as a fall or sudden illness.

Over 35% of seniors have one serious fall per year

Early Prevention

Trending changes in vitals, sleep quality, bathroom visits, bathing habits, and movement have captured these clinically meaningful events:

- Urinary tract infection (UTI)
- Sleep irregularities
- Negative reactions to medications
- Positive responses to adjustments in medications
- Chronic obstructive pulmonary disease (COPD)
- Congestive heart failure (CHF)
- Pneumonia
- Kidney infection
- Fungal infection
- Cardiac events
- Falls
- Chronic pain

65% of residents living in senior living experience **clinically significant sleep disturbances**

Sleep deprivation can lead to confusion, increased falls, depression, poor nutrition, and overall health decline

Implementation

In July 2012, the Society began deploying the LW@H technologies in assisted living and home care communities.

As of December 2012, the Society has deployed sensor technologies for:

- 1,289 assisted living apartments,
- 461 home care clients,
- 187 senior housing with services units, and
- 173 rehab/skilled nursing patients.

It is anticipated that by December 2013 roughly 1,900 assisted living and 1,500 housing with services units will be installed. Designs for service models direct to client or for direct to care providers are also being considered for development.

“Through technology, we can add another layer to the **safety and care** we’re giving, [...] helping **identify health related issues**.

*Pamela Wilson, director of campus housing
Good Samaritan Society — Ottumwa, IA*

Research

In June 2010, the Good Samaritan Society received an \$8.1 million grant from the Leona M. and Harry B. Helmsley Charitable Trust to launch the LW@H program. The study, lead by Dr. Leslie Grant from the University of Minnesota, includes nearly 1,300 control and experimental participants.

The study will evaluate the effectiveness of the LW@H technologies in helping seniors live as independently as possible. It will also help the Good Samaritan Society develop a sustainable business model that will provide seniors greater access to the technologies and help demonstrate to lawmakers and others how these tools might play a role in curbing the overall cost of healthcare.

LivingWell@Home costs about **\$6,000 per person, per year**. This is the equivalent cost of about **one month** of a nursing home stay.

The research will conclude July 2013 with the analysis completed in 2015. The study results will not be shared until the analysis is finished, but anecdotal stories and testimonials have provided reports of positive, proactive health outcomes highlighting the initial successes with the LW@H technology.

Success Stories

*Nurse specialist identified that the resident’s **sleep quality** had declined, there was **increased movement** noted in the living environment, especially the bathroom. The daughter was contacted and stated that she would take the client to the doctor as increased frequency is typically the only sign that a client is experiencing a urinary tract infection (UTI). The urinary analysis (UA) was positive and client began treatment on antibiotic and trending values returned to normal.*

50% of seniors will experience a UTI, the 2nd leading cause for **ER visits**.

*Nurse specialist noted that there had been several days of no evidence of the **client bathing**. The agency nurse made contact with the client and the client reported that her Chronic Obstructive Pulmonary Disease (COPD) symptoms had worsened and she did not feel safe bathing on her own. The nurse advised the client to make an appointment to go and see her physician for evaluation.*

For more success stories, contact the Good Samaritan Society.

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