

# Clinicians' Perspectives on Care at Home

Attitudes and expectations toward  
the growth of remote and hybrid  
care models



# Introduction

**As healthcare organizations cope with rising costs and razor-thin operating margins while navigating the shift toward more consumer-driven care, it's no surprise that delivering more care within the home has found its way into strategic plans.**

Clinicians' perspectives and expectations about these new care delivery models, however, have often been overlooked.

But with continued pressure on staffing—a complex challenge that estimates indicate will persist for years to come—executive leaders can't afford to disregard the hopes and expectations clinicians have for the future of care delivery.

Not only do staffing shortages pose a risk to access to care, patient safety, and hospital capacity, but in 2022 alone, hospitals spent [\\$1.3 billion more in temporary and replacement staffing](#) than they did pre-pandemic.

Care at home is undoubtedly an investment of time and resources that decision makers must consider before beginning. Yet these new models are becoming attractive for their potential to advance more consumer-friendly and accessible care as well as offer clinicians different types of care delivery experiences.

To help healthcare leaders gain a better understanding of where clinicians think care-at-home programs are headed and what they need from the organizations they serve, Current Health conducted an independent survey of 116 clinicians in varying types of roles in June 2023. These are key findings from that survey.

**89%** of nurses are likely to recommend care at home to colleagues and peers.

**28%** By 2030, the number of registered nurses needed will increase 28% from 2.8 million to 3.6 million.

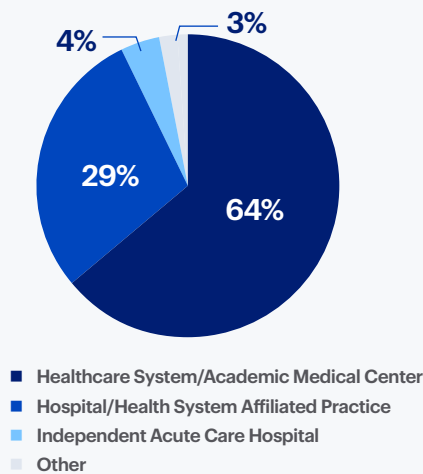


# About the Respondents

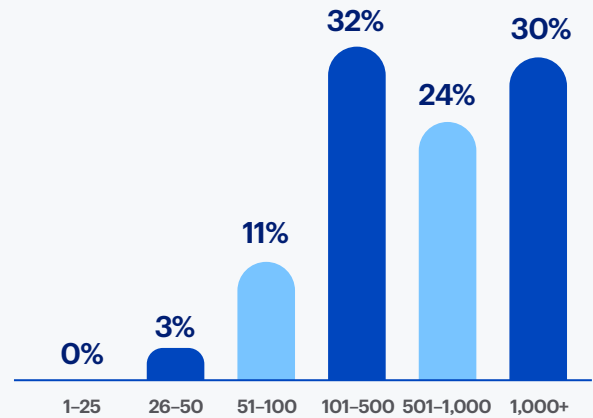
This market survey was commissioned by Current Health and conducted independently by Sage Growth Partners in June of 2023.

Survey respondents included 116 clinicians with a diverse range of perspectives across care delivery, quality care, and the future of care at home, informing the insights and trends identified throughout the report. The clinical perspective is emphasized throughout the report, as more than 90% of respondents indicate they currently care for patients in some capacity; the respondents in executive roles reported oversight of hands-on clinical teams.

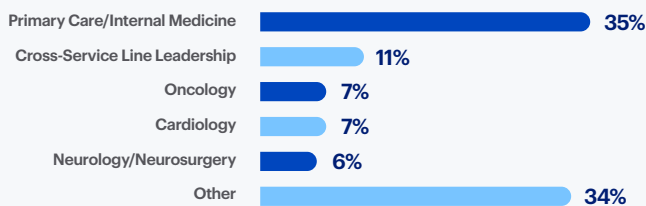
### Organization Type



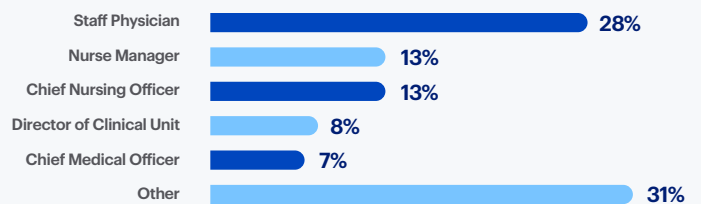
### Number of Practitioners at Their Organization



### Service Line



### Respondent Title





# Key Findings

**1** **Among clinicians, optimism abounds for care at home.**  
80% of clinicians are optimistic about the future of care-at-home programs.

**2** **Current care needs are keeping hospitals full and prolonging ED wait times:**  
81% of respondents report being, on average\*, at or over 80% of their inpatient capacity.

- **29% of these organizations report that they are, on average\*, at or over full capacity.**
- **At 41% of hospitals, the average boarding time in the ED is more than one day.**

\*in-patient bed utilization rate

**3** **Respondents feel that care at home offers a safe way to expand their clinical care capabilities.**  
Nearly 80% of respondents believe the model can serve patients safely.

**4** **Burnout is causing clinicians to evaluate other roles or industries.**  
Within the last six months, 33% of respondents report having considered leaving their current roles.

**5** **Care at home is an appealing career path for clinicians.**  
70% of respondents report being either *somewhat* or *very likely* to apply to a new care-at-home program.

**6** **Most clinicians are optimistic that new care-at-home programs can help stem the burnout crisis.**  
About two-thirds (67%) agree that a program could help alleviate nursing shortages and burnout, and more than half (59%) agree that a program could help lessen physician shortages and burnout.

**7** **Clinicians need support for technology and logistics in care-at-home programs.**  
Among the most challenging aspects of existing programs, 77% cite tech support in the home and nearly the same (73%) cite logistics support for technology, including delivery, pickup, and reprocessing.



## The Clinician Experience and the Future of Clinical Care

Exhaustion and burnout among clinicians isn't new. But recent research suggests it's still getting worse, due in part to the demands of administrative tasks and challenging schedules.

The effects of burnout are pervasive and touch every area of a health system—impacting quality of care and patient safety. Patient engagement and the patient experience often suffer, negatively impacting HCAHPS scores, reimbursement rates, and the long-term financial viability of the health system. With lower levels of job satisfaction, staff are more likely to leave their roles or leave healthcare altogether.

Our survey reveals a rift between a sense of job satisfaction and burnout and points to an under-discussed dynamic: people can enjoy their work and be happy in their roles, while also feeling exhausted.

While a majority (94%) of surveyed clinicians report feeling either *very* or *moderately satisfied* with their current roles, feelings of burnout persist among nearly half of all respondents. Thirty-four percent say they have felt that way *often* while 15% say they have those feelings *almost always*. Only 20% of respondents report *rarely* or *never* experiencing any burnout.

## The Growth of Care At Home

A changing healthcare consumer base is a driving force in shaping this category: people are aging, navigating more chronic conditions for longer, and have increasing options for how and where they are seeking care. Up to [\\$265 billion worth of care](#) for Medicare Fee-For-Service and Medicare Advantage beneficiaries could shift from traditional facilities to the home by 2025 without a reduction in quality or access.

New approaches to care delivery have immense potential to help health systems navigate these changes among healthcare consumers amid rising costs. Not only does care at home offer opportunities to make healthcare inherently more accessible to consumers, but it can also enable improved care quality. By combining remote patient monitoring, integrated data and clinical workflows, and support services, care-at-home models can improve operational efficiency and offer better experiences for clinicians. Among survey respondents who have some level of involvement with a hospital-at-home program, 47% say the clinical team they work with most closely is *very satisfied*.

Most respondents say their organizations currently offer some level of care at home, including virtual visits (87%), remote patient monitoring for chronic disease management (64%), post-acute care (57%), or hospital at home (46%).

Among survey respondents, 81% say they would like to see their organization's investment in care-at-home initiatives increase over the next 12 to 24 months. This echoes their belief that reimbursements and preferred services will mirror this shift: one-third (32%) agree that 25% or more of Medicare services will move to the home in the next few years.

### The Great Resignation

**33%** of respondents report having considered leaving their current role in the past 6 months.



Remote care is appealing to leadership and clinicians alike, with overwhelmingly favorable responses around both program recommendation and adoption:

- **85% are likely to endorse hospital-at-home programs**
- **67% feel eligible patients are likely to participate in care-at-home programs.**

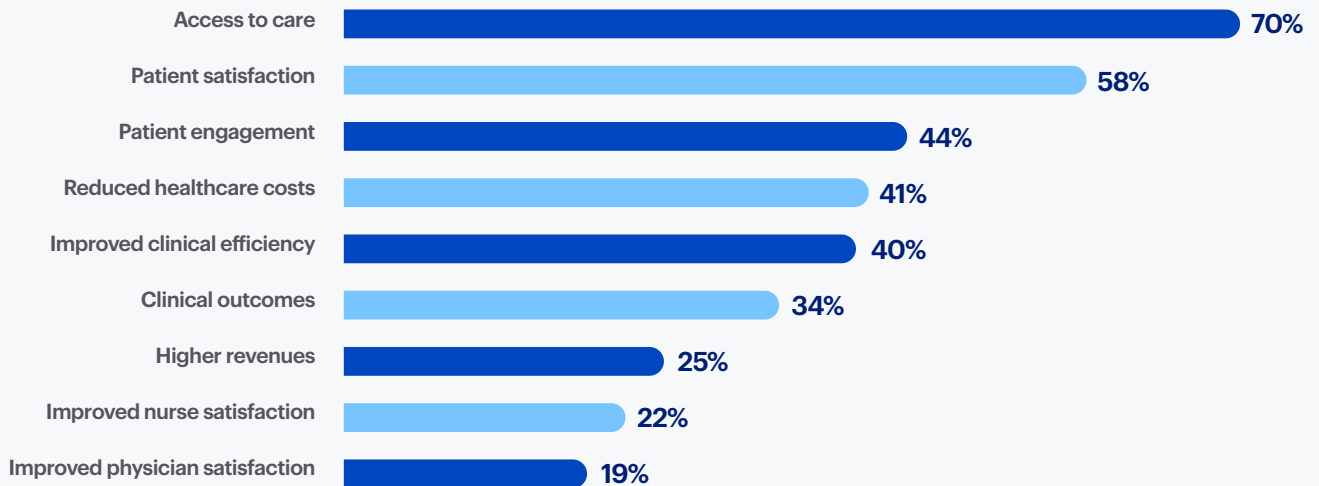
Interestingly, those in leadership roles were more likely to believe that patients are proactively inquiring about care-at-home programs as compared to their front-line counterparts who report receiving less frequent patient-initiated inquiries. Since patients can't request what they're not aware of, these responses point to the need to invest in communications, advertising, and educational materials about the benefits, availability, and importance of care-at-home programs to help engage and enroll eligible patients.

**The Care Delivery Paradigm Shift**

**80%** say care-at-home programs can serve patients safely.

### Positive Impacts of Care at Home

Which of the following do you believe will happen as a result of a shift to care-at-home programs?



**“I’m most excited about the opportunity to deliver higher quality care more efficiently, providing innovative ways to improve access to care, and matching patient and family values to the type of care they receive instead of a one-size-fits-all healthcare solution.”**

— **Nurse Care Manager, UCHealth**



### Attractive New Opportunities for Clinicians

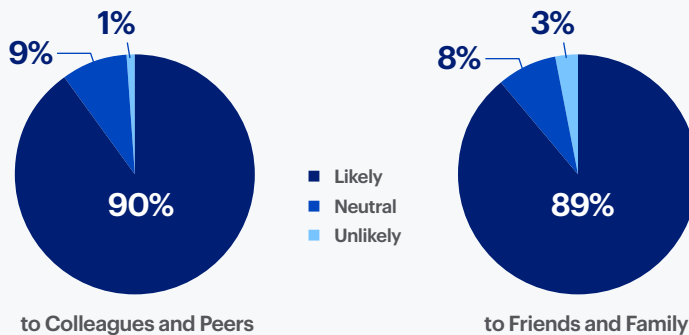
The demand for care at home continues to grow, with nearly a third of adults in the U.S. who are using remote health care services more so now than before the pandemic. Innovative health systems, therefore, must recognize the urgency to move new programs forward, or risk losing staff to organizations that offer compelling new remote care opportunities.

More than half of respondents (55%) said they have considered leaving their current role in the last 6 months. Among the reasons for considering a move, 45% are looking for a similar organization while 19% are looking to leave healthcare altogether.

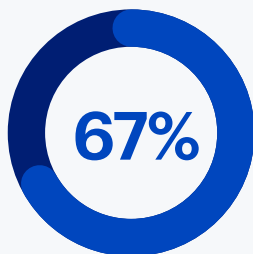
When we asked how likely they would be to apply to a new care-at-home program within their organization, 70% of respondents say they are *highly likely* or *somewhat likely* to do so—demonstrating an opportunity for organizations to attract and retain top talent.

Additionally, respondents across the board report feeling such confidence in care at home, that they are highly likely to recommend these programs to colleagues, peers, and family and friends alike:

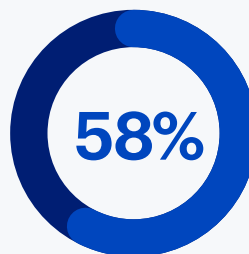
#### Likelihood to Recommend Care-at-Home Program



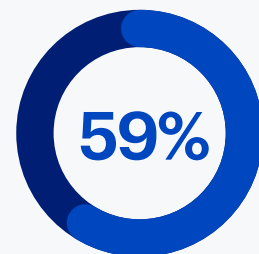
When asked to think about how care-at-home programs might impact their roles and address workforce challenges, the majority responded with a greater sense of optimism about the future:



Say offering a care-at-home program could help alleviate nursing shortages and burnout.



Say offering a care-at-home program could help increase satisfaction in their current role.



Say offering a care-at-home program could help alleviate physician shortages and burnout.



### Care at Home Offers Great Promise, but Support is Needed

An overwhelming majority of clinicians agree that care at home will enable improved access to care, clinical outcomes, patient satisfaction, and engagement. When asked about their organizations' priorities, 57% of respondents say investments in care-at-home programs are very important.

Among respondents that already have care-at-home programs in place, most are likely to endorse hospital at home (85%), post-acute care (90%), and chronic disease management to patients (94%).

While clinicians see the value of care at home, the same may not be true for decision-makers, who need to understand the full potential of care at home before they will buy-in.

Gaining buy-in, however, is only one piece of the puzzle. Clinicians shouldn't have additional responsibilities such as assisting with IT, logistics, and customer support. Rather, they need to have the right resources and support to engage in their roles, feel satisfied in their roles, and avoid burnout. Care-at-home programs must prioritize the clinician experience alongside the patient experience.

When asked about the services that would make a care-at-home program easier to adopt, 72% of respondents cited a support service for reviewing and analyzing clinical data while 64% cited logistics support for technology in the home including delivery, pickup, and reprocessing.

Among the most important metrics clinicians cite as important for administrators include:

**72%** Reducing readmissions

**67%** Avoidable complications

**64%** Length of stay

**61%** Increasing patient satisfaction

### Top 9 Care-at-Home Program Challenges







While the logistics support for technology remains a top challenge and concern for leadership and staff alike, when broken out by perspective, an interesting trend emerges—executives report feeling more concerned about care-at-home program adoption and engagement than their less senior counterparts.

**Leadership is significantly more concerned than clinicians are about engaging patients and earning clinician adoption of care-at-home models.**

### **Elevating Clinicians' Voices within Care at Home**

As existing care-at-home programs mature and health systems launch new efforts for a changing market, clinicians have an integral role to play in how programs are designed and developed.

When asked how leadership should incorporate clinicians' feedback when new initiatives such as care-at-home programs are implemented, an overwhelming majority say they not only want to have more input, but they also want to be a part of the process early on.

Thirty-nine percent say they should be able to participate in strategic discussions about planning new programs and nearly the same (34%) say they want to propose new programs and initiatives for implementation. Plus, one-quarter want to provide input before new programs are implemented. Despite the desire to take an active role in decisions, however, more than one-fifth (21%) say they're not currently given the opportunity to do so.

While leadership and clinicians are aligned on many of the top concerns, differences emerged between the two groups. For example, leadership is significantly more concerned than clinicians about the technology system overload (37% vs. 27%). And data overload and liability concerns were more of a concern for clinicians than leaders, (30% vs. 15%) and (29% vs. 9%), respectively.

All stakeholders must have a voice and work collaboratively from the outset to ensure they address concerns, design workarounds, and secure buy-in across departments.

## **Differences of Opinion**

**Our survey reveals clinicians are significantly more concerned than executives about data overload and liability.**

### **Technology System Overload**

- Leadership: 37%
- Clinicians: 27%

### **Data Overload**

- Leadership: 15%
- Clinicians: 30%

### **Liability**

- Leadership: 9%
- Clinicians: 29%

**“I am most concerned about the technology and EHR integration, regulatory pressures, and the efficiency of the model. We must be able to offer the same level and standard of care to all patients who are eligible.”**

**— Senior Manager, Oncology Pharmacy, Mayo Clinic**



## How-to: Best Practices for Integrating Clinical Input in Early Program Design

Before launching a care-at-home program, consider these key areas from a 2023 study\* in *Frontiers in Digital Health* for seeking input from clinicians.

- **Consider external and internal environmental factors.**  
Investigate existing legislation, regulatory factors, reimbursement requirements, and the availability of technology devices and other resources.
- **Identify clinical champions.**  
Champions are integral for developing new ideas and processes, making technology decisions, and rolling out new programs. They also constructively implement practice changes and motivate others to adopt new protocols.
- **Establish a hierarchy of internal ownership.**  
Clinical leaders can help identify the most appropriate roles to oversee eligibility and enrollment, vitals monitoring and alert reviews, and more.

By inviting more clinicians to the table, some of the top concerns about care-at-home programs cited by clinical respondents can be effectively addressed. For clinicians, several potential risk factors emerged: lack of time to manage new care pathways, lack of internal support and resources, and lack of provider incentives for care-at-home participation.

These insights are instructional for best-in-class care-at-home program design that allows clinicians to trust the insights and technology. Inclusively designed programs help ensure that clinicians can help design, ratify, and standardize the clinical pathways and alarm escalation protocols used. These processes help provide peace of mind that the new programs enable expansion of their high-quality care — and ultimately earn clinician confidence and program buy-in.

### What's Most Valuable to Clinical Teams When Evaluating Care-At-Home Programs?



**62%**

EHR integration



**57%**

Patient engagement and telehealth



**48%**

Remote patient monitoring

\*2023 study in "Frontiers in Digital Health" conducted by Current Health.



# What's Next for Care at Home

There's no question that the move to health at home will continue to be an area of focus for healthcare organizations looking to improve outcomes, patient experience and engagement, while diversifying revenue streams.

Clinicians are optimistic about care-at-home programs and the potential for these models to reduce burnout, increase job satisfaction, and offer a better workplace experience. As healthcare organizations design new initiatives, however, leaders should be intentional about including more clinician perspectives at the table with the aim of ensuring effective design and long-term program sustainability.

As healthcare organizations evaluate new solutions, the right technology is key to ensure clinical teams are supported instead of burdened by more work. A flexible, integrated care-at-home platform should enable clinical decision-making and provide support for key operational, logistical, and clinical functions.

Care at home is here to stay. Healthcare organizations must make investments today in the infrastructure that will improve programs from their initial design and inception to their roll-out and reimbursement processes. When thoughtfully done, these programs will contribute to making healthcare better for everyone: improving outcomes, enabling efficient resource distribution, and creating opportunities that will support a healthier, happier workforce.

## When evaluating solutions, look for those that offer:

- A virtual nursing service to monitor clinical dashboards and triage alarms 24/7. The center should also be staffed with nurses licensed in every state.
- The ability to receive clinical alerts through the platform or EHR/EDC system.
- In-home connectivity that requires only an electrical outlet to transmit data.
- A logistics service to drop off, pick up, and reprocess equipment.
- Support to ensure successful device and connectivity setup.
- Onsite training, ongoing support post-launch, and 24/7 technical support.

**Want to learn more about how the Current Health platform can help your organization deliver care at home?** For more information, visit [currenthealth.com](https://currenthealth.com).



## About Current Health, from Best Buy Health

Current Health, a Best Buy Health company, provides an enterprise solution that enables our partners to deliver safe, cost-effective, and scalable care in patients' homes.

Our solution unifies remote patient monitoring, telehealth, and patient engagement tools to give a holistic picture of patient health for populations across the acuity spectrum. Collected data feeds into our Clinical Dashboard for real-time insights, that integrate seamlessly with the EHR, enabling risk stratification across entire patient populations, early interventions, and efficient resource management. Powered by Best Buy, Current Health provides reliable services to support programs at every step, with supply chain management, in-home Geek Squad services, and 24/7 tech and clinical support teams, and dedicated implementation experts. We're bringing the best of retail to the forefront of healthcare and provide a secure and viable solution for healthcare organizations looking to make home a primary site of care.

For more information visit [currenthealth.com](https://currenthealth.com)



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