HELPING ILL OVER THE PHONE

There’s worldwide interest in local software strategy, reports Cameron Cooper

In a nation where overcrowded hospitals and overworked doctors make front-page news, it is little wonder that an innovative program to help chronically ill patients is receiving rave reviews.

The Coach program is the brainchild of Dr Margarite Vale, clinical associate professor of medicine at the University of Melbourne.

It is designed for patients with chronic ailments such as coronary heart disease, type-two diabetes and stroke who receive mentoring to achieve health targets and cut risks — for example, to reach a satisfactory blood pressure or body weight.

Software is licensed to organisations so they can deliver the program directly to patients over the telephone. The system generates personalised written information and contributes to a complete health record for the patient.

“You can see what results are being achieved,” says Vale. “Managing patient results through controlled trials means the program has been able to be credibly rolled out in public and private health systems in Australia and Europe, she says.

Almost 15 years since conceiving the idea, the success of the Coach program — the acronym is drawn from “Coaching patients On Achieving Cardiovascular Health — is pushing Vale out of her comfort zone in the medical sector and into the business world.

The program won the top honours at the 2009 Telstra Business Awards, the first time a micro-business — one with fewer than five employees — has received the top gong.

“In order for the program to benefit many people, the only way that we can do that is if it’s running in a successful business model,” Vale says.

Part of its success is a decision to choose a business model that can be delivered at low cost. Rather than utilising elite health professionals such as Vale to deliver the service, organisations license the program and then make use of a sophisticated system linking phone and software tools. “We provide full support for that,” Vale says. “That makes it infinitely transportable.”

The strategy is paying off. Australia and Europe aside, there is growing US interest in the program and the global financial crisis does not appear to have slowed momentum.

“One of the reasons for that is the fact that the medical area is such an expensive area and there’s a huge burden with increasing costs,” she says. “With this program saving money, perhaps it’s even more important for organisations to consider taking something like this on.”

Success has not come overnight. It was 1995 when Vale came up with the idea for the program, which then became the basis of her PhD.

She and colleagues James Best and Michael Jelinek spent eight years researching the program and conducted randomised control trials.

Further exhaustive trials over about four years revealed a 16 per cent greater reduction in hospital admissions and a 20 per cent greater reduction in bed days in the coached group of patients compared with a non-coached group.

Vale is not surprised by such results. It was when she was working as a dietitian in a public hospital that she realised she had no idea how good she was at helping patients lose weight or reduce their cholesterol levels because there was no opportunity for ongoing monitoring of patients.

In her program, relevant patients are identified and then called regularly on the telephone. During each call they are questioned about health-risk factors and treatments.

“We ask them what they know and then tell them what they should know,” Vale says. “This gives them confidence — empowers them to be more assertive with their doctors.”

Vale says that while it is pleasing chronic disease management is now on the agenda of governments and the private health sector, it is alarming that some unproven competitors are entering the market.

“It’s big business now. They’re doing that because of the financial rewards and (their programs) don’t have any track record, whereas the Coach program has 15 years of track record,” she says.

Today, the program is being delivered by six private health funds in Australia, in all states in some form through the public health system and in Europe by the largest private health fund in The Netherlands. “In all that time I didn’t know that this was going to be the culmination of all that work,” Vale says.

She praises the input and support that has been received from the University of Melbourne’s department of medicine.

“I would like to inspire other young researchers in the area of science and clinical medicine and demonstrate that the product of successful research can be successfully commercialised and in doing so can benefit many people,” she says.

In future, Vale says, the program has the potential to help not just those with established diseases but also those at high risk of contracting a disease.

“Our goal is for the program to be the No 1 chronic disease management program in the world,” she says.
Hard work paying off: Margarite Vale has devised an innovative program to help chronically ill patients

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Program founder Margarite Vale