Med Austin Times Bringing Healthcare News to the Forefront

June Edition 2019

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Technology and the Austin Healthcare Transformation



The competitive forces in healthcare continue to grow, and can be seen in the Austin market. Historically, the Austin healthcare market was dominated by Seton and St. David's. Austin Regional Clinic (ARC), Austin Diagnostic Clinic and other local providers also have a notable presence. But times are changing in the Austin healthcare market. Baylor Scott & White has now moved into the Austin and Central Texas market and is rapidly growing their presence. With now a third major player in the

market and transformation occurring throughout the healthcare industry, change is certain. When you study history and other industries, typically the top two in a market will thrive and the others continue to lose market share and struggle to survive. So, let's look at each of these organizations and how technology will play a role in reshaping the Austin healthcare market.

- St. David's is owned by HCA, one of the largest healthcare systems in the U.S.
- Seton is owned by Ascension Health, one of the largest healthcare systems in the U.S.
- Baylor Scott & White is one of the largest healthcare systems in Texas and is typically very dominate in their markets.
- ARC and ADC continue to expand their footprint throughout the Austin area. While they are not a full-service healthcare



system like the others previously mentioned, their clinics play

''...times are changing in the Austin healthcare market. Baylor Scott & White has now moved into the Austin market and is rapidly growing their presence. With...transformation occurring throughout the healthcare industry, change is certain.**?**

> a noteworthy role in the local market. These clinic organizations often have "affiliations" with a healthcare system. But the healthcare systems are now opening competing clinics, and the clinics are expanding their locations and services offered, so

they are competing for the same customer in many cases.

While many factors will influence the market, technology will play in pivotal role. Let's look at why technology and digital transformation will make such an impact.

- 1. Customer's/patient's expectations: Today's customers are tech- savvy and expect the same of their service providers. With fitness trackers, smart watches, smart phones and the every-growing role of technology in our lives, the technology capabilities of an organization highly influence perceptions and customer preferences.
- Physician expectations: With ever-growing pressures on physicians, the organization that can provide the best digital experience for the physicians and their patients will have an advantage.
- 3. Digital Transformation, convenience, access and customer experience: The optimal use of technology to provide timely access to the right care, when,

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Financial Forecast Practice Management (PM) System Tools to Improve Practice Efficiencies

By Reed Tinsley, CPA CVA, CFP, CHBC

A dministrative duties are a necessary evil every practice deals with. Not only do tasks like coding and documentation take valuable time away from treating patients, they can lead to a loss of revenue if not handled correctly.

According to recent surveysx, the majority of practicing physicians spend more than 20% of their time – the equivalent of one workday a week – on administrative tasks instead of patient care.

Thankfully, many practice management (PM) systems have the tools necessary to reduce your practice's administrative burdens.

Electronic Signatures

Many providers aren't sure if electronic signatures are allowed under HIPAA standards. Fortunately, both HIPAA accepts e-signatures on electronic documents.

An efficient PM system will let you

set up an electronic signature under the settings tab. This will save you from having to manually print out claims and medical notes just to brand them with your practice's signature stamp.

Automatic Insurance Checker

Manually calling payers to verify patient insurance eligibility can be a time-consuming task for staff. Eliminate this arduous process by adopting a PM system that automatically checks patient insurance information after booking an appointment.

The key word here is "automatic." Although most PM systems have an eligibility checker, only the best do it on their own.

Appointment Reminders

Patient no-shows can be frustrating to no end. They throw your whole day's schedule off tilt, and even hurt your practice's profitability.

Most PM systems will call patients and leave a message reminder about an upcoming appointment. But exemplary systems use email and text messaging



to communicate reminders as well. When dealing with patients, the more forms of communications you use, the better the chances are of them showing up for their appointment.

Patient Portals

Finally, a patient portal can act as a great source of medical information for your patients. It allows them to find education materials, pay bills and even schedule appointments. This decreases the need for patients to call your practice. Choose a PM system that comes with an integrated patient portal. It beats buying an independent portal offering since it is often difficult to sync software from two different vendors.

Ultimately, practice management systems hold the keys to getting organized and improving patient satisfaction. If your practice's workflow is hindering your ability to treat patients, maybe it's time to reconsider the system you use to run operations.



CHANGE THE WORLD. START WITH YOURS.

Women in Media Psychology

Dorothy Andrews (at right in front) is joined by her Fielding Graduate University professors. Dorothy is currently working on a PhD in Media Psychology where she is studying how media technologies are affecting perceptions of risk aversion, neutrality, and affinity. Dorothy Andrews is the Chief Behavioral Data Scientist and Actuary for Insurance Strategies Consulting LLC.

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Newly Trained Physicians Swamped with Job Choices



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By Phillip Miller Merritt Hawkins

inding a job is not the challenge Γ for newly trained physicians, a new survey suggests. Choosing from among dozens or even over 100 job options is. Conducted by Merritt Hawkins, a national physician search firm and a company of AMN Healthcare, the survey examines the career choices, plans and expectations of physicians in their final year of residency training. Two-thirds (66 percent) said they received 51 or more job solicitations during their training, while 45 percent received 100 or more. The majority (64 percent) said they were contacted too many times by recruiters, while only seven percent said they were not contacted enough. "Physicians coming out of training are being recruited like blue chip athletes," said Travis Singleton, executive vice president of Merritt Hawkins. "There are simply not enough new doctors to go around." Both physicians who are completing training in primary care and those in specialty areas are on the receiving end of dozens of recruitment offers, according to the survey. Sixty nine percent of primary care final-year medical residents said they received 51 or more recruiting offers during their training, as did 69 percent of internal

Physicians coming out of training are being recruited like blue chip athletes ?? —Travis Singleton

medicine subspecialists and 64 percent of surgical specialists. This belies the common perception that physician



shortages are confined to primary care, according to Singleton. "We need more primary care physicians to implement emerging healthcare delivery models that are based on enhanced access, prevention and quality," Singleton said. "But we also need more specialists to care for America's rapidly aging population." To support this view, Singleton points to an April, 2019 study by the Association of American Medical Colleges (AAMC). The study projects a shortage of approximately 122,000 physicians by 2032, including over

55,000 too few primary care physicians

and approximately 66,000 too few specialists. The supply of new physicians is not keeping up with demand due in part to the 1997 cap Congress imposed on federal spending used to train doctors, Singleton said. Little Interest in Rural Areas. The survey conveys some bad news for rural communities, which traditionally have had a difficult time attracting physicians. Only one percent of medical residents would prefer to practice in communities of 10,000 people or fewer and only

see Job Choices...page 10



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Content on the Texas Health Steps Online Provider Education website has been accredited by the Texas Medical Association, American Nurses Credentialing Center, National Commission for Health Education Credentialing, Texas State Board of Social Worker Examiners, Accreditation Council for Pharmacy Education, UTHSCSA Dental School Office of Continuing Dental Education, Texas Academy of Nutrition and Dietetics, Texas Academy of Audiology, and the International Board of Lactation Consultant Examiners. Continuing Education for multiple disciplines will be provided for some online content.

Oncology Research Cancer and Motherhood: Breastfeeding Linked to Decreased Risk



By Bridget O'Brien, D.O., Texas Breast Specialists– Georgetown

For parents, there is perhaps no greater joy than holding their newborn baby in their arms. It's a delicate time when parents are encouraged by their care team to bond with their new baby through skin-to-skin contact, and for mothers to consider breastfeeding.

Decisions about breastfeeding are highly personal. For women who give birth, the benefits of breastfeeding for both mother and baby abound and go beyond improving overall well-being. Mothers who choose to breastfeed may experience health benefits including weight loss, lower osteoporosis with age, and one often overlooked benefit – lower cancer risk.

Breastfeeding may help prevent breast cancer. Studies show that women

who have given birth lower their breast cancer risk. According to researchers, this decreased risk may be due in part to delays in menstrual cycles that accompany breastfeeding. This can lead to lower exposure to hormones such as androgens and estrogen, which can influence cancer risk. How long does a woman need to breastfeed to gain the potential benefits? According to the American Cancer Society, women who choose to breastfeed for as few as several months may reduce their breast cancer risk. For every 12 months a woman breastfeeds, risk may be reduced by 4.3 percent, according to the National Center for Biotechnology Information.

Breastfeeding lowers cancer risk for other cancer types.

The benefits of breastfeeding go beyond breast cancer. Breastfeeding also may help reduce risk for endometrial and ovarian cancers. Women who give birth before the age of 26 have a lower risk of ovarian cancer, specifically. According to the American Cancer



Society, the risk decreases with each full-term pregnancy. Research from the American Institute for Cancer Research found that mothers who want to enjoy the full health benefits should breastfeed for a minimum of six months.

Many women struggle to breastfeed, particularly in the beginning.

If you're a new mother or know someone who is, keep in mind that breastfeeding doesn't come easy for all women. It's common to experience pain or difficulty producing milk in the weeks following childbirth. Still, it's important to avoid missing out on the potential long-term benefits of breastfeeding, including lower cancer risk. Seek the support of a lactation consultant, or talk to your physician.

Ultimately, a woman's choice to breastfeed is personal and often based on cultural or individual values. While research supports the benefits to both mother and child, lowering cancer risk is another important consideration. Of course, not all cancers are preventable, and when patients need cancer care, I'm proud to work for a network of committed oncologists and multi-disciplinary teams that put patients first – including many mothers– supporting them through every chapter of their journey.◆



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Healthy Heart Saving Lives in Austin Using Hands Only CPR



By Joel Rice Executive Director American Heart Association

Did you know you might be able to save someone's life simply by knowing how to do Hands-Only CPR?

When a person has a cardiac arrest, survival depends on immediately getting CPR from someone nearby. Cardiac arrest – an electrical malfunction in the heart that causes an irregular heartbeat (arrhythmia) and disrupts the flow of blood to the brain, lungs and other organs - is a leading cause of death. Each year, over 350,000 out-of-hospital cardiac arrests occur in the United States.

According to the American Heart Association, 90 percent of people who suffer out-of-hospital cardiac arrests die. CPR, especially if performed immediately, can double or triple a cardiac arrest victim's chance of survival. including: The Austin Heart & Stroke Walk, Go Red For Women and Vestido Rojo. We are grateful for- the support of our Life Is Why Sponsor - Texas Mutual Insurance Company for providing the funds for all of our training materials. We are also grateful to our news media partner KXAN which has helped us with our CPR goal of training 2000 Austinites in Hands Only CPR and has featured so many CPR stories this year across their channels.

We continue our commitment to helping the survival rate for out of hospital cardiac arrests. In Austin only 32.9% of people who need CPR receive it, this is well below the national average. We still have a great amount of work to do so we can ensure everyone who needs CPR receives it.

Hands-Only CPR is CPR without mouth-to-mouth breaths. It is recommended for use by people who see a teen or adult suddenly collapse in an "out-of-hospital" setting (such as at home, at work or in a park).

It consists of two easy steps:

1. Call 9-1-1 (or send someone to do that).



If you are called on to give CPR in an emergency, you will most likely be trying to save the life of someone you love: a child, a spouse, a parent or a friend. Did you know that:

- 70 percent of out-of-hospital cardiac arrests happen in homes.
- Unfortunately, only about 46 percent of people who experience an out-of-hospital cardiac arrest get the immediate help that they need before professional help arrives.
- Hands-Only CPR has been shown to be as effective as conventional CPR for cardiac arrest at home, at work or in public.

This year in Austin, we have trained over 1,800 people in Hands Only CPR through numerous events

2. Push hard and fast in the center of the chest.

Doing Hands-Only CPR buys time until someone with more skills can provide help. And take note, using music beats can save lives while administering Hands-Only CPR. Song examples include "Stayin' Alive" by the Bee Gees, "Crazy in Love" by Beyoncé featuring Jay-Z, "Hips Don't Lie" by Shakira" or "Walk the Line" by Johnny Cash. People feel more confident performing Hands-Only CPR and are more likely to remember the correct rate when trained to the beat of a familiar song. When performing CPR,

St. David's South Austin Medical Center **Names New Chief Executive Officer**

Ct. David's South Austin Medical person to build on the successful history OCenter has selected Charles Laird as its new chief executive officer (CEO), replacing Todd Steward, who was recently named CEO of St. David's Medical Center.

Laird, who assumed his new role on May 1, began his healthcare administration career as an administrative resident for St. David's HealthCare. He also served as an associate administrator at St. David's Round Rock Medical Center early in his career before assuming a number of other leadership roles at hospitals in Texas and Kansas.

"With his hospital operations experience and demonstrated success in hospital leadership, combined with his knowledge of our market and our healthcare system, Charles is the ideal

of St. David's South Austin Medical Center," David Huffstutler, president and CEO of St. David's HealthCare, said. "I am confident he will effectively pursue the strategic vision of the hospital."

Before joining St. David's South Austin Medical Center, Laird served as CEO of Menorah Medical Center a full-service, acute care hospital in Overland Park, Kansas—for four years. In this role, he developed and expanded key service lines, recruited regionally recognized physicians to advance improved program development, physician satisfaction, decreased nurse turnover, increased quality metrics and improved patient experience. Additionally, Laird secured funding for a \$65-million capital expansion project.

Earlier in his career, Laird served as chief operating officer at Clear Lake Regional Medical Center in Houston and chief operating officer at West Houston Medical Center.

Laird received a Bachelor of Arts Southern from Methodist University in Dallas, and he earned his master's degree in Healthcare Administration from Trinity University in San Antonio. 🔶



Mental Health Stress Relief Using Environmental and Lifestyle Changes

By Mary Leigh Meyer

If you're struggling to reduce stress levels in your life, perhaps some subtle changes to your environment and day-to-day activities can help.

he trickle-down effects of stress can make you sick, give you a nosebleed and even stop your period. Often, people may have trouble recognizing and preventing stress, which can ultimately further increase their stress levels. Bradley Bogdan, LCSW-S, clinical social work supervisor at the Department of Psychiatry in the Texas A&M College of Medicine, explains some simple ways you can position yourself using your day-to-day routine and environment to reduce your stress levels.

Nature: Surround yourself with nature to help stress relief

A growing number of studies show visiting green spaces and being exposed to natural environments can reduce stress. "Natural-looking spaces have a big effect on minimizing stress and improving your overall health," Bogdan said. "Simply viewing representations of nature helps reduce stress. Many hospitals often put a fake skylight above beds to create calming environments."

For example, a new partnership between Houston Methodist Hospital, the Texas A&M University and Texas by Nature founded the Center for Health and Nature. The new center works to incorporate nature into healing environments.

If you are feeling chronically stressed, try to incorporate more nature-themed elements into your work and living space. Whether pictures, aquariums or greenery, elements of nature are proven to reduce stress levels.

Exercise: Find reliable, healthy ways to relieve stress

"Many people struggle to find healthy ways to discharge their stress," Bogdan said. "Finding a reliable way to discharge stress is critical. You will never get rid of all stress. It will always be a factor, and people need to know how to control it day-to-day."

Exercise is a great tool to regulate stress. "To help stress, you do not need much exercise. What matters the most is that you do it regularly, more so than strenuously," Bogdan said.

Professional help: Can therapy help me feel less stressed?

"A lot of the common modalities

of therapy is focused on working with people to think a different way," Bogdan said. "Not necessarily changing the facts, but reframing how they think about the facts."

Many times, financial stress can make people feel stuck in a stressful situation. People may struggle to make ends meet, and they often struggle with that stress monthly. Therapy can help these people re-evaluate their financial priorities. Perhaps, they do not need that specific car. Or perhaps, they easily succumb to peer pressure and eat out too often for their budget.

Similarly, therapy can also help relationship stress. "People may feel entrenched in a push and pull within a relationship," Bogdan said. "Certain relationships can cause an incredible amount of stress." A common example is the amount of stress caregivers feel

when taking care of others. Therapy can help the caregiver understand that the entire burden does not have to be placed upon them.

Am I stressed?

"The first step to reducing your stress is recognizing you are stressed," Bogdan said. "Stress is hard to recognize. Many people need a health care professional to tell them their back pain or chronic headaches are a result of stress, not another issue."

If you are unsure how much stress is too much stress, or are having trouble managing your stress, then speak with your health care provider. Most primary care providers may be able to help you manage stress through lifestyle changes. They can also refer you to a therapist, like a licensed social worker, for more specialized help.

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Technology **Continued from page 1**

where and how the consumer wants it. Amazon has leveraged this point to take massive market share from traditional retailers, and some healthcare organization will do the same in healthcare. THE CHALLENGE:

TIMING, AGILITY, SPEED: 1. While the healthcare systems in Austin are some of the largest in the country, unfortunately massive size can often be a detriment. Too often the huge healthcare organizations get bogged down and their enterprise processes take far too long to execute, while their smaller, more agile, innovative competitors seize the "window of opportunity". Those "windows of

opportunity" are getting smaller, technology change is moving faster, and timing is mission critical.

- 2. ABILITY TO TRANSFORM: Which one of these organizations will break free of the historically slow processes and traditional approaches, and embrace agility and digital transformation in healthcare?
- 3. LEADER vs. FOLLOWER: More than 30 years ago I heard a renowned healthcare leader state "in healthcare there are only a few real leaders, and most are followers". Unfortunately, now many years later, the same is still true. So, the questions are:

- Who will be that leader?
- ٠ Who will challenge traditional ways, change the pace, seize the window of opportunity and lead real healthcare transformation?
- Who will be the technology-savvy leader that leverages digital transformation and the full potential of technology in healthcare?

Health care is going through a time of significant change in Austin, and digital transformation will cause the pace and impact to increase. It will be exciting to see which organization will take the right, decisive actions to turn these changes into advantages, and create the best healthcare in Austin.

Healthy Heart Continued from page 8

you should push on the chest at a rate of 100 to 120 compressions per minute, which corresponds to the beat of the song examples above.

Ready to keep the beat going and learn Hands-Only CPR? Here are some resources for you - Watch

the 90-second video. Visit heart.org/ handsonlycpr to watch the Hands-Only CPR instructional video and share it with the important people in your life. Hands-Only CPR is a natural introduction to CPR, and the AHA encourages everyone to learn conventional CPR as a next step. You can find a CPR class near you at heart. org/findacourse.

For full information on Hands-Only CPR go to this link – www.heart. org/en/cpr ◆

Job Choices Continued from page 4

two percent would prefer to practice in communities of 25,000 people or fewer. The majority (65 percent) would prefer communities of 250,000 or more. However, international medical graduates (IMGs) are more likely to prefer smaller communities than are U.S. medical graduates, according to the survey. The survey also indicates that a majority of newly trained physicians would prefer to be employed and that few seek an independent, private practice setting. Forty-three percent would prefer employment with a hospital, while only two percent would prefer a solo practice setting. "The days of new doctors hanging out a shingle in an independent solo practice are over," Singleton said. "Most new doctors prefer to be employed rather than deal with the financial

private practice." A Difference in Debt The majority of final-year medical residents (51 percent) said they owe \$150,000 or more in student loans. IMGs, however, owe considerably less than do U.S. medical school graduates. The majority of IMGs (58 percent) said they have no student debt, compared to only 22 percent of U.S. graduates. While close to half of U.S. graduates (48 percent) owe \$200,000 or more in student loans, only 25 percent of IMGs owe that amount, reflecting the high cost of medical education in the U.S. relative to other countries. Buyer's Remorse Despite a favorable job market, some new doctors are unhappy about their choice of a profession, the survey indicates. Almost one in five (19 percent) said they would not choose

uncertainty and time demands of medicine as a career if they had their education to do over. Among U.S. medical graduates, the number was 21 percent, compared to only 13 percent for IMGs, who appear relatively happier than U.S. medical school graduates about their career path. "With high levels of physician burnout and continued uncertainty about the direction of the healthcare system, many doctors are under duress today," Singleton said. "It is not surprising that some newly trained doctors regret their choice of a career."◆

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Meet Moxi the Hospital Robot Assistant

There's a new innovative addition to Dell Children's Medical Center, meet "Moxi" the hospital robot assistant. Moxi, is about five feet tall and can extend both higher and lower in height, featuring blue and pink LED lights for eyes and one arm capable of picking up supplies.

Moxi has been navigating the halls at Dell Children's for the past few weeks. The robot is being trialed at Dell Children's and focuses on tasks including gathering supplies, delivery of daily linens and escorting families to other areas of the hospital.

Moxi helps nurses with non-patient tasks, so nurses have more time for patient care. The goal is for Moxi to help Dell Children's make operations more efficient and allow nurses more bedside time with patients. Austin-based Diligent Robotics, an artificial intelligence company, created Moxi in early 2018. A team member with the company programs Moxi's to-do list every day.

"Dell Children's Medical Center is excited to participate in an early adopter trial with Diligent Robotics, a Central Texas company striving to lead the way in their industry," said Elizabeth Fredeboelling, chief nursing officer at Dell Children's. "Together we are exploring how integrating innovative technology into the pediatric healthcare environment can revolutionize healthcare." Children in hospitals are more critically ill than ever, increasing the clinical demands the care team must balance. Integrating Moxi to complete some simple logistical tasks for the care team allows the nursing staff to gain back time with patients. The robotic revolution continues to move forward and Dell Children's is proud to be on the cutting-edge of technology.



Live Well Age Well Where Should I Live: Housing Options for Older Adults

By Laura Marshall

Several housing options are available to Texas' growing older adult population. Depending on a person's needs, there is a range of supports to help an older person stay in his or her own home including housing support and medical services. Other options include independent and assisted living communities, home sharing, as well as skilled nursing facilities.

Most people want to remain in their homes as they age. Preparing for aging in place does not have to be a daunting task, but it requires planning ahead for your health and personal priorities just as much as it can involve installing grab bars and walk-in bathtubs.

Support programs such as home-delivered meals and driving services can assist an older person in staying in their own home and remaining independent with or without a vehicle. An Aging and Disability Resource Center specialist can direct you toward an array of services you might be eligible to receive such as: caregiving support, day activity and health service centers, home and congregate meals, and health care needs.

If you or a loved one is having

challenges with daily activities like bathing, dressing, or preparing meals, a home health specialist can help. Ask your local ADRC to direct you to a benefits counselor who can help you determine

There are also alternative options for older adults on a fixed/ low-income budget. Housing aid is available specifically for eligible older renters, funded through the U.S. Department of Housing and Urban Development. The federal program funds local public housing authorities and provides income-based housing assistance programs, often in the form of multi-family apartment complexes. Some HUD programs offer housing assistance in complexes specifically for older adults and people with disabilities. Other HUD programs might provide applicants with a rent waiver for an apartment of their choosing. Both types of housing usually involve a waitlist.

"Those who qualify for affordable housing should first contact their local housing authority. To locate your local housing authority, go to the Texas Department of Housing and Community Affairs website, which offers a search tool and the ability to filter by senior or other types of housing," said Claire Irwin, outreach specialist at Texas Health and Human Services.

Irwin suggests not letting a

waitlist discourage you.

"If you anticipate needing housing assistance, it is best to get on the list as soon as possible so you are prepared when housing becomes available," she said.

ve a waitlist. Your local ADRC or housing "Those who qualify for authority can help you identify dable housing should first what supports are available and act their local housing what you might be eligible for.

> When you are considering housing as you age, you might be surprised at your options. If you have questions about eligibility and supports, contact your local ADRC and set up an appointment with a benefits counselor. You can contact a local ADRC by calling 855-937-2372. \blacklozenge



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