



BC Health
Information
Management
Professionals
Society

Spring Symposium 2017

Notes from the Interactive Session



Description

- Speakers and facilitators prepared questions for audience discussion during the Interactive Session. Topics included:
 - Patient Engagement
 - Patient Medical Home & Multidisciplinary Care
 - IM/IT Governance
 - Identity Management
 - Virtual Care
 - Consumer Health Solutions
- Participants moved tables to discuss the question(s) of their choice, for approximately 30 minutes.
- Representative from each table summarized and shared the groups discussion with the room. (3-5 minutes)



PATIENT ENGAGEMENT

Consider the value of patient engagement in health IT projects.

- a) When is it valuable to engage patients?*
- b) At what stage in the project?*
- c) Which strategies are effective?*



Include Patients

- Into health service re-design and improvement projects and in health IM/IT projects that impact patients (e.g. telehealth, patient portals, personal health records)
- Throughout the health project lifecycle, including the planning and design phases of projects (incl. design of conference agendas)
- Health organizations are shifting to greater collaboration with patient and family partners in health system improvement initiatives and health system research.
- Good References <http://www.iap2.org/?page=A5>; www.patientsincluded.org
- *“Once you have worked with patient partners on a health improvement project, you won’t want to work on another one without them.”*



Patient Engagement Strategies

- To support patient partners who are engaged on projects:
 - Link patients with a primary contact person the project and arrange an orientation discussion
 - Provide patients with a list of contacts and roles
 - Arrange occasional informal meeting opportunities such as at Project Kick Off, and key milestone celebrations
 - Have a plan to share the project outcomes or documents with patient partners.
- BC Patient Voices Network
 - Provide resources for health partners to plan for successful patient/provider engagement experiences, and help to identify potential patient partners. <https://bcpsqc.ca/about-the-council/patient-voices-network/>
- BC SUPPORT Unit (Support for People and Patient-Oriented Research and Trials)
 - *Promoting and streamlining patient-oriented research*
 - *Defines patient-oriented research as research that engages patients as partners and focuses on patient-identified priorities with the goals of improving patient experiences, health outcomes and the health system.*



PATIENT MEDICAL HOME & MULTIDISCIPLINARY CARE

What are the IM/IT challenges and possible solutions to multidisciplinary team-based care in a Patient Medical Home? Consider:

- a) Access to patient health information, workflow, and other factors.
- b) Links with other parts of the health system including specialists, other community providers, pharmacies and acute care facilities
- c) How can the clinical, policy and technical/systems barriers for information sharing for Primary Care Home and across the continuum of care be tackled?



Challenges & Solutions

- Connecting teams across the health care delivery system who are involved in a patients' circle of care is a challenge.
 - A solution is needed to connect teams and support team communication e.g. messaging, access to shared care plan, referral processes
- Policy Standardization Across BC (incl. Privacy and Security policies)
- Access to data & system resources from outside the health authority network
- Internal system connectivity and consistency of information
- Aligning care models (walk-in, virtual visits, family practice, population-based) across the health system continuum
- Meeting the variety of needs across several generations who are practicing primary care medicine
- Access to primary care is limited
 - is there a way to leverage hospital utilization data to stabilize demand & supply?
- Can analytics be used to enable proactive care management
 - important to have a usable solution that accesses real-time data



Challenges & Solutions

- There are speciality primary care practices emerging, such as COPD-specialized PCPs)
 - Their data could be used to identify best practices or inform care standards
- Consider work-life balance and provider quality of life
- Trust and relationships on the team are important, needed to support the circle of collaboration
- Providers on the multidisciplinary team need to be supported to connect regularly as a team, eg. Musculoskeletal team might triage patients to appropriate resources on the team;
- Solutions for rural and urban communities will differ
- Privacy & Security barriers
 - Allow patient to 'opt in' for sharing of their information
- Centralize patient data in a Personal Health Record, and have EMRs focus on practice support, processes and workflows.
- Maintain access to population-based data



IM/IT GOVERNANCE

While there has been considerable success in standardizing health information management practices, standards and technologies within BC, there is still much work to do in terms of shared governance, priority setting and business leadership for the planning, implementation and sustainability of IM/IT initiatives.

What mechanisms can we put in place to fully achieve these goals and to ensure that as IM/IT leaders we are focusing on the right solutions to meet provincial health care needs?



Mechanisms

- Have strong leadership promote and drive a BC culture shift to empower patients, health authority staff, and MoH to do the following:
- Collaborate (less focus on consolidate) and take courageous steps; guard against fear-based decision making;
- BC Provincial strategies along with framework and action plan have been well communicated
- Focus on outcomes and outputs; avoid having too many committees that provide updates but miss opportunity to collaborate on risks/issues/priorities; consider working groups with clear deliverables;
- Ensure good, competent governance – vital to have the right decision makers at the appropriate table; needed to build trust
- Adopt agile/flexible/iterative approaches/environments – accept some failures



Mechanisms

- Leverage open source and non-proprietary solutions and leverage partnerships to influence large vendors
- Link industry with health institutions to promote knowledge translation, expertise sharing, and contribution to promote innovation and trying different approaches
- “Survey the source’ before governing it.
- Growing public awareness of health IM/IT gaps and priorities;
 - Public communication strategy is important (ie. Canada Health Infoway)
 - Need even more transparency on current state and challenges
- Consider Provincial ‘think tanks’ to problem solve, develop consensus,
- Address gap between public perception of regulations, need for regulation, and desires from health system and healthcare team
- Ensure effective change management and communication activities are deeply aligned with project management and occur as early as possible in the project.



IDENTITY MANAGEMENT

The value of client/patient identify is fundamental to a successful clinical information system.

In addition to EMPI, describe the challenges and propose solutions to improve the integrity of client identity management within and across systems.



Challenges & Solutions

- Lacking a single source of truth; there are multiple systems that are trusted sources for various types of health information
- EMPI is not implemented at all health authorities
- Would help to have a roadmap outlining integration pathways to the EMPI
- Training
- Vendors should prioritize upgrades necessary to support EMPI integration
- Prioritize initiatives that promote sharing of patient health information across providers, health authority services, acute and residential care teams,
- Excelleris is a good model
- Involve the client/patient in eHealth initiatives especially PHR



VIRTUAL CARE

Access to data and the expertise of our physicians and clinicians is mainly limited to within the walls of our facilities.

What are the challenges and solutions to a successful Virtual Care Strategy?



Virtual Care Is...

- Telephone (should be managed)
- Email
- Secure Messaging
- Video
- Decision Support Tools (to assess patients)
- Tele-triage
- Patient Portals
- Includes synchronous and asynchronous services, store & forward approaches
- Connecting providers with patients
- Connecting providers with other providers (e.g. referrals, care coordination, consultation, care planning)



Challenges

- Network connectivity from home and availability of broadband
- Safety of personal health information
- Dependence on technology and lack of 'code grey' procedures could impact care
- Minimum data sets are not well understood or distributed
- Poor usability is associated with reduced adoption of the service/solution
- Ensuring the primary care physician is involved in the care at the patient level;
- At the system level, ensure appropriate level of collaboration with Division of Family Practice/Primary Care physicians
- Connecting providers with other providers (e.g. referrals, care coordination, consultation, care planning)
- Technical support available when citizens/patients need it.



Solutions

- Health information connected across the health system
- Distribute BC's Minimum data set(s)
- Connect various health information systems together at the back end with API integration
- Provincial privacy and security standards
- Consider provincial solutions that are deployed uniquely across health authorities
- Continue to move to Cloud based solutions
- Plan for growing use of smart phones
- Engage patients to identify their needs and preferences (ie. Self-scheduling,) concerns, fears.



CONSUMER HEALTH SOLUTIONS

Private sector and the public are steaming ahead with health Apps that range from a personal health record to sensors (e.g. blood glucose, blood pressure, and behavioural nudges to improve lifestyle).

What are the opportunities for the healthcare system and what strategies should we consider to respond?



Opportunities

- Do hackathons
- Seek venture capital from vendors
- Consumer health solution data could be inputs for clinical decision support, population and public health interventions
- Ensure data standards are being referenced
- Consider centralizing patient data in the PHR
- Communicate benefits clearly to citizens and care providers
- Quantify the opportunity and describe ROI
- Review the evidence to identify the starting point/functionality
- Start with focussed, targeted project, measure and share tangible results, expand iteratively.