Digital First for Health Strategy and Key Initiatives to Support Clinician Involvement in Ontario Health Teams (OHTs)

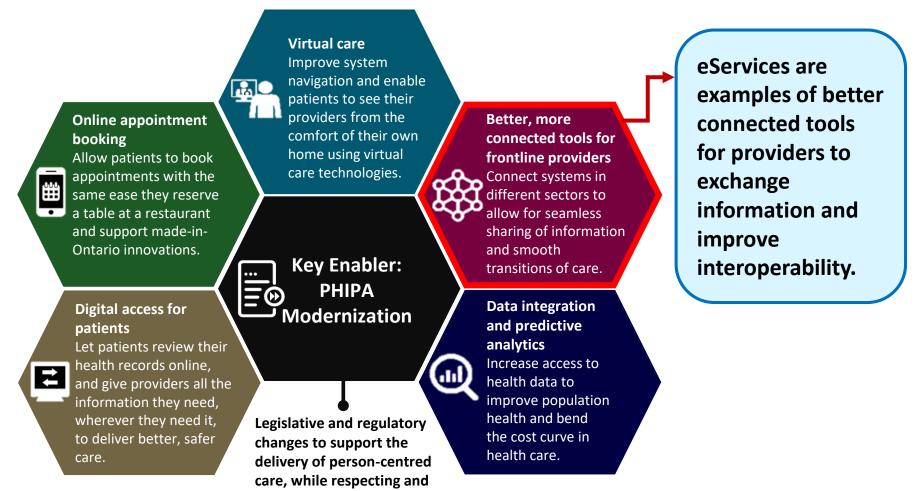
Digital Health/eServices for OHTs Webinar

January 28, 2021



The Digital First for Health Strategy

Digital First for Health is central to the government's efforts to transform the health care system so that it is integrated, sustainable, and patient-centred. Strong digital capabilities are critical to enable system integration and the sharing of information throughout the health care system so that patients receive seamless care.



maintaining privacy.



Lessons Learned from COVID-19



Ontarians and clinicians are willing and ready to adopt virtual care as part of their health care journey across the health care system.



Streamlined navigation services are critical for finding and accessing the right health care services. A single "digital front door" is required.



It remains challenging to follow a **single patient across different episodes of care**. Digital identity and modernized infrastructure need to be prioritized.



Interoperability is a patient safety issue, and stronger provincial direction is needed to ensure connected systems are available at the front-line.



DFFH has the potential to **drive impactful change and support a better health care experience in underserved sectors**, such as long-term care and home care, where the investments in digital health are not as mature.



The Digital Health Playbook

The **Digital Health Playbook** has been published as part of the Ministry's central supports program to support prospective OHTs in the development of their digital health plans. It is intended to establish the necessary balance between provincial standardization and local innovation.

The Playbook is made of 3 components:



The Digital Health Playbook details how the adoption and use of digital health solutions can help OHTs meet their clinical and performance objectives. The document provides a general overview of the types of tools, requirements and policies that will guide the creation of digitally-enabled OHTs.



The Digital Health Service Catalogue contains a set of digital tools, services and infrastructure assets that will assist OHTs in fulfilling digital health requirements, while balancing local health needs.



The Digital Health Policy Guidance Document is a set of draft provincial policy directions governing acquisition, implementation, and use of digital tools and services.

The Ministry plans to undertake a substantial update to the Digital Health Playbook based on advancements in the Digital First for Health strategy and feedback from health sector stakeholders.



What are eServices?

"eServices" are digital services to support clinical workflows across organizations to:

- enable smoother transitions in care;
- improve the patient experience by replacing fax and paper-based processes of sharing information; and
- improve efficiency, timeliness and accuracy.
- Co-led by the eConsult Centre of Excellence and the eHealth Centre of Excellence, the eServices Program is a coordinated approach to rolling out clinically interrelated eServices. eServices include eConsult, eReferral, eOrdering, etc.
 - **eConsult** enables primary care providers (e.g. family physicians and nurse practitioners) to engage in a secure electronic dialogue with specialists (community-based or hospital-based) around patient care.
 - eReferral digitizes the traditionally paper-based fax referral process of requesting care, obtaining a service, or getting support for a healthcare client from a healthcare provider.
- Other key delivery partners include Ontario Health (Ontario Telemedicine Network, Digital Services, Regional Digital Health Leads) and OntarioMD.
- An eServices Steering Committee has been established and includes representation from physicians on the Clinical Advisory Group and digital service partners and regional leads on the Technical and Regional Advisory Groups, respectively.





eServices for OHTs January 28, 2021



Objectives

At the conclusion of this presentation, participants will be able to:

- Define the eServices program, including eConsult and eReferral, and how these programs improve access to specialists and services
- 2. Understand how existing eConsult and eReferral destinations can support your priority patient populations
- 3. Identify how eServices can work with you to support access to additional services and specialty care



Barriers to Accessing Services and Specialist Care

Wait times

Availability

Appointments and scheduling





Transportation

Cost – lost wages

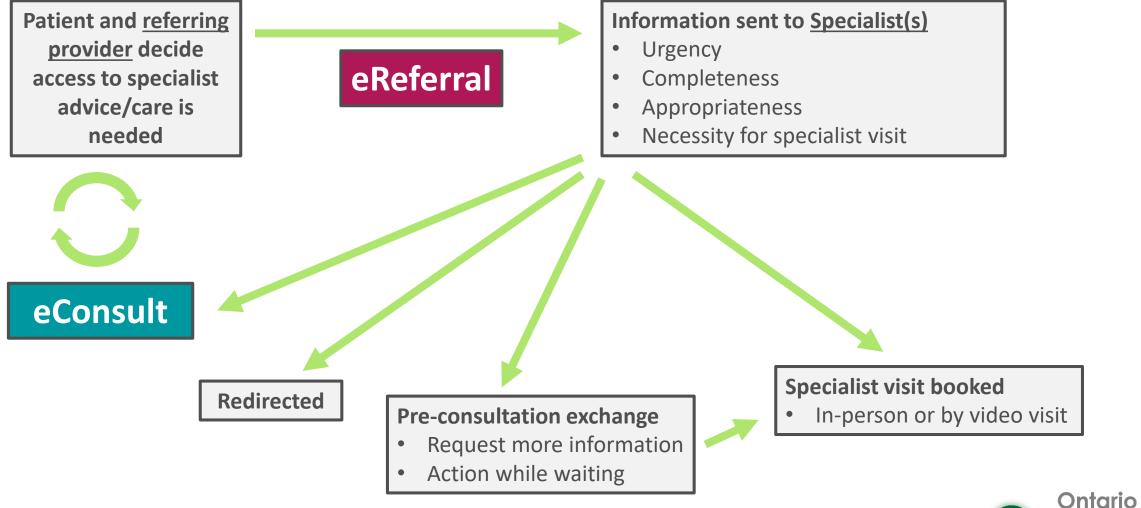
Acceptability/comfort

Ability to participate in the appointment

Mobility, language, dementia, mental health

Multiple conditions, multiple appointments

eConsult and eReferral





eConsult Case Example – Endocrinology for LTC

Day 1

• <u>PCP Submits eConsult Question</u> [Elderly patient] now residing in long term care due to progressive dementia. Hx of vertebral fracture and hip fracture while taking [medication 1]. Continues to ambulate independently with a 4ww and likely at high risk for future fall and potential fracture. [PCP gives CrCl reading]. [Patient] is unable to tolerate swallowing pills whole. LTC guidelines from 2015 suggest [medication 2] may be beneficial for fracture prevention. Transfers for outpatient appointments have become increasingly challenging due to frailty. Could you recommend which treatment might be best in this frail ambulating [patient]?

Day 2

Specialist Response: Thanks for the eConsult. The history of fragility fractures puts this patient in the severe osteoporosis category. If [patient] has no history of radiation, malignancy in the bone, hyperparathyroidism or hypercalcemia, then [medication 3] could be a treatment option. This is the only medication we have approved for osteoporosis therapy that targets osteoblastic activity to build new bone. It is expensive though (about \$1000/month for up to 2 years) and it is not covered by Ontario Drug Benefit. It is administered SC on a daily basis. A simpler and cheaper treatment option would be [medication 2], and it should still offer significant benefit in terms of fracture protection. [Specialist gives suggested dose.] In this patient's case, the cost of [medication 2] should be covered [by ODB].

Day 3

• PCP accepts advice, closes eConsult case.



What is the Vision of the eServices Program?

Ontario patients will have informed choices for equitable and timely access to specialists and specialty services and smoother, safer transitions in care using digital tools that improve communication between patients and their caregivers.



Benefits of the eServices Program (eConsult / eReferral)

Improved patient experience

- Quicker and more efficient access to specialty care and services,
 whether or not an in-person visit is required
- Increased involvement and visibility for patients during the referral process
- Equitable access to specialty care by providing an alternative when inperson specialist visits are challenging for patients (e.g. remote locations or mobility challenges)



Benefits of the eServices Program (eConsult / eReferral)

Improved clinician experience

- More appropriate access to specialty care for patients, including:
 - Timely access to specialty advice when an in-person visit is not required (median response time <1 day)
 - A more complete, and efficient referral process when a virtual or in-person visit is required
- Prompts learning, knowledge sharing and improved care coordination between primary care and specialists/services
- More efficient and better documented communication between clinicians



Benefits of the eServices Program (eConsult / eReferral)

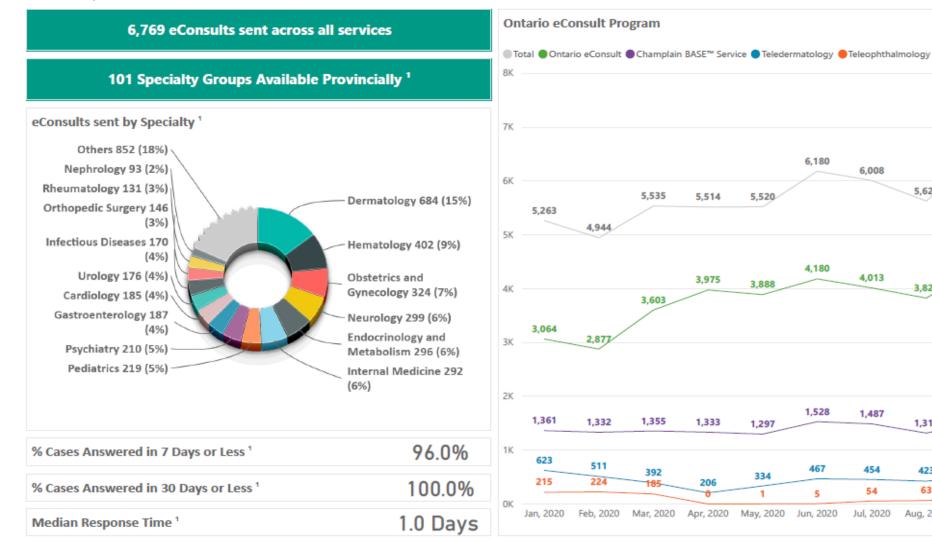
Administrative time savings

- Less time booking appointments
- Reduction in unnecessary referrals, when applicable
- Reduction in time spent contacting patients (phone calls, emails)
- No need to track down lost referrals (lost or missing faxes)



Population Health - eConsult

January 2020 to December 2020





7,176

4,937

1,694

454

6,769

4,666

1,624

413

6,950

4,705

1,649

503

6,605

4,441

1,530

Sep, 2020

6,008

4,013

1,487

454

54 Jul, 2020 5,626

3,824

1,316

423

63

Aug, 2020

eConsult Provincial BASETM Managed Specialty Groups (n=101)

Addiction Medicine

- General
- Opioid

Allergy & Clinical

Immunology

General & Pediatrics

Anesthesiology

Cardiology

- General & Pediatrics
- Cardiac Surgery
- Electrophysiology
- Inherited Heart Rhythm Disorders
- Interventional
- Pediatrics Electrophysiology
- Pediatrics Inherited Heart Rhythm Disorders

Cannabis Medicine

Concussion

Dentistry

• Pediatric

Dermatology

• General & Pediatrics

Diabetes

Endocrinology

- General & Pediatrics
- Diabetes

Environmental Health

Gastroenterology

• General & Pediatrics

Genetics

- Medical Genetics
- Pediatric Medical Genetics

Geriatrics

- Care of the Elderly
- Frailty Management
- GeriMedRisk
- Medication
- Psychiatry

Gynecology

- General & Pediatrics
- Gynecologic Oncology
- Gynecologic Reproductive Endocrinology & Infertility
- Urogynecology

Hematology

• General & Pediatrics

Hepatology

• General & Pediatrics

HIV

- General
- Psychiatry

Infectious Diseases

- General & Pediatrics
- COVID-19

Internal Medicine

Nephrology

General & Pediatrics

Neurology

- Epilepsy
- Headaches
- General & Pediatrics
- Neuroradiology
- Neurosurgery
- Sleep Medicine
- Stroke

Obstetrics

Orthopaedics

- General & Pediatrics
- Spinal Surgery

Otolaryngology

- ENT
- Head & Neck Surgery

Pain Medicine

Palliative Care

Pediatrics

- General
- Allergy & Clinical Immunology
- Cardiology
- Dentistry
- Dermatology
- Electrophysiology

- Endocrinology
- Developmental
- Gastroenterology
- Hematology
- Hepatology
- Infectious Diseases
- Inherited Heart Rhythm Disorders
- Neonatal/Perinatal
- Medical Genetics
- Nephrology
- Neurology
- Oncology
- Orthopaedic Surgery
- Psychiatry
- Urology

Physical Medicine &

Rehabilitation

Psychiatry

- General (English & French)
- ADD/ADHD
- Anxiety
- Depression, Bi-Polar Disorder
- Developmental/Behavioural
- Medically Complex
- Mood Disorders
- Pediatrics
- Perinatal
- Sleep Medicine
- Transitional Age (16-25)

Public Health

Respirology

- General
- Sleep Medicine

Rheumatology

- General
- Inflammatory Arthritis
- Osteoporosis

Sleep Medicine

- Neurology
- Psychiatric
- Respirology

Surgery

- General
- Head and Neck
- Neurosurgery
- Orthopaedic Surgery
- Pediatric Orthopedic Surgery
- Plastic Surgery
- Spinal
- Thoracic
- Vascular

Thrombosis

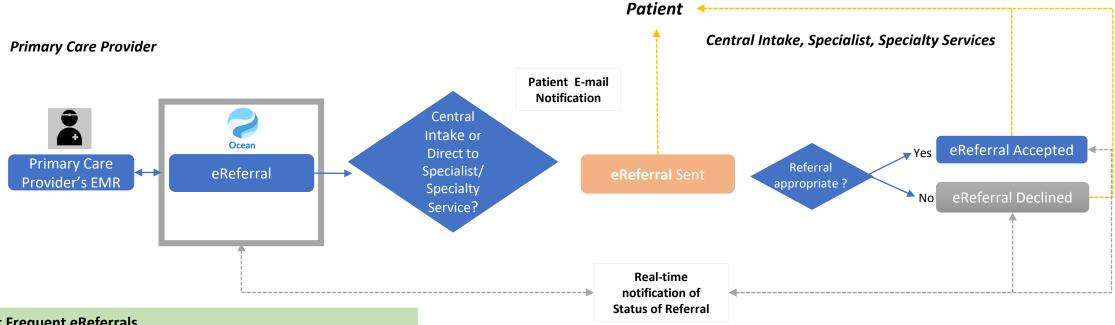
Transgender

Urology

- General & Pediatrics
- Male Fertility/Sexual Medicine
- Oncology
- Urogynecology



eReferral



Most Frequent eReferrals

Diagnostic Imaging – ultrasound, x-ray, MRI, CT, mammography

Orthopedics including low back pain

Cardiology

Dermatology

Psychiatry

General surgery

Infectious disease

Diabetes

Counselling

Otolaryngology

Colonoscopy

Home & Community Care



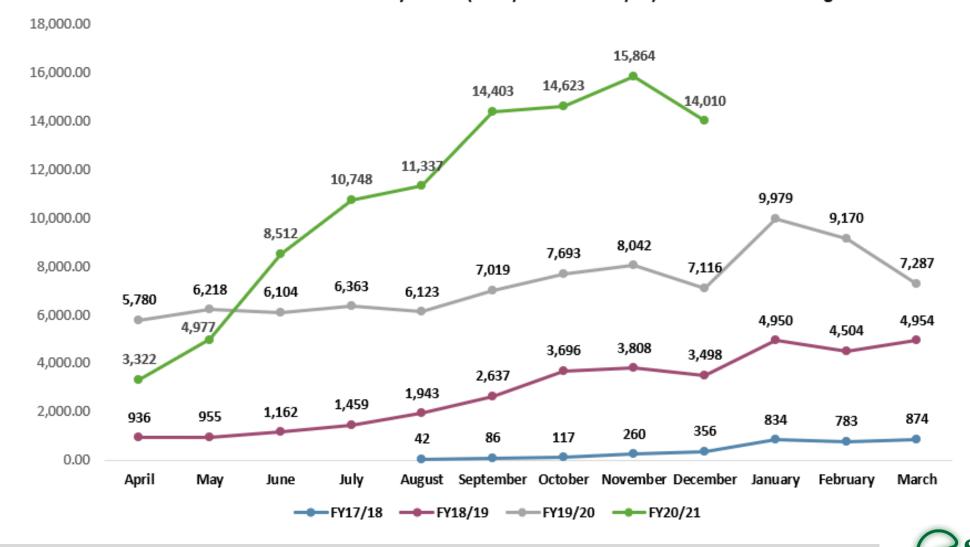
eConsult and eReferral are already available

- Sign up to use eConsult and eReferral
 - eConsult: eConsultCOE@toh.ca
 - eReferral: eReferral@ehealthce.ca
- Regional eServices deployment teams are available in each of the OH regions to support use of eConsult and eReferral (see Appendix for specific location contact information)
- eServices Clinical Advisory Group members and Clinical Champions
- eConsult is an extremely useful tool in long term care homes
- Let us know about any immediate gaps/needs in specialty areas for your OHTs



Population Health - eReferral

Total eReferrals Processed - Monthly Trends (FY 17/18 to FYTD 20/21) Ontario eReferral Program



Ontario

Program

Current Pathways/Referral destinations available through eReferral

	OH-North	OH-East	OH-Toronto	OH-Central	OH-West
Bariatric	Х	Х	Х	Х	Х
Cancer (variance – screening / FIT positive colonoscopy / cancer surgery)		Х		Х	Х
Cardiopulmonary		Х			Х
Community Support Services			Х		Х
Diagnostic Imaging	Х	Х			Х
Diabetes				Х	Х
Footcare				Х	Х
Home Care	Х		Х	Х	Х
Long Term Care	Х		Х		Х
Mental Health & Addictions		Х		Χ	Х
Pediatrics			Х		
Rehab / CCC	Х	Х	Х	Х	
Outpatient Services				Х	
Orthopedics (variance – Total Joint / Hip & Knee / Low Back)	Х	Х	Х	х	Х
Palliative Care		Х	Х		Х
Specialized Geriatrics					Х
Stroke			X		
Vision (variance – cataract / all ophthalmology)		Х			Х

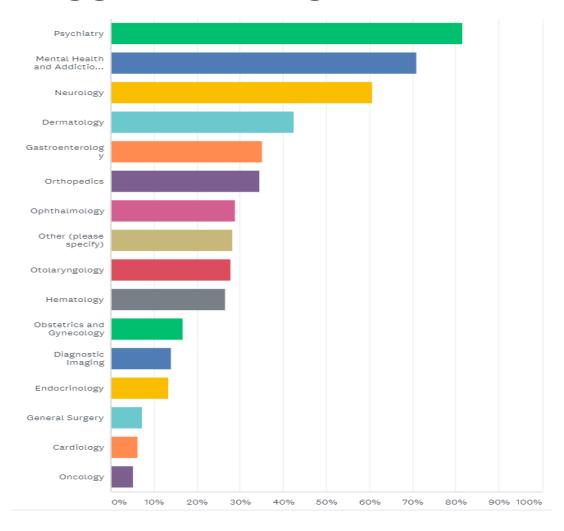


Ontario PCP and Specialist Surveys

- PCP Survey sent to 10,697 PCPs in Ontario with 8.5% response rate
 - 89.2% Family Doctors, 7.5% Nurse Practitioners, 3.3% Other
 - 10.5% Primary Solo Practice, 76.5% Physician Group Practice, 17% In-hospital
- Specialist Survey sent to 1,778 Specialists in Ontario with 24.4% response rate
 - Top specialty responses from psychiatry, pediatrics, endocrinology, neurology and cardiology
 - 62% of specialists work in a group setting with other specialists in their specialty
 - 21% work in solo practices, in a range of community, hospital and academic settings



Key results: Which specialty groups do you find pose the biggest challenge to refer to? (please select your top 5)



The top specialty that primary care providers have challenges referring to is **Psychiatry** at 82%. This is followed by: **Mental Health and Addictions** (71%), **Neurology** (61%), **Dermatology** (43%) and **Gastroenterology** (35%).

n = 900



Top 3 challenging specialty services same across all regions of Ontario

West Central Toronto North East

- Psychiatry
 (71%)
- 2.Dermatology (68%)
- 3. Neurology (63%)

- Psychiatry (87%)
- 2. Mental Health (81%)
- 3. Neurology (65%)

- Psychiatry
 (81%)
- 2. Mental Health (67%)
- 3. Neurology (56%)

- Psychiatry (82%)
- 2. Mental Health (60%)
- 3. Neurology (51%)

- 1. Psychiatry (84%)
- Mental Health (76%)
- 3. Neurology (62%)



Challenges with referrals

West

Central

Toronto

North

East

- 1. Long wait Times (88%)
- 2. Appropriate specialist (64%)
- 3. No confirmation (61%)

- 1. Long wait times (86%)
- 2. No confirmation (60%)
- 3. Patient Reminder (50%)

- 1. Long wait times (79%)
- 2. Appropriate Specialist (61%
- 3. No confirmation (61%)

- 1. Long wait times (92%)
- 2. Lack of specialty (85%)
- 3. No confirmation (68%)

- 1. Long wait times (90%)
- 2. Appropriate specialist (54%)
- 3. No confirmation (41%)



eConsult Case Example - Chronic Pain

Day 1

• <u>PCP Submits eConsult Question:</u> Patient with ongoing neuropathic pain and leg spasms. Patient is currently using marijuana and fentanyl for pain management and is having issues with the fentanyl patch adhering. PCP requests suggestions for a different approach.

Day 2

<u>Specialist Response</u>: Specialist suggests switching from marijuana to an oral cannabinoid and suggests baclofen for spasms. Specialist refers to opioid guidelines, offers detailed advice on opioid rotation, and offers to continue dialogue as needed to guide PCP.

Day 5

• PCP accepts advice, closes eConsult case.



eReferral Case Example - Chronic Pain

Referral Initiated <u>PCP finds chronic pain program and submits referral:</u> Patient needs further support to manage pain so PCP refers right from the EMR. Patient receives notification that the referral has been sent, real-time referral status is added to the patient chart.

Referral Accepted Chronic pain program receives referral: Chronic pain program team requires prior imaging before being able to accept the referral. Request is sent electronically to the PCP who is able to quickly attach the imaging to the referral. Referral is accepted. Patient and PCP are notified electronically that the referral has been accepted.

Appointment Booked Instructions and reminders are sent to the patient: Instructions about preparing and arriving for the appointment are provided electronically to the patient. Patient confirms appointment electronically. Reminder notification sent to patient about their appointment.



eConsult Case Example - Psychiatry

Day 1

• <u>PCP Submits eConsult Question</u>: Patient with depression who is currently using an antidepressant but continues to have avolition, low energy, excessive sleepiness, low self-image and craving for sweets. PCP requests suggestions for altering her medication treatment.

Day 1

<u>Specialist Response</u>: Specialist recommends increasing the dose of the current medication and also recommends adding another medication to the regime.

Day 6

PCP accepts advice, closes eConsult case.



eReferral Case Example - Psychiatry

Service Identified <u>PCP submits referral to counselling group:</u> Patient's depression has progressed, and COVID-19 is a significant factor. The PCP looks at the eReferral directory and finds a virtual counselling group for depression exacerbated by COVID-19.

Referral Initiated <u>PCP initiates referral:</u> Patient agrees to go for counselling. PCP initiates referral to the counselling agency. Patient receives notification.

Appointment Booked Counselling Agency accepts referral: Referral is accepted and patient is notified electronically. Patient confirms appointment. Referral tracker within the patient chart is updated to include the appointment date, time, instructions and that the appointment has been confirmed by the patient. Reminder notification sent to patient about their appointment.



POLL

What are the referral destinations you need to support a frail elderly patient population?



POLL

What are the referral destinations you need to support mental health and addictions?



Next Steps and Opportunities

- The eServices team will be sending a survey to understand specific specialty and service gaps and needs to support your OHT priority population
- We can connect you with the eServices Clinical Advisory Group members and eServices Regional Clinical Champions

Sign up to use eConsult and eReferral:

eConsult: eConsultCOE@toh.ca

eReferral: eReferral@ehealthce.ca

Contact the eServices Executive Leads:

Dr. Clare Liddy: cliddy@uottawa.ca

Dr. Erin Keely: ekeely@toh.ca

Dr. Mohamed Alarakhia:

Mohamed.Alarakhia@eHealthCE.ca



Questions?







Appendix



OH East – eServices Deployment Contact

eConsult Deployment Contact

Champlain: Champlain BASE™ <u>eConsultSupport@lhinworks.on.ca</u>

South East: SEAMO Digital Health seamo.digitalhealth@queensu.ca

eReferral Deployment Contact

Champlain eReferral Deployment Team: Champlain eReferral Team@lhins.on.ca

South East eReferral Deployment Team: Art.Dunham@lhins.on.ca



OH North - eServices Deployment Contact

eConsult Deployment Contact

Andrew Kosciela (North West) - kosciela@tbh.net

Linda Watts (North East) - <u>linda.watts@lhins.on.ca</u>

eReferral Deployment Contact

Linda Watts - <u>linda.watts@lhins.on.ca</u>



OH Toronto - eServices Deployment Contact

eConsult Deployment Contact

Women's College Hospital - eConsult@WCHospital.ca

eReferral Deployment Contact

Alexis Villa - <u>Alexis.Villa@uhn.ca</u>



OH Central - eServices Deployment Contact

eConsult Deployment Contact

Ami Sheth – ami.sheth@lhins.on.ca

eReferral Deployment Contact

Rod Black - rod.black@lhins.on.ca



OH West - eServices Deployment Contact

eConsult Deployment Contact

Erie St. Clair: TransForm SSO - DigitalHealth@transformsso.ca

HNHB: HITS eHealth - eConsult@HITSeHealth.ca

South West: Wendy Lang - Wendy.Lang@eHealthCE.ca

Waterloo Wellington: Wendy Lang - Wendy.Lang@eHealthCE.ca

eReferral Deployment Contact

Melissa Thompson - Melissa.Thompson@eHealthCE.ca



Ontario PCP and Specialist Surveys

Similar responses were received from PCPs and Specialists to the surveys:

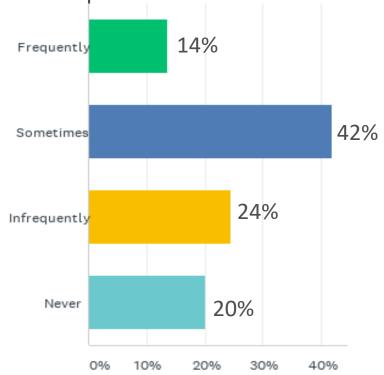
- Understanding of current referral workflow for PCPs (sending referrals) and Specialists (receiving referrals)
- Assessment of interest in providing (by specialist) or receiving (from PCP) advice via eConsult when in person referral has been requested
- Understanding the current use and interest in using Central Intake processes for referrals



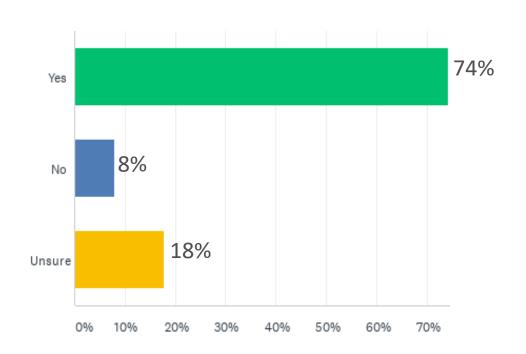
Primary Care Provider Survey Responses

Fall 2020, n=908

Before referring a patient for non-urgent referrals, I submit an eConsult to seek advice from the specialist:



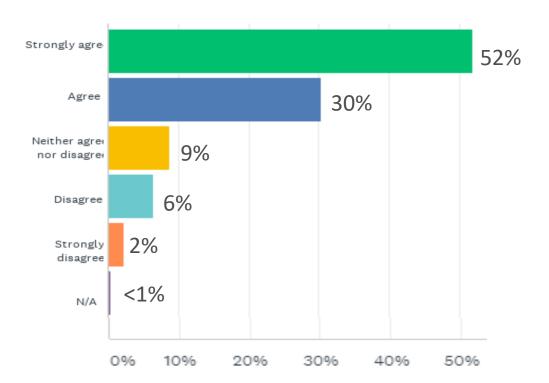
Would you consider eConsult as an appropriate triage option for non-urgent referrals?





Primary Care Provider Survey Responses Fall 2020, n=908

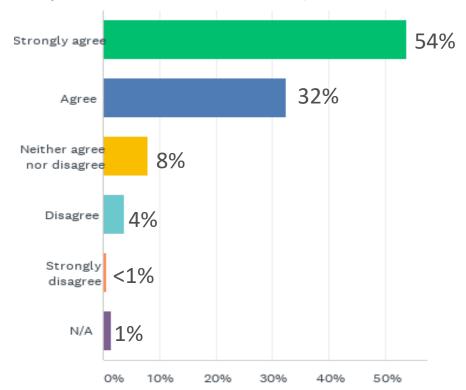
I would like it if specialists could choose to respond to a referral request by providing guidance for me to treat the patient myself, if they felt that doing so would be more appropriate than a referral.



Specialist Survey Responses

Fall 2020, n=434

I would like to be able to provide advice via eConsult, rather than booking an appointment for the patient who I do not need to see in person or by video (and be compensated for the eConsult)

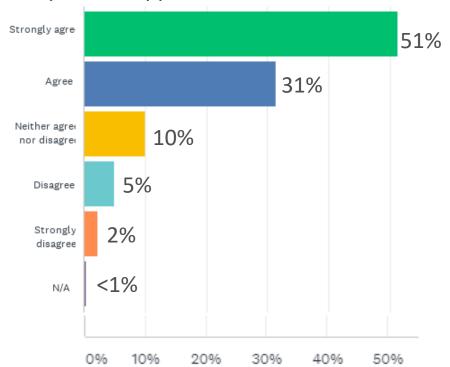




Primary Care Provider Survey Responses

Fall 2020, n=908

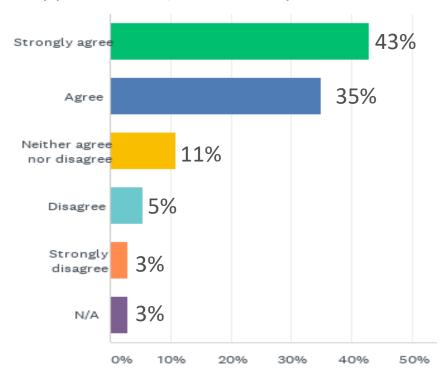
I would like to be able to receive advice before sending a patient to a specialist to ensure appropriate tests/treatments are ordered, while my patient waits for their specialist appointment



Specialist Survey Responses

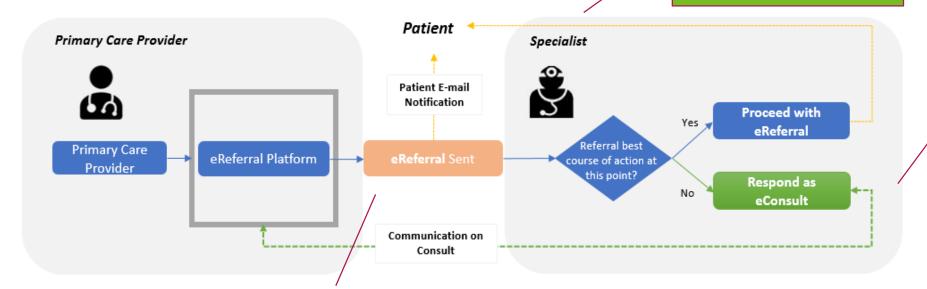
Fall 2020, n=434

I would like to be able to provide advice via eConsult, before seeing the patient to ensure appropriate tests/ treatments are undertaken while the patient is waiting for their appointment (and be compensated for the eConsult)





Specialists participating



eReferrals responded to as an eConsult (to 56 unique primary care providers)

eReferrals sent

Proof of Concept Specialties	# Specialists
Cardiology	4
Orthopedic Surgeon (spine specific)	2
Neurology	2
Urology	2
Pediatric Psychiatry	1
Hematology	1
Endocrinology	1
Sport Medicine	1
OB GYN	1



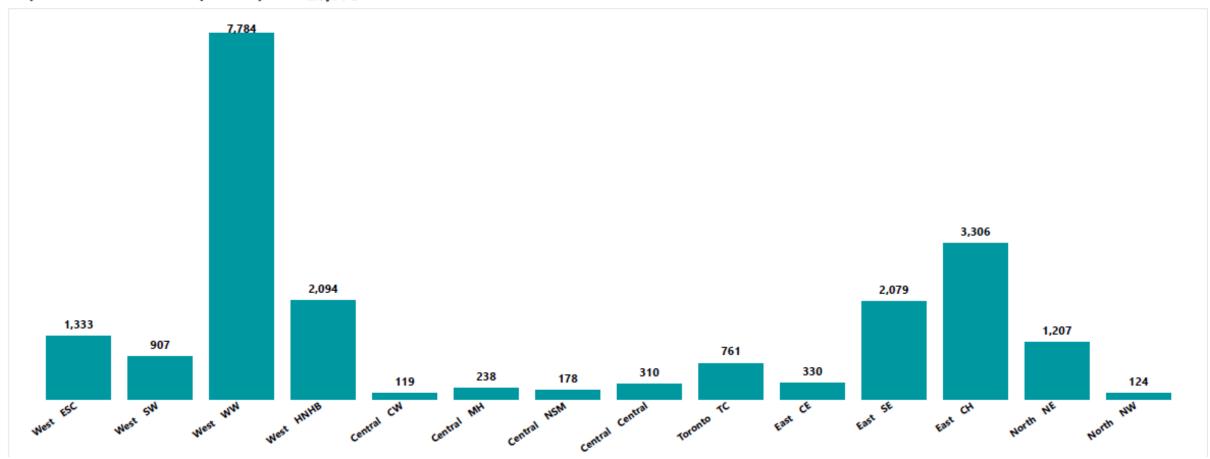
Ontario eServices Program Utilization Slides (December 2020)



Population Health

eServices Totals (December 2020) eConsult and eReferral

West Central Toronto East North Total
12,118 845 761 5,715 1,331 20,770



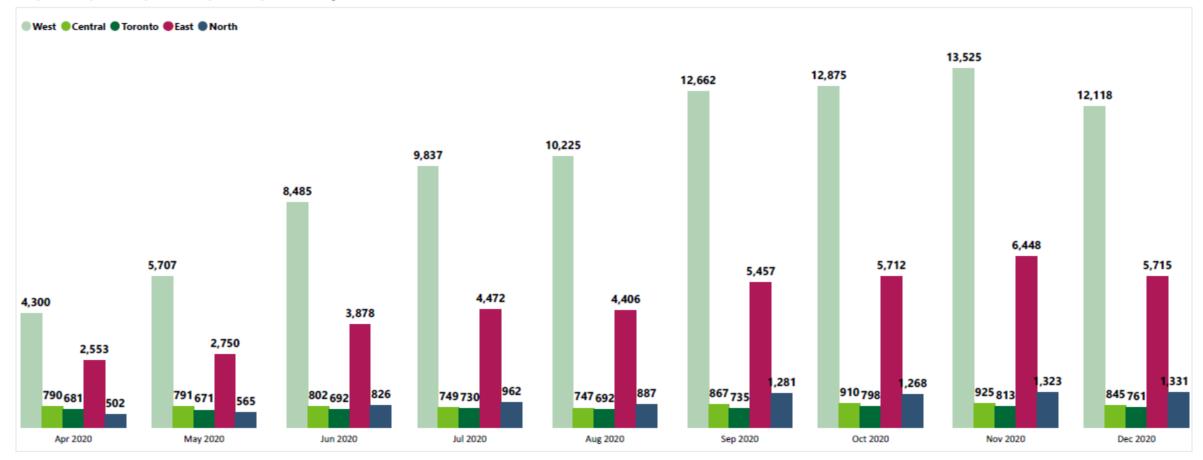


Population Health

eServices Totals FYTD (April 2020 to December 2020) eConsult and eReferral

West Central Toronto East North Total

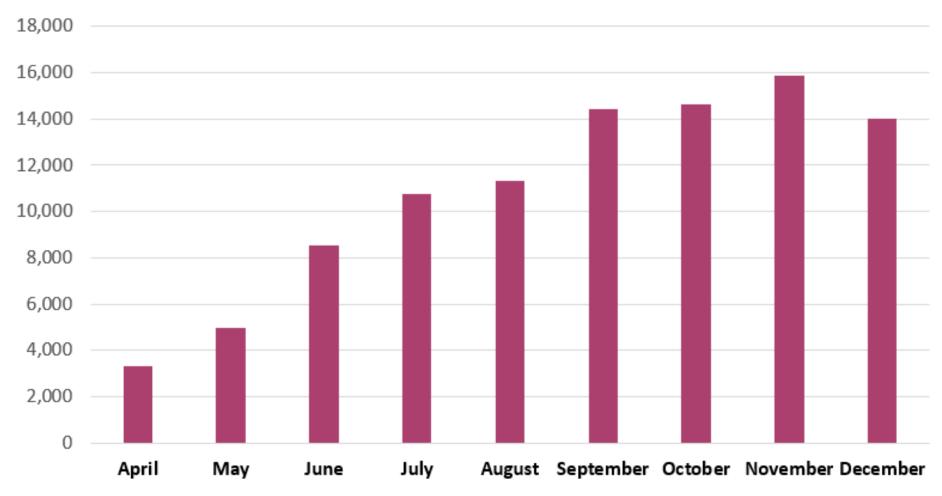
89,734 7,426 6,573 41,391 8,945 154,069





Population Health - eReferral

eReferral Monthly Totals (FY 20/21)



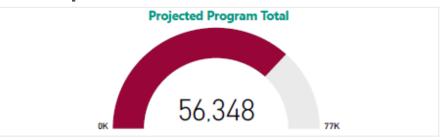


Population Health - eConsult

	December, 2020									January 2020 to December 2020								
Region & LHIN	DTS ²	Base™	% Base™	Total	Champlain	Telederma-	Teleophthal-	Program	Total	eConsults	DTS ²	Base™	% Base™	Total	Champlain	Telederma-	Teleophthal-	Program
	Cases	Cases	Cases	eConsults	BASE™	tology	mology	Total	Population	per 1000	Cases	Cases	Cases	eConsults	BASE™	tology	mology	Total
West ESC	87	83	49%	170	0	6	0	176	640,228	2.70	885	712	45%	1,597	0	131	0	1,728
West SW	158	256	62%	414	0	24	0	438	978,301	4.43	1,818	2,220	55%	4,038	0	292	0	4,330
West WW	268	455	63%	723	0	19	0	742	781,944	9.94	3,004	4,367	59%	7,371	21	380	0	7,772
West HNHB	256	335	57%	591	2	20	8	621	1,457,789	4.40	2,714	3,321	55%	6,035	41	248	88	6,412
Central CW	25	89	78%	114	2	3	0	119	935,304	1.57	295	1,064	78%	1,359	27	54	33	1,473
Central MH	27	153	85%	180	56	2	0	238	1,258,379	1.94	238	1,398	85%	1,636	740	62	0	2,438
Central NSM	47	96	67%	143	0	35	0	178	485,738	4.34	612	1,073	64%	1,685	0	423	0	2,108
Central Central	87	208	71%	295	6	2	7	310	1,895,091	1.80	1,052	2,142	67%	3,194	31	49	129	3,403
Toronto TC	163	528	76%	691	12	11	47	761	1,281,363	6.42	2,152	5,439	72%	7,591	81	170	389	8,231
East CE	89	226	72%	315	7	8	0	330	1,617,165	1.98	992	2,062	68%	3,054	29	119	0	3,202
East SE	77	394	84%	471	19	42	4	536	498,166	11.71	799	4,084	84%	4,883	229	591	132	5,835
East CH	31	166	84%	197	1,520	49	0	1,766	1,332,506	14.02	225	1,596	88%	1,821	16K	594	0	19K
North NE	84	186	69%	270	0	151	0	421	562,035	8.69	990	1,896	66%	2,886	6	1,785	207	4,884
North NW	19	64	77%	83	0	41	0	124	235,883	6.38	160	775	83%	935	36	417	118	1,506
Total ¹	1,425	3,241	69%	4,666	1,624	413	66	6,769	13,959,892	5.16	15,988	32,185	67%	48,173	17.506	5,315	1,096	72,090

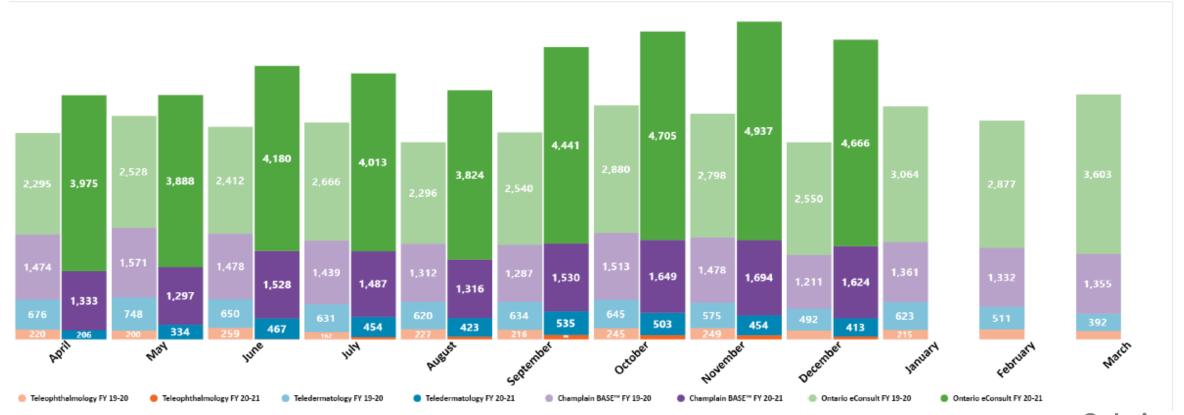


Population Health - eConsult











Population Health - eConsult

56,348 eConsults sent across all services FYTD

59,120 eConsults sent across all services FY 19-20

45,553 eConsults sent across all services FY 18-19

33,943 eConsults sent across all services FY 17-18

