Primary Care's Relaunch - Practical Approaches for the "New Normal"

Welcome! Thank you for joining early

Start Time: 12:00 PM promptly

- Your mic and camera are disabled by default

- To ask questions:
  - Click ‘raise hand’ during presentation; moderator will invite you to unmute during the question period
  - At any time, type questions in the ‘chat box’
Primary Care's Relaunch: Practical Approaches for the "New Normal"

Webinar Series:
Maintaining and Optimizing Your Practice During Times of Rapid Change

We will be starting the session promptly at 12:00 PM
Primary Care's Relaunch: Practical Approaches for the "New Normal"

May 22, 2020

Zoom technical support: (Use the link in the chat)
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Zoom Instructions

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• Privacy Statement: Please note that the webinar you are participating in is being recorded. By participating, you understand and consent to the webinar being made publicly available via a link on the AMA website for an undetermined length of time.

• By participating in the chat and live Q&A, your name entered into the Zoom sign-in may be visible to other participants during the webinar and/or in the recording.
We would like to recognize that we are webcasting from, and to, many different parts of Alberta today. The province of Alberta is located on Treaty 6, Treaty 7 and Treaty 8 territory and is a traditional meeting ground and home for many Indigenous Peoples.
This program has not received any financial or in-kind support.
Welcome:

Dr. Christine Molnar
Radiologist, AMA President

Presenters:

Dr. Brad Bahler
Family Physician, ACTT Medical Director, Alberta Primary Care Alliance Chair

Dr. Janet Craig
Family Physician, AMA Physician Champion (Edmonton Zone)

Dr. Michelle Warren
Family Physician, AMA President-Elect

Session Moderator:

Sue Peters
AMA - Session Moderator

Q/A Chat Moderators:

Sean Miles
AMA - Live Q&A Moderator

Jennifer Fernandes
AHS, AIM Alberta - Speciality Access

June Austin
AMA - Access Principles

Michele Hannay
AMA - Access Principles

Michelle Tobias-Pawl
AMA - Specialty Care

Emily Johnston
AMA - Health Service Reopening Schedule

Caroline Garland
AMA – Privacy & Virtual Care Technologies

Norma Shipley
AMA - Billing

Barbra McCaffrey
AMA - EMR, CII/CPAR
Dr. Brad Bahler: AMA-Physician Contractor; Grant: CIHR Grant

Dr. Janet Craig: Honoraria: UofA; Custom Learning Systems; Alberta AIM; AMA; Edmonton West PCN

Dr. Michelle Warren: Honoraria: AMA; Associate Professor: UofA, UofC
Moderator Disclosure

- Sue Peters: AMA-contractor; IBI Group-contractor; HQCA
- Sean Miles: AMA-employee; ThinkFX Performance Group Inc.-director
- Jennifer Fernandes: AHS-employee
- June Austin: AMA-contractor; Vermont Oxford Network-contractor; Alberta Innovates-contractor
- Michele Hannay: AMA-employee
- Michelle Tobias-Pawl: AMA-employee
- Emily Johnston: AMA-employee
- Caroline Garland: AMA-contractor
- Norma Shipley: AMA-employee; AHS-employee
- Barbra McCaffrey: AMA-contractor
Welcome from AMA Board
Welcome and Stage Setting - Dr. Brad Bahler

Dr. Janet Craig’s Story
- Panel Segmentation for Shaping Demand

Dr. Michelle Warren’s Story
- Innovations Sparked by COVID
- Opportunities for Relaunch and Beyond

Questions and Wrap-Up
At the end of this session participants will be able to:

• Adapt and apply to context, strategies to maximize capacity for clinical care

• Apply panel management processes to identify and prepare for patients that require clinical care

• Describe how to optimize clinic and PCN team capacity to support access to continuity
Today’s Presenters

Dr. Brad Bahler
Family Physician,
ACTT Medical Director,
Alberta PCA Chair

Dr. Janet Craig
Family Physician,
AMA Physician Champion
(Edmonton Zone)

Dr. Michelle Warren
Family Physician,
AMA President-Elect
What We’ve Discussed:

1. PROVIDE ACCESS & CONTINUITY OF CARE TO YOUR PANEL
2. MANAGE YOUR PANEL

- KNOW YOUR PANEL
- PROVIDE ACCESS & CONTINUITY OF CARE TO YOUR PANEL
- MANAGE YOUR PANEL
- IDENTIFY PANEL SEGMENTS
- OPTIMIZE TEAM FOR CLINICAL CARE DELIVERY
- OPTIMIZE INFORMATION EXCHANGE FOR CARE DELIVERY
- OFFER OUTREACH AND OPPORTUNISTIC CARE
- COORDINATE CARE WITHIN THE HEALTH NEIGHBOURHOOD

Meeting Patients’ Needs Algorithm
Currently

COVID Restrictions

Patients Currently Receiving Care

- Chronic disease
- Mental health
- Driver’s medical
- Maternity
- Rx refill
- Acute
- Etc.

Patients Needing Care

In-person

Virtual
The ‘New Normal’

Safety

Decisions...
- Patient needs
- Virtual care
- Panel management
- Team optimization
- Access for appointments

‘Demand’ for appointments
Making Decisions

Advice from colleges, organizations & colleagues

Status of labs, DI & other services

Options for care provision

Safety advice from health officials

Prescriptions, referrals, care pathways

The needs of my panel
Check out the Community Physician Provincial Relaunch Readiness Checklist on the AMA Covid 19 site
Finding the Balance

- Appointments
- Virtual care
- Team
Dr. Janet Craig
Family Physician, AMA Physician Champion (Edmonton Zone)
Current State

Prior to COVID-19
- 4-5 physicians
- 6 staff
- 5-15 patients in waiting room
- 20 patients/hr through clinic
- Saw patients for any reason

Current State
- 3 physicians
- 3 staff
- 0 patients in waiting room
- 3 patients/hr max through clinic
- See patients for priority concerns
Approach to Panel Management

- KNOW YOUR PANEL
- PROVIDE ACCESS & CONTINUITY OF CARE TO YOUR PANEL
- MANAGE YOUR PANEL
Considerations for the ‘New Normal’

Shaping ‘Demand’

Panel Management

Leveraging Team

Virtual Care

Safety (patients & team)
EMR Integrated Tools

TELUS Health Wolf

Health Myself
- ChronicIQ
- CognisantMD

Microquest/Healthquest
- Available, integrated with Healthquest EHR/HDO
- Clinic adds a link to online booking via the clinic website
- Email, text or voice reminders with confirmations, integrated with the EMR

QRH/Accuro
- *Medeo integrated to Accuro schedule. Website link can be posted on clinic website or sent to patients
- Appointment Reminders powered by Cliniconex vs Phone, email or text
- Appointment reminders can also be sent by secure message
- *Medeo – (integrated) right click to send to patient, thread controlled by clinic, can be open or closed
- Not yet Medeo account only to review past visits or anything clinic has sent the patient, like lab results
- *Medeo
- Accuro mobile is a light version of Accuro for viewing on smartphone or tablet
- The Cliniconex vs Phone/Email or Text Message
- Embedded *Medeo secure messaging

QHR Notes:
- Modeo can be deployed to practice
- Lists can be easily reviewed and updated
- Modeo – can send text messages, was previously shared
- Cliniconex – Accuro
- Accuro patient portal
- Accuro Mobile
- Accuro Video Link
- Accuro Patient forms
- Accuro Online book

Microquest Notes:
- Hi-patient portal – WOLF
- Healthquest portal – WOLF
- Healthquest – does not work on iPhone
- Intake form capability
- dr2de secure messaging
- All tools (i.e. patients) are patient developed and supported

EMR Integrated Tools

https://www.albertadoctors.org/leaders-partners/ehealth/virtual-care-tools

May 11, 2020

The following tools offer integration with common community EMRs and are known to be compliant with Alberta’s privacy and security requirements. An asterisk beside the tool (*) indicates that it can be used to stand alone outside of any EMR. For a more complete list of vendors, check out the Virtual Care Toolkit.

EMR Solution | On-line appointment booking | Appointment Reminders | Secure Patient Messaging | Patient Portal | Video Visits | Mobile EMR | Patientfillable forms (intake forms, surveys) | Broadcast messaging ability | Secure provider to provider messaging
--- | --- | --- | --- | --- | --- | --- | --- | --- | ---
Microquest/Healthquest | Available, integrated with Healthquest EHR/HDO | Email, text or voice reminders with confirmations, integrated with the EMR | Available, integrated with Healthquest | Available, integrated with Healthquest | Will be integrated with Patient Portal. Available midday | | | Embedded | *Medeo secure messaging

TELUS Health Med Access

Via TELUS Health Partner Program:
- Health Myself
- ChronicIQ

TELUS Health PS Suite

Via TELUS Health Partner Program:
- Health Myself
- ChronicIQ
Meeting Patients’ Needs Algorithm

VIRTUAL OR IN-PERSON?

WHAT ELSE?

YES

NO

Appt required?

YES

NO

Virtual: Lab Req

SHAPE DEMAND

NO

Re-prioritize

YES

HgBA1C past due or last result unstable?

NO

Re-prioritize

YES

Insulin?

NO

Re-prioritize

YES

ID Pts with Diabetes

EMR

EMR

ID Pts with Diabetes

Virtual Care

Safety (patients & team)
Meeting Patient’s Needs
Algorithm for Today's Primary & Specialty Care Teams

Optimize Your Practice and Processes
- Time and space safety checklist
- COVID-19 Readiness Checklist
- Know your practice checklist for community specialists

Optimize Patient Care Management
- Patients on schedule
- New patients/ referrals (not booked yet)
- COVID-19 Primary Care Pathway
- H2H2H transitions checklist for primary care
- Patient follow-ups
- Patients discharged from hospital
- Patient care management toolkits
- Vulnerable or complex patients not seeking needed care

Tools to Get Started with Virtual Care
- Choosing a Tool
- Privacy and Security Checklist
- Essentials for Getting Started
- EMR Tips

Is there care (or a component of care) that the team can offer now?
- NO → Book care or component of care to future date or create reminder
- YES → Does the care or component of care require a team and patient interaction?
- NO → Complete care or assign tasks
- YES → Determine if appointment is virtual or in-person

Virtual Appointment
- Telephone
- Video
- Secure Message
- AMA Virtual Care Page & Billing Codes
- Virtual Appointment Guide

In-Person Appointment
- Non-infectious patients
- Symptomatic and possibly infectious patients
- Presumed or confirmed infectious patients
- AHS COVID-19 Screening Tool
- In-Person Appointment Guide

Virtual appointment workflow
In-person appointment workflow

https://actt.albertadoctors.org/MPN-Algorithm
‘Organize Time and Space for Patient and Staff Safety’ Tool
1. If just starting, request and use your HQCA Panel Report to identify top chronic diagnoses, etc.

2. Consider watching (or asking team to watch) the other webinars in this series

3. Meet regularly with clinic team members to develop a clear plan for re-opening
Dr. Michelle Warren
Family Physician, AMA President Elect (2020-21)
Considerations for the ‘New Normal’

Shaping ‘Demand’

- Panel Management
- Leveraging Team
- Virtual Care
- Safety (patients & team)
How can we provide access to care now?
+
Prepare for the anticipated ‘surge’?
Opportunities

Could this be managed with a phone call? Video?

“Stay home! We can care for you safely while you’re home sick.”

We need to run on time!
Video Tips

Video Appointments...
What we’ve learned

- Macros to auto-populate EMR
- EMR templates to document

Virtual Care
Opportunities

How can we schedule for team safety?

In-person required?
Strategic Scheduling – ‘Clean to Dirty’

Safety
(patients & team)

If necessary, do our patients know when it’s safe to come in?
Opportunities

Clinic & PCN Team

- Avoid service duplication
- Efficient CDM

Leveraging Team

How can we communicate as a team?

- EMR (‘task’ or ‘messages’)
- Huddles
Opportunities

Who should we be prioritizing?

Do we need to see stable patients as frequently?

Panel Management

Can we increase Rx intervals?
## Shaping Demand

### Proposed schedule based on AJOG-MFM Guidelines

<table>
<thead>
<tr>
<th>Traditional Approach</th>
<th>Approx. 13 in-person appointments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every 4 weeks until 28 weeks = approx. 5 in-person appointments</td>
<td></td>
</tr>
<tr>
<td>Every 2 weeks until 36 weeks = approx. 4 in-person appointments</td>
<td></td>
</tr>
<tr>
<td>Every 1 week until birth = approx. 4 in-person appointments</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Our New Approach</th>
<th>Approx. 7 in-person appointments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 11-13 in person</td>
<td></td>
</tr>
<tr>
<td>Week 16 virtual</td>
<td></td>
</tr>
<tr>
<td>Week 20 in person</td>
<td></td>
</tr>
<tr>
<td>Week 26-28 in person</td>
<td></td>
</tr>
<tr>
<td>Week 30 virtual</td>
<td></td>
</tr>
<tr>
<td>Week 32 in person</td>
<td></td>
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<tr>
<td>Week 34 virtual</td>
<td></td>
</tr>
<tr>
<td>Week 36 in person</td>
<td></td>
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<tr>
<td>Week 37-38 either</td>
<td></td>
</tr>
<tr>
<td>Week 39-41 in person</td>
<td></td>
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</tbody>
</table>

### Capacity Created

Approx. 60 min of clinical care time created/patient (based on 20 min in-person & 15 min virtual care appointments)

Approx. 6.25 additional clinical care days created per year (based on caring for approx. 50 low risk prenatal patients)
Michelle’s Tips

1. It’s not about being perfect – **try it** and see what works

2. Your **team** is there to help – how can the workload be shared?

3. **Be creative** – this is an opportunity to think outside the box and do things differently
1. There’s no cookbook – every patient & situation is unique

2. Making decisions is what we do; relaunch is no different

3. Consider using the decision-making principles + key sources of information (email coming soon)
Live Q&A and Polling

- Please put your virtual hand up by using the raise hand function under the ‘participant’ menu

- If using the phone, open the participant menu and scroll down to find the raise hand feature
Please complete the post-session evaluation!

Click the Evaluation Link in the Chat

or

Use the QR Code Below
Podcast

Available on:

- Apple Podcast
- Spotify
- Google Podcast
- Stitcher

Suggested episodes:

11 | Tips for Enhancing Access with Dr. Janet Craig

14 | Teamwork in the Time of COVID-19 with Dr. Rick Ward

15 | CII-CPAR: Part 1 with Dr. Heidi Fell

16 | CII-CPAR: Part 2 Stories from the Field
Check out the Community Physician Provincial Relaunch Readiness Checklist on the AMA Covid 19 site
Thank you and please complete the post-session evaluation!
Click the Evaluation Link in the Chat
or
Use the QR Code Below