



Welcome to Quality Rounds Ontario

If you have any video or sound delays, please refresh your browser.
If you need more support, email KTE@hqontario.ca

Learning Objectives

- Review the current state of virtual care and look ahead at the changing landscape in Ontario
- Explore the latest evidence on keys to successful adoption of virtual care in primary care and specialty clinics
- Learn about patient perspectives to inform planning and change initiatives



Opening Remarks

Bill Hatanaka

Board Chair, Ontario Health

Matthew Anderson

President and CEO, Ontario Health

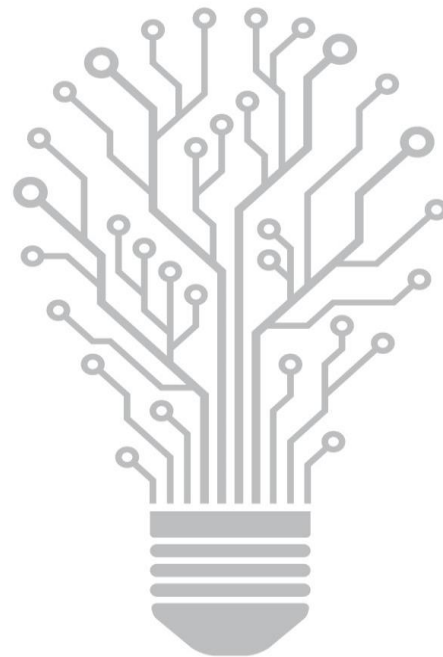
The Promise of Virtual Care: eVisits in Ontario

Onil Bhattacharyya, MD, PhD

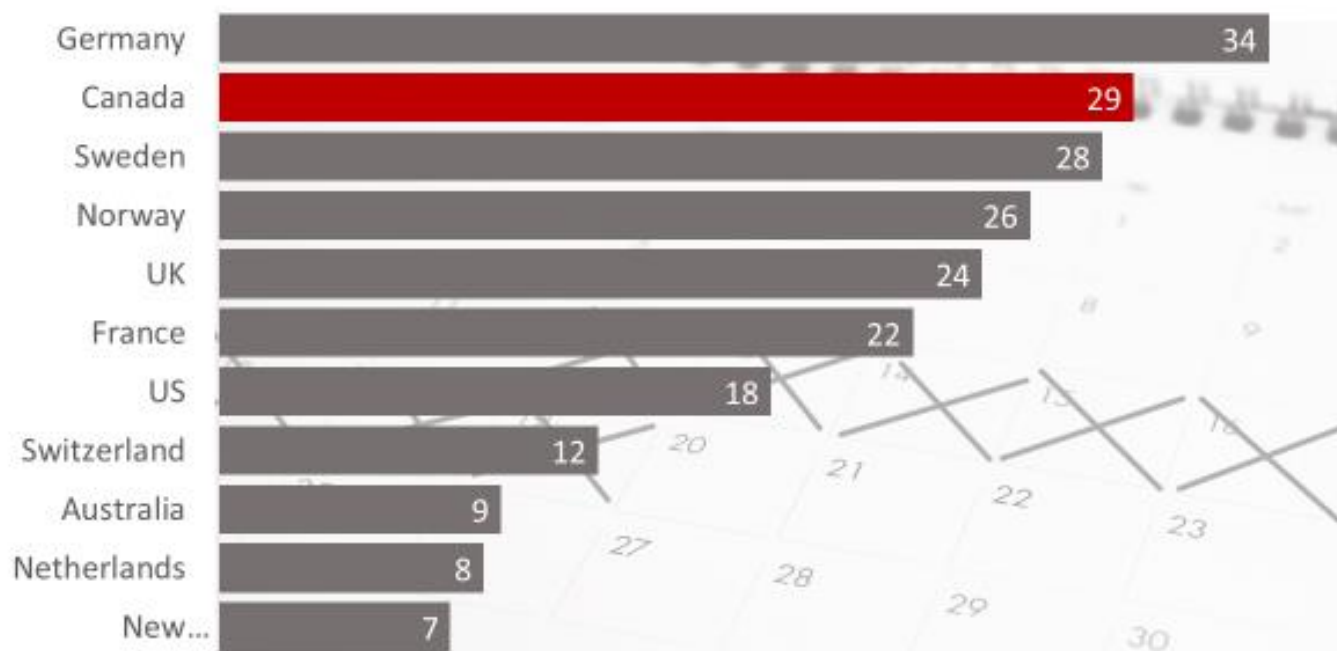
Frigon Blau Chair in Family Medicine Research

Women's College Hospital

University of Toronto

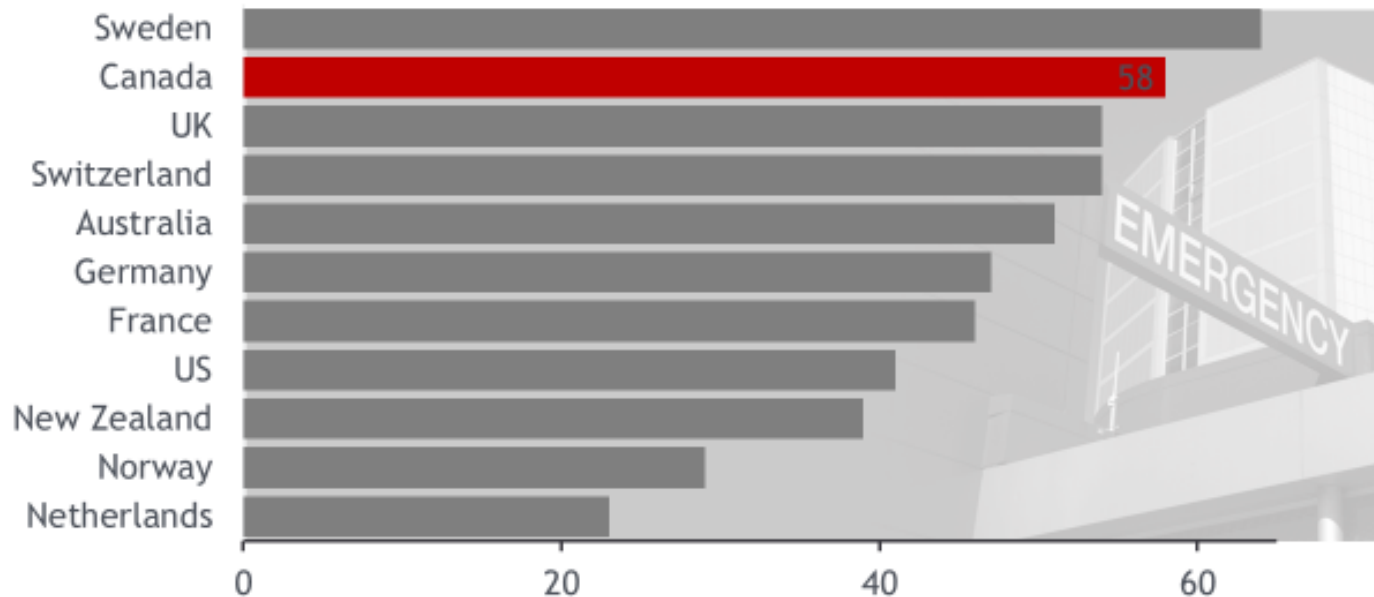


Older adults who waited ≥ 6 days for an appointment, %



Source: 2017 Commonwealth Fund International Health Policy Survey of Older Adults

Older adults who had difficulty getting after-hours care without going to the ED

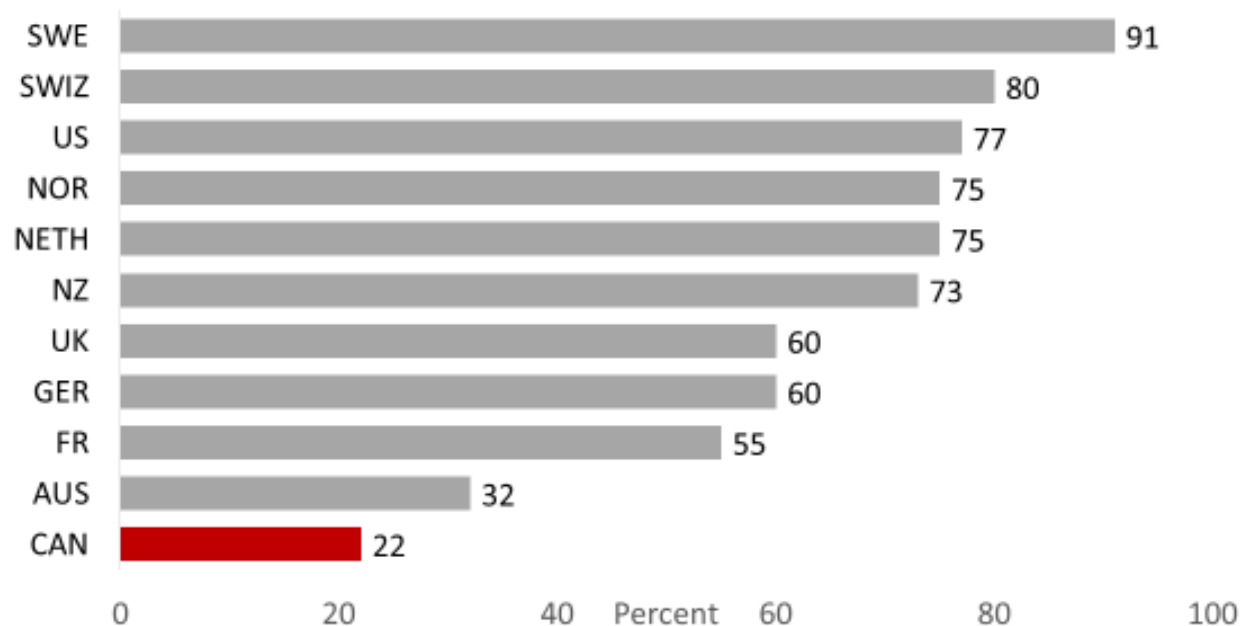


Source: 2017 Commonwealth Fund International Health Policy Survey of Older Adults



Is there an app for this?

Practice offers patients option to communicate via email or secure website about a medical question



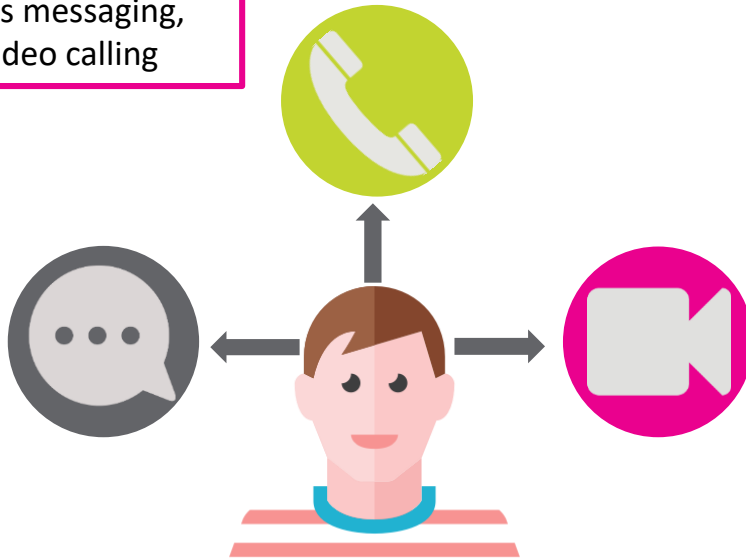
Data: 2019 Commonwealth Fund International Health Policy Survey of Primary Care Physicians.

Source: Michelle M. Doty et al., "Primary Care Physicians' Role in Coordinating Medical and Health-Related Social Needs in Eleven Countries," *Health Affairs*, published online Dec. 10, 2019.

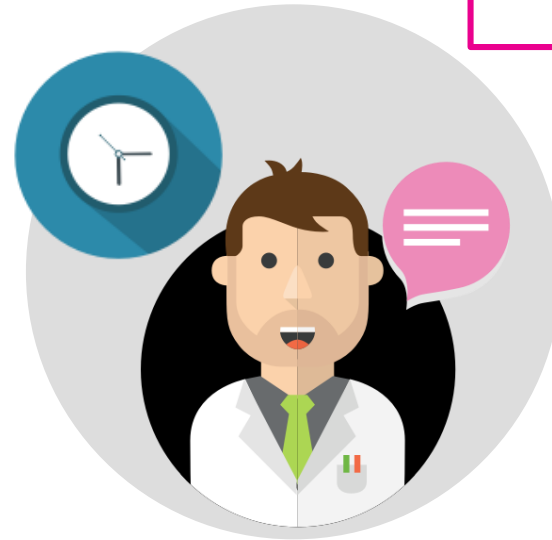
OTN eVisit Pilot Background

Primary care physicians in 5 LHINS were approached to join and recruit their own patients

Patients can choose between asynchronous messaging, audio, or video calling



Providers have up to 2 days to respond



eVisit Pilot Background

194

Primary Care Providers
with at least one visit

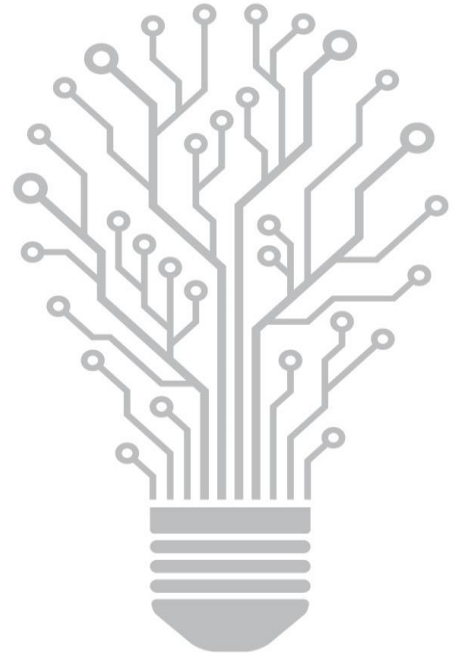
14,291

patients registered

14,317

visits

Finding #1: Patient experience



High Satisfaction

98%

felt that the visit was the
same or better than in-person care

99.9%

indicated that they
would use virtual visits again

91%

agree that virtual visits made
accessing care **more convenient**



Saved patients time and money

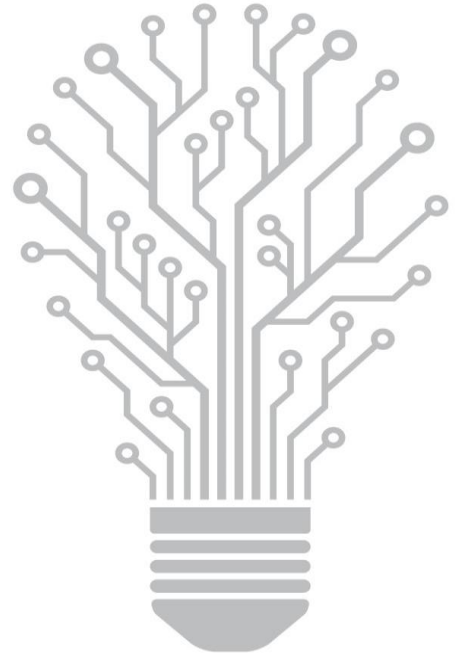


indicated that the eVisit tool **saved them money** compared to in-person visits

felt that the eVisit tool **saved time** compared to in-person visits

Based on 1,044 patient survey responses

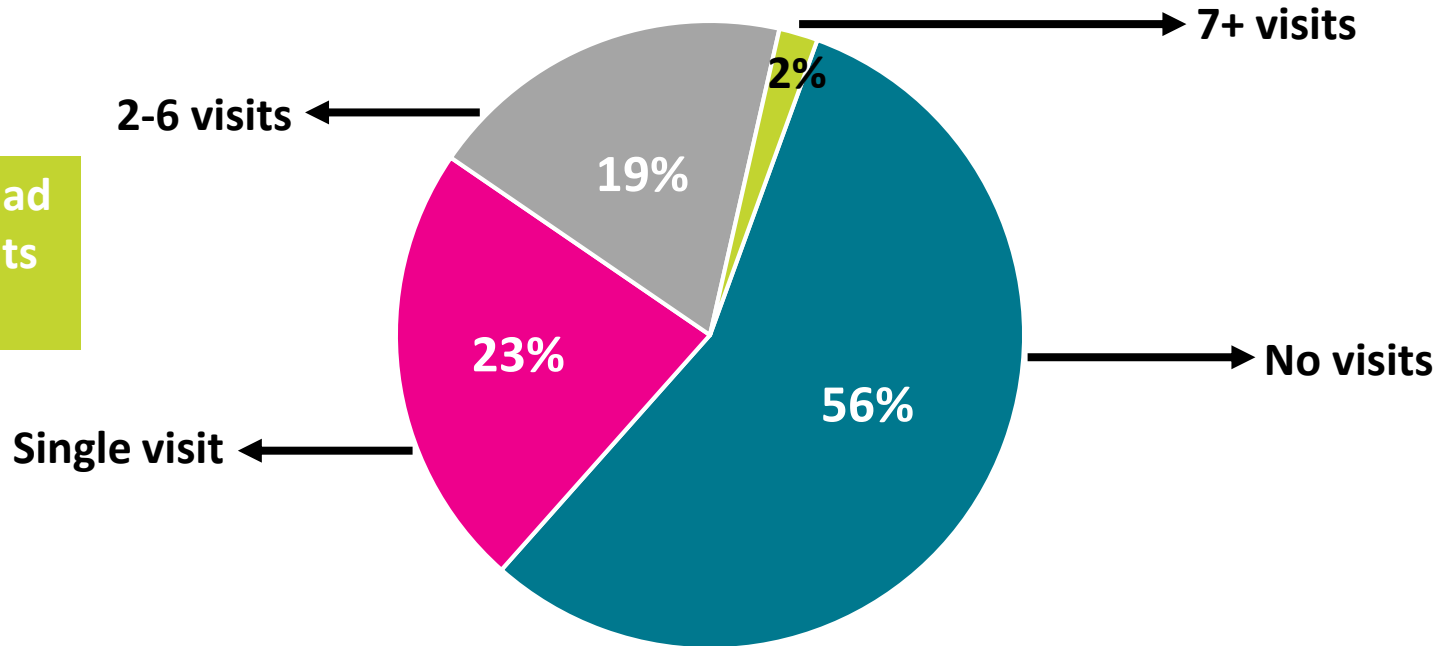
Finding #2: Use of eVisits



Patients did not overuse eVisits

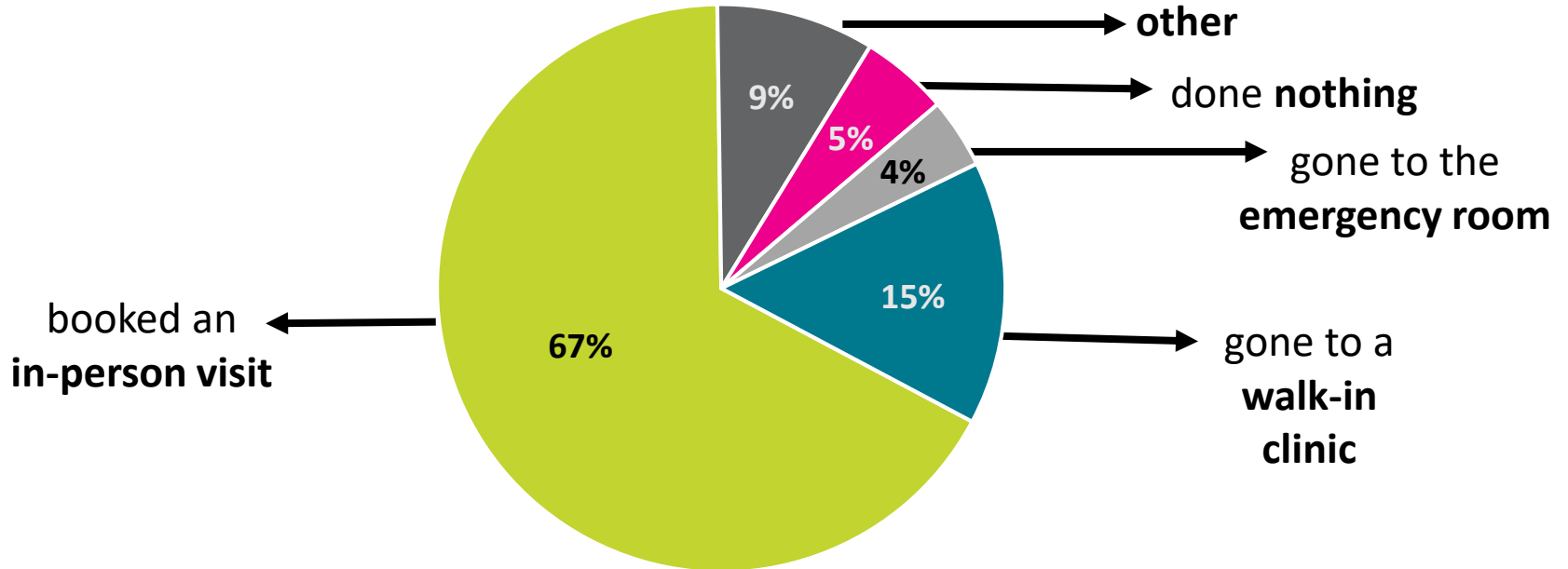
Over 195 days, registered patient users had...

79% of patients had one or fewer visits during project



Virtual visits replaced in-person visits

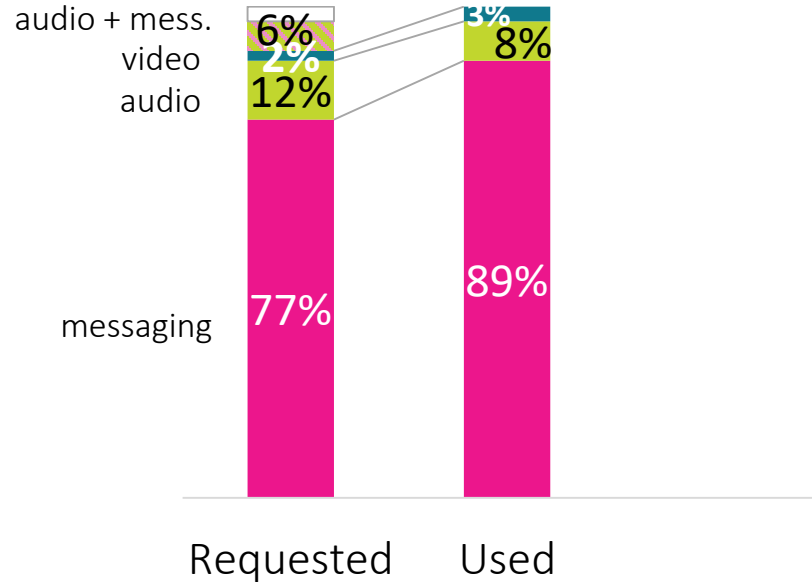
If patients did not have access to virtual care, they would have...



Most visits were text messages

Novari platform

N = 7922 requests, 7545 completed



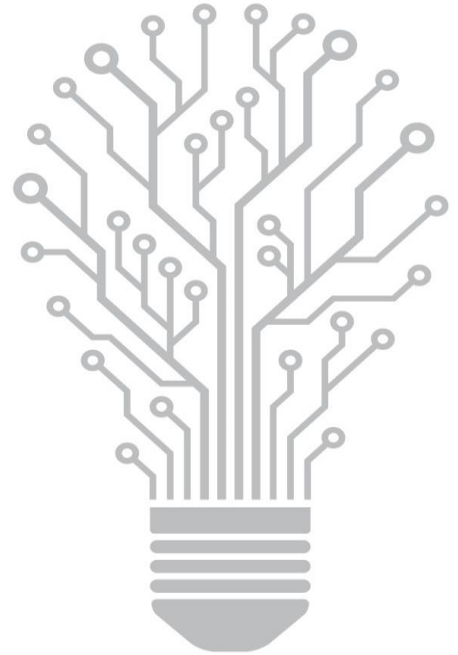
Used: 3% video = 1% video + 2% video + messaging

Not shown: 1% audio + video, 2% audio + video + messaging

Most visits resolved the issue

- 81% of eVisits required **no additional follow-up**
- **Few or no issues** with patients using the platform **inappropriately**

Finding #3: Provider experience



1

EFFICIENCY AND REVENUE

- Increased number of patients seen per day
- Receive compensation for work previously done by phone and email

2

SECURITY AND CONFIDENTIALITY

- Improved security compared to email

3

QUALITY OF CARE

- Time to think before responding
- Reduced wait times
- Opportunity for reminders and to give more information

Minimal impact on workload

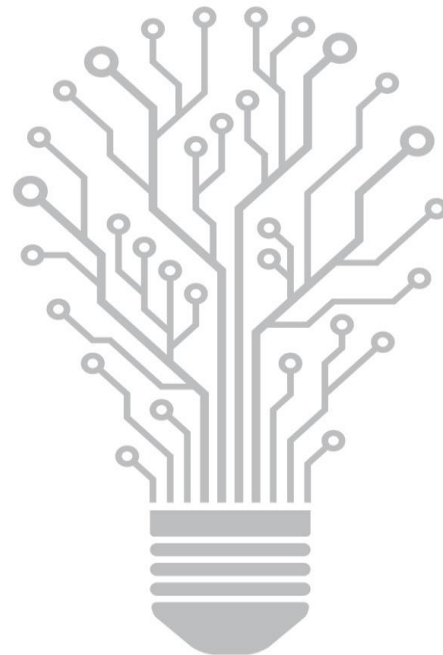
Average **35 days** for providers to have their first visit

< 1 visit a day on average

61% of providers **closed visits in <2 days**

Most were able to set boundaries and describe **appropriate uses**

Conclusions
















Managing communication channels

1 Scheduling parameters

2 Live, asynchronous or undefined

TIME + MEDIUM

3

- Text    
- Images  
- Audio   0:06
- Video  
- Notifications  
- In person  Seen 9:18am



1 Understand the fit between medium & context
(patient, problem, provider)



Invest in workflow **redesign, training and analytics**

- **Triage** by nurse or chatbot to suggest modality
- **Patients** learn to request/use the best modalities
- **Clinicians** learn what works best for them and their practice

Women's Virtual Model of Care



Enhanced Access

Providing patients with tools to educate themselves about their health and navigate their treatment with greater ease.



Connected Expertise

Connecting providers with specialist advice to match patients with the right healthcare services quickly and effectively.



Care at a Distance

Virtual services to provide care and improve health outside the hospital setting.



In-Person Care

Face-to-face healthcare for patients inside the hospital.



Thank you!



The Promise of *Digital Health*

A specialist's perspective

Ilana Halperin
MD MSc FRCPC

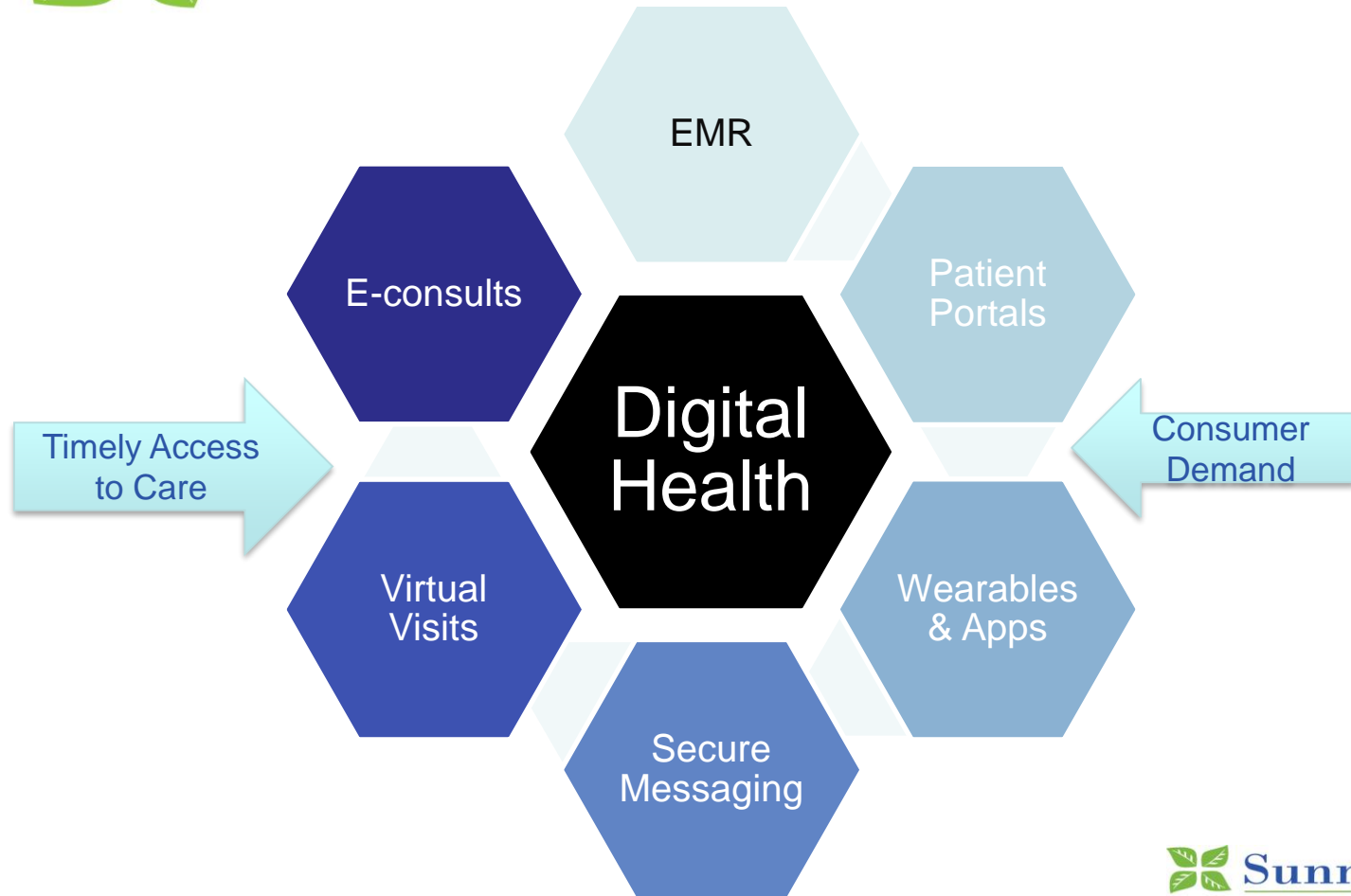


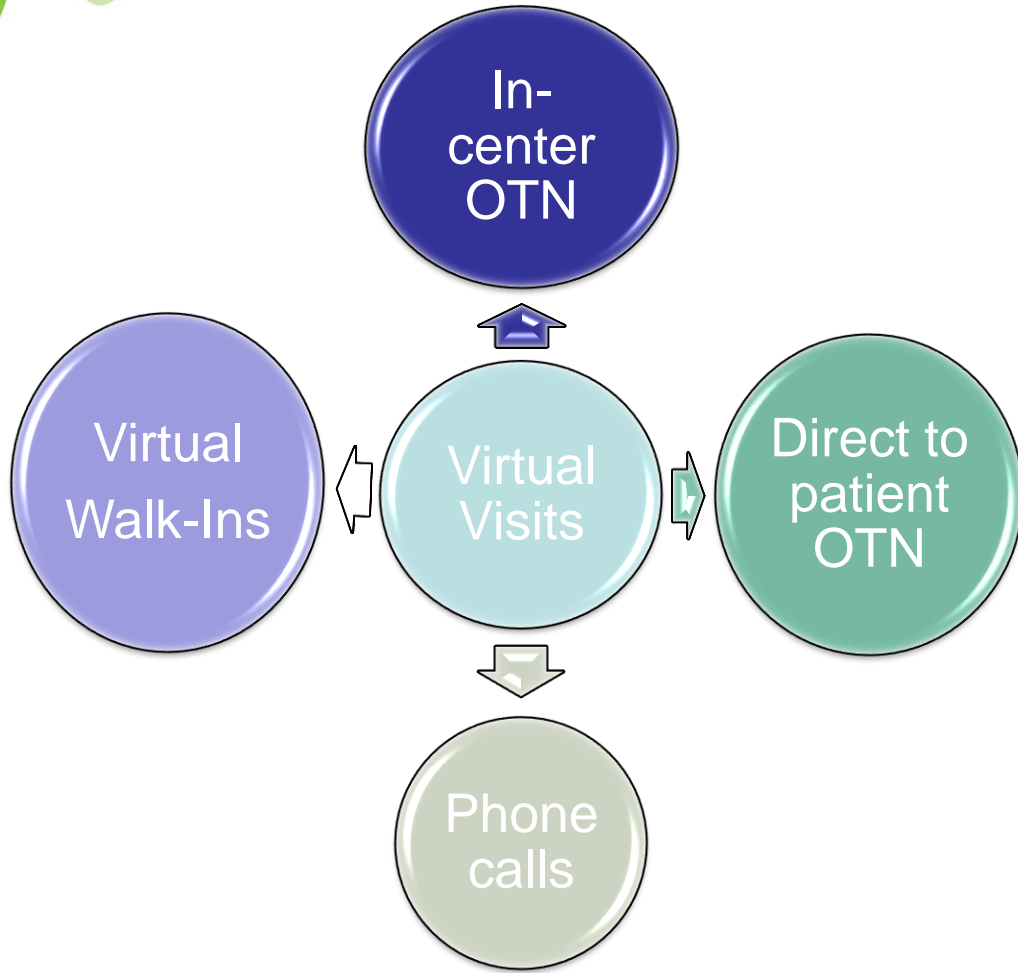
Digital Health can help advance the Quadruple Aim

The Missing Aim



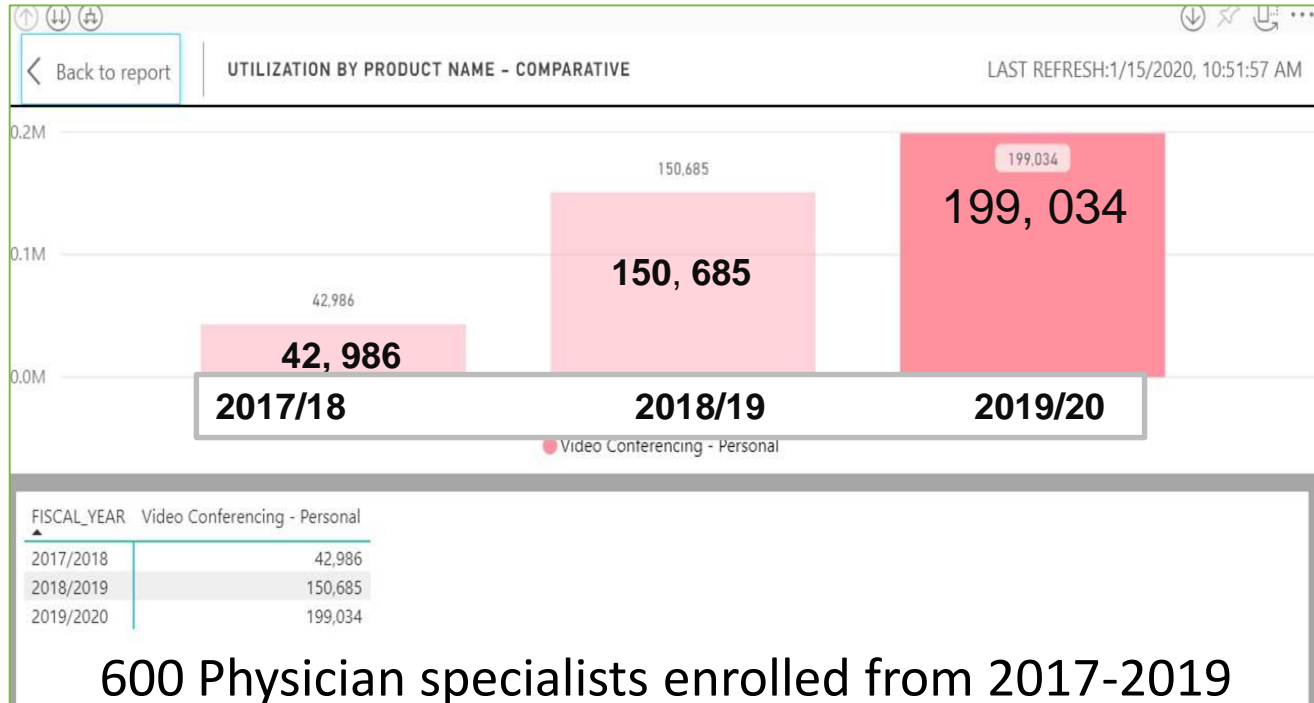
Adapted from graphic by Cardiac Interventions Today



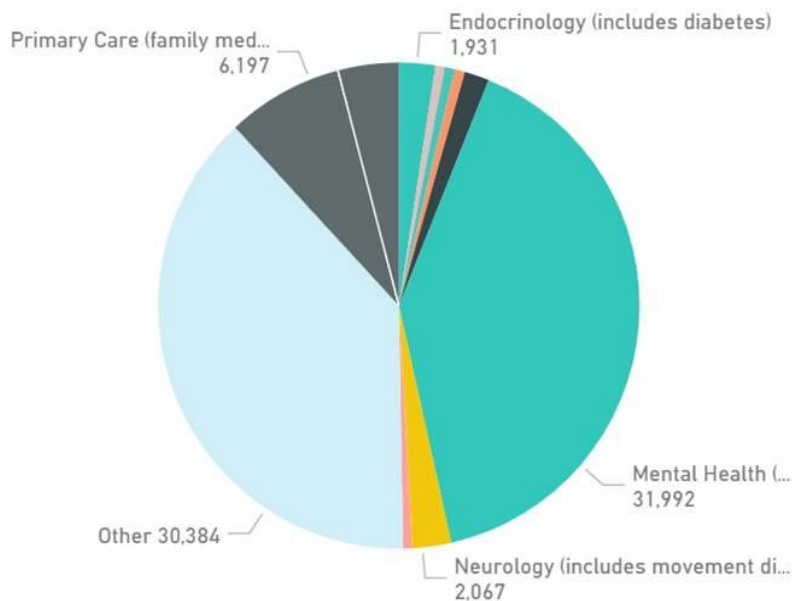




Home Video Visits Pilot



TOP 10 CLINICAL UTILIZATION BY EVENT TYPE NAME



EVENT TYPE NAME	TOTAL
Endocrinology (includes diabetes)	1,931
Gastro-Enterology	496
Gynaecology	536
Hematology	541
Infectious Diseases (includes pandemic)	1,311
Mental Health (Psychiatry, includes addictions behaviour, addictions substance)	31,992
Neurology (includes movement disorder, Excludes TeleStroke & TPA-Stroke)	2,067
Oncology	487
Other	30,384
Primary Care (family medicine & general practice)	6,197
Respiratory Therapy	3,226



Virtual care policy change

On November 13, 2019, the Ministry of Health announced its decision, in concert with the OMA, to enable **all Ontario physicians** to leverage and **bill** for Direct-to-Patient Video Visits through OTN

The MOH set a target that **2-5%** of patients who receive care from an OHT have a virtual encounter in Year 1.

32



Browser address bar: <https://training.otn.ca/course/view.php?id=10090>

Direct-to-Patient Video Visits (through OTNinvite)

Below you will find resources to help you get started using Direct-to-Patient Video Visits—from benefits to billing to implementation and best practices.

- + What are Direct-to-Patient Video Visits?
- + What are the benefits of Direct-to-Patient Video Visits?
- + How do I integrate Direct-to-Patient Video Visits into my workflow?
- + Step 1: Organizing OTN membership and OHIP billing
- + Step 2: Preparing your practice and patients for Direct-to-Patient Video Visits
- + Step 3: Technical implementation of Direct-to-Patient Video Visits

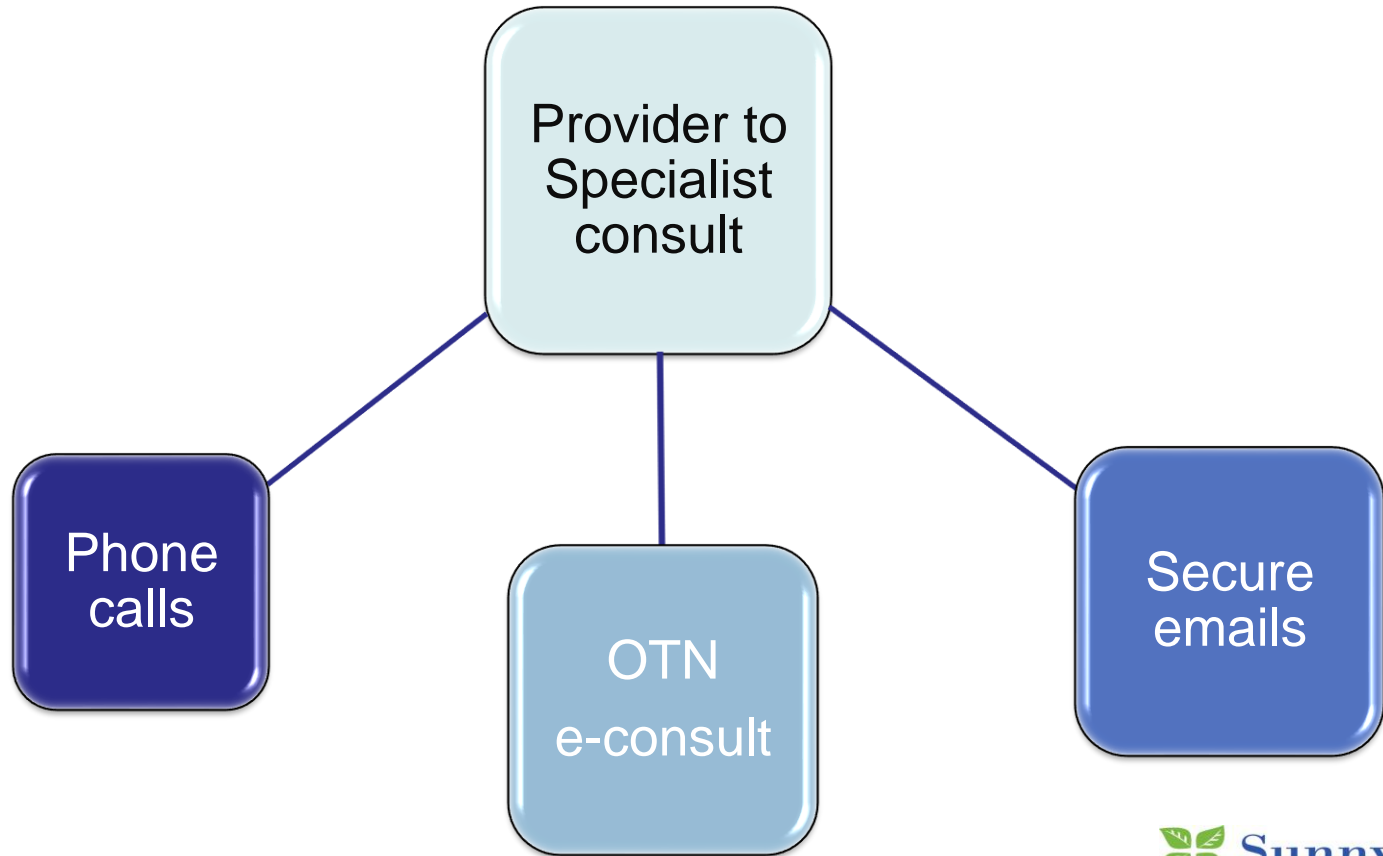
The Benefits of Video Visits

Marc's Story



Virtual Care Tips

- Tech savvy admin assistant is key
- Select the right patients
- Schedule virtual clinics separately
- Set patients expectations on appointment times
- Email consent
- Get patients to download app and test connections ahead of time
- Ensure patients have completed labs, imaging, uploaded self-monitoring data ahead of time





FACT SHEET (Regional): Champlain BASE Project - eConsultation (eConsult)

By the Numbers

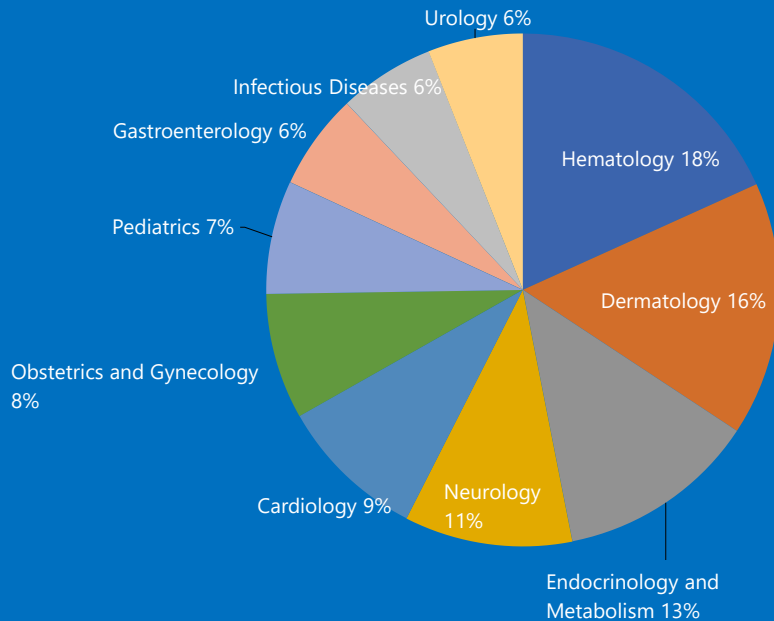
Since it began in 2010, the eConsult project has been collecting important information about the service. The following statistics are as of October 31, 2015:

	10,090	The number of eConsults cases that have been completed.
Avoiding Unnecessary Referrals	4,036	The number of patients who received specialist advice and avoided an unnecessary trip to a specialist office, thereby also reducing the number of patients added to waitlists.
	40%	The percentage of unnecessary specialist referrals that have been avoided as a result of eConsult. [In fact, only 28% of all eConsult cases led to a referral.]
	2 days	The average response time from the moment the eConsult is sent to the time the first specialist response is given. The fastest response time was 6 minutes!
Service Experience	80	The number of specialty groups available for providing advice to primary care providers. This represents the largest number of specialty groups available through an eConsultation service in the world .
	873	The number of family physicians (735) and nurse practitioners (138) using eConsult, primarily in one region (the Champlain Local Health Integration Network), representing 50% of all primary care providers.
	92%	The proportion of cases rated by the primary care provider as providing very good or excellent value for their patient.
	57%	The percentage of cases for which primary care provider received good advice for a new or additional course of action they had not considered.
Improving Specialist Visits	28%	The percentage of patients who needed to see a specialist in person, but that specialist visit was likely more effective due to the eConsult advice.



eConsult

Referrals by Specialty





Request Consult

All Consults

Needs Attention

Waiting for More Info

Consult Provided

Consult Returned

All Requests

Needs Attention

Waiting for Response

Completed

Cancelled

Drafts

Reports

Search

Settings

Case completed

Dr. Salini Gopalapillai | Dr. Ilana J Halpe... Submitted 861 days ago
re: BMD - Hi Ilana, This is 66yo F with rheumatoi...
Case completed

Dr. Salini Gopalapillai | Dr. Ilana J Halpe... Submitted 866 days ago
re: thyroiditis - Hi again Ilana, Hope you're well. ...
Case completed

Dr. Salini Gopalapillai | Dr. Ilana J Halpe... Submitted 873 days ago
re...
32...
Case completed

Dr. Andalib Haque | Dr. Ilana J Halperin Submitted 901 days ago
hair growth in post menopausal woman - Hello, ...
Case completed

Dr. Farah Ali | Dr. Ilana J Halperin Submitted 900 days ago
osteoporosis - I inherited this 86 year-old female...
Case completed

Dr. Yelena Zavalishina | Dr. Ilana J Halpe... Submitted 953 days ago
question re therapy options for osteoporosis - I ...
Case completed

Dr. Andalib Haque | Dr. Ilana J Halperin Submitted 939 days ago
Hyperthyroid - Hello Again, This patient now has...
Case completed

Dr. Salini Gopalapillai | Dr. Ilana J Halpe... Submitted 923 days ago
Re: normal BMD but wedge fracture on xray - Hi ...

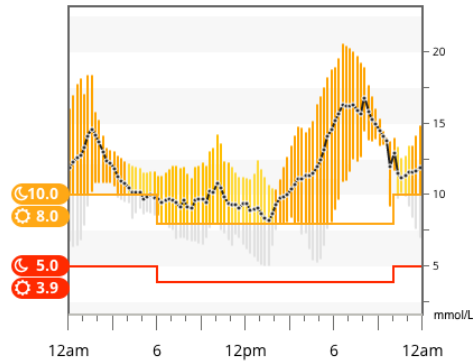
Total of 58 e-consults since 2016

- Thyroid (20)
- Osteoporosis (10)
- Incidentalomas (9)
- Women's health (6)
- Other (8)
- Diabetes (5)

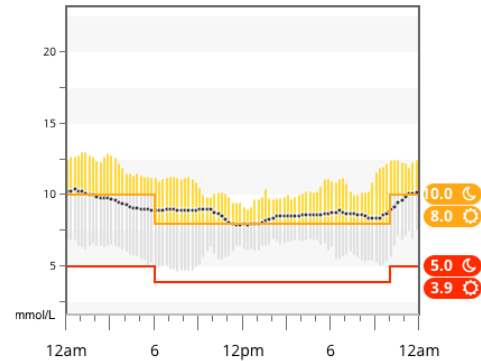
Wearables, Apps, Remote Monitoring

Select two date ranges to compare side-by-side.

14 days | Wed Aug 1, 2018 - Tue Aug 14, 2018

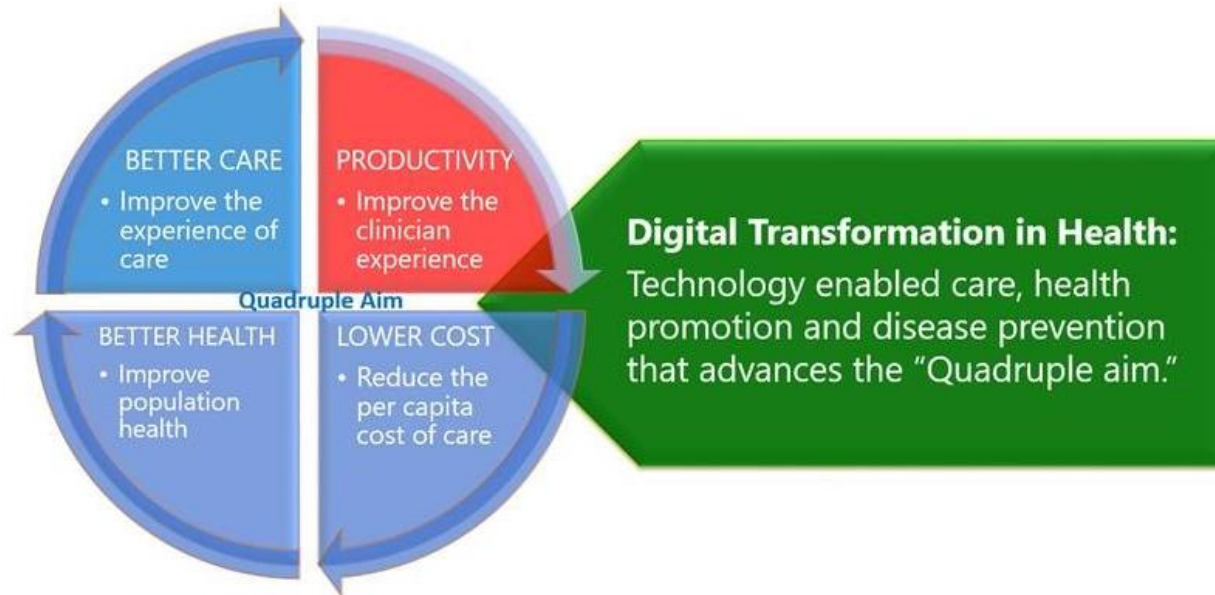


17 days | Wed Aug 15, 2018 - Fri Aug 31, 2018



Dr. Halperin, check out my Clarity account. My numbers look much better compare to last month. Basically I changed my diet (significant decrease in carbs intake and try not to have late night snacks).
I feel great!

Are you ready to embrace Digital Health?



Bodenheimer, T. & Sinsky, C. "From Triple to Quadruple Aim: Care of the patient requires care of the provider" Ann Fam Med Nov/Dec 2014, vol. 12 no. 6 673-576

So how do you get started??

OntarioMD Delivers a Suite of Digital Health Services

Our Partners:



- Digital Services
- Quality
- Shared Services

Partnered Initiatives:



eCONSULT DEPLOYMENT AND EMR INTEGRATION



eNOTIFICATIONS



DHDR / DHIR EMR INTEGRATION



OLIS DEPLOYMENT



eREFERRAL



CONNECTINGONTARIO CLINICALVIEWER BUNDLE

- ConnectingOntario ClinicalViewer
- ONE® ID
- ONE Mail

OntarioMD Initiatives:



HEALTH REPORT MANAGER



i4C DASHBOARD



i4C ADVISORY SERVICE



PEER LEADERS



PRIVACY AND SECURITY TRAINING AND RESOURCES



EMR CERTIFICATION PROGRAM



EMR PROGRESS ASSESSMENT TOOL



EMR: EVERY STEP CONFERENCE

Lets keep connecting!



Ilana.Halperin@sunnybrook.ca



@ilanajhalperin



Jan Gillis

Patient Speaker



TRUST

- That I am heard.
- That I am understood.
- That I am believed.
- That I will be helped.



How To Succeed

- Timesaver
- Drop in anxiety levels
- Mobility issues
- Clearer head
- Weather challenges



Challenges

- Age vs. Technology
- Fear
- Patient feels too sick to go virtual
- Trust
- Lack of presence of the doctor
- Language



Combatting The Issues

- Use of telemedicine clinics
- Give patient someone to control the technology
- Try with a trial basis
- Go slow

Virtual Visits

- Allows patients to focus on the appointment and not on the journey.



Questions & Answers

Send questions to KTE@hqontario.ca



Thank you!

A recording of this session will be shared
following the session