What in the EMR? Creating one-door access to primary care tools & supports

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Disclosure statement

Victoria Burton, BMOS

- Employee of the Centre for Effective Practice
- Received free registration and accommodations for this conference
- No other conflicts of interest

CEP's Primary Care Academic Detailing Service is funded by the Ontario Ministry of Health (MOH)

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As part of your academic detailing, do you discuss how to use EMR/EHR tools and functions to optimize care?

(A) Yes

0%

(B) No

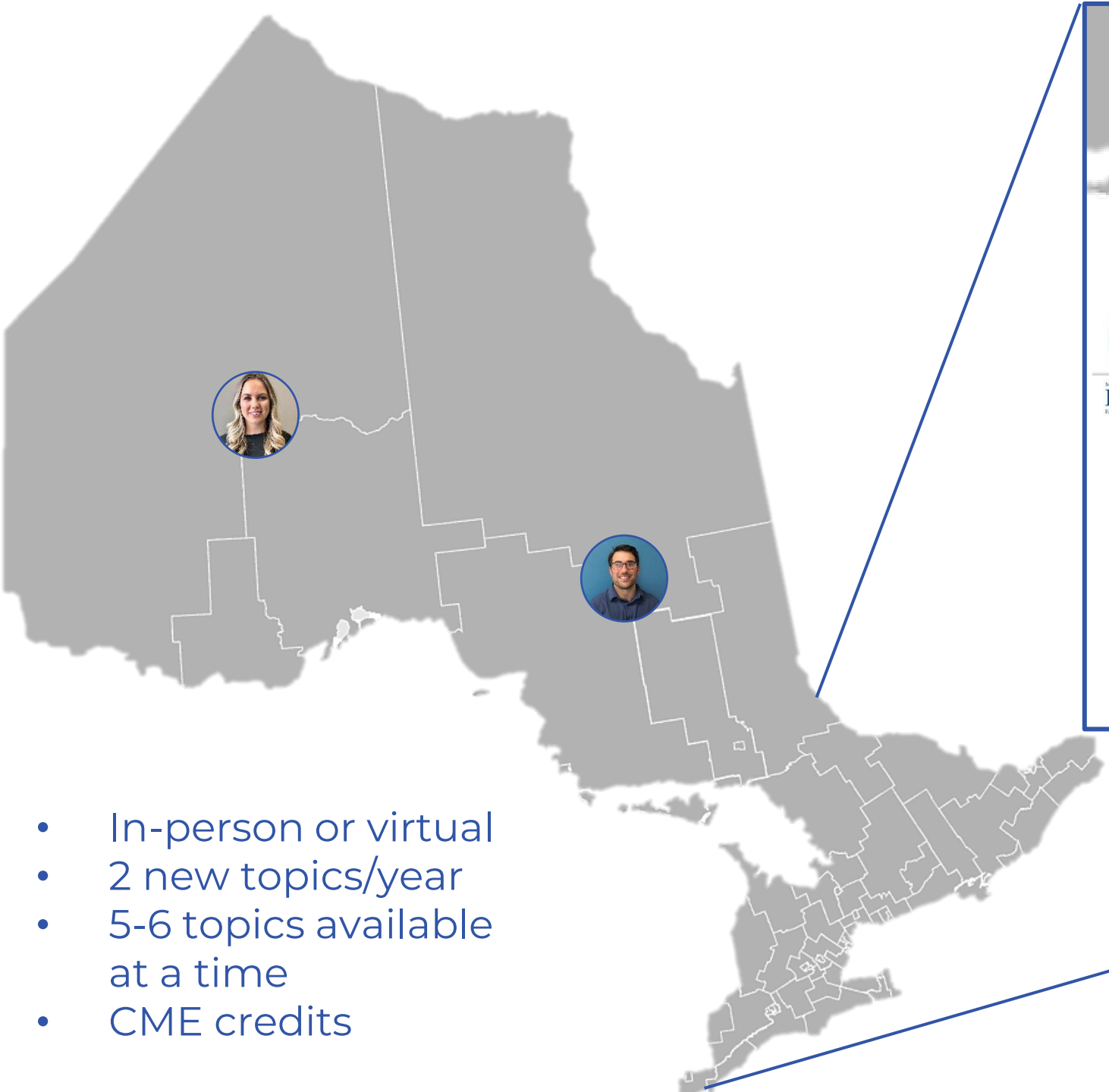
0%

(C) Sometimes

0%

(D) We haven't, but we want to!

0%



- In-person or virtual
- 2 new topics/year
- 5-6 topics available at a time
- CME credits

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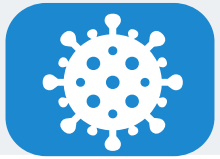
Supporting providers where they need it most

2014-2017	2017-2020	2020-2022	2022-2024
Inappropriate use of antipsychotics • Antipsychotics in long-term care	Opioid crisis • Opioid tapering • Chronic non-cancer pain • Opioid use disorder • Benzodiazepine use in older adults	COVID-19 pandemic • Managing primary care during COVID-19 Approval of new T2DM drugs • Insulin & non-insulin pharmacotherapy for T2DM Older adults made a provincial priority • Fall prevention and management	Quadruple therapy for HF • Heart failure Mental health made a provincial priority • Anxiety & depression Biosimilar insulin switch policy • T2DM update New inhaled medications for COPD • COPD



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Satisfaction and continued demand

98% satisfaction rate on **4500+** academic detailing visits

99% of providers felt an **increase in confidence**

100% of providers agreed their academic detailer was **credible**

100% of providers agreed their academic detailer shared **practice-relevant information**

[Detailer] is excellent in teaching us and sharing relevant clinical information. She is outstanding at bringing to the MDs key pearls which are most important to our practice. Also she is very helpful with the handouts and taking time to answer our questions. - Dr. Charles Jaipargas, Family Physician in Brampton

If I were attempt to go through the material on my own, it would take hours and I still would not have the confidence in my level of understanding as I do now. [Detailer] is fantastic at distilling clinically relevant information into high yield non-biased bites. - Dr. Anu Joneja, Family Physician in Mississauga

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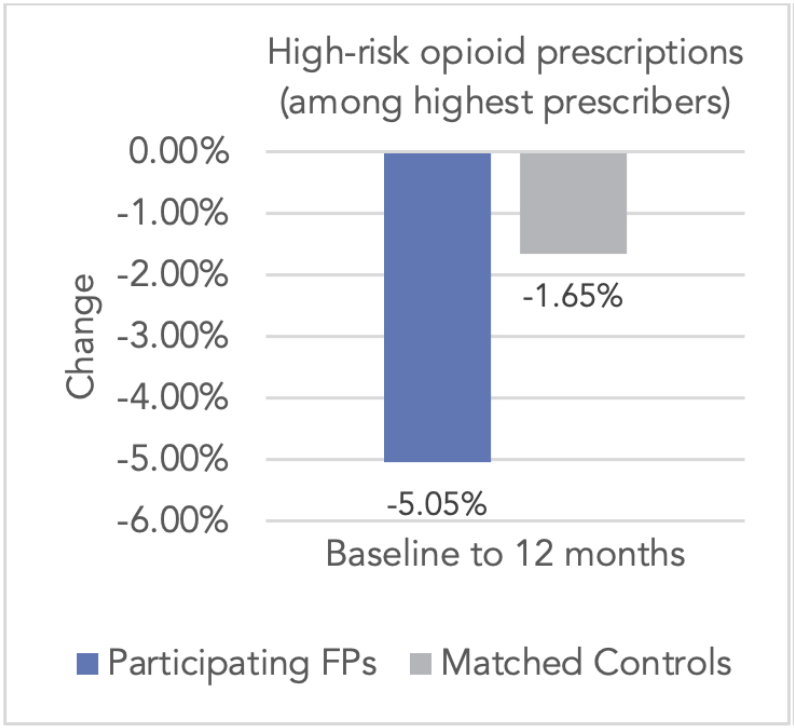
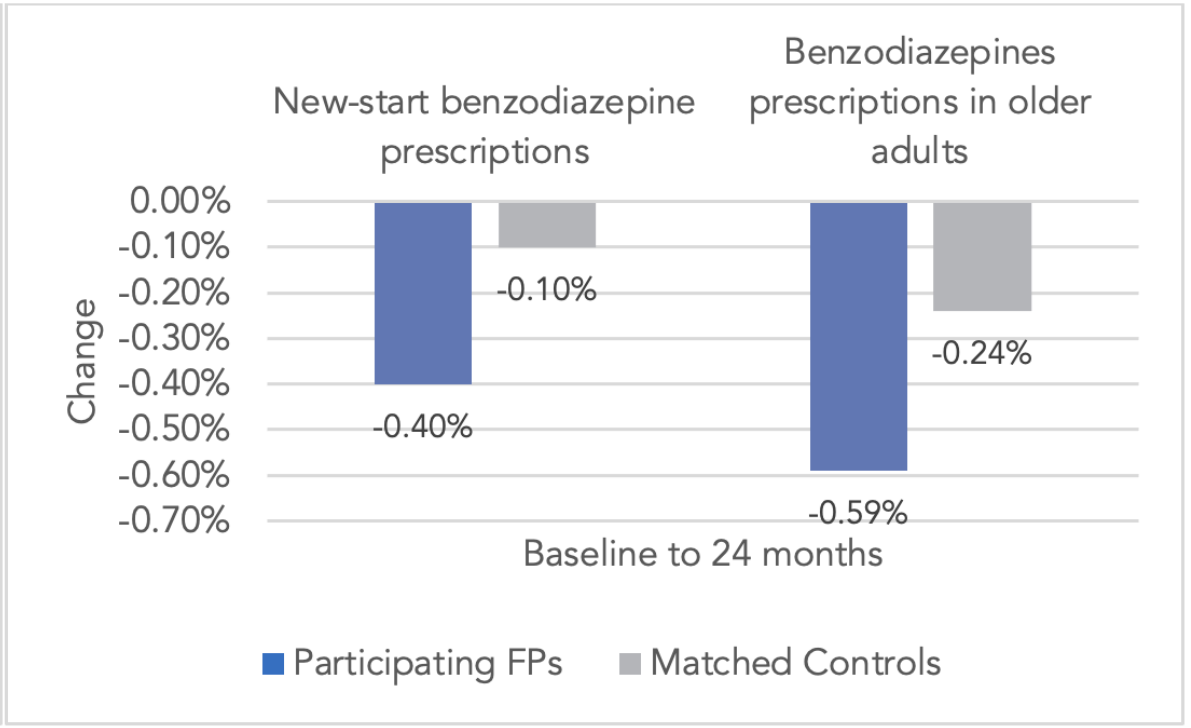
Enabling safer prescribing and reducing harms

Compared to family physicians with a similar practice, academic detailing participants achieved:

- 2.5x greater reduction in high-risk opioid prescriptions among the top 25% of prescribers
- 4x greater reduction in new-start benzodiazepine prescriptions
- 2.5x greater reduction in benzodiazepine prescriptions in older adults





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Evidence2Practice Ontario

Evidence2Practice Ontario (E2P) is working with partners in primary care to design a suite of digital solutions and implementation supports that seamlessly integrate up-to-date and relevant evidence and quality standards into front-line clinical systems that adapt to their workflows.

Heart Failure

Available in:

- Telus PS Suite
- OSCAR Pro
- Accuro QHR

Learn more

Anxiety Disorders & Depression

Available in:

- Telus PS Suite
- OSCAR Pro
- Accuro QHR

Learn more

Prediabetes & Type 2 Diabetes

Available in:

- Telus PS Suite
- OSCAR Pro
- Accuro QHR

Learn more

Chronic Obstructive Pulmonary Disease

Available in:

- Telus PS Suite
- Accuro QHR

Learn more

eHealth Centre of Excellence

North York General — Making a World of Difference

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Medication

Engage the patient in shared decision-making about their medications. See general guidelines

Considerations if pregnant or post-partum

Talking points for starting and taking medications

Current med plan

first line therapy or monotherapy:
adjunctive therapy:

Medication Plan

Monitoring, adherence and response

Consider using scales when monitoring a patient's response to medication when combined with meaningful conversation .

Further information available in the **Medication Reference Table**

Is patient taking medication(s) as directed? : yes No — pt. states taking meds as directed

Is the medication(s) helping? : yes No

negative side effects? : yes No — Tol...

Medication adjustments (notes):

Citalopram **Prescribe**

See information on:

Initial onset, effect and duration for medications
Medication after remission
Adjusting medications
Switching monotherapy and adding adjunctive medication
Tapering medications

Depr
Screen
Anx
Labs
Lab n
Hb
Fer
B-

The problem?

Navigation burden

Evolving evidence

Practical implementation

Emerging resources

Technical skill

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The solution? A one door policy

Our goal is to connect and support clinicians seamlessly with necessary services, lessen burden of navigation and provide a streamlined and individualized experience.

Health Care Providers

Sign up for support

Change Management Specialists
Support to install, adapt and use the EMR tools to enhance existing workflows.

Academic Detailing Service
1-on-1 tailored discussions with a pharmacist on the latest clinical evidence, resources and practical implementation tips.

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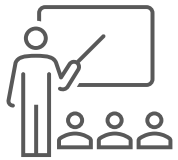
Our first attempt



Training

- **Cross-training** of Change Management Specialists (technical support) and academic detailers **on each other's role** and the **supports** they provide.

Tool Development

- **Collection** of **detailer feedback** during EMR tool development.
- Final EMR tool **demonstrated** to AD team.

Recruitment

- List of EMR tool **"early adopters" shared** with detailers to identify existing relationships.
- AD included & cc'd on technical support's **recruitment emails**.
- Email **warm hand-offs**.
- **Tools and support tracked** in Salesforce and **shared monthly** between teams.

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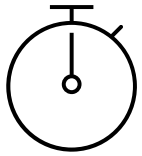
The challenges

Time

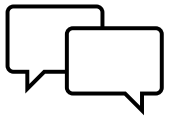


- Conflicting timelines
- Limited time during AD visits to discuss EMR tools

Complexity

- Difficulties with conflicting/missing databases
- Recruitment emails included too many asks

Communication



- Lack of understanding and engagement between tech support and detailers
- Poor communication and operationalization of the hand-off process
- Lack of consistent messaging

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Our second attempt

Better documentation

- Third-party software to support **automatic sharing** of information between Salesforces.
- **Documentation** of the process, email templates and communications material for **cross-promotion**.

Improved communication

- **Ongoing communication** between CMs and ADs via **monthly meetings** and shadowing.

Enhanced outreach

- **Independent outreach** by CMS
- Continued opportunistic **warm hand-offs**.
- Provide ADs a list of **recent tool users** who haven't received an AD visit.

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Looking forward

Lessons learned through trial and lots of error

- **Plan, but plan effectively!**
  - Plan well in advance
  - Include the right people
  - Focus on the right things
  - Clarify and set realistic deliverables
  - Keep it as simple as possible

- **Improvements to be explored**
  - How and when to loop academic detailers into tool development
  - Communications teams support to establish consistent messaging and materials
  - Limit the scope of AD topics

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Questions?

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Clinical Service Director

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Nicole Seymour, RPh
Academic Detailer