

Population Health Management Challenge

Participants Report

Challenge dates:

August 17 – 18,

October 19 – 20,

November 17, 2011

The Population Health Management Challenge

a research collaboration by:



MEdbASE Research

McGill

Le Défi Population-Santé

un projet de recherche collaborative entre:



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Introduction

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Background

- Population health management has been cited by provincial, national and international organizations in the transformation of primary care.
 - Manitoba Primary Health Care Policy Framework (2002)
 - The College of Family Physicians of Canada (CFPC) – Patient Centred Medical Home (2009):
 - *New Model Practice: Building on innovations from the recent era of continuous quality improvement, patient safety, transparency, and accountability, **using evidenced based processes of care including population based management**, facilitated by patient registries and information technology.*
 - World Organization of Family Doctors (WONCA) focuses on information systems to document the health needs of patients and populations in a way to encourage more effective and more efficient primary care-oriented health systems (May, 2011).



The Challenge

- The Population Health Management Challenge is a performance study of medical record systems.
- It does not involve research or study of patients or doctors.
- It will assess the ability of medical record systems to identify sub-groups within a doctor's practice who need special attention.

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The Challenge

- In a 1-day challenge, primary care practices reviewed their patients' records to **identify those who would benefit from evidence-informed interventions** in 6 focus areas chosen by a panel of community-based family physicians
- 11 Community-based Primary Care clinics – reviewing a total of 21 practices volunteered for the study:
 - 17 practices with EMRs
 - 4 practices with paper-based records



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Study design

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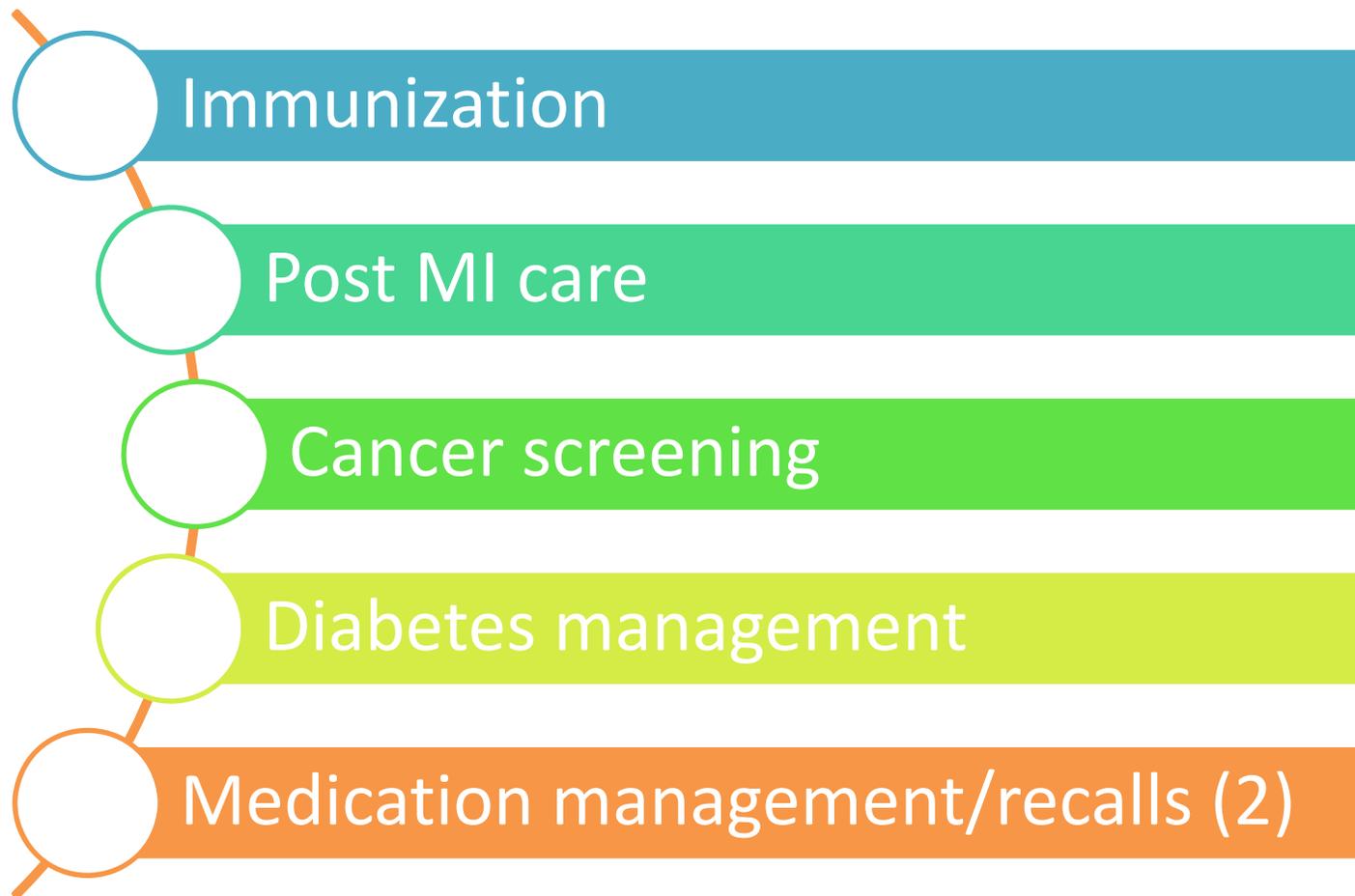
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The Challenge Areas



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Method

- Each exercise was completed using an interactive web based tool and was timed with a 45min or 60min allowance.
- Exercises were completed by either the practice physician or a staff member seconded by the practice (MOA, Medical Records, or IT specialist)
- Challenge Participants were measured on:
 - the time required to complete each challenge
 - the method by which data were queried/abstracted
 - self-reported confidence in the data abstracted to support follow-up activities for the identified patient groups.



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Results

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Practices with EMRs are significantly quicker to identify patients that would benefit from evidence-informed interventions



On average, EMR-enabled clinics completed a full-review (100% of active patient records) in 1.37 hrs. Paper-based clinics reviewed approximately 4-10% of their charts in 3.2hrs, thus requiring an estimated minimum of 32hrs to complete a full review of their patient population.

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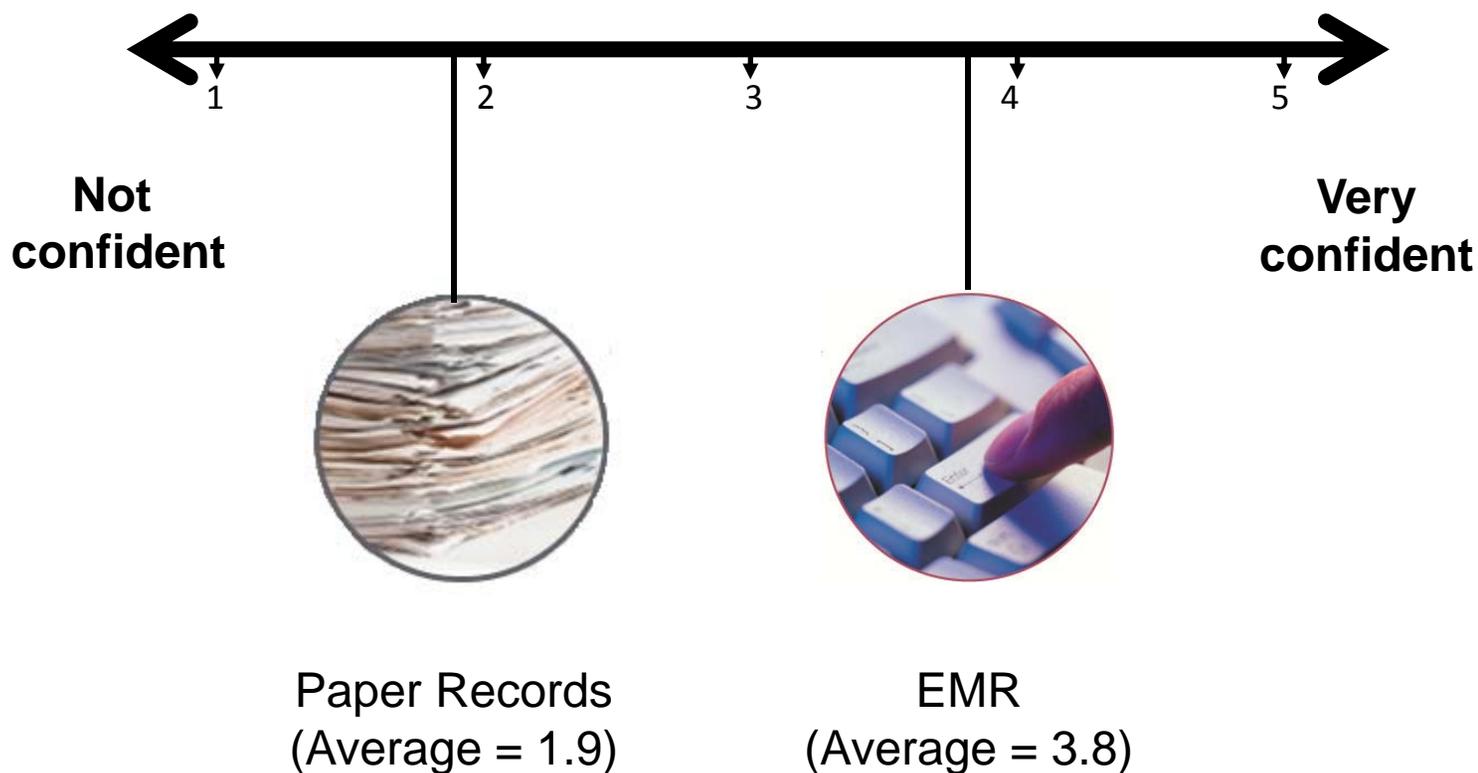
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Enhanced capacity to identify patients with confidence who would benefit from evidence-informed interventions

- *Practices with EMRs can complete reviews within a few hours – **a small portion of a work-day**; and can further accommodate **reviews for multiple physicians within minutes**.*
- *Comparatively, **paper-based clinics require a full work week** (32+hrs) to complete reviews for any 1 clinician's practice.*

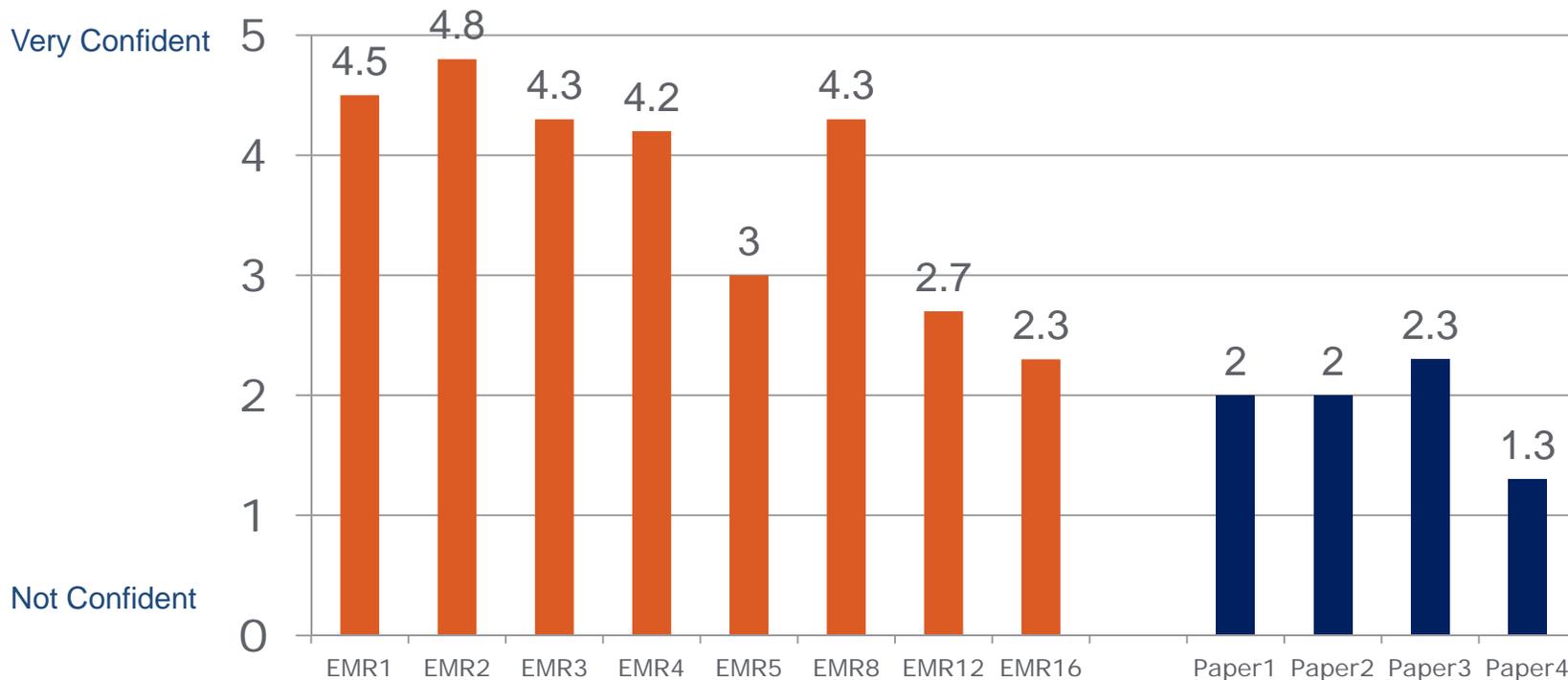


Practices with EMRs are more confident they can contact patients for needed interventions



Overall confidence in queries to support interventions

Overall (average) across all 6 Challenges



On a scale of 1 to 5, where 1 is not confident and 5 is very confident, please indicate how confident you are that the lists generated by this challenge **can be used to contact all the eligible patients in your practice** (average across all 6 challenges).

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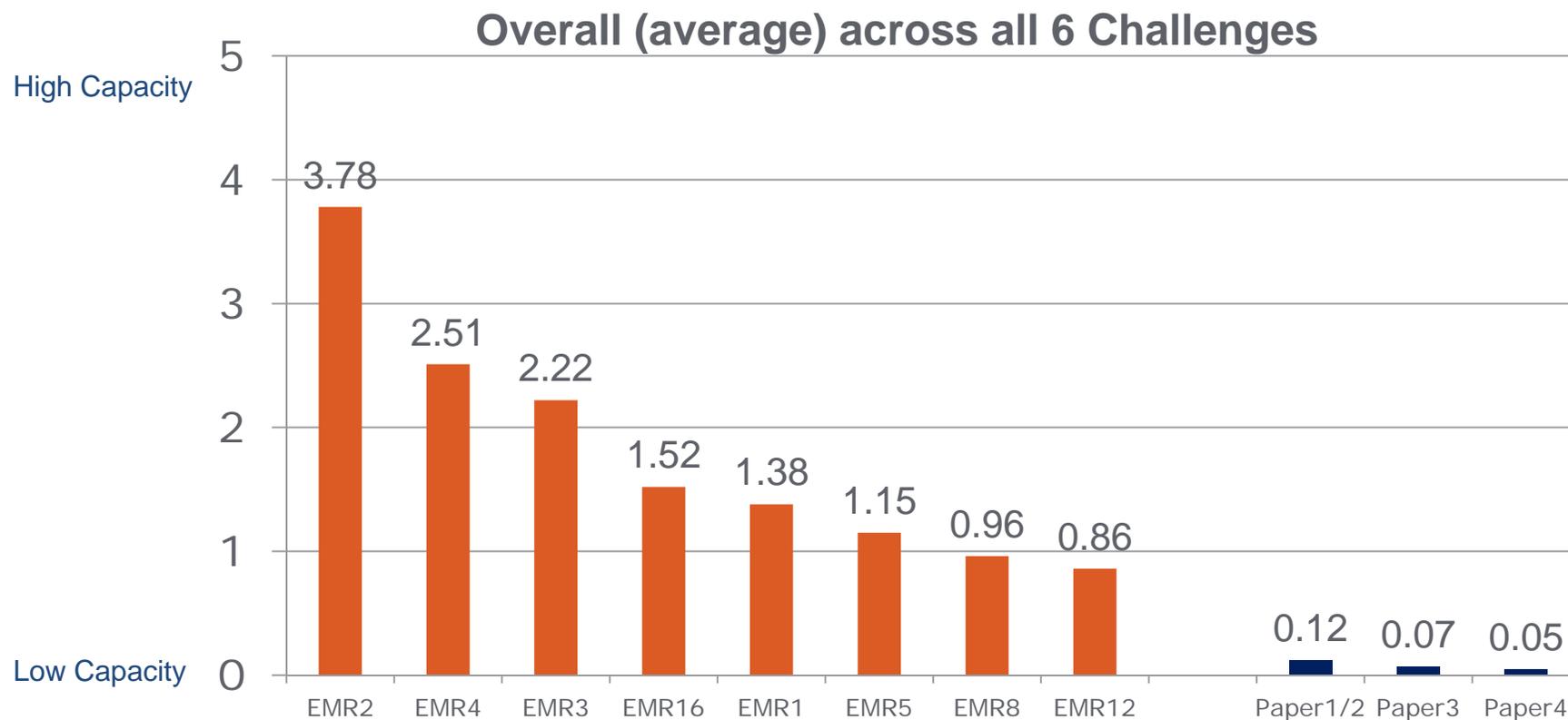
Capacity to conduct *Population Health Management*

The Score:

- A new metric developed to measure a practice's capacity to engage in Practice-based Population Health.
- The score ranks the practices in terms of their ability to extract accurate information in a timely fashion from their chart management system.
- It is determined as follows:
 1. For each challenge, the proportion of all charts compliant with the challenge's specific criteria is determined;
 2. This figure is then divided by the ratio of the time required to obtain the challenge's results to the allocated time; and
 3. The practice's score is the average of the above value, computed across all challenges.



Capacity to conduct *Population Health Management*



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