Wolf EMR Guide for: Reducing the Impact of Financial Strain

Background

Income is one of the most powerful determinants of health [1,2], and intervening can have a profound impact. Individuals living with financial strain typically have worse health outcomes [3]. To help individuals & families stay healthy, it is important to understand a patient's social circumstances. In 2014, 3 million Canadians (8.8%) lived in poverty [4]. In 2015, 149,700 Albertan children (15.6%) lived in poverty [4]. At risk people include single people aged 45 to 64, single parents, recent immigrants, Indigenous people, and people with disabilities [5]. It can be challenging to address the health impacts of living with financial strain, both for health providers and communities. In 2015, the College of Family Physicians of Canada recommended educating patients about available income supports as it can influence modifiable risk factors such as healthy eating and being active [6]. Reducing the Impact of Financial Strain (RIFS): A Population and Public Health Partnership with Primary Care to Reduce the Risk of Cancer and Chronic Disease project, is a groundbreaking collaboration that will support primary care screening for, and responding to, financial concerns among patients; strengthening linkages to community services; and building capacity to address gaps [7].

This EMR guide will provide recommendations about how to utilize the Wolf EMR to coordinate care management for people who are experiencing financial strain. These actions are important steps on the journey of creating a patient medical home. There are additional options to explore within the features and functionality of the Wolf EMR to accomplish the recommended steps outlined in this section of the guide. EMR specific guides for Healthquest, Med Access, PS Suite, and Accuro are also available online at: https://actt.albertadoctors.org/EMR/Pages/default.aspx

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[1] Link BG, Phelan J. Social conditions as fundamental causes of disease. J Health Soc Behav 1995:80–94

[2] Adler NE, Ostrove JM. Socioeconomic status and health: What we know and what we don't. Ann N Y Acad Sci 1999;896(1):3–15

[3] https://www.cfpc.ca/uploadedFiles/CPD/_PDFs/Poverty_flowAB%202016%20Oct%2028.pdf

[4] Statistics Canada. (2017). Characteristics of families, before-tax and after-tax low income status (based on census family low income measures, LIM, by family type and family type composition, annual (number unless otherwise noted). CANSIM Table 111-0015.

[5] http://vibrantcalgary.com/wp-content/uploads/2016/06/PCosts_2_Investing_In_Albertans_web.pdf

[6] https://www.albertahealthservices.ca/assets/about/scn/ahs-scn-ppih-pph-project-summary-rifs.pdf

[7] https://together4health.albertahealthservices.ca/FinancialWellness

Panel Segmentation & Marking the Record

Establishing and maintaining an accurate panel is a critical step to leveraging the EMR for managing patient care. Please refer to the Panel Identification and Panel Maintenance sections of Guiding Principles to Effective Use of EMR for Patient's Medical Home Work and other Wolf EMR resources as needed.

Managing a patient panel to reduce harms associated with experiencing financial strain begins with the identification of patients who are experiencing financial strain. The process of identifying a sub-group of patients within the panel is panel segmentation. Marking the patient record identifies the panel segment by using a standardized term to facilitate the use of searches and applicable point-of-care reminders.

The panel segment of interest for this population is **patients who are experiencing financial strain**. This panel segment includes all patients who respond "Yes" to the screening question "Do you ever have difficulty making ends meet at the end of the month?" This is the recommended standardized RIFS screening question but clinic teams may choose to ask patients additional screening questions at their own discretion.

Identifying and maintaining a list of patients who are experiencing financial strain requires an active screening process and review to ensure accuracy of information. The next three sections will provide recommendations for developing a screening process. As you read through these sections, please keep in mind that there are several methods to facilitate the development of a panel segment patient list. Clinic teams are, therefore, encouraged to consider their clinic's context and explore other methods as appropriate.

Identifying the Screening Patient Population

Recommended method: Start by identifying the patient population the clinic team would like to screen for patients experiencing financial strain. Here are some examples:

All patients 18 years and older:
- who have never been screened for experiencing financial strain.
- participating in a particular initiative like Patients Collaborating with Teams (PaCT).
- with a specific complex health need (e.g. patients with multiple chronic conditions, patients taking multiple medications). Please refer to pages 29 and 30 of the Guiding Principles to Effective Use of EMR for Patient's Medical Home Work document for additional information about identifying patients with complex health needs.
- who have an appointment with a specific physician or other healthcare provider.

Once the screening patient population has been identified, it is suggested that the clinic team create **point of care reminders** to flag patients who should be offered the screening question. Point of care reminders can be used to remind clinic staff to perform a certain action when a patient visits the clinic.

> **TIP:** Experiencing financial strain is a common occurrence for many people. We want to normalize the screening process as much as possible, so patients don't feel like their selection was targeted. This could make them feel even more shame and stigma for experiencing financial strain.

Global Visit Reminders/Rules – Global reminders for patient recall/outreach can be used to flag patients who meet the criteria of the screening population. For example, below is a screenshot of a search that can be saved as a rule to create a global reminder to screen Dr. Linton's adult patients who have an appointment booked "today" and have never completed a screening questionnaire. If your clinic is concerned that adding RIFS patient rules will impact patient confidentiality or clutter patient charts, consider running this search every morning to identify patients due for screening.

Note that it is important to check off "Search All Patients" above the search. This will ensure that the search includes all patients registered in the EMR. It is also important to "Exclude Matches" of patients who have been offered the screening question. This will ensure that only patients who have not been offered the screening question are flagged for screening. Note that the above search excludes patients with a screening result recorded as a manual lab. See the [Reviewing and Recording the Screening Question Result](#) section below for more information about where the result can be recorded. If your clinics team records the screening result in a different EMR field, please include that field in the search instead of the "Show Patients Having Manually Entered Investigations" section in the search above.

See these useful resources for additional information on creating and managing rules:
- ACTT Online Resources:
  - [Saving a Search as a Rule in Telus Wolf](#) – 5 min video
  - [Guiding Principles of Searches in Telus Wolf](#) – 6 min video
  - [Searchable Areas of Telus Wolf](#) – 5 min video
- Wolf EMR Help Files:
  - [Practice Search Rules](#)

Screening Patients

Recommended method: Work as a clinic team to determine how the screening question will be offered to and completed by patients.

1. Consider using the [RIFS scripting samples](#) when **offering the screening question to patients**.

2. Consider using one or more of the following methods to **administer the screening question**:
    i. Create the screening question as a SMART form and print it out for patients to complete with a pen or pencil. See these useful Wolf EMR Help Files for additional information on creating and managing SMART forms:
        - [Wolf EMR SMART Forms User Guide](#)
        - [Importing SMART Forms](#)
        - [Creating SMART Forms](#)
        - [Opening SMART Forms](#)
    ii. Provide patients with a laminated copy of the screening question to be completed with a whiteboard marker.
    iii. Have a clinic team member complete the screening question with the patient and record the response directly in the EMR. See the [Reviewing and Recording the Screening Question Result](#) section below for more information about where the result can be recorded.

> **TIP:** When considering how the screening question will be administered, please keep in mind that personal finance is a sensitive topic for many patients. The screening process should therefore ensure that patient privacy and confidentiality are maximized. For example, consider offering patients the screening question while in a private exam room.

Reviewing and Recording the Screening Question Result

Recommended method: A healthcare provider reviews the screening question result with the patient and records the result in the EMR.

1. Consider using the using the RIFS scripting samples to guide providers with their **conversations when responding to patients** after the screening has been completed.

2. Recording the screening question result
   a. Consider recording the following four types of question results in a searchable field in the EMR (see step 2b below):
      i. <u>Positive</u>: patient responds "Yes" to the question "Do you ever have difficulty making ends meet at the end of the month?"
      ii. <u>Negative</u>: patient responds "No" to the question "Do you ever have difficulty making ends meet at the end of the month?"
      iii. <u>Unable to Complete</u>: patient is unable to complete the screening question (e.g. due to illiteracy, a language barrier, a mental health barrier such as dementia, etc.). Please note that, to make the screening process more efficient, this result can be recorded in the EMR by the clinic staff member who offers the patient the screening tool.
      iv. <u>Declined</u>: patient declines to complete the screening question. Please note that, to make the screening process more efficient, this result can be recorded in the EMR by the clinic staff member who offers the patient the screening tool.

   b. Consider recording the four types of screening question results in one of the following searchable fields in the EMR:
      i. *Exam Template*: the preferred method is to create a RIFS exam template with a fixed drop-down menu to record the RIFS screening question results. See these useful Wolf EMR Help Files for additional information on creating and using exam templates:
         o Customizing Structured Exam Templates
         o Using Structured Exam Templates

ii. *Manual Lab Results*: as an alternative method, the manual lab entry must be configured first to appear as an option in the investigation types (see screen shot below).Once configured, add a new result by going to the patient's Medical Summary > Right-Click > New Manual Result.

Note that the lab result field is a free text field. This means that the individual entering the results needs to ensure they enter the result exactly as decided by the clinic. To make this easier, consider using "+" for positive results, "–" for negative results, "D" for declined, and "UTC" for unable to complete.

See these useful resources for additional information on configuring and adding manual lab results:
- o ACTT Online Resource:
  - ▪ Manual Results in Telus Wolf – 3 min video
- o Wolf EMR Help Files:
  - ▪ Configuring Investigations
  - ▪ Entering Lab Results Manually
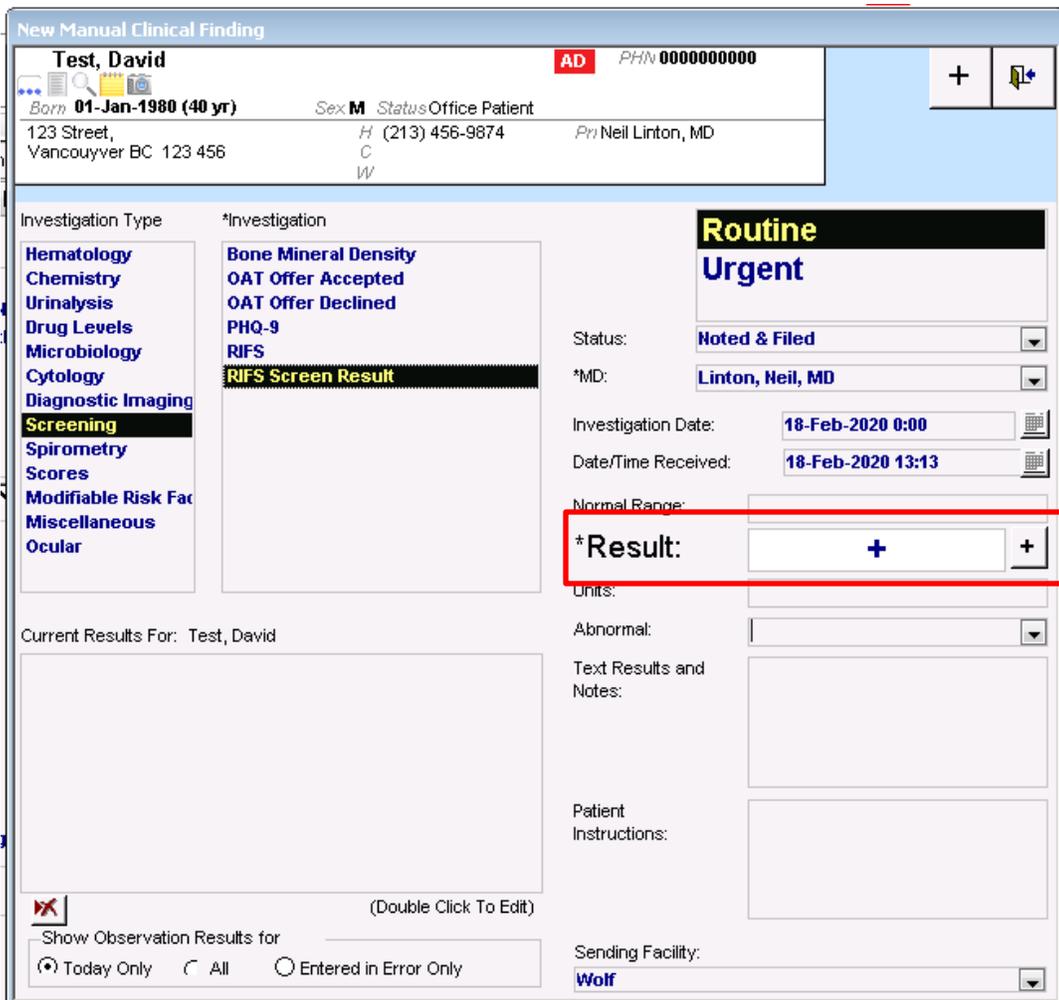
3. It is recommended that the healthcare provider **record 'Financial Strain' in the patient's problem list/profile** if the result is positive (i.e. patient responds "Yes" to the question "Do you ever have difficulty making ends meet at the end of the month?"). This will allow the clinic to follow-up as appropriate with patients who are experiencing financial strain. Once added to the problems list, "Financial Strain" will appear in the patient's chart as shown below.
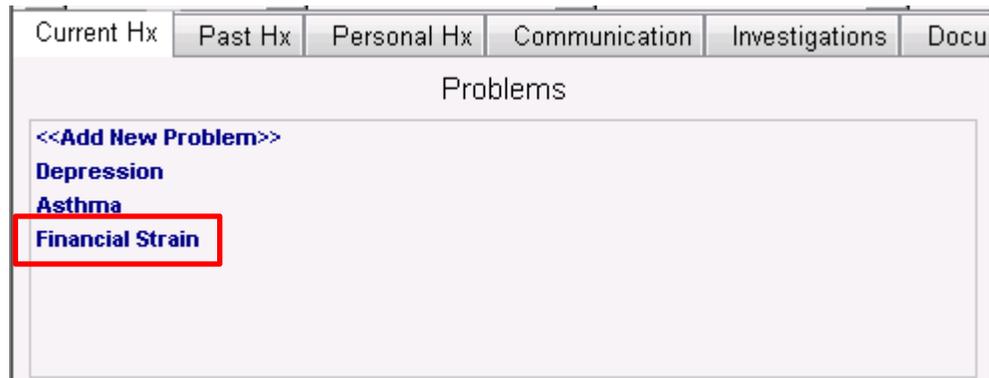
See these useful resources for additional information on managing and using the problem list:
- o ACTT Online Resources:
  - ▪ [Wolf EMR Guide for Patient's Medical Home](#) - see "Registries (Cohorts)" on page 30
  - ▪ [Using Problem List ICD9 as Favorites in Telus Wolf](#) – 2 min video
  - ▪ [Managing Master Problem List in Telus Wolf](#) – 9 min video
- o Wolf EMR Help Files:
  - ▪ [Managing your Clinic Problem List](#)

Care Management

The following section outlines some follow-up processes and EMR reminders that can be enabled but this does not replace clinical judgement or consideration of individual patient circumstances. It is intended to provide a 'safety net' to alert the clinic team to considerations in managing patients who are experiencing financial strain.

Referral Coordination

Recommended method: A healthcare provider asks patients who are experiencing financial strain if they would like to be referred to another healthcare provider (e.g. social worker) and/or community resource to further discuss their options.

Consider recording the following outcomes of the referral offer:

      i.   <u>Accepted</u>: patient accepts the offer for additional resources.
     ii.   <u>Declined</u>: patient declines the offer for additional resources.
    iii.   <u>Deferred</u>: patient is considering the offer for additional resources but has not yet accepted.

If a patient agrees to be referred to additional resources, consider providing them with a referral to the appropriate healthcare provider and/or a handout of available community supports.

If a patient declines the offer for additional resources, the clinic team can use their best judgement to determine whether or not to reoffer additional resources the next time the patient visits the clinic.

If a patient defers the offer for additional resources, the clinic team can create a reminder to reoffer additional resources the next time the patient calls and/or visits the clinic.

Consider recording the three types of referral outcomes in one of the following searchable fields in the EMR:

    i.   *Exam Template*: the preferred method is to create a RIFS exam template with a fixed drop-down menu to record the RIFS referral outcome. This can be the same exam template used to record the screening result.

        Note that, if your clinic team would like to track the different types of referrals that patients have accepted, declined or deferred, a separate fixed drop-down menu will need to be created for each type of referral (see screen shot below).

        See these useful Wolf EMR Help Files for additional information on creating and using exam templates:
- Customizing Structured Exam Templates
- Using Structured Exam Templates
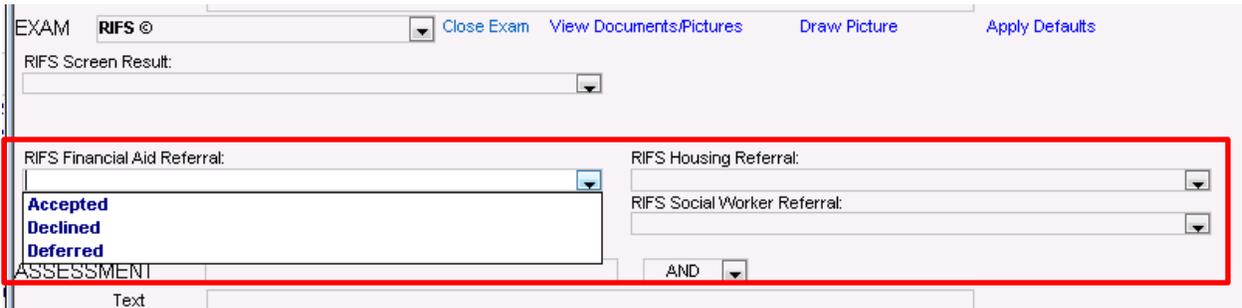
ii.	*Manual Lab Results*: as an alternative method, the manual lab entry must be configured first to appear as an option in the investigation types (see screen shot below).Once configured, add a new result by going to the patient's Medical Summary > Right-Click > New Manual Result.

Note that the lab result field is a free text field. This means that the individual entering the outcome needs to ensure they enter the result exactly as decided by the clinic. To make this easier, consider using "+" for an accepted referral, "–" for a declined referral, and "Def" for a deferred referral.

Also note that, if your clinic team would like to track the types of referrals patients have accepted, declined or deferred, a separate type of investigation will need to be created for each type of referral (see screen shot below).

See these useful resources for additional information on configuring and adding manual lab results:
- o ACTT Online Resources:
  - ▪ Manual Results in Telus Wolf – 3 min video
- o Wolf EMR Help Files:
  - ▪ Configuring Investigations
  - ▪ Entering Lab Results Manually

TIP: It is important to ensure that clinic team members record information in the EMR in a standardized way. For guidance on standardizing data entry in the EMR, please refer to pages 5 and 6 of the Guiding Principles to Effective Use of EMR for Patient's Medical Home Work document.

Opportunistic and Outreach Screening - Following Up with Patients Experiencing Financial Strain

Establishing EMR reminders can support the clinic team by identifying tasks that may be appropriate to be completed during a patient encounter (i.e. opportunistically) or a recommendation to reach out to a patient (i.e. outreach). Please see the page 14 of the Guiding Principles to Effective Use of EMR for Patient's Medical Home Work document for additional information about opportunistic and outreach screening.

It is recommended that the clinic team **establish reminders** to follow-up with patients, as follows, based on the patient's last screening result:

    i.   <u>Positive</u>: follow-up at every patient encounter until the patient no longer screens positive, or as appropriate given a specific patient's context

    ii.   <u>Negative</u>: follow-up every 18 months, or as appropriate given a specific patient's context

    iii.   <u>Unable To Complete</u>: follow-up at every patient encounter until the patient is able to complete the questionnaire, or as appropriate given a specific patient's context

    iv.   <u>Declined</u>: follow-up every 18 months, or as appropriate given a specific patient's context

Opportunistic Care

Consider using one or more of the following options to flag patients who come to the clinic for an appointment and have 'Financial Strain' in their problem list/patient profile.

1. Create a global reminder to flag patients who come in for an appointment, have 'Financial Strain' in their problem list/profile and have not had their screening result reviewed in more than six months. Note that clinic teams are encouraged to choose the screening time interval that makes the most sense given their context (e.g. review positive screening results every three months).

   Below are two example searches. Refer to the first one if your clinic team records the screening result as a manual lab result. Refer to the second one if your clinic team records the screening result in an exam template drop-down field.

   Note that it is important to check off "Search All Patients" above the search. This will ensure that the search includes all patients registered in the EMR. It is also important to select "History" > "Problem (Specific)" when adding the problem field to the search. This will allows you to search for problems like "Financial Strain" that are not tied to an ICD-9 code. Lastly, it is important to check off "and Currently Active" in the "Filter by Specific Problem Where" section of the search. This will ensure that only patients with Financial Strain listed as a current problem are flagged.

Example Search 1 - Patients who are Experiencing Financial Strain and are due for a Follow-Up
Use if using <u>Manual Lab Results</u> to Record Screening Result

Example Search 2 - Patients who are Experiencing Financial Strain and are due for a Follow-Up
Use if using Exam Template Drop-Down Field to Record Screening Result

2. Create individualized patient reminders to flag patients who come in for an appointment, have 'Financial Strain' in their problem list/profile and require an individualized follow-up plan. See the following Wolf EMR Help Files for additional information on creating and managing individual patient reminders:

- Viewing and Managing Patient Rule Matches
- Adding Patient Notes and Alerts
- Creating Special Patient Alerts
- Messages and Tasks

Outreach Care

Consider using the following options to flag patients who have 'Financial Strain' in their problem list and have not come to the clinic for an appointment in more than six months. Note that clinic teams are encouraged to choose the screening time interval that makes the most sense given their context.

1. Create a global reminder to flag patients who have 'Financial Strain' in their problem list/profile and have not visited the clinic in more than six months.

Note that it is important to select "History" > "Problem (Specific)" when adding the problem field to the search. This will allows you to search for problems like "Financial Strain" that are not tied to an ICD-9 code. It is also important to check off "and Currently Active" in the "Filter by Specific Problem Where" section of the search. This will ensure that only patients with Financial Strain listed as a current problem are flagged. Lastly, it is important to check off "Exclude Matches" in the "Filter by Last Visit Where:" section of the search.

2. Create individualized patient reminders to flag patients who have 'Financial Strain' in their problem list/profile and have not visited the clinic as outlined in their individualized follow-up plan. See the following Wolf EMR Help Files for additional information on creating and managing individual patient reminders:

- Viewing and Managing Patient Rule Matches
- Adding Patient Notes and Alerts
- Creating Special Patient Alerts
- Messages and Tasks

A list of patients requiring outreach care can be printed off as a report and used to call patients to book a follow-up appointment. This creates a 'safety net' for follow up on the patient's financial strain goals or an opportunity to remove 'Financial Strain' from problem list/profile.

Quality Improvement and Measurement

Quality improvement (QI) is a systematic approach to monitoring practice efforts, reviewing and reflecting on the current state and looking for opportunities to improve. Measurement can be a way to monitor clinic operations and improvement. How and why the team uses measurement may require a discussion with the clinic team and practice facilitator. Consider the reason for measurement; is it a spot check or long term monitoring? A team can benefit from reflecting on data produced from the EMR to help inform next steps, focused follow-up or ongoing patient monitoring.

The following examples are searches that a team may wish to perform in their EMR for their patients who are experiencing financial strain:

- Number of active patients experiencing financial strain

- The number of active patients who have been screened for financial strain
  Note that the below example is for clinics recording the screening result in an exam template using a fixed drop-down menu. If your clinic team records the screening result in a different EMR field, please include that field in the search instead of the "Patient Examination Findings" section in the search below.

- Number of active patients experiencing financial strain who have been offered a RIFS referral
  Note that the below example is for clinics recording the referral outcome in an exam template using a fixed drop-down menu. If your clinic team records the referral outcome in a different EMR field, please include that field in the search instead of the "Patient Examination Findings" section in the search below.

  Also note that, if your clinic is recording referral outcomes by type of outcome, each type of referral needs to be added to the search, as in the below example search.
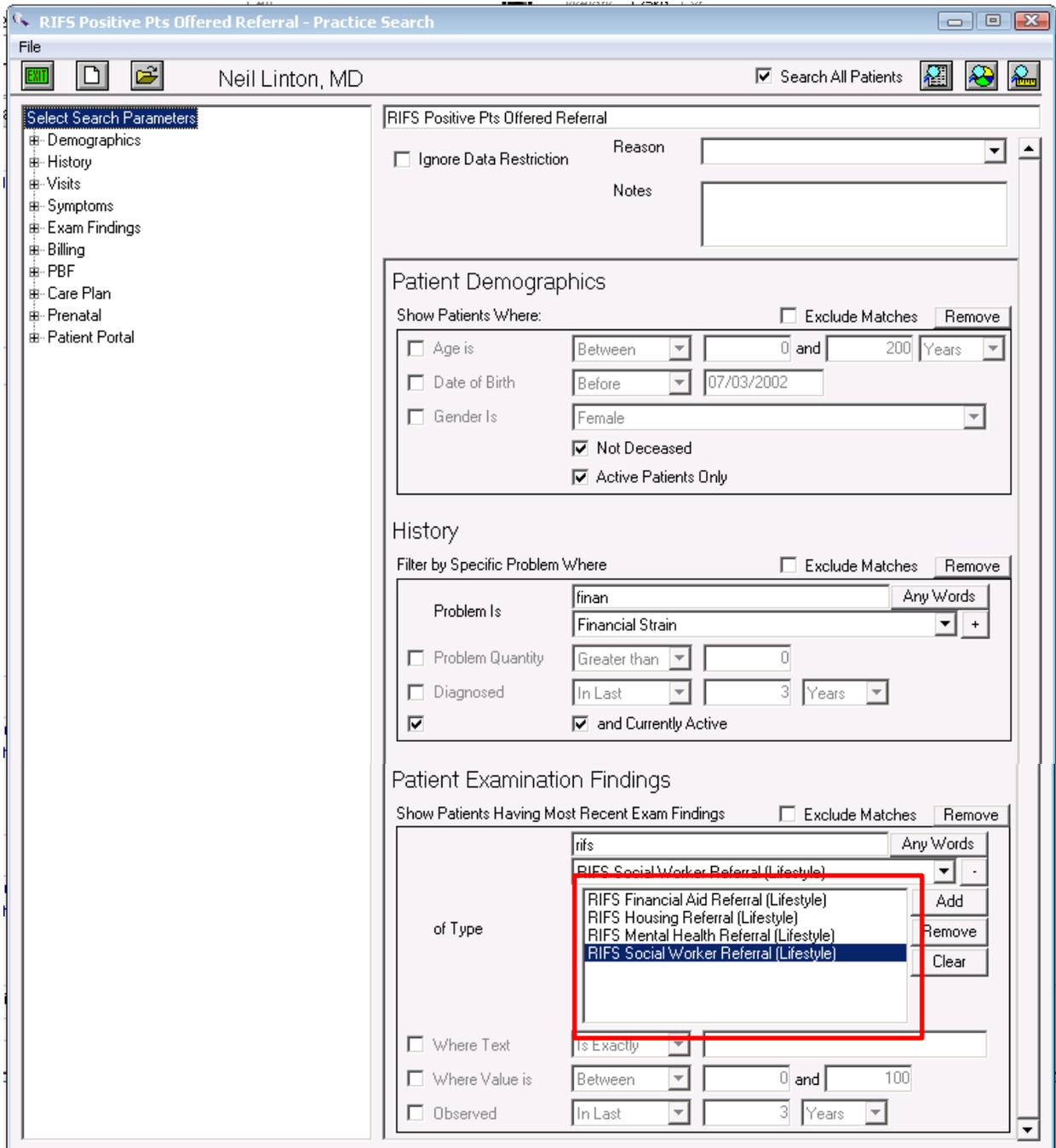
- Number of active patients who are experiencing financial strain and have accepted a referral
  ex: social worker referral
  Note that the below example is for clinics recording the referral outcome as a manual lab result. If your clinic team records the referral outcome in a different EMR field, please include that field in the search instead of the "Show Patients Having Manually Entered Investigations" section in the search below.
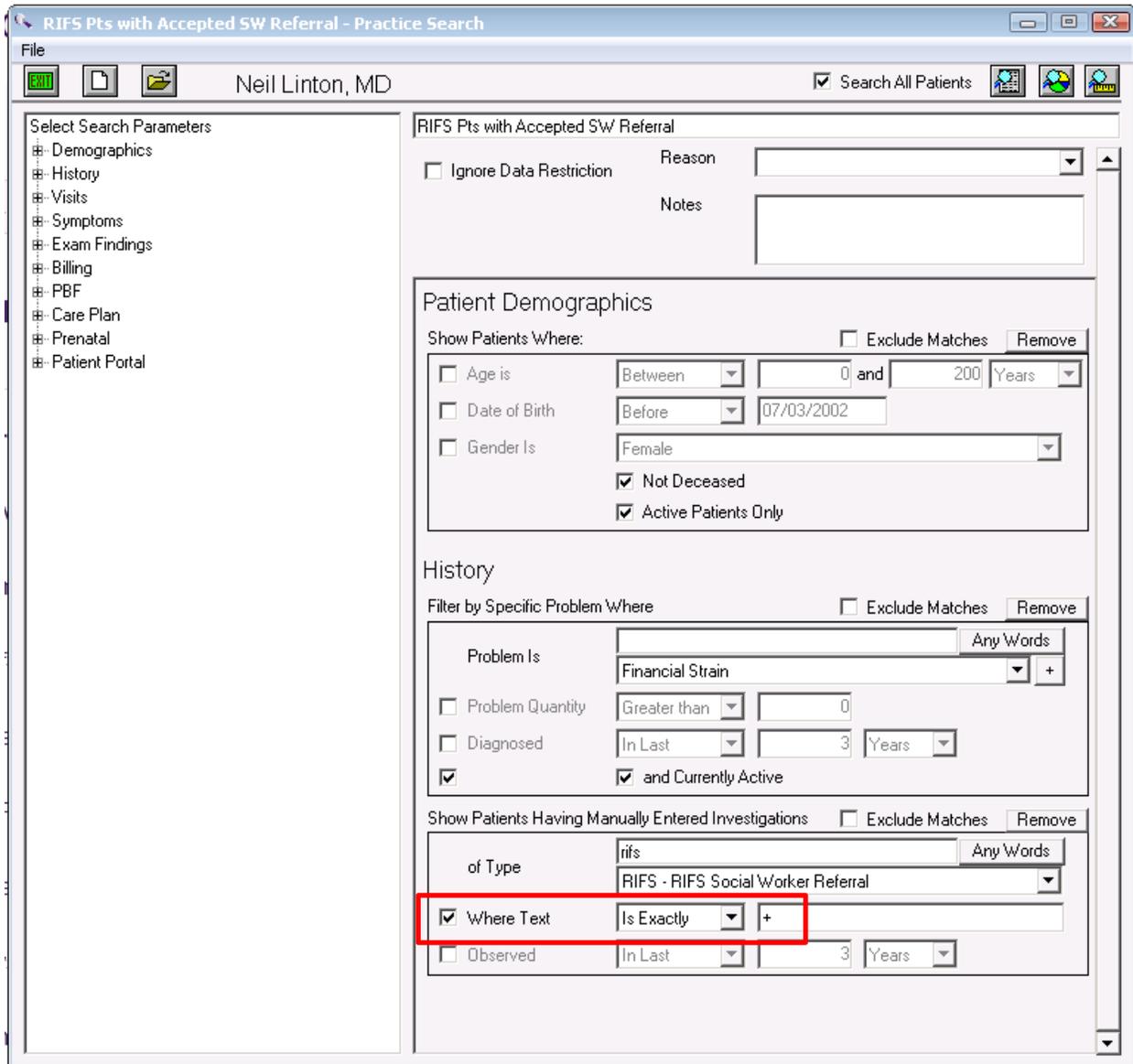
- Decide what measures are meaningful to the team. Keep it simple by choosing 1 or 2 measures at the start and then add and remove measures as the work evolves over time.

> TIP: Were some queries unable to be performed because the data was not standardized in the EMR?
>
> - Promote discussion at the outset to avoid standardization challenges rather than having to clean them up later.
>
> - Discuss as a team what documentation/charting may need to change moving forward for the purpose of patient population monitoring and process improvement.

- For more RIFS tools and resources, please see the RIFS Change Package.