

Med Access 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 outcomes³. 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 poverty⁴. In 2015, 149,700 Albertan children (15.6%) lived in poverty⁴. At risk people include single people aged 45 to 64, single parents, recent immigrants, Indigenous people, and people with disabilities⁵. 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 active⁶. 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 gaps⁷.

This EMR guide will provide recommendations about how to utilize the Med Access 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 Med Access EMR to accomplish the recommended steps outlined in this section of the guide. EMR specific guides for Healthquest, Accuro, PS Suite, and Wolf are also available online at: <https://actt.albertadoctors.org/EMR/Pages/default.aspx>

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 Med Access 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 – 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 query that can be used as an alert to flag Dr. Topps’ adult patients who have an appointment booked “today” and have never completed a screening questionnaire. If your clinic is concerned that adding RIFS patient flags will impact patient confidentiality or clutter patient charts, consider running this report every morning to identify patients due for screening.

The screenshot shows a query criteria form with the following sections and fields:

- Criteria** (Header): Includes an 'Unmask' toggle.
- Template:** RIFS Patients Due for Screening
- Demographics** (Section):
 - Status: Active
 - Primary Provider: Topps, David A.
 - Age Range: 18 to []
- Profile** (Section):
 - Category: Social Hx
 - Description: RIFS RIFS Exact
 - Checkbox: not
- Visits** (Section): +
- Task** (Section): +
- Observation** (Section): +
- Medications** (Section): +
- Allergy** (Section): +
- Goals** (Section): +
- Billing** (Section): +
- Appointment** (Section):
 - Checkbox: not
 - Date: 25-Feb-2020 to 25-Feb-2020

Note that it is important to check off “not” when adding the query criteria identifying 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. It is also important to ensure that the “Date” selected in the “Appointment” section of the search is set to the desired date.

See these useful resources for additional information on creating and managing reports, goals and CDS triggers:

- ACTT Online Resources:
 - [Med Access EMR Guide for Patient's Medical Home](#) (see page 42 – “Using Goals”)
 - [Building Searches in Med Access](#) – 13 min video
 - [Practice Management Reporting and Tasking in Med Access](#) – 15min video
 - [Using Clinical Decision Support Triggers: Creating, Workflows and Setting Criteria in Med Access](#) – 20 min video
 - [Creating CDS Trigger: Tobacco Use in Med Access](#) – 7min video
 - [Report Creation: Search for Diabetic Patients in Med Access](#) – 2min video
- Med Access EMR Help Files:
 - [Reports](#)
 - [Goals](#)
 - [Clinical Decision Support \(CDS\) Templates](#)

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 document and print it out for patients to complete with a pen or pencil. See these useful resources for additional information on printing and filing documents from the EMR:
 - 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. Positive: patient responds “Yes” to the question “Do you ever have difficulty making ends meet at the end of the month?”
 - ii. Negative: patient responds “No” to the question “Do you ever have difficulty making ends meet at the end of the month?”
 - iii. Unable to Complete: 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. Declined: 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 as an observation that can be added to patient profiles.

Start by creating a new “RIFS Screen” observation type:

- Users with administrative access can click “Templates”  to go to the “Template Management” module
- From there click the “Obs” tab 
- In the “Obs” area click “Types”  and then click “Lists” 
- Click “Manage” 

- Type "Pos, Neg, Unable to Complete, Declined" in the "Description" field and click "add" 

Managed Lists Management Return Help

Table: Managed Lists  **Description**: Pos, Neg, Unable to Cor  Use Privilege: Public Edit Privilege: Public

Name	Active	Sort			
(0) - (3):20150126133800	<input checked="" type="checkbox"/>	0			
(0) - (4):20150126133759	<input checked="" type="checkbox"/>	0			
(1) to (5):20130327165819	<input checked="" type="checkbox"/>	0			
(1) to (5):20130530163842	<input checked="" type="checkbox"/>	0			

- Click "Return" 
- Search for your new list by name and click Edit Managed List 

Managed Lists Observation Types Manage Help

Name: pos, neg, un  Domain: Local Lists

Managed List	
Pos, Neg, Unable to Complete, Declined	

- Type "Positive" in the "Description" field and click "Add" 

Pos, Neg, Unable to Complete, Declined Dropdown Management

Pos, Neg, Unable to Complete, Declined Dropdown Management Return Help

Table: Pos, Neg, Unable to Complete, Declined Dropdown **Description**: Positive  Code: Code Use Privilege: Public Edit Privilege: Public

No results found using the specified criteria.

- Repeat for "Negative", "Unable to Complete", and "Declined". Also ensure the "Sort" numbers are such that the list sorts in the order shown below

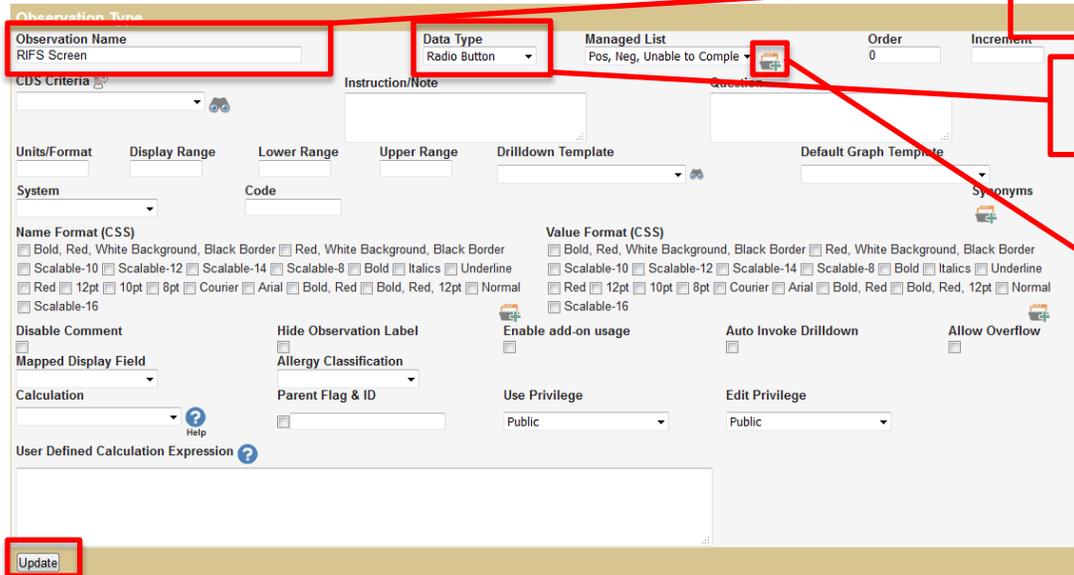
Pos, Neg, Unable to Complete, Declined Dropdown Management Return Help

Table: Pos, Neg, Unable to Complete, Declined Dropdown **Description**: Code: Code Use Privilege: Public Edit Privilege: Public

Name	Code	Active	Sort			
Positive	1204520	<input checked="" type="checkbox"/>	0			
Negative	1204521	<input checked="" type="checkbox"/>	1			
Unable to Complete	1204522	<input checked="" type="checkbox"/>	2			
Declined	1204523	<input checked="" type="checkbox"/>	3			

Export options: Excel | PDF | RTF

- Click “Return”  Return
- Click “Return to Observation Types”  [Observation Types](#)
- Now create a new observation: in the “Obs” tab , click “New” 



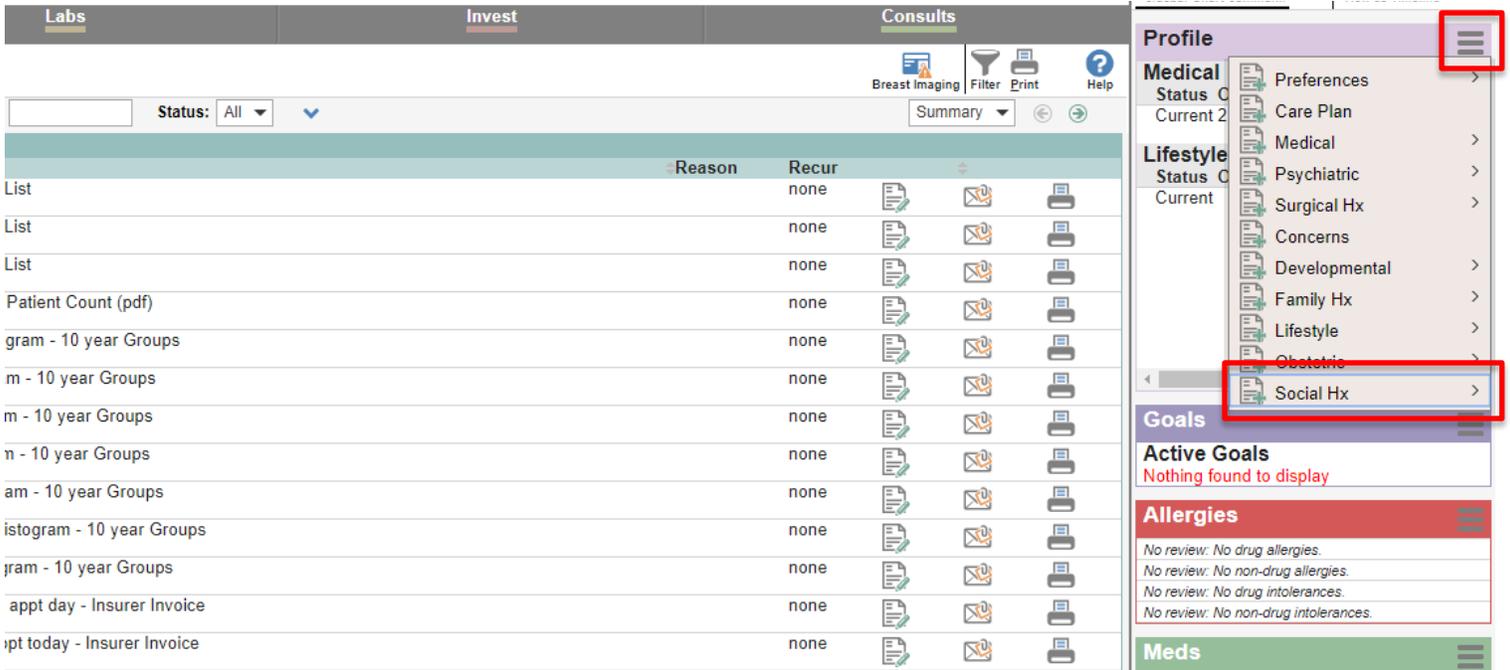
The screenshot shows the 'Observation Type' configuration form. Three red boxes highlight specific fields: 'Observation Name' (containing 'RIFS Screen'), 'Data Type' (set to 'Radio Button'), and 'Managed List' (set to 'Pos, Neg, Unable to Complete'). A fourth red box highlights the 'Update' button at the bottom left. Three additional red callout boxes with arrows point to these fields, containing the following text:

- Observation Name is “RIFS Screen”
- Data Type is “Radio Button”
- Click on the “Managed List” dropdown to find your new list

- Once the three fields in the above screen shot are populated, click “Update” to save your new observation
- The new observation type is now ready to use to add the screening question result to patient profiles and visits

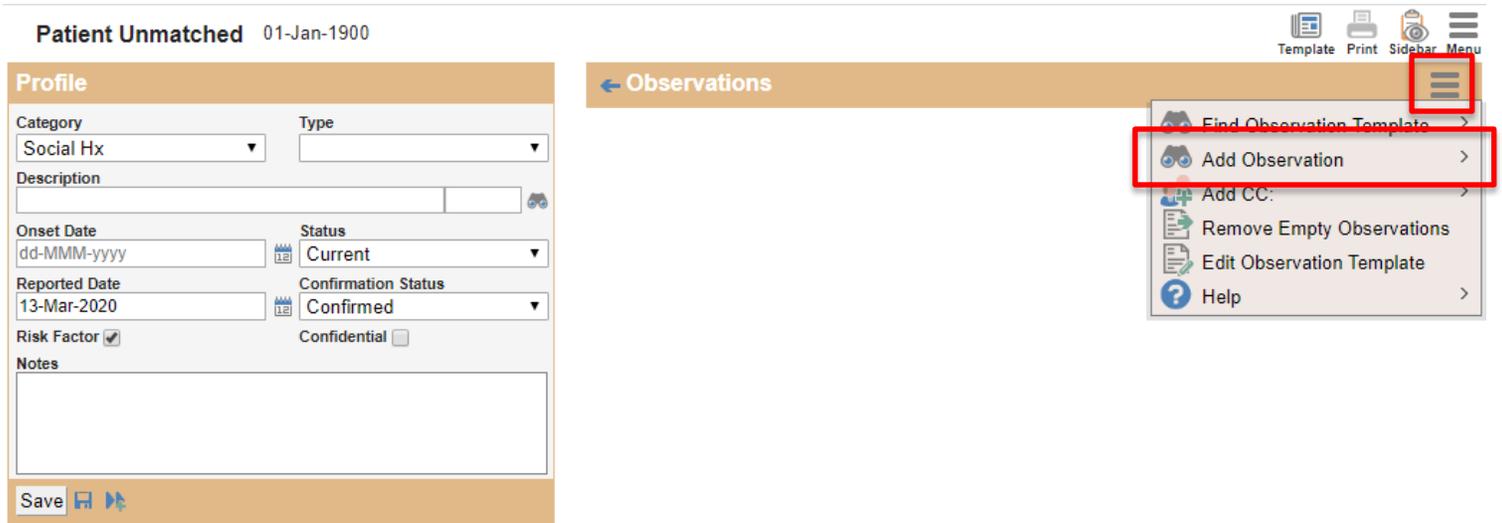
To add a new RIFS screen result to the patient profile:

- Click on the “Menu”  in the “Profile” **Profile** section of the patient’s chart, then click “Social Hx”



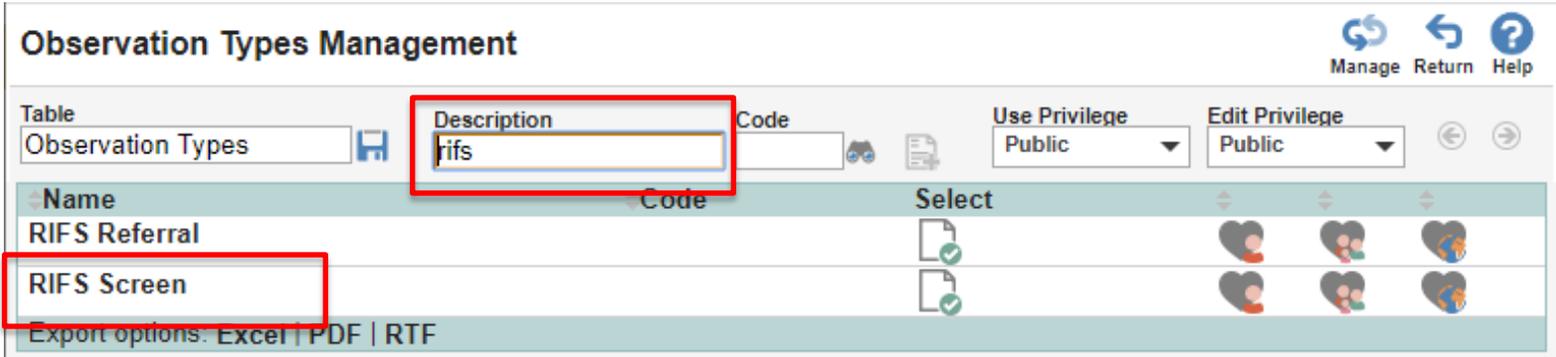
The screenshot shows a patient chart interface with tabs for Labs, Invest, and Consults. The Profile section is active, displaying a dropdown menu with options: Preferences, Care Plan, Medical, Psychiatric, Surgical Hx, Concerns, Developmental, Family Hx, Lifestyle, Obstetric, and Social Hx. The 'Social Hx' option is highlighted with a red box. Below the menu, there are sections for Goals (Active Goals), Allergies, and Meds.

- Click on the “Menu”  in the “Observations” section and then click “Add Observation”

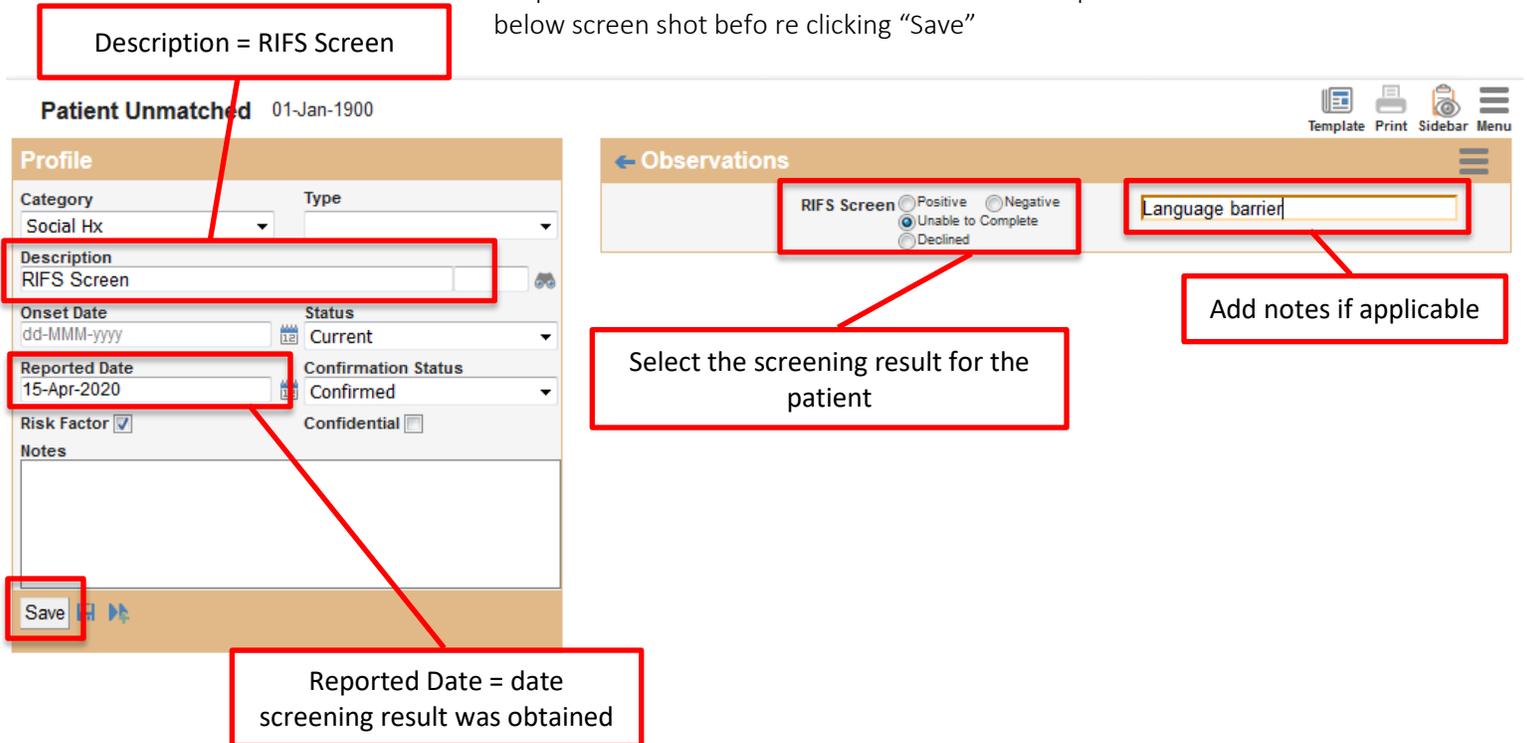


The screenshot shows a patient chart interface for a patient named 'Patient Unmatched' with birth date '01-Jan-1900'. The Observations section is active, displaying a dropdown menu with options: Find Observation Template, Add Observation, Add CC, Remove Empty Observations, Edit Observation Template, and Help. The 'Add Observation' option is highlighted with a red box. To the left, the Profile section is visible, showing fields for Category (Social Hx), Type, Onset Date, Status (Current), Reported Date (13-Mar-2020), Confirmation Status (Confirmed), Risk Factor (checked), and Confidential (unchecked).

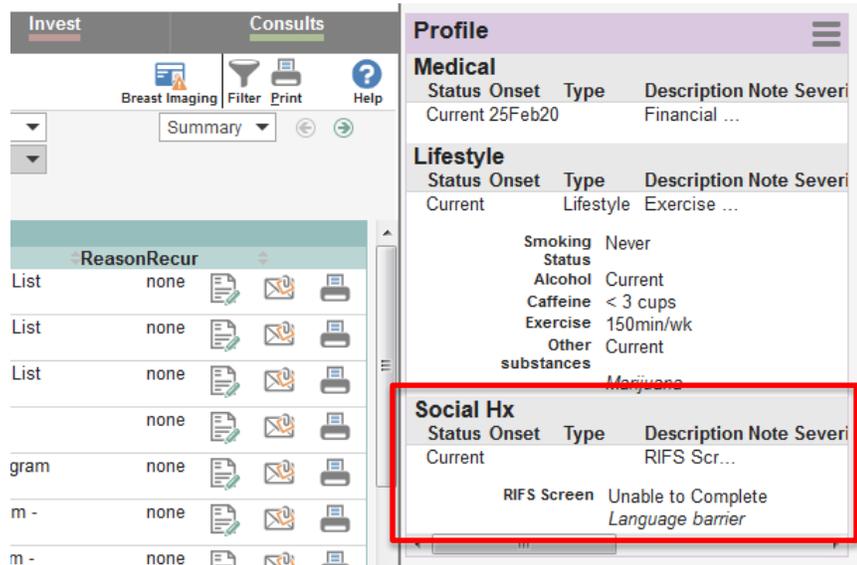
- Type “RIFS” in the Description field and click the binoculars icon or “Enter” on your keyboard.
- Click on the “RIFS Screen” observation type from the list that appears. *Note that you will not have to complete this step if the “RIFS Screen” observation is the only observation type with the word “RIFS” in the title. Instead, the observation type will automatically be selected and added to the profile.*



- Once the “RIFS Screen” observation is added, ensure that the “Description”, “Reported Date” and “RIFS Screen” fields are completed as shown in the below screen shot before clicking “Save”



- The RIFS screening result will now show in the Profile section of the patient's chart



See these useful resources for additional information on configuring observation templates and adding new observation results:

- ACTT Online Resources:
 - [The Power of Observation Types in Med Access](#) – 7 min video
- Med Access EMR Help Files:
 - [Patient Profile](#)
 - [Observation Templates](#)

3. It is recommended that the healthcare provider **record 'Financial Strain' in the patient's Profile under the "Medical" category** 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 patient profile, "Financial Strain" will appear in the patient's chart as shown below.



See these useful resources for additional information on configuring and adding problems to the Profile's Medical category:

- ACTT Online Resources:
 - [Med Access EMR Guide for Patient's Medical Home](#) - see pages 35 and 84
 - [Telus Med Access EMR Guide for Opioid Improvement](#) – see pages 4-8
 - [Using Problem List ICD9 as Favorites in Telus Med Access](#) -2 min video
 - [Managing Master Problem List in Telus Med Access](#) – 9min video
 - [Panel Management Problem Entry in Med Access](#) – 2 min video
- Med Access EMR Help Files:
 - [Observation Templates](#)

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. Accepted: patient accepts the offer for additional resources.
- ii. Declined: patient declines the offer for additional resources.
- iii. Deferred: 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.

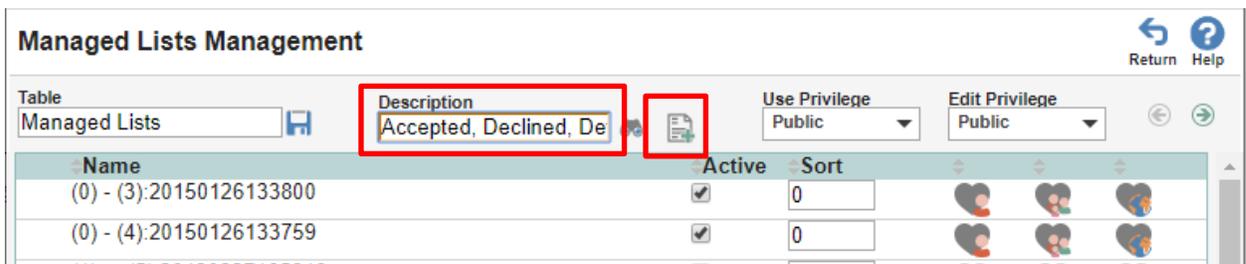
If a patient defers the offer for additional resources, the clinic team can create a reminder to reoffer additional resources the next time the patient calls and/or visits the clinic.

Consider recording the three types of referral outcomes as an observation that can be added to patient profiles.

Start by creating a new “RIFS Referral” observation type:

Note that, in the below example, a single referral outcome observation type is created to track referral outcomes. Your clinic team may also chose to track referral outcomes for different types of referrals offered (e.g. social work, housing, financial aid, etc.). In this case, separate observation types will need to be created for each type of referral tracked.

- Users with administrative access can click “Templates”  to go to the “Template Management” module
- From there click the “Obs” tab 
- In the “Obs” area click “Types”  and then click “Lists” 
- Click “Manage” 
- Type “Accepted, Declined, Deferred” in the “Description” field and click “add” 



- Click “Return” 
- Search for your new list by name and click Edit Managed List 



- Type "Accepted" in the Description field and click "Add" 

Accepted, Declined, Deferred Dropdown Management

  Return Help

Table: Accepted, Declined, Deferred Dropdown

Description: Code: 

Use Privilege: Public Edit Privilege: Public

No results found using the specified criteria.

- Repeat for "Declined" and "Deferred". Also ensure the "Sort" numbers are such that the list sorts in the order shown below

Accepted, Declined, Deferred Dropdown Management

  Return Help

Table: Accepted, Declined, Deferred Dropdown

Description: Code: 

Use Privilege: Public Edit Privilege: Public

Name	Code	Active	Sort			
Accepted	1137598	<input checked="" type="checkbox"/>	0			
Declined	1137599	<input checked="" type="checkbox"/>	1			
Deferred	1137600	<input checked="" type="checkbox"/>	2			

Export options: Excel | PDF | RTF

- Click "Return"  Return

- Click "Return to Observation Types"  **Observation Types**

- Now create a new observation: in the "Obs" tab , click "New"



The screenshot shows the 'Observation Type' configuration interface. Three red boxes highlight the following fields:

- Observation Name:** RIFS Referral
- Data Type:** Radio Button
- Managed List:** Accepted, Declined, Defr...

Three red callout boxes provide instructions:

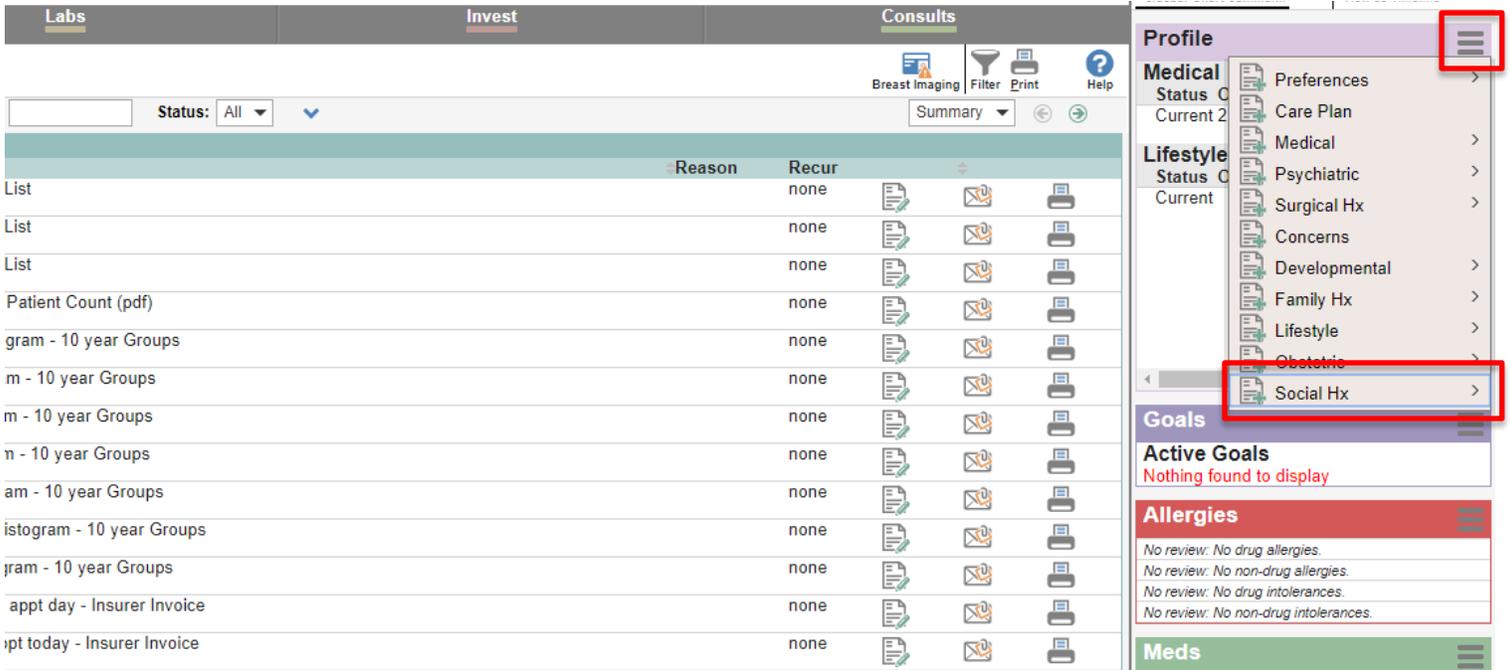
- Observation Name is "RIFS Referral"
- Data Type is "Radio Button"
- Click on the "Managed List" dropdown to find your new list

The 'Update' button is located at the bottom left of the form.

- Once the three fields in the above screen shot are populated, click "Update" to save your new observation
- The new observation type is now ready to use to indicate the referral status

To add a new RIFS referral status to the patient profile:

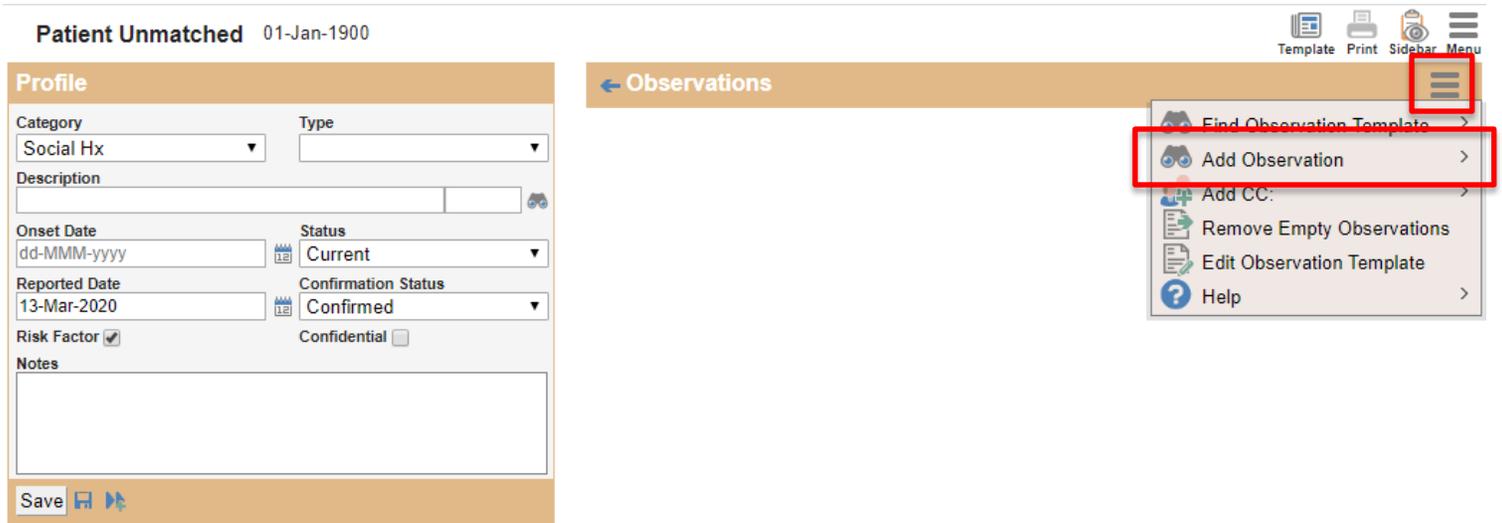
- Click on the “Menu”  in the “Profile” **Profile** section of the patient’s chart, then click “Social Hx”



The screenshot shows a patient chart interface with tabs for Labs, Invest, and Consults. The Profile section is active, displaying a dropdown menu with options: Preferences, Care Plan, Medical, Psychiatric, Surgical Hx, Concerns, Developmental, Family Hx, Lifestyle, Obstetric, and Social Hx. The Social Hx option is highlighted with a red box. Other sections visible include Goals (Active Goals: Nothing found to display), Allergies (No review: No drug allergies, No review: No non-drug allergies, No review: No drug intolerances, No review: No non-drug intolerances), and Meds.

Reason	Recur			
List	none			
List	none			
List	none			
Patient Count (pdf)	none			
gram - 10 year Groups	none			
m - 10 year Groups	none			
m - 10 year Groups	none			
n - 10 year Groups	none			
am - 10 year Groups	none			
istogram - 10 year Groups	none			
gram - 10 year Groups	none			
appt day - Insurer Invoice	none			
opt today - Insurer Invoice	none			

- Click on the “Menu”  in the “Observations” section and then click “Add Observation”



The screenshot shows a patient chart interface for a patient named "Patient Unmatched" (DOB: 01-Jan-1900). The Observations section is active, displaying a dropdown menu with options: Find Observation Template, Add Observation, Add CC, Remove Empty Observations, Edit Observation Template, and Help. The Add Observation option is highlighted with a red box. The Profile section on the left contains fields for Category (Social Hx), Type, Description, Onset Date (dd-MMM-yyyy), Status (Current), Reported Date (13-Mar-2020), Confirmation Status (Confirmed), Risk Factor (checked), and Confidential (unchecked). A Notes field is also present.

- Type “RIFS” in the Description field and click the binoculars icon or “Enter” on your keyboard.
- Click on the “RIFS Referral” observation type from the list that appears.

Observation Types Management

Table: Observation Types

Description: rifs

Name	Code	Select
RIFS Referral		<input checked="" type="checkbox"/>
RIFS Screen		<input checked="" type="checkbox"/>

Export options: Excel | PDF | RTF

- Once the “RIFS Referral” observation is added, ensure that the “Description”, “Reported Date” and “RIFS Referral” fields are completed as shown in the below screen shot before clicking “Save”

Patient Unmatched 01-Jan-1900

Profile

Category: Social Hx

Type: [Dropdown]

Description: RIFS Referral

Onset Date: [Calendar]

Status: Current

Reported Date: 13-Mar-2020

Confirmation Status: Confirmed

Risk Factor:

Confidential:

Notes: [Text Area]

Save

Observations

RIFS Referral: Accepted Declined Deferred

Housing Referral: [Text Field]

Add notes if applicable

Select the referral outcome for the patient

Description = RIFS Referral

Reported Date = date referral was offered

- The RIFS referral result will now show in the Profile section of the patient's

The screenshot shows an EMR interface with a 'Consults' table on the left and a 'Profile' sidebar on the right. The 'Consults' table has columns for 'Reason' and 'Recur', with all entries set to 'none'. The 'Profile' sidebar includes sections for 'Medical', 'Lifestyle', and 'Social Hx'. In the 'Social Hx' section, a table lists 'RIFS Referral' with 'Accepted Housing Referral' as the description, highlighted by a red box.

Status	Onset	Type	Description	N
Current	25Feb20		Financial ...	

Status	Onset	Type	Description	N
Current		Lifestyle	Exercise ...	
		Smoking Status	Never	
		Alcohol	Current	
		Caffeine	< 3 cups	
		Exercise	150min/wk	
		Other substances	Current Marijuana	

Status	Onset	Type	Description	N
Current			RIFS Ref...	
		RIFS Referral	Accepted Housing Referral	
Current			RIFS Ser...	

chart

See these useful resources for additional information on configuring observation templates and adding new observation results:

- ACTT Online Resources:
 - [The Power of Observation Types in Med Access](#) – 7 min video
- Med Access EMR Help Files:
 - [Patient Profile](#)
 - [Observation Templates](#)

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. Positive: follow-up at every patient encounter until the patient no longer screens positive, or as appropriate given a specific patient's context
- ii. Negative: follow-up every 18 months, or as appropriate given a specific patient's context
- iii. Unable To Complete: 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. Declined: 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 "History of Problems" medical history band.

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 is an example search.

Note that it is important to check off "not" when adding the search criteria identifying patients who have been offered the screening question in the last six months. This will ensure that only patients who have not been offered the screening question in the last six months are flagged for screening (in the screen shot below, the "Observation" section indicates that patients with a RIFS Screen observation in the "Social History" section of their Profile with a date in the last six months will be excluded from the search). It is also important to include all active patient statuses in the search (see the "Status" line in the Demographics section of the below search). This will ensure that all active patients are included in the search. Lastly, it is important to include that the Status of the RIFS Financial Strain diagnosis is "Current" in the Profile section of the search. This ensures that only patients currently experiencing financial strain are flagged for follow-up.

Criteria		Unmask
Template: RIFS Positive Due for		
Demographics		
Status	Active	
Primary Provider	Topps, David A.	
Age Range	18 to 200	
Profile		
Category	Medical	
Status	Current	
Diagnosis	RIFS	Financia Starts
Visits		
Task		
Observation		
Category	Social Hx	<input checked="" type="checkbox"/> not
Observation		
(last) Exact	RIFS Screen	
Date	17-Sep-2019 to 17-Mar-2020	
Medications		
Allergy		
Goals		
Billing		
Appointment		
Date	17-Mar-2020 to 17-Mar-2020	

See these useful resources for additional information on creating and managing searches, goals and CDS triggers:

- ACTT Online Resources:
 - [Building Searches in Med Access](#) – 13 min video
 - [Creating CDS Trigger: Tobacco Use in Med Access](#) – 7 min video
 - [Report Creation: Search for Diabetic Patients in Med Access](#) – 2 min video
 - [Med Access EMR - Using Clinical Decision Support Triggers](#) – 20 min video
 - [Med Access EMR - Practice Management Reporting and Tasking](#) – 15 min video
 - [Practice Management Reporting in Med Access](#) – 9 min video
 - Med Access EMR Help Files:
 - [Reports](#)
 - [Goals](#)
 - [Clinical Decision Support \(CDS\) Templates](#)
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 Med Access EMR Help Files for additional information on creating and managing individual patient reminders:
- [Goals](#)
 - [My Tasks](#)

Outreach Care

Consider using the following options to flag patients who have 'Financial Strain' in their "History of Problems" medical history band 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 "History of Problems" medical history band and have not visited the clinic in more than six months.

Criteria		Unmask	
Template: RIFS Positive Due for			
Demographics			
Status	Active		
Primary Provider	Topps, David A.		
Age Range	18 to 200		
Profile			
Category	Medical		
Status	Current		
Diagnosis	RIFS	Financia	Starts
Visits			
Task			
Observation			
Category	Social Hx		
Observation	(last) Exact RIFS Screen		
Date	24-Oct-2019 to 24-Apr-2020		
Medications			
Allergy			
Goals			
Billing			
Appointment			
Date	Back None	Ahead	None

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

- [Goals](#)
- [My 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 the patient's 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

Criteria		Unmask	
Template:	RIFS Positive Patients	[Icons]	
Demographics			
Status	Active		
Primary Provider	Topps, David A.		
Age Range	18	to	200
Profile			
Category	Medical		
Status	Current		
Diagnosis	RIFS	Financia	Starts
Visits			
Task			
Observation			
Medications			
Allergy			
Goals			
Billing			
Appointment			

- 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 the Social Hx category of the patient Profile. If your clinic team records the screening result in a different EMR field, please include that field in the search instead.

Criteria		Unmask
Template: RIFS # of Pts Screened		
Demographics		
Status	Active	
Primary Provider	Topps, David A.	
Age Range	18 to 200	
Profile		
Visits		
Task		
Observation		
Category	Social Hx	
Observation	(last) Exact RIFS Screen	
Date	01-Jan-1900	
Medications		
Allergy		
Goals		
Billing		
Appointment		

- Number of patients experiencing financial strain who have been offered a RIFS referral
Note that the below example is for clinics recording the referral outcome in the Profile under the "Social Hx" category. If your clinic team records the referral outcome in a different EMR field, please include that field in the search instead.

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.

Criteria Unmask	
Template: RIFS Positive Pts with [Icons]	
Demographics ✖	
Status +	Active ▼
Primary Provider	Topps, David A. ▼
Age Range	18 to 200
Profile + ✖ [] not	
Category +	Medical ▼
Status	Current ▼
Diagnosis +	RIFS Financia [] Starts' ▼
Visits +	
Task +	
Observation + ✖ [] not	
Category	Social Hx ▼
Observation +	(last) Exact ▼ RIFS Referral [] [] ▼
Date	01-Jan-1900 []
Medications +	
Allergy +	
Goals +	
Billing +	
Appointment +	

- Number of active patients who are experiencing financial strain and have accepted a RIFS referral
Note that the below example is for clinics recording the referral outcome in the Profile under the “Social Hx” category. If your clinic team records the referral outcome in a different EMR field, please include that field in the search instead.

Criteria		Unmask
Template:	RIFS Social Work Ref	
Demographics		
Status	Active	
Primary Provider	Topps, David A.	
Age Range	18 to 200	
Profile		
Category	Medical	
Status	Current	
Diagnosis	RIFS Financia	Starts
Visits		
Task		
Observation		
Category	Social Hx	
Observation	(last) Exact RIFS Social Work Refer	Contains (Accepted as String)
Date	01-Jan-1900	
Medications		
Allergy		
Goals		
Billing		
Appointment		

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](#).