NW OpenNotes Consortium

AMDIS
Physician Computer Connection Symposium
June 25, 2015

Homer Chin MD
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What is OpenNotes?

- Patients invited to review their providers’ visit notes through secure patient portals
- Each patient notified automatically via e-mail message when a note has been signed...and reminded to review it before their next scheduled visit
- “OpenNotes” is an initiative to give patient’s access to their EHR notes via the internet. Not a specific vendor product or software.
- Started with a research and demonstration project in 2010, involving more than 100 PCPs and 20,000 patients in Boston (BIDMC), rural Pennsylvania (Geisinger), and the Seattle inner city (Harborview)

Supported primarily by the Robert Wood Johnson Foundation

Adapted from a presentation by: Tom Delbanco, MD, MACP and Jan Walker, RN, MBA
Harvard Medical School and Beth Israel Deaconess Medical Center
Among patients with notes (visits):

- 82% of patients opened at least one of their notes
- 1-8% of patients across the 3 sites reported that the notes caused confusion, worry, or offense
- 20-42% shared notes with others
- 70 – 80% reported taking better care, better understanding, better prepared for visits, felt more in control, better at taking meds as prescribed.
### Principal Concerns of 105 Participating PCPs

**Impact on workflow**

<table>
<thead>
<tr>
<th>Expectations (%)</th>
<th>Post-intervention (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visits significantly longer</td>
<td>24</td>
</tr>
<tr>
<td>More time addressing patient questions outside of visits</td>
<td>42</td>
</tr>
<tr>
<td>More time writing/editing/dictating notes</td>
<td>39</td>
</tr>
</tbody>
</table>

...and, compared to the year preceding the intervention, the volume of electronic messages from patients did not change

Adapted from a presentation by: Tom Delbanco, MD, MACP and Jan Walker, RN, MBA
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3 Overall Questions

- Does OpenNotes help patients become more engaged in their care? **YES**
- Is OpenNotes the straw that breaks the doctor’s back? **NO**
- After living with this transparency, do patients and doctors want to continue? **YES, virtually 100%**
NW OpenNotes Consortium

June 2013: WCDB convenes meeting of Oregon’s health systems, consumer groups, and policy makers

September 2013: Agreement to form a consortium of health systems to collaborate together to implement OpenNotes as a community

Monthly ➔ Quarterly: Meetings involving major health systems
NW Consortium Clinical Participants

VA

U.S. Department of Veterans Affairs
Veterans Health Administration

Kaiser Permanente®

The Portland Clinic
We specialize in you.

The Vancouver Clinic

Oregon Health & Science University

OCHIN

PeaceHealth

Providence Medical Group

Samaritan Health Services

Legacy Health

Salem Health
Early Adopters

- Portland VA
  - All Veterans, entire EHR since Jan 2013 (Pilot project at Portland VA since 2001)

- Kaiser NW ~1100 MDs
  - 500K patients on April 8, 2014

- OCHIN
  - 82 member organizations in 19 states, 350 clinic locations, over 4000 doctors
  - Doctors can opt in, April 2014

- OHSU
  - All family practice and internal medicine patients (first clinic in May 2014)

- Portland Clinic ~105 MDs
  - Clinic wide adoption July 2014

- Vancouver Clinic ~ 220 MDs
  - Clinic wide adoption July 2014
Right Behind

- **PeaceHealth**: 3 regions, 10 hospitals, ~800 MDs
  - Vancouver region live in October 2014
  - Rolled out to **all sites in 3 regions** in March 2015

- **Legacy Health System**: 6 hospitals, ~2600 MDs
  - All of primary care and medical specialties August 2015

- **Providence Oregon**: 8 hospitals, 90 clinics
  - Pilot implementation June 2015

- **Salem Health**: 2 hospitals
  - 1 Clinic pilot spring 2015

- **Reaching out to other health systems . . .**
  - Samaritan Health Services has implemented parts of OpenNotes (radiology reports)
  - Adventist joining the regular monthly meetings
  - St. Alphonsus, St. Charles, Planned Parenthood, others...
Toolkit: www.myopennotes.org

Why implement open notes at your institution? +

How will open notes work for your institution? +

What do open notes look like at other sites? +

Introducing the OpenNotes Toolkit: Tell us what you think!

What is OpenNotes?
Sharing clinicians' notes with patients—a simple idea for better health  More >

Why it Works
Patients become more actively involved in their care  More >

Toolkit
Get started reading, writing and sharing notes  More >

Find Participating Sites >
Beyond the major health systems: Oregon EHR Vendors

EHR Vendor Systems purchased by Oregon Eligible Professionals (top 10)
N=4,912 out of 6,007 total

- Epic*: 45%
- GE Healthcare: 19%
- NextGen: 10%
- Allscripts: 9%
- athenahealth*: 3%
- Cerner: 1%
- eClinicalWorks LLC*: 4%
- McKesson*: 2%
- Medical Informatics Engineering: 1%
- Greenway*: 6%

* Denotes vendor also has 2014 CEHRT version in use

Count of unique providers that received a payment in either the Medicare or Medicaid EHR Incentive Programs from 2011 – August 2014.
<table>
<thead>
<tr>
<th>Vendor</th>
<th>Portal Name</th>
<th>OpenNotes Functionality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenway: Vitera Intergy (Sage) MediaDent Medical Manager PrimeSUITE SuccessEHS</td>
<td>Greenway Patient Portal Medfusion Patient Portal Online Care Center Sage Intergy Practice Portal Vitera Patient Portal</td>
<td>Building a new portal, does not have functionality and they are trying to migrate current clients to this portal for all 3 products. They could put ON functionality on their &quot;roadmap&quot;.</td>
</tr>
<tr>
<td>GE Healthcare Kryptiq/Surescripts</td>
<td>Centricity Patient Portal Centricity Patient Online</td>
<td>Kryptiq/Surescripts has functionality currently and supports multiple EMRs, but mainly GE Centricity (former medicalologic), and Vitera. Uses direct messaging</td>
</tr>
<tr>
<td>Athena</td>
<td>AthenaCommunicator</td>
<td>Although rated #1 by KLAS, Athena does not currently have capability to support OpenNotes.</td>
</tr>
<tr>
<td>eClinicalWorks</td>
<td>eClinicalWorks Patient Portal Healow</td>
<td>Functionality exists. eCW note has &quot;treatment&quot; and &quot;clinical&quot; sections. Treatment is included in what patient can see, but Clinical is not.</td>
</tr>
<tr>
<td>Nextgen</td>
<td>NextGen Patient Portal</td>
<td>Not there but they are interested in doing it, and believe that it won't take much work. They can do email ticklers.</td>
</tr>
<tr>
<td>Allscripts</td>
<td>FollowMyHealth</td>
<td>They say that they have most of the functionality already built in, and some of their providers may already be using it. They are not sure about ability to suppress a specific note. Will need to meet with developer team.</td>
</tr>
<tr>
<td>Cerner</td>
<td>Patient Portal</td>
<td>Can be configured to support OpenNotes</td>
</tr>
<tr>
<td>Vendor agnostic</td>
<td>InteliChart Access My Records Influence Health (former Medseek) Relay Health</td>
<td>Intelichart portal connects to many different EMR vendors and can be rebranded (Nextgen, etc.) Looks like it could do it, has email/text notification when new information but doesn’t take them directly to new item once logged into portal.</td>
</tr>
</tbody>
</table>
Key Takeaways

- General agreement that good evidence for significant benefits
- Impact to physician well-being may actually be positive
  - MD email traffic flat
  - ?? Shorter visits ??
  - Better patient engagement
- EHR/patient portal vendor needs to have functionality
- Physician leadership and organizational change management
- “Co-opetition” helps to drive pace of change
  - Supporting and pushing/challenging each other
- ONC/CMS meaningful use is an enabler for this; one of the tangible benefits of widespread EHR adoption.
- Organizational Leadership is most important factor
- Consumer engagement and advocacy
OpenNotes
Enhancing the Partnership Relationship With Patients Across a Community

John Santa MD MPH

2015 AMDIS Annual Meeting
Ojai, California  June 25, 2015
I am a general internist, retired from clinical practice but involved in a variety of policy and administrative health projects. I currently have no financial relationships with any organization.

I previously worked for Consumer Reports.

I am biased in favor of OpenNotes by my personal experience as a caregiver.
Goals

- Share information with about the impact of OpenNotes on patients
- Give you a sense of the national OpenNotes movement
- Have you join the *OpenNotes* movement and consider helping your community join the *OpenNotes* movement
Healthcare in a land called PeoplePower: nothing about me without me

Tom Delbanco MD\(^1\), Donald M. Berwick MD\(^2\), Jo Ivey Boufford MD\(^3\), S. Edgman-Levitan PA\(^4\), Günter Ollenschläger MD\(^5\), Diane Plampring PhD\(^6\) and Richard G. Rockefeller MD\(^7\)

\(^1\)Harvard Medical School, Beth Israel Deaconess Medical Center, Boston, USA; \(^2\)Institute for Healthcare Improvement, Boston, USA; \(^3\)Robert F. Wagner School of Public Service, New York University, New York, USA; \(^4\)The Picker Institute, Boston, USA; \(^5\)Agency for Quality in Medicine, Cologne, Germany; \(^6\)Tower Hamlets Community Healthcare NHS Trust, Mile End Hospital, London, UK; \(^7\)Health Commons Institute, Falmouth, ME, US

Abstract

In a 5-day retreat at a Salzburg Seminar attended by 64 individuals from 29 countries, teams of health professionals, patient advocates, artists, reporters and social scientists adopted the guiding principle of ‘nothing about me without me’ and created the country of PeoplePower. Designed to shift health care from ‘biomedicine’ to ‘infomedicine’, patients and health workers throughout PeoplePower join in informed, shared decision-making and governance. Drawing, where possible, on computer-based guidance and communication technologies, patients and clinicians contribute actively to the patient record, transcripts of clinical encounters are shared, and patient education occurs primarily in the home, school...
About OpenNotes

- Began in 2010 with 105 volunteer primary care doctors and 19,000 of their patients in Boston, rural Pennsylvania, and the Seattle inner city in Washington state.

- The doctors invited the patients to read their notes via electronic portals

- Now, 30 months after we published our findings, more than 5 million patients in the USA, thousands of doctors, nurses, therapists, trainees, physician assistants, case managers, and other clinicians are sharing notes

What’s going on?
Two Principal Patient Questions

- Would open notes help patients become more engaged in their care?
- After 1 year, would patients want to continue?
Patients were thrilled…

- 82% of patients opened at least one of their notes
- Few patients said reading notes made them worried (5-8%), confused (2-8%), or offended (1-2%)

Privacy vs Confidentiality

20-42% shared notes with others
Patients reported important clinical benefits

- 77-87% felt more *in control* of their care
- 77-85% reported *better understanding* of their health and medical conditions
- 76-84% reported *better remembering* the plan for their care
- 69-80% felt *better prepared* for visits
...and 60-78% of those taking medications reported “doing better with taking my medications as prescribed”
99% of patients wanted to continue to be able to see their visit notes online.

85% of patients said availability of open notes would affect their future choice of providers.
“In light of these results, why not make this the standard of care? Such practice does not depend on technology, and for those who have electronic records, any challenges posed by technology can be readily overcome if the will is there.”

Guest and Quincy. Consumers Gaining Ground in Health Care, JAMA, 2013

“Despite the challenges, we anticipate that open electronic records will become the standard of care, accompanied by electronic tools that explain medical terminology and abbreviations, translate notes into different languages, and adjust for health-literacy levels.”

More than 5 million patients have easy access to their clinicians’ notes thanks to OpenNotes.
What next?

A national movement......
Voluntary adoption of OpenNotes and open notes
Creating the electronic infrastructure
Understanding the business issues
Understanding clinician issues
Changing the culture of consumer engagement
What you can do to help

- Talk about it with colleagues, friends, patients
- Try it yourself—as a patient, as a caregiver
- Identify concerns, describe them, quantify them if possible
- Join the movement. Become a champion for open notes
- Spread the movement.
  - Help us grow the NW Consortium
  - Help us replicate the NW consortium in other regions you have ties to
NORTHWEST NETWORK
- Ketchikan, AK
- Bellingham, WA
- Friday Harbor, WA
- Sedro-Woolley, WA

COLUMBIA NETWORK
- Longview, WA
- Vancouver, WA

OREGON WEST NETWORK
- Eugene, OR
- Springfield, OR
- Cottage Grove, OR
- Florence, OR
Open Notes at Kaiser Permanente Northwest

Michael McNamara, MD
The KP northwest journey

- June 2013 - Portland Consortium Participants
  - All Major Portland HealthCare Organizations
  - Author of Open Notes Study
- Summer 2013: Presentation to Chiefs and Board of Directors
- September 2013: Patient Advisory Council
- November 2013: Primary Care Leadership Meeting
  - Sentinel moment for organization
- December 2013: Operational Leadership – “All In”
Communicate! Communicate! Communicate! (Nobody was surprised by OpenNotes)

**Internal: NWP**
- Chiefs, physicians, executives via email and department presentations

**Internal: Health Plan**
- Manager presentations, emails, huddles, FAQs, talking points, Newswire

**External**
- Press releases, brokers, direct mail, social media, AVS SmartText

Adapted from Unitan, Edlund, Siedel, Kaiser Permanente Northwest, May 2, 2014
What Did We Do?

- **April 8, 2014:**
  - Region wide implementation for all **Office Visits** and Scheduled Telephone Encounters (TAV)
- **Exclude:**
  - Teens (13-17)
  - Mental Health, Addiction Medicine, Pain Medicine and Occupational Medicine

Sample Note:

I spoke to James today about his desire to quit smoking. He would like to quit in the next 30 days with the help of bupropion (Zyban) and counseling. I reviewed the contraindications for bupropion and the patient acknowledged. The patient is not interested in quitting without the help of the drug therapy.
What Did We Hear?

**Changing Clinician Behavior**
- Modify information about prognosis
- Limiting the differential diagnosis
- Concern about internal discussion for candidacy for liver transplant
- Expect that chronically delinquent clinician may close notes in more timely fashion

**Sensitive Issues/Patient Contact**
- Patient upset by terms used by clinician: “Obese”, “Fixated on surgery”, “Substance abuse” for patient using marijuana
- Change to History
- Recalled relevant family Hx after appointment
- Asked to modify history recorded by clinician

**Medical Record Errors/Discrepancies**
- Medication error corrected; Listed as not taking med when they actually were
- Correction to templated note
- Exam findings not accurate
- “Discussed HIV” when that didn’t happen
- PCP asked to interpret specialist note
What Did We Hear?

NW Pre-Survey of Physician Chiefs

- Prior to implementation nearly all had heard concerns from colleagues
- Six weeks after go-live, those that responded believed that it has been a non-event.
- Caveat: “The absence of evidence does not mean there is evidence of absence”

Option To Hide Notes

- Option exists to hide notes at clinician’s discretion
- Critical to adoption

NW Provider Note Hiding Data

- Number of Hidden Notes by Provider
- Hidden Notes Rate/1,000 Encounters
NW Patient Evaluation

Evaluation of Open Notes conducted by HITTA (Health IT Transformation & Analytics)

- Patient Usage
  - Change in secure email volume
  - Viewing trends - 30% of patients viewed notes in Jan 2015
- Patient satisfaction survey similar to original study
- Video storytelling project to capture value from provider/patient perspective

Patient Usage

<table>
<thead>
<tr>
<th>Secure Message and PVI Viewing on kp.org</th>
</tr>
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<tbody>
<tr>
<td>Views per 1,000 Active kp.org Members</td>
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<tr>
<td>0</td>
</tr>
</tbody>
</table>

Note Viewing Frequency

- 11+ times: 1%
- 5-10 times: 1%
- 2-5 times: 27%
- 1 time: 72%

Patient satisfaction survey similar to original study
Video storytelling project to capture value from provider/patient perspective
Patient Reported Benefits of OpenNotes

“I am more likely to take my medications as prescribed.”
Somewhat Agree: 20%, Strongly Agree: 80%

“My overall opinion of my doctor has improved.”
Somewhat Agree: 20%, Strongly Agree: 80%

“I think my relationship with my doctor will improve.”
Somewhat Agree: 20%, Strongly Agree: 80%

“I feel more in control of my own health care.”
Somewhat Agree: 20%, Strongly Agree: 80%

“I know what to do to take better care of myself.”
Somewhat Agree: 20%, Strongly Agree: 80%

“I understand my health conditions better.”
Somewhat Agree: 20%, Strongly Agree: 80%

% Agreeing from OpenNotes® Study

- “I am more likely to take my medications as prescribed.” 59% (60-78%)
- “My overall opinion of my doctor has improved.” 70% (77-87%)
- “I think my relationship with my doctor will improve.” 74% (77-87%)
- “I feel more in control of my own health care.” 78% (77-85%)
- “I know what to do to take better care of myself.” 78% (70-72%)
- “I understand my health conditions better.” 80% (77-85%)
Members indicated that they receive value from reading the notes:

- 93% would like to continue to receive the email reminder (tickler)
- 60% said notes would be a ‘very important’ factor in any future decisions they make about a health plan
- Even 40% who did not read notes said it was very important
NOTE ACCURACY, COMPREHENSION & IMPORTANCE

Ease of Understanding Notes

- NW
- 91%

Reported Accuracy of Notes

- NW
- 99%

Importance of Notes in Future Health Decisions

Members that did not log on
- Somewhat Important
- 79%

Members that logged on
- Somewhat Important
- 92%
“Having the KP.org notification that I can view my doctor’s notes on myself reminded me to have my labs drawn. It is a new schedule for lab draws that I had forgotten. I have a serious condition and this will help me do what my doctor wants me to do.”

“Reviewing the notes I see why I need to lose weight. I cut the notes out of KP.org and posted in my kitchen. I DO NOT WANT TO BE A DIABETIC and this is in my face. It feels like my doctor really cares about my health, I never knew that.”

“For me, the chart notes are like Paul Harvey states 'THE REST OF THE STORY'"

“I told my doctor I ran every day and now I think he knows I REALLY DON'T. This may hold me more accountable to myself and my doctor“

“I wanted my doctor to treat my mind, body and spirit. I am convinced that is happening based on reading the notes.”

“The total picture of my health will help me heal”
Disclaimers for OpenNotes

Several clinicians felt the need to put disclaimers in their notes.

The disclaimers range from the straightforward to the lengthy and obtuse.

In response, we agreed to enter simple disclaimer that is visible on all patients notes:
- Notes primary purpose is communication and coordination of care.
- Contact author for questions or concerns.
Questions??
OpenNotes

Amy Chaumeton, MD
CMIO, Legacy Health
The Legacy Health Journey

- June 2013 – Portland OpenNotes Consortium

- April 2014 – Legacy Health pilot of OpenNotes in Primary Care, Pediatrics, Medical and Surgical Specialties

- April 2015 – Clinical VP decision to roll out Big Bang all ambulatory provider notes August 2015
The 6 stages of human response to change
Legacy Health’s application of change model

Kotter’s 8 steps of change

1. Create sense of urgency
2. Build the guiding coalition
3. Develop a vision and strategy
4. Communicate the change vision
5. Empowering broad-based action
6. Generate short term wins
7. Consolidating gains and producing more change
8. Anchoring new approaches in the culture

Consortium organization
Legacy Health’s application of change model

1. Create sense of urgency
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Kotter’s 8 steps of change

Clinical VP of Primary Care and CMIO
Legacy Health’s application of change model

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Planned for a small pilot with a follow-up survey.
Legacy Health’s application of change model

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Kotter’s 8 steps of change

Pilot and survey results that duplicated other results
Legacy Health’s application of change model

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Engaged all Clinical VPs—Medical and Surgical Specialties and Pediatrics
Legacy Health’s application of change model

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Kotter’s 8 steps of change

Short term wins included showing results of our survey and local consortium successes
Legacy Health’s application of change model

Kotter’s 8 steps of change

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Decision for Big Bang rollout
Legacy Health’s application of change model

August 2015—all ambulatory will be live on OpenNotes!

Kotter’s 8 steps of change

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Notes are defaulted to sharing
Learn more about your health with OpenNotes

Use MyHealth to read the notes about your care

There is a great new way to understand your health better. It is called OpenNotes, and it allows you to read the notes that your provider made about your visit.

With MyHealth, you can also see test results, the findings of an exam (such as your blood pressure or how your lungs sounded), and a plan for treatment.

OpenNotes is available through MyHealth, the secure, online tool that connects you to your complete health information from the day you enter your home at any time, day or night.

Log in to sign up for MyHealth at
www.legacyhealth.org/myhealth.

Legacy Health patient handouts

6/28/2015 LEGACY HEALTH 55

Legacy Health patient handouts

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Now on MyHealth
Read the notes from your visit

Go to MyHealth to get OpenNotes and better understand your care and your health.

OpenNotes is a new part of MyHealth that allows you to look at the notes that your medical team made about your visit.

You can also view test results and other health information through MyHealth.

MyHealth is a secure, online tool that connects you to your complete health information at any time, day or night.

You can sign up for MyHealth at
www.legacyhealth.org/myhealth.

6/28/2015
Legacy Health notification

New notification from MyHealth!

Hello Ripley Amb-Poc,

You have a new after visit summary in MyHealth! Please sign in to read your visit summary:

Sign In to MyHealth

Thanks for using MyHealth,

Legacy Health
Legacy Health AVS with progress note
Contact information

- Homer Chin: chinh@ohsu.edu
- John Santa: santa1177@comcast.net
- Mike McNamara: Michael.Mcnamara@kp.org
- Amy Chaumeton: AChaumet@LHS.ORG