

Implementing a Website to Help Chronic Disease Patients Prepare their Primary Care Consultation

Assemblée annuelle

Département de médecine de famille et de médecine d'urgence Université de Montréal 11-12 mai 2017

Interdisciplinary Study Team

- Marie-Thérèse Lussier MD, MSc, U. Montréal
- Claude Richard PhD, CISSS Laval
- Nathalie Boivin PhD, U. Moncton
- Élie Boustani MD, U. Montreal
- Catherine Hudon MD, PhD, U. Sherbrooke
- Marie-Josée Levert PhD, U. Montreal
- Christine Thoer PhD, U. du Québec à Montreal
- Jalila Jbilou MD, PhD, U. Moncton
- Fatoumata Diallo PhD, CISSS Laval
- Alain Gemme, Patient-partner
- Collectif Capsana

Study Funding

 Programme Santé des populations (2012-14)



- Dr Sadock Besrour Chair (2014)
- Réseau-1 Québec (2014-15)
- CIHR (2015-16)
- Fondation Cité de la santé (2016-17)







Background

- Website interventions directed at patients can increase patient participation in healthcare encounters
- Easy, accessible
- As effective as face-to-face interventions
 - less resource intensive
- Computer literacy
 - More than 70% of individuals (age of 55-64) access the Internet

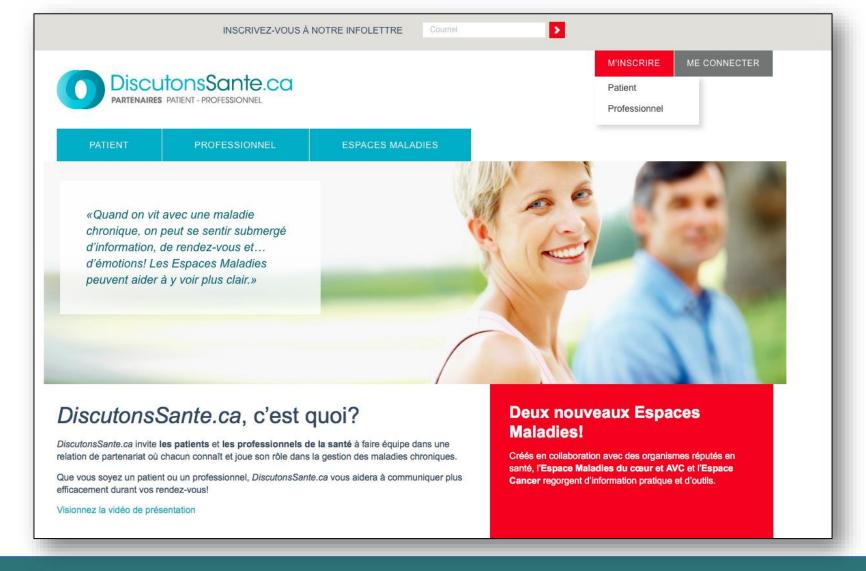
Background

- Let's Discuss Health-Discutons Santé (DS) is
 - a unique French language free PHR
 - intended to activate chronic disease patients
 - help them prepare for healthcare encounters
- It was modeled after the THT website that showed significant changes in
 - Communication patterns
 - Post encounter recall of information
 - Proportion of patients reaching clinical targets

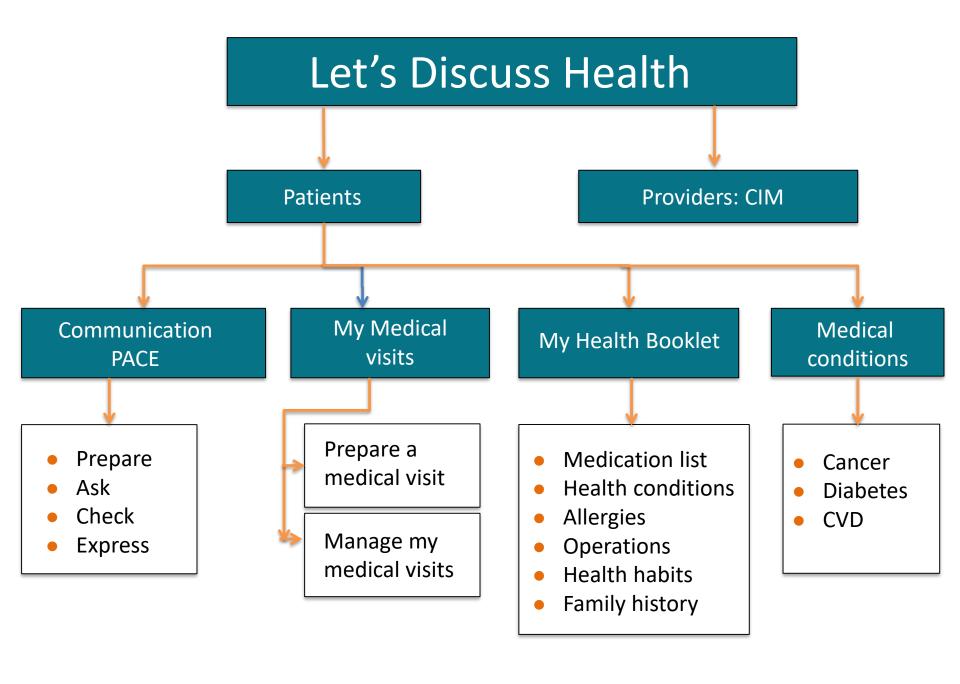
Let's Discuss Health website

...to build upon...

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A web site that encourages and promotes collaboration between patients and healthcare providers



Web site Format

- Video clips
- Audio clips
- Stand-alone texts and narrated texts
 - Grade 9 level
- Step-by-step medical visit preparation
- Note taking, priority setting
- Generates summary of visit preparation
- 30-60 minutes (initially)

Study Objectives

Study the adoption and implementation of Let's Discuss Health in primary care clinics

Assess

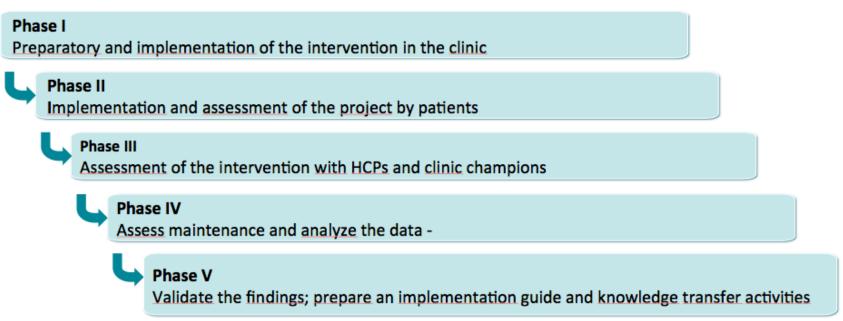
- user experience of this website
- its impact on healthcare encounters and patient activation, from the perspective of patients and HCP

Methods

- **Re-Aim** Framework guided data collection and analysis
- Design : Case study using mixted method approach
- Setting: 6 PC clinics in 2 French speaking provinces (Canada)
- Participants: 10 HCP and 50 adult patients per site
- **Intervention**: Introduction of *LDS* in clinical routines
- **Measures**: Patient and HCP questionnaires and 10 focus groups
- Outcome variables :
 - Uptake of LDS
 - Perception of its usefulness and its impact on the encounter

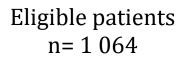
Methods

Study conduct



- ✓ Quantitative analyses of questionnaire data were conducted using SPSS Statistical Package
- ✓ Qualitative analyses proceeded with QDA Minor, a coding software for thematic analyses

Results



Patients not reached n= 116

Patients invited to participate n= 948

Patients who did not participate n= 792

Patients who participated n= 156

16.5%

Frequency of reasons of non participation (n=792)

Reason	N	%
Lack of interest for the project	201	25
Limited access to IT (computer or Internet)	106	13%
Limites skills in the use of a computer or Internet	36	5%
Project documents not received	36	5%
No show or late for medical appointment	33	4%
Lack of time	30	4%
Language barriers	24	3%
Other reason	10	1%
No reason given	316	40%

Providers (N=51)	N (%)
Sex	
Male	8 (19%)
Female	35 (81%)
Age 40 years or less 41-60 years 61 years or more Unknown	29 (67%) 13 (30%) 1 (3%) 8
Type of provider Family Physicians	27 (63%)
FM Residents	13 (30%)
Nurse/Nurse Practitioner	3 (7%)
Unknown	8

Patients (N=156)	N (%)
Male	69 (51%)
Female	73 (49%)
Age 40 years or less 41-60 years 61-80 years Unknown	23 (16%) 68 (48%) 51 (36%) 14
Level of education High school or less College Technical training University Unknown	44 (31%) 33 (23%) 15 (11%) 49 (35%) 15
Annual Family Revenues	
Less than 40 000\$ 40 000\$- 79 999\$ More than 80 000\$ Unknown	46 (35%) 62 (48%) 22 (17%) 26

Adoption and Implementation Patient Participation

- Mean Proportion (16.5%)
 - 15 to 20% of invited patients completed study

- Varied according to
 - Site
 - Presence of research staff onsite
 - Method of invitation (letter vs phone)

Let's Discuss Health User experience and impact on visit

Patients' perspective Mean % agreement		Providers' perspective Mean % agreement	
Web site characteristics Words difficult to understand Ease of navigation	28% 91%	Pt is well prepared	87%
PACE module Intend to apply PACE	96%	Clear reason for vist	87%
My visits module Is practical Summary is complete Summary is useful Intend to use in future visits	93% 92% 90% 88%	Easy to integrate Info. accurate Info. Complete Helped organize visit Provided new info	80% 80% 67% 56% 33%
My Health Booklet module Is useful to manage my health Is complete Helps to remember info	86% 86% 94%	Clear Expression of concerns	89%

Patient and provider post-visit questionnaire data

Let's Discuss Health impact on patient activation Mean % Agreement

Actively participated in the encounter	93%
■ Better follow-up of my health conditions	91%
I discussed all items on my Summary	99%
Felt better understood by my HCP	86%
I asked my Questions	94%
I checked when I did not understand	
I feel motivated to prepare visits	
I intend to revisit the website	91%

Patient post-visit questionnaire data

Patient Activation Measure PAM scores

Level of activation	N (%)
1	2 (3%)
2	5 (4%)
3	41 (30%)
4	87 (63%) 19
Missing	19

Patient post-visit questionnaire data

Focus group discussions

- Patients' perspective
 - Playing an active role in managing their health
 - Decreased stress and worry about forgetting
 - limited time with HCP
 - Increased feeling of partnership with provider
 - Helping their provider by giving accurate and complete information
- Providers' perspective
 - Do not perceive much added value
 - Content wise nor structure wise
 - Timing of presentation of patient summary is crucial
 - Do not appreciate the value patients' place on partnering with them

Discussion

- The rate of adoption is encouraging
 - Very little support given to clinics
 - No research staff onsite
 - No support staff to help patients access website, deal with difficulties etc.
 - Health literacy issues
 - Computer literacy for more complex use if IT
 - This was seen as a project not as a standard of care

This study contributes in filling a knowledge gap on how best to implement the use of such tools in practice

Discussion

Most patients indicated a favorable evaluation of the web site: its functionalities and its usefulness in helping them adopt an active role in managing their care and engage in a partnership with their provider.

There persists a certain disconnect between providers and patients perceptions that will need to be validated in future studies.

The fact that these individuals represent a sub group of motivated participants may be seen as a limitation

Lessons learned

- Success is long term
 - Must have buy-in by clinicians and clinic staff
 - Clinical routine
 - Implementation procedures need to be robust and multiprunged
 - Reception-reminders
 - Waiting room-website video
 - Volunteers to help patients register
 - Telephone trouble shooting

We are now implementing in 2 FMTU in CISSS Laval