

Agenda

- About preconception health
- Our journey
- Development of My Health eSnapshot
- Use of an innovative tablet technology platform
- Study design & implementation
- Key research findings
- Future planning

Preconception Health = PCH Healthcare provider = HCP



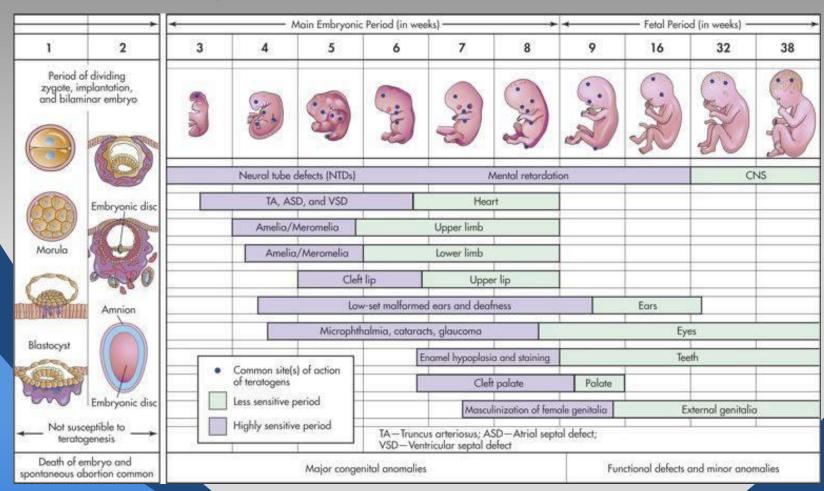
Preconception Health

 Health of ALL individuals during their reproductive years, whether or not they plan to have children one day

 Promotes healthy fertility and focuses on actions to reduce risks, promote healthy lifestyles and increase readiness for pregnancy

Ontario Public Health Association, 2014

Why is this Important?



Why is this Important?



Our Journey



Key Findings

Literature Review:

- Public awareness & HCP outreach strategies promising
- Need innovative strategies & more research

Public Health Unit Survey:

- Public awareness strategies with limited evaluation
- Limited strategies for HCPs

WDG Community Survey:

- Prefer HCP as source for health information
- Likely to follow advice if prompted by HCP



Healthcare in Canada

The majority of women have a regular medical doctor



89% Canada

94% Ontario

98% WDG

Statistics Canada, 2014

Healthcare in Canada

The majority of women had contact with a medical doctor in the last 12 months



85% Canada

86% Ontario

86% WDG

Statistics Canada, 2014



Primary Question



Can a patient-driven electronic PCH risk assessment tool, for use during healthcare provider visits, increase PCH knowledge and behaviour change among women of reproductive age (15-49 years)?



Secondary Questions



- To identify the prevalence of PCH risk factors
- To evaluate the process
- To evaluate the user-friendliness

Conception of Tool

 Reached out to researchers at Boston University Medical Centre about The Gabby Preconception Care System

 Adapted the Gabby System to reflect Canadian best practices and deliver model in a healthcare setting



Development of Tool



Preconception Health Risk Assessment & Customized Patient Handout

Patient Handout



My Health eSnapshot Results

What is going well:

You do not have any chronic medical problems.

You are getting a healthy amount of physical activity.

What to think about:

Immunizations: You are not up-to-date with your immunizations

Why does it matter now?

Immunizations or vaccines can help protect your body against many diseases. Some of these diseases can be very serious, such as measles, mumps, rubella, chicken pox, and the flu. The good news is that these diseases can be prevented. Talk to your healthcare provider on a regular basis to find out what routine immunizations (shots) you need. Some immunizations protect you from a disease for your whole life, but others need to be given again (boosted) to keep up protection. You may also need more immunizations depending on your lifestyle, work or travel. It is important to keep a record of all vaccines that you receive.

Why does it matter for pregnancy?

Many infectious diseases can cause harm to you and your baby during pregnancy and birth. For example, rubella and chickenpox can cause serious birth defects to your baby during pregnancy. To help protect you and your future baby, talk to your healthcare provider to find out what immunizations you need. For example, it is very important to be screened for rubella, chickenpox and hepatitis B before getting pregnant. Your healthcare provider can also give you advice about when it is safe to get immunizations, and if you need to avoid pregnancy for a period of time. For example, if you get the rubella immunization you should wait 4 weeks before trying to get pregnant.

For more information about immunizations, visit Immunize Canada's website: www.immunize.ca

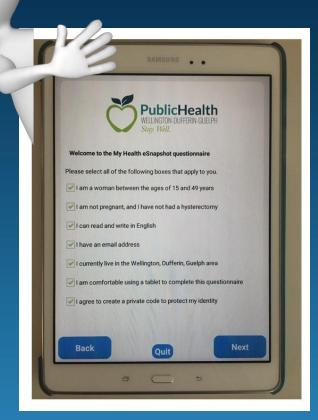


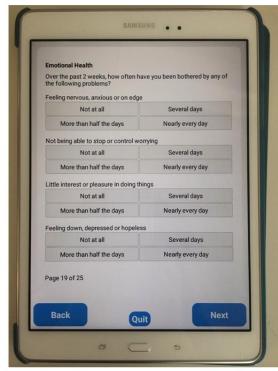
Technology

- Ocean by CognisantMD
- Integrates results into patient's EMR
- Generates a patient handout
- Cloud-based platform
- Securely shares encrypted health information for clinical use and research
- Benefits patients & HCPs



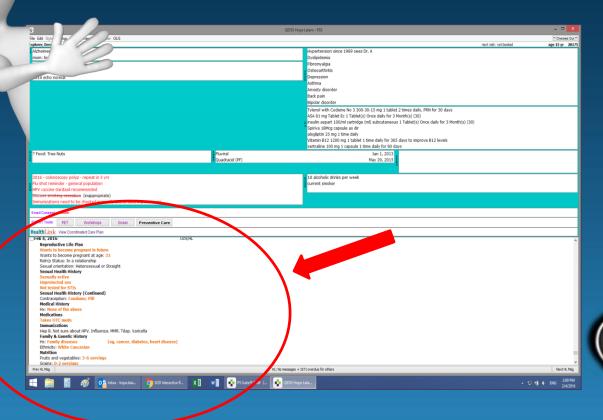
Sneak Peak







Sneak Peak





Study Phases



Phase 1 Data Collection

Study Sites

- Seven primary care research sites
- Family Health Teams
- Urban and rural representation



Study Participants

- Random recruitment by each study site
- Each target sample: 120 participants (10/week)
- Study period: 3 months
- Patient incentive: \$10.00 grocery gift card



Eligibility Criteria

- Female
- Age 15-49 years
- Not pregnant
- No history of hysterectomy
- Can read and write English
- Have email address
- Comfortable using a tablet
- Live in Wellington-Dufferin-Guelph



Model

Risk Assessment HCP Discussion

Patient Handout

Risk Assessment



- PCH risk assessment on Ocean tablet
- In waiting room or exam room
- Before HCP appointment (~10 minutes)



Discussion



- Results are uploaded into the EMR
- HCP reviews results with patient
- Follow-up appointment booked if needed



Patient Handout



- Customized patient handout
- Printed from EMR
- Take-home resource



Study Evaluation

1-Week
Participant
Online Survey

2-Month
Participant
Online Survey

PCP Key Informant Interviews

Participant Survey



To evaluate the tool and patient handout, and ask about their experience discussing results with their HCP.



Participant Survey



To evaluate changes in participant's knowledge and behaviour related to PCH risk factors identified



Key Informant Interviews Primary Care



To identify the benefits, challenges and sustainability of implementing a patient-driven PCH risk assessment tool via tablet technology in primary health care settings.



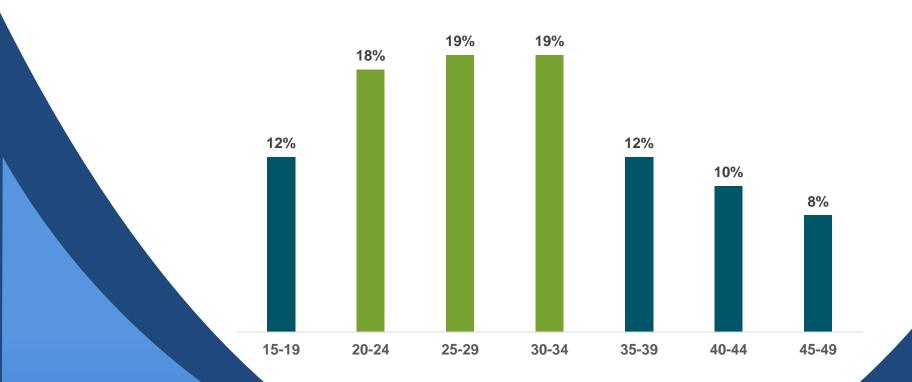


Data Analysis

- Data analysis ongoing
- Risk assessment: non-identifying patient data accessed through Ocean Studies
 - Primary care sites have exclusive patient data ownership
- Follow-up surveys: patient data accessed through FluidSurveys
- Data from risk assessment and follow-up online surveys were linked using patient's private code

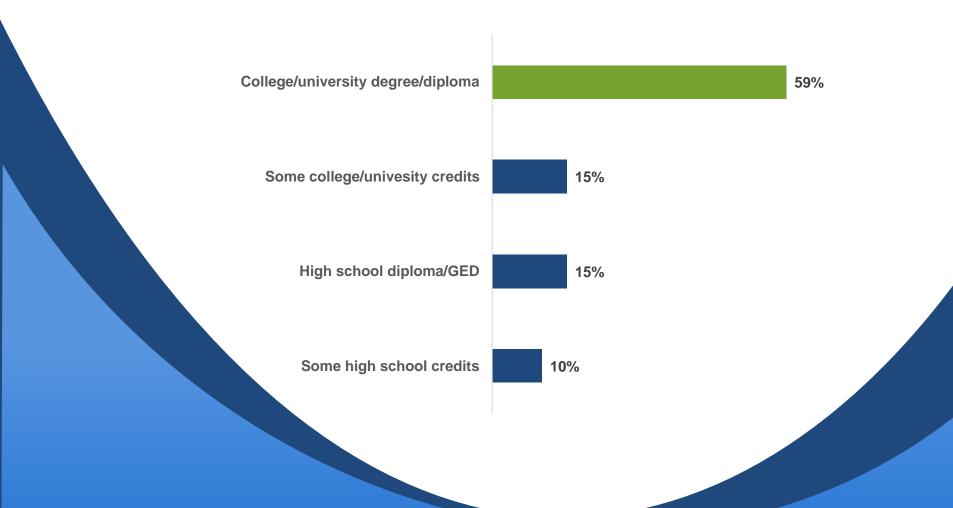
Demographics - Age

The majority of respondents were age 20-34 years



Demographics - Education

The majority of respondents had high level of education



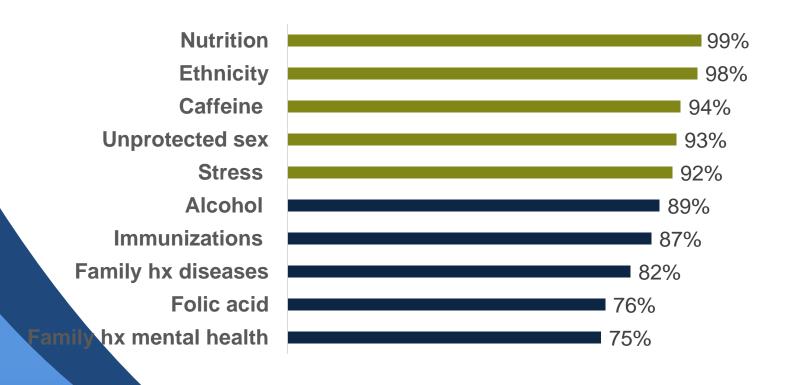
Demographics - Income

The majority of respondents had an annual household income level above \$40,000



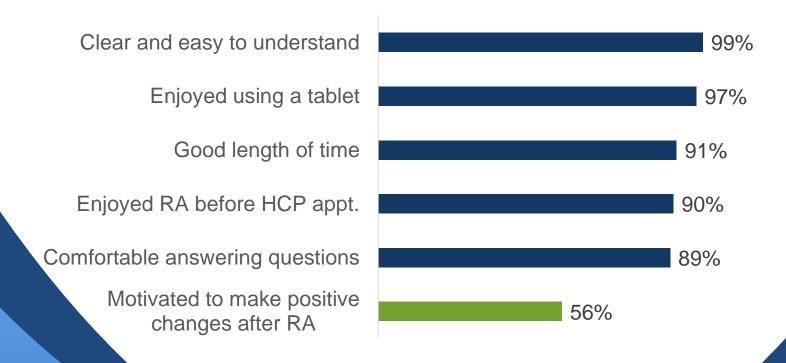
Risk Assessment n=300

The most prevalent risk factors identified in WDG



One-Week Survey n=188

The majority of patients reported having a positive experience using the risk assessment



One-Week Survey n=86

Completing RA before HCP appt.
made it easier to have a
conversation with their HCP

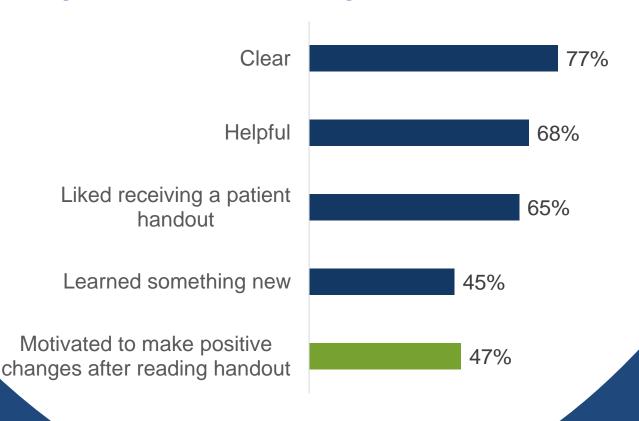


Motivated to make positve changes to health after talking about results with HCP



One-Week Survey n=164

The majority of patients reported having a positive experience about the patient handout



76% Of patients would recommend the experience to a friend

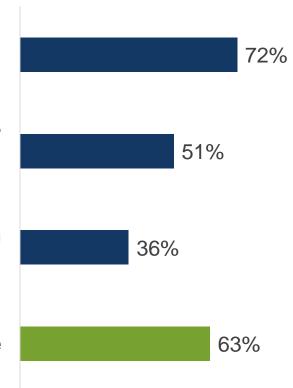
Two-Month Survey n=144

Learned importance of talking to HCP about life-long health needs

Learned how health now affects own health and health of their future children

Learned about new health concerns

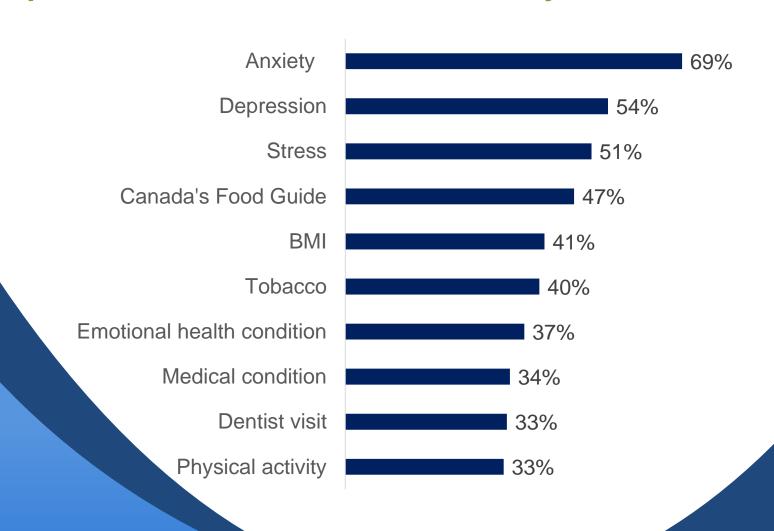
Motivated by study to learn more



68%

Of patients followed some health advice

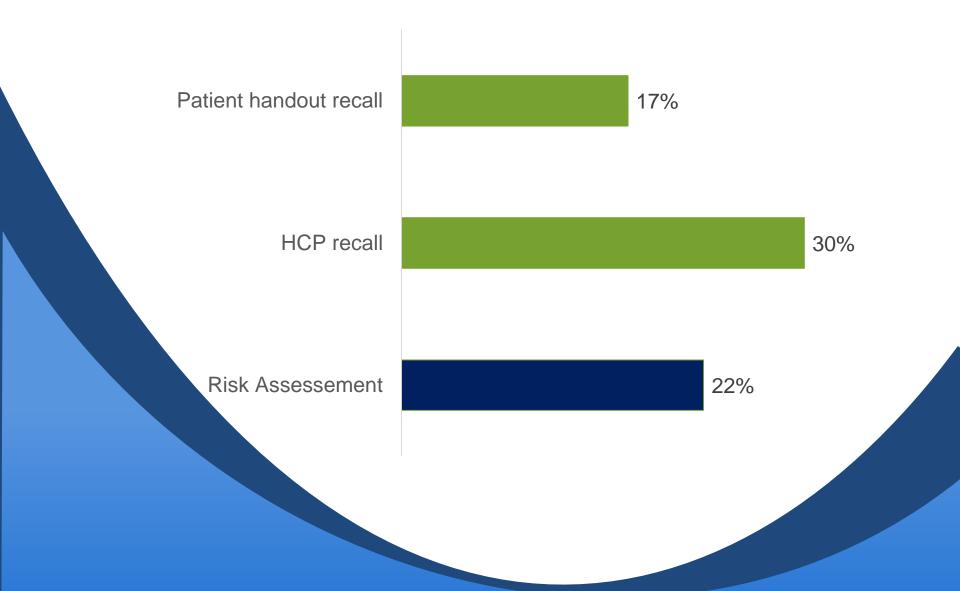
Top 10 risk factors identified by participants as having plans to take action or have already taken action



Learned more about anxiety as a Risk Factor



Likely to follow plans or continue changes within the next 30 days related to Anxiety



What We Heard...

It helped me to have the courage to speak to my doctor about my mental health Very easy to complete

Less intimidating and intrusive than talking face to face... about personal subjects

I know I've got health problems. My HCP did not seem concerned with my health issues. I can only do so much on my own

It's informative and puts information in front of you that we sometimes tend to ignore

I didn't learn very much and hardly discussed the results with my doctor

Key Informant Interviews

7 Staff Participants

Successes:

- Ocean platform
- EMR integration
- Tablets
- RA questions
- Patient handout

Challenges:

- Time
- Recruitment
- Physician buy-in
- Internet access
- Technology glitches



Benefits

Clinic

- Using Ocean platform (tablet + EMR integration)
- New opportunity for patient teaching
- Learned new info about patients
- Enhanced medical records
- Easy to assess patient risks
- Increase PCH profile

Patients

- Interest in patient handout
- Learned more about their own health
- Identified new risk factors (e.g., eating disorder)
- Understand HCPs have a role in PCH

Changes for Future Implementation

- Shorten RA Tool & Patient Handout
- Offer at specific appointment types (e.g., physicals, sexual health, family planning)
- Schedule adequate time during appointment
- Ocean to allow patient handout printing anytime
- Have multiple tablets available
- Explore opportunities to increase physician buy-in

HCPs interviewed said they would consider using My Health eSnapshot in future if changes made

What We Heard...

It brought PCH to a bit of a higher level... at least among the staff... My impression is that Ocean can be a powerful tool

I liked that the tablet connected directly to the EMR

Having the handout was useful to reinforce some of the things we had discussed

It comes down to not enough time. In primary care our appointments are limited...

Patients got to know themselves better

Phase 3 KnowledgeTranslation

Phase 4 Future Planning

Future Planning

- Create advisory group
- Fine-tune strategy
- Expand the model











Meet Our Team



Meet Our Team

- Melissa Potwarka, Manager (A)
- Cynthia Montanaro, Public Health Nurse
- Lyn Lacey, Public Health Nurse
- Jennifer MacLeod, Manager
- Patrick Seliske, Epidemiologist
- Mai Miner, Data Analyst
- Amy Estill, Health Promotion Specialist
- Kim Underwood, Program Assistant



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- Melissa Horan, Health Promotion Specialist
- Sonja Vukovic, MPH student
- WDGPH Research Ethics Committee
- Expert reviewers
- Research sites
- ME, Designer
- Cameron Productions





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