



Patient e-booking

Practice perspectives on the benefits, challenges and lessons learned



Meet the Panel

Moderator:

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Panelists:

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@MagentaHealth

Time will be available at the end of the presentations for audience Q&A

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Presenter Disclosures

- Presenter:
 - Cassie Frazer

- Relationships with commercial interests:
 - Nothing to declare

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Infoway's vision

Healthier Canadians through innovative digital health solutions



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What is e-booking?

 Allows patients to book appointments electronically, by choosing a date and time and receive an automated appointment confirmation, all without interacting with another person.



Appointment Confirmation

Thank you! Bob's appointment has been confirmed for:

Wednesday, October 8, 2014 at 10:50 am with Dr. John Smith

We look forward to seeing you then!

What functionality can e-booking offer?

- 24/7 appointment scheduling
- Automated appointment confirmation
- Secure access
- Automated appointment reminders
- Individual staff logins
- Customizable scheduling rules
- Multiple appointment types

Additional Functionality(+/-):

- Appointment integration with patient's personal calendar
- Automated cancellation notice/rescheduling option
- Short message service (SMS) text options
- Wait list creation
- Mobile device compatible application



Canadians are ready for change

- 89% feel it is important that they personally have full advantage of digital health tools and capabilities
- 90% who access their own health information online describe the experience as positive







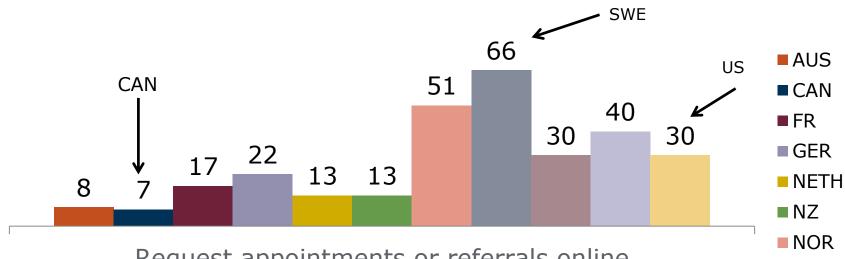
PATIENT DEMAND

90 PER CENT OF CANADIANS WOULD BE LIKELY TO BOOK AN APPOINTMENT WITH THEIR HEALTH CARE PROVIDER ELECTRONICALLY IF GIVEN THE CHANCE.4



International Comparison

% Physicians reporting their patients can request appointments or referrals online



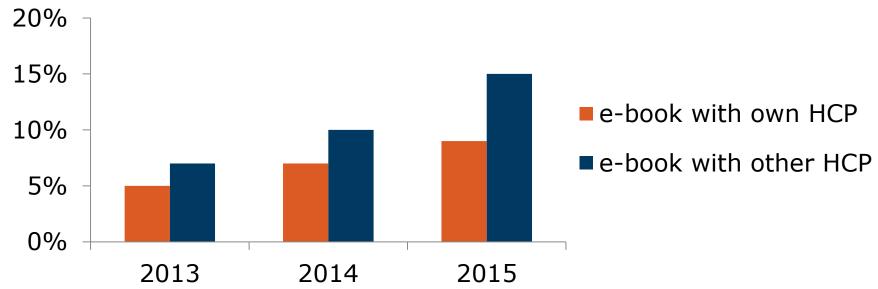
Request appointments or referrals online

Source: 2012 Commonwealth Fund International Health Policy Survey of Primary Care Physicians.



Access is slowly growing...

% of Canadians who report ability to electronically book an appointment with health care provider (HCP)



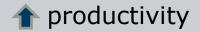
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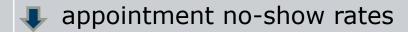
- 1. Ipsos Reid Consumer Research Public Opinion and Use Tracking Survey. Conducted for Canada Health Infoway (2013, 2015).
- 2. Harris Decima. Annual Tracking Survey. Conducted for Canada Health Infoway (2014).

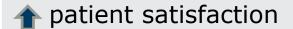


Potential for Value and Benefits

Potential for Benefits:

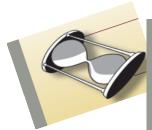






staff satisfaction











Quebec e-Scheduling Research Project

- Six primary medical clinics with different patient profiles
- A single e-booking system was implemented in all
- Some practice EMRs but also used as 'stand-alone' solution in others
- Four study objectives, mixed-methods approach
- Findings included:
 - > 8,296 patients from the six medical clinics were enrolled in 2012/13
 - > ~1.6 appts/pt were booked online over course of project
 - # of appointments available online 1'd 46%
 - # of appointments e-booked 1'd 32%
 - > ↓ 5.5% in appointment no-show rates

Pare, G. Trudel, MC. Forget, P. Adoption, Use, and Impact of E-Booking in Private Medical Practices: Mixed-Methods Evaluation of a Two-Year Showcase Project in Canada. *JMIR Med Inform. 2014 Jul-Dec; 2(2): e24*.

Project Lessons Learned

- Not all appointments are equal
 - Reluctance of some doctors to put availability online due to concern that patient will book incorrectly given the nature of the problem
 - Pop-up filters were provided as a solution
 - Patients can always provide false information, intentionally or not...
 - A better integration with the EMR system would allow the system to "consider" the patient profile before offering availabilities



Project Lessons Learned

- Verbal recommendations have the most impact
 - Patients who registered did so in majority because their doctor or doctor's secretary recommended them the system. They must continue to do so on a daily basis.
 - These individuals should put the emphasis on the system's benefits rather than on its characteristics

As shared by Pare, G., Trudel, MC. in webinar, "e-Booking, it can work for your practice too!" December 11, 2014.

Project Lessons Learned

- Health services consumption is not hedonic!
 - People may have registered, but if they don't need to see a doctor, they will not use the system and may forget about it.
 - Strategies:
 - Periodic emails to patients to remind them
 - Include details on retrieving forgotten username and password
 - Position messaging with other self/health education or public health information, so that it doesn't feel like an unsolicited message



Canada Health Infoway's e-Booking Initiative

- Canadians want to be able to book appointments electronically with their care providers, themselves
- Clinicians want to be able to offer digital consumerfriendly solutions to their patients
- There are benefits that can result for patients, for clinicians, for staff through the use of e-booking
- e-Booking Initiative: grant provided to implementing clinicians based upon 12 months' participation, provision of baseline and monthly reports, achievement of 30% adoption target

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Let the Panel Begin!



Medical Clinic Management Company Family Health Organization **Technology Focused Clinic**



Cloud-Based Online Scheduling Veribook
Software Worldwide Client Base



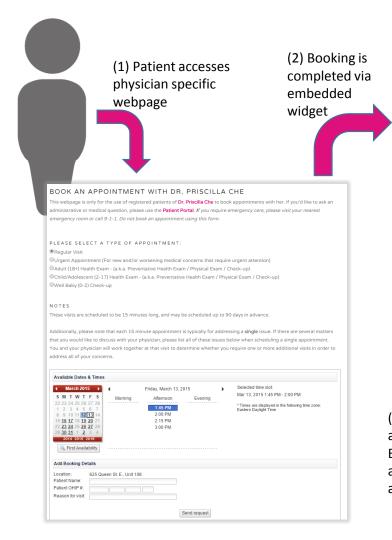
Disclaimer: As a co-founder of Veribook, a online scheduling vendor, I have a conflict of interest in the overall promotion of online scheduling

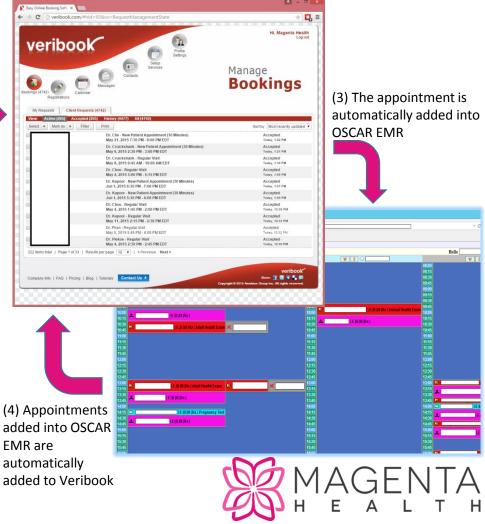
- Solution
- Outcome
- Successes
- Challenges
- Lessons Learned



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Overview

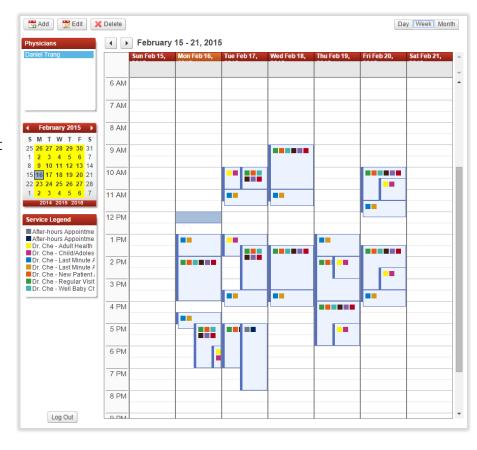
- All appointments available online
- Patients strongly encouraged to book online

Features

- Custom patient workflow via clinic website (e.g. urgent appointments, annual physicals)
- Automated email confirmations & reminders
- Online cancellation and rescheduling
- Configurable booking rules
- Configurable clinician working hours
- Appointments automatically added to EMR and linked to patient record
- 24/7 availability

Technical Details

- Bi-directional integration
 - OSCAR → Veribook
 - Veribook → OSCAR
- Web-service API (not HL7)
- Real-time





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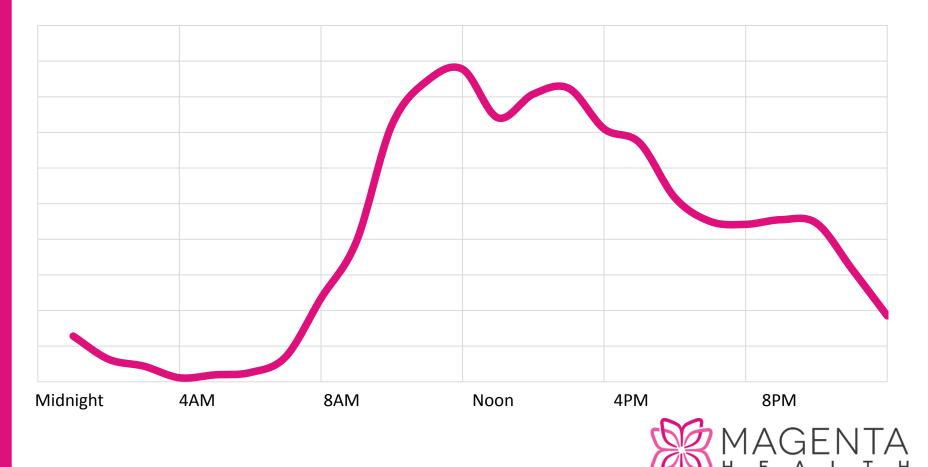
Outcome

Q1 – 2015 (i.e. Jan 1, 2015 to March 31, 2015)

Total Appointments	3243	
Percentage Booked Online	99.1%	Balance was scheduled by clinicians or admin staff manually
Missed Appointments	1.2%	
Appointments Cancelled With Less than 12 Hours Notice	3.2%	
Percentage Booked Outside Business Hours (M-F, 9AM – 4PM)	53.5%	
Scheduler Uptime	97.2%	Uptime negatively affected due to clinic internet / power outages



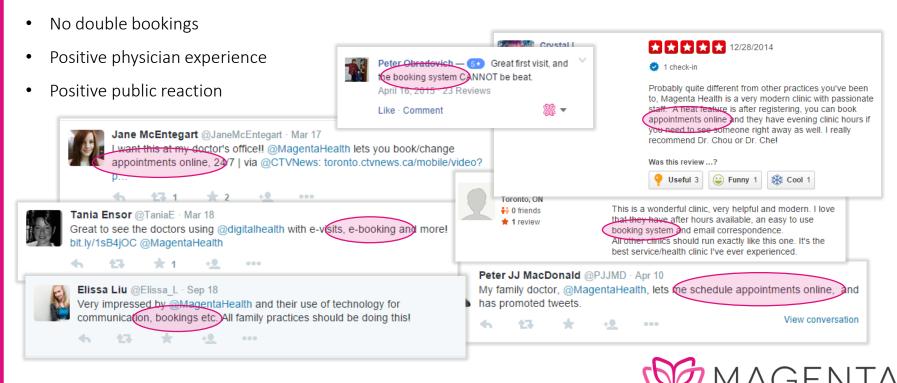
When Bookings are Made



- Solution
- Outcome
- Successes
- Challenges
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- No administrative time spent scheduling or reminding patients
- Low no-show & late cancellation rate
- Anticipated risks & concerns largely avoided



- Solution
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Implementation

- No adequate pre-existing Ontario solution with EMR integration contributed code to OSCAR EMR to enable integration with online schedulers
- Configuring online scheduler to reflect nuanced physician scheduling rules locums, vacation coverage, after-hours clinics, specialized clinics
- Designing workflow to enable patients to schedule online for the first time with minimal hassle

Technical

- The < 5% of patients who have technical problems will vocally complain, regardless of the reason
- Patients use a wide variety of devices compatibility with mobile devices is difficult to achieve
- Scheduler needs to connect to EMR, but OntarioMD requires EMR to be hosted on premises challenging to achieve high uptime

Practical

- Resistance to change by clinicians and staff
- Patients will not initially trust online scheduler to show all appointments
- The capability to simultaneously accept phone or in-person appointments is key.

- Solution
- Outcome
- Successes
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Implementation

- Planning is important, but don't try to contemplate every eventuality
- Be prepared to make mistakes, adapt and iterate
- Bi-directional EMR integration

Technical

- Train administrative staff to answer basic technical questions
- Ensure second level technical support is available from vendor
- Ensure family members can schedule for one another

Practical

- Be prepared to overrule clinicians & administrative staff during design and deployment
- Make all appointments available online
- Assume patients will not read instructions or troubleshooting guides
- Remember to block off statutory holidays



Your Turn...Questions?







Resources are available to support your planning, implementation and adoption of e-booking.

https://www.infoway-inforoute.ca/en/solutions/consumer-e-services/e-booking or http://bit.ly/e-booking_initiative



"How can I make sure I don't lose control of my schedule?"

- Clinic maintains control of the schedule to determine:
 - Appointment types & length
 - Availability in day or during week, when certain appointment types can display
- Filtering options can direct patients to choose the correct clinician for the correct amount of time for the appointment type
- Patients and/or clinicians can electronically reschedule appointment if required



"Doesn't this open up my schedule to abuse? What if patients book up my whole schedule?"

- E-booking is a privilege that patients appreciate
- Rules can be created in the solution to guide patient use and prevent multiple bookings
- Privilege can be rescinded if needed
- Early adopters have not found this to be a problem



"Some of my patients won't use a computer to book an appointment."

- Canadians lead other countries in online engagement
- Use of smartphones in Canada is increasing
- Consumer research: patients of all ages and income would like to e-book with their HCP
- Phone remains available for those that are not able / not interested to e-book
 - Phone lines are freed up, making that access easier too

"I have some appointments slots in my schedule that I don't want people to book online."

- Schedules are customizable
- Clinician / clinic can determine which appointments they want to make available for online booking
- Use of filters can guide patients in booking correct appointment type

"My MOA is concerned about job security"

- MOA role is highly valued and essential for clinic
 - ➤ E-booking can reduce burden of managing multiple phone lines and patient queue at front desk
 - > Frees up time for higher value activities
 - Improves connection with patients who are in-person or on phone (i.e., less harried/rushed)
- Early adopters indicated no loss of staff due to ebooking
- MOA role critical to patient adoption of e-booking