



**Patient-controlled
data to facilitate the
care pathway and
quality control**



Laurie Hendren

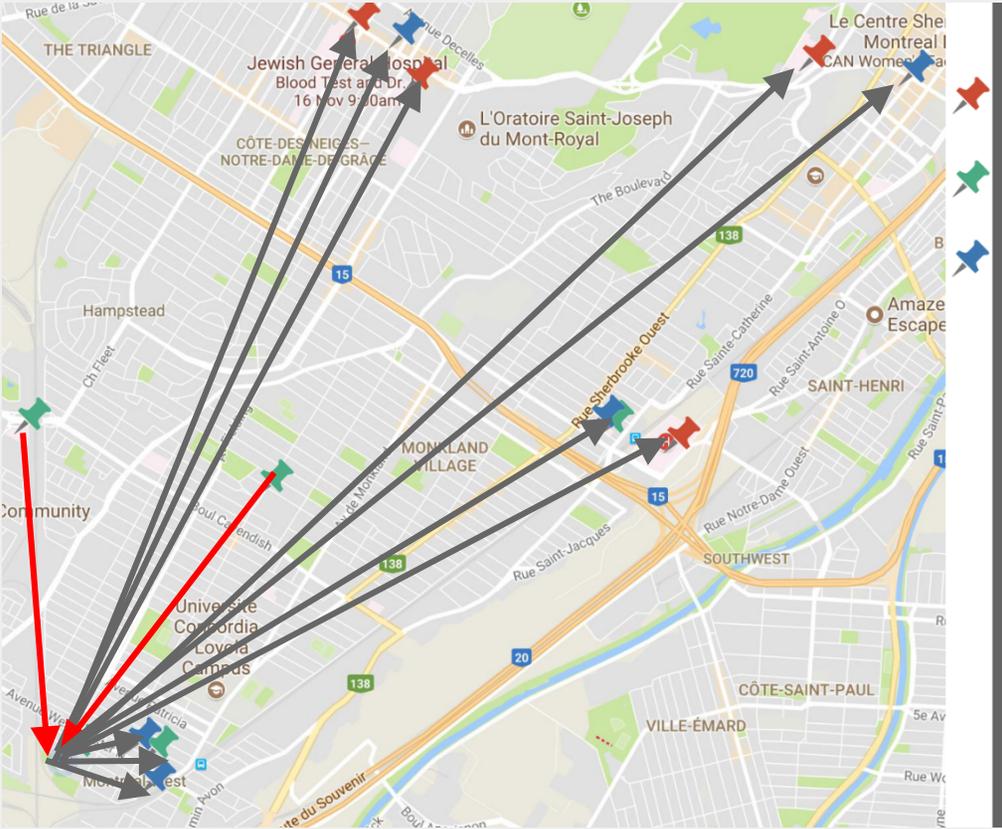
**Active Breast Cancer
Patient and
Patient Advocate**



**Professor, FRSC, CRC
Computer Science
McGill University**

Please contact me at: hendren@cs.mcgill.ca

My treatment network - 36 sq. km. in Montreal



- 4 hospitals
- 5 public clinics
- 5 private clinics

http://www.breastcancer.org/tips/managing_records



BREASTCANCER.ORG
REAL. ANSWERS.

“



*Because your medical history is spread out among your entire medical team, it's a good idea for you to **keep your own complete, updated records so you can play an active, informed role in your care.** Knowing your medical history **allows you to share accurate information** with a new doctor, a nutritionist, a complementary medicine practitioner, or a personal trainer. In this way, you ensure that you continue to receive the best care possible.*



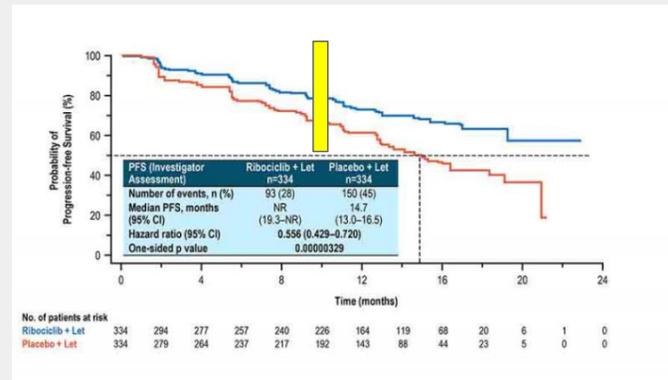
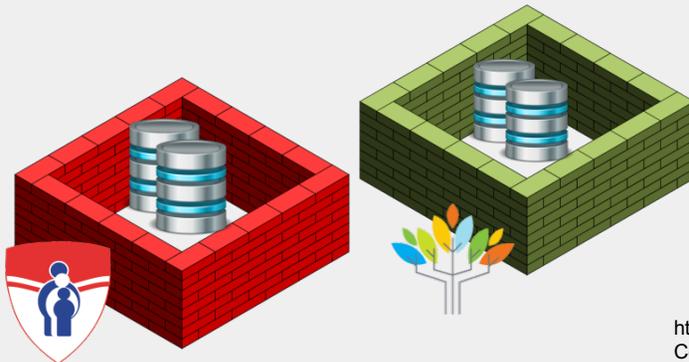
Current Status

My experience, where is my data currently stored and how is it shared?

Where is my data stored?

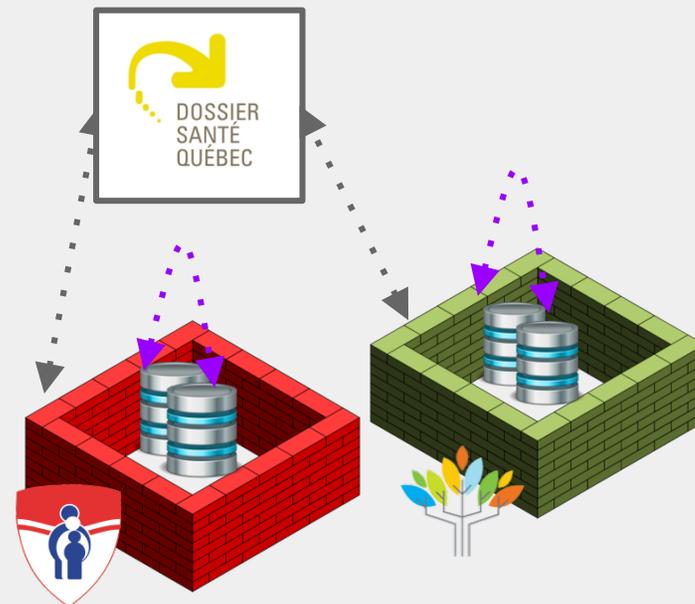


Handwritten medical notes and prescriptions, including patient information and clinical observations.



<http://www.esmo.org/Conferences/Past-Conferences/ESMO-2016-Congress/Press-Media/Ribociclib-Improves-Progression-free-Survival-in-Advanced-Breast-Cancer>

How is my data currently shared?





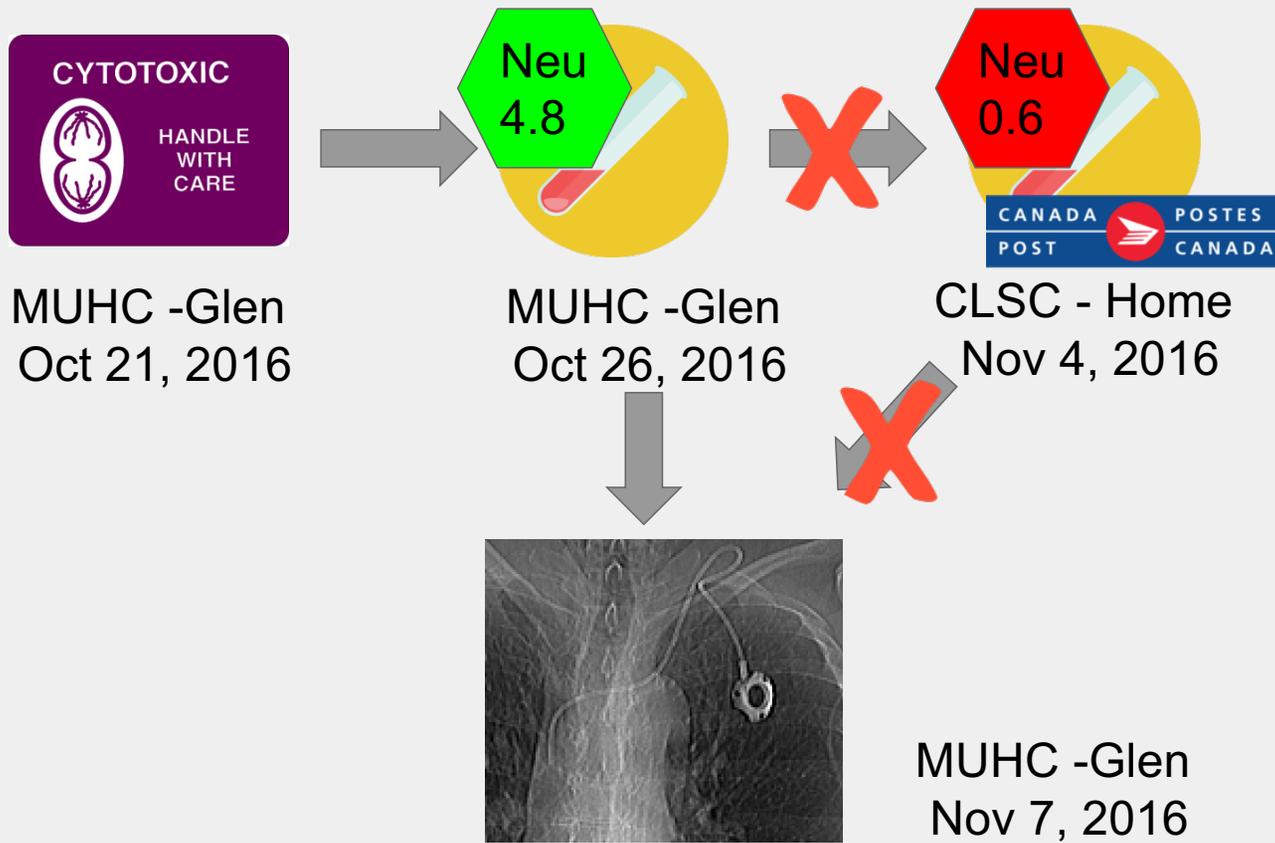
What can go wrong?

Based on personal experience

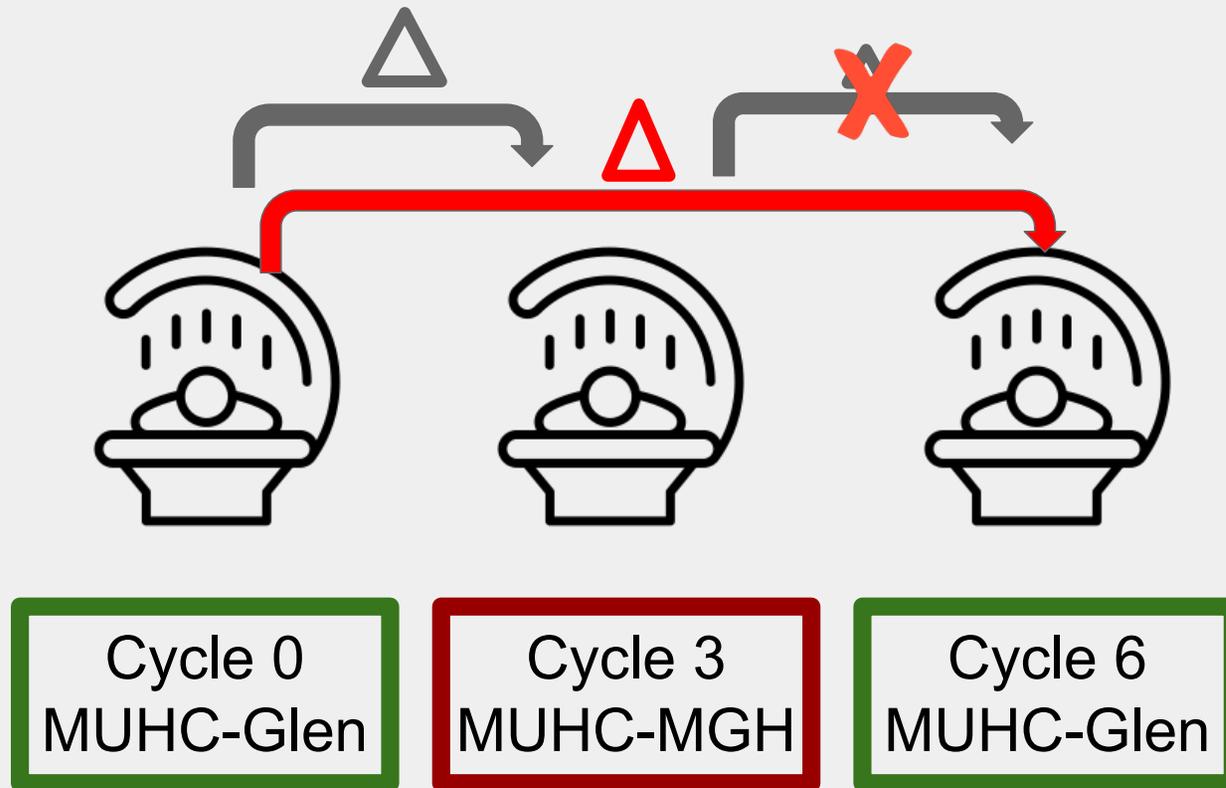
Delays in my diagnosis and treatment



Clinicians missing data, using out-of-date data.



Another example of using the wrong data



Unreasonable burden on me to provide data

“

Just go and pick-up the film, CD and reports from your mammograms and ultrasound, and take them with you to the surgeon.

Just get your list of medications from the pharmacist.

Waste of time repeatedly giving my history

“

What is your age?

How much do you weigh?

When were you diagnosed?

*What has happened since your last annual
exam?*

What are your medications?

Annoying PRO questions

- Lack of ability to give feedback about a question.
- No access to my previous answers
- Lack of feedback about results of study.





Patient-stored data

My current options as a patient

Getting my data (not so easy)

- Ask politely for a copy
- Ask more firmly for a copy
- Ask a different person
- Say that I need a copy for my GP/oncologist
- Fill out a form (pay a fee) and wait

Santé
et Services sociaux
Québec

ACCESS TO INFORMATION REQUEST
Québec Electronic Health Record (QHR)

Section A: IDENTIFICATION
Fields with an asterisk (*) are mandatory.

* RAMQ health insurance number		* Last name		* First name	
* Date of birth	Year	Month	Day	* Gender	* Address (street, apartment)
				<input type="checkbox"/> F <input type="checkbox"/> M	
* City			* Province		* Postal code
* Area code	* Phone (daytime)	Area code	Phone (evening)	Email	
* Mother's maiden name		* Mother's first name		* Father's last name	* Father's first name

IMPORTANT: To prevent identity theft and protect your personal information, your request must be submitted along with a copy of a valid piece of signed photo I.D. (health insurance card, driver's license, passport, etc.) by mail or fax. Failure to provide this information may result in your request being delayed or turned down.

Section B: IDENTIFICATION OF PARENT, REPRESENTATIVE, OR MANDATARY
Complete this section only if you are filing a request on behalf of the person named in Section A. Attach a document authorizing communication (consent, power of attorney, or court decision) if necessary.

Last name	First name	Area code	Phone (daytime)	Relationship to the person
Address (street, apartment)		City		Province
Postal code		Email		

Section C: TYPE OF REQUEST
I understand that some fees may apply and that I will be notified in advance if this is the case.

Copy of my personal information as viewable by healthcare practitioners

Copy of my personal information contained in the QHR databank (specify as required)

All Medication Laboratory results Medical imaging Electronic prescriptions Register of refusals

List of persons, organizations, or agencies who have had access to my personal information

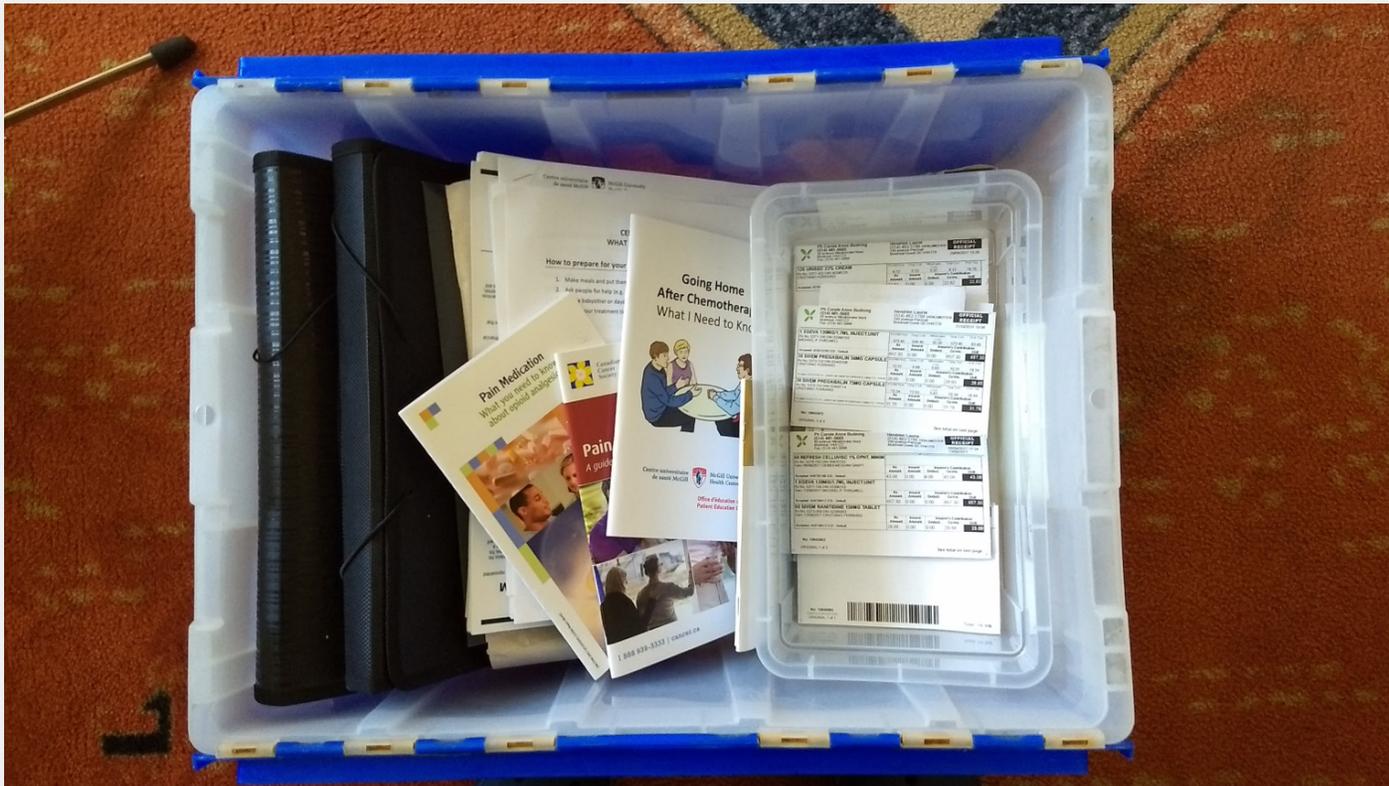
Additional information, as required

Section D: SIGNATURE

Signature	Date (year / month / day)
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Please fax the completed form to 418-266-7024 or mail it to the following address:
Person in charge of QHR access
Ministère de la Santé et des Services sociaux
1075, chemin Sainte-Foy, 5^e étage, Québec (Québec) G1S 2M1
http://www.msss.gouv.qc.ca/ministere/acces_info/responsable.php
For help completing this form please contact SERVICES QUÉBEC
(Montreal) 514-644-4545 - (Québec City) 418-644-4545 - (toll free) 1-877-644-4545

Storing my data first solution



A better solution



The image shows a Google Docs document titled "Medication List: Laurie Hendren" overlaid on a Dropbox file explorer interface. The Google Docs window is in the foreground, showing a menu bar with options like File, Edit, View, Insert, Format, Data, Tools, Add-ons, and Help. The document content is partially visible, showing a table with columns for medication names and other details. The Dropbox interface is in the background, displaying a folder named "Study" under "BStuff". The file explorer shows a list of files, including "2017_June27_BoneScan.JPG", "2017_BloodResults_May 29.pdf", and "2017_May_CT.pdf". There are also options to "Share folder", "Upload files", "New folder", and "Show deleted files". The interface includes a search bar, a notification bell, and a user profile icon.

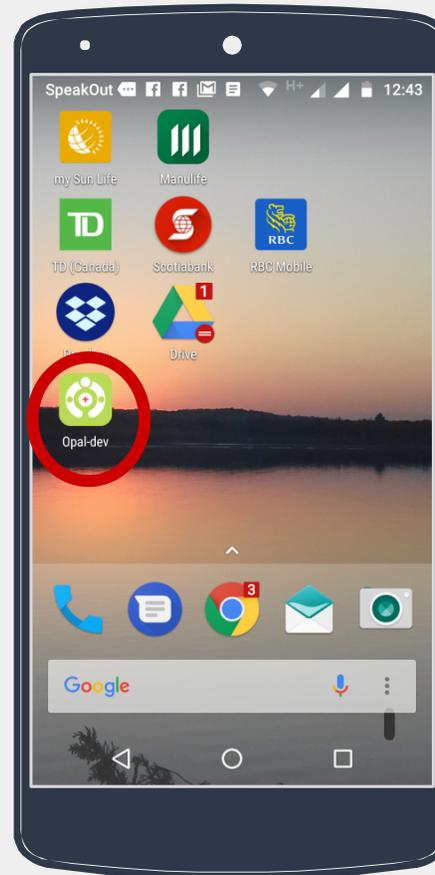


Patient-controlled data

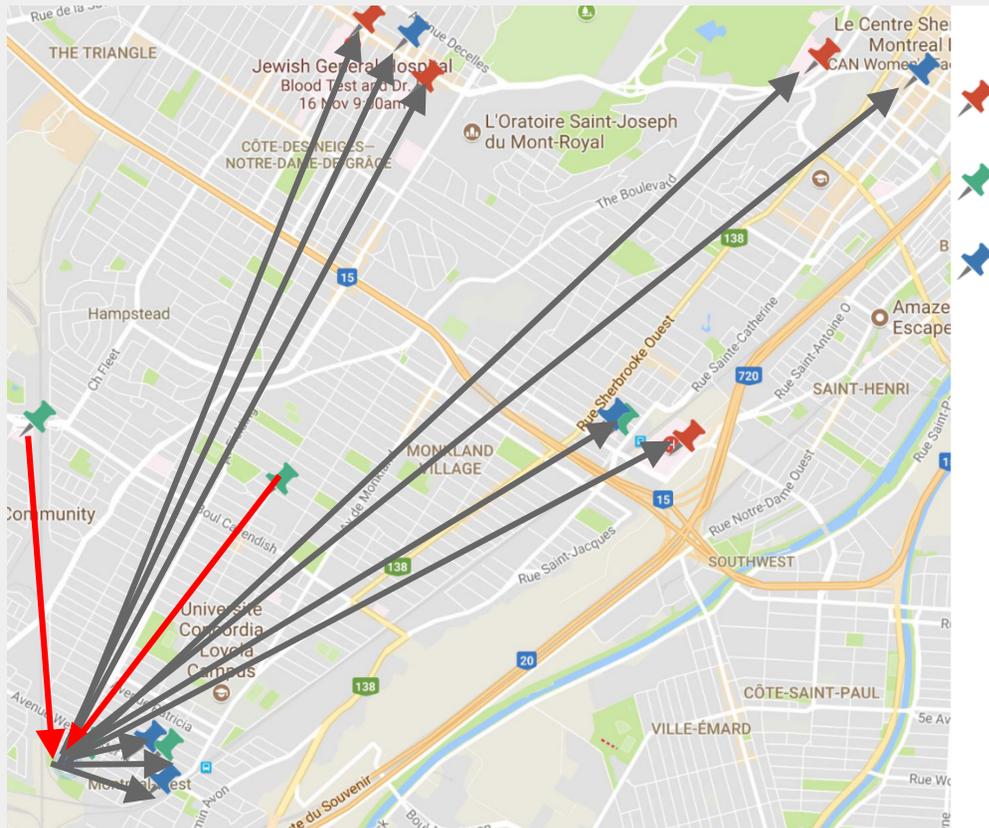
Thinking outside of the box

Where is my important non-health data?

- Current data and notifications provided automatically to me.
- Available via my e-devices.



What is the common element in my health network?



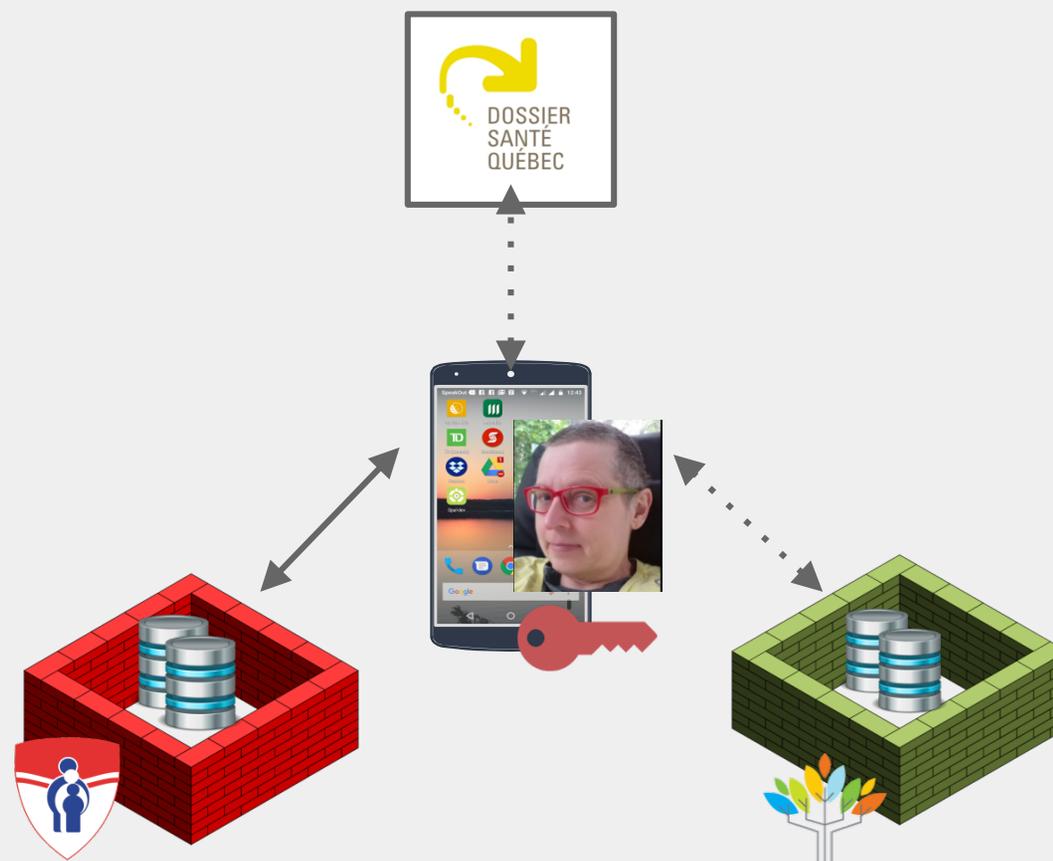
4 hospitals

5 public clinics

5 private clinics

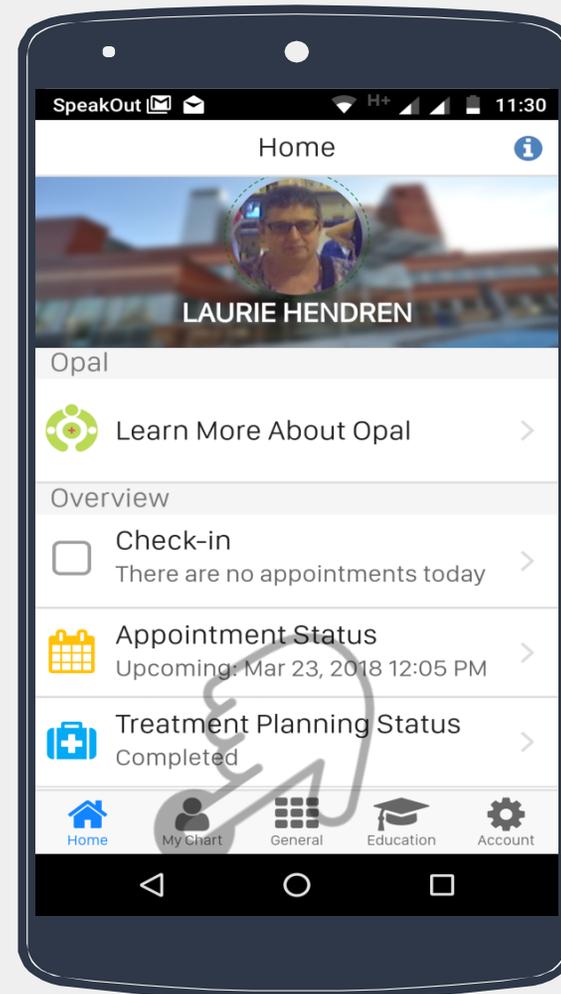


Rethinking patient-controlled data - Opal



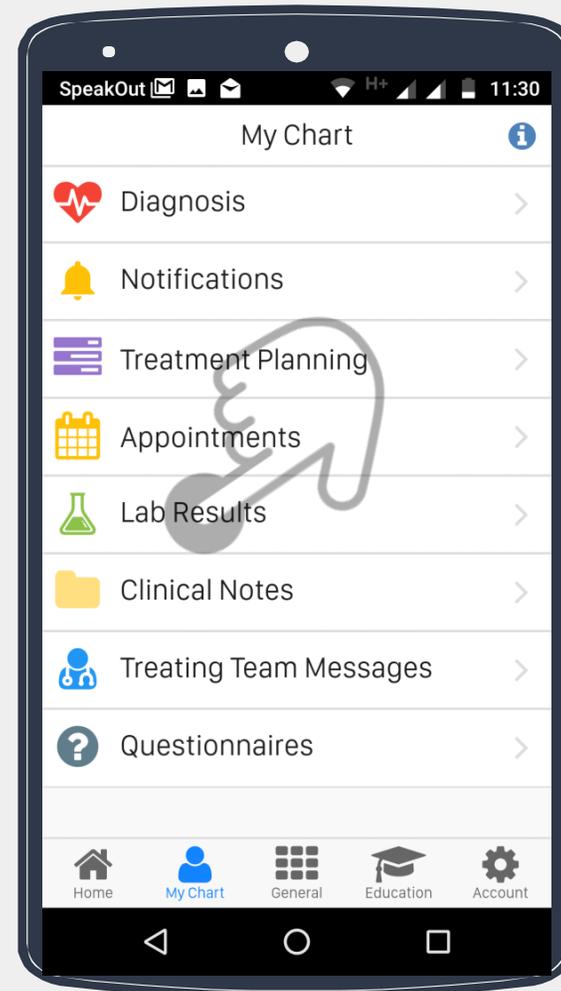
Opal - a patient app

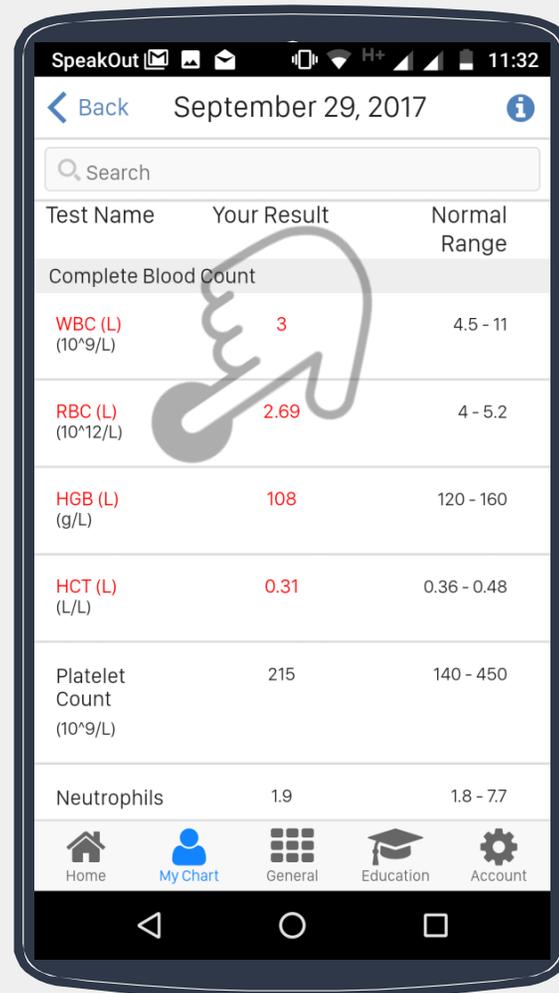
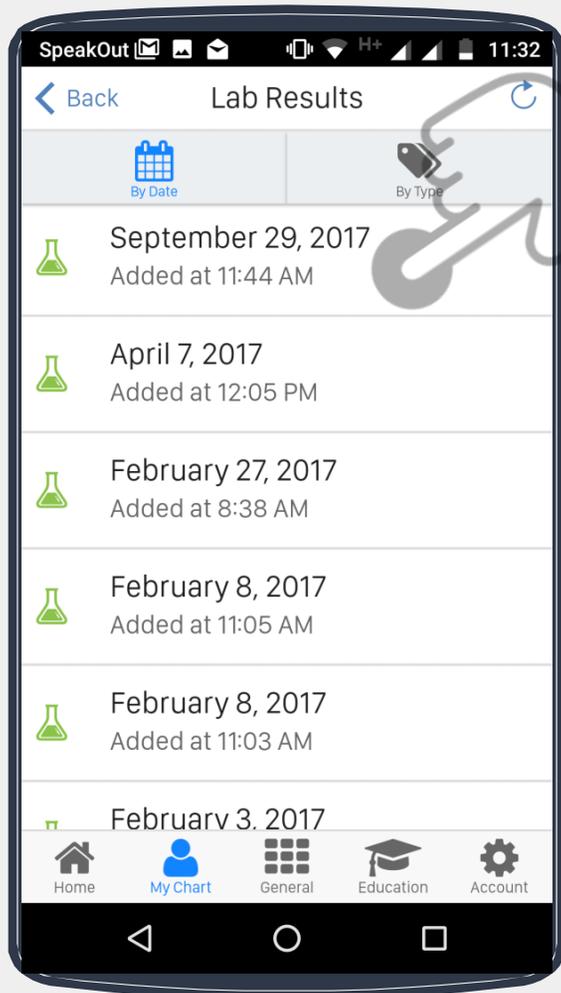
- Team co-led by Laurie Hendren, Tarek Hijal (Radiation Oncology) and John Kildea (Medical Physics)
- Patient-centric approach to provide many kinds of data.

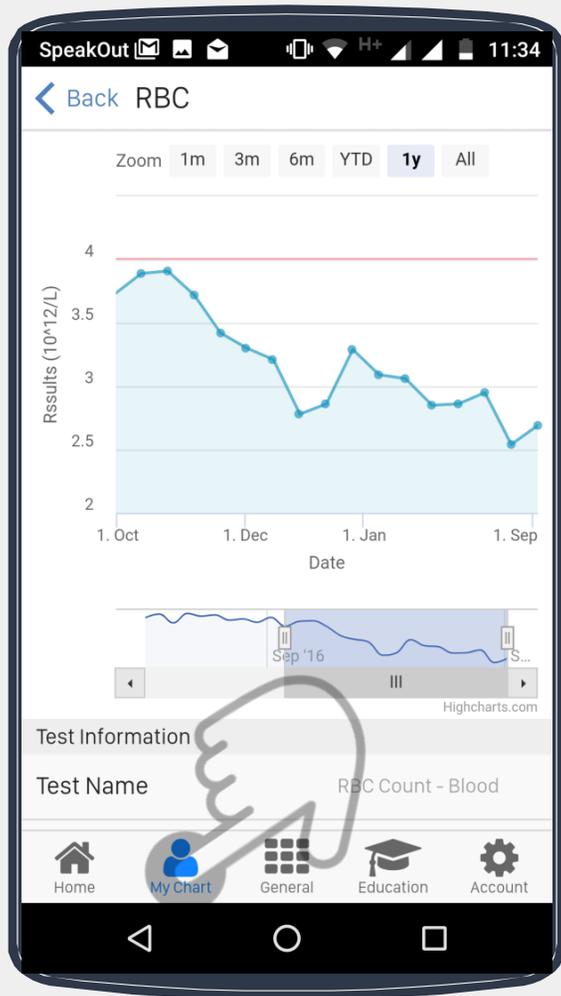


Opal - My Chart

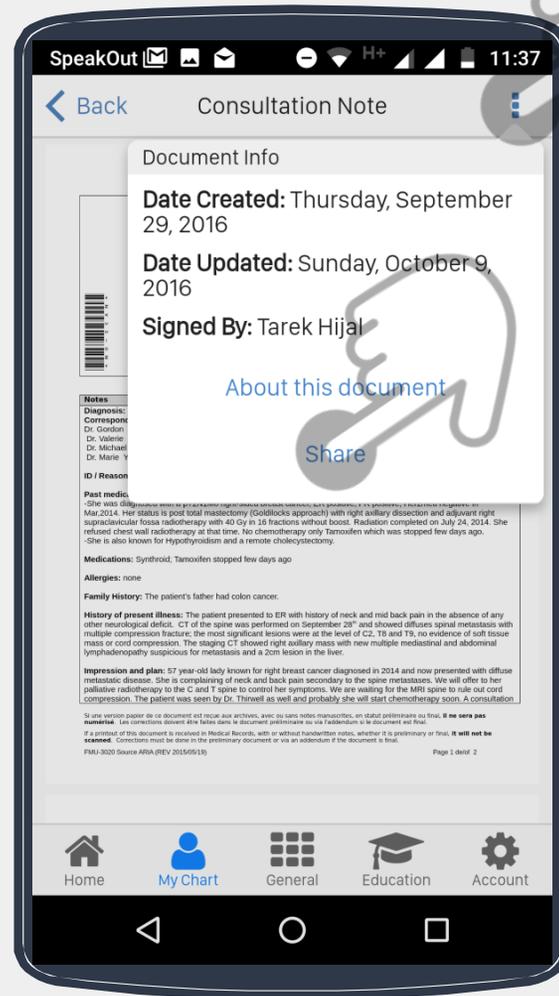
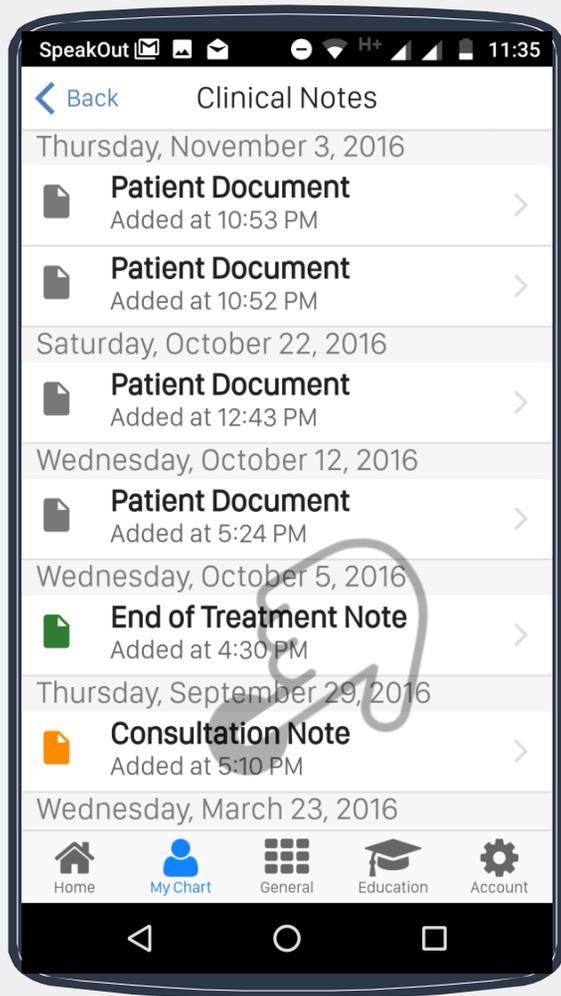
- All sorts of data that is specific to the patient.
- Three important categories are:
 - Lab Results
 - Clinical Notes
 - Questionnaires

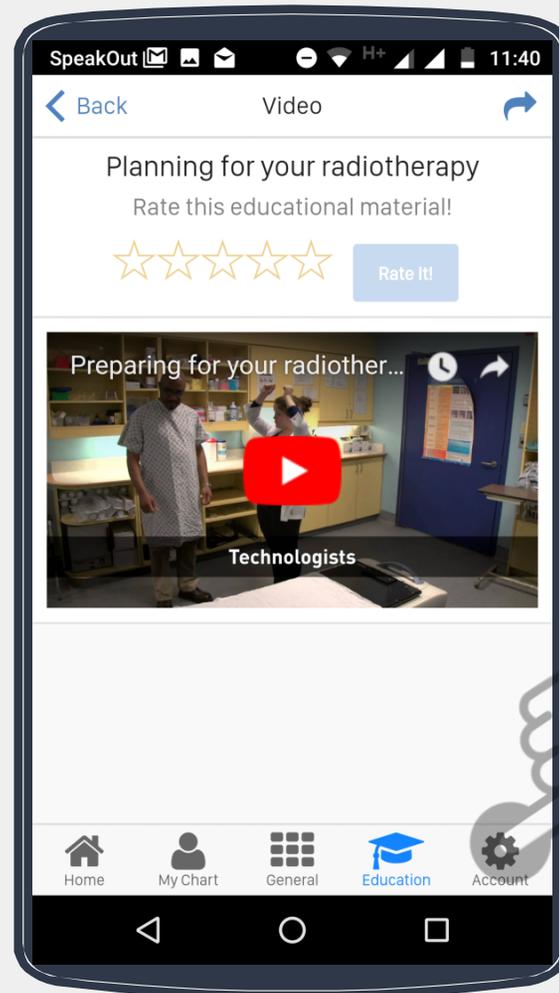
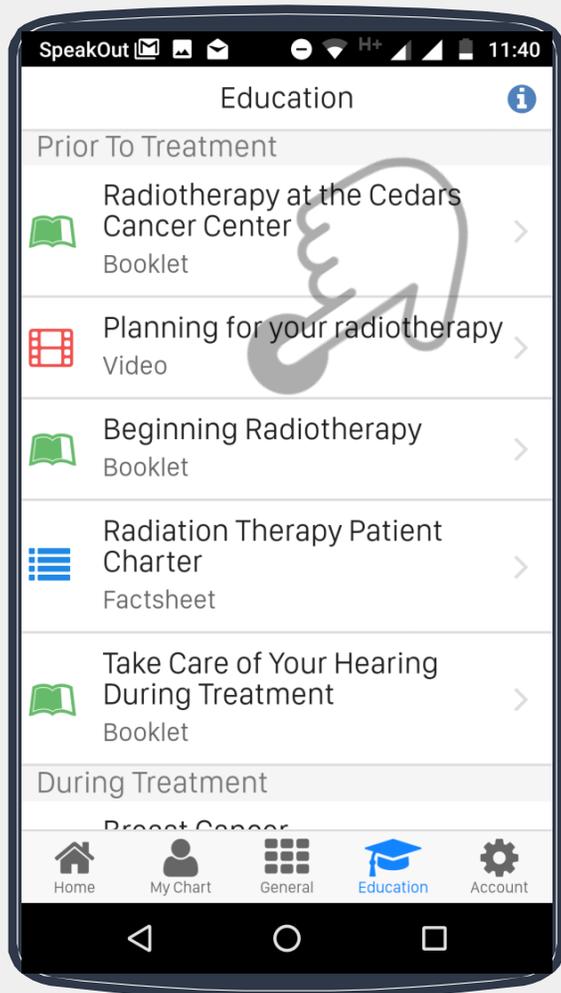


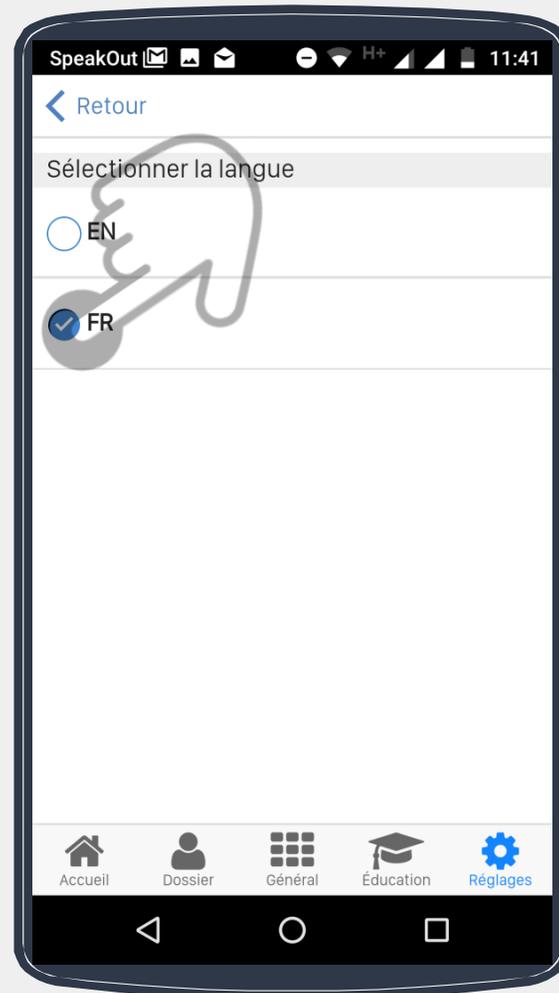
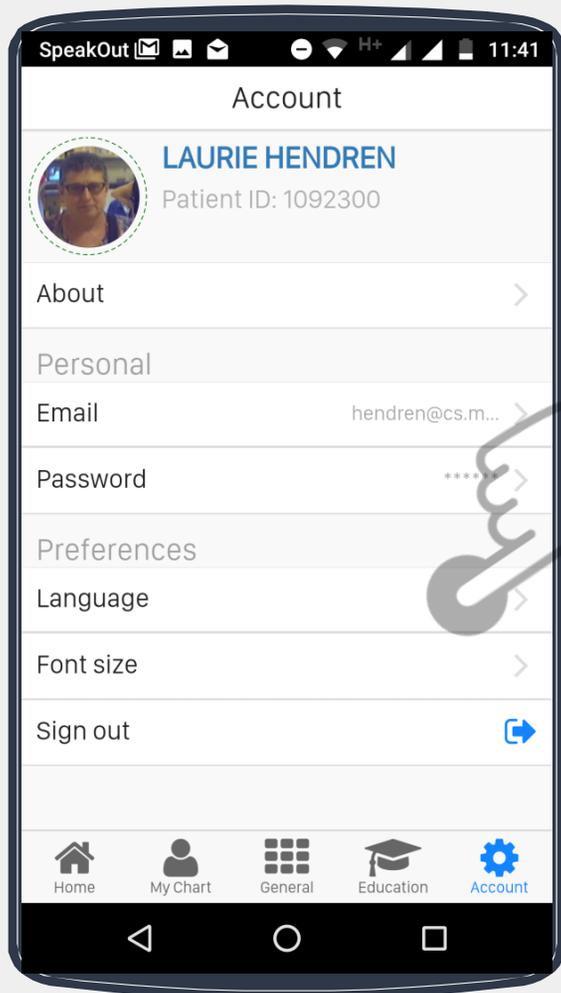




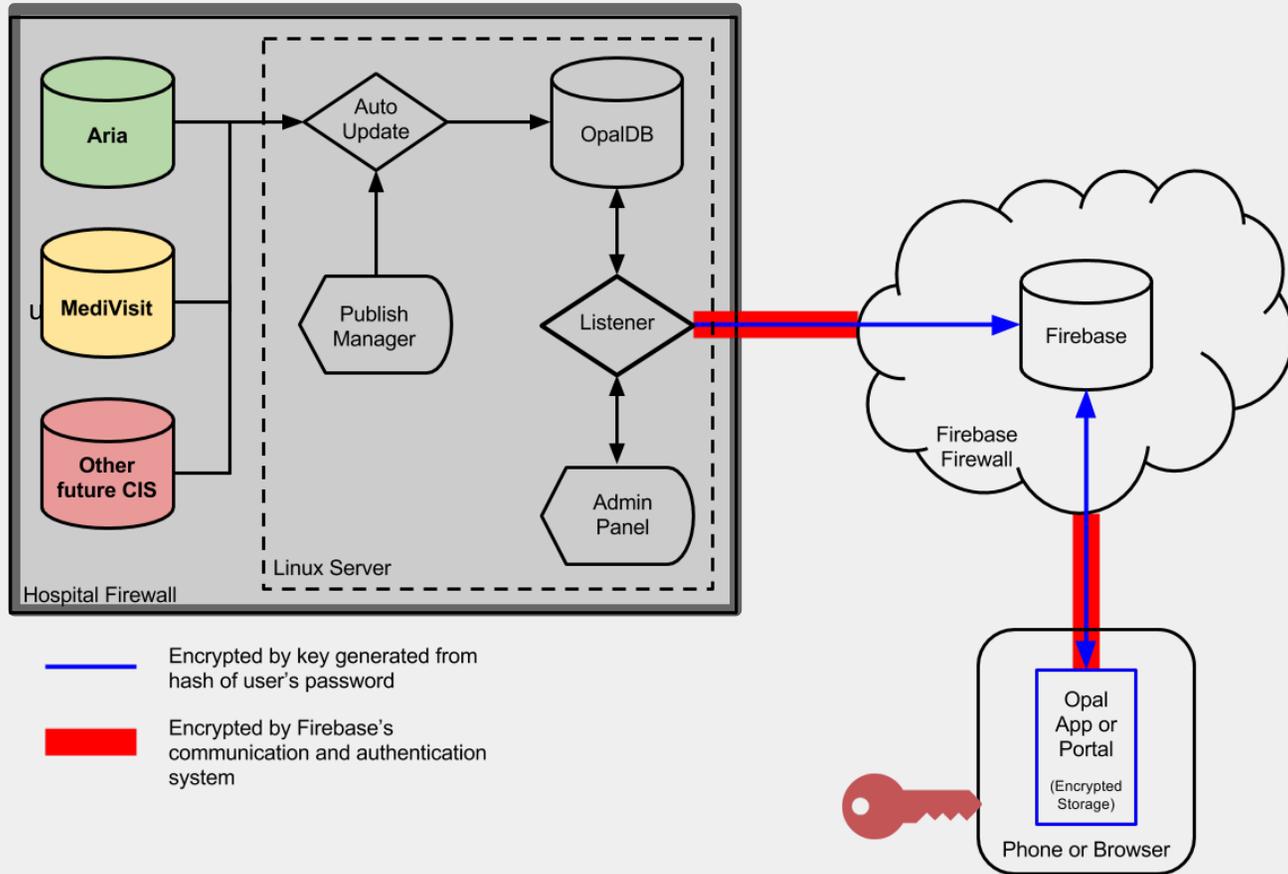
- SpeakOut 11:30
- My Chart
- Diagnosis
 - Notifications
 - Treatment Planning
 - Appointments
 - Lab Results
 - Clinical Notes
 - Treating Team Messages
 - Questionnaires
- Home My Chart General Education Account







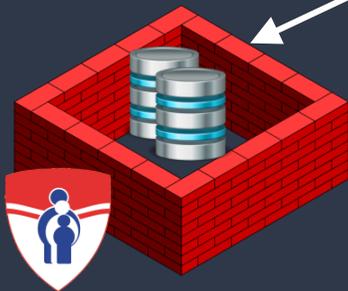
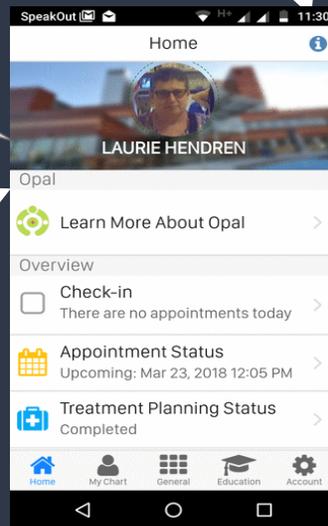
How it works ...



I am the center of my healthcare network.



I should hold the key to my own data.



Let's do it with ...



THANKS!!!!

The Opal developers, students, and patients; the MUHC Q+ initiative, MGH Corporation, MGH Foundation, Cedars Cancer Foundation, and the MUHC.



Patient focus group

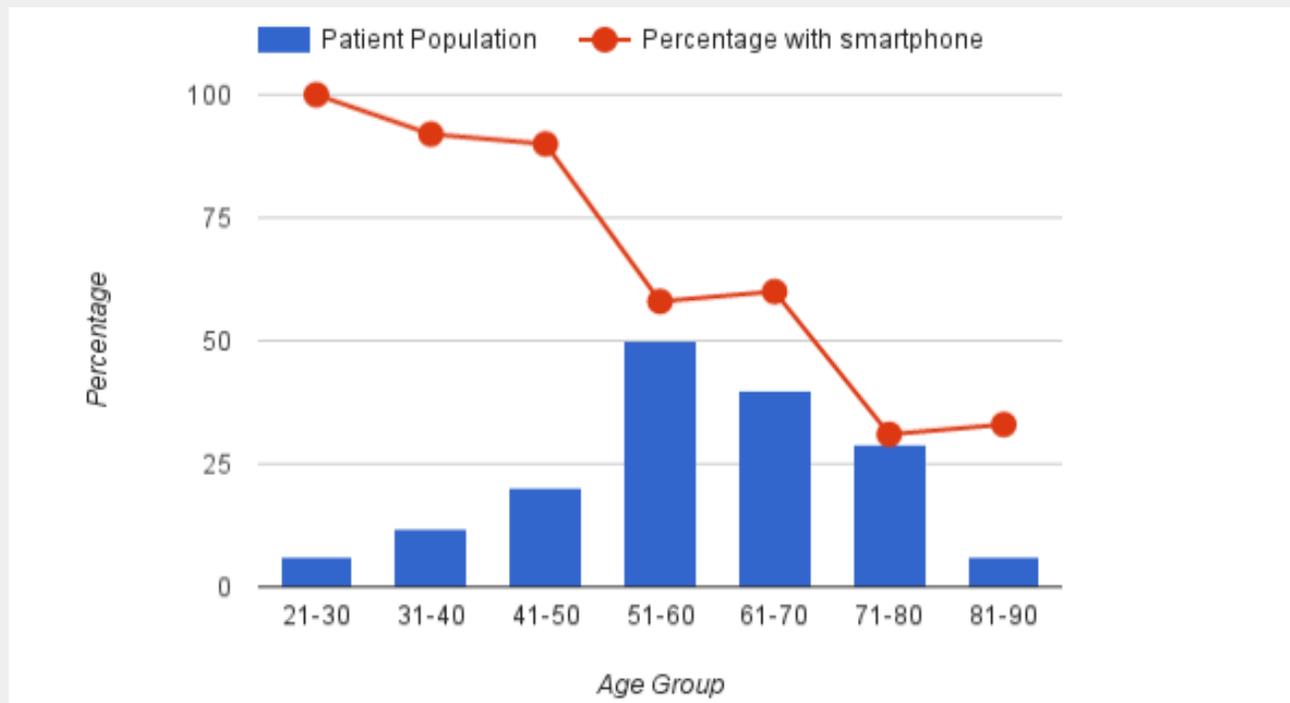


MUHC Patients' Committee

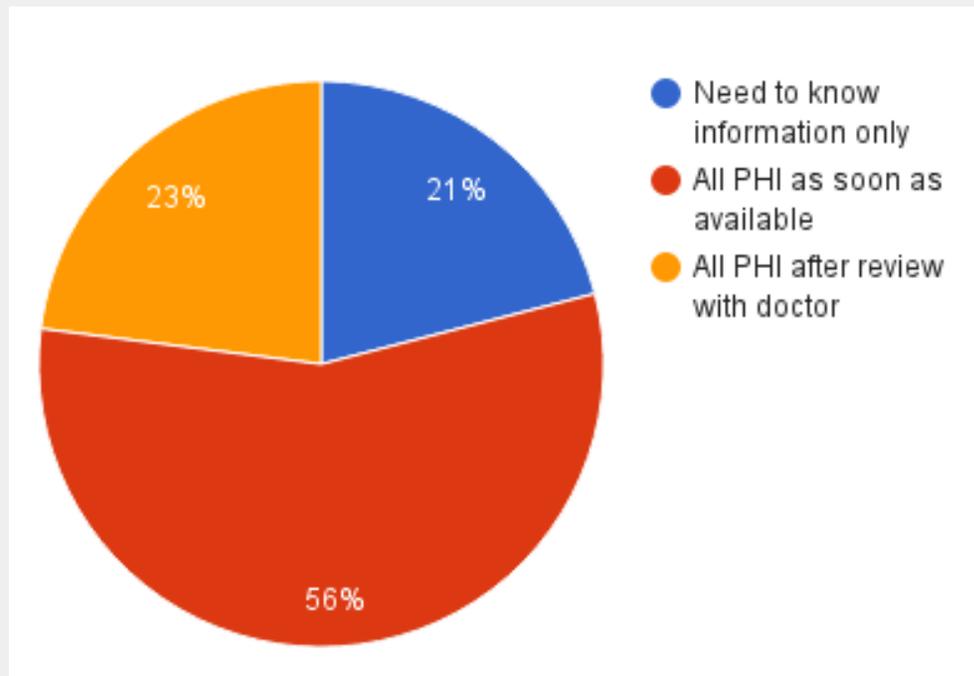


Extra Slides

Will patients use a smartphone app?

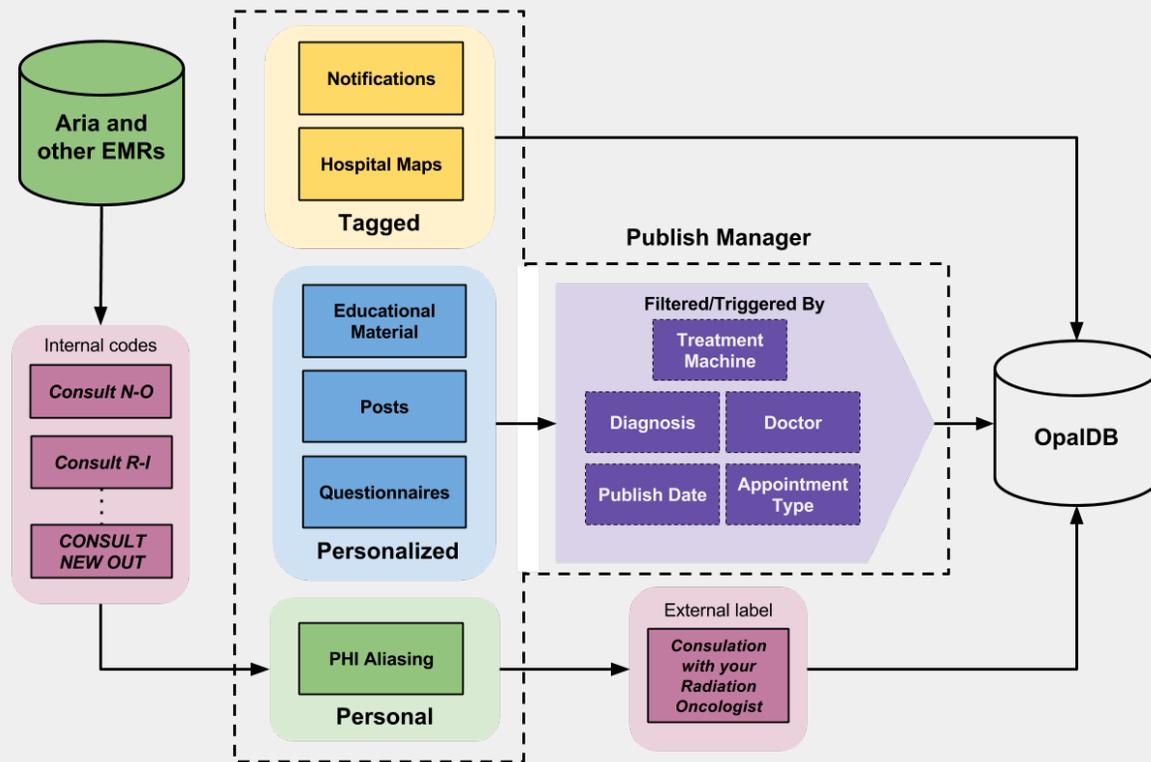


Opal - Personal Health Information Preferences



Cedars Cancer Centre waiting room survey, summer 2016 (n = 100 patients)

Opal - Publish Manager



Opal - Questionnaires

Questionnaires

Back

New In Progress Completed

Patient Satisfaction Questionnaire

Home My Chart General Education Account

Back 1/5

Please rate the following on a scale from 1 to 5: **Value of the App**

Extremely valuable

5 4 3 2 1

Not valuable at all

Home My Chart General Education Account

Back Summary Page

Answer the questions in red. Questions in green can be edited. Once all questions are answered, you can submit.

Submit Answers

#1: Value of the App 5/5

#2: Easiness 5/5

#3: App Features Show Answer

#4: Favorite Patient App Feature Show Answer

#5: Other Patient App Feature Suggestion Show Answer

Home My Chart General Education Account