

E-Consults at CHA: Recommendations from a qualitative study of primary care provider perspectives

Leah Zallman^{1,2,3}, Carolyn F. Fisher^{2,4}, Sofia Ladner², Kira Mengistu¹, Alison B. Rapaport^{1,3}, David Bor^{1,3}, Zhiheng He^{1,3}, Joes Sawady^{1,3}, Robert Stavert^{1,3}, Rachel Nardin^{1,3}, Adarsha Bajracharva⁵, Richard Pels^{1,3*}, Assaad Sayah^{1,3*}

*Drs. Pels and Sayah contributed equally, ¹Cambridge Health Alliance, Cambridge, MA ²Institute for Community Health, Malden, MA, ³Harvard Medical School, Boston, MA, ⁴Tufts School of Medicine, Boston, MA, ⁵University of Massachusetts Medical School, Worcester, MA

BACKGROUND

- Inter-clinician electronic consultation (e-consult) programs are becoming more widespread as we seek innovative ways to address growing specialty shortages.^(1,2)
- E-consults improve access to care, provide greater convenience, and lead to fewer visits and out of pocket costs.⁽¹⁵⁻¹⁸⁾ They are associated with high-quality care delivery that improves population health,^(5,19,20) and may lead to cost savings.^(21,22)

E-CONSULTS ARE CONSIDERED A MECHANISM TO:



- At CHA, e-consults were available for 1-4 years prior to the study, depending on specialty. E-consult orders for dermatology, endocrinology, neurology, and infectious disease were placed in an EMR shared by PCPs and specialists.

METHODS

- **Recruitment:** Purposeful maximum variation sampling strategy was used – the focus groups were conducted across low and high utilization sites and resident clinic sites. PCPs were advised via email, and participation was voluntary.
- **Data collection:** Three authors conducted the 30-60 minute focus groups at each clinical site. Participants completed written informed consent and an anonymous demographic survey at the start of each focus group.
- **Analysis:** Groups were audio recorded and transcribed, maintaining anonymity of participants. A codebook was finalized and transcripts were coded independently using qualitative analysis software (Dedoose, version 8.2).

RESULTS

- 7 Focus groups ranged from 2 to 12 participants and included 41 PCPs:
 - 11 at high utilizer sites, 14 at low utilizer sites and 16 residents
 - Participants were primarily female (73%), white (73%), family medicine and internal medicine providers (49 and 46% respectively), MD/DOs (85%), and had practiced medicine for a median of 7 years

Provider experience

- E-consults enhance provider experience: ↑ patient-centered care, PCPs learning opportunity
- PCPs reported an increase in their workload
- Challenge: inconsistent communication & workflows from variable PCP and specialist practice

Patient experience

- PCPs believe e-consults improve the patient experience with more convenient care:
 - Reduce time to specialist input & no. of appointments → ↑ convenience, ↓ cost
 - Validates patients' experiences: showing PCPs take their concerns seriously

Patient safety and outcomes

- PCPs reported that e-consults improve patient safety and outcomes by:
 1. Decrease wait times for patients by reducing no-shows
 2. Allow input from specialists to be documented in patient records
 3. Allow a "back door" way to secure timely appointments

Healthcare costs

- PCPs were less clear on the implications that e-consults have on healthcare costs.
- PCPs believed that by eliminating in person visits, ↓ unnecessary testing, and performing tests before specialists visits, e-consults may reduce healthcare costs

"I suppose it creates a little bit more work for us but I think it's the kind of work that we want to be doing. It's patient-centered, it's expanding our knowledge, and it's giving us actionable clinical things we can do. It's not just another form." - Resident clinic

"It's great to get the advice you were given by a specialist documented in the [patient record]...Now it's a consult in the system...I think formalizing things like that is increasing of safety and communication." - High-utilizer clinic

RECOMMENDATIONS

Workflow improvement opportunities

Communications tone

Raising awareness of newer e-consult services

For tele-derm: addressing challenges with images

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