

eReferral Working Group Meeting Summary

Meeting Summary

Meeting Chair: Alex Reis			
<u>Date and Time</u>	<u>Location</u>	<u>Note Taker</u>	<u>Next Meeting Date</u>
Wednesday, November 1, 2023, 1:00pm - 02:00pm ET	Virtual	Sadrina Petit, Project Analyst, Digital Health Interoperability	Wednesday, November 8, 2023 1:00pm - 02:00pm ET
Meeting Objectives: <ol style="list-style-type: none"> 1. Clinical Perspective 2. Agree on scope from proposed use cases 3. Walkthrough certain use cases 4. Feedback on open questions 5. Next Steps 			
Presenters			
Mark Fernandes – eReferral / eConsult Product Owner Dr. Rashaad Bhatt - Senior Clinical Leader			
Invited Guests			
Public			

1. Welcome and Introductions

M. Fernandes welcomed all participants to the working group meeting and introduced Dr. Rashaad Bhatt. The purpose of the meeting was to discuss and review the use cases related to the referral and consultation processes. Meeting materials and recording of the session will be made available on the InfoCentral working group.

2. Clinical Perspective

Dr. Bhatt the clinical lead, emphasized the clinical significance of the meeting on the "Scope of Proposed Use Cases for eReferral/eConsult Specification."

Dr. Bhatt emphasized physician burnout and the role of streamlined digital tools supporting eReferral/eConsult in addressing the burden.

Dr. Bhatt discussed the transition to electronic referrals, covering the shift from traditional paper-based referrals to electronic systems and eConsults in healthcare.

Dr. Bhatt also underscored the benefits of digital tools, emphasizing how electronic processes can enhance communication among healthcare providers, ultimately benefiting patients.

Additionally, Dr. Bhatt explored the conversion between eConsults and eReferrals, considering their potential in various clinical scenarios, contingent on context and clinical judgment.

Action: *Convey clinical insights, stress physician burnout importance, transition to e-referrals, highlight digital tool benefits, explore eConsult-eReferral interchangeability to align participants on use case relevance in healthcare.*

3. Agree on scope from proposed use cases

The agreed scope of the proposed use cases includes three primary use cases for the first release:

Referral to Service: This use case involves sending a referral request to a performer or healthcare provider, focusing on the initial step of sending a referral.

Consultation Request: This use case centers on requesting advice from a specialist or another healthcare provider. It is distinct from the referral process and emphasizes seeking expert guidance, without the specialist appointment with the patient.

Referral to Central Intake: This use case involves sending a referral request to a central intake or hub, which then forwards the request to the most appropriate downstream performing healthcare provider. It deals with the process of routing and managing referrals centrally.

These use cases are designed to be within the scope of the first release of the eReferral/eConsult Specification, with specific attention to sending and receiving referral and consultation requests and managing them through central intake processes. Further refinement and additional details will be considered in subsequent development phases, aligning with specific requirements from different jurisdictions.

Decision: *The first release will include three primary use cases: Referral to Service, Consultation Request, and Referral to Central Intake. These use cases revolve around sending and receiving referral and consultation requests, along with central intake management. Further refinements and details will be addressed in future development phases to align with specific jurisdictional requirements.*

4. Walkthrough certain use cases

The group discussed proposed use cases, with a focus on the Referral to Service use case within the eReferral/eConsult Specification. They emphasized addressing communication challenges and closing the referral process loop. The integration between requester points of service systems and referral management systems (RMS), patient consent, and service directories was also explored.

A high-level workflow diagram for the Referral to Service use case was reviewed, involving actors like the requester healthcare provider, point of service system, patient chart, RMS source, and RMS target. The diagram detailed the flow from searching for a service to submitting a referral request, notifying the performer, scheduling appointments, and providing updates.

Participants considered complexities like updates, communications, and document exchange as potential alternate flows. The importance of including a decision point for the performer's acceptance or rejection of a referral request was discussed (This is included as an alternate flow).

The idea of patient interaction through a portal to track referral status was mentioned, to be addressed in future use cases or extensions. Briefly, central intake use cases were touched upon, with a plan to review them in a future working group meeting.

The group expressed interest in providing online feedback on documents to enhance collaboration and feedback sharing. They acknowledged the need to improve this process and planned to explore alternative methods.

Action: *Explore patient portal for tracking referral status in future use cases or extensions. Briefly discuss central intake use cases.*

Action: *Enhance collaboration and feedback by providing inline feedback on documents. Plan for the next meeting with a focus on central intake use case, considering a pre-meeting review session for efficient feedback gathering.*

5. Feedback on open questions

What is the clinical perspective on clinician burnout?

Clinician burnout is tied to increased administrative and click burden, which is exacerbated by poor digital tools and technology adoption fatigue. The need for better digital tools and systems integration is emphasized.

What are the proposed use cases for the eReferral/eConsult Specification?

The proposed use cases include Referral to Service, Consultation Request, and Referral to Central Intake.

What is the distinction between use case number five and number six?

Use cases number five (Referral to Home and Community Care with a Care Coordinator) and number six (Referral to Central Intake) are similar, and there is a discussion about whether they might be considered the same concept. The main difference is that use case five focuses on chaining requests for Home and Community Care, while use case six covers a more general concept of central intake, including chaining, routing, and splitting of referral requests. Thus, they could be considered the same thing.

Are there plans to discuss data elements and details related to these use cases?

The detailed data elements and specifications for these use cases are not discussed in this meeting. Such details may be addressed in future meetings, with collaboration from organizations like CIHI, which is working on the pan-Canadian health data content framework.

Clarification of Use Cases: Some participants sought clarification on specific use cases, such as "referral with a booked appointment.", where the requester books the appointment with specialist. It was mentioned that it's not a common practice outside of community referrals, and there isn't a clear standard for this yet. This use case was deferred to a future release due to the complexities involved.

6. Next Steps

Review and provide feedback on the requirements of the presented use cases to ensure accurate representation of workflows and scenarios.

Schedule a separate meeting for discussing Direct and SMART Integration profiles, enabling participants to share insights, ask questions, and clarify profile details

Make InfoScribe (Confluence) accessible to all WG members for effective collaboration and contribution to documentation and specifications.

Promote InfoCentral forums for working group members to facilitate ongoing collaboration, discussions, questions, and feedback sharing.

Action Items

Action Item #	Action Item	Responsible	Due Date	Status
1	Schedule the next working group meeting for November 8, 2023, from 1-2pm ET	Infoway	November 3, 2023	Completed
2	Share presentation, meeting highlights and recording on InfoCentral	Infoway	November 7, 2023	In Progress
3	Review the requirements of the use cases	Working group members	November 16, 2023	In Progress
4	Schedule a discussion on Direct and SMART Integration profiles.	Infoway	November 16, 2023	In Progress
5	Work on opening up InfoScribe (Confluence) to WG members.	Infoway	November 16, 2023	In Progress
6	Attend the Specification Balloting Process Webinar on November 28 from 1 to 2 PM ET.	Infoway	November 28, 2023	In Progress