



**Canada Health Infoway**

# **Patient Summary Working Group (PSWG)**

**January 30, 2024**

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# Agenda

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- 1 Welcome & Announcements
- 2 Status of Ballot Process
- 3 Attester: Implementation Considerations
- 4 Patient Summary Use Cases, Work in Progress & Look into the Future
- 5 Next Steps

# Welcome & Announcements

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- **JIRA Webinar:** Please join us on Tuesday, February 6th, at 12 PM ET for a JIRA webinar ([calendar details](#)).

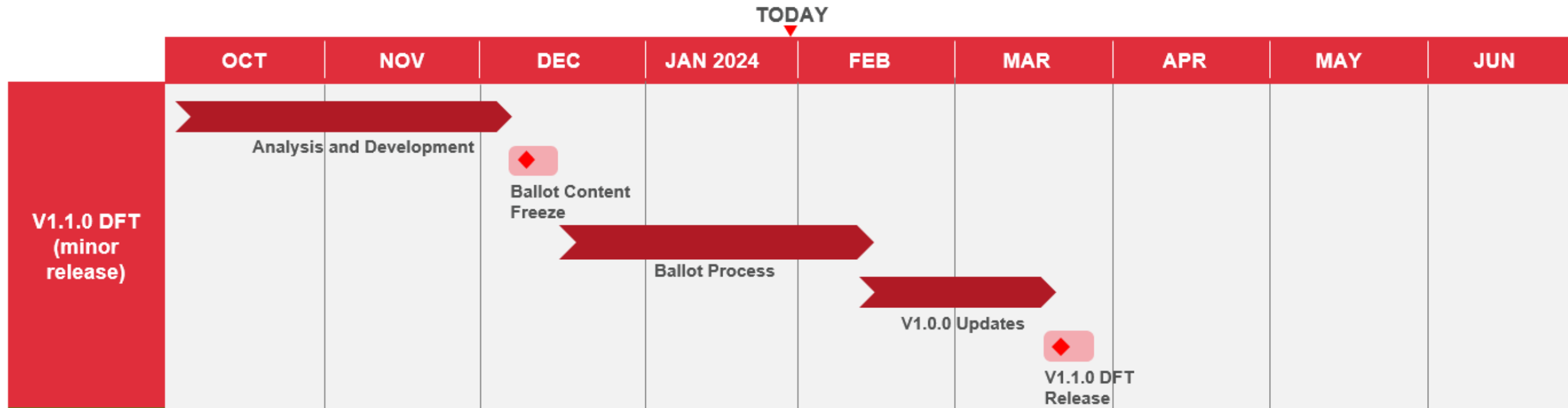
This session aims to demonstrate how to navigate JIRA for tracking, submitting, and documenting feedback for the specifications. Note: The current ballot cycle will not be impacted by these new JIRA processes. The PS-CA will use JIRA for subsequent ballot cycles.

- **Canada Health Infoway joins IHE International as a benefactor member**, alongside the Radiological Society of North America (RSNA), HIMSS, and IHE Catalyst.

*“This is very exciting news because it will strengthen our relationship and collaboration and give us the opportunity to both consume and contribute to international interoperability, opening new avenues for promoting Canadian innovation. We will organize a community meeting very soon to discuss what this means for us and next steps” Attila Farkas, Senior Director, Interoperability Product Portfolio*

Read more [here](#).

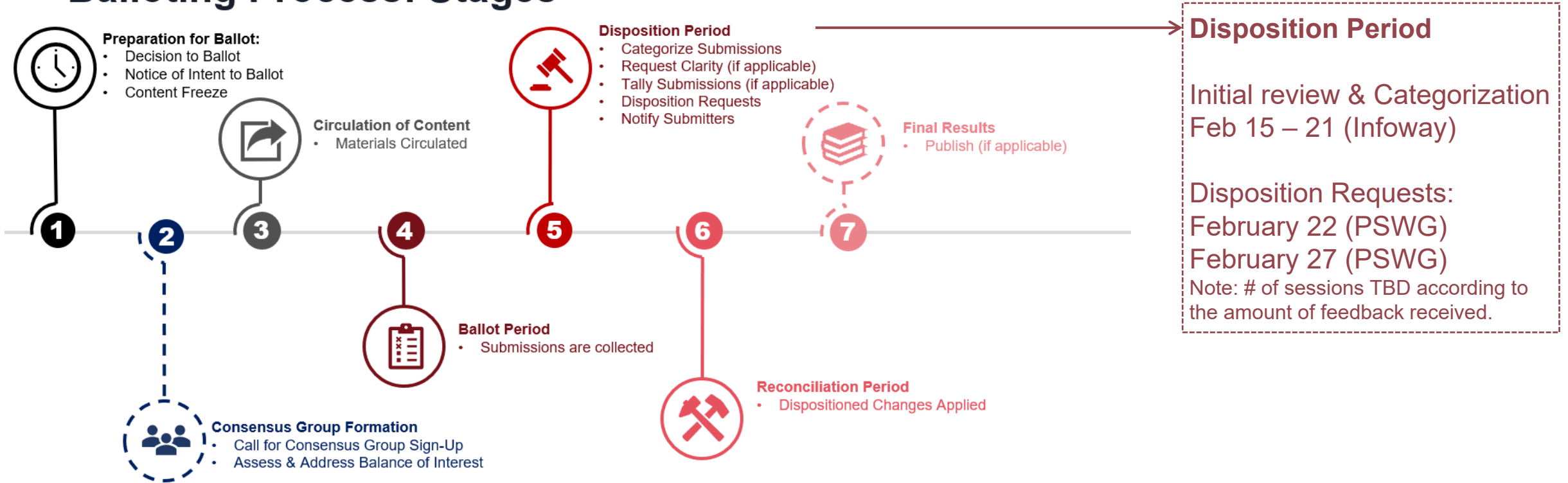
# PS-CA v1.1.0 DFT



- Ballot period is open for PS-CA v1.1.0 DFT-Ballot and CA:FeX v2.0.0 DFT-Ballot
- Ballot submission timeline: January 15 – February 14
- Specifications and ballot submissions spreadsheets are available on InfoScribe here: [PS-CA](#) and [CA:FeX](#)
- On November 28, 2023 we hosted an introduction to balloting. The recording is available [here](#)

# Where we are in the Ballot Process

## Balloting Process: Stages



# Attester: Implementation Considerations

Attester Definition: A participant who has attested to the accuracy of the composition/document.  
Attester is identified as a MustSupport data element.

In the context of the PS-CA, Must-Support on any data element SHALL be interpreted as:

When creating patient summary content:

- To be considered a conformant vendor you SHALL show that your system is capable of producing a value for that element
- To produce a conformant instance you SHALL show that your system can send/relay the data if available and appropriate

When receiving patient summary content:

- SHALL be capable of processing resource instances containing Must Support data elements without generating an error or causing the application to fail.
- SHOULD be capable of displaying Must Support data elements for human use, or processing (e.g., storing) them for other purposes.
- SHALL be able to process resource instances containing Must Support data elements asserting missing information.

Three PTs currently working on LPR implementations.

- Attester = Not sent/allowed to be sent
- Attester = Organization
- Attester = Practitioner

## Discussion

Jurisdictions, Vendors, Summary Users...

- What do you feel are the potential positive and negative impacts of allowing different options for how the Attester field is being implemented?
- How should PS-CA 1.1 address these differences (e.g., apply MS to some reference targets, remove MS)?

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**Patient Summary**  
**Use Cases and**  
**Sample Clinical Scenario**

# Patient Summary Use Cases

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The Patient Summary can support various scenarios including:  
**Unexpected or unscheduled situations | Transitions of care | Coordination of care**

Use cases may include:

- **Unattached/unaffiliated patient**, with access to their patient summary (e.g. via mobile device), presents patient summary at point of care (e.g., **virtual appointment, walk-in clinic, emergency department**)
- Patient needs a snapshot of their health information **while travelling** within Canada or abroad
- Patient needs a snapshot of their health information for **intra-provincial/territorial care**
- Health Care Provider (HCP) who is unfamiliar with the patient (e.g., virtual appointment, walk-in clinic, community care or emergency department) **requires a snapshot of the patient's medical information.** HCP accesses the patient summary according to the jurisdictional implementation (e.g., via provincial EHR or by notification request to the Primary Care Provider)
- HCP includes the patient summary as **supporting information** for a **patient referral** or when requesting a **consult for a patient**
- HCP provides patient summary with up-to-date medication list as part of a **hospital discharge**

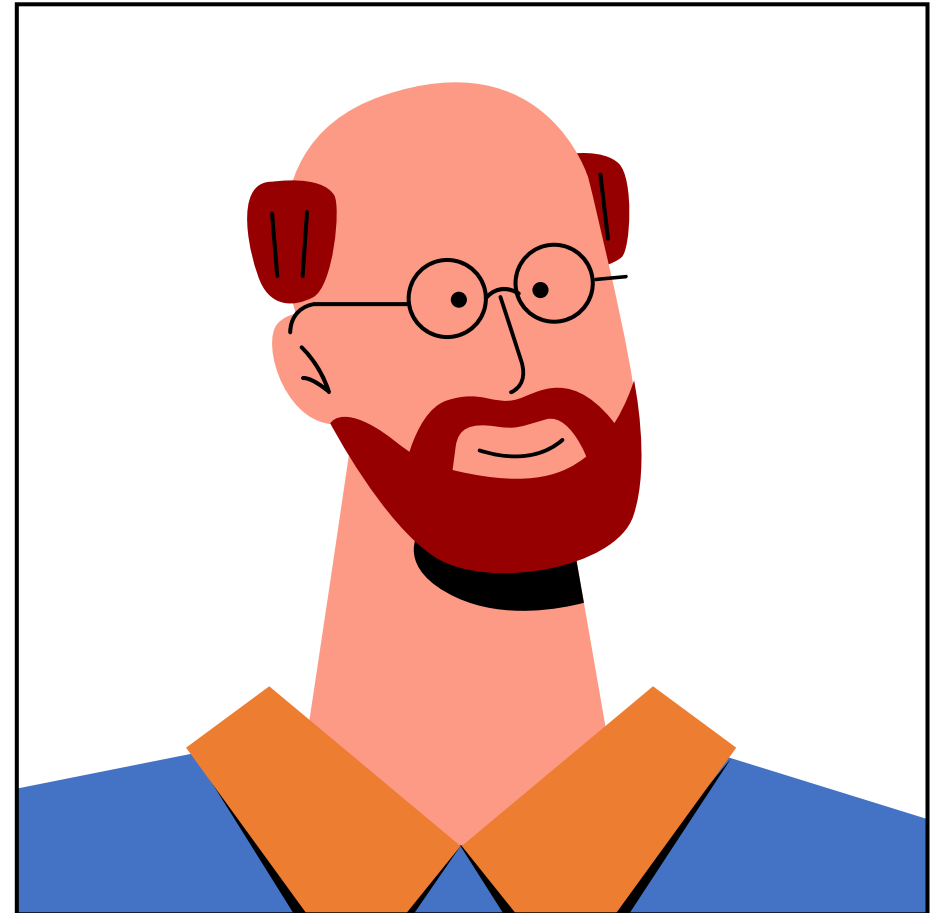
# Patient Summary Scenario

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## Unattached Patient

### About Jean

- Jean is 51 years old from a small urban centre in Canada, working as a contract employee in a large city, hours away from home.
- He struggles with obesity, dyslipidemia, coronary artery disease (past myocardial infarction), which have been stable with medications for years.
- He used to smoke but has quit since recovering from the MI (heart attack).





# Scenario: Unattached Patient

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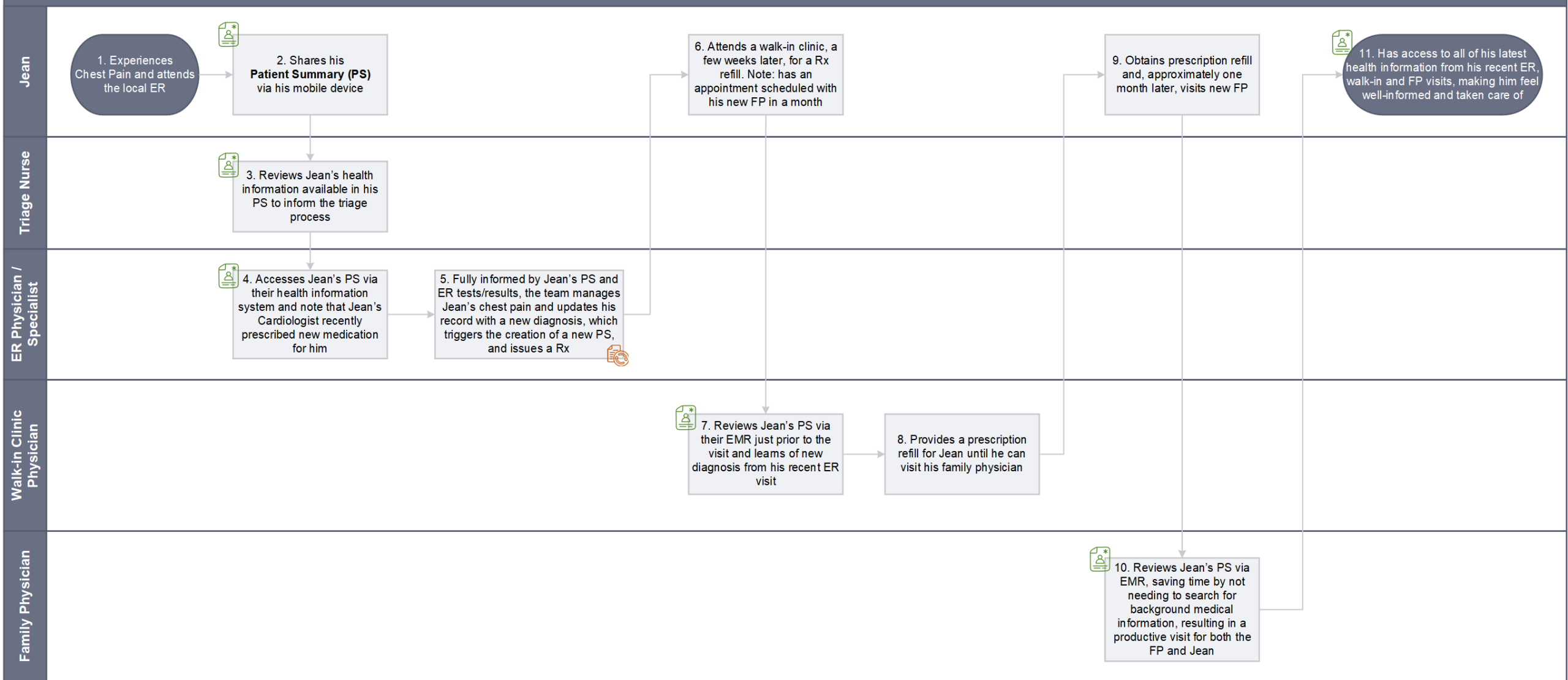
1. Jean experiences chest pain, while working away from his home in a small urban centre, and attends the local ED.
2. Jean is able to view his Patient Summary (PS) through a phone app and presents it to the triage nurse.
3. The triage nurse reviews Jean's Patient Summary, which helps to prioritize his presenting concern.
4. The ED physician and local specialist access the most recent PS in their hospital information system (HIS), which reflects a new medication prescribed by Jean's cardiologist.
5. The ED physician and local specialist are fully informed in managing Jean's chest pain based on the historical information from the Patient Summary and ED tests/results. Fortunately, the pain is determined to be non-cardiac in nature, and a prescription is issued.
  - a. The PoS System identifies that a relevant change has been made to Jean's PS information and triggers the process to create a new Patient Summary (i.e., new Patient Summary is created and submitted as the current Patient Summary on record)
6. Jean visits a walk-in clinic a few weeks after the ED visit for a prescription refill.

Note: Jean has an appointment with a local family physician who is taking on new patients, but it is still a month away.
7. The walk-in physician accesses Jean's most current PS through her EMR just before the visit. This most current PS includes the new diagnosis from the recent ED visit.
8. The walk-in physician provides Jean with a prescription refill until Jean is able to visit his new family physician.
9. Jean obtains his prescription refill and, approximately one month later, has his first visit with his new family physician.
10. The subsequent visit to the new family physician is productive since the doctor also accesses the most current PS and wastes little time searching for background medical information.
11. Jean has access to all of his latest health information from his recent ED, walk-in clinic, and family physician visits, making him feel well-informed and taken care of.



# Scenario: Unattached Patient

## UC-9: Unattached Patient with Access to Their Patient Summary



Note: The numbered steps align with the scenario textual description on the next slide.



**Patient Summary**  
**Work in Progress +**  
**PS Innovation**

# Patient Summary – Work in Progress

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- Balloting in progress for the PS-CA v1.1.0 DFT-Ballot and the supporting CA:FeX v2.0.0 DFT-Ballot and CA Core+ v0.1.0 DFT-Ballot
- Infoway is working with two jurisdictions on their Patient Summary Limited Production Rollout (LPR) implementations planned for the first quarter/into the second quarter of 2024. Activities include:
  - Developing clinical workflows with seamless integration into existing workflows, including clinician engagement
  - Developing user stories in support of EMR vendor development and Clinician/Vendor discussions
  - Analysis and documentation of jurisdictional LPR/MVP implementations
  - Vendor testing and conformance (Early Implementors Program)
  - Developing a change management toolkit to support jurisdictional use to build awareness and buy-in for patient summary
  - Patient Summary awareness campaign (pan-Canadian education)

# Patient Summary + Innovative Technologies

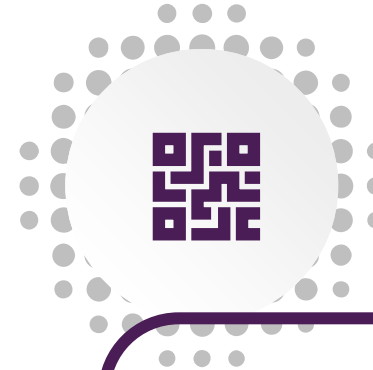
The future of the Patient Summary may not be that far off! Recently, two **real** and **exciting** pairings of the Patient Summary and technology have been presented at conferences; both options taking another step toward improving the patient experience and ensuring the right information is available at the point of care.



## AI + PS

In November 2023, at the Canada Health Infoway Partnership conference, Infoway hosted a session called “Demonstrating the Value of the Patient Summary to Inform Care Delivery and Enable a Better Patient Experience”. In this session, the **power of AI was combined with the Patient Summary.**

Watch a short demo [here](#).



## QR CODE + PS

In January 2024, at the Athens Digital Health Week, Washington State presented its WA Verify+ system demonstrating their progress in a patient’s ability to access, augment, and electively share their health data with access via a QR Code.

Read more [here](#).

Be sure to check out [e-Patient Dave’s blog](#) too!

# PSWG Next Steps

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- ❑ Stakeholders: Submit ballot submission feedback for PS-CA and CA:FeX by February 14<sup>th</sup>.
- ❑ Infoway: Schedule PSWG meetings for the ballot submission preparation and content review. Meetings will be scheduled for:
  - February 13: Ballot Preparations (2<sup>nd</sup> last day for submissions), Questions, and other topics TBD
  - February 22 & 27: Ballot submission content review
- ❑ Infoway: Manage ballot submissions and prepare for the Disposition phase



**Canada Health Infoway**

# Thank you!

## Contact Information:

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[infoway-inforoute.ca](http://infoway-inforoute.ca)

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# Helpful Links

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## Published specifications (available on InfoScribe):

- [PS-CA v1.1.0 DFT-Ballot](#)
- [CA:FeX v2.0.0 DFT-Ballot](#)
- [CA Core+ v0.1.0 DFT-Ballot](#)

## Working Groups (hosted on InfoCentral):

- [Patient Summary](#)
- [eReferral](#)

## Projectathon Information (available on InfoScribe):

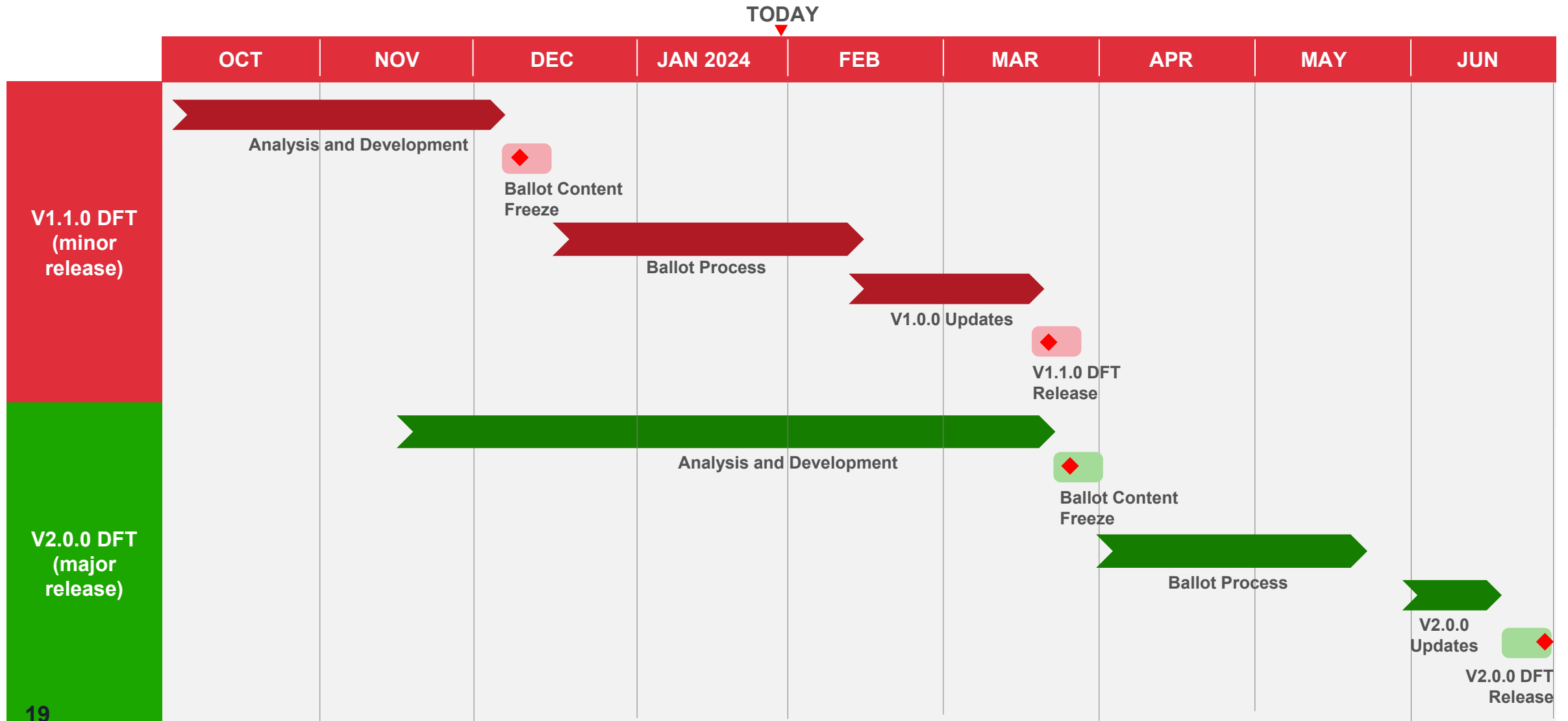
- [Overview of Projectathons](#)
- [2023 Final Report](#)

# PSWG Membership

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- **PSWG Membership** – please ensure you have signed up as a PSWG member. This will ensure you receive notifications about upcoming meetings, forum conversations and shared documents/videos.

# Patient Summary High-Level Timeline



# PSWG Objective:

**Collaborate** on the various aspects of creating, distributing, and consuming a health records **summary for a patient** resulting in a **harmonized pan-Canadian specification** that can be implemented across the country to **improve Provider access to Patient data** at the point of care and improve care coordination.

