



Rapid **A**ccess to **C**onsultative
Expertise



electronic **C**onsultative **A**ccess to
Specialist **E**xpertise

How can RACE and eCASE help coordinate care for older adults?

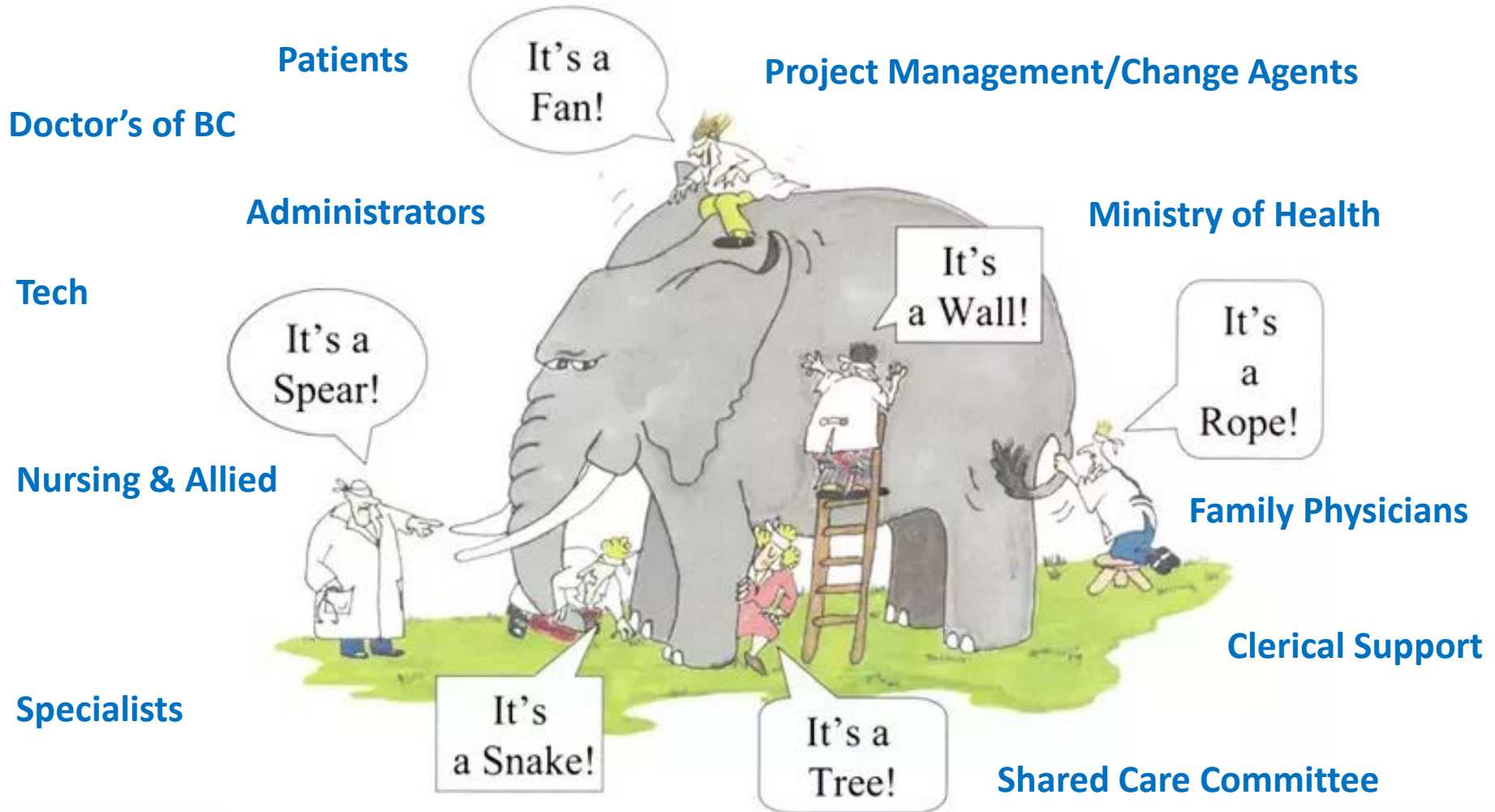
Margot Wilson RN, MSN
Luc Holland MHA



The PHC Shared Care Bunch



Working Together



Goals of Shared Care

- Redesign collaboration between specialists and FPs
- Intent to:
 - Foster mutual trust and respect
 - Improve collaboration
 - Improve communication
 - Cultivate collegial relationships
 - Bridge gaps in care to improve health and patient/provider experience



Literature

Barbara Starfield

- Importance of coordinated, comprehensive primary care

Shifting the Balance of Care

Nuffield Trust

Most positive evidence

- Enabling FPs to access specialist opinion can help them manage patients in primary care and avoid unnecessary referrals



[Milbank Q.](#) 2005 Sep; 83(3): 457–502.

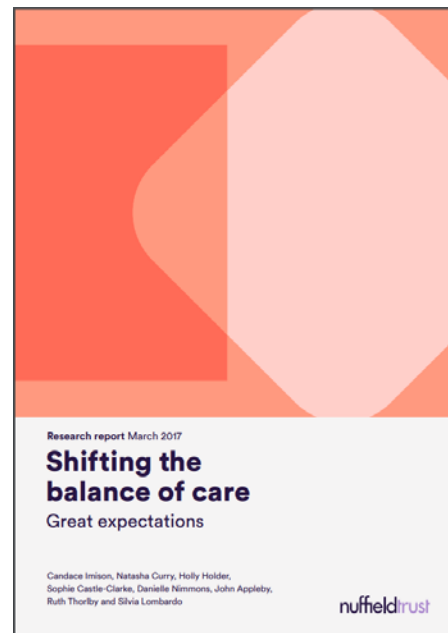
doi: [10.1111/j.1468-0009.2005.00409.x](#)

PMCID: PMC2690145

PMID: [16202000](#)

Contribution of Primary Care to Health Systems and Health

[Barbara Starfield](#), [Leiyu Shi](#), and [James Macinko](#)



Rapid Access to Consultative Expertise

- Establish in June 2010 (5 services)
- Currently at 45 specialties
- **>50,000 calls**
- “RACEApp+” available on desktop/mobile started July 2015



www.raceconnect.ca



Current RACE Specialties



Vancouver Coastal Health

- Cardiology
- Cardiovascular Risk & Lipid Management
- Emergency Medicine
- Endocrinology
- General Internal Medicine
- General Pediatrics
- Psychiatry - Geriatric
- Geriatrics
- Orthopedic Conditions - Hand & Upper Limb
- Infectious Diseases
- Orthopedic Conditions - Leg, Ankle, Foot
- Heart Failure
- Nephrology
- Neurology (RACEapp+ only)
- Obstetrics and Gynecology
- Ophthalmology
- Otolaryngology/ENT
- Parkinson's Disease & Other Movement Disorders
- Psychiatry – Adult
- Radiology (RACEapp+ only)
- Respiriology
- Rheumatology

Provincial Services

- Addictions - Perinatal
- Addictions Medicine
- Cardiac Transplant
- Gastroenterology – Pediatric
- HIV Care, Treatment & Prophylaxis
- Infectious Diseases – Pediatric
- Infectious Diseases – Tropical & Post-travel Medicine
- Medical Assistance in Dying Advice
- Medical Refugee Health
- Orthopedic Conditions – Pediatric
- Perinatal Psychiatry
- Physical Medicine & Rehabilitation
- Psychiatry – Child & Adolescent (RACEapp+ only)
- Psychiatry – Eating Disorders
- Rheumatology – Pediatric
- Sexually Transmitted Infection
- Sleep Disorders Service
- Thrombosis
- Trans Gender Care
- **Tuberculosis (NEW)**
- Urology (RACEapp+ only)
- Vascular Surgery

2018 RACE - Total Requests (per month)

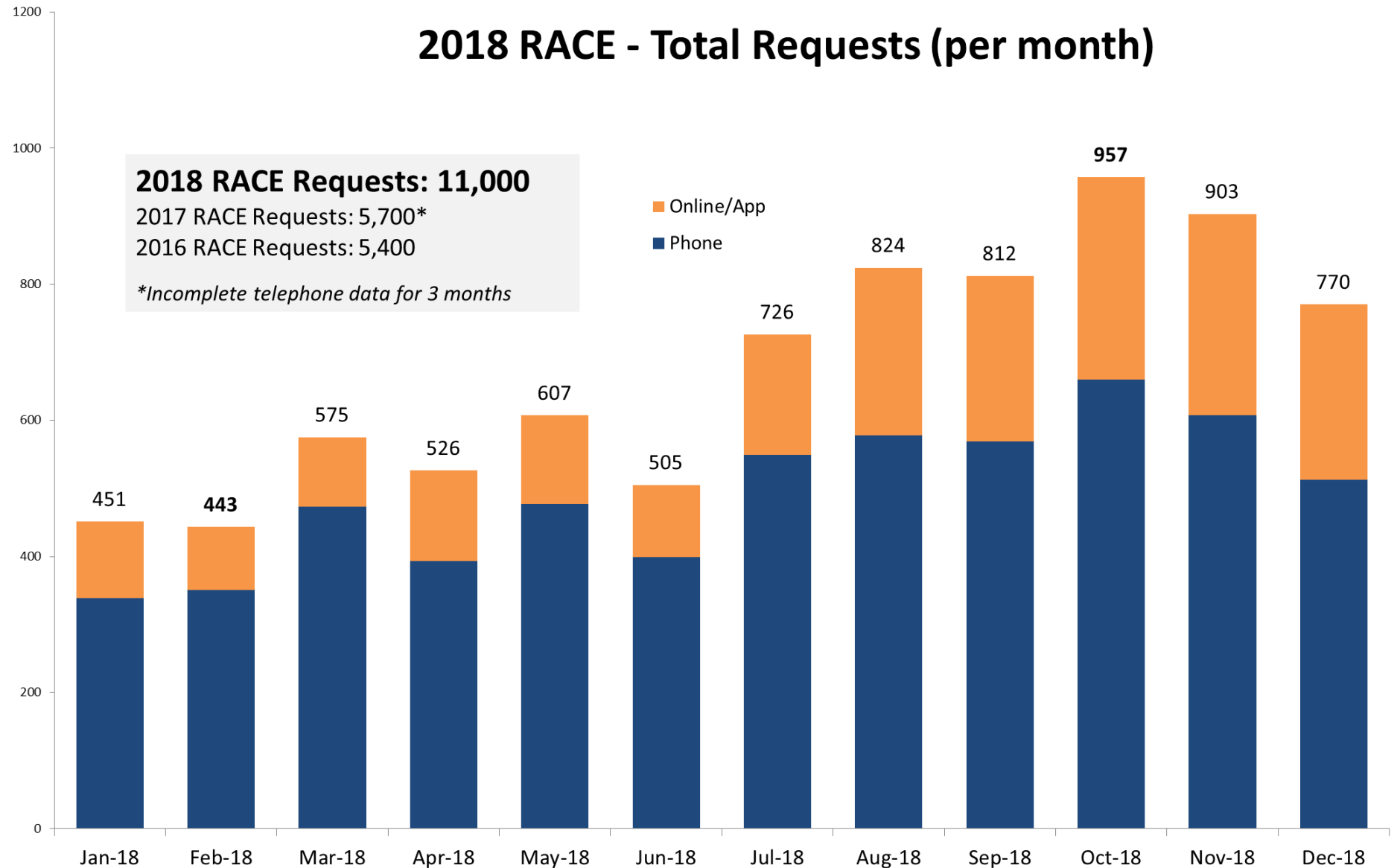
2018 RACE Requests: 11,000

2017 RACE Requests: 5,700*

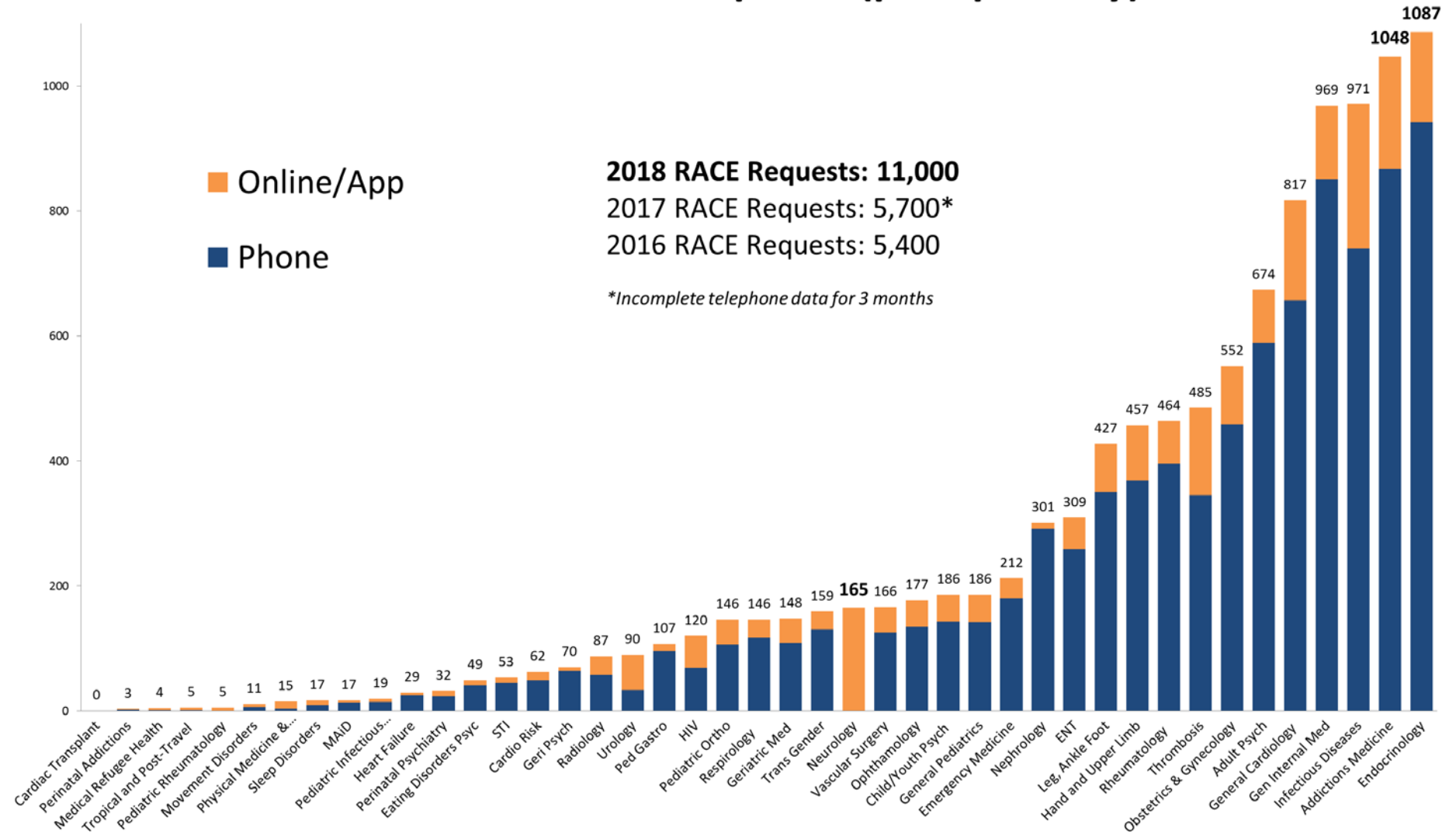
2016 RACE Requests: 5,400

**Incomplete telephone data for 3 months*

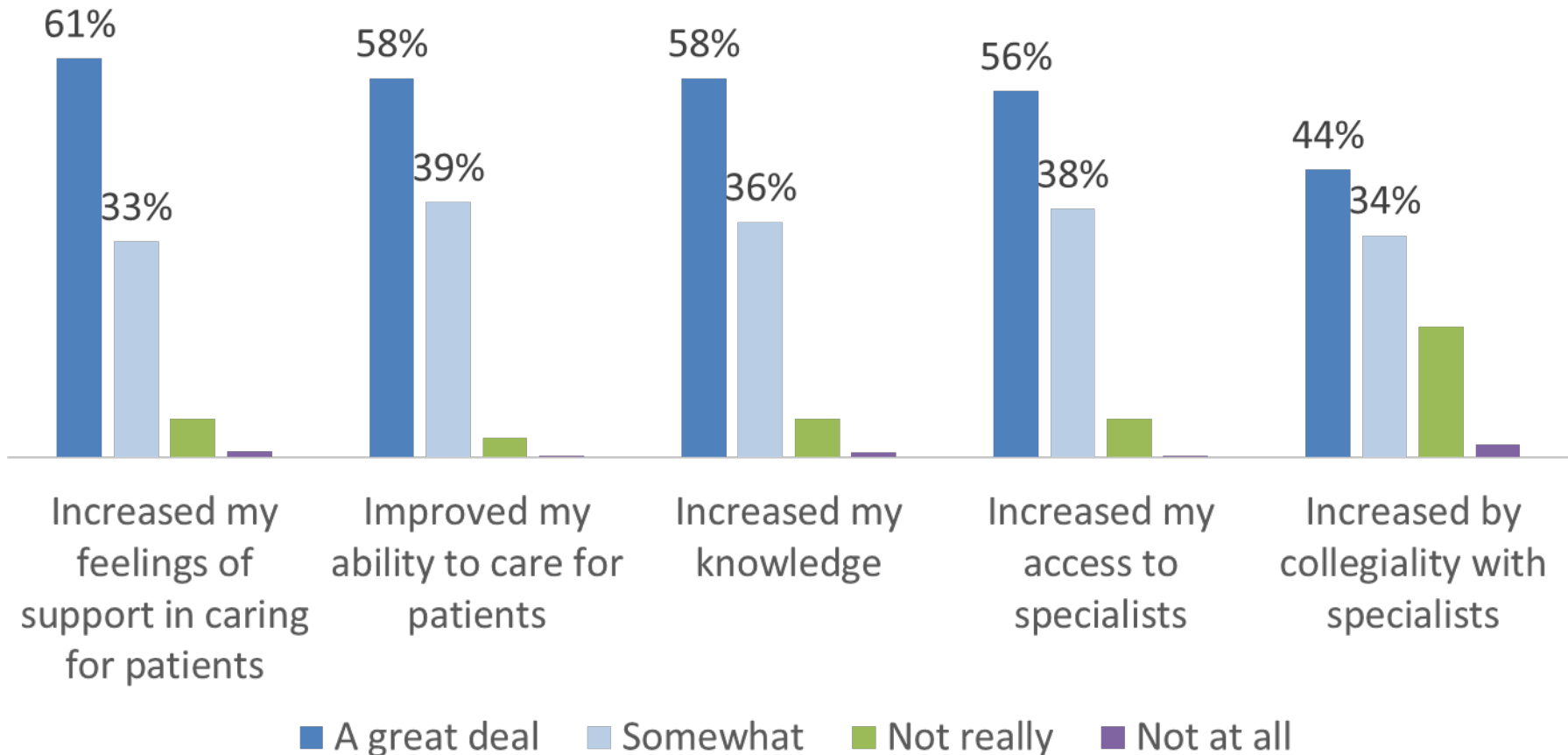
Online/App
Phone



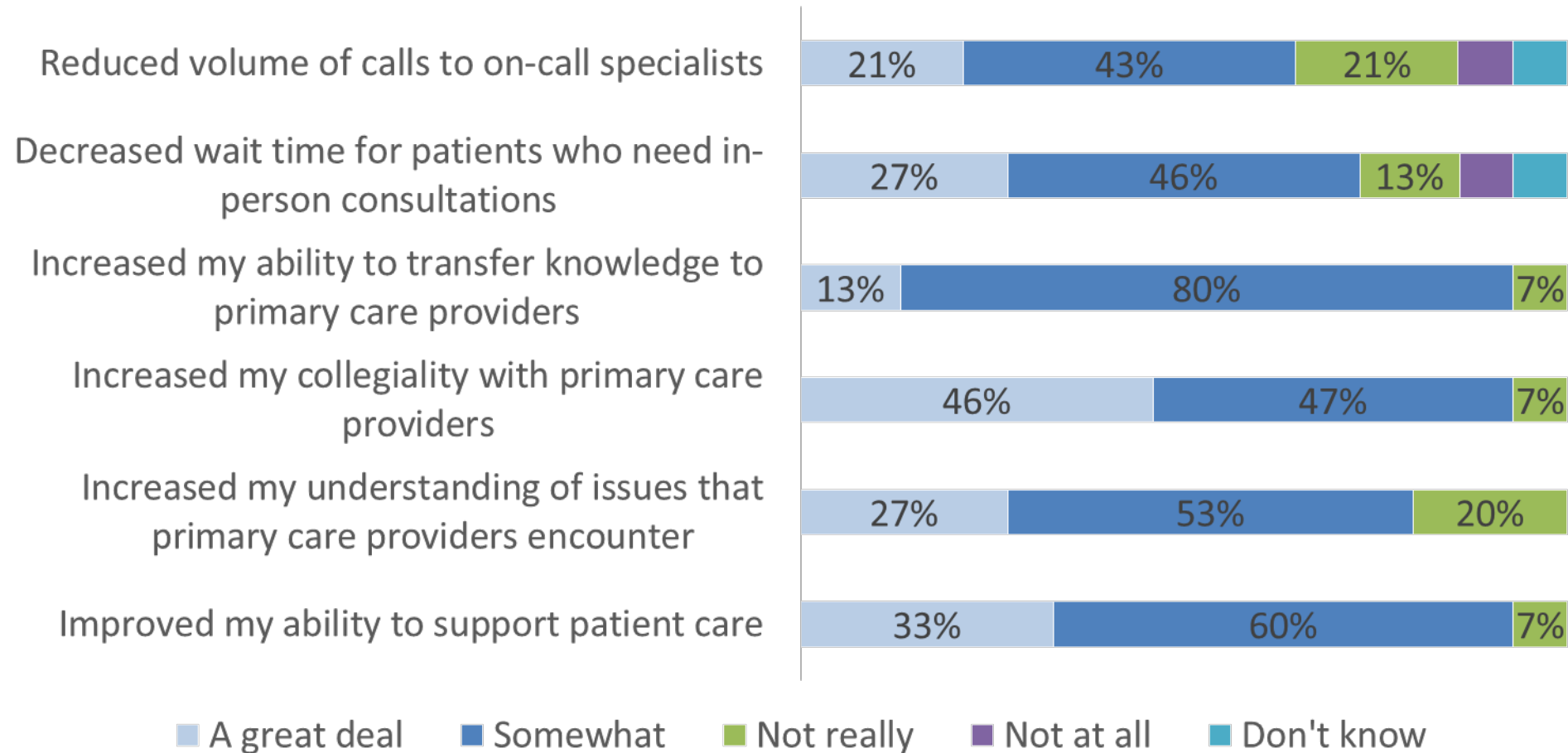
2018 Total RACE Requests (per Specialty)



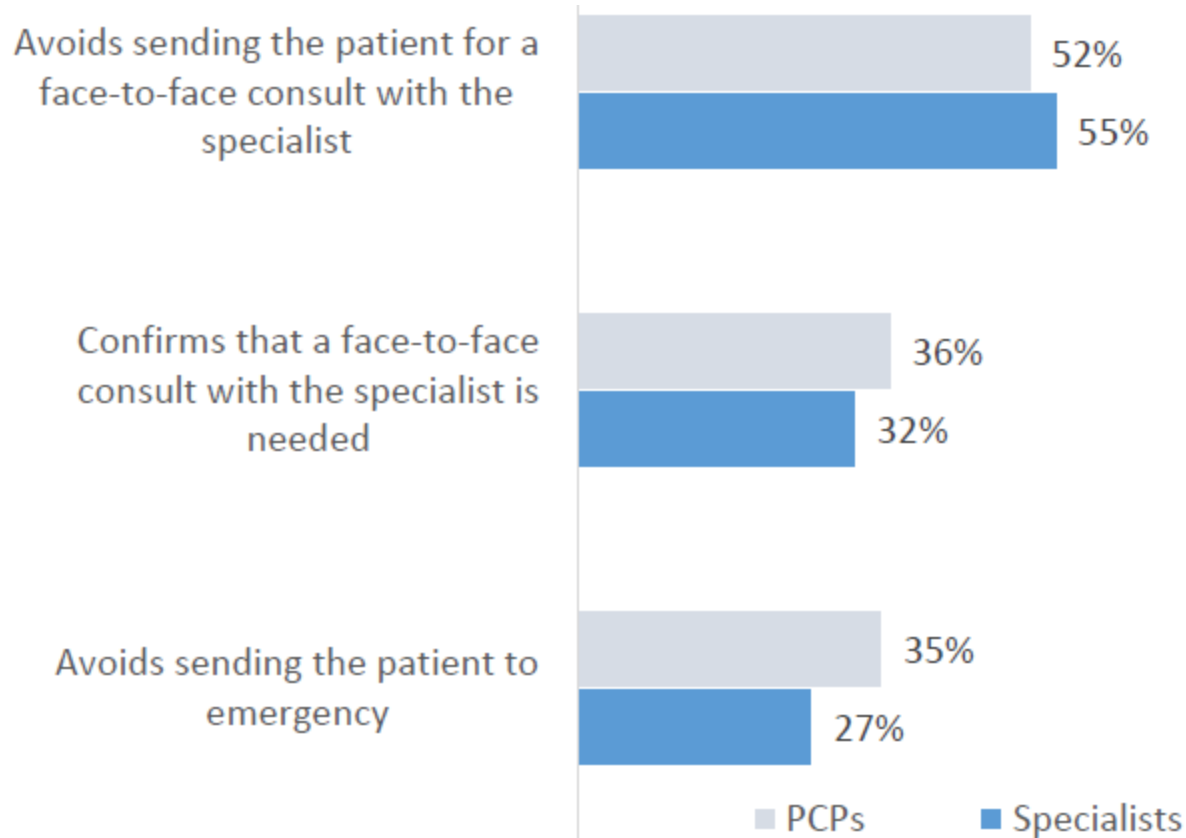
Feedback: Family Physicians



Feedback: Specialist Provincial Evaluation



Provincial Evaluation – System Outcomes



Average Percentage of Calls with Each System Outcome



electronic Consultative Access to Specialist Expertise

- **Non-urgent** complement to the existing RACE telephone advice service
- Answer assured **within one week**
- Access to specialist advice through a **secure messaging platform**
- Specialties: General Internal Medicine (Rural and Urban), Ophthalmology, ENT, Neurology, Pediatrics, Cardiology, Rheumatology, Respiriology, Thrombosis, Addictions Medicine, Child and Youth Psychiatry, Hand and Upper Limb, Medical Imaging, Otology, Pediatric Rheumatology, Interventional Radiology
- Billing: G10005 for specialists (\$10.10), No support for Family Practitioners

Based on the successful Ottawa-based service

- Over 35,000 cases closed
- Average response time – 2 days
- 106 Specialty Services
- **High value rating by primary and specialty care**



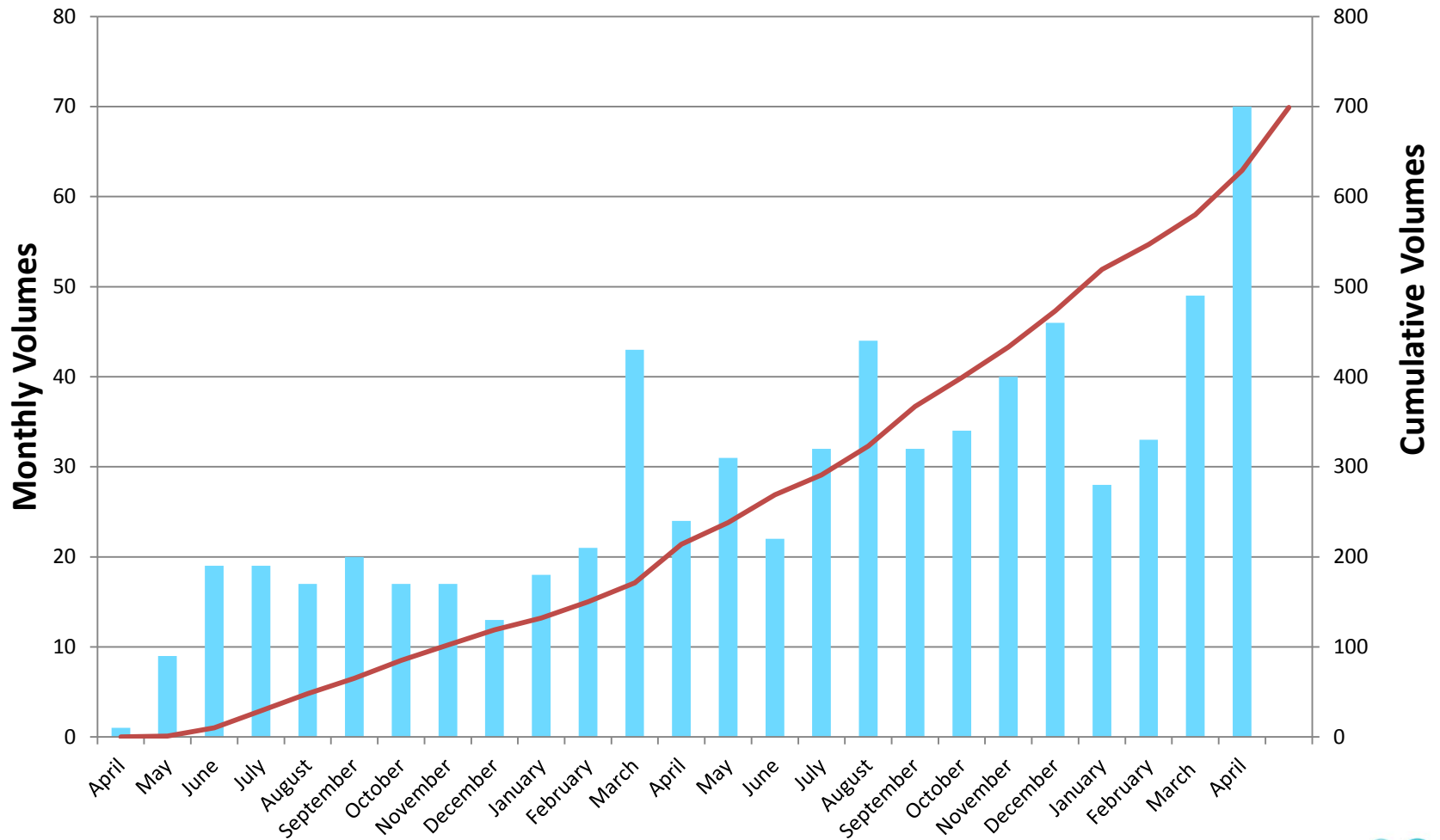
		
Clinical Focus	Focused on urgent clinical concerns	Focused on non-urgent clinical concerns
Specialist Availability	Operates from 8:00am – 5:00pm, Monday - Friday	Questions can be submitted at any time, and specialists respond at their convenience
Response Time	A response is assured within 2 hours	A response is assured within 7 days
Information Transfer	<i>Unable</i> to transfer images and other clinical documentation	<i>Able</i> to transfer images and other clinical documentation Can take photos within the app without being stored on a phone
Education	Specialists verbally describe latest research	Specialists can send research and other educational materials directly

Results to date

- ~700 conversations held to date
- Primary Care likelihood to recommend to their colleagues – 4.5/5
- Average time it takes specialist to compose response – 15 minutes
- Specialist likelihood to recommend to their colleagues – 4/5
- 53% of eCARE conversations avoided a face-to-face referral, 9% avoided a lab test/diagnostic image
- 8% of questions resulted in previously unconsidered referrals, and 8% of questions resulted in a different referral than initially considered
- Average response time – 1.7 days

Adoption and Volumes

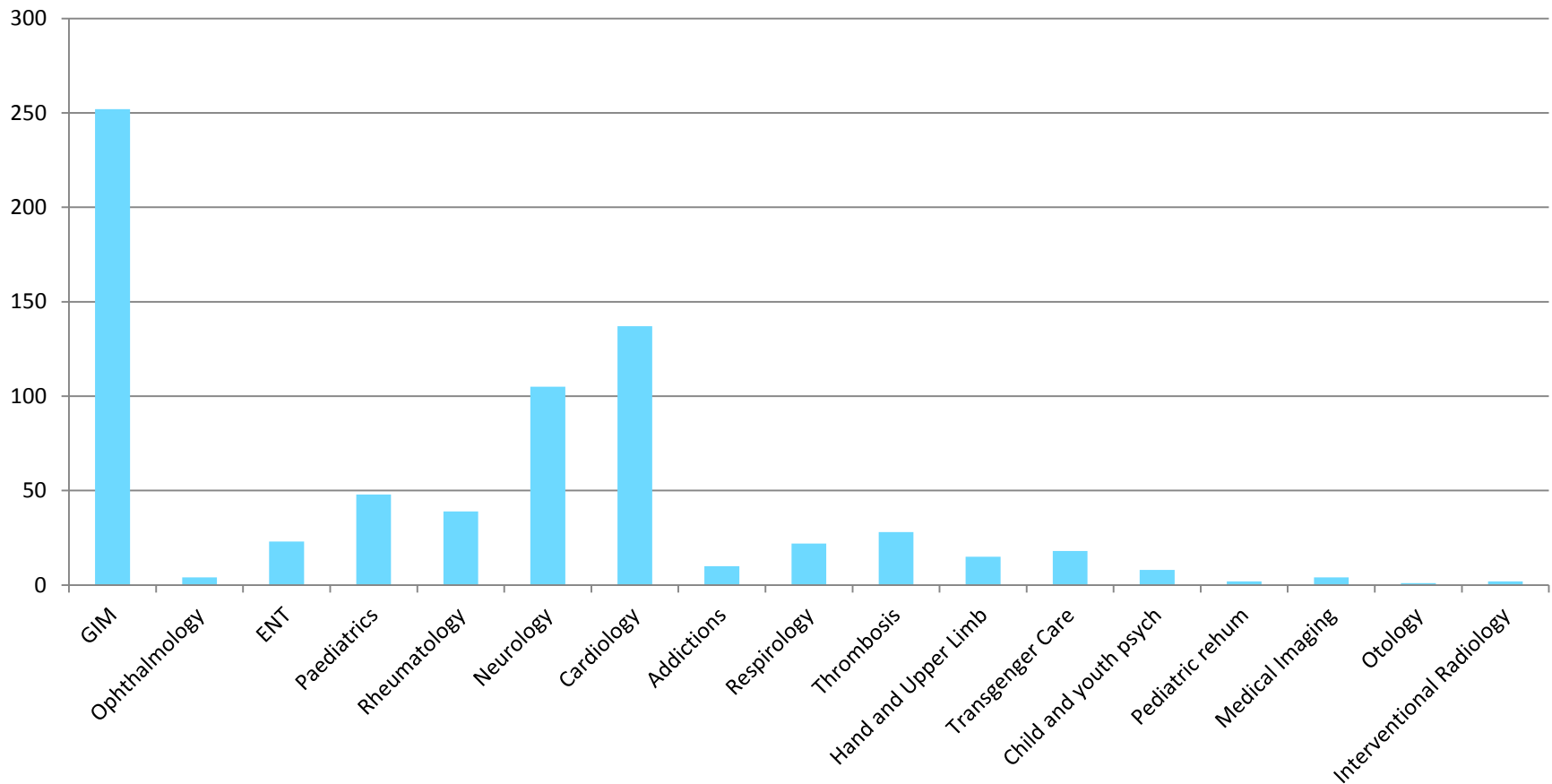
Monthly/Total eConsult Volumes





Adoption and Volumes: by Specialty

eCASE Volumes by Specialty





Challenges & Next Steps

- EMR Integration
- Physician remuneration
- Spread
- Sustainability



How can RACE and eCARE help coordinate care?

- Support primary care in the community
- Decisions in elder care often require **evidence-informed decisions** (from specialists), rather than evidence-based
- Remain in one care setting (avoidance of multiple specialist appointments)
- Reduce hospital admission & hospital-acquired infections
- RACE line: allows for a collaborative discussion



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