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Housekeeping

- Attendees are muted.
- During the session, type questions into the "question" section, and we will address them at end of prepared comments.
- Some answers may be provided during the presentation. Those answers will appear underneath your question.
- The presentation recording will be available at opennotes.org and youtube.com/myopennotes
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Welcome & Introductions



Liz Salmi Senior Strategist, OpenNotes



OpenNotes Grand Rounds OpenNotes 101 for Clinicians

Welcome! December 14th, 2020



The New Era of Transparency in Healthcare Sharing Clinical Notes with Patients



Cait DesRoches, DrPH

Director, Open Notes Associate Professor, HMS



What is open notes?

When patients can easily read visit notes









The Commonwealth Fund GORDON AND BETTY FOUNDATION

Beth Israel Deaconess Medical Center



HARVARD MEDICAL SCHOOL TEACHING HOSPITAL crico



Robert Wood Johnson Foundation

What a patient sees vs. What the doctor writes aka notes

opointment De	- G				
Visit Summary	Notes				
				〈 Appointments	•
Elizabeth				Novembe	e Visit MD er 28, 2017 Oncology
11/28/2017 2:15 PM Office Visit	t	Department: Neuro-Oncology Dept Phone:	Description: Female DOE Provider:		onoology
Recommended Follow-Up					
Return in about 9 months (aro Routing History			REASON FOR VISIT		
Follow-up and Disposition History Upcoming Scheduled Appointments at UCSF				Brain Tumor	
Neuro-Oncology (UCSF Medical Center) To-Do List Future Orders MR Brain with and without Contrast Diagnoses this Visit			Complete On or After As directed	- 124/65 Blood Pressure	5' 7" (170.2 cm) Height
			Co	n	
Astrocytoma, grade II - Primary				98.2°F	69
Astrocytoma, grade II	ns as of 11/28/2017		Temperature	Pulse	
′our Vital Signs				159 lb 6.4 oz - (72.303 kg)	16
BP 124/65	Pulse 69	Temp 36.8 °C (98.2 °F) (Oral)	Resp 16		
Wt	SpO2 100%	BMI 24.97 kg/m²	OB Status Implant	Weight	Respiration
72.3 kg (159 b 6.4 oz)				MEDICATIONS PRESCRI	
72.3 kg (159 lb 6.4 oz) Illergies					
			Rash	MEDICATIONS PRESCRI	

ASSESSMENT AND PLAN:

In summary, Ms. **Example** is a 38 y.o. year old woman with grade II astrocytoma that is stable on imaging in follow-up. Neurologically, she has stably reduced sensation on the R side of her body, as well as occasional focal R hand seizures.

IMAGING SCORE: 0 NEUROLOGICAL SCORE: 0 STEROID SCORE: 0 OVERALL TUMOR ASSESSMENT: 0

1. Grade II astrocytoma: As such, we will simply continue to monitor her. It has been > 5 years since she completed chemotherapy, and so we will extend the interval between scans to 9 months. I would be comfortable with her continuing to do the scans locally, and we can plan to do the next appointment as a phone consultation.

2. Seizures: We discussed whether she might be able to taper down one of her seizure medications, but given that she continues to have focal events, I would be concerned that she might have a larger breakthrough event so I would recommend that we keep the doses stable for the moment, and she is in agreement with this plan.

Follow-up:

- 9 months for next MRI and appointment. This scan is critical because based on the results, a change in the management plan for the patient may need to be made especially if there is any evidence to suggest tumor progression.

- All questions of Elizabeth and her family were answered to the best of my ability. They have our contact information and will call with further questions.

I spent a total of 26 minutes face-to-face with the patient and 14 minutes of that time was spent reviewing the imaging with the patient, review of management options, side effects, counseling and coordination of care

Over the next few minutes...



✓ 10 years of open notes research✓ What's next?



2010: OpenNotes Begins



Surveyed before study

Physicians

Walker et al. Inviting Patients to Read Their Doctors' Notes: Patients and Doctors Look Ahead: Patient and Physician Surveys. Ann Intern Med. 2011;155(12):811-819. DOI: 10.7326/0003-4819-155-12-201112200-00003

Patients





Surveyed after study

Physicians



Walker et al. Inviting Patients to Read Their Doctors' Notes: Patients and Doctors Look Ahead: Patient and Physician Surveys. Ann Intern Med. 2011;155(12):811-819. DOI: 10.7326/0003-4819-155-12-201112200-00003

Patients





After 7 years... patient views

 ✓ Patients still say notes are very important for taking care of their health, feeling in control of their care, and remembering their care plans

- ✓ Almost all patients say they understood all or nearly all of their notes
- ✓ Reading notes helps them understand their medications
 ✓ ≈20% of patients found an error in their notes
- ✓ Important benefits for patients with less education or limited English proficiency

Walker J, et al. OpenNotes After 7 Years: Patient Experiences With Ongoing Access to Their Clinicians' Outpatient Visit Notes. J Med Internet Res 2019;21(5):e13876. DOI: 10.2196/13876

Leveille, SG, et al. Patients Evaluate Visit Notes Written by Their Clinicians: a Mixed Methods Investigation. J GEN INTERN MED (2020). https://doi.org/10.1007/s11606-020-06014-7

Bell SK, et al. Frequency and Types of Patient-Reported Errors in Electronic Health Record Ambulatory Care Notes. JAMA Netw Open. 2020;3(6):e205867. doi:10.1001/jamanetworkopen.2020.5867

Desroches CM, at al. Patients Managing Medications and Reading Their Visit Notes: A Survey of OpenNotes Participants. Annals of Internal Medicine. 2019;171(1):69. doi:10.7326/m18-3197



After 7 years... clinician views

✓Majority say sharing notes with patients is a good idea and helpful for engaging patients

- Most would recommend the practice to colleagues
- ✓Few report questions or concerns from patients about notes
- \checkmark 1/3 say they spend at least "somewhat" more time in documentation

DesRoches CM, Leveille S, Bell SK, et al. The Views and Experiences of Clinicians Sharing Medical Record Notes With Patients. JAMA Netw Open. 2020;3(3):e201753. doi:10.1001/jamanetworkopen.2020.1753



Open notes across North America

✓ 260 organizations✓ 54 MILLION people





New public policy

1996: HIPAA (Office of Civil Rights)
2008: HITECH Act
2016: 21st Century Cures Act passes in U.S. Congress
2020: Interoperability & Information Blocking Rule

In andical vectories of the United States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government: <u>Here's how voor kooker</u> Market in the American States government of the American States government o

ONC's Cures Act Final Rule supports seamless and





OpenNotes and...

- Care partners / caregivers
- Vulnerable populations
- Mental health
- Bioethics
- Patient engagement
- Patient safety
- OurNotes





Thank you.

Cait DesRoches, DrPH

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@MyOpenNotes
#opennotes

Patient Experience Reading Open Notes





Open Notes Experience at Harborview



Building Transparency and Trust with Patients



Sara L Jackson MD MPH

Harborview Medical Center Seattle, Washington



Harborview Medical Center

Safety-net for King County WA



Patient Focus Groups in 2009

- Patients' perceived benefits:
 - Improved patient understanding of health and disease
 - Convenience
 - Empowerment
 - Stronger relationship with provider
- Concerns:
 - Threats to privacy
 - Worry about ability to understand the record
 - Fear that computer would replace direct provider contact
 - Hesitancy about potential demands on provider time



The urban underserved: attitudes towards gaining full access to electronic medical records

Dhanireddy, et. al. Health Expectations, 2012: 17, pp.724–732

Original OpenNotes study in 2009

Annals of Internal Medicine

Original Research

Inviting Patients to Read Their Doctors' Notes: A Quasi-experimental Study and a Look Ahead

•Harborview patients reported (similar to other sites):

Feeling more in control of their care (87%)
Better understanding of health and medical conditions (85%)
Doing better with taking their medications (73%)

•Harborview patients were rarely confused (8%), worried (8%), or offended (1%) by what they read in their doctors' notes

 42% at HMC shared access to their notes with family/caregiver (more than ~20% at BIDMC and Geisinger)

Harborview Patients:

89% reported Open Notes would be somewhat or very important factor in choosing a future doctor or health plan.

Provider results - 2009

Annals of Internal Medicine

Original Research

Inviting Patients to Read Their Doctors' Notes: A Quasi-experimental Study and a Look Ahead

Harborview Physicians:

- 0% reported visits took longer
- 0% spent more time on notes
- 11% were less candid in documentation
- 99% of patients wanted to continue access
- 0% of MDs wanted to withdraw



Patients with HIV

- HIV patients not different from other primary care patients regarding risks and benefits
- MORE LIKELY to share notes with friends, other health professional, or another doctor
- HIV doctors were LESS LIKELY to change the level of candor in notes compared to other PCPs





2014 UW opened notes system-wide

- Messaged by clinical leaders throughout the UW system for all ambulatory sites on EPIC, via email and at clinical meetings
- Note availability was not actively messaged to patients
- Tips for providers about how to write shared notes, and FAQs for patients and providers
 - Klein, et.al. Your patient is now reading your note. AJM 2016



BEFORE a visit

- Create an organized, clear template
- Explain why patients should read their notes
- Consider writing notes with patients



<u>DURING a visit</u>

Conceptualize note as a <u>communication tool</u>

- Address sensitive issues directly
 - Obesity, malignancy, substance use, etc.
 - Patients are likely concerned about these issues!
- Highlight accomplishments & strengths
 - Opportunity to motivate patients
 - Possible "placebo" effect



DURING a visit

- Be objective, not judgmental
 - "shirt untucked" rather than "disheveled"
 - "declined" rather than "refused"
- Avoid jargon & abbreviations, when possible
 - "AED": defibrillator or seizure med?
 - "shortness of breath" rather than "SOB"



After a visit

- Complete notes in a timely manner
- Ask for, and use, patient feedback
- Be familiar with procedures for amendments



Patient Focus Groups after 2 years of note access

- Read a note just prior to survey and focus group
 - 89% note content was useful
 - 19% note was inaccurate
 - 26% too much medical jargon
 - 26% too long



Patient comments

Oh yeah, give me all the information. Because I'm going to go look it up otherwise. So at least here it is... This is more bulk, more data. I think it's good.

This is good information to have and it would be good for my kids to know and have. I don't have to explain every detail to them, they would know what is what and how to go about it and take care of it.



Open Notes in the time of COVID-19



During COVID pandemic medical student volunteers did a pilot study to better understand and support patients with tech needed for zoom/telehealth visits



In Summary – 10 years of Open Notes at HMC

- It has not been a burden for physicians
- Patient feedback has been positive
 - Trust
 - Strengthening provider relationships
 - Access to their own health information
- Some increase in note amendment requests (UW-wide) for inaccuracies – a good thing
- Developing support for instruction and utilization of electronic tools is needed for safety-net populations – particularly with COVID





Thank you.

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Open Discussion





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UPCOMING WEBINARS & OFFICE HOURS Dates TBA	PRESENTERS
How to Write An Open Note	 Leonor Fernandez, MD (Beth Israel Deaconess Medical Center) CT Lin, MD (University of Colorado)
Open Notes in Pediatrics/for Adolescents	 Fabienne Bourgeois, MD (Boston Children's) Cindy Kuelbs, MD (Rady Children's)
Open Therapy Notes	 Steve Dobscha, MD (U.S. Department of Veteran's Affairs, Oregon Health & Science University) Steve O'Neill, BCD, JD (OpenNotes, Harvard Medical School)
Open Oncology Notes	 Everett Weiss, MD (Memorial Sloan Kettering) Bertram Yuh, MD (City of Hope Cancer Center) Rosie Bartel (patient advocate)
Open Inpatient & ED Notes	Brian Clay, MD (UC San Diego Health)ED physician TBD
Open Notes in the Safety Net	 Anshu Abhat, MD (LA County Department of Healthcare Services) TBA (Institute for Family Health Services)