

# Patient Online

Inflammatory arthritis

RCGP Webinar, 28 August 2018



#### Dr Ralph Sullivan, FRCGP, FFCI RCGP Clinical Champion for Patient Online

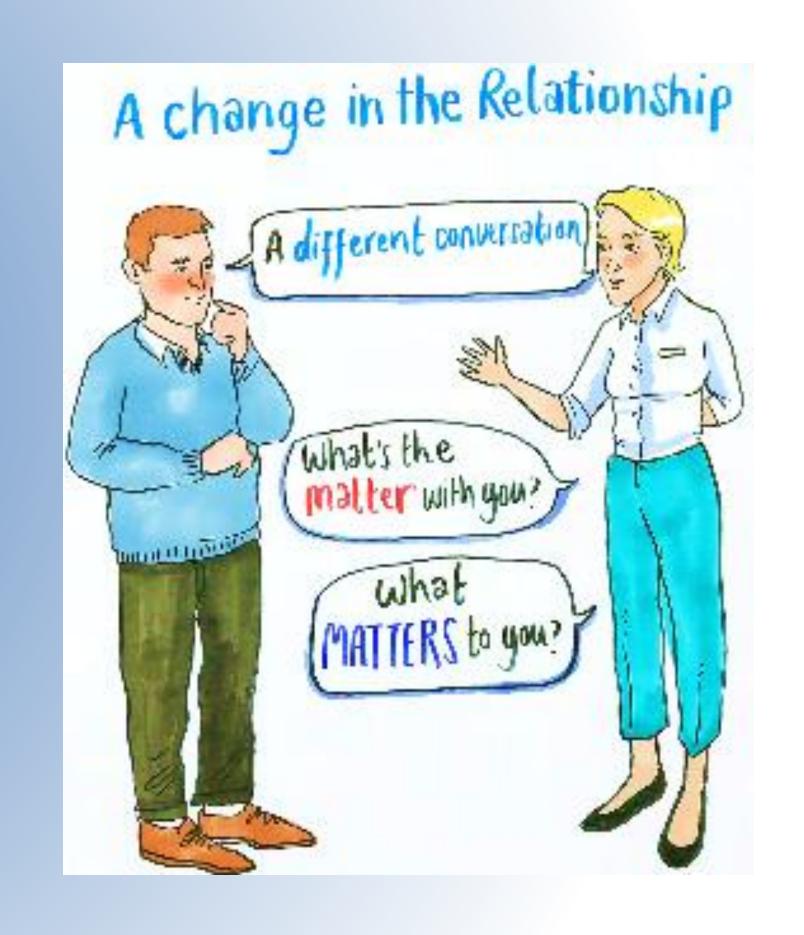
Dr Imran Khan, MRCGP RCGP Clinical Support Fellow

#### Person-Centred Care

"Two years ago I was at a stage in my understanding ... that was so limited it placed the entire weight of responsibility for my care on the doctors treating my condition. I was a passenger, along for the ride.

Access to my medical data ... in short I am no longer a passenger, I am now very much part of the management team for the effective treatment of my condition."

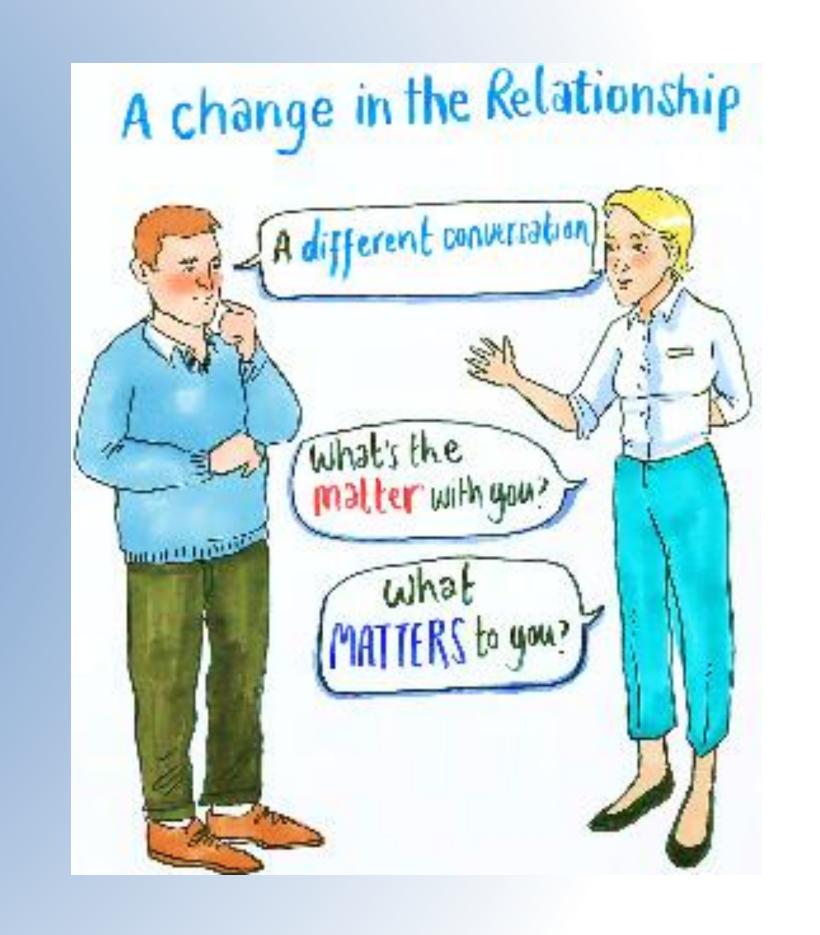
O.C. Manchester Oct 2017





# Inflammatory Arthritis Learning Objectives

- 1. Use Patient Online safely and effectively
- 2. Health literacy and digital inclusion
- 3. Coded records for inflammatory arthritis
- 4. Managing test results for online access
- 5. Patient Online in care and support planning





# Webinar Programme

- 1. Introduction to Patient Online for beginners
- Benefits for patients with inflammatory arthritis of using Patient Online
- 3. Patient use of access to test results
- 4. Other uses of Patient Online to prepare for consultations
- 5. Clinical scenario as an example
- 6. Questions



# RCGP Patient Online Programme

Aim - to increase awareness and confidence in using Patient Online in patient care

Intended for the whole practice team

Toolkit of guidance documents and templates

Events and presentations

Webinars and podcasts

Input from other medical royal colleges, the RCN, and academic voluntary sector groups organisations and other individual health professionals and patients



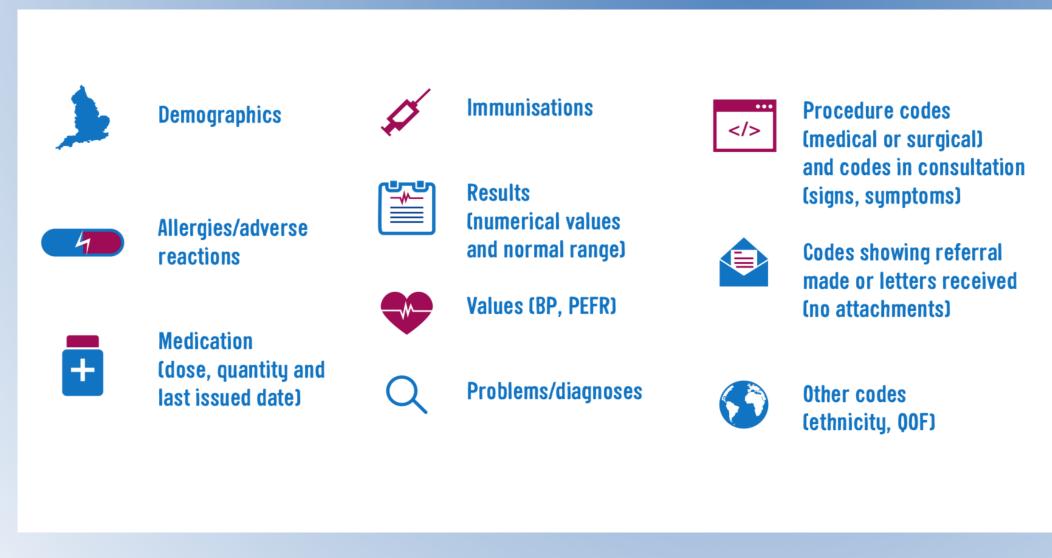
#### Patient Online Toolkit

Book and cancel appointments

Order repeat medication

Detailed care record

Extended record access (all or part)



Managing new applications

Safeguarding

Information Governance

Patient Information

Overcoming barriers



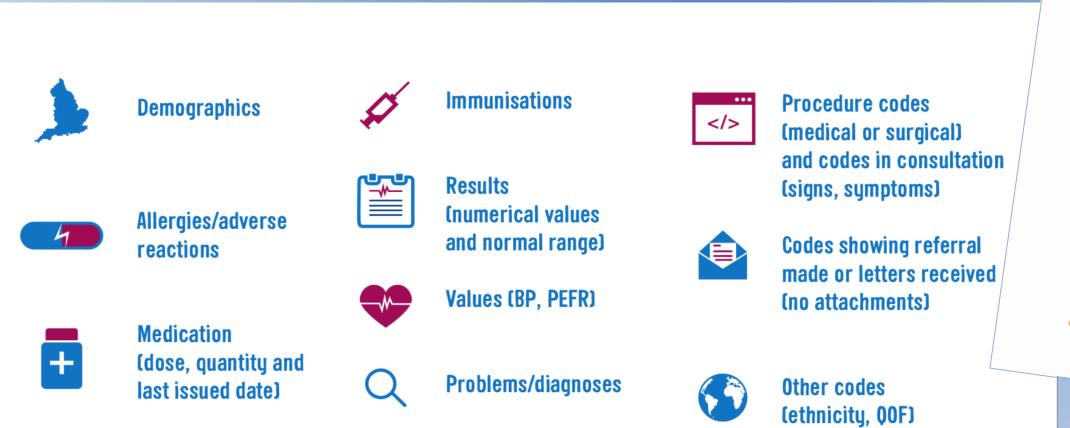
## Patient Online Toolkit

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Online services: Data Quality Guldance for general practice

#### Executive summary

The quality of data in a patient's record can be assessed by the extent to which it meets the various purposes that the record is used for. For online services this means that it must be clear and unambiguous for the patient to understand, without displaying information that might be harmful to the patient or others or confidential information to other (third) parties. Poor data quality may be confusing and may mislead both patients and clinicians with a negative impact on the

This guidance offers recommendations on how to record and maintain data that is fit for online services. The starting point is to think of data quality in terms of five headings: Complete. Accurate, Relevant, Accessible and Timely (CARAT).

There are specific aspects of data quality that affect particular parts of the record such as problems and diagnoses, other consultation codes, summarising data and laboratory results.

#### Definition

Data quality is an attribute of electronic patient records used as a measure of whether a record is fit for purpose. It can be assessed under five headings: completeness, accuracy.

#### Background

The quality of the data in a patient's record can only be measured by the extent to which it meets each particular purpose for which it might be used (see Box 1). The GMS contract and PMS arrangements for 2015–16 require practices to promote and offer their patients online access to their detailed coded record in addition to the appointments and repeat prescribing services and summary data required in 2014-15. A good quality coded patient

This guidance explains how Patient Online has changed the criteria for a high quality electronic patient record and how practices may respond to this challenge.



#### Patient Online Toolkit

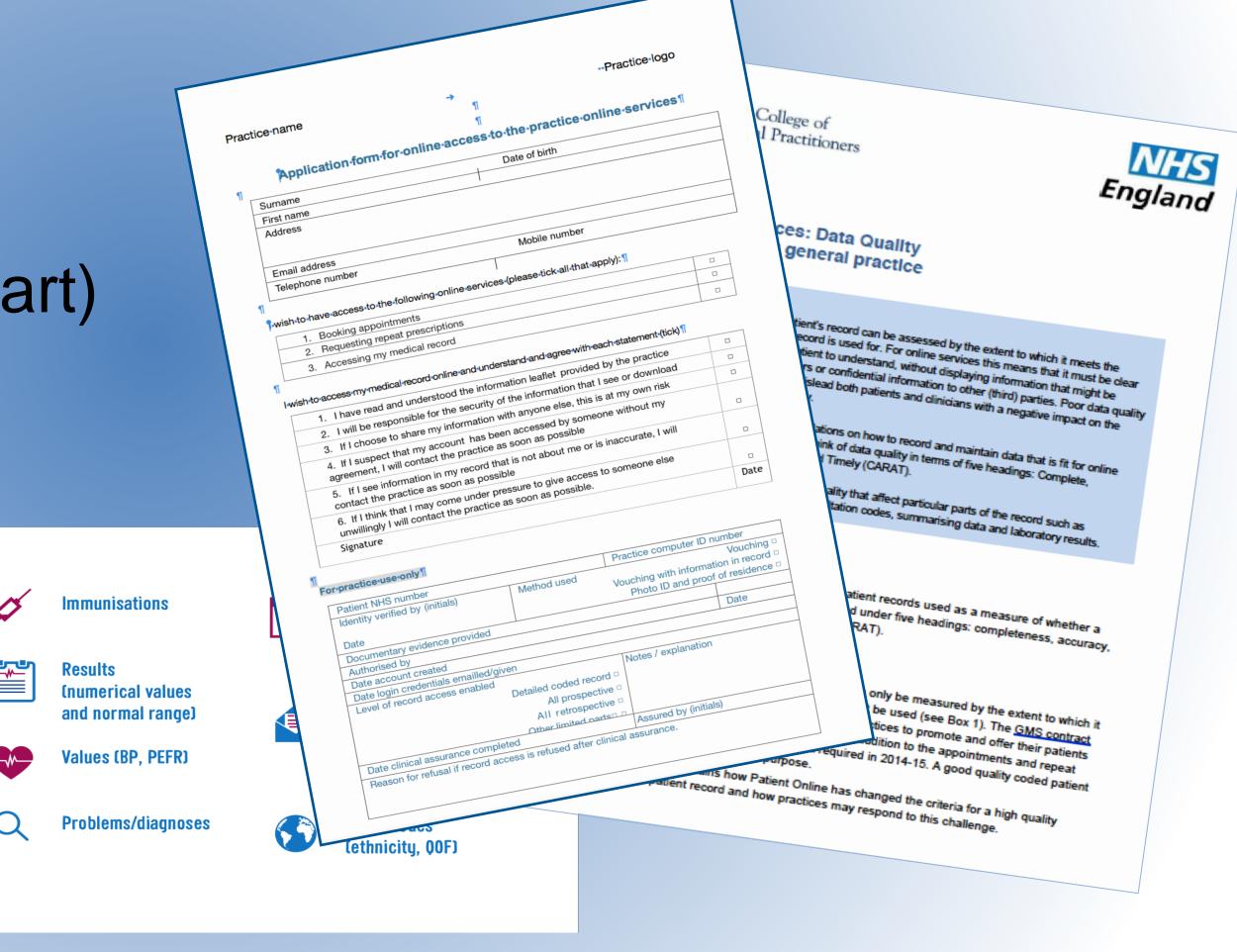
Book and cancel appointments

Order repeat medication

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Extended record access (all or part)

(dose, quantity and





# GP Contractual Requirement in England

Book and cancel appointments

Order repeat medication

Detailed care record

Extended record access (all or part)



Contractual requirement for GPs in England

To offer and provide ...

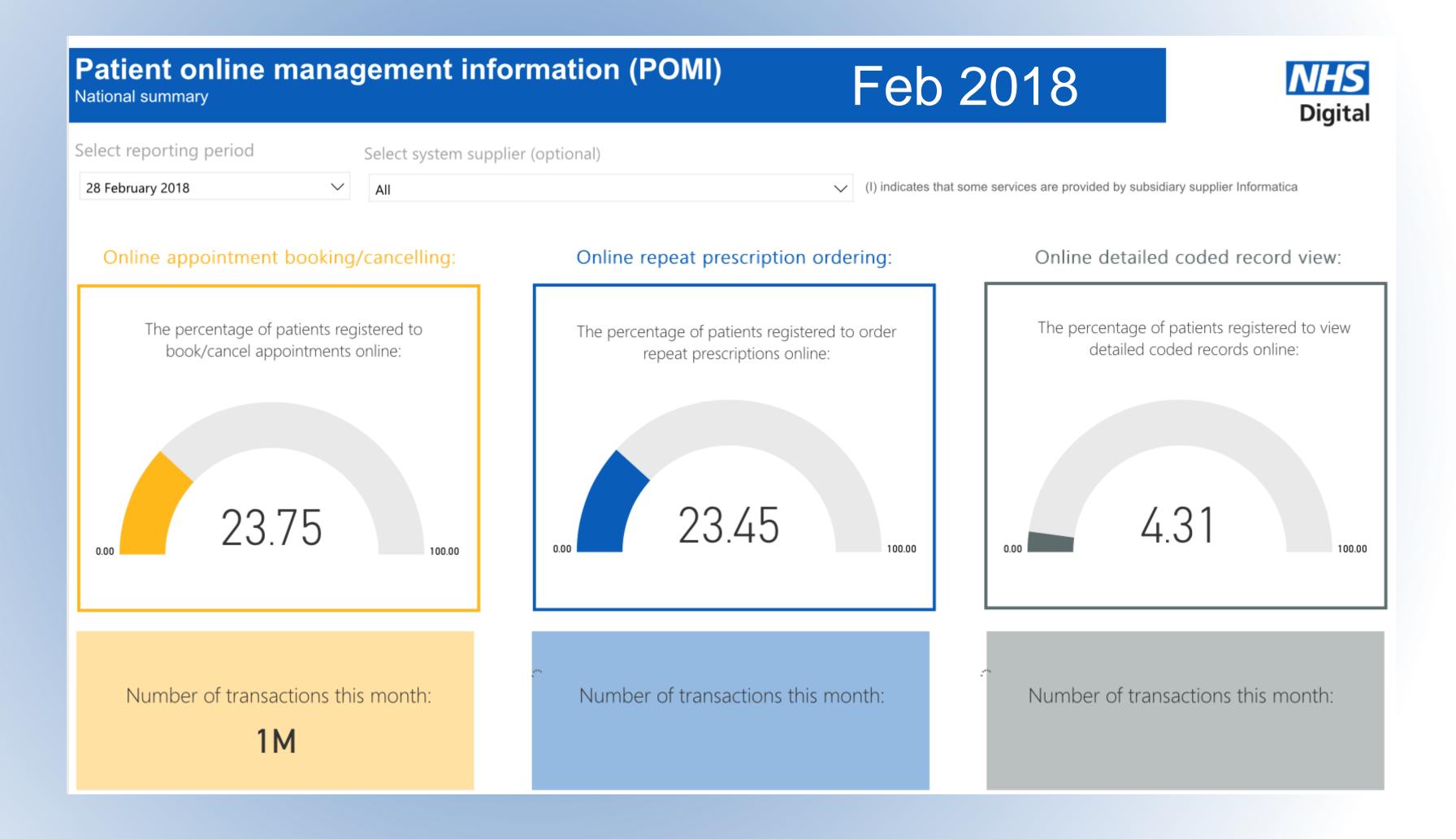
... unless it could cause harm to the patient



# Patients Registered for Patient Online

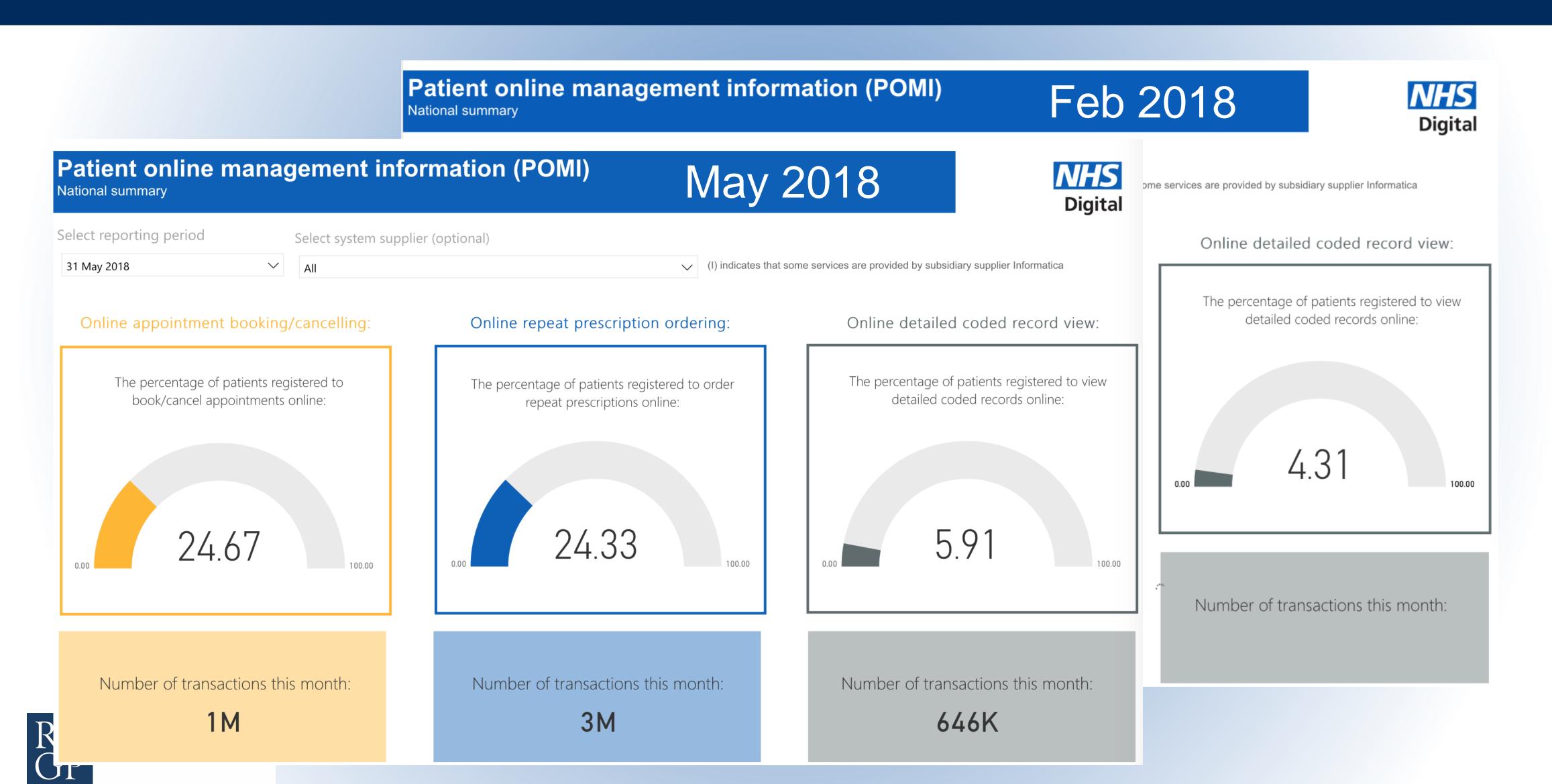
NHS Digital
GP Data Hub
POMI

https://bit.ly/2oeevmq

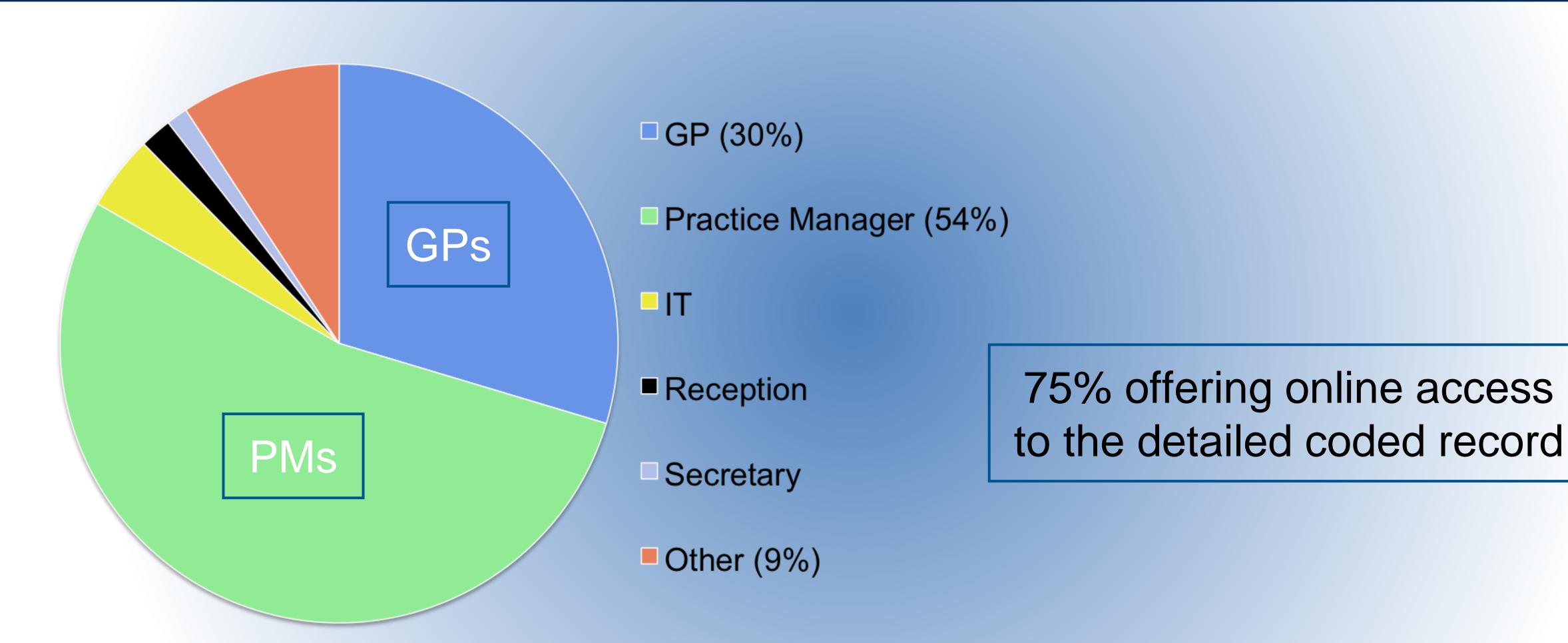




# Patients registered for Patient Online



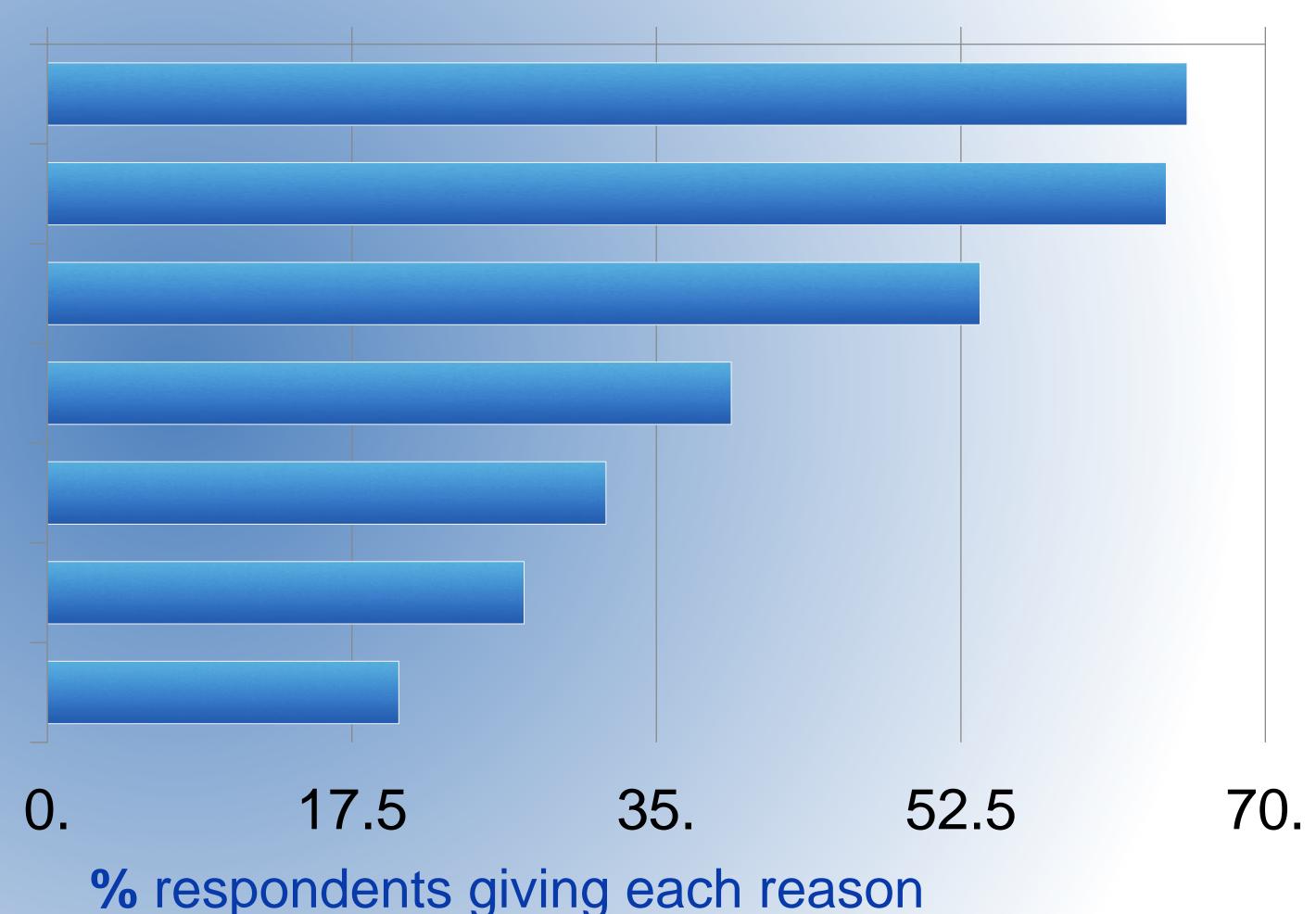
# RCGP Survey, August-Sept 2016 (n=211)





#### Reasons to recommended record access

See test results See what is in their record Self manage long term conditions View long term condition care Support family and carers View clinical correspondence Prepare for consultations





# Health Literacy

- Enough knowledge, understanding, skills and confidence to use health information
- More active partners in their care, and to navigate health and social care systems
- 43% of working-age adults in England have low health literacy
- This figure rises to 61% if numeracy is involved.
- Affected by
  - ability to read and write
  - computer and numerical literacy
  - ability to interpret graphs and visual information
- Teach back chunk and check



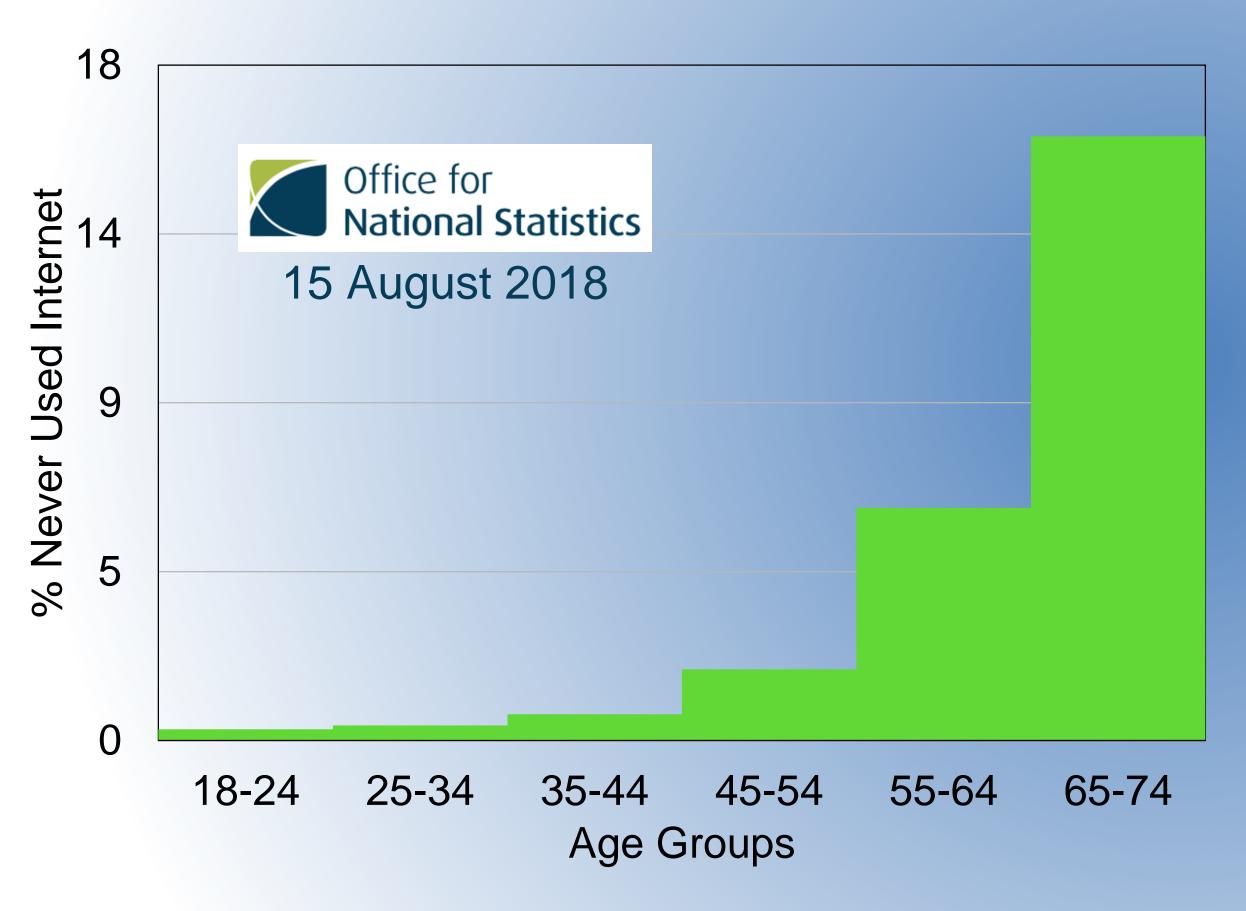
#### Person-centred Care Toolkit

<a href="http://www.rcgp.org.uk/clinical-and-research/resources/toolkits/person-centred-care-toolkit.aspx">http://www.rcgp.org.uk/clinical-and-research/resources/toolkits/person-centred-care-toolkit.aspx</a>



# Digital Exclusion

#### People Who Have Never Used Internet (%)





NHS Widening Digital Participation

https://bit.ly/2LtjqZR

Future Digital Inclusion

https://bit.ly/2f4nTaR

Online Centres Network

https://bit.ly/2vSeAOw



## Summary so far

The purpose of the RCGP Patient Online programme

National uptake of Patient Online in England

Reasons for recommending record access

Overcoming patients problems in using Patient Online



Book and cancel appointments

Order repeat medication

Detailed care record

Extended record access (all or part)

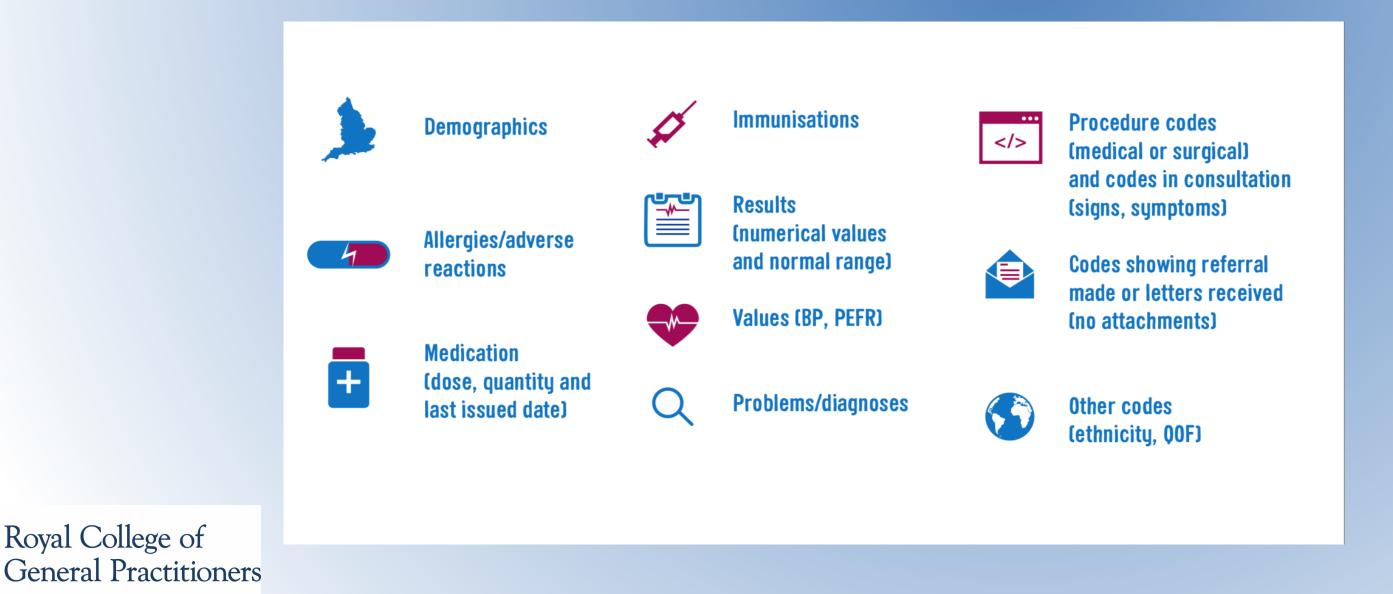


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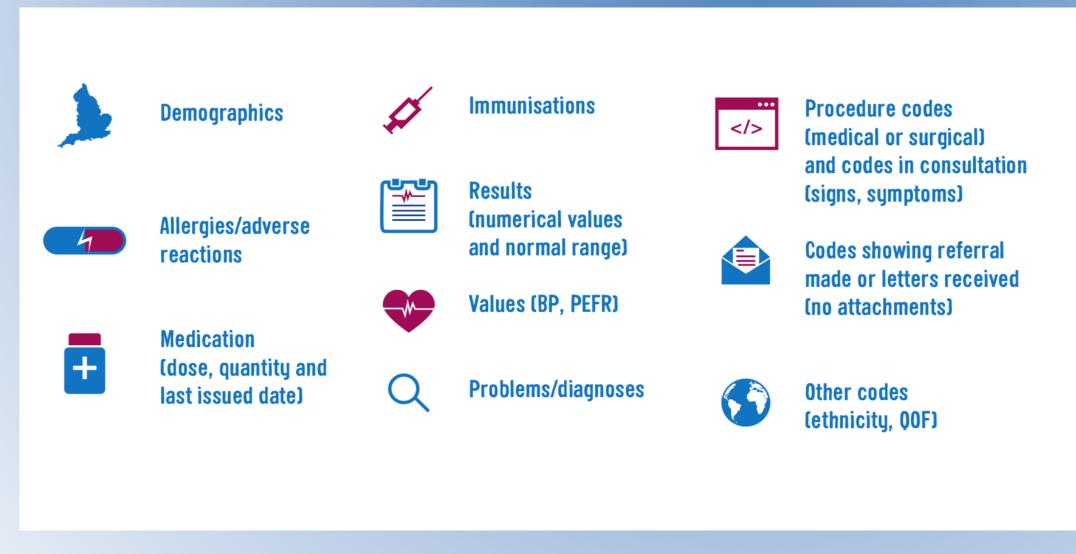


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Problem list

Lifestyle and work

**Examination results** 

Test results

Arthritis-relevant codes

Care plan codes

Past medication

Allergies and ADRs

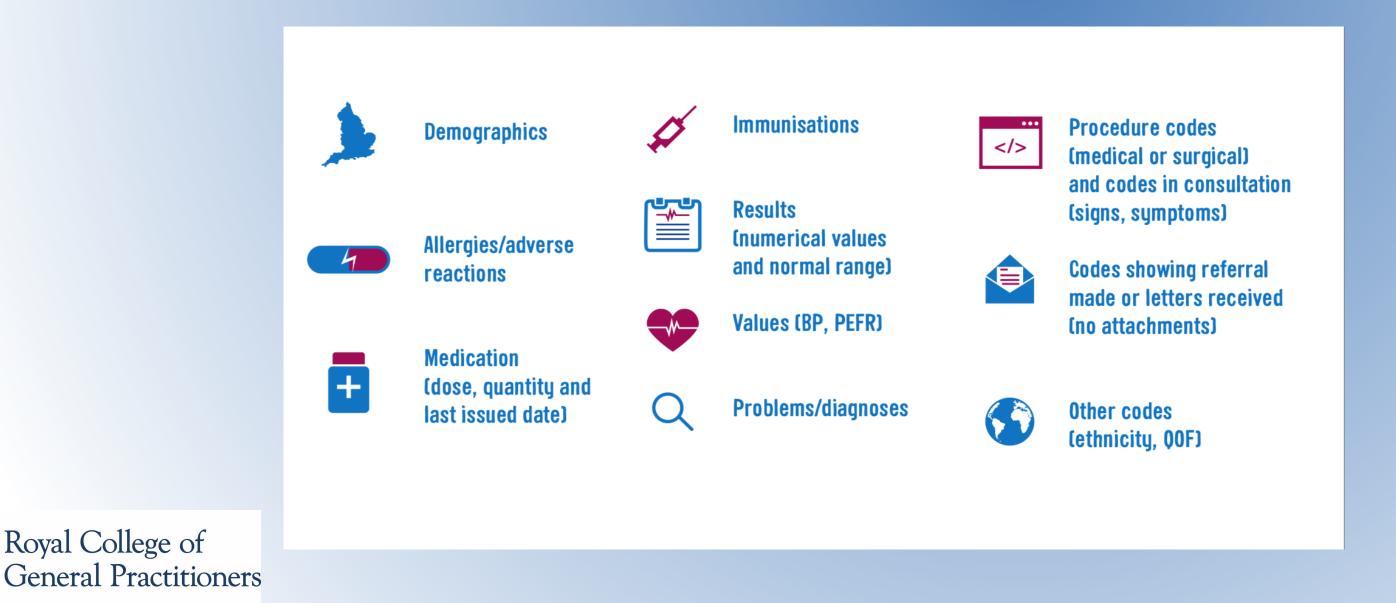


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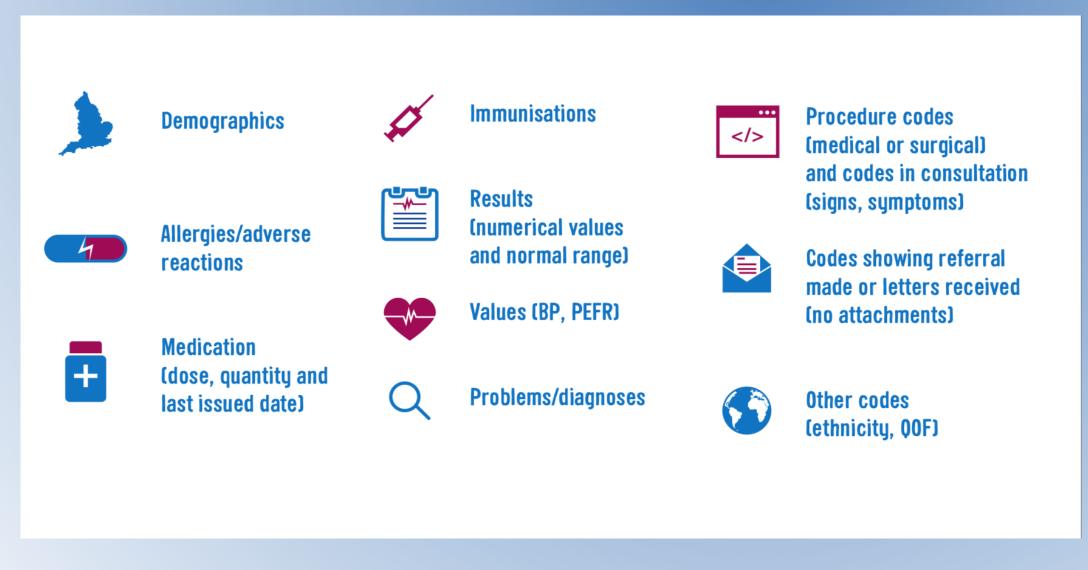


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Attached documents

Consultation notes

Free text



Hospital OPD letters

Discharge reports

Radiology reports

Referral letters

. . .



## Patients Using the Detailed Coded Record

Identify any inaccuracies that might be present

Problem list

Lifestyle and work

**Examination results** 

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- Identify any inaccuracies that might be present
- Generally improve their health literacy though access to their detailed coded record

Problem list

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- Identify any inaccuracies that might be present
- Generally improve their health literacy though access to their detailed coded record
- Assess the blood test results

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Laboratory abnormalities requiring action

White cell count  $<3.5 \times 10^{9}$ 

Neutrophils  $<1.6 \times 10^9/1$ 

Unexplained eosinophils >0.5 x 10^9/l

Platelet count <140 10^9/l

Mean cell volume >105 f/l

Creatinine increase >30% over 12 months and/or calculated GFR <60 ml/min/1.73 m<sup>2</sup>

ALT and/or AST >100 U/l

Unexplained reduction in albumin <30 g/l

From BSR and BHPR guideline for the prescription and monitoring of non-biologic disease-modifying anti-rheumatic drugs



- Identify any inaccuracies that might be present
- Generally improve their health literacy though access to their detailed coded record
- Assess the blood test results
- View trends in blood results over time

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Clinical and epidemiological research Extended report

A patient-initiated DMARD self-monitoring service for people with rheumatoid or psoriatic arthritis on methotrexate: a randomised controlled trial

Hayley McBain<sup>1, 2</sup>, Michael Shipley<sup>3</sup>, Abigail Olaleye<sup>3</sup>, Samantha Moore<sup>3</sup>, Stanton Newman<sup>1</sup>

Author affiliations +

#### **Abstract**

**Objective** To determine the effectiveness of a patient-initiated disease-modifying antirheumatic drugs (DMARD) self-monitoring service for people with rheumatoid (RA) or psoriatic arthritis (PsA) on methotrexate.

**Conclusions** The results suggest that a patient-initiated service that incorporates patients' self-monitoring DMARD therapy can lead to significant reductions in healthcare use, while maintaining clinical and psychosocial well-being.



http://dx.doi.org/10.1136/annrheumdis-2015-207768

- Identify any inaccuracies that might be present
- Generally improve their health literacy though access to their detailed coded record
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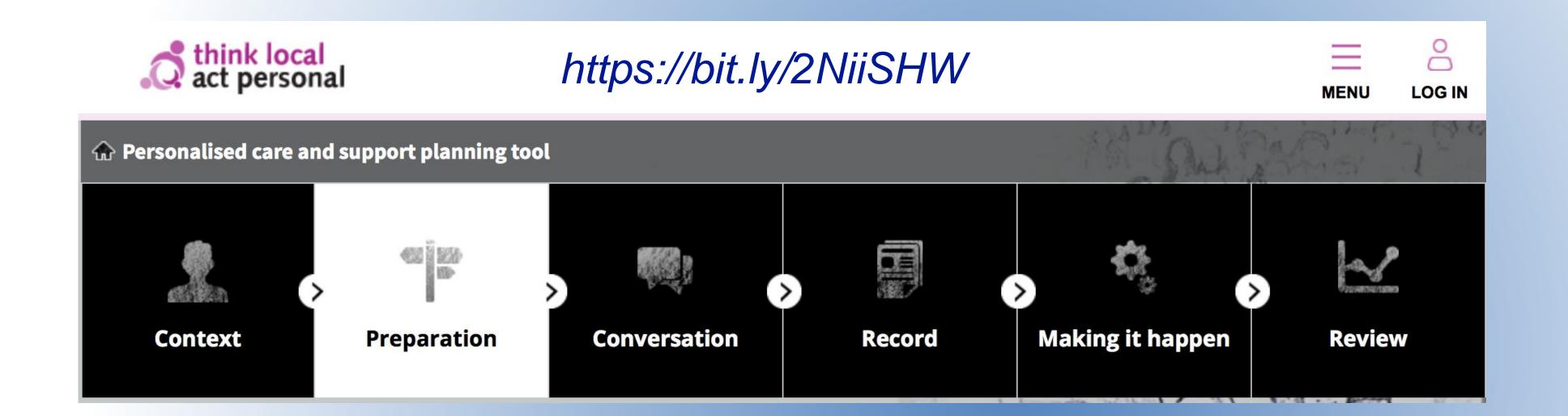


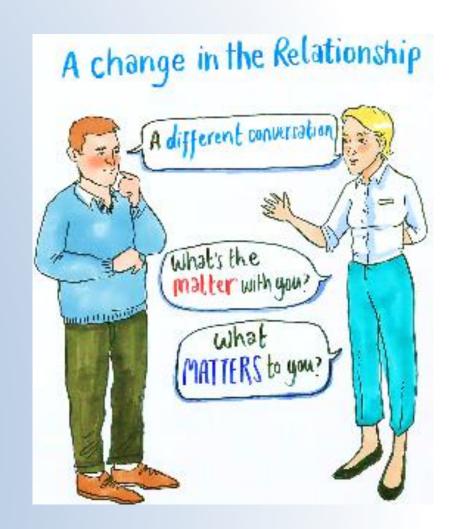
#### Summary so far

- Patient Online gives access to record data relevant inflammatory arthritis
- Coded information enables person-centred care



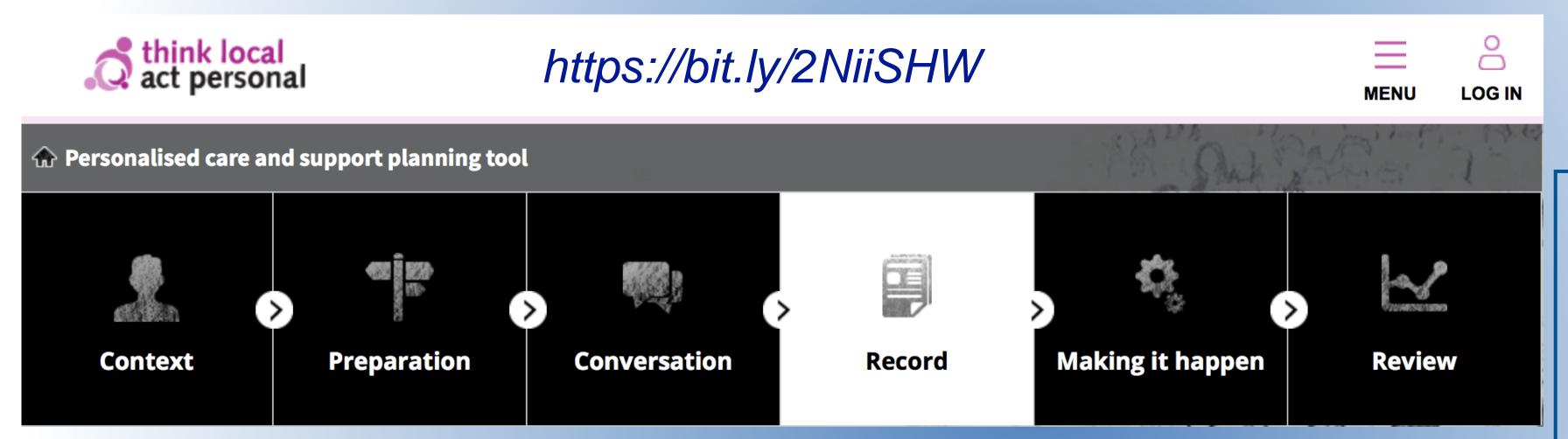
## Preparing for Consultations







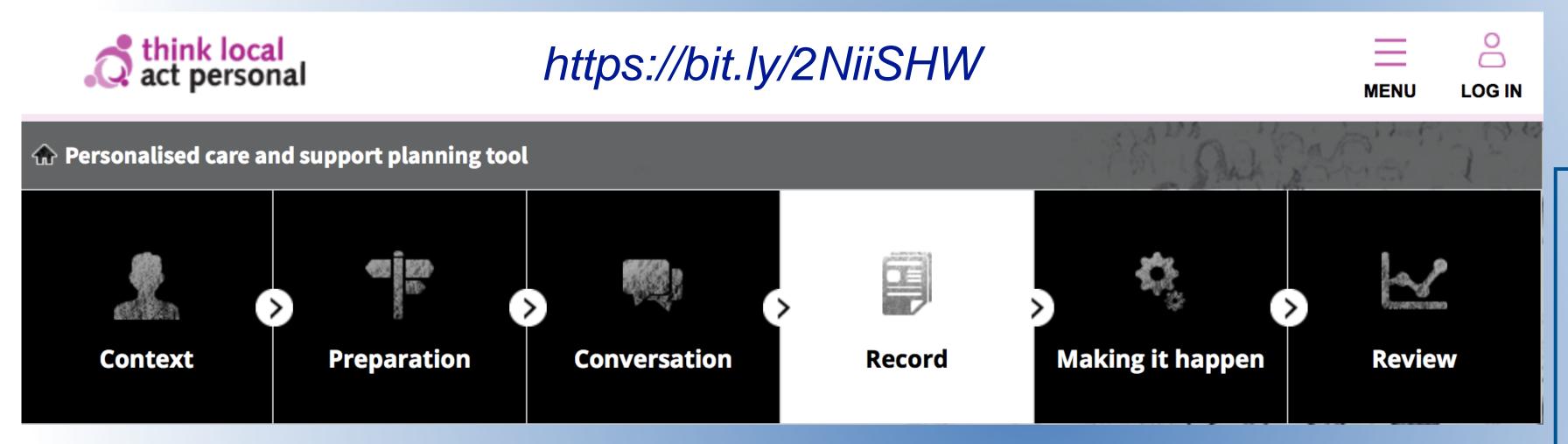
## Recording Data for Patient Online



Problem list Lifestyle and work **Examination results** Arthritis codes Care plan codes Allergies and ADRs Preventive care



## Recording Data for Patient Online

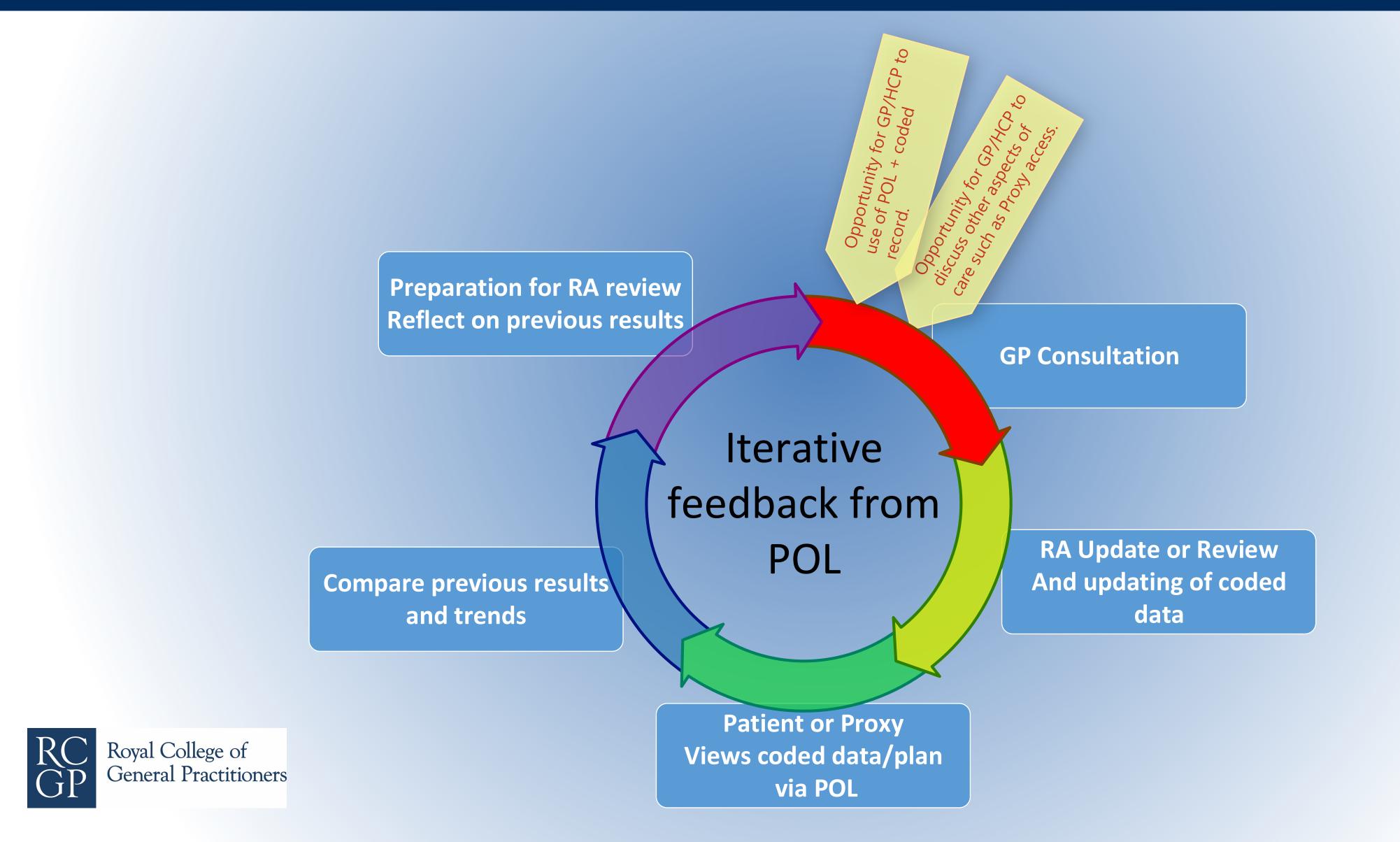


Person-Centred Care Toolkit
Collaborative Care and Support
Planning Guidance

Problem list
Lifestyle and work
Examination results
Arthritis codes
Care plan codes
Allergies and ADRs
Preventive care

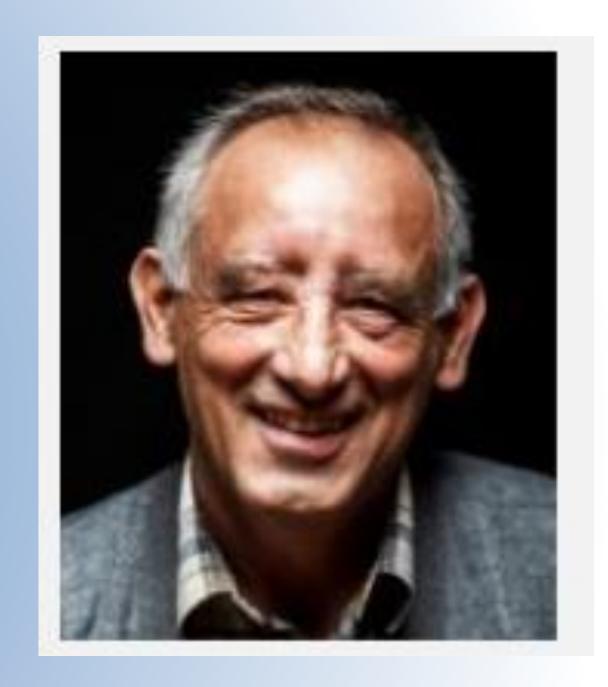


## Care and Support Planning



# Clinical Scenario - request

Andrew Dearden, 61
Reumatoid arthritis on methotrexate
Also hypertension, chronic kidney disease
Wants to monitor his monitoring blood tests





#### Clinical Scenario – record access

#### The detailed coded record is available to Andrew online:

- It Includes blood test result codes, attached values, units and reference ranges.
- To monitor his methotrexate, it is important that Andrew look at the white cell, neutrophil and platelet counts, MCV, AST or ALT, creatinine and eGFR





#### Clinical Scenario – record access

The detailed coded record is available to Andrew online:

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and reference ranges



#### Resources for patients

**National Association of Rheumatoid Arthritis** 

https://www.nras.org.uk/laboratory-tests-used-in-the-diagnosis-and-monitoring-of-rheumatoid-arthritis https://www.nras.org.uk/cardiovascular-risk-and-ra

#### **UK Lab Tests Online UK**

https://labtestsonline.org.uk/conditions/rheumatoid-arthritis



#### Clinical Scenario - test results

Andrew has his follow-up blood tests.

He logs onto his practice Patient Online portal to view his results

All his blood results are within normal range, apart from his CRP which is 16. The text reads "Satisfactory result, no action needed as CRP is improving".





#### Clinical Scenario - annual review

Nearly a year later Andrew is due for his annual review and has had a repeat set of bloods taken including cholesterol.

He has not had any problems with his rheumatoid arthritis for nearly 12 months and its now well controlled.

He looks through his record before the appointment with his GP for his review.





#### Care and Support Planning

Preparation for RA review
Reflect on previous results
Wants to consider treatment for increased cholesterol if needed.

Checks through medications and review dates. Compares previous blood results/trends and is pleased that blood inflammatory markers have stabilised. Notices that cholesterol has been steadily rising, despite his weight remaining stable.

GP Consultation, RA review and cardiovascular risk assessment

Iterative feedback using POL

RA review updated, QRISK updated, statin introduced.





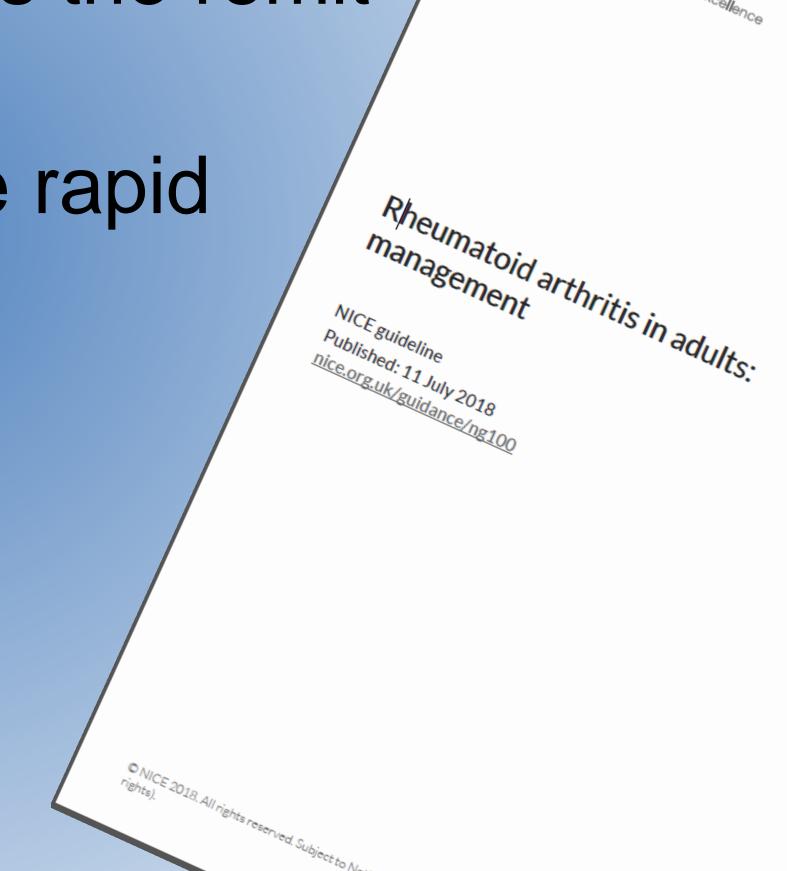
# NICE, POL and Inflammatory arthritis

All POL guidance follows recent NICE guidance.

 Diagnosis and management remains the remit of secondary care.

 NICE recommends all patients have rapid access to specialist care for flares.

All patients have an annual review.



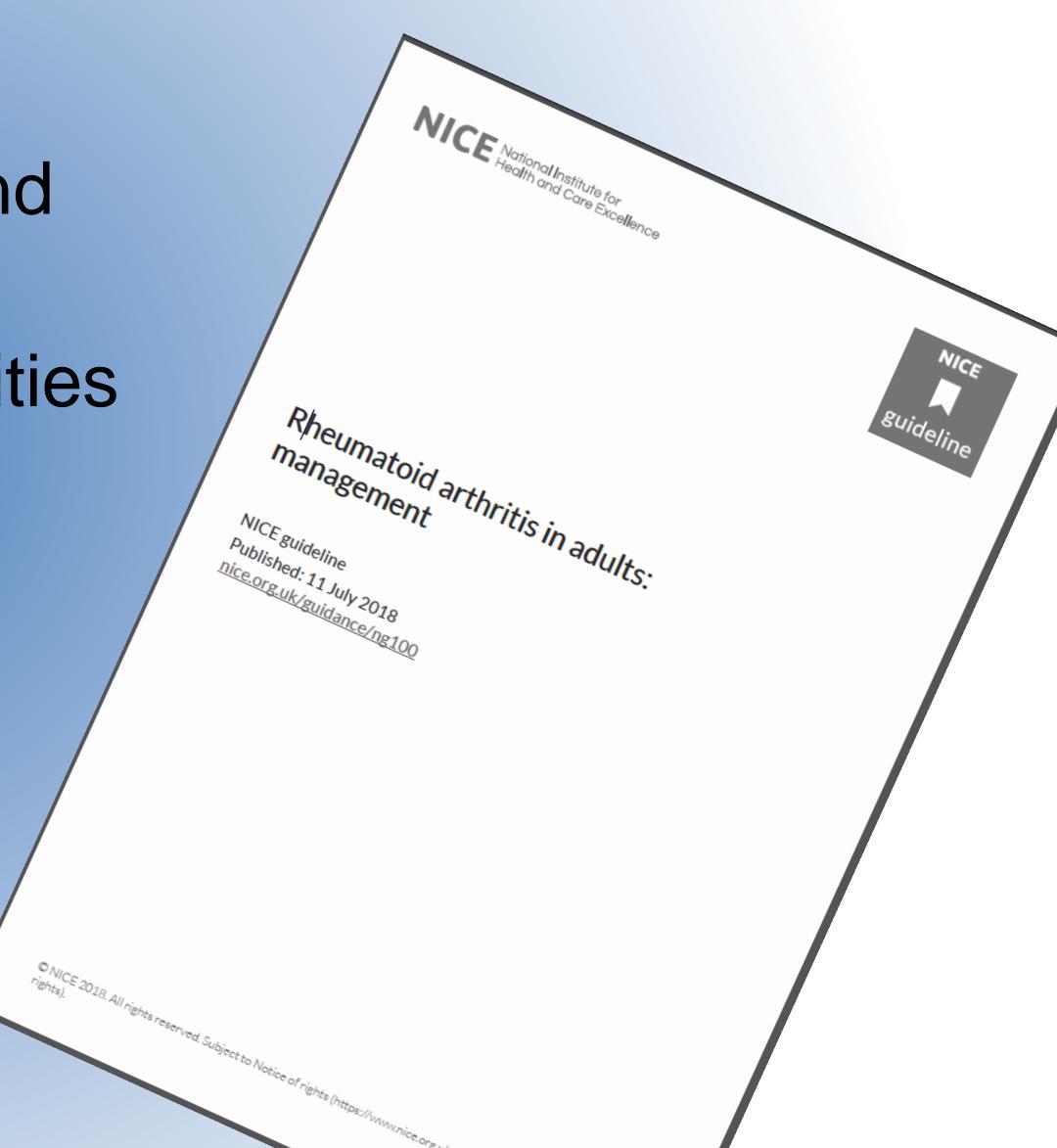


# NICE, POL and Inflammatory arthritis

#### The annual review should include:

- Assess disease activity and damage, and measure functional ability.
- Check for the development of comorbidities
- Assess symptoms that suggest complications.
- Organise appropriate cross referral.
- Assess the effect it is having on the persons life.





#### Summary

- POL can be useful in inflammatory arthritis
- Coded information enables person-centred care
- Iterative feedback though POL empowers patients, improves record accuracy, health literacy and can be very useful for consultation preparation



#### What's Next

- Guidance document that contains all of the relevant information, resources and links to related guidance
- Podcasts and other upcoming webinars.
- Other collaborative work

