

GUIDELINES & PROTOCOLS

ADVISORY COMMITTEE

Clinical Practice Guidelines on PDA: From Innovation to Provincial Adoption

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“Life is like a box of chocolates.

You never know what you’re gonna get.”

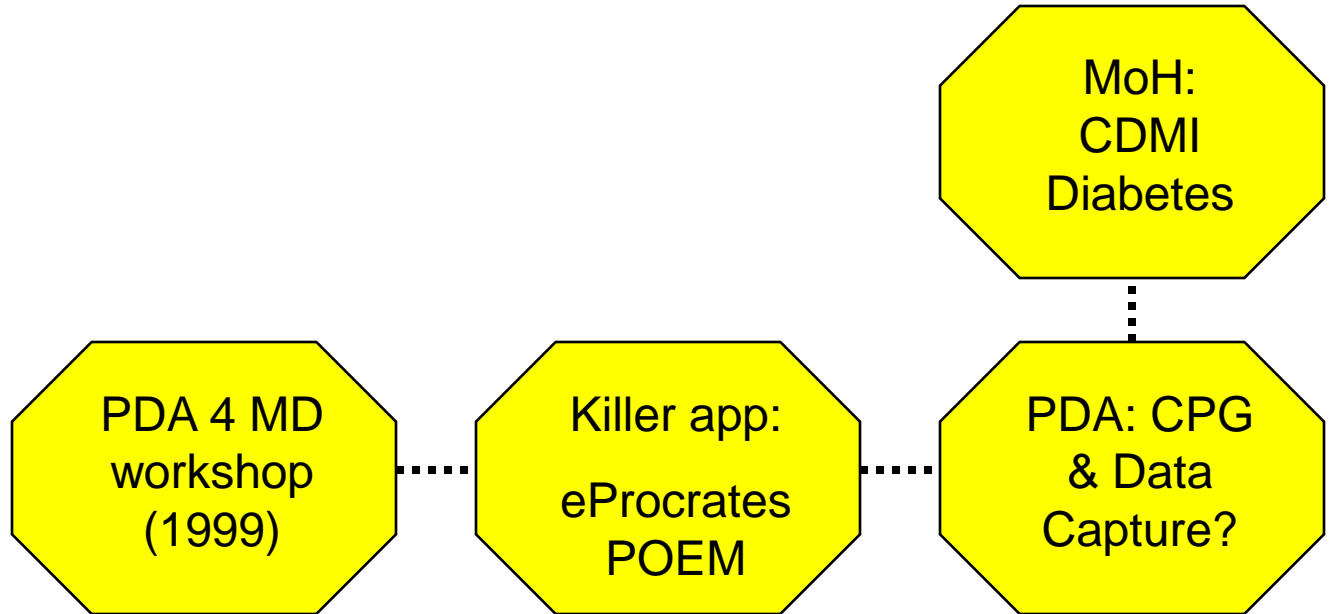
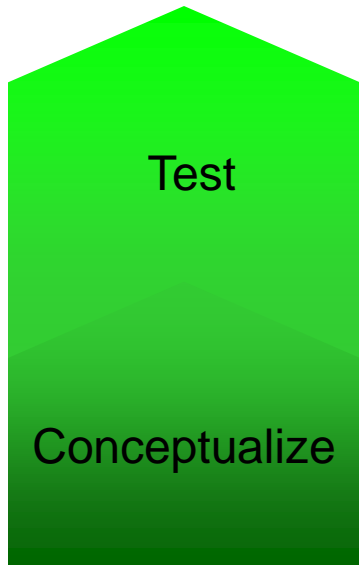


“Forrest Gump”
by Winston Groom

Agenda

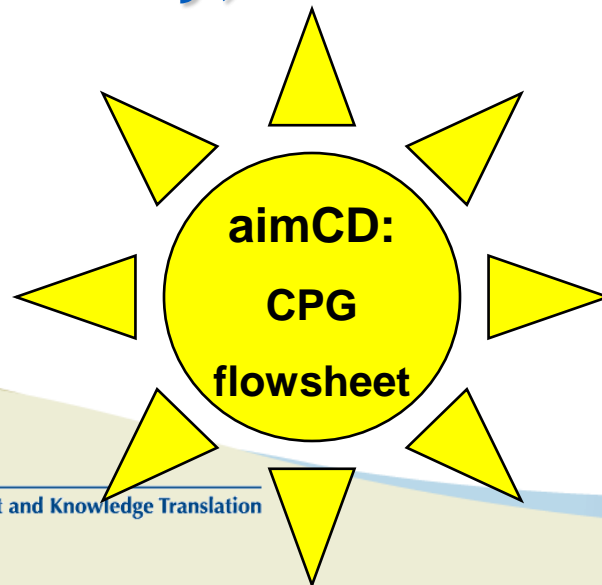
- ▶ PDA Journey: from concept to practice
- ▶ Evidence uncovered, Lessons learned
- ▶ What's next?





MoH Directed Objectives

- ▶ **Proof of Concept: convert CPGs to PDA**
 - Suitable PDA interface
 - Software to enter, edit, and render CPGs on PDA
 - Patient data entry at the point of care
- ▶ **Evaluate usability, satisfaction, adherence**



Software: (1) Editing Tool

The software interface is divided into several sections:

- Module Content:** A tree view on the left showing the hierarchy of the 'Diabetes' module, with '3.1 Medications' selected.
- Code Designer Preview:** The main editing area showing the 'Medications' list with the following items:
 - [Glycemic Control](#)
 - [Lipid Control](#)
 - [Vascular Protection](#)
 - [BP Control](#)
 - [ASA](#)
 - [Antiobesity](#)
 - [Drug Reference](#)
- PDA Preview:** A window showing the content as it would appear on a handheld device. The device screen displays the 'Medications' list and a 'GPAC' logo at the bottom.
- Document Properties:** A panel on the right with the following fields:
 - Author:
 - Reference ID:
 - Position:

Software: (2) Administrative Tool

The screenshot shows a web-based administrative interface. On the left, there are two panels: 'Categories' with icons for Provider, Modules, Users, and Groups; and 'Items' with a list of medical conditions including Asthma, COPD, Depression (highlighted), Diabetes, Heart Failure, Hepatitis B, Hepatitis C, Hypertension, Kidney, and test module. The main area is titled 'Item Configuration' and contains two sections: 'Module Details' with a 'Name' field set to 'Depression'; and 'Content Expiry' with 'Expiry Type' set to 'Popup + Email Alert', 'Expiry Date' set to 'Sunday, December 31, 2006', and a 'Renewal' calendar for 'December, 2006' where the 31st is selected. A 'Today: 8/3/2006' indicator is visible at the bottom of the calendar.

Categories:

- Provider
- Modules
- Users
- Groups

Items:

- Asthma
- COPD
- Depression
- Diabetes
- Heart Failure
- Hepatitis B
- Hepatitis C
- Hypertension
- Kidney
- test module

Item Configuration

Module Details

Name: Depression

Content Expiry

Expiry Type: Popup + Email Alert Setup...

Expiry Date: Sunday, December 31, 2006

Renewal: December, 2006 Setup...

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

Today: 8/3/2006

aimCD: Results

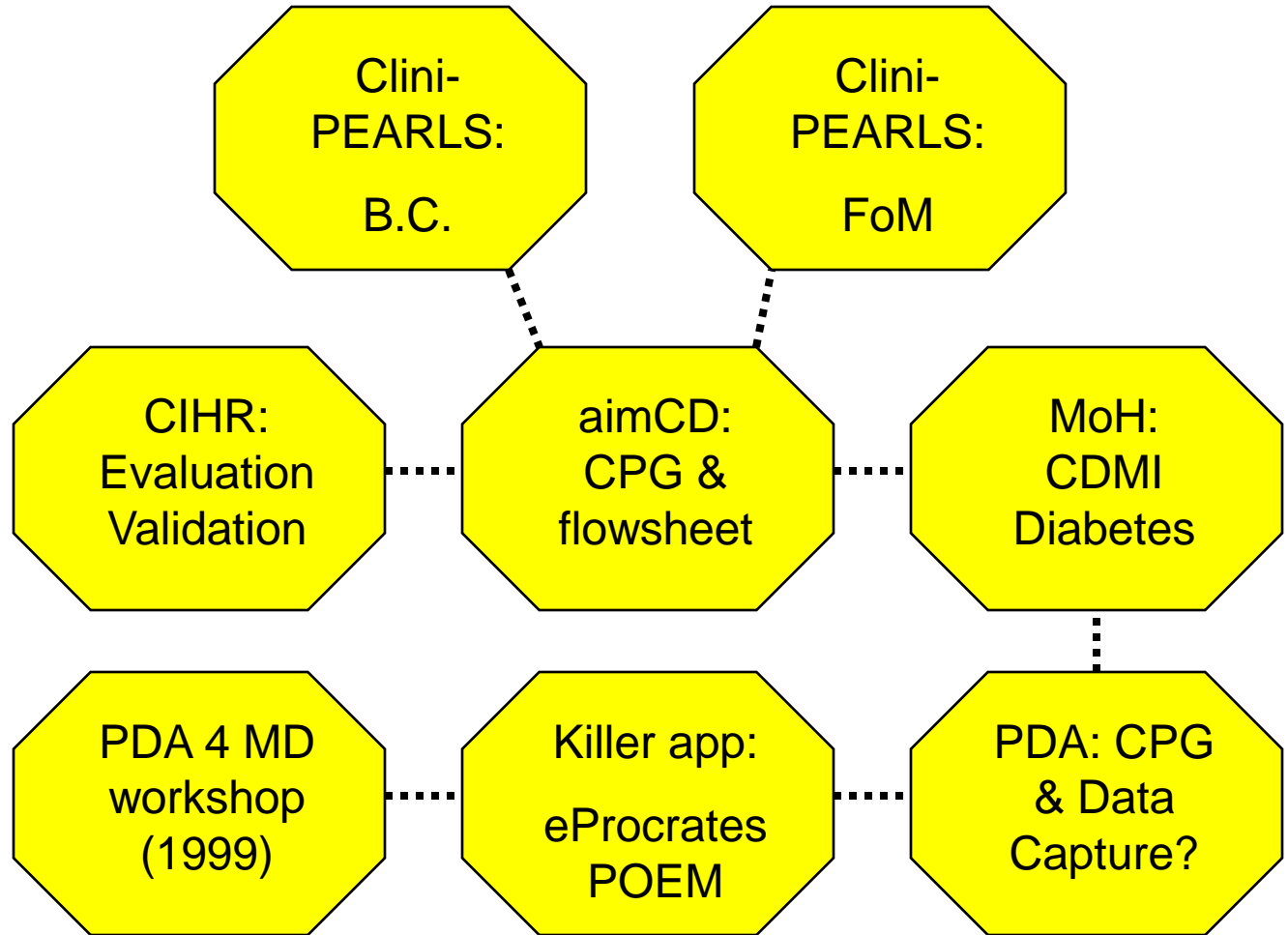
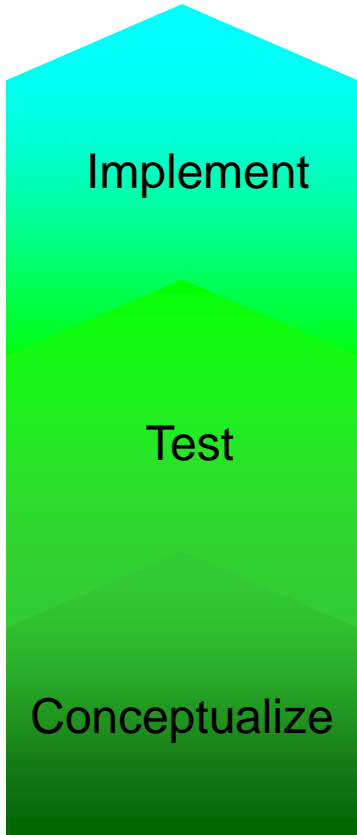
- ▶ 65 MDs tested (46M, 19F, 21 yrs practice)
- ▶ Traditional tools: 5.15/7
- ▶ aimCD overall: 4.08/7
- ▶ CPGs only: 5.69/7

Like:

- Evidence at fingertips
- Showing patients
- Learning and adhering

Dislike:

- Workflow vs data
- Data entry problems
- Duplicate data entries



CliniPEARLS

- ▶ MoH/GPAC 42 Guidelines conversion PDA
- ▶ Progressive MD sign up
- ▶ Extend to others in BC: nurses, PharmD
- ▶ FoM: students, residents, faculty
- ▶ Evaluation: Usability, adherence, outcome
- ▶ Go live: 12/2007

5/2008:

- 330 users
- 21 CPGs
- Formative evaluation



Lessons Learned

- ▶ Multiple stakeholders input necessary
- ▶ Iterative design, adaptive to evidence
- ▶ Form fits function: emergent goals, results
- ▶ Flexibility: Changing roles of stakeholders
- ▶ Fun filled journey with a common purpose



Future...

- ▶ **KT: Provincial, Academic adoption**
- ▶ **Evaluation: adherence & outcome**
- ▶ **Evolution: publishing tool beyond CPGs**
- ▶ **Innovation: Mobile computing Principles KT**





“Do not follow where the path may lead.
Go instead where there is no path and leave a
trail.”

Ralph Waldo Emerson