The CAMINO DE SALUD NETWORK: eConsult Pilot



November 5, 2012 Alameda Health Reform Hearing Charlene Chen, MHS

Presentation Topics

Background
eConsult Overview
Preliminary Findings
Lessons Learned
Next Steps

Background: Camino de Salud Network

- The Camino de Salud Network (CDSN) was launched in 2004 to address the fragmented, silo-ed approach to safety net care in Los Angeles
- Public-private health care partnership:
 - Anchor hospital: LAC+USC
 - 14 community health centers (over 50 clinic sits)
 - Network manager: COPE Health Solutions
- CDSN builds relationships between PCPs and specialists to:
 - Facilitate mutual trust and confidence
 - Open avenues of communication
 - Create an environment conducive to learning

*Sponsored by Kaiser Permanente Southern CA Community Benefit for past 3 years

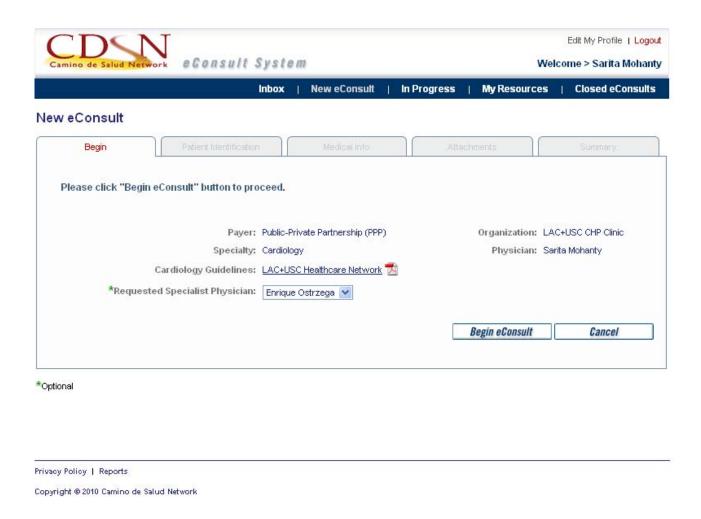
Why eConsult?

- eConsult emerged out of a need to connect LAC+USC specialists with primary care providers for the purpose of:
 - Co-management of patients
 - PCP capacity building
 - Timely access to specialty care
 - Reduction of unnecessary referrals to LAC+USC specialty clinics and to the ED

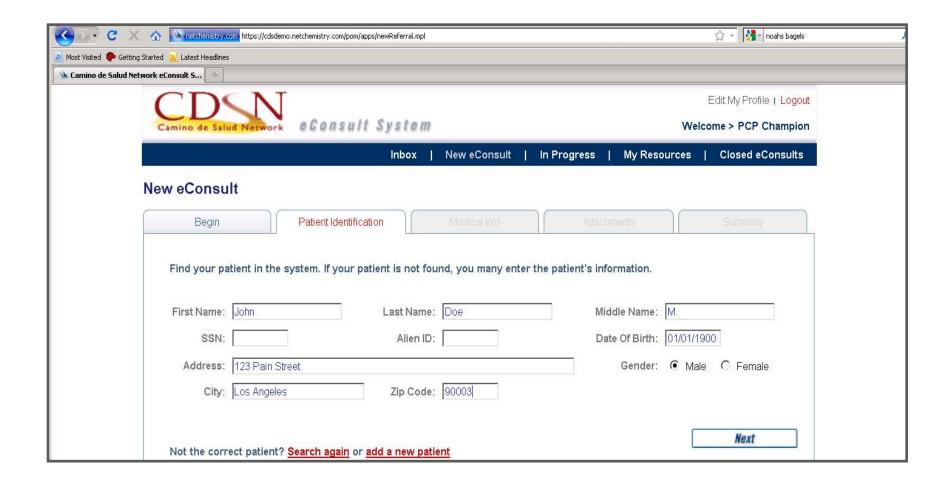
The eConsult Solution

- Initially, consultations occurred via phone
 - Time intensive
 - Difficult to get both parties on phone at the same time
 - Couldn't be done easily from home or in the "margins" of the workday
- eConsult was devised to offer:
 - Web-based access
 - Flexibility/convenience "asynchronous"
 - Security
 - Ability to share files (e.g., labs, images)
 - Documentation/organization of consults
 - Standardization of process
 - Diffusion of clinical guidelines
 - Ability to track and monitor utilization and other measures

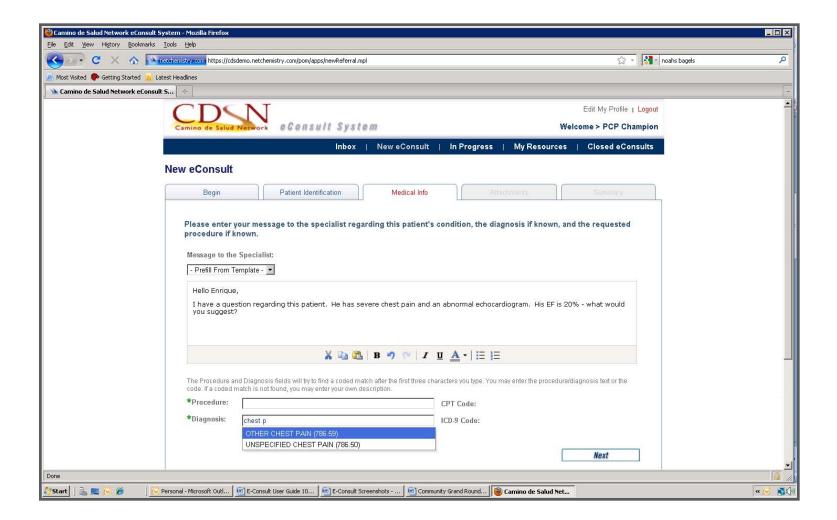
eConsult: Begin a New Consult



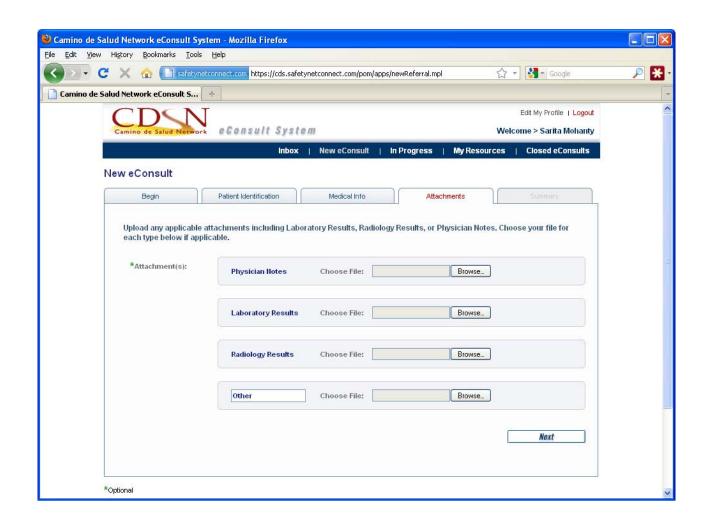
Enter Patient Identification



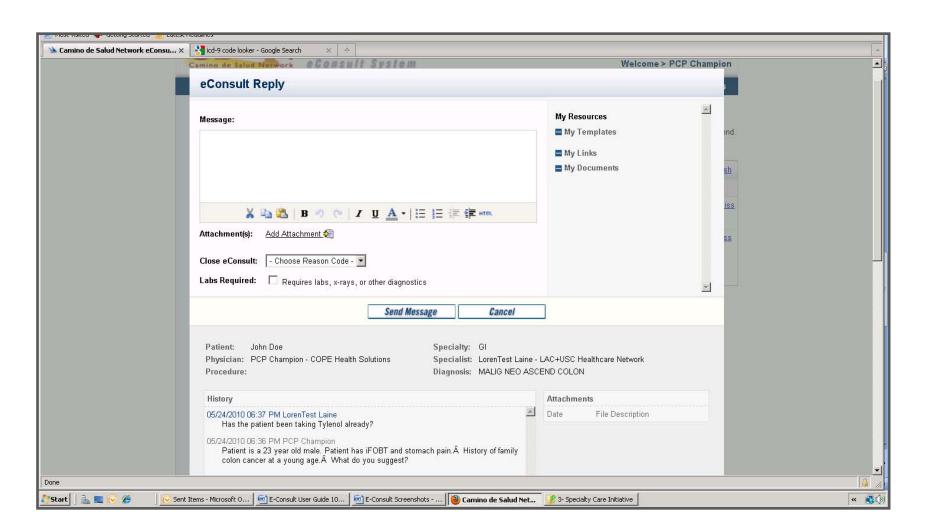
Enter Medical Info



Include Relevant Attachments



Engage in Clinical Dialogue with Specialist



Preliminary Findings

- Testing phase (June 2010-May 2011)
 - 49% of eConsults resulted in an averted referral

Disposition of Closed eConsults

	Referred	Managed by PCP	Total
Cardiology	7	20	27
Rheumatology	31	17	48
Total	38	37	75

Lessons Learned

Challenges:

- IT challenges
- Provider time
 - It takes time to upload and post a consult (5-8 minutes)
 - Adoption can take time
- Lengthy process for County approval
- Concerns regarding liability

Lessons Learned

- Need to align incentives for all users
- Use of eConsult gained momentum as specialists and PCP's built relationships and trust
- More than "e-referral," a key element of success has been the clinician to clinician dialogue
- Consider the role of support staff (e.g., referral coordinators, case managers, system administrator)
- Ongoing project management is critical for implementation, training, and adoption
- Need for workflow redesign at clinic sites to support the use of eConsult

Next Steps

- LA County-wide eConsult initiative led by LA Care Health Plan in partnership with LA County DHS, Health Care LA IPA, MedPOINT Management, and the Community Clinic Association of Los Angeles County
- eConsult will be implemented in 31 Community Partner Sites, 22 DHS Sites and 7 Referral Centers - for a total of 60 sites
- Utilizes an innovative workflow methodology to ensure eConsult integration and long term adoption
- Timeline for deployment: June 2012 to May 2013

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