



2016

Clinical Innovations to Address Equity

Couchiching Family Health Team

Digital COPD Screening



While replacing an outdated smoking and chronic obstructive pulmonary disease (COPD) screening program with a comprehensive, universal process, the Couchiching Family Health Team also created an opportunity to collect demographic data to allow them to identify vulnerable patients and those who face hidden needs and obstacles as a first step toward treating them.

The team designed an automated, patient-driven approach to screening that begins in the waiting room using EMR-integrated tablet computers. Patients are able to update their own contact information and complete consent forms online and they provide the

demographic data that is so crucial to equitable care. Patients appear to be more comfortable entering demographic data into the tablets than filling out forms; it is an unobtrusive approach that seems to be uniformly popular among all patients, regardless of age or gender.

In addition, the system reduces the administrative workload because patients are able to update their own contact information and complete consent forms online. The initial screening is also done online, and the answers to the initial questions dictate whether the patient needs educational materials or referrals.

Thanks to the new system, the team has been able to identify trends and look for opportunities to address barriers. Armed with this information, they are developing new strategies to address the needs of their population, including programs for mental health care and diabetes management. The process is also easily replicated in other clinical settings.

With regard to lung health, this new system has transformed the screening process, allowing the team to screen more than 40 per cent of patients – upwards of 3,000 – in four months. The team administered the Canadian Lung Health Test to 1,300 patients, compared to only 45 the previous year. Both smokers and people at risk for COPD were easily identified, and smoking cessation programs saw a 33 per cent increase in participation. In addition, early identification of at-risk individuals makes it possible to have an impact on their health early in the disease trajectory.





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Key Facts:

- Team developed a digital innovation to collect demographic data without increasing administrative burden.
- Data helps team to identify and treat patients with hidden needs or those who face barriers
- Within four months:
 - o More than 40 per cent of patients screened and 432 smokers were identified
 - o 1,300 patients received Canadian Lung Health Test, vs. 45 in previous year
 - o 33 per cent increase in smoking cessation program referrals

