

Benefits evaluation is an important component of the connecting South West Ontario (cSWO) Program that helps to support and demonstrate the realization of health system benefits through the adoption of an electronic health record (EHR). By pursuing the measurement of organizational value (improvements in the efficiency of care delivery such as time-savings and redirected resources) and clinical value (patients undergo fewer unnecessary tests, patients have improved access to care) ultimately, patients benefit from higher quality, better informed clinical decision-making.

The cSWO Benefits Realization program uses a research-based approach to identify areas of clinical best practice that are affected by the use of the EHR, and works collaboratively with clinicians to understand the value of the EHR. This formative evaluation process informs change management and adoption, and enables clinicians to use the EHR more effectively. This research does not include the use of any personal health information.

The document is one in a series of case studies which describe the clinical value of the EHR in different clinical settings and contexts, particularly with respect to clinical best practices. The work of the cSWO Benefits Realization program is ongoing; in some cases, these cases raise questions for further investigation, and clinicians are invited to participate in benefits evaluation to continue to develop these answers.

Value statement

In the treatment of early psychosis, the use of the data and information through the cSWO Regional Clinical Viewer, ClinicalConnect™ enables clinicians in the provision of care for patients, often resulting in timely care which can improve patient outcomes.

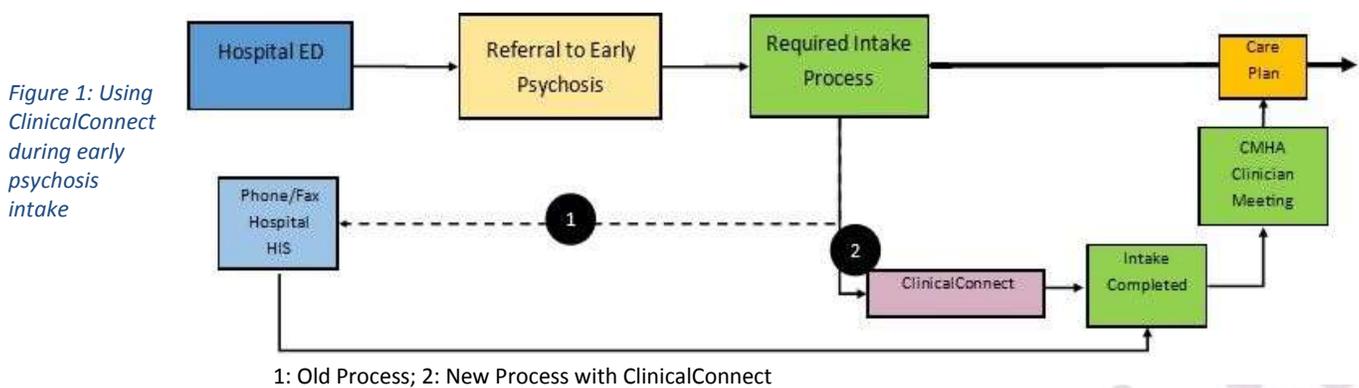
Clinical best practice for early psychosis

Research widely suggests that the duration of untreated psychosis is an important indicator linked to patient outcomes. However, the prodromal period of the development of psychosis does not reveal a clear measure of when patients have progressed into a psychotic state, which can make reducing the duration of untreated psychosis challenging.

A psychotic episode is a milestone event that enables clinicians to identify psychosis. There is a clear interest in getting the patient to comprehensive treatment promptly after a psychotic episode or the identification of psychosis.

EHR usage in early psychosis intake

ClinicalConnect can be used to verify parts of the client's medical history, a required process to acceptance into a psychosis treatment program.



Clinical value of the EHR in early psychosis intake

The introduction of ClinicalConnect in the intake process for early psychosis program referrals, the waiting period before acceptance to the treatment program has been reduced.

Testimonial

“We regularly work with hospitals to coordinate care for patients coming from an admission who have experienced a first episode of psychosis. Our program follows specific Ministry guidelines for serving individuals who are treatment naïve for psychosis and have not been ill for longer than a year.

ClinicalConnect allows me to access information from a client's most recent admission and also any historical hospitalizations. Previously, I had to request this from medical records at the hospital and this could take a week or more and may not always be the complete picture. **With ClinicalConnect I can receive a referral, access all the needed information and potentially have them assigned to a worker on the same day.**”

Katelyn Young, Intake Clinician - First Step Early Psychosis Program, Canadian Mental Health Association Waterloo Wellington Dufferin

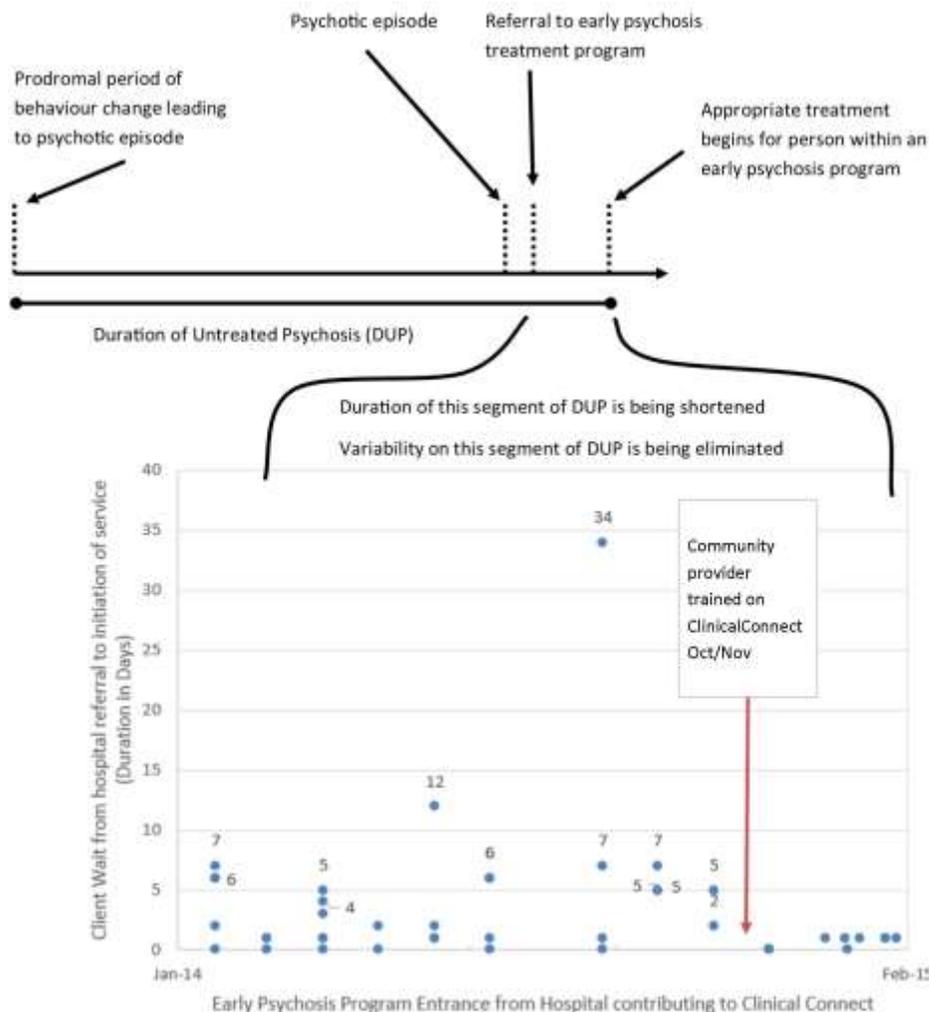


Figure 2: Reducing duration of untreated psychosis with ClinicalConnect

Questions

For questions, comments, or to participate in the cSWO Program’s Benefits Realization program, please contact:

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Sources

Craig, T.K., et al. (2004). “The Lambeth Early Onset (LEO) Team: randomized controlled trial of the effectiveness of specialized care for early psychosis.” *BMJ* **329**(7474): 1067.

Singh, S.P. (2007). “Outcome measures in early psychosis: relevance of duration of untreated psychosis.” *British Journal of Psychiatry* **191**((suppl. 50)): s58-s63.

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