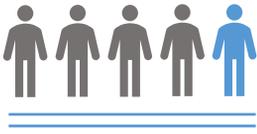


Patient forms facilitate an increase in the use of validated mental health assessments in primary care. This results in an improved standardized assessment process, and more effective use of patient information at the point of care, allowing for more time spent with patients.

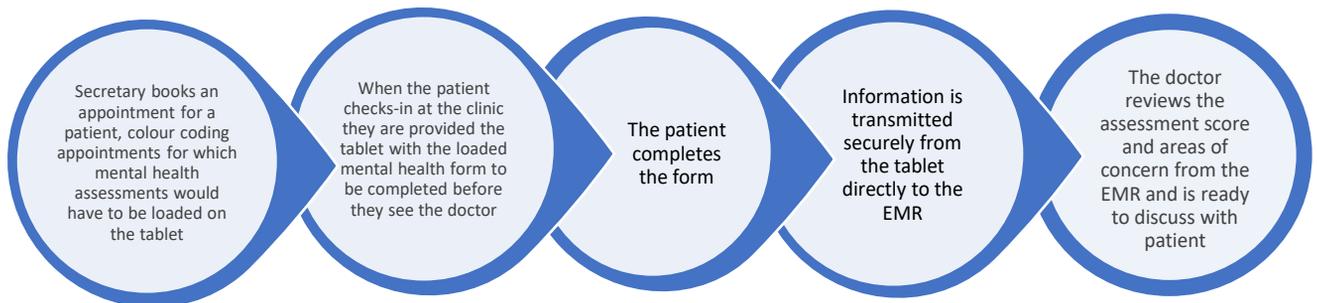


1 in 5 people in Ontario live with a mental health condition each year.¹ Primary care clinicians play an important role in providing proper screening, diagnosis, treatment and referring patients to other care providers and community support programs, depending on the type and severity of mental health illness.²

To better support efficient and standardized mental health screening using validated tools, Dr. Neil Naik from SRS Medical in Waterloo, Ontario, adopted patient forms via tablets in his practice in June 2017. He uses tablets to assess the mental health of patients booking appointments for:

8:10				
8:20				
8:30				
8:40				
8:50				
9:00AM	Mental Health Concerns	Annual Examinations	New Patient Visits	Patients with Somatization
9:10				
9:20				
9:30				

Workflow process:



“The time it takes for me to have an effective conversation with my patients is significantly reduced. Not only can I focus on issues that are important for the patient, but the screening allows for the patient to reflect on the effects their condition has on their activities of daily living, allowing for a more meaningful dialogue.

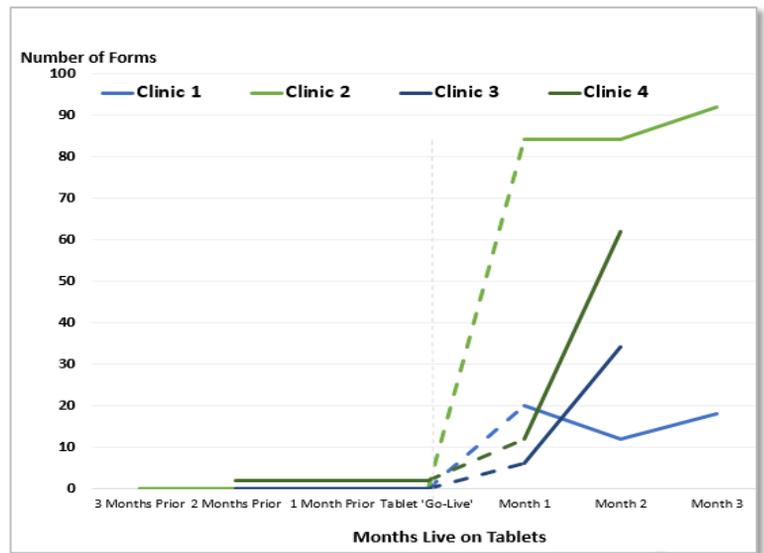
The tablets allow for quick and easy communication, requiring minimal input from my support staff, thus allowing them to focus on patients who require the extra time.”

Dr. Neil Naik, SRS Medical

Analysis of tablet data from different clinics that have adopted the tool in the Waterloo Wellington Local Health Integration Network (WWLHIN) illustrated an increase in the number of validated, standardized mental health assessments completed from pre to post adoption of tablets.

Some clinics are larger than others with a higher number of doctors and a higher number of patients, illustrated by the difference in the number of mental health assessment forms completed.

Pre-tablet adoption data is provided based on feasibility by clinic.



Since the adoption of tablets into practice, Dr. Naik has experienced the following:

Standardized the way mental health screening/assessments are done

Increased capacity to conduct mental health assessments efficiently, having more time to spend with patients

Used information/mental health assessment scores at point of care, focusing more on treatment

Ability to graph patient mental health scores over time – assisting in detecting improvements and declines over time, to better guide action

Reduced time spent scanning and uploading paper assessments into EMR by clinic administrators, allowing more time to focus on activities that add value to patients

Saves 5 to 10 minutes of administrative work per patient, allowing for more time to discuss next steps

If you have any questions or would like further information on this case study, contact communications@ehealthce.ca.

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