

REACH Grant Knowledge
Translation Topic:
**Primary Care Considerations for
Modernizing GSSO Terminology**

November 9, 2021

Karen Courtney, Francis Lau, Aaron Devor, Kelly Davison, Roz Queen

University of Victoria

Marcy Antonio

University of Michigan

Jody Jollimore, Michael Kwag, Anu Radha Verma

Community-Based Research Centre

Canada Health Infoway, Canadian Institute for Health Information, Canadian Health Information Management Association

- We acknowledge with respect the Lekwungen-speaking peoples on whose traditional territories the University of Victoria stands; the Songhees, Esquimalt and the W_SÁNEC (“w’Saanich”) peoples, whose historical relationship with the land continues to this day
- I hope each of you will join me and acknowledge the privilege we have of coming together in the spirit of respectful dialogue from the traditional territories where you are located.

Agenda

- Meeting Schedule
- GSSO Action Plan
- Primary Care
- Potential Issues in Primary Care
- Today's Questions

MSFHR REACH Grant Special Topics Meetings

- Today – Primary Care
- Tuesday, November 23 (0900 Pacific/1200 Eastern) – Acute & Tertiary Care
- Tuesday, December 14 (0900 Pacific/1200 Eastern) – REACH project update

GSSO Action Plan

1. Envisage an equity- and SGM-oriented health system vision and goal
2. Engage and partner with organizations and communities to modernize GSSO information practices to meet SGM needs
3. Establish GSSO terminology for patient care, health system use and research
4. Enable EHRs *+digital health* to collect, use, exchange and reuse standardized GSSO data
5. Integrate and tailor GSSO data collection with organizational structures, policies, use cases and workflow processes
6. Educate & train staff to provide culturally competent and safe care, and educate patients to understand need
7. Establish a central hub to coordinate this action plan over time and continue national conversation as next step

Primary Care

- Healthcare at a basic rather than specialized level for people making an initial approach to a doctor or nurse for treatment
- Primary medical resource and counselor to an individual or a family
- Scope includes:
 - health promotion
 - illness and injury prevention
 - diagnosis and treatment of illness and injury
- Functions:
 - direct provision of first-contact services
 - coordinates to ensure continuity and ease of movement across the system

Primary Health Care Services

Types

- Prevention and treatment of common diseases and injuries
- Health promotion
- Referrals to/coordination with other levels of care (such as hospitals and specialist care)
- Basic emergency services
- Primary mental health care
- Palliative and end-of-life care
- Healthy child development
- Primary maternity care
- Rehabilitation services

Healthcare Providers

- Family physicians
- General medical practitioners
- Nurse practitioners
- Internal medicine practitioners
- Pediatricians
- OB/GYN
- Nurses

Culturally Safe Policies for GSSO Data Collection

- Universal
 - Asked of all patients
- Informed consent
 - Letting all patients know why these questions are being asked
 - Patients may decline to answer, may be selective in whom they disclose, may be selective in what they disclose
- Updated
 - Asked annually, or when there are discrepancies within the record
- Confidential process
 - Using standardized forms ideally through self-administered through a portal
 - Paper-based introduces considerations for who will enter this data
 - Or in a private setting when asked verbally
- Trained staff who understand how to ask information in a culturally safe way
- Relevant
 - Requested GSSO information should be relevant to the clinical encounter

Potential Differences in Primary Care

- Lifespan issues
- Longitudinal care emphasis over episodic care
- Case management and care coordination component

Questions

- How does primary care workflow and environment affect what GSSO data is collected?
- What would a minimum data set look like for different primary care processes?
- What concerns need to be addressed about sharing primary care data with other levels of care (acute & tertiary)?

How does primary care workflow and environment affect what GSSO data is collected?

Primary Care Workflow

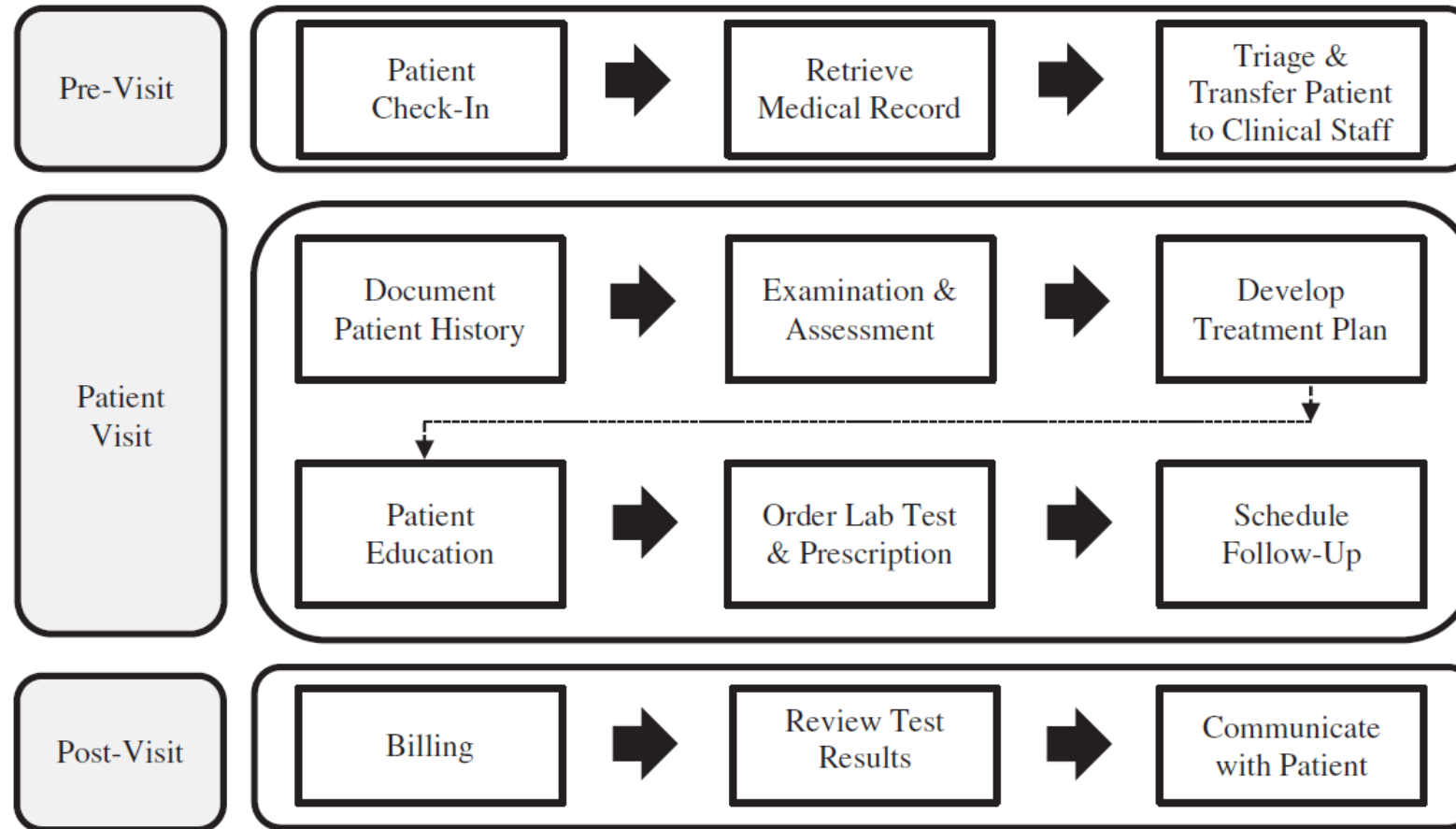


Figure 1 Typical primary care provider workflow: pre-visit, patient visit, and post-visit. Clinical Workflow Process Diagram adapted from Bowens *et al.* (2010) and Lee and Shartzter (2005: 1–2).

Pre-practitioner GSSO Data Collection – Primary Care Setting

- What is the purpose of the pre-practitioner exchange?
 - Identity confirmation
 - Triage/screening
 - Letting the practitioner know the patient has arrived
- Who should be collecting the information?
 - Administrative staff
 - RN or other clinical provider
- How should the information be collected?
 - Verbal
 - Standardized forms
 - Online form/app
- What information is appropriate for display?
 - Administrative staff
 - Waiting room
- What should be collected?
 - Gender identity
 - Administrative Gender/Sex
 - Administrative/Legal Name
 - Name Used
 - Pronouns Used
 - Sex Assigned at Birth
 - Anatomical Inventory
 - Hormone Medication Inventory
 - Hormone Reference Ranges
- Are there setting specific considerations?
 - Lifespan issues
 - Longitudinal care
 - Case management or coordination
 - Others?

Clinical Encounter GSSO Data Collection – Primary Care Setting

- What is the purpose of the exchange?
 - Identity confirmation
 - Triage/screening
 - Updating history and current condition
 - Guidance for assessment and/or examination
 - Guidance for developing treatment or prevention plan
 - Surveillance for ongoing conditions
 - Obtaining other care
 - Coordinating existing care
- Who should be collecting the information?
 - Clinical staff
 - Clinical provider
- How should the information be collected?
 - Verbal
 - Standardized forms - patient
 - Online form/app – patient
 - EHR - provider
- What information is appropriate for display?
 - Clinical provider
 - Clinical staff
- What should be collected?
 - Gender identity
 - Administrative Gender/Sex
 - Administrative/Legal Name
 - Name Used
 - Pronouns Used
 - Sex Assigned at Birth
 - Anatomical Inventory
 - Hormone Medication Inventory
 - Hormone Reference Ranges
- Are there setting specific considerations?
 - Lifespan issues
 - Longitudinal care
 - Case management or coordination
 - Others?

Post Clinical Encounter GSSO Data Collection

– Primary Care Setting

- What is the purpose of the exchange?
 - Identity confirmation
 - Billing
 - Review results
 - Obtaining other care
 - Coordinating existing care
- Who should be collecting the information?
 - Administrative staff
 - Clinical staff
 - Clinical provider
- How should the information be collected?
 - Verbal
 - Standardized forms - patient
 - Online form/app – patient
 - EHR – provider
- What information is appropriate for display?
 - Administrative staff
 - Clinical provider
 - Clinical staff
 - Patient
 - Plain sight
- What should be collected?
 - Gender identity
 - Administrative Gender/Sex
 - Administrative/Legal Name
 - Name Used
 - Pronouns Used
 - Sex Assigned at Birth
 - Anatomical Inventory
 - Hormone Medication Inventory
 - Hormone Reference Ranges
- What information should be shared?
 - With funders/insurance
 - With other clinical providers
 - With patients
 - With designated proxies
- Are there setting specific considerations?
 - Lifespan issues
 - Longitudinal care
 - Case management or coordination
 - Others?

What would a minimum data set look like for different primary care processes?

What concerns need to be addressed about sharing primary care data with other levels of care (acute & tertiary)?

Are there concerns we haven't addressed yet with:

Lifespan issues

Longitudinal care emphasis over episodic care

Case management and care coordination component

Next steps?



Who should have access to this information?

GSSO Information	Patient (portal) *	Proxy (portal)	Medical Office Assistant / Clerical	Clinicians	Primary Care Provider
Gender Identity	Yes ¹	Optional?	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}
Name used	Yes ¹	Yes**?	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}
Pronouns Used	Yes ¹	Yes?	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}
Legal Name	Yes ¹	Optional?	Yes, all patients for identification, less visible ¹ ; only when required ²	Yes, all patients for identification, less visible ¹ ; only when required ²	Yes, all patients for identification, less visible ¹ ; only when required ²
Sex Assigned at Birth	?	Optional?	Yes, to update records (less visible section) ¹	Yes ¹ , when clinically relevant? ²	Yes, all patients ¹ Yes, when clinically relevant? ²
Inventories	?	Optional?	Yes, to update records (less visible section)	Yes ¹ , when clinically relevant? ²	Yes, all patients ¹ Yes, when clinically relevant? ²
Sexual Orientation	Yes	Optional?	?	Yes ¹ , when clinically relevant? ²	Yes, all patients ¹ Yes, when clinically relevant? ²

This is an area that requires further development.



Use Cases: Primary Care

Intake	A request for care is received and evaluated for eligibility by the clinical service.
Registration	A health record is created for a client.
Clinical Encounter	A client is seen by a primary care provider and the visit is documented.
Prescription	A prescription is received by the pharmacy and medication is dispensed for a patient.
Laboratory	A request for testing is received by a laboratory and a result with interpretation is receive by the ordering provider.
Imaging	A request for imaging is received by a facility and a result with interpretation is received by the ordering provider.
Referral	A request for care is received by another provider and advice is received by the ordering provider.
Billing	A billing claim is created with the correct details to receive payment from the insurer.
Research	Data is used to monitor population-level healthcare experiences and outcomes.

Direct Source: Trans Care BC, 2020c



What information should be collected?

GSSO Information	Intake	Registration	Clinical Encounter	Prescription	Laboratory	Imaging	Referral	Billing	Research
Gender Identity	Optional	Optional	Yes	Yes	Yes	Yes	PRN		Optional
Admin Gender/Sex		PRN*	PRN*		PRN*			PRN*	Optional
Admin / Legal Name		Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Name Used	Yes	Yes	Yes	Yes	Yes	Yes	Yes		
Pronouns Used	Optional	Yes	Yes	Yes	Yes	Yes	Yes		Optional
Sex Assigned at Birth		Optional							Optional
Anatomical Inventory			PRN			PRN	PRN		Optional
Hormone medication inventory			PRN		Yes		PRN		Optional
Hormone reference ranges					PRN/ Yes				Optional

Direct Source: Trans Care BC , 2020c + REACH participants