

Project Title:	Use of Electronic Referral System to Improve the Outpatient Primary Care-Specialty Care Interface
Principal Investigator:	Bell, Douglas, M.D.
Organization:	RAND Corporation
Contract Number:	290-06-0017-3
Project Period:	09/07 – 09/09
AHRQ Funding Amount:	\$999,825
Summary Status as of:	December 2008

Strategic Goal: Develop and disseminate health IT evidence and evidence-based tools to support patient-centered care, the coordination of care across transitions in care settings, and the use of electronic exchange of health information to improve quality of care.

Business Goal: Implementation and Use

Summary: This project evaluates the implementation of a Web-based eReferral system developed by the University of California San Francisco (UCSF) and San Francisco General Hospital (SFGH). The project extends use of the system beyond the five clinics in which it is currently used to an additional specialty clinic, and it includes an intervention to expand use of the system by recruiting primary care providers at affiliated federally qualified health centers. The evaluation of this system centers on changes in the quality, efficiency, accessibility, and patient-centeredness of outpatient specialty care. The study will yield an implementation handbook, cost tool, and summaries of findings for dissemination to other care settings. The project is currently mid-way through and entering its final phases of post-intervention data collection and analysis.

Specific Aims

- Compare changes among specialty clinics on indicators of the quality, efficiency, accessibility, and patient-centeredness of outpatient specialty care before and after use of eReferral. **(Ongoing)**
- Assess distinctive eReferral implementation practices among specialty and primary care sites and explore how these practices might influence the system’s success or failure in achieving business and health care goals. **(Ongoing)**
- Estimate the net costs (versus savings) from implementing eReferral for specialty and primary care sites and document the business case for the system’s adoption and use. **(Ongoing)**

2008 Activities: In 2008, the specialty intervention component in the SFGH Renal Clinic was launched and collection of pre-intervention cost-related tracking data in the Renal Clinic was completed. After SFGH management rejected the proposed intervention to develop an “Extranet” interface for eReferral with affiliated primary care clinics, we explored multiple alternative interventions with the clinics. At the end of 2008, these negotiations were ongoing.

In addition, the contractor completed analysis of preliminary before and after data on quantitative outcomes (quality, efficiency, accessibility, and patient-centeredness) in control versus intervention specialty clinics, before and after use of eReferral. Also completed were pre-intervention user interviews, development of a coding scheme for qualitative analysis of interview transcripts, and application of the coding scheme to mark up the transcripts using ATLAS.ti software.

Finally, the interim implementation and impact report was drafted and a draft “implementation handbook” was completed. Work also began on the final version. Preliminary results were presented to local stakeholders, including leaders at the San Francisco Health Plan.

Preliminary Impact and Findings: As of December 2008, preliminary findings were being summarized in an interim report to be submitted in early 2009.

Selected Outputs

None available.