



# WHAT CARE DO PATIENTS AND COMMUNITIES NEED?

## Using HDC data to inform Primary Care Networks



As work begins around the province to create Primary Care Networks (PCN), it's becoming increasingly important for Divisions of Family Practice to gather patient data to identify the health care needs of their communities. Population health data plays an important role in the process of applying for funding and allocating resources, whether the data is gathered from EMRs, through community engagement, or by evaluating past initiatives like A GP for Me.

Strong data enables divisions to develop a clear understanding of how many patients in their communities need access to a primary care provider, and identify gaps in care that can be filled by allied health providers and health authority services. This data-gathering process can be particularly challenging for rural communities, but—as one rural GP learned recently—the Health Data Coalition (HDC) can help.

The rural GP recounts the story of how the **HDC Discover** software helped his division determine the resources and funding needed for their community. “Our rural division was unsure of how we were going to accurately measure the number of

attached and unattached patients who were in our geographically isolated community,” the GP explains. “Using **HDC Discover**, we were able to use the Division data to immediately see how many active patients (patients with at least one encounter with their family physician in the last three years) were recorded in our community EMRs. Because our community is isolated, patients do not have easy access to family physicians in any other community.”

Looking at the HDC data, the division was able to follow the aggregate results of enrolled physicians in the community during the course of the A GP for Me initiative, noting a 50% decrease (2500 patients) in the number of patients who were not attached to a family physician.

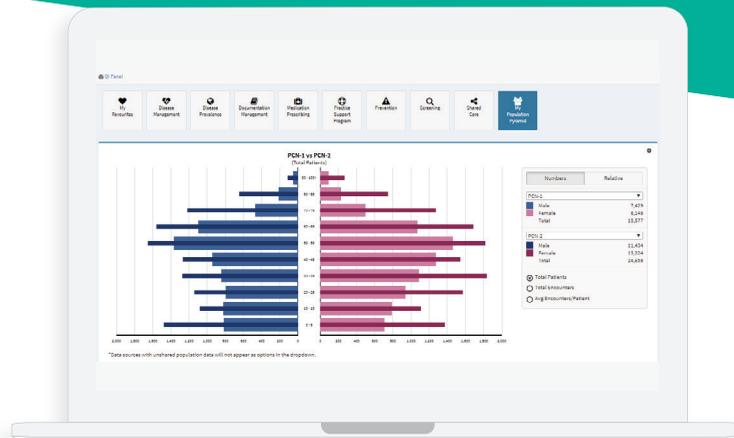
As well as providing active patient numbers, viewing HDC data through a community lens enables divisions to understand the broader health needs of residents, answering questions like “How many patients are there with specific diseases who require specific care?”.

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The GP clarifies, “Understanding these future needs and issues enables physicians to work with the local health authority and lobby or plan for services that will be needed, rather than simply reacting to needs when they arise.”

Perhaps the most important factor in sharing patient data to inform population health decisions is maintaining patient confidentiality. HDC provides a secure, confidential platform through which data can be uploaded while no identifying patient information is shared. As the GP explains, “Using **HDC Discover**, a physician can ask a range of questions. For instance: How many diabetics are in my practice? The answer can then be viewed by the physician or combined with answers from other practices to provide an aggregate answer. No individual patient information is shared via **HDC Discover**. No physician or practice names are shared, unless a user wants to share.” Knowing how many diabetics are in each physician’s practice can inform community-wide resource- and time-management decisions like organizing group visits or hiring a dietitian whose services can be shared between practices.

The work of this rural GP – and other GPs and allied health professionals around the province – to build a strong, secure database of population health data is creating a solid foundation for PCNs and other transformational health care changes underway across BC.



## Register Now

The majority of family physicians in BC now have access to HDC Discover through the following EMRs:

Oscar | TELUS Med Access | TELUS Wolf | MOIS | Intrahealth Profile

Learn more about the Health Data Coalition and how to enrol:

[hdcbc.ca](http://hdcbc.ca) | [info@hdcbc.ca](mailto:info@hdcbc.ca)



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