Specialist Reviewer Overview for Hyperspace Users

PLEASE REVIEW this terminology:

- eConsult: these are referrals to specialty services that have a specialist clinician who reviews the referral. They might send for scheduling immediately, reply with additional questions before ultimately scheduling the patient, and/or provide virtual specialty care
- Ambulatory referral: some San Francisco Health Network services do not have clinician reviewers and requests go straight to scheduling. For those services, it will be called "ambulatory referral". Patients are scheduled on a first come, first serve basis.
- Ambulatory referral to XXX (ED/ Inpatient): these referrals are meant to be used by ED/ Inpatient providers. These consults may be sent directly for scheduling or reviewed by a specialist clinician. Specialty services chose their preferred workflows.
- External (non-DPH) Referral to XXXX: this is what referrals are called if they are sent to an outside, non-San Francisco Health Network entity for services that are not available within SFHN or when a second opinion is needed.

Who can submit:

- Clinical Support Staff (ex. RN, MA, SW, etc…) if they select an authorizing provider
- Independent Clinician (ex. MD, NP, PA)
- Trainees (e.g. residents, fellows) if they select an authorizing provider (e.g. attending)
- Pharmacists (with an Authorizing Provider)

Support staff can submit on behalf of any independent clinician: (ex. MD, NP, PA). This clinician is considered the authorizing provider for the Ambulatory referral/eConsult order. Trainees cannot be authorizing providers.

Notifications about consults/ referrals

- Authorizing providers will receive In Basket notifications in 3 instances
  - When there is a reply from the Specialist Reviewer to the referring provider asking for more clarification or providing treatment/management guidance
  - When a patient has been scheduled for an in-person visit/appointment

o As an FYI when there is a response to a trainee who submitted an eConsult. Note that the attending/authorizing provider will not be able to act on these responses

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How to sign in and out of pools

Reviewing specialists have the option to sign in and out of their reviewing pool(s). If you are signed-out of your pool(s) your E-Consult folder will consist of only consults/ referrals you submitted as a Referring Provider.

To sign in and out of your designated reviewing pool(s):

- Step 1: Click the "edit pools" button from your In Basket
- Step 2: Use the checkmark to identify which pools you want to sign-in or sign-out of. (In the example below, the reviewer is signed-in to the ZSFG Urology eConsult pool but signed out of the Pediatric Urology eConsult pool)
- Step 3: Click "accept"

If you have signed out of your eConsult pool, remember to sign back in or else you will not see the eConsults awaiting your review.
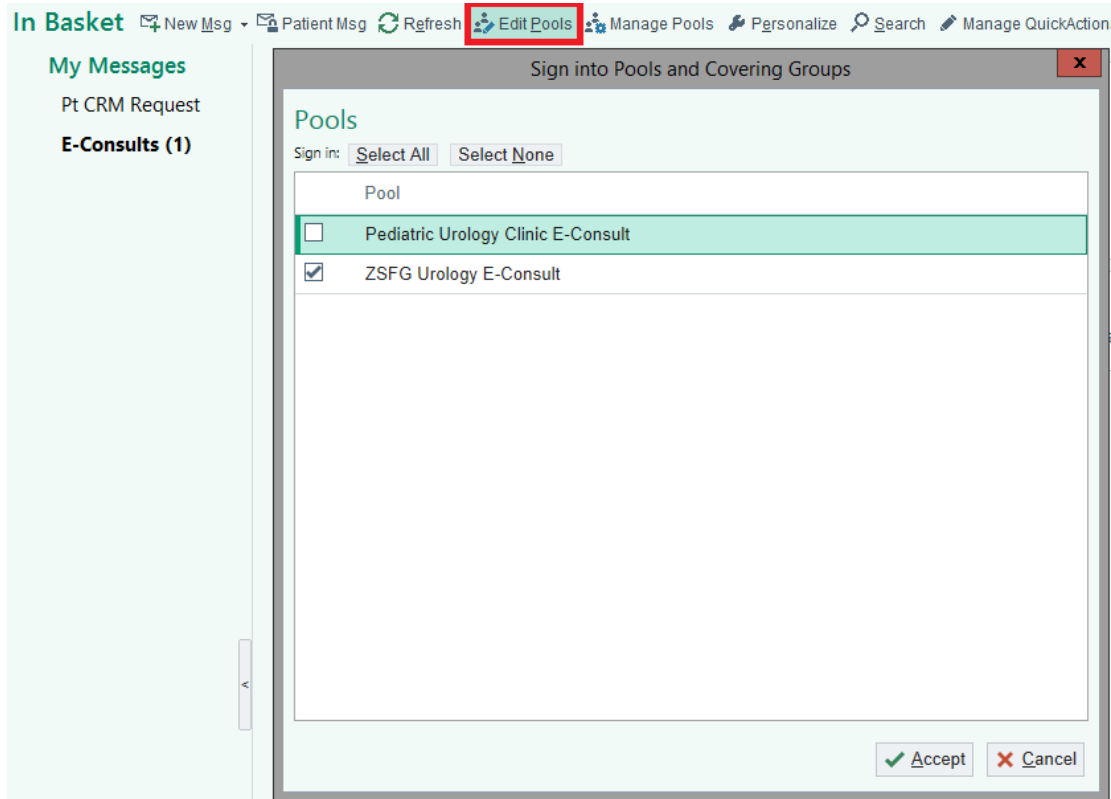
How to review an eConsult

All eConsults are routed to specialty eConsult pools. Each specialty eConsult pool includes several designated specialty clinicians who serve as reviewers.

- **Step 1: Open In Basket and click the E-Consults tab located on the left to view eConsult list.** The number in the parenthesis indicates the number of "**new**" consults in your In basket to review. Brand new consults are listed as "New" and are bolded. Those that are in your workqueue for over 3 days are in red font. You should also be able to view the key below that reminds you what different things mean.
  PLEASE NOTE
    - Referring providers may send a reply to both you and the eConsult pool for your specialty so you might get two responses in your in basket that are identical for the same patient. Use icons below to figure out which is which. For the cc'd eConsult, just mark "done" and work off of the other eConsult.

    o Additionally referring providers may want to add more information to the consult before you have had the opportunity to reply. They cannot addend/add information to the original eConsult so they may open up a second consult for that information. (see below under option 4 for how to recommendations on how to deal with this situation)

↑ High Priority	● Work Assigned To You
↓ Low Priority	Work Taken By You (Click icon to put back)
Cc	Work Assigned To Your Pool (Click icon to take)
	Work Taken By Others (Click icon to take)

Overdue messages are red.

- **Step 2: Single click a consult to review that individual consult.** Information will be provided under order question section. However, due to space limitations providers can now also put extra information under "Message" as shown below.

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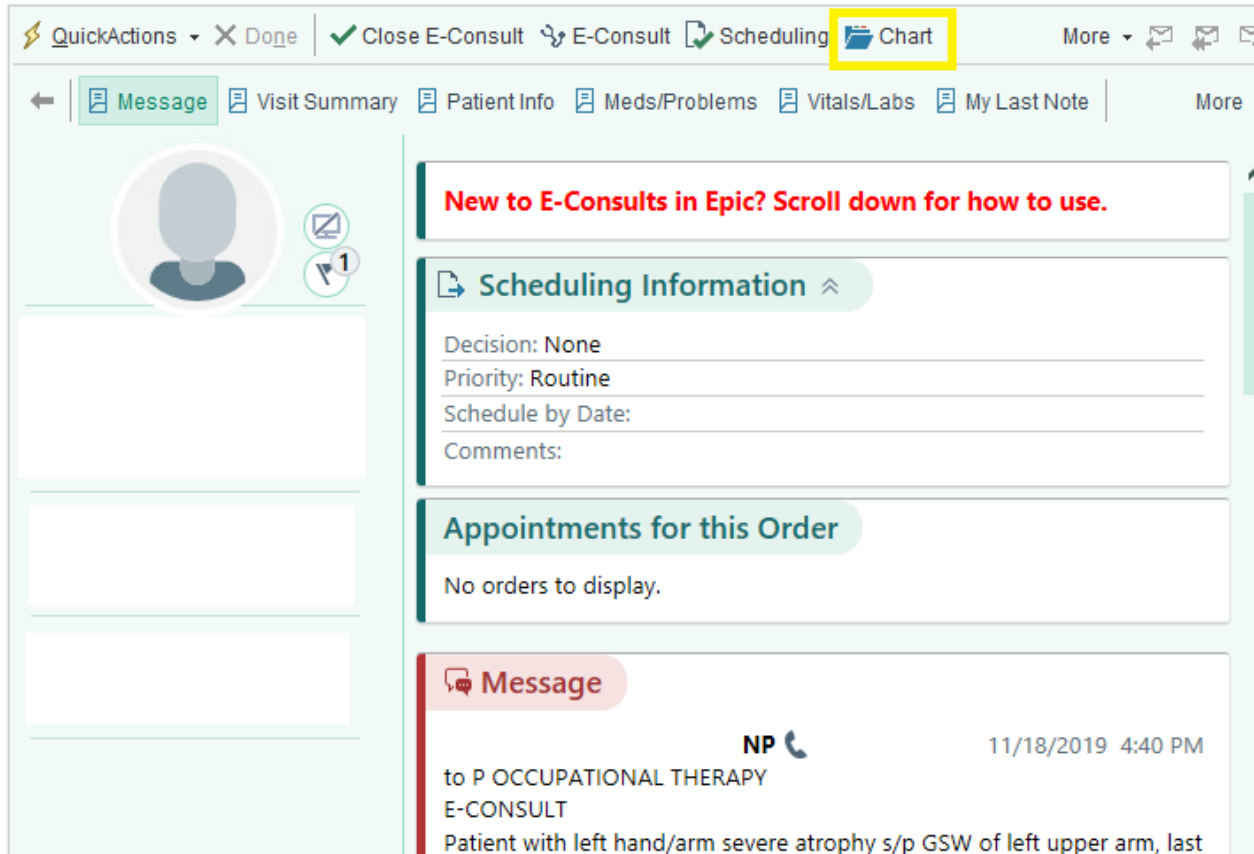
- **Step 3: Review chart as needed, using the "chart" icon in the yellow box above.** Helpful spots to find things include:
  - Media tab (includes most notes from eCW/LCR) and any attachments that have been uploaded to the chart and attached to the eConsult.
  - **-** Visit Summary shows the summary of the patient visit that prompted the provider to place an eConsult.
  - Dialogue from old eConsults are still available in the Reports/Notes section of LCR and are in process of being transferred to Epic.
- **Step 4. Take an action related to the eConsult.** There are 4 possible actions:
  - Option 1: Send consult to the scheduler with or without a note to the referring provider.
  - Option 2: Respond to a referring provider from an initial consult.
  - Option 3: Respond to a referring provider beyond the first response.
  - Option 4: Close the consult

Option 1: Sending a consult request for scheduling (with or without a message to provider)

Step 1: After reviewing the chart you have decided that this patient would benefit from being scheduled for an in-person visit, select the "Scheduling" button. You can do this for a new eConsult and for one that has an ongoing dialogue/has been sent back to you after you have asked for more information.

The following screen will pop up.

Please:

- Verify that the Priority is appropriate (Routine vs Urgent)
- Make sure that the Department Specialty (i.e., Nephrology) is accurate
- VERY IMPORTANT – **Make sure the Department (i.e., ZSFG Nephrology ward 92) has something entered into it and is the appropriate department for that consult.** This helps our schedulers find these consults and if it is missing (and it can default to empty), there is a good chance it will get lost.
- VERY IMPORTANT: Input information for the scheduler in the comments box. The more specific the better to help them out – especially for services that have different types of clinics on different days. This is particularly important, as the scheduler is not always consistent for every service.
- Click **OK** when done.

With the changes made to allow you to respond to a consult with back and forth after it has been scheduled (not previously possible), the consult will now not automatically fall off your list when you

send to scheduling. The eConsult will remain **open** on your eConsult workqueue. Options to get it off your work queue include:
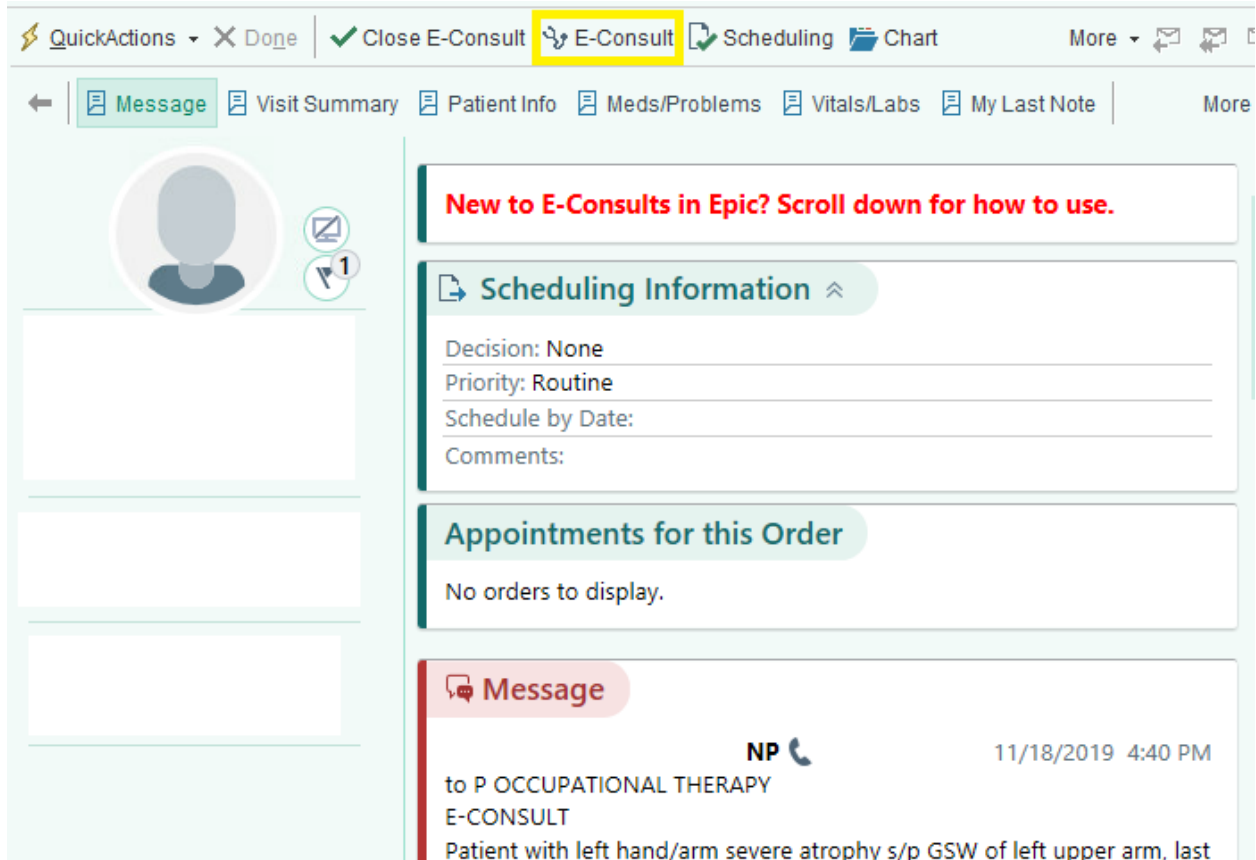
- Send it back to the referring provider with more information if appropriate (the yellow bottom "Specialist provider econsult response" as below with Option #3) OR
- Use the "Close E-Consult" button to close the consult. The consult is still with the scheduler when you do this.
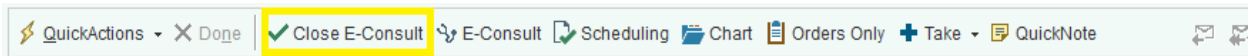
Using the "Close E-Consult" button will <u>not</u> affect the scheduling status if you have sent to scheduling BEFORE using the close button.


Option 2: Replying to an initial eConsult

<u>Step 1:</u> When you have decided that this patient would benefit from a response to the referring provider (either instead of or in addition to immediately scheduling), click the "E-Consult" button (with the stethoscope) to **create an eConsult encounter. YOU MUST USE THIS BUTTON FOR THE FIRST ECONSULT REPLY.**

Step 2: This brings you to the eConsult Visit Navigator. The note box automatically appears on the right hand side of the screen where you can respond to the eConsult.

To the left of the eConsult note, you can view the reason for consult under the "E-Consult Order" and message sections.

You can also dive deeply into the patient chart by using the Chart Review button, while keeping your note box available on the right hand side of the screen.
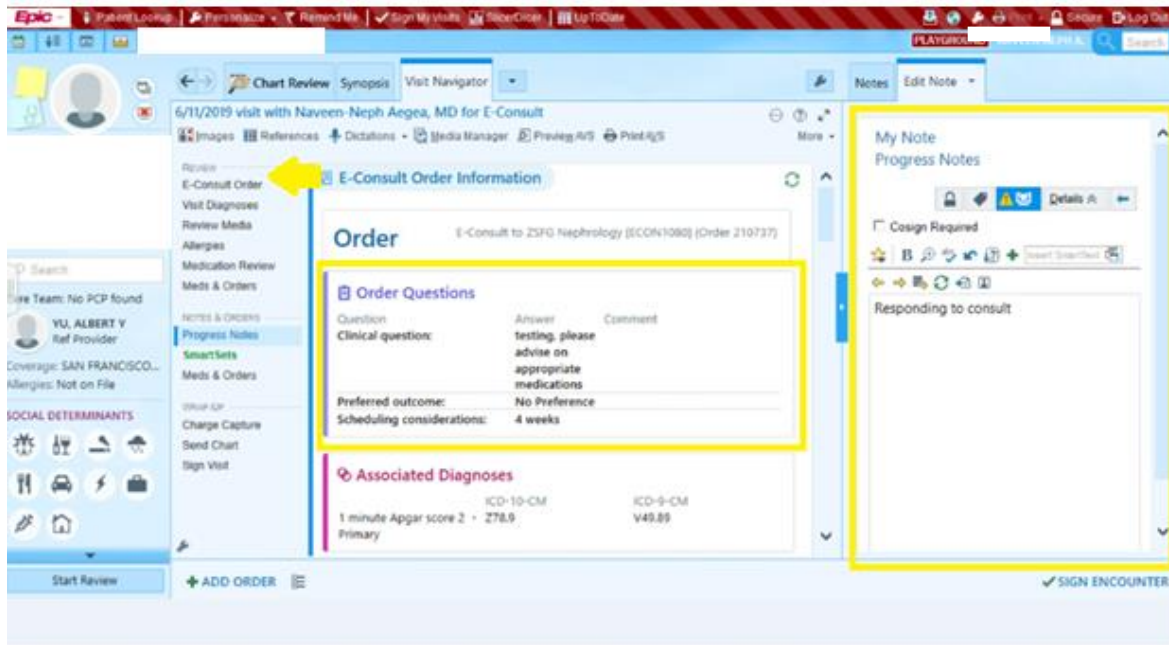
The Visit Navigator contains multiple sections pertinent to the "eConsult visit". You can see these listed in order on the left hand side of the screen under the REVIEW section (See arrow above).

Step 3: Write your note and click "accept" (see below).

Of note, if you get distracted and cannot finish your note, click "accept". As long as you have not signed the note what you have so far will be saved and you can then go do something else (grab a coffee, do some more work). The unfinished eConsult note will pop up in a new folder called "My open Encounters". Double click to open up exactly where you were and you can finish it.

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Step 4: Before you can sign the encounter you MUST complete the following:

- Enter a visit diagnosis. (see below) You have the option to manually search for diagnosis using the search field, choose from the common diagnosis options that your service has set-up for consultative notes or choose from the patient problem list if it has been populated.
- Starting January 2022, Specialty Reviewers will be required to enter a "Charge Capture". Please choose the most appropriate option.
- Under send chart, review routing of the eConsult. *The eConsult is automatically routed to the individual whose name is attached to the encounter during which the consult was submitted.* Please be sure to change the recipient to the correct provider if appropriate.
    o If the encounter provider is a trainee, the eConsult response will automatically be sent to the authorizing attending provider (with responsibility) and to the trainee as an FYI.
    o If the referring provider is not the PCP you should add the PCP to the recipient list and consider changing the responsibility to the PCP (see below/click Add PCP). You can also add additional recipients if applicable as an FYI.
- Note: Individuals who receive eConsult responses as FYI and do not have the "ball of responsibility" cannot take action on the eConsult. They can only read it. After reading, they can hit "done" which removes it from their list.

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Step 5: Sign Encounter

After signing the eConsult encounter, you will be re-directed back to your eConsult In Basket.

Option 3. Sending a response to the referring provider beyond the first response

If additional communication is required after the first response, you will get the consult back to the eConsult pool In Basket. (If you receive duplicate message in your personal In Basket, you may click "Done" on the message with a paper icon next to it – you can only respond to the message with the green ball of responsibilit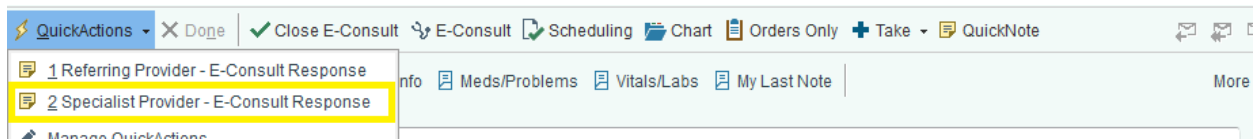y – see explanation above). To respond to the message, click "QuickActions" and select "Specialist Provider Only – E-Consult Response", as in the picture below. Write your response in the box, and click "Sign and Send" to send the message.
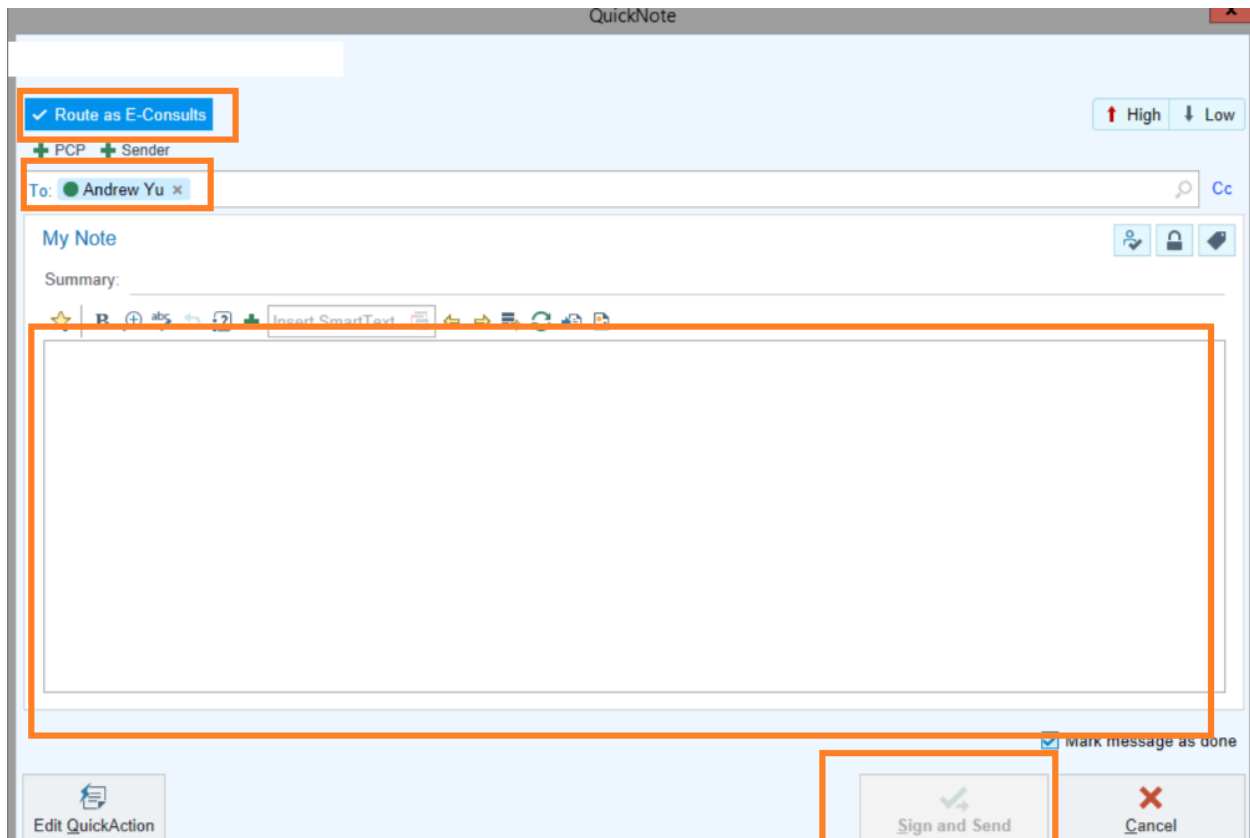
The Referring Provider will automatically be added to the recipient list. If you would like the patient's PCP to receive the response as well click the "PCP button" with the green plus sign.

Note: the individual who has the green ball next to their name will be able to respond to the consult. Other individuals added will have read-only access. To move the green ball to another individual click
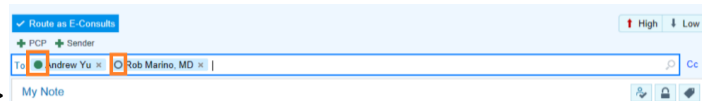
the small circle next to the providers name->

Be careful to read the full list of consultative responses before drafting your response, as the most recent response may not appear at the top of the list. The time stamps associated with back and forth dialogue can be inaccurate in some cases (e.g. the reply is timed before the question) and do not always reflect the order in which the conversation happened. We believe the changes in workflow in this document will fix this.

Option 4: Complete the consult using the Close E-Consult button without scheduling

The "Close E-Consult" button is used to **end** an eConsult conversation – and close the corresponding referral. This will close the dialogue and the referral. There are only a few instances when you might want to use the "complete" button without having already sent the patient for scheduling. The only times this might be appropriate would include:

- Patient is from ED/Inpatient and you know they already got scheduled through another workflow. Hitting Close E-Consult is okay and saves it from going to the scheduler work queue and potential duplicate appointments.
- Referring provider wanted to add in more information before you have responded to the initial consult so you have two new eConsults for the same patient. We recommend before hitting E-Consult you could copy/paste in the info from the second consult into the consult you are replying to so all information is in one eConsult. Then you can hit E-Consult.

OTHER POINTERS/SCENARIOS

- You have sent the patient to scheduling but the referring provider wants to provide more information to you with a new eConsult. If the patient is already scheduled, you can thank the provider with an eConsult reply and cc the provider the patient is scheduled with so they are aware. Or, if this information requires a new scheduling action (i.e., schedule the appointment sooner) we recommend that you send the patient for scheduling, use "Urgent" priority for scheduling and include in the comments box that this is to change the appointment time to a sooner appointment and be sure the patient isn't double booked.