

Web Based Portal Empowering Patients

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- Patient focused
- Web based
- Personalized support and disease management

What Patients Are Telling Us

Gaps in.....

- Dissemination of information
- Provision of supportive care
- Delivery of services

Dissemination of Information

- Information and communication needs rank high
- Barriers to obtaining valid information
- Communication issues with health care providers
- Delivery of information is fragmented



Welcome to My CARE Source

My CARE Source is your confidential, personalized website that will help you to manage your care at Grand River Hospital. By using this website, you will be able to obtain information about your:

- Treatment Plan
- Appointments
- Care



Your relationship

Your support

You can

Technical

Appointments:

Scheduled Date/Time	Procedure	Practitioner	Location	Appointment Status
03/22/2005 08:00 AM	FR ORTHOPAEDIC ADD ON APPOINTMENT	CHRIS, ANTHONY	KITCHENER WATERLOO HEALTH CENTRE, FRACTURE CLINIC AT KWHC	Scheduled
03/21/2005 03:00 PM	PT GARMENT MEASURING CLINIC	PHYSIO THERAPIST 1, SUPPORTIVE CARE	GRAND RIVER REGIONAL CANCER CENTRE, SUPPORTIVE CARE AT GRCC	Scheduled
	PT EXERCISE CLASS PATIENT PLUS 1	PHYSIOTHERAPY, GROUP TEACHER GRCC	GRAND RIVER REGIONAL CANCER CENTRE, SUPPORTIVE CARE AT GRCC	Canceled

If you are interested in finding out about wait times at Grand River Hospital, please click here [VIEW WAIT TIMES](#)

? Edit Message Centre

[Personal \(10\)](#) [Requests](#) [Broadcasts \(1\)](#)

[Display Archived and Current Messages](#)

viewing 1-5 of 10 << Previous | [Next >>](#)

Sender	Subject	Received
<input type="checkbox"/> GRRCC	Reminder: You have an appointment.	Wednesday March 16, 2005 1:03 AM
<input type="checkbox"/> GRRCC	Reminder: You have an appointment.	Wednesday March 16, 2005 1:03 AM
<input type="checkbox"/> GRRCC	Reminder: You have an appointment.	Wednesday March 16, 2005 1:03 AM
<input type="checkbox"/> GRRCC	Reminder: You have an appointment.	Tuesday March 15, 2005 1:03 AM
<input type="checkbox"/> GRRCC	Reminder: You have an appointment.	Tuesday March 15, 2005 1:03 AM

[Archive](#)



- Home
- My Heal
- My Conditions
- My Treatment**
- My Side Effects & Self Monitoring
- My Appointments
- My Medications
- My Care Team
- My Diary
- My Profile
- My Community Reso

Tiredness

You may begin to feel tired in the first week after treatment. As the number of treatments increases, this feeling of [tiredness](#) may also increase. If you are fatigued, there are some measures that you can take to help manage your [cancer-related fatigue](#). You can also monitor and record this side effect in the "My Side Effects" section of My CARE Source.

int logout

errals

[plan?](#)

005

T	F	S
3	4	5
10	11	12
17	18	19
24	25	26
31		

If you are self-monitoring your responses to therapy by using the “My Side Effects” module you may print your information to share with your health care team at your next appointment.

Edit My Side Effects				-
Side Effects	# Values	Last Observation	Add a Value	
Heartburn	1	March 14, 2005 1:00 PM	<input data-bbox="1650 361 1696 392" type="button" value="+"/>	
Numbness/Tingling	1	June 9, 2004 2:00 PM	<input data-bbox="1650 419 1696 451" type="button" value="+"/>	
Tiredness	3	March 18, 2005 10:00 AM	<input data-bbox="1650 478 1696 509" type="button" value="+"/>	
Select Side Effects to track and configure display/print options				

Edit My Self-Monitoring				-
Self-Monitoring	# Values	Last Observation	Add a Value	
Fluids I Drink	2	March 15, 2005 9:00 AM	<div>+</div>	
Select Self-Monitoring to track and configure display/print options				



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Tiredness

Depending on your level of fatigue, there are activities you can do that will help you to conserve your energy. Ask yourself "How do I feel today?" then review the activities listed below that are linked to your fatigue score. Notice that even when you have extreme fatigue there are things that you can still do.

Fatigue Score 0: No fatigue-No impact on your normal routine. Aerobic exercise. Normal activity.

Fatigue Score 1-3: Mild fatigue-Feeling of tiredness that does not affect most of your normal activities. Conditioning exercise (start with 15 minutes and increasing each session by 1-2 minutes building up to 40 minutes per 5 days a week). Monitor your heart rate. Take more frequent rest breaks. Rest BEFORE you are tired.

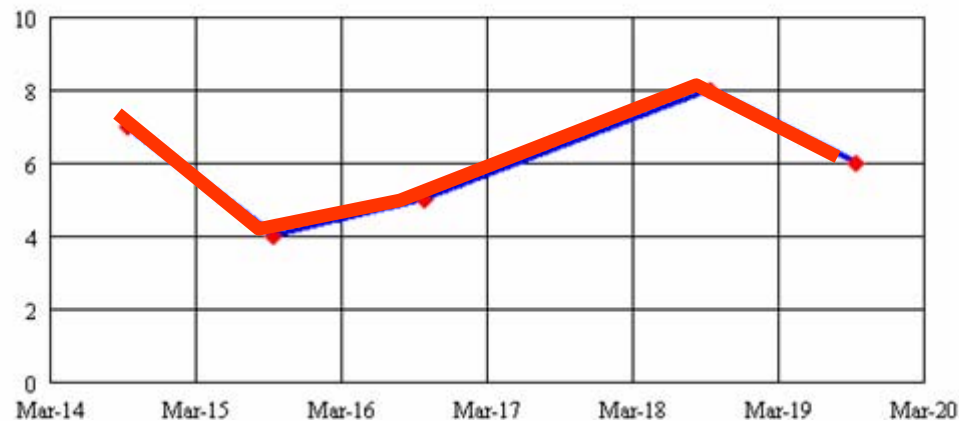
Fatigue Score 4-6: Moderate fatigue-A lack of energy that prevents you from performing all of your normal activities. Conditioning exercise. (Start with 5 minutes 3 times a day, adding 1 minute until 10 minutes are achieved. Then reduce to twice a day until 15 minutes are achieved. Then increase by 1 minute until 40 minutes is reached 5 days a week). Monitor your heart rate. Set priorities. Maintain a basic daily routine.

Fatigue Score 7-9: Severe Fatigue-You have to limit your activity. Energy Conservation. Change the way you do activities. Balance heavy/light activity. Delegate tasks. Use relaxation techniques (visualization, progress muscle relaxation).

Fatigue Score 10: The Worst Fatigue Possible-You are unable to get out of bed. Maintain positive sleeping habits. Use supports to manage stress. Distract yourself with relaxing activities. Get help from your medical team. Eat as balanced a diet as possible. Drink water. Deep breath.

		Observations
		March :
		March :
		March :
		March :
		March :

Explanation of Values	
0	I can do r
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	I am so tired that I can't get out of bed.





[My Conditions](#)
[My Treatment](#)
[My Side Effects
& Self Monitoring](#)

Edit My Medication List

☒ Hide Discontinued Medications

	Drug Name	Started	Dosage	How Often	Prescribed By	Rx #	Refills	Refill Date
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Prescription Refill or Renewal



HEALTH CARE CENTRE PHARMACY

Conveniently located in the Hospital main lobby. Carries specialty health care products. Major drug plans accepted. All proceeds support Hospital services.

Hours: Monday - Friday 8:30 am - 7:30 pm

Weekends, Statutory Holidays 9:00 am - 5:00 pm

Phone: 749-4227

Important: Use this form only for prescriptions that were last filled at our Pharmacy. Copy the information directly from your current prescription label to the form below.

* = Required Information

Rx #: * 12345 Patient Name: * Test, Anne (last, first)

Dosage / frequency / instructions:

8mg - twice a day (40 characters max.)

Drug Name: * Zofran (Ondansetron)
(28 characters max.)

Prescribed by: Dr. Smith
(30 characters max.)

Last Date Filled: April 7 2004


Refills Remaining: 3

[Prescription Transfer Request](#)-To order any NON-prescription items or supplies. You may pick up your order or we can arrange delivery to your home or the Cancer Centre.

Personal Diary

Finding a way to express your thoughts and feelings can be one of the most difficult aspects of your journey. This diary can be used as your personal space to express and explore your feelings as you go through treatment. Your feelings are real and are right for you. Be honest and open with yourself. It is entirely up to you if you want to share this with others but it does not replace any conversations that you need to have with your care team.

◀ March 2005 ▶						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

 = today
bold = this date has an entry
Click date to view/edit

Print Diary



« Prev Entry | [March 18, 2005](#) | Next Entry »

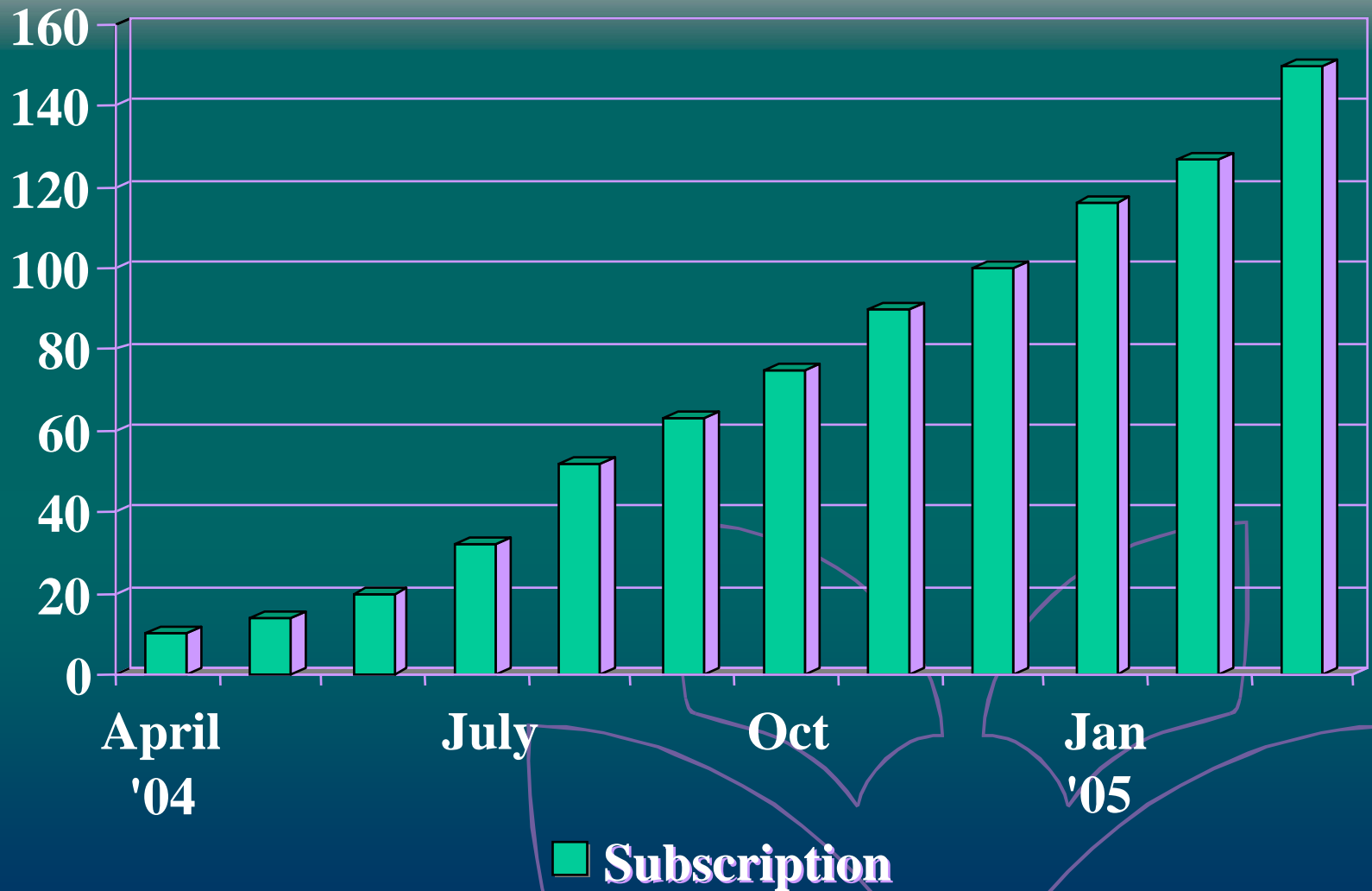
There are no diary entries for the selected month.
Click a date on the calendar at the left to record a diary entry.

Portal Statistics

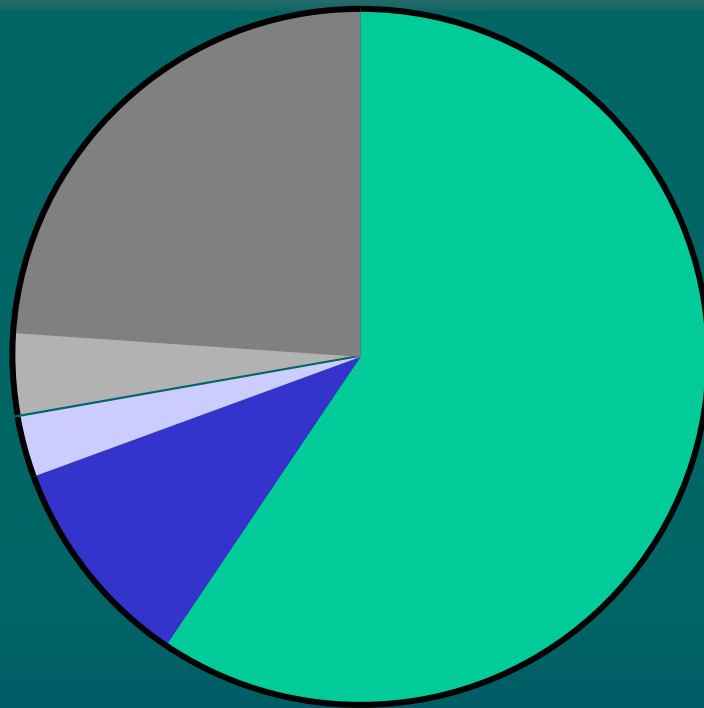
- Age range 18-79 years
- Average age 55
- Module utilization



Subscription



Utilization-Disease Sites



- Breast**
- Gastrointestinal**
- Lung**
- Prostate**
- Other**
 - Leukemia
 - Lymphoma
 - Gynecological
 - Genitourinary
 - Melanoma
 - Myeloma

Hospital Mission

- **C** -Care
- **A** -Assess
- **R** -Restore
- **E** -Educate



Hospital Leadership Team

Goals

- Reduce the variability of care
- Integrate care



Organizational Goals

- Improve quality of care
- Leverage information to improve outcomes
- Improve ROI on existing investments
- To create a patient-centric model of care

Outcome Measures

- Quality
- Utilization
- Patient satisfaction
- Perception of control
- Staff satisfaction
- Return on investment

Utilization

Need for...

- Interventional therapy
- Emergent care
- Admission to hospital
- Length of stay



Patient Satisfaction

- **Pilot study**
- **Telephone survey**
 - ✓ **Readability**
 - ✓ **Navigation**
 - ✓ **Understanding of disease**
 - ✓ **Usability of resource**

Staff Satisfaction

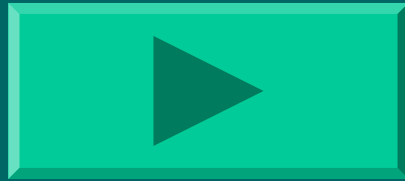
- Challenging clinical practice
- Provides the standard for patient education
- Provides framework for standardization
- Used as an orientation/education tool
- Creating a patient-centric culture

Future Development

- Further protocol development
- Results delivery
- Appointment scheduling expansion

Dreaming into the Future

- New Partnerships
- Health Promotion and Prevention
- Patient-Centric Models for Health Care



Thank you

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