



Beth Israel Deaconess
Medical Center



A teaching hospital of
Harvard Medical School



OpenNotes and Psychotherapy: “Looking Under the Hood!”

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2017

No Conflicts

-to report

Goals

- Share early impressions from several years of national experience with fully open medical records
- Notes as (narrative) therapy for behavioral health and mental illness
- OpenNotes as a movement.....transparency, trust and partnership!

About the *OpenNotes* movement

- Began in 2010 with 105 volunteer primary care doctors and 19,000 of their patients in Boston, rural Pennsylvania, and the Seattle inner city in Washington state.
- The doctors invited the patients to read their notes via electronic portals
- Now, more than 17 million patients in the USA, thousands of doctors, nurses, therapists, trainees, physician assistants, case managers, and other clinicians are sharing notes

What's going on?

Three Principal Questions

- Would OpenNotes help patients become more engaged in their care?
- Would OpenNotes be the straw that breaks the therapist's back?
- After 1 year, would patients and therapists want to continue?

Behavioral Health Roll Out

1. BIDMC Psychiatry Department- 3/1/14 start
Opt-in Model: 10 patients apiece

2. BIDMC Social Work Department- 4/1/14 start
 - a.) Opt-out Model: All patients in
unless specifically excluded or
 - b.) Ramp-up Model: Start with smaller
cohort and build up

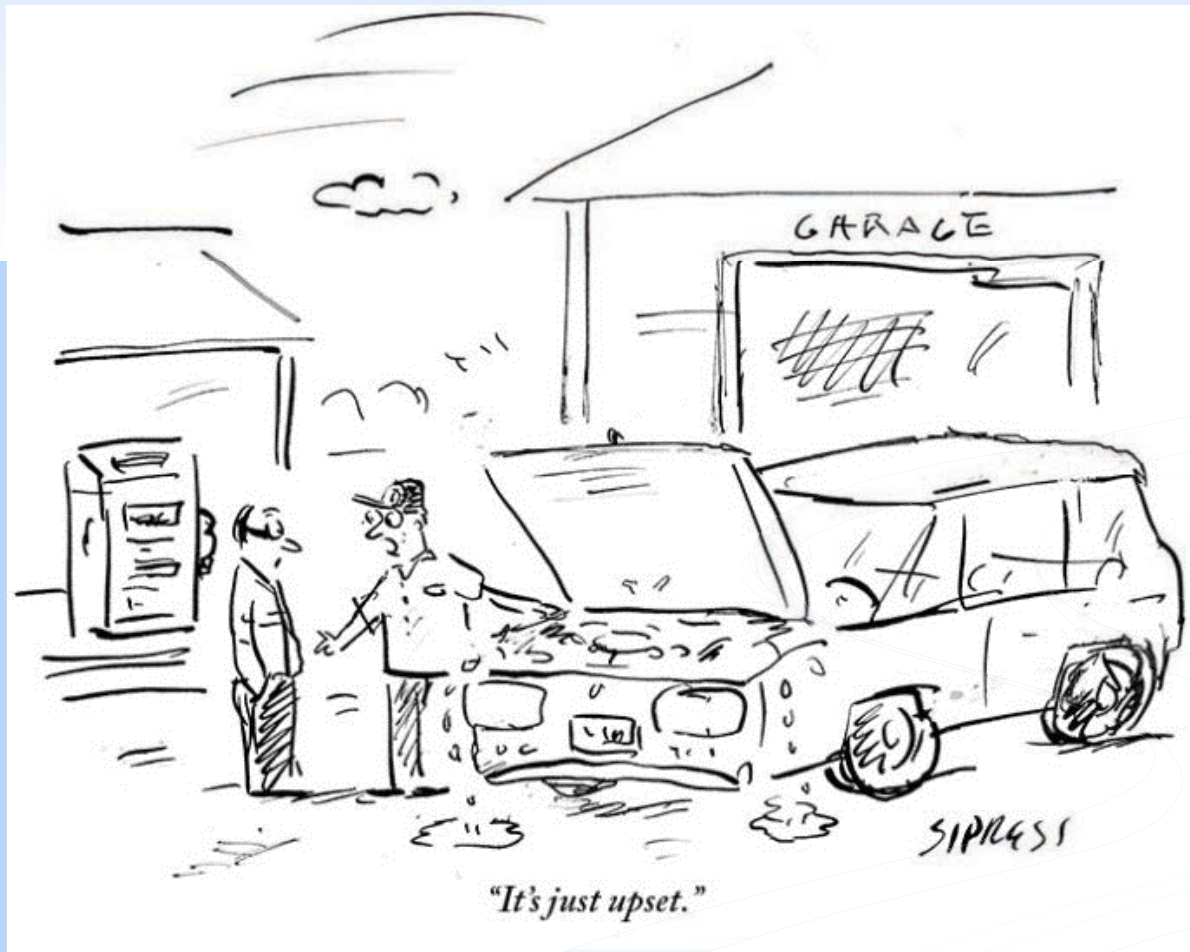
Staff

- 15 Psychiatrists/Therapists In Psychiatry Department
- 24 Social Work Staff agreed to pilot; pediatric therapists and fellows excluded; staff turn over; or no eligible patients = 19 started
- 440 patients at start; Currently better than 3000 participating in open therapy notes

Issues:

- Domestic Violence and Safety Exclusions
- Who is 'note' intended for?
- Obsessive patients (“I’ve spent my whole life learning not to double think.”; “When I go to my mechanic, I don’t want to look under the hood. Same here!”)
- Paranoid patients (“I’d be petrified to look. I’m not gonna do it.”)
- Patients “in denial” and ‘premature’ info
- Language..... Altering language and/or patients “reading at home alone with no place to process”

Looking Under the Hood



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Additional Issues

- “Ruining Psychotherapy” (NYTimes, Washington Post, etc public comments after articles)
- Destroying the privacy expectations and the fiduciary relationship whereby patients entrust us with their ‘secrets’, especially if already agreed to under informed consent (ie- monitoring)
- “Helpful only for high functioning, well educated patients”
- “Will need to hide our diagnostic impressions”



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Patients were thrilled...

They want the notes

They are not scared stiff

Thread them

They share them

They report important benefits

- 94% of patients agreed that opening up therapy notes is a good idea!
- 87% of patients want to continue having notes available
- Few patients said reading notes made them feel
 - Judged (11%)
 - Worried (8%)
 - Offended (3%)

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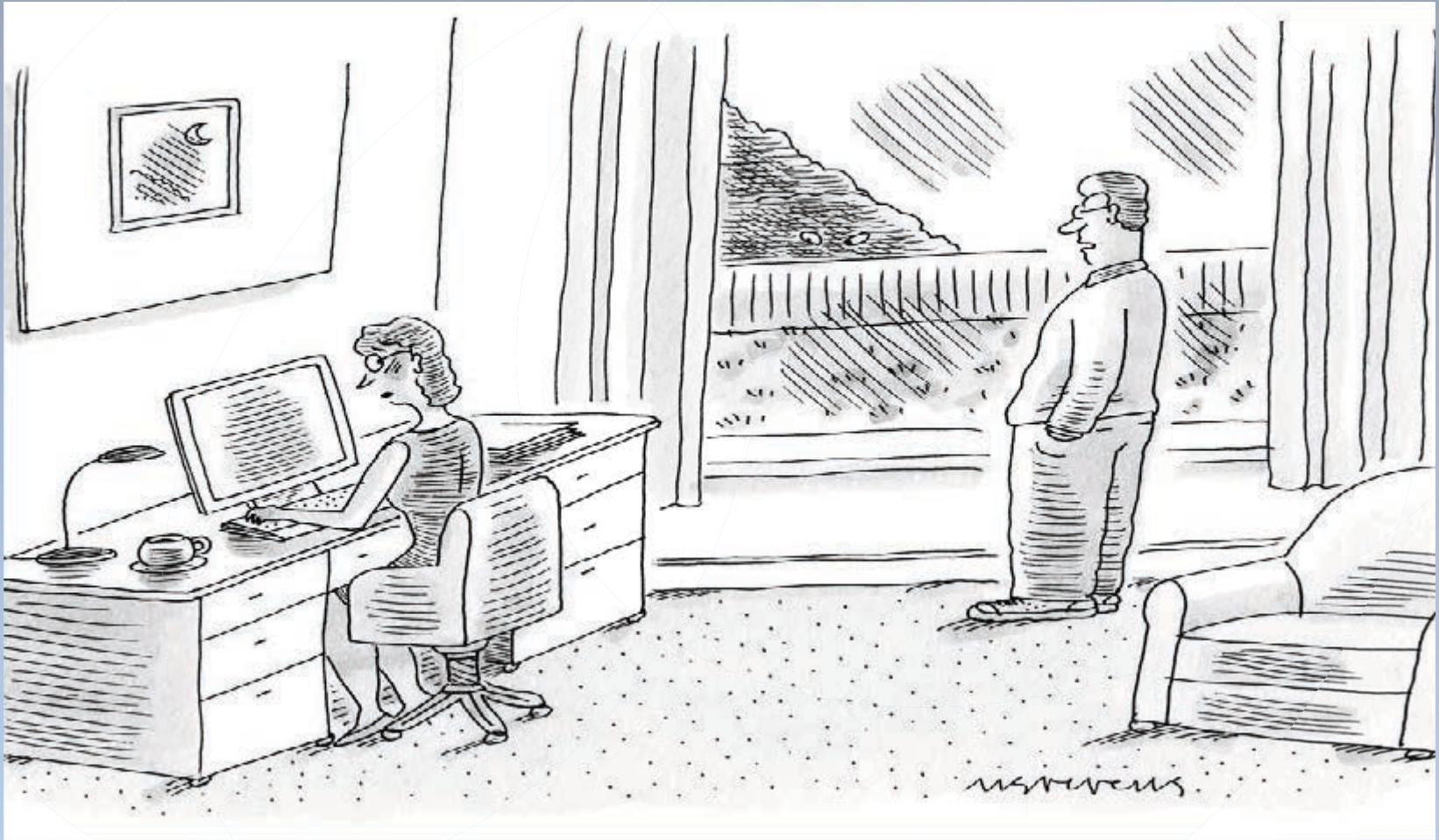
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- Patients with 'adverse effects' tended to clarify these concerns as underlying concerns such as privacy or already existing issues; or misinterpreted questions when asked
- Biggest issue, as in medicine, seems to be whether there is concordance between what the therapist says in session and what they write in the note

Privacy vs Confidentiality



15

18% shared notes with others
(20-42% in medicine), mostly family

Patients reported important clinical benefits

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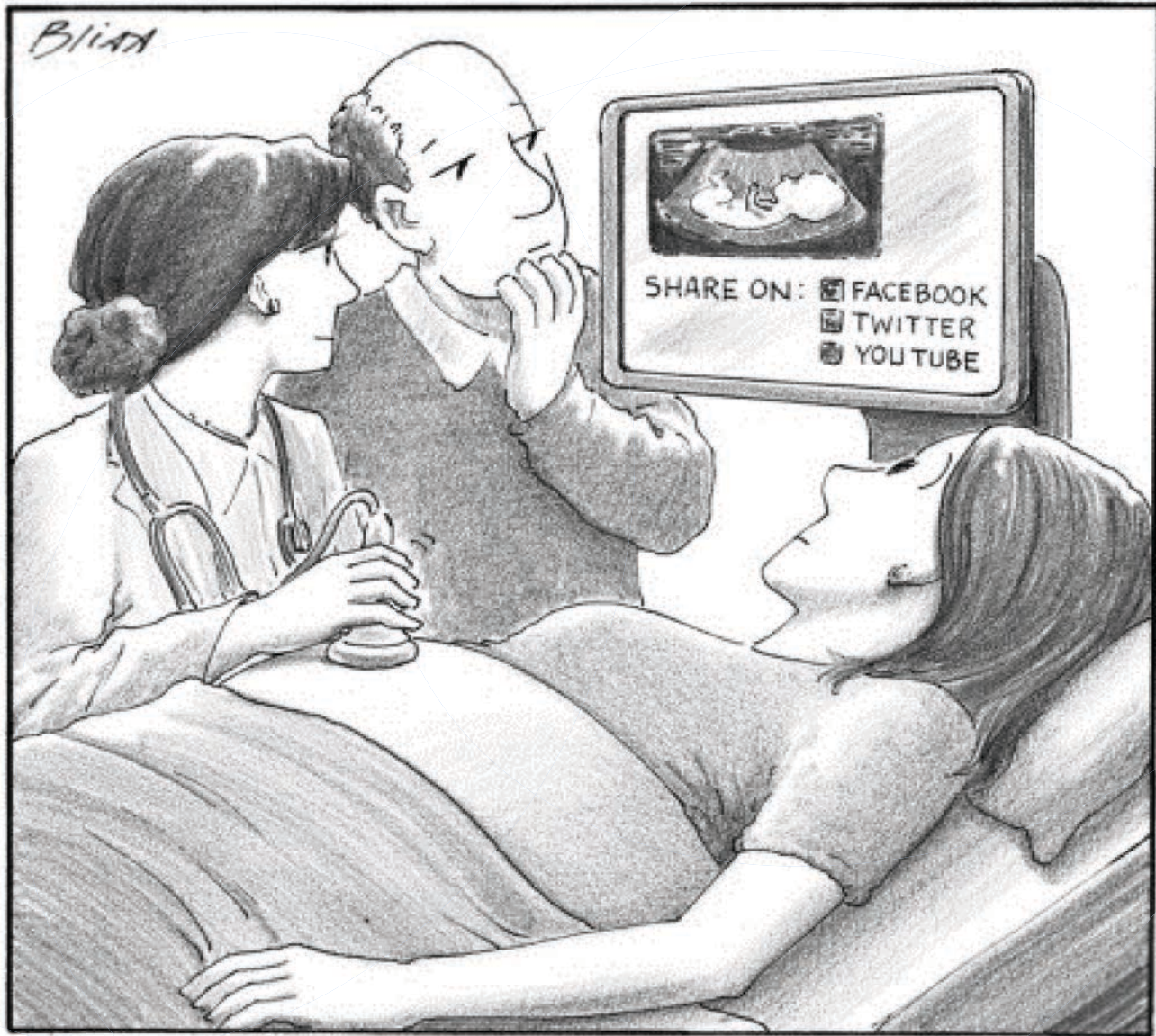
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- ↳ 48% reported *better remembering* what working on in therapy
- ↳ 47% felt *more engaged* in their therapy
- ↳ 55% felt *better able to trust* their therapist

The Bottom Line

- ⌘ 87% of patients *wanted to continue to be able to see their visit notes online.*
- ⌘ 68% of patients said availability of open notes *would affect their future choice of a therapist.*
- ⌘ *Not one therapist or patient asked to stop, and almost all have since joined.*
- ⌘ *And now.....*



Communication

Trust

Engagement

...and the best possible outcomes

& Thanks!



www.myopennotes.org

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