

ALBERTA MEDICAL ASSOCIATION ELECTRONIC MEDICAL RECORD POSITION STATEMENT

Preamble

- Alberta's electronic health information system requires alignment and integration among the systems of physicians, regional health authorities (RHAs) and Alberta Health and Wellness (AHW).
- An electronic medical record (EMR) is a patient's medical record in digital format that replaces the traditional paper file maintained in the physician's office. The EMR is routinely used by physicians for clinical documentation and work flow support.
- Physician use of an EMR can:
 - Improve patient access and health outcomes
 - Increase efficiencies and effectiveness
 - Enable timely and appropriate information at the point of care
- The EMR is a key component of the evolving provincial health information system.
- The benefits of EMR investment accrues mainly to patients and to the health system, and not to the physician.
- The AMA supports:
 - Evolving EMR standards and requirements
 - Vendors with the appropriate capacity and capability to meet emerging requirements
 - Rigorous conformance testing
- The provincial electronic health record (pEHR), maintained by RHAs and AHW, is a patient-centric longitudinal collection of personal health data that supports multiple providers across the continuum of care.

Key elements

- All EMRs must meet provincial standards and requirements.
- Physicians should have a choice of EMRs that respects differences in physician requirements, preferences and patients' needs.
 - Competition among vendors encourages innovation, improved performance and long-term value for the health care system.
- Physicians require ongoing and predictable funding for EMRs.

- Physicians are required to make a significant investment.
- A predictable percentage of costs are not one-time, but are recurring.
- Physicians should have the ability to make choices.
- As part of choice:
 - EMR funding must continue to flow to the physician.
 - Enrollment by physicians in the Physician Office System Program (POSP) must continue to be voluntary.
 - Physicians should not be limited to RHA-sponsored EMR products and services.
- RHAs that have an interest in offering RHA-sponsored EMRs to physicians must ensure:
 - Their products and services meet the individual needs of physicians
 - Fair and reasonable pricing of their products
 - Equal treatment for all EMR vendors (e.g., no obstacles or artificial barriers that would unfairly restrict access to RHA or government data sources)
- Point-to-point information exchange (EMR to EMR):
 - Improves context-specific information sharing
 - Is essential for improved care delivery and multi-vendor model
- Physicians must lead the development of a core data set:
 - Complements point-to-point information sharing
- Stewardship of EMR information must continue to reside with the physician:
 - Respects the patient-physician relationship
 - Preserves clinical independence and autonomy
 - Complies with College of Physicians and Surgeons of Alberta “data stewardship framework”
- Enhanced security management is essential to guard against threats to reliability, dependability, availability, data integrity, business continuity and security.
- Physicians require continued change-management support.
 - Computer systems continue to evolve.
 - Ongoing support and assistance are required.
 - New physicians enrolled in POSP need to be supported.
- Physicians who are converting to a new EMR require comprehensive transition support.
 - For the physician and the physician’s office, transition from one EMR vendor to another is challenging and problematic.
 - Competition among vendors means the possibility of an ongoing industry shake-out.
- “Clinical decision-support” enabled EMRs have:
 - The potential to enhance care delivery
 - Evidence-based toolkits