The AMA recognizes its role in supporting health informatics and related provincial initiatives that are driven by the need for better patient care and outcomes, including improved access, continuity of care, timeliness, quality of care and informational continuity.

In addition to the above, the AMA has the critical role of ensuring that patient and physician interests are represented and that the informatics initiatives enhance each physician’s ability to provide optimal patient care, while respecting the need for efficient workflows.

To this end, the AMA will work with all stakeholders to influence priorities and represent the interests of its members, and to ensure that all initiatives support the patient/physician relationship, and the ethical and professional duties and obligations that physicians have to their patients and to society at large.

The principles and policies are based on the current state and are the drivers for strategy. The document is a broad policy statement and the various components are best considered together in the complete context.

Given the rapidly changing health informatics landscape, it is suggested that the principles and policy that follow be considered within a five-year timeframe and revisited every five years or as needed to remain current.

**Principles**

To aid in policy development, the AMA has established guiding foundational principles that specifically reflect the AMA’s accountability to physicians as key stakeholders and the crucial role they play in the success of health informatics initiatives.

**Tools and Technology**

- System integration and information exchange are essential in achieving the ultimate goal of a secure, integrated patient record.
- Challenges associated with the use of multiple non-integrated technology solutions must be acknowledged and supported with continued advocacy for integrated, streamlined solutions.
- Provision of quality care and patient privacy are critical and these outcomes should be balanced with consideration to financial and technological implications.
- Adoption and success of initiatives will only be realized if patients and physicians recognize the value proposition in improving quality and continuity of care.
- Early and ongoing engagement with both physicians and patients is critical to the success of all initiatives.
- Existing technology and investment should be leveraged where feasible.
- Physicians and patients should have access to and make use of tools that allow for seamless, secure and timely clinical communications.
- Tools and system integration must support the goal of providing patients both access and input to their health information.
- Physicians need current and effective electronic medical record systems and clinical decision support tools available on demand at the point of care to support data reporting, quality improvement and continuity of care.
- Opportunities to improve clinical standards and toolsets should be leveraged where feasible in the development of new technologies.
- All implementations should take into account the potential requirement for future integration with new technologies and ongoing upgrades.

**Patient Care and Engagement**
- All initiatives must support and enhance the patient’s central role in health care, including recognition of the importance of patient wishes, public awareness and engagement.
- Patients must be well represented in policy setting and implementation planning and their interests reflected.
- All providers within a patient’s circle of care must have secure and timely access to all relevant patient information.
- Physicians should have appropriate and timely access to all relevant, secure patient data to inform them of their practice in comparison to their peers with the goal of improving the care of their patient population.
- The needs of underserved populations including Indigenous Peoples must be recognized.
- Due consideration must be given to the patient experience within the health care system and the evolution of a patient’s health and conditions over time.
- Education and communication strategies must be in place to support patients as changing technologies improve access and control of their health information.
- Policies should be established with input from patient and provider representatives to establish guidelines to manage the appropriate level of detailed personal health information available to patients.

**Physician Engagement and Governance**
- Physician championship and commitment, including peer leader engagement and executive sponsorship, are critical for the success of any informatics initiative.
- Physicians must be well represented early in the design phase to provide clinical input and must have an effective, ongoing voice in governance structures, prioritization and system design.
- A collaborative approach between AMA and Alberta Health is necessary to identify appropriate levers and funding mechanisms to encourage engagement by the physician community in supporting informational continuity and developing an integrated health information system.
- Consideration and recognition must be given to the financial burden on physicians, including the financial costs of maintaining and upgrading an electronic medical record system.
- The impact on physician health and the potential for burnout resulting from ever emerging IT initiatives must be recognized.
- Change management support and comprehensive transition and communications strategies to support new technologies, and EMR optimization and upgrades are critical to the success of all initiatives.
- Impact on clinical practices must be acknowledged and optimized wherever possible.
- Physician choice must be supported when in accordance with the policies and guiding principles.
- Applicable data must be available to support physicians’ medical and legal responsibilities.
• Consideration must be given to the ongoing privacy obligations and technology related privacy implications for physicians, and the need for clear and simplified processes for updating and maintaining Privacy Impact Assessments, and information and data sharing agreements.
• Impact on physicians’ medical and legal responsibilities must be considered, supported and reconciled early in the development of processes of all eHealth initiatives.
• Roles, responsibilities and accountabilities across all stakeholder groups must be well articulated.

Policy
The policy statements have been grouped to reflect the four pillars which represent the current priorities in Alberta’s health informatics environment:

• AHS Connect Care and Provincial Clinical Information System (please see https://www.albertahealthservices.ca/info/cis.aspx for further information)
• Integration of Community Information
• Evolution of Alberta Netcare and the Provincial Personal Patient Portal
• Data Analytics and Health System Use

AHS Connect Care
• The AMA supports AHS Connect Care as having significant clinical improvement and care transformation potential.
• The AMA will actively support and coordinate efforts involving AMA representatives on the AHS Clinical Information Sharing Approach (and other committees as needed).
• The AMA will explore opportunities to align and integrate high value Connect Care tools with community EMRs.
• The AMA supports the unique role and responsibilities that physicians have regarding information capture.
• The AMA believes that member engagement and representation is a critical component to the design, testing and implementation of AHS Connect Care.

Integration of Community Information
• The AMA considers community information integration with Netcare to be a key provincial health system priority.
• The AMA supports the expansion and evolution of existing infrastructure, including but not limited to community EMRs and Netcare, to provide additional clinical and health system value.
• The AMA recognizes that ongoing physician and patient representation is essential for all initiatives that integrate community information with the broader provincial health information system.
• The AMA will advocate for change management support to assist physicians in adapting to workflow and practice changes that result from provincial information integration initiatives.
• The AMA supports the development and implementation of a strategy that facilitates data integration between Netcare and AHS Connect Care.
• The AMA will continue to work with provincial stakeholders to simplify and standardized the process of creating and maintaining information and data sharing agreements.

Evolution of Alberta Netcare and the Provincial Personal Patient Portal
• The AMA recognizes the need for alignment and integration between community EMRs, AHS Connect Care and provincial patient portals.
• The AMA supports virtual care and secure messaging between patients and physicians as key components in improving patient care, with careful consideration given to expectations, safety, security and privacy.
• The AMA supports appropriate remuneration as a key component of provincial virtual care and secure messaging strategies.
• The AMA supports the ongoing enhancement of Netcare as a key tool for clinical care.
• The AMA supports the provision of information to patients and their contribution to that information via a patient portal.

Data Analytics and Health System Use
• The AMA advocates for the transparency of processes and reports to help ensure physician confidence with respect to data interpretation and subsequent reporting.
• The AMA supports the concept of a provincial health data repository.
• The AMA realizes the criticality of data literacy as it relates to the secondary use of data and advocates for resources to support increased awareness and guidance in the use of health data for clinical practice improvement.
• The AMA supports the streamlined and standardized provision of data and reports to facilitate interpretation and effective use.
• The AMA recognizes the importance of health care research in improving the health system and supports the sharing of data for research purposes in compliance with the Health Information Act.
• The AMA will preferentially support data analytics and reporting processes that integrate with the physicians’ maintenance and development of competency through integration with MOC® and Mainpro® programs.