



EHRnews@Infoway

A NEWSLETTER FROM CANADA HEALTH INFOWAY



VOLUME 4 – FALL 2006

Welcome to the latest issue of EHRnews@Infoway. We hope you enjoy reading about the work that Canada Health Inforoute is undertaking. If you would like to provide comments or suggestions, please contact us at:

info@infoway-inforoute.ca

For further details on the articles in this issue, and other news features and events, please visit our website at:

www.infoway-inforoute.ca

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From the President's Desk

Risk management is a subject which is very close to us at *Infoway*. Managing risks is about making tough choices. In building Electronic Health Records, we need to take a close look at the risks that exist and weigh them against potential return.

The first risk that often comes to mind concerns privacy and confidentiality of health information. In a public survey *Infoway* commissioned a few years ago, 85 per cent of respondents said that, despite having some concerns about privacy, they were supportive of the EHR because they felt the benefits – improving access, quality and efficiency of healthcare – far outweighed the risks.

Living with risk certainly does not mean doing nothing about it. On the privacy front, organizations responsible for protecting health information have put in place a number of risk mitigation strategies and tactics including safeguards, such as password-protection, firewalls, audit trails and tough penalties for non-authorized access. Some provinces have even contracted “ethical hackers,” who attempt to tap into systems and provide reports on any potential weaknesses.

Although privacy is under provincial/territorial authority, *Infoway* is playing a key role in helping to shape the privacy agenda and provide concrete tools – such as our Privacy and Security Architecture. *Infoway* is maintaining contact with federal, provincial and territorial privacy representatives and we participated in the Privacy Commissioner's Summit in June, where we held in-depth discussions about the Electronic Health Record initiative.

Beyond the privacy questions, we at *Infoway* are taking a closer look at all the

risks that could affect our organization or the development of the Electronic Health Record. We've developed a detailed risk management framework that will guide us going forward. It's based on an understanding that, if our partners succeed, we succeed. And if they fail, we fail as well.

In some ways, the creation of an EHR is a risk mitigation strategy for Canada's healthcare system. The EHR gives our healthcare providers timely access to patient information, helping to reduce the risk of error and untimely diagnosis or treatment. To help manage risks to the Canadian population, a new pan-Canadian Public Health Surveillance System will help carry out faster, more coordinated responses to potential epidemics. We've featured a story about this on *page 6*.

Of course, we cannot talk about risks without talking about the other end of the equation – the benefits. As you will read in this issue, *Infoway* and the Group Health Centre in Sault Ste-Marie have announced a new project that would provide pharmacists in Sault Ste. Marie with access to clinical information about patients electronically, helping to reduce medication errors and provide better patient care.

This initiative – one of over 183 projects we now have across the country – speaks directly to how health information technology can help facilitate a team approach to care and improve quality of care.

Despite the success stories, we still have an arduous journey ahead of us before declaring victory. The Electronic Health Record is not yet a reality. We need to continually accelerate our efforts, while still managing the risks very carefully.



Richard C. Alvarez
President & CEO,
Canada Health Infoway

We can take heart in the fact that there is a tremendous amount of momentum and recognition for what we have done. Our ministers of health took a strong advocacy position this summer, stating: “We must ensure that electronic health information systems are applied to meet the challenges facing our healthcare systems...additional support to Canada Health Infoway is needed to ensure the benefits are realized for all Canadians ...This will enable us to achieve our shared objective of delivering safe, effective and timely healthcare services to all Canadians.”

And I could not have said it better myself!

Infoway Program Update Summary

As of the end of the first quarter of its 2006-07 fiscal year, *Infoway* had 183 active or completed investment projects. Of these, 111 were jointly developed with provinces and territories. The other 72 are pan-Canadian projects sponsored by *Infoway*. Projects were underway in all nine investment programs and in all provinces and territories. Here's a look at each program and its progress as of the end of June 2006.

INFOSTRUCTURE

- 15 pan-Canadian projects: 7 active and 8 completed.
- Two new projects include one to design and operationalize the Standards Collaborative and one to govern the Standards Collaboration Process for the next two years.

DIAGNOSTIC IMAGING SYSTEMS

- 25 projects: 21 active and 4 completed.
- Notable new investments include approval of the first part of the Southwestern Ontario DI project's implementation phase.

REGISTRIES

- 26 projects: 16 active and 10 completed.
- Notable new investments include Provider Registry System Integration in Saskatchewan and Provider Registry pan-Canadian Standards.

DRUG INFORMATION SYSTEMS

- 14 projects: 10 active and 4 completed.
- A notable new investment is the planning phase of the BC Drug Information System Expansion Strategy (DIS) project to complete planning for expansion of PharmaNet.

LABORATORY INFORMATION SYSTEMS

- 8 projects: 6 active and 2 completed.
- The planning phase for the Quebec Lab (SILQ) project was approved.

The \$34M in Q1 project approvals met the Q1 forecast, bringing life-to-date approvals to \$736 million or 61 per cent of *Infoway's* capitalization.

Planning phases valued at \$12M were initiated for 12 new projects. \$18 million was invested in follow-on phases for existing projects.

TELEHEALTH

- 44 projects: 36 active and 8 completed.
- New projects include a Home Telehealth Business Case, a joint British Columbia and Yukon 811 Initiative and an Alberta Telehealth Stroke Overlay project.

PUBLIC HEALTH SURVEILLANCE

- 6 projects: 5 active and 1 completed.
- Approvals in Q1 included investments in phase 1 implementation planning projects in Health Infostructure Atlantic (NB, NL, NS) and BC/Yukon.

INTEROPERABLE EHR

- 20 projects: 16 active and 4 completed.
- New approvals in Q1 included the planning phase of an iEHR project in British Columbia and an Ontario iEHR Study project.

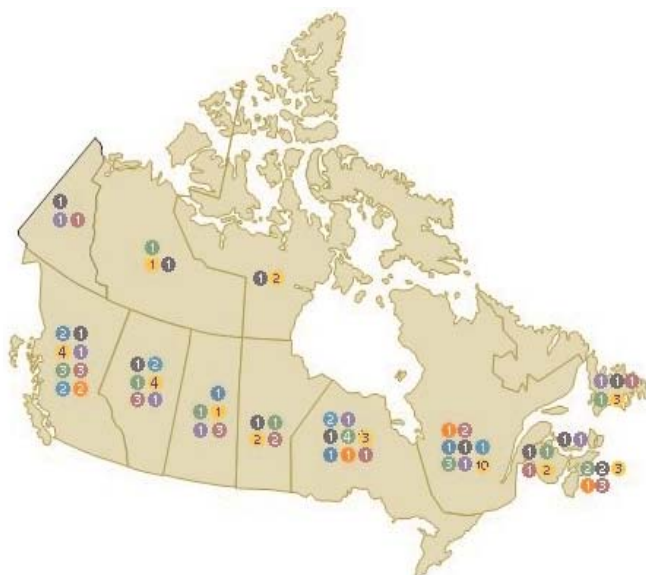
INNOVATION AND ADOPTION

- 25 projects: 17 active and 8 completed.
- Q1 approvals included: a chronic disease management project in Ontario; a cancer surgery synoptic reporting project in Alberta; a decision-support project for the mental health and addiction sector in British Columbia; and a province-wide safety incident reporting and management information system (IRIS) in British Columbia.

111 jurisdictional projects developed with provinces/territories as shown on map
72 pan-Canadian projects also underway

Legend

- Registries
- Diagnostic Imaging
- Drug Info Systems
- Lab Info Systems
- Telehealth
- Interoperable EHR
- Public Health Surv.
- Innovation & Adoption
- Ⓢ Number of Projects



In Brief

"This project demonstrates how technology facilitates the rapid exchange of information. Our investments in Canada Health Infoway are harnessing the power of information technology to increase productivity, enhance safety, improve information sharing, and deliver better, more timely access to care for all Canadians, no matter where they live." - Federal Health Minister Tony Clement.



SAULT STE MARIE PHARMACISTS LINKED TO LOCAL EMR

Canada Health Infoway Inc. (*Infoway*), Group Health Centre (GHC) and the Ontario Pharmacists' Association (OPA) recently launched a new \$3.5-million initiative which will help reduce medication errors and provide better patient care in Sault Ste. Marie by allowing pharmacists to have electronic access to clinical information about patients.

Through the Group Health Centre's Electronic Medical Record, healthcare providers will share information about patients with pharmacists. The EMR, established several years ago, has already been valuable in sharing information amongst healthcare providers and will now be extended to include pharmacists in an initiative called EMRxtra. The information will be shared in a secure manner and will require patient consent.

With the permission of participating patients, pharmacists will be able to access patient drug profiles, current lab test results, clinical intent of prescribed medications and the patient's care plan. Over 20 pharmacies will participate in EMRxtra, which includes 40 to 50 pharmacists. The project will first be used with a pilot group of several hundred patients and then be extended to all of GHC 60,000 patients. This initiative will also provide patients with greater access to their individual EMRs which include a record of diagnoses and treatment, including medications. A personalized web-accessible patient record tool will enhance engagement of patients in the self-management and decision-making process.

Standing, from left to right: Tony Clement, minister of health, Government of Canada; Mark Kealey, CEO, Ontario Pharmacists' Association; Richard Alvarez, Infoway's President and CEO. In the foreground, Dr. Lewis O'Brien, family physician, Algoma District Medical Group, Physician Lead, EMRxtra Project.

READY, SET, STANDARDS! - PARTNERSHIP AND HL7 CONFERENCE SET FOR NOVEMBER 19-21 IN TORONTO

Join us in Toronto, Ontario, November 19-21, 2006, for the Partnership for Health Information Standards and HL7 Canada semi-annual conference, hosted by *Infoway*.

Ready, Set, Standards! will feature a host of exciting projects and speakers that will launch Canada into a new era of health information standards including the *Infoway* Standards Collaborative and its new governance and service models.

Beyond standards development, *Ready, Set, Standards!* will also examine adoption and implementation success stories while deliberating on effective vendor engagement strategies.

Evan Solomon, CBC television broadcaster, journalist and author, will close the conference with a speech on the importance of change and relationship management as it relates to health information standards success in Canada.

You won't want to miss it!

For more information and to register, please visit www.infoway-inforoute.ca.

Or contact us at:

partnership@infoway-inforoute.ca.

In Brief

STUDY SHOWS CANADIAN DOCTORS LAGGING BEHIND IN TECHNOLOGY USE

Canada's doctors are lagging behind other countries when it comes to using information technology (IT) in patient care, according to a recent study prepared for Canada Health Infoway (*Infoway*) by Professor Denis Protti, from the School of Health Information Science at the University of Victoria.

The study was commissioned to identify factors that have contributed to the success of the countries studied in achieving high levels of automation in general practitioners' (GPs') offices over the last decade. The review showed that in the 10 British, Scandinavian, and Australasian nations studied, more than 90 per cent of GPs are using computers for at least some element of patient care. The most common use involves management of patient drug prescriptions, followed by accessing laboratory results online. In Canada, that number is around 20 per cent.

The Canadian Medical Association has been working with *Infoway* to survey Canadian physicians about their attitudes toward technology and use of IT in their offices. "The recent review of IT implementation shows general practitioners in (other) jurisdictions are often far ahead of their Canadian counterparts in using IT for at least some elements of clinical care," said CMA President Dr. Ruth Collins-Nakai. "The review provides valuable information on how we can advance the process of having GPs use IT to enhance patient care and their own practices in this country. However, physicians themselves must be involved in evaluating, selecting and implementing the types of electronic systems they will be expected to use in clinical care."

"We need to stop running a 21st century health system using 19th century paperwork. Recent CMA/*Infoway* research shows that if Canadian physicians could improve the quality and efficiency of their practices and save time, they would adopt electronic health records. Clearly the challenge is to demonstrate that these benefits can only be achieved through the widespread use of electronic records in physicians' day-to-day operations." - Richard C. Alvarez, *Infoway's* president and CEO.

H. ARNOLD STEINBERG RE-APPOINTED AS CHAIR OF INFOWAY'S BOARD

H. Arnold Steinberg was recently re-appointed by Health Canada as Chair of Canada Health Infoway's Board of Directors until July 31, 2008. He has been a member of *Infoway's* Board of Directors since October 17, 2003.



Mr. Steinberg is currently a principal of Cleman Ludmer Steinberg, Inc., an investment holding company. He has extensive board experience including current positions as board member at the Canadian Patient Safety Institute, the McGill University Health Centre (MUHC) Foundation and the MUHC Research Institute, and as Chairman of the Advisory Board of the Faculty of Medicine of McGill. He is also a Member of the Governing Council of the Canadian Institutes of Health Research.

For many years, Mr. Steinberg was a senior executive and director of Steinberg Inc., as well as a director of numerous charitable, educational and cultural organizations. He obtained a Bachelor of Commerce degree from McGill University and a Master of Business Administration from Harvard University. A member of the Order of Canada, Mr. Steinberg was awarded an honorary doctorate from McGill University and is also Governor Emeritus.

Public Health Surveillance

British Columbia to develop a pan-Canadian system

Canada Health Infoway (*Infoway*) and the British Columbia (B.C.) Government, in full collaboration with the other provincial and territorial governments and the Public Health Agency of Canada, recently announced B.C. will develop a pan-Canadian Public Health Surveillance System to help carry out faster, more coordinated responses to potential epidemics.

The new electronic system will make it possible for public health workers across Canada to collect, share and analyse critical health information to help manage infectious disease outbreaks. It will replace an older surveillance system currently being used in parts of Canada, and also serve as an infrastructure for more comprehensive public health systems in the provinces and territories.

“British Columbia was chosen to lead the project with *Infoway*, on behalf of the provinces and territories, because of our track record in public health management,” said B.C. Health Minister George Abbott. “A national surveillance

system will enhance health professionals’ ability to respond in an emergency and to work more collaboratively with partners across Canada.”

“This system will help healthcare providers, patients and governments prevent the spread of disease through faster and better identification of potential epidemics or disease outbreaks wherever they occur in Canada,” said Richard Alvarez, *Infoway’s* president and CEO.

“SARS taught us that it was time to invest in a new generation of surveillance systems to track infectious diseases,” added federal Health Minister Tony Clement. “The better our information is, the better prepared we are. To fully protect the health of Canadians, we must develop the necessary tools to allow us to coordinate our responses to emerging disease threats.”

After a detailed procurement process and extensive consultation with public health experts from all jurisdictions, IBM



Canada has been selected as the systems integrator for the pan-Canadian solution. The system will be available for jurisdictional implementation in 2007.

The federal government provided \$100 million to *Infoway* to plan and coordinate development and implementation of the system. Participating provinces and territories will cover the remainder of the costs.

Patient privacy and confidentiality will be protected to meet all requirements outlined in federal and jurisdictional health information privacy legislation. Safeguards will be built into the surveillance system to protect patient information.

Public Health Surveillance System: How it will work

- A staff member in a local or regional public health agency/health authority is notified by a physician or via receipt of a laboratory test result that there is a

new case of a communicable disease in the region.

- The staff member, typically a public health nurse, uses the case management functionality of the system to enter details about the case, including symptoms, onset dates, treatment, testing, and contacts, etc. Epidemiologists and other public health practitioners view this information, in conjunction with other available data, to decide if there is an outbreak of the disease.
- If an outbreak is declared, the public health practitioner, through the use of the outbreak management functionality, is able to link the multiple cases together and manages the outbreak, using the system to help with

assessment, diagnosis, monitoring and control tasks.

- The notification and alerting function can be used to send information to appropriate authorities through numerous channels (text messages to cell phones, voice messages, electronic mail, pager messages, etc.). Medical officers of health can develop their own content for the alerts.
- The system will make immunization and vaccine inventory information accessible to public health practitioners who deliver immunizations – whether the vaccine is routine or part of the control measures for an outbreak. The system will also collect information on immunizations when they are given by private practitioners.



Telehealth Update

Accelerating the development and deployment of solutions

While investment opportunities steadily increase, the *Infoway* telehealth team continues to sponsor initiatives aimed at accelerating the development and deployment of telehealth solutions across Canada. Two such initiatives – the Pan-Canadian Scheduling Requirements Project and the Home Telehealth Business Case (summarized below) – were recently launched. Both projects have enjoyed overwhelming jurisdictional participation and support. Other initiatives such as a Joint Procurement initiative for Videoconferencing Equipment and Medical Peripherals as well as a common approach to benefits and evaluation are on the horizon. Combined with *Infoway* participation in the upcoming Canadian Society for Telehealth Annual Conference in Edmonton, Alberta, (October 15-17, 2006), the telehealth team will have an incredibly busy fall working hand in hand with our jurisdictional partners.

Pan-Canadian Scheduling Requirements Project

In order to meet the pressing jurisdictional business need for interoperable telehealth scheduling solutions, the Pan-Canadian Scheduling Requirements Project was initiated. It will identify the requirements for facilitating the

scheduling of investments for interoperable solutions. In addition to its immediate scope, the project will also benefit all jurisdictions by defining common terminology that can be used by all telehealth organizations to ensure common reporting for the purposes of benefits evaluation.

With strong pan-Canadian representation, the scheduling working group has completed three workshops that have resulted in defining system requirements, common terminology and a draft Request for Information (RFI). The final project deliverables will include an RFI which will invite qualified vendors to demonstrate their solutions. A final report will also be completed in early November and *Infoway* will then be well positioned to define the eligibility criteria for investments in telehealth scheduling systems and deployment activities.

Home Telehealth Business Case

Health administrators continually measure the opportunities to invest in Home Telehealth against competing priorities for increased health services and/or governmental cost pressures. To accelerate the adoption of Home Telehealth, *Infoway* is in the process of



developing a business case model for Home Telehealth to share with all Canadian jurisdictional stakeholders. The business case will include a detailed costing analysis that not only ensures the investment in Home Telehealth will lead to healthier outcomes, but also will ensure the investment leads to efficiencies and cost savings across the health delivery spectrum – thereby ensuring the sustainable growth of these programs.

Telehealth experts from across Canada have been recruited to facilitate the development of the business case. The Home Telehealth Business Case will be completed by March 2007 and will be ready for distribution in early spring 2007.

Quebec telehealth on the move: planning activities underway

In the spring of 2006, the Quebec Ministry of Health and Social Services and *Infoway* announced a vast initiative to launch a series of planning activities for eight telehealth projects. This initiative is a first for telehealth in Quebec and should result in approximately \$50 million in investments in projects ranging from traditional tele-education and tele-consultations in a videoconferencing format to tele-homecare for patients suffering from

chronic and acute ailments using Internet enabled devices. A tele-pathology consultative service for distant regions as well as a specialized system to assist nurses in dealing with complex wound care is also part of this initiative.

These projects are currently being directed by the provincial ministry of health's new regional structures, the *Réseaux Universitaires Intégrés de Santé* (RUIS), which are organized around

the province's four medical schools located at the universities of McGill, Montréal, Laval and Sherbrooke. This network is responsible for coordinating tertiary, research and educational activities.

These projects are expected to begin deployment as early as January 2007.

About us

Canada Health Infoway Inc. invests with public sector partners across Canada to implement and reuse compatible health information systems that support a safer, more efficient healthcare system.

Infoway is an independent, not-for-profit corporation whose members are the 14 federal, provincial and territorial Deputy Ministers of Health.

OUR MISSION

Infoway's mission is to foster and accelerate the development and adoption of private and secure electronic health information systems with compatible standards and communications technologies on a pan-Canadian basis, with tangible benefits to Canadians. *Infoway* will build on existing initiatives and pursue collaborative relationships in pursuit of its mission.

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WRITE TO THE EDITOR AT:

Editor
EHRnews@Infoway
Canada Health Infoway
Corporate Affairs
1000 Sherbrooke St. W., Suite 1200
Montreal, QC H3A 3G4

Toronto Office

150 King St. W., Suite 1300
Toronto, ON M5H 1J9
Tel: (416) 979-4606
Toll-Free: (888) 733-6462
Fax: (416) 593-5911

Halifax Office

200 Waterfront Dr., Suite 125
Bedford, NS B4A 4J4
Tel: (902) 832-0876
Toll-Free: (877) 832-0876
Fax: (902) 835-4719

Montreal Office

1000 Sherbrooke St. W., Suite 1200
Montreal, QC H3A 3G4
Tel: (514) 868-0550
Toll-Free: (866) 868-0550
Fax: (514) 868-1120

Vancouver Office

1055 Dunsmuir St. Suite 3334
P.O. Box 49147
Vancouver, BC V7X 1J1
Tel: (604) 682-0420
Toll-Free: 1-877-682-0420
Fax: (604) 682-8034