Effective Use of an EMR
(eespecially when that EMR is Netmedical)

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June 23, 2008

What is an EMR?

- Database software
  - Updateable
    - In person or remotely (via the web)
  - Legible!
    - Reducing errors of communication
- Searchable
  - Filter large amounts of data fast
  - Review interventions in large populations fast
- Accessible by everyone
  - More problem solvers, means more solutions
  - VPN
- Built in communication tools
  - Critical to transforming multiple providers of care into team-mates.

Therein lies the power.

Most Effective – When?

- Kept up to date!
  - Need to stress importance to all users in FHT
    - "Data integrity"

Most Effective – When?

- Used consistently
  - Need to train staff on "right" way to do things
    - Assuming that way is simple
  - Need "policing" committee
    - To ensure training is done, data integrity, and to disseminate new developments and tips for use.
Most Effective – When?

- Technical functions are exploited
- Need continuous education for non-technical staff.
- Need power-users who can train other users in turn.
Communication
Amongst health care providers

Why?
- To document for medicolegal reasons
- To coordinate care plans, interventions
- To prevent error
  - "Too many cooks spoil the broth"
- To ensure that teamwork is seamless in front of the patient
  - Difference between the perception of an enhanced (FHT) team vs fragmented care!

Communication
Amongst health care providers

How?
- E-mail
- Face to face / verbal
- Voicemail / telephone
- Internal messaging
  - Can be logged
  - Important that everyone understands how to use

Communication
Amongst health care providers

What to communicate?
- Determined by team consensus
  - Balance volume of messages & time spent reading/writing with need to communicate
- Acute developments

Communication
Amongst health care providers

What to communicate?
- Acute developments
- Changes to care plan / Rx’s / new ADRs
  - In large teams, verbal communication breaks down - all communication should be logged
Communication
Amongst health care providers

What to communicate?

- Acute developments
- Changes to care plan / Rx’s / new ADRs
  - In large teams, verbal communication breaks down - all communication should be logged
- Notification of follow-up, new assessments

Improving Drug Prescribing & Use

EMR opens opportunities for:

- Chronic disease management
  - Eg. Attainment of Ministry goals & financial incentives
- Use of flowsheets
  - Extra incentives for diabetic patients:
    - $60/yr + $37/quarter if Ministry approved items are complete
  - 10,000 patients
  - 775 diabetics x $208 = $161,200!!

EMR opens opportunities for:

- Disease specific public health initiatives
  - Eg. Ensuring women have had their Pap booked
  - Eg. Ensuring use of valid questionnaires are used in assessments
- Use of reminders
Improving Drug Prescribing & Use

- EMR opens opportunities for:
  - Epidemiological study / chart audit
    - Eg. How many diabetics are not on ASA?
  - Identification of at risk patients
    - Eg. Which patients are currently taking Vioxx?
    - Eg. Which patients risk ARF from use of ACE inhibitors + NSAIDs + diuretics?
  - Use of database searches

One Pharmacist; 10 thousand patients

Summary - EMR

- Very powerful tool
  - Advantages in patient care impossible to match w/ paper charts
  - Improve outcomes for patient
  - Enhance communication, especially in larger teams
- Requires continuous training, oversight and re-evaluation of its use
- Consistency of input and data integrity are paramount to realize true power of system