

EMRS, FHTS, & PHARMACY

Nick Ragaz • June 22, 2008

What We'll Cover

- Goals of the EMR
- Successful Strategies
- Case Study: Peterborough Anticoagulation Clinic
- Pet Peeve: Paper Forms
- Case Study 2: QIIP Learning Collaboratives
- Future Directions

Goals of the EMR

- Structured, high-quality patient data
- Patient and population decision support
- Communication: accessible & useful information

Successful Strategies

- Think about what you're trying to do, not how you used to do it
- Identify the tools the EMR provides to accomplish those goals
- Use those tools – do not copy the paper chart
- Accept “imperfect” solutions if they further the goals – then learn and adapt
- Speak to your EMR vendor and IT support in terms of your goals, not just your problems

Case Study: Anticoagulation Clinic

- Set up a sample patient to test ideas and refine tools
- Used EMR's documentation tools: progress notes and templates, structured lab entries, treatments
- As a result, benefit from EMR's advanced functionality: flowsheets, graphs, reminders
- Data is integrated into the chart and easy to access for other providers

Pet Peeve: Paper Forms

- Don't expect to copy your old tools and processes
 - Learn those of the EMR instead
- Why? Paper forms are...
 - Awkward to use on screen
 - Not integrated well into chart
 - Inflexible, single use
 - Inaccessible without training
 - Not a way to improve the EMR software
- Example: a “diabetic” form that duplicates information you'd also need for a cardiovascular patient
- ONLY use paper forms (“custom forms” in Practice Solutions) for documentation that needs to be printed

Case Study 2: QIIP Collaboratives

- Practices used EMR for years
- Large collection of structured patient data
- Easy to run searches for eligible patients and key data points
- Added reminders for service according to clinical guidelines
- Use structured documentation formats and prompts

Future Directions

Welcome, Nick Ragaz! (Password & Profile | Log Out)

QIIP Learning Collaboratives [edit](#)

Score Card Practices Clinical Management Users

Diabetes

	Up-to-Date	Controlled
Hb A1C	208 / 510	160 / 510
Recall: every 4 months		Range: <= 0.075
LDL Cholesterol	180 / 510	—
INR	0 / 510	0 / 510

Green: At or above target. Yellow: Below target. Blue: No target defined.

Thank you!

Nick Ragaz
Primary Health Care Services of Peterborough
nick.ragaz@peterboroughfht.com