

September 22, 2016

EMR and Practice Management Improvements

EMR Every Step Conference, Toronto, ON



Faculty / Presenter Disclosure

- Faculty: Peter Hamer– Executive Director, Ottawa Valley FHT
- Relationships with commercial interests:
 - No relationships with commercial interests



Disclosure of Commercial Support

- This program has not received financial support or in-kind support from any organization
- **Potential for conflict(s) of interest:**
 - Peter Hamer has not received payment or funding from any organization supporting this program <u>AND/OR</u> organization whose product(s) are being discussed in this program.



Mitigating Potential Bias

• There are no potential sources of bias.



Ottawa Valley Family Health Team

- Located in Almonte A rural town 30 minutes west of Ottawa
- 13 family physicians, 1 paediatrician, 2 OB/GYNE
- 10,000 patients
- FHT/FHO combined in a 12,400 sq. ft. clinic adjacent to the local hospital



- Ways to improve practice management using the capabilities of your EMR:
 - Communication
 - Document management
 - Forms/templates



Communication - External

- Communication with patients:
 - Email
 - Patient Privacy
 - Policy
 - Portals
 - EMR function VS. add on software
 - EMR function
 - Appointments
 - Results



Communication - External

- Communication with patients:
 - External Software:
 - New patient forms
 - PHQ, GAD
 - Nippissing Development Screening
 - Patient Surveys



Document Management - Outgoing

- Nothing gets printed (well, almost nothing):
 - Rx faxed to pharmacy
 - Most pharmacies accept this
 - Requires naming conventions in address book
 - Rx renewals managed through EMR vs. paper
 - Electronic faxes are logged and messaged if failed
 - Forms printed at reception



Document Management - Incoming

Hospital Report Manager (HRM):

- Initial set-up was time consuming
- *Significant* time saving eliminates scanning process
- Less errors attaching report to patient chart
- Reports come in text format (most)
 - Improves ability to search
 - No longer need to create OCR document
- Faster reporting time
 - Reports often in EMR same day they are created



Forms and Templates

- Prefill information
 - Patient demographics
 - CPP (Rx, allergies etc.)
- Complex form grouping:
 - Prenatal package
 - Antenatal I & II
 - IPS I & II
 - IPS BW I & II
 - Public Health Req.
 - IPS U/S
 - Dating U/S
 - Morphology U/S
 - Patient handouts
 - Billing Options
- Requires naming conventions



- Considerations:
 - Don't prefill positives or negatives that allow you to tab through without your input
 - Naming conventions



Thank you!

Questions?

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