

Using EMR data to inform quality improvement

Why is data-informed QI important?

Supported by the General Practice Services Committee (GPSC) and its programs, a key step in transitioning to a patient medical home, as the cornerstone of a primary care network, is to use quality data from electronic medical records (EMR) to inform quality improvement (QI) activities in practice.

High-quality patient information captured through an EMR is an essential tool in primary care. It helps family physicians practice more efficiently, focus on providing proactive care, and organize services and team members appropriately.

How does the GPSC support QI using the EMR?

Physicians and practice teams can optimize use of their EMR and leverage EMR data to inform QI activities by participating in the GPSC's Practice Support Program (PSP) suite of EMR supports and services. These include:

- EMR Functionality Assessment
- EMR-enabled Tools and Resources
- EMR Small Group Learning Sessions
- Phases of Panel Management

These services can support activities guided by PSP QI cycle (figure 1), which is facilitated by PSP's Regional Support Teams, a group of practice improvement professionals including peer mentors.

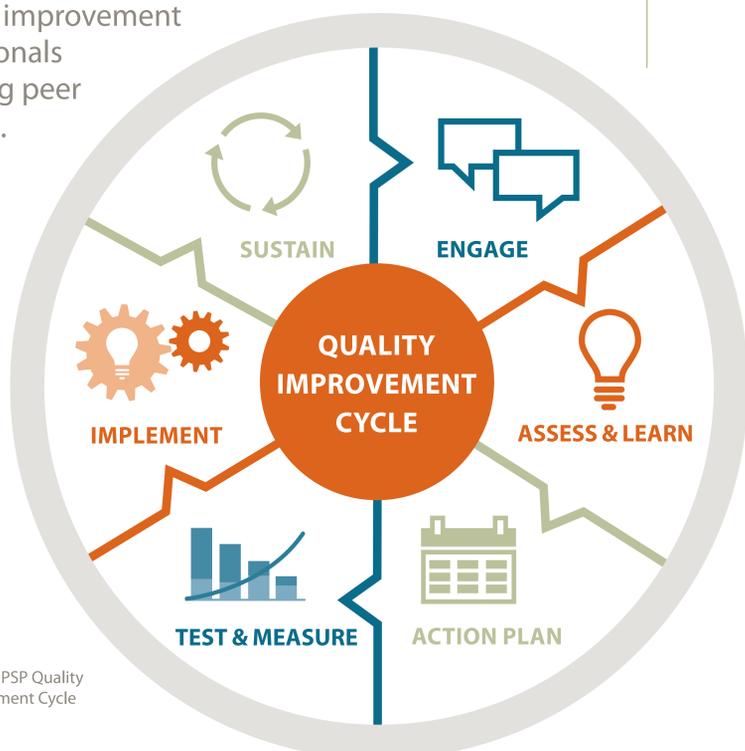


Figure 1: PSP Quality Improvement Cycle

How are family practices using EMR data to inform QI?

EMR SMALL GROUP LEARNING SESSIONS

395 family physicians and practice team members have participated and developed skills to help optimize the use of their EMR

EMR FUNCTIONALITY ASSESSMENT

285 family physicians have completed the assessment and received practice supports related to EMR optimization

Practice change: Clinical workflows

Feeling frustrated and burned out, and wanting to serve patients in a more timely way, a clinic team in Langley worked with a PSP RST member and through a facilitation QI cycle to improve practice efficiencies. After completing the

phases of panel management, the team completed an EMR Functionality Assessment.

Results from this helped inform a number of ideas for changes to clinic workflow related to patient visits, including to use the EMR to communicate and delegate tasks within the team and to track reason for patient visit so the team can prepare the room. The work undertaken started paying off right away. The clinic has:

60%

reduction in patient wait times

25%

reduction in physician's average time spent on paperwork

What are next steps for the GPSC?

Working with stakeholders, the PSP and the GPSC's Doctors Technology Office (DTO) are working collaboratively to increase the uptake and sustained use of EMR-enabled clinical and practice management tools by:

1. Increasing access to intuitive tools that capture and report out useful data from the EMR for QI activities; and
2. Enabling access to practice support, using the PSP Practice Facilitation model to support the uptake and sustained use of EMR-enabled tools.
3. Maximizing benefits through compensation and accreditation to support physicians and teams to dedicate time for QI, a unique benefit offered in BC.

EMR-ENABLED TOOLS AND RESOURCES

7 EMR platforms enabled with **5** areas of clinical care and practice management tools

	Chronic Pain Management	Adult Mental Health	Child & Youth Mental Health	COPD & Heart Failure	Panel Management
Intrahealth Canada	✓	✓	✓	✓	✓
MOIS	✓	✓	✓	✓	✓
Oscar BC	✓	✓	✓		✓
QHR Technologies		✓	✓	✓	coming soon
Telus Med Access	✓	✓	✓	✓	✓
Telus Osler	✓	✓	✓		✓
Telus Wolf	✓	✓	✓	✓	✓

EMR-ENABLED TOOLS AND RESOURCES

1,900 family physicians have received in-practice coaching and support

Practice change: Preventative and proactive care

As MSP no longer pays family physicians for complete physical exams, breast exams are not routinely done. Not wanting to miss early signs of breast cancer for her

patients, a Fort Langley family physician set up a process via the interventions feature of the Profile EMR as part of the panel management work. The intervention reminded her to do breast exams for female patients aged 50+ who have not had a breast exam in the past 12 months.

"A woman I called in specifically for the exam ended up having breast cancer. It gives me piece of mind to do this."

—BC family physician