

## National Physician Survey: EMR use at 75%

The good news is that the percentage of Canadian physicians using electronic medical records (EMRs) has tripled over the past seven years, increasing from about one-quarter of doctors in 2007 to three-quarters in 2014. This was touted by many as the most positive finding in the 2014 National Physician Survey, an online survey with a focus on information technology completed by 10 000 Canadian doctors. The bad news is that access to electronic records isn't uniform across the country, and several provinces are lagging far behind others.

Most doctors who do adopt EMRs report that they improve their practices. According to the survey, 65% of doctors said patient care became better or much better after they implemented electronic records. Very few, less than 5%, reported that EMRs had a negative impact on quality of care.

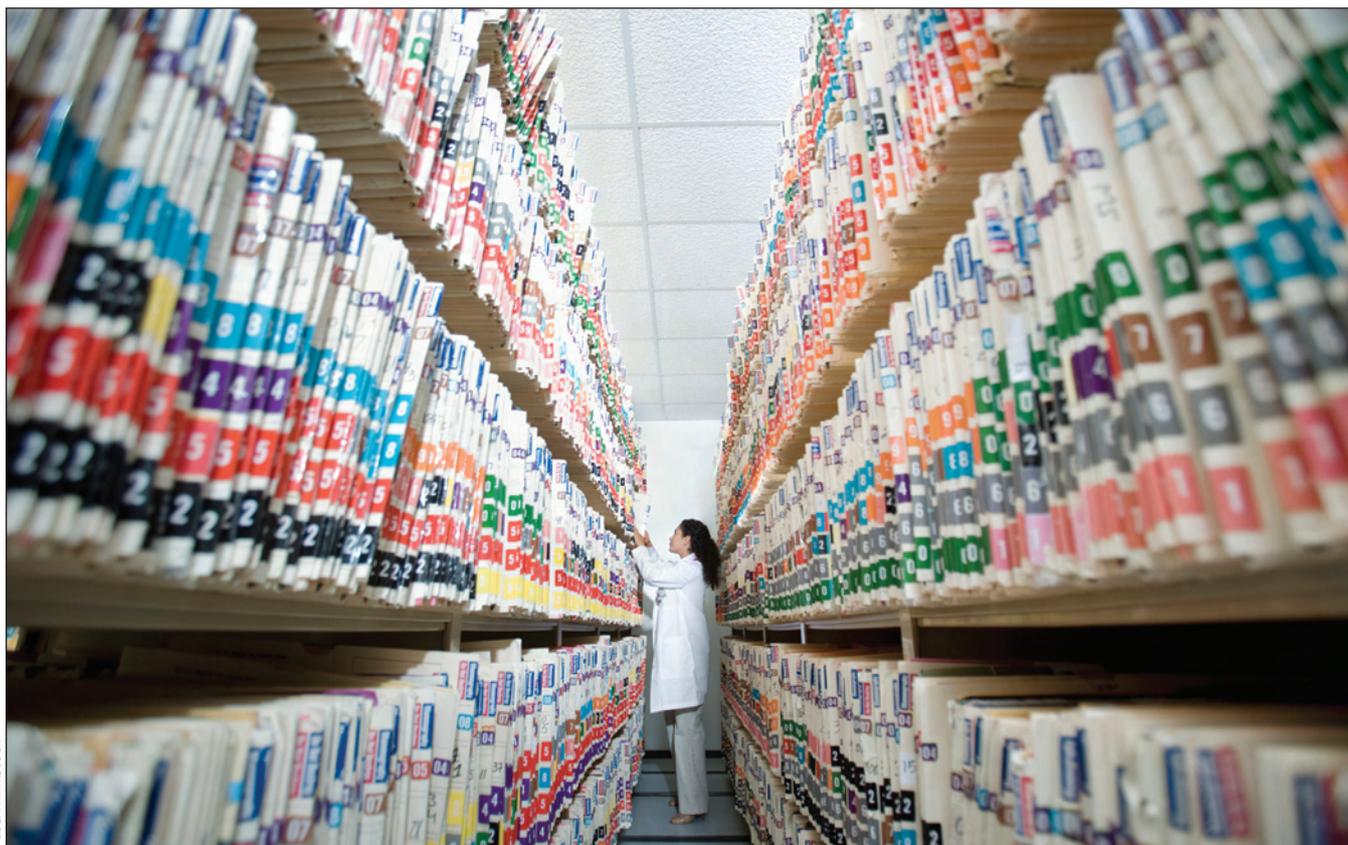
"The real reason for optimism is that we are seeing more and more evidence that it is resulting in better care, and that is the real key," says Dr. Cindy Forbes, president-elect of the Canadian Medical Association.

Some of the clinical benefits of EMRs cited by survey respondents include remote access to patient charts, improved availability of lab results, alerts for potential medication errors and reminders for preventive care. On the other hand, about half of EMR users experienced technical glitches, 44% reported compatibility problems with other electronic systems and 22% had firewall or security issues.

The provinces with the highest rates of EMR adoption are Alberta (87%), British Columbia (85%) and Ontario (83%). Faring much worse in embracing information technology are New Brunswick (62%), Quebec (64%) and Newfoundland and Labrador (68%).

New Brunswick has been slow to implement electronic records because, until 2013, it had no EMR funding program. "We pressed our provincial government for this program for many years while other provinces raced ahead," Anthony Knight, CEO of the New Brunswick Medical Society, wrote in an email to *CMAJ*. The new program is being rapidly implemented. "We expect our EMR adoption rate to be one of the fastest-rising in the country over the next three years."

In Quebec, it is more a story of money wasted than withheld. The province's \$1.6-billion e-health initiative, Dossier Santé Québec, was recently called a "disaster" by Quebec's health minister. What was supposed to be a province-wide electronic health system turned into a patchwork of isolated digital services that don't communicate with each other.



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Although EMR use is up across Canada, more than 30% of doctors in Quebec, New Brunswick, and Newfoundland and Labrador still use paper charts exclusively.

“It should have been implemented years ago, and we don’t know why it doesn’t work,” says Dr. Yves Robert, secretary of the Collège des médecins du Québec. “Although millions have been invested, we don’t see the results on the screen.”

Too many vendors surfaced to offer electronic record systems, and the systems were incompatible with each other. Thus, the focus shifted to market competition and corporate interests. The result has been confusion among physicians about which system to choose.

“It’s not because doctors don’t want this tool. They would like to have it, but in Quebec it has been so complicated,” says Dr. Laurent Marcoux, president of the Quebec Medical Association. “It’s a real need and many doc-

tors want it, but to implement it is a big effort and we lose a lot of time.”

In Newfoundland and Labrador, the primary reasons cited in the national survey for not using an electronic record system were that it was too costly (42%) or that it was not available at the physician’s place of work (56%). Of those in the province without EMRs, only 26% indicated they intended to begin using one over the next two years.

The rapid nationwide increase in EMR adoption, however, is creating momentum that will eventually make it difficult for even the most reluctant physicians to stick with paper-only record systems. “The good news is that we have now hit a critical mass, where we are starting to see changes in the system that will encourage the late adopters to get on board,” says Dr.

Alan Brookstone, founder of CanadianEMR, an online source of information about electronic records.

Still, just because more doctors are implementing electronic records doesn’t mean the systems are being used to their full potential. According to Brookstone, the focus must now shift to issues such as interoperability, standardizing data formats and integrating e-prescribing into record systems.

“Adoption still does not equate to effective use of EMRs,” says Brookstone. “You can’t really achieve the full benefit of a system until you have got electronic exchange of information and you can send information seamlessly from one system to another.” — Roger Collier, *CMAJ*

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