

Society Helps Alberta Docs Standardize on Electronic Records

By Joseph Goedert, News Editor



March 22, 2005

The Alberta Orthopaedic Society understands the difficulties its 150 specialist members in the Canadian province face when deciding whether to implement electronic medical records. "If we go at it as individual offices, we face barriers," says Roger Cho, M.D., an orthopedic specialist at Foothills Medical Center in Calgary and chair of the society's information technology committee.

Physicians choosing multiple products, for instance, may not get the customized templates and vocabularies necessary for orthopedics, preferred pricing, appropriate support, or the ability to remotely access the software via the application service provider computing model, Cho notes.

But customization is just what the society now is offering its members and hundreds of allied health professionals, such as rheumatologists, podiatrists and rehabilitation therapists. The society has licensed electronic records from **Nightingale Informatix Corp.**, Markham, Ontario, and will offer the software—remotely hosted by the vendor—for a monthly fee. Further, the Alberta Bone and Joint Institute, a research and education organization, has kicked in \$100,000 to customize the software to collect and analyze outcomes data related to joint and hip replacement procedures.

The medical society will fund modifications to support the collection and analysis of data for other subspecialties, such as trauma and spine care, says Donald Dick, M.D., president of the society, co-vice chair of the institute and a surgeon at Orthopaedic Consultants in Edmonton. While physicians will pay a monthly fee to use the software, the society licensed the technology so it can have ownership over the modifications made. In addition to improving the overall quality of care via electronic records, getting standardized data will enhance research into best practices, Dick says. "The hope is we can share information to conduct outcomes analysis and evaluate the kind of care we are delivering. We need to know if a care pathway is having the desired outcome."

The society is funding part of the initiative and getting assistance from the province of Alberta. Physicians likely will pay several hundred dollars a month for the software, but pricing has not been finalized, Dick says. The society does not expect to make a profit on the initiative, he adds. Integrating with electronic records initiatives elsewhere in Alberta was a condition of getting funds from the province. Hospitals in seven of Alberta's nine health regions last year agreed to standardize on a clinical and financial information system from Medical Information Technology Inc., Westwood, Mass. Integrating with other records initiatives was a fundamental goal of the Alberta Orthopaedic Society project, Dick says. "If we can't get our laboratory and hospital data, we won't have a complete picture of care."

Incentives to join

The society is not requiring its members to implement electronic records software from Nightingale; physicians can select software from other vendors or chose not to implement any software at all.

However, most electronic records software is oriented toward general practice physicians and lacks customization to address the scheduling, charting templates and workflow within orthopedic practices, Cho says. He expects to be among the first physicians to get the software; Dick and other physicians in his seven-member practice also will be early adopters. "I thought if it's going to fail miserably, it better be in my clinic," Cho jokes. Cho has used electronic records software from another vendor for a year, and expects some unpleasantness during the process of getting used to the new software. But the Alberta Orthopaedic Society will offer support teams to help implement the software and iron out any kinks after the go-live. "We're offering more than just the software. There are other areas that make it attractive for members to join."

The society has promised Nightingale it will get half of its members to sign up for the software during the first year, a goal Dick believes is realistic. "Some physicians will wait and see, some are near retirement, but all our major groups have signed on," he says. "Seventy-five members brings us critical mass, then we can get others."