

## WHAT WE HEARD

### What was the goal of this member engagement?

Doctors of BC is working to develop our Digital Health Strategy, and to collaborate with partners on provincial plans to ensure that current digital health priorities align with your needs in a post-pandemic environment. To help inform our understanding and advocacy on your behalf, we sought your input on:

- Optimizing use of electronic medical records (EMRs), electronic health records (EHRs), and other digital health technologies.
- Ministry of Health (Ministry) priorities related to enhancing functionality, information-sharing, and effective use of digital health technologies.

### How did we seek member input?

#### All-member online engagement

We sought input via an online survey that was informed by feedback doctors had shared in pre-pandemic years.

### Who participated?

# 209

 participants

#### Type of practice

Family physician: 60%  
Specialist: 37%  
Other: 3%

#### Practice setting

Community-based: 44%  
Facility-based: 17%  
Both: 39%

#### Geographic setting

Urban: 69%  
Semi-urban: 18%  
Rural: 13%

### What did we ask?

We asked for member input across three broad areas related to digital health:



**EMR business  
management**



**EMR & EHR  
enhancements  
& interoperability**



**Information-sharing  
& analytics**

# WHAT DID WE LEARN?

Administrative burdens associated with managing an EMR, poor EMR and EHR functionality, and lack of interoperability of systems increase inefficiencies for doctors, which decrease quality of and access to care and increase physician burnout.

There is a strong desire to simplify and streamline EMR use and management to improve patient care and align with clinical workflows.

These findings support results from past member engagements, such as the annual [Health Authority Engagement Survey](#) and feedback that informed the development of Doctors of BC's [policy statement on Physician Burdens](#).

## EMR business management

- 55% of respondents are very or somewhat satisfied with their EMR; nearly 23% are considering changing their EMR vendor.
- Interoperability and features/functionality are the most significant concerns physicians have with their EMRs, followed by cost and data portability.
- Support for having a third party manage their EMR contract is strong (73%), with the majority (87%) preferring Doctors of BC as a potential contract manager, and 13% supporting the Ministry or health authorities managing their contract.
- 71% indicated interest in a single community-based EMR for BC, with a preference for an independent collaboration of representatives (including Doctors of BC, the Ministry, and regional health authorities) developing it.

## EMR & EHR enhancements & interoperability

- There is strong support for:
  - Enhancements that allow physicians to work from within their EMR, including managing referrals and prescriptions and accessing/completing health system forms.
  - EMR and EHR interoperability, information-sharing, and secure communications mechanisms with other providers and patients, preferably pushing content out, versus allowing other providers and patients access to a physician's EMR system.
- Participants indicated that:
  - EMR interoperability should promote sharing of standardized, clinically relevant data, reducing the burden of duplicate entry while protecting patient privacy.
  - They do not want to collect excessive amounts of clinical data (e.g., receive data from patient devices/systems such as Fitbits and Apple Watches).
- Virtual care is a priority, but technical solutions, such as integrated video calling within an EMR, are not a priority until proven reliable or user friendly.

## Information-sharing & analytics

- Most participants (77%) are comfortable sharing information to support patient care, interoperability, analytics, and quality improvement (QI).
- The majority of participants (86%) are interested in using EMR data for analytics and QI, but this is not their main priority.
- There is a strong preference to share de-identified data (to protect patient privacy) due to lack of governance to support broader information-sharing.
- Data collected for purposes of analytics and QI should contribute to direct improvements to patient care and reduce administrative burden to the extent possible.

## WHAT'S NEXT

*Doctors of BC will use these findings to inform development of a Digital Health Strategy that will guide our advocacy approach and our collaboration with provincial partners. We will also continue to seek your input to understand your evolving priorities related to digital health.*