OntarioMD

Electronic Medical Records

CORE EMR SPECIFICATION

Section 3: Data Sharing

Version 4.2

FINAL

Date: April 1, 2015

Ontario
eHealth Ontario

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GLOSSARY

TERM	MEANING
CPP	Cumulative Patient Profile
CPSO	The College of Physicians and Surgeons of Ontario
Data Dictionary	The collection of discrete data elements including their definition and relationships and referenced by Ontario EMR Requirements Repository.
EMR	Electronic Medical Record
EMR Offering	A specific software version of an EMR product and the services and support for that particular product, all as more particularly described in the EMR Certification Agreement.
EMR specification	An EMR specification is one of several Ontario EMR Specifications that define functional and non-functional requirements for an EMR Offering in Ontario. Each specification in the Ontario EMR Specifications focuses on a particular component, functionality or interoperability and will be updated over time as new requirements and/or enhancements are introduced.
M	Mandatory requirement. An EMR Offering must have this function or provide this service.
OntarioMD	OntarioMD Inc.
Ontario EMR Requirements Repository	The collection of functional requirements and discrete data elements published by OntarioMD; includes new, existing and retired requirements and/or discrete data elements.
W	Weighted requirement. The EMR Offering will receive a point value if the requirement is met.

1   INTRODUCTION

1.1   OVERVIEW OF THE DATA SHARING REQUIREMENTS

These Data Sharing requirements describe the sharing of data across multiple EMR instances.

The Data Sharing requirements apply only to configurations where there are 2 or more patient databases where data needs to be shared across multiple (and different) instances of the EMR Offering in multiple locations.

1.2   SCOPE OF THE DATA SHARING REQUIREMENTS

These requirements are applicable to the following sections of the Core EMR Specification – Section 1: EMR Baseline Requirements:

- Demographic Management

- Medication Management

- Lab Test Management

- Encounter Documentation Management

- Schedule Management

- Workflow Management

- Billing Management

- System Access Management

- Auditing and Logging

Two entities are involved in this solution:

- **Primary** doctor/clinic/EMR

  - This is the 'home' of the patient

  - This is where the patient is rostered to a primary physician

  - The master patient record exists here. The master record can be defined as the full, complete and dynamic patient record. The record includes:

    - Administrative data – plus appointment information from the Covering clinic

    - Clinical data – plus patient medical data recorded/updated from the Covering clinic

    - Data from the Covering EMR is stored and presented in a native and discrete format (ie. PDF or other static data is not acceptable)

- **Covering** doctor/clinic/EMR

  - This is where the patient goes, either physically or virtually, for care in lieu of the Primary

  - This clinic is part of the data sharing group

  - The clinic must be able to identify that the patient is part of the data sharing group

Data Sharing and Connectivity

EMRs are business critical applications and business continuity is imperative. However there are situations that could affect the connectivity between the Primary and the Covering EMR such as:

- ISP issue
- Network connectivity issue
- Hardware issue

When connectivity between the Primary EMR and Covering EMR is affected, and access to the patient record is limited, the following must occur:

- Covering EMR users must be made aware that connectivity is down and that they may not be viewing the complete patient information and that information may be out of date. The user must be able to find a reference to the patient that is within the data sharing group as he/she may not have the ability to search and access the patient record in the Primary EMR. The Covering EMR user must not have to recreate the patient record.
- The Covering EMR user must be able to electronically record the encounter locally and send back to the Primary EMR when connectivity has been re-established. Faxing and manual re-entry of data is not acceptable.
- Electronically synchronized discretely in the Primary EMR after a downtime situation. Ensure that the Primary EMR patient records are up to date when connectivity is available.
- The user experience must be consistent across working locally in an application or if in a data sharing workflow scenario.

2   SPECIFICATION TRACEABILITY

2.1   HIGHLIGHTS OF CHANGES

Ontario EMR Specification v4.1 Appendix A was used as the basis to create this Core EMR Specification – Section 3: Data Sharing.

TYPE	# of Requirements v4.1	# of Requirements v4.2
New Requirements	13	2
Updated Requirements	N/A	7
Previous Requirements	N/A	7
Total Number of Requirements	13	16

* **NOTE**: Due to splitting and/or merging requirements defined in the previous specification, the "Total Number of Requirements" in the most current version is not to be calculated based on the "Total Number of Requirements" in the previous specification version.

2.2   RELATED DOCUMENTS AND REFERENCES

The following table lists all documents related to, or referenced in this specification.

DOCUMENT NAME	VERSION	DATE	PUBLISHING ORGANIZATION	LINK
Core EMR Specification – Section 1: EMR Baseline Requirements	v4.2	1-Apr-2015	OntarioMD	https://www.ontariomd.ca/portal/server.pt/community/ontario_emr_specifications/current_emr_specifications
Core EMR Specification – Section 2: Data Portability	v4.2	1-Apr-2015	OntarioMD	https://www.ontariomd.ca/portal/server.pt/community/ontario_emr_specifications/current_emr_specifications
EMR - Chronic Disease Management Specification	v4.2	1-Apr-2015	OntarioMD	https://www.ontariomd.ca/portal/server.pt/community/ontario_emr_specifications/current_emr_specifications

OntarioMD will periodically review and update the above list. It is essential that implementers keep current regarding any changes to these specifications.

3   DATA SHARING REQUIREMENTS

This section consists of the EMR Data Sharing functional requirements for EMR Offerings.

Scoring Key: **M** = Mandatory criteria
W = Weighted criteria

Status Key: **N** = New requirement for this EMR Specification
P = Previous requirement from EMR-Specification v4.1
U = Updated from a previous EMR Specification v4.1
R = Retired from previous EMR Specification v4.1

OMD #:   unique identifier that identifies each requirement within *OMD Requirement Repository*

OMD #	REQUIREMENT	GUIDELINES	M/W	Status	Comments
DS01.01	From the Covering EMR, the user must be able to search for and identify a reference to a patient record that exists and is associated to a physician or clinic that is part of the data sharing group.	Covering clinic is presented with matched patients based on the system's matching algorithm. Matched patients must be distinguishable from each other to assist the user with selecting the correct patient record. A patient who has records across multiple clinics must have the Primary record indicated if applicable.	M	U	
DS01.02	For patients that present with no Primary physician or clinic, the Covering EMR must be able to search all patients and identify a reference to a patient record that exists and is part of the data sharing group.	The Covering physician must be able to access all the records from all the clinics that have a record of the patient. Matched patients must be distinguishable from each other to assist the user with selecting and accessing the correct patient record.	M	U	Scenarios exist where a patient has visited several clinics but has no Primary physician.

OMD #	REQUIREMENT	GUIDELINES	M/W	Status	Comments
DS01.03	Covering physician or clinic must have the ability to view and access the full patient record via the Covering EMR.	The interface and user experience in the Covering EMR must be similar with the Primary EMR. A PDF or static copy view of the patient record presented to the Covering EMR user is not acceptable. Primary EMR must be able to limit who views or edits records in the Primary EMR using existing security methods. Security and privacy on patient data in the Primary EMR must still be in place when accessed from the Covering EMR.	M	U	Example: If a patient has requested that specific data in their record be blocked, this security is still applicable to users external to the Primary EMR system who are accessing this record.
DS01.04	Covering clinic is able to update demographic information of the patient on the Primary EMR.	Primary EMR must be able to configure and restrict/limit updates to demographic information in the Primary EMR using existing security methods. Demographic updates made in the Covering EMR must be indicated to the Primary EMR. Primary EMR user can choose to accept or decline changes.	M	U	
DS01.05	Any labs or tests ordered by the Covering physician are automatically copied to the Primary physician when generated.	The Lab order clearly indicates the Ordering physician and the Copy To physician. Manually updating the Copy To physician information is unacceptable.	M	P	
DS01.06	Covering physician is able to create tasks or other follow-up items for the Primary physician or clinic. Tasks or follow-ups are reflected in the patient's record in the Primary EMR.	Appropriate flagging includes sending the record to the Primary physician's inbox or creating a task for the Primary physician/clinic to review. Any flagged record is highlighted for the Primary physician regardless of how their inbound record option is set.	M	P	
DS01.07	Covering physician or clinic is able to print any part of the patient record as needed using a local printer.	Covering clinic user can print the full patient record or parts of the patient record from the Primary EMR or Covering EMR.	M	P	

OMD #	REQUIREMENT	GUIDELINES	M/W	Status	Comments
DS01.08	Covering EMR performs drug-to-drug and drug-to-allergy interaction checking using complete and current patient medication and allergy/intolerance data.	The most complete and up-to-date patient information must integrate the current medications and allergy/intolerance data from both the Primary and the Covering EMR at the time of performing the drug-to-drug and drug-to allergy interaction checking.	M	P	
DS01.09	Covering EMR maintains a record of the patient appointments.	A reference to the appointment must be made in the Primary EMR in the patient chart to indicate the patient appointment at the Covering clinic.	M	P	
DS01.10	Correct billing information is generated from the Covering EMR.	Billing information will only be kept in the EMR that actually bills for the service provided.	M	P	
DS01.11	A record of the preventive care activities (mammogram, pap, colorectal, influenza and immunization) must exist in Covering EMR and Primary EMR.	All information related to preventive care and associated bonuses must be recorded in a manner that ensures that the correct physician or clinic is compensated.	M	P	Covering physician delivering a flu shot will be paid for the service, but the Primary physician may receive credit for preventive care bonus purposes.
DS01.12	The full encounter must be automatically synchronized between the Covering EMR and Primary EMR within 30 minutes.	Manual/User dependent synchronization of data between the Covering EMR and Primary EMR would not satisfy the requirement.	M	U	
DS01.13	A full, dynamic record of the encounter and associated activities recorded during the patient visit with the Covering EMR must exist in the Primary EMR.	All components and documentation of the encounter must automatically synchronize between the Covering EMR and Primary EMR. A PDF or other form of static copy of the patient encounter in the Primary EMR is not acceptable. The patient encounter includes: - CPP - Lab orders / Lab results - Medication - Encounter Note(s) - External documents - Chronic Disease Management - Referrals The record must be directly associated to the patient on both Primary and Covering EMR.	M	U	

OMD #	REQUIREMENT	GUIDELINES	M/W	Status	Comments
DS01.14	Encounter data recorded during the patient visit with the Covering clinic must include: - provider who recorded the data - Covering clinic - date/time the data was recorded - date/time the data was synchronized	Can be visible either on the patient chart or through an audit trail in both Primary EMR and Covering EMR.	M	U	
DS01.15	There will be a complete audit trail of medical records in accordance with the CPSO requirements. All activity (i.e. data viewed, updated, deleted) against medical records maintained by the EMR must be captured in the audit trail.	Audit trail of encounter at Covering clinic is accessible in both the Covering EMR and the Primary EMR. Synchronization of information must also be captured in an audit trail and this information is accessible in both Covering EMR and Primary EMR.	M	N	
DS01.16	Alert or message to the user and the EMR Administrator is provided if connectivity to the Primary Clinic is down.	The Covering EMR must handle the failure of a communication link with the Primary clinic and must continue operating. The Covering EMR must provide appropriate notification to user(s) or administrator regarding the applications online and offline status. The Covering EMR application must be able to retry and re-establish network connectivity and perform the operation at a later time without any user intervention.	M	N	

4 RETIRED REQUIREMENTS

The following terms and abbreviations are defined and shall be applied to all tables in this section:

Scoring: **M** = Mandatory criteria
                  W = Weighted criteria

Status: **N** = New requirement for EMR Specification v4.1
                  P = Previous requirement from EMR-Specification v4.1
                  U = Updated from a previous EMR Specification v4.1
                  R = Retired from previous EMR Specification v4.1

OMD #:   unique identifier that identifies each requirement within *OMD Requirement Repository*

YEAR Retired: the year the requirement was retired from the *OMD Requirement Repository*

The following functional requirements have been retired from the Core EMR Specification – Section 3: Data Sharing specification.

Refer to Appendix A – EMR Baseline Requirements v4.1 for complete information about the retired requirements.

OMD #	REQUIREMENT	GUIDELINES	M/W	Status	YEAR	YEAR Retired	COMMENTS
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A