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# Enhanced EMR Value for Physicians Piloting an EMR Physician Dashboard

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# Faculty / Presenter Disclosure

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- **Faculty / Presenters:** Dr. Darren Larsen, Dr. Rachel Bevan
- **Relationships with commercial interests:**
  - Dr. Larsen is a full time employee of OntarioMD
  - Dr. Bevan has no relationships with commercial interests

# Disclosure of Commercial Support

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- This program has not received financial support or in-kind support from any organization
- **Potential for conflict(s) of interest:**
  - The presenter has not received payment or funding from any organization supporting this program but is employed by company whose product(s) are being discussed in this program.

# Mitigating Potential Bias

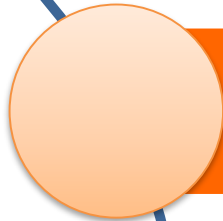
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- There are no potential sources of bias.

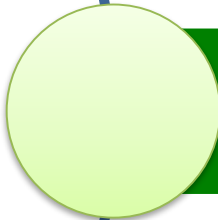
# Session Objectives

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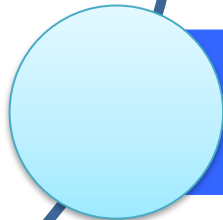
By the end of this session, you will be able to answer the following:



What are the most common types of dashboards used by clinicians?



What clinical purpose do dashboards serve?



How do dashboards prepare for broader analytics and reporting objectives?

# Session Outline

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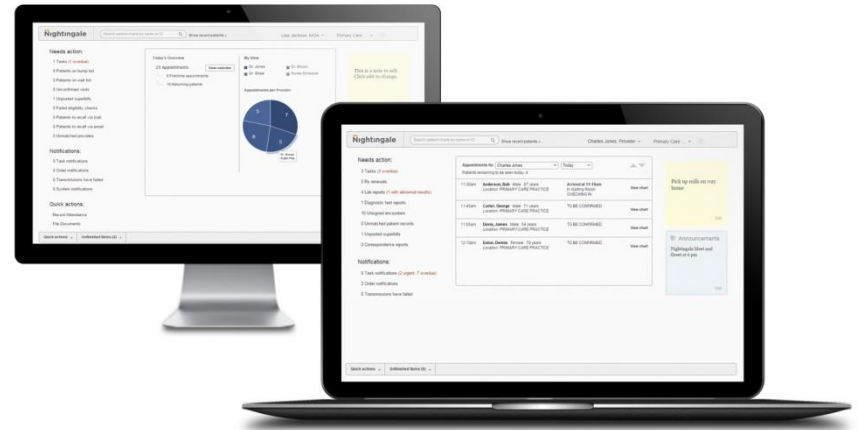
1. The Dashboard Environment
2. OntarioMD EMR Physician Dashboard Framework Proof of Concept
3. Proof of Concept Objectives
4. Current Progress and Timelines
5. Proof of Concept Benefits Evaluation and Early Lessons Learned

# What is a Dashboard?



# Local EMR Dashboards

- EMR-specific examples
- Disease-based
- Locally-customized
- Difficult to scale
- Not linked to system objectives outside of fee codes



miDASH

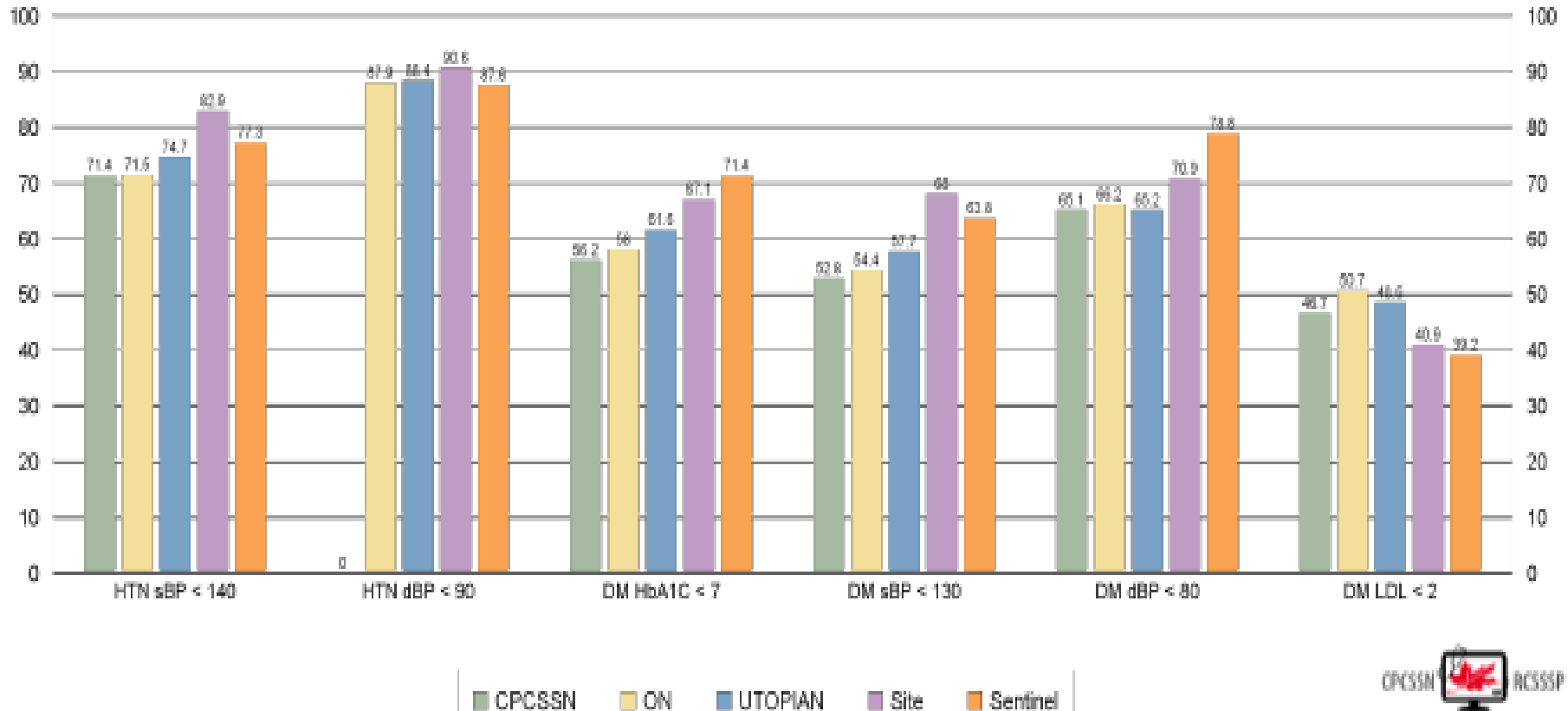
intelliDASH





# External Dashboards

Indicators of Patients (%) \*



# External Dashboards

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- Manual extractions
- Research-based
- Not real time
- Data normalization after the fact
- Drill downs often not possible
- Limited in scope to selected EMR vendor solutions/practice models
- Cannot customize

# Environmental Scan - Summary

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- There will never be only one, single dashboard
- There is currently no single dashboard solution that is repeatable across all EMR vendor solutions
- Data quality begins at the point of care and is a fundamental requirement for indicator effectiveness
- Clinicians are motivated for change when there is clinical or practice value
- Existing solutions are not often driven by provincial indicator frameworks)

# OntarioMD EMR Dashboard Framework

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- Proof of concept at this time
- Endorsed provincial indicators included
- Data quality improvement opportunity
- Is provincially scalable across all certified EMRs
- Easily expanded with new and indicators
- Collaborative



# Developed in Collaboration

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## Clinical Working Group

- Business requirements development
- Composed of HQO, CIHI, AFHTO and practicing docs
- Selection and refinement of indicators

## EMR Vendors



# A Framework for Provincial Indicators

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- Mapping of validated indicators from HQO, CIHI and AFHTO
- 17 overlap in 7 clinical areas
  - Diabetes
  - Cancer prevention
  - Immunization
  - Smoking
  - HT
  - Obesity
  - CAD

# Framework for Provincial Indicators

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- What's needed?
  - Validity
  - Actionability
  - Scalability
  - Usability
  - Benchmarking
  - Reporting potential
  - Look to the future: performance measurement

# Proof of Concept Sites

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## Clinicians

- Approx. 100 physicians in two vendors participating in demonstration of the proof of concept
- Physicians represent a mix of practice models and maturity levels
- Includes General Practitioners as well as community based specialists (Rheumatology)



# Provincially Scalable

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## Expandable customizable indicators

Easily expanded to include new indicators

Can be customized and shared with other physicians

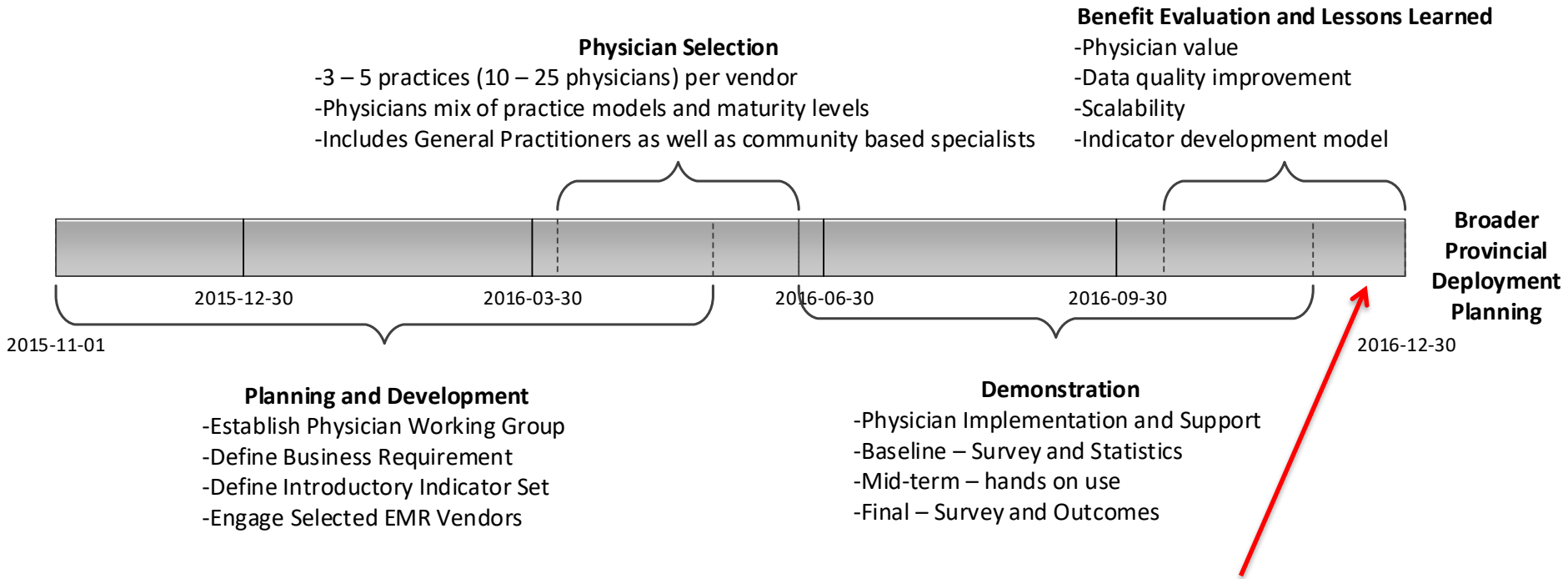
## Repeatable across EMR vendor platforms

Based on OntarioMD Core Data Set (CDS) data elements common to all EMR vendors

## Change management

Education in use of dashboard tools  
Support for data quality improvement

# Timeline and Outcomes



Deployment more broadly New Year of 2017

# Benefits Evaluation

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- Assess clinical value for Provincial Indicator use
- Usefulness in quality improvement work
- Improvements in data quality
- Scalability and extendibility across vendors
- Change management needs for implementation
  - what works? what doesn't?
  - how is the dashboard best used in different environments?
- Early plan for provincial rollout

# Early Learning

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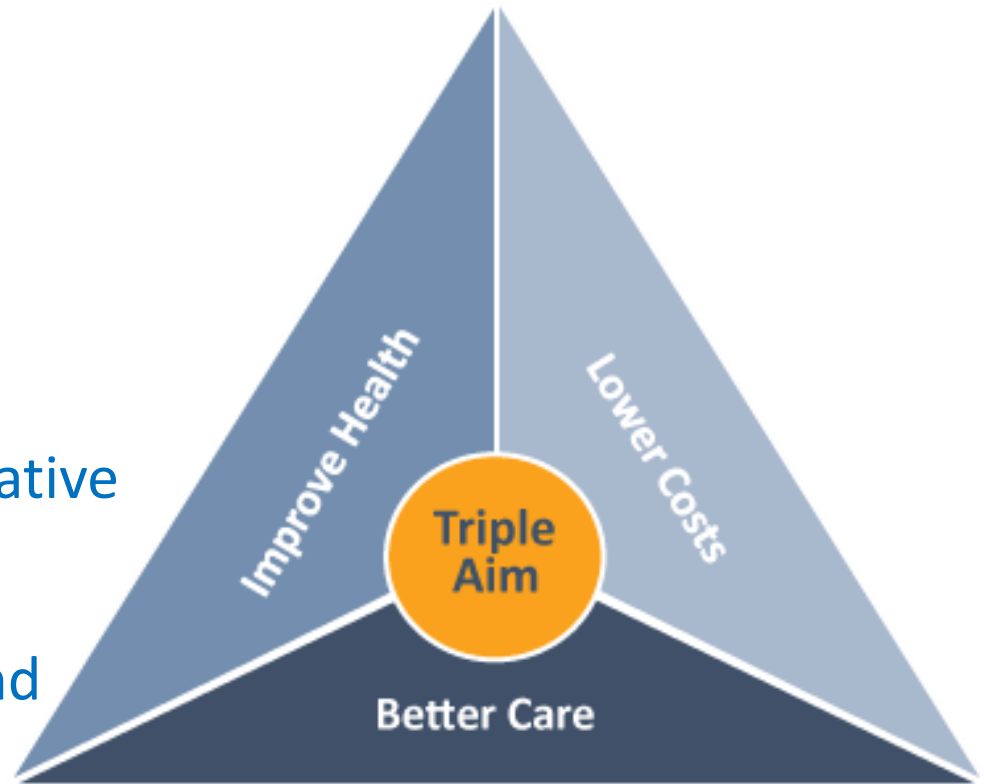
- Provincial indicators are on their own maturity curve and require refinement and feedback to the framework owners:
  - Limitations in clinical usefulness surfaced during the selection of indicators
  - Some indicators must be enhanced to be ‘actionable’.
- The comparative assessment of ‘my indicator results’ with the practice, region, province is in high demand

# Preparing for the Future

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Dashboards provide clinical motivation for improved data quality as a foundation for Triple or Quadruple AIM

- The broader sharing and aggregation of primary and secondary care data
- Benchmarking and comparative reporting
- Improved clinical quality and population health



# Thanks!

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