

Communities of Practice

A group of practices or service area who will be collaborating to improve services to a shared patient population using a common EMR. This group or service area may share a physical building or be located across a community.

To support larger groups of physicians undertaking collaborative projects to implement a common EMR to support the clinical needs in their community, PITO has developed a specific program and set aside up to half of the funding slots during each intake period for Communities of Practice.

We are encouraging this model as we believe it is aligned with the interests of physicians and their patient's health care needs. In other countries and provinces where the majority of the physicians are using an EMR, there is an increasing trend toward adopting the same EMR product within tightly knit communities of practice to support common goals.

The goals of the Community of Practice program are:

- Support for clinical initiatives such as local health networks that require greater ability to exchange patient information
- Easier movement for locums and out-of-hours coverage
- Increased physician collaboration and peer support
- Support for speciality care groups

- Coordinated and cost-effective implementations

A Community of Practice will have:

- set of common clinical goals
- identified or existing lead for the group
- at least ten physicians ready to implement an EMR
- implement the same EMR application (one or more databases)

Applying as a Community of Practice:

- **Application:** Complete the on-line application for a Community of Practice You will be asked to indicate the total number of doctors in your group and of these, how many are committed to implement within the next enrollment period.
- **Validation:** Your Local Relationship Manager will contact you to complete your application which will include details on the plans and readiness of each of your group's physicians to implement as part of the group
- **Selection Process:** Your application will be assigned points based on its total size and the number of physicians who will be implementing within the next enrollment period.. Should the number of COP applications exceed the 50% of spots we have reserved for the current enrollment period; your application will be rolled into the standard selection process.
- **Enrollment:** If you are selected, your Local Relationship Manager will begin working with your group at the same time as others in that enrollment period although the services we provide will be tailored for larger groups

Top 10 benefits of Forming or Joining a Community of Practice

This table outlines the potential benefits of using a common EMR product across a community. These benefits support the communication goals for speciality groups and emerging regional health networks. They are listed to highlight the possibilities; your group’s needs and goals may be different or consist of a sub-set of these.

Opportunities your community can explore:

<i>Improved Patient Care</i>	<i>Example</i>
1. Patient Information is available at the right time by the right person	<p><i>With common practice to practice information formats, opportunities to improve primary to secondary care communications</i></p> <hr/> <p><i>Improved capability for information to follow the patient between practices</i></p>
2. Enhanced Chronic Disease Management and Health Prevention	<p><i>Care Plans shared across multi-disciplinary teams and services. Information can “follow” the patient allowing real time updates and information access.</i></p> <hr/> <p><i>Support for physicians collaborating on quality improvement activities, comparing their clinical guideline indicators with their peers across the community and setting measurable targets</i></p>
3. Research Opportunities	<p><i>Easier to conduct research, allowing the comparison of patient conditions and treatments within and across specialties in accordance with privacy and data protection policies and principles</i></p>
4. Flexible Practice Options	<p><i>A patient can visit an affiliated after-hours clinic and open access to their chart so it can be available and updated</i></p> <hr/> <p><i>Increased cross-coverage options as a physician can take a leave and direct routine and urgent patients to another physician who will have access to the charts</i></p> <hr/> <p><i>Form a wider call group network using the EMR to schedule and provide chart access</i></p>
5. Optimized Processes	<p><i>Booking/Intake could be co-ordinated across practices</i></p> <hr/> <p><i>Opportunity to streamline billing processes</i></p>
6. Protect patient safety and improve service levels	<p><i>Enhanced access to critical patient information to support decision making</i></p>

<i>Improved use of EMR</i>	<i>Example</i>
7. Increased Practice Collaboration	<p>More effective collaboration with colleagues on optimizing the use of the EMR</p> <hr/> <p>“Going down the same road” together will allow for increased personal interactions with your peers and cultivate a collaborative culture</p> <hr/> <p>Reduce EMR implementation costs and allow physicians and staff to support one another through peer to peer training and support</p>
8. Resourcing	<p>Easier to find staff who are familiar with the system, allowing for flexibility in filling positions when someone is on leave or sick</p> <hr/> <p>Attract and retain physicians and new graduates who are seeking practices to join</p> <hr/> <p>Identify locums to cover practices (particularly in primary care). Locums can be on a specific EMR system and easily move between practices</p>
9. Economies of Scale	<p>Working as a community of practice will allow groups to establish more efficient support e.g. through a dedicated person in a community.</p> <hr/> <p>Ability to work with regional systems (e.g. health authorities) on lab interfaces and other data that can be shared with the EMR</p> <hr/> <p>Ability to dedicate a specific person or team of people to assist the community of practice with the selection of an EMR and the co-ordination of the implementation process.</p>

<i>Improved Vendor Relations</i>	<i>Example</i>
10. Vendor Support and Partnership	<p>A larger group using the same system will have more influence in coordinating and formalizing communications with a vendor to optimize program feature requests , training and user group meetings</p>

Note that the attainment of several of these goals is dependent on EMR functionality which may vary by vendor. Please contact the vendors directly to assess how their functionality and services can support your business goals.

FAQ's

How will PITO help our group?

We will provide support and guidance to your group from the beginning when you are setting up your communication plan through to completing your implementation. In many cases, we will be assigning a dedicated Project Manager to your group so you can focus on maintaining your clinical practice and the aspects of your EMR project which most need your attention.

Can I join an existing Community of Practice?

Yes, if you plan on joining an existing COP, we would incorporate your clinic into the groups Implementation Plan. If you decide to join after the application period deadline for the next enrollment period, you will need to wait for the next call for applications, at which point you would secure one of the reserved COP spots.

How are our privacy responsibilities affected by a Community of Practice model?

There are numerous ways to configure an EMR to ensure that the patient benefits from each provider and staff member having timely access to information while also protecting the patient's privacy.

We will help you to define an approach that adheres to Privacy legislation and fits with your business needs, the requirements of the College, and the expectations of your patients.

How does the EMR get set up from a technical perspective – will we all be sharing one database?

How you configure the EMR and the database will depend on your business needs and the recommendations of your vendor. In fact, it doesn't really matter if you use one database or one for each practice providing you have access to the information you need.

Forming a Community of Practice doesn't necessitate that your group has to share data, although using the same EMR opens up the opportunity to do so where patient care can be improved without comprising patient privacy.

Dr. Alan Brookstone (*Physician Lead for Vancouver Coastal Health Physician User Group Strategy*)

“Adopting an EMR in your practice is an important decision that should be made with great care and attention. Physicians do not work in an isolated environment and need to be able to share information between specialist and GP and other providers. Since being established in 2005, Physician User Groups have allowed physicians within Vancouver Coastal Health (Richmond, North Shore, Sea-to-Sky, Vancouver, Providence Health Care) to develop an understanding of the changes taking place in the health care system from a practice change and information technology perspective. Physicians have developed a support network in which leaders in each community were able to communicate with peers using e-mail and could ensure that the information was appropriate and relevant to their community. As communities of practice evolve over time, they will become more mature structures that ultimately will form the foundation for EMR user groups. These will allow physicians and their staff to focus less on the technology and more on how to use these tools to enhance communication and improve patient care.”

For more information on the Community of Practice Program please contact Nick Baldwin at the PITO office:

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