

The Sunshine Coast Data Integration Project - Executive Summary

Context for the Data Integration Project

The Sunshine Coast Community has 38 family physicians across five medical clinics. Similar to other rural communities, physicians practice both in clinics and hospitals, but lack access to their patients' full medical records from both settings. The lack of timely access to patients' full medical records hinders health providers' ability to collaborate and provide continuity of care, and creates undue administrative burden.

About the Data Integration Project

The Sunshine Coast Community Data Integration Project supports information continuity in healthcare settings by creating one community chart per primary care patient. The purpose of the funded project was to merge five clinics' Med Access Electronic Medical Record (EMR) databases and provide physicians with access to a single medical record for each of their patients regardless of their care setting – whether in walk-in clinics, at the hospital, or in community family practices.

The project was led by a committee of five family physicians from the 38 physicians working on the Sunshine Coast. Through collaboration with Divisions, an integrated EMR would enable physicians to access their patients' information regardless of location, creating one community chart per primary care patient to support continuity of care.

Project Phases

Physicians explored different options for data integration before selecting the option of a full data merger to create a single medical file for each patient, accessible by participating physicians and team members in the community, across different practice settings. Due to multiple factors, the project work paused prior to the testing phase. This project uncovered the typical phases of a data migration project, and contributed to the development of [The DTO's Health Technology Guide: How to Prepare for an EMR Data Migration](#).

Phase 1	1. Pre-Implementation <ul style="list-style-type: none">a. Initiationb. Physician Engagementc. Planningd. Vendor Engagement	Complete
Phase 2	2. Testing <ul style="list-style-type: none">a. Creation of Test Environmentb. Testing & Revisions	Incomplete
Phase 3	3. Data Migration <ul style="list-style-type: none">a. Implementationb. Maintenance	Incomplete

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Key Lessons on Data Integration

Enablers

- Large-scale, community level data integration projects are enabled by the presence of **passionate and tech-savvy physician champions** within the Division. They facilitate ongoing communication with fellow physicians and sustain momentum to move the project forward.
- **Technical support** is essential to data integration work, both from:
 - Experts at the Doctors Technology Office who can translate clinical needs into technical language for EMR vendors; and,
 - Medical office assistants and physicians who are experts in their clinic's EMR processes who can help participating clinics agree on standard EMR coding procedures.
- A thriving and engaged **family physician community** helped advance this project.

Barriers

- Many physicians had **concerns about data loss and impacts to workflow** as a result of data integration.
- **Expectations for roles and support differed** between Divisions, the DTO, and Telus.
- The **lack of a defined timeline and project phases** made embarking on data integration work unclear.
- Despite all using the same EMR platform, **variations in clinic workflows** required extra discussion and negotiation in the data integration process.
- **Limited availability for meetings** among physicians with busy, multi-site was a challenge.
- Technical projects often uncover **complex problems that require time to fix** – this was part of the reason the data integration project paused in the Sunshine Coast.

Recommendations

- **Outlining the project phases** for data integration work can help set expectations and define what is required before each subsequent phase can begin.
- **Define a shared project agenda and expectations early on**, including:
 - **Goals:** what do you need and desire from the data integration process?
 - **Assumptions and fears:** what are some of your assumptions, concerns, or hesitations regarding data integration? What is the worst-case scenario outcome?
 - **Resources & capacity:** what resources does each party have to contribute to the project? What internal constraints to capacity exist?
 - **Roles and responsibilities:** what roles and responsibilities are you able to commit to, contribute to, and support over time?
- **Prepare to provide technical support** for data integration work, both between clinics, as well as between clinic staff and the EMR vendor(s). Clinics also require support for data privacy considerations.
- Those with a **system change or provincial coordination role** should consider and determine:
 - Their role in advocating and working with EMR vendors to support data integration projects;
 - How to support and coordinate multiple Divisions undertaking local or regional data integration projects; and,
 - How to support panel cleanup and EMR integration as a pathway to more proactive care, team-based care, and regional health system coordination and planning.