



EHRs: Current Debates and Future Considerations

Prairie Health Information Privacy Day 2007
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...a shared
responsibility
for health care

Background - Saskatchewan

- **Canada Health Infoway Initiatives**
 - Registries – 2/3 (Client, Provider)
 - Systems – 3/3 (Pharmacy, Lab, Diagnostic Imaging)
 - Interoperable EHR
 - Telehealth
 - Numerous Standards Groups
- **Provincial EHR-like Projects / Programs**
 - Numerous

Background - Saskatchewan

- **The Health Information Protection Act (HIPA)**
 - 2003
 - Defines “comprehensive health record” Section 18
 - Contains personal health information provided by 2 or more trustees
 - For the purpose of compiling a complete and accessible health history of the individual to any trustee
 - Managed by SHIN or prescribed creator
 - Prescribes provisions required by SHIN in order to grant access by trustees
 - No Regulations providing guidance or prescribing how the provisions in the statute are carried out

Challenges - HIPA

- **Comprehensive Health Record**
 - When does this “kick in”?
 - Who is setting the criteria?
 - How will this be tested?
 - How can it be challenged?

Challenges - EHR

- **iEHR Context**
 - Complex based on stakeholder expectations of relationships
 - Patients – Health Care Provider
 - Health Care Provider - Trustees
 - Trustees – Information Service Providers
 - Health Care Providers – Professional / Regulatory Associations
 - Public – Federal / Provincial / Territorial Governments?
- **Infoway's Privacy and Conceptual Architecture**
 - Assumptions (governance and consent provisions)
- **“Deemed Consent” Model**
 - Publicly challenged Saskatchewan's “deemed consent” model

Challenges – EHR Accountability

- **Opportunity afforded by technology to gather, link and disclose large amounts of patient information**
 - Facilitate secondary use of patient data
 - Accumulate valuable data which will create new demands for access
 - Link previous unlinked data using unique identifiers, and
 - Create a large pool of data ideal for use in medical research and health system management
- **Identity theft**
- **Re-identification**

Challenges – EHR initiatives

- **Project reconciliation**

- EHR development at different stages across Canada
- EHR development at different stages within Saskatchewan
- iEHR recently launched
- Consent Management
- How will existing projects at more advanced stages be able to retrofit requirements that flow from iEHR evolution?

Challenges – Pendulum

- **Health Care Providers versus Privacy**

- Managing consent through solutions like masking may affect providing safe care to patients
- Concerns for balancing the right of the client to manage information with the needs of the provider to provide safe health care
- Perception that there will be a misuse of information - health care providers are controlled by their self regulated professions
- Some clinicians may choose not to provide care because of their personal lack of safety (e.g. liability)
- What percentage of events managed every day lead to a privacy breach?

Challenges – HIPA

- **Limiting Collection**

- Determination of what elements should be considered for inclusion

- **Consent**

- Originally HIPA gave individual the right to direct a trustee not to store their information on SHIN
- Amended to include a lock box that applies only in the context of the “comprehensive health record”
 - Written direction required
- Reconciling legislative differences between the provinces as we move towards a pan-Canadian EHR

Challenges - HIPA

- **Limitation on Use, Disclosure and Retention**
 - An individual's EHR may consist of 100's of individual data fields
 - Does EHR have capability to disclose on a field-by-field basis?
 - Pending retention schedules
 - Pending regulations on disclosure (e.g. police, fund raising organizations)

Challenges - Scan

- **Technology**
 - Requirements definition; change management; data flows; automation; sustaining; effective; integration; acceptance ...
- **Law**
 - Authoritative provisions; professional liability; precedents ...
- **Policy**
- **Procedural**
- **Privacy**

Expectations – EHR

- **Advisory Council on Health Infostructure Goals (1999)**
 - Empowering the general public
 - Strengthening and integrating health care services
 - Creating the information resources for accountability and continuous feedback on factors affecting the health of Canadians, and
 - Improving privacy protection within the health sector
- **Public promotion**
- **Reports and Commissions**

Expectations - HIPA

- **Individual Rights**

- To consent; to revoke consent; to be informed; to information about disclosures without consent; to access; to request amendment; to review or appeal; to designate ...

- **Comprehensive Health Record**

- Right to prevent access to comprehensive health record of that individual's personal health information
- May require that the record not be disclosed to trustees

Expectations - Scan

- **Individual**
 - Only required and accurate information to appropriate health care provide at appropriate time and place
 - More efficient and effective use of information
 - Autonomy and control
 - Best possible health care
 - Accountable
- **Trustees / Custodian**
 - Direction / legislation / expectations
 - Leadership
 - Public support
 - Uptake

Thank You!

Questions?

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