



# MDERA

Medical Doctors' Electronic Records Association of Southern Alberta

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**Date: March 26, 2007**

**To: CHR Site Chiefs and Division Heads**

**Re: MDERA: A Physician Led Electronic Record Association**

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Electronic medical record systems gain power and efficiency with greater number of users. As online security issues gain prominence, greater attention to robust, secure hosting solutions are needed. Regional health authorities are constantly on the lookout for ways to reduce the costs of maintaining multiple information systems within their jurisdictions. Standard setting bodies must find ways to steer the Canadian health system into more efficient use of standardized processes and nomenclature. For all these reasons a group of 120 members of an academic department of medicine elected to join collectively to purchase an electronic medical record system.

After seeking advice from business analysts, lawyers, and colleagues it was determined that a 'not-for-profit' association, registered under the provincial legislation would be an appropriate way to form an operational collective. As a legal entity, with a standard set of officers (president, vice-president, secretary, treasurer) and a board, the newly formed association (Medical Doctors Electronic Record Association of Southern Alberta - MDERA) has been able to open a bank account, establish a contract with an EMR vendor, develop a Data Sharing Agreement with the regional health authority, and provide information management services to its members.

MDERA is now in its 3rd quarter of operation and has made substantial progress in the implementation of its EMR within the secure environment of the regional health authority. Large scale purchasing efficiency has been gained. Generalized approaches to training and support have been undertaken. Standardized methods of receiving lab reports, transcribed letters, and updated unique regional health numbers have all been coordinated through one body. At the same time, respect for the custodial responsibility of the physician's medical record, and the trusted relationship with patients, has been maintained through the Data Sharing Agreement.

Challenges remain. Conversion of 120 physician chart rooms to an electronic environment is a significant hurdle to overcome. Ongoing transformation of paper flow to electronic data requires new approaches and hardware within the organization. Managing the roles and scope of practice of multiple professions requires further refinement. Harmonizing our processes with the provincial Health Information Act, the Medical Staff Bylaws, and the regulations of the Office of the Privacy Commissioner (OIPC) requires that we maintain a very active Privacy Office. New ways of doing business, such as receiving referrals, sending dictated letters, reporting billing activities, communicating with third parties, and planning for future developments require innovative approaches and better understanding of the electronic environment.

Nevertheless, the efforts to date have been very rewarding. The benefits of forming a collective association have proven to outweigh the alternative of multiple diverse groups attempting to reinvent several different wheels. We now see a much more sustainable electronic future, and have sufficient strength in numbers to warrant attention from our significant others. Physician leadership creates a closer tie to our goals of trusted patient care, and greater capability to work and communicate with our colleagues.

Dr. Steven Edworthy  
President, MDERA