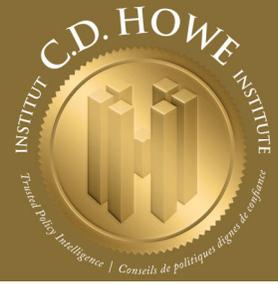


Intelligence MEMOS



From: Will Falk

To: Canadian Ministers of Health

Date: January 17, 2022

Re: **DIGITAL HEALTH TOOLS MUST REMAIN A CORE PART OF CANADA'S POST-PANDEMIC HEALTH CARE DELIVERY SYSTEM**

Paper health care records have been a danger to both patients and providers during the COVID-19 pandemic. I have been able to get my 85-year old mother's banking and bills online to keep things up to date. I could even do her taxes and basic government functions online. I should have been able to help manage her health care information too. But I couldn't.

This story of failure became clear to me as our team interviewed over a hundred people for my June 2021 report for Health Canada, [*The State of Virtual Care in Canada as of Wave Three of the COVID-19 Pandemic: An Early Diagnostic and Policy Recommendations*](#). Two key deficits in our health-care system became evident when social distancing necessitated virtual care nearly overnight for the sake of infection control: information system availability and the robustness of our backup remote systems.

These deficits did not lead to failure in many other industries. Banking and telecoms moved relatively smoothly to backup systems. Many employees worked from home and those systems stayed functional.

But our digital health care systems struggled and, in some cases, failed entirely. Doctors couldn't access patient records, some systems were only available in facilities that were themselves not physically accessible, large data systems didn't work, telemedicine networks didn't scale. The health-care system itself hadn't adequately planned for a pandemic!

This broken system must end now. Our report calls for regulatory changes that would force several key systems to be available digitally by April 1, 2023. We can start with three: labs, drugs, and patient record summaries.

Prescriptions are routinely done electronically in most developed nations. Not yet in Canada. Infoway's PrescribeIT system is now available in five provinces covering more than half of the population and it will soon be available in other provinces to service 80 per cent of Canadians. April 2023 is a reasonable date for a formal cutover to digital prescriptions. For opioid prescribing this should already be the norm; opioids should only be prescribed digitally, and the federal government can and should step in to make this a reality in early 2022. By 2023, all prescriptions should be only created digitally in Canada.

Most major lab companies are ready to shift to digital ordering and result reporting. Many have already done so for COVID-19 testing. Leaders welcomed the change; laggards will fall into line. Allowing labs to function only on paper is imprudent and puts patients at risk. By 2023, all labs tests should be ordered and results made available digitally; patients should have access to their own results online.

Availability of patient record summaries is now the norm in the US and elsewhere. Most existing record vendors can create these digital summaries now, but almost none do so in Canada for a reasonable price. In the third decade of the 21st century, this isn't good enough and puts patients and their care providers at risk. Health Canada should position this as a basic right for all Canadian residents as part of Medicare's promise of access. We should be able to access a usable digital summary of our own record and of our family member's record if they wish by 2023.

There will be noise and pushback.

There will be apologists who say this can't be done by April 1, 2023. I am sympathetic because I understand how stretched health system resources are at the moment. But I am also mindful that we have discussed this now for 20 years and paid for its development several times. The lack of these systems is harming patients and providers. It is time to set a definitive date for each of these system changes across Canada.

To ease the transition, we could use QR codes as an interim way of printing information that can be read by digital systems. COVID-19 has made QR readers ubiquitous. They're in hospitals, gyms, and restaurants. All record systems can produce QR codes when printing prescriptions lab orders and results. This transition technology allows a stopgap while insisting on the basic principle of digital access to information. This is important to create a tipping point effect and accelerate the development of an environment in which many other types of health information are securely moved among providers and patients.

Health care needs to modernize now. Regulators need to step up. It is a question of patient safety.

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