The Personal Health Records in the Rural Context

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November 20th, 2025

Learning Objectives

- Identify the key components and functionalities of a good personal health record (PHR)

- Demonstrate how patients and their families / caregivers, providers and the health system can benefit from PHRs

- Examine how the amplification of health care challenges in rural settings helps to identify priorities for development and implementation of system capabilities for the benefit of all

Disclosures

- I am a consultant to government and non-profit organizations including the RCCbc and DoFPs on matters relating to primary care and health information standards

- I have no financial or other relationship with for profit companies including the pharmaceutical industry

Personal / Patient Health Record (PHR)

- Is it just a record?
  - Providers already have a record; do we need another?
  - Why can't patients just use portals?
- Is it just for patients?
  - How will they understand or not be alarmed at what they are seeing?
  - Are patients at increased risk for suicide?
  - How much extra work will this require for providers?
  - Will providers get any benefit such as getting access to the patient's record when needed?
  - Will there be more lawsuits?
- Does this just add cost to the already overburdened health system?
  - Who's going to pay for the patient version? I'm even paying for each SMS from my EMR to patients!
  - What is the benefit for the health system?

# The Answers to These Questions and More Lie in the Big Picture

- What are the patient requirements for health and wellness?

- What needs are currently not being met for patients and their families, providers and the health system?

- The rural setting amplifies many health care challenges – can that amplification put a spotlight on opportunities for better care for those "on the edge" while also helping everyone?

History

- Boston Children's Hospital, **Indivo** 1999 (formerly PING - Personal Internetworked Notary and Guardian) which continues as MyChildren's portal. Open Source and designed to integrate records across digitally accessible digital health solutions / databases. Supports messaging but appointment scheduling can only be done with 3rd party API

- Beth Israel Deaconess Medical Center, **PatientSite** 1999

- Microsoft **Health Vault,** 2007 – 2019. Was the backbone of the US Blue Button initiative

- **Google Health,** 2008 – 2012

- **OpenNotes,** 2010

- **Apple HealthKit**, 2014

Scope of Function - What Are The High-Level Competencies For Persons & Their Families In Health Care?

- Plan and manage my health
  - Maintain or improve wellness
  - Manage chronic conditions
  - Understand my risks
- Interact / participate with my health team
- Manage my health information
- Find health care resources and services
- Get access to care
- Improve my health and IT knowledge (health and technology literacy)
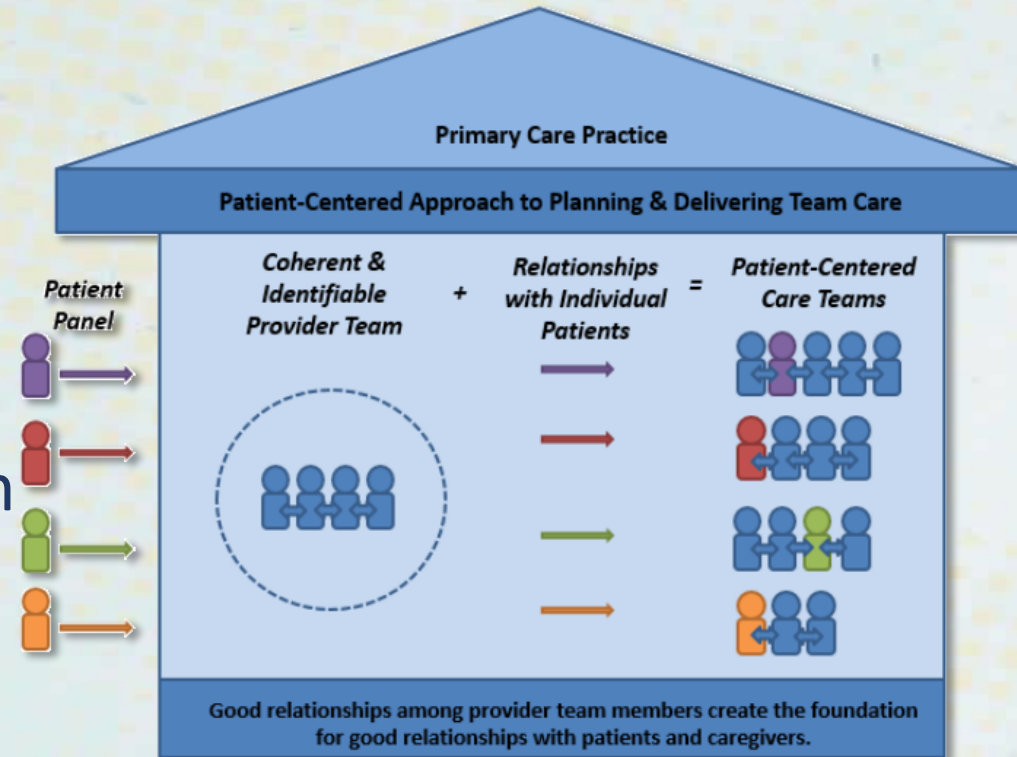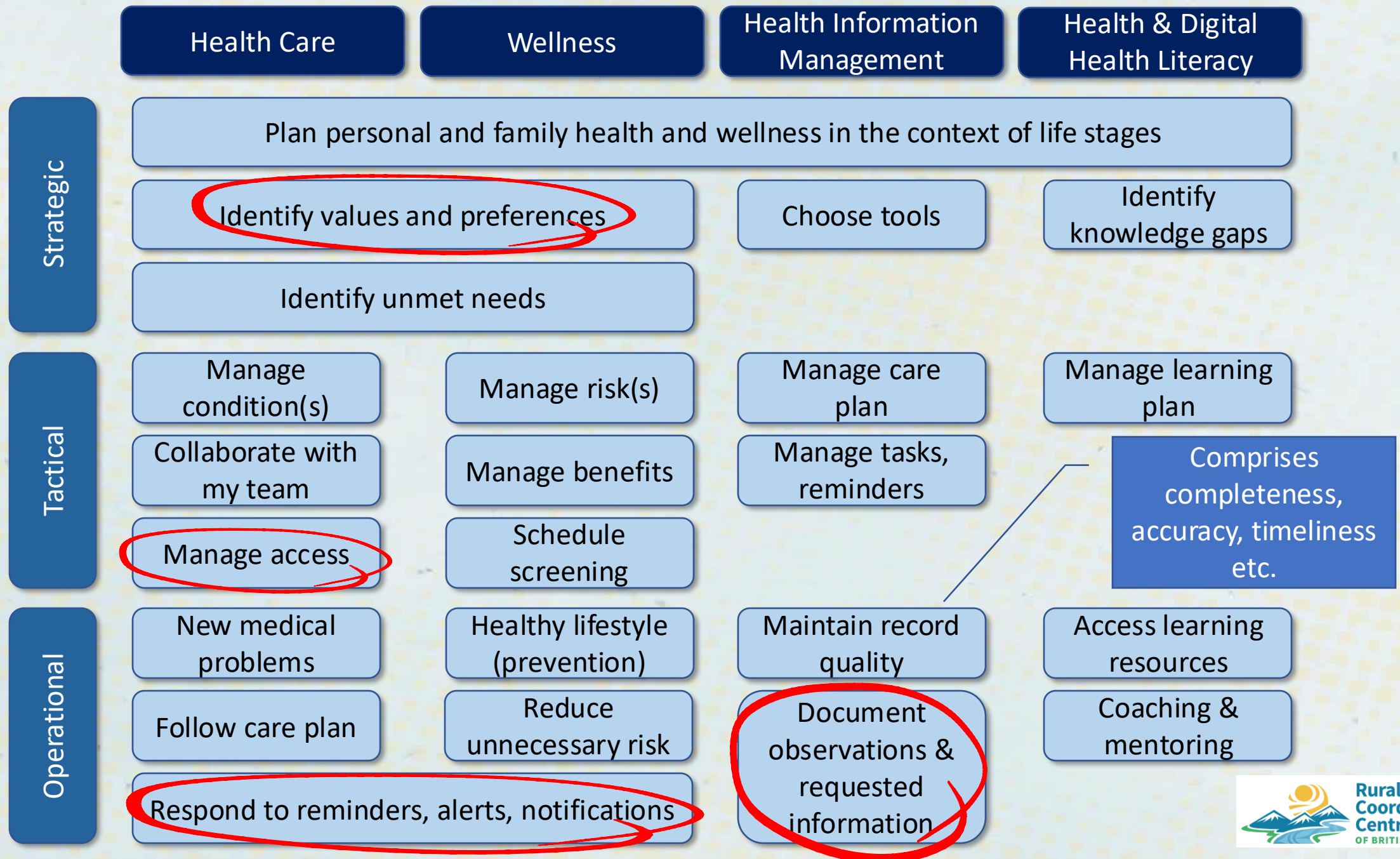
Challenges

- Patients are unable to interact with a **complete version** of their electronic health records
- **Providers bear the burden** of record accuracy, often manually sharing /re-entering information
- The **rural health care journey is complex** with disconnected information and barriers to interaction

I need a DIGITAL tool that gathers my information from multiple places and puts it in ONE place – for the people I choose to share it with, and ME

Portal

I need tools to help me interpret my results and health information
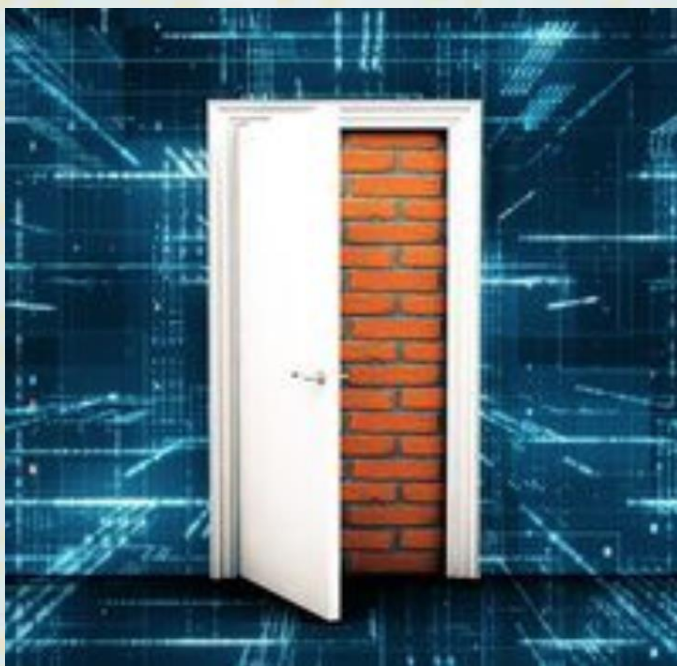
I need a DIGITAL TOOL to safely navigate my care

Sometimes trying to manage everything gets overwhelming, and I need help.

It should be easy to share information with people who help with my care.

Rural Coordination Centre OF BRITISH COLUMBIA

Avoid the "Digital Front Door to Nowhere" and Fragmentation ("polyportalitis")
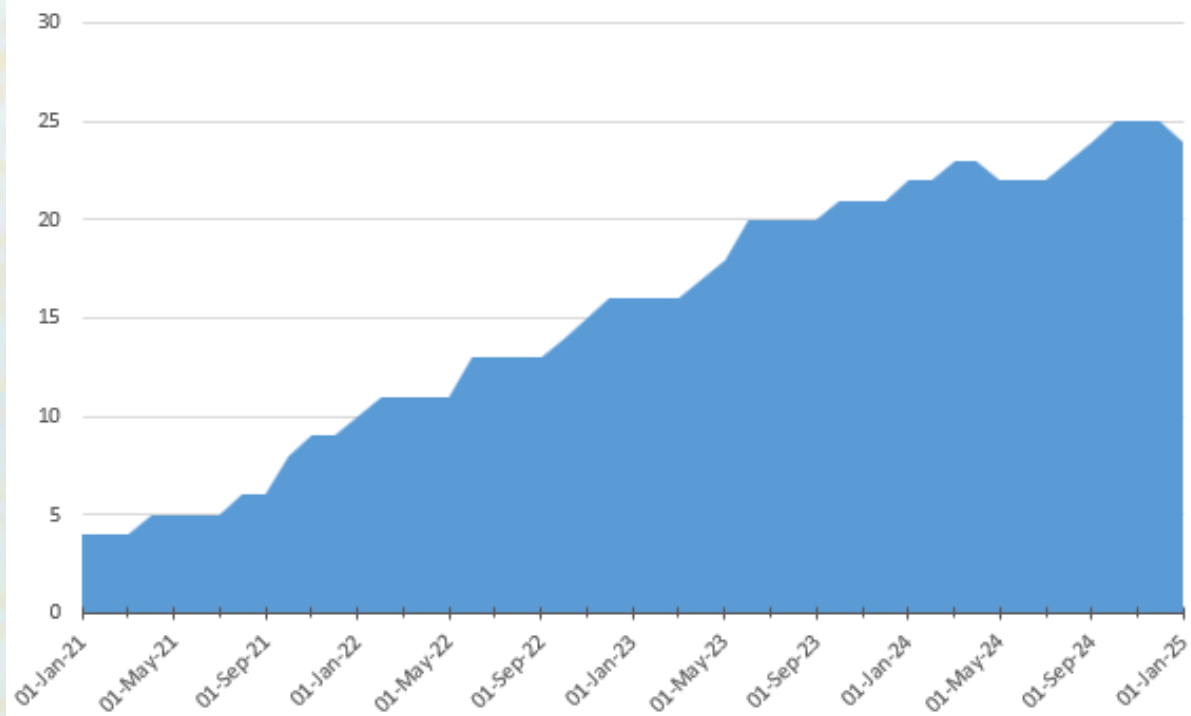

From - Princeville Global
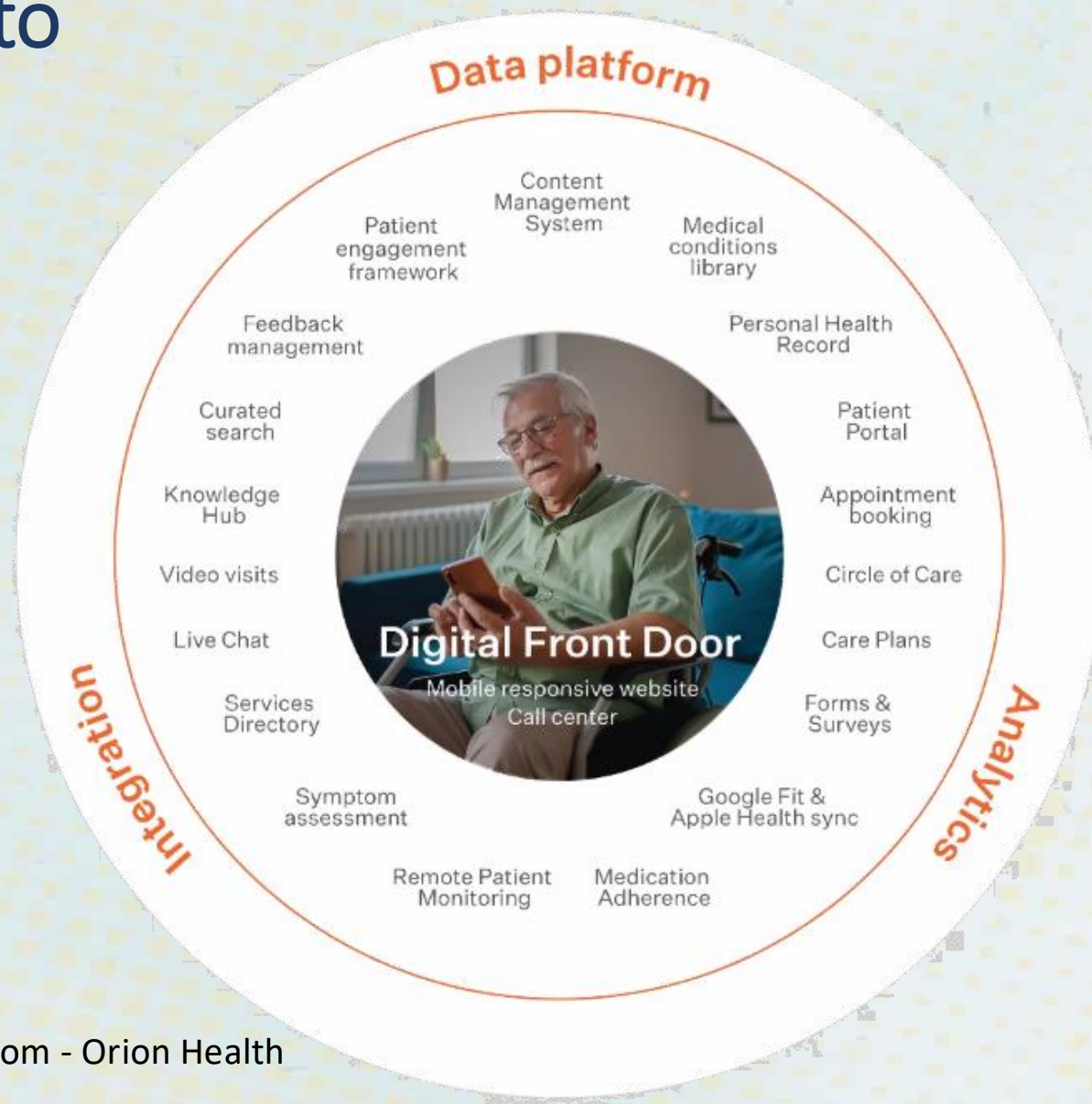
From - Orion Health

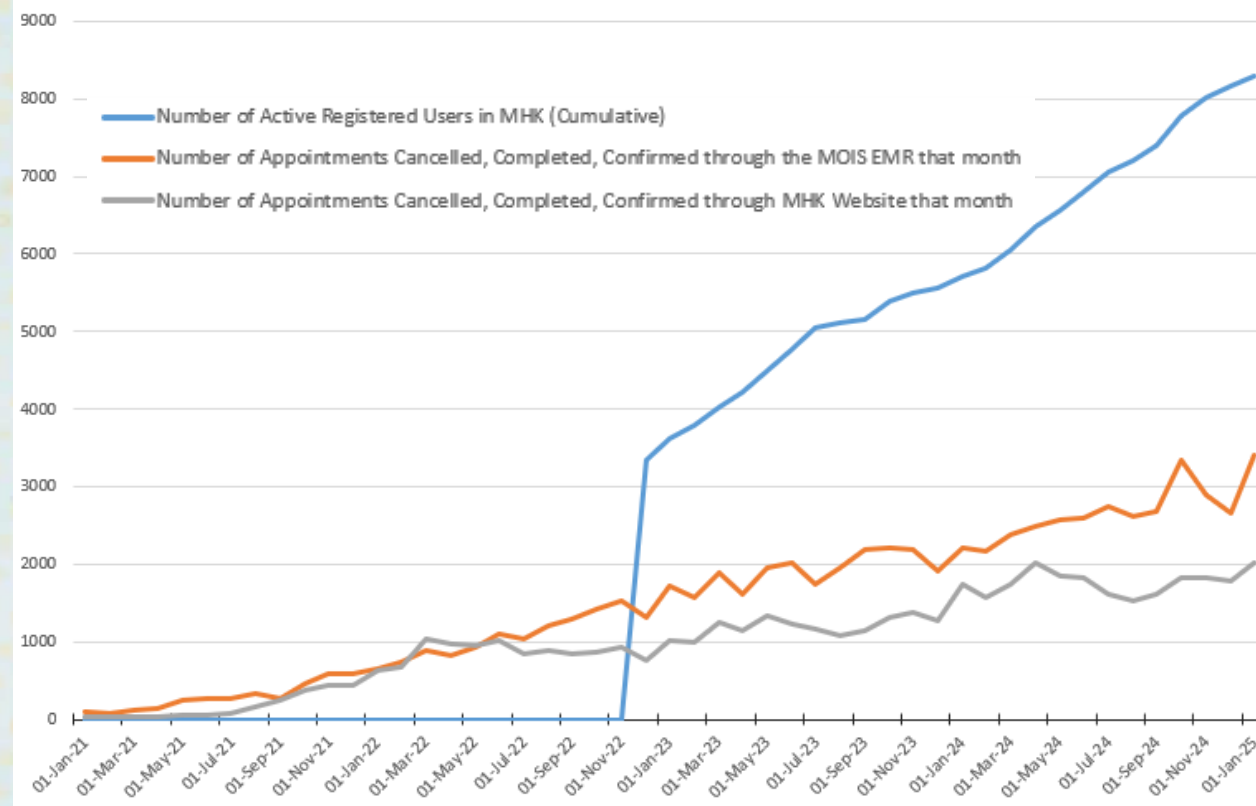# The rPHR Project: Engaging Patients, Providers & Vendors to Prototype or Adjust Development Priorities

- 2 vendors and 3 geographic areas initially interested in participating in the rPHR project

- Ultimately only one vendor (Bright Health Solutions Society) with a PHR product (MyHealthKey) already oriented to standards continued to participate. Pre-existing direct receipt of laboratory and medical imaging results into PHR, rudimentary messaging and scheduling

Number of MOIS Clinics using MHK

Office and Patient Appointment Making
and Registered MHK User Count

Number of Active Registered Users in MHK (Cumulative)
Number of Appointments Cancelled, Completed, Confirmed through the MOIS EMR that month
Number of Appointments Cancelled, Completed, Confirmed through MHK Website that month

Rural
Coordination
Centre
OF BRITISH COLUMBIA

Measurements

Select Date Range:

| YYYY-MM-DD - YYYY-MM-DD | Show All |

Show [10 ▾] entries

[PDF] [Print] [CSV]

Search: [   ]

Collection Date ▾ ⇅	Test Name ▾ ⇅	Result	Flag	Reference Range	ⓘ Test Information	View Report
2022-02-07 09:04:00 AM	CO2	22		22-29	Learn more about CO2	View
2016-12-26 09:04:00 AM	Potassium Lvl	4.0		3.5-5.1	Learn more about Potassium Lvl	View
2016-12-22 09:04:00 AM	Sodium Lvl	138		136-145	Learn more about Sodium Lvl	View
2016-12-22 09:04:00 AM	Chloride Lvl	100		98-107	Learn more about Chloride Lvl	View
2016-12-22 09:04:00 AM	AGAP	20		10-20	Learn more about AGAP	View

- **Dashboard**
- **Khyati Naik** >
- **Clinical Records** >
- **My Subscriptions**
- **My Services**
- **My Messages**
- **My Results** >
- **Appointments** >
- **Logout**

«

✖ Close

What is a Blood Glucose Test?

A blood glucose test measures the glucose levels in your blood. Glucose is a type of sugar. It is your body's main source of energy. A hormone called insulin helps move glucose from your bloodstream into your cells.

Too much or too little glucose in the blood can be a sign of a serious medical condition. High blood glucose levels (hyperglycemia) may be a sign of diabetes, a disorder that can cause serious, long-term health conditions.

High blood sugar may also be caused by other conditions that can affect insulin or glucose levels in your blood, such as problems with your pancreas or adrenal glands.

Low blood glucose levels (hypoglycemia) are common among people with type 1 diabetes and people with type 2 diabetes who take certain diabetes medicines. Certain conditions, such as liver disease, may cause low levels of blood glucose in people without diabetes, but this is uncommon. Without treatment, severe low blood sugar can lead to major health problems, including seizures and brain damage.

Other names: blood sugar, self-monitoring of blood glucose (SMBG), fasting plasma glucose (FPG), fasting blood sugar (FBS), fasting blood glucose (FBG), random blood sugar, glucose challenge test, oral glucose tolerance test (OGTT)

What is it used for?

A blood glucose test is used to find out if your blood sugar levels are in a healthy range. It is often used to help diagnose and monitor diabetes.
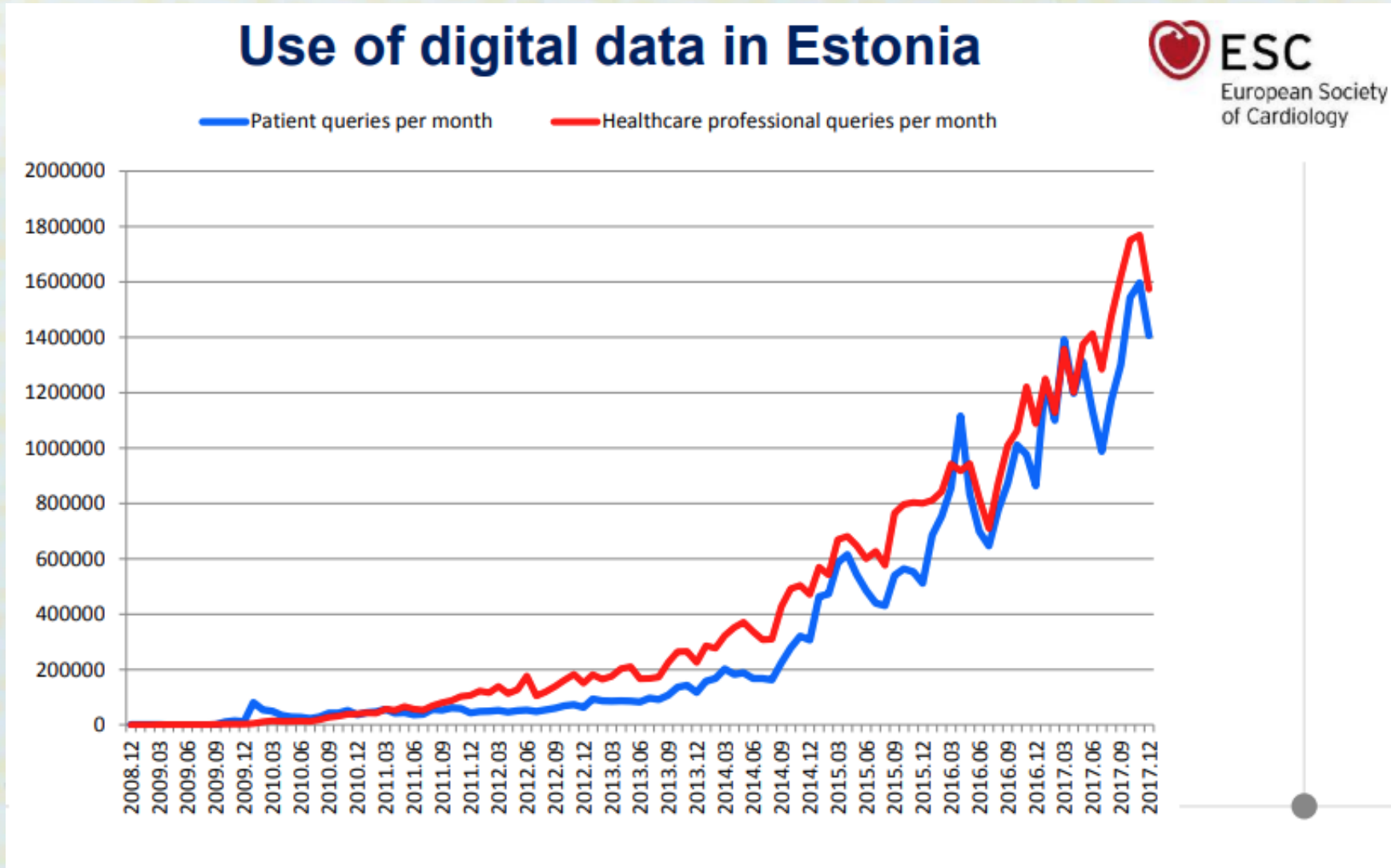
Why do I need a blood glucose test?

Your health care provider may order a blood glucose test if you have symptoms of high glucose levels or low glucose levels.

Symptoms of high blood glucose levels include:

Increased thirst and urination (peeing)
Blurred vision
Fatigue
Sores that don't heal
Weight loss when you're not trying to lose weight
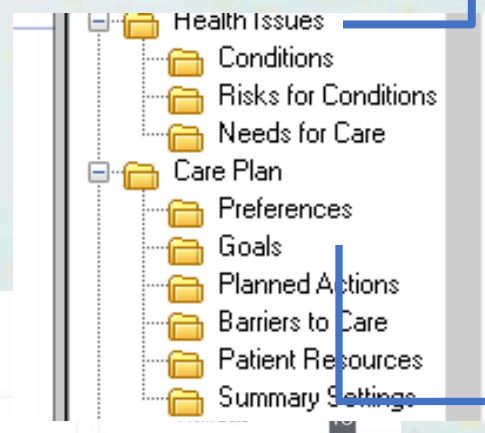Numbness or tingling in your feet or hands

? Need Help   **⚲ Resources**

Estonia – Patient and Provider Queries Approximately Equal

Use of digital data in Estonia

— Patient queries per month — Healthcare professional queries per month

- Supports self-added data
- Patients can track and control who accesses their record
- Patients can manage and request rectification of errors and omissions
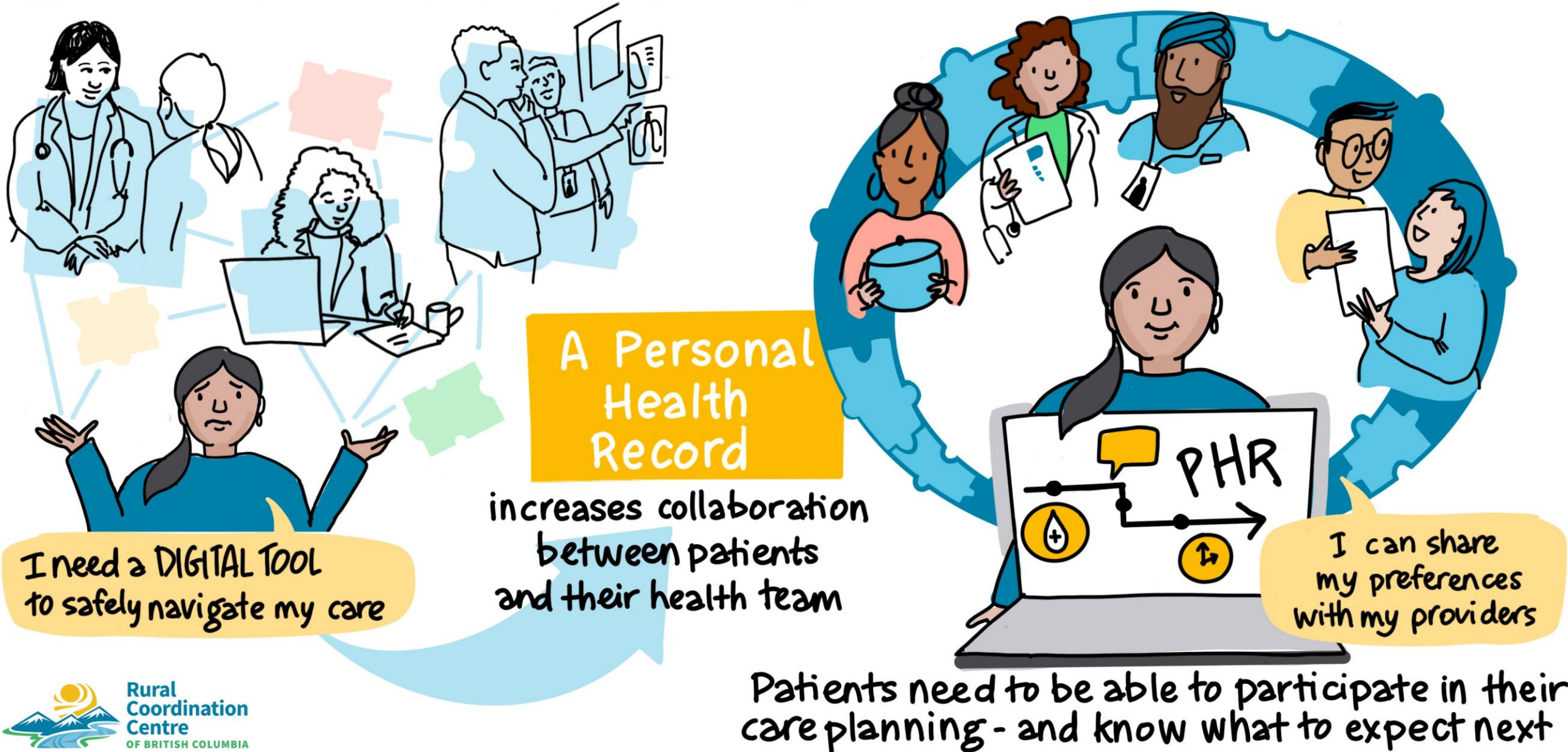
M. Viigimaa, European Society of Cardiology, 2019

International Patient Summary with Care Plan Shared with Patients

Patient Summary — INA MURPHY 77 YR OLD F   Chart 10004

New Chart | Delete Chart | Save | Undo | Refresh | Search | Previous Chart | Next Chart | Tear Off

Chart No.: 10004 ... Status: A Date: 2014.02.20   Insurance By: BC   Service Provider:
Name (F/M/L): INA   MARIE   MURPHY   Insurance No.:   Dep: 00
Birth Date: 1947.08.22   Gender: F ...   BC Health No.:

Expand All   Collapse All   In the last 60 days   Since Last   Required in the next 90 days

Date	Description	Detail	Hyperlink
CONNECTIONS [2]			
	Primary Provider	Clifford, William Lepoer Trench	
	Health Care Team	Maples Personal Care Home	
ASSOCIATED PARTIES [3]			
	Next of Kin [DAUGHTER] Contact Numbers:	Marie Smith	
	Substitute Decision Maker [DAUGHTER] Contact Numbers:	Marie Smith	
	Power of Attorney [SON] Contact Numbers:	Robert Murphy	
HEALTH ISSUES [4]			
2014.03.01	ESSENTIAL HYPERTENSION	Certainty: Confirmed - Severity: Mild	
2025.03.01	SUSPECTED ENDOMETRIAL CANCER	Certainty: Tentative	
2025.03.12	THERAPEUTIC OPIOID INDUCED CONSTIPATION	Certainty: Confirmed - Severity: Moderate	
2012.01.01	TYPE 2 DIABETES MELLITUS	Certainty: Confirmed - Severity: Moderate	
REACTION RISKS [1]			
1980.01.01	PENICILLIN	STOP DATE: 2023-12-05	
LONG TERM MEDS [8]			
2015.06.09	CANDESARTAN CILEXETIL 16MG TABLET Indication: 59621000 - ESSENTIAL HYPERTENSION	1 TAB ORAL DAILY	
2020.04.28	GLICLAZIDE 80 MG TABLET Indication: 44054006 - TYPE 2 DIABETES MELLITUS	1 TAB ORAL DAILY	
2025.03.08	FERROUS GLUCONATE 300 MG TABLET Indication: 413533008 - ANEMIA DUE TO CHRONIC BLOOD LOSS	1 TAB ORAL DAILY	
2025.03.10	ACETAMINOPHEN 325 MG TABLET Indication: 213299007 - POSTOPERATIVE PAIN	2 TAB ORAL QID	
2025.03.10	DIMENHYDRINATE 15MG TABLET	1 TAB ORAL TID	
2025.03.10	LACTULOSE 667 MG SOLUTION Indication: 136801000119102 - THERAPEUTIC OPIOID INDUCED CONSTIPATION	30 ML ORAL DAILY	
2025.03.10	POLYETHYLENE GLYCOL 3350 17G POWDER FOR SOLUTION Indication: 136801000119102 - THERAPEUTIC OPIOID INDUCED CONSTIPATION	17 GM ORAL DAILY	
2025.03.10	SENNOSIDE A&B 12 mg [ORAL TABLET] Indication: 136801000119102 - THERAPEUTIC OPIOID INDUCED CONSTIPATION	2 TAB ORAL Q HS	
PROCEDURES [2]			
2025.03.08	TOTAL ABDOMINAL HYSTERECTOMY WITH BILATERAL SALPINGO-OOPHORECTOMY	BROWN, C	
2025.03.03	FIXATION OF INTERTROCHANTERIC FRACTURE OF FEMUR USING JONES, R NAIL		
GOALS [3]			
2025.07.31	HGBA1C < 8 Has been stable for years	On 2025.03.01 value was 7.9	
2025.03.12	NORMALIZE BOWEL MOVEMENTS POST SURGERY		
2025.03.08	CLARIFY DIAGNOSIS OF UTERINE MASS		
MEASUREMENTS [3]			
2025.03.01	CA 125 Flag: H Ref. Range: to	92 U/ml	
2025.03.01	HEMOGLOBIN A1C Flag: H Ref. Range: 4.4 to 6.4	7.9 % RECENT	

Health Issues
- Conditions
- Risks for Conditions
- Needs for Care

Care Plan
- Preferences
- Goals
- Planned Actions
- Barriers to Care
- Patient Resources
- Summary Settings

My Messages

Inbox
Archive

Inbox

Search Message

Sender	Subject	Attachment
BHC Bright Health Clinic	RECENT CARE PLAN	
BHC Bright Health Clinic	SEE REQ	
BHC Bright Health Clinic	SEE NOTE Hello. Please see the attached document as per	

Bright Health

My Messages

Sent

| | Search Message | | From Date | TO | To Date | | Search | | Show All |

Sender ▲	Subject ▲		Attachment	Date/time ▲	Action
DE [No_Reply] Dora Explorer	Appointment: July 8, 2024 9:00 AM Pacific Time kdfkfd kdfkdj dfdfdffffgfgfgfggg			2024-07-05 10:49:06 AM Pacific Time	
DE [No_Reply] Dora Explorer	Demo: compose demo content		📎	2024-07-05 10:46:11 AM Pacific Time	
DE [No_Reply] Dora Explorer	Appointment: July 8, 2024 9:00 AM Pacific Time testing message from appointment				
DE [No_Reply] Dora Explorer	test compose subject test compose content				
DE [No_Reply] Dora Explorer	compose subject compose content				

Previous 1 2

Folders

- ✏️ Compose
- 📥 Inbox
- ✉️ Sent
- 💾 Draft
- 🗑️ Archive

MOIS: HALLIWELL MEDICAL CLINIC

Record Modules Views Action Utilities Print Maintenance Help

Desktop For: **ADMIN, SYS [DR]**

Data Exchange

MHK Message - Inbox

Refresh Unsubscribe Close Window

- 📁 Manual Entry
  - 📁 Measures
  - 📁 Imaging
  - 📁 Consults
  - 📁 Procedures
  - 📁 Documents
  - 📁 Facility Admissions
  - 📁 Orders
- 📁 Document Center
  - 📁 Inbound Documents
  - 📁 Outbound Documents
- 📁 Attachment Utilities
  - 📁 Scan Files
  - 📁 Attach Files
- 📁 MSP
  - 📁 Prepare Bills
  - 📁 Launch Teleplan
  - 📁 Reconcile Remittance
- 📁 MHK Message Center
  - 📁 Inbox
- 📁 Electronic Interfaces
  - 📁 Send/Receive Data
  - 📁 Lab Results
  - 📁 Inbound Messages

Patient	Subject	Received
BEAR, PAPA	Test Message 1	2024.04.26 10:07 AM
BONITA, JUANITA	Test Message 3	2024.04.26 10:07 AM
PAIN, PETER	Test Message 2	2024.04.26 10:07 AM
PSYCH, THOMAS	Test Message 4	2024.04.26 10:07 AM

- 📋 Patient Chart
- Workspace
- Scheduler
- Billing
- Administration
- Data Exchange
- Reports

Test Message 3

This is a test message for the two way message between MHK and MOIS

Assign To

Find User...

☐ ADMIN, SYS [DR]

☐ ORTH ℹ️ Connection to Patient
Most Recent Encounter

Attachment(s)

MHK Document

Assign to Me   Assign

Bright Health™

Home

Patients ›

Clinic ˅

Admin Users

Manage Clinic

Setting Appointment

Clinic Announcements

Contact Support

User Manual

Manage Announcements

⊕ ADD NEW ANNOUNCEMENT

Heading	Content	Announcement Type	Active	Last Modified (PST)	Last Modified By	has attachment	attachments	Actions
Clinic announcement	testing permission	clinic	False	24/04/2025 12:13:18 PM	knaik+bhadmin@brighthealth.ca	False		Edit Delete
Adding first clinic announcement	first clinic announcement	clinic	False	22/04/2025 2:16:13 PM	knaik+bhadmin@brighthealth.ca	False		Edit Delete

Bright Health

My Messages
Inbox

Search Message	From Date	TO

	Sender ▲	Subject ▲	Attachme
THC	[No Reply] The Healing's Clinic	**Demo: Patient questionnaire** Demo body of patient health questionnaire	
THC	[No Reply] The Healing's Clinic	Testing PQ body of Intial testing of patient questionnaire	
THC	[No Reply] The Healing's Clinic	Testing bundle 1 body of testing bundle 1	

THC

[No Reply] The Healing's Clinic

to Test Explorer

2025-02-14 10:00:00 AM Pacific Time

Demo body of patient health questionnaire

Open Health Questionnaire Form

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myhealthkey

- Dashboard
- Test Explorer
- My Appointments
- My Results
- My Messages
- My Clinical Records
- My Subscriptions
- My Services
- Logout

👍 Health questionnaire data has been submitted successfully!!

Patient Health Questionnaire

1. Over the past 2 weeks, how often have you been bothered by any of the following problems?

	Not at all (0)	Several days (1)	More than half the days (2)	Nearly every day (3)
Little interest or pleasure in doing things	○	✓	○	○
Feeling down, depressed, or hopeless	○	✓	○	○
Trouble falling or staying asleep, or sleeping too much	○	○	✓	○
Feeling tired or having little energy	○	✓	○	○
Poor appetite or overeating	○	○	✓	○
Feeling bad about yourself-or that you are a failure or have let yourself or your family down	○	✓	○	○
Trouble concentrating on things, such as reading the newspaper or watching television	○	✓	○	○
Moving or speaking so slowly that other people could have noticed. Or the opposite – being so fidgety or restless that you were moving around a lot more than usual	○	○	✓	○
Thoughts that you would be better off dead, or of hurting yourself in some way	○	✓	○	○

2. How difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

○ Not difficult at all   ○ Somewhat difficult   ○ Very difficult   ○ Extremely difficult

Total Score: 12

My Messages
My Clinical Records
My Subscriptions
My Services
Logout

Bright Health ✚

Appointment Scheduling Settings

Allow cancellations up to (in hours):

24   ?

Patients can see slot availability for the next _____ days:

2

Exclude non working days

ON   ?

Exclude these days of the week:

☐ Monday   ☐ Tueday   ☐ Wednesday   ☐ Thursday

Patients can only book with:

○ Most Responsible Provider (MRP)

◉ All Providers

○ Connections

Show Visit Reason Free TextBox

ON   ?

Step 3

🕐 Select a Time Slot (All times shown here are in Pacific Time)

🏠 10:00AM

🏠 10:15AM

🏠 10:30AM

🏠 11:00AM

🏠 3:20PM

Step 4

✏️ Please describe the reason for your visit (Optional)

Bright Health ✚

Report

Disclaimer: While every reasonable effort has been made to ensure that all information presented here is accurate and up to date, the information presented here represents data sent by systems that are beyond our control and we make no representation or warranty of the accuracy, reliability, or completeness of the information. All medical information presented should be discussed with your healthcare professional as failure to seek timely advice can have serious ramifications.

IMPORTANT : If this result is not yours, please notify your clinic immediately.

---

northern health
the northern way of caring

Name:	ZZZTEST, TEST
Age:	32 years
Sex:	M
Date of Birth:	1991-05-28
PHN:	9806545268
Patient Phone:	(250)555-1234

Sending Facility:	Pr George RH
MRN#:	11122222

Lab

LDL,Chol,Trig,HDL

Collection Date/Time: 2018-04-26 09:38:00	Reported Date: 2018-04-26 02:53:25	Specimen: Blood
Ordered By: Dora Explorer	Accession #: 11-18-116-0332	Report Status F

Test	Flag	Result	Reference Range - Units
Chol		6.02	mmol/L
Trig		1.11	mmol/L
HDL		2.07	mmol/L
LDL		3.45	mmol/L
HDL Ratio		2.9	

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Report

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IMPORTANT : If thi

Report

⟱ Download   **🖶 Print**   **⑦ Notice Something Wrong**   **✖ Close**

nor

Lab

You have chosen to report this as an incorrect result. Please choose from one of the options below:

It has my name on it but I don't recognize the report ▾

Cancel   **Submit**

LDL,Chol,Tr

Collection

Ordered B

Test

Chol

Trig	1.11	mmol/L
HDL	2.07	mmol/L
LDL	3.45	mmol/L
HDL Ratio	2.9	

Disclaimer: While every reasonable effort has been made to ensure that all information presented here is accurate and up to date, the information presented here represents data sent by systems that are beyond our control and we make no representation or warranty of the accuracy, reliability, or completeness of the information. All medical information presented should be discussed with your healthcare professional as failure to seek timely advice can have serious ramifications.

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PHRs and Patient Safety

BC'S PATIENT SAFETY STRATEGY
*Your Care, Our Commitment*

HQBC
HEALTH QUALITY BC

Strategy 1.2: Enhance patient and family agency to promote active engagement in care planning
ACTIONS:
- Ensure patient access to their health care information and health records leveraging the Rural Personal Health Record and BC Health Gateway projects as prototypes
- Implement strategies in primary, acute and long-term care settings for patients and families to feel safe to speak up and/or raise concerns with their care
- Implement strategies in primary, acute and long-term care settings for Indigenous patients and families to feel safe to speak up and/or raise concerns with their care
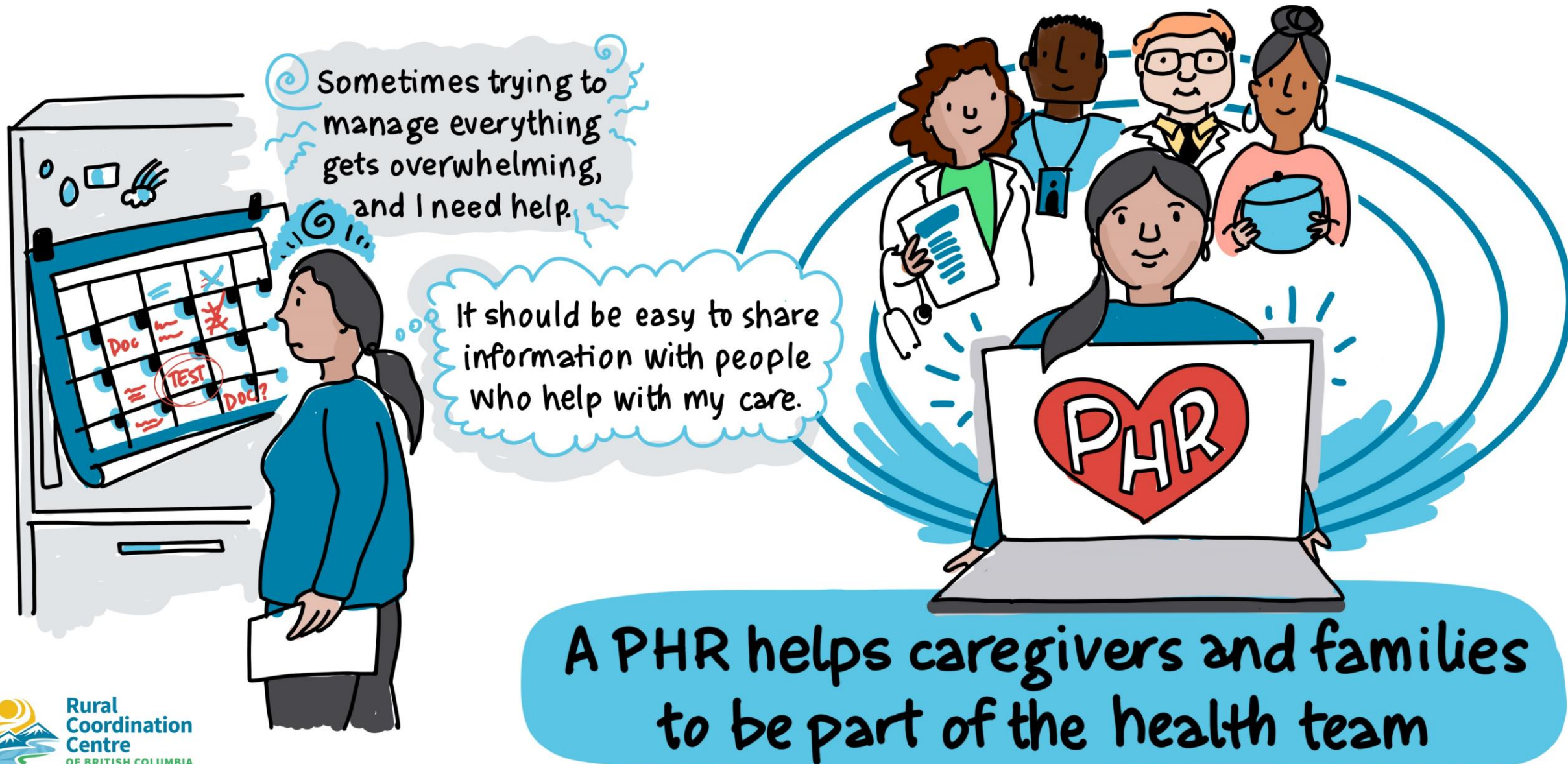
Use of Proxy Access

"Among patients with diabetes, informal proxy SM use is more common than registered use and prevalent among socially and medically vulnerable patients. Future research should explore whether proxy portal use improves patient and/or caregiver outcomes and consider policies that integrate caregivers in portal communication".

Secure Messaging with Physicians by Proxies for Patients with Diabetes: Findings from the ECLIPPSE Study. Semere et al, J Gen Intern Med, 2019

Public Engagement 2019

THE FUTURE OF CONNECTED HEALTH CARE

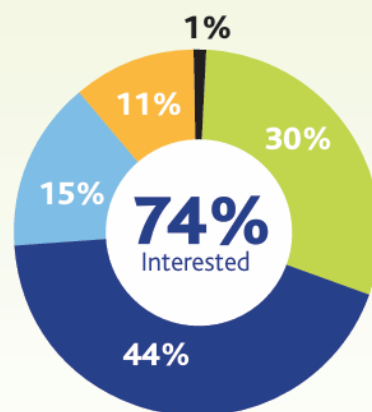REPORTING CANADIANS' PERSPECTIVE ON THE HEALTH CARE SYSTEM

August 2019 – A CMA / Ipsos collaboration

The demand for connected patient portals

A patient portal is a secure online website that gives users 24-hour access to their personal health information and connects them to their family doctor/health team. Users may also be able to book appointments and have secure conversations with their doctors online.

Interest in patient portals
Three-quarters of Canadians are interested in using patient portals, with 3 in 10 being very interested.

74% Interested

- 1%
- 11%
- 30%
- 15%
- 44%

While younger Canadians show greater interest in patient portals (**79%** 18-34, **75%** 35-54), 7 in 10 (**68%**) of those 55+ are interested.

- Very interested
- Somewhat interested
- Not very interested
- Not at all interested
- I already use a patient portal

Patient Engagement with PHRs
– The Nova Scotia Experience: Messaging

Table 5. Likelihood of Opening Messages Received Through PHR

	Likely or very likely	Unlikely or very unlikely	Not sure
Information about a test result	98%	1%	1%
Upcoming appointment reminder	95%	2%	1%
Forms to complete before an appointment	95%	3%	2%
Public health advisory	94%	3%	2%
Cancer screening reminders	91%	5%	3%
Invitation to an upcoming clinic	88%	5%	2%
Disease-specific information	88%	5%	2%
Tips on how to use your PHR	83%	6%	2%
General healthy living tips	77%	7%	2%

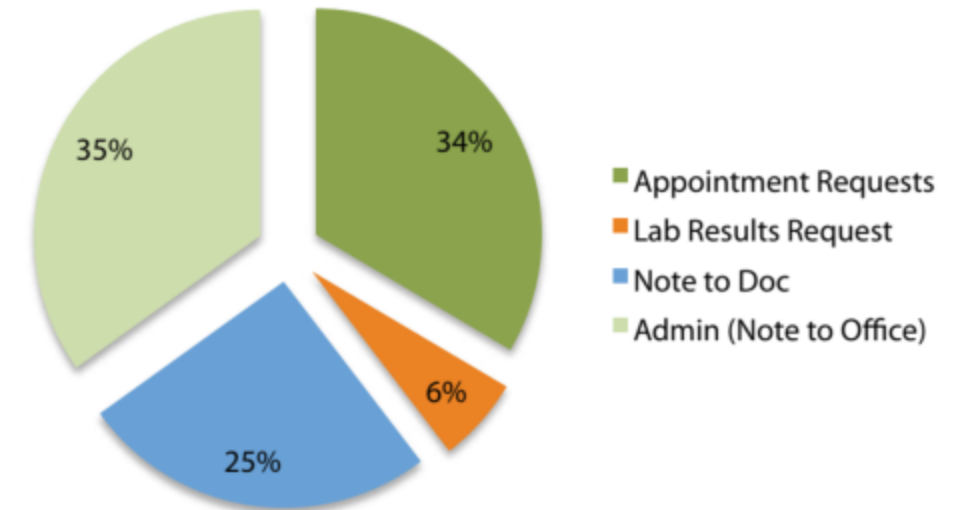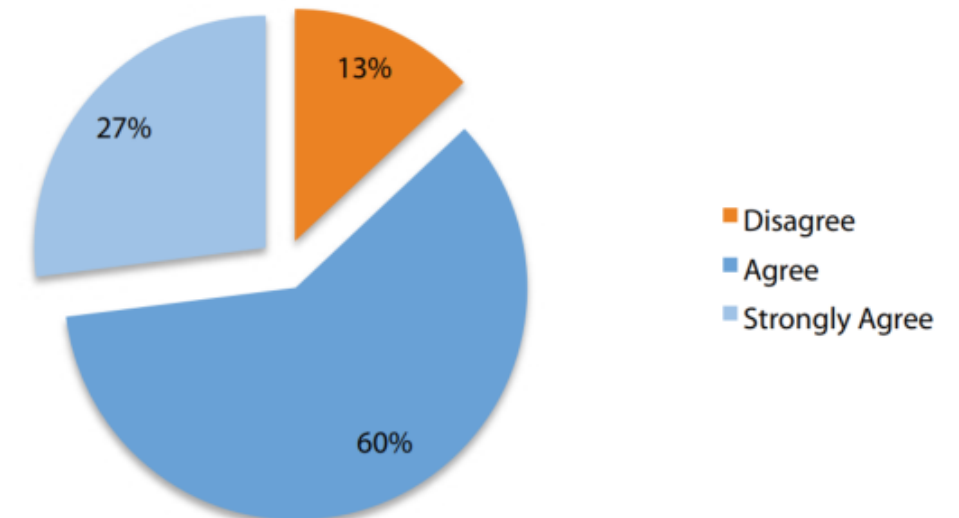Figure 22. Patient Initiated Messages, By Type (Jan 2014)

- 34% Appointment Requests
- 6% Lab Results Request
- 25% Note to Doc
- 35% Admin (Note to Office)

Figure 17. Physician Perception that Patients are Using the PHR Message Function Appropriately

- 13% Disagree
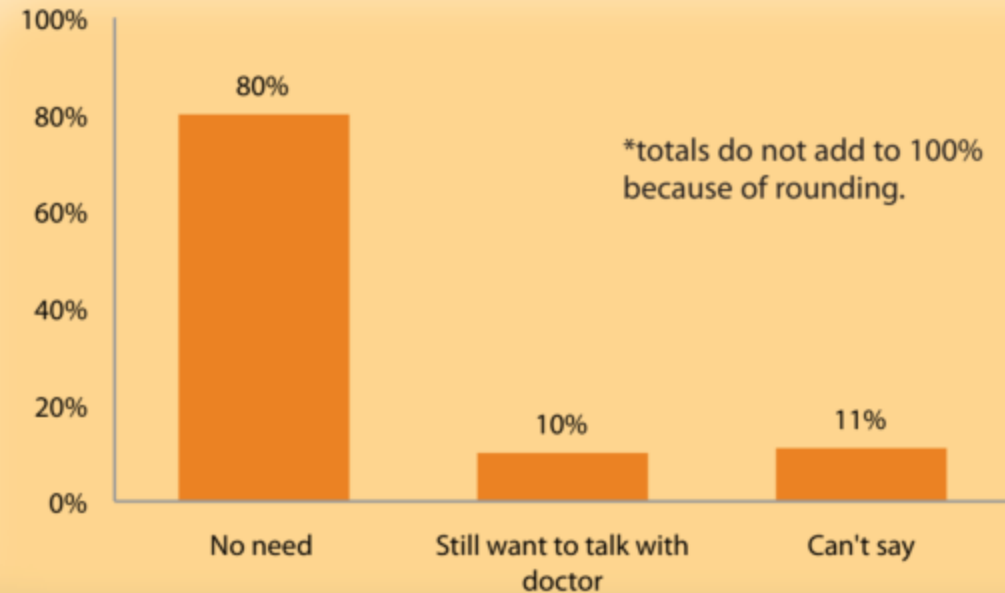- 60% Agree
- 27% Strongly Agree

Patient Engagement with PHRs – The Nova Scotia Experience: Test Results

Table 4. Patient Perceptions of Electronic Test Results

	Agree or strongly agree	Disagree or strongly disagree	Can't rate
I have confidence in the information presented in my test results	98%	1%	1%
Having online access to my test results increases the amount of information I have about my health	95%	3%	1%
I would like to continue to receive my test results electronically	99%	1%	0%
I find online test results confusing and difficult to understand	15%	81%	4%
I like the screen layout of my test results in my PHR	81%	10%	9%

Figure 12. Patients Wanting Doctor Follow-Up After Routine Test Result that Says Normal (PHR)*

*totals do not add to 100% because of rounding.

- No need: 80%
- Still want to talk with doctor: 10%
- Can't say: 11%

Patient Engagement with PHRs – The Nova Scotia Experience

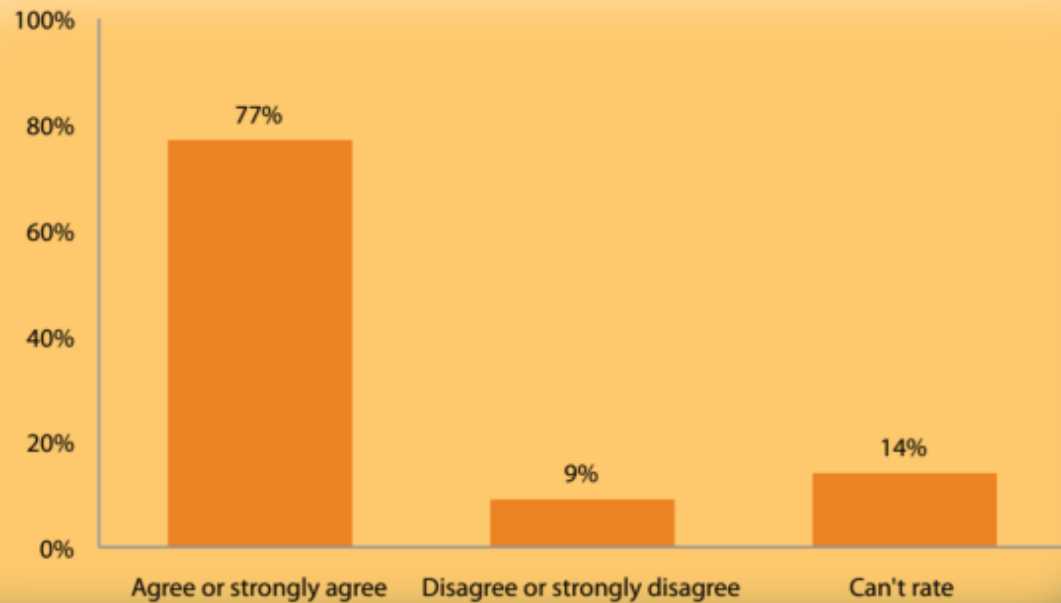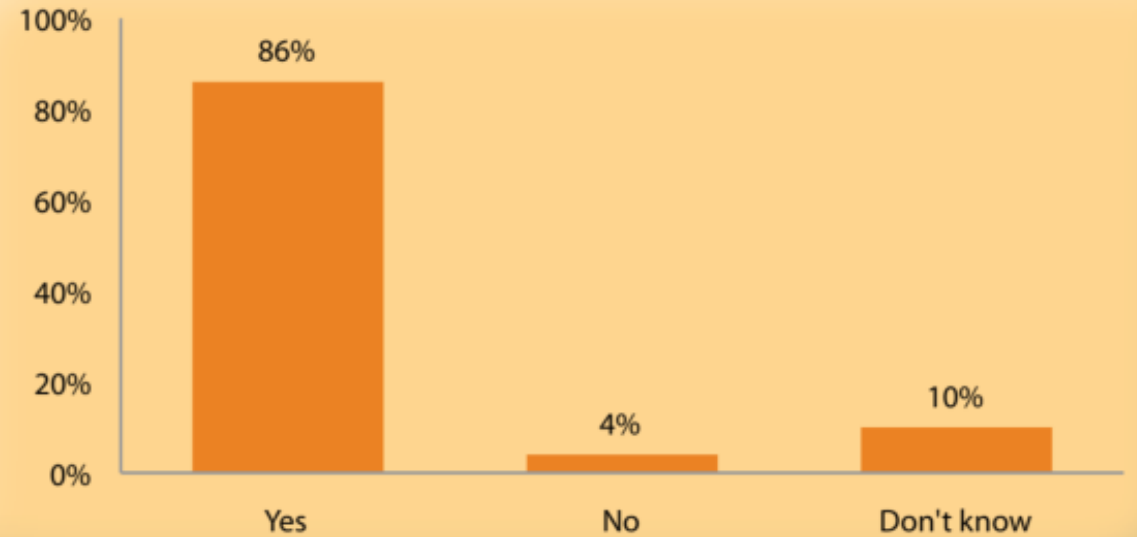Figure 11. Feeling of More Involvement in My Health Care

Figure 16. Patients Who Would Recommend PHR to a Friend

Patient empowerment – "conditions that make patients 'willing and able' to play an active role in their care". Patient empowerment and its neighbours: Clarifying the boundaries and their mutual relationships. Health Policy 2015

Provider Fears

A Piece of My Mind

June 30, 2023

Death by Patient Portal

Michael Stillman, MD[1]

» Author Affiliations | Article Information

JAMA. 2023;330(3):223-224. doi:10.1001/jama.2023.11629

ASSOCIATION MÉDICALE CANADIENNE / CANADIAN MEDICAL ASSOCIATION

What's behind physicians' administrative pile-up

"Doctors don't go into medicine for the paperwork. But from charting, third-party forms and sick notes to managing an office, tracking down lab results and following up from patient appointments, physicians' administrative load can be relentless"
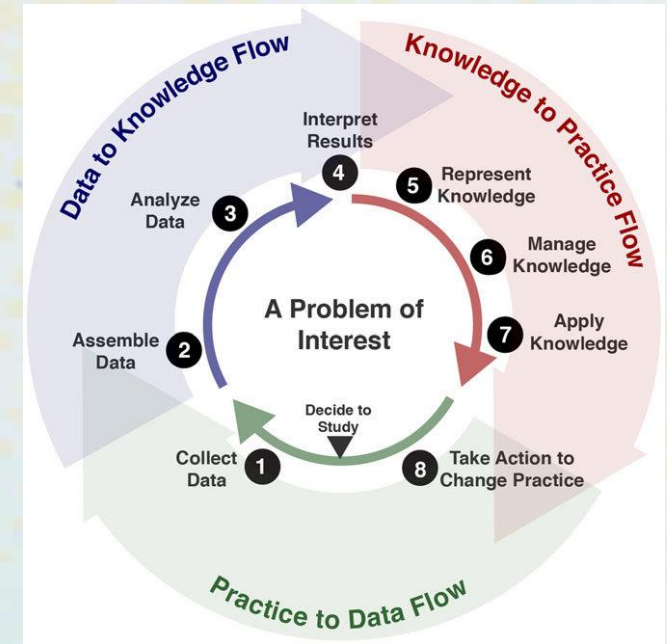
✅ Profile has been saved.

::: **Dashboard**

👤 **Bill Clifford** ▾

🩺 Conditions	0
💊 Medications	0
🧪 Test Results	0
💓 Vital Signs	0
✋ Allergies	0
🏥 Procedures	0
💉 Immunizations	0
🔧 Equipment	0
🏠 Social History	0
🗂 Clinical Notes	0
📄 Documents	0
👪 Family History	0
💜 Care Plans	0
🗃 Historical Demographics	0

👥 Gather Health Records

Epic   ⬡ Cerner   Department of Veterans Affairs   ⠿ fitbit

🌱 athenahealth   NEXTGEN   ⬡ GE HealthCare

⬡ Allscripts Developer Program Certified Application   Par   MEDITECH   eClinicalM

Altera DIGITAL HEALTH   Dynamic Health IT   Get Real Health   ⬡ vera

⬇ Download Healt

✉ Notifications

🏥 Healthcare Savings & Resources

🔗 Share Health Record

📅 Cale

🙁 Symp

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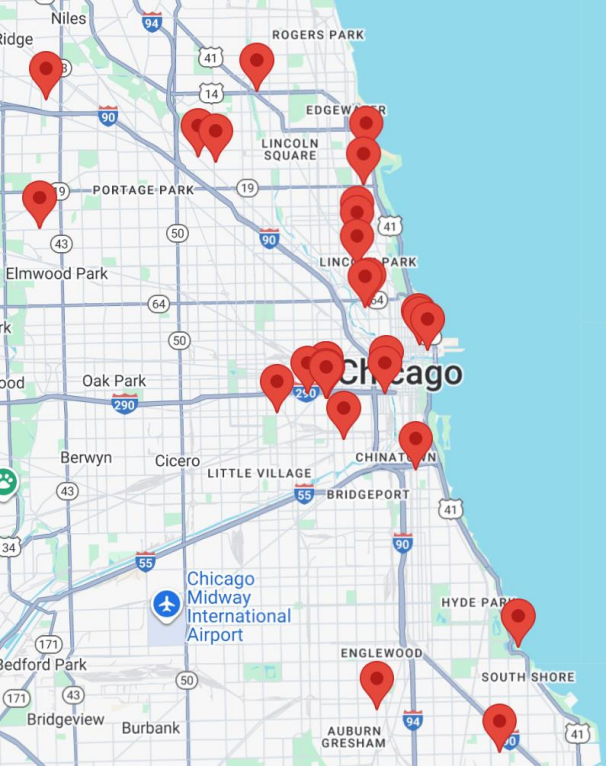
"In the exciting period that lies just ahead, more will be needed than simply connecting patients to clinicians, and clinicians to each other. The health care systems that will be most effective in meeting patients' needs will be those that can actually design their 'human-ware' around that purpose" - Information technology for patient empowerment in healthcare. Lee et al, Book, 2015
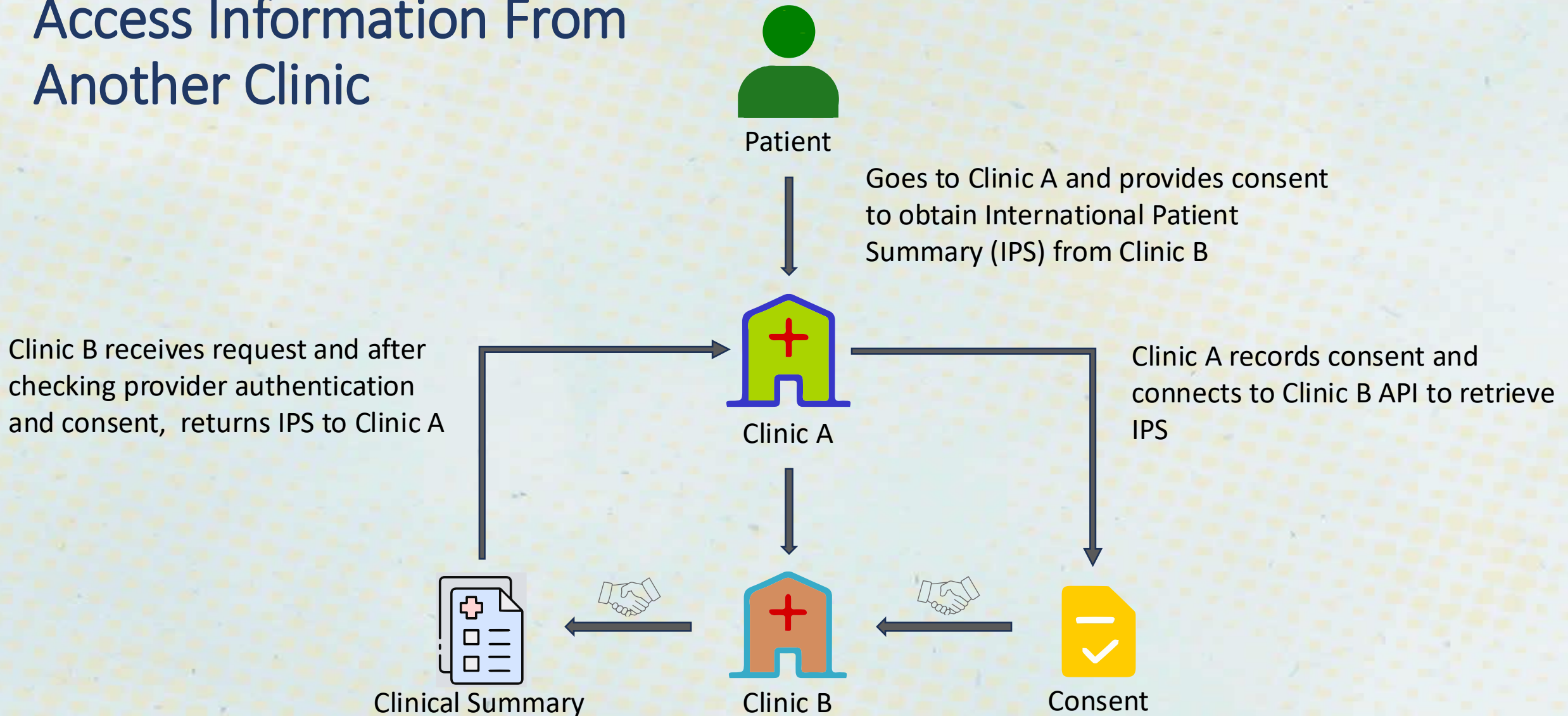
RCCbc Personal Health Record (rPHR):
Empowering Patients with Integrated Digital Health Solutions

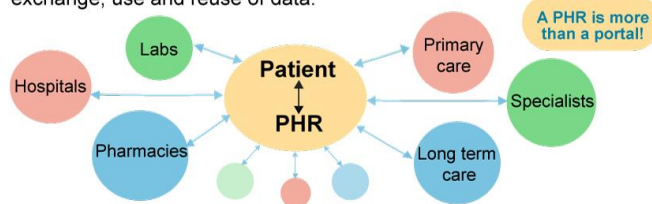**Rural Coordination Centre OF BRITISH COLUMBIA**

Challenges

- Patients are unable to interact with a **complete version** of their electronic health records

- The **rural health care journey is complex** with disconnected information and barriers to interaction

- **Providers bear the burden** of record accuracy, often manually sharing /re-entering information

A PHR Supports a Digital Health Ecosystem

- PHRs integrate **information and workflows** across many systems
- PHRs can leverage **interoperability** to enable seamless access, exchange, use and reuse of data.

A PHR is more than a portal!

Labs — Primary care — Specialists — Long term care — Pharmacies — Hospitals — **Patient PHR**

- A **standards-based approach** that leverages open application program interface (API) standards is a critical success factor

Service Request
API Backend → API Endpoint
Source System | Receiving System
Service Request Response
API Endpoint ← API Backend

Personal Health Record Opportunity
To help patients, providers, and the health system enable safer, more accessible care

Improve communication
- PHRs promote shared decision-making and participation in treatment

Empower access to health information
- PHRs improve patients' access to complete electronic health information, including medications, plans of care and notes
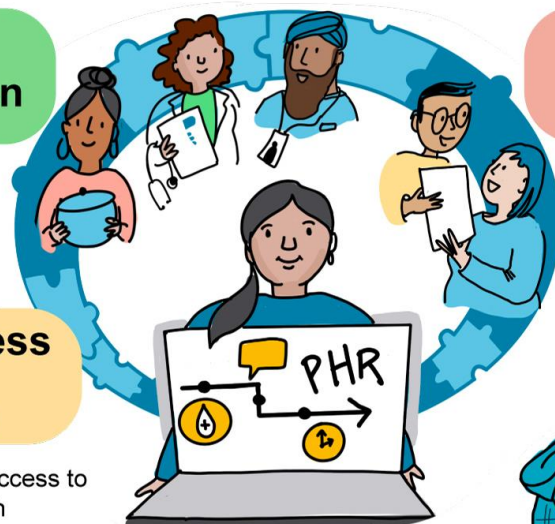
Increase safety
- PHRs enhance safety by ensuring accurate and up-to-date health information is available to providers and patients

Improve manual workloads
- PHRs streamline patient and provider workflows and care transitions while reducing administrative burden

Findings and Lessons Learned

Providers: Critical need for provider incentives, change management support, peer support, educational benefits, and time to enable change

Patient/Provider Partnerships: Focus on relationships to co-create health records that support continuity of care; less focus on portals

Standards and Usability: Successes achieved when using open standards-based integrations and usability of data is considered

Benefits Reported: Improved collaboration with patients and families/caregivers; reduced risk of missed or inaccurate information; increased safety

Visit this QR code for more details and resources:

For more information: Rural Coordination Centre of British Columbia www.rccbc.ca rphr@rccbc.ca