

- RICHARD ALVAREZ, GUEST EDITOR -



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Seize the moment, or forever lament: A challenge to Canada's health informatics community

So the political will is there, the technology is there, and there is more money than ever before. Now it's up to all of us in the informatics sector to deliver - to turn health information into tools that help make better decisions and better policy. In practical terms, we have good research to show that e-prescribing can improve quality and safety, and that the electronic health record can improve convenience for patients and continuity of care. It's time to take e-health from pilots to practice, and showcase their real-world benefits on a large scale. And in policy terms, we need to put the measurement tools in place to meet public demands for accountability. Without that kind of accountability, any claim that the new investment dollars have bought "transformative change" will fall on deaf ears.

At a recent meeting of a think-tank I belong to, CEOs from across the country talked about their two biggest concerns: sustainability, and public confidence. Total health care spending in this country is once again approaching the all-time high of 10% of GDP; a watershed that will surely spark renewed concern. Meanwhile, the rate of growth in spending has rebounded to historical levels after the restraint of the mid-90s, but costs continue to rise faster than the economy or public revenues. There is also ever-greater scrutiny on issues of service quality. Next year, for example, CIHI and CIHR will be releasing the first major report on patient safety in Canada. It too will naturally raise concerns, and the system will need to meet those concerns with a serious commitment to quality, backed up by informatics initiatives like clinical decision support.

Canadians are still devoted to the system, but in the absence of basic management information, they're understandably skeptical that it is run efficiently. If we want to stop the erosion of confidence in the system, we have to give managers the tools to control costs; we have to give policymakers the evidence to support tough choices; we have to give clinicians the evidence to make the best decisions for their patients; we have to give patients the facts on access and quality of care; and ultimately, we have to give taxpayers the information they need, to make their investment in the system an informed choice. Without that accountability, we'll never close the gap between expectations and results that plagues the system. No amount of money will ever be enough, because people will always feel that the system could have done more.

We are quickly approaching a "Perfect Storm" in terms of needs, technology, and dollars. Let's harness that energy and use our informatics capabilities to bring forth innovative applications that restore Canadians' confidence and trust in our precious health care system. Carpe diem!



In one of my favourite movies, *Dead Poets Society*, Robin Williams plays a teacher who exhorts his young students, "Carpe diem" - Seize the day. That's my message to my colleagues across the health informatics sector: we must seize the day. In the wake of the Romanow and Kirby reports and the February First Ministers' Accord, we have a window of opportunity to change the way business is done in the health system. If we act now, we can move further than at any time in the past 20 years. We can give managers and policymakers the tools to improve quality and patient safety, to highlight inefficiencies and drive them out of the system, and to back up tough choices with evidence.

We can do all that; but above all, we can help make the system more accountable, and rebuild public confidence. It's important to keep in mind that this is also the post-Enron world, where customers and shareholders are demanding stronger governance and greater transparency. In the public sector just as in private enterprise, we have to stop taking public confidence for granted. We have to show our shareholders that we have the basic management information to do business effectively, and show our customers that they get value for their money. It's now or never.

A number of factors have converged to create the opportunity I'm talking about. The Kirby and Romanow reports strongly advocated investment in e-health, and the First Ministers' Accord has put the dollars in place to buy real change, including nearly \$2 billion for e-health and research, in addition to the \$16-billion Health Reform Fund. New technologies like wireless and web-based systems are ready to be exploited; and there's a broad consensus on the business case for core applications like the electronic health record and telehealth.