

Softwords

A&L Computer Software Limited

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...Contents...



The Future Is Now

Primary Care Reform

...Page 1



How Much Do You Really Value Your Staff?

Don Price, B.Sc., M.B.A.

...Page 2



The User's Corner

Windows 98 - What Will It Do For You?

...Page 3



Year 2000

Government Tax Relief For New Hardware And Software

...Page 3



The Internet And You

Good Health Online

...Page 4



Teach & Train '98

Coming On October 3rd

...Insert

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◆ The Future Is Now...

Primary Care Reform - Coming To A Town Near You

As many of our readers know, the Ministry of Health is introducing a program called Primary Care Reform with the objective of improving the delivery of health care services in the province of Ontario. The focus of this initiative is on a patient centered, service co-ordination approach with the emphasis on:

- **Illness prevention**
- **Health promotion**
- **Community based care**

New funding approaches are being evaluated to enable this to be a financially viable program.

Five communities (Hamilton, Chatham, Wawa, Paris and Kingston) have recently been selected as pilot sites for the program over the next three years in order that the initiative may be evaluated before implementing it across the province. Physicians involved will form the initial version of the province's 'Primary Care Network' that will allow patients to enroll with a specific physician as their 'Primary Care Provider.'

Specifications have been released by the Ministry of Health to facilitate the implementation of Primary Care Reform. They define the format and content of information to be exchanged between the Primary Care Network physician and the Ministry in order to enroll patients in the network. Developers of Clinical Management Systems will use these specifications to build the Primary Care patient enrollment software application for the physician's office.

Primary Care Network physicians will need to acquire a Clinical Management System of their choice. It must meet the minimum requirements defined by the Ministry, which include:

- ⇒ A Primary Care core data set (demographic, registration and medical information)
- ⇒ Linkages to Ministry of Health

systems for enrollment, payment, service encounter information and Ontario drug benefit medication history

- ⇒ Linkages to other health providers such as laboratories, and a telephone advisory service
- ⇒ Clinical management tools for preventive care management, including drug utilization review, preventive screening and immunization routines
- ⇒ The capability to access a network for the linkages defined above, and for Internet and e-mail
- ⇒ Practice management tools (e.g. OHIP billing, accounting, scheduling)
- ⇒ Security (access controls, audit controls and encryption).

Additional specifications will be created for the following over the coming months:

- ⇒ The ability to access a subset of a patient's claims history held by the Ministry of Health (upon receiving patient consent)
- ⇒ The ability to access the Ontario Drug Benefit medication history and drug utilization review (e.g. drug to drug interactions)
- ⇒ Security requirements using Public Key Infrastructure.

A system with these characteristics greatly expands the capabilities of the Clinical Management Systems currently used by most Ontario physicians. It will provide the physician with secure electronic communication with several other health service suppliers, including laboratories.

The initial version of the Clinical Management Systems Functional Specification can be viewed and retrieved from the OMA's Website:

<http://www.oma.org/pcomm/cms/toc.htm>



The User's Corner

Year 2000

Windows 98 What Will It Do For You?

Microsoft's Windows 98 became available on the worldwide market on June 25, 1998. It is a follow-up version of the Windows 95 operating system.

So why should you buy Windows 98 if you already have Windows 95? Well, Microsoft claims it will make your everyday computing tasks easier and faster, including accessing the Internet.

To quote from Microsoft's website "Windows 98 makes use of key Internet Explorer technologies to unify and simplify the desktop, making it quick and easy for users to find and navigate to information, whether it resides on their PCs or the Internet. In addition, finding help has been dramatically simplified with the addition of new troubleshooting wizards and Web-based help features."

Windows 98 enhances performance of such system management tasks as opening applications, accessing the Internet and shutting down your computer. It also employs more powerful self-maintenance and update features, the objective being to allow users to spend more time with their application software and less with actually managing their systems.

If you are into using your PC for entertainment you will be happy to learn that Windows 98 allows games to run better than on the traditional game console devices and also includes support for Universal Serial Bus (USB) which greatly simplifies adding new hardware devices. In addition, DVD and television broadcast capabilities are provided.

Will your current hardware run Windows 98? According to Microsoft you will need a 486DX/66MHz or higher processor with at least 16MB of memory, with available hard drive space ranging from 120-295MB, depending on your system configuration and the options you choose to install, a CD-ROM or DVD-ROM and a VGA or higher-resolution monitor. However, judging from our past experiences and those of many of our clients you will need a more powerful computer for your software applications to run at an acceptable speed.

Only time will tell if Windows 98 will make a significant difference in your office. Maybe try it at home first?



A&L Wins Another Award!

A&L Computer Software Limited is honoured to be one of the winners of the **Ontario Chamber Of Commerce 1998 Outstanding Business Achievement Awards**. "The 1998 OBAA winners are some of the most dynamic and innovative companies in Ontario. We are proud to be able to highlight them at this year's awards dinner," said OCC Chair & CEO Bill Laidlaw. A&L will be presented with a unique medallion at the Awards Ceremony and Dinner on September 23 at the Toronto Convention Centre.

Government Tax Relief For New Hardware And Software

Yr. A is a 40-year-old cardiologist who not only has a busy private practice, he also sits on numerous committees and boards. Energetic and gregarious, Dr. A relies heavily on Marge, who has been his front office assistant for the past 12 years, to keep his schedule and appointments on track. Dr. A's medical and political colleagues know only too well that if they want Dr. A to attend a meeting or lend his support to a cause, they have to approach Marge first because, in Dr. A's words, "She's the one who keeps me on the ball."

Dr. P is a 42-year-old family physician who has a hard time keeping staff. Isobel, who has been her receptionist for the past eight months, is already considering looking for another job because she's tired of being blamed for everything that goes wrong in the office. The final straw was when Dr. P blamed Isobel loudly and publicly in front of a room full of patients for an error she herself had made. Afterwards, she apologized, but tempered the apology with the remark: "It doesn't matter if the patients think you make mistakes. After all, you're not the doctor."

In Dr. A's office, Marge is a respected member of the team. Not only does Dr. A constantly show his respect for her, but his colleagues and patients also regard her as a person of integrity and professionalism. When Dr. A tells a patient to ask Marge for something, the patient knows that Marge will deliver. They've learnt of Marge's value and importance in the practice through Dr. A's attitude towards her.

Dr. P's patients, on the other hand, have little respect for Isobel. If she tells a patient that the earliest appointment she can give them is two weeks down the road, the patient will argue and demand to speak directly to the doctor. The patients don't like her or trust her, not because Isobel has an unpleasant personality or has done anything specific to destroy the patients' trust, but they have heard the way Dr. P talks to her, and they have absorbed the doctor's attitudes.

Unfortunately, what happens to Isobel is not an uncommon situation. Front office staff are often undervalued, when in reality they should be recognized as being the most important people in and to a practice.

So what is a medical office assistant really worth to a practice?

The receptionist in any office is usually the first contact a prospective patient has with the doctor. An excellent receptionist is a public relations expert, an image builder, the person who attracts the patients and keeps them in the practice. Many offices would flounder and fail if it weren't for a recep-

tionist with these skills.

A medical office assistant with good people skills is a team builder, the person who pulls the doctors and other staff together in a cohesive and unified group. She can be the



The Internet And You



Good Health Online

“...over 30% of all searches made on the Internet involve health care topics.”

In several of our past issues we have told you about a number of Internet web sites that provide a variety of information pertaining to the health care environment. Patients are turning to the Internet more and more frequently for health and medical information. This is fine to a point but it may be difficult for the untrained to distinguish between fact, opinion and out and out false information.

It has recently been estimated that over 30% of all searches made on the Internet involve health care topics. Patients are turning up for appointments with physicians armed with a variety of printouts obtained from Internet sources. Many of these relate to various drugs or alternative treatments which claim to be able to treat this disease or that condition. Naturally the patient will then ask their doctor for a prescription, or at the very least for an opinion.

Pharmaceutical companies are among those developing web sites where information on developed drugs is made available. It is therefore important for a physician to be aware of such sites in order to be prepared to respond to a patient's query.

The writers of the well known *Canadian Internet Handbook*, Jim Carrol and Rick Broadhead, have recently completed a new reference book entitled *Good Health Online*, published by Prentice Hall and retailing for \$16.95. It offers the reader tips on identifying which information is reliable, incorrect, biased or even fraudulent. It points out that there are benefits to using the Internet as a source of information, identifying ten good reasons for doing so, but balancing them with ten risks.

“The Internet will force health care professionals to deal with a new generation of Internet-savvy patients who are thirsting for medical knowledge and want more control over decisions affecting their health,” say the authors. They point out that when used correctly and proactively the Internet provides information that will help Canadians take care of themselves and adopt a healthier lifestyle. But if used improperly it can lead to dangerous self-diagnoses, errors in judgement and reliance on out-of-date, inaccurate information from unlicensed, non-medical professionals.

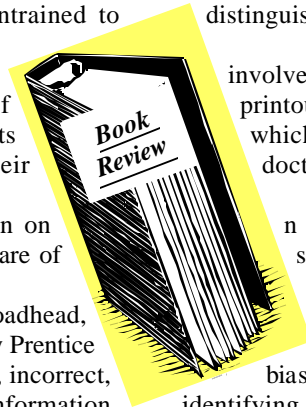
“Most Canadians don't have the skills to discriminate between credible, peer-reviewed medical information and useless junk,” the authors point out. “Not only will Canadians need to develop the skills to critically appraise the validity of online medical information, they will need to learn to deal with medical professionals who are uncomfortable with this new medium.”

Canadian initiatives to educate consumers about the pitfalls of seeking medical advice from the Internet have not been as proactive as in the United States. “The Canadian debate over the future of the health care system must include the Internet,” the authors say. But they also warn that “We run the risk of drowning in global information without a Canadian life raft to hold on to” and point to the lack of any Canadian program of continuing medical education with respect to the role of the Internet as both a medical research tool and a consumer tool. What is needed is an “urgent crash course in Internet literacy” for all medical professionals in Canada, the authors urge.

Carrol and Broadhead also challenge organizations involved in the health care system in Canada to come to view the Internet as a strategic tool in the delivery of health care services. In their opinion “Individuals in the health care industry involved in setting the direction for their organizations must clearly do a better job at defining the role and opportunities for the use of the Internet before setting out to create a Web site simply because “everyone else has one.”

Good Health Online addresses many important issues including how to conduct effective online research into health care matters, how to evaluate the credibility of online health information, how to avoid the pitfalls of fraudulent, inaccurate or biased information, how to deal with Internet-illiterate medical professionals and how to assess the dramatic changes the Internet will have on the Canadian health care industry. The book was produced in association with the Sympatico service, home of the HealthyWay site which can be accessed at www.healthyway.sympatico.ca. It is both an easy read and a useful resource for health care providers and the general public alike.

Don't forget to keep up to date with what's happening at A&L by visiting our web site at www.anl.com



Teach & Train '98

Be sure to attend A&L's exciting annual educational event to be held this year on Saturday, October 3rd at the Sheraton Parkway Toronto North Hotel.

Physicians and their staff are invited to learn about recent developments both in A&L's software and in healthcare in Ontario, and gain some insights into what to expect in the coming months.

Please use the Insert provided with this newsletter to register your office staff. (Do it now while you are thinking about it!)

See you all there!