The Primary Care Medical Record System: Recommendations for Success from Family Physician Leaders

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Executive Summary

Ontario's long-awaited investment in an integrated Primary Care Medical Record (PCMR) system represents a foundational step toward more connected, safer, and efficient care. By enabling timely access to a more complete medical record for physicians and patients, the PCMR system can reduce fragmentation, limit duplication, support higher-quality clinical decision-making, and improve care transitions across settings. Realizing these benefits, however, depends on meaningful participation from family physicians who are prime contributors to and users of electronic medical records (EMRs). Family physicians are also trusted custodians of patient information, and this unique relationship is essential for the safe and effective delivery of primary care.

Achieving the full benefits of the PCMR system will depend on sustained and meaningful adoption by family physicians. This makes family physician leadership a critical factor for success in the development of the PCMR system. This paper outlines six practical, physician-informed recommendations for the Ministry of Health and Ontario Health to put in place now in partnership with the Ontario Medical Association, Section on General and Family Practice, and Ontario College of Family Physicians to support family physician readiness and willingness to adopt the PCMR system. Taken together, these recommendations aim to ensure the PCMR system is co-designed with the profession, implemented safely through staged rollout, supported by appropriate resources and infrastructure, and grounded in transparent governance policies that recognize the value of physician EMR data.

Summary of recommendations:

1. Partner with a diverse group of frontline family physicians in co-designing the PCMR system to ensure appropriate and safe sharing of data, and broad adoption.
2. Maintain patient trust in digital health and the physician-patient relationship through transparency and plain-language communication about how data is used, and by providing system-level supports for patient digital health literacy.
3. Support family physician adoption with clear communications, tailored change management resources, technical support and cybersecurity infrastructure, and appropriately fund associated time and costs.
4. Align the PCMR system with clinical workflow by enabling seamless, secure integration with EMRs and interoperable data exchange across care settings, in a staged approach, avoiding additional administrative, technical, and financial burdens for family physicians.
5. Apply a principled data governance framework grounded in physician partnership in data governance structures, clear roles and accountability, explicit purpose limitations and transparency for data use, and continuous evaluation of governance policies over time.
6. Recognize the value of family physician EMR data and the time required to participate by providing appropriate compensation, subsidies, and/or tools and supports.