Author's response to reviews

Title: Users’ perspectives of key factors to implementing electronic health records in Canada: a Delphi study

Authors:

Carrie A McGinn (carrieanna.mcginn@gmail.com)
Marie-Pierre Gagnon (marie-pierre.gagnon@fsi.ulaval.ca)
Nicola Shaw (nicola.shaw@algomau.ca)
Claude Sicotte (claude.sicotte@umontreal.ca)
Luc Mathieu (luc.mathieu@usherbrooke.ca)
Yvan Leduc (yvan.leduc@fmed.ulaval.ca)
Sonya Grenier (sonya.grenier@crsfa.ulaval.ca)
Julie Duplantie (julie.duplantie@fmed.ulaval.ca)
Anis Ben Abdeljelil (anis.baj@gmail.com)
France Légaré (france.legare@mfa.ulaval.ca)

Version: 4 Date: 24 August 2012

Author’s response to reviews: see over
Quebec, August 24th, 2012

Editorial Board
BMC Medical Informatics & Decision Making

Object: Resubmission of the manuscript MS: 1085796153683193, entitled “Users’ perspectives of key factors to implementing electronic health records in Canada: a Delphi study”

Dear Editorial Board members,

We first wish to thank the reviewers for their re-review of the manuscript and their helpful comments.

We are now pleased to submit our revised and reworked manuscript to be considered for publication in the BMC Medical Informatics and Decision Making.

We have addressed all of the Reviewers’ comments and provide our point-by-point explanations in the attached table. We have also indicated all the changes made in the manuscript using the revision function in Word. We have first accepted the first round modifications on which the reviewers agree, and we have then addressed each of the re-review comments by indicating the changes made in the manuscript using the revision function in Word.

We look forward to receiving your feedback regarding this re-revised version of our manuscript.

Sincerely,

Marie-Pierre Gagnon, Ph.D.
Associate Professor, Faculty of Nursing, Laval University
Centre Hospitalier Universitaire de Québec (CHUQ), Pavillon St-François d’Assise
10, rue de l’Espinay, D6-734
Québec (Québec) G1L 3L5
Canada
Table of Revisions and responses to the comments of the re-reviewed manuscript by the reviewer: Dr Anne Holbrook

<table>
<thead>
<tr>
<th>Area suggested to further edits</th>
<th>Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall this version is much improved and the detailed response to reviews is very well formulated. However the manuscript still tends to over-advertise the clinical and policy importance of the work. There is also a considerable literature review and actual EMR/EHR implementation experience in Canada that is not cited.</td>
<td>Thank you for this comment we did our best to detailed response to your comments. In order to inform without over advertising the importance of this work, changes were brought to the abstract to better define EHR actual or potential users as partners of the EHR implementation process. We also add recent references about EMR/EHR implementation. (Lau F, 2012; Archer N, 2011)</td>
</tr>
<tr>
<td>Since the authors fail to specify, it is very likely that the vast majority of participants are NOT actual EHR users, as is claimed in the manuscript, rather they belong to potential user groups. At one point, the term ‘potential user’ is added but throughout the rest of the document, participants are described as users. This is misleading, as it leaves an unwarranted air of legitimacy that is gained by actual experience using an EHR. Since the abstract is the section most commonly read, I would suggest that the (lack of) experience with EHRs be clarified there.</td>
<td>In our recruitment criteria, we included direct experience with EHR/EMR implementation, but it is true that we did not have a way to validate if the respondents were users. So, the suggested precision is very appropriate and we have added the term “actual or potential” users in the definition. The added sentence in the abstract is: “A three-round Delphi study was held with representatives of 4 Canadian EHR user groups, defined as partners of the implementation process that use or are expected to use EHR in their everyday activity.” We have also replaced the expression “EHR users” by “actual or potential EHR users”.</td>
</tr>
<tr>
<td>The limitations section, while now clarifying the major flaw in this kind of study that being opinions on what might potentially influence implementation success is opposed to actual evidence from implementations (of which there are now many), should recognize that this is a very small survey sample size and is dominated by women, both factors tending to bias and/or decrease generalizability of the results..</td>
<td>We have now clarified these elements in the limitation section by adding information about the major flaw, sample size and the decreasing generalizability introduced by the dominance of women in the sample.</td>
</tr>
</tbody>
</table>