

Significance

The terms health care “clinician”, “practitioner”, “provider”, “prescriber” and “professional” are often used in discussions about use of the Alberta Health Services (AHS) Connect Care clinical information system (CIS). There are different definitions and understandings of the terms, even within AHS. More importantly, these and other role labels can connote hierarchical limits to practice.

Connect Care promotes collaborative care across multiple settings and domains. Accordingly, members of a patient’s circle of care should be identified in a way that does not imply unnecessary or unhelpful hierarchies. On the other hand, CIS design raises many questions about what different health professionals, and subgroups, need to do or may be permitted to do. Accordingly, it is important to define and standardize terms used to refer to CIS users and how those terms map to CIS roles with different expectations.

Sources

Engagement and adoption, medical affairs, health professions, regulatory agencies and strategic transformation teams were polled for definitions of a variety of terms, including:

- clinician, healthcare professional, healthcare practitioner, healthcare provider, prescribing healthcare professional, regulated healthcare professional,
- physician, physician assistant, physician extender,
- allied healthcare professional, advanced care practitioner,
- nurse practitioner, nurse clinician, midwife.

Separately, Epic terminology and definitions have been inventoried and mapped to AHS labels with similar meanings.

A surprising amount of diversity emerged. Different labels are used to refer to similar roles, and the same labels can have different interpretations. Both labels and interpretations are affected by norms, legislation and policy. Moreover, legislative and policy changes occur during Connect Care implementation waves.

Approach

A core Connect Care strategy is to avoid micro-managing professional CIS entitlements and instead to keep roles and permissions simple and sustainable. As much as possible, appropriate CIS use should be managed through training, professionalism, monitoring, audit and feedback. This is particularly important given the scope and complexity of the Connect Care initiative. AHS needs to accommodate different scopes of practice (for the same role) in urban and rural areas, and for facilities with different staffing levels. Accordingly, less emphasis is given to specific labels and more to role categories.

Health Care “Providers” – International Differences

There is an important difference between use of the term “provider” in the United States and Canada.

The US federal government definition of a provider emphasizes regulated scope and entitlement to request, prescribe or claim for health care interventions. Included are physicians, doctors of osteopathy, podiatrists, dentists, chiropractors, clinical psychologists, optometrists, nurse practitioners, nurse-midwives, and clinical social workers authorized by the State and performing within the scope of their practice as defined by State law. Health care providers must be certified to substantiate a claim for benefits.

Canadian usage is broader. The Canadian Institute for Healthcare Information and the [Health Council of Canada](#) include all health care professionals in the category of “healthcare provider,” irrespective of whether they can request, prescribe, document or claim for interventions. Accordingly, all nurses, occupational therapists, physiotherapists and many other clinicians are “providers” in Canada.

Epic’s use of the term “provider” reflects usage in the United States. It most closely matches AHS’s understanding of the term “prescriber”, including physicians, resident physicians, nurse practitioners, clinical assistants, nurse midwives and other professionals entitled to prescribe.

These differences in understanding can frustrate Connect Care design discussions. There is no perfect terminology. However, Connect Care needs to adopt and consistently use labels and definitions that can usefully map to Epic terms.

Health Care “Prescribers” – A Common Denominator

Use of the term “provider” by Connect Care will be confusing when Alberta subject matter experts are consulted. Accordingly, we recommend the term “prescriber” with the understanding that this most closely maps to Epic’s “provider” usage. We also recommend avoiding the term “provider”.

Connect Care Role Groupers

The following role labels align with prevailing AHS usage and are chosen as a minimum set needed to frame conversations about CIS end-user engagement, adoption, capacity-building and information sharing. The terms listed are help group persons directly involved in patient care:

Term	Simple Definition	CIS Grouping	CIS Accountability
Clinician	Any person who provides health care goods or services directly to patients, inclusive of all health care workers.	Anyone in a direct clinical service-providing role, not a clinical support or administrative role.	Use this term whenever all physicians, nurses, allied health and other healthcare workers are served jointly by AHS Medical Affairs, CMIO and Clinical Operations.
Physician	A qualified, licensed and registered physician, surgeon or osteopath.	Inclusive of trainees, physician assistants, physician extenders, clinical assistants or clinical associates supervised or accountable to a physician or physician service area.	Use this term whenever referring broadly to physician and related communities served primarily by the CMIO portfolio and Medical Affairs.
Prescriber	Any regulated healthcare professional authorized to prescribe medications or health care interventions.	Inclusive of physicians, as defined above, nurse practitioners, midwives, pharmacists and podiatrists.	CIS accountability for prescriber advocacy rests primarily with the CMIO portfolio.
Nurse	Any healthcare professional registered as a nurse under the health	Inclusive of all levels of nursing and advanced roles, including trainees.	CIS accountability for all nursing roles, including extended roles with some

Term	Simple Definition	CIS Grouping	CIS Accountability
Allied Health	professions act.		prescribing functions, rests with the Clinical Operations portfolio.
	Any healthcare professional registered under the Allied Health Professions Act.	Inclusive of all defined disciplines and their trainees.	CIS accountability, including any extended roles with some prescribing functions, rests with the Clinical Operations portfolio.

Connect Care Prescriber Ordering Contexts

Healthcare prescribers, as defined above, place orders. Some prescribers can sign orders, and so become Ordering Prescribers (the person who clicks Sign for an order). Ordering prescribers can work in one or more order-generating contexts when ordering, documenting or billing within the Connect Care CIS. For convenience, Epic terms for ordering provider contexts are adapted, as below.

Context	Description	CIS Implication
Admitting Prescriber	The admitting prescriber is the prescriber who orders a patient's admission to an inpatient facility.	Only inpatient encounters need an admitting prescriber. Admitting prescribers can be trainees but not students.
Attending Prescriber	The attending prescriber is the prescriber (as defined above) on record as managing the care of an admitted patient at a given point in time. There must be at least one but can be many attending prescribers during a facility stay. There can be only one attending prescriber at any one point in time.	Attending prescribers pertain in emergency and inpatient settings and are not defined in outpatient or ambulatory settings. Attending prescribers can be named during admission, transfer, check-in or inpatient workflows.
Encounter Prescriber	The Encounter Prescriber is the prescriber (as defined above) on record as managing an outpatient, scheduled, virtual or telephone encounter with a patient. There can be only one Encounter provider per encounter.	Encounter Prescribers pertain in outpatient settings and can be named during scheduling, check-in or clinic workflows. Since Encounter Prescribers can be updated at the time of service, there is no need to distinguish "Appointment Prescribers" for Connect Care.
Trainee Prescriber	Trainee prescribers include residents (1-3 years post medical school graduation and CPSA registration with a trainee licence) and fellows (4 or more years post graduation). Alberta follows a	Trainees can generate orders that do not have to be co-signed by an attending prescriber. However, they may be expected -- as a matter of training, policy or competency -- to request co-

Context	Description	CIS Implication
	competency-based, not time-based, approach to determining what a trainee is able or allowed to do. Most fellow perform and are treated like “junior attendings” but it is also possible for some residents to be assigned advanced functions upon demonstration of competency.	signature for particular orders. Some classes of orders can be restricted from trainee initiation or co-sign exception. Trainees (even fellows) are never billing providers.
Student Prescriber	Student prescribers include all 3 or more-year medical students permitted by either the University of Alberta or the University of Calgary to serve and learn in AHS facilities or clinics.	Student prescribers require co-signature for orders placed. Elective student prescribers may be enrolled in external programs but approved by Alberta universities and AHS.
Authorizing Prescriber	The authorizing prescriber is the prescriber under whose authority an order is placed. This person can be an admitting, attending or trainee prescriber but not a student prescriber.	The CIS can be configured to allow medication order authorization, non-medication order authorization or both for any given role. If a clinician is not an authorizing provider, then orders must be signed by an authorizing provider. Outpatient authorizing providers can be identified and entered by schedulers and clinicians.
Supervising Prescriber	A supervising prescriber is a prescriber who supervises another clinician for some aspect of care provision. Authorizing providers, who can be trainees, may still need to document a supervising prescriber.	With Attending Prescriber roles making most sense in the inpatient setting (where a supervisory responsibility is assumed), the Supervising Prescriber designation makes most sense in outpatient settings. Trainees may be prompted to enter a Supervision Prescriber for an encounter and will be defaulted to the same name for the same clinic on the same day.
Co-signing Prescriber	The Co-signing Prescriber is the prescriber with authority to validate clinical components of a chart and confirm the veracity of an order. Orderers who require co-signature can select an Attending, Authorizing or Supervising prescriber.	Any clinician who is not an authorizing prescriber must indicate an authorizing prescriber when entering orders. The co-signing prescriber, therefore, is always an authorizing prescriber. Trainees can be co-signing prescribers for students.
Billing Prescriber	A billing prescriber is an authorizing prescriber who is permitted by Alberta Health and/or third party healthcare insurers to bill for the service ordered.	Although trainee prescribers can be authorizing prescribers, they cannot be billing prescribers. Most authorizing prescribers (who will be either attending or encounter prescribers) are also billing prescribers. Billing prescribers are considered by Alberta Health to be the person providing or responsible for the provision of a service. Accordingly,

Context	Description	CIS Implication
		“Service Prescriber” and “Performing Prescriber” designations (distinct from Billing Prescriber) is not needed for Connect Care.
Referring Prescriber	A Referring Prescriber is the person referring a patient for an encounter.	Referring Prescribers are named in outpatient settings. However, they are also required in inpatient settings for billing purposes. In this context, they are normally the emergency room or family medicine or primary care provider initiating the hospital visit.
Consulting Prescriber	A Consulting Prescriber is a prescriber asked to see a patient by an authorized provider. On consulting services, the Consulting Prescriber is also the Authorizing Prescriber and usually the Supervising Prescriber.	Consulting prescribers pertain in both inpatient and outpatient settings.

Connect Care Non-Prescriber Ordering Contexts

Healthcare clinicians, as defined above, can participate in ordering workflows. They may receive a verbal order, enter an order requiring co-signature or otherwise initiate, communicate or help validate an order. For convenience, Epic terms for ordering non-prescriber providers are adapted, as below.

Context	Description	CIS Implication
Ordering Clinician	The ordering clinician is the person caring for a patient who decides to place an order. This person need not be a prescriber.	All orders must be associated with a person initiating the order. This person can be a prescriber, a non-prescriber clinician, a trainee or a student. Different rules can be defined in outpatient and inpatient settings.
Order Communicating Clinician	The communicating clinician is the person to whom an order is relayed (e.g. verbal or telephone order) who then enters the order in the CIS.	Anyone with a clinician CIS record can be entered as a communicating clinician.

Mapping AHS Clinician Labels to Connect Care Prescriber Labels

Label	Description	CIS Mapping
Practitioner	A Physician, Dentist, Oral and Maxillofacial Surgeon, Podiatrist, or a Scientist Leader,	Admitting Prescriber, Attending Prescriber, Encounter Prescriber, Authorizing Prescriber,

Label	Description	CIS Mapping
	who has an AHS medical staff appointment.	Referring Prescriber, Consulting Prescriber
Professional	A healthcare professional is any individual who is a member of a regulated health discipline, as defined by the Health Disciplines Act or the Health Professions Act, and who practices within a defined scope or role.	This term is too general for differential role use in CIS configuration.
Physician	A qualified medical doctor (MD or equivalent) licensed to practice by the CPSA.	Prescriber
Most Responsible Provider	An independently licensed prescriber who has responsibility and accountability for a specific phase of health care, such as a hospitalization, ICU stay or period of rehabilitation.	Attending Prescriber, Encounter Prescriber
Most Responsible Practitioner	The health practitioner who has responsibility and accountability for the specific treatment/procedure(s) provided to a patient and who is authorized by Alberta Health Services to perform the duties required to fulfill the delivery of such a treatment/procedure(s) within the scope of his/her practice.	Attending Prescriber, Encounter Prescriber
Hospitalist	Fully licensed family physicians and medical staff members participating in the AHS Hospitalist Program at an adult acute care site or fully licensed pediatrician participating in the Pediatric Hospitalist program at the Alberta Childrens Hospital.	Attending Prescriber
Physician Assistant	A non-physician graduate of an accredited Physician Assistant training program, registered with the CPSA, who always works under supervision of a physician although not necessarily in the same room as the supervising physicians.	Authorized Prescriber
Physician Extender	Resident physicians (trainees) who have completed a year of training and both parts of the Medical Council of Canada qualifying examination, have a College of Physicians and Surgeons of Alberta license endorsement, increased insurance and have been credentialed by AHS medical affairs	Trainee Prescriber

Label	Description	CIS Mapping
	through a Non-Appointed Medical Staff Privileges process.	
Clinician	Any person who provides health care goods or services directly to patients, inclusive of all health care workers (physician, nurse, allied health, etc.); as opposed to being engaged in health care for other purposes, such as research or administration. A generic term that should not connote any particular profession, provider or competency level.	This term has limited utility for CIS roles, but can distinguish between those directly involved in the provision of clinical services; as opposed to support staff, research staff, etc. Ordering clinician, Order communicating clinician.
Clinical Assistant	International Medical Graduates (IMG) who do not qualify for independent practice in the province of Alberta who are employed by AHS to provide general, supervised bedside coverage in inpatient units under the Alberta Clinical and Surgical Assistant Program (ACSAP). All clinical assistants are licensed under the College of Physicians and Surgeons of Alberta limited practice registry.	Authorizing Prescriber
Clinical Associate	Independently licensed physician and member of the AHS Medical Staff with privileges who works alongside a specialist, most often a surgeon, to manage the comorbidities of patients. Can be a most responsible physician.	Attending Prescriber, Encounter Prescriber, Authorizing Prescriber
Nurse	This protected title (no modifiers) implies nurses regulated by the Alberta Health Professions Act, inclusive of registered nurses, nurse practitioners and certified graduate nurses.	Ordering clinician, Order communicating clinician
Nurse Practitioner	A registered nurse who has advanced nursing knowledge, skills and proficiency providing defined medical services to designated populations. Nurse Practitioners must be registered, have a masters degree in nursing, complete a graduate nurse practitioner certificate and be registered with both the Alberta Association of Registered Nurses (AARN) and the Extended Practice Roster of the AARN.	Prescriber (limited)
Allied Health	The AHS Allied Health Professional Practice and Education portfolio, defines Allied Health by member disciplines: audiology,	Prescriber (limited)

Label	Description	CIS Mapping
	<p>occupational therapy, physiotherapy, psychology, recreation therapy, respiratory therapy, social work, speech-language pathology, spiritual care, and therapy assistant. Providers from these disciplines work across service sectors and the continuum of care.</p>	