

## From WhatsApp to EMRs: Real-World Experiences Implementing Digital Messaging Tools in Client Services

**Project purpose:** to support the SEND (Supports to Engage Newcomers Digitally) project led by ACCES Employment and funded by IRCC by documenting practical implementation experiences with digital messaging tools like WhatsApp, Telegram, SMS/texting, and Messenger.

**The goal:** to build knowledge and capacity for settlement organizations to use digital messaging technology in their direct client service work by creating actionable resources rather than just another report

**10 interviews** were conducted.

**4 sectors** were represented.

1. Healthcare/Medical (3 organizations)
2. Financial services (1 organization)
3. Employment services (1 organization)
4. Social services / Non-profits:
  - Community services (1 organization)
  - Newcomer services (3 organizations)
  - Volunteer organizations (1 organization)

**10+ digital messaging tools** were discussed:

### Health care patient data platforms:

1. MyChart - asynchronous lab reports and scheduling
2. Various EMR systems (Cisco, Telus) includes automated scheduling and reminders

### Proprietary platforms:

3. Bank client support asynchronous chat
4. eLearning platform (Disco) with group chat, file library, resource sharing
5. HARTs proprietary platform with SMS - waitlist management for 200K clients
6. Proprietary Client Management system with SMS integration

### Free or enterprise licensed tools:

7. WhatsApp - group and individual information sharing, reminders and non-confidential chat
8. Slack - internal volunteer coordination and communication
9. Microsoft Teams - internal staff communication and collaboration
10. WeChat - used for Chinese community outreach
11. Instagram - one-way communication for service information

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In summary, success depends on

1. matching tools to specific organizational needs
2. maintaining flexible multi-channel approaches
3. recognizing that effective implementation requires comprehensive change management, realistic budgeting, and sustained commitment to training and support.

### Key Findings: Most critical success factors

1. **Training and ongoing support are paramount.** Six organizations emphasized that interactive, live training with opportunities for questions significantly outperforms pre-recorded materials, and staff need sustained support beyond initial rollout.
2. **Change management proves equally crucial.** Four organizations identified that mandatory adoption backed by clear leadership commitment and demonstrated benefits drives success more effectively than optional implementations.
3. **Client-centered tool selection is essential.** Three organizations emphasized choosing platforms clients already use and are comfortable with, rather than organizational preferences—particularly important for vulnerable populations including seniors, refugees, and those with limited digital literacy.

### Other findings

- **Budget for implementation realities.** Organizations should plan for ongoing monthly costs and extended training needs that continue well beyond the initial setup, with full implementation typically taking months rather than weeks to complete.
- **Hybrid communication approaches are necessary.** In the people-serving sector, it's important to maintain traditional methods (phone, email) alongside digital tools, recognizing that digital solutions complement rather than completely replace conventional approaches. Maintain formal platforms for sensitive document sharing.
- **Population-specific considerations:** Digital literacy varies significantly across populations. Three organizations noted adoption challenges with seniors, rural populations, and refugee communities who face particular barriers and require additional support. Platform selection should be driven by client demographics—youth prefer WhatsApp and Instagram, Chinese communities use WeChat, while adults may prefer Facebook Messenger.
- **In all social service examples, staff primarily use computers** to engage with clients during work hours, as work phones may not be provided by the organization.
- **Evaluation is lacking.** Very little evaluation of tool adoption occurs outside of waitlist management tools and qualitative feedback. Security and privacy requirements, particularly in healthcare

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settings, necessitate robust compliance measures even if they create additional user steps. Organizations should avoid AI tools without transparent training data and bias matrices.