Health Information Exchange and Management: An EU/ Irish Perspective

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- President European Association of Hospital Managers
  - 25 Member Countries

- Group Chief Executive Officer, South/Sou Hospital Group, Ireland

EAHM Objectives

- Collectively represent the European Hospital Management Profession

- Promote professional competence and responsibility

- Aim of our members is to develop and value our workforce to deliver the best possible care and services to people who depend on them

- Foster culture that is honest, compassionate, transparent and accountable

- Manage resources that deliver best health outcomes, improves patient experience and demonstrates value for money

- Influence legislation

- Integral to the construction of a Social Europe

Irish Health Service Executive

HSE:

Health Service Executive

Community Health Organisations

Hospital groups
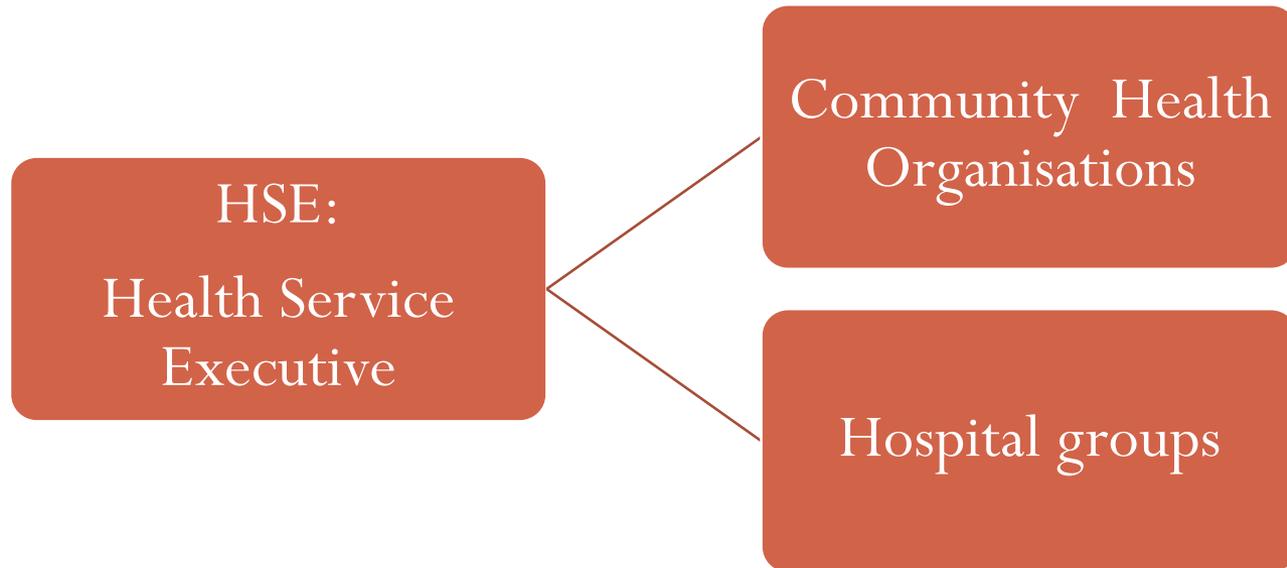
Community Healthcare Organisations

The nine Community Healthcare Organisations are outlined below:
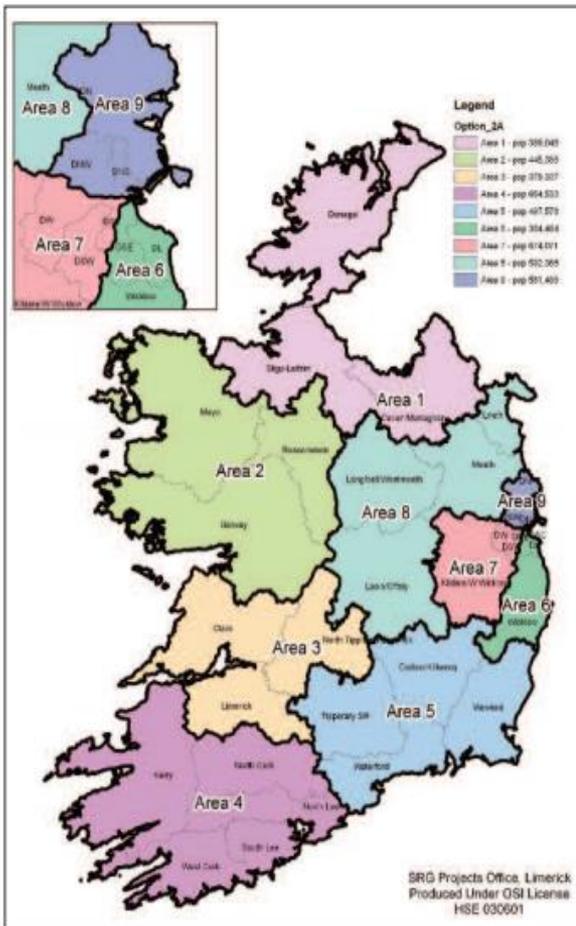
Area 1 - *Population 389,048*
Donegal LHO, Sligo/Leitrim/West Cavan LHO and Cavan/Monaghan LHO.

Area 2 - *Population 445,356*
Galway, Roscommon and Mayo LHOs

Area 3 - *Population 379,327*
Clare LHO, Limerick LHO and North Tipperary/East Limerick LHO

Area 4 - *Population 664,533*
Kerry LHO, North Cork LHO, North Lee LHO, South Lee LHO and West Cork LHO

Area 5 - *Population 497,578*
South Tipperary LHO, Carlow/Kilkenny LHO, Waterford LHO and Wexford LHO

Area 6- *Population 364,464*
Wicklow LHO, Dun Laoghaire LHO and Dublin South East LHO

Area 7 - *Population 674,071*
Kildare/West Wicklow LHO, Dublin West LHO, Dublin South City LHO and Dublin South West LHO

Area 8 - *Population 592,388*
Laois/Offaly LHO, Longford/Westmeath LHO, Louth LHO and Meath LHO

Area 9 - *Population 581,486*
Dublin North LHO, Dublin North Central LHO and Dublin North West LHO

• CHOs provide a broad range of services outside of the acute hospital system and includes Primary Care, Social Care, Mental Health and Health & Wellbeing Services.
• These services are delivered through the HSE and its funded agencies to people in local communities, as close as possible to people's homes.

Hospital Groups

There are 7 Hospital Groups each managed by a Group Chief Executive Officer as follows;

1. Ireland East Hospitals Group
2. RCSI Hospitals Group (Dublin North East)
3. Dublin Midlands Hospitals Group
4. University of Limerick Hospitals (Mid-West)
5. South/South West Hospitals Group
6. Saolta University Health Care Group (West)
7. Children's Hospital Group

NEW HOSPITAL GROUP BOUNDARIES
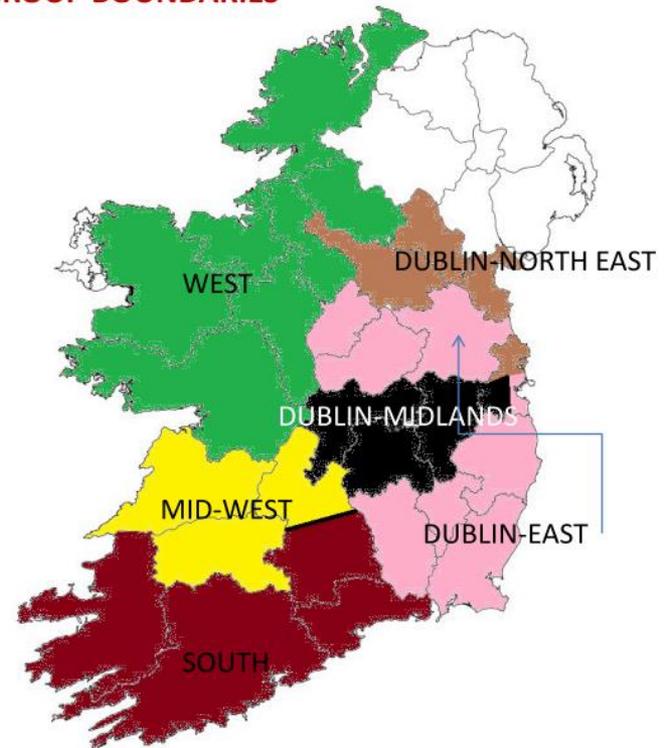
South /South West Hospital Group

	2016	Change in Population 2011-2016
	Persons	%
Cork City	125,622	5.4
Cork County	416,574	4.2
Kerry	147,554	1.4
South Tipperary	89,071	0.7
Waterford City	48,369	3.5
Waterford County	68,032	1.4
S/SWHG TOTAL	895,222	3.3

One of Seven Hospital Groups, but Delivering Healthcare to One in Five of the Population

Question 1

- "Technology in the health service should be considered like oxygen, essential & invisible"
- Do you agree?

- Yes
- No
- Don't know

Health Innovation Hub Ireland

- In 2015 UCC formed a consortium to bid for the National Hub and were one of three consortia who participated in the bid process

- The UCC led bid was chosen
  - 4 academic partners
  - 3 associated hospital groups
  - 3 Clinical Research Facilities

- Health Innovation Hub Ireland was officially launched on September 26th 2016
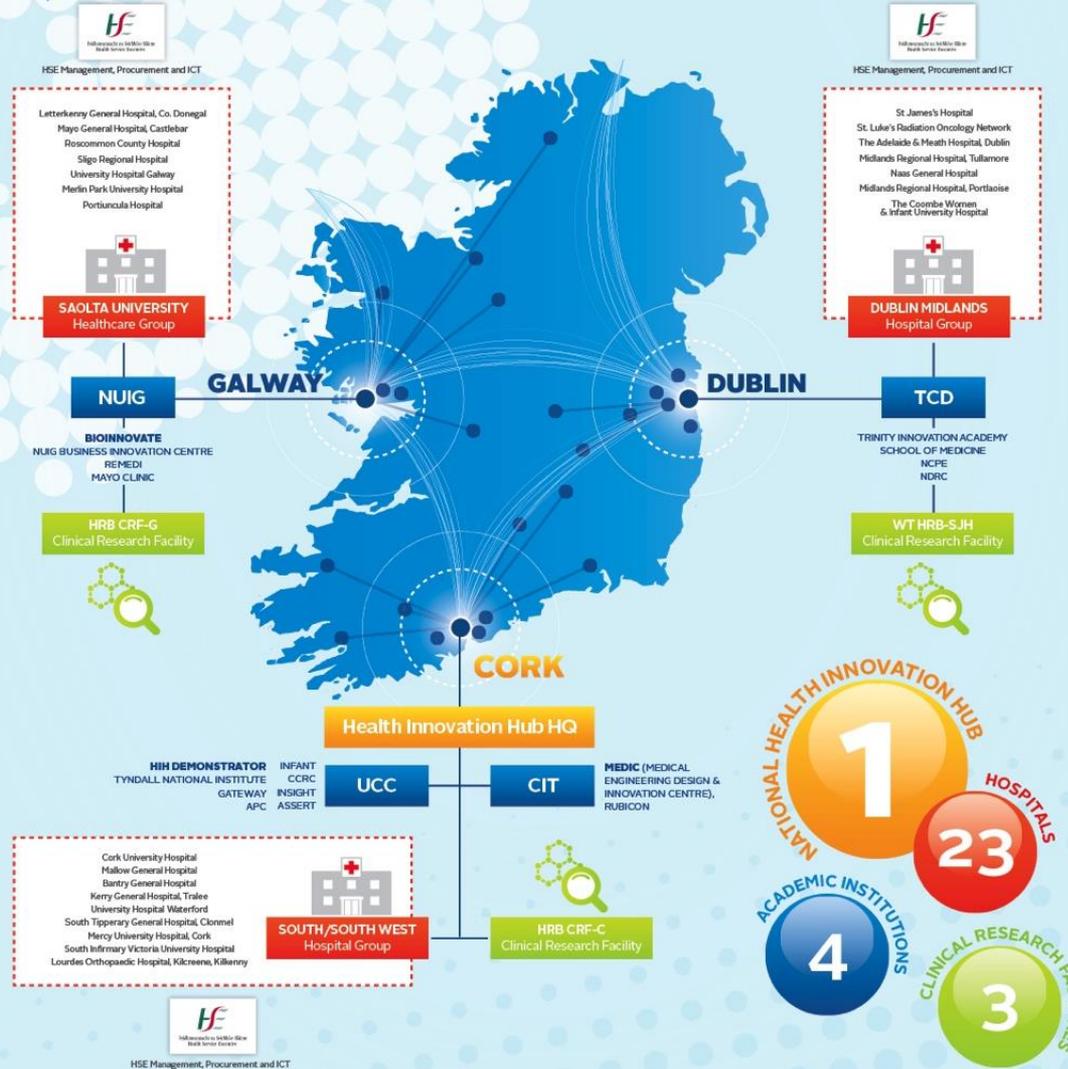
What is the National Electronic Health Record?

eHealth Blueprint

4 Components

National Shared Record

Community Operational Systems

Acute Operational Systems

Integration

GP Systems

Pharmacy

Private Hospitals

Individual Health Identifier
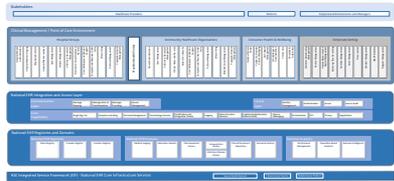
Moving from paper records locked in organisations to a digital patient record shared across care settings

The "glue" that binds all this together and maintains integrity and security across the system

Examples:
- *Single MPI*
- *Scheduling*
- *Clinical Notes / Records*
- *Screening & Surveillance*
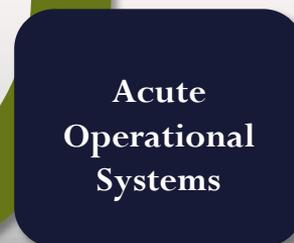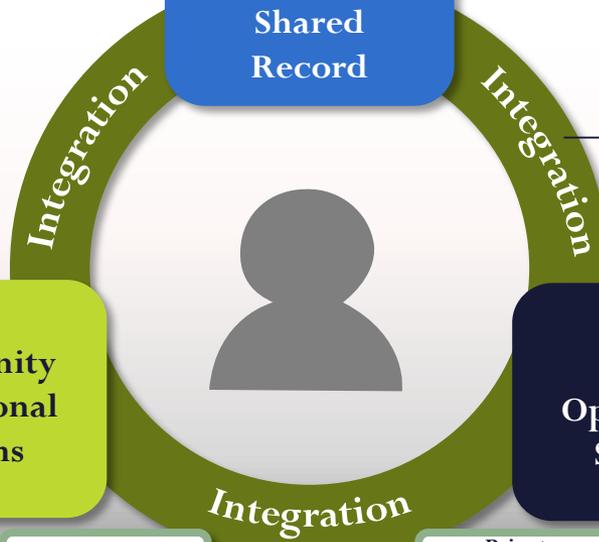
Examples:
- *Order Communications / Results Reporting*
- *Medicines Management*
- *Clinical Notes*

Other healthcare providers will access and contribute to the National Shared Record through the Integration Capability

The Individual Health Identifier Programme is a key enabler that allows information to be shared about a patient

What is the National Electronic Health Record?

> The National EHR is a fundamental cornerstone for the delivery of high quality, comprehensive and accurate information in a timely manner for the provision of patient centred, effective and efficient care

The National EHR comprises:
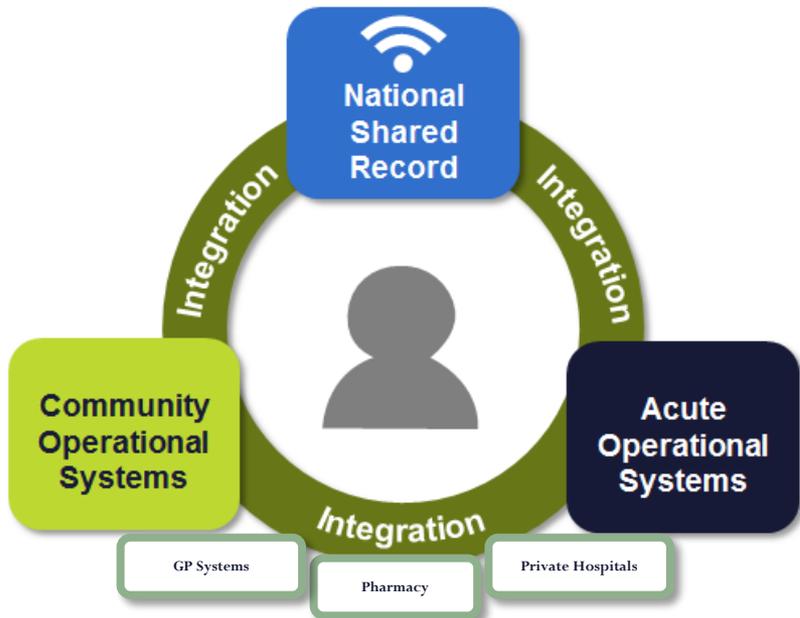
What does the National EHR do?

- Transforms patient experience
- Delivers greater patient safety and more effective care
- Drives efficient delivery of health services
- Makes the wider reform programme possible:
  - Underpins integrated care
  - Provides the information for proactive health and wellbeing initiatives
  - Provides the operational systems to realise CHO's and Hospital Groups
  - Captures accurate information on activities that show the true cost of treating a patient

CUMH leads the way as Irish system goes digital

Monday, December 05, 2016

Benefits are varied and context specific

> *A variety of studies provide evidence of benefits in specific care settings, disease groups, conditions, and care processes*

Patient Experience

↓ **7%** reduction in inappropriate testing
↓ **37%** reduction in preventable hospitalisations
↓ **20%** reduction in LOS (Sepsis clinical pathway)

Patient Safety & Care

↓ **32%** reduction in Sepsis mortality (early intervention)
↓ **76%** reduction in errors in discharge summaries
↓ **68%** reduced likelihood of medication errors

More Efficient Delivery of Health Services

↓ **9.66%** cost per patient (advanced EHR hospitals)
↓ **28%** in transcription costs (Primary Care)
↓ **11%** reduction in drug costs

100,000 yearly inpatient adverse drug events could be avoided through Computerised Physician Order Entry and Clinical Decision Support. This would in turn free up **700,000 bed-days yearly**, an opportunity for increasing throughput and decreasing waiting times, corresponding to a value of almost **€300 million**.

— **Gartner**
*eHealth for a
Healthier Europe*
2009

What are the next steps?

The key next steps are:

- Gain agreement on this strategic direction

- Agree the governance relationship with SRG

- Mobilise the programme fully with active governance and stakeholder engagement to gain broad support

- Develop national requirements and standards that underpin the National EHR – resources will be required across the health system to help with the definition

- Conduct readiness assessments in CHO's and HG's to identify and progress any actions required to ensure everyone is on a firm footing for success

- Create outline and full business cases for each of the four elements in order to secure funding

- Commence procurement activities

Data To Information – SNOMED CT

- **SNOMED-CT National License**

  1. May 2014 HIQA recommends adopting SNOMED CT as National Clinical Terminology for Ireland

  2. UK Visit April 2016 - NHS Contacts UK Leeds

  3. License Purchased October 2016

  4. Stakeholder engagement =>

     MedLIS (Medical Laboratory Information System) /

     MN-CMS (Maternal Newborn Clinical Management System) /

     Priorities (start small build up)

 5. Established a virtual SNOMED CT National Release Centre

Data To Information – SNOMED CT

NRC responsibilities

Serve as primary contact point for IHTSDO regarding all aspects of management of SNOMED CT*.

Ensure that deployment of SNOMED CT* conforms with IHTSDO standards.

Establish and maintain processes for distribution and licensing of SNOMED CT.

National Release Center (NRC)

Document, report and support requests for proposed updates and enhancements to SNOMED CT*

Serve as primary contact point for Affiliates.

*SNOMED CT or any Terminology product delivered by IHTSDO and used in the Member country.

CEF Open NCP

Connecting Europe Facility for eHealth Digital Service Infrastructure Overall Architecture
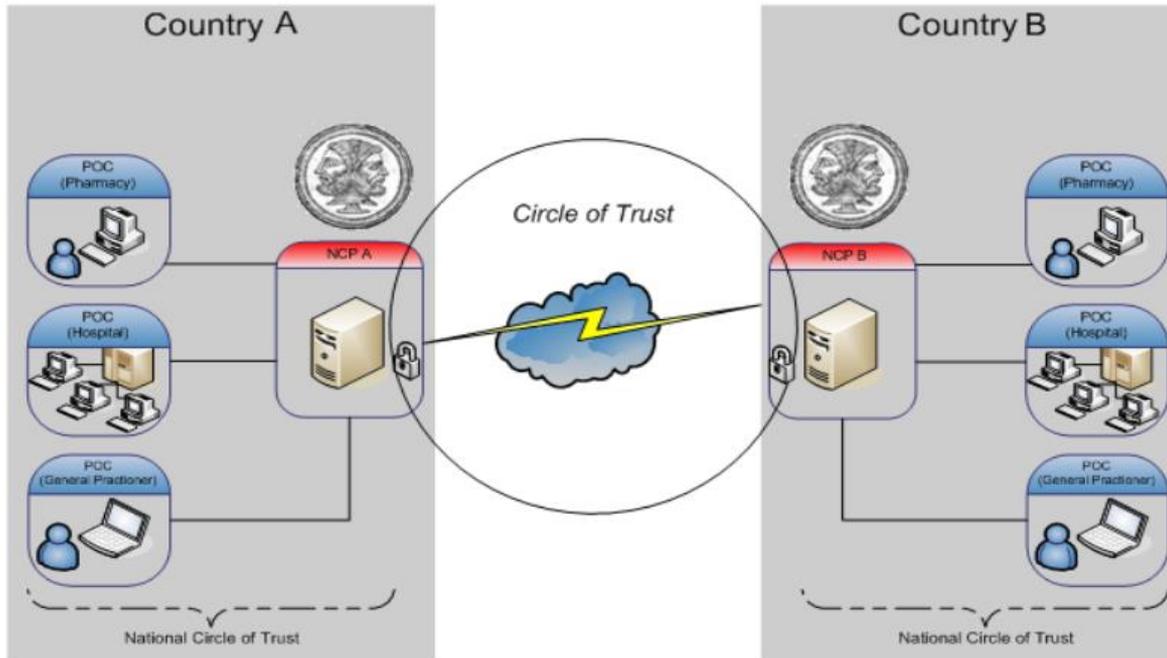
Clinical Document Exchange

- EU Directive 2011/24/EU

to ensure access to safe and   high-quality healthcare;

to achieve a high level of trust and security;

to enhance the continuity of care for individual patients.

- Ireland Go Live Wave 3 2020 as Country A

- ePrescription and Patient Summary

- SNOMED CT is the Master Value Catalogue Coding used

Ireland's European Electronic Clinical Document Exchange

On the 26th of January 2017 at the OpenNCP Bootcamp in Brussels, Ireland exchanges it's **FIRST** clinical **ELECTRONIC** document within the European Union.

Question 2

- "We are using the right approach to moving our Healthcare IT forward and to where it needs to be"

- 1 – Strongly Agree

- 2 – Agree

- 3 – Neither agree nor disagree

- 4 – Disagree

- 5 – Strongly Disagree