



Personal Electronic Health Records – From Research to People's Health



Jean Roberts

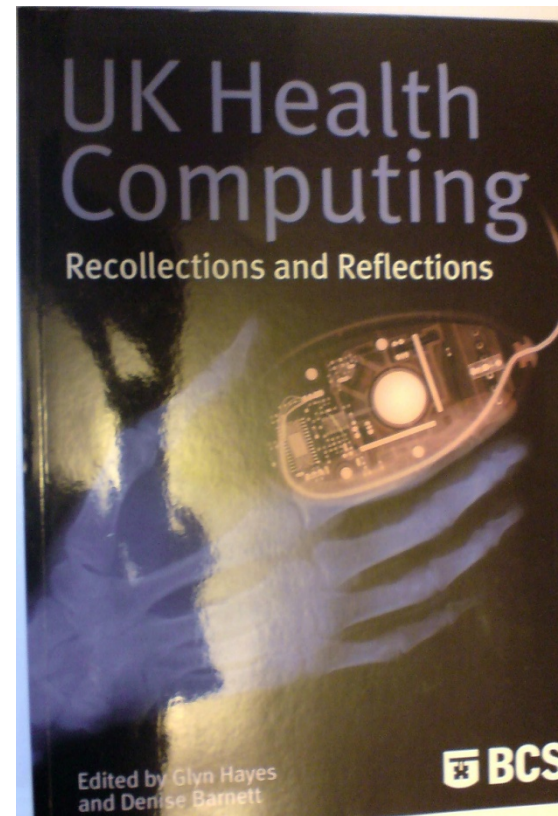
University of Central Lancashire

British Computer Society Health Informatics
Forum

UK Council for Health Informatics Professions

UK Health Informatics Faculty

Apprentice 'Silver Surfer'





CURRENT SITUATION - UK

Web-based Access

- Operational system available to 50%+ of PHC market
- Patients trained to look at their records – open and transparent
- Practice website - responsive to additional information
- Linked to ‘best’ health information sources and personal HealthSpace
- Environment is a ‘Partnership of Trust’
- Need HI professionals to create infrastructure – robust, secure, flexible

Smart Cards

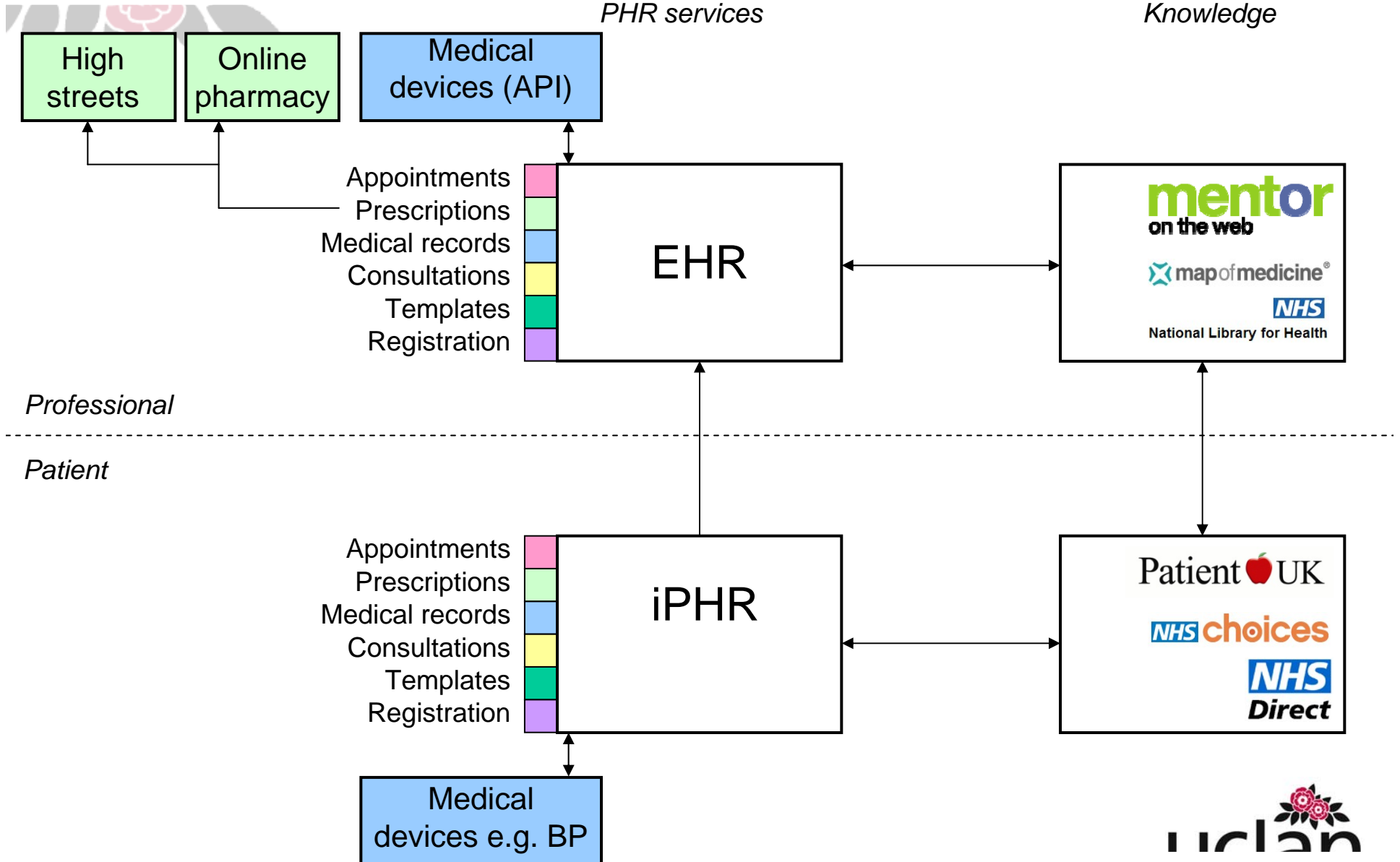
- Social networking used by special interest / clinical condition groups
- Smart cards – held by ‘worried well’ with disposable income – cost for each access and update
 - Challenge is to ‘harness commercial contributions without compromise to clinical outcomes and patient confidentiality’
- Overall – NHSCFH NPfIT :
 - Some successes but some aspects very late
 - opening to new solution providers
 - Establishing standards for interworking not standardised products
 - Cross-roads in November 2009
 - Detailed Care Record and Summary Care Record accessible through the Spine
 - Focus on local implementation with central support
- Other home countries – same objectives, different development and delivery models



Example – Electronic Health Record – individual Personal Health Record (ref. www.emis-online.com)

PHR services

Knowledge





TENSIONS EXIST

‘NHS must be prepared to partner with commercial development .. without compromise to clinical outcomes and patient confidentiality’ (BCSHIF Thought Leadership Debate, 2009)

- 4% said looking at personal health records made them more anxious
- 60% GPs can give patient access, but few do yet
- Strategic fluidity tends to generates ‘blight’

- Web-based generic informative health content is of variable quality
- Self-diagnosis : ‘cyber-condria’ or empowerment?
- Prediction : 2 years to on-line push of personal recommendations re lifestyle management

- PARTNERSHIP OF TRUST necessary between clinicians and patients
- Areas of liability unclear – records sharing, contextualisation, data quality



www.htmc.co.uk



online services
out of hours

Haughton Thornley Medical Centres



NHS
0845
Direct 4647

Haughton Vale Surgery | Thornley House Medical Centre | Patient Access | Blog | Staff Access

Blog by Richard Smith, ex-editor of the British Medical Journal on patient access to health records - Learn how other patients are benefiting from the service and how YOU can too - share YOUR experiences with others throughout the world - find out more

Sun 10 May 2009

- Online services**
- ▶ Book GP appointments
- ▶ Order repeat prescriptions
- ▶ Access your health record

Old Access to Records Viewer



Top 10 reasons to access your health records on-line

Do you have any thoughts on Records Access?

Click Here to take survey



Welcome... Through this website, patients and their families of Haughton Vale and Thornley House Medical Centres can gain access to health information and services available from your Practice - online. **find out more?** Here is a link to a video about what is available on the practice website too.

Direct access to online services

In addition to the wide range of health information on this site, Haughton Vale and Thornley House patients can also use the site to book appointments to see a GP and order and check the progress of repeat prescriptions.

Health record access

Our patients can also register to gain secure access to their full GP electronic health record that the Practice maintains. Electronic health records can be accessed at any time and anywhere that you have access to the internet. If you are interested in taking advantage of this facility as many of our patients have already done then please speak to a member of staff at your Practice who will be only pleased to help and provide you with details of how to apply for a username and password. **We have now produced a video which shows how easy it is for you to book an appointment on-line, order repeat prescriptions on-line and even access your records. Watch Dr Hannan show you how to do it and also see some of the situations where patients have benefited from access to their records. Click here to see more details.**

You can now see the latest information on how many patients have signed up for access to their full GP electronic health record by clicking [here](#).

Haughton Vale
0161 336 3005
Haughton Vale opening times

Thornley House
0161 367 7910
Thornley House opening times

Out of Hours
0161 785 0805
In an emergency dial 999

- Local health resources**
- ▶ Accident & Emergency
 - ▶ GP Out of hours
 - ▶ Hospitals
 - ▶ Pharmacists
 - ▶ Dentists
 - ▶ Opticians

information provided by



ROLE OF THE HEALTH INFORMATICS PROFESSIONAL



- Build the infrastructure and robust solutions that are fit for purpose; breaking down the ‘digital divide’
- Accredite new applications, functionality and tools
- Handle sensitive data ethically, legally and monitor quality
- Work to Code of Conduct and stay street-sharp and ‘fit to practice’
- Position solutions to facilitate :
 - NHS which helps people to stay healthy
 - Health and social welfare (and lifestyle management) convergence
 - Ownership and use



PATIENT INVOLVEMENT

- ‘Democratisation of Healthcare’ – will need changes in attitudes and dialogue in common language
- Be sensitive to pace of change
- Learn to evaluate quality not just cyber-forage
- Understand implications of consent and power of patient data
- Expert patients – self-testing, idiosyncratic observations
- LTC need *‘choice of greater support, information and advice, allowing them to play a a far more active role in managing their own condition in partnership with their clinicians’* (Darzi)



ADDITIONAL CLINICIAN CONTRIBUTIONS

- Recognising change to dr : patient paradigm
- Generation of Patient Information : e.g. www.patient.co.uk and www.mapofmedicine.com
- Position for shared treatment planning and more partnerships – improving adherence
- Recognise the complex duty of care re ‘discoverable data’
- Work to maintain quality when multiple agencies are inputting, interpreting PEHR content



NEXT STEPS



- Greater roll-out of operational solutions
- Birth to Death record goal - more data capture sources
- Incorporate measurement of preventative medicine
- Shift from target driven scenario to quality environment
- Demonstrate more TRUST
- Work on 'Health Dashboards' for patients
- Harness more Web 2.0 solutions
- Develop a mature professional brand for 'HEALTH INFORMATICS'
- Listen to each other ... and speak clearly!