

The 'Bottom-Up' Approach to EHR Development: A Focus on Local Healthcare Pathways

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EPICOG: Electronic Patient Information Crossing Organisational Boundaries

- The need for sharing EHRs exists most strongly along the healthcare pathways of local health economies.
- How well do the e-health systems support the crossing of organisational boundaries?

Local Health Economies

- Walsall
- Northamptonshire

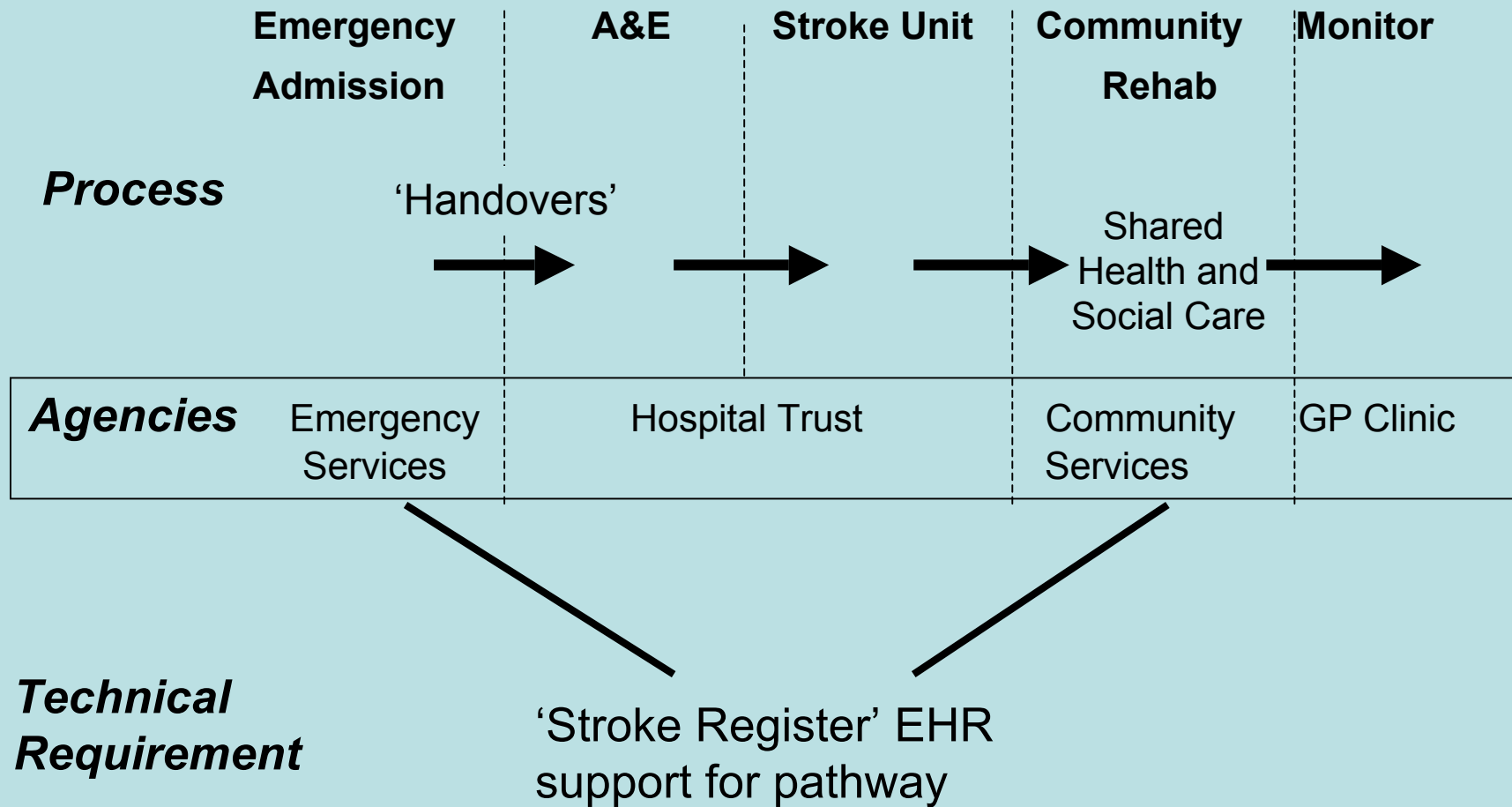
Pathways

- Stroke
- Diabetes
- Frail Elderly
- Unscheduled Care
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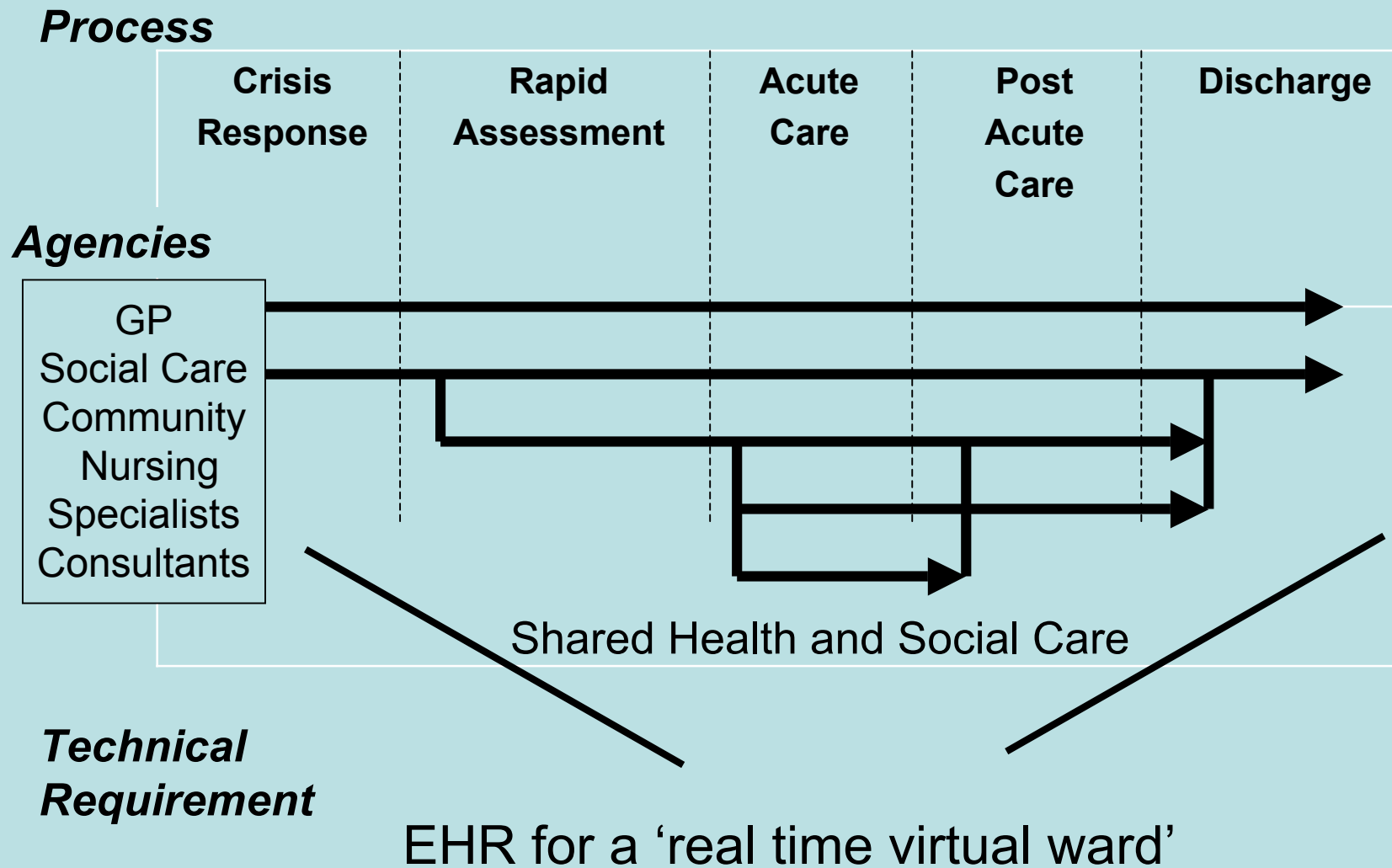
The views and opinions expressed herein are those of the author and do not necessarily reflect those of the NIHR SDO programme or the Department of Health.'

The Stroke Pathway



The Frail Elderly Pathway

keeping 'frequent flyers' out of hospital



Conclusions For Systems Development

Effective systems:

- Are different for each pathway
- Are multi-agency
- Are socio-technical
- Evolve over time (maturation and turbulence)

EHR Design has to be:

- Local to the pathway
- Integrating process, organisation and technology
- The result of IT/Health staff partnerships

The Impact of National IT Systems

Positive

Provide for data sharing and exchange across agencies

Negative

The fallacy that 'One size fits all'

- Limit ability to tailor system to need
- Use inappropriate structures and content
- Exclude some agencies
- Demand inappropriate access rules and governance
- Impede evolution

Levels of Design

(after Greenhalgh et al 2010)

- **Macro (National)**
 - Standards for interoperability
 - Policies for data governance etc
- **Meso (Local Health Economies)**
 - Co-operative agreements and priorities
 - Systems for sharing and exchanging data
- **Micro (Specific healthcare pathways)**
 - Integrating process, organisation and technology
 - Teams of informatics and health care staff
 - Evolving mature ways of exploiting EHRs