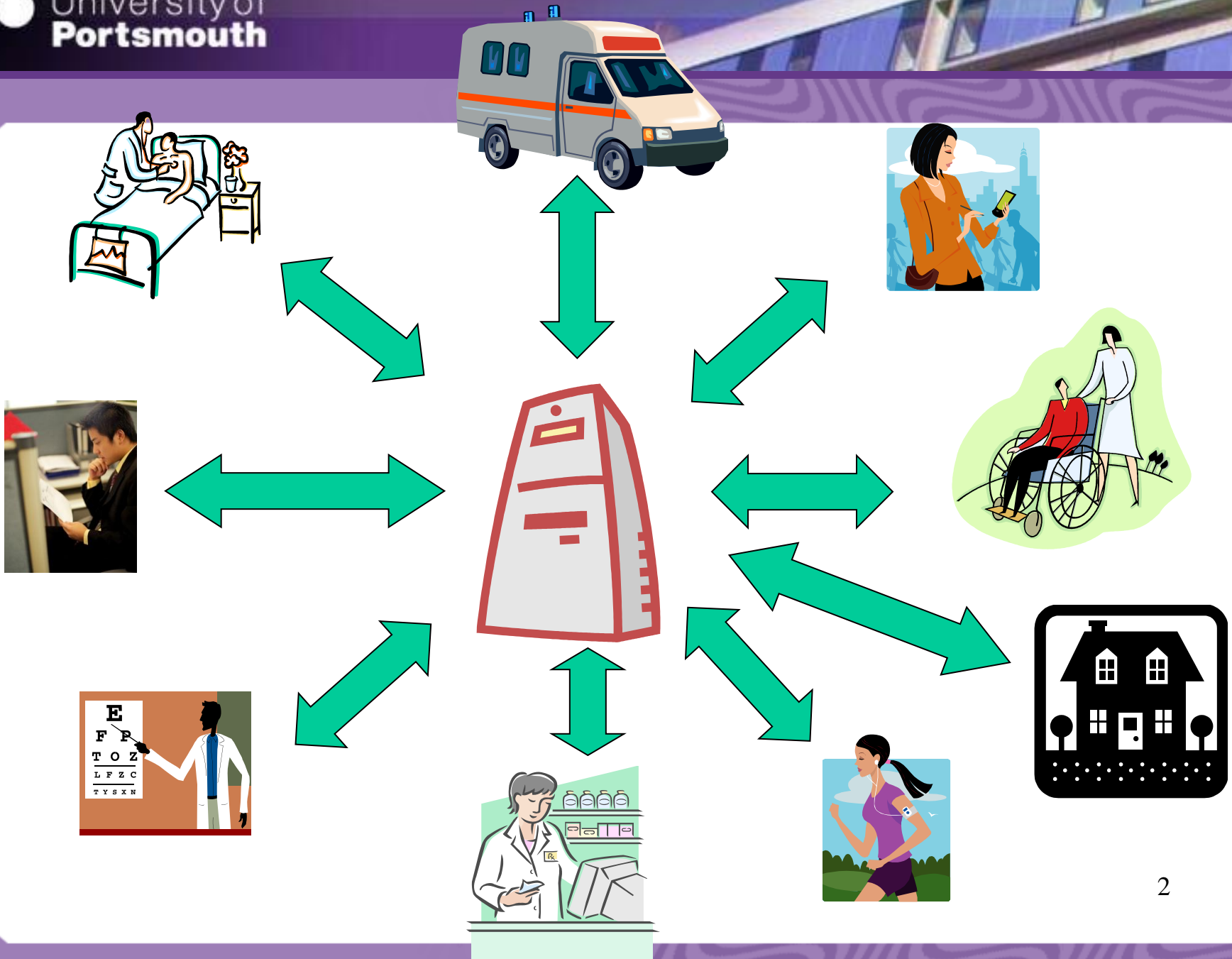


Collecting information near the patient – The CHMI vision

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Sources of information

- Hospital in-patient records
- Hospital out-patient records
- GP and other primary care records
- Out of hours services
- Ambulance service
- Treatment/walk-in centres
- Pharmacies
- Opticians, dentists, ...
- Patient self-testing
- Home monitoring
- Care home monitoring
- Friends and family
- Sport/leisure monitoring
- Workplace monitoring
- Many more ...

What can you do with quantity?

- Population-level analyses
- Monitor lives rather than episodes
- Assess risk
 - mortality
 - morbidity (e.g. bed stays, frequent flyers)
- Specialised/focused to:
 - condition
 - physiological state (incl. age, chronic condition)
 - ? environment

What has changed? 1

- New ways of collecting information near the patient
 - sensors (incl. wearable)
 - mobile IT devices (laptops, PDAs, etc.)
 - mobile IT networks (Wifi, mobile phone networks, etc.)
 - web-based applications
- Richer information can be shared
 - no longer just summaries
 - detail can be shared where previously only summary

What has changed? 2

- Market for better health and care
 - hype cycle
- Partnerships becoming better recognised
 - public/private
 - health/social care
 - professional/patient

Opportunities

- Information contributing to improving processes
 - decision support
 - better care (spot outliers)
 - predict adverse outcome and prevent
- Audit to gain knowledge
 - symptoms
 - diagnosis
 - treatment
 - outcome
- Develop additional information sources
 - Tesco
 - Overseas

Issues

- Integrating data
 - identity
 - provenance (quality)
 - quantity
 - timeliness (for diagnosis or prevention)
 - centralisation (actual no, virtual yes)
- Confidentiality
 - Big Brother
 - obtaining consent
 - implementing access controls
- Many patients assume that their records are already integrated

Observations 1

- Quality comes from closing the feedback loop
 - patient is best quality checker
 - clinician who records information is next best
 - make quality part of the process

Observations 2

- **Self management**
 - patient access to records
 - patient has best view of their care pathway
 - patient in control
 - patient does more of the "work"

Observations 3

- Is the NHS the best organisation to develop radically new services?
 - people inside it think so
 - Government isn't so sure!

What's your view?