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| Lead topic: HSE National Electronic Health Record | Sub-topic: | Contact: Mary O'Donohue Ext: 7076 |
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FAST FACTS

- Initial discussions on the Business Case for the development of a national Electronic Health Record (EHR) have taken place between the Department of Health, the HSE and the Department of Public Expenditure and Reform.
- The Business Case envisages that the Record would comprise four components:
 1. The National Shared Record
(National portal containing a summary of patient key care data))
 2. Community Operational Systems
(e.g. Patient Admin System; Referral Mgt.; Population Health Mgt.; Test Results; Clinical Notes and Records)
 3. Acute Operational Systems
(e.g. Patient Admin System; Order Comms; Medication Management – ePrescribing and ePharmacy; Clinical Notes and Records)
 4. An Integration Layer

Q&A'S

What will be the benefits of an EHR?

- The benefits include
 - the availability of more integrated and up-to-date information to both the clinicians and the patients resulting in safer decision making;
 - a decrease in the number of avoidable adverse effects;
 - greater visibility of patient flow; and
 - the greater use of metrics across the Health Service.

What qualitative benefits will arise?

- Qualitative benefits include
 - a more proactive management of care including for the acutely ill;
 - empowering patients through the provision of care information;
 - greater multidisciplinary collaboration;
 - safer handover of care between healthcare professionals;
 - improved audit quality and quality control; and
 - more knowledgeable research into population health and clinical interventions.

What are the key Risks and Dependencies

- The primary risks relate to
 - the scale and complexity of the Programme;
 - the financial and personnel resourcing requirements including the availability of the right 'mix' of clinicians, technical architects and configuration experts;
 - the management of different solution streams and a range of suppliers.

What are the Estimated Costs of a National EHR

- Estimated costs based on a five-year deployment model are in the range €647 - €875 million
- Estimated costs based on a nine-year deployment model are in the range €609 - €824 million

What Additional Resources will be required during deployment?

- The number of resources required to support the chosen deployment model will vary during the lifetime of the Programme.
- The HSE estimates that a peak of 468 full time additional resources will be required if a five-year deployment option is selected
- The HSE estimates that a peak of 409 full time additional resources will be required if the programme is rolled out over a nine year period.
- The staffing complement will comprise clinical specialists, technology specialists and administrative staff.

