

4. EHR

GENERALISING THE USE OF STATE-OF-THE-ART ELECTRONIC HEALTH RECORDS

Background and scope:

The deployment of state-of-the-art EHRs is *the* key transformative intervention to obtain a visible jump in quality of care. To be transformative, state-of-the-art EHRs have to be designed to:

1. Benefit quality of care for patients and professionals and help professionals / institutions organise their work (facilitate continuity -over life course and between levels-, coordination and affordability, package definition, gatekeeping, rational e-prescription and between-provider communication):
 - a. Improve the quality, safety, and efficiency of care while reducing disparities
 - b. Engage patients and families in their care
 - c. Promote public and population health
 - d. Improve care coordination
 - e. Promote the privacy and security of EHR's
2. Demonstrate achievement of "meaningful use" objectives as key to qualifying providers for incentives;
3. Generate the KPIs for the Health Sector Performance Information system, i.e. provide information useful (i) for managing public purchasing of health care and (ii) for informing sector stewards and the public on trends, progress, critical issues in the whole system.

The *EHR* project aims at launching the generalisation of state-of-the-art EHRs as an instrument to transform quality of care and system intelligence.

Expected impact in terms of policy support⁴:

MoPH decision-makers and key stakeholders are provided with the technical and institutional elements to decide on an appropriate strategy for rolling out EHRs across the health sector.

Work-packages:

1. Review of (i) international experience and (ii) status quo in Lebanon (inventory of systems in use or development within private and public services): Literature review; expert seminar; study tour focusing on both systems and deployment strategies in complex contexts (It? Pt? Dk? Be?), EU and US regulation.
2. Preparation of strategic choices for deployment:
 - a. Propose Meaningful Use Criteria set for decision on a national normative framework that certified systems need to respond to;
 - b. Propose regulatory frame for digital authentication processes and alignment with international interoperability frameworks (eHealth European Interoperability Framework eEIF) that certified systems need to respond to;
 - c. Propose costed deployment strategy:
 - i. For public facilities and National Primary Health Care Network: availability of open source EHR and conditions for customisation and certification;
 - ii. For private hospitals with accreditation/contractual arrangements and systems in place: certification of compliance with Meaningful Use Criteria, generation of required KPIs and interoperability; For private hospitals with accreditation/contractual arrangements but without systems in place: alignment to best practices;
 - iii. For private clinics: NSSF/MoPH incentives for registration of patients with certified instruments.
 - d. Policy mapping of stakeholders regarding the deployment strategy options.

⁴ Corresponding MoPH-EU-WHO HEALTH SYSTEM RESILIENCE PROJECT output: "Processes and tools to reorient service delivery in place"