

CONFERENCE ABSTRACT

eHealth advances in support of people with complex care needs: Case examples from Canada, Scotland and the United States.

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Carolyn Steele Gray¹, Stewart Mercer², Ted Palen³, Brian McKinstry⁴, Anne Hendry^{2,5,6}

1: Lunenfeld-Tanenbaum Research Institute, Sinai Health System, Canada;

2: University of Glasgow, Scotland;

3: Colorado Permanente Medical Group and Kaiser Permanente Institute for Health Research, United States;

4: Centre for Medical Informatics, Usher Institute, University of Edinburgh, Scotland;

5: International Foundation for Integrated Care (IFIC), United Kingdom;

6: University of the West of Scotland, Scotland

Introduction: Information technology in health care, also referred to as eHealth technology, may offer a promising solution to the provision of better care and support for people who have multiple conditions and complex care needs and their caregivers. In particular eHealth technologies such as electronic medical records, telemonitoring systems, web-based portals and mobile health (mHealth) can enable information sharing between providers, clients and their families to improve integration of care across health and social care systems.

Description of policy context and objective: eHealth technology often acts as an enabler of improved care delivery, rather than being an intervention per se. But how are different countries seeking to leverage adoption of these technologies to support people who have chronic conditions and complex care needs? Through a comparative cross-case analysis of Ontario, Canada, Scotland and Kaiser Permanente Colorado in the United States the strengths, weaknesses, opportunities, threats (SWOT) with regard to adoption of technology to address the challenge of multi-morbidity and increasing complexity is explored.

Targeted Population: The focus on this presentation is on adoption of technologies that can best support care delivery across health and social care systems for persons with complex chronic disease and disability. This population can be characterized as having multiple chronic conditions (multimorbidity) as well as social/contextual challenges which make management of their health difficult.

Highlights: (innovation, impact and outcomes) While each jurisdiction presents a unique policy context and health and social care system environment, there are a number of key similarities. Common strengths include: increasing governmental and organizational commitment and investment in technology, new innovations and system capabilities being adopted and explored, and a general increased awareness of the challenge of complexity and the need for person-

centred solutions. This final strength also marks an important opportunity across jurisdictions for new investment in technologies to support this population.

Although each jurisdiction is poised to leverage eHealth technologies, lack of integration and interoperability between systems used across health and social care systems, as well as a general fragmentation within and between health and social care systems marks a significant shared weakness. Furthermore, lack of sustainable resources, issues with demonstrating value for money, and data privacy and security challenges pose ongoing threats to adoption of new technologies across all three jurisdictions.

Comments on transferability: The comparative analysis presented demonstrates how very different jurisdictions can face similar challenges when seeking to adopt eHealth solutions, suggesting that findings may be transferable to other countries.

Conclusions: The cross-case analysis suggests a series of recommendations for organizational and governmental decision-makers with regard to adopting eHealth technologies to support persons with complex care needs. Supporting interoperability, adopting user-centred design and development approaches, and adoption of national-level strategies are identified as important enablers to wide adoption of solutions that can improve care delivery for persons with complex care needs and multimorbidity.

Keywords: ehealth; multimorbidity; panel case report; international comparison
