

Title of Abstract: Implementation of Health Information Exchange Systems: Exploring the Human Factors

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Abstract

Problem: Currently, paper-based documentation are delivered with patients during transfer between hospital to long-term care facilities (LTC).¹ Essential information required to deliver medical care is estimated to be missing in over 90% of nursing home-to-ED patient transitions.² Poor communication at care transitions attribute to 50% of medication errors in hospital and 20% of adverse drug events.³ Inoperability between EMR systems allowing for health information exchange (HIE) between health facilities are not widely established nor adopted in Canada presenting barriers for timely and accurate transfer of relevant patient information during care transitions.^{1,4} This research project aims to collaborate with Project AMPLIFI, an Ontario wide initiative implementing a data integration solution between several hundred hospitals and LTC facilities, enabling HIE between these electronic systems.¹ The benefits of interoperable systems are well studied in the literature however it is estimated 80% of information technology projects in healthcare fail.⁵ There is a paucity of literature examining the implementation of large-scale HIE projects in the Canadian context and the role of change management in promoting adoption and uptake.⁶

Objective: To examine the barriers and facilitators to adoption of large-scale HIE projects within the Canadian context.

Methods: Using an explanatory mixed methods approach^[VP1], a quantitative survey will be administered to examine change management and semi-structured interviews conducted using descriptive qualitative approach.

Implications: To highlight important factors supporting the implementation and long-term sustainable adoption of large-scale HIE projects. Improved knowledge in this area aims to reduce project failures enabling efficient utilization of scarce healthcare resources.

[VP2]

References

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