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Conference Abstract

CONSTRUCTING AN INTEGRATED HEALTH AND SOCIAL CARE ELECTRONIC RECORD IN CATALONIA

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Abstract

Early this year, the Government of Catalonia issued a new Integrated Health and Social Care Plan to promote, lead and participate in the transformation of the social and health care model to achieve a person-centred full integrated care model and deliver comprehensive for high-cost, high-need citizens in order to help to lower costs, enhance quality of care, and improve outcomes.

One of the strategic lines of the Plan is the integration of the health and social care ICT systems. Including actions such as:

- Identification of a minimum of shared data and a common personal identifier as the basis for sharing information of common interest.
- Shared medical and social care record, with the sharing of data of common interest.
- The progress made with the current Catalan Shared electronic health record (HCCC) and the incorporation of platform functionalities should allow the incorporation of a relational space between health and social care, facilitating virtual work and collaboration among clinics, social workers and other welfare professionals. Interprofessional communication environments must be set up to foster this collaborative model (secure messaging, etc.).
- Each model of local social record will be developed with the aim of ensuring a framework of minimum "structured data" that can be subsequently "exchanged" to the shared medical and social history. This requirement must be met by the different providers of information systems in the welfare sector.

The model is based on “person consent”. It has been prepared a server which facilitates data visualization after this person’s consent process.

During this session it will be shortly presented how has been developed this project until now and which are the following steps, but specifically we’ll focus on the Pilot project that is being developed with the Barcelona City council. This project includes many actions at the functional, technical and legal level in order to be able to have shared access to some specific and agreed data from the basic social services department from de Barcelona city council and from the Healthcare providers in 2 districts of the city for the professionals of both systems.

Some lessons learned are the following:

- 1) Legal departments must involved from the beginning but facilitating progress according to law.
- 2) Health and social professionals should be involved to determine progressively minimum packages of health and social information to be shared by each other.
- 3) Another challenging issue is to look for European Social organizations to work jointly with social care sector on social problem standardization and international coding

Keywords

ehealth; shared care; ict; integrated care; innovation

PowerPoint presentation

<http://integratedcarefoundation.org/resource/icic15-presentations>