

Health Information Technology for Care Transition

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Introduction

A recent report released by the Booz Company predicts that in the years to come, the health needs of the Saudi Arabian population will increase tremendously. Saudi Arabia now has a population of 27 million people and with a growth rate of about 3.5 annually. Such growth can only indicate the possible increase in demand and creation of new opportunities in the health sector service delivery. Part of the growing demand will be along the line of using modern technology in health care transition (Barrage, Perillieux & Shediak, 2007).

The Society of American Geriatrics defines care transition as, “A set of actions designed to ensure the coordination and continuity of healthcare as patients transfer between different locations or different levels of care within the same location” (Bond & Coleman, 2010). This definition is further demonstrated by Bates and Bitton who provide an example of care transition as being, ‘..The transfer from the hospital to a rehabilitation facility or from a rehab facility to home (Bates & Bitton, 2010).

The development in technology has advanced the healthcare transition process as medical records can now be stored in electrical formats, compared to the traditional way of handling patients. The Information Technology advancement possesses great improvements in the future in areas such as; enhanced excellence in clinical service provision, the communication process between health service providers and the patients, access of tailor made patients’ content that are meant to suit personal needs and also the cooperation between patients and clinical service providers during the process of self management in conditions deemed to be chronic (PCPCC, 2010).

Despite such promising results, a gap has emerged in the use of technology to enhance care transition. The clinical practices in the care transition processes seem to have isolated the

patient-centered approach. There is the need to borrow a leaf from other areas in the health sector that have implemented successful patient inclusion by using technology in their programs. In fact, a study established that about 12% of patients had serious drug challenges once they were transferred. Researchers recommend the urgent need for interlinked communications among patients, clinical service providers and the medical home officials to keep track of discharged patients. Critical to this communication process will be the use of electronic tools to update patients information for easy tracking by all those involved in the care transition process (American Society of Health-System Pharmacists, 2012).

This leads to the hypothesis that a patient-centered engagement is critical to the success of health information technology in care transition. This study will propose appropriate measures that should be implemented towards the realization of a patient-centered health technology system in transition care. The rationale of this study is to analyze gaps in patient-centered health information systems in care transition processes in Saudi Arabia hospitals. The study will answer the following research questions:

1. How is health information system being incorporated in the modern means of care transition?
2. What are the missing facets that if implemented would enhance the health information system of care translation?
3. What best practices can be learnt from other sectors and countries in terms of a patient involvement health information system of care transition?

Research Design and Methodology

The proposed research activities will take a period of 8 weeks from project commissioning to delivery of the final report as highlighted below and both qualitative and quantitative methods. A survey will be done to determine the care transition facilities available in Saudi Arabia's provinces and the number of patients received and referred daily. A case study will also be done to compare and contrast the difference between medical homes that use health information system in care transition verses those that use traditional methods. The desk review and literature analysis will seek to establish

Data analysis will be done at the same time with data collection to enable the researcher make comparisons. A triangulation approach to data analysis will be employed to combine data from the multiple sources to be used in the study. This approach shall strengthen interpretations and facilitate the formulation of practical recommendations. By examining information collected by different methods, from different groups of respondents at various levels of the health systems, findings can be corroborated across data sets, reducing the impact of potential biases that can exist in a single method. All in-depth interviews will be transcribed word for word.

In disseminating the findings, various factors will be considered including the key target audience by the research. This includes patients, patients' relatives who also face the burden of care transition, primary care givers, health professionals like doctors and nurses that deal with patients on a daily basis, health consultants, health program researchers and implementers, the general public who are directly affected the government that is involved in health policy formulation processes and other health development partners. In order to reach the general public, the researcher will extract key findings and proposed recommendations and develop an article that will appear in the health column of the local newspapers.

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