Plugging in the Safety Gaps

An exploration of patients' attitudes towards an integrative approach to gathering safety information via Electronic Health Records

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Background

Patient feedback about safety
- Patients can willingly and meaningfully provide feedback on the safety of their care[1]

Patient access to Electronic Health Records (EHRs)
- Growing interest in patients accessing personal health information[2]
- Access to EHRs has been successfully piloted in Sweden, the UK and USA[3]
- Associated with improved patient satisfaction, preventative self-care, and enhanced patient safety[4]

Aim and Research Questions

To explore how primary care patients might want to interact with their EHR to gather safety information.
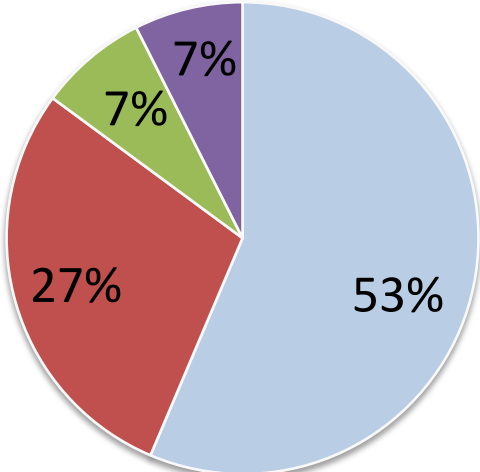
What are primary care users' views on:

1) reporting errors in their EHR?

2) directly inputting feedback on their care experiences into their EHR?
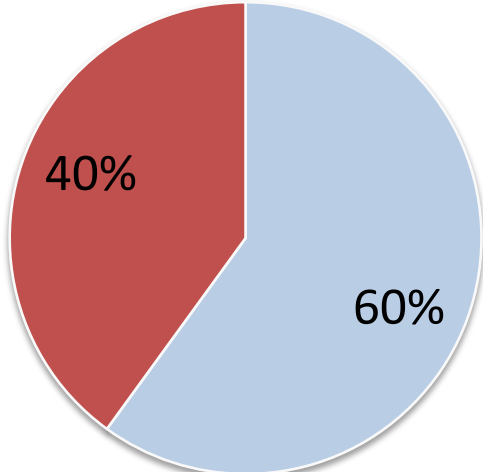
Methods

PARTICIPANTS
- 15 primary care users participated in semi-structured interviews
- Mean age of 55 years (range 19-83 years)

Ethnicity
- White British 53%
- Pakistani British 27%
- Indian British 7%
- Afro-Caribbean 7%

Gender
- Female 60%
- Male 40%

INTERVIEWS

Topic guide explored:
- Highlighting errors in EHR
- Providing feedback on care experiences via EHR

ANALYSIS

A thematic approach was used to analyse transcribed interviews[5]

Iterative Themes Data Refining Interpretative Familiarisation Report Coding Reviewing Defining Naming

Findings

(1) Access to and security of EHRs
- Secure access eg. thumbprint access
- Safeguarding vulnerable people

"Yes I would go for absolute open access based on the idea that I had a secure line to that information that nobody else could access" P1

"It's more a case of people who would deliberately target and exploit people, so it's about somebody accessing that information who shouldn't be accessing it" P8

(2) Monitoring EHRs for improvement (own health and safety)
- Reviewing consultation advice and test results
- Interest in reporting errors eg. personal details and medication
- Feedback on care experiences that have implications for safety

"I think it'd be like a bank account. We should get all that information. We should get our last readings for our blood pressure. There needs to be a key code for it to understand the data" P12

"Not everyone can remember [doctor's advice] so you're going to forget half the stuff so it's there for you to access" P15

(3) Centralising EHRs across care settings
- Viewing one EHR for all healthcare settings
- Reduce fragmentation and improve communication across settings

"The experience I've had is that sometimes during the course of transmission of records some don't get passed for some reason because of hiccups in the system" P3

Conclusions and Implications

➤ Participants were largely positive about having access to, and interacting with their EHR to gather safety information and the potential benefits for patient safety and experience.
➤ Despite the potential benefits, solutions developed to support such an integrative approach need to fully consider factors relating to the impact on patient-provider relationships, accessibility, usability and inclusion.

References
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