

Patient outcomes could improve by preparing nursing homes for health information exchange

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When older adults transfer between nursing homes and hospitals, inefficient and unclear communication between the organizations can hinder patient care. Now, a team of MU researchers is working to improve patients' health outcomes by increasing efficient, secure communication between nursing homes and hospitals using an electronic communication system called a health information exchange (HIE).

"The exchange of accurate, complete and timely information between hospitals and [nursing homes](#) can be complicated when [older adults](#) transfer from one place to another," said Greg Alexander, associate professor in the MU Sinclair School of Nursing and lead researcher of this study. "Ultimately, we want to facilitate a way for staff members to communicate safely and securely about patients' health. We want to prepare nursing homes to communicate externally as well as internally so that care transitions smoothly and patients have better [health outcomes](#)."

Alexander and his colleagues assessed the HIE readiness of 16 nursing homes, which involved evaluating the wireless Internet capabilities of the facilities and other existing infrastructure, such as computers, scanners and copiers. With funding from the U.S. Centers for Medicare and Medicaid Services, the researchers helped the facilities purchase the infrastructure they lacked so they would be ready to implement the technology. The researchers then conducted 32 hours of clinical observation, 68 site visits and 230 interviews to study how staff

integrated the technology and HIE into their workflow.

The researchers found that all the nursing homes used technology to support [patient care](#), whether through tracking dietary needs and medications or to complete other administrative activities; however, most of the technology was used to communicate patients' information within the nursing home rather than to communicate with external units, such as hospitals or off-site pharmacies. Many nursing homes did use technology to complete tasks, such as keeping track of patients' medications or scheduling appointments, but these systems often were separate. The researchers concluded that many nursing homes needed additional technological and human resources to build and implement an effective HIE network.

"Our goal was to develop a more integrated system by providing an [information exchange](#) that could be used by all stakeholders involved in patient care," Alexander said. "We want to build a network through identifying key players and their needs."

Alexander and his colleagues identified areas most integral to patient care and how technology can facilitate those tasks. Using diagrams, the researchers developed visual representations of the communication flow and how technology could streamline and integrate existing processes.

In the next phase of the project, the researchers will evaluate whether HIE implementation improves communication about resident care and how clinicians and other staff feel about integrating the HIE into their workflow, Alexander said. More specifically, the researchers hope to provide a mechanism for nursing homes and hospitals to share patient information and medical documents securely through the [health information exchange](#), Alexander said.

The study, "Preparing Nursing Homes for the Future of Health

Information Exchange," was published in *Applied Clinical Informatics*. Study co-authors include MU researchers Marilyn Rantz, Colleen Galambos, Amy Vogelsmeier, Marcia Flesner and Lori Popejoy.

Provided by University of Missouri-Columbia

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