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**Q: National Healthcare and Indeed Healthcare IT Systems Often Suffer from Fragmentation. Is this a Problem in Spain?**

A: There is no national IT healthcare programme in Spain. Spain is a highly decentralised country with regards to the organisation and provision of healthcare services, which means that the regions have the responsibility of the management of these services depending on their own budgets. The Ministry of Health in Madrid has coordinating role and everything depends on the agreement between the different regions, so, up to today, the system is highly fragmented.

Historically, there have been some intentions to create the basis for an agreement but due to political discrepancies any approaches have failed, so each region has adopted their own technical solution for IT developments.

Within the last few months there has been some good news; an agreement has been reached on creating a central database in Madrid, with a personal and unique identifier of all Spanish citizens. This will allow the transfer of patient information from one region to another when a citizen travels around Spain. Some regions are technologically prepared, e.g. Balearic Islands, Valencia and in some months Catalonia and others.

**Q: A Major Task of the Healthcare IT Management Must be the Training of Both its Own Staff and Healthcare Professionals. Are There National Programmes and Guidelines for this Sort of Thing?**

A: There is not a national programme for this sort of training. At a regional level there are some initiatives and some universities are offering this knowledge with different approaches, some of them more technically based and others on the functional approach. Some new initiatives are beginning to be developed.

**Q: What are the Accreditation and Educational Requirements in this Field?**

A: No, it is not a profession in Spain. To work in this field depends on the background and the knowledge acquired on some partial training as it has been commented on the previous question. There are some professional organisations at a national and regional level doing some lobbying in this direction. The position of CIO or CMIO is beginning to appear in some hospitals but it is not present in most Spanish hospitals. This is due to different reasons, the most important being that most of the hospitals are in the public sector and the direction of the healthcare IT is centralised for the region (in some regions, the situation is different or in the process of changing e.g. Catalonia due to the local history of the public healthcare development and in the islands, Valencia and Madrid due to changes in the organisation of the regional healthcare system).

**Q: How Widespread is the Use of Electronic Medical Records? Do GPs Use Them?**

A: The use of EMR is high, especially at the primary care level. Probably more than 90 percent of doctors are using it, this is due to the wide use of the computerised prescription and e-prescribing. The successful development of the clinical information has been thanks to the good level of the primary care doctors and nurses, well trained and well organised. This has been reinforced with the implementation of P4P strategies, which have improved the quality and use of the clinical registries. Some of these EMR solutions are beginning to introduce advanced DSS on clinical and pharmaceutical guidelines.

At the hospital level the EMR developments are not so advanced, probably due to the financing system of the Spanish hospital system, which is mostly budgetary and not for clinical performance. Some of them are using the DRG system to make some kind of P4P modulation. Despite this, some advances have been produced during the past few years. Nowadays some hospitals have introduced CPOE (computerised physician order entry) and most of them are intending to introduce it in the future. The HIMSS Analytics Europe with the tool EMR Adoption Model Score, EMRAM, shows us in a good position compared with other European countries and even with US (e.g. EMRAM level 5-6: Catalonia 73%, Spain 44%, US 14% and Italy 3%)

**Q: Is Telemedicine Widely Used in Spain?**

A: Telemedicine is not widely used, only in the islands and the Spanish army have made interesting developments. Some regions have made advances; for example, the Basque Country recently made some organisational changes to the delivery of the healthcare services giving priority to the services or chronic diseases, with this, they are some interesting experiences in telemedicine.

The problem remains the same: The payment system does not encourage the use of these IT services as it happens in most of the European countries.

**Q: How Does IT Impact the Quality of Care Provided? What are the Most Important/Efficient IT Implementations in a Hospital?**

A: The level of impact of IT is ofcourse very high. IT helps to monitor quality and cost, which means that we can monitor the efficiency and effectiveness of the clinical processes, allows us to increase clinical productivity and is essential for the patient safety approach. The most efficient IT implementations come from the three main areas of a hospital: Emergency & intensive care units, Operating rooms and surgical processes and diagnoses area: Lab, radiology and imaging. All of these areas should be helped with CPOE, DSS and of course a good development of the BI and analytics.

**Q: As head of an IT department, how do you decide which New Technologies to Invest in? Do You Collaborate, Discuss New Implementations/Technologies With Physicians and Other Staff Members? Do They Come to You With Requests?**

A: In my case I think that is interesting to share the way that I am working in Sant Pau hospital during the last 4 years that is the same way that I developed in my former work as a CIO in Hospital del Mar in Barcelona. My team work is done with three professionals, the director of the informatics department (with a background of informatics knowledge), a doctor specialised in medical documentation (that is taking care of the quality of the information and pushing for working with clinical structured information and coded) and a clinician in my case a cardiologist (that part time is involved in the analysis of the requirements and the usability and performance of the developments).

The requirements come from physicians, nurses and other staff members, we analyse them depending on the impact, cost, and capacity to develop the proposals. As a CIO I am participating in the steering committee, where the final decision of what should be done is adopted.

**Q: Is the Outsourcing of IT Services/ Equipment Prevalent in Spain?**

A: It depends on the regions, some of them, with a more decentralised model, outsourcing is more developed and in the regions with a more public service based system with a centralised approach are using less outsourcing. But now the situation is changing to a more outsourced model.

**Q: In Your Opinion, What have Been the Three Biggest Developments in Healthcare IT in Spain in the Last Three Years?**

A: Probably, the e-prescription development in most of the regions is the most relevant; the image and PACS evolution is also interesting. To undertake the interoperability topic based on IHE is the main challenge, it is beginning to be developed in some regions and the others are planning to do it.

**Q: Are There Any Innovative IT Projects That are Unique to Spain?**

A: It is not easy to say that they are unique to Spain but some of them are very interesting and with a high level of development there are two that I personally know at this moment. To me, the DSS and clinical guidelines on computerised drug prescriptions in primary care, developed with the primary care authorities in Catalonia is one of the best. There are some very interesting developments in image simulations for surgical procedures in Hospital Virgen del Rocío in Sevilla, Andalucía. A new approach on RFID use in la Hospital la Fe in Valencia, and a Health 2.0 approach for doctors and pathology diagnosis in Hospital Puerta de Hierro in Madrid.

**Q: What Does the Future Hold for Healthcare IT in Spain? Where do You Think Healthcare IT will Develop in the Next Three Years?**

A: The practice of the medicine is moving towards industrialisation and virtualisation. For this reason, Spain, like the rest of the countries in the world has to evolve and develop electronic health interchange, interoperability and meaningful use of clinical information and related topics.

Mobile health, i.e. having the needed information at the point of care for clinicians, and access to personal health information for patients to empower them, is another great challenge for the future.

In relation to this, the background is the sustainability of the provision of healthcare services. It is necessary to balance the patient needs and the economic capacity of the governments and patients to finance it. As it is widely-known, Spain is now suffering dramatic problems with the actual economic situation. Perhaps we can find an opportunity for advancing most effective healthcare services supported by the IT solutions.

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