PRIMARY HEALTH CARE SPECIALIST GROUP

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IMIA Working Group 5 (Primary Care)

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Working Group 5 continues in its aims to promoting primary care computing by:

1.   Acting as a forum for exchange of ideas between its members

2.   Providing information to its members to assist them in progressing primary care computing in their own country

3   Increasing the understanding of primary care computing issues with a view to publishing the results of these discussions.

Activities 1996

Since the report to the AGM in January 1996, the Working Group has been building on the networks set up during MEDINFO95.   With the use of the Internet mail server based at the University of Newcastle in England, and particularly with the use of the list server 'GP-UK', a great deal of discussion has taken place on various matters of interest to the Group.   A particular area where there has been a lot of international discussion has been on the Archiving and Deleting of individual patient records from an electronic patient database.   It is felt that the problem being that if an electronic patient record is to be suitable for use in a court of law as evidence it must have a secure audit trail.   If this audit trail is secure then technically it may well be impossible to ever archive records, ie, remove them from the database, even when the patients are no longer current.   A paper has been produced as a result of these international discussions on GP-UK and is being presented at the Health Computing 97 Conference in Harrogate, England.

Another area where there has been discussion between members of the Group has been within the structure of the electronic Medical Record. Papers on both handling of Episodes and Structured Care Plans in medical records have been produced. One of these papers has been accepted at SCAMC96 and will be presented in the Medical Records section. The Chairman of IMIA Working Group 5 has been invited to be Plenary Keynote speaker at the Medical Records section of SCAMC96 to talk about the structure of electronic Medical Records.

In my last report I outlined the combined Working Conference between AMIA Family Medicine Working Group and IMIA Working Group 5 on Medical Coding and Primary Care. The results of this meeting are shortly to be printed and I will notify IMIA of their availability. Further discussions have taken place on the Newcastle Mail Server in relation to coding in Primary Care and it is intended that there will be a follow up meeting between AMIA and IMIA Working Group 5 at SCAMC96. This will take the issues forward.

Members of IMIA Working Group 5 are co-operating within some of the European AIM Projects, particularly the PRESTIGE Project looking at shared Care Planning and Protocol initiation within the electronic Medical Record.

At this MIE, a workshop is being organised in conjunction with the EFMI Working Group 4 (Primary Care). There will be two main thrusts to this, the first is the implementation of a structured medical record which is suitable for use by clinicians at the point of contact with patients. This will concentrate on the need for comprehensive facilities for the clinician at his workstation, and how this can be incorporated into an effective structured record. There will also be a discussion at this workshop on the implications for the use of the computer during the doctor/patient encounter. This will build on work from the similar workshop which was held at MEDINFO95.

We are still short of members from several countries. I shall shortly be circulating all members of the IMIA Board asking for names of possible Working Group 5 members.

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PRIMARY HEALTH CARE INFORMATICS (IMIA WG 5)

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Wants members.

1.   Introduction

WG 5 was re-established following a working conference held in Brighton, England in 1990. Primary Care Computing is often poorly developed because such services are not seen as main stream activities in health services which tend to concentrate on secondary care. However, the increasing cost of health care delivery has encouraged many health services to appreciate the cost effectiveness of primary care as a means of health care delivery.

The working group aims to promote primary care computing by:
- acting as a forum for exchange of ideas between its members;

- providing information to its members to assist them in progressing primary care computing in their own country;

- increasing the understanding of primary care computing issues with a view to publishing the results of these discussions.

2.   Past International Meetings / Working Conferences

IMIA WG 5 held a workshop at MEDINFO 95 in conjunction with EFMI WG 7 on Primary Care Informatics. The workshop was well attended and an enthusiastic response was received from all participants.

The subjects covered included:
a)   Diabetic care with particular reference to shared care between primary and secondary sectors, presented by Rolf Engelbrecht of Germany.

b)   For the development of a Primary Care network of information and training, presented by H.C. Mullins from the USA.

c)   The use of IT for Medical Audit in Primary Care, presented by Nicholas Robinson from EFMI WG 7.

d)   A review of Computers in the Doctor/Patient Encounter,
presented by Glyn Hayes.

The other activity at MEDINFO 95 was a meeting of IMIA WG 5
members which was well attended. After wide-ranging
discussions there was unanimous support for the continuation
of the Working Group in its present form.

It was agreed that IMIA WG 5 should have its own internet
activity and that this should be centred on the Sowerby Unit
at Newcastle University in the UK (this has now been
installed).

At SCAMC 95 in New Orleans, the Working Group co-organised a
one-day working conference on Medical Coding in Primary Care
with the AMIA Family Medicine Working Group. This reviewed
all the coding systems appropriate for use in primary care.
There were discussions by the leading protagonists of ICPC,
Snomed, Read and ULMS and the general conclusion of the
conference was that all of the available coding systems have
their own particular place and should, therefore, all
continue to be supported. Work was needed to define
cooperation between the various coding organisations. One of
the main requirements will be a means of translating between
the various coding systems. As a result of this conference
part of the Newcastle University mail server has been
dedicated to Coding in Primary Care and which will be
available to those interested in due course.

A workshop was held at MIE94 in Portugal concerning, among
other issues, preparing of a paper on Coding of Medical
Information - the Read vs. ICPC issue.

A workshop was held at MIE93 in Israel on the doctor-patient
interaction using the electronic medical record.

A meeting of the Working Group took place in Melbourne,
Australia in May 1993. The major topic considered was the
issue of coding medical information in general practice
electronic records.

Glyn Hayes and J. van Damme held a workshop at the Health
Computing 93 conference in Harrogate England in March 1993.
The subject was Health Added Value from the Electronic
Medical Record.

3.   Future International Working Conferences/Activities

A Working Group meeting is planned to take place at MIE 96 in Copenhagen, details of this and other planned conferences can be obtained from the IMIA WG 5 Chair.

To be published shortly:
-Paper on Health 'added value' for the Electronic Medical Record. This describes the structure of the computerised record which is necessary to provide facilities that will assist doctors with individual patient care and argues how to encourage practising clinicians to use the electronic record for this purpose.

-Paper on Decision Support. This paper argues that decision support systems designed for general medical applications may not be appropriate for the specific circumstances in primary care. It is suggested that the importance of decision support in primary care will be more related to 'watchdogs' and more formal support for therapy. It is not felt that diagnostic decision support systems will have a large place in primary care

-Paper on Coding of Information in Primary Care. This paper looks at the issues concerned with coding in Primary Care, and compares and contrasts ICPC with the Read Clinical classification. Conclusions are primarily that both have an essential place in coding information in primary care, and systems should be able to handle both sets of codes at the same time.

4.   Proceedings and Publication (WG 5)
Hayes G. Robinson N. eds. Primary Care Computing. Amsterdam: North Holland, 1990.

Hayes G.M. Computers in the Consultation. SCAMC Proceedings 1993.

5.   Other involvements and relationships
We have links with the IMIA Institutional Member at Monash University in Melbourne, Australia. Several Working Group members have close relationships with their national government on an individual basis. As a group in Europe we have direct links with the EFMI WG 7 on Primary Care Computing. We also have links with the EC Concerned Action Program.

6.   List of Members

Can be obtained directly from WG 5 Chair.