



## **Opportunities and Challenges of using Electronic Health Records in the Private Health Sector in Hong Kong**

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Hong Kong private health sector as a whole is slow to adopt electronic health record (EHR) when compared with their public counterparts. This is particularly true in the case of general practitioners in solo practice as most of them are still relying on paper based records. On the other hand, healthcare management organizations (HMO) are more assertive and take the helm to implement EHR in their business. There are certain incentives for HMO to invest into these systems. To start with, space is a precious commodity in Hong Kong and digital archiving can help save storage space in a crowded clinic. It also provides the ease and the speed when retrieving old records is needed. EHR can also link up with other clinical management systems such as inventory control and billing systems to provide an integrated solution that is essential to day to day operation of HMO. EHR also provides opportunities to conduct quality assurance measures without the need of performing on-site audits. Antibiotics audit, sick leave issuance audit and appropriateness of referral audits could all be performed within EHR to identify outliers and possible room for improvement. Clinical decision supporting tools such as allergy and adverse drug reaction alert could be incorporated into EHR to enhance patient safety. The data captured in analyzable format within EHR also offer HMO the opportunity to conduct business analysis to serve their clients better.

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There are however a few challenges related to the implementation of EHR in private practices. First of all, capital investment is considerable which forms the major hurdle to solo practice or small HMO groups. Off the shelf solutions often have shortcomings and require a lot of modifications. Moreover, the cost required for maintenance, software and hardware upgrade are also practical concern. Finally, data security is another issue that hinders many private doctors when considering shifting to EHR.

The enactment of the electronic health record sharing system ordinance (CAP 625) in 2015 provided new incentive for the medical community to adopt EHR in their practices. The bidirectional transfer of patient information between the public and private sectors is an important element that would enhance clinical communication and foster public private partnership.