Chapter 9
Electronic Patient Records (EPR), Library Services (LS) and Multidisciplinary Team (MDT) Meetings:
Is It Not Time to Integrate Primary Care for the Better?

Shahid Muhammad
The Renal Patient Support Group (RPSG), UK

Malcolm Rigler
NHS North Somerset Clinical Commissioning Group (CCG), UK

Meshia Adams
Meshia's Hope, USA

ABSTRACT

Patients with Long-Term Conditions (LTCs) account for around 50% of General Practitioner (GP) appointments, 64% of outpatient appointments and 70% of hospital bed days. There needs to be a wider access to knowledge and understanding such as directories with information leaflets, documents, books on lifestyle, helpful contacts and sources to information that can support patients and the general public on the most important elements their health. This cannot be achieved just through patients accessing their health records in sole. The objective of this paper is to 1) highlight the importance of integrating General Practice (GP), Electronic Patient Records (EPR) with Library Services (LS) and 2) also explore why it would be advantageous to implement patient-centred Multidisciplinary Team (MDT) meetings in primary care for patients with Long-Term Conditions (LTCs). This article provides a UK glance and how primary care services can be improved, integrating for the better. Having access to Electronic Patient Records (EPR) alone will not help or encourage a patient to gain confidence and/ or understanding especially if patients are overwhelmed by their healthcare choices and Health Literacy (HL) complexi-

ties. Patients' whose first language is not English for example, approaching more methods to support HL is/ will be challenging. Library and Health Services partnerships should be initiated to allowing access to wider resources. In addition, patient-centred Multidisciplinary Team (MDT) meetings should be arranged at dedicated time points between a doctor and patient/ carer and these can take place in a private section within library setting involving wider participation in care plans. Given that more patients and the public will have opportunity to access their health records, a "Libraries and Health" partnership can help integrate primary healthcare better thus allowing all to access health-related literature, using books, leaflets and digital media in a comfortable environment in a setting that also has staff that can support with HL and technology. An EPR and MDT initiative should be supported with library and health partnerships; this needs to be encouraged.

KEY POINTS: WHAT THIS WORK ADDS

1. There is now a need for GPs to enter dialogue with and social services, to prompt tighter integrated services in primary care.
2. Electronic Patient Records (EPR) need to be supplemented by decision support, personalised care planning and self-management education from trained health professionals, as well as social support from family, friends and peers.
3. There needs to be a neutral environment where patients and health professionals can come together to provide more awareness of EPR in addition a neutral environment where patients and the public can source additional literature and context.
4. Patient-Centred Multi-Disciplinary Team (MDT) meetings will allow patient and carers to gain more EPR awareness and a tighter understanding of what their results actually mean.
5. GPs should look to pilot and implement rotation-based patient-centred MDT meetings in library environment, where one GP from a practice can rotate and call upon colleagues from primary and secondary care sectors to meet at library location where a patient is also called in for review. This should be at least piloted for patients with an LTC since they might have a number of co-morbidities and who might require further support with respect to EPR, HL and online support who would otherwise not know how to use facilities. A rotation system would allow more time for GPs to spend with patients in primary care.
6. Health Literacy (HL) is predominantly a skills-based construct that does not include motivational elements. Using modes to improve HL alone to determine the needs of patients and simplifying instructions for them as a result may be a barrier to that person, thus affecting patient and professional relationship.
7. There is an on-going need to support and work in partnership to increase awareness of local services in health and social care.

INTRODUCTION

Patients with Long-Term Conditions (LTCs) account for around 50% of General Practitioner (GP) appointments, 64% of outpatient appointments and 70% of hospital bed days (Department of Health 2012). Around 70% of total health and care expenditure in England is attributed to people with Long-Term

17 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:
www.igi-global.com/chapter/electronic-patient-records-epr-library-services-ls-and-multidisciplinary-team-mdt-meetings/181192

Related Content

Admission to US Medical Schools: From Application to Selection
Leila E. Harrison, Christina J. Grabowski, Leila Amiri, Radha Nandagopaland Richard Sanker (2020).
Handbook of Research on the Efficacy of Training Programs and Systems in Medical Education (pp. 30-51).
www.irma-international.org/chapter/admission-to-us-medical-schools/246618

An Affordance Perspective on the Enabling and Disruptive Effects of Social Media Tools on Self-Management of Chronic Illness
Nwakego Isika, Antonette Mendozaand Rachelle Bosua (2020). *Opportunities and Challenges in Digital Healthcare Innovation (pp. 36-56).*
www.irma-international.org/chapter/an-affordance-perspective-on-the-enabling-and-disruptive-effects-of-social-media-tools-on-self-management-of-chronic-illness/254965

Cloud-Based Healthcare Systems: Emerging Technologies and Open Research Issues
Ahmed Shawishand Maria Salama (2017). *Healthcare Ethics and Training: Concepts, Methodologies, Tools, and Applications (pp. 1428-1453).*
www.irma-international.org/chapter/cloud-based-healthcare-systems/180649

Home Care Systems for the Management of Patients with Mental Disorders: The "ALADDIN" Experience
Maria Haritouand Dimitris Koutsouris (2017). *Healthcare Ethics and Training: Concepts, Methodologies, Tools, and Applications (pp. 881-910).*
www.irma-international.org/chapter/home-care-systems-for-the-management-of-patients-with-mental-disorders/180619

Medical Students Meet User Driven Health Care for Patient Centered Learning in Clinical Medicine
Nitesh Arora, Neha Tamrakar, Amy Priceand Rakesh Biswas (2017). *Healthcare Ethics and Training: Concepts, Methodologies, Tools, and Applications (pp. 811-820).*
www.irma-international.org/chapter/medical-students-meet-user-driven-health-care-for-patient-centered-learning-in-clinical-medicine/180615