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PATIENT SAFETY INSTITUTE BECOMES SPONSOR OF CONTINUITY OF CARE RECORD

West Conshohocken, PA. – March 18, 2004—The ASTM International, Massachusetts Medical Society, Healthcare Information and Management Systems Society (HIMSS), American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), and American Medical Association welcome the Patient Safety Institute (PSI) to their ranks as the most recent sponsor of the effort to develop a standard for the Continuity of Care Record (CCR).

The CCR will enable healthcare providers to base future care on relevant and timely patient information. It is a core data set of the most relevant and timely facts about a patient's healthcare, prepared by a provider at the conclusion of a healthcare encounter in order to enable the next provider to readily access such information. It includes a summary of the patient's health status (e.g., allergies, medications, vital signs, diagnoses, recent care provided) and basic information about insurance, advance directives, care documentation, and care plan recommendations.

The Patient Safety Institute (PSI), formed in 2001, is a not-for-profit membership organization governed by consumer, physician, and hospital advocates who work together to improve healthcare safety and quality while lowering the cost of healthcare. PSI was formed to provide secure real-time access to clinical information at the point of care.

"The CCR will be a major step forward toward better patient safety through continuity of care. Therefore, we are particularly pleased to welcome PSI, a major proponent of patient safety, as a sponsor to this effort," said Peter Waegemann, chair of the ASTM E31 Committee on Health Informatics, the standards development organization in which the CCR is being prepared.

Jack Lewin, MD, PSI's board chairman and CEO of the California Medical Society, noted, "PSI is pleased to become a CCR sponsor. Our statewide information sharing networks will be enhanced by industry standards for collecting critical clinical information. Consumers, physicians and hospitals will all benefit when this task is completed."

"Our goal is to link medical information at different sites. Additionally our responsibility is to assure that usable, substantive information is being conveyed," added Johnny Walker, CEO of PSI. "For that reason, we are strong supporters of industry adopted standards and are pleased to assist in the important work of CCR."

The CCR will provide both information portability and convenient accessibility. It may be prepared, displayed, and transmitted on paper or electronically. However, for maximum utility, the CCR should be prepared in a structured electronic format in extensible markup language (XML) so that the CCR can provide easy transfer of data between EHRs, eliminating the need for patients to repeat their health information multiple times. Equally important, it will allow the interchange of the CCR data between otherwise incompatible EHR systems. This can streamline healthcare encounters and reduce the potential for medical errors.

Tom Sullivan MD, President of the Massachusetts Medical Society, commented, “We are extremely pleased that PSI has joined us in this ambitious undertaking to improve safety, quality, and efficiency in healthcare. The Patient Safety Institute in its recent work has introduced innovative ways to aggregate essential patient care information coming from disparate sources. Working together with the CCR project and its other sponsors, we will make it much easier for physicians, patients and all clinicians to access relevant, timely, and accurate information at the point of care.”

David Kibbe, MD, Director, Center for Health Information Technology, American Academy of Family Physicians, noted, "The Continuity of Care Record has wonderful potential to serve as the core of community or even regional health data repositories that link patient data from many sources, and to assist both patients and their doctors to gain swift, accurate, and secure access to needed health information. The co-sponsorship by PSI of the CCR standard is a very welcome and important step in industry-wide adoption.”

Clinical and professional societies and other key stakeholders provide input into the project through consensus meetings, workgroups, and document review. The draft standard for the core set of data was released for ballot earlier this month.
