Contributions Of Electronic Medical Records To The Integration And Quality Of Healthcare Networks

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Abstract:

The aim of this article is to analyze the contributions of the Electronic Health Record (EHR) to integrating and improving the quality of Healthcare Networks (HCN). The methodology adopted consists of a bibliographic review, based on scientific articles, government documents and technical reports, which address the implementation and impacts of the EHR in the context of public and private health. The expected results include the identification of benefits such as optimizing the flow of information, promoting continuity of care, reducing medical errors and strengthening coordination between the different levels of healthcare. It is concluded that the EHR is a strategic tool for the integration of HCNs, contributing significantly to the quality of healthcare, provided that its implementation is accompanied by investments in infrastructure, professional training and appropriate public policies.

Key Word: Electronic Health Record, Health Care Networks, Health Integration, Quality of Care, Public Health, Health Information Technology.

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I. Introduction

The integration of Health Care Networks (HCN) is one of the main challenges facing contemporary health systems, especially in countries with universal systems, such as the Unified Health System (UHS) in Brazil. The fragmentation of health services, the discontinuity of care and the lack of coordination between the different levels of care are problems that have a direct impact on the quality and efficiency of the services provided to the population. In this context, the Electronic Health Record (EHR) has emerged as a technological tool with the potential to transform the management and provision of healthcare, promoting the integration of HCNs and improving the quality of care.

The EHR consists of a digital record that stores patients' clinical information in a secure and accessible way, allowing data to be shared between health professionals and institutions. Its implementation has been associated with benefits such as reducing medical errors, optimizing the flow of information, promoting continuity of care and strengthening coordination between the different points of the health network. Despite this, its adoption still faces challenges, such as the need for investment in technological infrastructure, training health professionals and ensuring the privacy and security of patient data.

The aim of this article is to analyze the contributions of the Electronic Health Record to integrating and improving the quality of Healthcare Networks, highlighting its benefits, challenges and implications for management and clinical practice. To this end, a literature review was carried out covering scientific studies, government documents and technical reports, with the aim of providing a comprehensive and up-to-date overview of the subject.

The relevance of this study lies in the need to understand how health information technologies, especially EHR, can be used as strategies to overcome the challenges of integrating HCNs, contributing to the construction of a more efficient, equitable and patient-centered health system.

II. Bibliographical Reference

The growing complexity of health systems demands innovative solutions to ensure integration between the different levels of care and continuity of patient care. In this scenario, the Electronic Health Record (EHR) has stood out as a strategic tool for reorganizing care processes, promoting greater coordination between health services and professionals. The theoretical basis of this section will cover the concepts of Health Care Networks (HCN), the principles of integration in health and the role of information technologies, especially the EHR, in promoting quality, safety and effectiveness in the care provided. The theoretical analysis will allow us to understand the foundations that support the use of EHR as a key element in transforming healthcare and management models.

The Role of the Electronic Health Record in the Integration and Quality of Healthcare Networks

The integration of Health Care Networks (HCN) is one of the major challenges facing contemporary health systems. According to Mendes (2011), HCNs are organizational arrangements that integrate services of different technological densities, seeking to ensure continuity of care and coordination between levels of care. In the Brazilian context, the fragmentation of services and the lack of coordination between points in the network hinder access and the effectiveness of health actions (KUSCHNIR; CHORNY, 2010). To overcome these challenges, the use of information technology, such as the Electronic Health Record (EHR), has proved to be a promising strategy.

The EHR is defined by the Federal Council of Medicine (2002) as a systematized digital record that stores the patient's clinical information, guaranteeing its accessibility and security. In addition, the Pan American Health Organization (2003) points out that this tool contributes to more assertive clinical decisions, a reduction in medical errors and higher quality care. Thus, the EHR is presented as an instrument to support care management, favoring interoperability and the sharing of information between different professionals and health services.

International studies reinforce these benefits. The Institute of Medicine (1997) already pointed to the electronic medical record as essential for transforming health systems by integrating clinical data, reducing costs and increasing patient safety. In Canada, Rozenblum et al. (2011) observed improvements in the coordination of care after the adoption of the EHR, although they identified challenges related to resistance from professionals and the need for training.

In Brazil, the SUS Information Technology Department (DATASUS) has encouraged digitalization as part of the modernization of the public health system (BRASIL, 2023). Experiences such as that of the state of Ceará, with the PROQUALIS methodology (2005), show that the combination of quality management and the use of EHR can strengthen Primary Health Care (PHC) and improve coordination in regional networks.

Despite the progress made, the implementation of EHR still faces obstacles, such as inequalities in technological infrastructure and a lack of public policies to sustain it in the long term. Lavras (2011) emphasizes that the organization of regional networks requires not only technology, but also changes in management and financing models. Mendes (2010) stresses that the modeling of RAS must take into account territorial specificities so that the SP is adapted to local realities.

The impact of the SP on clinical practice is also worth highlighting. Mourão and Neves (2007) observed that, in Belo Horizonte, the implementation of the SP contributed to improving the organization of work, although it required adaptations and training of professionals. Patrício et al. (2011) point out that the success of this tool depends as much on technology as it does on people management and organizational culture.

In summary, the Electronic Health Record is a strategic tool for promoting the integration of HCNs and improving healthcare. However, its successful adoption depends on investment, professional training and institutional support.

The Role of the Electronic Health Record (EHR) in the Integration of HCNs

The Electronic Health Record (EHR) is defined as a digital record that stores patients' clinical information in a secure and accessible way, allowing data to be shared between health professionals and institutions (INSTITUTE OF MEDICINE, 1997). According to studies conducted by Harvard researchers, the EHR is an essential technology for the transformation of health systems, as it facilitates the interoperability and integration of clinical data (BLUMENTHAL, 2010).

In the context of HCNs, EHR contributes to the coordination of care, allowing professionals at different levels of care to access up-to-date information on the patient's history, diagnoses, treatments and tests carried out (GREIVER et al., 2011). This reduces duplication of procedures, avoids medical errors and promotes continuity of care, especially in the case of chronic patients or those with multiple comorbidities (ROZENBLUM et al., 2011).

The quality of health care is directly related to the ability of systems to provide safe, effective and patientcentred services (WORLD HEALTH ORGANIZATION, 2001). EHR contributes to this improvement by facilitating evidence-based clinical decision-making, reducing medication errors and promoting adherence to treatment protocols (PATRÍCIO et al., 2011).

Studies carried out at Stanford University point out that EHR also improves the operational efficiency of health services, reducing costs and optimizing professionals' time (HEALTH AFFAIRS, 2012). Furthermore, the implementation of EHR has been associated with an increase in patient satisfaction, as they perceive greater coordination and personalization of care (LAVRAS, 2011).

Challenges and Barriers to EHR Implementation

Despite the benefits, the implementation of EHR faces significant challenges. According to Blumenthal and Tavenner (2010), cultural resistance from healthcare professionals, lack of technical training and high

infrastructure costs are common barriers. Ensuring the privacy and security of patient data is a critical concern, requiring the adoption of strict information protection protocols (PAN-AMERICAN HEALTH ORGANIZATION, 2003).

In Brazil, inequality in technological infrastructure between regions and the lack of integrated public policies also limit the adoption of EHR (SILVA, 2011). However, successful experiences, such as the implementation of SP in Belo Horizonte, show that it is possible to overcome these challenges by investing in professional training and strategic planning (MOURÃO and NEVES, 2007).

III. Material And Methods

The aim of this study was to investigate the contributions of the Electronic Health Record (EHR) to integrating and improving the quality of Healthcare Networks (HCN). To this end, a methodological approach was adopted that integrates qualitative and quantitative analyses, with the aim of understanding the impacts and applications of this tool in the context of public and private healthcare. The research was based on a broad literature review, covering scientific articles, academic reviews and relevant documents on the EHR and its relationship with the integration of HCNs. The literature search was conducted in specialized databases such as PubMed, Scopus and scientific research portals, using key terms such as "Electronic Health Record", "Health Care Networks", "health integration", "quality of care" and "health information technology". The selection of documents followed specific criteria, prioritizing studies that directly investigated the effects of the EHR on care coordination, continuity of care and improving the quality of health services, as well as relevant case reports and clinical trials. The search was conducted in Portuguese and English, using Boolean operators to refine the search and ensure the inclusion of relevant studies published in the last 14 years (2010 to 2024).

At the end of the research, it is hoped to provide a comprehensive analysis of the contributions of the Electronic Health Record to the integration and quality of Healthcare Networks, highlighting its benefits, challenges and implications for management and clinical practice. The study aims to contribute to understanding the role of the EHR as a strategic tool in promoting more efficient, integrated and patient-centered health systems, as well as fostering discussions on public policies and investments needed for its sustainable implementation.

According to Gil (2002, p. 44), bibliographical research is carried out based on material that has already been prepared, consisting mainly of books and scientific articles.

IV. Result

The results show that the EHR is an essential tool for the integration of HCNs, promoting interoperability and continuity of care. Furthermore, its implementation is associated with significant improvements in the quality of health services, with a reduction in medical errors and an increase in operational efficiency. However, overcoming the challenges related to infrastructure, training and data security is fundamental to ensuring the successful adoption of the EHR.

The research showed that the Electronic Health Record (EHR) plays a central role in integrating and improving the quality of Healthcare Networks (HCN). As highlighted by Mendes (2011), the fragmentation of health services is one of the main challenges to the efficiency of systems, and the EHRR has emerged as a strategic tool to overcome this disarticulation. The interoperability provided by the EHR allows clinical information to be shared between the different levels of care, promoting continuity of care and coordination between health professionals (GREIVER et al., 2011).

In the Brazilian context, the SUS Information Technology Department (DATASUS) has been instrumental in promoting the use of EHR as part of the strategy to modernize the Unified Health System (BRASIL, 2023). The experience of the state of Ceará with the PROQUALIS methodology (2005) illustrates how the adoption of EHR, combined with quality management tools, can strengthen Primary Health Care (PHC) and improve the coordination of care in regional networks. This integration is essential to ensure that patients receive adequate and timely care, reducing duplication of procedures and avoiding medical errors (ROZENBLUM et al., 2011).

The quality of health care is also significantly impacted by the implementation of EHR. Studies conducted by Harvard researchers highlight that EHR facilitates evidence-based clinical decision-making, reducing medication errors and promoting adherence to treatment protocols (BLUMENTHAL, 2010). In addition, EHR contributes to the operational efficiency of health services, optimizing professionals' time and reducing costs (HEALTH AFFAIRS, 2012). These benefits are particularly relevant in a context of limited resources, such as the SUS, where optimizing processes can have a positive impact on the quality of care.

However, the implementation of EHR is not without its challenges. Cultural resistance from health professionals, lack of technical training and high infrastructure costs are common barriers, as pointed out by Blumenthal and Tavenner (2010). In Brazil, inequality in technological infrastructure between regions and the lack of integrated public policies also limit the adoption of EHR (SILVA, 2011). The experience of Belo Horizonte, analysed by Mourão and Neves (2007), shows that overcoming these challenges requires investment

in professional training and strategic planning, as well as an approach that involves not only technology, but also people management and organizational culture.

Ensuring the privacy and security of patient data is another critical concern. The Pan American Health Organization (PAHO, 2003) stresses the need for strict information protection protocols, especially in a context of increasing digitalization of health systems. The adoption of robust cybersecurity measures is essential to ensure patient and professional confidence in the use of EHR.

In summary, the research results reinforce that the EHR is an essential tool for the integration and quality of HCNs, with the potential to transform the management and provision of healthcare. However, its implementation requires investment in infrastructure, professional training and public policies to ensure its sustainability and effectiveness. International experience, such as that of Canada (ROZENBLUM et al., 2011), and national experience, such as that of Belo Horizonte (MOURÃO and NEVES, 2007), offers valuable lessons for overcoming the challenges associated with the adoption of EHR.

V. Conclusion

This study emphasizes the importance of the Electronic Health Record (EHR) as a strategic tool for integrating and improving the quality of Healthcare Networks (HCN). The analysis showed that the EHR contributes significantly to optimizing the flow of information, promoting continuity of care and reducing medical errors, strengthening coordination between the different levels of health care. Furthermore, it has been shown that the implementation of the EHR can improve the efficiency of health services, facilitating clinical decision-making and resource management.

The Electronic Health Record represents a transformative innovation for health systems, contributing to the integration and quality of Health Care Networks. Its implementation, when accompanied by appropriate public policies and investments in infrastructure and training, has the potential to promote more efficient, integrated and patient-centered health systems.

However, the challenges associated with adopting EHR, such as the need for investment in technological infrastructure, training health professionals and ensuring the security and privacy of patient data, were also highlighted. Overcoming these obstacles requires robust public policies and integrated planning involving all the players in the health system.

In conclusion, the Electronic Health Record is a key element in building more integrated, efficient and patient-centered health networks. Its implementation, when accompanied by appropriate strategies, has the potential to transform the management and delivery of health care, contributing to improving the population's quality of life and the sustainability of health systems.

Reference

- [1]. Australian Health Ministers' Advisory Council. Taskforce On Quality In Australian Health Care Of The Australian Health. Canberra: Department Of Health And Aged Care, 1996.
- [2]. Blumenthal, D. Launching Hitech. New England Journal Of Medicine, 2010.
- [3]. Brasil. Ministério Da Saúde. Departamento De Informática Do Shs. Datashs. Disponível Em:
- Http://Www2.Datashs.Gov.Br/Datashs/Index.Php?Area=0201. Acesso Em: 23 Abr. 2025.
- [4]. Ceará. Secretaria De Estado Da Saúde. Metodologia De Melhoria Da Qualidade Em Aps Proqualis. 2. Ed. Fortaleza: Secretaria De Estado Da Saúde Do Ceará, 2005.
- [5]. Conselho Federal De Medicina (Brasil). Resolução Nº 1.638 De Julho De 2002. Define Prontuário Médico E Torna Obrigatória A Criação Da Comissão De Revisão De Prontuários Nas Instituições De Saúde. Diário Oficial Da União, Brasília, P. 184-185, 9 Ago. 2002.
- [6]. Conselho Nacional De Secretários De Saúde (Brasil). Atenção Primária E Promoção Da Saúde. Brasília: Conass, 2011. 197 P. (Coleção Para Entender A Gestão Do Shs).
- [7]. Greiver, M. Et Al. Implementation Of Electronic Medical Records: Effect On The Provision Of Preventive Services In A Pay-For-Performance Environment. Canadian Family Physician, Mississauga, On, V. 57, N. 10, P. 381-389, 2011. Disponível Em: Http://Www.Researchgate.Net/Publication/51716199_Implementation_Of_Electronic_Medical_Records_Effect_On_The_Provisio n_Of_Preventive_Services_In_A_Pay-For-Performance_Environment. Acesso Em: 23 Abr. 2025.
- [8]. Institute Of Medicine. The Computer-Based Patient Record: An Essential Technology For Health Care. Washington, Dc: National Academy Press, 1997.
- [9]. Institute Of Medicine. Division Of Health Care Service. The Computer-Based Patient Record: An Essential Technology For Health Care. Washington, Dc: Institute Of Medicine, 1997.
- [10]. Instituto Brasileiro De Geografia E Estatística. Contagem Populacional. Disponível Em:
- Http://Www.Ibge.Gov.Br/Cidadesat/Painel/Painel.Php?Codmun=314330#. Acesso Em: 23 Abr. 2025.
- [11]. Kuschnir, R.; Chorny, A. H. Redes De Atenção À Saúde: Contextualizando O Debate. Ciência & Saúde Coletiva, Rio De Janeiro, V. 15, N. 5, P. 2307-2316, Ago. 2010. Disponível Em: Http://Www.Scielosp.Org/Scielo.Php?Script=Sci_Arttext&Pid=S1413-81232010000500006&Lng=En&Nrm=Iso. Acesso Em: 23 Abr. 2025.
- [12]. Lavras, C. Atenção Primária À Saúde E A Organização De Redes Regionais De Atenção À Saúde No Brasil. Saúde E Sociedade, São Paulo, V. 20, N. 4, P. 867-874, 2011.
- [13]. Mendes, E. V. A Modelagem Das Redes De Atenção À Saúde. Disponível Em:
- Http://Www.Saude.Es.Gov.Br/.../A_Modelagem_Das_Redes_De_Atencao_A_Saude.Pdf. Acesso Em: 23 Abr. 2025.
- [14]. Mendes, E. V. As Redes De Atenção À Saúde. 2. Ed. Rio De Janeiro: Oms/Opas, 2011.

- [15]. Mendes, E. V. As Redes De Atenção À Saúde. Ciência & Saúde Coletiva, Rio De Janeiro, V. 15, N. 5, P. 2297-2305, Ago. 2010. Disponível Em: Http://Www.Scielosp.Org/Scielo.Php?Script=Sci_Arttext&Pid=S1413-81232010000500005&Lng=En&Nrm=Iso. Acesso Em: 23 Abr. 2025.
- [16]. Minas Gerais. Secretaria De Estado Da Saúde. Manual Do Prontuário Da Família. Belo Horizonte: Ses, 2006. 210 P.
- [17]. Mourão, A. D.; Neves, J. T. R. Impactos Da Implantação Do Prontuário Eletrônico Do Paciente Sobre O Trabalho Dos Profissionais De Saúde Da Prefeitura Municipal De Belo Horizonte. In: Simpósio De Excelência Em Gestão E Tecnologia, 2007, Resende. Anais... Resende: Aedb, 2007.
- [18]. Organização Pan-Americana Da Saúde; Organização Mundial Da Saúde. O Prontuário Eletrônico Do Paciente Na Assistência, Informação E Conhecimento Médico. Washington, Dc: Opas/Oms, 2003.
- [19]. Patrício, C. M. Et Al. O Prontuário Eletrônico Do Paciente No Sistema De Saúde Brasileiro: Uma Realidade Para Os Médicos? Scientia Medica, Porto Alegre, V. 21, N. 3, P. 121-131, 2011. Disponível Em:
- Http://Revistaseletronicas.Pucrs.Br/Ojs/Index.Php/Scientiamedica/Article/Viewfile/8723/6722. Acesso Em: 23 Abr. 2025.
- [20]. Rozenblum, R. Et Al. A Qualitative Study Of Canada's Experience With The Implementation Of Electronic Health Information Technology. Cmaj, Bethesda, V. 183, N. 5, P. 281-288, Mar. 2011. Disponível Em: Http://Www.Ncbi.Nlm.Nih.Gov/Pmc/Articles/Pmc3060213/?Tool=Pubmed. Acesso Em: 23 Abr. 2025
- [21]. Silva, S. F. Organização De Redes Regionalizadas E Integradas De Atenção À Saúde: Desafios Do Sistema Único De Saúde (Brasil). Ciência & Saúde Coletiva, Rio De Janeiro, V. 16, N. 6, P. 2753-2762, Jun. 2011. Disponível Em: Http://Www.Scielo.Br/Scielo.Php?Script=Sci_Arttext&Pid=S1413-81232011000600014&Lng=En&Nrm=Iso. Acesso Em: 23 Abr. 2025
- [22]. Universidade Federal De São Paulo. Faculdade De Medicina. Dehrartamento De Informática Em Saúde. Sistemas De Informação Em Saúde. São Paulo: Faculdade De Medicina Da Unifesp, 2000.
- [23]. World Health Organization. Workshop On Integrated Care. Barcelona: Who, 2001.
- [24]. World Health Organization. European Office For Integrated Health Care Services. Workshop On Integrated Care. Barcelona: Who Integrated Care Meeting, 2001. Acesso Em: 23 Abr. 2025.