Chapter 55 Conceiving Community Knowledge Records as e-Governance Concerns in Wired Healthcare Provision

Kam Hou VAT University of Macau, Macau

EXECUTIVE SUMMARY

This article investigates the potential of community knowledge records (CKRs) in the electronic transformation for healthcare provision in Macau. Of specific interest is the electronic governance (e-governance) context to examine the various information and communications technologies (ICTs) for personalized healthcare support, such as the electronic health (or e-health) records (EHR). From a governance perspective, the installation of ICT-based e-health support must begin with the healthcare concerns of citizens. The challenge is to identify the organizational context of e-health provision, lying in the realm of e-governance, and referring mainly to the decisions that define expectations, enable empowerment, and verify performance of the systems involved. The goal of this chapter is to explore the context of citizens' e-health provision, including the EHRs considered as the digital records of personal medical history, accumulated from cradle to death. Elaborated are the issues of privacy that must be rendered in proper perspective where e-governance is to install a trustworthy electronic system of healthcare administration. The discussion around the e-governance concerns of any attempt to install e-health services based on the legitimate use of personal EHRs, should provide a sense-making perspective to interpret the e-health challenge of the contemporary knowledge society.

DOI: 10.4018/978-1-4666-2770-3.ch055

ORGANIZATION BACKGROUND

With the expanded possibilities created by the emergent digital economy (Miller, 2009; Tapscott, 1997), the topic of computing in public administration is gaining increasing attention in today's Macau (http://www.gov.mo/) which is visible from the series of electronic government (e-government) projects available at this URL site http://www.emacao.egov.iist.unu.edu/index.php/emacao/projects. Obviously, following the trend of many a wired government around the globe (O'Looney, 2002), Macau is actively incorporating computer applications into public sector strategies for improving the efficiency, effectiveness, responsiveness and accountability of her governance.

Indeed, the e-Macau initiative as a major egovernment transformation undertaken by the Macau Government comes in different stages. The first phase called the e-Macau Project, which commenced in July 2004 and ended in June 2006, focused on survey and assessment of 44 governmental units to establish the state of e-government readiness in the government as a whole. It included extensive training of public officers in technical and, to a lesser extent, managerial aspects of e-government. Specifically, this first phase also aimed at providing to information technology (IT) officers, with the required experience and know-how on large-scale development of electronic public services through training and various prototyping projects on public services of related interest (Macau, 2008).

Outputs from the first phase of the project include a series of policy recommendations to guide the development of e-government in Macau, and consequently the design of the next phase of the e-Macau initiative. We are witnessing many a public officer's increasing involvement both in the details of administration of information and communication technologies (ICTs) and in the orchestration of technology policy development in the local government, better called the *Macau*

SAR (Special Administrative Region) Government. For example, realizing the development of e-health records (Moller & Vosegaard, 2008; Garets & Davis, 2006) as an important constituent of the e-government's healthcare system, many an SAR official have already expressed the use of e-health records must be considered as one of the long-term e-governance concerns in Macau.

In fact, the case of e-health record has often been considered as a specific instance of community knowledge record (CKR) (Kahn & Sheshardri, 2008; Gropper, 2007; Hartnell-Young, 2006; Handzic, 2003), carrying important populace details for the governance body to make timely decisions to better serve the needs of her citizens, such as the provision of suitable healthcare for different age groups across different geographical regions.

In order for governments to evolve their planning for citizenry healthcare in a way conducive to the buildup of proper e-health records, organizational, managerial, and inter-organizational structures, supports, staffing, training, practices, cultures, boundaries and policies will need to be considered. It is a challenge in governance rooted in radical changes in available technologies as well as the potential transformations in management practices, ownership rights, and the distribution and arrangement of political power (Jepsen & Jepsen, 2008; Liu, 2007; Malkia & Savolainen, 2004; Lanvin, 2003). As public managers in Macau's healthcare sector conceive their wired involvement over the coming decade, they will need to keep in mind such a challenge, and think deeply about how their policy making can contribute to the development of more effective and efficient public health services for the almost half a million people living in the SAR.

SETTING THE STAGE

It has been recounted in the literature (Landsbergen & Wolken, 1998) that governments are often unaware of what they know because their systems

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/conceiving-community-knowledge-recordsgovernance/73881

Related Content

Medical Robotics: State-of-the-Art Applications and Research Challenges

Alireza Mirbagheri, Mina Arab Baniasad, Farzam Farahmand, Saeed Behzadipourand Alireza Ahmadian (2013). *International Journal of Healthcare Information Systems and Informatics (pp. 1-14).*www.irma-international.org/article/medical-robotics/78927

Introducing Medical Humanities--Use of Humour for Teaching Ethics: A Pilot Study at Hamdard Institute of Medical Sciences and Research, Delhi

Ayesha Ahmad, Tamkin Khan, Shridhar Dwivediand Farah Kausar (2013). *International Journal of User-Driven Healthcare (pp. 30-36).*

www.irma-international.org/article/introducing-medical-humanities--use-of-humour-for-teaching-ethics/103915

Quality Based on a Spatial SERVQUAL Model in Healthcare

Stelios Zimeras (2012). Quality Assurance in Healthcare Service Delivery, Nursing and Personalized Medicine: Technologies and Processes (pp. 209-219).

www.irma-international.org/chapter/quality-based-spatial-servqual-model/58735

What E-Mental Health Can Offer to Saudi Arabia Using an Example of Australian E-Mental Health

Yamam Abuzinadah, Bader Binhadyanand Nilmini Wickramasinghe (2017). *Handbook of Research on Healthcare Administration and Management (pp. 178-187).*

www.irma-international.org/chapter/what-e-mental-health-can-offer-to-saudi-arabia-using-an-example-of-australian-e-mental-health/163829

An Analysis on the Utilisation of Health Information Technology to Support Clinical Operation of Chinese Medicine

Catherine Han-Lin, Angela Wei Hong Yang, Siddhi Pittayachawanand Nilmini Wickramasinghe (2016). *Maximizing Healthcare Delivery and Management through Technology Integration (pp. 113-132).*https://www.irma-international.org/chapter/an-analysis-on-the-utilisation-of-health-information-technology-to-support-clinical-operation-of-chinese-medicine/137582