
Introduction

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Biographical notes: Ton A.M. Spil is teaching in the area of Business Information Systems at the University of Twente, The Netherlands. He did his PhD thesis on the effectiveness of information strategies and after that he specialised in the application area healthcare and professional organisations. He is track chair e-health in main conferences (ECIS, AMCIS and HICSS) and published on ISI A level. He is (guest) editor of *JSIS* and associate editor of several health journals. In 2013 his main topics are adoption, business modelling and serious gaming applied on (tele)health, music and banking.

Ken Trimmer (in Memorial)

Near the end of October of 2012, I received an email from my co-editor, Ken Trimmer with information needed to finalise this special issue on IT adoption and evaluation in health. It is with sadness and remorse that I report that Ken passed shortly thereafter and is no longer in our midst. Please accept this introduction as not only an overview of papers included in this special issue, but also as a memorial to the academic skills but moreover human skills that Ken possessed. I and others, who knew Ken, send sincere thanks and praise to his sense of humour and collegial nature, particularly in working at a distance. We worked together over a distance of 5000 miles and trusted that both the message and the sun would travel through the internet to accomplish the goal and hope you enjoy the contents herein.

This special issue's coverage truly reflects the spectrum of research areas within Ken Trimmer's domain. The development of these papers from initial submission also reflects Dr. Trimmer's ability to aptly match submitted paper to a review team that could insightfully mature the work. This web of scientists coming together in this special issue and in other efforts co-collaborated on elaborated into a collegial force in collectively extending knowledge in the healthcare adoption domain.

Healthcare still has major difficulties in implementing e-health successfully. The first paper in this special issue from Junhua Li, Holly Seale, Pradeep Ray, Amina Tariq and C. Raina MacIntyre handles the preparedness for e-health in pandemic situations. With a preparedness framework the authors show a way to maximise e-health benefits.

When e-health is adopted it often leads to complex inter-organisational systems. Stefan Schellhammer, Kai Reimers and Stefan Klein show information infrastructures in Australia and Ireland. A cross-case comparison demonstrates that successful standardisation and reliance on proprietary systems not only influences the future of the electronic ordering systems but also shapes emerging information infrastructures in healthcare.

Within such a standardised and integrated system there is still need for individual differences. The third paper studies what functionalities of Personal Health Records are most used by individual patients. Valerie M. Sue, Matthew T. Griffin and Jill Y. Allen found proof for different use on patients' age, race/ethnicity, and income. The most used features were online laboratory test results, patient-physician secure email, online prescription refills, and online appointment scheduling.

To be able to use and evaluate e-health, the accuracy of the information is important. Linda and Terry Byrd studied this subject and found it to be a mediator between IT and quality of healthcare. A principle finding is that IT affects accuracy of information as well as the quality of healthcare in hospitals. The fifth paper is from the same authors but focuses deeper on the subject of information quality as found by Delone and McLean as one of the depended variables of IS success.

The sixth paper from Carolyn McGregor, Andrea Steadman, Jennifer Percival and Andrew James introduces a patient journey modelling technique information flow within the Neonatal Intensive Care Unit.

Finally we need IT on the operational level to ensure the quality of health. Samuel Fosso Wamba and Eric W.T. Ngai show the relative advantage of RFID in healthcare. They study the main processes involved and indicate that all the top five processes related to the relative advantage of RFID and the asset management applications reflect high levels of agreement.

In closing this introduction, an analogy I use in lectures of the milky way to explain the nodes in a network. Going forward my path of connecting the dots among the stars in the field of health IT adoption will be challenged by a missing star. Ken Trimmer and I have co-reviewed and chaired mini-tracks and special issues together, we wrote papers together, we edited together and we travelled together. Together with Cindy and Carla, our co-chairs at HICSS we feel together alone. We wish strength and courage to Joanne and his children. Thanks Ken, for everything!