Steps toward eHealth interoperability

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Interoperability

eHealth interoperability expert group

organized by The European Commission – Information Society and Media Directorate General

eHealth Interoperability

- to connect people, data, and health systems
- exchange of health-related data among healthcare institutions
- share relevant information to the appropriate authorities and decision-makers
- improving patient safety

All at a pan-European level

Preparing *EC Recommendations* on eHealth interoperability

Addressed to:

- all the *Member States*
- *European Economic Area (EEA) countries*
- eHealth *industries* and *stakeholder associations*

Focus on:

- *electronic health records,*

- *patient summaries,*

- *emergency data sets*

- *ePrescribing*

Benefits expected:

- more accessible health services in the context of cross-border citizen and patient mobility

- increased quality of healthcare

- reduced risks

- increased accessibility of medical data for research and high level administrative decisions etc.

Actions proposed at four levels:

- political/legal

- organizational

- application (including semantic)

- technical (including architecture)

1. Actions at the political/legal level

- Legal and regulatory framework
  (privacy, confidentiality, security of data, monitoring)
- Political and strategic commitment
- Integral part of national strategies
- Resources (time, management, financial)
  at least 2.5% of the annual public health expenses
- Plan ahead for at least 5-7 years
- Involvement of public-private partnerships, users and other stakeholders

2. Actions at the organizational level

- Common domain with the necessary interfaces;
- Common cases, requirements, data fields, data moving seamlessly between Member States;
- Minimum legal framework (privacy, security, authentication, traceability, accountability, liability, follow-up etc.);
- Nomenclatures, classifications, registries, accreditation and semantic interoperability;
- Identification of patients, professionals, and healthcare institutions;

3. Actions at the application level

- Semantic agreements on common priorities
- Standards for semantic interoperability (coding, terminology etc.) agreed
- Services and tools for cross-language information retrieval, translation, abstracts and extracts of health information (including extracts from patient records)

4. Actions at the technical level

- Survey of existing infrastructures that support health systems and services in EU
- Barriers, hurdles, missing elements, preconditions, and incentives for achieving eHealth interoperability
- Achievements and lessons learned from the Large Scale Pilots
- Scalability and extendibility

Other technical issues

- Security, confidentiality and privacy of health data,
- Identification, authentication and authorisation methods,
- Certification of the organisations of the exchange and sharing of data,
- Certification of interoperable electronic health records and other eHealth applications,
- Accreditation of healthcare professionals who develop or use interoperable eHealth systems and services.

The Romanian eHealth interoperability environment

- Legal framework, eHealth strategies and projects

- eHealth strategies and projects

- eHealth interoperability and standards

Legal framework

- *Health Reform Law* 95/2006

  organization, institutions, financing, insurance, personnel, integrated information system for public health management.

- *Law 102/2005*, National Authority for the Supervision of Personal Data Processing

eHealth strategies and projects

- ## MoPH Strategic Plan for 2008-2010,
  underlining the necessity of a new integrated health services information
  system, with patient monitoring

- ## No official eHealth strategy and no formal eHealth national roadmap

- ## Projects:
  - Unique Integrated Information System of Social Health Insurances (SIUI)
  - DRG monitoring system
  - health evaluation program
  - Electronic Personal Health Record (EPHR)

eHealth interoperability and standards

- *Near to Needs* (telemedicine international pilot project, started in 2001), using the RNMC emergency portal
- *Health Optimum* – healthcare delivery optimization through telemedicine (6 countries, January 2007)
- *Q-Rec* Quality Labelling and Certification of EHRs
- *Standards* (coding, NCOEHIS - CNAOSIIDSB)

Conclusions

- Need for political commitment, legal and regulatory framework, resources (time, management, financial)

- Involvement of public-private partnerships, users and other stakeholders (NCOEHIS – "Focal Point")

- Need for eHealth strategy and road-map

- Integrated, nationwide, patient oriented, health information system

- eHealth EU interoperability

Thank You

FOR YOUR ATTENTION