ANTILOPE FINAL WORKSHOP



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Belgium: Moving on a « parrallel » road to ANTILOPE

- A Ehealth roadmap based on (a first serial of) usecases.
- ISO compatible third party validation and certification of interoperability <u>and</u> functionality.
- Need to use tools which allow a more « objective » evaluation.

>Ehealth Roadmap (2014-2018)

Dorian

<Hospitalisation> <Implant> <Laboratoire> <lmaging> <Sumehr> <Therapeutic scheme> <Homecare> <MRS> <Belrai> <Clinical <MyCarenet> SGPS Specialists SIMagings path² <Hospitalisation² <Dentist² sprescriptionss schapter 4s <RHM> SPharmacists SMyCarenets SDMGs <Sumehr> <multidisciplinary

Mona

collaboration? <Paliative care? < Home Hospitalisation>

Psychiatry> <Méthadone> <CPAS> <Ambulance> <Emergency> <Laboratory> <Imaging> <Sumehr> <Wachtpost>

Grego

Laboratory Status handicapeds

<Auto monitoring> < Tele consultation> <Tele monitoring> <Sumehr> <Personal health record> <Electronic Prescription> <eFact> <eBirth>

Sharing data via the hubs & metahub system

2014: Consultation reports, discharge letters and surgery protocols, other reports and corresponding data.

2016: Integration of data of other institutions

2015: Imaging results and reports, implants placing

Exchange: 27 Standardized and documented web services

KMEHR

Kind Messages For Electronic Healthcare Record - Belgian implementation standard

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) Basic

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Web Services

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Web Services

The definition of KMEHR is completed by a minimal set of web service operations to support the exchange and the sharing of medical files. Those web services result from concrete implementations initiated throughout the <u>Flows</u> projects.

In order to unify the interfaces developed within those local and regional initiatives, a revision of those interfaces has been undertaken within the <u>'G19 - Belgian Care Providers Telematic Advisory Group</u>' in the context of the 'hubs-metahub' architecture. The result of this work is available here. The work currently published has the status of a draft as the definitions must still be validated through effective testing with partners involved in the hub-metahub project. Those tests are currently running.

The 'hub-metahub' architecture identifies two sets of web service operations: the operations provided by the hubs to their clients, called '*intrahub webservices*', and the web service operations provided by the hubs to the other hubs, called '*interhub webservices*'.

The functional specification of each operation is available in the table below.

The following archive file contains the complete XSD structure corresponding to the payload of the webservices. It also contains the WSDL that defines the interface at the interhub level.

xsd-hubservices-1.1.0.zip ZIP (2013-06-03)

Show all

Name 🔺	<u>Category</u>	<u>Version</u>	<u>Status</u>	Last update
declareTransaction	Intrahub	1.0	Draft	2010-07-30
getAccessRight	Interhub	1.0	Draft	2010-07-30
<u>getHCParty</u>	Intrahub	1.0	Draft	2010-07-30

,

Basic services and authentic sources



Content: based on existing standards

- **Consider** content already validated and used at international level, based on available standards.
- **Prepare** possible progressive transition from kmehr to HL7-CDA:
 - -Mapping headings Kmehr-CDA
 - Based on existing data and input from
 Business prepare CDA specification for
 lab report and dismissal letter.

Content: comparison and mapping with khmer





Header Folder Patient Transaction Heading Heading Heading I tem Item Item Item Item Item

Correspondance groups of data: Header Kmehr (example)

		CDA	
Confidentiality	O. This element restricts the access to the content of the header to enumerated healthcare parties	R. Level of confidentiality to the entire document	
standard	R. version of the KMEHR specification	No equivalent. See IHE (version of document)	
id	R.Identifies the message within the system	Id of document	
date	R. Time of the creation of the message	Effective time	
time	R. Date of the creation of the message		
sender	R. Hcparty, sender of the message	No equivalent (see author). See IHE	
recipient	R. Hcparty, receiver of the message	Information Recipient: persons who are recipients of the information	
urgency	O. Urgency	No equivalent. PriorityCOde for a document. See IHE	
aknowladamont	0 aknowledgment	No oquivalant Soo IHE	

SECURED MAILBOX TO SUPPORT SPECIFIC priority USE CASES

- Lab report transmission
- Ad hoc adressed communication between all HC providers
- Eforms to support administrative simplification (eg: handicap, insurance, authorizations)
- Eforms to Feed specific registers
- Eforms for collaborative care (dynamic template)

Certification in Belgium

Hubs-metahub: system to system communication

Ambulatory care

Connectathons



25/6/2010

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Health

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Kind Messages for Electronic Healthcare Records Belgian Implementation Standard

- > Conceptual model
- > Transaction types
- > XML implementation
- > Coding systems

>> Sumehr



Summarized Electronic Health Record

- > Kmehr transaction
 > Multipurpose content
 > Homologation criteria
- > Homologation criteria
- > European target

> Process very near to ANTILOPE recommendation

- Voluntary

- Organized every 2 years (till now)
- Scenari and testing by third party (call for tender)
- ISO Standards?
- (Partially)funded by industry
- Link with financial incentive for users (800 €/year)

> Some roads for improvement

Standards: Progressive international alignment of Technical standards

Certification: towards a permanent process? More emphasis on connecthatons



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