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 and functionality.
- Need to use tools which allow a more « objective » evaluation.

>Ehealth Roadmap (2014-2018)

Dorian

<Hospitalisation> <Implant>
<Laboratoire> <Imaging>
<Sumehr> <Therapeutic scheme>
<MyCarenet> <Register>
<RHM>

Gregory

<GP> <Specialist> <Imaging>
<Prescriptions> <Chapter 4>
<Pharmacist> <MyCarenet> <DMG>
<Laboratory> <Status handicaped>
<work incapacity>

Emily

<Homecare> <MRS> <Belrai> <Clinical path> <Hospitalisation> <Dentist>
<Sumehr> <multidisciplinary collaboration> <Paliative care> <Home Hospitalisation>

Hillary

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

Mona

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

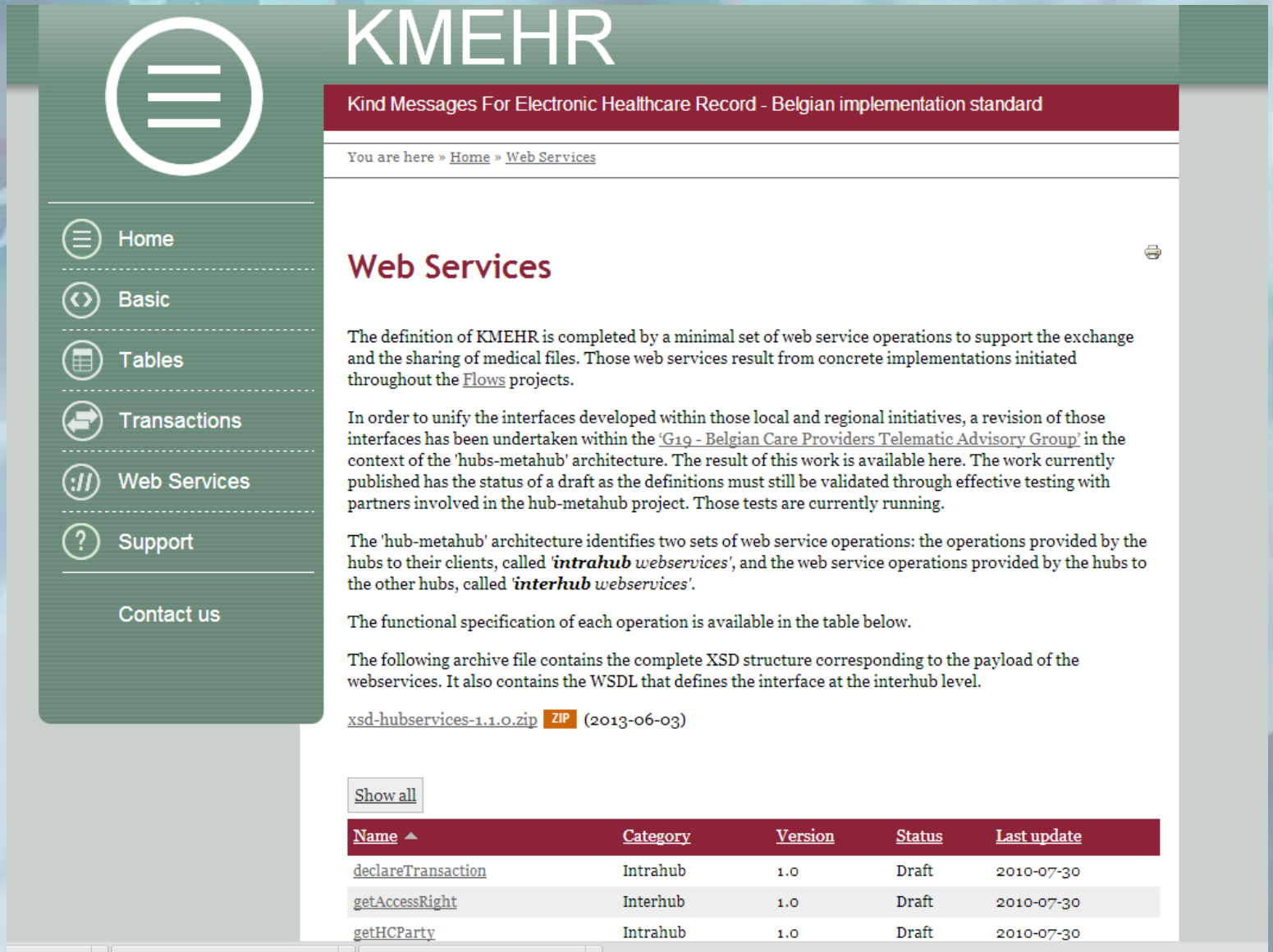
Sharing data via the hubs & metahub system

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

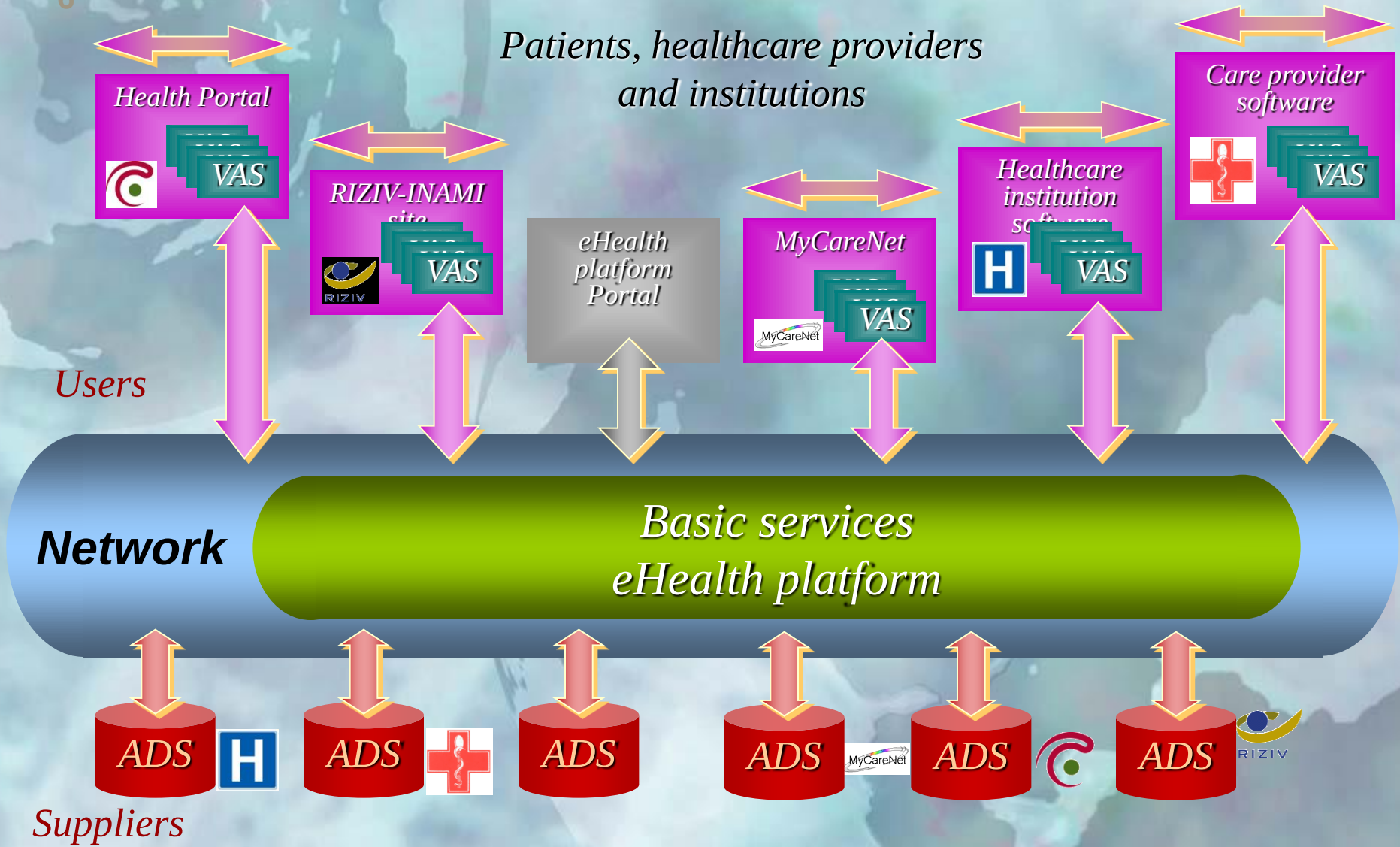
2015: Imaging results and reports, implants placing

2016: Integration of data of other institutions

Exchange: 27 Standardized and documented web services



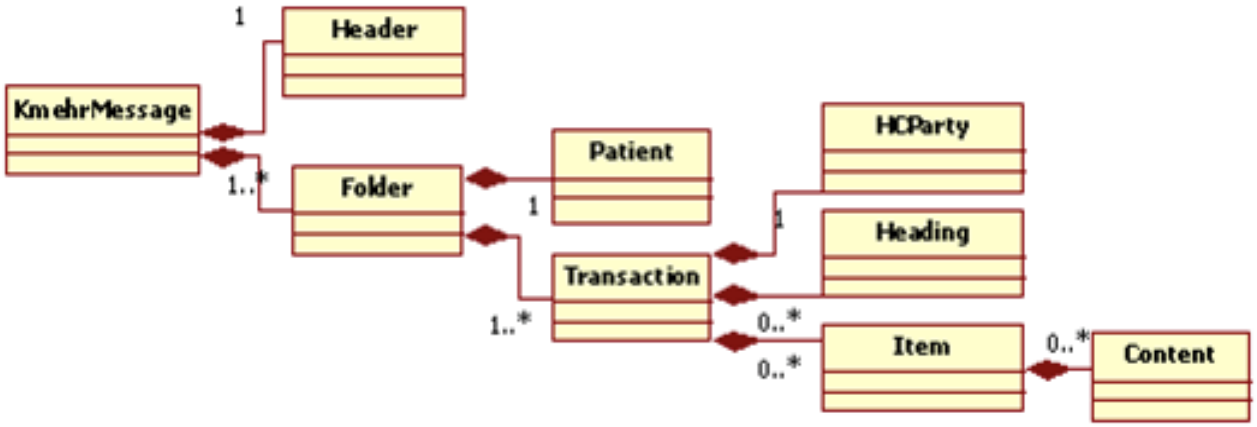
Basic services and authentic sources

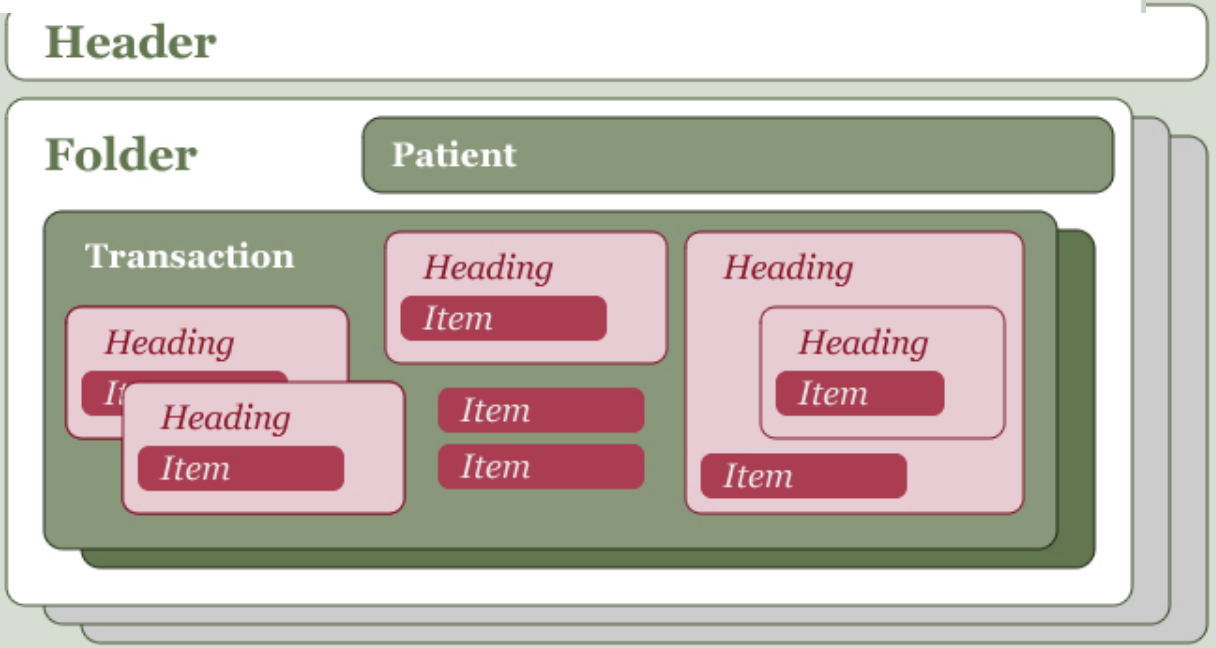


Content: based on existing standards

- **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





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
aknowledgment	O. aknowledgment	No equivalent. See IHE

HEALTHCARE DEDICATED SECURED MAILBOX TO SUPPORT SPECIFIC priority USE CASES

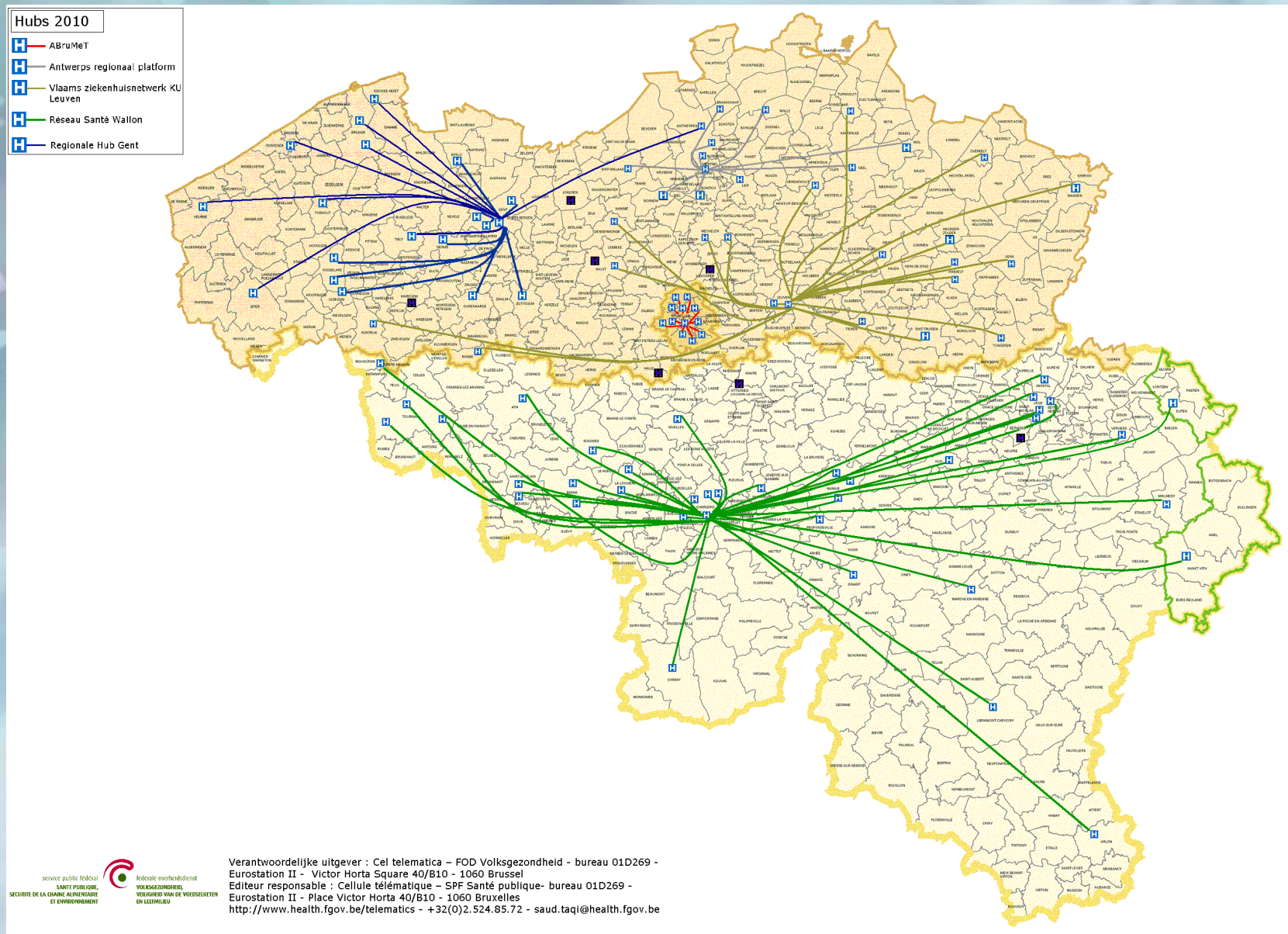
- Lab report transmission
- Ad hoc adressed communication between all HC providers
- Eforms to support administrative simplification (eg: handicap, insurance, authorizations)
- Eforms to Feed specific registers
- Eforms for collaborative care (dynamic template)
- …

Certification in Belgium

Hubs-metahub: system to system communication

Ambulatory care

Connectathons



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>> Kmehr

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
> 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

Thanks

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www.health.fgov.be/telematics/label

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