

National eHealth program in the Netherlands – design and status

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Me...

- Michiel Sprenger, PhD
- Clinical Physicist
- MRI, X-ray, radiotherapy
- Clinical informatics
- Free University MC, Amsterdam
- Joined Nictiz 2008



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Nictiz

- Founded in 2002
- The national competence center for health IT
- ~100 fte
- Tasks:
 - Define and maintain standards
 - Build and run infrastructure
 - Develop care applications on infrastructure
 - Offer knowledge & advice



Belgium-Holland?

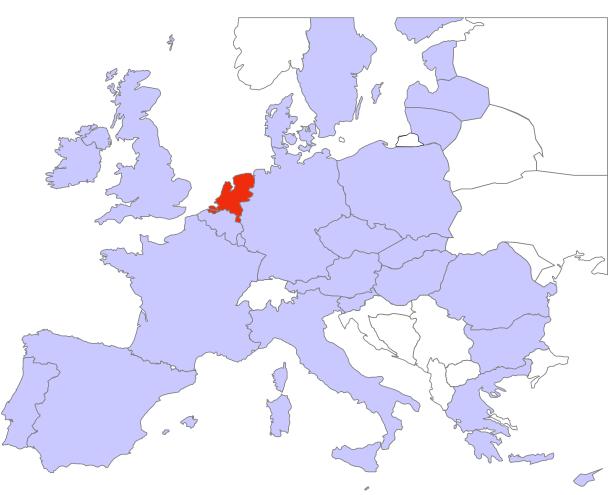




The Netherlands in EU



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Area: #22/27

Pop: #8/27

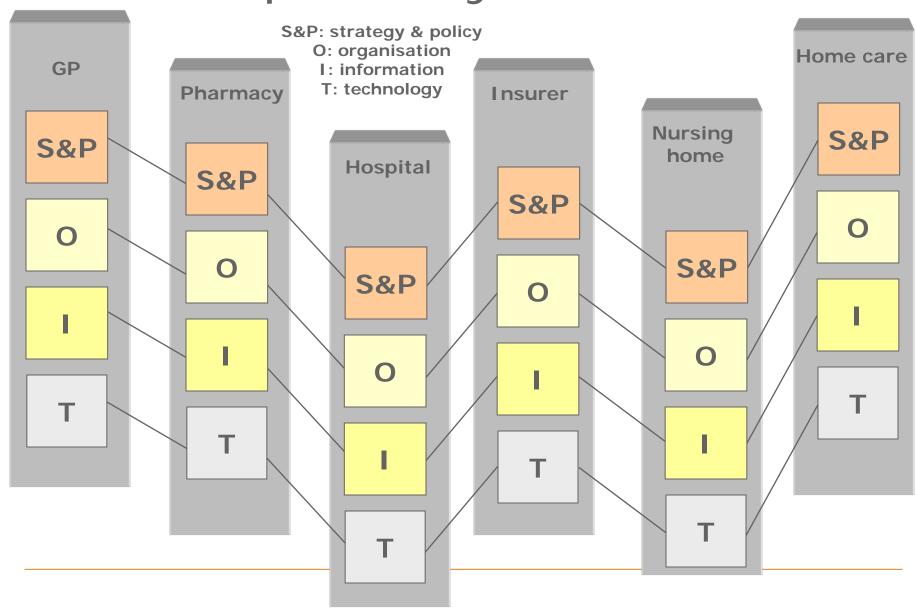
Healthcare in the Netherlands



- Multi-enterprise business model:
- 100 hospitals, 4500 GP practices, 1800 pharmacies, 100 locum tenency services for GP's, each responsable for own finance, medical policies, investments, and IT
- Thus: interoperability problems are large on all levels
- → Urge for standards
- → Much debate ("polder"-model)



Interoperabilty - levels



Upfront Choice for health IT



- Leave information at the source
 - Responsibility
 - Unambiguousness
 - Security
- Fits to business situation
- → Connectivity, not "system" building



Nationwide electronic patientrecord ("the EPD")



- It is not a record, nor a system
- It is an infrastructure
- Leaving information at the source
- In the (electronic) working environment of the Health Care Professional or Provider
- Under the responsibility of the source HCP
- Enabling selective and safe information exchange between HCP's and between HCP's and patients

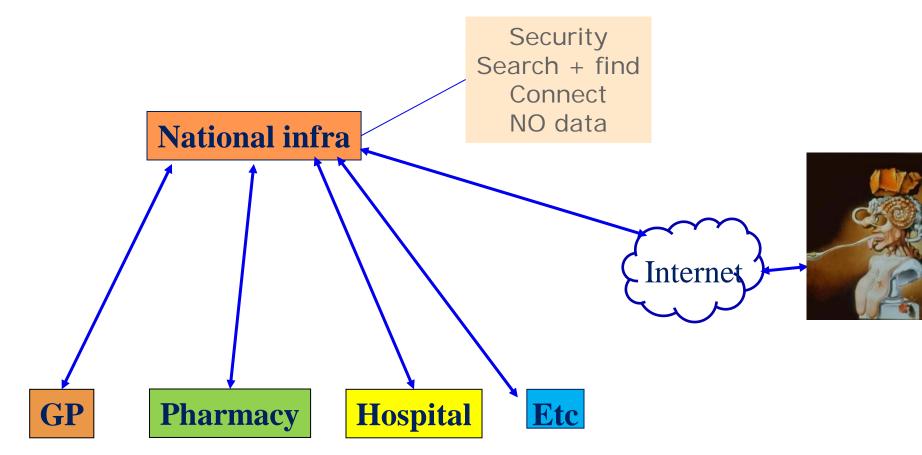




- Hospitals:
 - PACS 100%
 - HIS 100%
 - Clinical overview: 80%
 - Order management (CPOE): 30%
- General Practitioners: 100%
- Pharmacies: 100%
- Nursing homes: 10%



In a scheme



Infrastructure - 1



- Standardised communication
- Safe communication
- Logging
- Identification: patients, HCP's
- Patient consent registration & handling
- Index function: search, find, transfer

Infrastructure - 2



- Per application area:
 - Model for cooperation in healthcare area
 - Information model
 - Technical model & standards
 - Qualification of systems
 - Authorization guidelines
- Bring in legislative framework
- Business model and plan

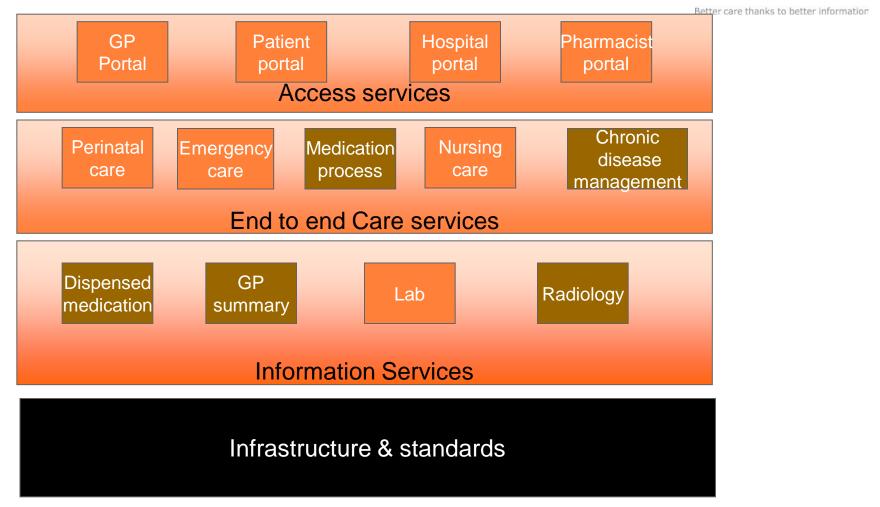


Standards

- HL7v3 for messaging (<u>www.hl7.org</u>)
- SNOMED-CT for "language" unification Systematitized Nomenclature of Medicine – Clinical Terms (www.ihtsdo.org)
- IHE for implementation guidelines Integrating the Healthcare Enterprise (<u>www.ihe.net</u>)
- Many others

Care programs







To mention today:

- Medication services
- Locum tenency service for GP's
- Radiology
- Diabetes disease management
- Emergency care

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Medication

- Driver: Safety
- Electronic support of the entire community medication process:
 - Prescribe → check → dispense (→administration)
 - Record
 - Make available for later use (medication surveillance)
- Status: dispensed medication overview ready



Locum tenency - GP



- Drivers: Quality, continuity
- First instance of patient summary
- Requestable from any locum service
- Source: GP
- Report back to GP
- Status: ready for broad implementation





Radiology

- Drivers: Quality and efficiency
- All radiology results (images and reports) retrievable for all medical specialists, in their own viewing environment
- Based on XDS-I, IHE
- Building pilot in Amsterdam
- National transparancy







- Driver: Quality
- Exchange of all data relevant to diabetes between the (many) healthcare professionals involved

- Self-management
- Reports







- Care standard ready
- Information model ready
- Architecture ready
- Implementation guidelines (messages)
 - ready
- 2 pilots running Q4 2009





Emergency - proposition

- Electronic support for the chain Incident room → ambulance → Emergency Department → report back to GP
- Make patient summary available in all steps

Knowledge & advice: 5 areas for Nictiz



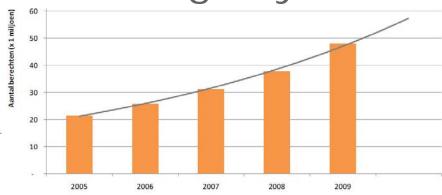
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- 1. Organise events, meetings, classes
- 2. Answer questions and build knowledge database
- 3. Organise partner programs
 - lospitals
 - Regional networks
- 4. Measure & publish on national situation
- 5. Connect to international community

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Current situation

- National infrastructure phase 1 ready
- Dispensed medication ready
- Locum tenency service ready
- 1300 HCP's connected
- Data stream steadily growing
- Regional: 100M Edifact messages/yr
- Pushed and indexed
- Number is growing



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Dutch Regions

- Dutch regions active in electronic information exchange
- Not nationwide yet, but for 60%
- Some are higly professional, others are start-ups
- Nictiz facilitates cooperation

Partner program regional networks



- ~25 organisations
- Sponsored by HCP's in region
- 0,5M à 1M inhabitants
- No boundaries possible
- Use implementation power
- Make transparent
- Migrate





The Dutch Regional Collaboration Organizations (RCO see care thanks to better information



Geografische regio-indeling bij benadering, zoals bekend per 25 mei 2010 De nummers corresponderen met de tabellen in de tekst.

2	Arnhem
3	LabNoord, CareRing
5	SDSK
7	EZDA
9	GEMS
10	GERRIT
11	Zoetermeer SGZ
12	Haagnet
14	Zeeland IZ-Zeeland
15	IZIT
16	RSO Haaglanden
18	Rheco
19	Rijnmondnet
20	Sleutelnet
21	SPITZ Midden-Holland
23	Zorgnetwerk Midden Brabant
24	Zorgring
99	Niet ingevuld





Three business models :

- 1. Active in collaboration projects
- 2. Active as supplier of IT services
- 3. Active in both 1 and 2

Participation care professionals in regional context



	Hos	pitals	100	%
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GP's 96 %

Pharmacies 60 %

Paramedics 30 %

Care / nursing 30 %



Aims

- Stimulate developments closer to clinical practice
- Migrate and make transparant



Beyond BE-NL

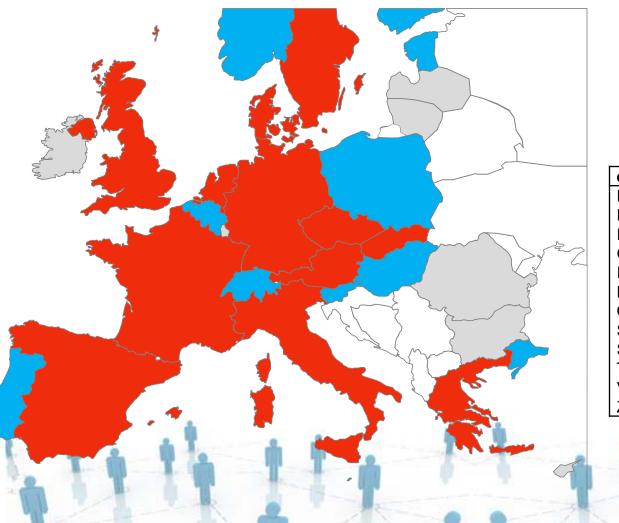
epSOS, a European large scale pilot for interoperability

- Cross-border exchange of:
 - Patient Summary
 - Electronic Prescription





epSOS participating countries



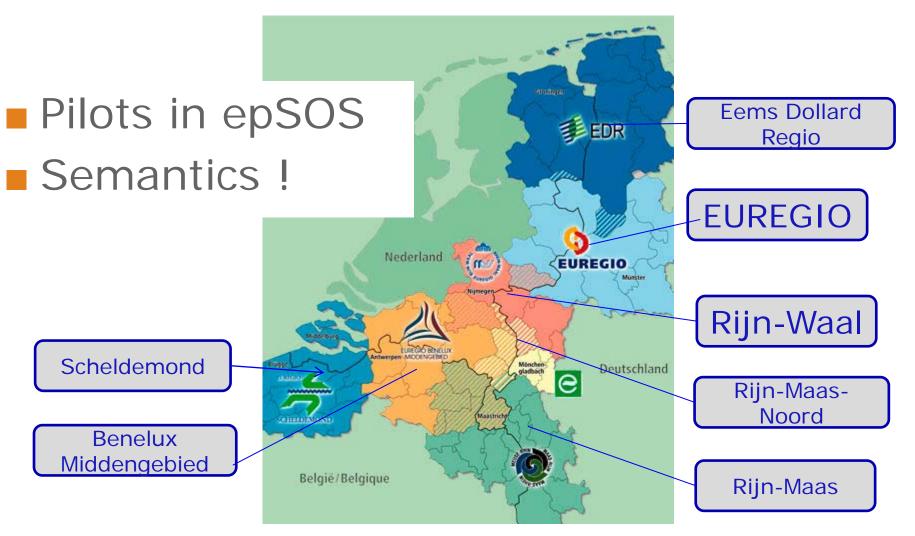
Deelnemende landen epSOS I & II
Deelnemende landen epSOS II
EU lidstaat (niet deelnemer)
Niet EU land

epSOS I	epSOS II
Denemarken	België
Duitsland	Estland
Frankrijk	Finland
Griekenland	Hongarije
Italië	Malta
Nederland	Noorwegen
Oostenrijk	Slovenië
Slowakije	Polen
Spanje	Portugal
Tsjechië	Turkije
Verenigd Koninkrijg	Zwitserland
Zweden	

Collaboration BE-NL?



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Lessons learned

- Build one national competence center
- With a good relationship to the ministries
- Link to the field: professionals, organisations, industry
- Realise that most time is invested in consensus processes
- Prepare legislation well in time



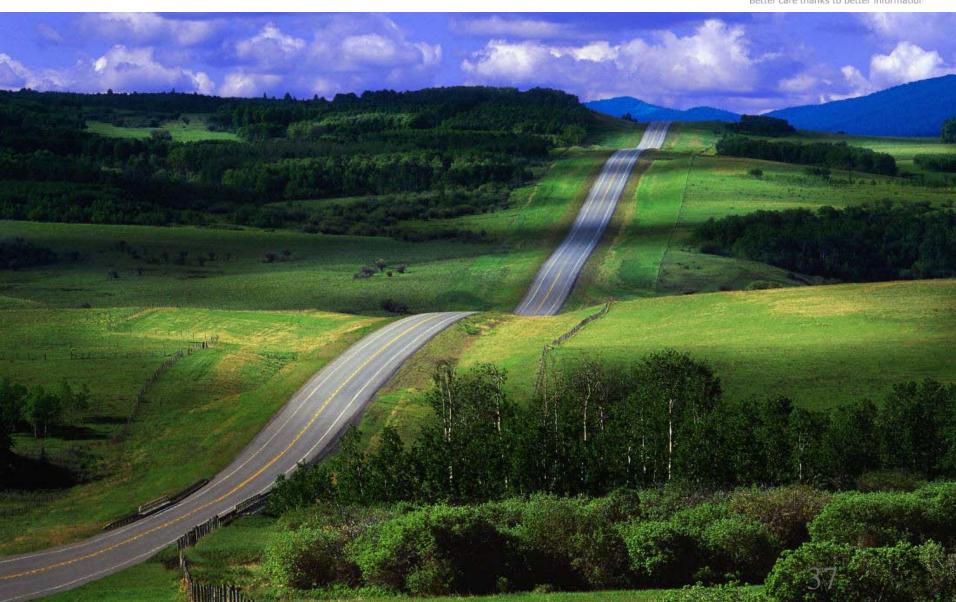
Lessons learned (2)

- Do not run too fast with infrastructures: keep in touch!
- Use regional organisations:
 - Organise regionally
 - Standardise nationally (and beyond!)
- Work on true interoperability organised, is more than infrastructure!





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- www.nictiz.nl
 - Plans, activities, newsletters
 - Project-info Nictiz / Nationwide
 - Standards
 - Reports
- www.epsos.eu
- sprenger@nictiz.nl

