

Radiology Image Sharing Pilot

Business Background

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EHR: A Global Trend

UK

NHS embarks on £12 billion programme to computerize the NHS

Canada

Health Infoway investment total cost expected CAD 10-12 billion

AUSTRALIA

Over A\$1B in state initiatives

USA

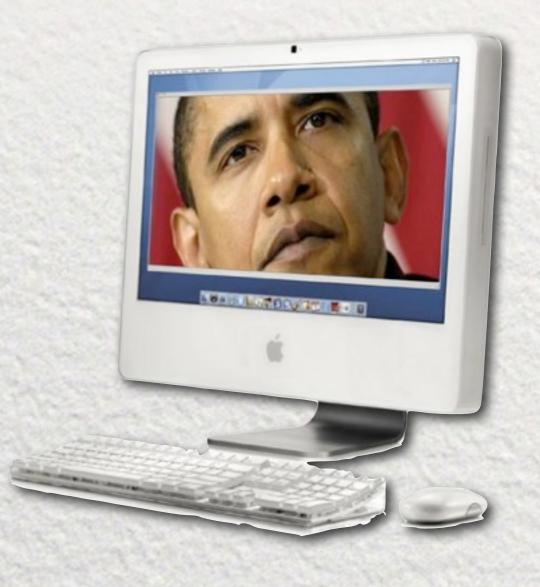
Kaiser Permanente invested US\$4 billion in electronic patient record project







...and the US healthcare system!





Mr Donald Tsang, CE, HKSAR Policy Address 2007



Participation of all stakeholders

Institutional Setup Government-led model

Steering Committee

Provide guidance and inputs to the work of the eHR Office

Gov't office responsible for -

1. Legal framework

2. eHR standardization

3. Design, develop, operate and maintain eHR sharing infrastructure

4. Administer partnership models with private sector

eHR Office

HA as technical agent

Guiding principles of eHR development

- 1. Government-led model
- 2. Compelling But Not Compulsory Record Sharing
- 3. Privacy and Security of Paramount Importance
- 4. Open Technical Standards
- 5. Building Block Approach

3 streams, 2 phases

Workstreams

- eHR Infrastructure
- CMS adaptation
- Standards

Phases

- Phase I
 - Sharing infrastructure
 - Doctor portal
- Phase II
 - Clinical modules
 - Patient portal

Present

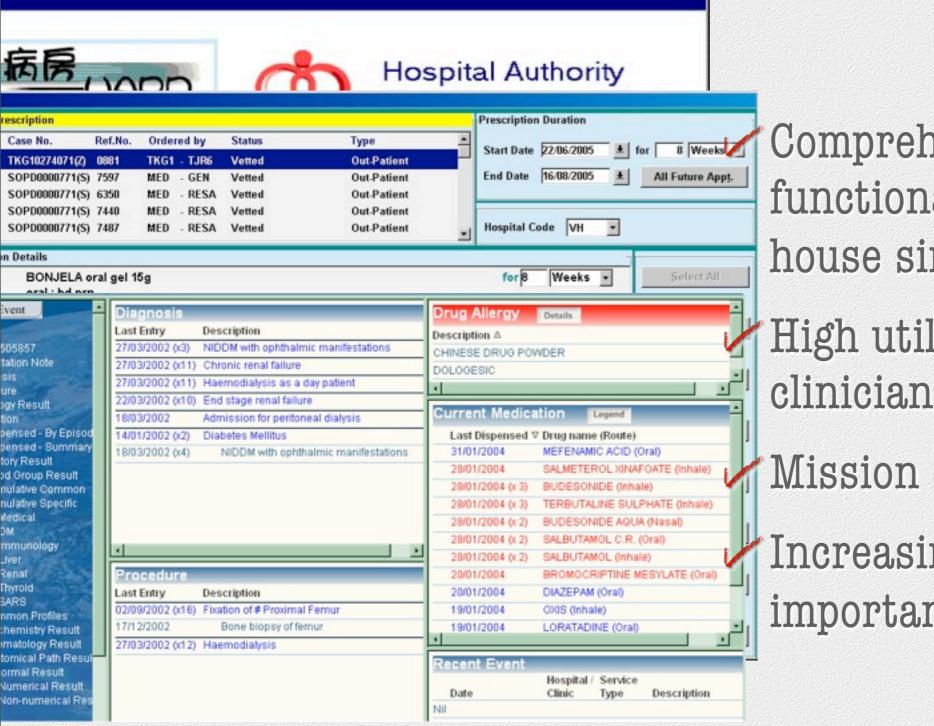
CMS & ePR

HA's CMS is the largest medical record system in the world!



Health Informatics

Clinical Systems in the HA

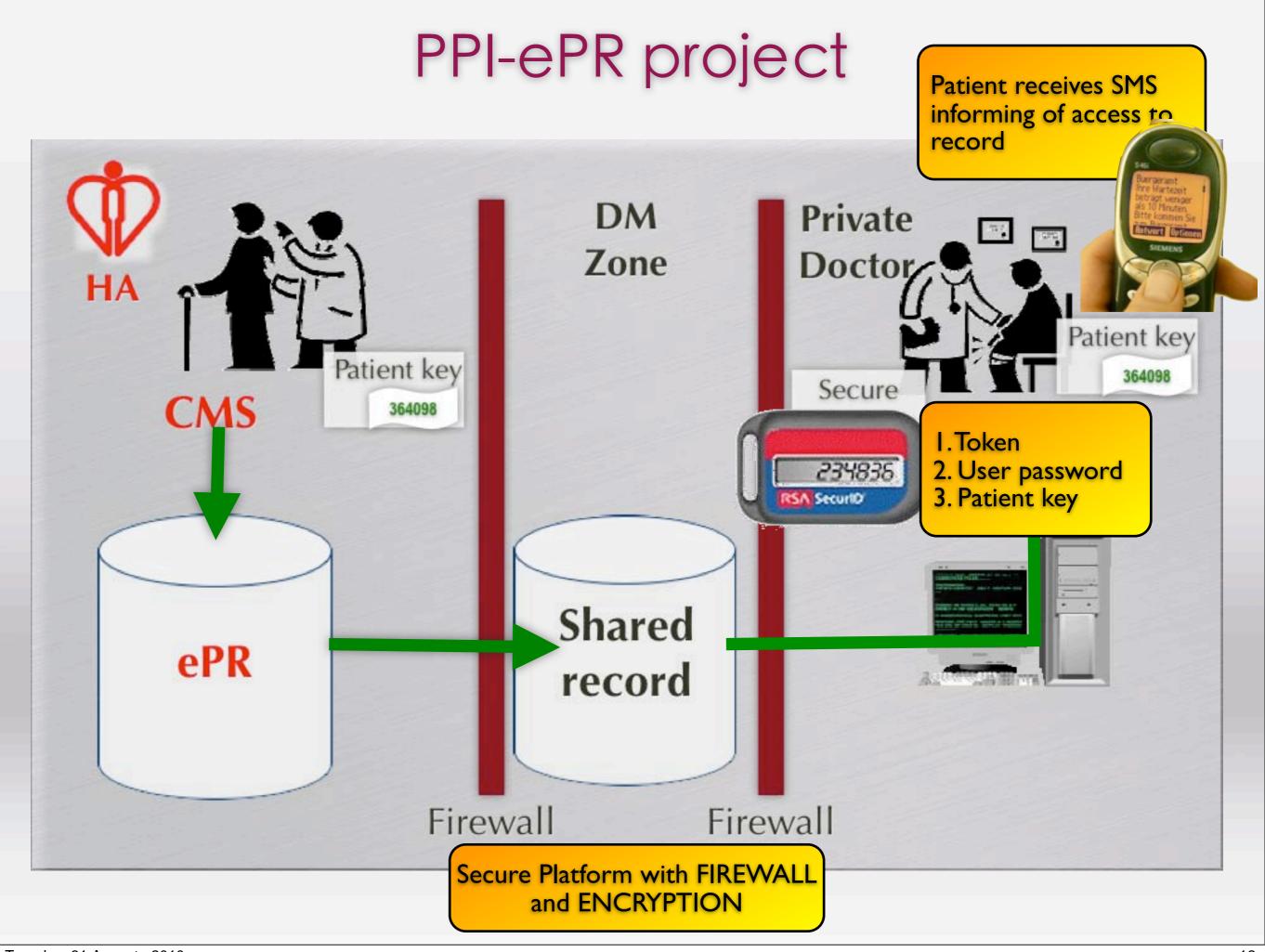


Comprehensive functionality developed inhouse since early 90's

High utilization by clinicians

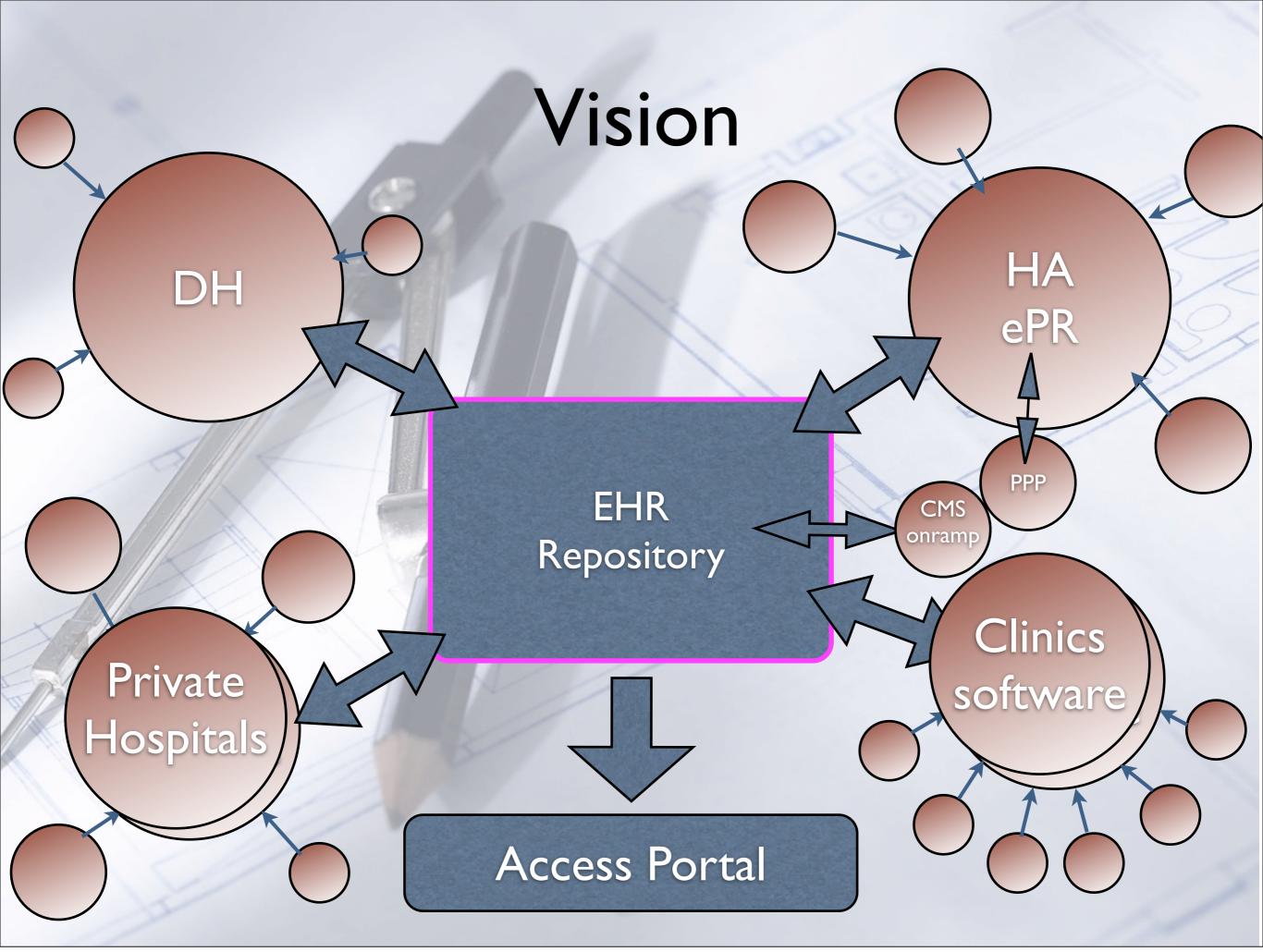
Mission critical systems

Increasing strategic importance



Future

CMS III & eHR (一人一病歷)



eHR Time Line

09/10	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18	18/19
Sharing Coverage	9.1M	0.2M	0.3M	0.5M	1M	2.5M	4.5M	5.5M	6M
	HA CMS adaptation (Basic) CMS					ptation (A	\dvanced)		
	DH ePR	and com	puterizat	ions					
PH systems upgrade									
Interface pilots									
eHR infrastructure Phase 1 eHR (Dr portal) Phase 2 eH							eHR (Patie	ent portal)	
	CMS on ramp								
	eHR Certification Scheme								
PPI-ePR and pilots									
Standardization - ongoing									

Benefits of eHR



Patient benefits

Whole record always available online

Timely and accurate information for care

Clinician benefits

Efficient clinical practice

Avoid errors associated with paper records

Society benefits

Disease surveillance

Monitor outcomes, performance and resource utilization

HA Private Hospitals

eHR sharable scope

- eHR sharable scope pre-defined, no safe deposit box or exclusion.
- HA/DH data sharable upon patient's registration.

Principles on participation

- Participation on a voluntary basis.
- Express and informed consent for eHR system and providers.
- Consent to providers during <u>first</u> consultation.
 - —One year rolling / indefinite consent.
 - -Referral arrangement.
 - -Special consent arrangement.

Withdrawal

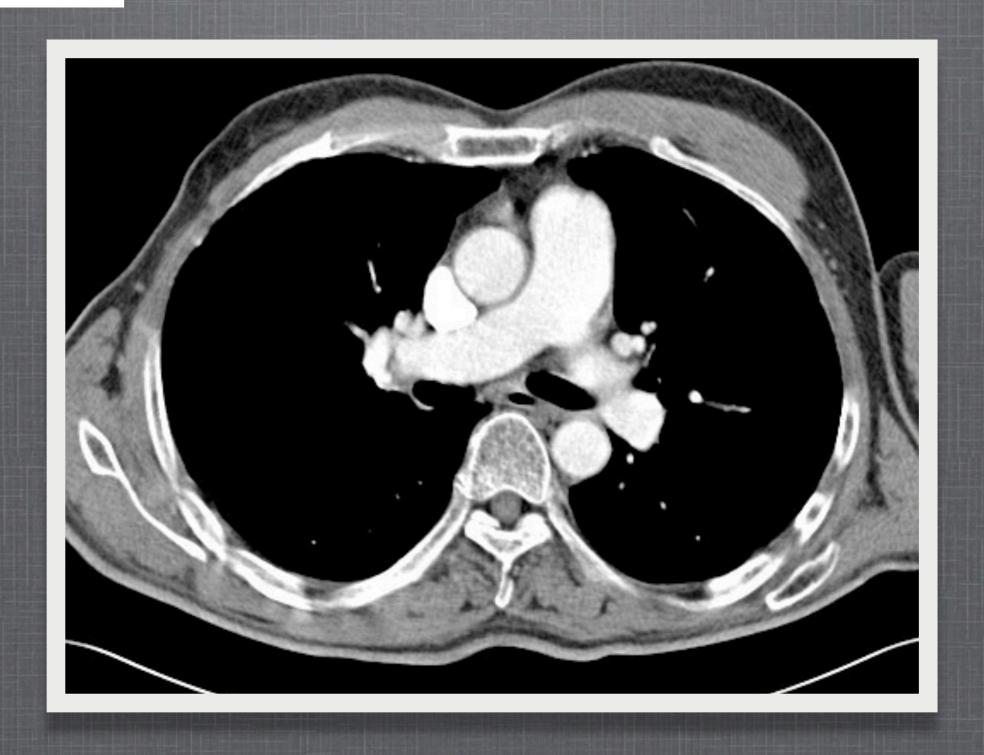
- Patients may withdraw any time.
- Frozen eHR of deceased/ withdrawn patients kept for 3/10 years before de-identification.
- Rejoining arrangement.

Use of eHR data

- Primary: clinical use, "need-to-know", "patient-under-care".
- Secondary: public health research and surveillance.
 - Anonymised: approved by eHR authority;
 - Identifiable: approved by SFH on recommendation by research board



Radiological Sharing From Private



Agenda

- Business Flow
- Legal Requirement
- Technical Requirement
- List of private providers for radiology service



Legal Requirement & Limitation

- Memorandum of Understanding (MOU)
- Patient's consent
- Patients without HKID cannot join this pilot

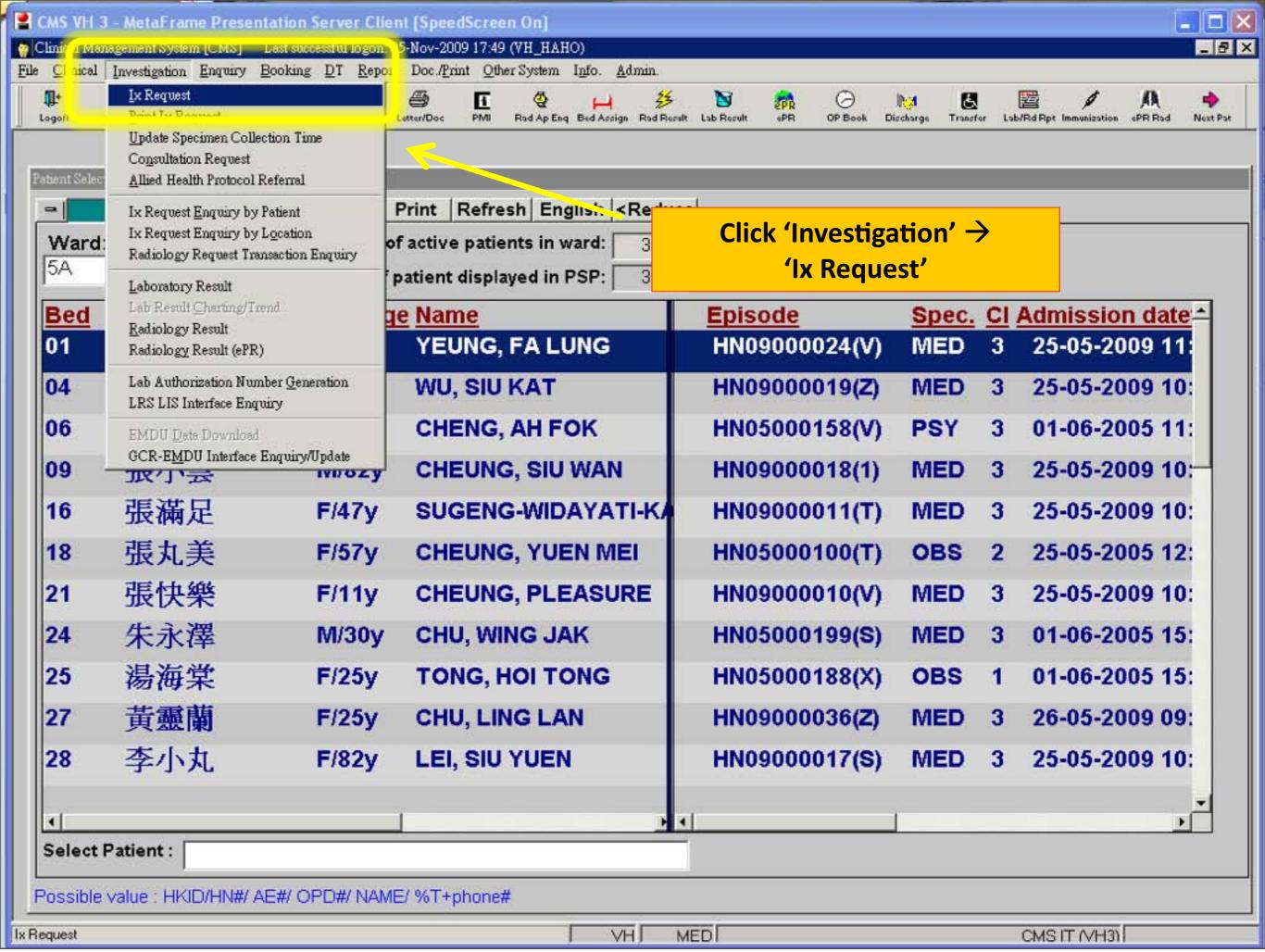
Technical requirement

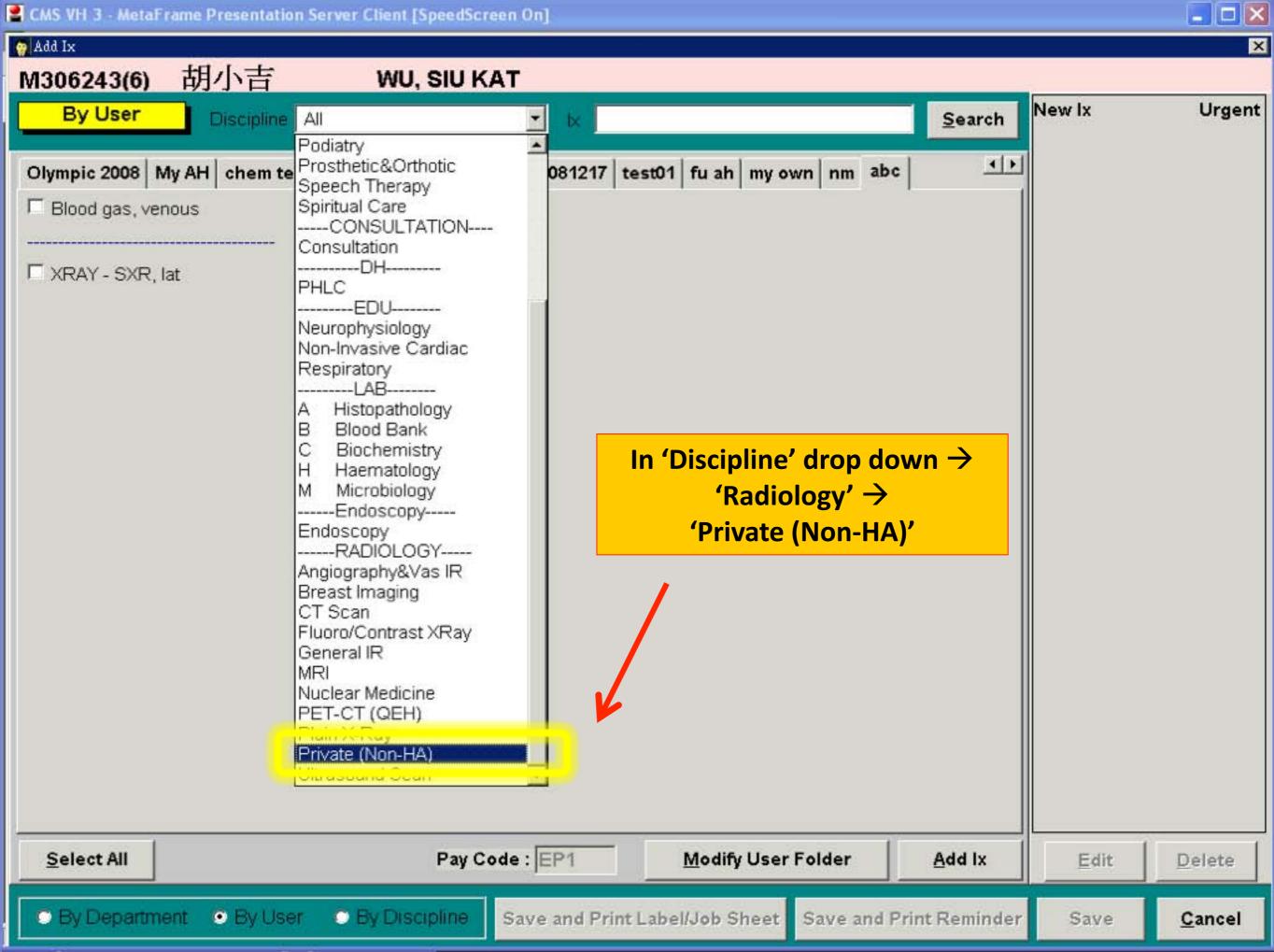
- Proposed Technical Solution
 - 2D barcode for patient identification
 - Standards
 - HL7 for data and report in pdf
 - Radiology images in DICOM III
 - Requires DICOM workstations capable of sending images
 - Security
 - Site SSL / VPN

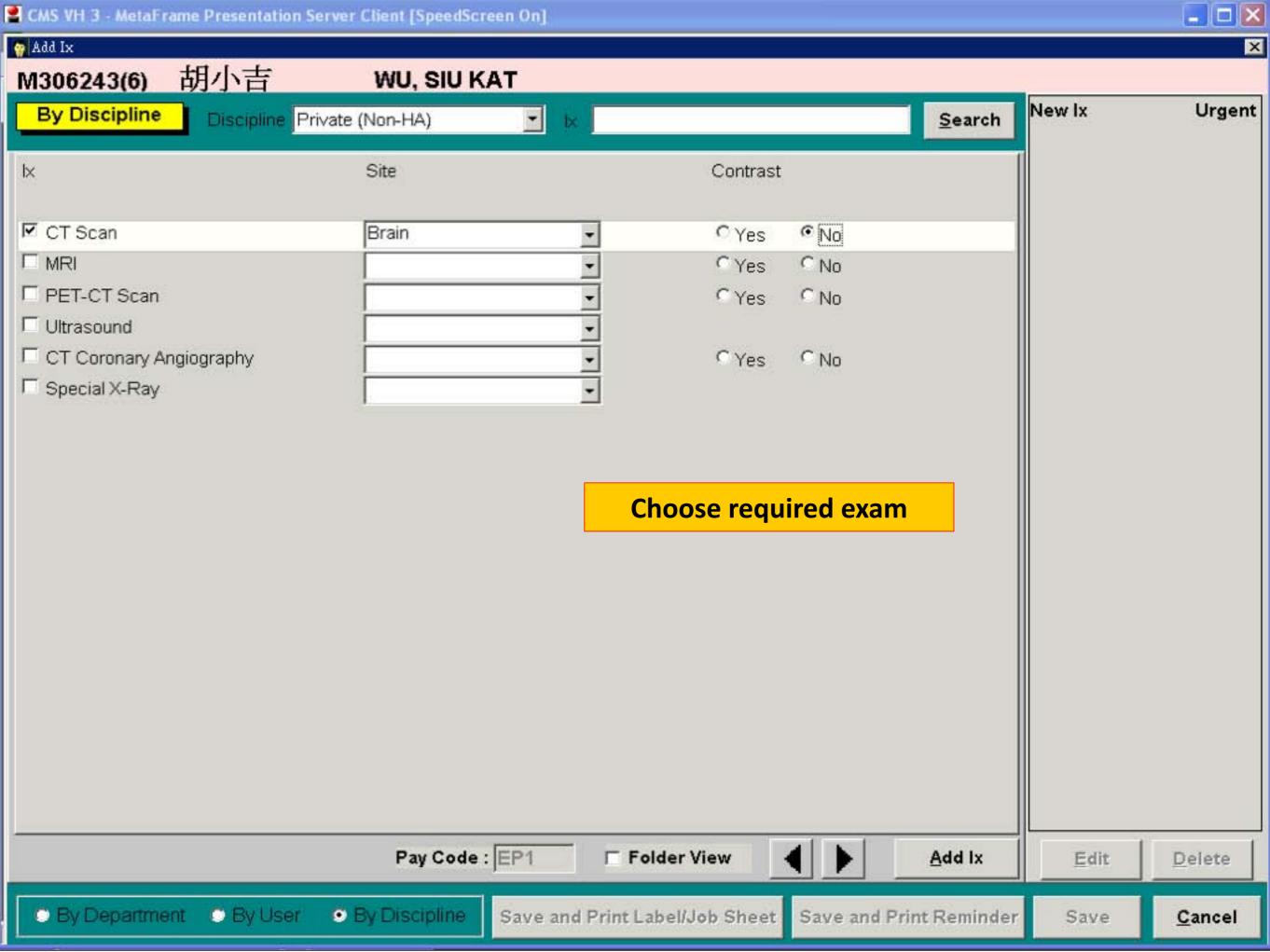
On referring out Radiological Sharing with Private

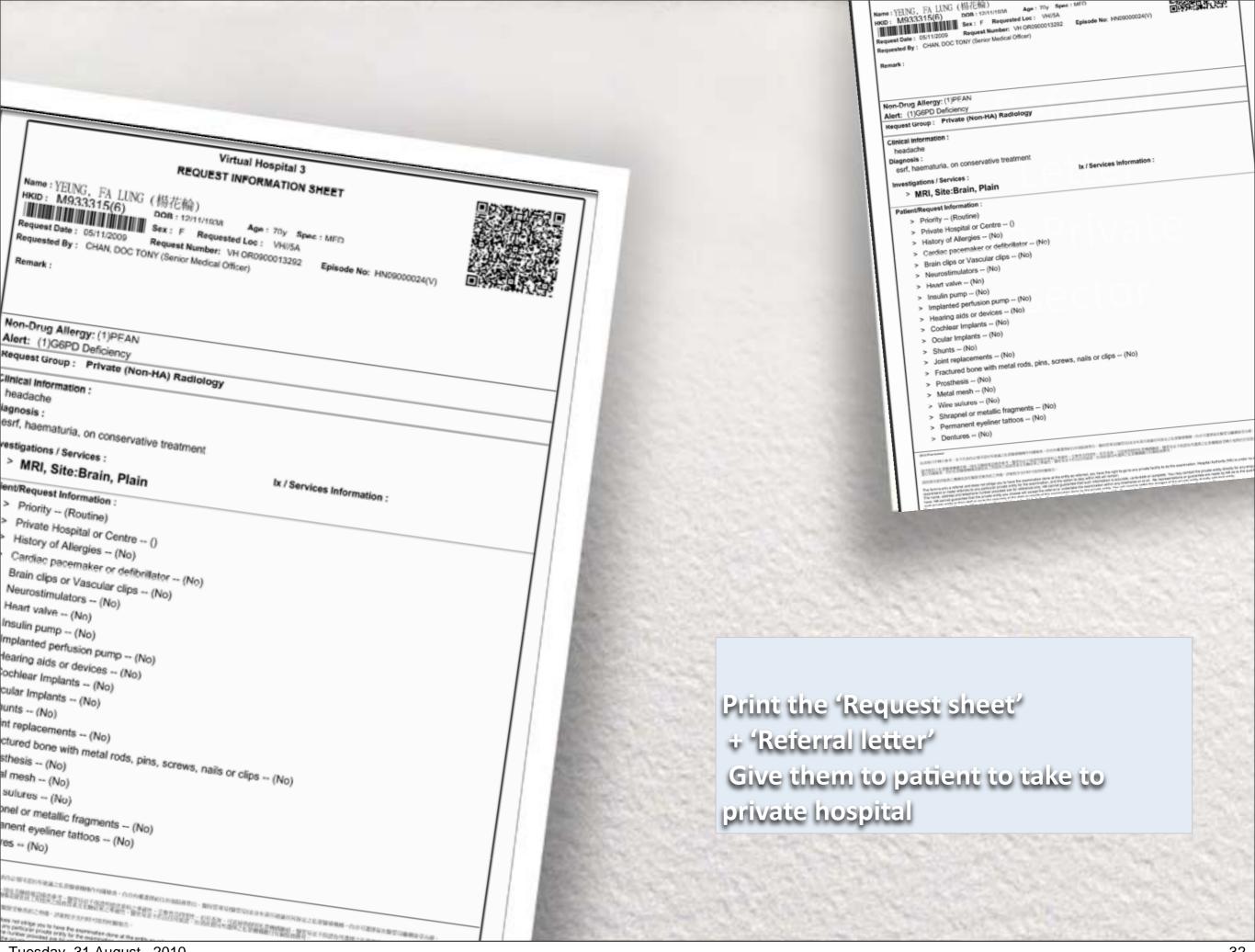
Referral to Private

- Invitation to all private radiologists for service listings in Nov 08 (updated regularly)
- Starting Jan 09, GCRS for private radiology is available
- Details of referral will be printed out in standard forms
- Patient Demographics in 2D barcode



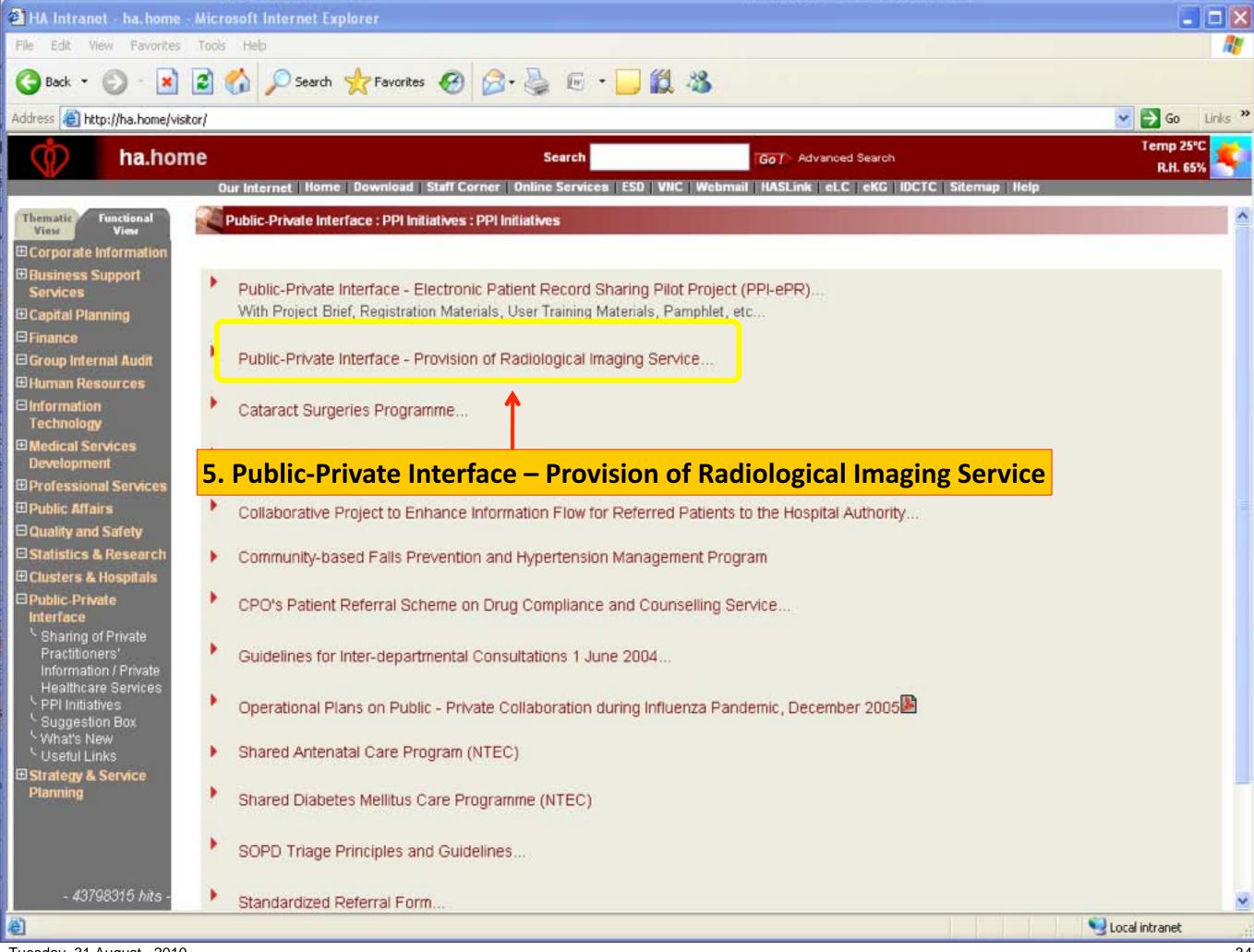


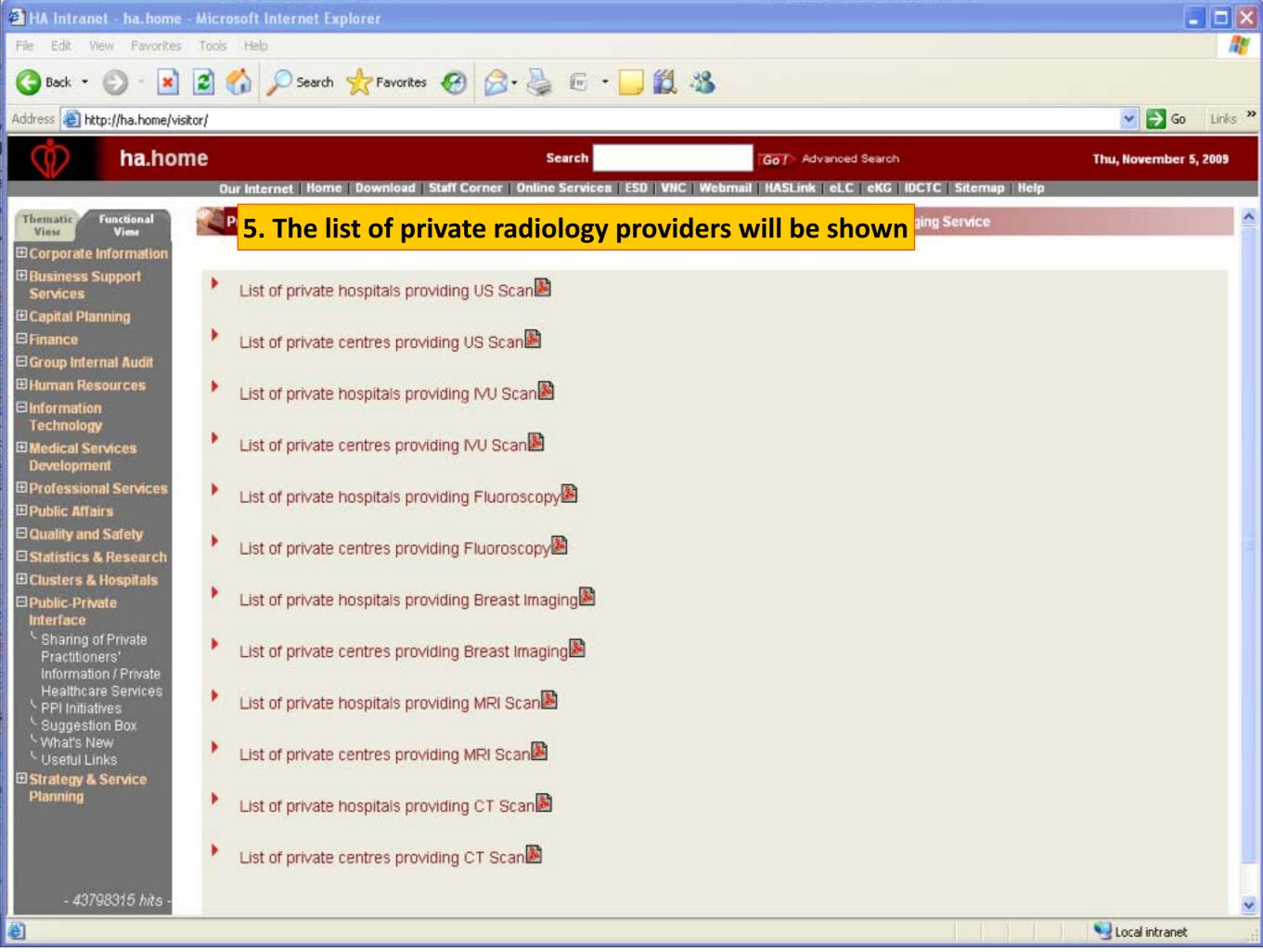




The list for private radiology service providers

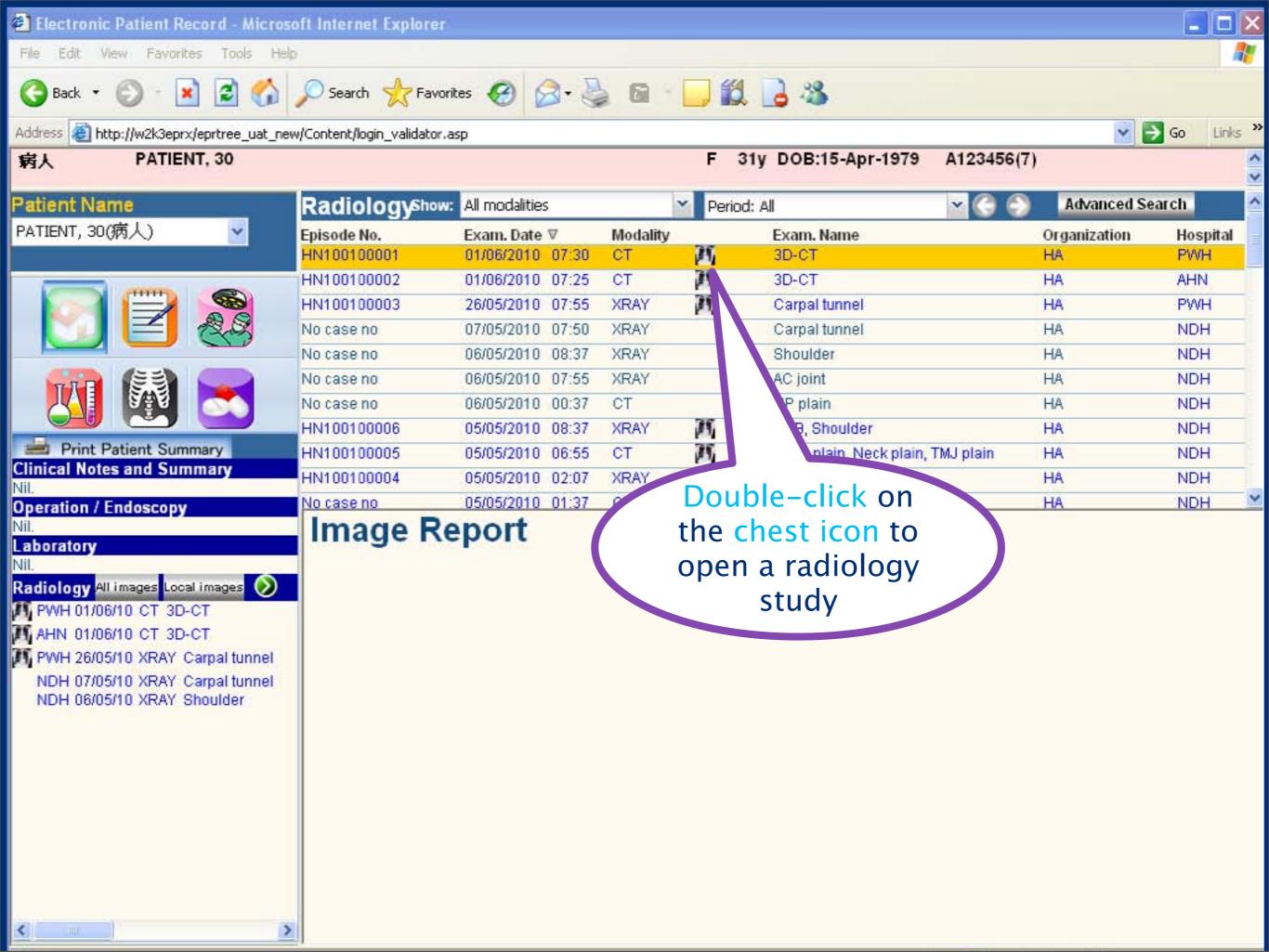
Access through http://ha.home/



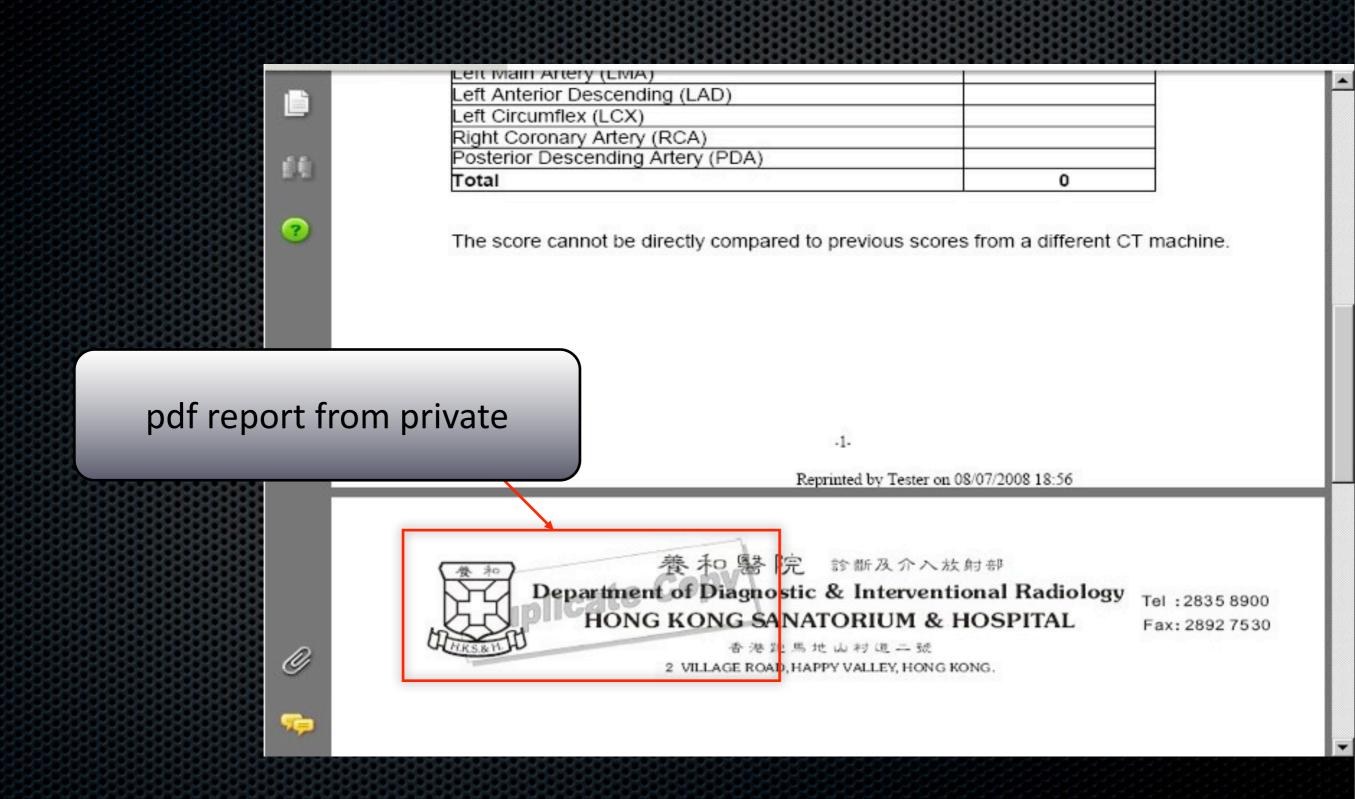


At the private facility

- Register the patient (using 2D barcode)
- Get informed consent
- Perform the examination
- Send the images and report to HA once endorsed



Displaying radiology PDF reports from private



Benefits

- Reduce time for delivery from private to HA
- Patients do not need to bring the films and reports to clinicians repeatedly
- Allow clinicians from different specialties to access radiological images done in private hospitals
- Ensure a more complete patient record