

HEALTH *one*™



Clinical Management, for life

Electronic Healthcare Records: Global Convergence

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Barriers to wide HIT* adoption

- Direct and indirect costs
- Privacy and confidentiality concerns
- Lack of **interoperability**

* HIT: Health Information Technology



Semantic interoperability

The ability of two or more IT systems to exchange information and to make mutual use of the information that has been exchanged.



“the value of a particular HIT system installed by one stakeholder tends to increase with the number of other HIT systems installed elsewhere with which that stakeholder’s HIT system can communicate”.

Anderson et al., 2006



EHR* Interoperability : current status

* EHR: Electronic Healthcare Record



Most clinical data still on paper..

NAME: [REDACTED] UNIT NUMBER: [REDACTED]

LABOUR & DELIVERY (Use 24 hour clock) [REDACTED] 14

Record Of Progress And Evaluation In Labour (print name and designation after first entry)

[REDACTED] SFO

Reviewed. Pump for 1/2 hr prob.
 Ho of 85%
 Needed syto for ↓ contractions about 7cm.
 Decent progress since.
 Epidural 1x-2fx
 Ho urges to push really according to patient
 Contractions 4:10 but poor duration & strength (on 60 u/s /syto)
 Pf: Left 1/2.
 VE: Head of F1
 Caput +1 Ho unengaged
 Of position.
 Cx F/D. Ho NO DESCENT

Tried pushing - poor maternal effort despite instruction
 Although epidural working well, doesn't stop longstanding
 spasmodic hip pain.
 Very problematic
 FHR ✓ CTG ✓

No descent with attempts at pushing - poor effort.
 Plan... a) Push syto ↑
 b) Need really try to push & work on technique
 c) reassess at interval 15 mins & D/W consultant

Would not be happy to have to exert traction with
 Forceps when no effort & no descent

Plan... 1) Need syto ↑
 (1) Need really try to push & work on technique
 (2) reassess at interval 15 mins & D/W consultant
 Would not be happy to have to exert traction with
 forceps when no effort & no descent.

Reviewed. Primip FT No ANC probs
 F/D at 08:45
 Needed syto for ↓ contractions about 7cm
 Decent progress since.
 Epidural in-situ
 No urges to push really according to patient
 Contractions 4:10 but poor duration & strength (on 60 u/s /syto)

PA: Ceph 0/5
 VE: Head at +1
 Caput +1 No ???
 OA position
 Cx F/D NO DESCENT

Tried pushing – poor maternal effort despite instruction
 Although epidural working well, doesn't stop longstanding
 spasmodic hip pain.
 Very problematic
 FHR ✓ CTG ✓

No descent with attempts at pushing – poor effort.
 Plan... a) Push syto ↑
 b) Need really try to push & work on technique
 c) reassess at interval 15 mins & D/W consultant

Would not be happy to have to exert traction with
 Forceps when no effort & no descent

EHR Interoperability : current status

Installed systems are **not** interoperable.

Why?

- Most vendors are SME's specialised in small niche markets
- International players do not offer interoperability of EHRs produced by their systems in different markets or institutions.
- Interoperability was not a requirement when most current systems were designed



EHR Interoperability : current status

Installed systems are **not** interoperable.

Why?

- Technical difficulty: clinical data are extremely complex
- Financial difficulty: who will pay?
- Absence of formal EHR exchange standards



EHR Interoperability : developing EHR exchange standards

Required:

Data architecture models

Clinical contents:

Terminologies

Representation of clinical concepts



Developing EHR exchange standards: Europe

- R & D projects: « GEHR »: the Good European Healthcare Record
 - EU funded (4th Framework Program)
 - 1992-1994
 - Produced a data architecture enabling portability and communication of EHRs



Developing EHR exchange standards: Europe



- Standardisation: CEN Technical Committee 251, Working Group 1:
 - Progressive development of a standard based on the GEHR architecture
 - ENV 12265
 - ENV 13606
 - EN 13606: « Electronic Health Record Communication »



Developing EHR exchange standards: Europe



EN 13606:

« Electronic Health Record Communication »

“The overall goal of this standard is to define a rigorous and stable information architecture for communicating part or all of the electronic health record (EHR) of a single subject of care (patient). This is to support the **interoperability** of systems and components that need to communicate (access, transfer, add or modify) EHR data via electronic messages or as distributed objects”



Developing EHR exchange standards: USA

The HL7 Version 3 project



"represents a new approach to **clinical information exchange**. It is built from the ground up around a single object model (Reference Information Model - RIM) and a rigorous UML-based methodology that ties model to messages and finally to the message's expression in XML syntax."

The RIM was accepted as a standard by ANSI in 2003



Developing EHR exchange standards: USA



The HL7 « Clinical Document Architecture »

Provides an **exchange model** for clinical documents (such as discharge summaries and progress notes)

Is based on the HL7 V3 RIM, XML, and coded vocabularies

Release2 was adopted as an ANSI standard on April 21, 2005



Developing EHR exchange standards: openEHR

***openEHR* is an international not-for-profit
Foundation, working towards:**

- Making the **interoperable**, life-long electronic health record a reality
- Improving health care in the information society.



Developing EHR exchange standards: openEHR



EHR Interoperability : global convergence

Informal co-operation

- Overlapping membership
- Academic initiatives
- Industrial initiatives

Formal co-operation

- HL7 /CEN TC251 memorandum of understanding
- ISO umbrella



EHR Interoperability : global convergence



Technical Committee 215: Health Informatics

Projects:

...

ISO/DIS 13606-1: Electronic health record communication –
Part 1: Reference model

ISO/HL7 NP 27932: Clinical document architecture, release 2



EHR Interoperability : global convergence



Brussels (6 November 2006) – CEN, the International Organization for Standardization, ISO and the Standards Developing Organization HL 7 decided to further advance shared plans to coordinate and collaborate in delivering global standards that enable interoperable capabilities in the healthcare domain. These plans will enhance the contributions of the three standards development organizations (SDOs), strengthen the delivery of standards-based solutions to all customers and support the goal of safe, accessible, quality and effective health service delivery.



Global convergence :

On-going work

- CEN 13606 / HL7 v3 harmonization project
Deliverable: an implementation guide which will allow the re-use and sharing of clinical information by stakeholders that need to support HL7 and CEN and ISO standards
- Detailed Clinical Models (CEN / HL7 / openEHR)
Deliverable: a repository of detailed clinical models, held in a single formalism (e.g. CEN/openEHR archetypes)
Convertible in other formalisms such as HL7 templates
With reasonable ease.



EHR Interoperability : can it work?

HEALTHone™



Clinical Management, for life

An EHR server and system

- based on the GEHR architecture
- with progressive architecture enrichments towards

CEN EN 13606 compatibility

HL7 CDA rel. 2 compatibility

openEHR archetypes compatibility



EHR Interoperability : can it work?

HEALTHone™



Clinical Management, for life

Adaptable to a variety of
different medical specialities
different healthcare organizations

Yet fully interoperable between these sites



South Africa

The AIDS team of the healthcare services of a mining company,
South Africa



USA



An 80 physician healthcare center,

Washington State USA



Europe



A 250-bed hospital
in Brussels, Belgium



China

The EHR services for
The Special Olympics
World Summer Games,
Shanghai October 2007

The screenshot shows the official website for the 2007 Special Olympics World Games in Shanghai. The top banner features the event's logo, which is a stylized green eye with two figures inside, and the text "2007世界特殊奥林匹克运动会" and "2007 Special Olympics World Games". Below the banner is a navigation menu with links for "主頁" (Home), "关于特奥" (About Special Olympics), "运动项目与运动员" (Sports and Athletes), "欢迎到中国" (Welcome to China), "新闻" (News), and "联系我们" (Contact Us). A "Volunteers CLICK HERE" button is also present. The main content area displays a calendar for October 2006 and a news article titled "2007年世界特殊奥运会 特奥热线'962007'开通仪式举行". The article text describes the opening ceremony of the Special Olympics hotline "962007" on September 16, 2007, in Shanghai. It mentions the participation of Shanghai Vice Mayor Zhou Taifeng, the Chinese Paralympic Association President, and other officials, along with Special Olympics athletes and global leaders. The ceremony marked the official launch of the hotline, signifying the start of the information and communication system for the 2007 Special Olympics World Games.

2007世界特殊奥林匹克运动会
2007 Special Olympics World Games

Special Olympics
WORLD SUMMER GAMES
SHANGHAI 2007

Volunteers
CLICK
HERE

让我获胜,如果我不能获胜,让我勇敢地去学

:: 主頁 :: 日历

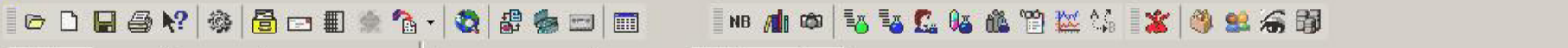
10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 Oct 2006

2007年世界特殊奥运会
特奥热线"962007"开通仪式举行

9月16日, 2007年世界特殊奥运会特奥热线"962007"开通仪式系列活动在上海长途电信大楼举行。上海市副市长、组委会常务副主席、执委会主任周太彤同志, 中国残联理事长、组委会副主席汤小泉同志和特奥运动员代表、全球特奥领袖乔美丽共同启动按钮, 特奥热线962007正式开通, 这标志着2007年世界特殊奥林匹克运动会信息通信系统

组织机构

火炬跑



Problems Vaccine Diagnostic

Active History

Problem	Start date

Transactions

Filter: Full contents

Moment of occurrence	Transaction n...	R...
Administrative chapter		
24/03/2006 17:08	identification	Dr. A
Medical chapter		
24/03/2006 17:09	consultation	Dr. A
24/03/2006 17:10	consultation	Dr. A
18/06/2006 22:30	consultation	Dr. A
8/10/2006 14:49	consultation	Dr. A

Medical transaction Action plan Health record form

- Patient details
- Medical provider details
- Subjective findings
- Objective findings and assessment
- Plan of action**

English 简体中文

Plan of action

Treatment provided / action taken / recommended

Medication: Yes No

Medication form completed: Yes No

Prescription issued: Yes No

Result of encounter

- Transferred:
- Discharged treated:
- Discharged with referral
- Discharged without treatment
- Patient refused treatment

Priority:

- Routine
- Emergency
- Stat

Fit to compete: Yes No

Problems Vaccine Diagnostic

Active History

Problem	Start date

Transactions

Filter: Full contents

Moment of occurrence	Transaction n...	R...
Administrative chapter		
24/03/2006 17:08	identification	Dr. A
Medical chapter		
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24/03/2006 17:10	consultation	Dr. A
18/06/2006 22:30	consultation	Dr. A
8/10/2006 14:49	consultation	Dr. .

Medical transaction Action plan Health record form

- 个人信息
 - 医护人员信息
 - 自述症状
 - 检查发现与评估
 - 治疗方案**
- English 简体
中文版

治疗方案

提供什么治疗, 采用或建议采用何种措施

用药: 是 否
 已填写用药单: 是 否
 处方药: 是 否

就诊结果

转院: 转院:
 治疗后离院:
 建议转诊后离院
 未治疗离院
 病人拒绝治疗

就诊类型:

常规
 急诊
 紧急

可参加比赛: 是 否

<< Previous
Cancel X
Save Incomplete ✓
Save ✓

Conclusion

International, standards-based interoperability of EHRs has become an achievable goal .

An immense effort involving industry, healthcare providers, patients, insurers and authorities is now required for implementing the new standards as widely as possible.

