Making Interoperability Work: what is needed?

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Interoperability

cooperation and working together for health gain and social well being in border areas
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Health Service Executive (RoI)

cooperation and working together
for health gain and social well being in border areas
CAWT – What We Do

Vision
To realise opportunities and develop new ways to improve health and social care services for the well-being of people through collaboration across borders and boundaries

Enable health services to be more accessible within border areas

Attract EU funding to support the development of ‘additional’ services, based on local need

Innovate pioneer new ways of delivering services
EU work programmes

EU INTERREG IV 2009-2015 (€30 million)
• 12 cross border health and social care projects ‘Putting Patients, Clients and Families First’
• 53,000 service users / 43,628 staff benefitted

EU INTERREG V 2017-2021
• 6 Project Themes
• € 53m available to Health with some still to be allocated
• Underwritten by UK and ROI governments after 2019
New Work Programme - EU INTERREG VA

6 project applications to Health and Social care theme.
€53 million = total funding available for Health Theme.
To be delivered by Dec 2021

- Acute Hospital Services ‘Connecting Services, Citizens and Communities’
  €8,810,775.20
- Mental Health Innovation Recovery ‘i-Recover’
  €7,614,750.66
- Children’s Services Multiple Adverse Childhood Experiences ‘MACE’
  €5,010,240.11
- Primary Care & Older People (Scotland leading) ‘mPower’
  €8,708,617.82
  CAWT
  €3,512,373.43
- Population Health Community Health Sync ‘CoH-Sync’
  €5,010,370.75
- Disability Services

€53 million = total funding available for Health Theme.
“Who would have thought that Healthcare would be so complicated”
Making Interoperability Work: What’s Needed?

• What do we mean by interoperability
• What is the business need
• Who will be involved
• How will we know when it’s working
Interoperability: the ability of organisations to share information and knowledge, by means of exchange of data between their respective ICT systems. (EU, generic defn)

In healthcare, interoperability is the ability of different information technology systems and software applications to communicate, exchange data, and use the information that has been exchanged. (definition HIMSS 2013)

Interoperability: the capability to communicate, execute programs, or transfer data among various functional units in a manner that requires the user to have little or no knowledge of the unique characteristics of those units (ISO/IEC 2382-01)

Interoperability is the characteristic of a product or system, whose interfaces are completely understood, to work with other products or systems, at present or future, in either implementation or access, without any restrictions. : GDT Interop
Framework 4 Interoperability

• Addressing the complexity in provision of safe high quality services, where information sharing is a high value transaction, critical to business process initiation, delivery and completion.
• Agreed Models in an approach to understanding interoperability
• For purpose of Joint delivery of public services
• Mutually beneficial
• Generic Applicability across many service areas (ex-siloed)
• Clarity of understanding with trust
• Pragmatic starting point
• Permission to develop further
Compatible Legislation and Regulation

Similar or equivalent
Harmonised

- Consent
- Data Protection
- Healthcare Professionals
- Healthcare Providers
- Electronic Identification and authentication
- Electronic signatures
- Prescribing and supply of Medicine

Legal & Regulatory

Cross Border Healthcare directive
2011/24/EU, (multiple articles)
GDRP
2016/679/EU
Professional qualifications
2005/36/EC
eIDAS
2014/910/EU
Organisational Interoperability

➢ What is the business need?
➢ Will the services supplied meet the need?

❖ Describe Purpose and Value of specific Collaboration
❖ Establish Trust
❖ Set out responsibilities of each party
❖ Formalise at policy level
❖ Document collaboration (governance references)
Organisational Interoperability

Care Process to meet specific need
   - Describe and analyse (current fit)
   - Re-design if appropriate
   - Pathway detail (integrated)

Process Management
   - Clinical and Business
   - Tracking and measuring

Resource Dependency
   - Information
   - Systems
   - Specialist
   - Capacity
Semantic Interoperability:
“Precise meaning of exchanged information is preserved and understood by all parties”

Data Model
   Data Elements
      (concepts, definitions, values)
Terminology
   Comprehensive
   Coding mapping

Meets the information needs of:
   Healthcare Professionals
   Buss Support services
   Patients
   Systems compatibility
**Technical Interoperability:**
resolved position of having all technical issues resolved in respect of linking computer systems and services.

**Agreement:**
- Importing data – Exporting data
- Between Healthcare information systems
- Integration with national systems
- Collection, storage, processing, distribution, display

**Applications**
- Document structure
- Messaging protocols
- Communication standards
- Open standards
**Technical Interoperability:**
resolved position of having all technical issues resolved in respect of linking computer systems and services.

Hardware and Connections:
- Wires
- Wireless
- Fibre
- Bandwidth
- Servers
- Hosts
- PC’s
- mDevices

Comm & Network protocols
- Standards
- Storage
- Security
- Back-up
- DB engines
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<th>Tactical</th>
<th>Operational</th>
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Common enough ground for intended purposes

- Legislation & Regulation
- Collaboration Agreements
- Workflows & Care Processes
- Data Model, Structure, Terminology
- Integration
- Comm&Net protocols
Cross Border eHealth Information Services Environment

Data Exchange

Country B:
- National eHealth ICT Infrastructure
- NCPeH

Country A:
- National eHealth ICT Infrastructure
- NCPeH

NCPeH (National Coordination Platforms for eHealth)
Interoperability Project supporting CAWT projects

• Shared-Agreed definitions
• Shared-Agreed standards
• Well understood governance model
• Shared Information Model
• Generic service support package:
  – Information, Business, Care SOP’s, Tech Spec
• Performance matrix based on outcomes
• Clear focus on patient safety, experience, and outcome
Making Interoperability Work: What’s Needed?

• What do we mean by interoperability
• What is the business need
• Who will be involved
• How will we know when it’s working
Grounded thinking

• Framework
• Explicit Agreement
  – Definitions, Standards
• Collaboration, Participation
Why

• CAWT Vision:
  – To realise opportunities and develop new ways to improve health and social care services for well-being of people through collaboration across borders and boundaries.
Map 26 Origin and destination of cross-border commuters from Ireland to work or study in Northern Ireland:

Map 27 Origin and destination of cross-border commuters from Northern Ireland to work or study in Ireland.

North to South: 6,456 persons

South to North: 8,295 persons
9336 persons commuting South to North regularly