

The eHealth plan 2019-2021: what are the eHealth achievements and what can we expect ?



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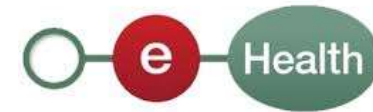
@FrRobben

<https://www.ehealth.fgov.be>

<https://www.ksz.fgov.be>

<https://www.frankrobben.be>

Roadmap 3.0 (2019-2021) is *interfederal*



Roadmap 3.0 (2019-2021) with *7 clusters*

- Clustering of closely related projects



Cluster 0
Fundamentals



Cluster 1
Transverse



Cluster 2
Support



Cluster 3
Operational
excellence



Cluster 4 Health
care providers and
institutions



Cluster 5
Patient as co-
pilot



Cluster 6
eHealth and
health
insurance funds

Roadmap 3.0 (2019-2021) covers *44 projects*

0 Fundamentals

- 0.1 Data sharing consent
- 0.2 Access matrix, therapeutic, care and other relationships
- 0.3 Basic service user and access management
- 0.4 Rules for 'eHealth vaults'
- 0.5 Information standards
- 0.6 Terminology
- 0.7 Cobrha Next Generation & UPPAD
- 0.8 Strategic research on collaboration model with software providers

3 Operational excellence

- 3.1 Basic architecture
- 3.2 SLA and service management
- 3.3 Business continuity
- 3.4 Documentation, help desk & support
- 3.5 Test environments, flows, processes, data
- 3.6 Quality of health software
- 3.7 Education and training
- 3.8 Administrative workload reduction for healthcare providers

6 eHealth and health insurance funds

- 6.1 eAttest for specialists, dentists, physiotherapists & speech therapists
- 6.2 eFac for medical houses, physiotherapists & speech therapists
- 6.3 Consultation member data
- 6.4 Digitisation of rehabilitation agreements
- 6.5 Digitisation of Chapter IV agreements
- 6.6 Subscriptions to medical houses
- 6.7 Digitisation of physiotherapy agreements

1 Transversal

- 1.1 Communication
- 1.2 Program monitoring

4 Health care providers and institutions

- 4.1 Multidisciplinary information exchange
- 4.2 Multidisciplinary functionalities
- 4.3 Electronic prescription
- 4.4 VIDIS – evolution electronic prescription
- 4.5 Decision support platform
- 4.6 BelRAI
- 4.7 Incapacity for work
- 4.8 MEDEX
- 4.9 EPF in all institutions
- 4.10 Publication of structured information
- 4.11 Registers
- 4.12 Communication about and planning of care
- 4.13 Connecting Europe Facility Patient Summary
- 4.14 Modulation of patient access by health care providers

2 Support

- 2.1 Incentives
- 2.2 Code of conduct & guidelines on sharing personal health information

5 Patient as co-pilot

- 5.1 Personal health portal
- 5.2 Digital referral platform
- 5.3 Orgadon

The Roadmap 3.0 (2019-2021) has *specific accents*

- Extension of existing concepts to other target groups or other fields of application
- Development of a framework and management model for the use of existing systems built by the government and/or the private sector
- Focus on 'operational excellence': user support, reporting on use, availability and performance (KPIs), improvement of test facilities, ...
- Improved connection with European and international initiatives and programs
- Adjusting ongoing projects, with an extra focus on concrete use in practice
- Stopping projects that are no longer relevant
- Launch of new projects to consolidate, harmonize and stabilize ongoing projects

The Roadmap 3.0 (2019-2021) involves *continuity*



Roadmap 2.0: health care providers

- ✓ Each GP manages an electronic medical file (EMF) for each patient, and publishes and updates a SumEHR for each patient in the secure health vault (Vitalink, Intermed or BruSafe)
 - 3.353.943 patients possess a SumEHR in a health vault
 - SumEHR v2 is being implemented
 - need to improve the quality of information in the SumEHR => adaptation of registration criteria for GP software

EMF structure

TESTPATIENT, Dummy (V); Dos. N°99900088; 01/01/1994 - 21 Jaar 2 Maand(en) 23 Dag(en) GmdPlus

Bestand Bewerken Beeld Verstev Help eHealth

Medisch overzicht

Bloed Groep : AB pos (28/11/2014)
 Roker : 5 [y/dag] (28/11/2014)

Belangrijke actieve GE

Psoriasis
 type II diabetes, DC Haemers
 heupgewrichtsimplantaat aanwezigheid

Allergieën

Urticaria, Amoxicilline Sandoz disp tab 20x 1 g

Medische antecedenten

Acuut myocardinfarct

Chirurgische antecedenten

2003 appendectomie
 2014 stentplaatsing
 2015 resectie lipoom

Risicofactoren

Tabaksmisbruik

Intoleranties

nausea, Tramadol Teva caps 60x 50mg

Chronische medicatie

Betnelen V zelf 30g 1mg/ g 2d
 Uni Diamicon tab retard 90x 60mg 3 d
 metformine 850 mg (oraal) 3d na eten gedurende 1 maand
 Plavix tab 84x 75mg

Vaccines

GezondheidsElementen

Alle AB A ZorgE Zorgaanpakken

Cod	Beschrijving	V	R	V	Type	Begin	Einde	Duur	Presteerder
A89	heupgewrichtsimplantaat aanwezigheid	A	B			18/02/2015		Sub-acuut	CLAEYS, Kristof
S91	Psoriasis	A	B			05/12/2014		Sub-acuut	CLAEYS, Kristof
T90	type II diabetes, DC Haemers	A	B			28/11/2014		Sub-acuut	CLAEYS, Kristof
A98	Preventie	A				18/12/2014		Sub-acuut	CLAEYS, Kristof
P17	Tabaksmisbruik	A				28/11/2014		Sub-acuut	CLAEYS, Kristof
K75	Acuut myocardinfarct		B			2013	2013	Acuut	CLAEYS, Kristof
D09	nausea, Tramadol Teva caps 60x 50mg				Intolerantie	05/12/2014	05/12/2014	Acuut	CLAEYS, Kristof
D73	Verondersteld infectieuze gastro-enteritis					28/11/2014	01/12/2014	Acuut	CLAEYS, Kristof
L79	nb distorsie					28/11/2014	05/02/2015	Sub-acuut	CLAEYS, Kristof
R74	verloofheid					09/02/2015	03/2015	Acuut	CLAEYS, Kristof
R76	Acute tonsillitis					03/12/2014	06/12/2014	Acuut	CLAEYS, Kristof
S98	Urticaria, Amoxicilline Sandoz disp tab 20x 1 g				Allergie	05/12/2014	12/12/2014	Acuut	CLAEYS, Kristof

Geneesmiddelen

Statuut	Beschrijving	Begin	Einde
<input checked="" type="checkbox"/>	Betnelen V zelf 30g 1mg/ g 2d	09/12/2014	
<input checked="" type="checkbox"/>	metformine 850 mg (oraal) 3d na eten gedurende 1 maand	09/12/2014	
<input checked="" type="checkbox"/>	Plavix tab 84x 75mg	02/02/2015	
<input checked="" type="checkbox"/>	Uni Diamicon tab retard 90x 60mg 3 d	28/11/2014	
<input type="checkbox"/>	AmocloneEG 500/125 30 tab 3 d	09/02/2015	16/02/2015
<input type="checkbox"/>	Champix tab 140x 1mg	02/02/2015	24/03/2015
<input type="checkbox"/>	Naproxen Sandoz tab 20x 500mg 3d na eten	09/12/2014	16/12/2014

Planning

Te Doen Te volgen Vaccin Chirurg. Ant.

Datum	Statuut	Beschrijving
27/12/2024	S <input checked="" type="checkbox"/>	Te doen vaccin difterie/tetanus/pertussis , Boostrix 0,5ml spuitarm
05/03/2016	S <input checked="" type="checkbox"/>	Te doen opsporing diabetes - nuchtere glycemie , & cholesterol
10/09/2015	S <input checked="" type="checkbox"/>	Te doen vaccin hepatitis e & b , Twinrix 720/20 1ml spuitarm im
10/04/2015	S <input checked="" type="checkbox"/>	Te doen vaccin hepatitis e & b , Twinrix 720/20 1ml spuitarm im
09/04/2015	I <input checked="" type="checkbox"/>	Te doen Bloedafname
27/03/2015	I <input checked="" type="checkbox"/>	Te doen DiabetesSprekUur, nog geen educatie gekregen
02/02/2015	I <input checked="" type="checkbox"/>	Te doen Wondzorg , flamineal
16/02/2015	I <input checked="" type="checkbox"/>	Herinnering verzond Mammografie-screening
09/02/2015	I <input checked="" type="checkbox"/>	Te doen Elektrocardiogram (EKG)
28/12/2014	S <input checked="" type="checkbox"/>	Te doen vaccin hepatitis e & b , Twinrix 720/20 1ml spuitarm im

Contacten

Datum	Type	Presteerder	Specialiteit
11/03/2015	Dossiercontact	CLAEYS, Kristof	Huisarts
05/03/2015	Reedpleging	CLAEYS, Kristof	Huisarts
05/03/2015	Reedpleging	CLAEYS, Kristof	Huisarts
02/03/2015	Reedpleging	THEVISEN, Pascale	Verpleegkundige
18/02/2015	Reedpleging	CLAEYS, Kristof	Huisarts
18/02/2015	Reedpleging	CLAEYS, Kristof	Huisarts
16/02/2015	Collectieve planning	CLAEYS, Kristof	Huisarts
09/02/2015	Reedpleging	CHRISTAENS, Liesbeth	Huisarts
08/02/2015	Reedpleging	CLAEYS, Kristof	Huisarts

SumEHR

Bestand Zoeken Toon Patiënt(e) Inlezen eHealth Opties Memo Calc. Uitzicht Help 1 2 3 4

Open Sluit Adm Risc Anteo ZE Therapie Jour Vacc Meet WP Fam Labo Docu Ext Acc Prest Tech Ageni Opm GMD EasyTar ctar CVRO

Patiënt(en)

Volledig EID

Dossier: 20 Opt. Dos.:

Naam: **ROGIERS** Voornaam: KURT JULIEN

Geslacht: M M Geboortedatum: 15/06/1977

Geb. plaats: BRUGGE Leeftijd: 38 j, 1 m

Straat: MAGERHILLESTRAAT Nr: 43 Bus:

Gemeente: BE 8210 ZEDELGEM

Telefoon 1: GSM:

Telefoon 2: Fax:

Roepnaam:

Beh. arts: BROWAEYS JAN

Homepage:

Email:

Werkgever: (NONE)

Beroep:

Sumehr exporteren:

Laatste export op: 29/06/2015 10:02

Hub-locatie: LOCAL

Bloedgroep:

Rhesus: IC:

Burg. stand:

Taal: Nederlands

Nationaliteit: België

Ambulant Verzekerde

Verzek. nr.: 110 - - 110/110

Titularis:

Hoeder:

Mutualiteit: CHRISTELIJKE MUTUALITEIT

Rijks. nr.: 77061527363

Periode: 30/05/2015 - 30/05/2015

SIS kaart. nr.:

EID kaart nr.: 591754437006

ISI+ kaart nr.:

OMNIO

Remgeld:

GMD dat: 01/01/2015 Set GMD GMD info: 0

GMD houder: BROWAEYS JAN Historiek

Komt in aanmerking voor diabetespas Diabetespas:

Patiënt(e) is overleden: Datum van overlijden:

Laatste contactdatum: 27/06/2015

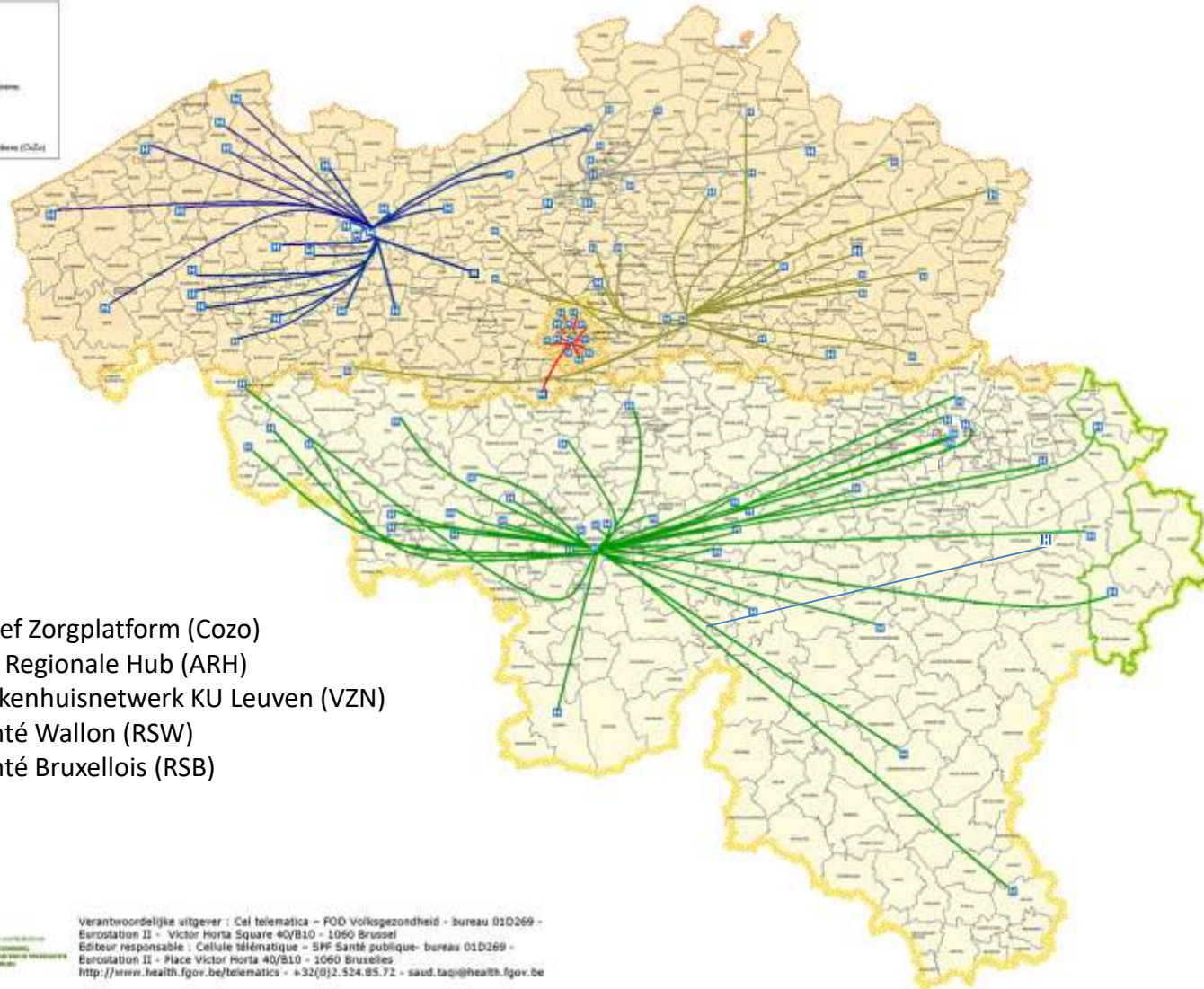
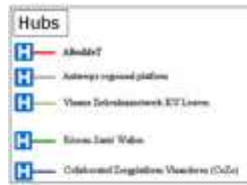
Printen Overleden Maak inactief Contactpersonen Rookgedrag Zorgteams Nieuw Wijzig Sluit

Verbonden met EHealth Gebruiker: BROWAEYS JAN Recip status: Consultatie

Roadmap 2.0: health care providers

- ✓ Every hospital, psychiatric institution and laboratory makes certain documents available electronically with a reference in the hub & metahub system and can access relevant data from the secure health vaults
 - > 200 million documents available at general hospitals
 - > 57.000 documents available at psychiatric institutions
 - > 3 million documents available at extramural laboratories
 - about almost the entire population
 - documents were consulted > 4,5 million times in the 2nd quarter of 2019
 - by nearly 52.000 different health care providers

Hubs & metahub



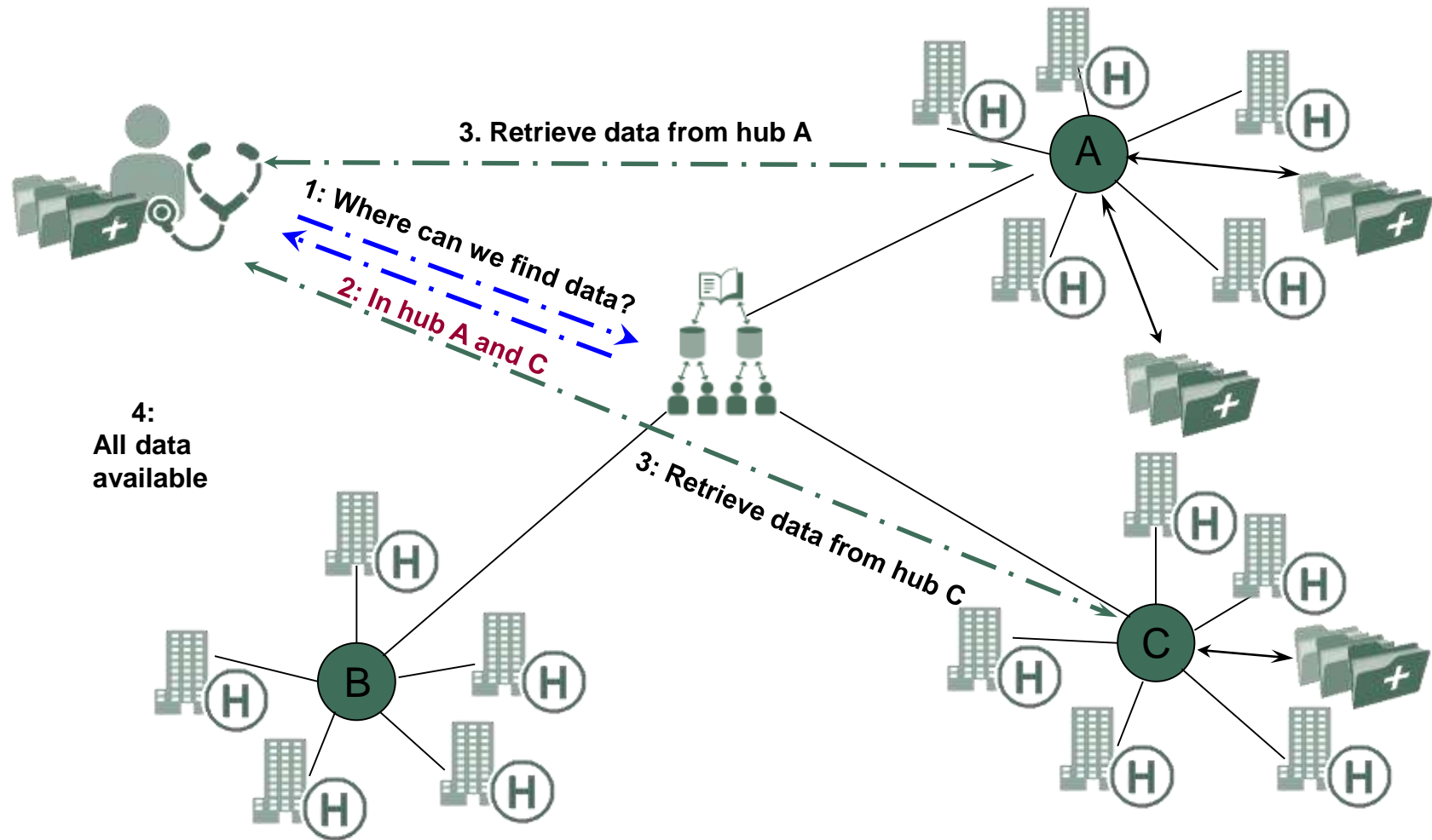
5 hubs

- Collaboratief Zorgplatform (Cozo)
- Antwerpse Regionale Hub (ARH)
- Vlaams Ziekenhuisnetwerk KU Leuven (VZN)
- Réseau Santé Wallon (RSW)
- Réseau Santé Bruxellois (RSB)

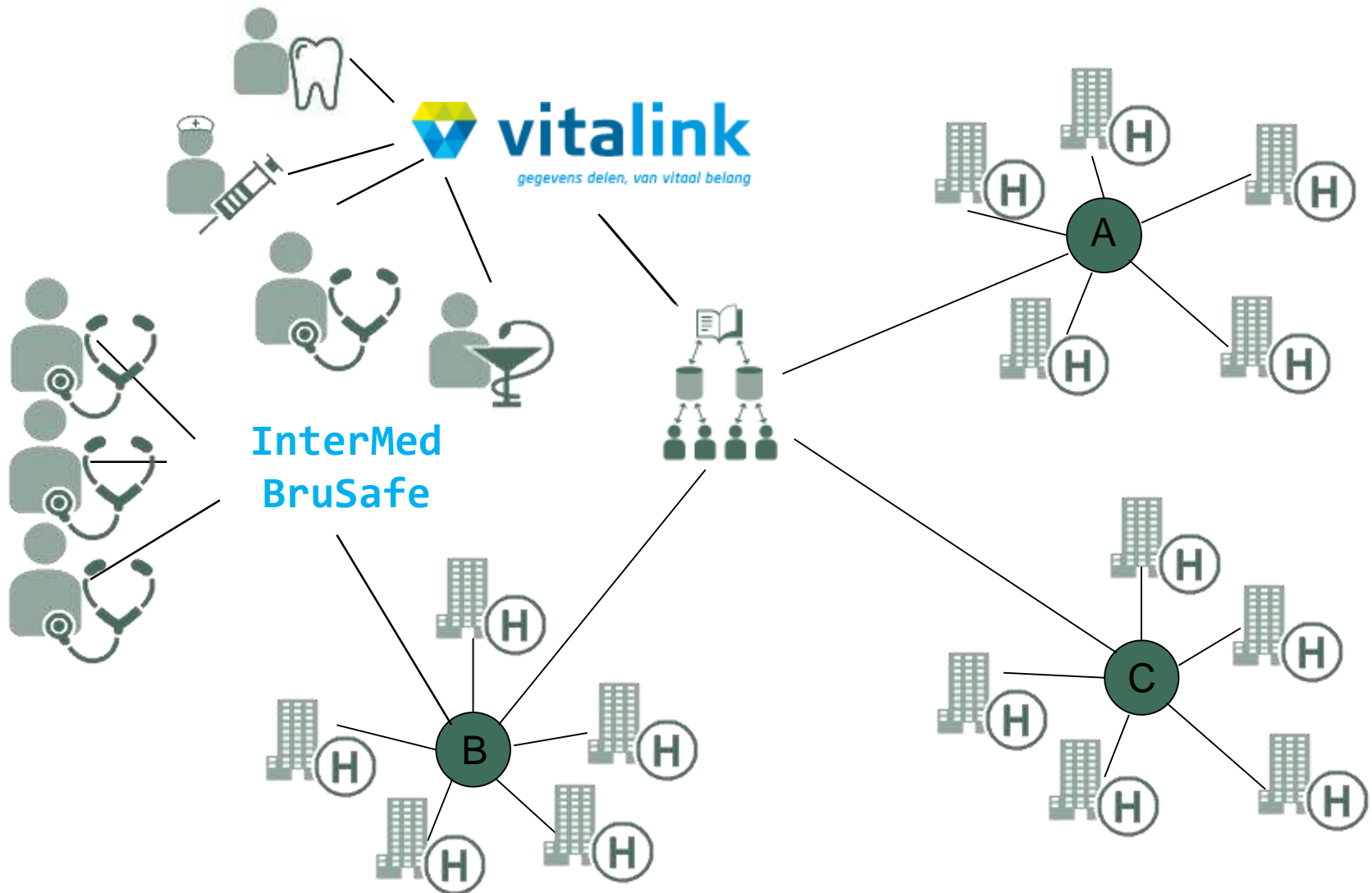


Verantwoordelijke uitgever : Cel telematica - FOD Volksgezondheid - bureau 01D269 -
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<http://www.health.fgov.be/telematics> - +32(0)2.524.85.72 - saud.ta@health.fgov.be

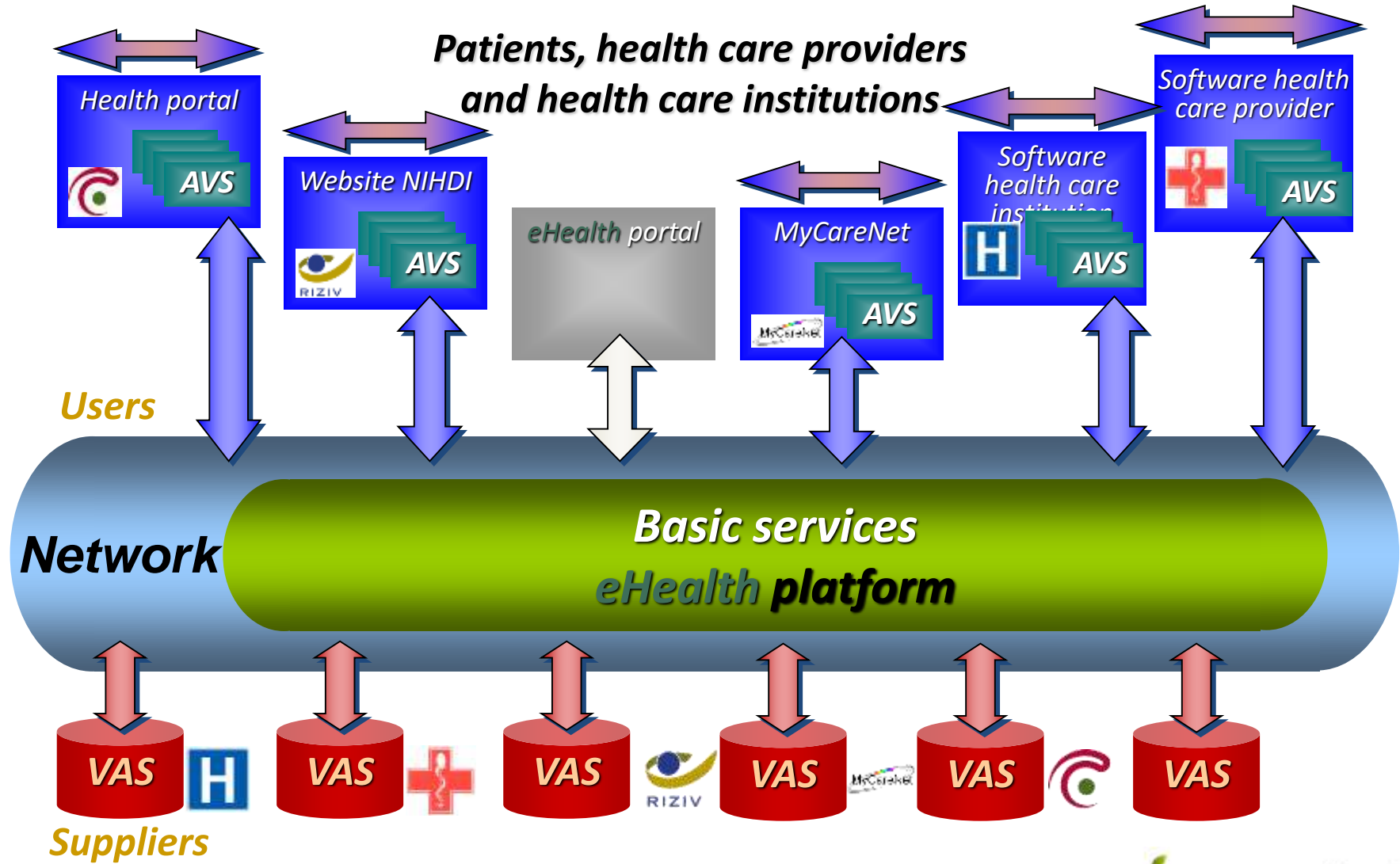
Hubs & metahub



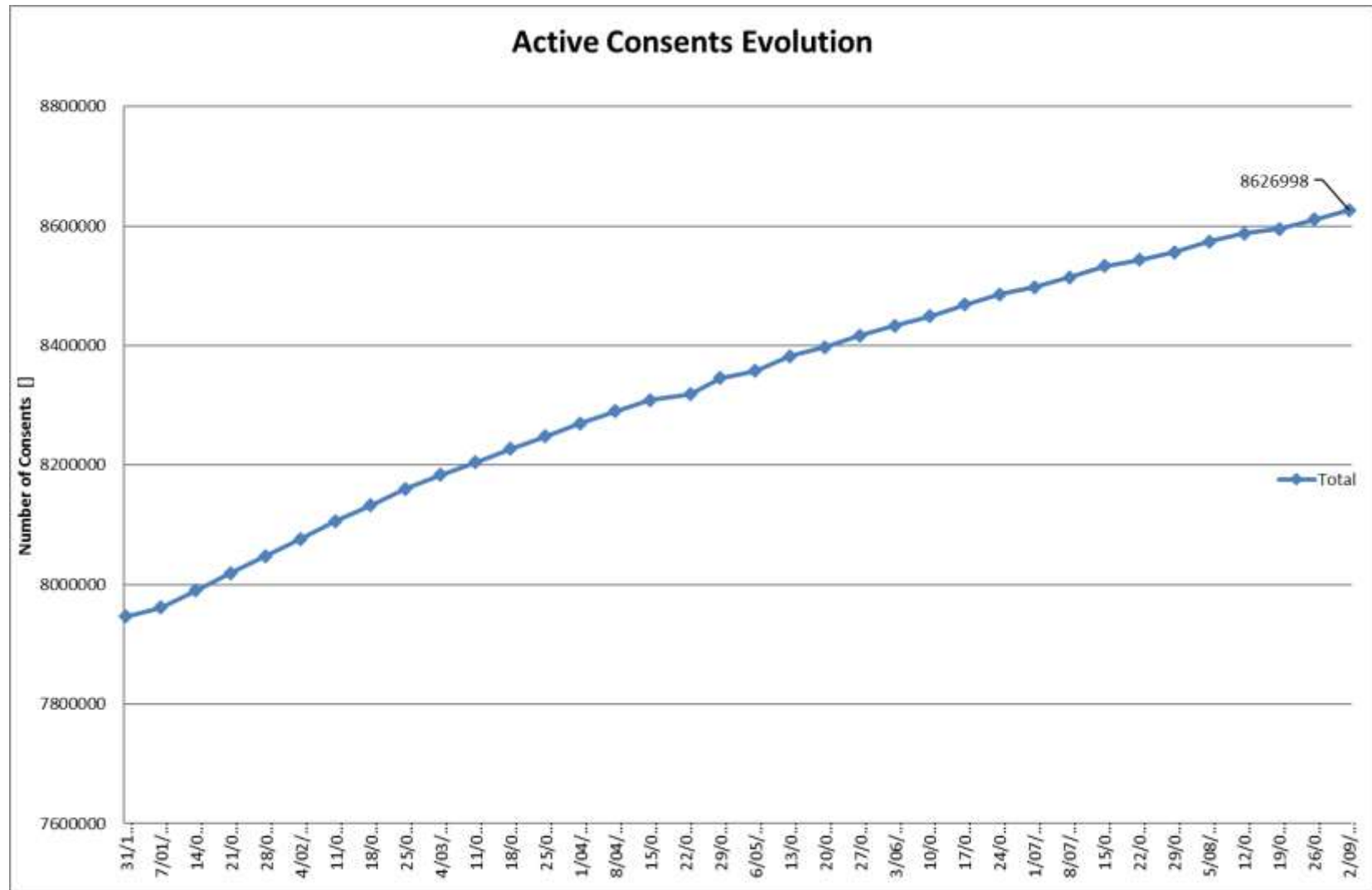
Health vaults



Basic architecture



Data sharing consent



Roadmap 2.0: health care providers

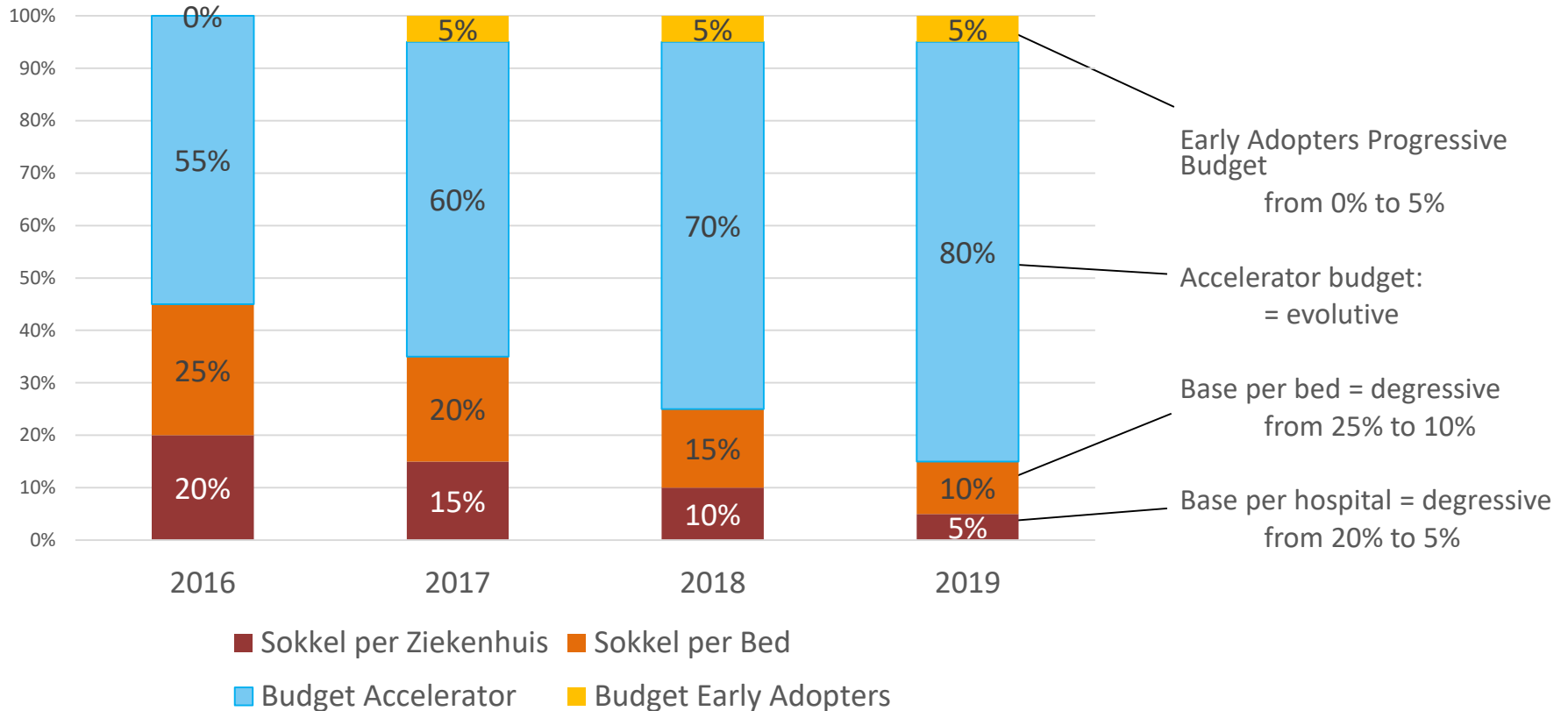
- Each hospital has an integrated, multi-disciplinary electronic patient file (EPF)
 - 77 % of the hospitals have a strategic ICT plan
 - 75% of the hospitals have a long-range ICT budget
 - 85% of the hospitals have an ICT governance structure
 - remains an action item (4.9) in the roadmap 3.0

Hospitals: Belgian Meaningful Use Criteria

Functionalities	Step 1	Step 2	Step 3	Step 4
1. Unique patient identification and description	80%	90%	95%	98%
2. List of problems (active and passive)	20%	50%	80%	98%
3. List of allergies and intolerances	30%	60%	90%	98%
4. Electronic prescription of medicines	30%	60%	90%	98%
5. Drug interactions	No	No	No	Yes
6. Electronic register of administered medicines	30%	60%	90%	98%
7. Module for nursing care planning	0%	30%	60%	98%
8. Management of appointments	>0	>0	>0	>0
9. Electronic submission of requests for medical imaging, laboratory tests or advice	1 out of 3 (RX, lab, consultation) at a rate of 50%.	2 out of 3 (RX, lab, consultation) at a rate of 50%.	3 out of 3 (RX, lab, consultation) at a rate of 50%.	3 out of 3 (RX, lab, consultation) at a rate of 98%.
10. Electronic letter of discharge	80%	90%	95%	98%
11. Registration of vital parameters	50%	65%	80%	98%
12. Registration of the informed consent	>0	>0	>0	>0
13. Registration of therapeutic will	>0	>0	>0	>0
14. Medical results server	80%	90%	95%	98%
15. Electronic communication with hubs and interaction with eHealth	80%	90%	95%	98%

Action 2: hospital EPF

Partial budgets in %



Roadmap 2.0: health care providers

- An EPF has been defined for all other types of health care providers and they can also publish and update certain information from their EPF in the secure health vault
 - available for home nurses and physiotherapists, for whom an updated version is being developed
 - remains an action item (3.6) in the roadmap 3.0

- ✓ Medicines and medical care are prescribed electronically
 - action items 4.3 and 4.4 in roadmap 3.0
 - complete dematerialisation
 - extension to other types of prescriptions
 - VIDIS

Electronic prescription with Recip-e code

 BEP1TSRY1XGE	
 11234512123	Naam en voornaam van de voorschrijver SCHOTTE Briek
DOOR DE VOORSCHRIJVER IN TE VULLEN	
naam en voornaam van de rechthebbende: Jackson Michael	
Vorbehouden aan het verpakkingsvignet	R/ Zolpidem EG (c) 10mg DT/ 1 x 30 filmtabl. S/ 1 tabl. 1 x / dag R/ ranitidine 150 mg DT/ 1 x 112 tabl. S/ 1 tabl. 1 x / dag

Complete electronic prescription

Paracetamol EG filmomh. tabl. (deelb.) 120x 1g ↔ vos

Status Chronisch Acut Eénmalig Indien nodig

Posologie Eenvoudig Vrije tekst Regime Sjabloon (1)

0 x 1 tablet per dag ?

ontbijt				middagmaal				avondmaal					
rychter	voor	bij	na	tussen	voor	bij	na	tussen	voor	bij	na	tussen	voor slapen

Verpakkingen 1

Periode op voorschrift dag(w)

Info voor de patiënt

Niet substitueerbaar

Apart voorschrift

Start Vandaag (09/11/2017)

Terugbetalingsinfo

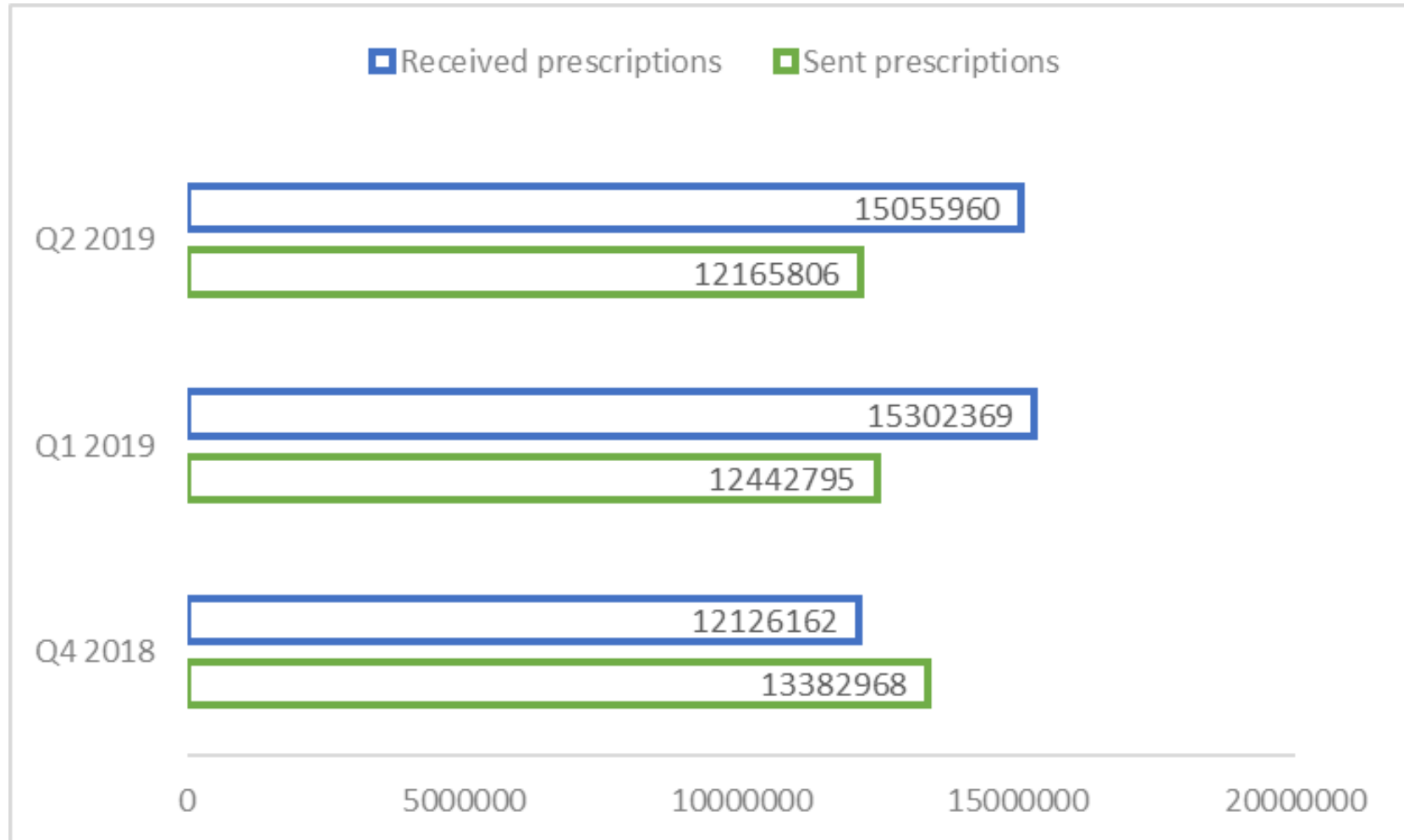
Overdosis instructies

Opslaan als sjabloon

Geen actieve terugbetaling >

Interactie Panadol (paracetamol) ↑

Electronic medicine prescription



Roadmap 2.0: health care providers

- ✓ Pharmacists publish information about the delivered medicines in the Shared Pharmaceutical File (SPF), which feeds the medication schedule; the patient's medication schedule is also stored in the secure vault and is shared between physicians, pharmacists, home nurses and hospitals, among others
- ✓ The general practitioner has access through his EMF to all relevant published medical information about his patients

Roadmap 2.0: health care providers

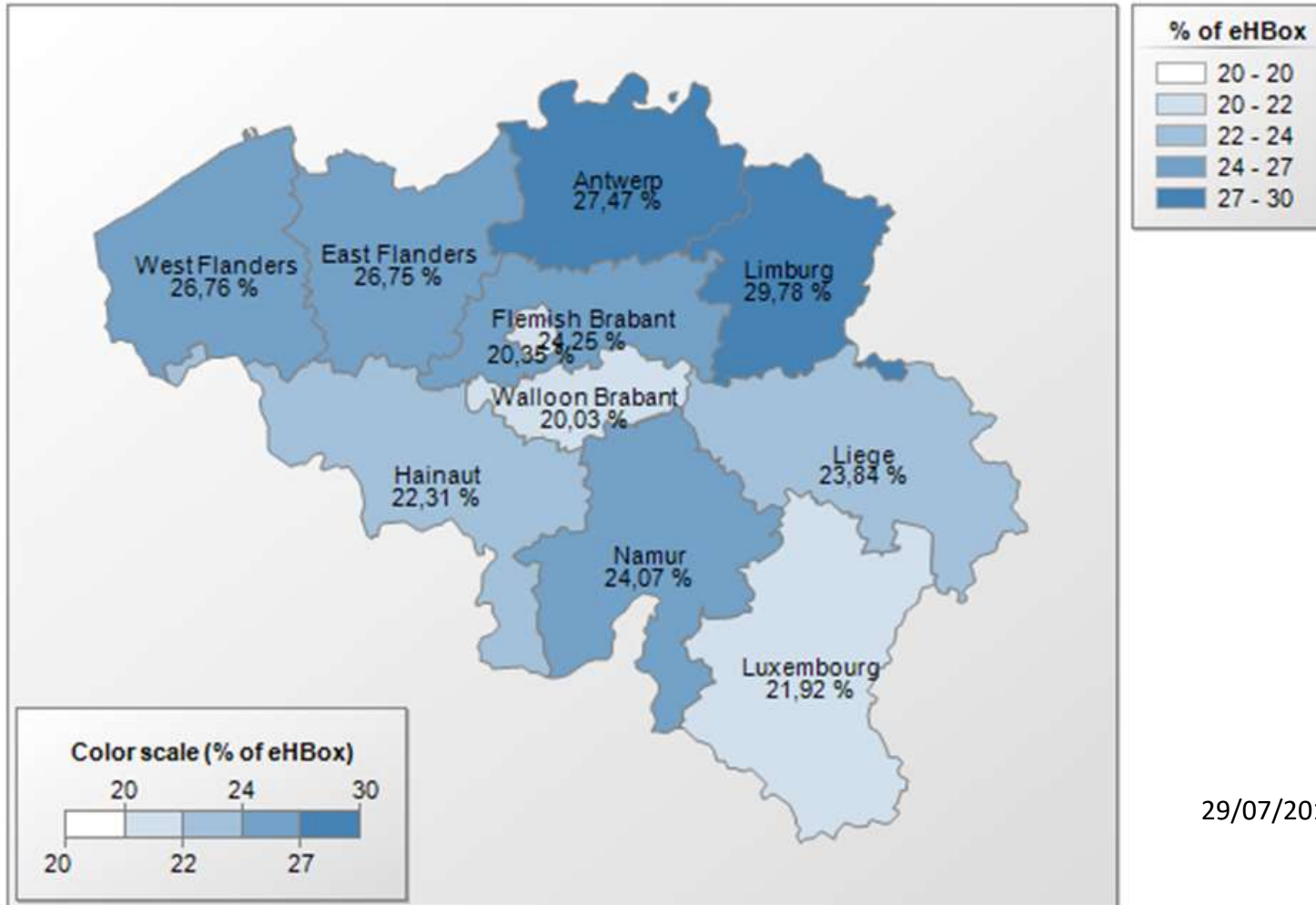
- Any other health care provider has access to all relevant, published information on his/her patients; for this purpose, filters are defined; the information can also be completed in a multidisciplinary approach
 - remains an action item (4.1 and 4.2) in the roadmap 3.0
- The aim is to ensure that a maximum of medical information is created and published in a structured and semantically interoperable way
 - remains an action item (0.5 and 0.6) in the roadmap 3.0

Roadmap 2.0: health care providers

- ✓ All health care providers can communicate with each other through the **eHealth**box; a number of electronic standard forms are made available for this purpose
 - evolution of functionalities of **eHealth**box is planned, e.g. for sending to (health care providers in) health care institutions.

eHealthBox

Map of active eHBox by Province for all profession

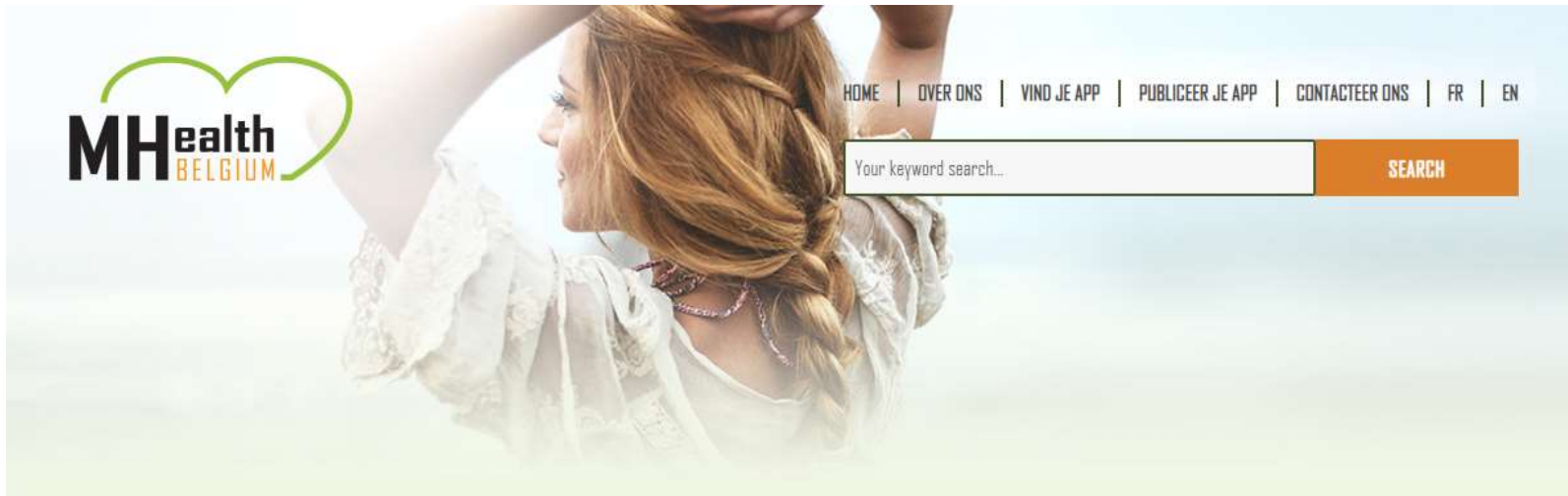


29/07/2019

Roadmap 2.0: health care providers

- ✓ Health care providers can apply telemedicine using officially registered mobile health applications; this registration is subject to a number of checks in terms of data protection, interoperability, EU label for medical devices and evidence-based medicine (EBM).
 - see <https://mhealthbelgium.be/>
 - 6 apps are now registered on level M1

Mobile health apps




MHealth BELGIUM

HOME | OVER DNS | VIND JE APP | PUBLICIEER JE APP | CONTACTEER DNS | FR | EN

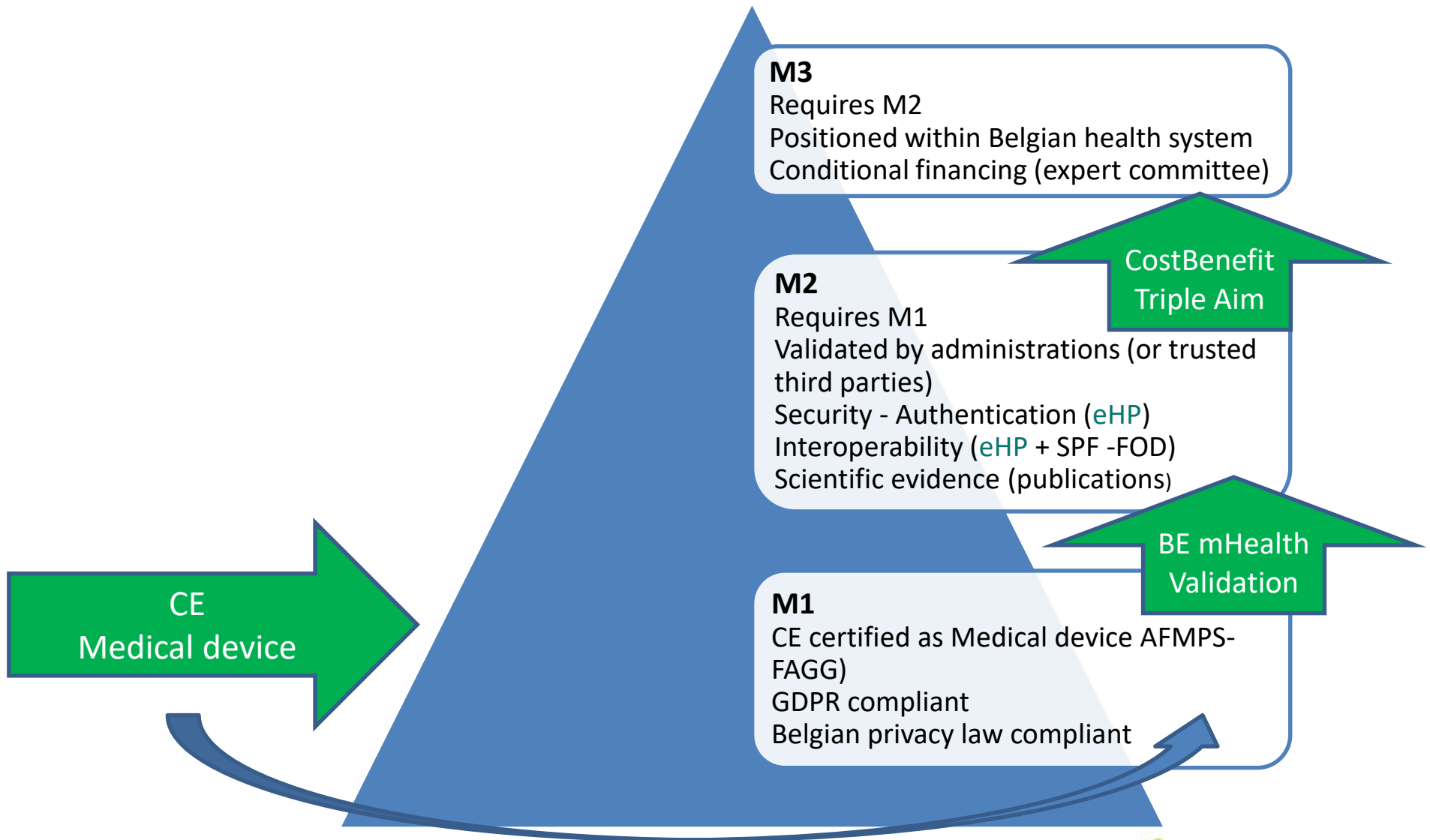
Your keyword search... **SEARCH**

MOBILE HEALTH BELGIUM

Mobile health, kortweg m-health, is het slim gebruik van digitale toepassingen (hard- en software) in de gezondheidszorg. Met behulp van mobiele toepassingen kunnen patiënten en hun omgeving *in real time* gegevens rond gezondheid en welzijn snel en eenvoudig verzamelen, visualiseren en delen met hun zorgverleners, en vice versa. Zorgverleners krijgen zo een preciezer beeld van de gezondheidstoestand van hun patiënten, en patiënten beschikken op hun beurt over een instrument om de regie van hun gezondheid mee in eigen handen te nemen.



Mobile health apps - Validation pyramid



Roadmap 2.0: health care providers

- The registers have been optimised and standardised and, as far as possible, registration is carried out automatically from the EMF/EPF
 - connectors are made available by HealthData
 - remains an action item (4.11) in the roadmap 3.0
 - there is a lack of insight into whether the information collected in the various registers has a quality-enhancing effect
 - provided data must support a public benefit

Roadmap 2.0: health care providers

- ✓ Tracing of implants and medicines is done according to international standards
- ✓ All data exchange between health care providers and health insurance funds is done electronically
 - carried out by general practitioners
 - consultation of the insurability
 - Chapter IV agreements
 - eFac (invoice files)
 - eAttest (certificates of care provided)
 - remain action items (6.1 until 6.7) in the roadmap 3.0

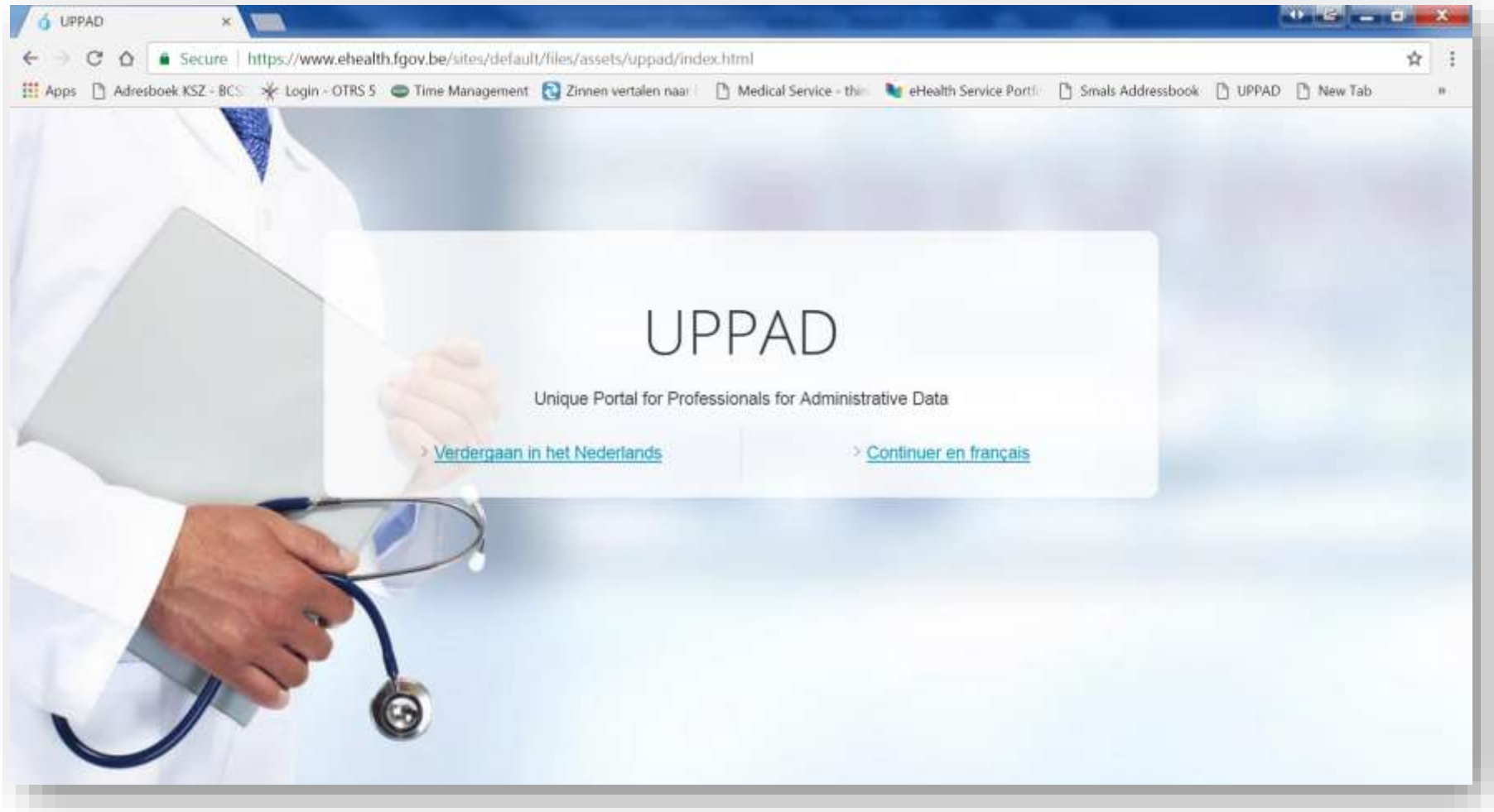
Roadmap 3.0: health insurance funds

- eAttest for specialists, dentists, physiotherapists & speech therapists
- eFac for medical houses, physiotherapists & speech therapists
- consultation of member data
- digitisation of rehabilitation agreements
- digitisation of Chapter IV agreements
- subscriptions to medical houses
- digitisation of physiotherapy agreements

Roadmap 2.0: health care providers

- ✓ The health care providers receive incentives for the use and meaningful application of eHealth; financial incentives can have both a federal component and a component from the different communities and regions
- ✓ Every health care provider is trained in eHealth, both through the basic education package and through post-graduate training
 - Flanders: Eenlijn
 - Wallonia: eSanté Wallonie
 - Brussels: eHealth Academy
- ✓ Each health care provider has a one-stop shop for the communication of all administrative information for the NIHDI, the FPS Public Health and the federal entities ("only once" principle).

UPPAD



Roadmap 2.0: patients

- ✓ The patient has access to the information about himself that is available in the secure health vaults and through the hub & metahub system
- The feasibility of providing a consolidation platform where all patient information is aggregated with analysis tools and translation tools to facilitate the patient's understanding of his file is being explored; this will contribute to the patient's health literacy.



WAT IS MIJNGEZONDHEID ?

Mijngezondheid is een online gezondheidsportaal, ook wel "Personal Health Viewer" genoemd. Via deze centrale toegangspoort krijgt u zicht op verschillende persoonlijke gegevens over uw gezondheid en over gezondheid in het algemeen. Het gaat onder andere om :

- informatie over uw gezondheidstoestand, bijv. van uw huisarts, uw specialist, uw apotheker...;
- administratieve informatie, bijv. over terugbetalingen via uw ziekenfonds;
- informatie over uw wilsverklaringen, bijv. uw registratie als orgaandonor;
- betrouwbare gezondheidsapps die gevalideerd zijn door de overheid;
- informatie over patiëntenverenigingen en lotgenotenverenigingen voor specifieke aandoeningen.

Heeft u vragen over het portaal? Raadpleeg dan de [FAQ-pagina](#) of stel uw vraag via het [contactformulier](#).

MijnGezondheid

Gezondheidssamenvatting

Via deze rubriek kunt u de samenvatting van uw medisch dossier bij de huisarts bekijken, de zogenaamde "Sumehr". Welke gegevens bevat dit dossier? Uw basisgegevens: naam, geboortedatum, moedertaal, ...; de contactgegevens van een contactpersoon in geval van nood, informatie over risicofactoren (allergieën, reacties op medicatie, ...); een overzicht van de medische voorgeschiedenis, actuele problemen, medicatie en vaccinaties.



Bevolkingsonderzoeken

Via deze rubriek vindt u informatie over de bevolkingsonderzoeken waarvoor u wordt uitgenodigd of waaraan u hebt deelgenomen. Bevolkingsonderzoeken zijn screeningsonderzoeken voor bepaalde doelgroepen, bijv. het bevolkingsonderzoek naar borstkanker bij vrouwen van 50 tot 69 jaar. Deze screeningprogramma's vinden vandaag enkel in Vlaanderen plaats.

Implantaten

Via deze rubriek kunt u eventuele informatie terugvinden over medische hulpmiddelen die bij u zijn geïmplanterd. Alle gegevens over implanteerbare medische hulpmiddelen worden bijgehouden in het Centraal Traceringsregister.

Thuisverpleging

Via deze rubriek kunt u uw verpleegkundig dossier bij uw thuisverpleegkundige bekijken.

[Uw dossier bij uw verpleegkundige](#)

Medicatie

Via deze rubriek vindt u informatie over uw geneesmiddelengebruik. Het gaat bijv. over: een overzicht van de medicatie die u neemt (medicatieschema); uw openstaande voorschriften voor geneesmiddelen of medische hulpmiddelen; hoe een bijwerking van een geneesmiddel melden; een overzicht van de vaccins die u heeft gekregen.

[Medicatieschema](#)

[Openstaande medicatie voorschriften](#)

[Meldpunt voor bijwerkingen](#)

[Vaccinaties](#)

Toegangsbeheer

Via deze rubriek kunt u uw toestemming geven of intrekken voor de uitwisseling van uw gezondheidsgegevens tussen de zorgverleners waarmee u een therapeutische relatie heeft. De therapeutische relatie is een tijdelijke relatie tussen u en een zorgverlener waarbij u in behandeling gaat.

[Toestemming](#)

[Therapeutische relaties](#)

[Uitluitingen](#)

Orgaandonatie en andere wilsverklaringen

Via deze rubriek kunt u uw wilsverklaringen bekijken die geregistreerd staan in het Rijkregister, bijv. uw registratie als orgaandonor (meer informatie op www.beidonor.be).

eBox

Via deze rubriek hebt u toegang tot uw digitale brievenbus...

Rapporten & Resultaten

Via deze rubriek kunt u uw medische gegevens raadplegen die in het ziekenhuis worden geregistreerd, bijv. eindrapporten of resultaten van onderzoeken. Na een consultatie, onderzoek of opname registreren specialisten en/of medewerkers die gegevens in het digitale netwerk waar hun ziekenhuis toe behoort. Via deze weg kunt u naar de website van dat netwerk doorklikken om er de informatie te raadplegen.

Ziektefondsen

Via deze rubriek kunt u doorklikken naar het digitale platform van uw ziektefonds, waar u bijv. gegevens terugvindt over terugbetalingen. De ziektefondsen werken momenteel aan de integratie met MijnGezondheid om dit mogelijk te maken.

Gezondheidstools voor iedereen

Via deze rubriek vindt u nuttige tools voor het opvolgen van uw gezondheid. Het gaat bijv. over betrouwbare apps, betrouwbare medische informatie in mensentaal, informatie over patiëntenverenigingen en lotgenotenverenigingen...

[Betrouwbare medische informatie in mensentaal](#)

[Patiëntenverenigingen en lotgenotenverenigingen](#)

[Betrouwbare gezondheidsapps](#)

MijnGezondheid

The screenshot shows the 'MijnGezondheid' portal. At the top, there are navigation links for 'Patiënten' and 'Beroepsbeoefenaars'. The main header features the 'egezondheid' logo and the text 'Portaal van de diensten eGezondheid'. A central modal window displays the medication 'BEP19FVSFPDG', created on 06/02/2018 at 09:31. It lists two prescriptions: 'Dafalgan filmomh. tabl. (deelb.) Forte 16x 1g' with a start date of 06/02/2018 and a frequency of '1 x per dag'; and 'Flixonase Aqua (PIP) nas. spray susp. 150dos. 50µg/1dos.' with a start date of 06/02/2018 and a frequency of '2 verstuivingen per dag'. A 'Sluit' button is located at the bottom right of the modal. Below the modal, a 'Voorschriften' section contains a table with columns for 'Aanmaakdatum', 'Voorschrijver', and 'Actions'. The table lists three prescriptions from Bruno Casneuf and Bram Truyaert. At the bottom, there are links for 'Disclaimer', 'Persoonlijke gegevens', and 'Gebruiksvoorwaarden', along with a copyright notice for 2018 and the 'egezondheid' logo.

fr Patiënten Beroepsbeoefenaars

ansten van de overheid: www.belgium.be

ic: Jan Theo Grauwels - [info](#) Burger | [Aanmelden](#)

heidsgegevens Toegangsbeheer Anders

egezondheid

Portaal van de diensten eGezondheid

BEP19FVSFPDG

Aangemaakt op: 06/02/2018 09:31

Dafalgan filmomh. tabl. (deelb.) Forte 16x 1g
Startdatum: 06/02/2018
1 x per dag

Flixonase Aqua (PIP) nas. spray susp. 150dos. 50µg/1dos.
Startdatum: 06/02/2018
2 verstuivingen per dag

Sluit


Voorschriften


Aanmaakdatum	Voorschrijver	Actions
05/01/2018	Bruno Casneuf	Toon
05/01/2018	Bruno Casneuf	Toon
23/11/2017	Bram Truyaert	Toon


[Disclaimer](#) [Persoonlijke gegevens](#) [Gebruiksvoorwaarden](#)

Copyright © 2018: egezondheid

MijnGezondheid


fr  Patiënten | Beroepsbeoefenaars in de gezondheidszorg | Over eGezondheid

AAA Andere informatie en diensten van de overheid: www.belgium.be 

 **egezondheid**
Portaal van de diensten eGezondheid

Aangesloten als: Jan Grauwels - als Burger | [Afmelden](#)

[Gezondheidsgegevens](#) | [Toegangsbeheer](#) | [Andere](#)




Toegangsbeheer

TOESTEMMING THERAPEUTISCHE RELATIES UITSLUITINGEN

Met deze module kunt u uw therapeutische relaties met zorgverleners visualiseren, melden en/of intrekken.

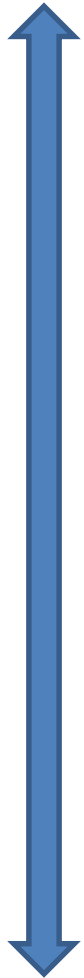
[Therapeutische relatie toevoegen +](#)







Enkel actieve relaties

Naam	Beroepscategorie	RIZIV-nummer	Startdatum	Einddatum	Status	
Gert Huysmans	Huisdokter	100049087001	2018-01-17			Revoke


Authentication resources

Strong



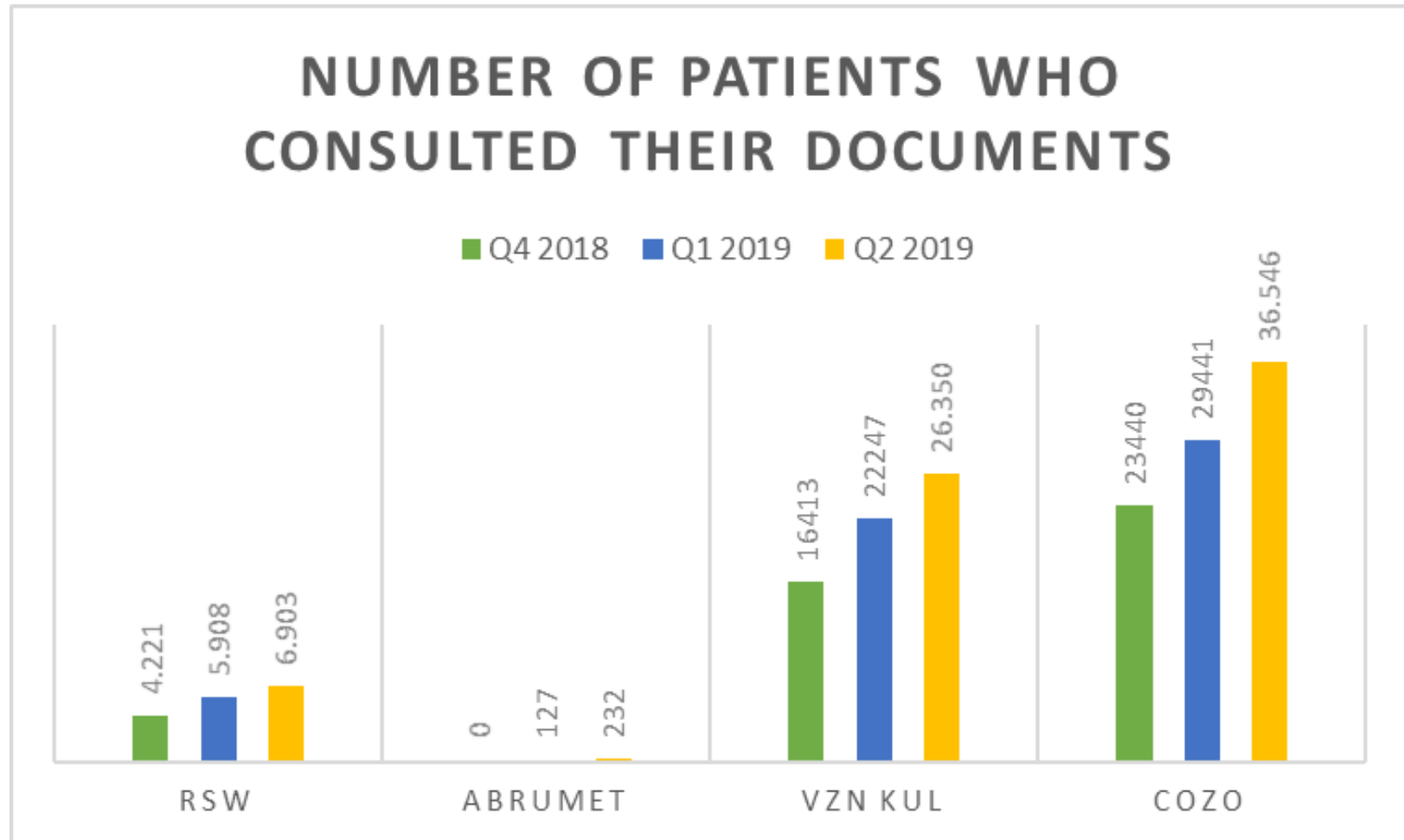
	eID + PIN-code with connected card reader
	eID + PIN-code with wireless card reader
	SIM card with PIN-code
	Security code via mobile app, user-id + password
	Security code on paper (paper token), user-id + password
	User-id + password



	Security code via SMS, user-id + password
---	---

Weak

A few figures



Roadmap 2.0: patients

- The patient can add information himself, through the consolidation platform, in the secure vault, through a hub or in a secure cloud.
- ✓ All the information from the hubs, the vaults, the consolidation platform, and potentially the secure cloud constitutes the patient's PHR (Personal Health Record)
- ✓ Through the consolidation platform, other relevant information is also available from the health insurance funds, the Crossroads Bank for Social Security and other relevant sources such as the declarations of will on organ donation or euthanasia.

Roadmap 2.0: patients

- The patient has access to his PHR through various channels, e.g. through an app on his smartphone; this allows the patient to be informed of his actual condition and to play a leading role in his treatment

Roadmap 2.0: patients

- ✓ In principle, the patient no longer receives any paper from the physician (except for exceptional demands)
 - The certificate of the care provided is sent electronically by the physician to the health insurance fund
 - the medication prescription is available through the Personal Health Viewer
 - ...
- ✓ Prior requirement for the above: the patient gives his data sharing consent



IO 100 service Disruption Solved

Description :VI100 : Momenteel zijn er verstoringen van het MyCarenet-verkeer/ Momenteel is ons MyCarenet verkeer onbeschikbaar. OA100 : Nous rencontrons actuellement des perturbations au niveau du trafic synchrone MyCarenet / Actuellement, nos services synchrones MyCarenet sont indisponibles.

Begin : 22/08/2019 08:00 **Estimated End** : 22/08/2019 10:00

Environment : Production

📅 22/08/2019, 09:30

Issue with Recip-e, Gedeeld Farmaceutisch Dossier and MyCareNet Solved

Update 10:45: The issues with Recip-e, GFD and MyCareNet have been solved.

There are currently issues with Recip-e, Gedeeld Farmaceutisch Dossier / Dossier Pharmaceutique Partagé and MyCareNet. EHealth is looking into it with their partners in order to find a solution.

📅 16/08/2019, 09:51

Issues with Recip-e and Gedeeld Farmaceutisch Dossier - Dossier Pharmaceutique Partagé Solved

Update 13:45

Intervention calendar

< September 2019 >

ma.	di.	wo.	do.	vr.	za.	zo.
26	27	28	29	30	31	1
2	3 CIN-NI	4	5 Smals	6 CIN-NIC - IO 200 Technic	7 CIN-NIC - IO 500 - Techn	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	1	2	3	4	5	6

Twitter



eHealth-platform
@ehealthplatform

Update 10:45: The issues with Recip-e, Gedeeld

All systems are operational

⊖ 1. IAM - Identity & Access Management	●
⊖ 2. Coding service	●
⊖ 3. TimeStamping service - Preservation of proof of the existence of a document and its content at a given date	●
⊖ 4. End to end Encryption (E2EE)	●
⊖ 5. Portal	●
⊖ 6. eHealthBox	●
⊖ 7. National register consultation - ConsultRN service	●
⊖ 8. eHealth Authentication Certificates	●
⊖ 9. Services for managing access to patient's medical data - MetaHub, Consent & Therapeutic Links webservices	●
⊖ 10. CoBRHA - Common Base Registry for HealthCare Actor	●
⊖ 11. ID Support - Service for checking the validity of an identification card	●
⊖ 12. AddressBook - Service to consult the most up-to-date data of healthcare providers	●
⊖ 13. UPPAD (Unique Portal for Professionals for Administrative Data)	●
⊖ 14. DAAS - Message routing directory for sending messages to the appropriate recipient	●
⊖ 15. Directory - DAAS register	●
⊖ 20. eHealth Online Services - Webservice	●
⊖ 21. eHealth Online Services - Webapp	●

All systems are operational

1. IAM - Identity & Access Management



2. Coding service



3. TimeStamping service - Preservation of proof of the existence of a document and its content at a given date



WebService Time Stamp Authority V1 (certification and archiving) ⓘ

Operational

WebService Time Stamp Authority V2 (certification and archiving) ⓘ

Operational

WebService Time Stamp Consult V1 (document control)

Operational

WebService Time Stamp Consult V2 (document control)

Operational

4. End to end Encryption (E2EE)



WebService ETKDepot (encryption to a known recipient) ⓘ

Operational

WebService KGSS (encryption to an unknown recipient) ⓘ

Operational

5. Portal



Portal eSanté ⓘ

Operational

Portal Service Registry ⓘ

Operational

Portal Standards

Operational

6. eHealthBox



WebService eHBox Consultation

Operational

WebService eHBox Publication

Operational

All systems are operational

⊖ 1. IAM - Identity & Access Management



⊖ 2. Coding service



WebService Codage Seals

Operational

⊖ 3. TimeStamping service - Preservation of proof of document and its content at a given date



WebService Time Stamp Authority V1 (certification and archiving) ⓘ

Operational

WebService Time Stamp Authority V2 (certification and archiving) ⓘ

Operational

WebService Time Stamp Consult V1 (document control)

Operational

WebService Time Stamp Consult V2 (document control)

Operational

⊖ 4. End to end Encryption (E2EE)



⊖ 5. Portal



⊖ 6. eHealthBox



WebService eHBox Consultation

Operational

May affects the following online services: Electronic Prescription in Hospitals, GFD-DPP, Recipe- Prescriber, Chapter IV Admission, Chapter IV Consultation, DMG Notification, Webservice Registration, Adm Hosp Async, Fac Hop Async, Fac Doctor Async

Interim conclusion

- ✓ Data sharing between health care providers / institutions through the hub-metahub system, the health vaults and the eHealthBox reached cruising speed (> 13.3 billion transactions through the eHealth platform in 2018)
- ✓ > 75% of the Belgian population has now given their consent for data sharing
- ✓ The opening up of health data to the patient begins => attention for integrated access
- ✓ Experience has been acquired with mobile eHealth applications

Roadmap 3.0 - Fundamentals (1/2)

- **0.1 Data sharing consent:** should the existing data sharing consent evolve? what does this mean for the basic services and the organisational framework?
- **0.2 Access matrix, therapeutic, care and other relationships:** should the existing access matrix and the electronic means of proof of therapeutic, care or other relationships evolve? what does this mean for the basic services and the organisational framework?
- **0.3 Basic service user and access management:** should the existing basic service user and access management evolve? what does this mean for the basic services and the organisational framework?
- **0.4 Rules for 'eHealth vaults' and division of tasks between authentic sources:** should the existing division of tasks between the authentic sources and the rules for 'eHealth vaults' evolve? what does this mean for the basic services and the organisational framework?

Roadmap 3.0 - Fundamentals (2/2)

- **0.5 Information standards:** the further development of eHealth will be based as much as possible on open, state-of-the-art international standards, with reasonable safeguards on backward compatibility
- **0.6 Terminology:** the information exchange between eHealth systems requires standardised information encodings
- **0.7 CoBRHA Next Generation & UPPAD:** in order to increase the added value of the existing CobrHa system in terms of process quality and efficiency, additional functionalities such as history or publish-and-subscribe are required
- **0.8 Strategic research into efficient collaboration models with external stakeholders:** the healthcare providers, the organisations operating in the healthcare sector and governments need to have a better and greater impact on the development of new and additional functionalities by the software suppliers of eHealth systems

Roadmap 3.0 - Transverse

- **1.1 Communication:** this project focuses on external communication, i.e. communication towards health care actors, health care institutions, organisations operating in the health or care sector, software developers and citizens
- **1.2 Program monitoring:** this project focuses on monitoring the use of the delivered systems by end users and eHealth services and aims to build a consistent and uniform collection of functional user data

Roadmap 3.0 - Support

- **2.1 Incentives:** since the start of the 2013-2018 Action Plan, some groups of health care providers have received incentives for the use and meaningful application of eHealth; these incentives also remain a useful method of achieving the objectives in the eHealth Action Plan 2019-2021, e.g. to encourage the use of univocal terminology.
- **2.2 Code of conduct & guidelines on sharing personal health information:** there is a need to develop codes of conduct and good practice for sharing personal health data

Roadmap 3.0 - Operational excellence (1/3)

- **3.1 Basic architecture:** the basic architecture of the eHealth applications was elaborated 10 years ago; it is advisable to evaluate the architectural choices and, if necessary, to adjust them
- **3.2 SLA and service management:** eHealth services must be permanently and efficiently available, both for end-user applications and for the different sub-systems and services; this will be transparently reported
- **3.3 Business continuity:** even if interventions are carried out on parts of the eHealth system or incidents occur with it, health care providers and health care institutions must have minimum functionalities at their disposal; the continuity of their basic functioning must be guaranteed by means of business continuity procedures

Roadmap 3.0 - Operational excellence (2/3)

- **3.4 Documentation, help desk & support:** in case of problems with or questions about the use of eHealth services that are integrated into ICT solutions, there is a need to support eHealth services in order to solve problems in a smooth and adequate way; if several eHealth services or partners are involved, the need is mainly to coordinate the realisation of a solution
- **3.5 Test environments, flows, processes, data:** the aim is to develop an integrated test environment for software suppliers, the ICT departments of health care institutions and the developers of value-added services
- **3.6 Quality of health software:** in order to ensure the quality of commercial eHealth software, explicit and clear quality indicators and their validation are needed; the provider should supply, through appropriate tools, the necessary information that gives a clear view of the "quality" of the product offered

Roadmap 3.0 - Operational excellence (3/3)

- **3.7 Education and training:** the federated entities offer education and training via partners, so that health care providers and social workers can apply eHealth in daily practice; they do this for specific projects of the federated entities, but also for projects of the federal government
- **3.8 Administrative workload reduction for health care providers:** the adoption of eHealth services by health care providers and health care institutions is hampered by the increased reporting requirements of public services; this project is based on the perspective of the users, it identifies and reduces the existing reporting burden

Roadmap 3.0 - Health care providers and institutions (1/5)

- **4.1 Multidisciplinary information exchange:** this project should ensure that patient information can be exchanged digitally between health care providers, both from the same profession and from different professions
- **4.2 Multidisciplinary functionalities:** in addition to the multidisciplinary information exchange, there is a need for functionalities allowing an efficient multidisciplinary and transmural functioning of all health care providers involved, including the patient and informal carer: a journal, a multi-disciplinary care plan, ...
- **4.3 Electronic prescription:** in order to ensure the generalised use of the electronic prescription, additional aspects such as dematerialisation and integration into the Personal Health Viewer must be developed

Roadmap 3.0 - Health care providers and institutions (2/5)

- **4.4 VIDIS – evolution of the electronic prescription** : effective and efficient data and information sharing on all aspects of pharmaceutical treatment should be achieved by integrating the data available in existing systems and improving the orchestration of medicine related processes
- **4.5 Decision support platform**: quality improvement through the use of decision support systems can be organised efficiently by a central platform
- **4.6 BelRAI** in execution of the eHealth action plan 2015-2018, the web application BelRAI 2.0 was developed and made available to all health care providers; additional steps are needed in terms of use of the BelRAI instrument by health care providers, the use of BelRAI data outside a care context, training of users, the cooperation with software suppliers,...

Roadmap 3.0 - Health care providers and institutions (3/5)

- **4.7 Incapacity for work** at present, various types of certificates must be sent to the employer, to an external company responsible for the administration of the certificates, to the employer's medical service or to the health insurance funds; Mult-eMediatt allows the GP's software to send an electronic standardised certificate of total incapacity for work
- **4.8 MEDEX:** MEDEX doesn't use available eHealth systems; in terms of data and processes there are clear overlaps and additions to the Electronic Patient File of every citizen
- **4.9 EPF in all institutions:** a program was launched in 2016 to ensure that all hospitals would rapidly have an integrated EPF in production and use it, but the roll-out and use of an EPF in all hospitals has not yet been completed

Roadmap 3.0 - Health care providers and institutions (4/5)

- **4.10 Publication of structured information:** the action plan 2013-2018 included the development of a mainly technical infrastructure (including a hub/meta-hub) allowing health care institutions to publish medical information about patients; the publication of patient-related information in a structured format is still insufficiently developed and used
- **4.11 Registers:** there is a lack of insight into whether the data collected in the various registers allow to improve the quality; data that have to be supplied should in principle support a public utility
- **4.12 Communication about care and care planning:** the objective of the Flemish government is to offer a shared digital care and support plan in order to support multidisciplinary cooperation and data sharing in the context of care and welfare

Roadmap 3.0 - Health care providers and institutions (5/5)

- **4.13 Connecting Europe Facility Patient Summary:** to allow a cross-border exchange of a patient overview, structured and coded information must be available; this is a project conducted by Abrumet and financed by the European Commission in cofinancing with the Brussels-Capital Region
- **4.14 Modulation of patient access by health care providers:** the health care provider's software must be able to display the patient's accessibility status for a document published on a hub or vault

Roadmap 3.0 - The patient as co-pilot

- **5.1 Personal health portal:** this project is a continuation and extension of the AP10 Personal Health Viewer project of the action plan 2013-2018; through this health portal we want to give people access to their health data that are available digitally, in a quick and easy way, so that they can make conscious choices
- **5.2 Digital Referral Platform:** this project aims to increase the patient's involvement in referrals from one health care provider to another; the electronic referral must be accessible in the Personal Health Viewer so that the patient has the opportunity to change the suggestion or not
- **5.3 Orgadon:** for the management and registration of the living wills concerning organ, tissue and cell donation, citizens will be able to manage their living will through various channels: the general practitioner's software, the municipality, an application available through Personal Health Viewer

Roadmap 3.0 - eHealth and health insurance funds (1/3)

- **6.1 eAttest for specialists, dentists, physiotherapists & speech therapists:** the eAttest service offers the possibility to send the certificates of care provided electronically via the MyCareNet platform to the patient's health insurance fund
- **6.2 eFac for medical houses, physiotherapists & speech therapists:** the eFac service (electronic invoicing) enables any institution or health care provider to transfer electronically via the network, the invoicing file established under the third payer system
- **6.3 Consultation member data:** the 'member data' service offers each institution or care provider the possibility of consulting the information (insurability and derived rights) of the care beneficiary in order to carry out a correct invoicing in the context of the third party payer

Roadmap 3.0 - eHealth and health insurance funds (2/3)

- **6.4 Digitisation of rehabilitation agreements:** in the case of functional rehabilitation of a patient, the responsible hospital must submit a request for agreement to the Medical Council of the insurance fund. In 2016/2017, the health insurance funds carried out an opportunity study to consider digitising some of these requests.
- **6.5 Digitisation of Chapter IV agreements:** the service for the request and consultation of agreements on medicines in Chapter IV is available to general practitioners and specialists (requests and consultation) and to pharmacists and hospitals (consultation); the consultation service will be available to hospitals and will be adapted to the specific characteristics of the DB SAM V2 (NIHDI project)

Roadmap 3.0 - eHealth and health insurance funds (3/3)

- **6.6 Subscriptions to medical houses:** an electronic service is made available to medical houses to register or deregister a patient
- **6.7 Digitisation of physiotherapy agreements:** the aim is to offer the physiotherapy sector electronic services for the communication of notifications and requests for agreements



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