

*Acting together for better healthcare*

# French National Project for e Health

IT Security for e Health

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# Create and Innovate in Health IT

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- Huge budgets worldwide at stake for IT development in healthcare
- Limited possibilities with present organisations
  - More specialised medicine
  - More sophisticated techniques
  - Population getting older and older
  - More complicated patient pathway
  - Insufficient healthcare professionals
- Limited success of big national projects

# Recent legal environment in France

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- (6 Jan 1978) *Creation of CNIL*
- 4 March 2002 Right for patients to access medical files
- 13 Aug 2004 Creation of DMP concept
- April 2005 Creation of DMP organisation
- 4 Janv 2006 Rules related to hosting medical records
- 15 May 2007 Access to medical information only via smart cards + no access with social security number
- July 2009 Creation of a governance organisation and ASIP

# E-health in France

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- Dossier Médical P..... DMP
  - With P as in Personnel, Professionnel or Partagé (shared),
- Development of Services instead of IT solutions
  - Creation of new services at national level
  - Implementation at local level
- Improvement of healthcare production
- National frameworks
  - Interoperability
  - Security
  - Identification

Focus on the added value, not on the tool

From DMP (EPR), the tool



• to ASIP :

- Agence pour les Systèmes d' Information de santé Partagés (Agency for shared health Information systems)

# With the final objective in mind

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- Promote collaborative medicine
  - Control and follow patient pathway ;
  - Exchange and share information within medical practices which have now become collective and multidisciplinary.
- Engage patient
- Improve the quality of care

# Five key principles

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- 1- Governance at national level with definition of standards
- 2- Pragmatic approach based on local usage, pilot projects and stakeholders' engagement
- 3- Construction of infrastructure staggered/ organised by cycles to share and exchange information between HealthCare Professionals (under the patients' control)
- 4- Development of services to patients and HCP's
- 5- Concertation and cooperation between all stakeholders

# and the engagement of all stakeholders

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- Patients, actors of their own health rather than subject of care
- Healthcare professionals, experts for the project and beneficiaries as well for their own practice, knowledge and efficiency.
- Industrials, technical experts for the development of innovative, secure and robust solutions
- National insurance, strategic partner for the governance of this project.
- The state, in charge of a project of national and public interest

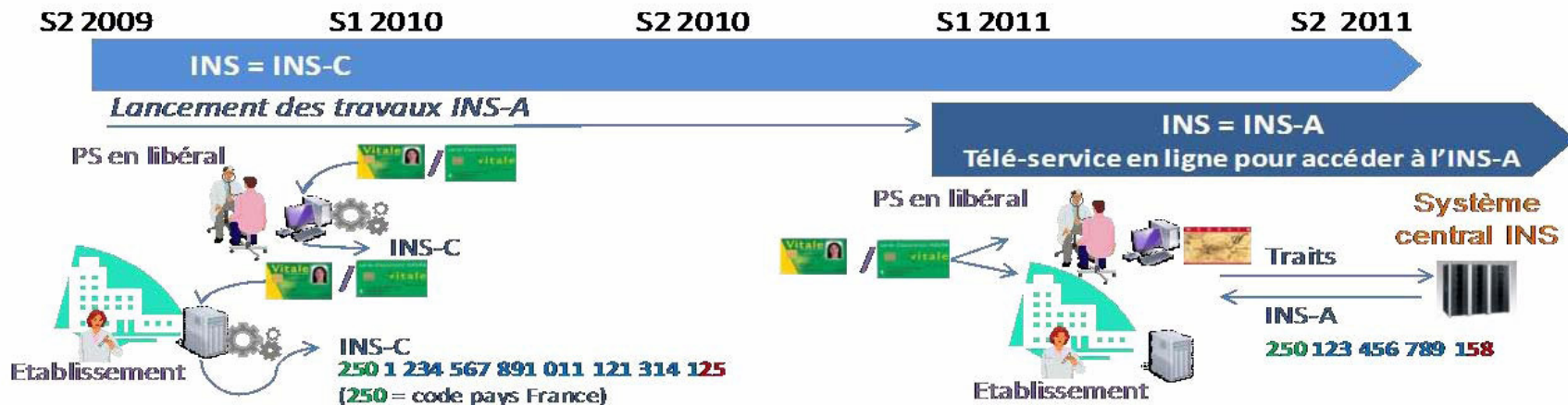
# National frameworks

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- Hosting and security
  - 1 national accredited host
  - Local accredited hosts when necessary
- Interoperability based on international standards
  - Electronic medical documents CDA R2
  - Transport : IHE profile XUA

# Implementation of the National Health ID : INS (indentifiant national de santé)

- Neither public nor secret
- First calculated then automatic



# Thank you for your attention

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- Questions ?

- Contact :

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