Current Finnish eHealth experiences

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- National EPR project
- Current trends: Regional services, Mobile technology, Patient empowerment
- Finnish Society for Telemedicine – 10th anniversary
Some current problems in Finnish HC

- 5,2 million inhabitants, who have 448 independent municipalities with a responsibility to organise health services.
- 200 primary health care centres and 21 hospital districts with all together 90 hospitals for secondary care.
- The system is too scattered.
- Difficulty in recruiting physicians and other staff to PHCC:s and minor hospitals.
- The cost of care is increasing more than the ability of the municipalities to pay for that.
The National program for Securing the future of Health Care

- Launched by the Finnish Government
- 18 subprojects, one of them concerns the implementation of national interoperable electronic patient records by the year 2007
- Goals of the EPR section:
  - EPR readily available to staff and patients,
  - Professionals able to deliver seamless care,
  - Managers able to improve the planning of services.
- More than 1/3 of the governmental support to HC marked for ICT development.

FST - established 1995
The Finnish National EPR project

- Common interoperable core data set.
- Interoperable national health record infrastructure. *(Still many vendors)*
- National requirements for secure and confidential communication.
- National PKI-services. *Professional card*
- EPR messaging and archiving based on HL7 CDA and XML.
- National directory services for health care providers. *E.g. ICD-10, OID-codes, e-prescribing*
Current trends: full variety of solutions

- Based on a comprehensive HC ICT survey made by FinnTelemedicum, the Centre of Excellence for Telehealth, the 94% of the primary healthcare centres and 63% of the hospitals are already using EPR.
- All the presently known forms of eHealth and telehealth services exist in Finland.

**TM applications:**
- teleconsultation of images and signals
- videoconferences
- distant education
- patient monitoring
- distribution of electronic patient record documents
- customer services, advisory services
- information services, data mining
Current trends: EPR as a portal to information

EPR portal since 1995 at Oulu University Hospital, Finland

Current thinking of EPR Architecture:

- User interface
- Local EPR software
- Regional services
- National services
Current trends: regional units

- Regional X-RAY and LAB archives/databases for hospital districts. *One for each of 5 univ hospitals?*
- New enterprises combining public and private sector.
- Virtual organisations.
- New subregions (> 35000) for organising primary care.
- E-referrals glue primary and secondary care together
Current trends: eHealth to the citizen

- Call centres for HC information delivery and acute services. *(new law 3-3-3 rule)*
- Information services: e.g. maternity care in the Internet.
- Virtual doctors via a web-site.
- Delivery of laboratory results to the patient’s phone.
- SMS appointment service. *(dentists)*
- Various services (e.g. diabetes care) based on Internet servers and phones.
Current trends:
First mobile terminal

The MOBILE MEDICAL DATA Vision: Physician Information Terminal

A need for a mobile DICOM image and EPR display terminal
Current trends:
Mobile IP in HC

**ProMoDaS**

- Next generation mobile terminal

- Professional Mobile Data Service (Finland, France, Belgium)

- Access to best expertise, when needed.

- Remote access to Electronic Patient Record (EPR) narratives even outside hospital (home care, elderly citizens).

- Portable devices that enable distant consultation can speed up the patient care and reduce unnecessary travelling.

FST - established 1995
ProMoDas: already in clinical environment

- Mobile terminal in everyday use at neurosurgery at the Oulu University Hospital.
- Wireless terminal enables:
  - Neurosurgeon can make his decisions before coming to the hospital
  - Decision of an operation.
  - Orders of patient care.
  - Patient preparation
  - Speed of care, more efficient use of resources.
Chapter 2:
Current trends: Multiprofessional collaboration

- Finnish Society of Telemedicine was founded in 11.1.1995.
- The second after American Telemedicine Association – first in Europe.
- Non-profit organisation, > 250 individual members and 20 enterprise members.
- The aims are to promote population health through telecommunication and disperse the expert knowledge within health care.
- Collaboration and education.
Lines of action 1: conference

- Finnish National Conference on telemedicine and e-Health every year. This year is 10th anniversary.
- The national conference includes international sessions on Scandinavian / Baltic states level
  (see Lars Hulbaek from ISfT during his presentation and the icebraker swim...)
- The national conference rotates in different cities promoting local activities.
- Collaboration with EU and TEKES (Nat. Technology Dev. Centre) R&D programs.
Lines of action 2 – the website

www.fimnet.fi/telemedicine collects information of telemedicine in Finland. Also English summary pages
Lines of action 3 – information delivery

- Special interest groups/subcommittees for enterprises and also for researchers in the field of telemedicine.
- Regular newsletter as an information source for members.
- Network of experts.
- Information of videoconference facilities within health care.
- Journal of Telemedicine and Telecare as an official journal (see issue 2005:1 for recent information!).
International activities

- Founding member of Nordic Telemedicine Association (NTA), during past years research collaboration of TM activities within the Nordic countries.

- Board member of the new International Society for Telemedicine & eHealth (ISfTeH).

- All FST members are affiliate members of respective organisations.

- Foreign correspondents.
Thank you for your attention!

More information at:

http://www.fimnet.fi/telemedicine

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