



Nationwide Telemedicine Solution to Citizens with COPD

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AGENDA

1. Denmark in short – organization, political agreement system
2. National agreement on telemedicine for COPD patients
3. National supply of telemedicine



ORGANIZATION OF THE DANISH HEALTH CARE SYSTEM

NATIONAL LEVEL

Ministry of Health



REGIONAL LEVEL

Five Regions



LOCAL LEVEL

98 Municipalities



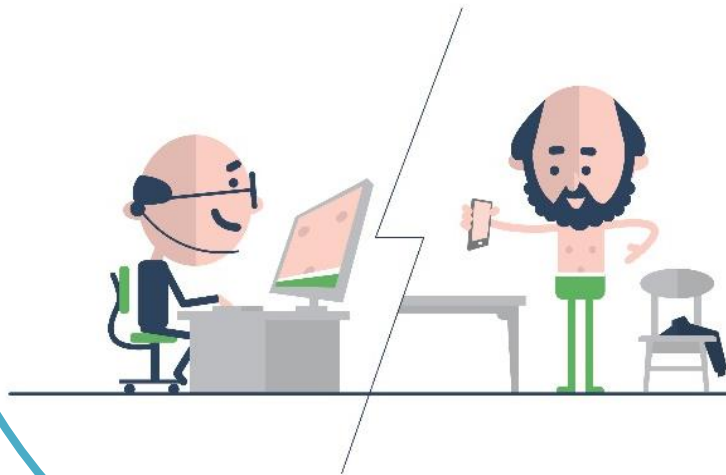
BACKGROUND: TELEMEDICINE IN DENMARK

- Great expectations
- Only small scale - a high use of pilots
- Stand alone IT systems - no strategy for data or infrastructure
- Financial agreement on nationwide telemedicine for COPD patients



NATIONAL TENDER ON TELEMEDICINE (FUT)

- One organization - on behalf of 98 municipalities and 5 regions
- Small board - extensive mandate
- Two related tenders:
 - 1) Infrastructure for telemedicine
 - 2) IT solutions for patients and employees





VISION & STRATEGY

SHORT TERM

- The technical and organizational foundation
- Starting with COPD
- Multi-vendor strategy
- Better use of data across sectors

LONG TERM

- Integration of other telemedicine disease areas on the generic infrastructure
- Short time-to-market
- Better use of data
- Exploiting knowledge in the supplier market

KEY PRINCIPLES

for infrastructure and
IT solutions

- High degree of flexibility
- Sharing data across sectors and involvement of patients
- High degree of automation
- Light user interfaces and “heavy” infrastructure
- Supports BYOD
- National infrastructure components are first choice
- Based on standards
- No proprietary

STANDARDS AND REFERENCE ARCHITECTURE

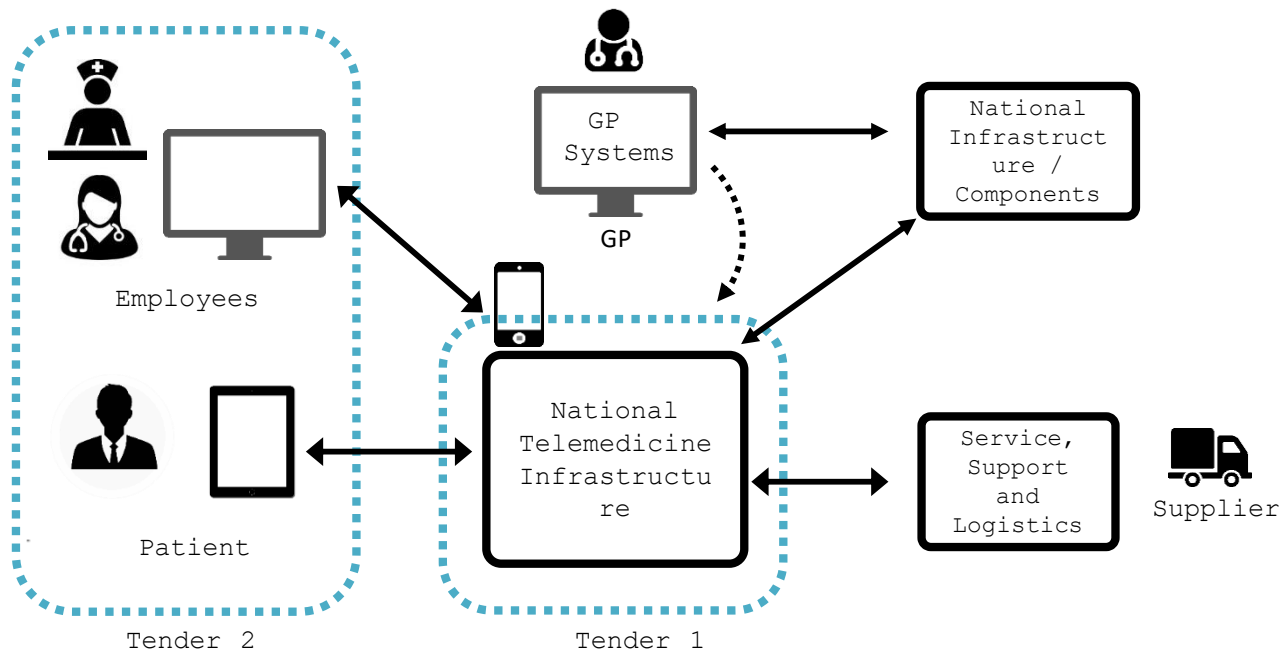
FUT is build on national reference architecture

- Reference architecture for IT security
- Reference architecture for collecting health data from citizens
- Reference architecture for sharing documents and images
- Reference architecture for user management

Primary standards

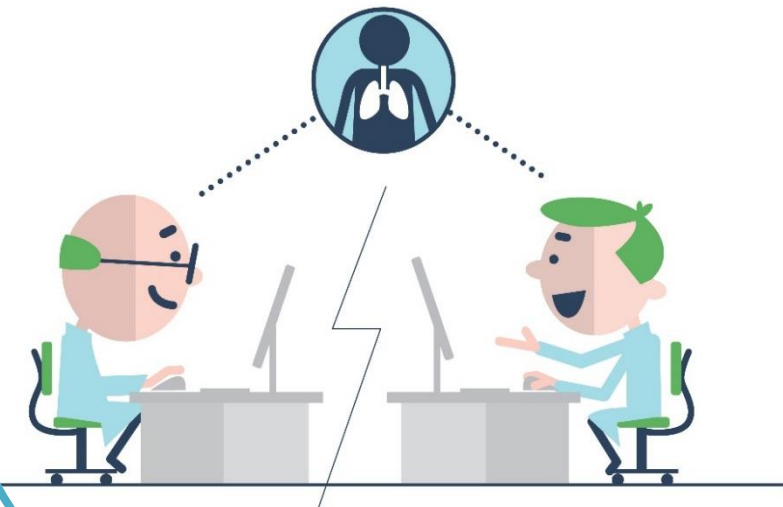
- National standards
- FHIR
- HL7

INFRASTRUCTURE AND IT SOLUTIONS FOR TELEMEDICINE



NOT JUST TECHNOLOGY

- Cooperation and organization - new ways
- Few people with a extensive mandate on behalf of the majority - is that operational?
- Communication and stakeholder management





BARRIERS AND BUMPS ON THE ROAD

- Ambition vs. risk
- Cloud vs. GDPR
- Market shares and price transparency



ORGANISATIONAL IMPLEMENTATION

A Structural and Cultural Change

- "Go live" May 2020 (pilot testing March 2020)
- Is the organization ready?
- Continued focus on level of competence with health care professionals
- Setup for service, support and logistics
- Enrollment of patients - agreements

