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Panel on Health Services

Updated background brief prepared by the Legislative Council Secretariat for the meeting on 12 December 2011

Development of a territory-wide electronic health record sharing system

Purpose

This paper summarizes the concerns of the members of the Panel on Health Services ("the Panel") on the development of a territory-wide electronic health record ("eHR") sharing system.

Background

2. The Food and Health Bureau ("FHB") proposed to establish the eHR system in 2005. The system aimed to enable better access to patient's records with the patients' consent by doctors in both the public and private sectors, so as to facilitate better use of healthcare services and transfer of patients between different levels of care and between public and private sectors. A Steering Committee on eHR Sharing comprising healthcare professionals, groups and organizations from the public and private sectors was established by FHB in 2007 to develop a work programme of eHR. Working groups were also set up under the Steering Committee to examine issues such as privacy, security, technical standards, legal framework and institutional arrangements relating to the development of eHR.

3. Based on the recommendations of the Steering Committee and its Working Group, FHB briefed the Panel in 2009 on the development of the proposed eHR sharing system in a 10-year planning horizon (from 2009-2010 to 2018-2019), the manpower and capital costs required for the planning, development, implementation and management of the programme, the specific plans and measures on data privacy and security protection, as well as

participation of the private sector in the eHR sharing system. To take forward the initiative to develop the eHR sharing system, an eHR Office was set up in July 2009 to steer and oversee the 10-year eHR development programme, handle the security of personal data and the eHR system as well as other policy and legislative issues relating to the system.

Deliberations of the Panel

4. The Panel held two meetings in 2009 to discuss the development of the eHR sharing system and received the views of deputations at one meeting. The deliberations and concerns of members are summarized below.

Legal, privacy and security issues

5. Considering the occurrence of a number of cases involving leakage of personal data in Government bureaux/departments in recent years, members expressed grave concern on the privacy of data, as well as integrity and security of the eHR sharing system. There was a view that it should be made a criminal offence for any person who knowingly or recklessly, without the consent of patients, obtained or disclosed patients' information stored in the eHR sharing system or subsequently sold the information so obtained for profits.

6. The Administration advised that the Privacy Commissioner for Personal Data ("PCPD") had been invited to advise on the protection of personal data privacy, including compliance with the Personal Data (Privacy) Ordinance (Cap. 486) and the development of the long-term legal framework of eHR sharing. Ample measures in terms of technical design and operation would be taken to safeguard the data privacy and security of the eHR sharing system. The system would also be leveraged upon expertise and know-how of the Hospital Authority ("HA") in the development of its clinical management system ("CMS") since 1995 for storing and retrieving patients' medical records.

7. Members were also advised that the Steering Committee had surveyed the current legislative provisions applicable to personal health data, and recognized the need to address a number of legal issues including record ownership and copyright. The eHR Office would proceed with studies and preparatory work for developing a long-term legal framework for safeguarding the privacy and security of personal health data in the eHR sharing system, taking into account experience of similar legislative developments in overseas economies. Legal sanctions for unauthorized access and disclosure would also be considered as part of the legal framework to be formulated.

Participation of private doctors

8. Concern was raised on the participation of private doctors in eHR sharing as some private doctors might not be interested in participating in eHR sharing due to the additional costs involved. There was a suggestion that incentives should be provided for the private healthcare providers, particularly those solo medical practitioners who maintained a large volume of paper-based patients' records and had to bear a high cost to convert them into records in electronic format, to participate in eHR sharing.

9. The Administration advised that the Hong Kong Medical Association and the Hong Kong Doctors Union were supportive of eHR development. Since the Administration would bear the costs for research, development and infrastructure, the costs to be borne by private sectors participating in eHR sharing would not be substantial. Nevertheless, the Administration would not rule out the option of providing incentives for private healthcare providers to participate in eHR sharing, such as using eHR for various subsidized healthcare schemes and public-private-partnership projects.

10. Pointing out that healthcare providers' willingness to share their patients' records with other providers was pivotal to the success of eHR sharing, members proposed that consideration be given to engaging frontline doctors as members of the Steering Committee to help ensure that the design of the eHR sharing system would be user-friendly.

11. The Administration reassured members that the Steering Committee would continue to gauge the views of both the public and private healthcare sectors in formulating strategies to facilitate the development of the eHR infrastructure and sharing of patients' records. The Administration also intended to engage the IT service providers to encourage their participation in the development of technical solutions. This could in turn bring in market competition for the development of the eHR sharing infrastructure and individual information systems that suited the needs of different healthcare providers.

Costs and staffing for developing eHR sharing system

12. Members noted that the Government would invest a non-recurrent expenditure of \$1,124 million from 2009-2010 to 2018-2019 for developing and implementing the eHR sharing system. The estimated capital cost for the first stage of the eHR development programme (2009-2010 to 2013-2014) was \$702 million. Some members considered that the costs required for the development of the eHR sharing system was on the high side.

13. According to the Administration, the estimated total non-recurrent expenditure of \$1,124 million included the Government's funding for both the eHR sharing infrastructure and HA's CMS (both existing and future upgrading). The total cost for the development of the eHR sharing system for the 10-year planning horizon had been validated by an independent consultant as reasonable. In comparison with overseas countries, the cost on a per capita level was considerably lower in developing similar projects. On the other hand, the total costs for eHR development which spread over a 10-year period would only constitute around 0.2% of the annual total health expenditure at some \$60 billion to \$70 billion.

14. Members expressed concern on the proposed creation of two supernumerary directorate posts for four years and two permanent directorate posts in the eHR Office. They cast doubt on the necessity to create such directorate posts.

15. In the Administration's view, given the complexity of the eHR sharing system, such as the need to address policy, legal, privacy and security issues, it was necessary to set up a dedicated eHR Office to lead, co-ordinate and implement the initiative in both the public and private sectors. After critically examining the possible redeployment of other existing directorate officers under FHB to take on the work of the proposed directorate posts for the eHR Office, the Administration considered it not operationally feasible to redeploy other existing directorate officers to take up the proposed posts.

16. At the meeting on 10 July 2009, the Finance Committee approved the funding proposal for the directorate staffing support for the eHR Office and a new commitment of \$702 million for the implementation of the first stage of the territory-wide eHR development programme.

Recent developments

17. To address the issue of personal data privacy arising from the development of the eHR sharing system and to ensure adequate protection for personal data in the system, the eHR Office commissioned a Privacy Impact Assessment ("PIA") scoping study in August 2010 to prepare a strategy plan for a full scale PIA, and to review the proposed legal, privacy and security framework with reference to local and overseas legislation and experiences. As recommended in the study, the full scale PIA will be conducted in three phases. The first phase PIA on the migration of existing pilot projects, if appropriate, to the future eHR sharing system is planned for commencement before end 2011. A "Privacy Compliance Audit" will be implemented upon operation of individual components of the system. The eHR Office will also

conduct a "Security Risk Assessment" and a "Security Audit" in collaboration with the Office of the Government Chief Information Officer in respect of the whole eHR programme and individual development designs and projects. The eHR Office will, based on the findings of the assessments, make adjustments to the system as appropriate.

18. The eHR Office launched the first and second stage Electronic Health Record Engagement Initiative ("EEI") in October 2009 and November 2010 respectively to invite private healthcare service providers and IT professional bodies to submit partnership proposals contributing to eHR development. Over 50 and 58 EEI proposals were received in the first stage and second stage EEI respectively.

Relevant papers

19. A list of the relevant papers on the Legislative Council website is in the **Appendix**.

Council Business Division 2
Legislative Council Secretariat
6 December 2011

**Relevant papers on the
Development of a territory-wide electronic health record sharing system**

Committee	Date of meeting	Paper
Panel on Health Services	9.3.2009 (Item IV)	Agenda Minutes CB(2)1724/08-09(01)
Panel on Health Services	19.6.2009 (Item II)	Agenda Minutes CB(2)2101/08-09(01)
Finance Committee	10.7.2009 (Items 1 & 2)	Agenda Minutes

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