

IT INFOSESSION 23RD JUNE 2023



This meeting is recorded for purposes of meeting minutes, delayed viewing by absentees, and internal (HD) knowledge transfer. The recording will be available for download via the DOCS website

AGENDA

- Q&A

Q&A

EAM		
Q01	How can the pharmacy see whether a registration has been 'Submitted'? And under what nomenclature was this registration passed on to Healthdata? This is because the hospital (pharmacy and/or billing service) needs this information in order to proceed with correct billing.	Pharmacies are able to see all registrations (and their corresponding status) within their specific Author Group. It is important that they are appropriately linked to all relevant Author Groups to ensure that they have a full overview of the registrations which concern them. Once they have this full overview, the status of each registration will appear under the 'Progress' field. Registrations which have been sent to us will have Progress = Submitted. The registration code is added upon submitting and can be consulted on the registration. In addition, the IT department can extract the full list of registration codes using query 5 on the DOCS page explaining how to retrieve data from the local database (https://docs.healthdata.be/documentation/hd4dp-v2-health-data-data-providers/retrieve-data-local-database-hd4dp-v2)
Q02	Which is the real role for the pharmacy?	There are only two ways to give a user access to all registrations. Firstly, to make them a study lead. The second option is to give the user the role of Local Study Associate for all author groups that are participating in the projects. It's important to note that the organization is accountable for granting access to a user to see all registrations.
Q03	Can assigning a role be done separately for each registration or can it be set across the organization?	Roles (=accounts) are created on a project basis and can't be applicable across the organization. For privacy reasons, hospitals have to ensure that data access is granted on a case by case basis to avoid unwanted access to a patient's data.

Q&A

Q04	Can you be local study lead of hip and knee, and then only local study associate for pacemakers? So is it possible to have different roles for different registers? Can you request that by register?	It is indeed possible to have differing roles across different projects. Roles (=accounts) are created on a project basis.
Q05	Does Local Study Support sees all the data to complete ?	The Local Study Support can see all the registrations that have been created by someone in the same Author Group to which the Local Study Support has been assigned.
Q06	When will the new eam-application be available?	EAM 3.0 is scheduled to be launched towards the start of July
Q07	It is possible to make more than 1 person a local study lead, but this doesn't work. Now 1 of us can see everything and the other one nothing.	It is indeed possible to make multiple people a Study Lead where all Study Leads can see all registrations. If this isn't the case in your specific situation, then this means that there is a local problem which needs to be investigated by our technical teams.
Q08	Can we have multiple access managers for the EAM application?	It is foreseen in our EAM application that multiple access managers can be determined

Q&A

Q09	As study support I can no longer change the forwarded files and I am unable to delete them	If records are already submitted, they can't be removed. However, corrections can be done by resending the same registration (with the same business key) again with the corrected values which will become the current active registration within our Data Warehouse.
Q10	Local Study Support users cannot see what has been registered or not, by other colleagues, difficult to follow everything.	If someone needs to view registrations made by other colleagues they need to be assigned the role of Local Study Support within their colleague's corresponding Author Group. Doing so will enable them to see the data which has been provided by others within that same Author Group. A Local Study Support can be part of multiple Author Groups
Q11	As an SPOC (Single Point of Contact), I need to edit the accounts of our users, as well as Author Groups and passwords. Will this feature be available in future EAM systems?	All users who are classed as Access Managers will have a full overview of all the users' requests in their hospital on their Request Overview tab in EAM, along with the associated roles and the Author Groups to which they are linked. The Access Managers also have the power to approve or reject any requests for access which have been made. There will be features added in the future which will allow for the changing of user roles and passwords, or to manage the Author Groups of Local Study Supports.
Q12	About the empty 'Author Group' problem. Could you explain the workaround to unblock the users?	There is no workaround for this problem. Each user needs to have an Author Group in order to make registrations. If there is an empty Author Group, our technical teams need to investigate this matter and manually add the Author Group. Measures have been put in place in the current version of EAM to avoid this type of problem from occurring in the future.

Q&A

Q13	How can I change the role of someone in my Author Group?	At the moment the only way to do this is to contact our Service Desk via ticket. As of EAM 3.0, the Access Manager will be able to take care of this action.
HD4DP2		
Q14	Can pharmacists still be provided with a CSV file (validated files) so that this can be imported into the pharmacy application?	Hospital IT can provide pharmacies with the required information by accessing the local database of HD4DP2, see link for instructions (https://docs.healthdata.be/documentation/hd4dp-v2-health-data-data-providers/retrieve-data-local-database-hd4dp-v2)
Q15	Can the entered data from version 2.0 be exported to excel or csv analogous to the option in version 1.0? (csv download)	There is no export functionality in the tool as such. Hospital IT can provide users with the required information by accessing the local database of HD4DP2, see link for instructions (https://docs.healthdata.be/documentation/hd4dp-v2-health-data-data-providers/retrieve-data-local-database-hd4dp-v2)
Q16	Can you leave 'incorrect' registrations in HD4DP2	If an incorrect registration isn't submitted, it can be deleted. If it has been submitted, however, then it will remain in HD4DP2 and the correction can be sent if needed.

Q&A

Q17	Why can't we just use the old version to put in the data for pacemakers etc...	The move to HD4DP2 comes as a result of the consolidation of all Qermid projects under one organization, the need to streamline automatic data transfer, the requirement to adopt the single data entry principle (e.g. MyCareNet) and the ability to be scalable in the future.
Q18	Is it possible to both upload part of the data via CSV and complete the rest in the form?	This is indeed possible and has become common practice among many organizations. When uploading the csv an additional field with header 'Status' and value 'Draft' needs to be added. If you do this, then the data contained in the CSV file will be uploaded onto HD4DP2 from where you can make adjustments as required. It is important to note if a draft mode is used the registration needs to then be submitted manually.
Q19	When I delete a registration in HD4DP2 it still appears in the interface, with progress listed as 'Deleted'. How can I remove these?	At the moment the only course of action is to filter these 'deleted' registrations out. It is foreseen in the future to have these records removed from HD4DP2 to allow for a clearer overview. This comes as a result of substantial user feedback.
MISC		
Q20	Please also answer about the deadlines of the registrations. We risk losing revenue due to late registrations, but it is impossible to do them.	Healthdata.be is appointed to be the technical facilitator for collecting healthcare data. We unfortunately can't comment or provide an answer relating to deadlines as this is determined by RIZIV/INAMI.

Q&A

Q21	Why did we complicate matters with all these different user roles?	The old approach was not compliant with GDPR regulations and ISC guidelines. There was a clear need to increase the data security levels by implementing these roles within the overall process of data entry.
Q22	Would it be worthwhile for Sciensano to consider visiting a hospital experiencing technical issues to address them on the spot?	If you, as a data provider, are experiencing specific problems we can address them in a direct online session. If the problems still persist after this session, a live meeting can be organized.
Q23	Please come up with a clear overview of who has to do what and that this can also be communicated in a clear, timely manner, so that we at the pharmacy know what to do	We are striving to make improvements to our documentation as well as the the timing of our communications. Exceptional circumstances sometimes obligate us to act very quickly which result in a short notice.
Q24	Will this feedback be given to the privacy commission?	The content of and the feedback received during the IT Info Sessions is available to the general public via our DOCS pages.

Q&A

Q25	Hello. To view the results in the HD4DP2 acceptance web env, we have to specify test@sciensano.be as an author in the CSV or JSON ?	Yes, the author, co-author and author group will always be the test user. Author Group (TX_AUTHOR_GR) with the value "Test group" Author (TX_AUTHOR) with the value "test@sciensano.be" Coauthor (TX_COAUTHOR) with the value "test@sciensano.be"
Q26	Is there a empty template of a CSV available? With a link to the documentation?	These header CSV files (for the projects featured in one of the slides) are already available on DOCS for all the projects which are in production. Next to the header csv we also provide an example csv containing all the headers along with a row with example inputs which can be made use of for uploading purposes.