



***Global eHealth Research and  
Training (GeHRT) Program***  
**Health Telematics Unit**



***Policy – Friend or Foe to  
Global e-Health?***

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# *Purpose*

- Compare and contrast e-health policy in Canada and Malaysia
- Identify strengths and weakness
- Propose policy directions and options

# *'Global e-Health' ?*

- *“The sustainable global integration of information and communications technologies into the practice of protecting and promoting health across geo-political, socio-economic, cultural, and temporal barriers - including research and education - to facilitate health, public and community health, health systems development, and epidemiology.”*

# *e-Health Policy Tools*

## **Definition :**

*“A set of statements, directives, regulations, laws, and judicial interpretations that direct and manage the life cycle of e-health”*

## **Policy Categorisation :**

- Level 1 – Regulations and laws governing e-health activity
- Level 2 – Statements, directives, guidelines for e-health
- Level 3 – Evidence of pro-active consideration of e-health
- Level 4 – Broad suggestions of intended direction

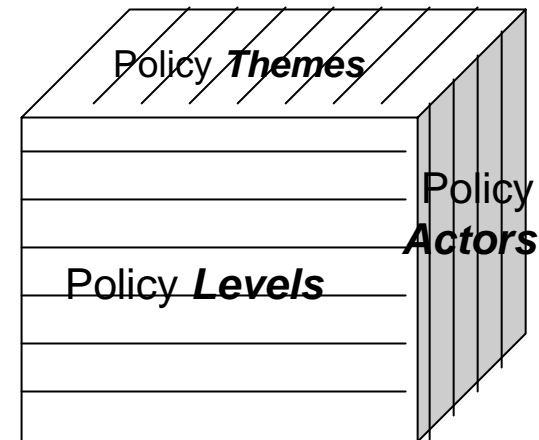
## **Country categorisation :**

a) None, b) Reactive, c) Proactive

# *HTU's 'e-Health Policy Matrix'*

## **Complexity**

- Eight policy **levels**
  - Patient/Provider, Community, Program, Organisation, ...
- Nine policy **themes**
  - Professional, operational, ethical, legal, ...
- Seven policy **actor** categories
  - International bodies, NGO's, Governments, Agencies, ...



# *Policy - Malaysia*

- Country with most public and clearly defined policy statements
- Strategy : Vision 2020 - Multi-Media Super Corridor initiative
- **Telemedicine Act – 1997**
- National Telehealth Policies statements
- Cyberlaws :
  - Digital Signatures Act
  - Computer Crimes Act
  - Copyright amendment Act
  - **Telemedicine Act**
  - Multimedia & Communications Act
  - Personal Data Protection Act



# *Policy - Malaysia*



## **MACRO Telehealth Policies :**

- **Teleconsultation**
- **Continuous Medical Education**
- **Mass Customised Personalised Health Information System**
- **Life Health Record and Life Health Plan**

# *Policy - Canada*

- Discrepant priorities amongst policy levels
  - Focused – EPR, Interoperability standards
  - Unfocussed – Reimbursement
- Discrepant priorities amongst actors (public, private, professional)
  - Focused – CCHSA – accreditation issues
  - Unfocussed – Professional bodies – e.g. licensing





# *Policy - Canada*

- Laws – coincidental to e-health
  - e.g. PIPEDA
- Healthcare - nationally ‘guided’, but implemented by provinces and territories
- e-Health implementation policy will be developed at the P/T level
  - **Issues with ‘Global e-Health’**

# *Summary*

## ● Malaysia

- e-Health
  - Strategic issue
  - Long-term Plan clear
- e-Health Policy
  - Several Laws
  - Many Regulations
  - Integrated
  - Comprehensive
  - **Potentially restrictive**

## ● Canada

- e-Health
  - Strategic issue
  - **Long-term Plan clear ?**
- e-Health Policy
  - **'Coincidental' laws**
  - **Few Regulations**
  - **Not integrated**
  - Comprehensive
  - **Too little guidance**

# *Conclusion*

- ***Policy – Friend or Foe to Global e-Health?***  
Both !!
- **Policy Directions**
  - Awareness ➡ Education ➡ Coordination
- **Policy Options**
  - Reactive policy development to ‘catch up’
  - Proactive policy development to plan for future needs