

# Data availability route map for AI in Health & Care

The aim is to increase data availability for development, training, validation and application of AI for Health & Care.



Towards national cooperation in AI. An initiative of Nictiz, NL AIC, VWS

Implement these success factors locally to encourage/create the supply of data.

| Technology & Security                                   | Data & Information                         | Process (care process) & standardised                          | People & (Care) Organisation                          |
|---|--|--|---|
| Physical and technical security                         | Use of standards and definitions           | Minimum administrative burden for care professionals           | Strategy for secondary data                           |
| Automating and integrating data exchange                | Organisation's knowledge information flows | Knowledge about digital working                                | Aware of the value and risks of secondary use of data |
| Data storage and processing using innovative technology | Limit human actions/automate               | Overview of recorded data and where/how it adds value          | Decision-making and risk management                   |
|   | Safe data exchange with AI                 | Awareness of the influence of human actions on AI data quality | Budgets / finances                                    |
|   | Improve/ensure data quality                |  | Knowledge process / technology                        |
|   |  |  | Change strategy and readiness                         |

Phase out these blank spots nationwide to organise/facilitate movement.

| Legislation & Ethics   | Social value of data & data solidarity   | Organising national control of Knowledge & Expertise             | Social appeal & transparency  |
|--|--|--|---|
| Doctors/admin feeling and having responsibility to patient/service         | National agreements/social CBA for AI data use, data application   | National roadmap for AI data availability with social backing    | Confidence in how it works thanks to AI transparency                      |
| Applying protection to medical data. Permissions, A&P, CE/MDR, basis, etc. | Access to data for AI purposes and use   | Overview, monitoring progress such as innovation / international | Confidence thanks to national AI "supervision & monitoring" in healthcare |
| Patients' and clients' involvement and privileges                          | Inclusion or exclusion: Difference in funding for primary, secondary and tertiary care Market parties with a lot of cash | Careful introduction: Tools and resources                        | Burden of proof and value of AI   |
|  |  |  | Influences and appeals in the debate                                      |