㉓　次期システムでは、国の施策に基づくマイナンバーカードの健康保険証としての利用やマイナポータルを介した医療情報の提供やＨＬ７ＦＨＩＲを用いた電子カルテ情報共有サービス等に対応すること。また、厚生労働省標準規格マスターを積極的に利活用できるシステムであること。

㉔　次期システムでは、次世代医療基盤法に基づくリアルワールドデータ（ＲＷＤ）の活用にむけ、認定匿名加工医療情報作成事業者が提供するシステムと十分な連携ができるシステムであること。

2　資料及びコメントの提供方法　上記１⑵の物品に関する一般的な参考資料及び同⑸の要求要件等に関するコメント並びに提供可能なライブラリーに関する資料等の提供を招請する。

⑴　資料等の提供期限　令和７年６月17日17時00分（郵送の場合は必着のこと。）

⑵　提供先　〒060―8648 札幌市北区北14条西５丁目　北海道大学病院管理課係長（用度第一係）　鈴木　雅樹　電話011―706―7401

3　説明書の交付　本公表に基づき応募する供給者に対して導入説明書を交付する。

⑴　交付期間　令和７年５月７日から令和７年６月17日まで。

⑵　交付場所　上記２⑵に同じ。

4　説明会の開催　本公表に基づく導入説明会を開催する。

⑴　開催日時　令和７年５月15日10時00分

⑵　開催場所　北海道大学病院管理課入札室

5　その他　この導入計画の詳細は導入説明書による。なお、本公表内容は予定であり、変更することがあり得る。

6　Summary

⑴　Classification of the products to be procured : 14

⑵　Nature and quantity of the products to be purchased : Hospital Information System 1 set

⑶　Type of the procurement : Rent

⑷　Basic requirements of the procurement :

①　The next system must provide comprehensive support for the medical operations of the Hokkaido University Hospital and its branch hospitals (Forensic Psychiatry Center) and have functions for the smooth management and operation of the University Hospital's operations. In addition, the system must have sufficient security functions and the necessary measures against failures as a hospital that handles medical information, including patient information.

②　The next system should evolve and develop while inheriting existing functions and aim to be sustainable in the future, so that it can respond quickly and flexibly to various changes in social conditions, such as the recent rise in labor, material and logistics costs, as well as changes in the healthcare system and revisions to medical fees.

③　The next system should be able to cope not only with large-scale disasters, but also with ransomware and other cyber-attacks. In addition, the system should be capable of reliable data backup and early recovery. In particular, with regard to ransomware countermeasures, the system should be designed to anticipate the occurrence of ransomware and take measures to prevent intrusion. Even if an intrusion does occur, the system should aim to minimize damage, have a server configuration and environment construction, a reliable implementation system for security updates, and be capable of performing sufficient offline backups. Furthermore, it must be possible to secure a reference environment to minimize the impact on on-site operations in the event of a disaster, and data recovery to enable early recovery is also strongly required.

④　The next system should actively utilize generative AI to improve the efficiency of healthcare operations without compromising quality and contribute to the promotion of healthcare DX.

⑤　The next system should be one that contributes positively to healthcare safety.

⑥　The next system should have sufficient and necessary functions for insurance treatment, actively support the preparation of insurance medical records that provide evidence and reduce the burden on the user at the time of revision of medical fees.

⑦　The next system shall be configured to store, extract and re-use data with a granularity and availability that can withstand disclosure of medical information, analysis of risk factors, external evaluation and management analysis. The system shall also function as an electronic medical record. The next system shall be structured in such a way that users can easily extract data, and shall have a function to extract data anonymized in consideration of personal information.

⑧　The next system shall be connected to the existing departmental systems via the hospital network and shall have the capability to smoothly transmit and process various types of information, including images and videos. The system shall be able to integrate information between the various departments, interoperate with each other to ensure data validity and avoid redundant input.

⑨　The next system shall have the capability to be connected via a network to medical equipment and other equipment in each department that is connected to and operated by the current system.

⑩　Each terminal of the next system shall adopt a GUI to ensure uniform operability and be environmentally friendly, including power saving. In addition, each function of the next system shall be mutually linked to ensure effective use of data, and shall have functions to reduce the human input load. The next system should be able to operate various data tables and master tables quickly and reliably, even for users who are operating them for the first time, and have functions that prevent duplicate input work.

⑪　The next system shall be robust enough to ensure sufficient security in external connections used for regional medical collaboration and data backup to external facilities, and to prevent security incidents such as leakage of personal information or unauthorized access. The system must also be able to ensure reliable and efficient two-factor authentication when logging in to the system.

⑫　The next system shall be capable of 24-hour automatic and unmanned operation and have the performance to ensure rapid response. The system shall also have a system maintenance system and failure countermeasures.

⑬　The portable devices with batteries to be used in the next system shall be maintainable and durable enough to operate throughout the borrowing period, and shall be smoothly linked to the electronic medical record system, nurse call system and patient nursing support system. In addition, smartphones shall have the ability to use calling and messaging applications to improve operational efficiency and facilitate communication.

⑭　The next generation system shall be able to visualize, intuitively operate and manage security management, including asset management, device management, MDM management and terminal policy management with regard to hardware and software.

⑮　The next system shall be further internationalized and shall be equipped with the ability to tabulate patient visits by country of origin and corresponding language, output various documents in multiple languages, and provide translation tools using tablets.