



Encyclopedia of Health Legislation

Book 10: Legislation on ICT in Health Fields



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Third Issue - February 2023

Book 10:

Legislation on ICT in Health Fields



صاحب السمو الشيخ محمد بن زايد آل نهيان

رئيس دولة الإمارات العربية المتحدة

HIS HIGHNESS SHEIKH MOHAMED BIN ZAYED AL NAHYAN

PRESIDENT OF THE UNITED ARAB EMIRATES



المغفور له بإذن الله الشيخ زايد بن سلطان آل نهيان
تغمده الله بواسع رحمته

SHEIKH ZAYED BIN SULTAN AL NAHYAN



المغفور له بإذن الله الشيخ خليفة بن زايد آل نهيان

تغمده الله بواسع رحمته

SHEIKH KHALIFA BIN ZAYED AL NAHYAN



Introduction

The release of the third issue of the Encyclopedia of Health Legislation by the Department of Health - Abu Dhabi reflects the aspirations of the Government of Abu Dhabi to deliver the best services to customers and provide an organizational and legislative knowledge, and is the Department's first step towards legislative digitization in the health field to achieve its vision of "a healthier Abu Dhabi" and hence promote the wellbeing and happiness of community.

The release of "**Legislation on ICT in Health Fields**" in this tenth book of the Encyclopedia is a step in supporting national health policies that aim to implement a health system adopting the highest international standards. It is also a qualitative step to enhance the role of electronic health data, and build an integrated system for information system in this vital field.

Legislation on ICT in Health Fields includes the regulating law whose objective is to ensure the optimal use of information technology, enable health authorities to collect, analyse and maintain health information at the state level, and elaborate bases and standards necessary for electronic systems and the appropriate controls to establish connection with the central system in order to ensure the safety and security of data and health information.

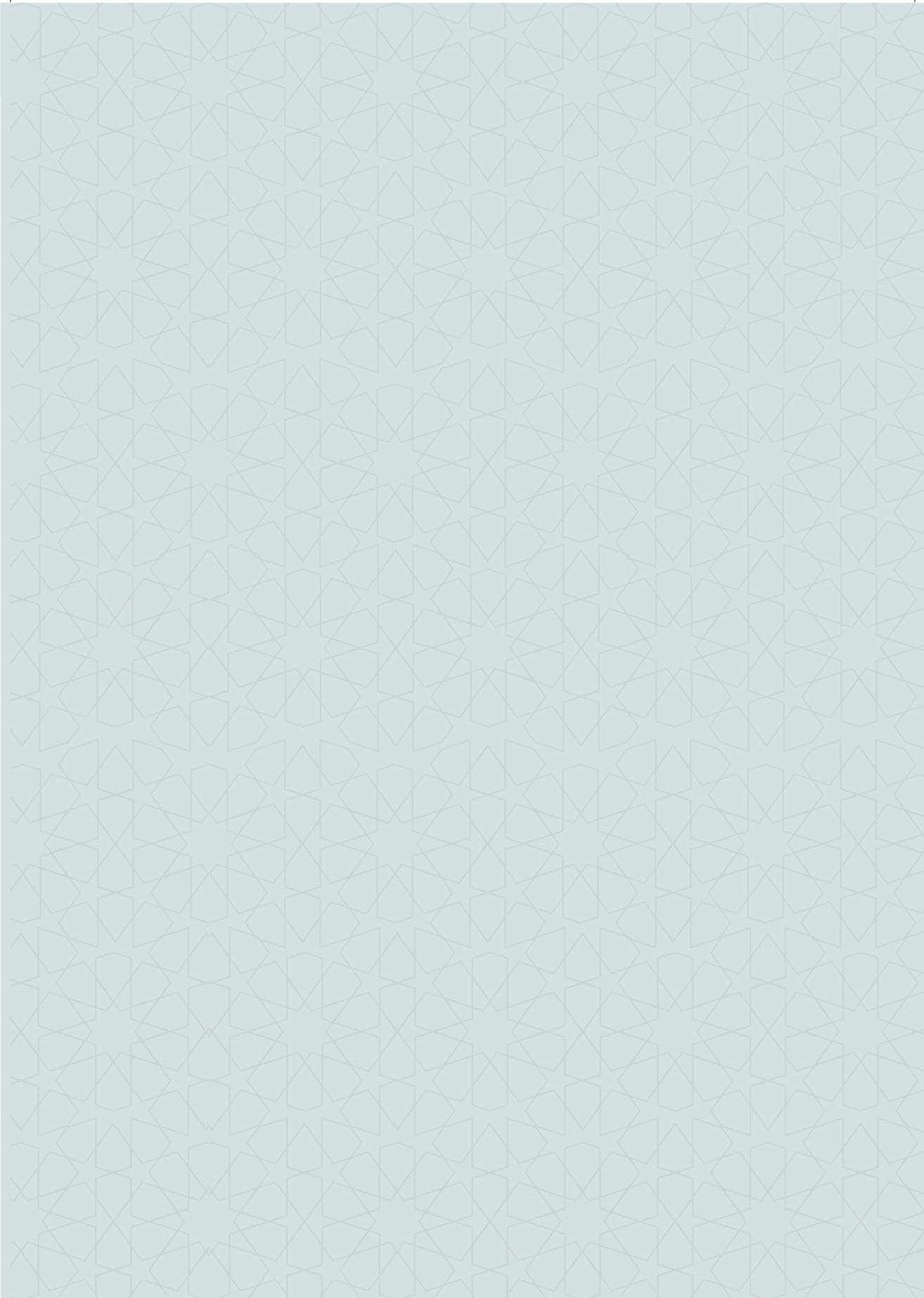
DOH will seek to strengthen the body of ICT health legislation with further contributions and initiatives that support the State's efforts to develop the healthcare services and associated systems and programmes, create an attractive Emirati scientific and research environment in health field, and strengthen DOH's strategy to enable technology, innovation and artificial intelligence development in health sector.

Finally, we would like to express our profound gratitude for the guidance and trust of H.E. the Chairman of the Department of Health and for the follow-up, support and attention of H.E. the Undersecretary. We would also like to extend our thanks and appreciation to DOH partners, all the Encyclopedia team, and the officials of DOH organizational units for their efforts and active participation in completion of this book, looking forward to working together towards further development and modernization to strengthen the body of the health legislation in the Emirate of Abu Dhabi.

Saqr Al Marzooqi

Manager, Legal Affairs Office

Abu Dhabi - February 2023





Federal law No. (2) of 2019 on the Use of Information and Communication Technology (ICT) in Health Fields*

We, Khalifa bin Zayed Al Nahyan, President of the United Arab Emirates:

- Having regard to the Constitution;
- Federal Law No. (1) of 1972 on the Mandates of Ministries and Powers of Ministers, as amended;
- Federal Law No. (7) of 1975 on the Practice of Human Medicine Profession, as amended;
- Federal Law No. (15) of 1980 concerning Publications and Publishing;
- Federal Law No. (4) of 1983 on Pharmacy Profession and Pharmaceutical Institutions;
- Federal Law No. (5) of 1984 on the Practice of Some Medical Professions by other than Physicians and Pharmacists;
- Federal Law No. (3) of 1987 Promulgating the Penal Code, as amended;
- Federal Law No. (11) of 1992 Promulgating the Civil Procedure Code, as amended;
- Federal Law No. (35) of 1992 Promulgating the Criminal Procedure Code, as amended;
- Federal Decree-Law No. (3) of 2003 on the Regulation of Telecommunications Sector, as amended;
- Federal Law No. (8) of 2004 on the Financial Free Zones;
- Federal Law No. (1) of 2006 on Electronic Commerce and Transactions;
- Federal law No. (9) of 2006 on the Population Register System and the Identity Card, as amended;
- Federal law No. (6) of 2007 on the Establishment of the Insurance Authority and Regulation of its Operations, as amended;
- Federal law No. (11) of 2008 concerning the Licensing of Fertilization Centres in the State;

* This translation from Arabic to English is provided for your convenience only. In case of any discrepancy, the Arabic version prevails.

- Federal law No. (18) of 2009 on the Regulation of Registration of Births and Deaths;
 - Federal Decree-law No. (3) of 2012 on the Establishment of the National Electronic Security Authority (NESA), as amended;
 - Federal Decree-law No. (5) of 2012 on Combating Cybercrimes, as amended;
 - Federal Law No. (14) of 2014 on the Prevention of Communicable Diseases;
 - Federal Law No. (4) of 2015 on Private Health Facilities;
 - Federal Decree-Law No. (4) of 2016 on Medical Liability;
 - Federal Law No. (14) of 2016 on Violations and Administrative Penalties in the Federal Government;
 - Federal Decree-Law No. (16) of 2016 concerning the Establishment of Emirates Health Services Establishment; and
 - Based on the proposal of the Minister of Health and Prevention, and the approval of the Cabinet and the Federal National Council, and the ratification of the Federal Supreme Council,
- **Promulgate the following Law:**

Chapter One

Definitions; General Provisions

Article (1)

Definitions

In application of the provisions of this Law, the following words and expressions shall have the meanings ascribed to them, unless the context otherwise requires:

State	: The United Arab Emirates.
Ministry	: The Ministry of Health and Prevention.
Minister	: The Minister of Health and Prevention.

Health Authority	: Any Federal or local government health authority in the State.
Concerned Entity	: Every entity in the State that provides health services, health insurance, health insurance brokerage or insurance claim administration services or electronic services in the health field, or any entity that is directly or indirectly related to the implementation of the provisions of this Law.
Person	: The natural or legal person.
Central System	: A set of electronic exchange processes of Health Information and Data, including the set of electronic parts or elements linked and working together for the achievement of a specific goal.
Data	: everything that can be stored, processed, generated and transmitted by means of Information and Communication Technology (ICT) such as numbers, letters, symbols, images and the like.
Health Information	: Health data processed and made apparent and evident whether visible, audible or readable, and which are of a health nature whether related to health facilities, health or insurance facilities or beneficiaries of health services.
Processing	: Creating, entering, modifying, updating or deleting the information electronically.
Health Information Circulation	: Accessing, exchanging, copying, photocopying, transmitting, storing, disseminating, disclosing or sending Health Information and Data.
Professional Guides	: A description of the methods, actions and procedures that should serve as guidelines.
ICT	: The technical or electronic tools or systems or other means that enable the Processing of information and Data of all kinds, including the possibility of their storage, retrieval, dissemination and exchange.

Article (2)

Scope of Application

This Law shall apply to all ICT methods and uses in health fields in the State, including the Free Zones.

Article (3)

Objectives of the Law

This law aims to:

1. ensure the optimal use of ICT in health fields.
2. ensure that the bases, standards and practices adopted are in line with their internationally adopted counterparts.
3. enable the Ministry to collect, analyse and maintain Health Information at the State level.
4. ensure the security and safety of Health Information and Data.

Chapter Two

ICT Use Controls

Article (4)

Obligations When Using ICT

When using ICT in health fields, the following must be adhered to:

1. Maintaining all Health Information and Data confidential, by not allowing their Circulation in cases other than those permitted.
2. Ensuring the validity and credibility of the Health Information and Data, by protecting their integrity from sabotage or unauthorized amendment, alteration, deletion or addition.
3. Ensuring that the Health Information and Data are available to the authorized parties, and facilitating access thereto, when and where necessary.

Article (5)

Establishment of the Central System

The Ministry shall, in coordination with the Health Authority and the Concerned Entities, establish the Central System to keep, exchange and collect all Health Information and Data.

Article (6)

Bases, Standards and Controls of Electronic Systems

The Health Authority shall set out the bases, standards and controls required for the electronic systems of its Health Information and Data, such as their operating methods, the method of information and Data exchange, protection, access and copying, the changes made thereto, the safe and secure uses thereof and Data and Health Information risk management.

Article (7)

Joining the Central System

The Health Authority and the Concerned Entity shall join the Central System, according to the controls and procedures prescribed by the Implementing Regulations of this Law.

Article (8)

Central System Use Obligations

1. Entities authorized to use the Central System shall:
 - a. designate the Persons authorized to access and circulate the Health Information and Data systems and bases and define their authorities.
 - b. take all actions necessary to ensure the protection, safety and confidentiality of the Health Information and Data.
2. The Implementing Regulations of this Law shall define the controls and procedures for the application of the provisions of this Article.

Article (9)

Publication and Distribution of Professional Guides

Entity authorized to publish and distribute Professional Guides through the Central System shall be designated by decision of the Minister in coordination with the Health Authority.

Article (10)

Coordination between The Ministry and the Concerned Entity or Health Authority

The Ministry shall, in coordination with the Health Authority or the Concerned Entity:

1. develop and implement a national strategic plan for the use of ICT in the health fields.
2. develop mandatory mechanisms and procedures for the use of ICT in the health fields, according to the provisions of this Law and the laws in force in the State.
3. implement and evaluate the initiatives and programmes defined in the strategy as well as the technical standards.
4. develop the controls, standards and procedures of the electronic operational programmes used for establishing a connection with the diagnosis and treatment devices and equipment of the facilities providing health services.
5. develop the mechanisms and procedures for the Circulation of Health Information and Data.

Article (11)

Ensuring Compatibility of Information Systems Used

The Health Authority and the Concerned Entity shall, within their respective competence, ensure the validity and credibility of the Health Information and Data and shall provide them in a manner that ensures compatibility of the used Information Systems, and their interoperability, to exchange and compile Health Information and Data.

Article (12)

Storage of Health Information and Data in the State

Conditions and controls of storage of Health Information and Data in the State shall be defined by decision of the Minister in coordination with the Health Authorities.

Article (13)

Storage and Transfer of Health Information and Data outside the State

Health Information and Data related to the health services provided in the State may not be stored, processed, generated or transmitted outside the State, unless in the cases defined by decision of the Health Authority in coordination with the Ministry.

Article (14)

Prohibitions on the Use of the Central System

No Person may use the Central System unless it is authorized to do so by the Health Authority or the Concerned Entity, according to the provisions of the Implementing Regulations of this Law.

Article (15)

Central System Use Obligations

1. Persons authorized to use the Central System shall:
 - a. circulate the information necessary for the accomplishment of the required job or defined objective.
 - b. restrict the Circulation of information to the authorized Persons only.
 - c. not amend the Health Information and Data by way of deletion or addition, unless according to the established controls.
 - d. not disseminate the Health Information and Data, in addition to the statistics related to the health field, unless according to the established controls
2. The Implementing Regulations of this Law shall define the controls and procedures for the application of the provisions of this Article.

Article (16)

Confidentiality of Information pertaining to Patients and Exclusions

Without prejudice to any legislation in force, whoever circulates information related to patients shall keep it confidential and shall not use it for non-health purposes without the written consent of the patient, except in the following cases:

1. Data or Health Information required by the health insurance companies or any health service funding entity with regard to the health services received by the patient, for the purposes of reviewing, approving or verifying the financial benefits related to these services.
2. Scientific and clinical research purposes, provided that the identity of patients is not disclosed and the scientific research ethics and rules are observed.
3. Taking preventive and curative measures related to the public health or protecting the health and safety of the patient or any other Person related to him/her.
4. At the request of the competent judicial authorities.
5. At the request of the Health Authority for the purposes of control, inspection and protection of public health.

Article (17)

Advertisement Licensing

The Central System may not be used to publish any health advertisement without a license from the Ministry.

Article (18)

Breach of Controls and Standards of Health Advertisements

The Ministry may request the competent authority, in accordance with its procedures, to ban or block websites, whether inside or outside the State, that violate the controls and standards of health advertisements in the State, or provide advertisements or Health Information without a permit or license from the Ministry.

Article (19)

Cadre Training and Qualification

The Health Authority shall train and qualify the human cadre and provide the appropriate resources and environment in order to ensure the safety and security of Health Information and Data in line with the best international practices.

Article (20)

Health Information and Data Retention

1. When keeping Health Information and Data through ICT, the following conditions shall be adhered to:
 - a. The retention period must be proportional to the need for Health Information and Data, which period shall not be less than twenty-five (25) years from the date of the last health procedure provided to the Person to which such Health Information and Data relate.
 - b. Standards of confidentiality, validity and credibility of Health Information and Data must be observed.
2. The Implementing Regulations of this Law shall define the controls and procedures for the implementation of the provisions of this Article.

Article (21)

Inclusion of the Identity Number in Health Files and Transactions

The Health Authority and the Concerned Entity shall include the Identity number in all transactions, registers and Health Files and use it for the purposes of their organization and storage, except for emergencies and other cases defined by decision of the Ministry in coordination with the Health Authority.

Chapter Three

Penalties

Article (22)

Application of the Severer Penalty

Penalties provided for in this Law shall apply without prejudice to any severer penalty provided for in any other law.

Article (23)

Penalty for Publication of a Health Advertisement without License

Shall be punished by a fine of no less than AED 100,000 (Dirhams One Hundred Thousand) and not more than AED 200,000 (Dirhams Two Hundred Thousand), whoever publishes a health advertisement through the Central System without License.

Article (24)

Penalty for Breach of Provisions of Article (13)

Shall be punished by a fine of no less than AED 500,000 (Dirhams Five Hundred Thousand) and not more than AED 700,000 (Dirhams Seven Hundred Thousand), whoever violates the provisions of Article 13 of this Law.

Article (25)

Disciplinary Sanctions

Without prejudice to the criminal penalties provided for in this Law or in any other law, the Health Authority shall, each within the scope of its competence, have the right to penalize the facilities that provide health services or operate in the field of health research or the facilities authorized to use the Central System, which violate the provisions of this Law, its Implementing Regulations or the decisions issued thereunder, by any of the following disciplinary sanctions:

- a. Written notice.
- b. Written warning.
- c. A fine of no less than AED 1,000 (Dirhams One Thousand) and not more than AED 1,000,000 (Dirhams One Million).

- d. Temporary suspension of the authorization to use the Central System for a period not exceeding six (6) months.
- e. Cancellation of the authorization to use the Central System.

Article (26)

Appeal against Disciplinary Sanctions

1. A committee shall be formed at the Health Authority to examine all appeals filed against disciplinary sanctions. The committee shall be formed and its terms of reference and the manner of filing appeals shall be determined by decision of the Health Authority.
2. A Person against whom a disciplinary sanction has been issued according to Article 25 hereof may file a appeal against the decision before the appeal committee formed at the Health Authority, within fifteen (15) days from the date when the grievant becomes aware of the decision.
3. The appeal shall be determined within (30) thirty days from the date of its submission. If no reply is received during this period, the appeal shall be deemed as rejected.
4. Decision rendered on the appeal shall be final.
5. A Person whose appeal has been rejected may appeal before the competent courts in the State within thirty (30) days from the date on which it is informed of the rejection of the appeal or the expiry of the thirty-day period referred to in paragraph 2 of this Article.

Chapter Four

Final Provisions

Article (27)

Judicial Officers

Employees designated by decision of the Minister of Justice, in agreement with the Minister or the Health Authority, shall have the status of judicial officers in establishing any violations of the provisions of this Law and the decisions issued thereunder, within the scope of their respective competence.

Article (28)

Adjustment of Positions of the Concerned Entities

The Concerned Entity shall adjust its position according to the provisions of this Law within the period specified in a Cabinet resolution.

Article (29)

Issuance of the Implementing Regulations of the Law

The Cabinet shall, upon the proposal of the Minister, issue the Implementing Regulations of this Law within six (6) months from the date of its publication.

Article (30)

Repeal of Conflicting and Contradictory Provisions

Any provision contrary to, or in conflict with the provisions of this Law shall be repealed.

Article (31)

Publication; Entry into Force

This Law shall be published in the Official Gazette, and shall come into force three (3) months after the date of its publication.

Khalifa bin Zayed Al Nahyan

President of the United Arab Emirates

Promulgated by Us at the Presidential Palace in Abu Dhabi:

On: 01/Jumada Al Thani/1440 H

06/February/2019 G



Cabinet Resolution No. (32) of 2020 concerning the Implementing Regulations of Federal law No. (2) of 2019 on the Use of Information and Communication Technology (ICT) in Health Fields*

The Cabinet:

- Having regard to the Constitution;
 - Federal Law No. (1) of 1972 on the Mandates of Ministries and Powers of Ministers, as amended;
 - Federal Decree-Law No. (4) of 2016 on Medical Liability;
 - Federal law No. (2) of 2019 on the Use of Information and Communication Technology (ICT) in Health Fields;
 - Federal Law No. (5) of 2019 on the Regulation of Practice of Human Medicine Profession;
 - Cabinet Resolution No. (40) of 2019 concerning the Implementing Regulations of Federal-Decree Law No. (4) of 2016 on Medical Liability;
 - Based on the proposal of the Minister of Health and Prevention, and the approval of the Cabinet,
- **Resolves:**

Article (1)

Definitions

Definitions set forth in the referenced Federal Law No. (2) of 2019 shall be applied to this Resolution. Otherwise, the following words and expressions shall have the meanings ascribed to them, unless the context otherwise requires:

- Consent : Acceptance expressed by signing a paper or via electronic means.
- Person's Identity Details : Data or information indicating the identity of a Person, whether singly or in conjunction with other Data or information.

* This translation from Arabic to English is provided for your convenience only. In case of any discrepancy, the Arabic version prevails.

Article (2)

Joining the Central System

1. The Health Authorities and the Concerned Entities shall join the Central System, in accordance with the following:
 - a. Compliance with the Central System's rules of operation mentioned in the referenced Federal Law No. (2) of 2019 and decisions issued in the implementation thereof;
 - b. Adherence to the deadline set for joining the central database, as determined by the Ministry in coordination with such entities;
 - c. Payment of any costs associated with link and connection with the Central System.
 - d. Compliance with the rules governing the national registry regarding digital health standards that are related to the standards, requirements and procedures required when dealing with the Central System, including:
 - (1) Personal Health Information required to be provided by Health Authorities and Concerned Entities.
 - (2) Adherence to the mechanism for Circulation of personal Health Information and Data with the authorized Health Authorities and Concerned Entities in order to protect them and ensure their confidentiality.
 - (3) Mechanisms to protect the confidentiality of Health Information and Data.
2. The Ministry shall verify the personal Health Information and Data provided by the Concerned Entities in order to ensure their validity, quality, and compliance with the national digital health Data standards.
3. The Ministry shall, in coordination with the other Health Authorities and the Concerned Entities, define the mechanism and procedures for ensuring the quality of personal Health Information and Data.
4. Any other conditions or procedures regarding the joining of the Central System shall be set out by decision of the Minister after coordination with the other Health Authorities and the Concerned Entities.

Article (3)

The Ministry shall, in cooperation with the other Health Authorities and the Concerned Entities, form a joint committee in charge of coordinating the issues related to the implementation of the provisions of Article 2 hereof. This committee may form sub-committees whenever it deems necessary.

Article (4)

Persons Authorized to Access the Central System

1. Subject to the provisions of the referenced Federal Decree-Law No. (4) of 2016 and the referenced Cabinet Resolution No. (40) of 2019, the Health Authorities and the Concerned Entities shall designate the Persons authorized to access the Central System, on the basis of need, and depending on the professional role to determine the level of access to Central System Data, in addition to the Person's role in providing care to patients.
2. The Health Authorities and the Concerned Entities shall comply with the standards of privacy and safety, and any other controls set by the Ministry in coordination with the other Health Authorities, including the periodic auditing procedures to remove or amend privileges or authorities of the authorized Persons in accordance with the demands of work.

Article (5)

Controls regarding the Authorization to Use the Central System

No Person may use the Central System unless it is authorized to do so by decision of the Health Authorities or the Concerned Entities, and in accordance with the following controls:

1. The Health Authority shall grant the authorization to:
 - a. Persons employed by it under an employment contract, and the nature of their work requires the use of the Central System;
 - b. Persons who work through service outsourcing companies under contracts with these companies, or experts and consultants who are used casually, or entities and bodies affiliated with the Health Authority, and, in any case, the nature of their work or the task assigned to them requires the use of the Central System.

2. The Concerned Entity shall grant the authorization to the Persons employed by it, provided that the nature of their work requires the use of the Central System, and the use is within the limits of the actual need required by the work. Upon granting the authorization, the Concerned Entity shall provide the Health Authority with a list of the authorized Persons.
3. The Health Authority and the Concerned Entity, as the case may be, shall designate the Persons authorized to access the Central System remotely.
4. The Health Authority and the Concerned Entity, as the case may be, shall take the necessary measures to ensure that the authorized Persons will not be able to access the Central System after the end of their service with them.
5. Individuals may grant access to their personal Health Information to other Persons of their own choice, provided that they are registered as users of the central database of the System, to the extent not contrary to any other legislation issued in this regard.
6. Any Person may request that a ban or restriction of access to its personal Health Information be imposed, in accordance with the conditions and controls set by the Ministry in coordination with the other Health Authorities.

Article (6)

Conditions and Controls for Use of the Central System and Health Information and Data Circulation

The use of the Central System and Circulation of Health Information and Data shall be subject to the following conditions and controls:

1. Suppliers, entities and Persons authorized to access any of the ICT systems must agree to undertake that they will not disclose the Health Information and Data that have been accessed through the use of the Central System.
2. Patients' Health Information may not be disclosed to any party without the Consent of the patient or his/her legal representative, unless such disclosure is permitted by the legislation in force in the State.
3. In case of emergency, and if the patient's Consent cannot be obtained, healthcare providers may inspect the patient's file for healthcare provision purposes, and explain the reasons for such inspection.

4. A patient's file must not be left open unattended, and computers or any other electronic means must be closed when they are not used.
5. Any suspicious activities that may affect the confidentiality of Data and information must be reported.
6. Sending email or using any other electronic means of communication that contains patient information is prohibited unless it is encrypted.
7. In the event that information is entered incorrectly or some information is not entered, the error must be rectified or the required information must be completed while saving the original entry for quality and auditing purposes.
8. When amending any Data, the reason for the amendment must be mentioned and the information that has been modified and the date of modification must be saved along with the electronic signature of the Person that made the modification.
9. Ensuring that modifications made to information and data are traceable once entered or certified.
10. Federal Health Information and Data and health statistics must not be published at the State level without the Consent of the Ministry.
11. The patient's Consent must be obtained in the event of publication of his/her identity details, and a list of the Person's Identity Details must be determined by decision of the Minister in coordination with the other Health Authorities.
12. Data, information and statistics to be published must comply with the standards set by the Ministry in coordination with the other Health Authorities.
13. All necessary steps must be taken to protect patients' personal Data and information from loss, misuse, unauthorized access, disclosure, modification or destruction.
14. The user authorized to access the Central System must have his/her own username and password.
15. The username and password must not be disclosed to any other user or any other party.

Article (7)

Controls for Health Information and Data Retention by means of ICT

Health Information and Data shall be kept by means of ICT, according to the following controls:

1. The Central System must include all patients' files in the State, and the files must contain Data and information that the Ministry determines in coordination with the other Health Authorities.
2. The patient can choose to withdraw from the Central System, in which case the Data and information can be kept anonymous.
3. Health Information and Data that have exceeded the retention period may be archived for research and public health purposes, while maintaining the patient's privacy.
4. A backup copy of Health Information and Data must be taken in a safe manner, and such Data and information must be retrievable, and backup copies must be reviewed and updated regularly and continuously.
5. The Ministry shall, in coordination with the Health Authorities, develop one or more plans to manage risks and ensure the continuity of operation of the Central System.
6. The Ministry shall, in coordination with the Health Authorities, and through specialized committees, set the locally applicable global standards in respect of confidentiality, quality and validity of Health Information and Data in a manner that does not violate the legislation in force in the State.
7. The Ministry and the Health Authorities shall carry out periodic audits to ensure the implementation of standards and procedures by the Concerned Entities with regard to the validity, integrity, quality and confidentiality of Data and information.
8. Health Information and Data shall be stored by means of ICT, and in accordance with the medical record retention and archiving controls applicable in every health facility, provided that they are compatible at a minimum with the controls set by the Ministry in coordination with the other Health Authorities.
9. Periodic tests must be conducted to assess the effectiveness of the mechanism for retrieval of Health Information and Data, and to detect any

defects in the functioning of the Central System and any improvements that can be made thereto.

Article (8)

Executive Decisions

The Minister shall, in coordination with the Health Authorities, issue the decisions necessary for the implementation of the provisions of this Resolution.

Article (9)

Repeals

Any provision contrary to, or in conflict with the provisions of this Resolution shall be repealed.

Article (10)

Publication; Entry into Force

This Resolution shall be published in the Official Gazette, and shall come into force six (6) months after the date of its publication.

Mohammed bin Rashid Al Maktoum

Prime Minister

Promulgated by Us

On: 29/Shabān/1441 H

22/April/2020 G



Conclusion

With God's blessings, the third issue of the Encyclopedia of Health Legislation of the Department of Health - Abu Dhabi has been released to be launched in 2023.

On behalf of myself and all the members of the team working on the Health Legislation Encyclopedia project, I would like to extend my thanks for the precious trust placed by His Excellency the Chairman of the Department of Health - Abu Dhabi, and for the interest and follow-up of His Excellency the Undersecretary of the Department, by providing all means of support and motivation throughout the stages of work until the release of the third issue of the Encyclopedia.

I also pay tribute to the outstanding efforts and hard work made by my fellow team members, for the release of this Encyclopedia in its current issue.

To conclude, we look forward to working together with our partners towards further initiatives that achieve the Department's promising vision that "the Emirate of Abu Dhabi be a place where everyone is at his healthiest" by providing a distinguished and sustainable healthcare and services that achieve the well-being and happiness of the community.

Saqr Al Marzooqi

Manager, Legal Affairs Office

Abu Dhabi - February 2023



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