

Round Table

Health grids are correctly working on technical level, but there is no knowledge. Knowledge grids needs more time, it's a semantic problem. Connecting resources, is that a business case of grid (service of the community)? The look of potential difference of grid shows that grid is not only a service. In this knowledge the German grid infrastructure is funding by the federal ministry of education and research.

How long does it take to the grid (provider, hardware, e.g.)? It takes long by consideration of processing personal data, regulation, policies, different kinds of application, interoperability of the three operating systems (Globus, gLite, Unicore), legal and social aspects.

Hardware Resources are one problem, but physician and hospital are not involved in technology, we focused on research problem, not involved in other customers' legal problem, we should bring anyway to the end-user, transfer it in practice.

A good business case is the economy of the physicians, a high level of care, but there is a need of modify the national regulations.

Use cases for the grid technology

- use for development,
- use for support,
- very sophisticated secure infrastructure
- security, government, hospital, simple installation of grid

Summary of discussion

- Look for simple grid; look for simple applications (not personal data)
- Legislation/ Security
- Application of community (data grid)-> role-based
- Time Table
 - simple application deal with data, not before three or five years,
 - one aspect: data driven, not patient, billing and test data, in the near future

See our demonstrations in Dresden at the International Super Computing in July.