Proposal for a Collaboration and Pilot Agreement: UMAPS Corralejo de Arriba

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1. Background and purpose

In view of our shared interest in strengthening the conditions and working environment of rural primary care in San Miguel de Allende, Sufi Service Sweden hereby presents a concrete collaboration proposal for UMAPS Corralejo de Arriba.

The aim is to carry out a pilot project for modernisation and digitalisation in three clearly defined steps. Our starting point is that administrative and bureaucratic processes should not prevent the project from getting under way quickly, while patient safety and applicable regulations are addressed and reviewed step by step in close cooperation with health management.

2. Three-phase implementation plan

Phase 1 – Equipment, local installation, comodato and offline scanning

- Receipt of equipment: Ergonomic and IT equipment is delivered to UMAPS Corralejo de Arriba. Receipt and acknowledgement of the equipment take place directly at the clinic and require no prior approval from the central Unidad Jurídica.
- Five-year comodato (right of use with intended future donation): For the use of the equipment itself, a quick and smooth local coordination takes place. A comodato agreement (free loan) is drawn up under which the foundation remains the formal owner for five years, with the express intention of thereafter transferring all items as a gift/donation to the health services in Corralejo de Arriba.
- Local scanning without network connection (offline): The clinic's existing paper records and historical patient files are scanned on site with the supplied document scanner and stored locally on the installed computer. No connection to cloud services or external networks takes place in this initial phase.

Phase 2 – Pilot, IT instructor, fictitious patients, CURP linkage and legal review

- On-site IT instructor (2–3 months): The foundation funds and appoints a qualified IT instructor/technician who will be on site for two to three months to handle installation, practical operation and ongoing staff training.
- Training with fictitious (synthetic) patients: Health staff practise and get to know the system exclusively with fictitious patient data. This makes staff confident in the workflows and allows us together to identify and correct any shortcomings before real patient data are handled.
- Formal IT and legal review: In parallel with the training, the competent IT officers and lawyers from the Unidad Jurídica are invited to verify that the system and procedures fully meet national requirements. The following regulations are the core ones the system is designed to comply with:

Regulation	Requirements in brief	How NUR Salud addresses it
NOM-004-SSA3-2012 (Expediente clínico)	Traceability, responsible physician, change control, no unauthorised deletion.	Append-only change history; signed addenda; responsible physician.
NOM-024-SSA3-2012 (Sistemas de información)	Secure authentication, role-based permissions, encryption, interoperability.	Role-based access restricted by care relationship; passkeys (device-local biometrics).
Data protection (LFPDPPP 2025 / Sujetos obligados)	Sensitive health data, purpose limitation, consent.	Data minimisation, encryption, masking in statistics mode; no sharing with third parties.
Archiving and digitisation rules	No loss of information; original records are preserved.	In-memory scanning; physician reviews and approves before archiving.
Ley General de Salud & responsibility	Provider's responsibility for medical quality and confidentiality.	Salud retains full clinical responsibility; the foundation contributes tools and funding.

- CURP linkage and mandatory physician sign-off: At the end of phase 2, the previously scanned paper records are linked to the patient's unique identity number (CURP – Clave Única de Registro de Población).
- Medical safety lock: Before each doctor's visit, the responsible physician reviews the scanned documents. Only after the physician has checked and digitally signed them are they activated in the patient's current record. No scanned information becomes clinically valid without prior review and sign-off by the responsible physician.
- Phase-by-phase agreement documents: For each phase, a specific supporting document/agreement annex, which we have already prepared, is drawn up so that the work can get under way in an orderly and transparent manner, step by step.

Phase 3 – Extension to other clinics

Once the pilot project in Corralejo de Arriba has been evaluated and approved by the competent authorities, the same proven structure and records system can be offered to and connected for other UMAPS clinics within Jurisdicción Sanitaria II that wish to join.

3. Separate parallel project: Dental care pilot at UMAPS Corralejo

The dental care pilot is a separate, parallel project and is not part of the three-phase plan above. It will be carried out according to the attached decision document “Establishment of preventive dental care at UMAPS Corralejo de Arriba” (20 October 2026), with its own planning, schedule, budget and approvals (see Annex B).

4. Continuous contact and adaptation to reality

For the pilot project to succeed quickly and without unnecessary obstacles, we look forward to close and continuous contact with management over the coming 2–3 months.

We would like to see the administrative documents, forms and record templates used in daily work today, so that the system's fields and procedures can be tailored exactly to the clinic's actual clinical reality.

5. Digital presentation and written archive material

For a more in-depth and comprehensive review of the project, its background and technical basis, we refer to the foundation's archive:

Web address: https://sufiservicesweden.com/arkiv

- Films under Arkiv (Archive): The first two films on the page provide an overall introduction and present the general information, vision and practical conditions of the whole project.

- Written documentation: Further down the same web page there is detailed written information, technical descriptions and legal references that complement this letter.

6. Annexes

- Annex A: Detailed inventory and specification of ergonomic and IT equipment for UMAPS Corralejo (height-adjustable desks, ergonomic chairs, mini computers, monitors, scanner with roller kit, printer, barcode/QR readers and staff equipment).
- Annex B: Decision document – Establishment of preventive dental care at UMAPS Corralejo de Arriba (separate parallel project).

For Sufi Service Sweden:	Received and approved:	
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