eHealth for Health
Designing services for Healthy citizens

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Outline

- From ICT to services for citizens
- Specificity of the Health domain
- Role of the public authorities
- Challenges & EU Cooperation
- Importance of eHR modelling
- Common working model
- From strategies to services : LSPs
- Legal framework
- Collaborative evolving model
- EU Governance : objectives & shared priorities

e* services

All e-services together comprise « integrated ICT supported services » to citizen(s) (collective, individual)

e-Health :   Service (?)

  contributing to cure, care, to well-being

  for people in the role of:

  Patient, relatives, HCP, industry, payer, public authority, citizen

  Everytime, everywhere,...?

ICTs : positive Key expectations !!

- Facilitate access, continuity of HC (mobility)
- Improving Q of care, allowing real HC equity
- Enhancing coordination, continuity of care security & safety
- Facilitating collaboration between HCP, within/between HCPO
- Improving homecare & adapted delivery services at PoC
- Organising mutualisation & intern. standards usage
- Facilitating research, L S experimentations & deploymt
- Decreasing the number of doubloning exam.
- <u>Mastering costs through innovative model(s)</u>

Healthcare

A complex socio-technical specialised
System of systems

where

'goods' are alive and unpredictable

Reforming the H system:a necessity

- Demographic changes : ageing population
- increased prevalence of chronic diseases
- citizen expectations for high Q HC
- increasing costs of research, equipments, examinations, treatment
- quicker pandemia expansion
- lack of staff & shortage of HP
- mobility of citizens, patients, HCP, workers
- mastering costs : crisis & 'business' model

Role of the public authorities

- Co-Organise the concertation between actors

- Propose a vision reflecting the very diverse citizens demands or needs

- Co-design a framework in order to
protect (public) goods and promote (public) health

- Sustain the HC system
  - Co-ordonnate the necessary policies, instruments & incentives to help the design/development/deployment/usage/adoption of adequate affordable scalable evolving« solutions »

FR-EU co-operation : Health in the EU Treaty

- HEALTH is a national prerogative
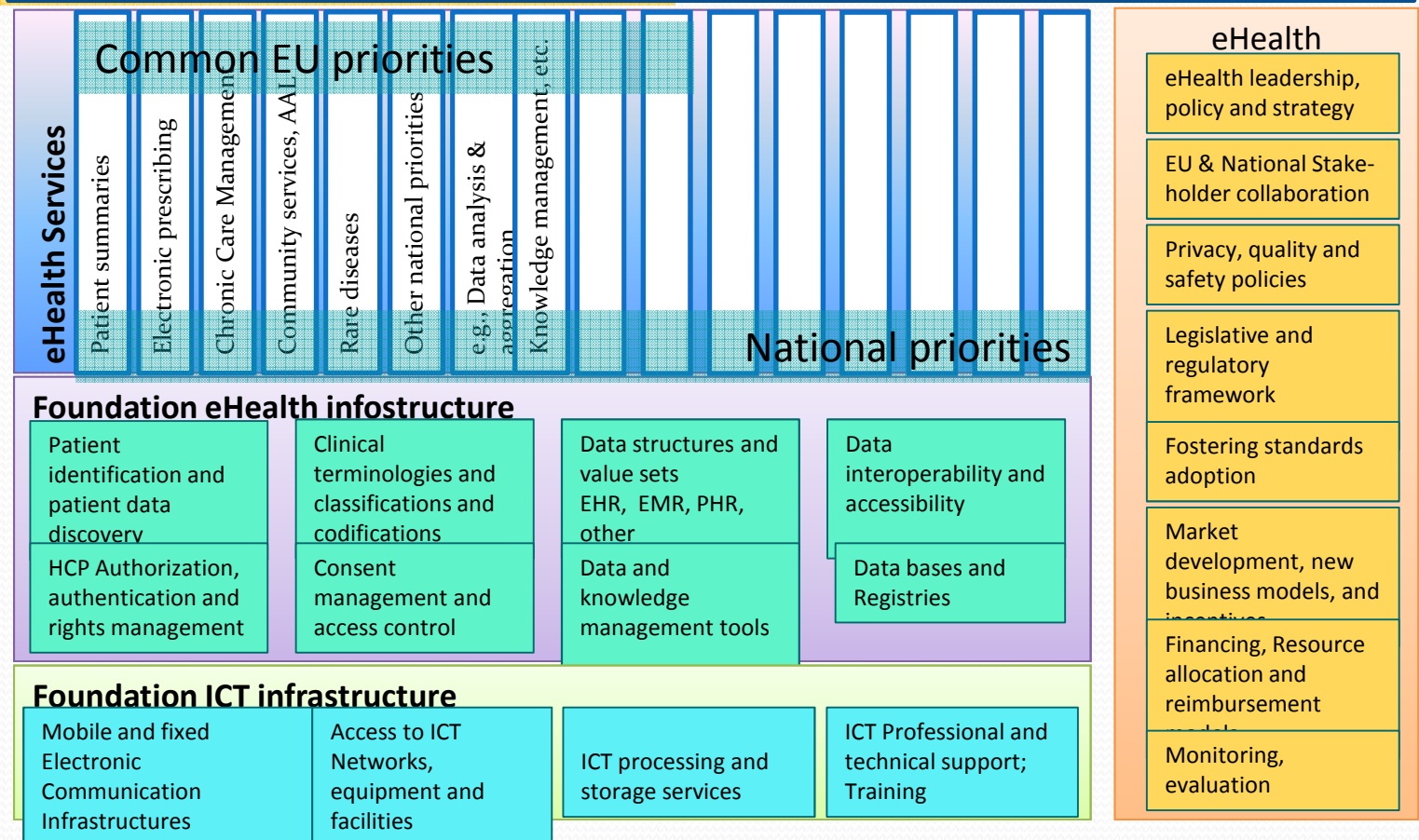 - subsidiarity is key
  - but challenges are the same in each M.S.

- what could be done at EU level :

  - a volontarist collaboration between countries
  - supported by the European Commission
  - confirmed by the « eHAP » & « mobility » Directive
  - design through a dedicated organisation
  - declined on pragmatic priorities

eHR Modelling: an input for collaboration (2007)
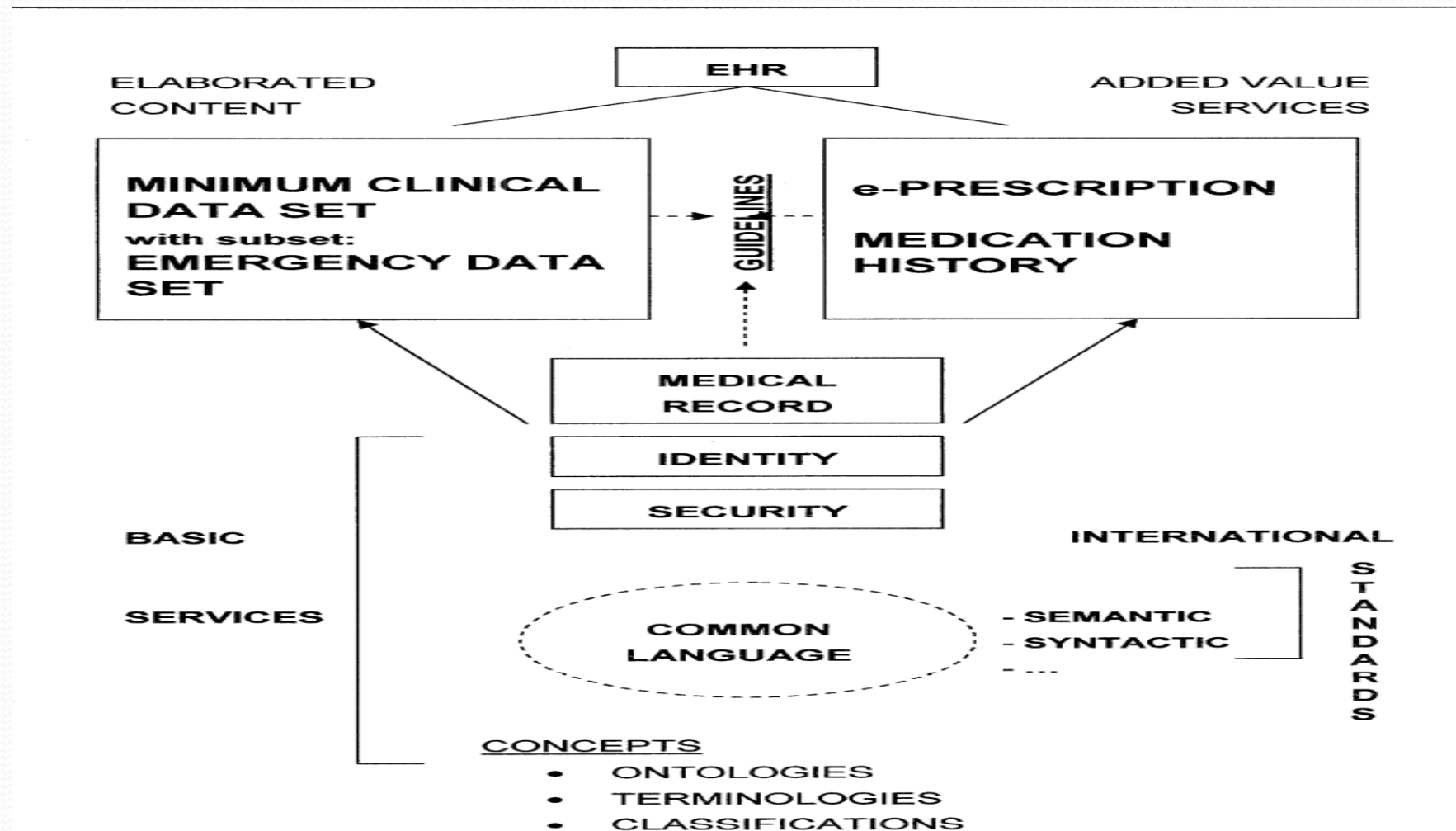
Adoption of a common working model

Sustainable Healthcare Sharing Information and Knowledge for Better Health

eHealth Services

Common EU priorities

- Patient summaries
- Electronic prescribing
- Chronic Care Management
- Community services, AAL
- Rare diseases
- Other national priorities
- e.g., Data analysis & aggregation
- Knowledge management, etc.

National priorities

Foundation eHealth infostructure

Patient identification and patient data discovery	Clinical terminologies and classifications and codifications	Data structures and value sets EHR, EMR, PHR, other	Data interoperability and accessibility
HCP Authorization, authentication and rights management	Consent management and access control	Data and knowledge management tools	Data bases and Registries

Foundation ICT infrastructure

Mobile and fixed Electronic Communication Infrastructures	Access to ICT Networks, equipment and facilities	ICT processing and storage services	ICT Professional and technical support; Training

eHealth

- eHealth leadership, policy and strategy
- EU & National Stake-holder collaboration
- Privacy, quality and safety policies
- Legislative and regulatory framework
- Fostering standards adoption
- Market development, new business models, and incentives
- Financing, Resource allocation and reimbursement models
- Monitoring, evaluation

Provide concrete cross border services that ensure safe, secure and efficient medical treatment for citizens when travelling across Europe

- Focus on services close to the patient:
  - Patient Summary for EU Citizens
    - Occasional Visit
    - Regular Visit
  - ePrescribing for EU Citizens
    - Medication ePrescription
    - Medication eDispensation

- Build on existing National eHealth Projects/Strategy and use experiences and knowledge from all Member States

- Europe-USA cooperation

2002-2011: a new era in legal and policy framework for EU Cooperation on eHealth

- <u>Communication</u> on Quality critera for a web site
- Communication on the eHAP 2004 and 2012-2020
- <u>Recommendation</u> on cross-border interoperability of electronic health record systems
- <u>Communication</u> on telemedicine for the benefit of patients, healthcare systems and society
- eHealth <u>Standardisation</u> DIR standardisation MSP

- EU Council conclusion on safe and efficient healthcare through eHealth – December 2009
- <u>Directive</u> on patients' rights in cross-border healthcare –March 2011

- Data Protection 'package'; DIR e-ID & e-SIGNature

Collaborative evolving process

Political priorities

Stakeholder priorities
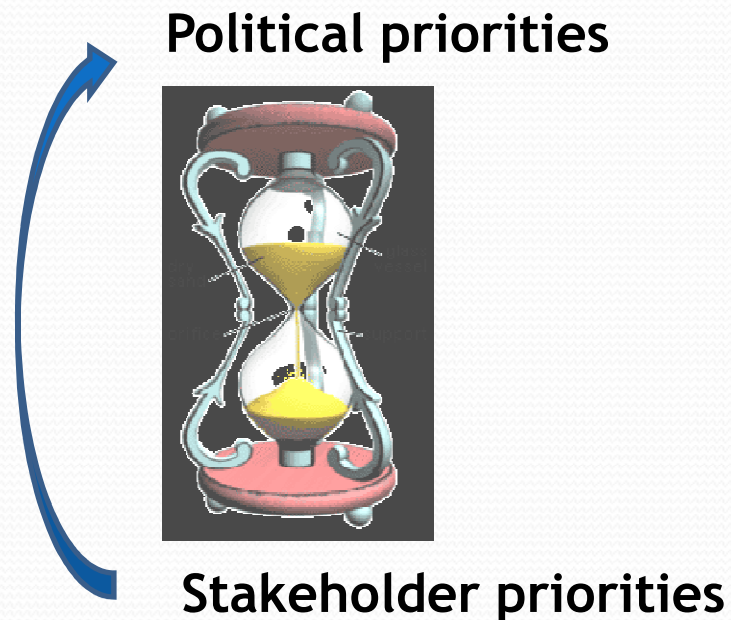
Next stop BX, Nov 2013

Agreement and validation of the MWP priority + proposals by the MoH

Reaching agreements through continuous bench-learning loop across concerned actors
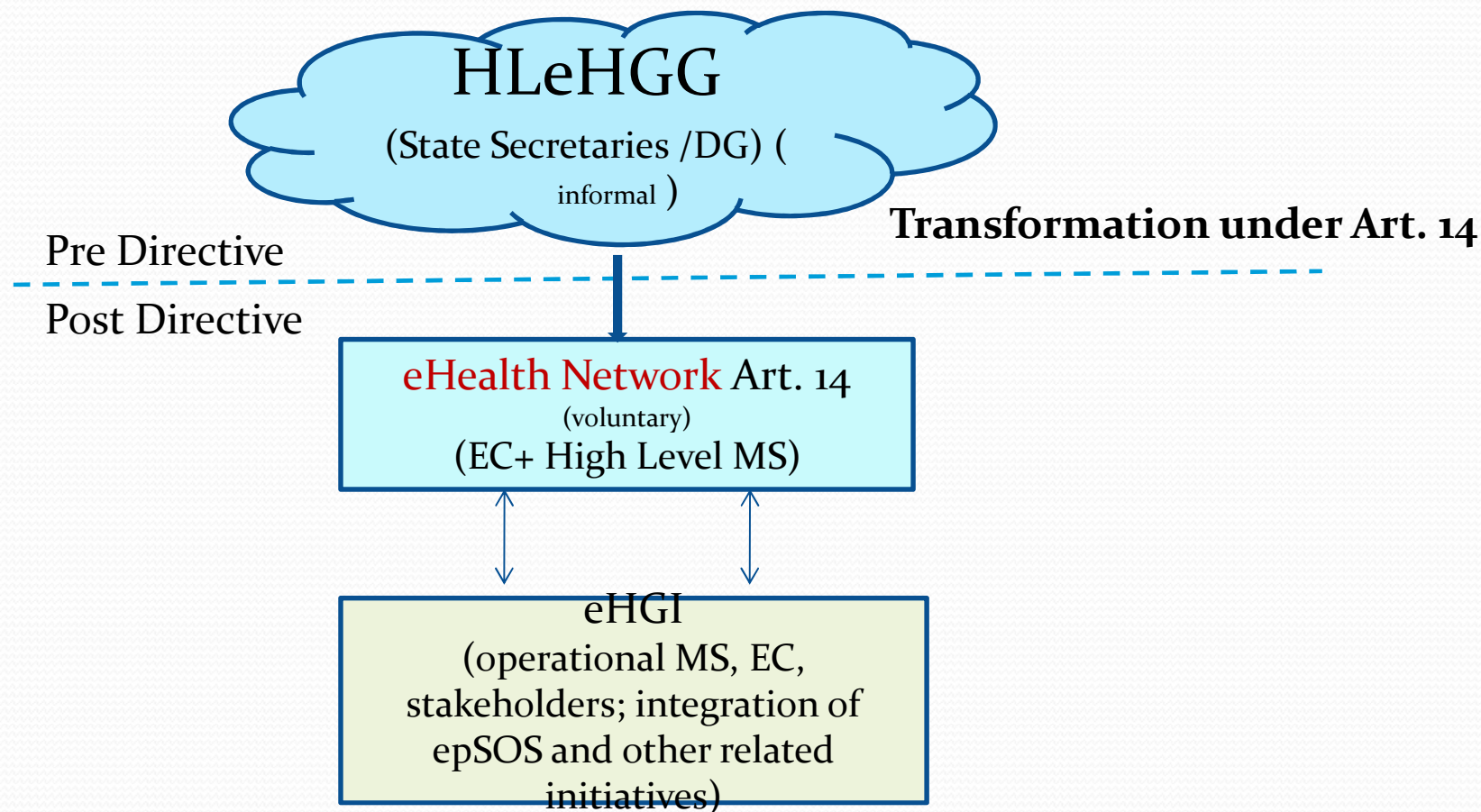
[European] eHealth **Governance** levels

- *Policy level*: to set out **higher level political objectives, define common priorities** and policy measures

- *Strategic level*: **to agree on concrete strategies** for developing and implementing integrated, value adding eHealth services
Establishment and maintenance of an **open platform for multi-stakeholder trusted dialogue**

- *Operational level*: deeper focus in areas such as ethics, security policies and **services**, **EU infostructure**, re-engineering of the **standardisation process**, maintaining links to national stakeholder groups, etc.

Directive on patients rights in cross border Healthcare: eHealth article (14)

1. The Union shall support and <u>facilitate cooperation and the exchange of information among Member States working within a voluntary network connecting national authorities responsible for eHealth</u> designated by the Member States.

2. The objectives of the eHealth network shall be to:

- *(a)   work towards <u>delivering</u> sustainable economic and social benefits of <u>European eHealth systems and services and interoperable applications</u>, with a view to achieving a high level of trust and security, enhancing continuity of care and ensuring access to safe and quality healthcare;*

- *(b)   draw up guidelines on ▍ :*

(i) a non-exhaustive list of data that are to be included in <u>patients' summaries</u> and that can be shared between health professionals to enable continuity of care and patient safety across borders, and

(ii)   effective methods for enabling the <u>use of medical information for public health and research;</u>

- *(c)   support Member States in <u>developing</u> common identification and authentication measures to facilitate transferability of data in cross-border healthcare.*

Network Art. 14

HLeHGG

(State Secretaries /DG) (informal)

Transformation under Art. 14

Pre Directive

Post Directive

eHealth Network Art. 14
(voluntary)
(EC+ High Level MS)

eHGI
(operational MS, EC,
stakeholders; integration of
epSOS and other related
initiatives)

- HLeHGG = High Level eHealth Governance Group
- eHGI = eHealth Governance Initiative

Budapest

eHGI Main objectives

- Provide to MS a consolidated approach and a strong political committment to governance at three levels :

  (1) Policy (2) Strategy and (3) Operational

- Provide to the MS, the EC and other relevant stakeholders a platform and "a think tank" for current and emerging challenges which could lead to a strong consolidated Roadmap of concrete actions and the description of potential future pilot projects and partnerships

- Provide to the MS, the EC, the Competence Centres, the IT-Industry and to other relevant stakeholders

  a European eHealth Interoperability Framework

- Provide to the EC, EPSCO Council and to other relevant stakeholders targeted support for activities requiring broad convergence across Europe, such as future LSP eHealth projects and common interoperable service solutions at MS level (ex: epSOS)

DECISION MAKING

PRODUCTION

C
E
F

E-
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N
S

eHealth Network of MS
Art.14 Directive on Patients 'Rights
(permanent)

eHealth Governance Initiative
(2011-2014)

CALLIOPE Network
(Interoperability Roadmap)

EPSOS project
(Patient summary)

STORK project
(e Identification)

Semantic Health Net

EIF study on
Interoperability

Joint Action on
Patients
Registries

Potential success factors

- Interrelated & complementary HC strategy
  - Overall approach C, P, Family, HCP, HCPO, SociaI dimension, SDO,I..
- Increase Legal certainty
  - design legal framework aligned with new ICTs capabilities
- Key human leadership :
  - encourage networking, mutualisation, re-usability,
  - presence of grass root initiatives, dedicated managers, physicians leaders, engaged empowered patients & citizens
- Design a basket of incentives
  - appropriate allocation of resources based on mix of stategies : compensation rewarding Q + Perf (not « volume »)

- Capability to design & deploy new flexible innovative sustainable models ……with adequate resources ☺

Designing services for Healthy citizens

- Think globally

- Act locally

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France 2013- 2030

- 2013 :
  - A national strategy for health

- France Innovation 2030

  - 7 ambitions

  - Individualised medicine

Prequisites for eID for PS

Legal barriers/acceptance: new framework

Trust and Acceptability

Stakeholders

Governance

Stand.Coo.Gr

Sustainability

eID Schemes

Signature

Patient eID

Author.

Patient Summary

HP role

Consent

HPs Reg.

HP eID

Tech. Interop.

Standards, CEF

Architecture (NCPs)