

Towards enhanced eHealth governance:

What next for cross-border healthcare and further deployment of sustainable ICT applied to health?

12 October 2010,
European Parliament, Brussels

Executive summary

MEP Parvanova hosted on 12 October 2010 in the European Parliament a high level event intitled “Towards enhanced eHealth governance: what next for cross border healthcare and further deployment of sustainable ICT applied to health?”. It was organised by hanover and ACCA.

Timely matching the debates in the European Parliament and the Council on the Commission’s proposal for a directive on the application of patients’ rights in cross-border healthcare, the aim of this half-day event was to exchange views and propose solutions regarding the challenges and opportunities towards more efficient and sustainable healthcare systems in Europe, for the benefits of patients, healthcare providers and the society as a whole.

It brought together over 130 participants including high level representatives of the EU Commission, the European Parliament and the EU Council, academics, as well as other eHealth stakeholders such as patients, doctors, dentists, organisations, NGOs and businesses, etc.

- The first part took the form of a case study session entitled “**How can ICT improve the sustainable development of the health sector? From investment to impact - learning from best practices**”. It brought together Dean Westcott, ACCA Deputy President and Dr Simonetta Scalvini, Responsabile del Servizio di Telemedicina Responsabile Qualità d’Istituto, IRCCS Fondazione Salvatore Maugeri on Telecardiology in Italy, Nicola Bedlington, Director, European Patient Forum, Petra Wilson, Senior Director of the European Health and Care Team, Cisco’s Internet Business Solutions Group and Dr Pierre Espinoza, Head of the Telegeria project at Georges Pompidou European Hospital in Paris
- It was followed by a panel debate on “Future developments / what next?” moderated by Christian Hierholzer, Managing Director, hanover Communications with impulse statements from Pascal Garel, CEO, HOPE, Monika Kosinska, Secretary General, EPHA, Anna Lefevre Skjöldebrand, Chief Executive, Swedish Medtech & Chair of Eucomed’s eHealth Taskforce, Uwe Buddrus, Managing Director, HIMSS Analytics Europe
- Session 2 was dedicated to “**The future policy options in healthcare for the European Union**”. Keynote speakers included John Dalli, European Commissioner for Health and Consumer Policy, Neelie Kroes (video message), European Commissioner for Digital Agenda, Mr Florin Lupescu, Director of ITC addressing Societal Challenges, DG INFSO and Paola Testori-Coggi, Director General of DG SANCO for her concluding remarks.
- They were joined by Dr Luc Maes, Program Manager eHealth, the Belgium eHealth platform and Daniel Forslund, Deputy Director, Health Care Division of the Swedish Ministry of Health and Social

Affairs. The panel debate was moderated by Fabian Zuleeg, Chief Economist at the EPC (European Policy Center)

Main conclusions

- There was a general agreement on the fact that eHealth should be seen as an opportunity rather than a threat, with a huge potential.
- As many speakers said, the objective is definitely not to replace doctors by a computer or to encourage cross border health tourism, but the exact opposite. A number of barriers must be overcome, including the lack of interoperability between IT systems used by health services. In addition, data protection concerns, sharing test results and medical imaging between hospitals can prove challenging, and language and terminology differences make sending information between member states problematic.
- Some participants however pointed out that hidden costs – such as training staff – could lower savings made by cutting down on duplication and travelling.
- Getting doctors and nursing staff on board will be the key factor of success, if combined with improving health literacy and earning patient trust in new systems. Education and awareness raising, training, creation of infrastructures, interoperability and standards, change of mentality among stakeholder groups to embrace eHealth and more funding for innovation are crucial

MEP Parvanova, the host of the event stressed that *“Time has come for political consensus -in a process involving not only the EU Commission, the European Parliament and the member states but also all stakeholders, namely the users- to allow the eHealth tool to receive a political, legal and practical endorsement . eHealth has also a great technological and economic potential for Europe and should be seen as an opportunity to be supported and promoted”*.

“The cross-border healthcare directive is not a panacea for Europe's health problems but e-health can boost access for patients in need of specialist care. We need to make clear to Member States that it is not about interfering with the internal organisation of their healthcare systems, but making sure they have all the tools to ensure concrete and safe public health outcomes for all patients in the EU”, she added.

Commissioner for Health and Consumer Policy John Dalli made it clear that *“This is not science fiction. eHealth technology is there, waiting to be used. I believe the time has come to step up one gear from talking about eHealth to using eHealth. A key stumbling block that needs to be addressed at European level is lack of inter-operability and compatibility of IT systems across Europe.”*

Commissioner Neelie Kroes said that *“eHealth is one of the areas with the most obvious potential for technologies to improve our lives”*.

Dean Westcott, ACCA Deputy President said *“eHealth -and the evaluation of its economic performance -has been a core theme of the ACCA's health policy since 2001. Throughout the various reports published with our partners and the collaboration of the European Commission, we have demonstrated that timely and managed ICT investments applied across the healthcare sector can result in very tangible – and measurable – qualitative and quantitative benefits, including not only clinical improvements but also significant cost savings and return in investment, accruing not only to the professional healthcare community but to society as a*

whole. It is now time to boost interoperability and better cooperation among members states in the field of cross border healthcare”.

Main highlights of the discussions

Highlights of the case study session with Dean Westcott, ACCA Deputy President and Dr Simonetta Scalvini, Responsabile del Servizio di Telemedicina Responsabile Qualità d’Istituto, IRCCS Fondazione Salvatore Maugeri on Telecardiology in Italy, Nicola Bedlington, Director, European Patient Forum, Petra Wilson, Senior Director of the European Health and Care Team, Cisco’s Internet Business Solutions Group and Dr Pierre Espinoza, Head of the Telegeria project at Georges Pompidou European Hospital in Paris:

Dean Westcott and Dr Simonetta Scalvini presented the findings of a telecardiology study in Lombardy

- Health systems are under pressure from ageing population, rising costs of new technology and medicines, heightened patient expectations and global economic challenges.
- The telecardiology project allowed heart problems to be detected early by collecting data from patients in the community and sending it for analysis by hospital-based experts. It provided firm evidence of a clinical benefit of telemedicine applied to cardiology and set out a roadmap for more focused use of healthcare resources and can help reduce inpatient and outpatient hospital visits. For GP patients, it meant earlier identification of problems which potentially helps avoid costs in the long run.
- There is evidence that telemedicine can reduce mortality while increasing quality and cutting costs
- In order to implement eHealth, optimal business models and work on patient’s education need to be developed to ensure schemes are cost effective.
- Getting doctors and nursing staff changing mentality will be the key factor of success, as well as enough investment in training them

Nicola Bedlington presented the existing and prospective needs for eHealth connectivity to the patient, focusing on the aspect of patient involvement as an integral part of eHealth success

- Setting the right framework for health technology is enormously important. The cross-border healthcare directive will become the bedrock for eHealth. She was pleased that MEPs had reinforced the importance of interoperability after member states had watered down this element.
- Engaging patients further and persuading the public of the real benefits of eHealth can only be achieved through communicating the key benefits with more clarity, overcoming obstacles of semantics and privacy and security. Health literacy is also an issue.

Petra Wilson and Dr Pierre Espinoza explained the findings from the CISCO HealthPresence projects in Paris

- European reference centres can be developed using video consultation.
- The six-month pilot project in Paris linked a specialist geriatric service with a large teaching hospital using technology that allowed the hospitals to share images and have live video

interaction with patients. It meant specialists could review ECG results remotely while a telemedicine assistant helped the patient to interact with the technology.

- They noted that cross border health care brought significant improvement in quality of care, built trust amongst clinicians and created a new medical practice with new roles such as telemedicine assistant - particularly important for geriatric patients with dementia, since they are dealing with a person rather than just being asked to talk to a camera-and enhanced transfer of knowledge and partnerships from experts in different fields.
- The “new way” of doing healthcare in Europe include numerous benefits such as improvement in speed caring for patients, the ability for experts to make recommendations to local doctors, increased mobility to reach out to patients, the reduction in patient travel to hospitals (from 5hours to 30mn), hence increased patient satisfaction.

The case study session was followed by a panel debate on “**Future developments / what next?**” moderated by Christian Hierholzer, Managing Director, hanover Brussels, with impulse statements from Pascal Garel, CEO, HOPE, Monika Kosinska, Secretary General, EPHA, Anna Lefevre Skjöldebrand, Chief Executive, Swedish Medtech & Chair of Eucomed’s eHealth Taskforce, Uwe Buddrus, Managing Director, HIMSS Analytics Europe.

Christian Hierholzer, hanover

- Everyone considers that we are lagging behind in the deployment of ICT in health care, but at the same time there is the argument that slow deployment allows us to learn about and to better understand the possible risks and concerns linked to eHealth.
- The financial crisis is widely considered as obstacle to eHealth deployment, but could also be an opportunity for eHealth as it brings the long-term return of investment in eHealth into sharper focus

Pascal Garel, HOPE

- ICT could be a tool to facilitate health and social care’s fragmentation.
- Current challenges include fighting scepticism. With some medical centres still using paper records it is clear that achieving a system involving high level technology will be difficult to introduce.
- Importance that stakeholders are part of this process, all parties need to cooperate and take ownership of development, a sentiment echoed by all panellists, perceived as essential to implementation of eHealth.

Monika Kosinska, EPHA

- Currently coordination is severely lacking within hospitals and this needs to be addressed before contemplating cross board cooperation.
- She questioned what were the benefits to patients? Why users were not demanding the service? What was the hidden cost of the scheme? How it is sustainable given the current financial crisis and the impact of an ageing population? How can it enable us to stay healthier for longer? These questions need to be addressed before continuing further.
- Whilst clearly perceived as a tool which will develop health services, ICT could not be a solution alone, there was a greater need for research and patient feedback and development

needed to take place with regards to how ICT can work for prevention not just deal with secondary problems.

- Health inequalities will persist unless all patients are equipped to access eHealth services.

Anna Lefevre Skjöldebrand, Swedish Medtech & Eucomed eHealth Taskforce

- If eHealth were implemented it could create a patient centred system.
- It is not a question of whether we should do it: it is happening. It is question of how we want to address it. To take the driving seat, collaborate and communicate to implement a truly great system, or to miss an important opportunity to improve health for the whole of Europe?

Uwe Buddrus, HIMSS Analytics Europe

- Questioned the ‘ivory tower’ approach and stated that it creates difficulties for creation of best practice.
- Highlighted the importance of taking all views from the ground level up, to create sustainable practice which everyone believes in, and the need to address the business case: can it be financially viable?

Session 2 was dedicated to “**The future policy options in healthcare for the European Union**”

Keynote speakers included John Dalli, European Commissioner for Health and Consumer Policy, Neelie Kroes (video message), European Commissioner for Digital Agenda, Mr Florin Lupescu, Director of ITC addressing Societal Challenges, DG INFSO and Paola Testori-Coggi, Director General of DG SANCO for her concluding remarks.

They were joined by Dr Luc Maes, Program Manager eHealth, the Belgium eHealth platform and Daniel Forslund, Deputy Director, Health Care Division of the Swedish Ministry of Health and Social Affairs. The panel debate was moderated by Fabian Zuleeg, Chief Economist at the EPC (European Policy Center)

John Dalli, Commissioner for Health and Consumer Policy

- Outlined the commitment to put patients first: giving them best possible care, something intrinsically at the heart of EU policy.
- EHealth is the tool to deliver better care, better access, safer treatment, more comfort to patients.
- Innovation in healthcare is a priority of which eHealth solution is included – it is a means to serve patients: enabling quicker and safer ways of passing information to colleagues and spending less time dealing with red tape.
- The aim is ‘seize opportunity and co-operate to achieve better interoperability so that national systems talk to one another.’
- We need ‘legal clarity and political will and courage to work on eHealth across Europe.’ Repeated by all other key note speakers a legal framework is vital to the progression of eHealth.

Neelie Kroes, Commissioner for Digital Agenda

- 'eHealth is one of the areas with the most obvious potential for technologies to improve our lives.'
- The majority of the largest world economies have aging populations, and we need to seriously update and improve our systems in order to keep up with growing demands, (a point made by all speakers)

Florin Lupescu, DG INFSO

- Emphasised that eHealth is not a 'luxury' seconding Commissioner Dalli's point that 'eHealth is a necessity' but Europe must ensure the appropriate mechanisms and legal framework are in place. Legal uncertainty is one of the main barriers. A clear and ambitious directive on cross-border health could open the way to innovation in healthcare if it is strengthened.
- Imperative that 'technical developments service research today, for better and more effective medicine tomorrow.'

Paola Testori-Coggi, DG SANCO

- The new initiative – called innovation Europe entails a priority on health and ageing. EHealth is therefore particularly relevant and should be utilised to support and facilitate research in the medical field.

Dr Luc Maes, Belgium eHealth Platform

- Need for a well elaborated legal and ethical framework where patient rights, privacy protection and professional secrecy are at the heart of values.
- Idea of long term vision combined with quick wins, important to see fast returns on quality in care and fiscal benefits.
- Proposed using the open method of coordination to work out common conceptual framework underpinning eHealth in Europe, and allow member states to develop their own action plans in line with these agreed principles.

Daniel Forslund, Swedish Ministry of Health and Social Affairs

- Vital to share and learn from each other – move away from technicality and move eHealth into realms of political action.
- Need to engage on a deeper level with people and provide greater support to healthcare providers in training and inclusion on decisions which change the patterns of work. We cannot solve these problems one country at a time.

Fabian Zuleeg, European Policy Center (EPC)

- Look at managing demand, rather than focus on supply of eHealth
- Opportunity for greater development of a single market within the health field and it is an opportunity we must seize.
- Investment in eHealth would be enormous: therefore, much thought needs to be developed with regards to where we can get this investment from – public/private partnerships?

Closing the debate, **MEP Parvanova** said that eHealth can contribute to patient safety and innovation in the health technology sector but it needs to prove itself to be cost effective and interoperability between systems remained a huge challenge. She stressed that while there are excellent examples of best practice

in how eHealth can be applied, decision makers have to take account of the diversity of situations across Europe.

Next steps:

- Clauses in the cross-border healthcare directive covering eHealth were watered down by EU health ministers but have been strengthened by MEPs; agreement is expected by the end of the year.
- The European Parliament's public health committee is expected to vote on the amended cross-border healthcare directive on 27 October, while the vote in plenary is expected in January 2011.

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