

ICT & HEALTH

THE ROLE OF THE DIGITAL SECTOR IN MAKING THE
HEALTH & CARE NEARER TO THE USERS

May 6th 2015 · Lecce · Italy

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**Politiche, Strategie e priorità di livello
Comunitario in tema di Sanità digitale**

CRESCITA SOSTENIBILE

Investment in health is also crucial to stimulating sustainable economic development in Europe, given that the health sector constitutes 10% of the European Union's GDP and has a pivotal role in meeting key societal challenges such as an ageing society



At present, 97% of health expenses are spent upon treatment but only 3% are invested in prevention.



If the population ages.....

..... so does the workforce: between 1995 and 2000, the number of physicians under the age of 45 across Europe dropped by 20%, whilst the number aged over 45 went up by over 50%.

The health sector provides 10% of employment in the EU.



The EC projects the shortage of health professionals to reach 1 million by 2020

...therefore

Investment in health can also lead to direct employment opportunities *through targeted measures to address this projected shortfall.*

This in turn can help deliver **economic growth and improve population health outcomes.**





Investment in health

- ✓ to achieving improvement in the expenditure on the prevention of physical and mental ill-health,
- ✓ to mitigating the social and economic cost of the projected impact of the NCDs in Europe.

burgeoning research on the social determinants of health demonstrates, **tackling poor health** goes beyond efforts in which the **health sector has responsibility** to act alone.



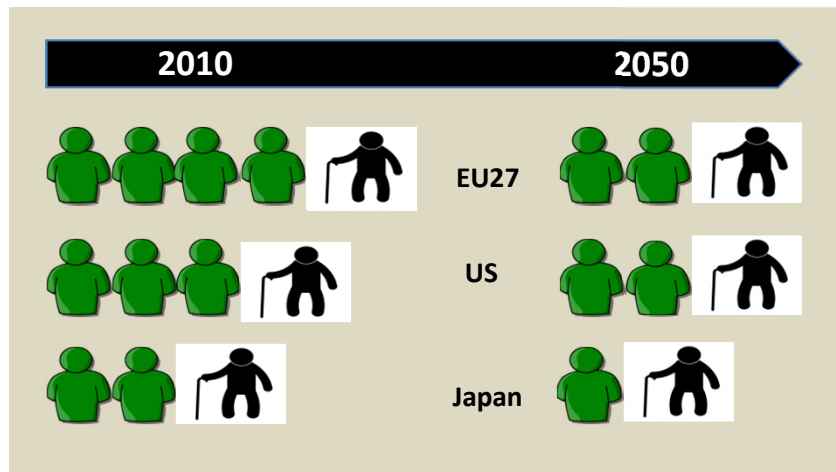
- 10% of the variation in health outcomes was due directly to medical care;
- 40% was due to behaviour;
- 15% to social circumstances.



To improve health, competent authorities must work across sectors, in a ‘whole-of-government approach’, to address the determinants where they can be changed, including: population health and health services’ performance, responsiveness, financial protection, equity and productivity (efficiency).

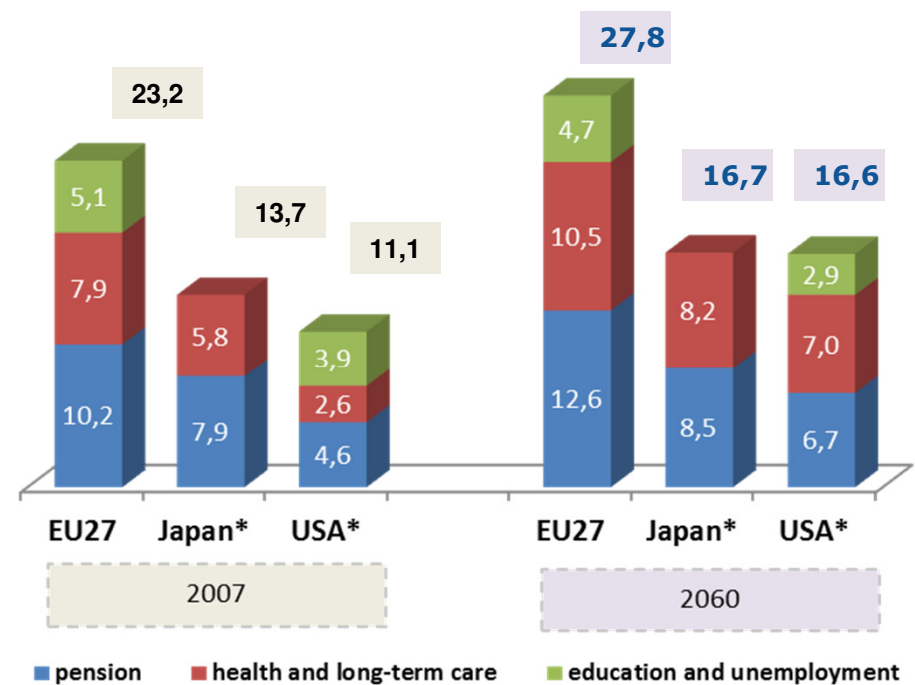
Ageing – global challenge

Age dependency ratio



Number of working age population for one older person (+65)

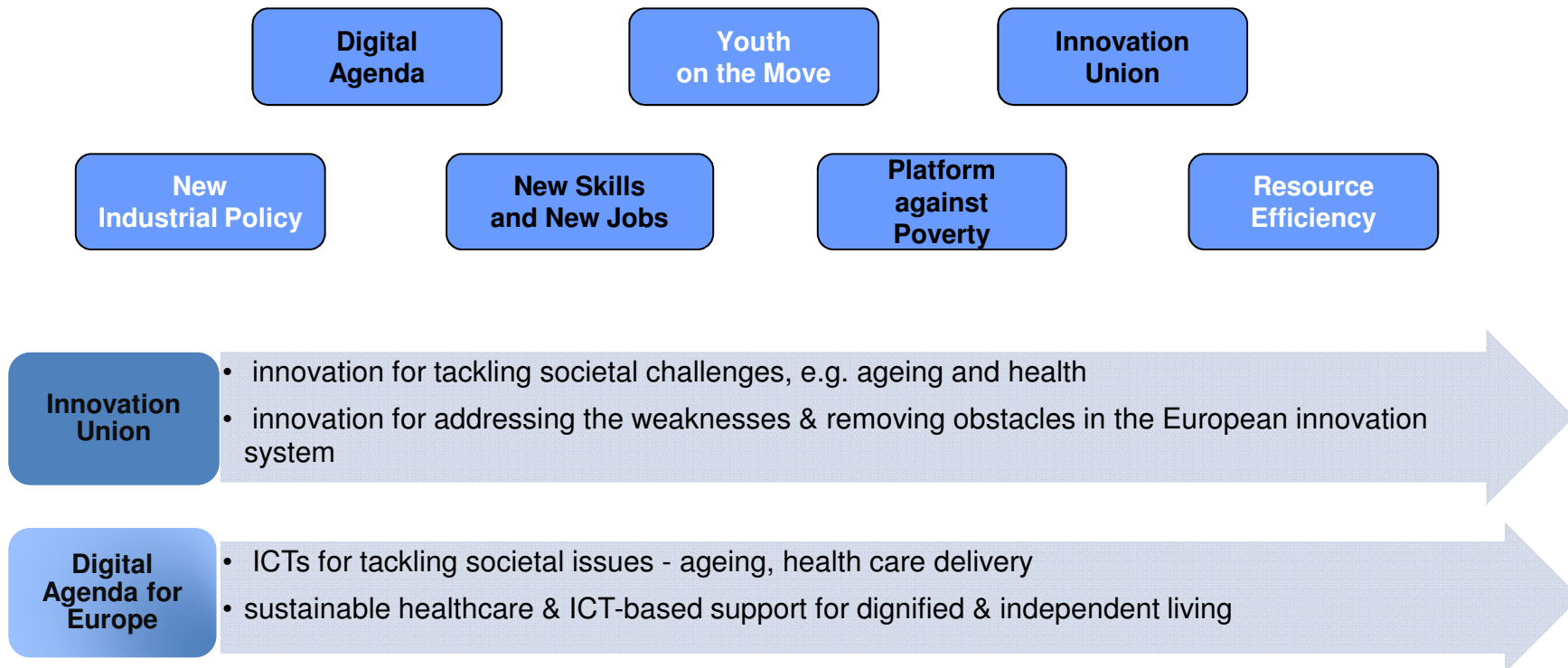
Age-related total spending in % of GDP



Source: Ageing Report 2009, OECD
*data for 2000 and 2050

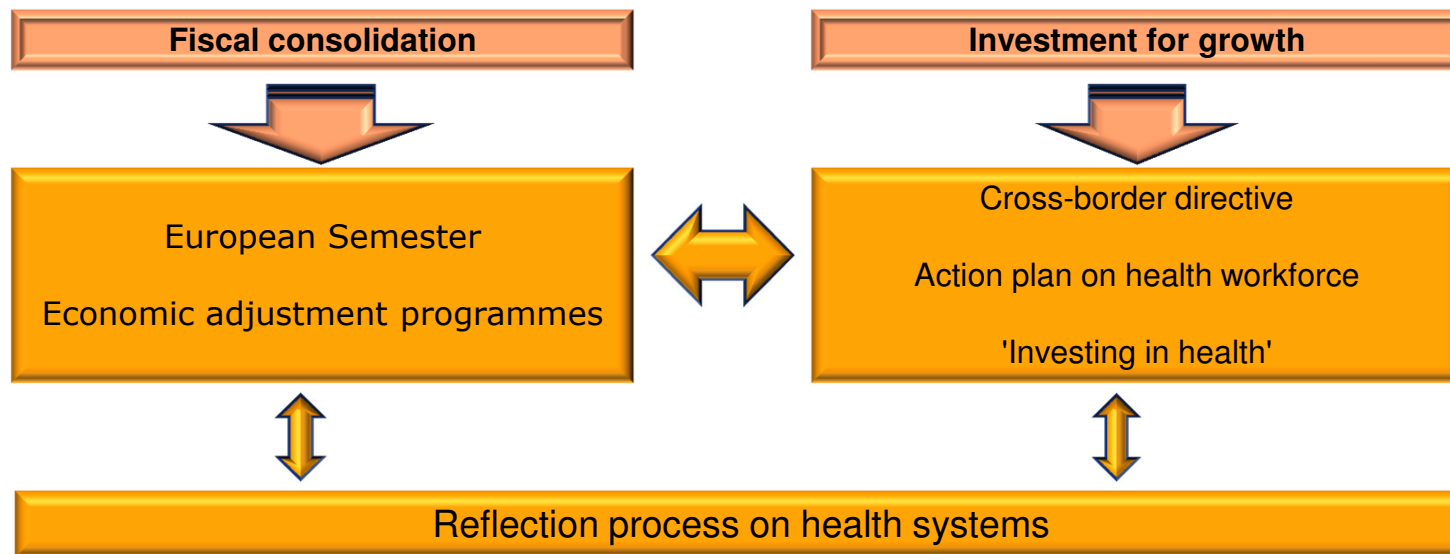
Health in Europe 2020

Europe 2020 flagships for smart, sustainable and inclusive growth



European Innovation Partnership on Active and Healthy Ageing

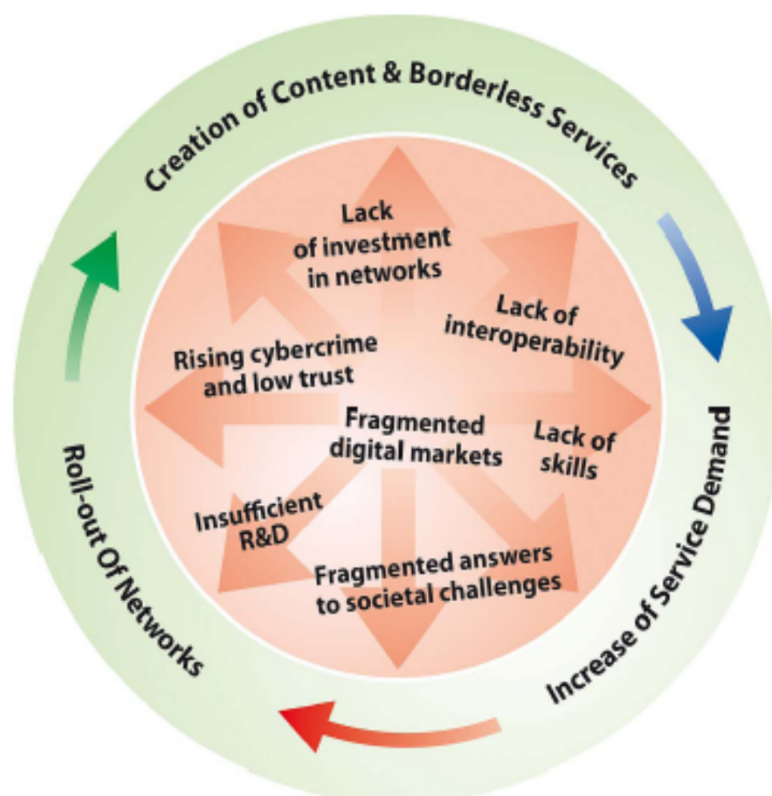
Europe 2020 & sustainability



Innovation Union – smart growth

European Innovation Partnership on Active and Healthy Ageing

Digital Agenda for Europe:



Sustainable economic and social benefits for all from a flourishing digital economy





eHealth in the DAE

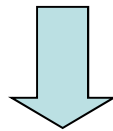
Sustainable healthcare and ICT-based support for dignified and independent living





eHealth actions in DAE

KA 13 Undertake pilot actions to equip Europeans with secure online access to their medical health data by 2015 and to achieve by 2020 widespread deployment of telemedicine services;



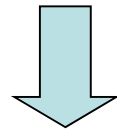
EMPOWERMENT





eHealth actions in DAE

KA14 Propose a recommendation defining a minimum common set of patient data for interoperability of patient records [...] by 2012



***CONTINUITY OF CARE +
INTEROPERABILITY***

+ Foster EU-wide standards, interoperability testing and certification of eHealth systems by 2015 through stakeholder dialogue





European Innovation Partnership on Active and Healthy Ageing

Objectives and headline target

A triple win for Europe:

Enabling EU citizens to lead healthy, active and independent lives until old age

Improving the sustainability and efficiency of social and health care systems

Developing and deploying innovative solutions, thus fostering competitiveness and market growth

Overarching goal by 2020:

Increasing the number of healthy life years (HLYs) by 2 in the EU on average

<http://ec.europa.eu/active-healthy-ageing>





Political added value of the EIP

inspire for policy action

support from the ground

identify good practices working in real life

EC: facilitator & supporter

develop policy on active & healthy ageing

align policy priorities with funding

mobilise efforts & resources

Joint Action on Chronic Diseases and Healthy Ageing (28 countries + 5 networks)

High level conferences (e-health, Gastein Forum, Conference of Partners, Frailty and Adherence Conferences)

Alignment of priorities in Horizon 2020, CIP 2013, PHP 2013 etc.

Reflection process of the MS: Towards modern, responsive and sustainable health systems

EIP-AHA EU Instruments

EIP Active and Healthy Ageing

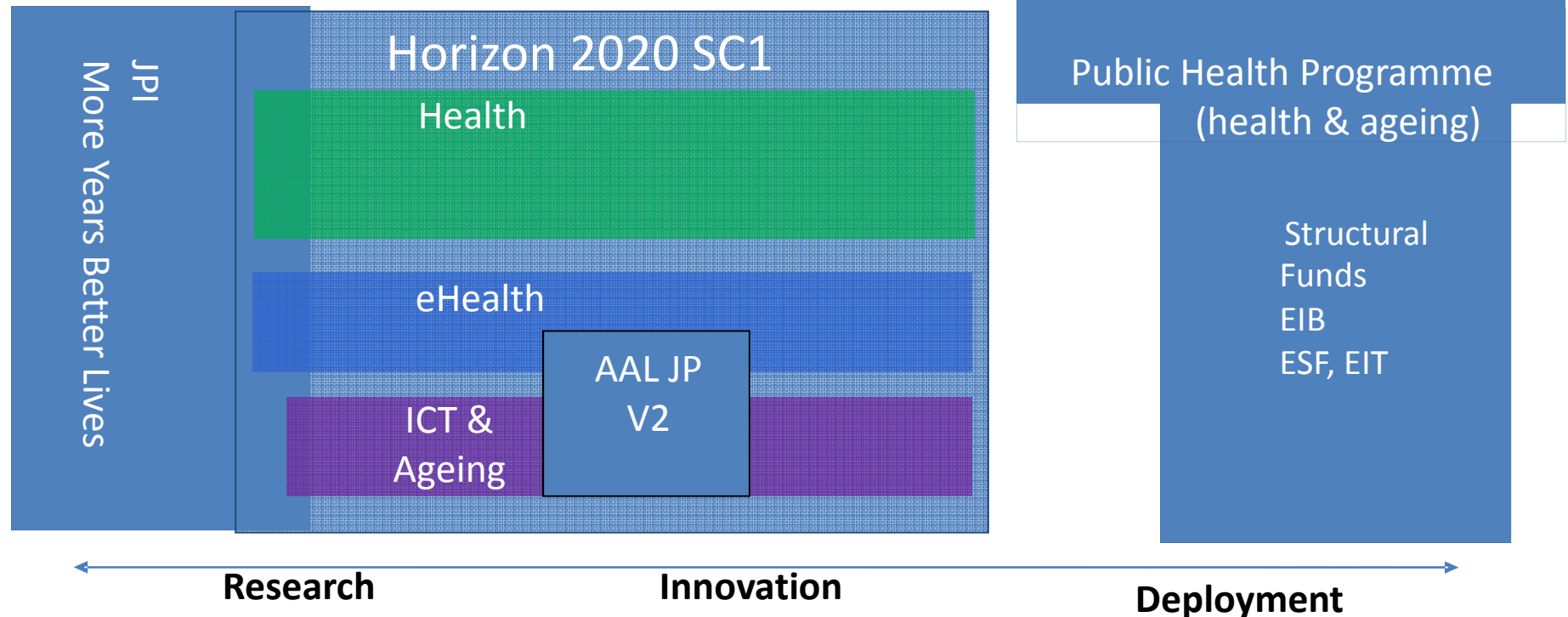
New Knowledge

Proven Ideas

New solutions

Evidence and
innovation
guidelines

Deployment support





How?

**Public and private sectors TOGETHER
to work on INNOVATIVE solutions**



The Multiannual Financial Framework 2014-2020: European Council conclusions, 8 February 2013

Key challenge: stabilise the financial and economic system while taking measures to create economic opportunities

1. Smart & inclusive growth (€451 billion)



2. Sustainable growth, natural resources (€373 billion)

3. Security and citizenship (€16 billion)

4. Global Europe (€58 billion)

5. Administration (€61.6 billion)





Nuova programmazione EU 2014-2020

2 ambiti





Unione Europea



Regione Puglia

Obiettivi

Realizzare gli obiettivi della strategia Europa 2020 per una crescita intelligente, sostenibile e inclusiva

Concentrazione sui risultati

Ottimizzare l'incidenza dei finanziamenti dell'UE

Nuova programmazione EU 2014-2020

Strategia per la specializzazione intelligente (**SSS**)
Funzione di **raccordo** tra Politica di coesione e programmi a gestione diretta

Esempio: **ricerca e innovazione**

La Politica di Coesione supporterà mediante le **SSS** i percorsi verso l'eccellenza a livello regionale che potranno consolidarsi e affermarsi a livello internazionale in Horizon 2020



Le **SSS** “importano” nei P.O. regionali le priorità dei programmi diretti aumentando le sinergie tra Fondi e le capacità di accesso ai fondi diretti da parte dei soggetti regionali



GENERATION WEB 2.0: USING NEW TECHNOLOGIES IN THE PUBLIC SECTOR IN EUROPE

With the financial support of the European Commission



Moving to ehealth



Healthcare

eHealth



Telemedicine

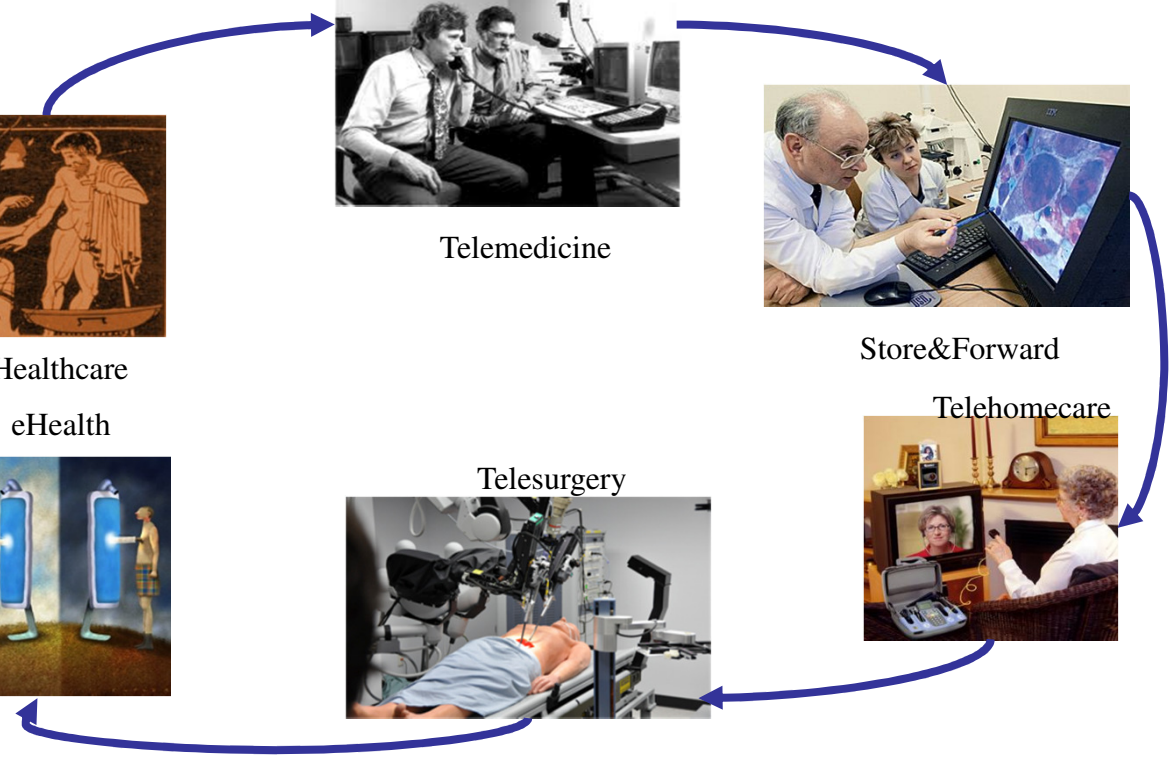


Store&Forward

Telehomecare



Telesurgery



GENERATION WEB 2.0: USING NEW TECHNOLOGIES IN THE PUBLIC SECTOR IN EUROPE

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E-health Plan in Europe 2012-2020



CHALLENGES:

- to improve chronic disease and multimorbidity
- to increase sustainability and efficiency of health systems by unlocking innovation, enhancing patient/citizen-centric care and citizen empowerment and encouraging organisational changes;
- to foster cross-border healthcare, health security, solidarity, universality and equity;
- to improve legal and market conditions for developing eHealth products and services

GENERATION WEB 2.0: USING NEW TECHNOLOGIES IN THE PUBLIC SECTOR IN EUROPE

With the financial support of
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Do you need only technical innovation?

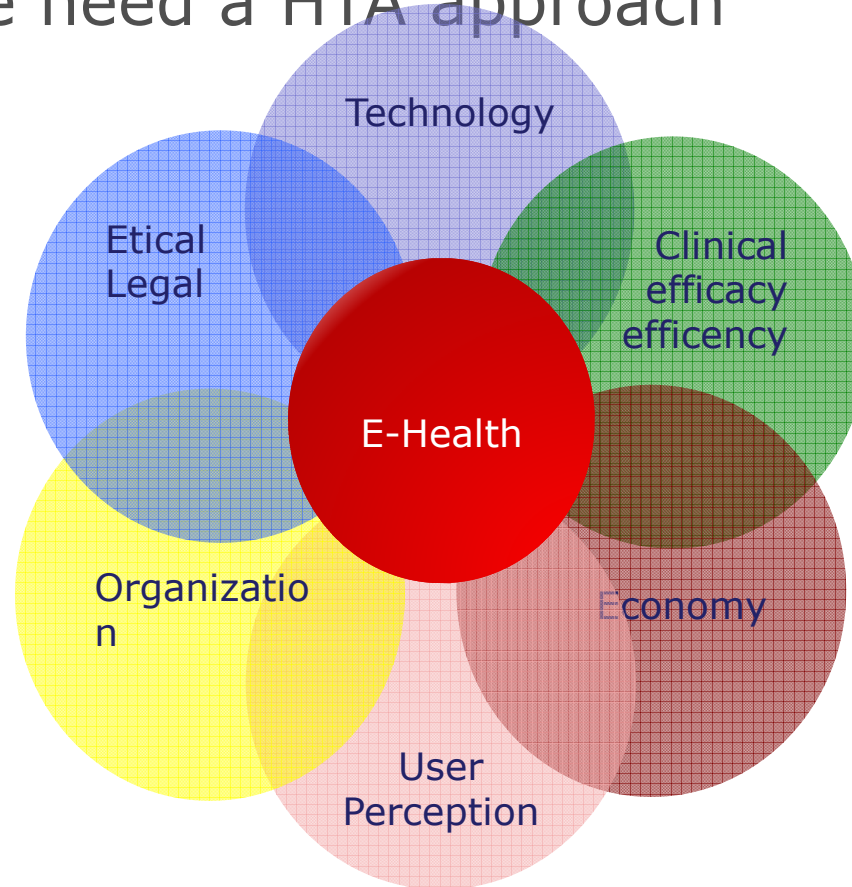


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We need a HTA approach

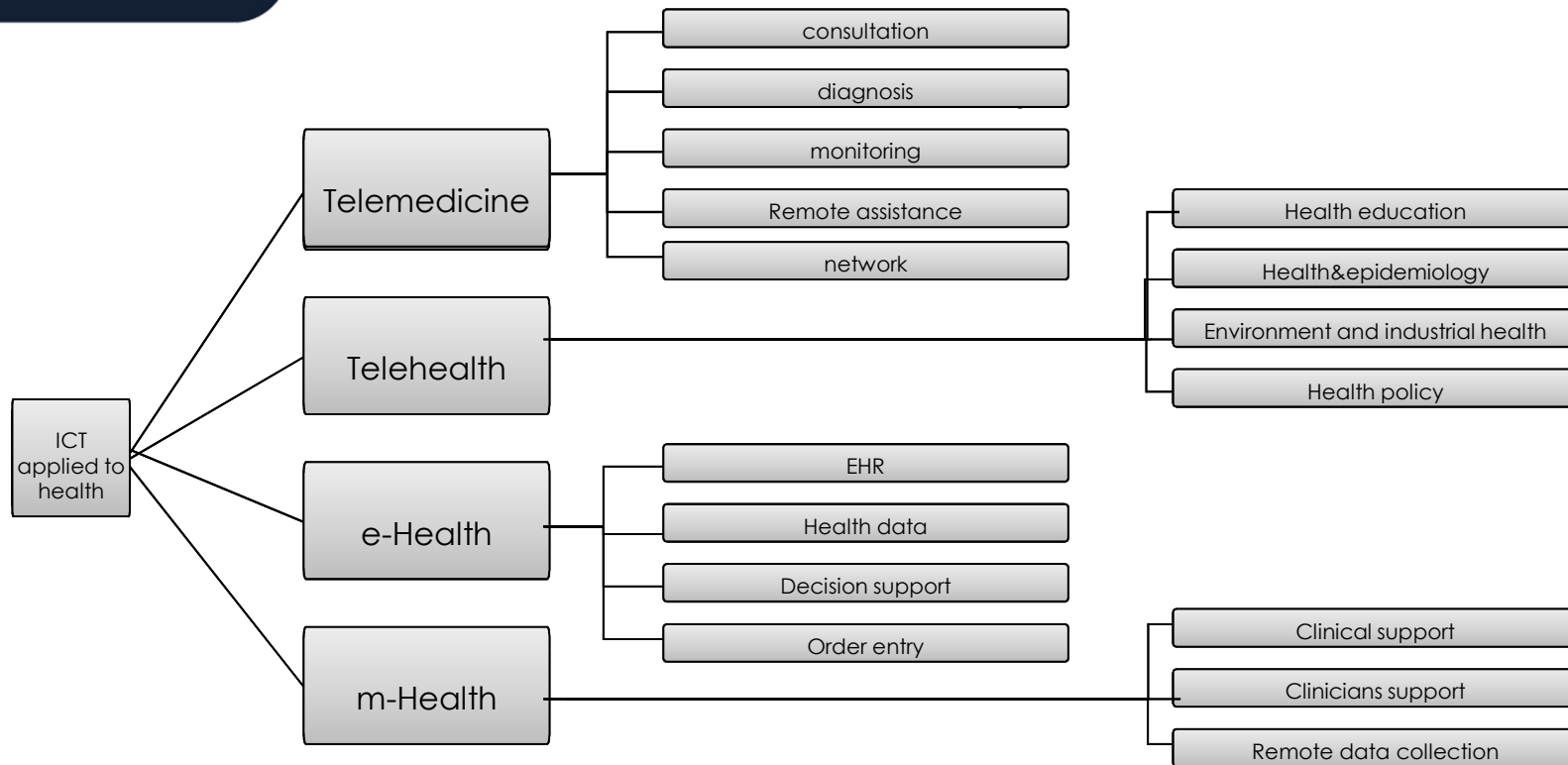


GENERATION WEB 2.0: USING NEW TECHNOLOGIES IN THE PUBLIC SECTOR IN EUROPE

With the financial support of the European Commission

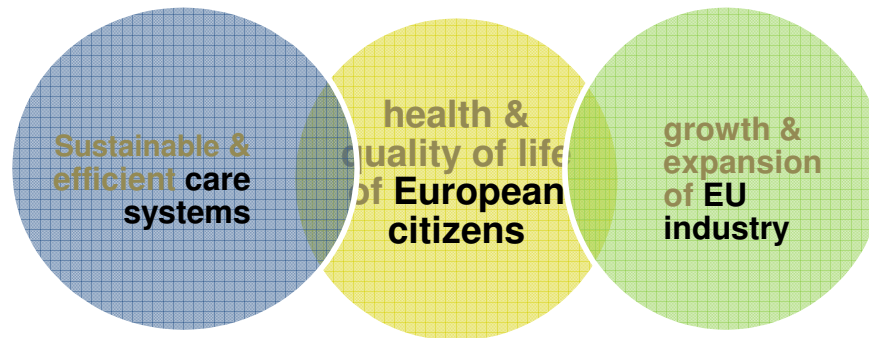


ICT applied to Health



+2 Healthy Life Years by 2020

Triple win for Europe



Action Groups



Action Group work

Action Areas

- A1. Prescriptions and adherence to treatment
- A2. Preventing falls
- A3. Preventing functional decline & frailty
- B3. Integrated care incl. remote monitoring
- C2. Independent Living
- D4. Age-friendly cities and environments

Deliverables

Mapping of innovative practices

Better professional cooperation: standards, guidelines

Practical Toolkits

provide input and expertise through an open collaboration

Commitments of the partners

Implementation on large scale

More integrated, more efficient services

Local implementation



EIP AHA B3 Action Plan

Increase the average number of healthy life yrs by 2 in the EU by 2020

Health status and quality of life Supporting the long term sustainability and efficiency of health and social systems Enhancing competitiveness of EU industry

Chronic Conditions

By 2015

Chronic Conditions' Programmes available at least **10% of target population** in at least **50 regions**

SIP TARGETS

Integrated Care

By 2015 - 2020

Integrated Care Programmes serving older people, supported by innovative tools and services, in at least **20 regions**

Implementation and Scale Up of Chronic Care + Integrated Care Programmes

Action Area 7 ICT Tools	Action Area 1 Organisational Models	Action Area 2 Change Management	Action Area 3 Workforce Development	Action Area 4 Risk Stratification	Action Area 5 Care Pathways	Action Area 6 Patient / User Empowerment	Toolkit
Action Area 8 Finance/Funding	Map of partnership models for implementation of Chronic and Integrated Care Programme	Map of best practice methodologies to support the implementation of Chronic and Integrated Care	Map of reusable learning resources	Stratification of the population	Mapping Best Practices in the EU regions	Map of coaching, education and support patient/user empowerment and adherence	Toolkit
Action Area 9 Dissemination	Toolkit	Toolkit	Toolkit	Toolkit	Toolkit	Toolkit	Toolkit

2013

Monitoring impact and outcomes

2015

Outline

- Rationale for B3 maturity model on readiness for integrated care
 - ✓ EU scaling up strategy;
 - ✓ Lack of tools to support the scale up and replication of integrated care solutions;
- Expected outcomes and potential added-value of B3 maturity model;
 - ✓ Development of self-assessment tool;

European Innovation Partnership 'grass roots' models of excellence



Strategic vision
for active and
healthy ageing

Mobilising
& engaging
a **critical**
mass

Scaling up
local
successes

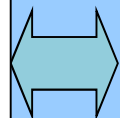
Areas for
Action.
Evidence-
based **policy**



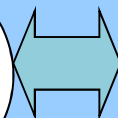
European Scaling up Strategy

What to scale up:

1. Proven Good Practices (GPs)
2. Viability of GPs
3. Classification of GPs for replication locally



**Database of
good
innovative
practices**



How to scale up:

4. Facilitating partnerships
5. Implementation – key success factors and lessons learnt

Are regions ready for scaling up?

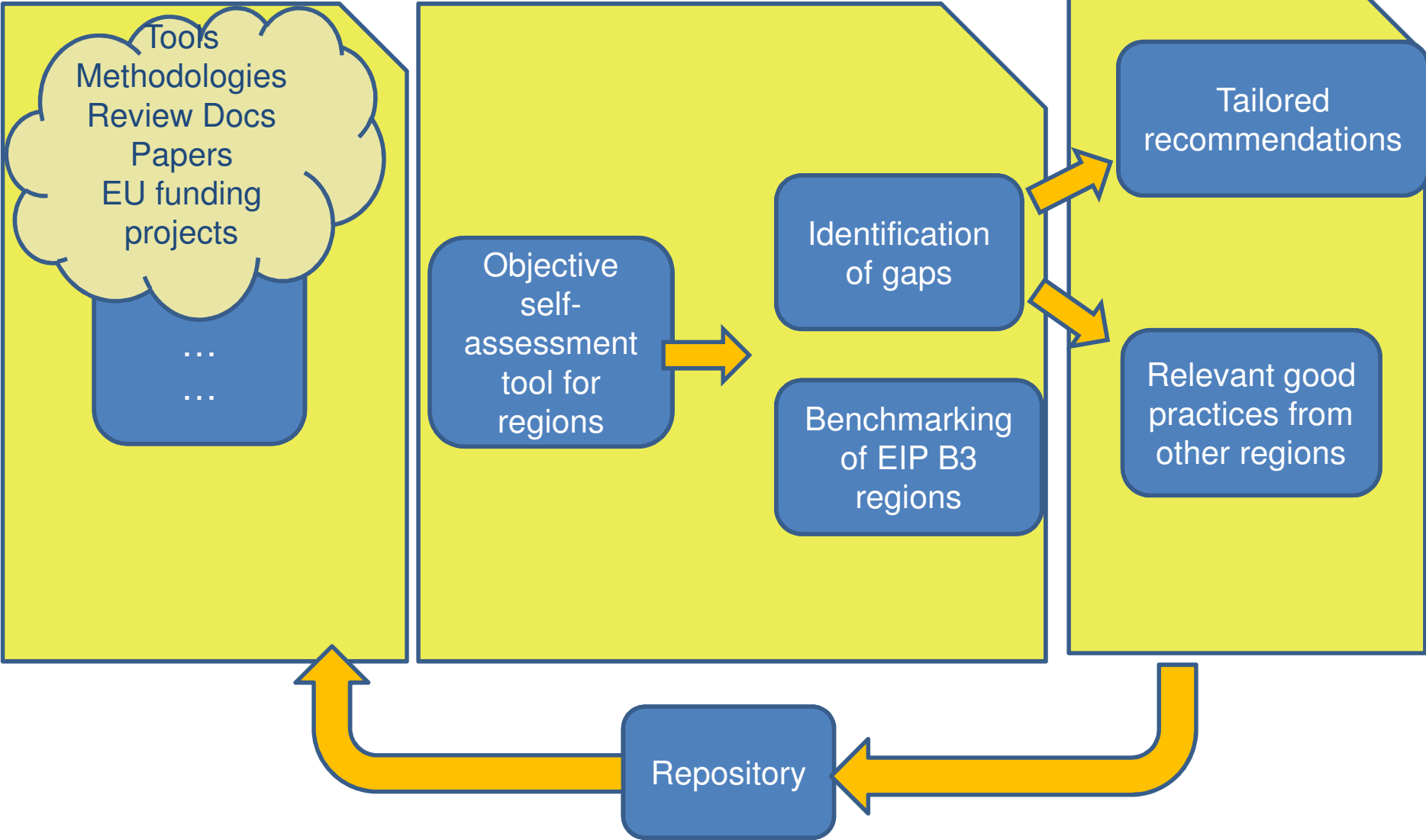
- Integrated care is being adopted *at different rates* and *in diverse ways* across regions of Europe:
 - ✓ What *actions have the more progressive regions taking* in order to be successful?
 - ✓ *What can we learn from these pioneers* about how to overcome barriers and accelerate results?
 - ✓ Can these *lessons* be *structured into a conceptual 'maturity model'* that could help aspiring regions to speed their own adoption?
- To scale up the integrated care solutions, one needs to understand:
 - ✓ How far have the regions progressed in integration? (Baseline of regions);
 - ✓ Areas for improvement;
 - ✓ Local/national context of good practices;

Expected outcomes: B3 Toolkit

B3 Assets

B3 Maturity Model

B3 Good practices



Potential B3 self-assessment tool should...

- Provide an objective measurement;
- *Guide the region how to improve rather than rank them;*
- Focus on the *gaps but also the areas of improvement;*
- Provide *recommendations and methodology* on how to improve (B3 good practices, reference sites);
- Position the European regions where they stand in terms of *weaknesses and strengths* and thus providing an opportunity for *sharing good practices and learning from each other* “*matchmaking*” of the regions;

B3 maturity model: Objectives and methods

- Assess how eHealth programmes & assets have been developed by European regions to support integrated care and service innovation
- Extract *common themes to build a 'maturity model'* to help other regions
- Qualitative assessment based on *interviews and desk research*
- Phase 1 Interviews with 6 regions involved in EIP AHA (Feb – April 2014)
 - Athens; Basque Country; Catalonia; Galicia; N Ireland; Saxony
- Phase 2 Interviews with 6 regions involved in EIP AHA (Jan– March 2015)
 - S Denmark; Skane; Scotland; Puglia; Medical Delta (Delft); Olomouc

Questions asked during the interview process

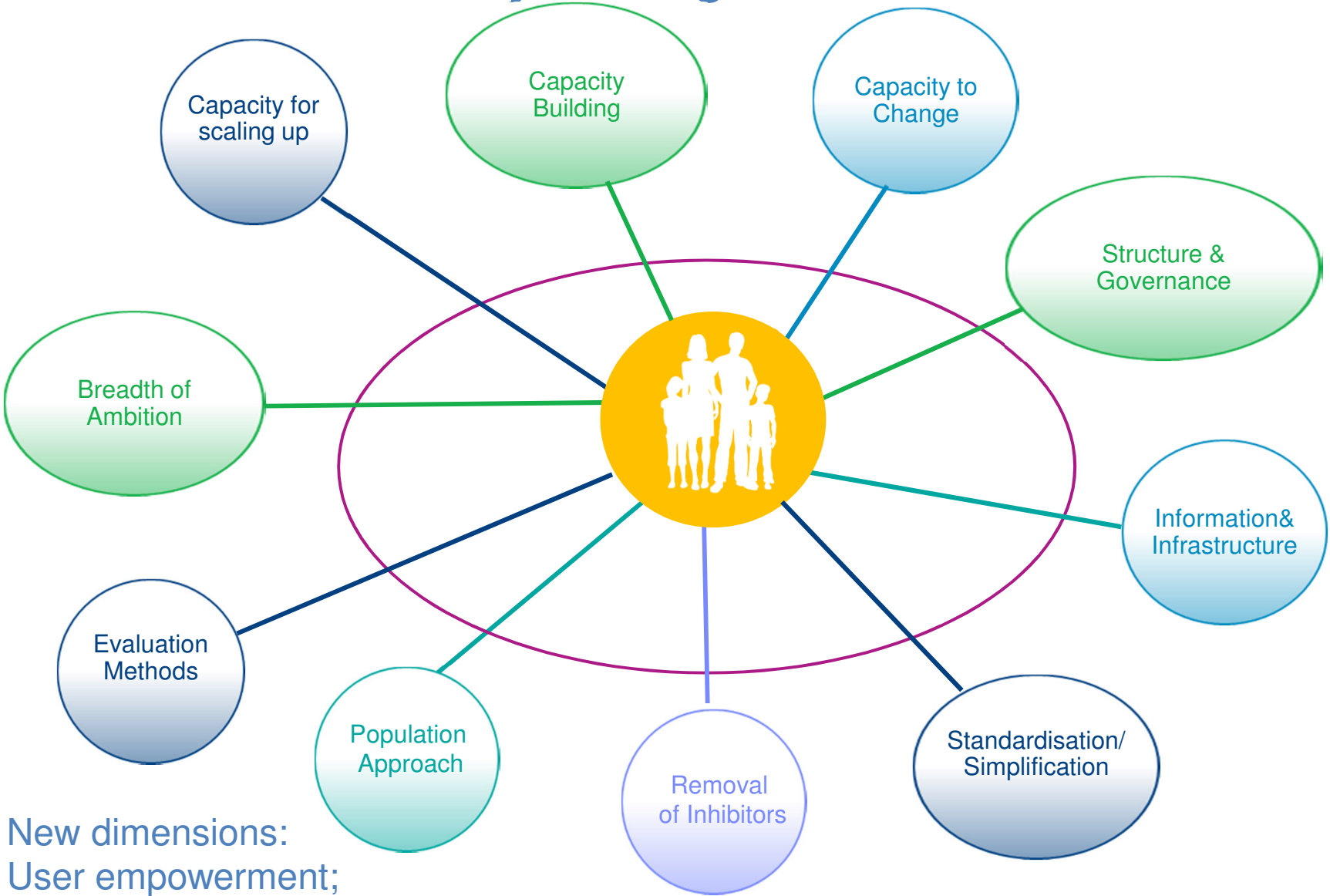
Structured face-to-face interview in 3 parts:

- Current Situation
“Which systems and services are in productive use?”
- Retrospective
“Describe the journey that you have taken to get to this point”
- Prospective
“What do you plan to do next?”

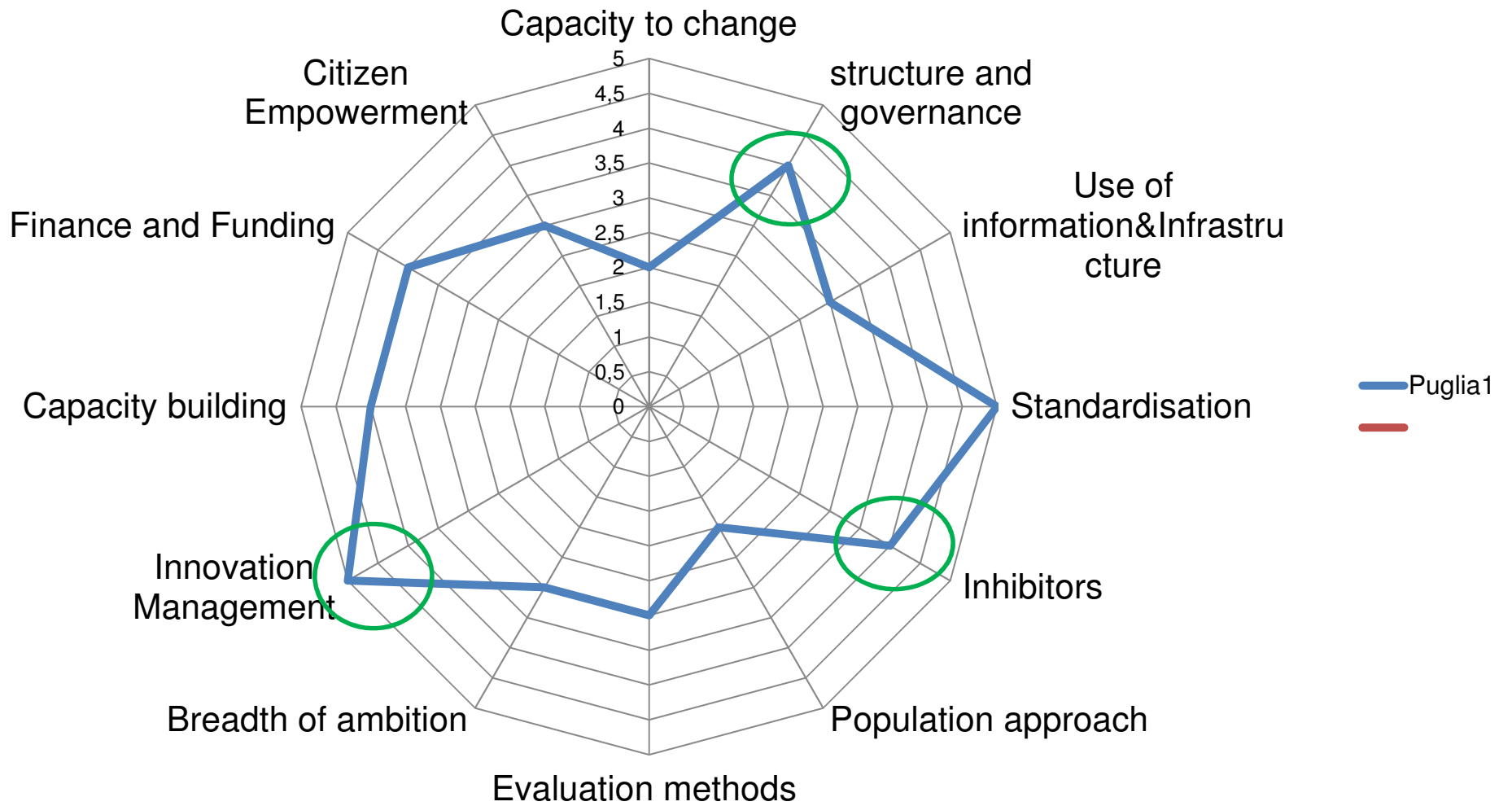
Some general observations

- Demographic challenges (ageing, chronicity, frailty) accelerating change
- Objective is more *appropriate* use of care services, not just cost savings
- Mostly vertical integration so far (primary/community/acute)
- ICT is highly customised to local conditions, so limited diffusion
- Attempts being made to reduce number of systems and standardise...
- ...whilst 'bottom up' innovation and local adaptations are encouraged
- Capabilities have taken years to build – Patient ID, HIE, EHR, portals
- National identifiers: health, tax, banking...
- Cross-regional cooperation (visits, ideas, MoU's) increasingly important
- External funding helps innovation, but sustained investment is needed

Dimensions of maturity for integrated care readiness

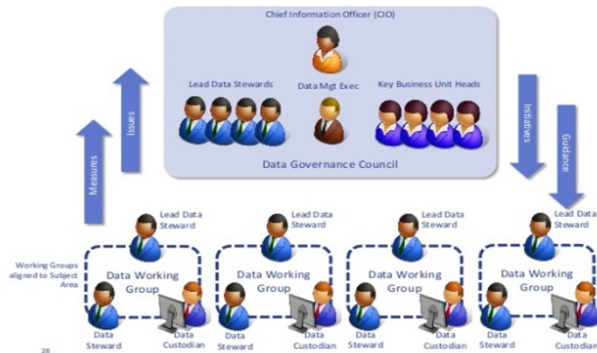


New dimensions:
User empowerment;
Finance & Funding;



Maturity Assessment for Puglia

Typical Governance Structure



Structure and Governance – Score 4

Full integrated programme - parallel activities carried out between Welfare Department and Economic Development Department: shared vision and common planning for univocal aim : implementation of the Digital Agenda (taking into consideration European and National directives) DIGITAL FIRST

PCP's and public/private/academic collaborations are being used in the areas of security, health, assistance and inclusion, also transport and eGovernment. There are documents on Smart Specialisation and the **Regional Agenda which explain the overall strategy. (SF/OP)**

In 2006 a Regional eHealth plan for Puglia was published, but this has not been updated this as there is an emerging national eHealth agenda, which Puglia will have to adopt.

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GRAZIE

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