

John Dalli

Member of the European Commission, responsible for Health and Consumer Policy

Commissioner Dalli delivers speech on eHealth

Check Against Delivery
Seul le texte prononcé fait foi
Es gilt das gesprochene Wort

John DALLI, European Commissioner for Health and Consumer Policy, delivers speech on eHealth at the Italian Embassy in Washington

Washington, USA, 28 June 2012

EU – US SEMINAR ON E-HEALTH

THURSDAY, 28 JUNE 2012; 09.00 HRS

ITALIAN EMBASSY

WASHINGTON - USA

SPEECH

Ambassadors

Ladies and Gentlemen,

I very much welcome this opportunity to meet and discuss eHealth in an EU-US setting – and I thank the Italian embassy, in particular Ambassador Bisogniero, for kindly hosting this event.

This Italian environment is indeed fitting, as Italy has invested significant resources in eHealth.

For example, there is institute in Palermo which has established a public-private partnership with a health enterprise in Pittsburgh.

Using eHealth solutions to pool resources and knowledge across the Atlantic, this partnership has made the Institute in Palermo one of the leading organ transplant centres in Europe.

I believe that eHealth is an area where we can all benefit from mutual work and sharing of experience.

That is why Secretary Sebelius and Vice-President Kroeas signed a Memorandum of Understanding on eHealth in December 2010. I will come back to this later.

This event comes at an opportune moment. Both in Europe and in the US, the economic situation is challenging.

Health budgets come under increasing pressure, whilst demands for healthcare continue to rise.

Never before has there been such a pressing need to find smarter ways to deliver high quality healthcare to citizens.

I am a firm believer in eHealth. I take every opportunity to bang the eHealth drum given its clear potential to make a significant and lasting contribution towards the reform of health services to meet the challenges of the future.

There is encouraging evidence that the eHealth message is getting through.

This spring EU Health Ministers discussed a number of initiatives that demonstrate that eHealth is making a difference.

Furthermore, they illustrate that eHealth approaches must demonstrate effectiveness, efficiency and cost-utility gains.

For instance, at the Danish hospital of Horsens, a health technology assessment has been undertaken to analyse the effect of introducing an ICT system to ensure more efficient use of operating rooms. The results were positive:

- The use of operating rooms increased, operations were started on schedule more frequently, and cancellations were reduced.
- Additionally, clinicians were more satisfied as they experienced easier access to information necessary for their work.

In the UK, the so-called "Whole Systems Demonstrator" provided strong evidence in support of telehealth and telecare for the 6000 patients sampled.

In the UK the use of telehealth shows:

- a reduction of mortality by 45%
- a reduction of emergency admissions by 20%; and
- and a reduction of bed days by 14%.

The UK example underlines an important point – patients should actively take part in his or her treatment.

In this respect, providing access for citizens to their health data will be critical towards empowering people to make well informed choices about their health and healthcare.

This will have a profound effect on the culture and attitude of actors in the health sector, and would serve to boost both quality of care and health outcomes.

Developing patient empowerment is one way towards preparing health systems for the future, for an ageing population and for financial sustainability. We need to explore further means to support patient empowerment.

The examples I have mentioned use eHealth solutions to enable patients to be more active players in managing their health.

Our European Innovation Partnership on Active and Healthy Ageing, the Digital Agenda for Europe, and the forthcoming eHealth Action Plan – led by Vice President Kroes – will help us to make important steps forward.

And today, in Europe we have an additional instrument to help to achieve the overall objective of better use of ICT for Health.

Only a few weeks ago, in Copenhagen, I have launched our new eHealth Network. This was set up under the Directive on Patients' Rights in Cross-Border Healthcare, bringing together decision makers from all EU Member States.

In Europe, each Member State has its own healthcare system, therefore such a Network is essential to ensure good cooperation and to help us to address the same challenges in a coordinated manner.

Within the Network, Member States have agreed to cooperate in three priority areas:

First, the Network will identify the minimum set of patients' data to be exchanged cross-border to ensure safety and continuity of medical treatment and care, at home or abroad.

This is of tremendous importance in cases of emergency care, and is also instrumental in facilitating planned care across borders.

Issues such as semantics and technical interoperability will be addressed by the Network. We hope to build on the work done by the project epSOS, which I know is cooperating closely with the US administration on interoperability.

Second – the Network will work on common identification and authentication measures to ensure transferability of data in cross-border healthcare as a pre-condition for secure electronic health services.

Third – the Network will develop methods to enable the use of health data for public health and medical research.

Let me mention another important eHealth initiative which will start this summer, and which is closely related to the Network's functions and objectives.

The Joint Action on Patient Registries, comprising 19 Member States, will analyse the methodology needed to build patient registries for cross-border use.

Many researchers, industry actors, health professionals and authorities face difficulties in securing evidence on a sufficiently large scale.

Fragmentation of evidence limits the possibilities of advancing public health policies, and can also act as a brake on research.

If, however, evidence is available from larger population sources, decisions made on the quality, safety and effectiveness of health systems will have a much more solid foundation.

I am aware that in the US you have developed common guidelines on the set-up of patient registries, precisely to enable easier reuse and sharing of such registry data.

I applaud this initiative, which I see as a helpful source of inspiration for our work in the Joint Action.

Let me turn to another widely-debated issue in Europe – data protection. Ensuring the safety of personal data is – rightly – a key value in European society. However, the legislation protecting citizens in this field may at the same time limit our possibilities to improve healthcare.

A few weeks ago, the eHealth Task Force, which consists of high profile members with track records in innovation and health, released a report on how innovation can help to shape the future of Health.

Not surprisingly the report identified the issue of handling health data safely and securely as a key prerequisite for the many opportunities innovation can bring to health and healthcare systems.

The group noted that despite the numerous benefits of eHealth for individual citizens and society, it remains an under-developed opportunity.

In January of this year, the Commission published a new proposal for a Regulation on data protection, which is now being discussed in the Council and the European Parliament.

The new proposal aims to facilitate the secondary use of data, at national level and across borders, for the benefit of public health and research, whilst fully respecting the fundamental rights of citizens for data protection.

Our objective is to strike the right balance between the need to respect privacy in the doctor/patient relationship, with that of allowing the research community access to the wealth of data from electronic health records.

I am aware that this is a key issue also on this side of the Atlantic.

This brings me back to the 2010 Memorandum of Understanding between the US and the EU on eHealth.

The Memorandum points directly to a key element needed if eHealth is to provide better integrated health services – interoperability.

Through this Memorandum, the US and Europe are committed to working together to develop and increase the uptake of internationally recognised standards for electronic health records.

Europe and the US have some of the most advanced R&D enterprises in the world in ICT for Health.

Using common interoperability standards would benefit not only health research – it would also serve as an incentive for these enterprises to develop new ICT tools which can become an integral part of the interaction between the patient and the health services.

Ladies and Gentlemen,

After almost 20 years of research and the emergence of a significant number of innovative ICT health products and solutions on the market, **now** is the time to make the quantum leap from project based co-operation to sustainable cooperation.

Wishful thinking and long term projection should be replaced by concrete outcomes, services and benefits for patients, doctors, for healthcare systems and society in general.

For instance, cross-border use of electronic prescriptions will help to ensure safe treatments regardless of geographic location. This is why the Commission is working hard with EU Member States towards adopting, by the end of this year, measures on the content of cross-border prescriptions.

And whilst respecting that the financing and organisation of healthcare is the primary responsibility of Member States, at European level we also have an important contribution to make – for example by exploring sustainable business models for health innovation.

By the end of this year, the Commission will have adopted a new Action Plan on eHealth for 2012 to 2020.

This will consist of measures designed to accelerate the delivery of eHealth. It will pave the way for innovative eHealth services; encourage the sharing of best practices; and will include ways of measuring progress on eHealth across the EU.

When setting up structures like the EU eHealth Network or parallel US initiatives, I believe it is important that we keep each other informed of our strategic choices – and possibly aim at enabling interoperability between the US and EU as well.

I welcome all contributions to the strategic thinking on eHealth, be they in Europe or elsewhere, and count on everybody's engagement and commitment towards making eHealth a living reality running at full potential, to the benefit of all – in Europe, the USA and the rest of the world.

Thank you very much.