



Care management network for patients with pharmacoresistant epilepsy and patients with late stage Parkinson's disease

Lead partner: The Federal Ministry of Health, Bosnia and Herzegovina

Partners: Croatian Institute of Telemedicine; Ministry of Health of Montenegro

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Introduction

- Cooperation between project partners (The Federal Ministry of Health, The Ministry of Health of Montenegro, Croatian Institute of Telemedicine) for this project has begun in January 2016.
- Application has been prepared and submitted in June 2016.
- The Federal Ministry of Health received notification that project application had been approved by Joint Secretariat for Interreg IPA CBC – CRO, MNE and BIH in August 2017.





Cross-border challenges – background information

Lack of adequate health services for patients who suffer from pharmaco-resistant epilepsy and late stage of Parkinson's disease.

There are only two institutions with capacities for treatment of these diseases (Zagreb – for pharmaco-resistant epilepsy and Rijeka for late stage of Parkinson's disease).

Other clinics and hospitals in cross-border area lack human resources and technical capacities for provision of quality health services

Consequently, wrong diagnosis and incorrect treatment lead to overburden of referral centres in Rijeka and Zagreb

Wrong, inadequate and partial diagnosis and treatment affect the quality of life of patient, increase stress and other health risks.

Patients in Croatia are in much better position than in Bosnia and Herzegovina and Montenegro. This is because diagnosing and treatment is provided within single health system.

Lack of appropriate health services for patients suffering from above mentioned diseases is equally present in all three countries.





Project goal

To improve the quality and accessibility of healthcare services for patients with pharmaco-resistant epilepsy and late stage of Parkinson's disease through:

- Establishing network of referral centres and hospitals connected with modern ICT technologies which will maximize capacities of referral centres and accessibility of their services as well as transfer of knowledge and good practices.
- Referral centres and hospitals will be connected through ICT system which will enable audio and visual communication, medical data exchange, second opinion, consultation and other medical services.





Expected results

To ensure maximum exploitation and replication of capacities and expertise of referral centers in Zagreb and Rijeka throughout programme area in order to increase quality and accessibility of services for patients with Pharmacoresistant Epilepsy and late stage of Parkinson's disease, simultaneously reducing unnecessary transport, stress and health risks.



OUTPUT	INDICATOR	EXPECTED RESULTS
Developed ICT care management network for pharmacoresistant epilepsy and late stage Parkinson's patients	Number of jointly developed and/or implemented tools and services that enable better quality of health and/or social care services	1
Neurology specialists improved capacities, knowledge and skills	Number of participants in joint education and training schemes on health and/or social care.	28
New healthcare services and medical expertise available and accessible to the public of the programme area	Population covered with improved health and/or social care services	200



Cross-border significance of NeurNet

Cross-border element is incorporated in the project since achievement of its objectives wouldn't be possible at national level.

Advancing the human and technical capacities of hospitals and clinics across the programme area, even to a limited extent would require enormous time-consuming infrastructural and capacity building investments, which would have no immediate benefit for patients until their realization in the relatively distant future.

Modern ICT technologies on a cross-border level offers immediate benefits to patients and an extremely cost effective solution by multiplying the benefits of existing capacities of reference centers for the improvement of the quality and availability of health care services, transfer of knowledge, good practices and building capacities, improvement of the quality of life of patients, and the reduction of unnecessary transport and risks for patients.

the cross-border added value is obvious and is realized through the increased and improved communication, cooperation and coordination between reference centers and hospitals of the region, harmonization and improvement of the quality of health services in hospitals of the programme area as a whole, as well as the improved and more efficient transit of patients on a cross-border level.

A cross-border approach removes the confines of the country for patients and offers them access to high-quality health services which they otherwise could not enjoy within their own borders, while also minimizing the need for being physically transported beyond those borders.

NEURNET PRESENTED AS AN EXAMPLE OF GOOD PRACTICE IN TREBINJE WITHIN 2ND CALL FOR PROPOSALS OF THE INTERREG IPA CBC CROATIA-BOSNIA AND HERZEGOVINA-MONTENEGRO 2014 – 2020



NEURNET TEAM

