CoR INTERREGIONAL GROUP ON HEALTH & WELL-BEING

"Realising the potential of digital health transformation in Europe: A focus on the role and experiences of Regional and Local Authorities"

Wednesday, 12 October 2022, 11h30-13h00

European Week of Regions and Cities

Minutes

11.30 Welcome and introduction by the Chair, Birgitta Sacrédeus

The Chair of the Interregional Group, **Birgitta Sacrédeus**, welcomed all the participants in this high-level conference, organised in the frame of the European Week of Regions and Cities by the **CoR's Interregional Group** and **NAT Commission** in collaboration with **the Commission** (DG CONNECT) and **EUREGHA** (European Regional and Local Health Authorities). The event consisted of a high-level institutional panel aimed at discussing how the digital health transformation can nurture the quality and efficiency of health and care provision, empower citizens and boost resilience and sustainability and what is truly needed to achieve it across Europe, putting a particular focus on the role of regional and local health authorities in driving this change forward.

11:40 "The European Health Data Space: how to make it a reality?"

By **Marco Marsella, Head of Unit, eHealth, Well-Being and Ageing, DG CONNECT, European Commission**

The first panel was opened by a speech from Marco Marsella. He illustrated some initiatives at the European Level. Before COVID-19, the European Union was already working in the direction of digital health transformation, and with this crisis, it became necessary. A successful example of this effort was the **Digital Covid Certificate**. One of the drivers of this revolution is data. Going back to the past, Mr Marsella reminded us that in 2018, the European Commission realized the **Strategy for Digital Transformation of Health and Care**. That Strategy, at the time, was based on three pillars:

1. Provide **access** to citizens to their own data, and make them understand the use of it. This pillar is strictly related to the European Health Data Space (EHDS) and has sought to establish a Common Regions Framework for exchanging data.

2. New data: we need new ideas, infrastructures, and impersonalizing prevention, with the effort to work voluntarily with the Member States on **genomics data** (which was necessary during the pandemic).

3. Tools to enable citizens to use data correctly: the approach here was very technology-centric. Talking about what instruments will be made available to support regions in this endeavor, Mr Marsella referred to the EHDS and the EU Care Strategy, which is about investing in care and putting together our efforts on health.

11:00 "The Recovery and Resilience Facility and the digitalisation of the health sector: the Italian experience"

> **By Fidelia Cascini, Digital Health Expert at the DG for the Digitalisation of Italy's Ministry of Health**

Ms Cascini presented the Italian experience on the topic of digital health. In 2018, only six Italian regions were advanced in the use of telemedicine, with a very small number of projects. In 2019 just eight of them had more than 80% of doctors using electronic trackers, mainly in the North of Italy. She shared the same view as Mr Marsella, saying that **COVID-19 gave a boost to the digitalisation** of electronic trackers all around the World. She referred to the Digital COVID Certificate as the most successful implementation of digitalisation. In her opinion, the reason for this success is that it was a shared model at the European level based on common standards and had a consistent implementation around Europe.

Regarding investments in the **Recovery and Resilience Facility** (RRF), Italy received and invested more than 15 billion euros for the digitalisation of the national health system. In Mission Six (dedicated to health), the government invested mainly in telemedicine services and the innovation and improvement of electronic health trackers. Consequently, **a growth of more than 50% in the use of electronic trackers** in all Italian regions has been registered. At the European level, Italy is well placed to play an important and strategic role in developing the EHDS. In particular, it is working on the first joint action, which is the preparatory action for the primary use and reuse of data.

12:00 "At the forefront of digital transformation: what challenges and opportunities for European regions and cities?"

> **By Birgitta Sacrédeus, Chair, Interregional Group on Health and Well-being, European Committee of the Regions**

Birgitta Sacrédeus started her intervention by stressing that 19 out of 27 Member States are financing health work. One of the main issues she addressed is financial resources: digital health costs a lot, but this is the future, and we also have proof that we are successful when we implement our efforts. She thinks we should continue to work on health issues because, for some of them, there are no borders, and at the same time, we are fighting against cancer, which keeps increasing due to increased longevity. Thanks to the European Data Space, we will have more research, which is crucial: **data sharing is essential for cancer**, for example.

She brought the example of Sweden, where the problem of long distances has been solved by using an app through which everyone can book a digital consultation with a doctor from their region. The critical point here is sometimes the resistance by doctors to use digital solutions and devices.

12:10 "Access to care and patients' mobility in Europe, also in light of the Ukraine crisis: how to exploit the potential of digital transformation in cancer?"
By Mike Morrissey, Chief Executive at the European Cancer Organisation

Mr Morrissey opened his talk by thinking about the typical situation of being a patient, concerned about their health, and having the pressure to communicate with doctors and remain lucid to explain their condition. Additionally, doctors may not have all the tools to make a good diagnosis because as human beings, they may forget to ask for something crucial. This could be one less problem if doctors had open access to our data. Now, we are stressing patients, we are putting all the **pressure on communication** and we are stressing out healthcare professionals: this is where we are going, not sharing data.

In his opinion, EHDS is an amazing concept, but there are still issues to address. For example, in some regions and cities, data does not move between the private and public sectors.

Doubtless, treatments can be improved by sharing data. If we start collecting **more data on rare diseases**, someone's experience could turn into someone else's cure. From a critical point of view, Mr Morrissey said that the problem of digital transformation stays mostly in the details of the implementation, like in the **protection of data to fight distrust**.

Answering the question about the **impact of Ukraine's war on cancer patients,** Mr Morrissey said that a lot of work has been done with Ukrainian citizens who suffer cancer. It is an extremely serious situation, but the choices are the same: patients need to be accompanied, they do not know what to expect once they are in another country looking for healthcare. In addition, because of linguistic barriers, **carrying the data with the patient** is even more necessary. It is a matter of **people's empowerment**.

12:20 Video testimonials – Digital health transformation: examples and challenges from regions and beyond

ZorgAtlas

The video testimonial from Flanders Region opened the second panel. The video will present the ZorgAtlas, a "publication layer" within the ZorgAtlas Data Platform, consisting of dynamic and interactive dashboards, business datasets and data science dashboards offered to internal and external customers, which allows the Flemish Agency to share and gather data in a centralized way across Belgian regions and communalities within Flanders.

Scotland's Approach to Innovation in Health and Care

The second video testimonial was from Scotland (UK) and showcased how stakeholders in Scotland are working together to improve health and social care. The West of Scotland Innovation Hub supports health and social care innovation across the West of Scotland and addresses key challenges to improve health, social care and service delivery through co-design, co-developing and co-delivering health and social care innovation; providing end-to-end support, from conception to procurement; and supporting innovation that addresses key challenges to improve health, social care and service delivery.

The THALEA project

In the field of telemedicine, THALEA I and II (*Telemedicine system to meet the demands of Hospitals concerning early warning Assisted by innovative ICT for Life Saving co-morbid patients in Europe As part of patients personalized care program*) successfully demonstrated how innovative ideas can be transformed into new products in a short period of time. The project aims to make patient care in the ICU even safer through additional, computer-assisted monitoring. As the first cockpit solution for ICUs, THALEA II helps to save more lives and consequently increases the quality of life and well-being of many EU citizens. Taking this into account, the promising technology of THALEA II flourishes European competitiveness, goes far beyond existing research and development and underlines its effectiveness with respect to innovative management and procurement methods.

12:30   Open debate: reactions and reflections from previous contributions

The moderator, **Giovanni Gorgoni**, animated the panel asking the speakers a round of questions.

Marco Marsella replied to Mr. Gorgoni's question on how the European Commission can support and work with regions in taking up and deploying digital health transformation. He stressed one central point: the importance of collaboration, which starts from two pillars:

- **Collaborating networks**, in which regions are essential to exchange experience and expand knowledge.
- **Leveraging the financial resources** that the European Commission put at the disposal of the Member States and the regions: i.e., in the Recovery and Resilience Facility, a significant part of which has been dedicated to digital transition. Two important initiatives financed by the latter are: the [Digital Innovation Hubs](), to foster knowledge exchange and innovation practices, and the [5G for Smart Communities']() call for proposals, an occasion to support the exchange of data and the development of new telemedicine. In his opinion, the **regions should seriously consider this opportunity**.

Birgitta Sacrédeus replied to Mr. Gorgoni's question on her main expectations from the digital transformation of health and care from a regional perspective. She started by stressing again the importance of working for a **passport of data** that you can carry with you, even on your credit card or phone, as it worked with the COVID-19 certificate. In her opinion, the solutions are there, but we have to be **innovative** to find them.

Fidelia Cascini replied to Mr Gorgoni's question on how we can bridge what happens at the local/national level to the promising EHDS initiative from the national perspective. In her opinion, there are three main elements to bridge that gap:

1. Sharing and following the **health network guidelines** on electronic trackers and documents.
2. Adapting the **European regional healthcare systems** to European standards, based on fair data processes (they should be findable, accessible, interoperable and re-usable data).
3. Working together toward a digital healthcare ecosystem which should be based on **common health data practices**.

Mike Morrissey replied to Mr Gorgoni's question on how the ECO community can work with regional and local health authorities to drive digital transformation forward.

In his opinion, this is a unique opportunity. The EHDS and other initiatives, such as the Europe's Beating Cancer Plan, demonstrate an increasing involvement in health and digital topics after the pandemic, and it cannot be ignored. **The time is now**, and it is essential not to let pass through that engagement. The second thing Mr Morrissey stressed was the matter of **distrust**. On this topic, the

EHDS should include healthcare professionals and patients, any initiative can be implemented without the involvement of people on the ground and patients: the engagement question is huge but it worth it. **Regions should focus on** those opportunities and on resources of **stakeholders' management and engagement**.

As final remarks, **Giovanni Gorgoni** concluded the conference with a final reflection. In his opinion, the digital transformation of health care is unavoidable, and exploiting its full potential depends on how policymakers and authorities approach it. Reinvention is the solution. The role of Regions, as the direct service relationship with citizens and users, will be crucial to promote the advantages of digitalisation, to manage the most appropriate literacy in this direction and to convey feedback bottom-up about the broader digital enablement of care processes."

Then, he thanked the team of EUREGHA, on the occasion of the 10th anniversary of the Network, all the participants and closed the meeting.

13.00 End of the meeting