



E-Health Working Group: Preparing for the Kosovo conference Questionnaire Helsinki, 30 September, 2015 **European Partnership for Supervisory Organisations** in health services and social care Presentation by Mari Murel **Research and Policy officer by EPSO**





Lay out of the presentation

- History e-Health working group
- Questionnaire -first review
- follow up- Working group





e-Health WG

- Call for new WG in Oslo 2015
 - What about supervision and e-Health ?
 - Where and when does supervision start?
 - Risks, benefits, Challenges
 - Good practice examples
 - Knowledge sharing (workshops, pilots)
- Reg. Members: NL, EST, FIN, BUL, SWE, ISL



e-Health questionnaire

http://www.epsonet.eu/ehealth.html

e-Health Working group – Survey-Questionnaire on e-Health regarding supervisory organisations (regulators/monitoring organisations/inspectorates)

0. Introduction

This questionnaire is the instrument supporting a survey among EPSO members intended to provide an overview of what interests and responsibilities health care regulators and supervisory organisations have regarding e-Health¹. More specifically, the questions below focus on the following issues:

- Organisational approaches to supervision of e-Health;
- Main supervisory aspects of e-Health;
- New developments in the field of e-Health.



1. Is e-Health a topic that is addressed within your organization? If yes, what kind of issues are being discussed/ worked on?

	Medical devices	e-medicine	M(obile) Health	Telemedicine	Prevention/promotio	Other	
Wales	Х	Х	X	X	X		
Estonia	X	X	X(as concerns medical prescriptions)	X	X (supervise advertising health services in media)	e-vaccination passport	
Iceland		X			X Patient involvment	electronic health records	
Sweden				x		Virtual organization provisioning healthcare servises through over internet	
Finland	X		X (escpecially medical apps)	x	X	E-prescription	
The Netherlands	X		X (apps that fall under medical device)			New techniques and products in delivering health care	



Questionnaire **EPSO**

2. What are the main areas in the field of e-Health where you conduct supervision? Where takes place?

where takes place.						
	Medical devices	e-medicine	M(obile) Health	Telemedicine	Other	Location
Wales					quality and safety,	
					patient experience	Inspect against the
					and effective and	Health care standards
					timely care	within Wales
						licensed health care
Estonia	'	Xe-	Xe-	1	medical epicrisis for	providers in hospitals
	x		prescriptions	X marginal	E-health information	and outpatient care
		prescriptions	via m-phone	1	system	and in social care
]']		homes.
					Electronic Health	hospitals, primary
Iceland		Xe-			Record, Personal	health care, private
Iceland		prescriptions			Health Record,	practice and nursing
					Icelandic Health NET	homes
	'			1		Product manufacturers,
Finland	x			x	Information security	hospitals
The Netherlands	x		x			Manufacturers of
						medical devices as well
						in health care
						institutions



Questionnaire **EPSO**

3. Do you have a special department or positions or working groups inside your organization that are responsible for supervision of e-Health?

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	YES/ NO	specifics	qualification
Estonia	YES	special Dep. for e-health services, mostly part of general supervision	special training (for social worker) for e-prescriptions database enquiries
Iceland	NO	FTE's within Information Managment Division responsible for implementation and	Nurse with a PhD degree in health informatics and a computer scientist
		Supervision e-health under Division Supervision and Quality	a dentist, RNs, medical doctor
Wales	NO	Not in their organisation, but there is in Wales. Within HIW team that keeps up to date with new policies.	
Finland	YES	10 people in Valvira's health technology group. Also other sections of social and health care supervision and licensing(mainly patient safety and information security)	Professionals with different background (etc. technical and healthcare)
The Netherlands	YES	4 inspectors at the medical device department are responsible for supervision of eHealth/ IT in health care/ Domotica(home care techn.)	One of the 4 inspectors studied Medical Informatics



Questionnaire **EPSO**

4. Based on what (legal)standards, guidelines or laws does your organization practice supervision on e-Health?

supervision based on:								
Estonia	Section 60 of Health Services Organization Act,							
Estonia	Subsection 2 of section 2 of the Personal Data protection Act							
	Medical Director of Health and Public Health Act No. 41/2007.							
Iceland	· Act on Patient's Rights No. 74/1997							
	· Health Records Act No. 55/2009							
	 Regulations on Health Records No. 550/2015 							
	Data Protection Act No. 77/2000							
Finland	Medical Device Directive MDD 93/42/EEC							
	MEDDEV 2.1/6 Guidelines on classification of standalone software							
	Medical Devices Act (629/2010)							
	EC/EN 62304 Medical Device – Software Life Cycle Processes							
The Netherlands	93/42 EEC Medical Device Directive/ MEDDEV 2.1/6							
	Outch version of the) ISO 27001 on information security							
	ISO 13131 on telehealth							
	Dutch law on Delivering good quality of care: one specific subsection/ guideline on putting new							
	techniques into service in a safe way							

Mentioned Risks



- Information security
- Quality of data
- Software issues, failure of technics
- Misuse (person behind the e-ID)
- High costs and rapid development
- Human factors, e.g. staff resistance and lack of support from management/authorities (also financial)
- Lack of skills /training
- Lack of standards and interoperability

Mentioned Benefits



- More efficient Health Care
- Increased access into services (esc.in remote places)
- Easier data transformation and consultations
- Person centered HC, promotion of healthier lifestyles and patient respnsbl(taking care of their own health)
- Reduced medical costs(less procedures, med.images)
- Secure and timely access (i.e. for ambulance)
- Information sharing, cross-boarder HC
- Increased opportunity for continuity of care
- Better planning and provision

etc. etc.etc.

Mentioned Good Examples



• NL:

We have supervised many services in which patient collects his own data and uses it. For example monitoring own medicine, blood pressure or blood sugar.

• EST:

Some doctors seem not to be aware that prescriptions on paper are digitalized and can still be followed in the e-prescriptions data base. In some cases it has become apparent that prescriptions to psychiatric drugs were given to the wrong patient or for too big amounts.





Questions, questions, questions

- WHAT are the risks?
- What to focus on?
- WHERE can these risks be expected?
- WHO is participating? (resource planning)
- WHAT laws/ guidelines/ standards can we base supervision of eHealth on?
- Etc etc etc

Questionnaire



Important developments

- <u>FDA's guidance</u> on medical apps and their approach to supervising these products.
- <u>The International Medical Device Regulators Forum</u> is developing guidance for manufacturers/ developers of eHealth products on how to develop good quality of products.
- Development of specialized software that helps to track violations.
- Use of common indicators to measure e-Health usage and satisfaction for cross country comparison (e.g. Nordic eHealth Benchmarking, 2014)





e-Health WG next steps

- Preparing for EPSO 21st conference in Kosovo- one of the main topics. Selection of possible speakers (i.e. prof. in telemedicine Leonard Wittkamp, AMC)
- Pre-conference WG meeting in Kosovo
- Everybody is welcome to join the WG and to fill in the questionnaire, give feedback, share ideas .
- Updates at our webpages and via e-mail
- http://www.epsonet.eu/ehealth.html





Conclusions

- E- Health is hot topic wide range different approaches
- Supervision of telemedicine most EPSO members are interested
- Supervision of telemedicine only few EPSO members have experience in this field

How to organise exchange of knowledge and various experiences between interested EPSO members



Interesting suggestions for further steps

- EST Sharing ideas how to develop specialized software for supervisory bodies that has a capacity to draw information from other databases, analyse it and help to detect risk areas;
- ISL / NL /FIN Learn more about experience of using telemedicine
- SWE/ FIN Information security





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