COCIR

**COCIR Position Paper**

# Ten COCIR Recommendations on eHealth

**By clarifying the position of COCIR and its members - based on 10 recommendations – the objective of this position paper is to open a dialogue and to contribute to the creation of a competitive eHealth market across Europe which is trustworthy and encouraging for regional and national healthcare delivery organizations.**

COCIR advocates the development and deployment of eHealth solutions and services as being crucial for improving safety, quality, accessibility and efficiency of healthcare in Europe, but notes that the enormous potential benefits of eHealth are being hindered by a number of barriers.

COCIR and its members have considerable knowledge in healthcare operations and related processes, and are well positioned to provide a valid opinion on eHealth future development and deployment across Europe, balanced between specific care user needs and general requirements of common interest.

## COCIR calls for actions and dialogue along 10 recommendations:

1. **Define a vision**
2. **Overcome governance fragmentation**
3. **Develop innovative economic model**
4. **Build trust**
5. **Support citizen-patient empowerment**
6. **Foster standards and interoperability**
7. **Achieve legal certainty**
8. **Enable market development**
9. **Strengthen international position**
10. **Stimulate innovation**

*COCIR, The European Coordination Committee of the Radiological, Electrometrical and Healthcare IT Industry, is an industry association founded in 1959, representing major health industry suppliers in Europe. COCIR members support innovative point of care solutions and IT technology along the complete social and health value chain, from prevention to acute care towards home care and rehabilitation, and its vendors deliver "the backbone" for seamless care delivery and information exchange. Jointly, COCIR members have a strong and very positive impact on the economies of Europe and play a critical role in our health economy and the well-being of the population. In the industry represented by COCIR (27 companies and national associations) 40,000 people are employed. Medical and information technologies provided by its members can be found in every healthcare delivery organization in Europe, making COCIR a major stakeholder in European healthcare.*

## Responding to the Healthcare Challenge

Healthcare systems are experiencing escalating demands for higher quality health services at a 'contained' cost level.

Associated with the ageing demography, the costs of healthcare are rapidly increasing and are challenging the solidarity principles on which European healthcare systems are based. Furthermore, the pattern of disease is changing - 60% of all deaths worldwide are due to chronic diseases[1]. This imposes even an greater workload on healthcare providers and resources at a time where mobility and individualism have diminished the traditional care potential of the family.

As the demand for more services increases, increasing the productivity and efficiency of care delivery has become a challenge. This is not due to the medical profession – indeed healthcare professionals are well used to adapting to using leading edge medical technology – but the problem is rather one of flawed or inadequate delivery processes which may have been adequate in the past but which are no longer sufficient given today's increasing market requirements. Clinical guidelines take too long to enter into clinical routine while at the same time the volume of information is far beyond the capacity of any single practitioner to process and implement. It is not surprising therefore to see that serious medical error can arise in such a situation. Also, citizens start to recognize the "quality" issue. According to DG SANCO's survey in 2005 on medical errors, 78% of EU citizens classify medical errors as a significant problem in their country[2].

Last but not least, continued increases in quality, efficiency and productivity are needed to face the increased health consumerism and patient empowerment which will result in a more citizen-patient centric way of delivering healthcare services, including providing care at home.

## Healthcare – Vital to a Country's Prosperity

Health is important to a country's economy. The health domain employs currently 10% of Europe's workforce, representing 8.6% of the EU-15's economy[3] and expected to triple by 2020 and reach 16% of GDP[4]. In line with this, the number of jobs in the sector is increasing, and with it generating economic growth.

Health infrastructure which improves health and supports strategic objectives of prosperity, solidarity and security is needed. According to a 2001 study by the World Health Organization, 50% of the difference in economic growth between rich and poor countries is connected to poor health and lower life expectancy of the population[5].

A society in good health leads to higher productivity, increased labour supply, better education and contributes to sustainable long-term growth. A society in poor health leads to economic loss, threatening growth, competitiveness and employment.

A modern healthcare system, delivering high-quality care is ever more recognized as one of the major building blocks for the economic development of a region, a country and Europe as a whole. There is a strong case for policymakers to consider investment in health infrastructure as an option by which they can meet their economic and social objectives.

1 WHO, 2006
2 Special Eurobarometer requested and coordinated by EC DG SANCO – Medical Errors – January, 2006
3 OCDE Healthcare Data 2005
4 PriceWaterhouseCoopers, Healthcast 2020: Creating a Sustainable Future"
5 Macroeconomics and Health: Investing in Health for Economic Development, Report on the Commission on Macroeconomics and Health, Jeffrey D. Sachs, WHO, 20 December 2001

## Healthcare – A paradigm shift from 'sick' care to 'health' care

Modern healthcare is a continuous and interlinked process. The complete care pathway consists of prevention, diagnosis, therapy, rehabilitation and long-term care. Each of these steps, as well as the continuum of care as a whole, needs to be optimized and citizen-patients need to be placed at the centre of all efforts. The goal is to help citizens increase their healthy years, to prevent hospital admissions, to support care at home and to help patients recover as quickly as possible. Working towards such a process-oriented healthcare system requires a major shift moving from delivering (acute) care to the sick to supporting the health of the overall population.

## Healthcare IT and eHealth solutions – A tool for transformation

The importance of information and communication technology (ICT) progress in the healthcare domain was recognised as a pillar for European prosperity in the 2006 Aho report on "Creating an Innovative Europe"[6], which identified eHealth as a "lead market" with considerable potential and the necessity for specific and timely attention.

In the complex world of new medical developments, information load and rapid change, Health ICT and eHealth solutions can address rising costs, improve productivity and patient care and provide better clinical outcomes. Policymakers and care providers who want to successfully meet the future needs of healthcare, therefore, have compelling reasons to embrace cutting-edge technology such as:

- Clinical information systems and specialised tools for health professionals within the care institutions (hospitals) such as the electronic patient record system (EPR), order entry systems, medical documents management systems, knowledge/decision support systems, radiology information systems, nursing information systems, surgery training and planning system, etc.
- Clinical information systems for primary care and/or for outside the care institutions such as general practitioner and pharmacy information systems.
- Regional/National Health Information Networks and advanced Electronic Health Record (EHR) systems allowing continuity of care across care providers, through sharing of personal medical data, which prevents errors, improves diagnosis, avoids duplication of examinations and supports the development of new services such as e-prescriptions, e-referrals, etc..
- Disease-oriented solutions for integration across the healthcare chain, and more personalised health systems and services, such as disease management services, remote patient monitoring (e.g. at home), tele-consultation, tele-care, tele-medicine, tele-radiology, etc.
- Systems for health education and health promotion of citizens-patients such as health portals, special online health information services.

In a US survey conducted by Hillestad and colleagues[7], $81 billion or more could be saved annually through improvements in healthcare delivery efficiencies by using Electronic Patient Record systems. Anthony Bower even suggests that these savings could be more than double – to $346 billion or more annually– if healthcare were transformed sufficiently into Health Information Networks supported by advanced EHRs frameworks. There is no reason to believe that similar benefit projections could not be expected in Europe.

6 Esko Aho, Creating an Innovative Europe: Report of the Independent Expert Group on R+D and Innovation Appointed Following the Hampton Court Summit

7 Richard Hillestad, James Bigelow, Anthony Bower, Federico Girosi, Robin Meili, Richard Scoville and Roger Taylor., "Can Electronic Medical Record Systems Transform Health Care?", published in Health Affairs – Volume 24, Number 5 "Promoting Health Information Technology: Is There A Case For More-Aggressive Government Action?"

## COCIR calls for actions and dialogue along 10 recommendations:

While the potential benefits eHealth could bring are enormous, a number of barriers hinder the introduction of Health IT and eHealth solutions, or prevent from achieving optimal benefits.

By clarifying the position of COCIR and its members supplying Healthcare IT solutions and services, COCIR wishes to open dialogue with policy and decision makers of Europe, and users around 10 key recommendations, and call them for actions.

1. **Define a coherent vision of eHealth at European, national and regional levels, and set long-term political goals able to deliver this vision.**

2. **Overcome eHealth governance fragmentation at all levels by stimulating 'outcomes thinking' and developing sustained investment planning and innovative business/procurement models supporting the new governance model.**

3. **Develop innovative business and comprehensive reimbursement models to introduce financial accountability across the complete care cycle (prevention to care delivery to rehabilitation to home care), through eHealth technology and re-engineered process/workflow.**

4. **Build trust among all stakeholders, including the care professionals about eHealth technology, documenting benefits and understanding technology effects through evidence-based analysis.**

5. **Support citizen/patient empowerment in line with developments for more customisation and personalised services.**

6. **Foster international standards and profiles for eHealth interoperability and leverage self-declaration of interoperability performance based on conformance testing processes.**

7. **Achieve legal certainty and a framework to support cross-stakeholder and cross-border care services and address citizen's data privacy and security requirements in a coordinated manner across the European Union.**

8. **Enable the creation of a leading and competitive eHealth market across Europe and removing administrative, financial, legal and technical barriers between EU Member States.**

9. **Strengthen the position of the European industry internationally as an exporter of eHealth cutting-edge tools, skills and knowledge.**

10. **Stimulate innovation and research and development and coordinate better research efforts at the crossroads of social, health, ICT and life science aspects.**