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The Prague Declaration on E-Health

The e-Health Conference 2009 in Prague (eHealth for Individuals, Society and Economy) has been followed by the recent of The Prague Declaration. This emphasises the progress already made in e-Health by both Member States and the European Union. It also notes that the benefits of e- Health for a safe and efficient health sector have long been recognised by expert stakeholders.

Recent initiatives from both Member States and the European Commission have been providing additional support to launch new projects, in order to keep building the momentum of healthcare IT usage and to prevent further progress from becoming compromised by legal, technical or economic barriers.

The Prague Declaration states that the benefits of e-Health applications and services must be enhanced and evenly distributed among all stakeholders, as follows:

- > e-Health for individuals
- > e-Health for society
- > e-Health for economy

Benefits for Individuals, Society and the Economy

For individuals, e-Health can increase quality and effectiveness of services. It is of immense benefit to those with chronic illnesses, and can improve continuity of care and facilitate cross-border healthcare. For society, e-Health is about interoperability, e-literacy and the accessibility of new technologies. It is also a great opportunity for research and development with high growth and innovation potential.

As far as the economy is concerned, e-Health can offer enormous savings by enhancing reach, access and effectiveness. With the potential to transform the healthcare sector, e- Health solutions can substantially change healthcare facility business models; this is extremely relevant taking into account today's fragile economic climate.

Call for Building Further on Achievements

It is widely accepted that considerable progress has already been made since the last e-Health conference in ABCDEF but the general consensus is that progress must not stop there. Following the high-level conference it has been decided to move forward and concentrate on the areas important for the full utilisation of e-Health potential. Consequently, EU Member States have been encouraged to take actions concerning telemedicine, interoperability and European cooperation including exchange of best practices.

Telemedicine Deployment

The November 2008 Communication from the Commission on telemedicine highlights the areas for improvement and provides an action plan for the full exploitation of opportunities offered by telemedicine. Both patients and healthcare professionals must build their confidence in telemedicine services.

In order to increase the level of confidence, technical issues needed to be resolved and legal clarity must be achieved. Another challenge facing telemedicine is market development. Once these challenges are overcome within Member States the market will become less fragmented and not limited to one-off and small-scale projects

Interoperability and the M403 Mandate

In order for e-Health to expand and reach its full potential a common set of standards for electronic health records, patient summaries, emergency data and other services must be developed. There is a clear lack of interoperability, which has already been highlighted in the existing EU action plan on e-Health.

An agreement on a consistent set of EU-level harmonised standards is therefore urgent and essential. Harmonised standards would facilitate access to healthcare to all EU citizens wherever they happen to work or travel. Key elements in interoperability are ontological and semantic standards as well as technological standards.

The Declaration states that the implementation of the eHealth Interoperability Standards Mandate M403 is an initiative that should be widely supported for enabling interoperability of e-Health systems and services in Europe.

European Cooperation and Exchange of Best Practices

e-Health high-level conferences are great opportunities to exchange best practices between Member States. Studies have shown that there is a large gap between Member States and between readiness and actual use of e-Health.

Although most healthcare professionals are now using IT, there is room for improvement concerning the interconnectivity of electronic networks of different health actors. Further development is therefore required.

Next Steps on the Agenda

In order to facilitate the development, implementation and usage of new e-Health services and solutions the declaration highlights three specific areas to focus on:

1. Fulfilling Existing Strategic Goals and Developing New Ones

The Member States declare their intent to fulfil the goals of the i2010 initiative, e-Health action plan and specific national strategies already in place to promote e-Health in the EU.

2. Patient Safety and Empowerment

IT usage in the health sector has already had a positive impact on patient safety. Future actions must include strengthening patient involvement through the communication of targeted patient safety policies and solving legal and ethical issues. Privacy and data protection must also be high priority, including developing a common approach to optimising existing directives on data protection and privacy.

3. Governance Structure for e-Health

Due to its increased importance and usage, arrangements for Europe-wide governance are needed. This will be discussed by all Member and partner European states in order to achieve interoperability and facilitate faster deployment so that patient safety and continuity of care is ensured within Member States as well as on a cross-border level.

Conclusion

The Prague Declaration serves as a call for action on building an e-Health area for European citizens.

Member States and the Commission must work together to build this area, which will enable all citizens access to healthcare.

National strategies must be adapted so that individuals, society and economy receive the benefits of e-Health and Member States must work together to create a European-wide governance structure to facilitate the implementation of new services as well as the removal of existing barriers.

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