



# e-health - a regional perspective

**Assembly of European Regions**

***Influence, Knowledge, Action***

“The Role of Telemedicine and Information Systems  
for Patient Safety in Europe”  
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## ...about AER

- Independent network of regions
- Founded in 1985
- 270 regions from 34 countries + 16 interregional organisations





## AER e-he@lth network

- Established in 2006
- A platform where regions can engage in **interregional cooperation projects** to develop e-health tools and where they can contribute to **EU's policies on e-health**
- **AER vision: drop the 'e' from 'e-health'**



## The example of Norrbotten (S): Anybody, anywhere, anytime

- Most sparsely populated area of the EU
- **Initial investment:** 73 million euros have been invested in the IT infrastructure (7,5 million from EU Structural funds)
- A global infrastructure for **digital services:** health, education...
- 9000 km of fiberoptic highspeed communication network: >93% of the people have a broadband connection





## The example of Norrbotten (S): a variety of services

- **Integrated healthcare system** with one single EHR system throughout the whole county
- Neonatal nursing care at home: ICT-based support of parents of prematurely born infants when they go back home
- Remote consultations with specialists via video conferencing...





## Noord-Brabant (NL): Health and social inclusion

### Noord Brabant (NL) - Smart Care programme on e-health - Ambient Assisted Living

- No primary regional competence - vision of *futureproof* care
- Independent living but also social inclusion
- 16 network projects subsidised by region to implement tested tools across region:  
social organisations + end user + commercial party





## Covasna (RO): Getting started...

**E-health is “a mandatory amendment to the healthcare system”**

- The infrastructure is here
- Modernisation is essential

### **Challenges:**

- Integrating the uninsured population and the medical service providers other than hospitals into the system
- Clarifying the access rights to the IT system
- Creating a secure network and a legal basis!



# Benefits vs costs

## BENEFITS

- Efficiency: time-saving services
- Quality
- Accessibility
- Reduction of cost and pollution
- Reduction in exposure to risk
- Better allocation of resources

## COSTS:

- Economic cost: initial investment
- Adaptation period
- Need for changes in the organisation







## Lessons learnt by the AER e-he@lth network

Adopt a clear vision

Include all  
stakeholders

Develop e-literacy,  
Build the trust!

Leadership

Change management

Stay away  
from IT fascination!

Sufficient IT infrastructure  
is a precondition

Move to integrated  
care models



## Funding e-health: opportunities at European level

❑ Cohesion policy post-2014: **be creative** and think of indirect investments:

- Innovation
- ICT
- Social inclusion
- Adaptation to change
- Education and training ...



**Health!**



❑ Active and Healthy Ageing Innovation Partnership: no money but new ideas?



## What's next?

- Negotiations for Cohesion Policy during 2012
- Start developing national strategic programmes
- Start thinking about health investments now!





**Thank you!**

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