Cross-border eHealth in the Baltic Sea Region

Healthcare delivery for the patients of today and tomorrow

Stockholm, Sweden
21-22 May 2007

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Introduction

The European regions are facing similar social, political, and economic challenges today and in the future. The health care sectors in particular have to deal with the rising demand for services in addition to limited budgetary conditions. The regions are faced with the demographic changes and the challenge of ensuring that citizens in both urban centres and peripheral areas have the same access to health care services. Thus, access to high quality health care services for all citizens, regardless of where they live, is crucial for the attractiveness and competitiveness of European regions.

The European Union supports two eHealth projects within the Baltic Sea Region: INTERREG III B programme “Baltic eHealth” and “eHealth for Regions”. Over 20 partners are participating in the two projects. The partners come from regions covering almost the whole Baltic Sea area and together they pursue the vision of “Health for all” citizens. The European Commission describes eHealth as “the application of information and communications technologies across the whole range of functions that affect the health sector”. In this sense, eHealth is an important step towards providing better quality health care services which are accessible for all citizens, both in urban centres and rural areas.

The common conference “Cross-border eHealth in the Baltic Sea Region” of the two projects will show the project results, challenges, strategies and the projects of the future. The aim is to bring together persons from the health sectors, who are involved in the health processes in the close sense, but also persons from fields such as IT, business, policy, administration, spatial planning and education.

At a glance

Monday 21 May 2007
11.30 Registration and lunch
13.00 Opening session
14.30 Coffee
15.00 Parallel sessions
  Session A – Demonstration of cross-border eHealth applications
  Session B – Regional need analysis
16.30 Fruit and soft drinks
17.00 Regional perspectives and strategies on cross-border eHealth – a political discussion
18.00 Free time
19.30 Conference dinner

Tuesday 22 May 2007
09.00 Parallel sessions
  Session C – Overcoming future barriers for cross-border eHealth
  Session D – Needs and approaches for cross-border eHealth
10.30 Coffee
11.00 Closing session
12.00 Lunch
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Monday 21 May 2007

Moderator of the conference is Dr. James Kass from the European “Telemedicine Alliance” (TMA). The Telemedicine Alliance is a cooperation between four international organisations, each of which is a leader in its particular field. The four partners are the European Commission (EC) via its Information Society Technologies (IST) Programme, the World Health Organisation (WHO), the International Telecommunication Union (ITU) and the European Space Agency (ESA). TMA is sponsored by the European Commission and led by the ESA.

11.30 Registration and lunch

13.00 Opening session

Welcome
by Daniel Forslund, Ministry of Health in Sweden

13.10 The Baltic eHealth project – an overview
by Henning Voss, Project manager, Danish Centre for Health Telematics

13.25 The eHealth for Regions project – an overview
by Henning Bruun-Schmidt, IT-Chief, Region Northern Jutland, Denmark

13.40 FutureHealth:
Crossing our Boundaries to Quality Improvement
by Zoi Kolitsi, Managing Director, Quality and e-Health General Secretariat for Public Health at the Ministry of Health and Social Solidarity, Greece

The objective of the presentation is to bring into focus the issues concerning transforming health organisations to become members of a broad eHealth community, as treated within the FutureHealth Net project, an INTEREG 3C operation, 2003-2006. The development and modernisation of healthcare practices and structures is a long-term process, and an important objective of the operation is to create a common vision of the future health care, and consequently to define approaches for acceleration of the progress in that direction. The objective is pursued by analysing the existing treatment processes, by developing new models of delivering health care, and by proposing a transformation process for organisations.

14.05 Delivering Connected Health –
The importance of cross-border eHealth
by Kevin J. Dean, Managing Director, Public Sector Healthcare, Internet Business Solutions Group, Cisco Systems

Economic and cultural pressure on health care caused by an ageing population and ever higher expectations of the quality and accessibility of care can only increase. And yet, in most countries, little priority or value is given to the collection and mobilisation of knowledge and information in managing a patient’s journey through care — and even less attention is paid to the preventive role that knowledge and information can play in addressing disease early. This presentation will highlight the very important processes, technology and cultural issues which the Baltic eHealth Exchange has explored that will support the acceleration of “Connected Health” strategies; and the potential for further exploitation of the progress made in the project to date. Kevin Dean, who is an advisor to many regional and national government departments of health, will draw on his knowledge and experience to describe how the lessons learned from the Baltic eHealth Exchange can be reused and influence health policy and economics across Europe.

14.30 Coffee
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15.00 Parallel sessions
Session A – Demonstration of cross-border eHealth applications
Remote reporting of Danish x-rays in Lithuania and Estonia
by Dr. Leslie Christensen MD, Funen Hospital, Denmark; Dr. Nomeda Valeviciene MD, Vilnius University Hospital, Lithuania; Dr. Peeter Ross MD, East-Tallinn Central Hospital, Estonia

Ultrasound diagnostics on fetal morphology – second opinion via international health data network
by Nils Larsson, Midwife, Västerbotten University Hospital; Prof. Sturla Eik-Ness MD, Trondheim University Hospital

In the eUltrasound pilot of the Baltic eHealth project the midwives in the rural areas of Västerbottan County, Sweden, get second opinions from specialists at National Center for Foetal Medicine at the University Hospital of Trondheim, Norway. In the eRadiology pilot of the Baltic eHealth project, X-rays taken at Funen Hospital in Denmark are being sent for reporting to Vilnius University Hospital and East Tallinn Central Hospital.

Cross-border service of telemonitoring in cardiology
by Werner Smidt, Managing Director, TSGZ (Telemedicine Service and Health Center) Bad Segeberg, Germany; Holger Holst, MD, Hässleholm Hospital, Sweden

Cardiovascular diseases are in many countries the chief cause of mortality and morbidity. The use of telecardiology may reduce the decisional time and the pre-hospital phase for patients. A transnational heart network with a common multilingual server could help to improve the outcome cost-effective. Another application field is the chronic heart failures, which mostly have a high rate of hospitalisation and poor prognosis. Telemonitoring could help here to detect worsening heart failure and to maintain effective therapy. A daily self-measurement of weight, blood pressure and heart rate plus the weekly 12-lead ECG record will be presented.

eHealth records for chronic patients in cross-border treatment
by Lars Sjöberg, Project Manager, Region Skåne, Sweden

The “eHealth for Regions” project partners developed a “personal medical information stick” for patients with chronic diseases, who are often travelling in European neighbour countries for business, vacancies or other reasons. The USB stick contains medical history, administrative data, diagnostic documents and information. The pilots were running in Norway, Finland, Sweden, Denmark, Germany, Lithuania and Poland. The results and perspectives will be presented.
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Session B – Regional need analysis

**eHealth acceptance by patients and the public**
by Thorsten Beck, Project Coordinator, AOK Schleswig-Holstein, Germany

**eHealth acceptance by nurses and doctors**
by Helli Kitinoja, Manager of International Affairs, Seinäjoki University of Applied Sciences, Finland

**eHealth acceptance by decision makers**
by Fareed Rehan, MD, AOK Schleswig-Holstein, Germany

In 2006, a questionnaire survey was done in five partner countries of the eHealth for Regions project (Germany, Sweden, Poland, Lithuania, Finland). In each country about 500 questionnaires were sent to healthcare professionals, decision makers, the public and patients. The aim of the survey was to assess and analyse the overall situation about eHealth acceptance and awareness in the Baltic Sea region. The common and regional results will be presented.

**The importance of healthcare for settlement preferences – a study from Denmark**
by Jens Sørensen, Center for Rural Research and Development, Denmark

How can eHealth benefit rural areas? – a literature study from Norway
by Thomas Rosenlund, KITH, Norway

**Attitudes towards eHealth among future healthcare workers in Sweden**
by Prof. Göran Westman MD, Umeå University, Sweden

One of the major results of the Baltic eHealth project is the Rural eHealth report. The main research question of the report is if the introduction of eHealth services in rural areas can counteract the emigration from rural areas. To address this question studies have been carried out in Denmark, Norway and Sweden. In Denmark rural and urban citizens have been surveyed about their settlement preferences. In Sweden future healthcare workers have been asked about their attitudes towards eHealth and in Norway a literature study of successful eHealth projects has been performed.

16.30  **Fruit and soft drinks**

17.00  **Regional perspectives and strategies on cross-border eHealth – a political discussion**
with four regional politicians from the Baltic Sea Area moderated by James Kass

18.00  **Free time**

19.30  **Conference dinner**
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Tuesday 22 May 2007

09.00 Parallel sessions

Session C – Overcoming future barriers for cross-border eHealth
The Baltic Healthcare Network – an important step towards cross-border interoperability
by Claus Duedal Pedersen, Danish Centre for Health Telematics, Denmark

Legal implications of cross-border eHealth collaboration
by Leif Erik Nohr, Norwegian Centre for Telemedicine, Norway; Manolis Nymark, Socialstyelsen, Sweden

Organisational and financial challenges in eHealth services
by Line Linstad and Elin Breivik, Norwegian Centre for Telemedicine, Norway

Technical, legal, organisational and financial challenges addressed in practise – an eHealth collaboration contract
by Dr. Peder Jest, Medical Director, Funen Hospital, Denmark

The most important result of the Baltic eHealth project is the establishment of the Baltic Healthdata Network, which gives more than 200 hospitals from the Baltic Sea region the technical possibility to collaborate with each other. Thereby a major technical obstacle is removed. However also non-technical obstacles to cross-border eHealth services exist and need to be addressed. Guidelines on how to overcome some of these legal, organisational and financial obstacles are being presented and discussed in this session. In addition an example of how the guidelines have been implemented in a business contract for a concrete remote radiology reporting collaboration between Denmark, Lithuania and Estonia is presented.

Session D – Needs and approaches for cross-border eHealth

Cross-border collaboration on health – motives and eHealth solutions
by Owe Svensson, Region Skåne, Sweden

Acute ECG-diagnostic over phone – concept and life demonstration
by N.N.

The Danish eHealth Portal – how it can be used across borders
by Jens Grønlund, Region Northern Jutland, Denmark

eHealth for regions has worked on describing the main incitements for cross-border cooperation. The distribution of medical specialists is uneven, a lack in one place and a surplus in another. eHealth solutions can bridge distances to distribute the competence more evenly. Specialised centres that treat rare cases need large uptake areas. Some uptake areas are crossing borders. The same condition is present for very expensive equipment that for economical reasons can be set up only at few places. Collaboration between referring health service providers and the medical teams at the specialised centres is facilitated by eHealth. These and other examples of cross-border cooperation will be presented as well as typical technology used in cross-border applications.

10.30 Coffee
11.00 Closing session
Cross-border eHealth – just for enthusiasts?
or – the value for citizens
by Mats Larson, Senior Business Development Director, Oracle Healthcare

Cross-border eHealth has been developed through projects and pilots during the last 10 years. In the Baltic Sea region we have seen a large number of, more or less, successful projects. They have covered anything from eye-care to radiology and joint clinical conferences. With this multitude of examples of how information can be communicated and processed – are we ready to finally draw any conclusions and/or make any clear decisions? Will the next 10 years only show an increasing number of projects and pilots, while practical and clinical deployment rests at a minimal level? This presentation will comment on aspects of the history of cross-border eHealth in the Baltic Sea regions and suggest some further steps to move closer to practical use and benefit for citizens.

11.30 Conclusions
by Dr. James Kass, TMA

The moderator of the conference will close the conference by presenting a summary of the main aspects, challenges and recommendations for the future regional, cross-border and transnational eHealth activities.

12.00 Lunch
**Baltic eHealth**

*Empowering regional development in the Baltic Sea Region*

The overall goal of the project is to bring about fully developed eHealth solutions that can be directly put to use by health services throughout the Baltic Sea Region.

**Ten players in five countries**
Ten players in Denmark, Norway, Sweden, Estonia and Lithuania are participating in the Baltic eHealth project. They each have their own core area; some are clinical partners that are familiar with digital healthcare communication, while others are experts in regional development.

**eHealth**
Test and examination results in the form of image and sound recordings are communicated digitally, typically from the small local hospital to specialists at a university hospital. In this way, the health professionals at the local hospital can obtain an expert assessment of the results. Examples of communication topics in eHealth are digital images as ultrasound scans and X-rays, teledermatology, telecardiology and telepsychiatry.

**Baltic eHealth**
The project will establish a Baltic Healthcare Network by connecting existing national and regional healthcare data networks in the participating countries and carry out full-scale eHealth trials within the fields of radiology and ultrasound. Furthermore, during the project period an analysis of how eHealth most effectively can combat rural emigration will be conducted.

**The result: An improvement of quality and regional development**
Regardless of whether the patient can undergo a complete treatment process at the local hospital or may have to be transferred to another hospital, eHealth may mean that quality assurance of the decisive initial action takes place. The quality of healthcare provision can be raised, and this may be the factor that prompts a person to live in an outlying area.
eRadiology
Following a traffic accident near Svendborg in Denmark, a person is admitted with a severe fracture of the pelvis. The rural Svendborg Hospital takes digital images of the hip and pelvis. Due to a lack of specialists the images are transferred for reporting to university clinics in Vilnius or Tallinn and the initial feedback from the specialist unit is that a CT scan needs to be done.

After viewing the result of this scan, the doctor in Vilnius or Tallinn decides that the patient needs to be transferred to a trauma centre at the nearby Odense University Hospital. All the patient’s digital test and examination results obtained in digital form are now sent to the trauma centre.

This scenario is made possible by the Baltic Health Network and the setup is being tested during the Baltic eHealth project.

eUltrasound
In many countries it is common practice to offer an ultrasound scan at 18 weeks of pregnancy. The objective of this scan is to assess the estimated day of delivery, locate the placenta, detect twins and triplets, but also to scan for fetal abnormalities.

Concerning these it is frequently needed to have a second opinion from an experienced colleague or to establish communication between two experienced professionals regarding a very particular case. In such a situation, eHealth can be of assistance since specialists in obstetrics and ultrasound often are situated at central hospitals in urban areas and not at a local rural hospital. Thus, the pregnant woman will receive better and faster information thereby improving the quality of care for her and her unborn baby. This scenario is tested via the Baltic Health Network between Umea University Hospital in Sweden and Trondheim University Hospital in Norway.

eHealth for Regions

1 Tønsberg/Vestfold
2 Seinäjoki/South Ostrobothnia
3 Kaunas
4 Vilnius
5 Gdansk
6 Lebork
7 Segeberg
8 Kiel
9 Flensburg
10 Land of Schleswig-Holstein
11 Region Skåne
12 Viborg
Imagine …
… you are travelling on business or as tourist to another country in the Baltic Sea region and suddenly you need urgent medical treatment. Today the necessary information for the local medical doctors about your clinical history is not available right away across national borders. To improve such medical care of cross-border commuters and tourists the Interreg III B project “eHealth for Regions” aims at utilising existing e-health processes. Thereby the partners contribute to optimise the cross-border medical care and to improve the quality of medical care and raise patients’ quality of life in the European Union in a more general perspective.

Move the information
The project partners advance the integration of Information and Communication Technology in healthcare structures and processes in the partner countries and across borders. According to the basic idea to “move the information and not the patient” eHealth allows all involved actors in healthcare and patients to connect with each other over distances in a more cost-effective way.

Modernisation of the system
The project is structured into four work-packages Structures and processes (WP1), Network and business model (WP2), Technical aspects (WP3) and Pilot implementation in the field of telecardiology (WP4). Within the framework of “eHealth for Regions” the partners exchange knowledge and best practice experiences, develop transregional strategies, test and implement eHealth technologies. The findings and solutions can be transferred to other European regions and contribute to the modernisation of European health systems.

Political support
Since the project start in June 2004, the 17 project partners from regions covering almost the whole Baltic Sea area agreed to cooperate in the fields of telecardiology, eRadiology and cross-border patient information exchange. As support of the project “eHealth for Regions” a political strategic board was formed in November 2005. This board consists of representatives from the highest political level in the partner regions in eight Baltic Sea countries. The members of the political strategic board decided already in 2005 to strengthen the cooperation between the Baltic Sea Regions in the healthcare sector.
Registration

Stockholm 21-22 May 2007

Participant fee:  150 Euro
Registration and hotel booking: www.eHealthConference.info
The conference will be held at: Sheraton Stockholm
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