

Making the Grade – eHealth, Better Education and Understanding: what every citizen deserves

EKTG Symposium at the House of Lords, Tuesday 25 October 2016

Baroness Greengross opened the symposium by welcoming the participants and outlining the problems of an ageing society and the need to provide cost-effective services, including open access records, against a background of austerity and Brexit.

She passed the chair to **Peter Saraga** for a series of brief presentations. **Ron Summers** briefly outlined the aims of EKTG, the terminology of eHealth and the economic case for eHealth. He then reported on the two EKTG sessions from the AAL Forum in St. Gallen, emphasizing awareness creation and education and training, concluding with the next steps towards curriculum design for all stakeholders.

Clayton Hamilton (from WHO) discussed the strategic value of eHealth as well as the danger that eHealth could increase digital exclusion and the equity gap. He recognized the patchy provision of eHealth education for students and the lack of confidence felt by many healthcare professionals with eHealth. He highlighted the 2015 WHO report on eHealth and argued for more education and training at all levels, promising that WHO was prepared to work with all parties to improve the situation.

Peter Wintlev-Jensen (DG CONNECT) remarked upon the multiple innovations taking place in the technological, medical/social, organizational, political, business and service domains and raised the problem of how to manage and benchmark innovation. For him, the key issues were: empowerment of consumers, training of professionals and support for decision-makers. DG CONNECT is working on a blueprint for scaling-up successful pilot projects.

Ain Aaviksoo (Ministry of Social Affairs, Estonia) reported on his experience in Estonia. He argued that returning control to consumers requires a network of shared information while passing access and control of their medical data to individuals, which in turn requires a legal framework. In this, he argued, one size does not fit all.

Donald McLaughlin (CISCO) emphasized the need to use technology to improve productivity in healthcare and to address the problems of coordinating medical and social care. He looked towards the Internet of Things and environmental monitoring of individuals (e.g. movement monitors) for benefits in this area.

Mark Pearson (Surrey County Council) contrasted the economic challenges of supporting an ageing population with the local opportunities for innovation for IT suppliers in Surrey. He discussed the devolution of budgets and control to local government and the need for digital roadmaps to guide development.

Ron Wheatcroft (Swiss Re) described the risks to individuals of the lack of insurance cover for periods of long-term sickness and the role of the insurance sector in supporting people getting back to work. He emphasized the role of employers and the advantages of early intervention.

The presentations were followed by a series of short practical experiences from a panel of discussants, chaired by **Peter Saraga**. **Karen Taylor** (Deloitte) emphasised the barriers to sharing healthcare data, including the lack of integration and misaligned funding incentives, before turning to recent technological developments, such as apps. **Pranoti Shah** (First 4 Health, Newham) briefly described the benefits achieved in terms

of reduced administrative costs and improved patient satisfaction from implementing patient online access for appointments, repeat prescriptions etc. **Raguraman Padmanabhan** (East London NHS Foundation Trust) discussed the Newham model for integrated care which emphasizes patient-centred self-management using eHealth technology. He pointed to the cost savings achieved and the reduced hospital admissions.

Neil Bellamy (RBS) talked about the role of the financial sector in supporting innovation in healthcare, which represents a massive market for start-ups and digital innovation. **Chris Warkup** (KTN) discussed the problems encountered by Innovate UK in investing in healthcare innovation including organizational change, perverse incentives and the lack of knowledge and awareness. **Christine Brockes** (University Hospital Zurich) described the telemedical consultation services for heart patients and the need for such services to help patients interpret the mass of individual medical data made available. She described a 7-day telemedicine training module developed by the University of Zurich for students which has been accepted as part of their medical training.

The various presentations were followed by a wide-ranging and vigorous open debate with numerous comments from the floor. Issues raised included:

- Equality of access
- Need for guidelines based on evidence
- The role of evaluation and evidence in scaling-up projects
- The need to re-align incentives so that benefits appear on the correct budgets
- How to promote and fund smart homes for the elderly and disabled
- Opportunities for co-design with the elderly
- The role of eHealth in reducing falls
- The role of wearable technology
- The problem of the 'worried well' and the need to educate the wider community
- Interoperability and infrastructure building for sharing data
- Data protection aspects of sharing data for research and 'informed consent'
- The need for educating decision-makers concerning costly long-term projects
- Awareness of occupational therapy professionals
- The need to change the attitudes of over-worked GPs to data sharing
- The problems and opportunities in creating a market for eHealth

Maggie Ellis summarized recent developments in eHealth awareness, education and training, literacy, access and innovation, relating these in particular to the morning's discussion:

- Defining the role of the decision makers
- Defining the role of the professionals and users
- Clarifying marketplace opportunities
- Meeting legal and ethical requirements
- Examples - existing Medical and Nursing Courses
- EKTG are ready with a Consortium required for education and training for an e-health -

The Next Steps for development

- Curriculum design for e-health delivery
- For all stakeholders
- At various locations, where you want it
- With an excellent Consortium
- By various modes of teaching and learning
- Building real Innovation for the future

Maggie Ellis called for everyone present to continue their efforts to improve the situation, especially in the UK. Peter Saraga thanked all the speakers and discussants for their contributions and especially to Baroness Greengross for her continued support in this topic. Maggie Ellis was thanked by Baroness Greengross and Peter Saraga on behalf of the symposium for all her work in promoting eHealth and in arranging the symposium.

Full Slide presentations from this event can be found on our website :

<http://bit.ly/EKTG2510>

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