A COCIR-VOKA PARTNERSHIP ON mHEALTH
towards integrated care
The European healthcare systems are set for substantial changes. Our healthcare systems are facing the challenge of high costs and fragmentation, often resulting in poor medical outcomes and unjustified clinical variability in medical practice and decision making across care providers. As a response to these challenges, most European health systems are gradually transitioning towards integrated care models that revolve around multi-agency and multi-disciplinary collaboration to meet the medical, social and practical needs of each individual in a coordinated way.

Indeed, providing access to high quality care at contained costs can only be achieved if current care delivery mechanisms evolved to more patient-centric care models, where health and social care providers collaborate and share patient data, knowledge and insights. The concept of Integrated Care – care that crosses the boundaries between hospital, primary care, community and social care – starts to be recognized as the most promising concept to assure the sustainability of the healthcare systems in Europe and worldwide. Providing more access to better and safer care at contained costs can only be achieved through transforming the current care delivery mechanisms around a more patient-centric approach encompassing health and social care, where care providers collaborate and share patient data, knowledge and insights. In this new landscape, technology is call to play a critical role in the deployment.

As the European leading industry voice in the field of eHealth, comprising imaging IT, hospital IT, HIE/EHR, analytics/population health management, telehealth and mHealth, COCIR has been actively working to create framework conditions that favor the uptake of eHealth services to support the delivery of integrated care and has provided its recommendations to advance towards digitally enabled integrated care strategies in COCIR’s 2015 eHealth toolkit report. (http://www.cocir.org/uploads/media/15013.COC_2.pdf) It is difficult to imagine how integrated care can be delivered in the absence of supporting eHealth platforms and applications.

The upcoming era of integrated care will certainly require care providers using eHealth services to collaborate and share information, knowledge and insights from day-to-day operations. The information should focus on continuous care, disease prevention and disease management, and should cross organizational, professional and geographical boundaries. This journey of transformation is however just at the beginning. The underlying eHealth technologies that will support integrated care need to reach market maturity. Reimbursement and procurement strategies will also need to be revisited to effectively integrate eHealth services into daily clinical practice.

We are convinced that this multi-stakeholder initiative will serve as a catalyst for regional decision-makers to put in place incentives and appropriate policy measures required to accelerate mHealth adoption in Belgium and boost large-scale deployments.

RUDY MATTHEUS
Chairman of the VOKA healthcare community

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1. introduction

Better integrated care services, using eHealth solutions to share information and collaborate across the care continuum, is increasingly viewed as a practical way to tackle some of the most pressing challenges faced by European health systems. Integrated care consists of multi-agency and multi-disciplinary collaboration, focused on meeting the medical, social and practical needs of each individual in a coordinated way. It is enabled by eHealth services which may include risk stratification, needs assessment, decision support, care planning, information sharing and care team collaboration tools, as well as online services to help citizens participate fully in their care plan. The objectives of integrated care are to measurably improve the experience and quality of care, whilst reducing the demand on costly and resource-intensive emergency and hospital services.

Put more concisely, integrated care could be summarized as prevention, production, promotion and participation. This means building health systems on integrated care models, including the governance, financing, organizational, service delivery and clinical levels, and designed to create a continuum of care from screening, diagnosis, treatment, care, rehabilitation and health promotion, including monitoring and continuous patient care management, especially for chronic conditions.

These functionalities go beyond the capabilities of medical and social record keeping systems, and will require investment in new features such as information portals, data aggregation platforms, shared care systems and service-based collaboration platforms. These in turn need to support new roles, methods of working and care pathways, achieve the goals of integrated care.

Countries and regions, who have already invested or are investing in building blocks of eHealth, such as unique citizen or patient identifiers, secure messaging networks, electronic patient records and standards to improve interoperability and semantics, are clearly in a better position to deliver integrated care for their citizens.

In recent years, mHealth has emerged as a key component to deliver healthcare and innovative eHealth services that builds on the ubiquitous connectivity provided by mobile networks. The proliferation of smartphones and tablets, the increasing number of connections to the internet through mobile devices, the wealth of health apps available on the market is increasingly attracting the attention of patients, healthcare professionals, the business community, policy makers and regulators.
2. the potential of mHealth

mHealth will change your life across many areas of prevention, wellbeing, health and healthcare. Imagine the year 2020. In the framework of integrated care, your wellbeing is permanently monitored, without you noticing and with no invasion of privacy. No Big Brother looking over your shoulder, but automatically, by means of sensors, apps, online applications and so on. Imagine that the smart clothes you are wearing can sense an impending heart attack. Imagine you are administered the right medicine at the right time. What if technology could be used to coach you to live healthily, in the best way possible? The dream of a distant future, you might say. Well, the technology exists today, but it is still wired to fragmented health systems that were built to treat and cure acute conditions. These days, more and more people are experimenting with mobile Health, or mHealth, as we see in the Quantified Self movement, by ‘self-tracking’ their activity, their sleep or their moods, for example.

In other words, mHealth enables a new approach to “prevention” and “treatment”. This is not a ‘dehumanising’ future, but the opposite: greater contact with your doctor, nurse or coach, who can zoom in on your needs with the help of technology.

With the patient consent, care professionals and family members can track their needs at every moment of the day, decide who does what and when to keep them fit and healthy, or intervene if needs be. mHealth enables the patients’ involvement in the care process, and allows them to actively contribute to improve their own physical, mental and social wellbeing, irrespective of his socioeconomic background.

It is important that mHealth play its part in making this a viable future within the next few years, based on your needs and preferences. It is extremely important for our society, that we utilise mHealth to its full potential. This is because we are all getting older and our care needs and care options are growing. This is fantastic, but the price is gradually increasing above our collective level of affordability. This is why every nation is currently looking for new and better ways to organise prevention, wellbeing and care, in a cost-effective way, for the individual and for society as a whole.

mHealth plays a key role to find a solution to this pressing question, because its potential is “transformative”. It transforms care and wellbeing in a way that gives us higher quality at a lower cost in the medium term. Not only that, but mHealth provides answers in relation to the life quality and long-term care needs of people with one or more physical and/or psychosocial disabilities. This is where the costs are highest, but where the room for improvement is greatest in our healthcare system.

“  mHealth transforms care and welfare in a way that gives us higher quality at a lower cost in the medium term ”

With help from mHealth we can keep people healthier, which benefits the economy by ensuring production and consumption. mHealth is one of the spearheads of the Belgian and Flemish healthcare economy as illustrated by the number of innovative projects and products in this area.

Equally, just as the existence of technology players like NXP, Real Dolmen, Niko, etc., generate opportunities, new businesses are also able to realise their potential through, for example, Internet of Things applications.

However, when it comes to rolling mHealth out to the public and gaining all the benefits in your healthcare package, a piece of the puzzle is still missing. In this country we often suffer from “small pilot study syndrome” as the EU aptly calls it. The Belgian healthcare system has made very little use of mHealth to date, despite its potential. It is crucial then that we identify the obstacles and turn them into opportunities.
Voka’s Health Community is an open innovation network made up of users, enterprises, care providers and academics who come together to reflect and work on care innovation in Flanders. Players from the profit and non-profit sectors meet to discuss and work on specific innovations. The Health Community is made up of four theme groups: mHealth, housing and care, prevention and logistics.

In recent months the Voka Health Community mHealth theme group has looked into needs and prospective solutions involving mHealth with a view to:

- staying fit and healthy: applications to get people in a healthy condition or keep them that way
- finding cures: applications to diagnose, monitor and/or treat people who are sick
- better coping with illness: applications to improve or prevent a deterioration in the life quality of people with a chronic illness

A multidisciplinary group of stakeholders, from the profit and non-profit sectors has developed a vision for mHealth that addresses the following questions:

- What are the needs of patients / clients as end users, today and in the future, and how do they link to mHealth? What are the possibilities for innovation?
- How do we bring them to a high standard in an affordable way?
- What state action or changes in policy would be needed to create these incentives?
- What can we do and what are we prepared to do ourselves, from every stakeholder’s perspective?

“Our care system has made very little use of mHealth to date, despite its potential”
3. the vision of a multidisciplinary group on mhealth in belgium: a voka initiative

The Belgian health system needs to overcome three fundamental challenges:

1. Guarantee and increase the quality of care;
2. Aim for greater efficiency in the provision of care and an effective deployment of resources;
3. Guarantee universal access to care for every citizen.

Our vision has been developed from a forward looking perspective: we haven’t been put off by practical or regulatory barriers in place today, but have looked ahead, ignored the existing frameworks and gone all out for cooperation between actors from the profit and non-profit sectors. All members of Voka’s Health Community see the added value of this collaboration; the various care providers, users, enterprises and knowledge centres share a need to define and implement collective, specific, integrated solutions. Our proposals take account of all generations, young and old.

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We believe that specific actions need to be taken within each of the following six building blocks:

1. Data protection, privacy and the use of big data
2. (Inter)national legislation and liability
3. Quality, accessibility and patient security
4. Technology and interoperability
5. Financing and business modelling
6. mHealth supporting policy framework
The Voka Health Community proposes the following recommendations to accelerate the uptake of mHealth and the transition to affordable and integrated care models in Belgium:

- **Support** the widespread implementation of mHealth, given the demonstrably high added value that prevention, wellness and care bring to quality and affordability
- **Tackle** this in an effective and targeted manner
- **Leverage** the level of local studies by encouraging cooperation between policy, knowledge centres, care sector and industry
- **Create** a framework (legislation, methodology, agency) for research in mHealth and for the quality assessment of mHealth, based on evidence
- **Fix** the liability for mHealth users: professionals, patients, relatives
- **Implement** the rules on data protection and privacy in a way that they don’t hamper innovation
- **Untap** the potential of big data
- **Ensure** generic applicability and interoperability
- **Place** the quality, security and accessibility of mHealth centre stage
- **Ensure** that added value also translates into public financing
- **Include** mHealth in the wider reform of the healthcare payment system, which is a pressing matter this legislative term (backpack model, fixed pricing, quality incentives and network incentives)
- **Avoid** the fragmentation of innovation efforts and support
- **Reform** the collective consultation model used in policy decisions to create a win-win situation for all

We strongly believe that mHealth should be fully integrated into routine care. To do so, there are three actions that should to be taken in the short run:

1. **Recognition, integration and reimbursement of mHealth services and products.** All prevention and care delivered safely, effectively and remotely must be recognized, included in regular care delivery and be reimbursed. Moreover, the legal framework must develop and guarantee privacy for all and responsibility at every link in the chain.

2. **Consistent cooperation between government, knowledge centers, industry and the care sector.** This calls for an helix cooperation model where each stakeholder does what they are better at doing: government provides overall support, knowledge centers perform management and analysis and there are real free market processes for industry innovation and growth. The Scandinavian model and its achievements can be of inspiration here.

3. **Effective use of Big Data to enable data driven care.** Subject to the adequate privacy safeguards, the relevant data must be made readily available to health and social care providers, researchers, industry and government policy officials. This can result in better, more cost-effective care and accelerate biomedical research.

mHealth strengthens the universal values of solidarity in care, equity in financing and access and quality of service. We see this document as a call, as an initial step towards specific consultation and as a demand for specific responses from the newly elected policymakers. But it is also a call to other stakeholders in the field: let us come together to turn these ideas into reality.

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Cooperation between extremely diverse stakeholders is essential in a forward looking care system
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Further discussion will continue to take place within the Voka Health Community. In the months to come Voka will further refine its ideas on mHealth and engage with other interested parties in this ongoing dialogue. Specific actions and projects might be further developed in order to help deliver mHealth in Belgium.
Voka Health Community is a partnership between entrepreneurs, patient organizations, knowledge centers and health care providers. It is hosted by VOKA, the association of the Flemish chambers of commerce. The communities’ mission is to breakdown the wall between profit and non-profit, to speed up the implementation of innovation, and to foster the white economy in Flanders. Actually 150 members are active in networking, information exchange and creating new business opportunities.

COCIR is the European Trade Association representing the medical imaging, radiotherapy, health ICT and electromedical industries. Founded in 1959, COCIR is a non-profit association headquartered in Brussels (Belgium) with a China Desk based in Beijing since 2007. COCIR is the leading EU Industry Voice in eHealth and is unique as it brings together the healthcare, IT and telecommunications industries. COCIR also acts at International level via BIAC and DITTA. Visit www.cocir.org