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DRAFT REPORT

on the eHealth Action Plan 2012-2020 - Innovative healthcare for the 21st century
(2013/2061(INI))

Committee on the Environment, Public Health and Food Safety

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CONTENTS

	Page
MOTION FOR A EUROPEAN PARLIAMENT RESOLUTION	3
EXPLANATORY STATEMENT	6

MOTION FOR A EUROPEAN PARLIAMENT RESOLUTION

on the eHealth Action Plan 2012-2020 - Innovative healthcare for the 21st century (2013/2061(INI))

The European Parliament,

- having regard to the Commission Communication of 6 December 2012, on the ‘eHealth Action Plan 2012-2020 – Innovative healthcare for the 21st century’ (COM (2012) 0736),
 - having regard to the Commission Communication of 6 April 2004 on ‘e-Health – making healthcare better for European citizens: an action plan for a European e-Health Area’ (COM(2004)0356),
 - having regard to the Commission Recommendation of 2 July 2008 on cross-border interoperability of electronic health record systems (2008/594/EC),
 - having regard to the Commission Communication of 4 November 2008 on ‘Telemedicine for the benefit of patients, healthcare systems and society’ (COM (2008)0689),
 - having regard to Directive 2011/24/EU of the European Parliament and of the Council of 9 March 2011 on the applications of patients’ rights in cross-border healthcare,
 - having regard to the EU study ‘European countries on their journey towards national eHealth infrastructures’,
 - having regard to Article 48 of its Rules of Procedure,
 - having regard to the report of the Committee on the Environment, Public Health and Food Safety and the opinions of the Committee on the Internal Market and Consumer Protection, the Committee on Regional Development and the Committee on Women's Rights and Gender Equality (A7-0000/2013),
- A. whereas access to high-quality healthcare is internationally recognised to be a fundamental right;
- B. whereas Article 168 of the Treaty on the Functioning of the European Union stipulates that Union action must complement national policies and be directed towards improving public health, preventing physical and mental illness and diseases and obviating sources of danger to physical and mental health;
- C. whereas, therefore, the European Union’s action in the field of eHealth consists of helping Member States to coordinate their efforts in this area and supporting their actions in fields where its intervention can provide added value;
- D. whereas the organisational and cultural approaches to the way healthcare is delivered vary from one Member State to another;
- E. whereas there has been an increase in the mobility of the general public within the

healthcare systems of their own countries, and it is now also possible for them to undergo medical treatment outside their country of residence;

- F. whereas there is little benefit to patients in unnecessarily repeating clinical tests when the results of these already exist in their medical records and can be accessed by healthcare professionals treating them in other places;
 - G. whereas ICT has developed to such a point that it can be applied in eHealth systems and this has met with success in various EU Member States;
 - H. whereas there is a need for ICT specialists, consumers, healthcare professionals in general – and doctors in particular – and the public health authorities to work together in this field;
 - I. whereas legal and data protection considerations should constitute a priority;
 - J. whereas it is necessary to standardise the system technology used in the various Member States, in order to guarantee its effectiveness;
 - K. whereas healthcare professionals should be provided with on-going training in the use of the ICT applied in healthcare systems;
 - L. whereas importance should be attached to databases and to where and how they are kept;
1. Welcomes the Commission Communication on the ‘eHealth Action Plan 2012-2020: Innovative healthcare for the 21st century’ and urges it to continue working towards the wholesale adoption of e-Health throughout the EU;
 2. Recommends that the necessary steps be taken to ensure that having access to and use of eHealth services benefits all EU citizens equally, without this becoming a source of social inequality;
 3. Urges the Commission to continue working both with healthcare professionals and with patients associations and the competent Member States authorities when framing its policies;
 4. Calls on the Commission to bring forward legislative proposals to fill the legal gaps which currently exist and ensure effective implementation of the eHealth system across the EU;
 5. Stresses the need for doctors and other healthcare professionals to be provided with special training in eHealth;
 6. Recommends that the opinions of doctors and other healthcare professionals, along with those of patients associations, be taken into account not only in the development of eHealth applications but also in their evaluation and monitoring;
 7. Calls on the Member States and the Commission to run eHealth awareness and training campaigns aimed at the general public. These campaigns should be tailored to the social groups they target, since public information and active public participation are key to the effective development of new healthcare delivery models;

8. Calls on the Member States to share their experiences, knowledge and good practices and to work among themselves and with the Commission to increase the effectiveness of eHealth systems;
9. Urges the Member States to step up cooperation on eHealth at a national and regional scale and at a cross-border level, so that countries further advanced in this field can communicate what they have learned to those with less experience;
10. Urges the Commission and the Member States to continue working through pilot projects, such as the epSOS project, to develop pan-European interoperability;
11. Urges the Commission and the Member States to continue their efforts to implement Article 14 of Directive 2011/24/EU on the application of patients' rights in cross-border healthcare, which is aimed at establishing an eHealth network;
12. Urges the Commission and the Member States to work together to pinpoint eHealth tools and models to support the implementation and development of Article 12 of Directive 2011/24/EU, which deals with the development of European reference frameworks;
13. Urges the Commission and the Member States to bring forward legislation on the legal and data protection considerations relating to eHealth;
14. Points to the need to use international standards both in the modelling of information and in its exchange;
15. Emphasises the need to ensure the technical standardisation and interoperability of European healthcare systems;
16. Stresses the need to step up research into eHealth systems, but without research expenditure impacting directly on the cost of the service provided;
17. Calls for the development of eHealth tools not to centre solely on technological and financial considerations, but to be based on the effectiveness of the tools and their worth, and for the overriding aim of their development be the best interests of patients;
18. Instructs its President to forward this resolution to the Council and the Commission, to the Committee of the Regions and to the Member States.

EXPLANATORY STATEMENT

eHealth provides a means of improving the quality and effectiveness of healthcare in the 21st Century and of making it increasingly universal.

There is a solid potential market for eHealth. The world market in telemedicine was worth USD 9 800 million in 2010 and USD 11 600 million in 2011, and is forecast to continue expanding to USD 27 300 million in 2016, at an aggregate annual growth rate of 18.6 %.

Although access to high-quality healthcare is recognised to be a fundamental right, health systems within the EU are currently facing major challenges in the form of increased demand for health services arising from the ageing of the population, the impact of chronic diseases, the mobility of patients and healthcare professionals, heightened public expectations as regards the quality of healthcare and increasingly tight healthcare budgets.

eHealth can go some way to meeting these challenges, as it provides a way of improving access to healthcare services for people living in remote and sparsely-populated areas, of improving working conditions, reducing waiting times and, most importantly, of helping to ensure the provision of reliable, effective and high-quality healthcare.

However, in order to achieve those objectives, healthcare service providers need to work with one another, and beyond the areas for which they are responsible and linguistic boundaries, to provide high-quality services centring on patient safety. This calls for technical standardisation, interoperability of European healthcare systems and the introduction of certification and authentication schemes applicable across the EU.

In order for the general public and healthcare professionals to have faith and confidence in the benefits of eHealth applications, these must be given legal certainty. Data protection, confidentiality, privacy and responsibility are just some of the issues that need to be resolved if eHealth services are to be successfully introduced.

It is vital for the Member States to share their knowledge, experiences and good practices and to work among themselves and with the Commission to increase the effectiveness of eHealth systems. eHealth should become an effective reality, and pioneering Member States can help achieve this goal by sharing their experiences with those which are not.

It is imperative that the opinions of doctors and other healthcare professionals, and of patients associations, be taken into account prior to and following the development of eHealth applications. They are the ones who will use these applications, which means that they must not only be convinced of their worth, but also know how to use them, and that all the requisite information must be made available, in both the public and private sectors, and tailored in a clear manner to the field to which it relates.

Last but not least, it is essential that these projects be developed with the best interests of patients in mind since, at the end of the day, the prime objective is to improve the quality of healthcare delivered to the public in the EU, without overlooking the cultural differences that exist between Member States in the field of healthcare.