

## Europeanisation - eHealth Services Standards of Care

Paul De Raeve, RN, MSc, MStat, Phd

The current European economic and societal challenges are to strengthen EU Member States cooperation, in the hope of finding common solutions to common challenges. The healthcare sector is one of the most sensitive policy areas, due to the subsidiarity principle, with the EU institutions embarking on innovative ways to reform healthcare systems. The process of “Europeanisation of domestic policies” has always been challenging (Radaelli, 2004), especially now that austerity measures are testing solidarity, equity and even membership to the European Single Market. Although national governments have always shaped Europeanisation by deploying strategies that reflect their own preferences and interests, thus influencing the formulation and definition of EU institutional functioning and policy-making (Börzel, 2012), a united European voice to face global challenges is needed to keep peace and prosperity high on the political agenda.

In this context, the civil society has always been engaged in ensuring good governance, being the policy actors countering the influence of the state and the liberalisation of the services market. In contrast, nurses have always considered free movement as an opportunity to strengthen public health services. Despite the evidence showing that the differences among Member States are so huge that it is difficult to talk about a European health framework (European Social Observatory, 2010), it is precisely at this challenging economic, social and political time that national governments should go beyond, sharing good practices and reaching a common understanding on addressing key healthcare challenges.

Take the example of the nurses going beyond their limits of health service delivery, and daily facing the dilemma of providing high quality of care in an environment obsessed with quantitative data to inform costs cutting decisions. As such, nurses proactively identified innovative ways of re-engineering their local healthcare systems in order to provide the level of care needed to meet the increasing societal challenges (European Commission, European Innovation Partnership on Active and Healthy Ageing, 2012). It is therefore crucial to upscale innovative models of integrated care

throughout the EU, scaling up what already exists and boosting the deployment of eHealth services. Cost-effective, high quality and safe regional and national healthcare systems are depended upon nurses developing and implementing high-quality ICT-based solutions in the process of care (Sheikh et al., 2011).

Evidence shows that eHealth services are paramount in managing the current challenges through supporting a person-centred and integrated care partnership. Self-directed care must be ensured and integrate carers together with a decreasing health and social care workforce managing the delivery of patient-centric care (Kelly, 2005; WHO, 2010; EuroStat, 2012). Therefore, the EFN argues it is socially and economically unsustainable to maintain the traditional vision of healthcare delivery, focusing on a curative and medical approach. An urgent shift towards delivering a more preventable, efficient and integrated care is urgently needed without jeopardising subsidiarity.

Prevention is considered a key element in personalised healthcare implying the adoption of citizen-centric approaches. ICT based services have been developed to support prevention in healthcare and there is a need to build on the existing evidence around the good practices to foster further the deployment of preventive eHealth services (C3 Collaborating for Health, 2011). Nursing research showed already that when appropriately supported with ICT based solutions, particularly telehealth and telecare, the delivery of innovative healthcare becomes more sustainable and more effective (Lupari, 2011). Particular benefits are reported in areas of prevention and self-management of Non Communicable Diseases (NCD) facilitating the delivery of healthcare in communities and at home (EPPOSI, 2012). This shows there is a prominent role for ICT in supporting the reorganisation of healthcare services towards integrated care (EC Health for Growth Programme 2014-2020, European Innovative Partnership, 2012).

However, a study led by the Royal College of Nursing (RCN), in collaboration with the Bournemouth University (Baker et al., 2007), highlighted concerns regarding the deployment of eHealth services. The research stressed the lack of nursing input into the design of the new systems, not allowing the nurses to be part of the new design since its conception. It is therefore logic that there is fear that these new computerised systems will take nurses away from direct patient care, leading to losing the nurses-patient relationship, thus not reflecting nursing care profession and patients' needs (Baker et al., 2007). In order to prevent this, it is essential to invest in health and social

care personnel's skills and capabilities to support people in need (European Commission, Social Investment Package, 2013). The identification of these skills, together with the exchange of good, innovative, implemented and cost-effective solutions and approaches is not only obvious but also increasingly needed (European Commission, eHealth Action Plan 2012-2020, 2012). In this context, the policy initiatives set out in the Digital Agenda (A Digital Agenda for Europe, European Commission, 2010) ensure that the European Commission, closely cooperating with Member States and different stakeholders, are the driving forces for developing proposals in the field of eHealth services and more importantly their implementation into the field work of 6 million nurses in the EU and Europe.

Interestingly, some Member States have taken major legislative steps in the right direction by introducing the Advanced Nurse Practitioner and Nurse e-Prescribing, which are two examples on how health systems can be innovative with the deployment of e-skills and e-healthcare services, even in high intensive care units, such as neonatology, where the cure and caring aspects need to be balanced. Evidence suggests that implementing nurse prescribing is clinically appropriate and cost-effective (West, 2011; University of Southampton, 2011; Latter et al, 2011, An Bord Altranais, 2007), with e-prescribing being the next step, allowing nurses to electronically transmit a new prescription or renewal authorization to a community or mail-order pharmacy. These existing good practices indicate that technology requires a higher skilled workforce who will contribute to the empowerment of patients in the management of their own health and well-being. It is therefore necessary to assure health and social care professionals have the needed skills, including e-skills, to make optimum use of the available health information technology (A Digital Agenda for Europe, European Commission, 2010), including the nursing category as part of the Europe 2020 Strategy. Additionally, when dealing with nursing and social care innovation, it is absolutely required to take into account gender sensitive designs. In fact, more than 90% of nurses are women. Thus the demand for higher educated nurses becomes a national challenge (Advance Roles for Nurses, 2013). Although the deployment of ICT based solutions has enormous potential for nurses and social care workers, they both need to be highly supported in this process to be able to get the e-skills required and at the same time to remain close to the patients' side, freeing up time to deliver high quality and safe care.

In order to allow eHealth services, mainly telehealth and telecare services, to become fully efficient in all EU Member States, the development of standards, protocols and guidelines for the deployment of eHealth services is urgently required. EHealth systems can potentially shape health and social care through the use of mobile health, personalised nursing care and social media applications, but progress can only be safe through the use of common agreed standards, facilitating nurses, social care workers and carers to deploy systems and mobile devices (International Telecommunication Union, 2011). When dealing with patient information, patient privacy and information security, standards must foster usability and patients have to remain central, having access and ownership to their electronic health records and agreeing on the information flows. It is vital to establish safeguards to allow citizens to use health and well-being applications with trust, in order to sustain safety in an increasingly technologically-enabled healthcare delivery. Nurses are called to play a crucial role in this European innovative approach, which will finally result in common EU standards, facilitating the full and efficient use of eHealth services based on existing best practices in all EU Member States. As such, the deployment of eHealth services becomes beneficial for all the EU citizens.

In this context, the Directive on Patients' Rights in Cross-Border Healthcare, adopted in 2011 (European Parliament and Council of the EU, 2011), represents a major step forward to improve patients' rights, quality and safety, and the use of technology as a facilitator of change. Delivering continuity of care through ICT services is paramount to change and should become one of the most relevant criteria for excellence.

However, while implementing the Directive, the EU-US exchange of designs and developments helps going beyond our own challenges. Solutions are perhaps 'around the corner'. As an example, the Division of Nursing within HRSA has several programs underway focused on advancing health IT skills of the nursing workforce, recognising these skills as essential building blocks to improve access to affordable high quality health care. The advanced nursing education approach incorporates health technology (e.g. electronic health records, telehealth, etc.) into advanced roles by integrating health technology into the curriculum so that nursing students will develop enhanced skills and competences in ICTs and will be prepared to use these technologies at their fullest potential for communication and health care delivery across the entire health care continuum. Improved quality, enhanced safety, and effective/efficient care are the

result of integrated eHealth services being a critical component in communication, patient-centred care and patient outcomes.

Person-centred nursing care, with the use of telehealth and telecare, should contribute to positive patient outcomes by:

- Empowering a holistic and integrated approach towards management of patient care focussing on a systematic and continuous empowerment;
- Increasing the ability of nurses to identify deterioration in a patient's condition early and instigate appropriate interventions;
- Adapting legislation and regulatory arrangements in most European countries towards the reorganisation of healthcare delivery;
- Defining and supporting the conditions and culture change required under which new roles, responsibilities and innovation in care delivery can be built upon;
- Investing in nursing education ensuring appropriate competencies, lifelong learning and continuous professional development (CPD) to high quality and safe care;
- Establishing pattern of career pathways and extended career ladder being conditional to a successful introduction of new skills and the implementation of skills mix;
- Accompanying the development of responsibilities or any transfer of skills with the appropriate remuneration to all the professional groups involved;
- Decreasing urgently the nurses' administrative workload in order to increase direct patient care.

The US administration is therefore using a balanced focus approach on care, technologies supporting care, advanced nursing role, and all the implications surrounding eHealth. These examples show that the EU-US Memorandum of Understanding (MoU) on eHealth, signed in May 2012, should now move to action. As nurses are always part of change, movement and innovation, the EFN is committed to strategically and coherently focus on the competencies of the nursing workforce, including redefining and clarifying professional and occupational qualifications, roles and responsibilities. There is an economic and a qualitative incentive in creating the optimal skills mix, as nurses deliver services 24 hour a day, 7 days a week, in contrast to most other professions. It is expected that nurses coordinate healthcare from a

patient perspective and therefore have the opportunity to act as a patient advocate in healthcare situations. In the US, as in many European countries, nurses have established successful non hospital treatment centres for non-communicable diseases and are in the forefront in terms of delivering care in new settings and closer to patients' homes. EHealth services facilitated this process of change, fostering the mutual understanding of common challenges, developing and sharing eHealth strategies by using standards for optimal deployment of eHealth services.

### References:

Advance for Nurses (2013). Nursing Remains 90% Female but Men Still Paid More, Census Bureau Says, from <http://nursing.advanceweb.com/News/National-News/Nursing-Remains-90-Female-but-Men-Still-Paid-More-Census-Bureau-Says.aspx>

An Bord Altranais (2007). Project Implementation. Review of Nurse and Midwives in the Prescribing and Administration of medicinal products. An Bord Altranais News, Summer 2007, 19(2), p 6-7.

Baker B (2007). An Investigation of the Emergent Professional Issues Experienced by Nurses When Working in an e-health Environment. Bournemouth University, from <http://www.bournemouth.ac.uk/cfpd/pdf/prdiepien.pdf>

Börzel T (2012). When Europanisation Meets Diffusion: Exploring New Territory, West European Politics, Vol. 35, Issue 1, pages 192-207

C3 Collaborating for Health (2011). Non-communicable Diseases in the UK, September 2011, from <http://www.c3health.org/wp-content/uploads/2009/09/NCDs-briefing-paper-20111010.pdf>

EPPOSI (2012). White Paper on Building a Workable Model for the Holistic Management of Chronic Conditions in Europe, from <http://www.epposi.org/index.php/aip-ccm/110-epposi-white-paper-pushes-the-boundaries-of-the-integrated-care-model-at-crucial-point-in-the-chronic-care-review-process-in-the-eu?format=pdf>

European Commission (2012). Communication from the Commission to the European Parliament and the Council, Taking forward the Strategic Implementation Plan of the European Innovation Partnership on Active and Healthy Ageing. Brussels

European Commission (2010). Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, A Digital Agenda for Europe. Brussels

European Commission (2012). Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the

Committee of the Regions, eHealth Action Plan 2012-2020 - Innovative healthcare for the 21st century. Brussels

European Commission (2013). Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, The Social Investment Package, Brussels

European Commission (2011). Proposal for a regulation of the European Parliament and of the Council on establishing a Health for Growth Programme, the third multi-annual programme of EU action in the field of health for the period 2014-2020. Brussels

European Parliament and Council of the EU (2011). Directive 2011/24/EU of 9 March 2011 on the application of patients' rights in cross-border healthcare. Official Journal of the European Union. Brussels.

European Social Observatory (2010). The Europeanisation of National Health Care Systems: Creative Adaptation in the Shadow of Patient Mobility Case Law, from [http://www.ose.be/files/publication/OSEPaperSeries/Baeten\\_Vanhercke\\_Coucheir\\_2010\\_OSEResearchPaper3\\_0710.pdf](http://www.ose.be/files/publication/OSEPaperSeries/Baeten_Vanhercke_Coucheir_2010_OSEResearchPaper3_0710.pdf)

EuroStat (2012). Population structure and ageing, from [http://epp.eurostat.ec.europa.eu/statistics\\_explained/index.php/Population\\_structure\\_and\\_ageing](http://epp.eurostat.ec.europa.eu/statistics_explained/index.php/Population_structure_and_ageing)

International Telecommunication Union (2011). Standards and eHealth, from [http://www.itu.int/dms\\_pub/itu-t/oth/23/01/T23010000120003PDFE.pdf](http://www.itu.int/dms_pub/itu-t/oth/23/01/T23010000120003PDFE.pdf)

Kelly D (2005). Touching People's Lives with Technology. Presentation at the Silver Economy in Europe Conference in Bonn, Germany

Latter S et al. (2011). Evaluation of nurse and pharmacist independent prescribing. Department of Health. England. Department of Health Policy Research Programme Project 016 0108

Lupari MT (2011). An investigation of the effectiveness and cost-effectiveness of a case management approach for older people with multiple chronic conditions within a community healthcare setting, from [http://www.rcn.org.uk/\\_\\_data/assets/pdf\\_file/0003/484275/MarinaLupariFullthesis2011.pdf](http://www.rcn.org.uk/__data/assets/pdf_file/0003/484275/MarinaLupariFullthesis2011.pdf)

Radaelli C (2004). The Europeanisation of National Policy?, Queen's Papers on Europeanisation, No 1/2004, from <http://www.qub.ac.uk/schools/SchoolofPoliticsInternationalStudiesandPhilosophy/FileStore/EuropeanisationFiles/Filetoupload,38405,en.pdf>

Sheikh A, McLean S, Cresswell K (2011). The Impact of eHealth on the Quality and Safety of Healthcare. An updated systematic overview & synthesis of the literature. Final report for the NHS Connecting for Health Evaluation Programme (NHS CFHEP 001). London: Imperial College London

University of Southampton (2011). News release: Wide-reaching report finds strong support for nurse and pharmacist prescribing. Ref: 11/45, from [http://www.soton.ac.uk/mediacentre/news/2011/may/11\\_45.shtml](http://www.soton.ac.uk/mediacentre/news/2011/may/11_45.shtml)

West D (2011). Major study acclaims nurse prescribing success. Nursing Times, from <http://www.nursingtimes.net/nursing-practice/clinical-specialisms/prescribing/major-study-acclaims-nurseprescribing-success/5029754.article>

WHO (2010). How can telehealth help in the provision of integrated care. European Observatory for Health systems and Policies Policy Brief 13.