



Health Systems breakout group EU4Health programme

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Transformation of Health Systems

challenges

sustainability, accessibility, resilience, COVID-19 pandemic, ageing population, financial pressure

solutions

better preparedness; resilience testing; implement new care models; transfer/upscale best practices

Advancing Digital Health

challenges

interoperability of systems, data privacy and protection, digital divide

solutions

exchange and access health data; operationalise the European Health Data Space; digital tools for patient-centred care



European
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Reinforcing Health Workforce

challenges

staff shortages; retention; working conditions, medical deserts; skill gaps; lack of career prospects

solutions

forecasting and planning; workforce retention measures; recruitment capacity; attractiveness of career; modernise curricula; Continued Professional Development

Speakers

- **Health Systems transformation: Ms Sonja Mueller** (Empirica) Project partner, VIGOUR (Evidence-based Guidance to Scale-up Integrated Care in Europe)
- **Advancing Digital Health: Mr Markus Kalliola** (SITRA) Project Director, Health data 2030; Coordinator, Towards the European Health Data Space, TEHDAS;
- **Health Workforce: Ms Eszter Kovács**, Assistant Professor, Health Services Management Training Centre, Semmelweis University; WHO Collaborating Centre on HRH Development; Coordinator of SEPEN tender.



The resilience of health systems in the spotlight

empirica

Gesellschaft für Kommunikations- und Technologieforschung mbH

Health resilience is a multi-system and multi-sector challenge requiring inter- sectoral and inter-system collaboration for health¹ and care

SPEED AND SCALE OF THE RESPONSE REQUIRED BY THE COVID-19 PANDEMIC HAS HIGHLIGHTED HOW FRAGMENTATION IN CURRENT HEALTH AND CARE SYSTEMS IMPAIRS THE ABILITY TO RESPOND EFFECTIVELY²

- ▶ Continuity of care at risk, especially affecting vulnerable population groups
- ▶ System fragmentation, especially social care sector with thousands of organisations providing care
- ▶ Difficulties to switch swiftly to new methods of service delivery
- ▶ Weak integration between primary care, outpatient specialist and hospital care and social care resulted in overburdened hospitals in some Member States, while many elderly homes became incubators in the spread of the pandemic
- ▶ Prevention of illness and care for elderly and other vulnerable people, and primary care was often de-prioritized in favour of hospital- based treatment.

Possible solutions- An uncomprehensive list

- ▶ Linkage of multiple databases across sectors is crucial to inform decision making
- ▶ Good practices for community and homecare should be analysed and shared
- ▶ Cross-sector collaboration and partnerships in R&D are key to quickly mobilise resources to address unmet needs
- ▶ Development of cross-sector process pathways
- ▶ Improve resilience testing



TEHDAS Joint Action
Towards the European Health Data Space

EU4Health - Challenges and Solutions

Markus Kalliola

Project Director, Health data 2030

Coordinator, Towards The European Health Data Space, TEHDAS

The Finnish Innovation Fund Sitra

EU4Health Challenges

- **Project based approach** in EU health which doesn't always turn into long term solutions
- **Lack of policy leadership and will** - underpinned by confusion but also leading to more confusion of the appropriate mix of EU competency in internal market and health policies when addressing health issues and fragmented healthcare markets in Europe
- **Limited perception of compelling cross-border use cases** for digital health data because healthcare markets are nationally closed



EU4Health Solutions

- EU funding should be more directed into **long term policy programmes**, such as the building process for the eHDSI (patient summaries, eprescriptions) and ERNs, and implemented through operational projects, The funding should be underpinned by a clear policy vision such as the Communication on transformation of health and care (2018) and EU Data Strategy (2020)
- **Smart interplay between Articles 168, public health, and 114 of TFEU, single market**, to create cooperation of healthcare and supporting functional internal market for health data. This interplay has been used successfully in the Tobacco Directives and the Cross-Border Healthcare Directive. One recent example is also the proposal for Data Governance Act which has health sector implications.
- **EHDS lex special Q4/2021** will set common governance mechanism for health data exchange





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HWF challenges in 2021

Eszter Kovács, PhD

Assistant Professor

Health Services Management Training Centre, Semmelweis University

WHO Collaborating Centre on HRH Development

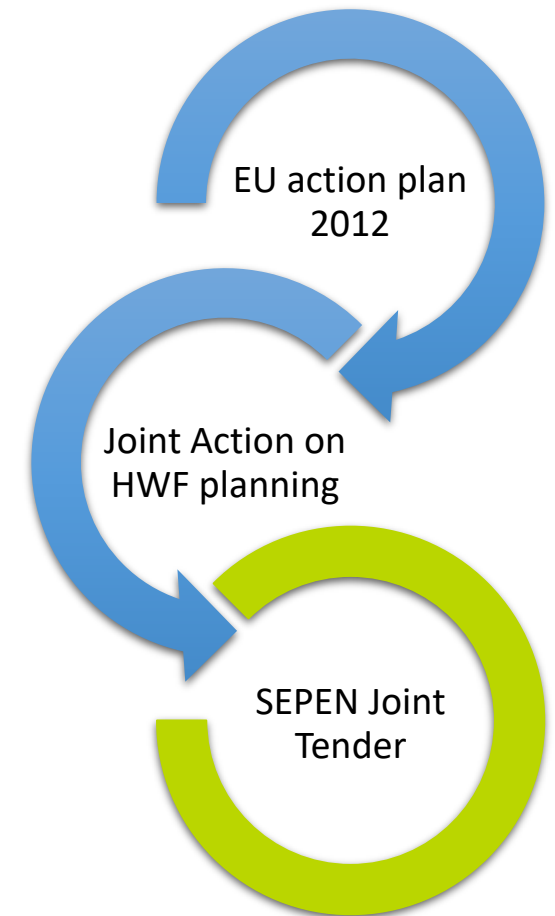
Coordinator of SEPEN tender



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Evolution of challenges

- Increasing **demand** from the population
 - Chronic conditions and increasing **multimorbidity**, ageing HWF – difficulties in recruitment & replenishment
- Right number of the HWF - **supply**
 - **Shortages and imbalances** of professionals, specialty groups in rural and remote areas – mitigating „medical desert“?
 - **Accelerated cross-border mobility** – forecasting movements of HWF and patients at EU level and beyond
- Right **skills** of the HWF
 - E-health workforce – utilization of digital technologies, increasing **digital capability & literacy**, structured data and AI as a long-term priority – readiness & openness?
 - Continuous mental **fatigue** and safety risks of frontline workers – retention of a non-exhausted HWF





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Potential solutions

- **Strengthen HWF planning systems** - include innovation, strong leadership, good governance, and improve capability to respond rapidly and adequately – agile change management
- **Continuous collaboration** in strategic HWF planning – EU-wide, in-country stakeholder engagement, gain political commitment – build capacity in MS
- Use the appropriate **tools, methods** and tailor **good practices** – planning scenarios, advance projections for long-term
- Mapping labour market dynamics – **evidence-informed decision making** and HWF policies, link demand and supply data, and mitigate risks
- Monitor **skill** needs, skill-mixes and skill mismatches (e.g. CPD, new mind-set of transversal skills, upskill and educate, new promising career pathways)
- Use strategically **task shifting and sharing** (e.g. patient involvement, digital tools)
- Empower HWF to **improve HWF resilience and well-being** (e.g. burnout prevention)





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Strengthen your resilient health workforce!

Thank you for your contribution!

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Questions for reflection

- *What is the biggest challenge/problem in your specific area?*
- *What could be alternative possible solutions to that?*
- *What are the successful solutions from past projects?*