How can you get involved in building a Network?

As a healthcare professional, experts and authorities, you should reflect on which diseases or conditions in your area of expertise would match the criteria of rarity or low prevalence and complexity, as set out in the legislation governing ERNs. And focus on the grouping of diseases and the types of services to be offered.

Then you can use your experience to examine the technical and organisational feasibility of the Network. You can bring in existing networks, specialised centres, or scientific associations to do this. The ERNs are based on a co-operative, multidisciplinary approach, so you should also look to develop the right forum to move the project forward.

Who can join a Network?

All the members in a Network should have in common the same area of expertise and focus on the same health condition(s).

All Networks should demonstrate that they are strong in:

- patient empowerment and patient-centred care;
- organisational, management and business continuity of the centre of expertise;
- research and training capacity;
- exchange of expertise, information systems and e-health tools; and
- expertise, good practice, quality, patient safety and evaluation.

Each Network application should include a proposal of a specific criteria, relating to their competence and experience in that field.







Share. Care. Cure.

What are European Reference Networks?

Imagine if the **best specialists** from across Europe could join their efforts to tackle **complex or rare medical conditions** that require **highly specialised healthcare** and a concentration of knowledge and resources.

That's the purpose of **the European Reference Networks** and it's becoming a reality.

Share and enhance your expertise. Talk with your colleagues. **Be ready to prepare a proposal and join a network.** The European Commission will launch a **call for Networks in 2015**.

European Reference Networks (ERNs), which are expected to be operational by 2016, will bring together highly specialised healthcare providers from different EU Member States in areas where expertise is rare.

By pooling knowledge and expertise across the EU, they will facilitate access to diagnosis, treatment and provision of affordable, highquality and cost-effective healthcare in these areas. ERNs will also serve as focal points for medical training and research, information dissemination and healthcare evaluation.

The intention is not to create new providers, but rather to link existing highly specialised providers.

CHALLENGES

- To engage, attract, identify the right Networks and healthcare providers
- To establish a Network model with useful platforms and tools
- To foster commitment by Member States and ensure sustainability of established Networks
- To avoid fragmentation and/or duplication of efforts
- To develop and use standardised tools (clinical guidelines, registries, patient pathways, interoperable IT systems)
- To involve healthcare professionals, health authorities, managers and patients in a common project for the implementation of ERNs.

Why are European Reference Networks needed?

It is often difficult for the 28 health systems of the EU to provide patients with rare or low prevalence complex diseases or conditions with the treatment they need. Therefore the EU has decided to launch ERNs to help address this difficulty.

The aim is to benefit patients by improving high-quality specialised care, through

BENEFITS

- Improve high-quality specialised care, for patients with rare or low prevalence and complex diseases
- Improve European cooperation and economy of scale on highly specialised healthcare
- Pool knowledge on certain diseases or treatments
- Improve diagnosis and treatment capacities where expertise is rare by developing and sharing clinical guidelines and patient pathways
- Help Member States enhance the provision of highly specialised care
- Maximise the speed and scale of incorporating innovation in medical science and health technologies
- Serve as focal points for medical training and research

better co-operation and greater economies of scale.

There are also obvious benefits to health systems as well, in improving and optimising their ability to provide such care.

There will be other benefits as well. The pooling of knowledge and expertise will allow for the development of more evidence-based clinical tools and treatment. Networks should help maximise the speed and scale at which innovation in medical science and health technologies is incorporated into healthcare provision. They will serve as focal points for medical training and research, and for the dissemination of information to other parts of the health system. And they will offer capacity for translational research, clinical trials, Health Technology Assessments, and more.

The providers involved in the Network will obviously benefit from this pooling of knowledge with other specialists, and will be recognised as leaders in their area of expertise.