WORKING PAPER FOR DISCUSSION

OF A STANDING COORDINATION GROUP FOR SEMANTIC AND TECHNICAL INTEROPERABILITY

Proposed by the eHealth Governance Initiative

Date: 19th November 2013

Preface

The eHealth Network discussed the proposal for a Standing Coordination Group with great interest at its third meeting in May 2013 and asked Member States, the eHealth Governance Initiative (eHGI) and the European Commission for further clarification of the proposal and possible funding mechanisms. Subsequently, a workshop with Member States, the European Commission and representatives from EU projects and initiatives was held in Munich on 11th September 2013.

Issue at stake

Interoperability in eHealth represents a long-term objective of the eHealth Network and is subsequently anchored in Article 14 of the Directive 2011/24/EU. Despite the long-term nature of the task, most European-wide efforts to tackle semantic and technical interoperability have focused on short-term projects and activities. This approach is not sustainable and fails to connect with the long-term strategy of Member States to establish eHealth services as part of routine healthcare – both in national and in cross-border use cases. epSOS in particular has highlighted such sustainability challenges for Member States and has pointed to the need for EU level governance and coordination of priorities and the development of common assets.

To overcome these limitations, the eHGI recommends establishing a long-term committee for semantic and technical interoperability. This "Standing Coordination Group" shall function not only as a policy group but primarily as a Member State driven board for preparing, deciding on[1] and managing the development and deployment of shared and common assets to support the exchange of health data nationally and across borders.

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[1] within the mandate to be set by the eHealth Network

The Standing Coordination Group shall consist of a coordination team and a stable group of experts. In order to reconcile national and European strategies, the Standing Coordination Group shall be tied to and utilise national competence centres wherever possible. To this end, the group of experts shall preferably be drawn from national eHealth competence centres. Additional experts should be invited to contribute to specific topics if needed. Members of the coordination team and of the stable group of experts are appointed in accordance with National Authorities responsible for eHealth that are members of the eHealth Network (referred to below as "competent authorities"). Stakeholders shall be consulted via the eHealth Stakeholder Group.

Policy agreement

Member States agree on
- the **necessity** of a Standing Coordination Group
- its **long-term focus**
- the **strategic oversight by the eHealth Network**
- the focus on **cross-border services and the common needs of Member States**
- the important **role of national eHealth competence centres** in a group of this kind

Furthermore, Member States agree that the Standing Coordination Group will not replace the eHGI but shall take over operational aspects of its interoperability agenda.

By mutual agreement, Member States will negotiate with the European Commission to provide **financial support** for the Standing Coordination Group and its mission to develop, maintain and deploy shared semantic and technical assets **by utilising funds from the Connecting Europe Facility (CEF)**.

In order to deliver on the development and deployment of shared assets to support semantic and technical interoperability, the Standing Coordination Group may decide to subcontract individual experts, national competence centres, standardisation organisations and/or EC-funded networks.

Rooted in Europe and focused on Member States

The Standing Coordination Group will rely on financial and technical support from EC programmes – notably the CEF – and on strong links with policy makers and competence centres in Member States. Competent authorities in the Member States will define which competence centre is in charge of semantic and/or technical interoperability policies or of specific domains.

The Standing Coordination Group should work towards a joint eHealth standardisation policy concerning semantic and technical interoperability. It should promote and coordinate the development, maintenance, standardisation and adaptation of European semantic and technical interoperability assets. In particular, it should act as a single point of contact for Member States and large-scale EC-funded eHealth interoperability research projects. Furthermore, it should foster strong links with

European regulatory organisations such as EMA and European standardisation organisations, initiatives and consortia.

To present practical proposals to the eHealth Network, the Standing Coordination Group will continuously monitor the strategies for eHealth pursued by Member States and the specific solutions and services implemented on the basis of these strategies. This will be achieved through regular liaison activities with the competent authorities in Member States and their competence centres.

Furthermore, the Standing Coordination Group should play a leading role in the process of coordinating and recommending eHealth standards concerning semantic and technical interoperability in Europe and the related quality labelling.

The tasks of the Standing Coordination Group will be decided by the eHealth Network based on suggestions from Member States, their competent authorities and the final semantic and technical Interoperability Roadmap of the eHGI as adopted by the eHealth Network.

Priority should be given to cross-border use cases and in particular those mentioned in Directive 2011/24.

Core groups setting the scene

Sharing information between Member States about best practices and learning experiences in eHealth interoperability would be an important task of this group. Similarly, the extension of existing bilateral and multilateral cooperation projects would be another key area of interest for the Standing Coordination Group.

The eHealth Network should define precise rules to organise, among its members, core groups of voluntary Member States agreeing to implement components of an envisioned European "infostructure" together. This may include standardised transport layers, documents, messages, information models, value sets, open source components or tools. Preference should be given to internationally recognised assets. Doing so will kick-start the process, expand access to these technical and semantic assets and convince other Member States to participate.

Member States who share a common eHealth strategy are strongly encouraged to collaborate in order to avoid redundancy, minimise costs and set positive examples. This collaboration could take the form of common investment in (cost intensive) tools (e.g. terminology reference server), exchange of tenders, exchange of methodology, cross-validation of subsets, cross-validation of translations, training of experts, education, tests, evaluation of pilots etc. It is necessary to define and adopt the financial conditions for the Member States wishing to join – which will be generalised eventually.

Sustainability

In order to attract funding from the CEF, the Standing Coordination Group needs to have a strategy and planning in place for long-term sustainability through funding sources other than the CEF. This has to be demonstrated by a feasibility and cost-benefit assessment.

The semantic "infostructure" relies on common European and national interoperability assets. Accordingly, its financing will rely on funding from national competence centres as well as on the EC budget. Common actions will depend on an agreement about contributions between both Member States and the EU.
In the long term, sustainable financing options must be found for all interoperability assets.

Next steps

The eHealth Network should join forces with the eHGI to mandate a sub-group of the Network in order to negotiate with the EC and prepare a decision paper on the scope and structure of a Standing Coordination Group.

The final proposal for the Standing Coordination Group will depend on the exact wording of the call from the European Commission. This call for action in the Connecting Europe Facility framework will be expected in 2014. Consequently, a CEF-funded Standing Coordination Group will therefore not be formally enacted before 2015.

In the meantime and in order to keep the momentum going, the eHealth Network – with initial operational support from the eHGI – should start paving the way towards the Standing Coordination Group in 2014.