Digital health initiatives and the policy context in European integrated health systems

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All EU28 countries, Norway and Iceland, run Integrated Care Initiatives (ICI) in efforts to address the new demographic challenges, reduce costs and improve health outcomes. As part of a study commissioned by Chafea and DG SANTE, Optimity Advisors has conducted an extensive review and mapping of ICI across Europe, to assess the level of penetration and adoption of ICI in the 30 countries and evaluate the level of maturity of several healthcare systems. This has allowed to examine the extent of the use of digital tools in ICI. The aim of this presentation will be to look at the relationship between theory and practice, assessing whether assessments of a country’s healthcare system in terms of its Digital Health maturity is reflected in its number of digitally-enabled ICI.

For each country, the Study Team, in collaboration with researchers from all included nationalities, has identified 573 ICI and analysed their characteristics and implementation. Considering the different elements of the selected initiatives, it was possible to assess the extent to which Digital Health was included in each country. Additional desk research and the use of the Scirocco Maturity Assessment Tool (which has “information and e-Health” as one of its 12 assessment criteria) have then allowed to examine whether a correlation between the number of digitally-enabled ICI per country and the maturity of their integrated care systems exists.

Our research has shown that all EU28 countries, Norway and Iceland, have implemented e-Health Strategies. The review found that IC strategies, policies and projects are present in all 30 countries, although their characteristics, depth and breadth of integration are varied. However, based on our repository of ICI, only 79, out of the 573 ICI retrieved, included a digital component. This translates to less than 15%, spread across 18 countries (Spain (16); UK (11); Lithuania (9); Italy (6); Germany (6); Czech Republic (5); Belgium (5); Greece (4); Finland (4); Slovakia (3); Hungary (2); France (2); Cyprus (1); Iceland (1); Norway (1); Croatia (1); Denmark (1); Austria (1)).

Contrary to our assumptions, the assessment of integrated care system maturity did not always reflect the number of ICI with digital components retrieved in the repository. For example, while stakeholders from Denmark and Iceland, have self-assessed their “information and e-Health” domain as highly advanced, both countries only have one digitally-enabled initiative listed in the repository. Moreover, while the evidence around integrated care shows that Digital Health is a key component of an integrated system, in practice less than 15% of all the retrieved ICI had a digital component in it. There is therefore a lack of clarity on whether ICI working on health and social care programmes and strategies see e-Health and m-Health as central elements of the integration,
or if Digital Health is rather perceived as an additional and complementary element that would assist, rather than drive, their projects.

Additional research focusing on the role of Digital Health in practice and on how to raise the Digital Health profile in the ICI landscape across Europe should be considered.

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