MOMENTUM: A model for moving forward technology-enabled care

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Overview

- European and general background.
- MOMENTUM, the thematic network and its 30+ cases.
- Tools and methods needed.
- MOMENTUM Blueprint.
- Applying the Blueprint: two example experiences.
- Overall conclusions.
European and general background
Key Action 13:
Undertake pilot actions to equip Europeans with secure online access to their medical health data by 2015 and to achieve by 2020 widespread deployment of telemedicine services.
European Innovation Partnership on Active & Healthy Ageing

Crosscutting, connecting and engaging stakeholders across sectors, from both private & public sectors

Specific Actions

- Improving prescriptions and adherence to treatment
- Better management of health: preventing falls
- Preventing functional decline & frailty
- Integrated care for chronic conditions, including telehealth
- ICT solutions for independent living & active ageing
- Age-friendly cities and environments

European and general background

+Two healthy life years by 2020

Triple win for Europe

Health & quality of life of European citizens

Sustainable & efficient care systems

Growth & expansion of EU industry

Pillar I
Prevention, screening, early diagnosis

Pillar II
Care & cure

Pillar III
Independent living & active ageing


eHealth Forum, Athens, Greece
Towards a European map for scaling-up e.g., technology-enabled care

A European Blueprint connecting existing initiatives

- A European map of Scaling up
- Repository of Proven Practices/guidelines
- Mobilising Investments, Silver Economy
- Innovation Reference Framework, Standards

Training & New Skills

EIP-AHA
EIT-KIC

AAL
H2020

Technology Roadmaps, Research & Innovation

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MOMENTUM - thematic network with 30+ cases
Momentum: the Project

- A CIP ICT-PSP thematic network
  - Ran from February 2012 until January 2015

- The consortium: **19 organisations**
  - Telemedicine associations and competence centres ("telemedicine doers") from
    - Denmark, Estonia, France, Germany, Greece, Israel, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland, United Kingdom

- European stakeholder associations representing
  - Health professionals, health care organisations, health insurers/insurance schemes, technology suppliers
From 30+ cases to seven in detail

- Chronic disease management – Maccabi, Israel
- Rxeye, Sweden
- Teledialysis, Norway
- ITHACA, Spain
- Patientenhilfen, Germany
- KSYOS, Netherlands
- Cardio Online Europe, Italy
From 30+ cases to seven in detail

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Tools and methods are needed.
Through the 18 critical success factors …

Guidelines, guidance, codes, plans, tools, techniques, tips
Tools and methods are needed to deploy telehealth services

- **Impact assessment framework**
  - The results and lessons learned from Renewing Health
  - The approach of United4Health

- **Guidelines for large-scale deployment**
  - Momentum Blueprint

- **Cost and benefit analysis toolkit**

- **Innovation governance**
MOMENTUM Blueprint
A European Telemedicine Deployment Blueprint

By doers, For doers

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momentum
ADVANCING TELEMEDICINE ADOPTION IN EUROPE
Four domains for deployment
Blueprint - guidelines

- Strategy & Management
- Organisation & Change Mgmt.
- Legal Regulatory & Security
- Technical & Market relations
Enabling service deployment: 18 critical success factors

- 1. Compelling need
- 2. Leadership
- 3. Context
- 4. Resource aggregation
- 5. Primary client
- 6. Stakeholder involvement
- 7. Business plan
- 8. Change management
- 9. Patient centeredness
- 10. Legal & sec. conditions
- 11. Legal & sec. guidelines
- 12. IT & eHealth infrastructure
- 13. Privacy awareness
- 14. Market procurement
- 15. Telemedicine service
- 16. Service monitoring
- 17. Legal & sec. experts
- 18. Potential to scale-up

Plan

People

Run

IT system design
Evidence based intervention

Context
18 critical success factors

1. Check that there is cultural readiness towards telemedicine.
2. Ensure leadership through a champion.
3. Identify a compelling need.
4. Put together the resources needed for deployment and sustainability.
5. Address the needs of the primary client(s).
6. Involve health care professionals and decision-makers.
7. Prepare and implement a business plan.
8. Prepare and implement a change management plan.
9. Put the patient at the centre of the service.
10. Establish that the service is legal.
11. Ask advice from legal, ethical, privacy and security experts.
13. Ensure that telemedicine doers and users have “privacy awareness”.
14. Ensure that the IT and eHealth infrastructures needed are in place.
15. Ensure that the technology is user-friendly.
16. Monitor the service.
17. Maintain good practices in vendor relations.
18. Guarantee that the technology has the potential for scale-up (i.e., “think big”).
Applying the Blueprint
From a framework to a process
(Telemedicine REadiness Assessment Tool)

- Actors in a deployment initiative are asked to consider the readiness of their project to be deployed

Actors respond to an online survey that focuses on the 18 critical success factors and the relevant indicators

CSF 1. Ensure that there is cultural readiness for the telemedicine service

In my organisation/region:
- doctors and other healthcare professionals are ready to share clinical information with each other and with the patient i.e. there is a level of trust among all the stakeholders
- patients and providers (healthcare professionals) are ready to use ICT (e.g., computers, tablets, mobile phones)
- an underpinning culture embraces technology
- an underpinning culture welcomes and even promotes change, innovation and shows openness to new ideas.
A MOMENTUM – TREAT workshop

The actors’ representatives:

- **Analyse** the online survey results
- **Evaluate together** the effectiveness of their strategy and deployment plan.

What are the outcomes of the workshop?:

- A **consensus** on the project readiness and the ongoing challenges
- A list of **actions to undertake** so as to create/revise an action plan to deploy the telemedicine service.
Examples of applying MOMENTUM practically

April 2015

October 2014
**First experience: Kristiansand, Norway**

**Sørlandet Hospital, Kristiansand**
- Survey of 31/55 responses
- Workshop with 12 persons
- Patients and staff from: the hospital, ICT suppliers, municipalities, university.

Images from Ken (2007); Sinxenius (2009)
Workshop conclusions

Doing well on:

- Cultural readiness
- Champions
- Knowing who the primary client is
- Putting the patient at the centre of the service.
Second experience with Joint Improvement Team (JIT) (1/2)

Self-assessment of the ‘Technology Enabled Care’ programme deployment capacity

- **Strengths**
  - Cultural preparation
  - Consensus on the advantages of telemedicine to respond to compelling needs
  - Leadership
  - Available resources

In Scotland, there is a compelling case for the use of technology-enabled care across our health and social care services.

- Strongly Agree (59.5%)
- Agree (35.7%)
- Don't Know (2.4%)
- Disagree (2.4%)
- Strongly Disagree (0.0%)

There are financial resources available for development and embedding of technology-enabled care.

- Strongly Agree (28.6%)
- Agree (38.1%)
- Don't Know (4.8%)
- Disagree (21.4%)
- Strongly Disagree (7.1%)
JIT (2/2)

Self-assessment of the 'Technology Enabled Care' programme deployment capacity

- **Strengths**
  - Cultural preparation
  - Consensus on the advantages of telemedicine to respond to compelling needs
  - Leadership
  - Available resources

National champions from a range of sectors, settings and disciplines engage and mobilise others to adopt technology-enabled care.

There is an underpinning culture across Scotland that welcomes, and promotes, change and innovation and shows an openness to new ideas.
Challenges (1/5)

- Capacity, competences and engagement
  - Citizens
  - Health care professionals
  - Senior management

Citizens who will benefit from technology-enabled care are sufficiently involved in developing services.

Challenges (1/5)

There is a level of trust such that medical professionals (including doctors), and other healthcare professionals, are ready to share clinical information with each other and with their patients.
Challenges (2/5)

- Capacity, competences and engagement
- Citizens
- Health care professionals
- Senior management

Staff are supported to develop their skills and capabilities needed to use technology in practice.

- Strongly Agree (4.8%)
- Agree (21.4%)
- Don't Know (28.6%)
- Disagree (42.9%)
- Strongly Disagree (2.4%)

Senior leaders and professional organisations demonstrate visible commitment to adopt technology-enabled care.

- Strongly Agree (10.0%)
- Agree (40.0%)
- Don't Know (15.0%)
- Disagree (32.5%)
- Strongly Disagree (2.5%)
Challenges (3/5)

- Change management
  - Management engagement to lead the change
  - Alignment between objectives and incentives
  - Change management
  - Putting implementation into place

There is appropriate alignment between the large-scale deployment of technology-enabled care and financial (and other) incentives.

- Strongly Agree (0.0%)
- Agree (32.5%)
- Don't Know (32.5%)
- Disagree (30.0%)
- Strongly Disagree (5.0%)

Time and capacity to achieve implementation at scale is factored into action planning.

- Strongly Agree (0.0%)
- Agree (27.5%)
- Don't Know (27.5%)
- Disagree (37.5%)
- Strongly Disagree (7.5%)
JIT

Challenges (4/5)

- Change management
  - Management engagement to lead the change
  - Alignment between objectives and incentives
  - Change management
  - Putting implementation into place

The IT and eHealth infrastructure is available to support interoperability and successful deployment at scale.

Time and capacity to achieve implementation at scale is factored into action planning.
Challenges (5/5)

- Governance and infrastructure
  - Guidance on legal and security issues
  - Contracts and agreements

There is clear guidance on any legal, ethical and confidentiality issues relating to the deployment of technology-enabled care.

- Strongly Agree (2.5%)
- Agree (37.5%)
- Don't Know (37.5%)
- Disagree (22.5%)
- Strongly Disagree (0.0%)

Transparent frameworks are in place for arrangements (e.g. contracts and Service Level Agreements) setting out expectations, rights and responsibilities between providers and commissioners.

- Strongly Agree (5.0%)
- Agree (32.5%)
- Don't Know (37.5%)
- Disagree (20.0%)
- Strongly Disagree (5.0%)
Workshop conclusions

- Set up **a new action plan** either at the local or national level(s)
- Obtain the skills needed to ensure there is **a sound business model** for each of the services to be deployed
- **Evaluate the country’s ‘Telehealth & Telecare Delivery Plan’** - that is underway - by comparing it to the experiences of other countries.
Overall conclusions

- Good fit with ongoing policy in the field of technology-enabled care.
- Working with doers/for doers works.
- Thematic networks produce sound and useful models and tools.
- The 18 critical success factors based People, Plan, Run are easy to understand and use.
- The conversion into a survey combined with an active workshop leads to good results.
- The two example sites appear to have drawn usefully from the experience.
Any questions?

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