LAUNCHING AN EU TELEHEALTH CODE OF PRACTICE

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Abstract: The "Telehealth Services Code of Practice for Europe (TeleSCoPE)" project is funded under the European Commission (EC) Programme of Community Action in the Field of Health (EAHC Contract Number: 2009 11 11). The project reflects the desirability of the EU and the European Commission of defining the standards and a "Code of Practice" at European level for telehealth services.
The first draft of the Code was released in April 2012. The paper outlines the progress of the project since then, i.e. the validation of the Code in 5 European countries.

СТАРТИРАНЕ НА ЕВРОПЕЙСКИЯ КОДЕКС НА ДОБРИТЕ ПРАКТИКИ В ЕЛЕКТРОННОТО ЗДРАВЕОПАЗВАНЕ

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Резюме: Докладът очертава напредъка на проекта TeleSCoPE (Telehealth Services Code of Practice for Europe) за периода 2011-2012 г.
Финансиран от Европейската комисия, проектът е отразява необходимостта от определяне на стандарти и "Кодекс на добрите практики" в сферата на електронното здравеопазване.
Първият вариант на Кодексът бе публикуван през април 2012 и до началото на 2013 г. бяха извършени консултациите относно приложението му в 5 европейски страни.

1. Introduction

"Telehealth Services Code of Practice for Europe" or TeleSCoPE is the title of an ongoing project, funded under the European Commission (EC) Programme of Community Action in the Field of Health (EAHC Contract No: 2009 11 11).

The strategic goal of the project is the development of a comprehensive Code of Practice for Telehealth Services. The Code has to provide a benchmark standard for services that will assist both service providers and users and, in so doing, will support EU initiatives that endeavour to build trust in and overcome the barriers to effective development of telehealth services in all EU member states

TeleSCOPE directly responds to the EC Action Point (in COM2008:689) to "improve confidence in and acceptance of telemedicine" as well as to EC and national agendas (i2020). It also contributes to the Action Points to collect "good practice on deployment of telemedicine services" and the addressing of issues (requiring for member states) around accreditation, privacy and data protection.

The project also fits with European Union initiatives promoting healthy lifestyles, healthy workforce and healthy life-years, social inclusion and engagement, economic and social development, information and communication technology application and the co-ordination of policies and

programmes within member states. The context includes i2020, the Ageing Well platform, the eHealth Action Plan, the Green Paper COM2008:725 on a European Workforce for Health, to list some.

In addition, the project supports EU strategy of "moving EU towards a "European eHealth Area" by coordinating actions and promoting synergies between related policies and stakeholders, so as to develop better solutions, prevent market fragmentation and disseminate best practices" and more specifically the EU strategy in:

- Setting up health information networks between points of care to coordinate reactions to health threats;
- Ensuring online health services such as information on healthy living and illness prevention and
- Developing teleconsultation, eReferral and eReimbursement capabilities.

2. Purpose of the European Code of Practice for Telehealth Services

The draft of the European Code of Practice for Telehealth Services was released in April 2012 at Med-e-Tel 2012 (The International eHealth, Telemedicine and Health ICT Forum for Education, Networking and Business, www.medetel.eu). It is also available for free at the project website http://telehealthcode.eu/project/documents.html.

The approach taken within the draft Code can be clearly seen to reflect a view that telehealth services can and should help to meet the needs of people of all ages – both with regard to aspects of their clinical health and broader well-being.

The Code addresses the way that telehealth services are organized, related procedures and practices and some of the skills and knowledge requirements for staff. This includes the way in which communication takes place with service users (and carers) or with potential service users. Importantly, in a context where telehealth technologies can gather and store increasing quantities of personal information, the Code sets out requirements that seek to minimize the potential for people's privacy or
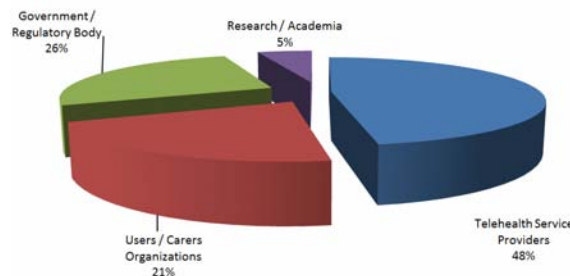

Fig. 1

autonomy being undermined. Certification in accordance with the requirements of the Code helps telehealth service providers to compete with uncertified organizations that may offer similar services and, crucially, gives re-assurance to service users (and carers).

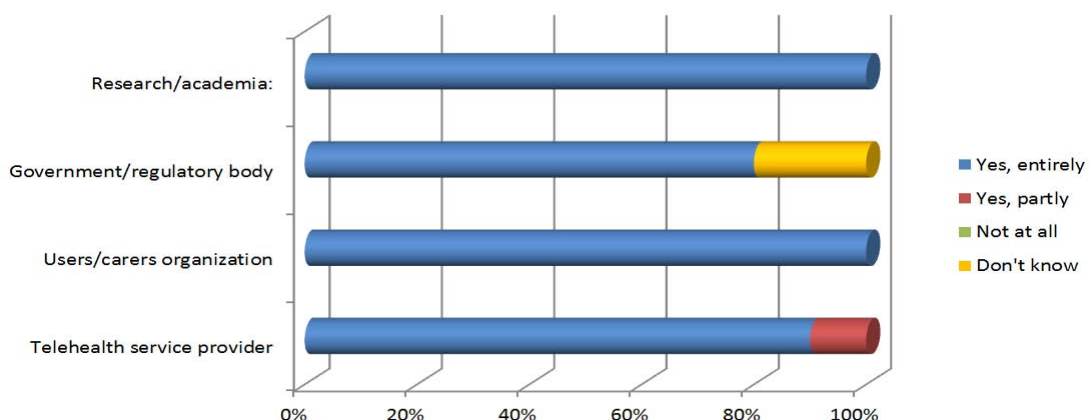The critical areas set out in the draft Code include:

Fig. 2. Answer of the question: "Is this type of Code needed for telehealth services?" Axis X - %;

A. General Considerations

This part echoes the strategic and policy direction taken by the European Commission such as the Europe 2020 Strategy and the Horizon 2020 Framework Programme for Research and Innovation. The main principle under which the telehealth services have to operate are also outlined here such as the Charter of Fundamental Rights of the European Union; jurisdictive requirements and associated regulatory frameworks as set out in legislation in the member states within which services are operative; moral and ethical issues, etc. Governance and financial issues as well as the challenges of personal data management are also considered.

B. Service Location and Technological Considerations

This part is focused on service location and the basic requirements for a safe and comfortable

Broadly speaking, is this Draft Code likely to be acceptable to

a) Telehealth service users and health/social care staff

b) Telehealth service providers

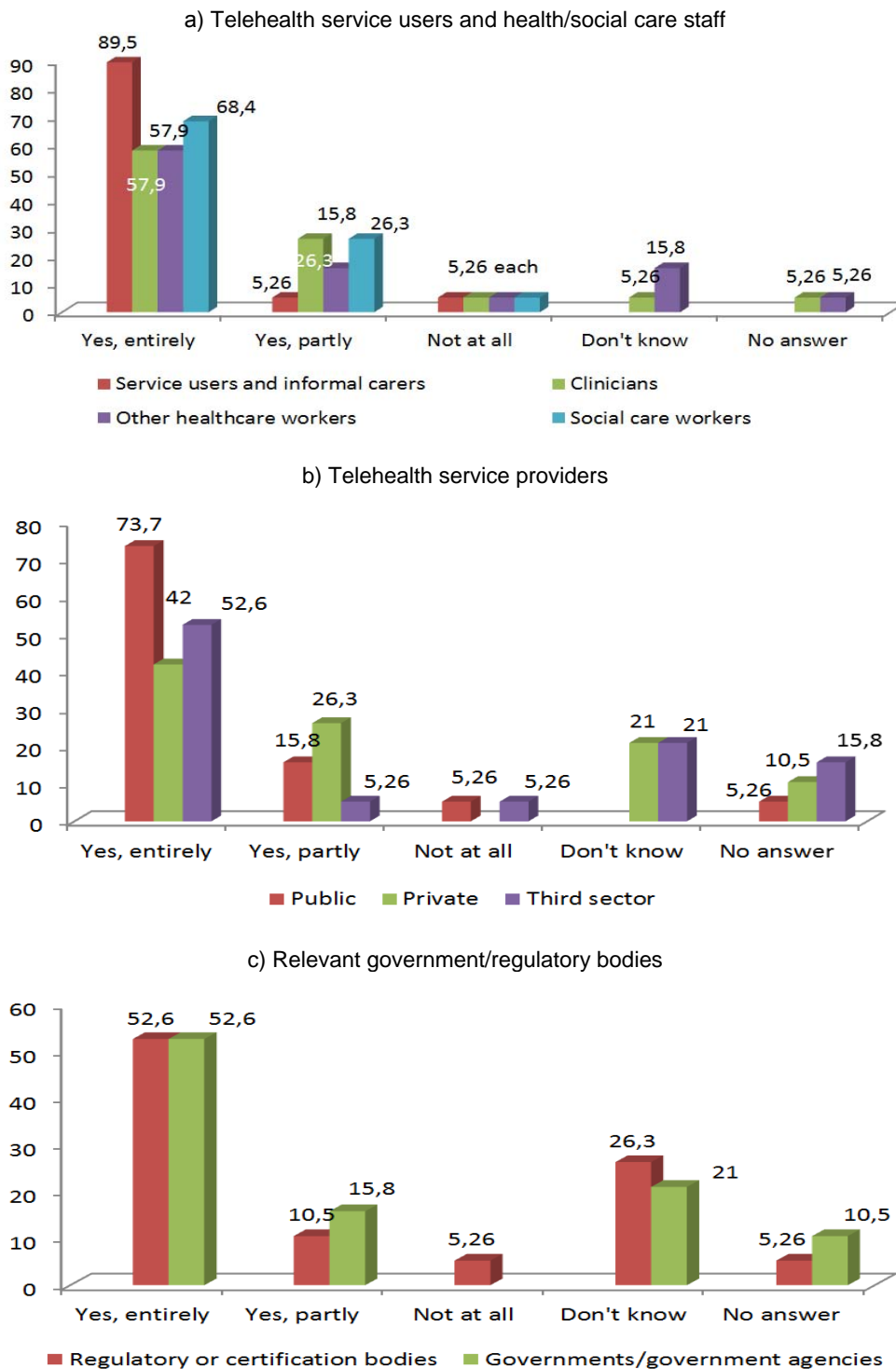c) Relevant government/regulatory bodies

Fig. 3. Axis Y - %; Axis X - answers

working environment for the telehealth staff as well as on the prerequisites for reliability of the applied communications networks and telehealth soft-and hardware.

C. Service Operational Requirements

This chapter is focused on both clinical and non-clinical issues as staffing and staff management; the regulations of the relationship between staff, service users and carers, etc. Special attention is dedicated to the interpretation of users' responses.

3. Validation of the Code

Till February 2013 the Draft Code was tested in 5 EU countries – Belgium, Bulgaria, Hungary, Italy and the United Kingdom. Telehealth service providers, Users/carers organizations, Government/regulatory bodies, Research organizations and academia took part in the validation process (Fig. 1). Figures 2 to 3 reveal some of the results from the validation on the draft Code.

4. Conclusions

The draft Code was welcomed and seen as likely to be acceptable to varied stakeholders.

On completion, therefore, the Code will provide a welcome framework to guide telehealth service providers in all 27 member states of the European Union. It will provide not just a quality service benchmark but also a potential basis by which telehealth services will be able to be certified and/or regulated.

The beta version will be released in April 2013 at the Med-e-Tel 2013 conference in Luxembourg. The final version will be published in the summer of 2013 at the project website www.telehealthcode.eu.

5. Acknowledgements