Public Consultation: Transformation Health and Care in the Digital Single Market

Introduction

The purpose of this consultation is to define the need and scope of policy measures that will promote digital innovation in improving people’s health, and address systemic challenges to health and care systems. Those measures must be aligned with legislation on the protection of personal data, patient rights and electronic identification. The consultation collects views on:

- Cross-border access to and management of personal health data;
- A joint European exploitation of resources (digital infrastructure, data capacity), to accelerate research and to advance prevention, treatment and personalised medicine;
- Measures for widespread uptake of digital innovation, supporting citizen feedback and interaction between patients and health care providers.

The European Commission reserves the right to publish all contributions to the consultation unless non-publication is specifically requested in the general information section of the questionnaire.

The public online consultation will close on the 12th of October 2017.

In case your response includes confidential data please provide a non-confidential version.

About you

1 You are welcome to answer the questionnaire in any of the [24 official languages] of the EU. Please let us know in which language you are replying.

English
2 You are replying
- as an individual in your personal capacity
- in your professional capacity or on behalf of an organisation

10 Respondent's first name

Fabienne

11 Respondent's last name

Eckert

12 Respondent's professional email address

secretariat@ecoo.info

13 Name of the organisation

European Council of Optometry and Optics (ECOO)

14 Postal address of the organisation

Rue de la Loi 227, bte 4
B-1040 Brussels

15 Type of organisation

Please select the answer option that fits best.
- Health and care organisation (e.g. hospitals, clinics, social and community care)
- Service provider (e.g. digital health services, data and technology services, insurance providers)
- Private enterprise (other)
- Professional consultancy, law firm, self-employed consultant
- Trade, business or professional association
- Non-governmental organisation, platform or network
- Research and academia
- Churches and religious communities
- Regional or local authority (public or mixed)
- International or national public authority
- Other

18 Please specify the type of organisation.

- Chamber of commerce
- Business organisation
- Trade Union
- Representaive of professions or crafts
24. Is your organisation included in the Transparency Register?

In the interests of transparency, organisations, networks, platforms or self-employed individuals engaged in activities aimed at influencing the EU decision making process are invited to provide the public with relevant information about themselves, by registering in Transparency Register and subscribing to its Code of Conduct.

Please note: If the organisation is not registered, the submission is published separately from the registered organisations (unless the contributors are recognised as representative stakeholders through Treaty provisions, European Social Dialogue, Art. 154-1).

If your organisation is not registered, we invite you to register here, although it is not compulsory to be registered to reply to this consultation. Why a transparency register?

- Yes
- No
- Not applicable

25. If so, please indicate your Register ID number.

03999415319-19

26. Country of organisation's headquarters

- Austria
- Belgium
- Bulgaria
- Croatia
- Cyprus
- Czech Republic
- Denmark
- Estonia
- Finland
- France
- Germany
- Greece
- Hungary
- Ireland
- Italy
- Latvia
- Lithuania
- Luxembourg
- Malta
- Netherlands
- Poland
- Portugal
- Romania
- Slovak Republic
- Slovenia
Spain
☐ Sweden
☐ United Kingdom
☒ Other

*27 If "other", please specify:

Switzerland

*28 Your contribution,

Note that, whatever option chosen, your answers may be subject to a request for public access to documents under Regulation (EC) N°1049/2001.

☒ can be published with your organisation’s information (I consent the publication of all information in my contribution in whole or in part including the name of my organisation, and I declare that nothing within my response is unlawful or would infringe the rights of any third party in a manner that would prevent publication)

☒ can be published provided that your organisation remains anonymous (I consent to the publication of any information in my contribution in whole or in part (which may include quotes or opinions I express) provided that it is done anonymously. I declare that nothing within my response is unlawful or would infringe the rights of any third party in a manner that would prevent the publication.)

Respondents should not include personal data in documents submitted in the context of consultation if they opt for anonymous publication.

Access to and use of personal data concerning health

A major change in the way we receive and provide health and care services is giving citizens the possibility to effectively manage their health data i.e. to grant access to this data to persons or entities of their choice (e.g. doctors, pharmacists, other service providers, family members, insurances) including across borders, in compliance with EU data protection legislation.

29 Regarding the statement "Citizens should be able to manage their own health data", do you...

☐ Strongly agree
☒ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

30 Comments on previous question (e.g. what kind of information, obligatory self-management of data access vs optional, delegated management only to certain persons or organisations – e.g. doctors, pharmacists, other service providers, family members, others):

1000 character(s) maximum
Necessary structures need to be put in place to allow for this to be implemented coherently and safely in Europe. It should be noted that digital health literacy is a requirement for a citizen to manage their own health data. Some people may not have the relevant skills, which requires solutions e.g. restricted access, appointed family members/other confidant’s support or non-digital solutions. Similarly, the digital health literacy of eye care professionals needs to be ensured, which requires training opportunities. Access to own health data should however not promote self-diagnosis and self-treatment. The opinion of eye care professionals remains a crucial part of ensuring patient eye health. We would like to see patients encouraged to visit an optometrist/optician as part of their healthcare routine. This is where we see opportunities for awareness raising through digital infrastructures, for instance electronic health records and automatic reminders of an upcoming eye examination.

31 Regarding the statement "Sharing of health data could be beneficial to improve treatment, diagnosis and prevention of diseases across the EU", do you...

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

32 Comments on previous question:

1000 character(s) maximum

Citizens increasingly move across borders and they should be able to receive the appropriate level of care wherever they go. The electronic health record could help engender this and could help to guarantee the right level of protection, based on a patient’s explicit consent. Sharing of health data in the context of referrals for instance and in full respect of the patient’s data privacy have the potential to improve treatment, diagnosis and prevention of diseases. Data privacy need to be ensured and patients should not be exposed to a situation where the data is used for other purposes, in particular for any commercial interests. Making data available for research purposes is needed to improve treatments and further the knowledge about diseases, however clear rules on data protection need to be in place and strictly enforced at all times. No patient should be identifiable unless clear consent has been given. An ethics committee should also be in place for any use of health data.

33 What are the major barriers to electronic access to health data?

- [ ] Risks of privacy breaches
- [X] Legal restrictions in Member States
- [X] Lack of infrastructure
- [ ] Cybersecurity risks
- [ ] Lack of awareness
- [ ] Lack of interest
34 Please specify:

- lack of good organisation and training in digital health literacy

35 What are the major barriers to electronic sharing of health data?

- Heterogeneity of electronic health records
- Risks of privacy breaches
- Legal restrictions in Member States
- Lack of infrastructure
- Cybersecurity risks
- Lack of technical interoperability
- Data quality and reliability
- Lack of awareness
- Lack of interest
- Others

37 What should the EU do to overcome barriers to access and sharing of data?

The EU should:

- Standardise electronic health records
- Propose health-related cybersecurity standards
- Support interoperability with open exchange formats
- Support health care professionals with common (EU-level) data aggregation
- Support patient associations with common (EU-level) data aggregation
- Provide the necessary infrastructure for Europe-wide access to health data
- Develop standards for data quality and reliability
- Increase awareness of rights on data access under European law
- Focus on access in cross-border areas
- Propose legislation setting the technical standards enabling citizen access and exchange of Electronic Health Records amongst EU Member States
- Other

Making use of personal data to advance health research, disease prevention, treatment and personalised medicine

The increasing amount of data on the health and lifestyle of individuals has the potential to advance research, improve disease management and support health policy, notably if exploited in a coordinated way across Europe and in compliance with EU data protection legislation.

39 Would you agree with the principle that personal health data should be made available for further research, on a case-by-case basis, in a secure way, and in compliance with data protection legislation?

- Strongly agree
- Agree
40 For which purpose would you agree to make your health data available provided this is in compliance with data protection legislation? (Choose as many as you wish)

- Improving health care organisation
- Improving clinical practice
- Improving social care organisation
- For your own treatment
- Progressing research and innovation
- Developing health insurance schemes
- Informing public health programmes
- Supporting public health policy making
- Helping products development
- Increasing efficiency of health and social care
- Helping developing countries' health care systems
- None of the above
- Other

42 If you share your health and/or lifestyle data for research, the following preconditions have to be ensured. (Choose as many as you wish)

- My data is secure and only accessible to authorised parties
- My data is encrypted and cannot be traced back to me
- My data is only used in 'not for profit' activities
- My data is only shared between societies and institutes researching my disease area
- Other

44 Should high-performance computing, big data analytics and cloud computing for health research and personalised medicine be advanced?

- Yes
- No
- Do not know

46 Would it be useful to further develop digital infrastructure to pool health data and resources securely across the EU (linking and/or adding to existing infrastructure capacity)?

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

47 What, if anything, should the European Commission do to stimulate the use of data and digital tools to advance research, disease prevention and personalised medicine?

1000 character(s) maximum
Promote digital health literacy among citizens and health care professionals. Propose the necessary standards for the use of digital tools to facilitate referral systems, ensuring their compatibility, usability and safety needs throughout Europe.

Promote interoperability and put in place structures, funding, to ensure that all healthcare professionals and patients have the means and resources to be an integral part of the digital health and care landscape. Patients and citizens should also be properly informed of the opportunities and rights pertaining to electronic health records, and the details regarding the access to their data. Finally, we believe that digital infrastructures serve as a facilitator, rather than as a goal. Any type of infrastructure put in place ought to have citizen’s best interest at heart and should comply with the relevant measures to protect the public. Support from governments to assist individuals with low incomes is also an important aspect.

48 Do you / Does your organisation encounter barriers to using big data analytics for personalised medicine?
- Yes
- No
- Do not know

Promoting uptake of digital innovation to support interaction between citizens and health care providers

This section looks at the current status of digital services in health and care. It also addresses the role that individual citizens, health and care providers, industry, public policy authorities and the EU can play in the improvement of disease prevention and treatment in Europe.

50 Do you currently have access to digital health services (e.g. remote monitoring, consultation with doctors or any other kind of service provided through digital means)?
- Yes
- No
- Do not know

52 As a citizen, are you able to provide feedback to your health care provider on your treatment through electronic communication channels?
- Yes
- No
- Do not know

53 Please indicate to what extent you agree with the following statement: Citizen / patient feedback to health care providers and professionals on the quality of treatment is essential to improve health and care services.
- Strongly agree
- Agree
54 Please describe other factors you consider essential or more important than citizen feedback in order to improve health and care services (e.g. statistics and other evidence collected by public authorities and insurers, research, public health initiatives, education, cost-efficiency, the sharing of best practices...).  

1000 character(s) maximum

ECOO believes that the patient plays an important role in healthcare services and a patient centered approach includes giving the patient the possibility to be heard and to provide feedback. Such feedback can then feed into any plans for improvements. Opticians and optometrists, as primary health providers, are often the first point of contact for patients and understanding a patient’s needs is a crucial requirement for good patient care. Patient empowerment and patient feedback are however part of a broader picture. Prevention, early detection, screening programmes, research, good referral systems and efficient healthcare systems are all part of a functioning health care system.

55 What should the EU do to support the goals of disease prevention, better treatment and giving citizens the means to take informed decisions on health issues (by means of digital innovation)?

- [x] Provide support for knowledge transfer between member states and regions
- [ ] Support regions and municipalities in rolling out new services
- [x] Support EU associations of patients and clinicians to improve clinical practices
- [x] Support further research
- [ ] Promote common approaches for feedback mechanisms about quality of treatment
- [ ] Other

Useful links

eHealth policies (http://ec.europa.eu/health/ehealth/policy_en)
Communication on effective, accessible and resilient health systems (http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=celex:52014DC0215)
Research and innovation in health (https://ec.europa.eu/research/health/index.cfm)
Contact

EC-DIGICARE-TASKFORCE@ec.europa.eu