



Annexe I

*The InteropEHRate Project Explained
to the Nursing Profession*

READ MORE
Some references

InteropEHRate project is co-funded by the
European Union (EU) Horizon 2020 program
under Grant number 826106



Lesson 1

EFN Presentation

The European Union, What's in it for me?

Paul De Raeve, 2017

This book offers nurses a valuable and insightful resource into the politics and strategic direction of health policy that shapes frontline nursing and midwifery practice in the EU.

Read the book ONLINE :

<https://online.anyflip.com/eumpx/ssim/mobile/index.html>

The EU faces many challenges. Nurses and nursing are part of the solution. It looks like the EU citizens have enough of the nice talks of politicians, enough of their political promises prior election. Therefore, it is important civil society, nurses ask themselves in which world they want to live and work; how nursing need to push for change in the changing world; and what should be in for nurses who provide daily care for the most vulnerable in our complex society. But when moving forward, the main question for many citizens will be: the EU, what's in it for me? Indeed, since 2008, when the financial crisis hit ordinary EU citizens very hard, especially nurses and women, more challenges to daily survival started to surface. Is the EU, its institutions, its political games, just a complex political labyrinth nobody wants to understand? Are EU civil servants simply producing legislation in view of their own created cocoon, far away from daily reality? But how can we bring ordinary EU citizens closer to the European project, its solutions? Nurses, women, play a key role in making the EU, health & wellbeing, prosperity and peace work for EU citizens, trusting nurses most!

EU Future Trust



Paul De Raeve

**The European Union,
what's in it for me?**



As Registered Nurse (1984), Master Nursing Science (1989-VUB) and Statistics (1996-KUB), followed by his PhD at Kings College London (2014), Paul became EFN Secretary General from 2002, lobby the EU Commission, Parliament and Council and recently (2016) started designing within the ENRF a nursing research and innovation agenda.



978-3-330-03381-8

De Raeve



EU Lobby Strategies Fitting a New Political Context

Paul De Raeve, 2017

This book builds on concrete achievements of the nursing community, its leaders to move the European political agenda, to advance nursing in such a way that it delivers concrete benefits for EU citizens.

Read the book ONLINE :

<https://online.anyflip.com/eumpx/ugmb/mobile/index.html>



The changing EU economic and political context implies adapting to this changing environment, including our lobby strategies to pro-actively set the nursing agenda. The EU institutions, its political machinery, has become a complex political labyrinth in which public consultations are not enough to build trust with its citizens. Putting civil society into the cloud to meet and produce statement is the new window dressing which does not facilitate the design of a social Europe. This book is building on concrete achievements of the nursing community, its leaders to move the European political agenda, to advance nursing in such a way that it delivers concrete benefits for EU citizens. The nurses' European project, be it political, professional, scientific, is a movement built since 1967, when the Commission started drafting the free movement Directive. EU legislation protected and stimulated the development of nursing as a profession. However, as lobby strategies are drying up, civil society being excluded from policy design, we need to reflect on how to influence better EU politics and policies. The world changed in 2017 and more changes are to come, for the better, the worse!



As Registered Nurse (1984), Paul has a Master in Nursing Science (1989-VUB) and Statistics (1996-KUB) and a PhD from Kings College London (2014), being the first EFN Secretary General since 2002, lobbying the EU Commission, Parliament and Council on behalf of 3 million nurses in the EU. Paul focusses on developing EFN and ENRF in synergy.



978-3-330-04870-6

EU Lobby Strategies Fitting a New Political Context

Paul De Raeve

De Raeve



Building & Sustaining a Resilient EU Nursing Workforce & Healthcare

*The future of the European Union –
Nurses Impact*

Paul De Ravee, 2021

*This book shows that more than ever, it is crucial
for nurses to engage and proactively contribute
to EU health and social policies, in the complex
and challenging society we operate in as frontline
healthcare professionals.*

See here :

<https://www.lap-publishing.com/catalog/details//store/gb/book/978-620-4-20948-7/building-sustaining-a-resilient-eu-nursing-workforce-healthcare>



Lesson 2

EFN & EU LAW

Directive 2013/55/EU

amending Directive 2005/36/EC on the recognition of professional qualifications

This Directive aims to consolidate and modernise the rules regulating the mutual recognition of professional qualifications in the EU Member States, including for general care nurses.

To read the Directive:

<https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32013L0055>

DIRECTIVE 2013/55/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

of 20 November 2013

amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System ('the IMI Regulation')

(Text with EEA relevance)

THE EUROPEAN PARLIAMENT AND THE COUNCIL OF THE EUROPEAN UNION,

Having regard to the Treaty on the Functioning of the European Union, and in particular Articles 46, 53(1) and 62 thereof,

Having regard to the proposal from the European Commission,

After transmission of the draft legislative act to the national parliaments,

Having regard to the opinion of the European Economic and Social Committee (1),

Acting in accordance with the ordinary legislative procedure (2),

Whereas:

(1) Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications (3) consolidated a system of mutual recognition which was initially based on 15 Directives. It provides for automatic recognition for a limited number of professions based on harmonized minimum training requirements (sectoral professions), a general system for the recognition of evidence of training and automatic recognition of professional experience. Directive 2005/36/EC also established a new system of free provision of services. It should be recalled that third-country family members of Union citizens benefit from equal treatment in accordance with Directive 2004/38/EC of the European Parliament and of the Council of 29 April 2004 on the right of citizens of the Union and their family members to move and reside freely within the territory of the Member States (4). Third-country nationals may also benefit from equal treatment with regard to recognition of diplomas, certificates and other professional qualifications, in accordance with the relevant national procedures, under specific Union legal acts such as those on long-term residence, refugees, 'blue card holders' and scientific researchers.

(2) In its Communication of 27 October 2010 entitled 'Single Market Act, Twelve years to boost growth and strengthen confidence, Working together to create new growth', the Commission identified the need to modernise Union law in this area. On 23 October 2011, the European Council in its conclusions supported such a modernisation and urged the European Parliament and the Council to reach a political agreement on the revision of Directive 2005/36/EC by the end of 2012. In its resolution of 15 November 2011 on the implementation of the Professional Qualifications Directive (2005/36/EC) (5), the European Parliament also invited the Commission to come forward with a proposal. The EU Citizenship report 2010 of 27 October 2010 entitled 'Dismantling the obstacles to EU citizens' rights' underlines the need to lighten the administrative burden linked to the recognition of professional qualifications.

(3) Notaries who are appointed by an official act of government should be excluded from the scope of Directive 2005/36/EC in view of the specific and differing regimes applicable to them in individual Member States for accessing and pursuing the profession.

(4) For the purposes of strengthening the internal market and promoting the free movement of professionals while ensuring a more efficient and transparent recognition of professional qualifications, a European Professional Card would be of added value. In particular, that Card would be useful to facilitate temporary mobility and recognition under the automatic recognition system, as well as to promote a simplified recognition process under the general system. The purpose of the European Professional Card is to simplify the recognition process and to introduce cost and operational efficiencies that will benefit professionals and competent authorities. The introduction of a European Professional Card should take into account the views of the profession concerned and should be preceded by an assessment of its suitability for the profession concerned and its impact on Member States. That assessment should be conducted together with Member States, where necessary. The European Professional Card should be issued at the request of a professional and after submission of necessary documents and completion of related verification procedures by the competent authorities. Where the European Professional Card is issued for the purpose of establishment, it should constitute a recognition

(1) OJ C 131, 28.6.2012, p. 103.

(2) Position of the European Parliament of 9 October 2013 (not yet published in the Official Journal) and decision of the Council of 15 November 2013.

(3) OJ L 255, 30.9.2005, p. 22.

(4) OJ L 158, 30.4.2004, p. 77.

(5) OJ C 153 E, 31.5.2013, p. 15.

EFN Competency Framework

Approved by the EFN members in April 2015, the EFN Competency Framework describes the competences required to nurses responsible for general care, aiming at being used by the National Nurses Associations to encourage and guide the nursing schools at national level to implement the competences listed under Article 31 of the Directive.

Read it here:

http://www.efnweb.be/?page_id=6897



*EFN Guideline for the implementation of Article 31 of the
Mutual Recognition of Professional Qualifications
Directive 2005/36/EC, amended by Directive 2013/55/EU*

*EFN Competency Framework
Adopted at the EFN General Assembly, April 2015, Brussels*

EFN

EFN Workforce Matrix 3+1

Approved by the EFN Members in May 2017, the EFN Workforce Matrix 3+1 includes information on education, qualifications and competences for each category, and shows the commonalities and differences of the three categories and the HCAs among 35 EU countries.

Read it here:

http://www.efnweb.be/?page_id=8220



European Pillar of Social Rights

The European Pillar of Social Rights is about better delivering on rights for citizens by building on 20 key principles. Of these 20 principles, the EFN follows 4: Principle 1 (Education); Principle 6 (Wages); Principle 16 (Healthcare); Principle 18 (Long-term care).

See it here :

https://ec.europa.eu/info/strategy/priorities-2019-2024/economy-works-people/jobs-growth-and-investment/european-pillar-social-rights/european-pillar-social-rights-20-principles_en



European Pillar of Social Rights Action Plan

The European Pillar of Social Rights Action Plan sets out concrete initiatives to turn the European Pillar of Social Rights into reality. It proposes headline targets for the EU by 2030.

See it here :

https://ec.europa.eu/info/strategy/priorities-2019-2024/economy-works-people/jobs-growth-and-investment/european-pillar-social-rights/european-pillar-social-rights-action-plan_en



Multiannual Financial Framework 2021-2027

See it here:


https://ec.europa.eu/info/strategy/eu-budget/long-term-eu-budget/2021-2027_en

NextGenerationEU

See it here:

https://ec.europa.eu/info/strategy/recovery-plan-europe_en#nextgenerationeu

Both supporting the recovery plan for Europe. It includes the new EU budget structure, funding programmes, allocations per Member States, and data on spending and revenue.




European Commission

EU'S NEXT LONG-TERM BUDGET & NextGenerationEU: KEY FACTS AND FIGURES

#EUBudget #EUSolidarity #StrongerTogether

11 November 2020



"I welcome today's agreement on our Recovery Plan and the next Multiannual Financial Framework. We now need to move forward with finalising the agreement on the next long-term budget and NextGenerationEU by the end of the year. Help is needed for citizens and business badly hit by the coronavirus crisis. Our recovery plan will help us turn the challenge of the pandemic into an opportunity for a recovery led by the green and digital transition".

European Commission President Ursula von der Leyen

On 10 November 2020, the European Parliament and EU Member States in the Council, with the support of the European Commission, reached an agreement on the largest package ever financed through the EU budget, of €1.8 trillion. Following the coronavirus crisis and its consequences, the package will help rebuild a greener, more digital and more resilient Europe, which is better fit for current and forthcoming challenges.

Key figures in the agreement:

- Long-term budget for 2021-2027 of **€1.074 trillion** combined with the temporary recovery instrument, NextGenerationEU, of **€750 billion**;
- More than **50%** of the amount will support modernisation through policies that include research and innovation, via **Horizon Europe**; fair climate and digital transitions, via the **Just Transition Fund** and the **Digital Europe programme**; preparedness, recovery and resilience, via the **Recovery and Resilience Facility**, **rescEU** and a new health programme, **EU4Health**;
- Traditional policies such as **cohesion and common agricultural policy** will be modernised and will continue to receive significant EU budget funds, with the objective to support the green and digital transitions;
- **30%** of the EU funds, under both NextGenerationEU and MFF, will be spent to fight climate change. The package also pays a specific attention to biodiversity protection and gender mainstreaming;
- Key programmes, including **Erasmus+**, **EU4Health** and **Horizon Europe**, will be reinforced compared to the agreement at the July 2020 special European Council, by a total of **€15 billion**.

National Recovery and Resilience Plans

The links contain all relevant country-specific information, such as the recovery and resilience plans and key points about them, and where available, the legal texts approving the plan and accompanying press material.

See it here:

https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility_en#national-recovery-and-resilience-plans

National recovery and resilience plans

The flags below will guide you to the Member State section. The links contain all relevant country-specific information, such as the recovery and resilience plans and key points about them, and where available, the legal texts approving the plan and accompanying press material.



[Austria](#)



[Croatia](#)



[Denmark](#)



[France](#)



[Hungary](#)



[Latvia](#)



[Malta](#)



[Portugal](#)



[Slovenia](#)



[Belgium](#)



[Cyprus](#)



[Estonia](#)



[Germany](#)



[Ireland](#)



[Lithuania](#)



[Netherlands*](#)



[Romania](#)



[Spain](#)



[Bulgaria](#)



[Czechia](#)



[Finland](#)



[Greece](#)



[Italy](#)



[Luxembourg](#)



[Poland](#)



[Slovakia](#)



[Sweden](#)

*The Netherlands has not submitted a recovery and resilience plan so far.

Recovery and Resilience Facility

Aiming to mitigate the economic and social impact of the coronavirus pandemic and make European economies and societies more sustainable, resilient and better prepared for the challenges and opportunities of the green and digital transitions.

See it here:

https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility_en



Recovery and Resilience Scoreboard

The Recovery and Resilience Scoreboard gives an overview of how the implementation of the Recovery and Resilience Facility (RRF) and the national recovery and resilience plans is progressing.

See it here:

https://ec.europa.eu/economy_finance/recovery-and-resilience-scoreboard/



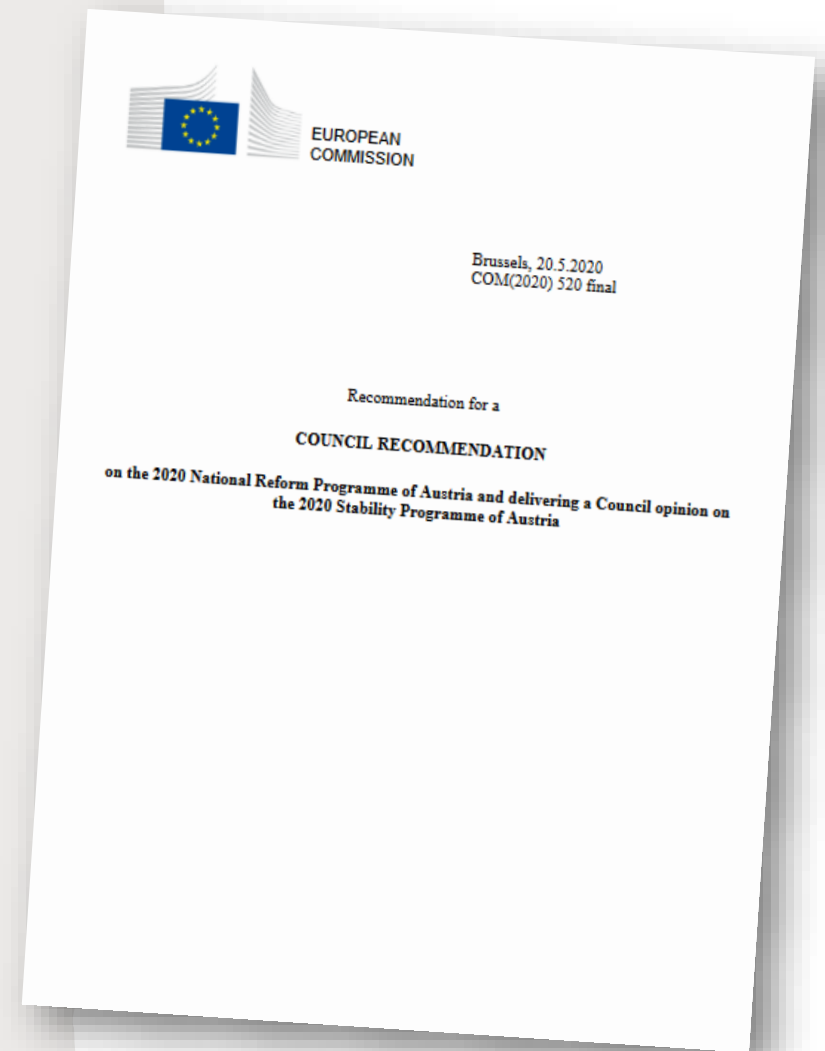
European Semester - Country Specific Recommendation (2016-2020)

Country-specific recommendations provide tailored advice to individual Member States on how to boost jobs, growth and investment, while maintaining sound public finances.

The Commission publishes them every spring. They give guidance on what can realistically be achieved in the next 12-18 months to make growth more sustainable, inclusive and stronger.

Read it here:

https://ec.europa.eu/info/publications/2020-european-semester-country-specific-recommendations-commission-recommendations_en

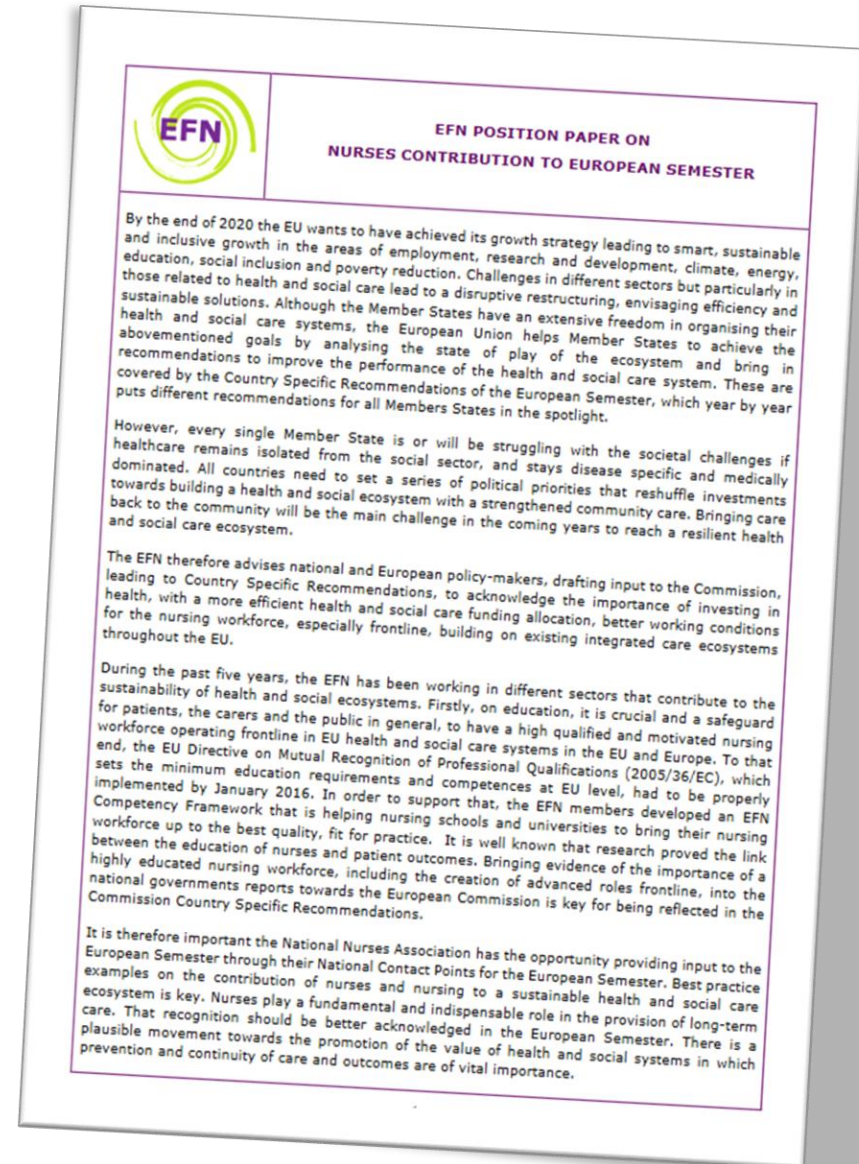


EFN Policy Statement on the EU Semester

Approved by the EFN Members in October 2016, this EFN Policy Statement is calling on the national and European policy-makers to acknowledge the importance of investing in health, with a more efficient health and social care funding allocation and better working conditions for the nursing workforce, building on existing integrated care ecosystems throughout the EU.

Read it here:

<http://www.efnweb.be/wp-content/uploads/EFN-Position-Paper-on-Nurses-Contribution-to-European-Semester.pdf>



EFN Report on European Semester Analysis 2016-2020

This EFN report is analysing 2020 in comparison with previous European Semesters & Country Reports (2016-2019) and selecting the relevant information for nurses, nursing and healthcare. The aim of this EFN Report is to be a compilation of all the European Commission's Country Reports entries related to nursing and/or healthcare, for each EU Member State, providing a unique insight in the capacity of the EU healthcare systems. Measures taken by one country that were successful are likely to inform initiatives for improving the healthcare situation in another country.

Read it here:

<http://anyflip.com/eumpx/ytok/>

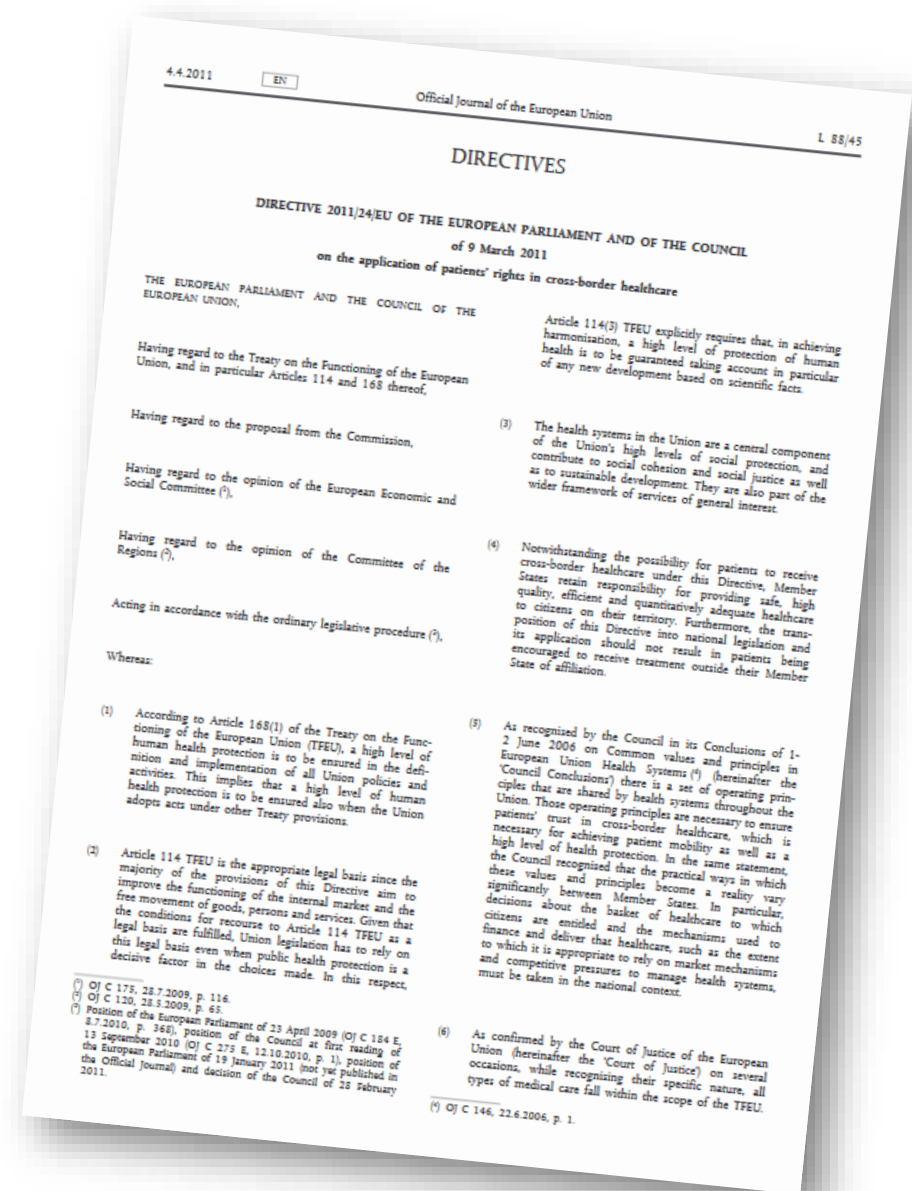


Directive on Patients' Rights in Cross-Border Healthcare (2011/24/EU)

This Directive created a legal framework for the patient's right to seek healthcare in another Member State and to be reimbursed; and provides a legal basis for European cooperation in key areas of healthcare: quality and safety, Health Technology Assessment and eHealth, and rare diseases.

Read it here:

<https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32011L0024>

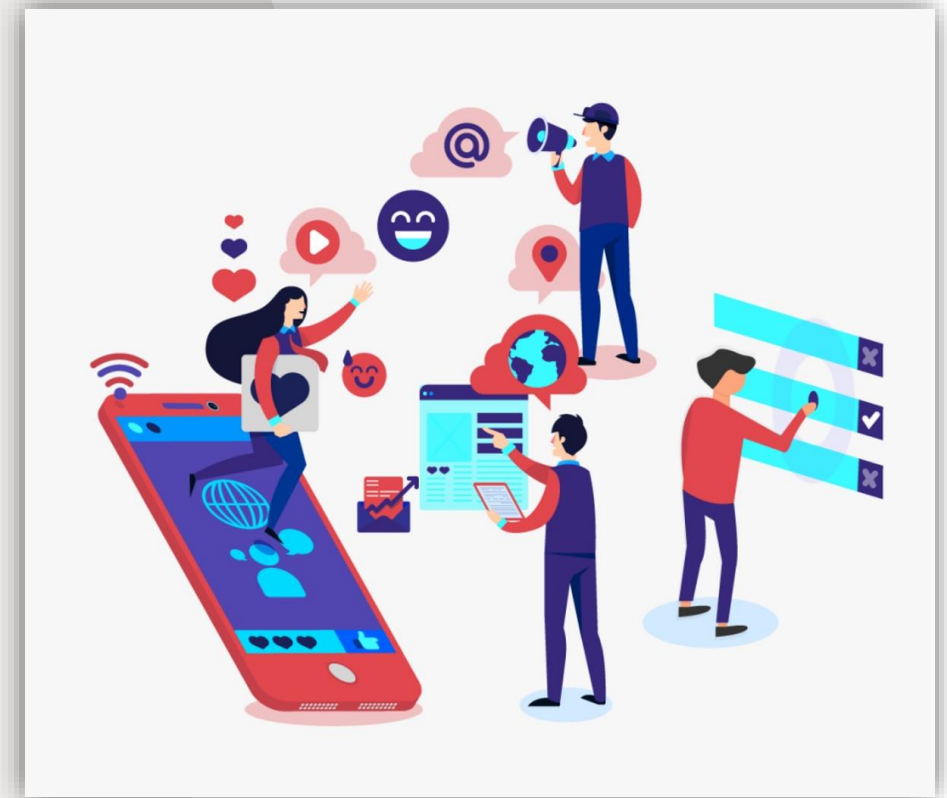


European Health Data Space (EHDS)

The European Health Data Space is a health specific ecosystem comprised of rules, common standards and practices, infrastructures and a governance framework that aims at empowering individuals through increased digital access to and control of their electronic personal health data, at national level and EU-wide, and support to their free movement, as well as fostering a genuine single market for electronic health record systems, relevant medical devices and high-risk AI systems. It also aims at providing a consistent, trustworthy and efficient set-up for the use of health data for research, innovation, policy-making and regulatory activities.

See here:

https://health.ec.europa.eu/ehealth-digital-health-and-care/european-health-data-space_en



The world of cloud-based services: storing health data in the cloud

Paul De Raeve, 2019

This article provides an insight into the world of 'cloud'.

Read it here :

<https://www.healtheuropa.eu/cloud-based-services-storing-health-data-in-the-cloud/93053/>



The Blockchain Interoperability - Sharing data across the care continuum

Paul De Raeve, 2019

*This article provides an overview on how
blockchain interoperability is enabling sharing
data across the care continuum.*

Read it here :

<http://www.efn.eu/wp-content/uploads/Blockchain-Interoperability-Sharing-data-across-the-care-continuum.pdf>

Blockchain interoperability: Sharing data across the care continuum

Paul De Raeve, Secretary General of the European Federation of Nurses Associations (EFN) sheds lights on how blockchain interoperability is enabling sharing data across the care continuum

The interoperability of electronic health records (EHR) in Europe is key, especially now the European Commission plans to publish a recommendation on the technical specifications for an EHR exchange format. Although the EHR exchange format is part of a bigger plan of the digital transformation of the health and social care in the Digital Single Market, the EU financing of two H2020 projects, 'Smart4Health' and 'InteropEHRate' can lead to large-scale interoperable designs, especially at a time when a variety of government agencies are moving their infrastructure on to new technologies offering optimum security and data privacy. The policy outcome, adopting an EHR exchange format at EU level, could end the endless and costly interoperability discussion we have had for the last two decades. Despite some advancements towards more seamless interoperability in the healthcare sector, frontline deployment of continuity of care, based on data sharing in clinical care pathways, could benefit more from new IT developments.

Although called 'disruptive', we recognise these new systems compete for market shares struggling to make a business case for sharing the data they've gathered, sorted, collected, aggregated and secured. Therefore, it becomes key that the IT industry, the EHR vendors become connected to the frontline practitioner so products become co-designed, fit-for-purpose, reduce the endless hours nurses spend on data entry, leading to a general malaise towards software solutions that were supposed to help, but it really just means more work for the frontline. So, it becomes high time to get interoperability right!

Co-designing interoperable solutions

A favourable ecosystem of trust and political support to use blockchain as a way to tackle interoperability is

not the main challenge, but what we miss are the practical use cases showing blockchain works better for the frontline due to solving the interoperability challenges we currently have in the healthcare ecosystem.

It is argued that blockchain makes it possible to exchange data from different sources, in different formats, among the end-users, at their fingertips to plan and provide frontline healthcare. Within this context, nurses have an opportunity to co-design an EU interoperable EHR as end-users, respecting the existing national EHR developments. Therefore, EFN partnership in the H2020 granted EU projects focusses on co-designing a fit-for-purpose interoperable EHR, aiming to prototype:

- A citizen-centred implementation of a platform that can be integrated with a federated platform structure, easy-to-use and secure, constantly accessible and portable within any other Member States of the EU and;
- A data-driven platform to help the scientific community to benefit from the user-generated data (health, care, and health-related) going beyond the currently established interoperability level.

Nurses are in the unique and privileged position in co-designing interoperable solutions as they have direct access to the daily care needs of people and have an in-depth knowledge of the patients' experiences and contextual environments in which the continuity of care takes place. As nurses are central in empowering citizens/patients to have access to health and social services, they play a significant role in addressing trust and ensure the appropriate allocation of nursing data in the EHR to facilitate continuity of care and as such, to ensure better health outcomes.

Digital transformation of healthcare for the patient

Paul De Raeve, 2021

The article considers the importance of digital transformation to support high-quality patient healthcare.

Read it here:

<http://efn.eu/wp-content/uploads/2022/05/Digital-transformation-of-healthcare-for-the-patient.pdf>



ENRF Policy Brief on Digitalisation

Published in April 2021, by the European Nursing Research Foundation (ENRF), this Policy Brief shows that digitalisation of the healthcare sector has the potential to ease frontline nurses' daily workload and reduce administrative tasks; in doing so, it creates opportunities for nurses to spend more time with, and focused on, patients.

Read it here:

<http://www.enrf.eu/wp-content/uploads/2021/04/ENRF-Evidence-Based-Policy-Brief-on-Digitalisation-April-2021.pdf>

Empowering nurses through digitalising the healthcare sector

The digitalisation of the healthcare sector is transforming the way healthcare is provided by nurses in primary care, hospitals, and community care. It has the potential to ease frontline nurses' daily workload and reduce administrative tasks; in doing so, it creates opportunities for nurses to spend more time with, and focused on, patients. The key to successful digitalisation lies in fostering co-creation with nurses and other frontline healthcare professionals. The EU political agenda and strategy on digitalisation is a policy opportunity for the nursing profession and nursing researchers. However, for the strategy to work, policymakers and politicians must first be willing to engage nurses and nursing in co-designing European-wide digital healthcare initiatives.

What is the Issue?

Europe is facing unprecedented challenges to guarantee sustainable and accessible healthcare solutions for every citizen. Research and innovation are instrumental to upscale system level developments and engage frontline knowledge, understanding and know-how through life-long learning.

A recent communication¹ from the European Commission called for enabling the digital transformation of health and care in the Digital Single Market: empowering citizens and building a healthier society, is a key starting point for change.

The European Commission President-Elect Ursula von der Leyen has made clear her ambition to ensure that the next five-year EU legislative cycle harnesses the potential of digital innovation to drive improvements in all aspects of healthcare. To support this, she has pledged to create a European Health Data Space and to adopt legislation on artificial intelligence (AI) in the first 100 days of office.

This political cycle in the EU presents a unique opportunity for nurse researchers to address sustainability in healthcare systems, increase quality, and improve access for patients. This

is especially relevant in the EU, where national healthcare budgets are under severe pressure, and health inequalities persist from country to country. The outbreak of the Coronavirus (COVID-19) pandemic in 2019 has showcased the need for better connected healthcare systems and a more coordinated approach in cross-border health policies in the EU.

'The digitalisation of healthcare is completely transforming not only the way healthcare is provided by nurses and other healthcare professionals, but also the clinical experience of patients'

Technology – and digitalisation in particular – has the power to drive innovation in healthcare. The digitalisation of healthcare is completely transforming not only the way healthcare is provided by nurses and other healthcare professionals, but also the clinical experience of patients. Healthcare provision is a field requiring continuous and systematic innovation to remain cost-effective, efficient and timely. This is due to the constantly increasing life expectancy across all EU countries and the resulting pressures which that increase brings to bear: the rise of people

Keywords: improve patient safety, quality of nursing care, improved health outcomes, co-design

Lesson 3

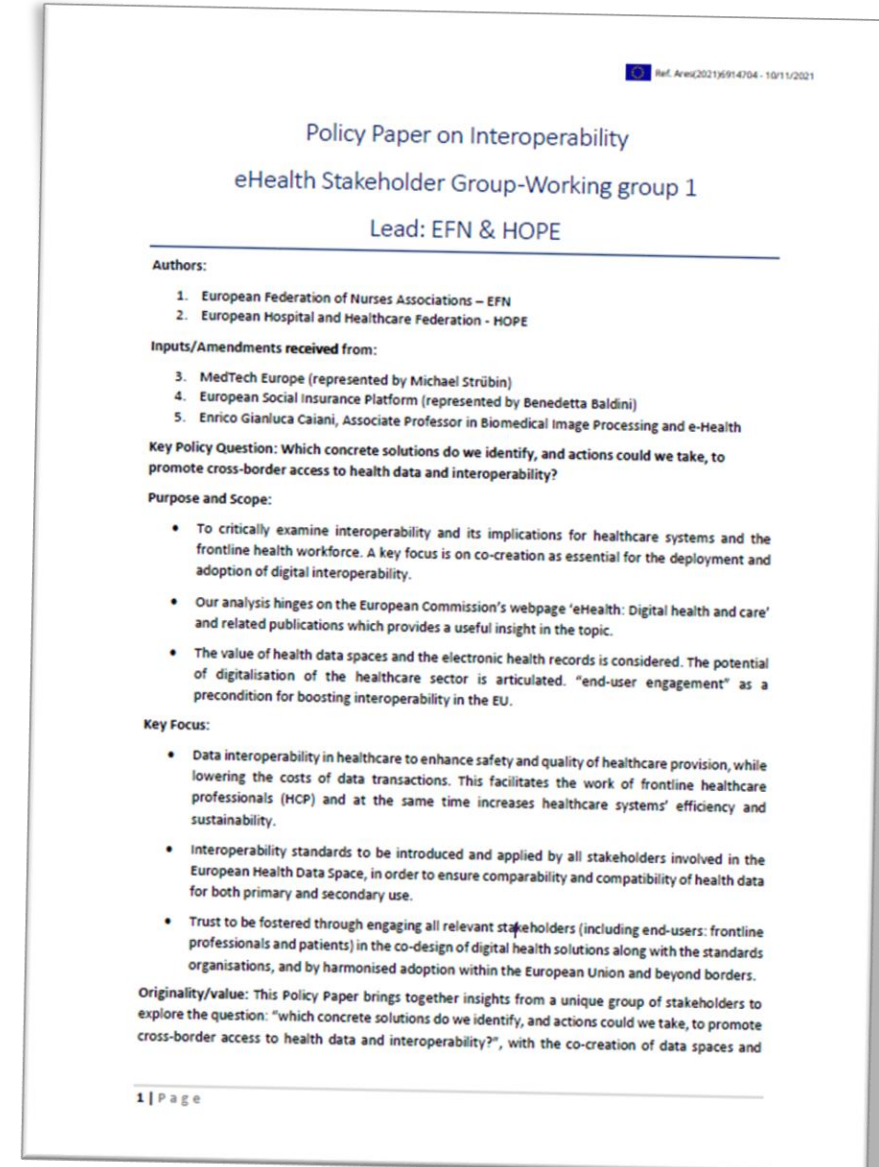
Interoperability

eHealth Stakeholder Group Policy Paper on Interoperability (EFN & HOPE)

This Policy Paper brings together insights from the eHealth Stakeholder Group to explore the question: “which concrete solutions do we identify, and actions could we take, to promote cross-border access to health data and interoperability?”, with the co-creation of data spaces and electronic health records as common agenda topics, and the role of the frontline health workforce to make it all happen frontline.

Read it here:

<http://efn.eu/wp-content/uploads/2022/07/EFN-lead-eHSG-WG1-Policy-Paper-on-Interoperability-Nov-2021.pdf>



FHIR (HL7)

FHIR (Fast Health Interoperability Resources) is an HL7 specification for Healthcare Interoperability.

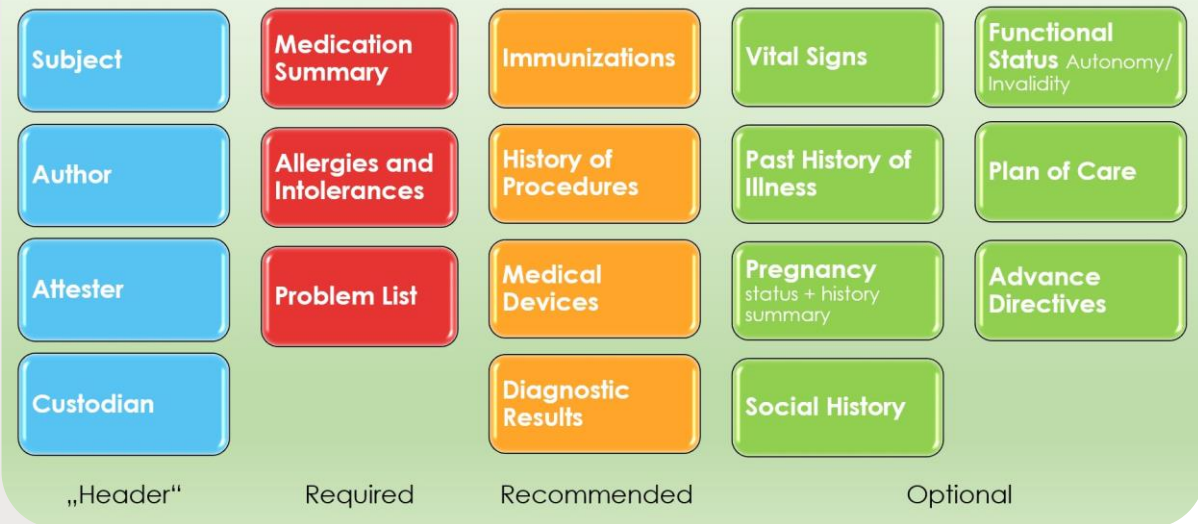
See here:
<https://www.fhir.org/>

International Patient Summary (IPS)

The HL7 International Patient Summary (IPS) is an electronic health record containing essential healthcare information intended for use in unscheduled, cross-border care scenarios.

See here:
<http://hl7.org/fhir/uv/ips/>

IPS Composition



Lesson 4

What is InteropEHRate?

InteropEHRate EU Project

InteropEHRate aims to support peoples' health by opening them up new ways to make health data available where needed.

See it here:

<https://www.interopehrate.eu/>



InteropEHRate Deliverables

These are the milestones of the project on requirements, protocols, architecture, specifications, etc. submitted to the European Commission.

Read it here:

<https://www.interopehrate.eu/resources/#dels>



InteropEHRate White Papers

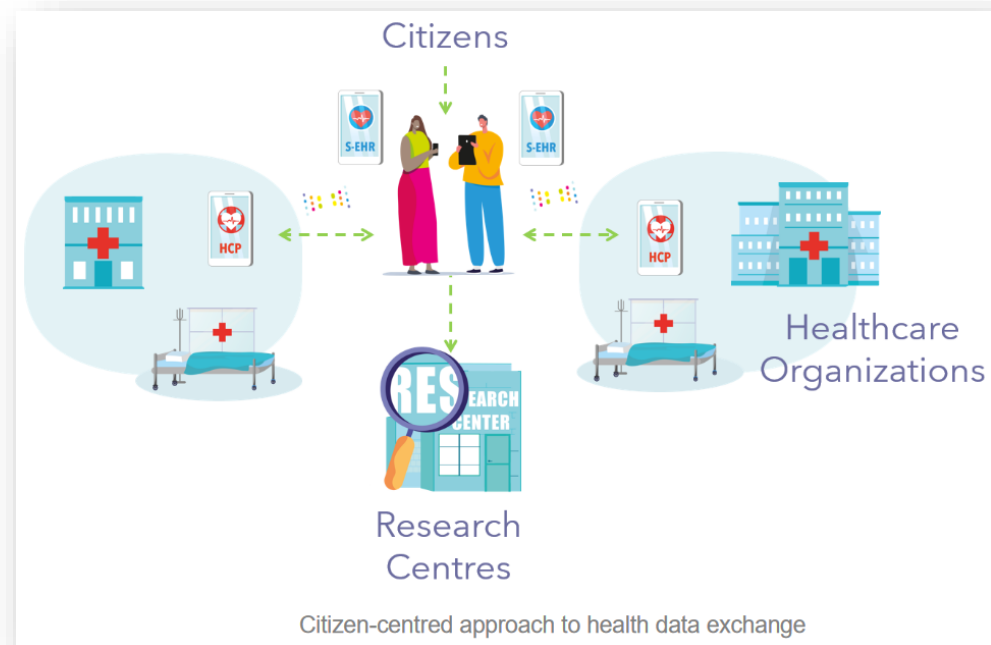
“Unleashing personal health data for care and research: The InteropEHRate approach” - gives an overview on how to enable a citizen-centric approach and what technical solutions is InteropEHRate developing.

“Real-world evidence in health and care research – The contribution of InteropEHRate” - explores the background to real-world data challenges in health and care and draws attention to the growing impetus of hybrid approaches to health and care data collection.

“Towards interoperable health data: The contribution of InteropEHRate” - provides an overview of the problems of data heterogeneity and interoperability and presents a solution based on an in-depth and exhaustive analysis of data, made possible through innovative semi-automated methodologies and tools developed in the framework of the InteropEHRate project.

Read it here:

<https://www.interopehrate.eu/resources/#pubs>



Lesson 5

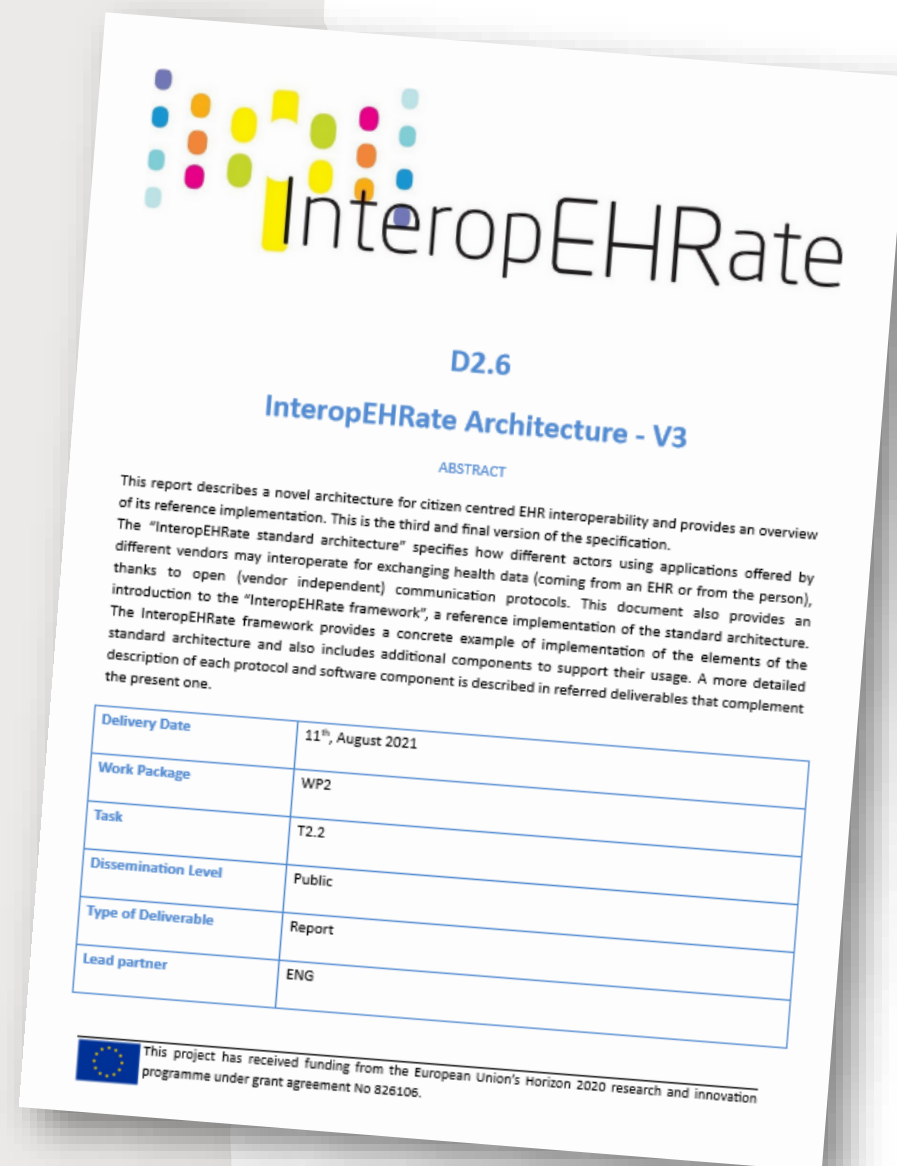
IEHR Project Architecture IEHR 3 scenarios

InteropEHRate Architecture

The “InteropEHRate standard architecture” specifies how different actors using applications offered by different vendors may interoperate for exchanging health data (coming from an EHR or from the person), thanks to open (vendor independent) communication protocols.

See here:

<https://www.interopehrate.eu/wp-content/uploads/2021/09/InteropEHRate-D2.6-InteropEHRate-Architecture-V3.pdf>

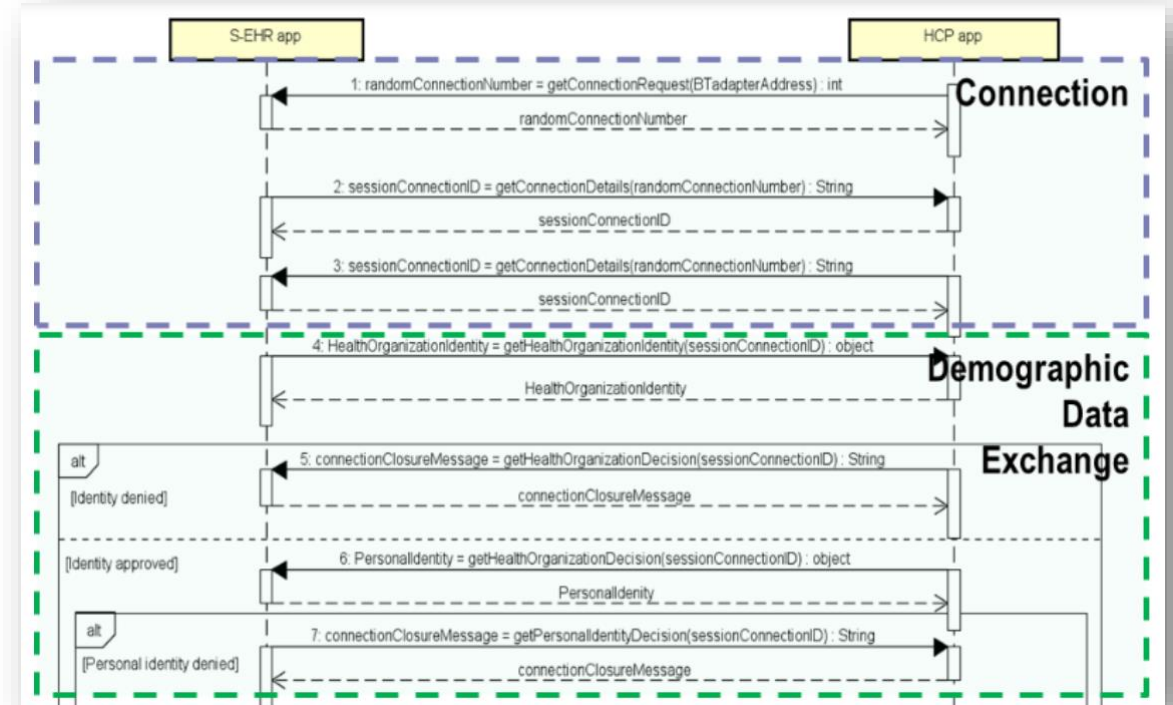


Device-to-device (D2D) protocol

Applied to the healthcare access scenario, the Device-to-device (D2D) protocol provides the citizen the ability to retrieve data stored in the National EHR, store data locally on a Smart EHR (S-EHR), exchange health data where no internet connection is available and travel all over the European Union with her medical data.

See here:

<https://www.interopehrate.eu/blog/2020/07/20/d2d-protocol-update-july-2020/>



Lesson 6

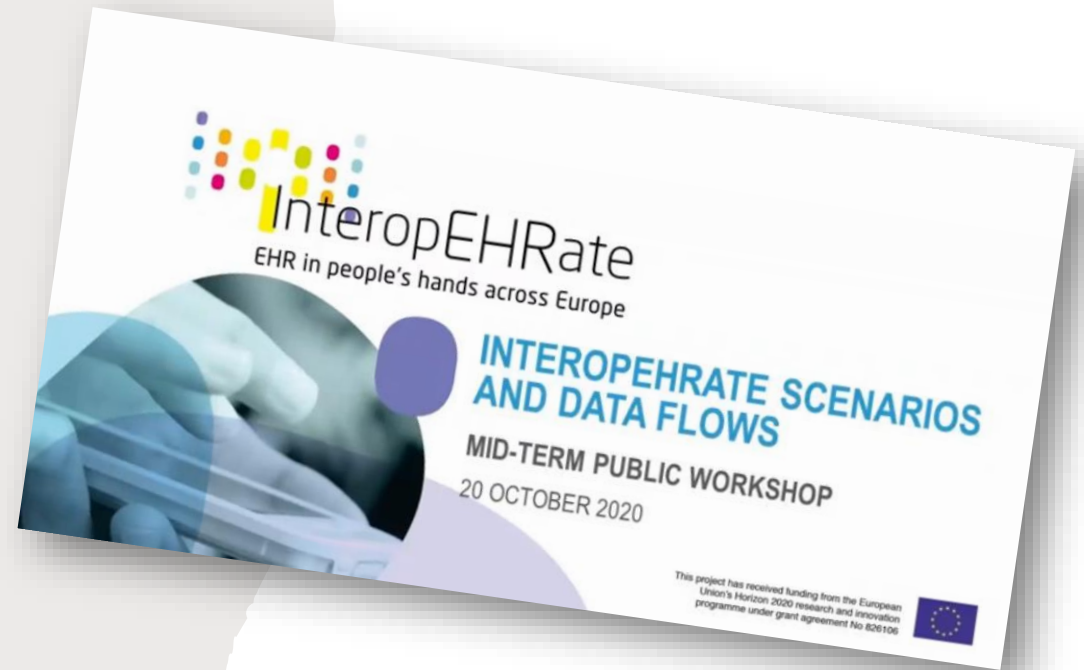
IEHR Project Exploitation & Governance

Exploitation & Dissemination

*InteropEHRate Mid-term Public Workshop – October 2020
that presented how citizens can access and share their
personal health data with interopEHRate solutions.*

Read it here:

<https://www.interopehrate.eu/event/interopehrate-scenarios-and-data-flows-mid-term-public-workshop/>



Leveraging the trust of nurses to advance a digital agenda in Europe: a critical review of health policy literature

Paul De Raeve at AI, 2021

This article is a critical and integrative review of health policy literature examining artificial intelligence (AI) and its implications for healthcare systems and the frontline nursing workforce. A key focus is on co-creation as essential for the deployment and adoption of AI.

Read it here:

<https://open-research-europe.ec.europa.eu/articles/1-26/v2>

Open Research Europe

Open Research Europe 2021, 1:26 Last updated: 30 SEP 2021

REVIEW

REVISED Leveraging the trust of nurses to advance a digital agenda in Europe: a critical review of health policy literature

[version 2; peer review: 3 approved]

Paul De Raeve ¹, Patricia M. Davidson², Franklin A. Shaffer³, Eric Pol⁴, Amit Kumar Pandey⁵, Elizabeth Adams ¹

¹European Federation of Nurses Associations, Brussels, 1050, Belgium
²Johns Hopkins School of Nursing, Baltimore, 21205, USA
³CGFNS International, Inc., Philadelphia, 19104-2651, USA
⁴NewGovernance, Brussels, 1050, Belgium
⁵Societas AI and Robotics (SAS), 185 RUE DES GROS GRES, Colombes, 92700, France

v2 First published: 26 Mar 2021, 1:26
<https://doi.org/10.12688/openresearcheurope.13231.1>
Latest published: 13 May 2021, 1:26
<https://doi.org/10.12688/openresearcheurope.13231.2>

Abstract
This article is a critical and integrative review of health policy literature examining artificial intelligence (AI) and its implications for healthcare systems and the frontline nursing workforce. A key focus is on co-creation as essential for the deployment and adoption of AI. Our review hinges on the European Commission's White Paper on Artificial Intelligence from 2020, which provides a useful roadmap. The value of health data spaces and electronic health records (EHRs) is considered; and the role of advanced nurse practitioners in harnessing the potential of AI tools in their practice is articulated. Finally, this paper examines "trust" as a precondition for the successful deployment and adoption of AI in Europe.

AI applications in healthcare can enhance safety and quality, and mitigate against common risks and challenges, once the necessary level of trust is achieved among all stakeholders. Such an approach can enable effective preventative care across healthcare settings, particularly community and primary care. However, the acceptance of AI tools in healthcare is dependent on the robustness, validity and reliability of data collected and donated from EHRs. Nurse stakeholders have a key role to play in this regard, since trust can only be fostered through engaging frontline end-users in the co-design of EHRs and new AI tools. Nurses hold an intimate understanding of the direct benefits of such technology, such as releasing valuable nursing time for essential patient care, and empowering patients and their family members as recipients of nursing care.

This article brings together insights from a unique group of stakeholders to explore the interaction between AI, the co-creation of data spaces and EHRs, and the role of the frontline nursing workforce.

Open Peer Review

Reviewer Status 

	Invited Reviewers		
	1	2	3
version 2 (revision) 13 May 2021		 report	 report
version 1 26 Mar 2021	 report	 report	 report

1. Pamela Hussey, Dublin City University, Dublin, Ireland
2. Andreas Xyrichis, King's College London, London, UK
3. Dorota Kilanska , Medical University of Lodz, Lodz, Poland

Any reports and responses or comments on the article can be found at the end of the article.

Page 1 of 20

Lesson 7

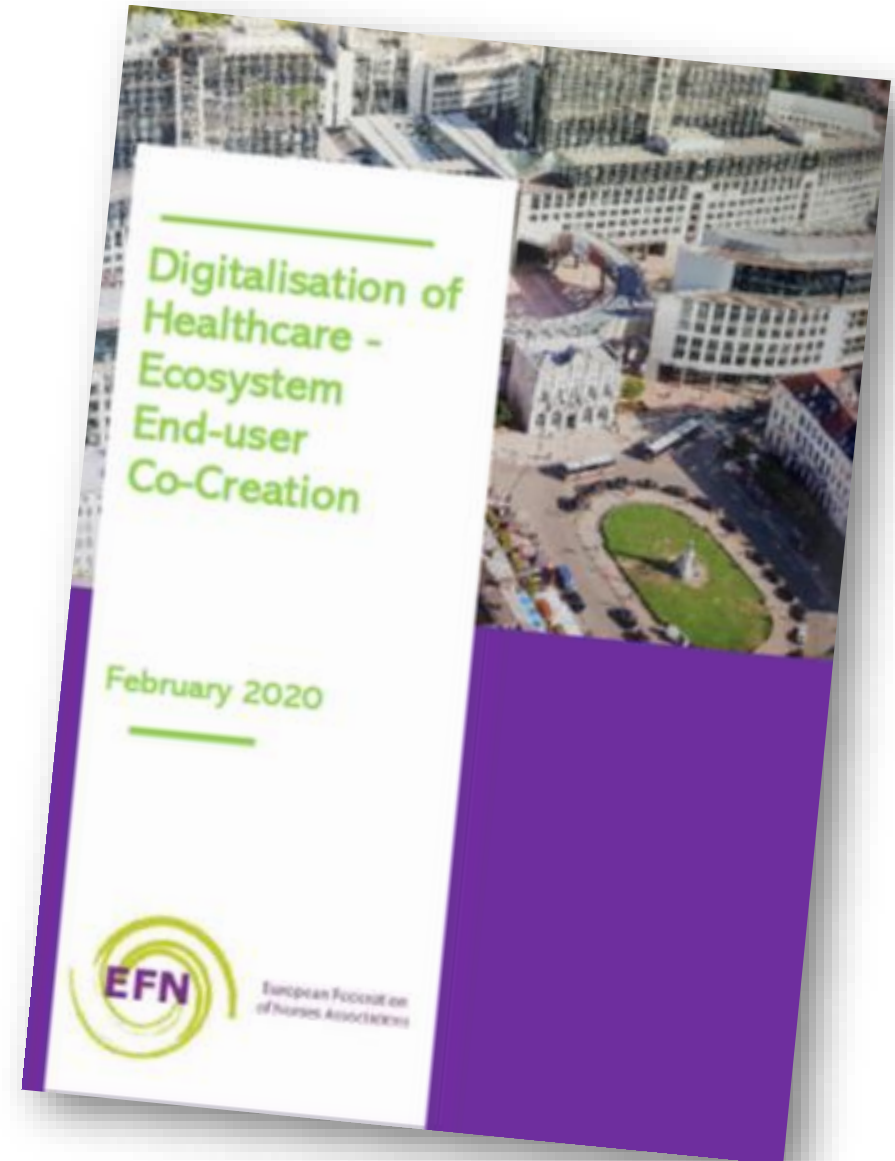
**IEHR at the European Parliament
EFN Involvement in EU Projects**

EFN Report on the Digitalisation Event at the European Parliament 05 February 2020

Digitalisation has a central place in the EFN lobby work, with a high-level event organised at the European Parliament in February 2020, focussing on 'European Electronic Health Records' thematic. This report gives an overview on the key outcomes of the EFN event.

Read it here:

<https://anyflip.com/eumpx/bxrh/>



End-user co-designing EU digital health systems

Approved by the EFN Members in October 2019, this Policy Statement presents nurses' request, as end-users, in co-designing the Digital Health Systems in the EU. Positioning nurses and nursing central to digital health policy design and ensuring that nurses can use and develop their eSkills, to their full capacity, can lead to improved citizens and patients' health and well-being, enabling the achievement of Universal Health Coverage.

Read it here :

<http://www.efn.eu/wp-content/uploads/EFN-Policy-Statement-on-end-user-co-designing-EU-digital-health-systems-22-10-2019.pdf>

EFN Policy Statement on End-user Co-designing EU Digital Health Systems

Nurses, as end-users, play a central role in co-designing the Digital Health Systems in the EU. Positioning nurses and nursing central to digital health policy design and ensuring that nurses can use and develop their eSkills, to their full capacity, can lead to improved citizens and patients' health and well-being, enabling the achievement of Universal Health Coverage. Health technologies and digital solutions, combined with organisational change in healthcare systems and new skills, will only be effectively and efficiently deployed with the end-user as co-designer.

Therefore, within the context of the digitalisation of the EU health systems, nurses:

- Require fast and full access to Electronic Health Records (EHR) in order to be able to diagnosis, plan and care for patient in an effective and efficient way;
- Pro-actively engage in the co-design process formulating end-user requirements that guide digital development and innovation, ensuring fit-for-purpose solutions;
- Advocate for digitalisation practices and processes to mainly focus on patient safety and empowerment, improving the quality of cross-border care and interoperability through a common terminology;
- Boost continuity of care throughout the patient's journey by using fit-for-purpose digital tools; and,
- Deploy digital tools and systems that reduce the workload of nurses and safeguard the quality of care.

It is socially and economically unsustainable to maintain the traditional vision of healthcare delivery, focused on diseases and curative approaches. Moving towards preventive care will make digital health deliver at its fullest potential, with nurses co-designing tools and programmes, facilitate access and successful deployment in the many environments in which nurses are located, including home care and nursing homes, hospitals and primary care settings. Therefore, nurses as end-users must be able to influence the development of technology reflecting both usability and user-friendliness, to deliver "fit for practice" innovative solutions to empower patients, make health systems sustainable and more accessible.

References

- Council of the European Union (2010) [Council conclusions on investing in Europe's health workforce of tomorrow: Scope for innovation and collaboration.](#)
- [European Federation of Nurses Associations \(2012\). EFN Position Statement on Skill Needs, Skill Mix and Task Shifting in Nursing](#)

Please contact Dr Paul De Raevé, Secretary General of the European Federation of Nurses Associations, for more information. Email: efn@efn.be - Tel: +32 2 512 74 19 - Web: www.efnweb.eu

EFN Policy Statement on End-user Co-designing EU Digital Health Systems - October 2019

