French ICT situation – point of view – main stakes and challenges

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Abstract

All around the world, there is the same willingness to increasingly implement more health "ICT tools", in order to meet the necessity to contribute and ensure equal access to health system for all citizens regardless of their health status, similar applications are being carried out, to face similar problems like financing, reliability, quality, security aspects. However, how to ensure the continuity of all these experiments performed and how to introduce them more into the daily routine?

Well versed within this field over many years through my career, at Paris University Hospital and in Normandy, I'm convinced about the added value provided by these tools in the healthcare area, applied either in international and national fields.

What is the situation like in France and Europe?

Key words: *Telemedicine; Telehealth; France; ICT.*

Resumen

La situación de la TIC francesa - punto de vista - principales cuestiones y desafíos

En todo el mundo se comparten las mismas ganas de implantar cada vez más "herramientas TICs" de la salud, por la necesidad de contribuir y garantizar el mismo acceso al sistema sanitario para todos, independientemente del estado de salud, se conducen y llevan a cabo aplicaciones semejantes para enfrentar problemas parecidos como la financiación, la fiabilidad, la calidad, los aspectos de seguridad, etc. Pero, ¿cómo garantizar la continuidad de todos estos experimentos desarrollados y cómo utilizarlos cada vez más en la rutina?

Los muchos años de carrera en el Hospital Universitario de Paris y en Normandía me convirtieron en especialista de este campo, y estoy convencido del valor añadido ofrecido por estas herramientas en el área de la salud aplicadas tanto a nivel internacional como nacional.

¿Cuál es la situación en Francia y en Europa?

Palabras clave: *Telemedicina; Telesalud; França; TIC.*

Resumo

A situação das TICs na França – ponto de vista – principais questões e desafios

No mundo todo existe a mesma vontade de implementar cada vez mais "ferramentas TICs" da saúde, pela necessidade de contribuir e garantir o mesmo acesso ao sistema de saúde para as populações, independente do seu estado de saúde, aplicações semelhantes estão sendo desenvolvidas para enfrentar problemas similares como financiamento, confiabilidade, qualidade, aspectos de segurança. Porém, como garantir a continuidade de todos esses experimentos feitos e como introduzi-los cada vez mais na rotina?

A longa experiência através dos muitos anos na minha carreira no Hospital Universitário de Paris e em Normandia me convenceram do alto valor agregado oferecido por estas ferramentas na área da saúde, aplicadas internacional e nacionalmente.

Qual é a situação na França e na Europa?

Palavras-chave: *Telemedicina; Telessaúde; França; TIC.*

THE FRAME

"ICT tools" are one of the French Government priorities included in a new hospital law adopted in July 2008. Recent European Union resolutions and reports, medical professional board reports and recommendations were used, and also many health ICT applications performed all around the European countries.

We must also face the evolution of our own health systems with regard to financing, an imbalanced health professional distribution within a given area and population ageing among other issues, in order to ensure an equal access to health to everybody including timely access to the best treatments and right information for any European citizen regarding patient's mobility within the European area.

CHALLENGES

Before any deployment into the routine, the following global aspects have to be solved first: efficiency (cost/effectiveness), performance indicators, financing, quality of care and care access and prevention maintenance, demographical access to healthcare system linked to country planning field, to enhance knowledge sharing between health actors inside and outside the hospital, ethical aspects with regard to medical responsibility (legal frame not completely established). A patient-centred organization should be improved (personal medical digital file and, consequently, a better governance), and finally, to keep in mind sustainable development aspects like health, solidarity and safety.

PREVIOUS REQUIREMENTS

Two main European Commission concerns should be considered:

- To improve platforms of interoperability in compliance with health information system;
- To ensure confidentiality space (confidentiality, security, data protection, quality of information) but also, to invest in good practices training, to introduce a new management culture related to innovation within our organizations.

It is not useful to define telehealth and telemedicine fields, but it is important to remember that in our countries they are defined in law following applications: teleconsultation, teleexpertise, telesupervision, teleassistance, teleprescription (in emergency field) and open to all applications able to lever up health organization of our health structures fostering better cooperation between internal and external healthcare professionals (healthcare networks).

As it has been said before, the application list is quite long. However, it is possible to state that the main ICT applications fields carried out nowadays are as follows:

In cardiology (Cardio Patch® connected with mobile phone – ECGs connected with hospital hardware and digital medical file), cancer, neuroradiology, neurosurgery, Picture Archiving and Communication System (PACS), satellite suitcases medical assistance (Amazonian applications), medical and nursing staffs (for example: in 2009 due to the celebration of the Year of France in Brazil, a special distance seminar on digestive surgery took place between the Rouen University Hospital and the Federal University of Minas Gerais' University Hospital of the, in Belo Horizonte. It was a 5 hour seminar for nurses. There was also a Round Table in multipoint between us, Paris (Telehealth High Committee), Toulouse University Hospital and Belo Horizonte, (co-research thesis, co-master degrees), telemonitoring, postoperative monitoring, telesurgery and robotics (for the future), serious games (virtual games for training staff), chronic diseases follow up (diabetes), laboratory fields like anatomopathology, dermatology, Emergency Medical Services (EMS), home healthcare networks, home cardiology surveillance, perinatology and maternofoetal telesurveillance network, geriatrics, ageing and technology, geolocation (GPS) for patients with Alzheimer legal medicine and therapeutical education.

RESULTS AND REFLECTIONS

They are often more subjective than objective. Generally speaking, there are not enough performance indicators with regard to given medical services provided.

Certainly, it can be noticed a real advantage for professional's and patient's comfort, and also patient's autonomy is maintained, "ICT tools" are providing a better pluridisciplinaire cooperation between health professionals, and there is also a rural health impact contributing to social cohesion scheme.

Besides, "ICT tools" may provide new jobs, save money and sometimes lives (especially in cardiology and neuro-

surgery emergency fields where many good experiments are performed).

Benchmark in methodology and collaborative projects might be implemented in such a way to define and demonstrate clear and real performance of medical-economic indicators which can be negotiated with health financing systems and politics (Which added value provided by ICTs? How to finance such services providing?).

CONCLUSION

Everything related to telehealth, telemedicine, e-health devices represent only tools which must fit into complex systems.

The creation of needs has to be avoided; the important thing is to adapt tools to needs. And, last but not least, having patient's support for any ICT applications is essential.