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**Expert workshop on medical
uptake of mHealth.**

**The Moving Life Project
December 5th, 2011**

**Healthcare Innovation Centre,
Capital Region of Denmark**

Titel/beskrivelse (Sidehoved/fod)

Navn (Sidehoved/fod)

Agenda

- 10.00 Introduction – Participants, EC/Mr. Jaakko Arnio CSI and Moving life.
- 10.30 Inspiration case 1. REACTION project
- 11.00 Inspiration case 2. MONARCA project
- 11.30 Theoretical framework of understanding part 1. Dimensions of mHealth.
- 12.15 Lunch and networking
- 13.00 Theoretical framework of understanding part 2. Indicators of mHealth uptake
- 14.30 Sum up and break
- 15.00 Trends; Drivers and Barriers
- 15.50 Sum up and Goodbye

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EC initiatives

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Healthcare Innovation Centre

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The Moving Life project

EC 7th framework

Consortia

- **Atos** - Atos is an international information technology services company.
- **Innova** - Innova SpA is a company established in 1993 which is specialised in Technology Transfer.
- **In-Jet** - In-JeT ApS has been engaged as concept and technology developer
- **GSI - Global Security Intelligence** was founded in 2005, responding to a need both in the public and private sectors for a more holistic approach to security problems.
- **VUB - The Vrije Universiteit Brussel** (VUB) interdisciplinary Research Group on Law Science Technology & Society (LSTS)
- **Healthcare Innovation Centre, Capital Region of Denmark** - The Healthcare Innovation Centre (Center for Sundhedsinnovation in Danish, i.e. CSI) is a knowledge and advisory centre in Capital Region of Denmark.

Background and project scope

- A Coordination and Support Action
- Overall goal - accelerating the acceptance and wide use of mHealth solutions in the EU
- Project process:
 - Analyse state-of-play of mHealth in the EU and selected other countries
 - Develop scenarios for future development of mHealth uptake
 - Analyse gaps between future and present initiatives
 - Develop and deliver roadmaps for
 - technological research,
 - implementation practice and
 - policy support
 - Validate roadmaps through simulation and HTA

Medical uptake - one of three themes to be analysed

- State-of-play in mHealth
- Focus on 3 aspects of mHealth uptake:
 - Technology and applications
 - Socio-economic and policy frameworks
 - Medical uptake

Medical uptake of mHealth – our focus in the state of play

- mHealth definition : Geographically independent
- Medical uptake - integration in healthcare providers portfolio

Two inspiration cases

- REACTION project v/ Jesper Thestrup, In-Jet, DK
- MONARCA, Paul Lukowitz, University of Passau, GE

Workshop part 1

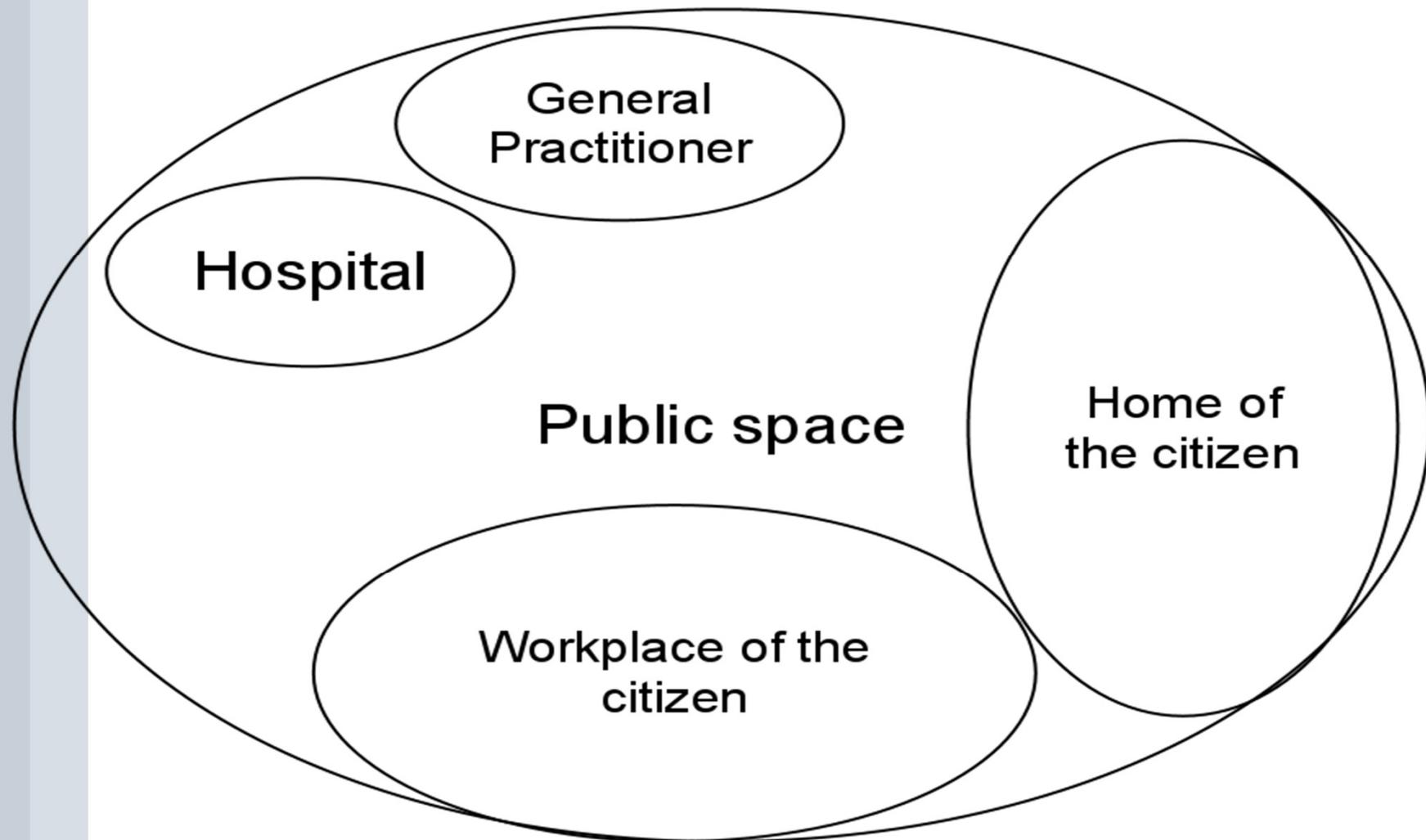
Theoretical framework of understanding

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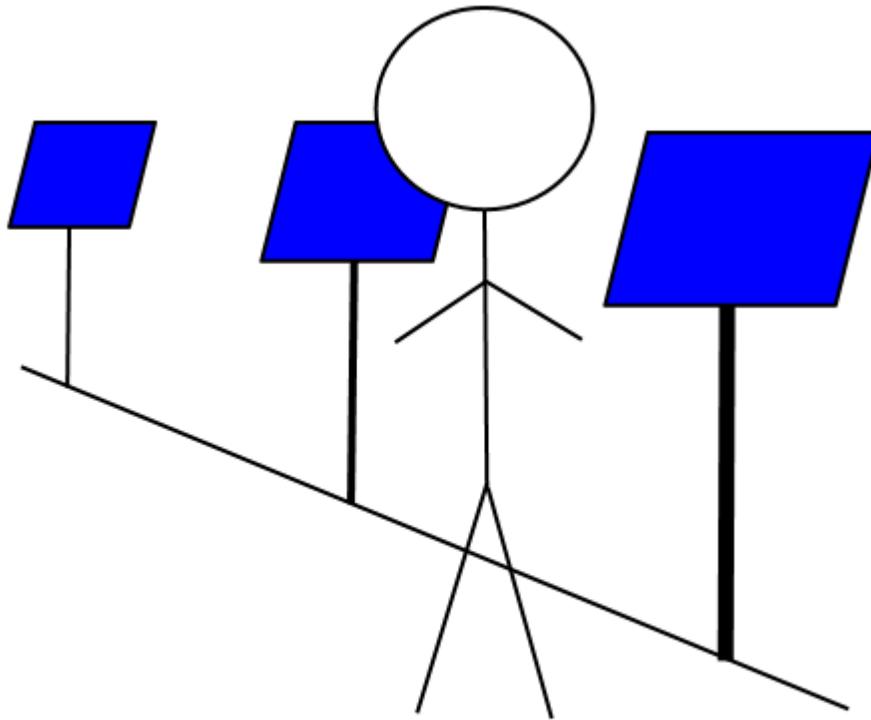
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Dimensions of mHealth

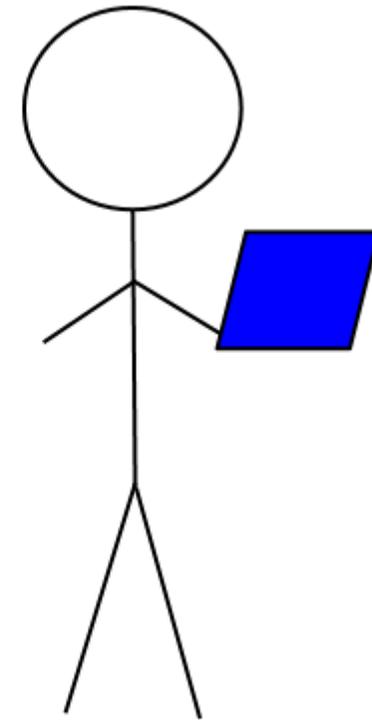
Dimension 1: Healthcare space



Dimension 2: Means of mobility



Human mobility:
Human mobility between fixed
devices



Machine mobility:
Human mobility with a mobile
device

Dimension 3: Clinician or Citizen

- Who is mobile?

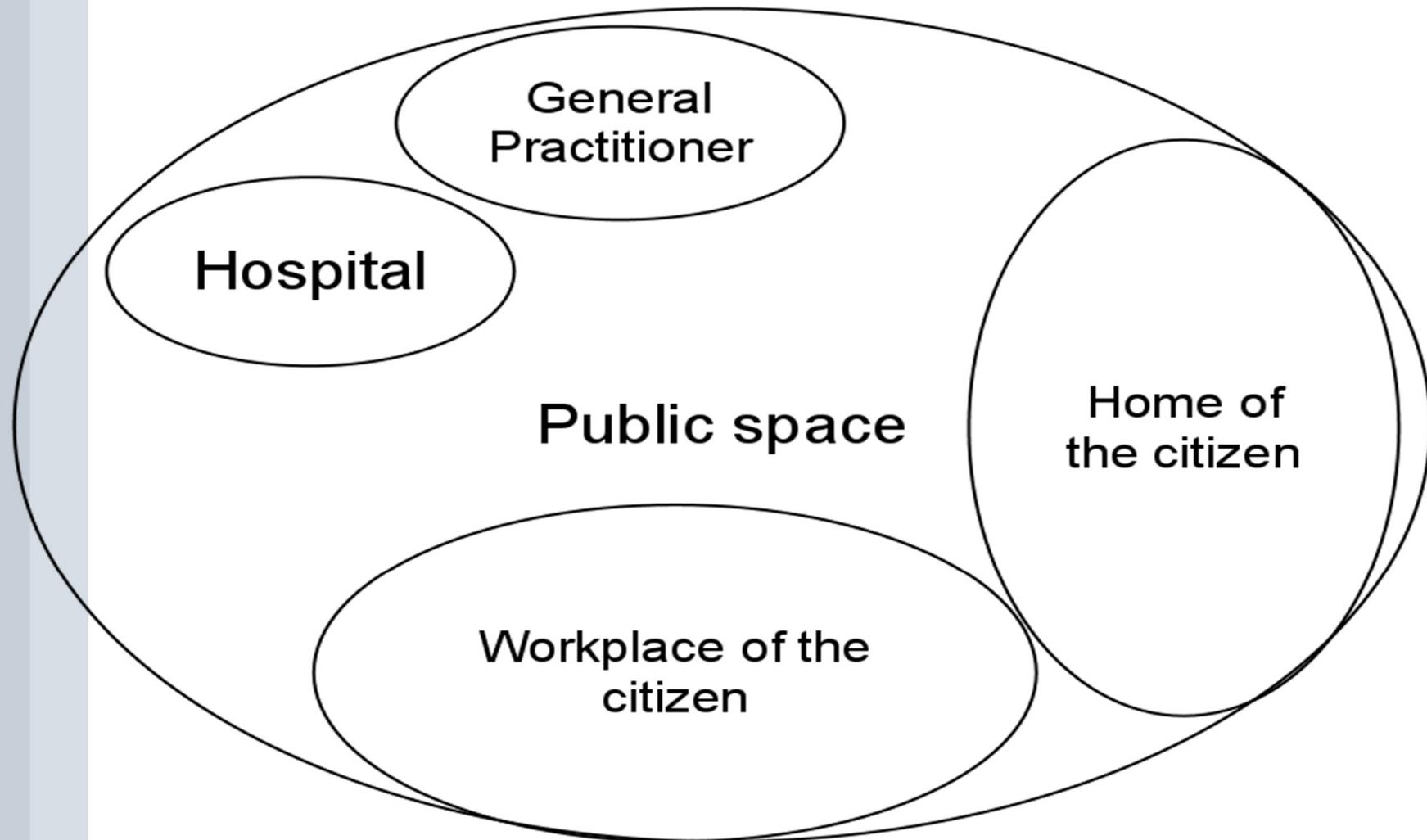
Dimension 4: Synchronous or asynchronous communication

- Is the device intended for human communication in real-time?
- Does the device intend communication between systems? In realtime or asynchronous?
- Do local algorithms monitor data and does response from these communicate immediately or asynchronous?

Framework of understanding

- Example of PDAs in hospital
- Q: Any sense
- Q: Other dimensions necessary?

mHealth or eHealth



Lunch and networking!

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**Indicators of medical
uptake**

Dissemination

- Local (specific clinic or hospital department)
- Municipal (County-wide)
- Regional (Spanning several hospitals or other units within a region)
- National
- Transnational
- EU-wide
- Multinational

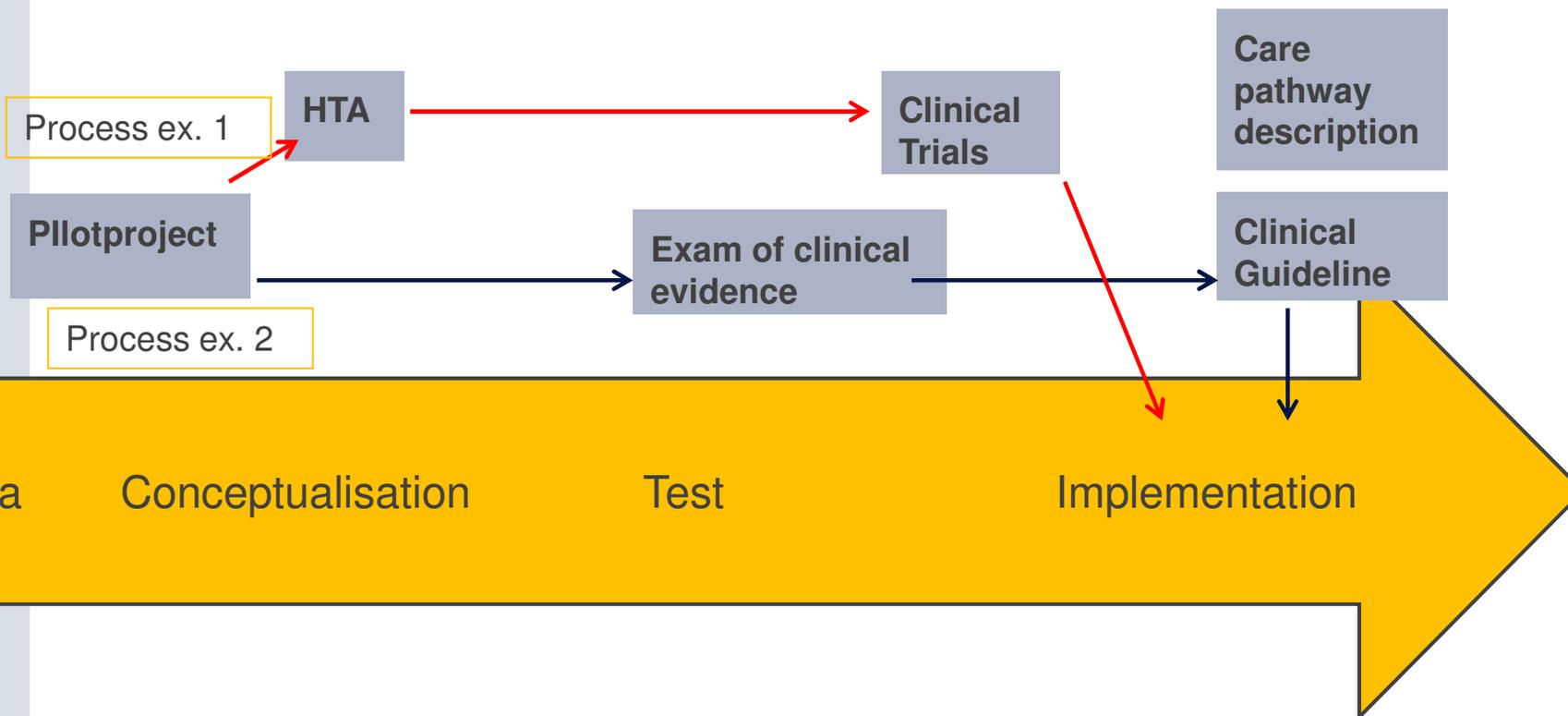
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Innovationprocess and "stage gates" for mHealth uptake

Maturity/stage gates

Innovationprocess



Maturity

- Idea
- Proof of concept
- Pilot Project
- Clinical trials seeking clinical evidence of lowered or equal morbidity and mortality
- HTA, Health Technology Assessment (in Denmark assessing the technology/activity; the perspective of the citizen/patient; the organisation in question and the economic aspects)
- Incorporation into clinical guidelines and/or carepathway descriptions
- Integration into established healthcare service portefolio



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State-of-Play?

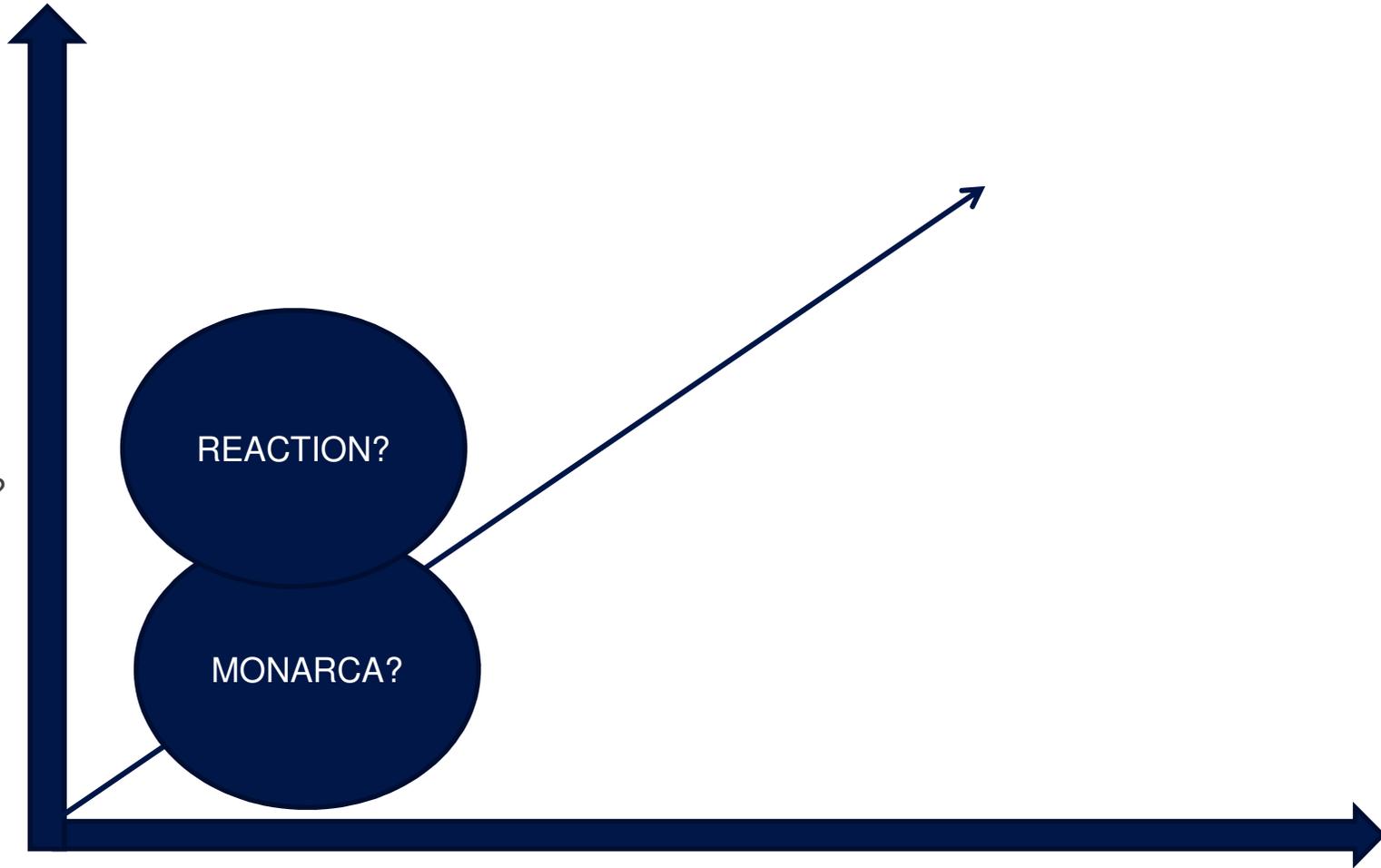
Maturity

Clinical
evidence?

Pilot
project



Dissemination



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Sum up and break

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Trends; Drivers and Inhibitors

Drivers

- *Age distribution of the populations – ageing societies*
- *Global dissemination of mobile phones*
- *Patient empowerment*
- *The demand for more integrated care pathways*
- *Privatisation*

Inhibitors

- *Inertia of public healthcare services*
- *Clinical specialisation*
- *Privacy and security issues*

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**Possible EC initiatives for
addressing inhibitors and other
barriers?**

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Sum up?

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Thank you for participating!