



Uachtaránacht na hÉireann ar
Chomhairle an Aontais Eorpaigh
Irish Presidency of the Council
of the European Union
eu2013.ie

Speech at the Opening Plenary of e-Health Week by Minister for Health James Reilly TD

Dublin Convention Centre

13th May 2013

Ladies and Gentlemen,

I would like to welcome you with a few words in our native language – Irish (or Gaelic as it is sometimes called) – and I will then repeat my remarks in English.

A Dhaoine Uaisle agus a Chairde

Céad míle fáilte go hÉireann agus go mBaile Átha Cliath!

Tá an-áthas orm a bheith anseo inniú thar ceann Uachtaránacht na hÉireann ar Chomhairle an Aontais Eorpaigh, chun an comhdháil suantasach seo a oscailt go hoifigiúil. Ba mhaith liom fáilte ar leith a chur roimh an bheirt Chomisinéir Eorpach atá linn inniu, An Comisinéir Tonio Borg agus An Comisinéir Neelie Kroes agus roimh na hAirí Sláinte ar fad as na Baill Stáit atá ag freastal ar an gcomhdháil.

Beidh cursaí fíor-thábhachtach maidir lenár gcórais sláinte á bplé again sa chupla lá atá romhainn agus tá súil agam go mbainfidh sibh go léir tairbhe as an díospóireacht. Tá súil agam freisin go mbainfidh sibh sult agus taitheamh as bhur gcuairt ar Bhaile Átha Cliath agus ar Éirinn agus go dtiocfaidh sibh ar ais arís go luath.

I will now translate for those of you who do not speak Irish

Ladies and Gentlemen

I wish you a hundred thousand welcomes to Ireland and to the Convention Centre in Dublin!

I am very pleased to be here today on behalf the Irish Presidency of the Council of the European Union to officially open this important conference. I would like to especially welcome the two European Commissioners who are here with us today, Commissioner Tonio Borg and Commissioner Neelie Kroes and also all the Ministers of Health from the Member States who are attending the conference.

Over the next few days, we will be discussing very important issues relating to our health systems and I hope you will all benefit from the discussions. I hope also that you will enjoy your visit to Dublin and to Ireland and that you will return again soon.

I am also very pleased to welcome Edwin Poots. I'm delighted that so many of you have come to Dublin from our fellow Member States of the European Union, from EFTA countries, from the United States and Canada and indeed from all over the world. When I examine the overall conference programme, I marvel at the range of topics and sessions that are organised and I don't envy you your task of deciding which of the many hugely interesting and highly relevant sessions you will attend.

The number of sessions and streams are too numerous to mention individually, but I am particularly heartened to see that there will be a high level meeting of the EU-US MoU Assembly on Wednesday. It is opportune that this should follow the recent meeting of EU Trade Ministers led by Ireland and my colleague in Government Minister Richard Bruton, which brought Europe one step closer to a Trans Atlantic Trade Partnership.

The subject of our discussions during this e-Health Week is of vital importance. Healthcare systems across Europe – and indeed all over the developed world – face the challenge of providing safe, high-quality services for their populations at a time of very constrained resources and increasing demand.

We all know that we cannot sustain rising healthcare costs indefinitely, so we need to consider how we can provide services more efficiently. But we also know that we need to ensure our health services are of high quality, with patient safety at their core. And we need to consider new and innovative ways to deliver services to citizens in their homes and communities, where they want to be treated, rather than in hospital. E-health provides us with a mechanism to achieve all of these goals.

To me, eHealth is a potential new dawn on the horizon for our health systems but my concern is that it has now remained on the horizon for some time, perhaps too long. I think it is important for us to try and understand why such an information-intensive industry falls far behind other sectors in deploying information technology in direct service provision. By way of contrast, it is interesting to note that the first ATMs (automatic cash machines) were installed in Ireland in 1980 – almost 35 years ago. I'm sure many of you here today may have never known a world where the only way to get cash was to go into a bank! So, in many ways, e-technology is no longer a leading edge technology, it is a part and parcel of our lives in the 21st century.

Healthcare, as everyone in this room well knows, is a very complex area of human interaction and the nature of the interactions with patients and clinicians are far more complex than withdrawing cash, buying a book on Amazon or planning a holiday. The issues of privacy and confidentiality, complex care pathways, data ownership and a mixed delivery system of both public and private providers all add to the complexity. But that is the challenge before us.

So what are the barriers to eHealth deployment?

Clearly, there are technical issues, but while it may have been the case in the past, I am not convinced that technical difficulties remain the nub of the problem. Many eHealth applications are well tried and tested and, indeed, there will be opportunities to see good examples discussed and demonstrated here over the next few days.

I believe that our inability to fully exploit eHealth may be more appropriately attributed to human and organisational issues and challenges than to issues with the technology itself. And these softer problems will always be more difficult to resolve than the purely technical ones.

It seems to me that a number of issues are slowing the deployment of eHealth systems including

- Lack of awareness of the benefits by the Clinical community
- Lack of awareness of the benefits by patients
- Perhaps some elements of fear of change
- Lack of legal clarity about who carries responsibility for patient care, and
- Lack of reimbursement schemes for healthcare delivered through eHealth

I am particularly pleased to see that considerable time will be devoted to many of these issues over the next few days and I note that there will be an important session on legal and regulatory barriers on Wednesday.

Another of the barriers to eHealth is that insufficient systematic evaluation of eHealth has been conducted to date. However, I understand that this type of hard evidence is now beginning to emerge. But was there a comprehensive evidence base for deployment of the telephone, for the motor car, for the internet? In the case of the mobile phone, it was clear that the environment came first, followed by a swift and astonishing uptake in usage. I believe that the challenge to those of us who are Ministers, policy-makers, legislators or regulators is to create the right environment to enable this transformation to happen in the healthcare environment.

The EU eHealth Action Plan speaks of unlocking innovation to deliver a wide range of eHealth benefits. Perhaps we also need to look at innovative ways of making eHealth itself work.

The principal theme of Ireland's EU Presidency is *Stability, Jobs and Growth* and the supporting Health themes are *Health and Wellbeing* and *Innovation and Research*. All of these themes are relevant to the important work of this conference. eHealth can be harnessed to deliver superior health service and in more efficient ways, contributing to the quality of care, and indeed the quality of life, experienced by the patient. What may not be so widely recognised is the potential contribution of eHealth to economic activity and to job creation.

I am proud to say that the Irish Presidency through this conference is placing a particular emphasis on the job creation potential of investment in e-health. That is a theme which is relevant not just for Ireland, but for all of Europe.

Most of the great proliferations in technology of the past 100 years were essentially unplanned – the motor car, the internet – and I am inclined to believe that we are now on the cusp of a similar breakthrough in eHealth. However, I still believe that leaders have a responsibility to ensure that at least some foundations are put in place in an orderly fashion and that this approach will both expedite the process and reduce the overall costs.

Over lunch today, my EU Ministerial colleagues and Heads of Delegations and other distinguished guests discussed this issue and in particular, the potential for eHealth ecosystems as a way forward. We have agreed a Presidency declaration which endorses the EU Action Plan on eHealth *Innovative Healthcare for the 21st Century* and recommends that all Member States encourage the use of 'disruptive innovation' and eHealth ecosystems, to operate collaboratively by involving all stakeholders – government, academia, industry and provider as well as patients.

eHealth Strategy for Ireland

In this context, I plan to publish an eHealth strategy for Ireland in the coming months which will be closely aligned to the EU eHealth Action Plan. The eHealth strategy will incorporate the concept of the eHealth ecosystems espoused in the Irish Presidency Declaration and will provide for significant collaboration with industry and academia to

the mutual benefit of all these stakeholders. A Chief Information Officer post for the Irish health service will also be put in place to drive the implementation process.

Individual Health Identifier

In order to underpin the overall governance structure for health information and e-health in Ireland, my Department is currently drafting a Health Information Bill. A key part of the Bill will provide the statutory basis for the introduction of a national system of unique patient identification, something that has been lacking in Ireland up to now. We will call it the Individual Health Identifier. It will be for use within our public and private healthcare systems but will be linked closely to the Public Service Card infrastructure currently under development. This will ensure that the health identifier will provide optimum protection for the confidentiality of sensitive health information but, at the same time, it will be implemented and maintained at minimal cost.

North South Cooperation

International and cross border cooperation is a core element of the EU eHealth Action Plan. A particularly important element of this for Ireland will be cooperation with our colleagues in Northern Ireland and I am delighted to see so many of them have been able to join us here today. Cross border cooperation, will form a key part of our own eHealth strategy when it is published. This will also reflect the principles of the promoting cooperation on healthcare between member states espoused in the EU directive on cross border Healthcare.

Before I finish, I would like to set down a small challenge for this conference. As you listen to the various speakers and contribute to the discussions, I would like you to give some consideration to the concept of disruptive innovation and how we might harness it to accelerate the eHealth agenda in Europe. Consider also eHealth ecosystems and their potential to deliver better, safer and more efficient healthcare for our citizens in Europe – for that, after all, is the objective at the heart of all our discussions during these three days here in Dublin.

IN CONCLUSION

I would like to thank and acknowledge the support of all parties involved in organising this event, especially the EU Commissioners and their staff and the organisers of the exhibition, "The World of eHealth IT", HIMMS, as well as my own very able team of officials, from both the eHealth and EU Presidency units in the Department.

I look forward to the remainder of this discussion and once again, I would like to wish you all a very fruitful and enjoyable conference in Dublin.