

Solutions for improving health cooperation in border regions

Kai Michelsen (on behalf of the EUREGIO II project)
Department of International Health

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Faculty of Health, Medicine and Life Sciences



Universiteit Maastricht

Still a marginal phenomenon, but ...

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- mobility of patients across Europe's borders: a somewhat marginal phenomenon – but important e.g. in border regions
- need to support
 - planning, implementation, monitoring
 - actions to ensure transparency and to reduce legal ambiguity (cf. Baeten/McKee/Rosenmöller 2006: 179)
- border regions also as “laboratories” for cross border activities
- consequences of future development, e.g. “A Community framework on the application of patient's rights in cross-border healthcare”?



Support (mutual) learning

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- Need to
 - monitor and explore activities and experiences
 - exchange and disseminate experiences: some border regions have collected many experiences over years, others not
 - support capacity building (programme / project management)
 - ensure the effective and efficient utilisation of supportive programmes, tools etc. (e.g. EU SF “INTERREG” programmes)
 - identify opportunities and challenges
 - develop solutions
 - analyse the transferability of solutions, projects, good practice

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... follows the project "Evaluation of cross border activities in the European Union", EUREGIO).

... runs from 2009 to 2011

... will deliver

- a handbook to support cross border activities in border regions (beside others: "Interreg IVA")
- a guideline for Health Technology Assessments (HTA) in small regions with multiple health systems ("local HTA")
- an analysis of legal challenges linked with data protection and liability/tort rights



A handbook to support cross border activities

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- Possible topics of the handbook (with examples of good practice, failures):
 - Ø infrastructure, programme and project management
 - Ø challenges of cross-border cooperation, e.g. funding/reimbursement, language and other cultural differences, legal and contractual regulations, staff etc.
 - Ø transferability of experiences / projects
 - Ø utilization of EU Structural Funds (“INTERREG”)
- Experiences in project partners regions show that more information and supportive tools have become available over the last years.
- What are the major challenges and needs to be addressed today?

Surveys and interviews ...

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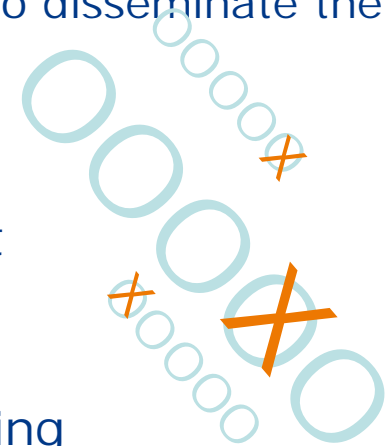
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...with people involved in programme and project management

- Ø Association of European Border Regions (AEBR) members have been asked to participate (dissemination over annual conference, AEBR webpage, information about AEBR newsflash)
- Ø European Hospital and Healthcare Federation (HOPE) members (hospital associations, ministries) have been asked to disseminate the questionnaire to hospitals in their border regions

... about

- Ø ongoing activities
- Ø status of programme and project management
- Ø actors and engagement
- Ø problems, risks, challenges, barriers
- Ø supportive structures and tools in place / missing
- Ø usability and utilization of EU SF ("INTERREG")



Local HTA

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- Decisions in small regions with multiple health systems
 - ∅ investments and cross border health needs (the “market”)
 - ∅ cooperation between hospitals
 - ∅ the interface between in- and outpatient care in cross border settings
 - ∅ ...
- Should a technology be used in a certain context?
 - finding information, knowledge, expertise
 - translating and reinterpreting existing knowledge, taking specific context into account (qualification, resources, interfaces, health needs, regulations etc.)
 - documentation, monitoring, evaluation

1.
2.
3.



Local HTA

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- Next steps
 - Ø to identify decision makers and decision making processes which can be used to develop and test the local HTA guideline
 - Ø to explore the decision making process and the information needs of decision makers
 - Ø to test the local HTA guideline (at least two cases)
 - Ø to evaluate the HTA guideline and the results of the tests with HTA experts

1.
2.
3.



Data protection, liability / tort rights

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- Challenge: to handle problems with data protection and liability/tort rights
- Experiences not only of relevance for activities in border regions, but for all cross border activities

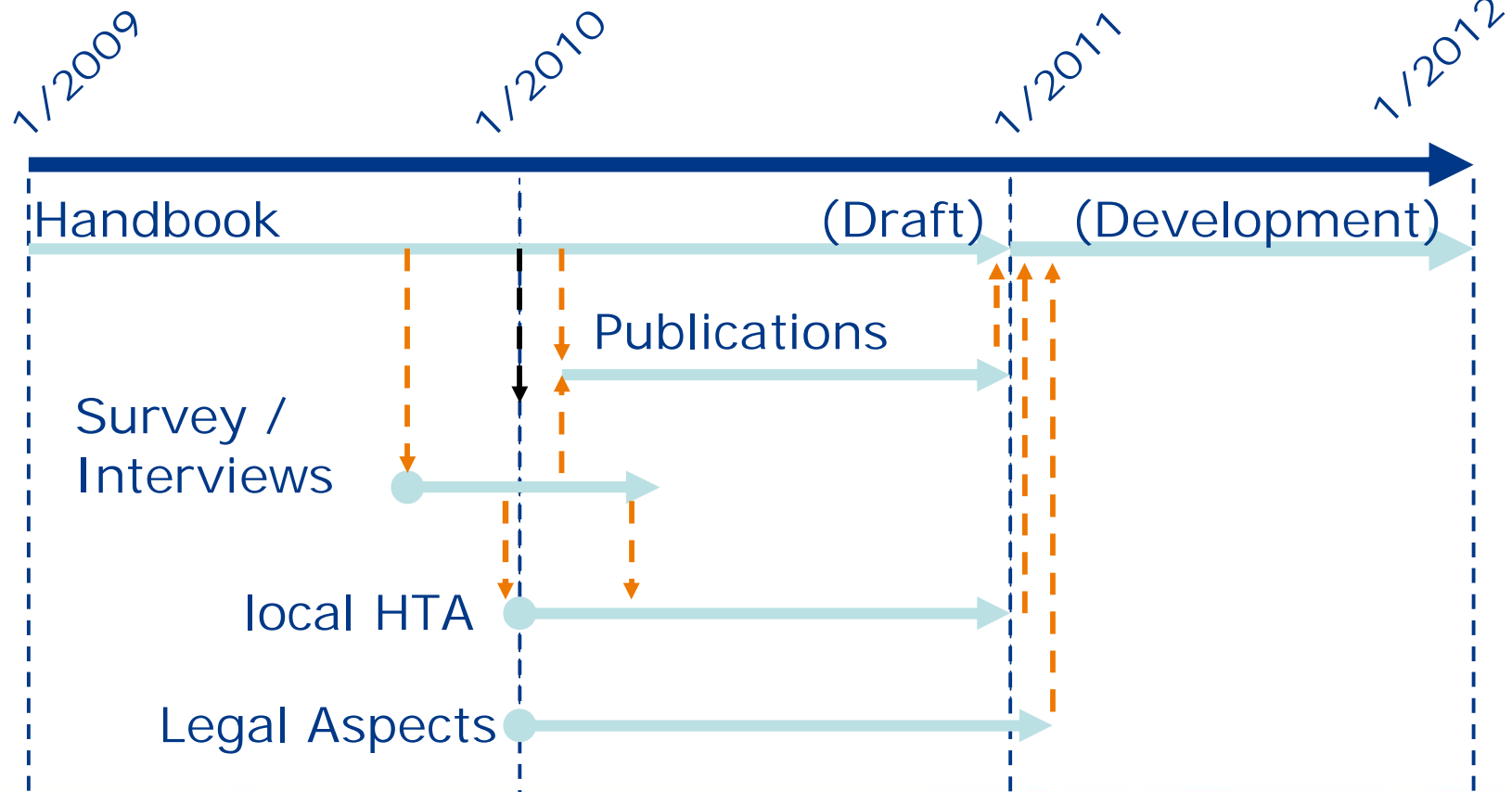
- Ø What experiences exist?
- Ø What solutions have been found?
- Ø Is there a need for (European) regulations?



Time schedule

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EUREGIO II partners

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Maastricht University, Department of Int. Health (The Netherlands) (project leader)

Gesundheitsamt Kreis Heinsberg (Heinsberg, Germany)

Euregio Rhein-Waal (ERW; Kleve, Germany)

Gesundheitsmanagement Burger-Wieland (Vienna, Austria)

European Hospital and Healthcare Federation (HOPE; Brussels, Belgium)

Association of European Border Regions (AEBR; Gronau, Germany)

Landesinstitut für Gesundheit und Arbeit NRW (LIGA.NRW; Düsseldorf/Bielefeld/Münster)

Deutsches Institut für Medizin. Dokumentation u. Information (DIMDI; Köln, Germany)

ECORYS Research Rotterdam (The Netherlands)

WHO Regional Office for Europe (Copenhagen, Denmark)

Regione del Veneto, International Health Social Affaire Office Venice (Venice, Italy)

Cooperation and Working Together (CAWT; Londonderry, Ireland)

Medical University Sofia, Faculty of Public Health (Sofia, Bulgaria)

Center for Health Policies and Services (Bucharest, Romania)

