



Estonian eHealth Strategy

National E-health Strategy
Task Force
March 25, 2015

Külle Tärnov

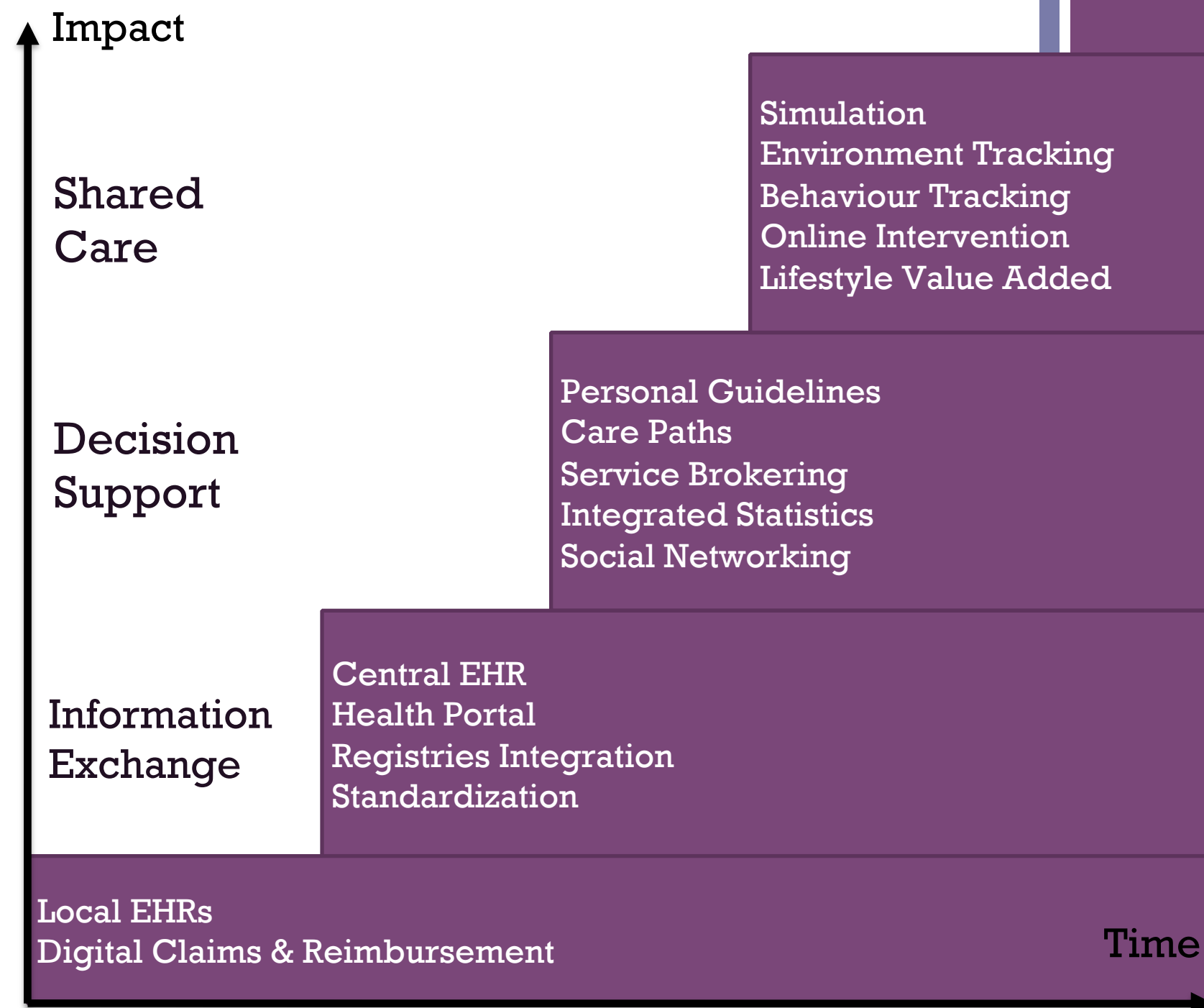
Estonian Connected Health Cluster,
Tallinn Science Park Tehnopol
etervis2025.ee





Vision for e-health development in Estonia

(drafted in 2010)



New national e-health strategy 2020

- E-health support for more efficient solutions to **existing and known challenges** in health care
- E-health as a **transformative engine** for
 - renewed more participatory, preventive, pre-emptive and personalised care
 - economic development
- Building on **existing strength**
 - universal digital data capture in health care
 - robust secure data exchange capacity and culture
 - Database of 50 000 gene data donors

National E-health Strategy Task Force

(1) Summoned by the Prime Minister's office

- ✓ 15 organizations, 17 members
- ✓ public sector (including 3 ministries) and stakeholder representative organizations
- ✓ integrating health and social sector via e-services and e-capacity

(2) Working groups (and sub-strategies) for:

1. Service redesign
2. Architecture and technological deployment across health sector
3. Governance and financing
4. Supportive actions for legal and ethical matters
5. Private sector (IT and others) partnership
6. R&D&I and capacity building for e-skills
7. International collaboration

(3) Task Force role:

- ✓ Consensus on strategic goals across sectors and stakeholders
- ✓ Streamlining and “legitimizing” other initiatives & policies
- ✓ Broad engagement
- ✓ Agreement on immediate action plan (*momentum push*)

(4) Strategy and Action Plan for 2016-2018 due in November 2015

Goal-setting in progress (due in May 2015), drafted as follows:

1. User-centered and science-based precision services

Full personalized data available to compute individual or group risk profile, and based on that provision of decision-support, guidance and targeted services/interventions.

- Target 1.1 Full pre-analyzed data profile about an individual available universally
- ...

2. Holistic case management and integrated service network

Every provider has (past and future) overview of and carries the responsibility for outcome across the whole service pathway until full conclusion of the episode.

3. Improved service performance and quality

Planning and decision at all levels (provider to state) is supported by performance/quality measurement of and prediction about final and intermediary outcomes

4. Optimized service access and professional time use via tele-solutions

Teleservices (-care, -health, -medicine) and m-services are natural part of health and social services, in order to reduce unnecessary work time, user time and overall cost to the society.



Estonia - integrated health data
This time it will be precise & personal ...

Better information - more health

Great thanks to Ain Aaviksoo, leader of the e-Health Strategy workforce