

02.12.13



# Healthcare DENMARK - national e-sundhed i internationalt perspektiv

Hans Erik Henriksen

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# Agenda

- Healthcare DENMARK-introduktion
- PatientVille og den danske fortælling
- Dansk e-sundhed i internationalt perspektiv
- Healthcare DENMARKs aktiviteter og planer

# Healthcare DENMARK er et public-private partnerskab



DANSKE  
REGIONER



Region Syddanmark



MINISTRY  
OF HEALTH



**UDENRIGSMINISTERIET**

MINISTRY OF FOREIGN AFFAIRS OF DENMARK

**SYSTEMATIC**

**COWI**

**KMD**



Confederation of Danish Industry



**Falck**

Healthcare

Her Royal Highness  
Crown Princess Mary  
Patron



”

In Denmark our focus on putting the patient first – combined with efforts to improve efficiency and quality – has resulted in a wide array of innovative healthcare solutions. I sincerely believe Danish solutions and expertise can have a positive impact on global health.

# Healthcare DENMARK



## Mission

- Fastholde Danmarks eliteposition inden for sundheds-IT og velfærdsteknologi
- Øge kendskab til Danmark som leverandør af sundheds- og velfærdsløsninger
- Forbedre danske virksomheders eksportmuligheder

## Vision

- Danmark forbliver kendt som førende inden for e-health og telehealth
- Danmark anerkendes som førende inden for sundhed og velfærd generelt
- Healthcare DENMARK bidrager til danske virksomheders eksportmuligheder

## Værdier

Healthcare DENMARK skal gøre en forskel gennem tæt samarbejde med:

- Konsortiepartnerne
- Danske sundhedsmyndigheder
- Danske virksomheder og interesseorganisationer
- Internationale meningsdannere, sundhedsmyndigheder og NGO'er



# Healthcare DENMARK

- Delegationsbesøg i Danmark
- Delegationsbesøg i udlandet
- Konferencer
- Ambassadørnetværk
- Pressehistorier
- Healthcare DENMARK-hjemmesiden

The screenshot shows the Healthcare DENMARK website. The header includes the logo, navigation links (Press, Contact Us, Create Company Profile, Log In), and a search bar. The main content area features a large image of a nurse attending to an elderly patient. To the right, there is a 'START DOING BUSINESS' section with two call-to-action buttons: 'Click here >' for planning a trip to Denmark and 'Click here >' for creating a profile.

**Healthcare DENMARK** Press | Contact Us | Create Company Profile | Log In |

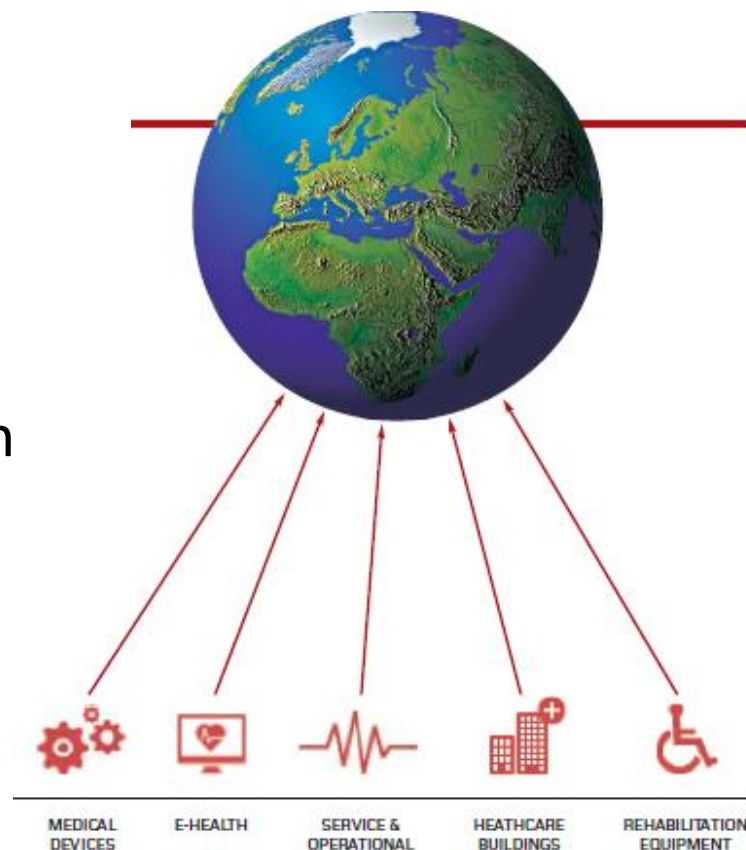
The Case of Denmark Company Profiles Delegation Planner News Events About Us **FAVORITES** Download as PDF

**START DOING BUSINESS**

**Plan a trip to Denmark**  
Visit companies and institutions and learn more about Danish healthcare solutions. Let us know what you are interested in and we will help you find the right places to visit.  
[Click here >](#)

**Create a profile**  
Danish companies and institutions can create a profile on Healthcare DENMARK.  
[Click here >](#)

Healthcare DENMARK is a gateway for international stakeholders who want to experience the Danish healthcare system and Danish healthcare solutions.

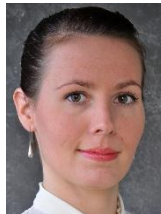


# Healthcare DENMARK

## organisation



**Hans Erik Henriksen**  
Direktør



**Lis Katharina Volke**  
Kommunikationschef



**Malene Nørby Nielsen**  
Intl. marketingansvarlig



**Caroline Lonning**  
Marketingkoordinator



**Fernando Kaltoft Garzon**  
Projektassistent



**Henriette Rieks Klinggaard**  
Administration



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- PatientVille og den danske fortælling
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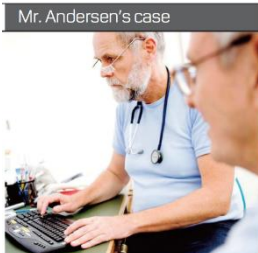


# Den danske fortælling



## Præ-hospital

### Praktiserende læge



Mr. Andersen's case

#### Citizens and health professionals have access to electronic medical records

Sundhedsdata is a public, internet-based health portal that collects and disseminates health information and provides access to electronic health records for citizens and health professionals. The Danish health portal focuses on bringing together Danish health records together on the internet and providing an accessible setting for citizens and health professionals to view and efficiently exchange information.

By offering both citizens and health professionals the Danish health portal enables the two to cooperate on a number of the medical. It empowers the citizen and gives health professionals better tools to improve quality in care.

This means Mr. Andersen has gone in his private he can compare his self feeling a consultation if Mr. Andersen tenders for medical examination. The professionals, nurses and other health professionals see what treatment Mr. Andersen has received earlier for his general doctor for.

This means after being discharged from hospital, Mr. Andersen has access to a large part of the information he requires needed about his treatment in the electronic health record. If for example, Mr. Andersen is diagnosed with a chronic condition, he can now monitor about the condition and give patient feedback. In this way, Sundhedsdata helps to empower patients and create awareness about their illness. Sundhedsdata also provides the basis for active participation in treatment and self-care.

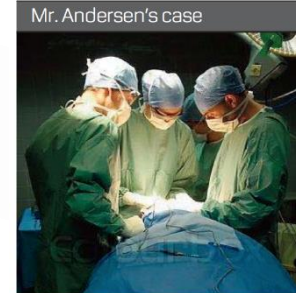


Mr. Andersen's case

#### Electronic ambulance record transfers patient data to the hospital

At 11.36 a.m. the emergency call center receives a call from Mr. Andersen, who is experiencing severe chest pain. An ambulance is dispatched immediately and arrives at 12.43. Treatment commences in the ambulance, with contact to made with the cardiology department at the local hospital. The cardiologist diagnoses a blood clot, but the cardiologist and Mr. Andersen is therefore been directly to a cardiology department instead of being taken to the nearest local hospital. At 12.50 Mr. Andersen arrives at the cardiology department, which is prepared and ready to conduct a balloon operation. Half an hour later, Mr. Andersen is in the ward after his operation. By 2.00 p.m. he is back in his own clothes enjoying a cup of coffee. A few days later Mr. Andersen is discharged with no permanent injury.

## Hospital



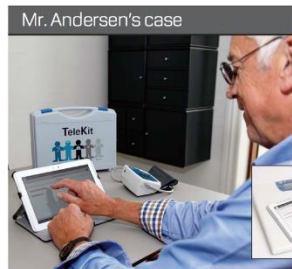
Mr. Andersen's case

#### Central Denmark Region Common telehealth platform across 18 hospitals

In 2010 the Central Denmark Region began implementing an common telehealth platform, which supports more than 10,000 users every day in 18 hospitals, including both somatic and psychiatric hospitals. All 18 hospitals can easily share all the information within and between the hospitals. The common system creates a complete overview, with information integrated from different hospital systems.

If Mr. Andersen is admitted to the nearest hospital with a fractured hip, and he later moved to another hospital with a specialist orthopedic surgery department for hip replacement, both physicians and other specialist groups can use the common records system what treatment Mr. Andersen has received. Furthermore, different modules of the telehealth platform support important functions in every hospital to ensure an efficient workflow, optimal support for hospital personnel and increased patient safety through standardization of clinical pathways in treatments. For example, Mr. Andersen's medical record will describe what X-rays and tests are required before the operation and what rehabilitation he should have after the operation. Modules in the telehealth platform also include an visualization of patients, handling laboratory work, medication administration, along with efficient booking of procedures, hospital resource and gathering of business intelligence data. This type of flexibility in the telehealth platform allows the region to increase cohesivity and quality in treatment for patients.

## Hjemme hos patienten



Mr. Andersen's case

#### TeleCare North - telemedicine and empowerment

For most Chronic Obstructive Pulmonary Disease (COPD) patients it is vital that their lung capacity is monitored regularly for a long period of time. This type of basis is both time and resource demanding, both for the patient and for the physician. COPD is therefore an area in which telemedicine solutions can add value.

TeleCare North is a cross-sector collaboration between the 11 municipalities in northern Jutland, the North Denmark Region general practitioners in northern Jutland, and Aalborg University to develop telemedicine solutions for COPD patients. COPD patients are often hospitalized for long periods of time. The objective of the TeleCare North project is to monitor patients closely, adjust their medication and treatment, and thereby avoid hospital admission.

When Mr. Andersen agrees to take part in the project, he receives a small bag to bring home. The bag contains devices, which enable him to measure his oxygen saturation, pulse, blood pressure and weight a couple of times a week. His measurements are transferred via a small tablet computer to health care personnel in the municipality or at the local hospital. Here, the personnel monitor these data and may, if necessary, provide further counselling to Mr. Andersen, by measuring his health record. Mr. Andersen becomes aware of what he can do to improve his health. For example the effects of exercise and the right diet on his oxygen saturation and pulse.

A large-scale project like TeleCare North, in which all stakeholders in the regional healthcare system collaborate across sectors, is unprecedented in Europe, making the project unique.

## I kommunen



Mr. Andersen's case



## Nyt hospitalsbyggeri



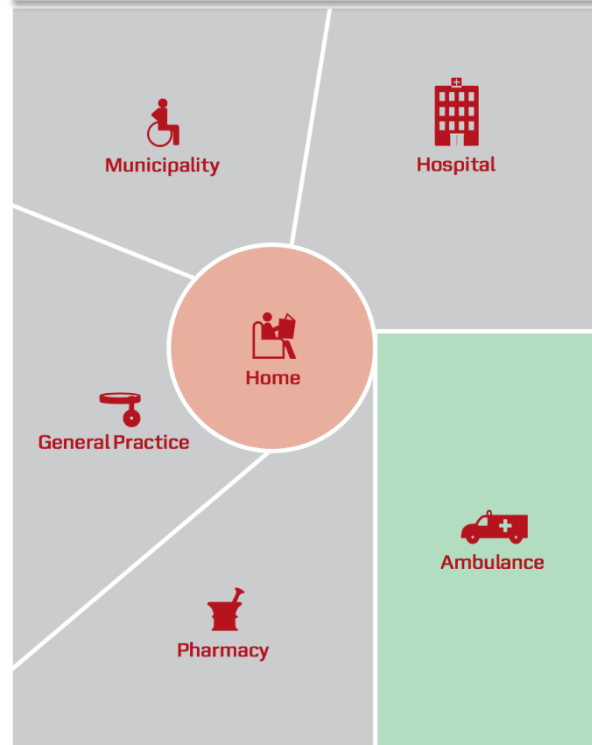
# PatientVille

## - det virtuelle minisundhedsvæsen



### PatientVille 2013:

- Falck
- Dansk Industri
- Healthcare DENMARK
- KL
- MedCom
- Region Hovedstaden
- Region Nord
- sundhed.dk
- WelfareTech





# Agenda

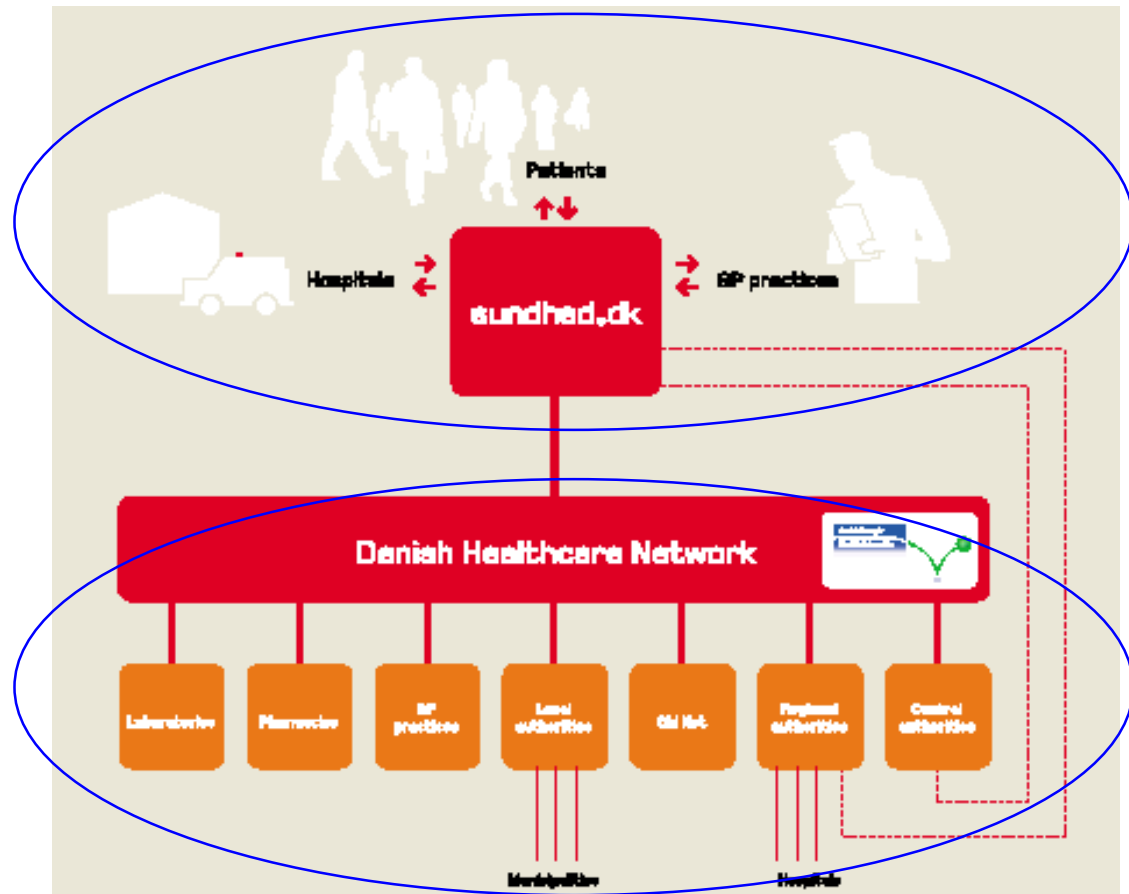
- Healthcare DENMARK introduktion
- PatientVille og den danske fortælling
- **Dansk e-sundhed i internationalt perspektiv**
- Healthcare DENMARK aktiviteter og planer

# Danmark er i eliten inden for sundheds-IT



Sundhed.dk  
**Health Portal**  
2003 -

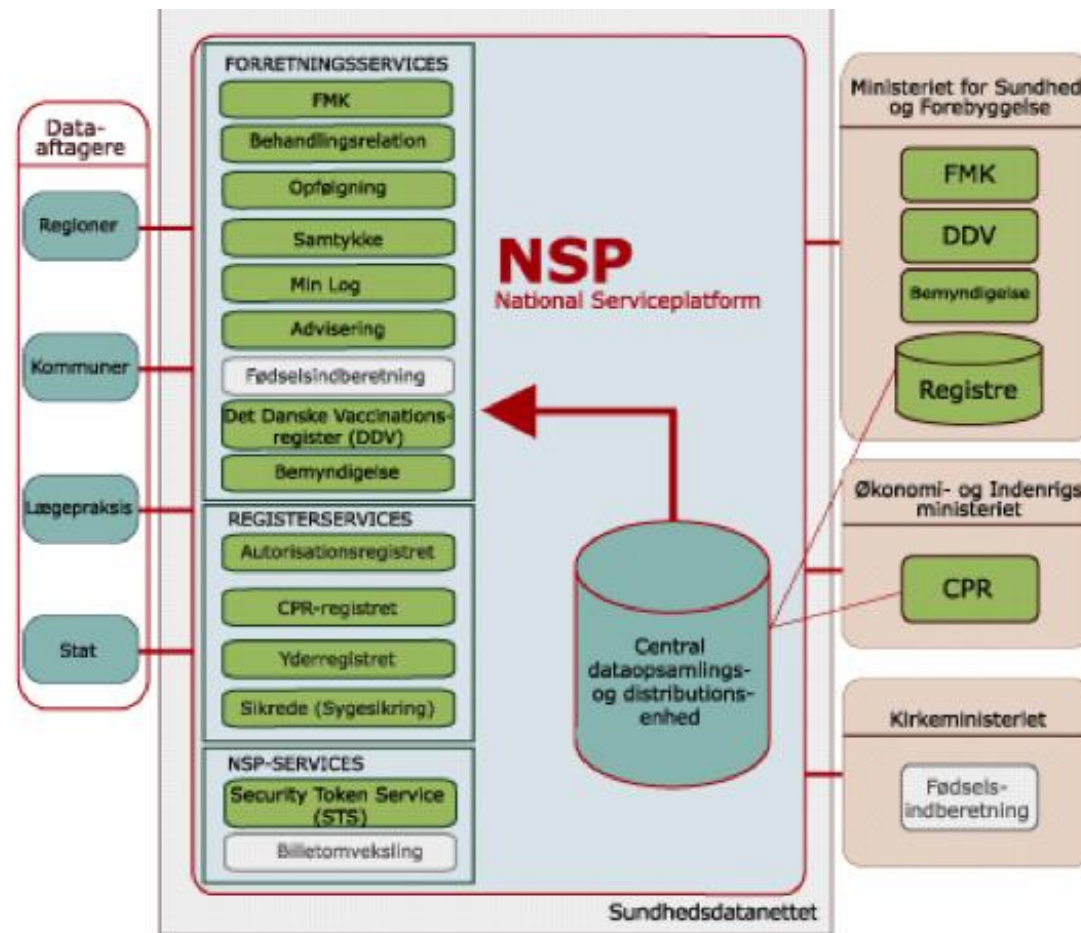
MedCom  
**Health Net**  
1994 -



Who is backing this initiative?

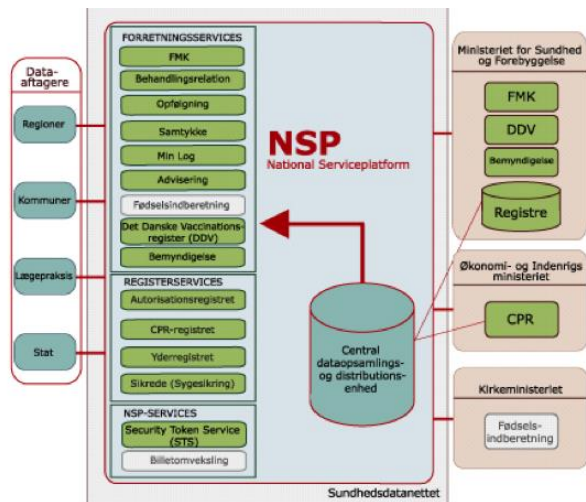
Ministry of Health, National Association of County Councils, Ministry of Social Affairs, National Association of Local Authorities, National Board of Health, Copenhagen Hospital Corporation, Danish Pharmaceutical Association

# Med den Nationale Service Platform skabes et elektronisk sundhedsfællesskab



Tegning over de services og registre der er i drift pr februar 2013 (grønne) og de services der åbnes for senere i 2013

# Digitaliseringsstrategien styrker i de kommende år NSP



tegning over de services og registre der er i drift pr februar 2013 (grønne) og de services der åbnes for senere i 2013

**2013**  
**Nationalt billedindex**

**2014**  
**Sundhedsjournalen v.1**

- Sygehuskontakter
- Medicinordinationer
- Cave
- Egen læge kontakt

**2014**  
**Sundhedsjournalen v.2**

- Opslagsløsning
- Patientdata fra hospitaler
- Patientdata fra praksis

**2014-2016**  
**Sundhedsjournalen v.3**

- Yderligere udbygning og tilføjelse af funktioner og data

**2015-**  
**Digital webbooking**

**2015**  
**Digital borger komm.**

- 80% af al borgerkommunikation (dokumenter, blanketter, breve) skal være digital
- NemID til tablets og smartphones

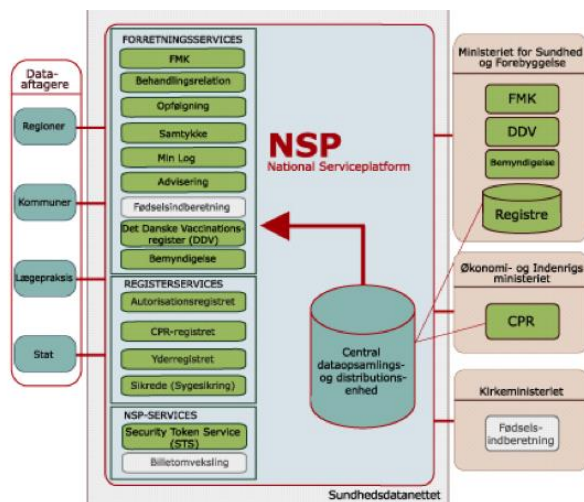
**2015-**  
**National telemedicin**

- National telemedicin platform
- Storskala, nationale telemedicin projekter

# En stærk fælles platform er fundamentet for udbredelse af innovative løsninger

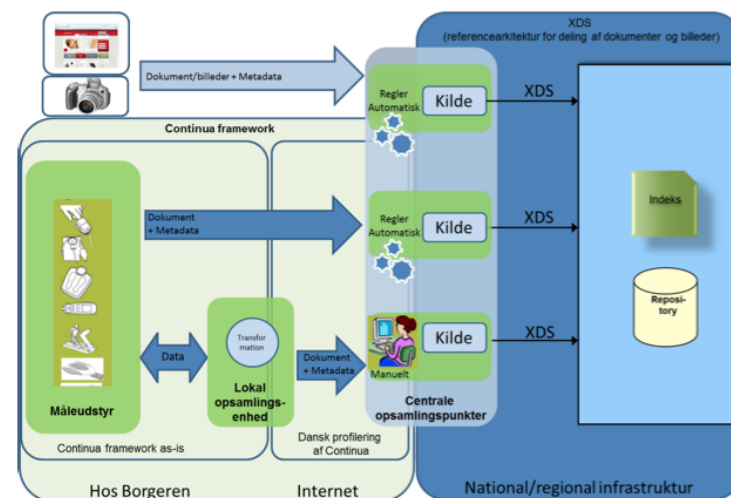


## Den Nationale Service Platform



Tegning over de services og registre der er i drift pr februar 2013 (grønne) og de services der åbnes for senere i 2013

## Reference arkitektur for Telemedicin



## Styrkede forretnings- og eksport muligheder for danske virksomheder:

- Fokus på effekt og nytteværdi – ikke på teknik
- Nationalt datagrundlag
- Datasikkerhed
- Modning af nye, innovative løsninger
- Udbredelse og storskala implementering



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- Healthcare DENMARK introduktion
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- **Healthcare DENMARKs aktiviteter og planer**



# Delegationsbesøg, Grækenland



<b>Monday 28. October</b>	<b>Venue: Ministry of Health Holbergsgade 6, 1057 Copenhagen K</b>
9:00-10:30	<b>The Danish healthcare system</b> <i>Hans Erik Henriksen, CEO of Healthcare DENMARK</i> <ul style="list-style-type: none"> <li>• Introduction to the Danish healthcare system, the role of Central Government and the Regions in healthcare</li> <li>• Danish competencies and strongholds</li> <li>• National eHealth – framework for IT-infrastructure and standards</li> </ul>
10:30-12:00	<b>Budgeting health</b> <i>Charlotte Hougaard Clifford, Head of Office, Ministry of Health</i> <ul style="list-style-type: none"> <li>• Budget and financial control. How is the budget decided upon and on what basis? Where does the money come from and who are the negotiating parties. What are the means of financial control in healthcare?</li> </ul> <i>Nina Moss, Head of Office, Ministry of Health</i> <ul style="list-style-type: none"> <li>• Handling medicine from an economic perspective</li> <li>• Real-time monitoring of expenditure in the healthcare sector</li> </ul>
12:00-13:00	<b>Ministerial lunch meeting</b> <ul style="list-style-type: none"> <li>• Meeting between H. E. <u>Mr Adonis Georgiadis</u>, Greek Minister of Health, and H.E. <u>Mrs Astrid Krag</u>, Danish Minister of Health together with the participation of the Greek delegation.</li> </ul>
13:00-15:00	<b>The Danish e-Health Portal and digital access to healthcare</b> <ul style="list-style-type: none"> <li>• A governmental view, <i>Kenneth Bøgelund Ahrensberg, Statens Serum Institut</i></li> <li>• The Danish e-health portal, sundhed.dk (<i>health.dk</i>), <i>Morten Elbæk Petersen, CEO</i> <ul style="list-style-type: none"> <li>- Data collection and the Shared Medication Record</li> <li>- The medicine profile. How does it improve the quality of the services offered to patients by healthcare workers and how does it limit public expenditure?</li> </ul> </li> <li>• E-Prescription <i>Birgitte Drewes, Head of Department at National Institute for Health Data and Disease control.</i></li> </ul>
<i>Transport</i>	

- Den græske sundhedsminister
- Formanden for sygesikring i Grækenland
- Ansatte i Grækenlands sygesikring

15:30-16:30	<b>Visit at Steno Diabetes Center</b> <i>John Nolan CEO and Head of Steno Diabetes Center</i> <i>Dorrit Nygaard Røjen, Diabetes Nurse</i> <ul style="list-style-type: none"> <li>• Introduction to Steno Diabetes Center</li> <li>• Tour around the facility</li> <li>• The Diabetes registry. How does the Diabetes registry optimize the services offered to the patients, affect public expenditure and the quality of life of the patients?</li> </ul>
<i>Transport</i>	
17:00	<b>Visit at Coloplast –Health economics and innovative products</b> <i>Lene Skole – CFO</i> <i>Frederik Bruun-Petersen, Director of Export Region (incl. Greece)</i> <i>Kristian Villumsen – Senior Vice President, sales</i> <i>Christoffer Melchior – Director of Wound Skin Care business area</i> <i>Tonny Karlsmark – Head Doctor at Bispebjerg Hospital</i> <ul style="list-style-type: none"> <li>• Introduction</li> <li>• Health economic advantages through treatment of chronic diseases.</li> <li>• Treating diabetes – a clinician’s view and the studies behind</li> <li>• Visit at the Coliseum: aspects of innovative products</li> <li>• Dinner</li> </ul>



# Delegationsbesøg, Grækenland

<b>Tuesday</b> <b>29. oktober</b>	<b>Venue: Danish Regions</b> <b>Dampfærgevej 22, 2100 Copenhagen Ø</b>
<b>Morning</b>	
9:00-11:00	<p><b>Round of discussion – Greek/Danish sharing of knowledge and experiences</b></p> <ul style="list-style-type: none"> <li>• The Greek challenges and approach – 20-30 minutes introduction by the President of EOPYY, Mr Kontos</li> <li>• Discussion between the Greek delegation and Danish stakeholders and thought leaders (primarily from the authorities visited the day before). Opportunity to go in depth with specific issues discussed the day before.</li> </ul>
11:00-12:00	<p><b>How to control medication costs</b> <i>Dan Rosenberg Asmussen, Vice CEO</i> <i>Per Nielsen, Head of Analysis</i></p> <p>The pharmacies role in prescription of the cheapest medicine according to the financial frames. How is the generic price competition secured? And how are the negotiating frames?</p>
12:00-13:00	<p><i>Lunch &amp; networking</i> Participants from the day before and other relevant stakeholders</p>
13:00-14:30	<p><b>Healthcare at regional level</b> <i>Danish Regions:</i></p>
	<p><i>Birgitte Harbo, consultant</i> <i>Thomas Bjørk Andersen, senior consultant</i> <i>Maja Barfod Hørsving, consultant</i></p> <ul style="list-style-type: none"> <li>• <i>Negotiating healthcare.</i> How does Danish Regions negotiate the annual financial frames for healthcare with the national government? How does Danish Regions negotiate with the General Practitioners?</li> <li>• <i>Regional health budgets.</i> How does the e-prescription system help the Regions control the budget? How does the Region control the prescriptions of the general practitioners in the Region? How does the Region secure that their health care budget is not exceeded?</li> <li>• <i>AMGROS – an organisation established by the five regions and leads tenders and procurement of publicly used pharmaceuticals and other medicinal products.</i></li> </ul>
14:30-15:30	<p><b>The Danish e-prescription system</b> <i>Hans Erik Henriksen, Healthcare DENMARK</i></p> <ul style="list-style-type: none"> <li>• How are the data used to prevent over-subscribing? Who are involved and what are the results?</li> </ul>

# Delegationsbesøg, Grækenland



<b>Wednesday</b> 30. oktober	<b>Venue: Ministry of Foreign Affairs</b> <b>Eigtveds Pakhus "SALON F"</b> <b>Asiatisk Plads 2, 1448 Copenhagen K</b>
9:00-11:00	<p><b>Danish healthcare policy and planning from a regional perspective</b> <i>Jonas Engberg Lind, Planning Consultant</i></p> <ul style="list-style-type: none"> <li>• The Capital Region of Denmark – facts and figures</li> <li>• Delivery of primary health care</li> <li>• Controlling of the practitioners' sector</li> </ul> <p><b>Building a future administration system for the praxis sector</b></p> <ul style="list-style-type: none"> <li>• The strategy behind a nationwide system. What is the vision for the project? And what are the expected outcomes?</li> </ul> <p><i>Merete Permin, Senior Project Manager</i></p> <ul style="list-style-type: none"> <li>• Future administration system for the praxis sector to support a more effective controlling, planning and automation through access to own activity data</li> <li>• More time for controlling and quality assurance</li> </ul>
12:00-13:40	<p><b>Working Lunch at Leo Pharma</b> <i>Gitte Aabo, President &amp; CEO, LEO Pharma</i> <i>Lars Minor, Regional Vice President, LEO Pharma</i></p>
13:50	<p><i>Peter Villadsen, Director Global Patient Access Manager, LEO Pharma</i> <i>Katia Murray, Corporate Public Affairs Manager, LEO Pharma</i></p> <ul style="list-style-type: none"> <li>• <b>Welcome, Gitte Aabo, CEO</b></li> <li>• <b>LEO Pharma – Danish pharma company with European production in among others Greece</b></li> </ul> <p><b>Visiting to Ballerup Pharmacy</b></p> <ul style="list-style-type: none"> <li>• Daily customers: 1400, yearly sales 11.5 mio euro, 40 employees, 5 units, pick robot installed</li> <li>• Introduction to Ballerup Pharmacy by pharmacist Ute Pørkesen</li> <li>• Tour of the pharmacy</li> </ul>
14:15	<b>Departure to airport</b>

Græsk interesse for videre dialog om:

- FMK og medicinprofilen
- Sundhed.dk
- Leo Pharma-koncept
- Praksis dataintegration (Sentinel m.v.)
- Praksys (det nye sygesikringsystem)
- (Telemedicin)



# Healthcare DENMARK, Q4 2013

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- Hospital+Innovation Congres: 7 delegationer
- Hollandsk delegation
- Græsk delegation
  
- Royalt besøg i Mexico
- Medica, Tyskland
- Russisk delegation
  
- E-Sundhedsobservatoriet
- Health Bridge, USA



# Healthcare DENMARK 2014

- **Januar:**
  - "Conference for Connected Care" præsentation og panel, Kiel
  - Polsk delegation
  - Delegation til Polen
  - Delegation fra Kuwait
- **Februar:**
  - E-health-aftenarrangement på ambassaden i Berlin
  - HIMSS Nordic E-health exchange, Orlando
- **April-Maj:**
  - Vitalis, Sverige
  - WoHIT, Nice
  - ConhIT, Berlin – incl. HCD præsentation
  - Delegation med H.K.H. kronprinsen til Polen
- **September:**
  - Skandinavisk Health og Rehab messe, København
- **Oktober**
  - Hospital+Innovation Congress
  - E-Sundhedsobservatoriet

02.12.13



# Tak for opmærksomheden Spørgsmål?

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CEO, Healthcare DENMARK

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