



# E-HEALTH IN VÄRMLAND

Spring 2008

County Administrative Board of Värmland

Confirmation of publishing allowness

Karlstad 080407

Name, Stamp and Signature



European Community  
European Regional  
Development Fund

# 1. e-Health in Värmland

## 1.1 Introduction

During 2006 the first steps were taken concerning a new strategy for e-health in Värmland following the national IT strategy for Health Care in Sweden. The strategic Study “e-Services in Värmland”, compiled by the County Administrative Board in Värmland, was carried out within the Interreg IIB BSR project Baltic Rural Broadband and outlines the present situation, short term goals and visions regarding e-services in five different areas: Inter-municipal e-Collaboration, e-Government, e-Education/e-Learning, e-Solutions for businesses and e-Health.

During 2007, several workshops/meetings have been held, within the framework of the BIRD project, in order to set up a pilot project about e-Health in Värmland. A project group, existing of representatives from the County Administrative Board of Värmland, the County Council of Värmland and the municipalities of Karlstad, Sunne and Kristinehamn, was established, and the pilot project “Regional IT Strategy for Health Care in Värmland” started in January 2008. The project idea is built on the visions from the strategic study “e-Services in Värmland” and on the “National IT Strategy for Health Care” in Sweden. The project is running between January 1 and June 30, 2008 and the main activities in the project are to gain approval for the national IT strategy for health care, to get an overview of present situation concerning infrastructure and routines in the different municipalities in Värmland, and finally to draft a proposal on how to continue in the future. Parts of the pilot project are financed by national funds (Dagmarmedel). For the future main project, funding is needed from the Swedish government as well as from the European Union.

## 1.2 Background of e-Health in Värmland

All information that deals with health care in Värmland is available on the County Council website ([www.liv.se](http://www.liv.se)). News information and usable links to other websites in the area are also available there. Web services available on today's website, for example *request a family doctor*, *request an appointment*, and *cancel an appointment* are primarily directed at providing the customer/patient better service. They also mean time savings for health care personnel. There is a tremendous deal of pressure from both patients and personnel who wish to have more e-services. Technically, there are no major problems in application. The most difficult issue is getting the e-service to function in various settings: not everyone sees the benefit of the web and routines for e-services are lacking.

When it comes to the development of health care information, many services and projects are organized at the national level through the Carelink organization ([www.carelink.se](http://www.carelink.se)) – a network for communication in health care whose foremost task is realizing the potential benefits of IT in health care



from a national perspective. Carelink was founded in 2000 by the County Council Association, the Swedish Municipalities Association, the Private Health Care Employers Association and the National Pharmacy Corporation (which maintains the sole right in Sweden to sell pharmaceutical products). Carelink manages and administrates Sjunet, health care's communication net and the network to which all Swedish County Councils and municipalities are connected. Health care has a major need for information exchange and communication, regardless of the organization involved and the boundaries of county and municipal lines. All information from County Councils, municipalities and private health care providers can be run through Sjunet, including information regarding schools, properties, traffic, etc. All County Councils, a number of municipalities, a number of private health care providers, the National Pharmacy Corporation as well as the National Tax Board and various vendors are connected to Sjunet today.

In order to communicate electronically, tools are needed for finding various people, roles and positions, as well as various systems. The Värmland catalogue is a joint catalogue project for health care in Värmland that began in 2002 and completed its task in February 2005. The project aimed at a common electronic catalogue for Värmland's 16 municipalities and the County Council. The Värmland catalogue was based upon the national HAS catalogue service that Carelink operates on a national level. The purpose of the project is to coordinate health care planning and to communicate with the help of IT. Reliable, current, correct, and relevant information is available in the Värmland catalogue about health care organizations, personnel, and their various roles. Information is centrally and securely housed in a database, which saves health care personnel time-consuming telephoning and faxing to reach accurate information and the proper person involved. Since 2005, all municipalities are included in the Värmland catalogue. The Värmland catalogue now plans on supplementation with *Secure Email* in hopes of sending secure emails between health care providers connected to Sjunet, despite email system vendor. There are presently five municipalities in Värmland (Sunne, Torsby, Säffle, Kristinehamn, and Forshaga) that partake in the "Secure Email" project.

In Värmland, a new system for coordinated health care has been purchased. Meddix is the message handling system for patient delivery between the County Council and municipalities, which now will begin to be used fully through the county. The possibility of integrating Meddix with internal operational systems and catalogues, like the Värmland catalogue, as well as connecting to national population registers exists.

E-communication also makes fast and effective communication between health care providers and pharmacies possible. This is a win-win situation for society at large, health care providers, customers, and pharmacies. Today, there are four e-communication possibilities for health care providers: *e-requisition*, *e-prescription*, *e-order*, and *e-dose*. The *e-requisition* service comprises ordering via [www.apoteket.se](http://www.apoteket.se), information, telephone advisement, and delivery to the recipient on a particular delivery



date. *E-prescription* facilitates a paperless process for the customer. An e-prescription is sent electronically to the pharmacy of the customer's choice. All Swedish pharmacies today have the capacity to receive prescriptions and requisitions electronically, but the level of use varies greatly, depending upon how the various County Councils prioritise this issue. Through the web application *e-order* (so-called *WebbAbest*) it is simple and easy to order medication for a health care division so that what is available in the pharmacy's warehouse and what it costs is clearly displayed. *E-dose* is a web application that facilitates two way communication between health care and pharmacy. Rather than prescriptions, dosage prescriptions where the patient's total prescription package is used, providing a complete overview of the patient's medication profile. The pharmacy also provides a number of e-services for private individuals. As a private individual, it is possible to *pick up prescriptions* and *buy prescription-free medications* and other pharmaceutical products through the website ([www.apoteket.se](http://www.apoteket.se)). It is also possible to obtain a compilation of all withdrawals made by prescription via a *medication register*.

The government and the Swedish Association of Local Authorities and Regions have agreed, during 2005, to establish a cooperative effort to support IT development within the health care sector. The "national management group for IT in health care" includes representatives from the Ministry of Health and Social Affairs, the Swedish Association of Local Authorities and Regions, The National Board of Health and Welfare, the Medical Products Agency, the National Pharmacy Corporation, and Carelink, and has jointly prepared and agreed upon fundamental principles for national cooperation in the IT area in order to support the continued development and renewal of health care in Sweden. This work has concluded in a national IT strategy for health care that is intended to function as a support to local and regional efforts and to lay the foundation for more in-depth cooperation. In Värmland, relatively good cooperation between the County Council and municipalities exists, and cooperation has proven to be fruitful very early on. The fact that all Värmland's municipalities and County Council are members of Carelink and Sjunet is unique. Tremendous potential for cooperation exists here, through, for example, joint connection that would mean great savings for all involved.

In order to activate cooperation between the County Council and municipalities in Värmland, it is important that politicians and leadership groups gain a vision for what e-health can mean, and begin to plan and prioritize. Politicians need to clearly take responsibility and participate in joint IT strategies at both the local and regional level. Since population mobility increases in connection with educational pursuits, job change, and varying summer vs. winter residences, it is even more pressing to establish, with developed IT support, that health care can function without interruption even when people move or live in more than one place. Since freedom of choice in health care was introduced in 2003, the patient's opportunity and right to choose care in an alternative location has improved. The newly introduced guarantee of health care may even increase mobility within health care. It is important to note that Värmland's citizens will, in the future, place the same

demands on the health care sector that they place on other service industries, and that they will use the Internet, to an even greater extent, to increase their knowledge of health issues, illnesses, medication, and self-treatment.

### **1.3 Work process for the pilot project “Regional IT Strategy for Health Care in Värmland**

#### 1. Set up phase:

- Workshops and meetings
- Set up a project group for the new project
- Appoint a project owner, a project leader and a project plan for the new project
- Apply for funding

#### 2. Realisation phase:

- Information Meetings with managers and personnel from different health divisions in all municipalities in Värmland
- A questionnaire about needs, status of Infrastructure and applications etc. (for managers from different health divisions).
- Documentation of the meetings and analysing the questionnaires.
- Feasibility Report on e-Health in Värmland (including a proposal on how to continue).

#### 3. Dissemination phase:

- Information and Dissemination of the results to decision-makers in Värmland
- Dissemination of the report to concerned people within the County Council and the municipalities in Värmland

### **1.4 Conclusion**

The vision for e-health in Värmland (for 2015) is a coordinated health portal for the entire county, regardless of principal agency, where citizens can reach their own personal site and gain access to their own health care record. Via this Värmland health portal, the patient is to be able to communicate with all district and specialist health care facilities; make appointments for telephone consultation and in-person visits; re-book appointments; and renew prescriptions for medication and other medical aids by logging in. The IT support that exists is to be user friendly and is to simplify daily routines for health care personnel. It is important that cooperation among Värmland's municipalities, County Council, and private health care providers functions so that universal access to health care information is available. A doctor should be able to access information about patient progress after treatment, despite when and where this information is

registered. And certified personnel should be able to access information about what doctors have done. New information technologies are effective tools for both citizens and personnel in future health care systems. But the vision for how health care should function in the future can only be realized if IT use is viewed in terms of an operational perspective where citizen needs for secure, effective, and easily accessible care are the focus.

The vision for e-health in Värmland follows the national IT strategy for health care in Sweden. It is very important with a common set of standards, which would create organisational benefits for both caregivers and patients. A common set of standards would lead to more efficient resource utilisation and lower costs, by enabling systems to function together and understand each other. Furthermore, standards would encourage suppliers of IT services in health care, to develop systems and components that are able to communicate and integrate with other systems.

