EU mHealth Hub
Horizon 2020 Project
mHealth Knowledge and Innovation Hub – EU Project

• Four year project funded by Horizon 2020 (EU), 3 Million Euros
  – ITU is Lead Partner, WHO is Partner

• Objectives:
  – Establish an EU mHealth Hub for collecting and disseminating research and experience relating to large-scale implementations of mHealth programs
  – Build capacity for the Hub to be able to support Member States in implementing national mHealth programs

• Start-up: 1st March 2017

• Status: We are at the end of the selection process for the Host of the Hub
What is mHealth?

“(M)edical and public health practice supported by mobile devices, such as mobile phones, patient monitoring devices, personal digital assistants (PDAs), and other wireless devices” (Global Observatory for eHealth, 2011)
why mHealth?

- mobile phone subscriptions versus population: (7.194 billion subscriptions (ITU, 2015) vs 7.5 billion people (2017))
  
  http://data.worldbank.org/indicator/IT.CEL.SETS.P2?view=map

- more people with access to mobile phone than clean water

- proven channel for behaviour change services

- advances in mobile phone and wearable devices means we can record and use our own data for health and behaviour change
Background - *Be He@lthy, Be Mobile*

- The joint WHO and ITU initiative on mHealth for NCDs - *Be He@lthy, Be Mobile*
- **Country programs** support governments in implementing mHealth services at large scale, capacity building and development of systems for health
- **Toolkits** provide a template for how to implement programs based on research results, expert recommendations, and lessons learned from country implementations
A sustainable scale-up model

- Research interventions
- Develop 'toolkits'
- Scale or build capacity in country
- Evaluate & refine knowledge
- Institutionalisation, knowledge sharing

mHealth

mDiabetes
mCessation
mWellness

Knowledge & Innovation Hubs
Technology agnostic content

- SMS
- WEB
- APP

Health Content

Algorithms
Challenges

• BHBM model for working with countries is not very scalable in terms of number of countries we can support

• Regional differences and context for mHealth
  – Digital health maturity, regulating mechanisms, policy gaps and digital health strategies
  – Accessibility and availability of mobile devices and infrastructure
  – Cultural barriers and drivers
  – Integration with health services
  – Interoperability with health information systems/eHealth/digital health ICT infrastructures
mHealth evaluation challenges

- mHealth is just a broad name for a class of platforms for delivering health services - not a medicine, or a specific technology

- notoriously difficult to find proof of effect through review of research
  - integration of services differ
  - context differ
  - mechanisms for user interaction differ

- sporadic and accurate vs. often/continuous and less accurate
mHealth Knowledge and Innovation Hub

• Build on successful concepts from tobacco control and HIV Hubs
• Build capacity in the regions for research on mHealth programs
• Support of the BHBM “methodology” for engaging with countries and stakeholders
• Create a first go-to place for mHealth knowledge, policy gaps and regional challenges
example - mHealth in Africa

• predominantly basic mobile phones
• one device, many SIM-cards
• (extended) families share one device
• related to micro financing and micro insurance
• lots of innovation and local solutions
example - mHealth in Europe

• mHealth integrated with eHealth and eGovernance

• smartphones more dominant (i.e. less distinction between eHealth and mHealth in terms of services)

• privacy and security important

• free flow of health services across borders

• secondary use of data, data analytics and big data

• policy and regulatory role of EU and countries
mHealth in European Union

• mHealth is a subset of eHealth and digital health with focus on individual empowerment and free movement of services within EU

• “Old” EU MS: complex legacy of systems

• “New” EU MS: can start from scratch

• Key policy areas:
  – mHealth integration with national health services
  – Privacy and security
  – Free movement of people within EU (access to health services, i.e. access to their own health information wherever they are in EU)
  – Regulation at national vs. EU level
The EU mHealth Hub Project

• 2012-2015 Draft proposal discussed with EU
• 2015 Horizon 2020 call for project
• 2016 Final submission of proposal
• 2017 All contracts signed - start of project March 1 2017
• 2017 Call for Expressions of Interest (with criteria for evaluation of EOIs)
  – 12 submitted EOIs (1 rejected on technical terms, 11 invited to submit full proposal)
• 2017 Preparation of Request for proposals (with detailed criteria for evaluation of full proposals)
• 2018 5 Proposals received (1 rejected on technical terms)
EC expected impact from project (H2020)

1. **Creating evidence** on health outcomes, quality of life and care efficiency gains in the NCD management by using mHealth solutions.

2. Enabling mHealth to be **deployed** in national and regional level health services and to deliver large-scale benefits, first of the selected entities, and later in the rest of Europe.

3. Becoming the **focal point** for expertise on mHealth in the EU and identifying and highlighting trends and gaps in policies, standards, regulations, etc. and best practices and barriers to the creation of consistent mHealth infrastructure and strategy.

4. Unique **platform** to support innovation in and up-scaling of mHealth by convening cross sector stakeholders (young entrepreneurs, start-ups, governments, technical officers etc.).

5. Creating **synergies** with the existing EU platforms of stakeholders such as eHealth network of Member States and also the EU EIP on Active and Healthy Ageing (requirement, scope, impact).
Project Structure - Work Packages

• WP 0 - Project Management (Continuous, reporting @ month 18, 36, 48)
• WP 1 - Knowledge Tools (Month 12 - 48)
• WP 2 - Hub Selection (Month 1 - 16)
• WP 3 - Capacity building and operationalation (Month 12 - 48)
• WP 4 - Innovation and policy (Month 12 - 48)
• WP 5 - Ethics (Month 12 - 18)
WP 2 Hub selection

- Request for Expressions of Interest (EOI)
- Pass/Fail of EOI submissions
- We received 12 EOIs
  - 11 were invited to submit full proposals as response to the Request for Proposals (RFP)
  - 1 Failed for technical reasons
- Request for Proposals (RFP)
  - Description of what we wanted from the candidates
  - Template for proposals
  - Criteria for evaluation of the full proposals; technical and commercial
  - 5 Full proposals submitted
  - 1 Failed for technical reasons
  - 2 Passed the threshold number of points in the technical evaluation
  - Commercial evaluation going on at ITU Procurement
# EOI summary

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17 nations represented (counting Northern Ireland and Scotland)
No country is represented in more than 2 EOI.
beyond the EU Project

• Regional mHealth Hubs
• Strengthen regional/local context for mHealth
• Network of Hubs
• Strengthen Be He@lthy Be Mobile outreach and knowledge base
• Will have to balance local role and relationship to other regional mHealth stakeholders with relationship to network of Hubs and relationship with ITU and WHO
• Avoid becoming another project and pilots operator
Q&A
THANK YOU!

For more information:
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