

#### **Romania - Hungary**

PHARE CBC RO-HU
INTERREG IV A HU-RO
INTERREG V A RO-HU
INTERREG VI A RO-HU

Cross-border healthcare co-operation as a medium for EU cohesion, resilience and recovery: opportunities, challenges, best practice

#### **OBJECTIVES:**

**Primary objective:** possible specific orientations of health strategic operations under Interreg VI-A Romania Hungary Programme

Indirect objective: lessons learned during 2014-2020 in the field of health care.

Ways of working with difference between systems- what is the thing that binds? The needs of the population; inequalities in baseline services;

Population health profile similar in RO/HU border region; health inequalities = earlier intervention, right intervention-right place-right time;

Inputs may look different depending on how you configure the overall project;

Work towards consistency of patient outcomes and common standards of service access/experience/provision levels;

What is the intended legacy of the investment? How will it be sustained? Hardware/human capital/health outcomes? E.g. RO/HU- next phase proposals developing to build on value of existing capital investments- capital investment as enabler of improved care systems for cross-border populations.

## Cross Border Co-operation (CBC) in Health- needs and challenges

Building on existing investments to develop innovative cross border service models for specific patient groups e.g. women and infants/maternity services; trauma and rehabilitation; e.g. investing in community-based specialist care and access to diagnostics; integrated care systems (and care closer to home) can be cross border;

Mobilising regional assets for health- medical/nursing schools, natural resources; health innovation/entrepreneurships and research opportunities;

Joint conceptualisation, design, governance and implementation of Interreg initiatives;

Vision- a region of excellence for Central and Eastern Europe in innovative cross-border systems of care for specific conditions, based on a model of cross-border population health improvement;

Outward looking- drawing in excellence to the region (bringing young clinicians back to opportunities), sharing the benefits to other regions.

Best practice approaches RO/HU – emerging initiatives in Cross Border Health co-operation - principles:

## Mission phases

#### Phase 1

- strategic face to face discussions
- systemic issues identified

Phase 2 under implementation

### Phase 1 Stakeholder Engagement Process Outcome

Strategic Overarching Cross-border Health Co-operation strands:







Cross-border
Patient Mobility
Workstream

Regional Cross-Border Clinical Leadership Forum and Network

Cross-Border Co-operation on Population Health Data, evidence-informed population health improvement and investment

Cross-border
Patient Mobility
Workstream
(suggested LeadTimiş County
Council with
involvement from
key regional
partners such as
DKMT):

Activity indicators for this overarching joint action involving partners from all three OSIs, could be the following:

- Statutory agreements between Member States to facilitate patient mobility under EU provisions in the cross-border region;
- Health card for citizens of the region allowing for cross-border patient mobility;
- Development of information on healthcare pricing for healthcare insurers and individual hospitals / specialty clinicians;
- Information (printed, digital and public drop-in points/events) for citizens and specific patient groups on how to access cross-border care and how to gain reimbursement under the Directive on the Rights of Patients in Cross-border Healthcare and the Social Security Regulation

Regional Cross-Border
Clinical Leadership
Forum and Network
(suggested lead:
Leadership of Arad
County Hospital in
partnership with Arad
County Council and all
medical healthcare and
education institutions
in the cross-border
region Ro/HU)

#### Potential activity indicators for this workstream could include:

- Clinical protocols developed for secondary and primary care doctors to support individual patient groups, conditions, procedures; these deployed on both sides of the border;
- Workshops and online/in person seminars;
- Online lectures from international experts;
- Case conferences on specific conditions;
- Clinical specialty exchange and placements of medical students in the cross-border region depending on specialty;
- Dissemination of clinical protocol best practice guidelines to population of clinicians in the region;
- Medical students benefitting from enhanced knowledge across the crossborder area;
- Joint cross-border clinical research partnerships and initiatives;
- 'Expert patient' seminars for clinicians;
- No. of clinicians (Doctors, Nurses, Allied Health Professionals) benefitting from CPD points by participating in or attending events run by the network.

Cross-Border Cooperation on Population Health Data, evidenceinformed population health improvement and investment (recommended joint leads Arad County Council and Bekes County Council working in collaboration with health care institutions and all relevant civic institutions across the region, with the involvement of national level authorities and/or agencies where relevant)

#### Outputs of this workstream could include the following:

- Collaborative healthcare and population health statistical data sharing agreement between the relevant institutions of the cross-border region (and where relevant national agencies as regards relevant statistical data held on the region);
- Development of a cross-border multi-stakeholder population health improvement strategy for the cross-border region which addresses health inequalities, age-sensitive and gender-related health inequalities, and identifies those population groups with specific health inequality needs;
- Development of a cross-border Memorandum of Understanding involving the healthcare institutions of the region and national stakeholders which orientates the alignment and investment of all relevant public resources with the objectives and ambitions of the cross-border population health improvement strategy for an initial period of 5-10 years (based on a longer-term vision and 30-year targets) with regular review and refocusing.

## Mission phases

Phase 1

#### Phase 2 under implementation

- examine systemic issues
- building capacity and potential for national systems and member states

## Objectives:

Later stage: based on the outcome of the assessment of the projects in the health sector (2014-2020 and planned for 2021-2027), the Expert is expected to be able to define orientations for post 2027 programming period, which will help Programme and the EC to decide on the potential need for specific study to be conducted on future investment priorities in this sector. It may include *inter alia* defining the scope (and source) of data needed, formulation of key assumptions, formulation of questions for survey etc.) and finally, the attempt to define main objectives/challenges/risks.

# Phase 2 Face to face stakeholder meetings

1

Need for jointly planned complementary infrastructure and harmonized policies in healthcare

2

Focus on medicine for women and mental health

3

RoHu Cooperation model can be replicated in other CB regions

## Thank you for your attention!

Livia VE BANU, Executive Director Monica I TEREAN, Head of JS

Oradea Regional Office for Cross-Border Cooperation on Romanian-Hungarian Border



REGIONAL PENTRU COOPERARE TRANSFRONTALIERĂ ORADEA PENTRU GRANIȚA ROMÂNIA - UNGARIA

Strada Gheorghe Doja nr. 5 Oradea 410163. România

T: +40 259 473 174 F: +40 259 473 175

of fice@brecoradea.ro