



Policy Context Analysis







2023

This template is meant to help partners in carrying out the Policy Context Analysis (PCA) in their region. Each section of the template is set up for to accommodate not only textual information, maps, tables, diagrams and images that align with your desired descriptions.

The outcomes of the analysis will not only guide you in selecting Good Practices of your interest but also in plotting your Roadmap in the 4^{th} Semester.

The Policy Context Analysis (PCA) serves as a diagnostic document of the current situation of telecare and telemedicine in the different regions of the CARES partners. Its purpose is to identify the strengths and potential for the development of such services in each region and to characterize the policy areas which are to be addressed in the project. The provided descriptions on e.g. national/regional regulations, demography, available services will be incorporated in a Final Report. The PCA will act as a stepping stone for further work on guiding the refinement the chosen policy instrument, including the development of a Roadmap in the 4thSemester.

1. Policy instrument addressed in the CARES project: name and short characteristic

Name: Health Roadmap of the Nouvelle-Aquitaine Region 2023-2028





Policy responsible authority: Nouvelle-Aquitaine Region

Ambition: Respond to the challenges of tomorrow: chronic diseases, the emergence of new infectious diseases, the loss of medical control, an ageing population...

Among the targeted actions regarding e-health and older people:

- Support the deployment of digital health solutions \circ Develop digital training courses for medical, health and social care students, so that they can learn about telemedicine and via digital simulation
 - Experiment with the installation of teleconsultation equipment in paramedical training institutes for educational purposes
 - o **Deploy digital practices** through living labs dedicated to healthcare
 - Support initiatives to improve access to and use of digital health technologies, focusing on people not using these technologies
- Develop and support innovative projects in the field of active and health ageing

 Future operational thematic plan, within the Health Roadmap, to be voted in 2023: Regional Silver Economy Plan.

More info: https://www.nouvelle-aquitaine.fr/linstitution/le-conseil-regional/les-seances
plenieres/seance-pleniere-du-lundi-27-fevrier-2023plenieres/seance-pleniere-du-lundi-27-fevrier-2023#titre h2 9389

- 2. Other policy instruments relevant to the project scope (plans, programmes, strategies on national and regional level).
 - Review the project's goals and objectives to ensure alignment with the policy instruments being addressed

Name: Digital Health National Roadmap 2023-2027





Policy Responsible Authority: Ministry of Health and Prevention

Context: Mon espace santé (My Health Data Space), the national electronic health record, has been launched in 2021. The objective is to allow everyone to store and share their documents and health data in a free and secure way and share them with health professionals. It features a secured messaging system, a health diary to keep track of medical appointments and a catalogue of digital health services approved by the French government.

Ambition: Led by the Digital Health Delegation, the new roadmap is designed to provide a framework for the development of digital health services, with 4 axes:

- Developing prevention and empowering people to take control of their own health
- · Improving access to healthcare for people and the professionals who guide them
- Giving time back to healthcare professionals and improving care for people through digital technology
- Deploying a framework favourable to the development of digital uses and innovation in healthcare

More info: https://esante.gouv.fr/sites/default/files/media_entity/documents/dns-feuille-de-route-2023-2027.pdf

Name: Regional Health Plan Nouvelle-Aquitaine 2018-2028

Policy Responsible Authority: Regional Health Agency Nouvelle-Aquitaine (representing the State) **Ambition:** Coordinate all public healthcare policies in the interests of a collective ambition: to improve the health of everyone in Nouvelle-Aquitaine.

Among targeted challenges:

- · An ageing population
- The development of chronic diseases
- Lack of general practitioners in some areas
- A healthcare offer that is overly focused on care to the detriment of prevention
- The need for better coordinated and more personalised care

Among objectives:

- Improving access to medical consultations and urgent care
- Improving healthcare pathways, in particular by deploying digital tools. Examples of actions:
 - Promote the use of Paaco-Globule, collaborative and communicating software for professionals, which facilitates the coordination of care at home
 - Make telemedicine (teleconsultations, tele expertise) for the benefit of the most vulnerable people

More info: https://www.nouvelle-aquitaine.ars.sante.fr/le-projet-regional-de-sante-nouvelle-aquitaine-2018-2028







- 3. General characteristic of your region, including its current demography, projections for future demographic changes, and the aspect of an ageing population
- Basic information on your region (incl. area covered by the policy instrument), e.g. area, demography, economy
- The current state of the aging population in the region and the demographic forecast

Description (max. 2000 characters):

In 2020 in Nouvelle-Aquitaine (source: Insee, Population census):

- **Total population**: 6,03 million inhabitants
- Population of 65 years old and over: 1,47 million inhabitants 24% of the total population
- Population of 80 years old and over: 455 000 inhabitants 8% of the total population

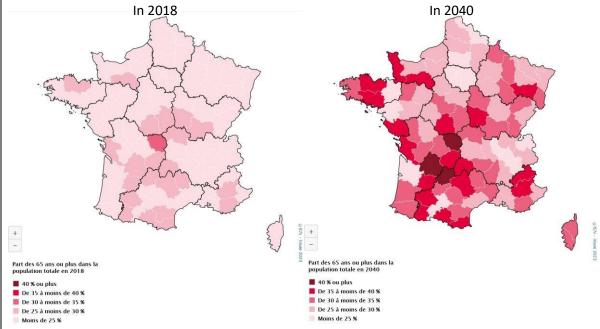
Nouvelle-Aquitaine is the oldest region in France after Corsica (source: Insee, Population census):

• **Ageing Index** in 2019: 109,30. The population ageing index is the number of people aged 65 or over per 100 people aged under 20. It is used to measure the degree of ageing of the population. The higher the index, the greater the degree of ageing.

In 2040 in Nouvelle-Aquitaine (source: Insee, Omphale 2022 demographic projections (central scenario)):

- 580 000 more older people (people over 65)
- Increased ageing of the population in the majority of departments in the region (NouvelleAquitaine is divided in 12 *départements*). The *départements* of Dordogne and Creuse would be the oldest of the *départements* of metropolitan France.

Percentage of the population aged 65 or over by department according to the central scenario



source: Insee, Omphale 2022 demographic projections (central scenario)

Autonomy (source: Insee, Omphale projections; Drees, EHPA 2015 and VQS 2014 surveys):





- By 2030, in Nouvelle-Aquitaine: +59 400 older people unable to carry out some acts of daily living on their own, an increase of 22% compared with 2016.
- By 2030: + 5 600 more older people will be affected by a loss of autonomy classified as "severe" or "high".
- In 2050, dependency will intensify: 28% more older people will be affected compared to 2030 and 56% more than in 2016.

Chronic diseases (source: National Health Data System 2017 - Population census 2015):

• 19.8% of the population of Nouvelle-Aquitaine suffers from a chronic disease, i.e. more than 1 million patients, the majority aged over 65.

Living in Nouvelle-Aquitaine:

- 41.3% of people aged 75 or over live alone. (source: Insee, population census 2019)
- 9.8% of residents aged 75 or over live in a nursing home or establishment for dependent elderly people (EHPAD) (9.1% in France). (source: Insee, population census 2019)
- **Social housing:** Social housing potentially affected by ageing (50+) (source: Agence nationale de contrôle du logement social (Ancols), Rapport public annuel de contrôle 2018, Paris, La Défense, 2019):
 - 24% of social housing is occupied by households where the reference person is aged 65 or over
 - 30% of social housing is occupied by households where the reference person is between 50 and 64 years old

4. The current services and offerings for the elderly in the region, considering their adequacy and accessibility.

- Care services and institutional care
- Health and medical care
- Activation of seniors
- Access to public services for senior citizen

Description (max. 3000 characters):

Care services and institutional care in Nouvelle-Aquitaine:

CAPACITY of medico-social establishments and services for older adults by category of establishment in Nouvelle-Aquitaine

(Public and private establishments and services, places on 31.12.2021. sources: DREES, Finess, SAE)

Residential establishment for dependent elderly people (EHPAD)

> medicalised retirement homes that offer accommodation in rooms

Number of establishments 918

Total number of places 71 621

Independent living residences

> housing complexes for older adults with community services, often built close to shops, transport and services





Number of establishments	255	
Total number of places	11 531	
Long-term care units (USLD)		
> accommodation and care facilities for people whose condition requires constant medical supervision		
Number of long-term care units	63	
Number of beds	3 304	

Day centres for older adults				
	ares for and, more often than not, assistance to their re losing their independence to remain in their usual			
Number of establishments	21			
Total number of places	333			
Other facilities for older adults				
Number of establishments	27			
Total number of places	765			
Home nursing services for older adults (SSIAD + SPASAD)				
> SSIAD (home nursing services) provide care in the home for the older people and people with disabilities.				
> SPASAD (multi-purpose home help and care services) offer both nursing care and home help services. This means that people who need home care and home help can call on a single service, with all services provided by the same team.				
Number of services	200			
Number of places	14 383			





EQUIPMENT RATE of medico-social establishments and services for older adults by category of establishment in Nouvelle-Aquitaine (Equipment rate at 31.12.2021 in number of places per 1,000 inhabitants aged 75 and over. sources: DREES, Finess, ISD; Insee, 2022 population estimates)			
Number of EHPAD places per 1,000 people aged 75 and over	98,5		
Number of non-EHPAD places per 1,000 people aged 75 and over (non-EHPAD structures, independent living residences, long-term care units (USLD) places)	21,4		
Number of places in home nursing services per 1,000 people aged 75 and over (SSIAD + SPASAD)	19,8		

- **513 care giving services** (SAD) authorised by *Départements* (source: ORS Nouvelle-Aquitaine, L'aide à domicile en Nouvelle-Aquitaine, Regards Croisés, 2021)
- The home help sector employs 38,000 people in the Nouvelle-Aquitaine region, representing 2% of total salaried employment and 4% of the female workforce. (source: ORS Nouvelle-Aquitaine, L'aide à domicile en Nouvelle-Aquitaine, Regards Croisés, 2021)

Respite for care givers in Nouvelle-Aquitaine: Respite solutions offer caregivers the opportunity to take a break by providing help at home or temporary accommodation in a care facility.

• 24 support and respite platforms, for carers looking after a person with a neurodegenerative suffering from a neurodegenerative disease, loss of autonomy or disability. The aim of this scheme is to offer: a solution to welcome the cared-for person, a range of services and specific support for the carer or the carer/cared-for duo (individual or group activities), and to information and guidance to carers. These platforms are generally linked to a day centre (independent or attached to an EHPAD).





- Day care: Day care is a form of non-permanent care, without accommodation, for older adults who are losing their independence, have Alzheimer's or related diseases, are disabled or have a chronic disabling illness.
 - o Day care equipment rate: 2,59 places for 1 000 persons aged 75 and over (source: FINESS database on 31/12/2021). (1 772 places in 2021) Average occupancy rate for nursing homes day care services: 61% in 2019 (source:

FINESS database on 31/12/2021).

- **Temporary care:** Temporary accommodation is a form of accommodation for people with disabilities people with disabilities and dependent older people suffering from Alzheimer's disease or a related condition. It can be called upon in complex or crisis situations, as a transition between between home and life in the community, or following hospitalisation.
 - Temporary accommodation equipment rate: 2,59 places for 1 000 persons aged

75 and over (source: FINESS database on 31/12/2021) (1 768 places in 2021)

Hospital services in Nouvelle-Aquitaine

(source: PRS 2018-2028 Nouvelle-Aquitaine – diagnostic régional)

- 382 healthcare establishments spread across throughout the region: O A third of these are public establishments, including:
 - ☐ 3 university hospitals (CHU): Bordeaux, Limoges, Poitiers
 - ☐ 98 hospital centres
 - ☐ 9 mental health establishments.
- 259 private establishments, including: 0 56 short-term care establishments, including 1 cancer centre 0 75 establishments specialised in follow-up care and rehabilitation
 - 69 ESPIC (Private health establishments of collective interest)
 establishments
 122 private for-profit establishments
- 5. The legal regulation of telecare and telemedicine at national and regional, local levels
 - Current legislation and guidelines
 - Alignment with policy instruments addressed in the project

Description (max. 3000 characters):

Current legislation and guidelines

In France the health policy is the sole responsibility of the State and implemented at regional level via the Regional Health Agencies (ARS), representing the State. Local authorities such as regional councils (decentralised entities) only have cross-cutting powers (training, economic development, digital deployment, etc.). If local authorities develop a health-related policy, it must respect/complement national guidelines and adapt them to the local context.

In 2018, the **national Digital Health Agency** was commissioned by the Ministry of Health to define a "base" functional **reference framework for telemedicine**. It is called a "base" because its purpose





is to provide a framework for the fundamental functions of telemedicine software, and to evolve according to the regulatory or doctrinal contexts that are systematically recalled in the reference framework. It describes all the functions expected of telemedicine software, which are necessary or useful for carrying out the various stages of a telemedicine procedure.





The telehealth core standards are not yet enforceable, and there is no certification for telehealth. However, a project to certify compliance with the interoperability and security reference framework for teleconsultation solutions will be launched in 2023, under article 53 of the 2023 Social Security Financing Law.

Telehealth includes:

- Telemedicine, as defined in article L6316-1 of the French Public Health Code: "a form of remote medical practice using information and communication technologies".
 Telemedicine comprises 5 acts: teleconsultation, tele-regulation, tele-expertise, remote monitoring and remote assistance.
- Telecare, as defined in article L6316-2 of the French Public Health Code: "a form of remote healthcare practice using information and communication technologies".

<u>In May 2023</u>, a decree formalised and strengthened the missions of the Digital Health Delegation (DNS), including the supervision of the Digital Health Agency. The DNS is responsible for the ethical aspects of digital healthcare. <u>In June 2023</u>, it drew up a set of guidelines for ethical reflection in the use of telehealth tools.

Digital health applications, which do not qualify as medical devices or telehealth, must comply only with the rules set out in the GDPR, supplemented by Law No. 78-17 of 6 January 1978 on information technology, files and civil liberties. Where health data is stored, to guarantee its security, the host must be "Healt Data Host"-certified, in line with the objective of a sovereign digital environment.

Remote monitoring: Remote medical monitoring is now covered by general law. From 1 July 2023, the national health insurance (Assurance Maladie) will cover the cost of remote medical monitoring for diseases that have received a favourable opinion from the French National Authority for Health (HAS) and have been published in the Journal Officiel by ministerial decree.

Alignment with policy instruments addressed in the project

The Nouvelle-Aquitaine Region draws up roadmaps setting out the regional strategy on specific themes. These roadmaps specify the Region's guidelines for action in its areas of responsibility: economic development, training and regional planning. In the field of health and the economy linked to longer life expectancy, the Region has prepared a new strategic document for the period 2023 to 2028. The decline in the number of doctors is affecting the whole of the NouvelleAquitaine region and is worsening access to care. In order to reduce inequalities in access to healthcare professionals, the Region wishes to continue its policy of deploying digital technologies and supporting e-health innovations.

In France, the State is responsible for health and implements its strategy through plans, but the Regions can also take action in the fields of training, the economy and regional planning to promote health and ageing well. Despite the freedom of administration of the Regions, the State and the Region work in partnership to develop concerted policies that best meet the needs of the population.

The Nouvelle-Aquitaine Region is working on a silver economy plan to complement and detail the health roadmap adopted by the Regional Council. This plan will set out the actions to be taken to meet the needs of Nouvelle-Aquitaine's senior population. The work carried out as part of the CARES programme will feed into this approach and help to develop the region's policy on ageing well. Besides, it will be fed by future consultations currently being organised as part of the







"AgeFriendly Cities" programme. By obtaining this label, the Region aims to become more voluntarily involved in a process of continuous improvement and questioning of its policies.			





6. Characteristic of telemedicine and telecare services at local, regional and national levels, focusing on their availability and effectiveness

- Services for the elderly and people with limitations also from peripheral areas
- Systemic solutions and experimental actions/pilot projects already implemented (numbers, technologies)
- Link to Good Practices

Description (max. 3000 characters):

Below are examples of practices highlighted by the local stakeholder group in June 2023. A large diversity of professionals are involved in e-health services for older adults: in hospitals, nursing homes, general practitioners, nurses, pharmacists, physiotherapists, etc.

Telemedecine in residential establishment for dependent older adults (EHPAD)

In Nouvelle-Aquitaine, the Region Health Agency (ARS) has been supporting telemedicine pilot projects in medico-social structures since 2010 and has been initiating programmes to roll out telemedicine. The aim is to develop the use of teleconsultation (enables a medical professional to give a remote consultation to a patient) and tele-expertise (enables a medical professional to seek advice from his or her colleague remotely), as part of a regional approach to healthcare. Since 2018¹, 808 medico-social establishments have benefited from support from the ARS and ESEA². In order to deploy telemedicine in EHPAD, medical care homes (FAM) and Special care homes (MAS)³, clusters of 10 to 15 establishments have been piloted by a coordinator financed by the ARS for one year.

The region's 921 EHPAD received a digital tablet provided by the ARS in April 2020 as part of the first wave of COVID, to enable them to carry out teleconsultations and maintain family ties thanks to videoconferencing calls. More than 60% of EHPAD had invoiced the CPAM (national health insurance) for at least one teleconsultation by June 2020 (including by telephone).⁴

Paaco-Globule: the regional e-Pathway service developed for health professionals, for communication and coordination.

Paaco-Globule is the result of the "Older people at risk of losing their independence" (PAERPA) and "Territory of Digital Care" (TSN) national programmes. It has been set up to ensure that all people suffering from loss of autonomy or chronic illness can live at home in the best possible conditions. This e-Pathway tool is now being rolled out to all professionals in Nouvelle-Aquitaine (NA), to encourage and facilitate the sharing of information and exchanges between professionals working with patients. It is supported by the Health Regional Agency Nouvelle-Aquitaine (ARS) and deployed by ESEA.

¹ source: ARS Nouvelle-Aquitaine, ESEA - Télémédecine en ESMS 2020 - Synthèse sur le déploiement des projets au 31/12/2020

² "E-Health in Action": the institutional e-health operator attached to Regional Health Agency)in Nouvelle-Aquitaine

³ Special care homes (MAS) and medical care homes (FAM) are accommodation and care facilities for adults whose disability or disabilities make them unable to carry out everyday activities on their own, and who require constant medical supervision and care.

⁴ source: ARS Nouvelle-Aquitaine, ESEA





E-health: development and support to projects

From 2017 à 2021, 2 calls for proposals have been launched by the Nouvelle-Aquitaine Region to support e-health projects and improve the situation of medical deserts. 22 projects have been supported for a total of €1.8 million. Among them:

- "Interoperability bus": Technical and organisational implementation of a pilot project enabling healthcare professionals to view the medical history of a patient under their care from their own workstation and to consult medical documents and images shared by colleagues. For this pilot project, an interoperability platform was set up.
- OBACANA (observing and act against stroke in Nouvelle-Aquitaine): The project includes a web platform e-feedback solution for healthcare professionals.

Tel-e-dent⁵: Tele-expertise in nursing homes to prevent dental problems in older adults

In nursing homes, the frailty of the residents makes it difficult for them to travel. The development of telemedicine is helping to ensure continuity of care for older adults, while sparing them the need to travel. Dentistry is a medical speciality that EHPAD staff often call on for their residents. Telemedicine makes it possible to meet this demand without the patient having to visit the specialist's surgery. In 2022, 401 tele-expertise acts in 15 EHPAD have been conducted by the Hospital of Guéret (354 patients).

Example of digital solution developed in NA: Platform for emergencies (tele-regulation, videoregulation) and platform for tele-consultation and tele-expertise

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⁵ source: ARS Nouvelle-Aquitaine, ESEA





7. Current challenges and needs regarding the availability and implementation of telemedicine and telecare services for older people at local and regional levels

- SWOT analysis to identify areas of improvement, potential opportunities, and threats to the implementation of telemedicine and telecare services
- Areas to be developed
- Relevance of the policy instrument

The SWOT analysis has been prepared in a working session with the Regional Council Nouvelle-Aquitaine, the Regional Health Agency Nouvelle-Aquitaine and Gérontopôle Nouvelle-Aquitaine.





STRENGTHS

- - The Digital Health Roadmap (ARS)
 - The health, silver economy and well-being sector is one of the 9 emerging sector identified and targeted by the Regional economic development, innovation and internationalisation plan of Nouvelle-Aquitaine 2022-2028.
- The coordination and follow-up of these policies at a regional level with steering committees involving different regional stakeholders
- The developed coordination among health professionals with tools (such as Paaco Globule) and structures (such as <u>Territorial Health Professional</u> <u>Communities – CPTS</u>)
- A large regional business ecosystem for the silver economy
- From 2018 to 2021, the implementation of a largescale programme from the Regional Health Agency (ARS) to develop telemedecine in nursing homes (teleconsultation and tele-expertise)
- E-health support services to health professionals organised by ESEA: e-learning, RELEA (community of peers in the Nouvelle-Aquitaine region to exchange and share e-health experience and practices)
- The current development of interoperability of teleexpertise solutions
- The attractiveness of Nouvelle-Aquitaine for health professionals and businesses and the participation and recognition of regional stakeholders at a national level (major events such as SantExpo, awards, etc.)
- The improvement of access to internet (fibre-optic, 4G/5G) and cybersecurity

WEAKNESSES

- The lack of health professionals and the need to improve health pathways
- The difficulty to develop sustainable business models of ehealth solutions
- The stagnation in the deployment and generalisation of e-health due to the challenge of acculturation to digital technology and the time needed for deployment
- The diversity of tools for health professionals: challenge of selection, of coordination, of interoperability
- The lack of accessible tools and of their usability (for example for cargivers)
- The lack of evaluation/dissemination of evaluation results and of appropriation of evaluation results for further action*
- The need to develop training on ehealth for health professionals (initial training and lifelong training)
- The access to fibre-optic and 4G/5G in some rural areas





OPPORTUNITIES

- E-health benefits for older adults:
 - Rapid access to advice and diagnosis in the event of a deterioration in health
 - New possible use, including therapeutic education for patients and their families, with a focus on prevention and individual behaviour
 - Combating isolation in a region where half the population lives in a rural commune (Insee, 2018 population census)
- National Context:
 - The development of My Health Data Space: It is a new public service (2022) to manage personal health data. The objective is to allow everyone to store and share their documents and health data in a free and secure way and share them with health professionals. It features a secured messaging system, a health diary to keep track of medical appointments and a catalogue of digital health services approved by the French government (existing framework to evaluate tools).
 - Assurance Maladie has reimbursed teleconsultation since 2018, tele-expertise since February 2019 and remote monitoring since 1 July 2023.
- Partnership of the Nouvelle-Aquitaine Region with Quebec: Digital health and home assistance for the frail older people: development of a collaborative network between Montreal (Geriatric university research centre) and Nouvelle-Aquitaine (Region)
- Development by the Region of training on e-health for health professionals (initial training and lifelong training)

THREATS

- The difficulty of today's older adults in using digital tools (situation of older adults in the future?)
- The acceptance and appropriation of e-health by health professionals
- The acceptance of digital tools by citizens and the challenge of personal data sharing
- The challenges of interoperability of digital tools
- Cyber attacks

Areas to be developed by the Region:

- Initial training and lifelong training on e-health for health professionals
- Acculturation of older adults to digital solutions
- A better support to project leaders to strengthen the sustainability of projects, including the adaptation of current support services and a better communication of support services





8. Characteristics of the local Stakeholder Group

• Composition, purpose, tasks performed, possible influence on the policy instrument to ensure they are effectively contributing to the project's objectives.

Description (max. 2000 characters):

The Nouvelle-Aguitaine Local Stakeholder Group aims at:

- Sharing needs and ideas for the setting up of Health Roadmap of the Nouvelle-Aquitaine Region in the field of e-heath/telemedicine, including the Silver Economy Plan
- · Identifying and exchanging good practices
- Learning from the CARES European initiatives

The Nouvelle-Aquitaine Region is associated partner to the CARES project but the project is to be implemented on the whole Nouvelle-Aquitaine territory and with all stakeholders concerned.

Structures invited in the local stakeholder group:

- CARES partners o Gérontopôle Nouvelle-Aquitaine o Nouvelle-Aquitaine Region
- Institutions o Regional Health Agency Nouvelle-Aquitaine (representing the State)
 - ESEA ("E-Health in Action": the institutional e-health operator attached to Regional Health Agency
- Research O University Hospital Centre of Limoges / Laboratoire Vie Santé (Ageing and Digital

Health Lab.) ○ University Hospital

Centre of Bordeaux O University Hospital

Centre of Poitiers

Regional Unions of Health Professionals
 O Agora Lib' Nouvelle-Aquitaine (support for unions of health professionals

Groupement in the Nouvelle-Aquitaine region)

- o Private practitioners o Private nurses o
- Physiotherapists o Pharmacists
- Training O Croix-Rouge Compétence Nouvelle-Aquitaine
 - UNAFORIS (French Union of Social Work Education and Research)
- Competence centre
 - ALLIS NA (regional health cluster)
- Businesses o Cluster Digital Aquitaine/TIC Santé
- Users
 - France Assos Santé Nouvelle-Aquitaine