



Cover Story

Reset 2021

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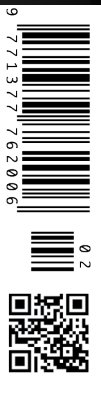
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2021: Reset or Not?

As we move into 2021, and as the second wave of COVID-19 continues to rage, HealthManagement.org asked healthcare experts what they anticipate as the most significant change this year and what they would like to see in the future. Read on for a snapshot on whether healthcare in 2021 needs a reset and what could be improved.

Prof Christian Lovis

Head Division of Medical Information Sciences | University Hospitals of Geneva | Full Professor of clinical informatics | University of Geneva | Switzerland | HealthManagement.org Editor-in-Chief, IT

There has been fast and impressive contributions of digitalisation in healthcare last year, and the development of vaccines against SARS-CoV-2 is one of them. But the struggle of sharing interoperable data, be it for the public health governance, for prediction, or just to improve understanding of the disease and its impact, has demonstrated important weaknesses. This is not to even mention the more than 10 'global international' research initiatives around COVID-19, each one building its own community of contributors and silo of data.

All actors, in all countries, have experienced the need for meaningful health information in 2020. Every aspect of the COVID-19 pandemic from surveillance to logistics to research have shown the need to have better interoperable and interpretable data landscape. Not just data. Usable data. 2021 will allow an important

progress in the interoperability and interpretability of the health data landscape.

A new strategy for health data is needed, including a new societal contract. This would mean moving from the intention of 'we share data' to a distributed landscape of shareable data. And shareable means data are interpretable and usable, not open and unusable. Data generate costs, data generate value.

Building a new path towards shareable data that are semantically enriched, has value and is recognised for it. Moving towards a new societal contract to ease sharing, not only of data but also of profits. Building accountability towards all stakeholders, including handling potential discrimination, biases and consequences affecting individuals or organisations. All of it is needed. And all of it requires a serious mind shift.

Prof Arch Simona Agger Ganassi

Member of the Council of Health Care Without Harm – Europe (HCWH –EU) | Member of the Board, European Health Property Network (EuHPN) | Member of the National Council of SIAIS | Member of the International Federation of Healthcare Engineering | Italy

According to what I hear in professional, academic and also political speeches, the most urgent progress that healthcare should make is in the field of digitalisation and in a more extensive acquisition of Artificial Intelligence (AI).

Certainly these are important factors and I am not against the technological evolution in healthcare. I am, however, in agreement with Richard Heinberg, of the Post-Carbon Institute who, with regard to climate change explains why technology will not save us. This pandemic has shown the profound need of renovation that is necessary in healthcare and this cannot be achieved only by more technology.

In my point of view, the first need is that hospitals and related care infrastructures stop considering themselves as "islands apart" from the rest of the evolving world. New values should become the pillars and a new way of operating should be implemented. Synthetically I consider that we should focus on having:

- Healthcare respectful of our planet – climate change, air and water pollution, protection of natural environments and

biodiversity, all fundamental for good global health conditions. Hospitals and health facilities can and have to reduce their "footprint" and increase the awareness of these problems.

- Healthcare for a different globalisation – In-depth studies have highlighted, in parallel with obvious positive aspects, the negative consequences for the global health conditions produced by this phenomenon as it has developed, and driven primarily by economic goals.

- Healthcare for social responsibility – social responsibility starts with the assumption that technical solutions should provide health support to people within a framework of social justice and inclusion.

I am deeply conscious of the transformative power that healthcare has, so I would like to see that the year 2021 produces a healthcare system that addresses this power toward actions oriented by the three principles highlighted above and move towards building a healthier planet, within the framework of different ways of "being global", and driven by more social justice.

Iris Meyenburg-Altwarg

Managing Director | Com-P-Tense Germany GmbH | Hannover | Germany | President | European Nurse Directors Association (ENDA)

2021 will not be a year of straight paths. The (healthy) handling of stress and changes is a life's task for each and every one of us. It is about making decisions and dealing with one's own and external expectations. Some people simply have high expectations that are not questioned further. Disappointments are thus inevitable. The danger with expectations like this is you get stuck on something. That clouds the view for opportunities and ends in a negative spiral. On the other hand, you can have a lasting effect on your success if you deal realistically with your expectations. In order to be able to deal with one's own expectations, ambiguity tolerance is immensely helpful. This is the degree to which someone can deal with conflicting expectations and

contradictions. The higher this tolerance for ambiguity, the better one can cope with ambiguous and contradicting situations.

More specifically, I hope that in 2021 we will regret less the many lost things from 2020 and that we will deal, in a targeted manner, with the mistakes of the last year and with what we can learn from them for the future. That can be professional as well as very personal development.

My view is that a positive attitude allows us to penetrate into spheres that we could never reach in any other way and it is often our attitude that stands between who we are and what we want to be.

Dr Rafael Vidal-Perez

Cardiac Imaging Consultant | Cardiology Department | Hospital Clinico Universitario de A Coruña | A Coruña, Spain

For 2021 I would like to see in healthcare more advancement on the application of technology for this pandemic period. We are still learning the best way to deliver telemedicine. It was there for years and we embraced it extremely fast due to the situation. Maybe the technology that is available does not fully offer what we really need to be able to give the best service to our patients. For example, better tools for dealing with old patients that are not ready for digital services due to absence of prior use.

We also need better integration of these tools in our electronic health records. We need better apps to trace contacts that help

us in the isolation of potential infected patients. I believe the next step is home centred systems that can detect the presence of infection and that would allow us to perform serial tests. But for me the most important change are the vaccines. It is the biggest challenge for 2021 – how to organise vaccine rollout, to make it fast and effective, maybe through artificial intelligence. AI could help us design the best strategies or the collective intelligence that seems to be missing during this crazy period of our lives. Stay safe in 2021. The end of this nightmare is nearly here.

John Nosta

President – NostaLab | Founding Member – Digital Health Roster of Experts, World Health Organization | Google Health Advisory Board, Google | USA

The year 2020 was certainly complex. Clinical uncertainty was met with the demands of rapid action and the results were both innovation and confusion. COVID-19 compressed years of science, pharmaceutical development, technological advances and clinical practice into just months. And then, layered moral imperative of action into this equation. The lessons learned from 2020 are vast. But, in many instances, it can come down to a single word: agility. It seemed that almost every day in 2020 provided new data, insights, and guidelines that helped informed clinical practice. Yet, this pushed clinicians away from the “clinical comfort zone” into more a “risk/reward” posture where conformation was either antidotal, pre-published, or driven by societal and political pressures. Consensus was commonly in the minority

and COVID-19 admissions and hospital census resulted in logistical and emotional pressures that took a significant toll on both patient and practitioner.

It's this unpredictability of today's world that demands we embrace both functional and intellectual aspects of being agile. And it's critical to differentiate this from the conventional notion of “failing fast”. Agility is “failing smart” with awareness of varied options – from technology to social – that afford clinicians the template of adaptive solutions that may have not been considered prior to the COVID-19 era. Learning and adopting tools like telemedicine, home monitoring, pulse oximeter and others can help place you ahead of the innovation curve rather than falling the victim to the “next” COVID curve.

Prof Dr Paul Timmers

CEO | iivii BV | Brussels | Belgium | Chief Scientist Cyber.Cerides | European University Cyprus | Nicosia | Cyprus | Senior Advisor | EPC | Brussels | Belgium

Health is a global common good. Dealing with the cyber-resilience of health systems must then also become a joint effort of countries and international organisations. I would like to see an international plan of action established in 2021 in the global

common interest. We need to work together on cyber-capability building, information exchange about cyber incidents, and mutual assistance for cyber protection.

Sabine Torgler

Staff Nurse | University Hospital Bristol and Weston NHS Foundation Trust (UHBW) | Bristol | UK | Director | English for Nurses Ltd | HealthManagement.org Columnist

As a clinical-working registered nurse and a lecturer, I would love to see that all governments of this world consider nursing, midwifery, paramedic and care workers as well as medical staff as one of the most important work sectors in every society.

This pandemic has shown that if healthcare professionals wouldn't have worked as much and as hard as they did (and thousands of healthcare professionals got ill and many died in the duty of care) and still do, the death numbers would have been even higher.

I demand for my colleagues and, of course, for myself that governments equip their countries, their societies with functional healthcare systems, with enough hospital (primary and secondary) facilities, modern standards, PPE, and profound education which should be state-funded, and act for their societies to ensure people's protection.

We are currently seeing how 'lucky' we are in Europe, even with

the incidence numbers for the UK still being high in comparison to other EU states. But if you look at the wider picture in health-care and at other states and continents – how, in some way, forgotten they are – I still find it shocking.

I call for the international solidarity here amongst all healthcare professionals and all governments. Only with a stable, professional and modern healthcare system one can govern its people.

The politicians should stop thinking about – and certainly acting towards – making healthcare systems a profit market. They should stop reducing healthcare budgets – in the UK, where the NHS budget has been continuously cut for years now, we have seen and keep seeing in what kind of state we live, even with a high educated nursing workforce and colleagues. If one saves money at the wrong end, they will pay the price for it. And the price is here – lives of healthcare workers, which no government is willing to accept as their responsibility.

Dr Rafael Grossmann

Healthcare Futurist, Technology Innovator, Surgeon & Educator | USA

The role of AI in healthcare will continue to grow. Its applications are already many, and if we couple AI with big data analysis and collection from all sorts of wearables, there is no limit to what AI can be tasked with. It is going to have a tremendous impact on how we approach healthcare. But. We don't do 'healthcare', we do 'sickcare': we treat those who are sick instead of focussing on prevention. This is where digital health can have a real impact – turn our 'sickcare' into 'healthcare'. That's the main trend.

At the same time, the way virtual (VR), augmented (AR) and mixed (XR) reality is developing is really interesting.

Head-mounted displays are becoming smaller, more powerful, connected, and can gather eye movements, motion and potentially other physiological data. This technology will change not only education and diagnostics but treatment of diseases as well, especially in the light of the mental health and well-being issues coming to the forefront during the pandemic. I think that these tools will become increasingly important in preventing or healing the mental health issues. The potential has been only barely tapped, so we'll be seeing more of these technologies.