D9.3

Project Flyer Version 1

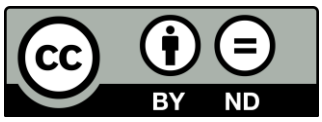
ABSTRACT

This deliverable provides the first version of the Project Flyer intended to communicate the aim and approach of InteropEHRate as well as the benefits to different audiences.

Delivery Date	15th November 2019
Work Package	WP9 Communication, Dissemination and Collaboration
Task	T9.2 Dissemination & Communication Activities
Dissemination Level	Public
Type of Deliverable	Websites, patents, filling, etc.
Lead partner	EHTEL

This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 826106.

This document has been produced in the context of the InteropEHRate Project which has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 826106. All information provided in this document is provided "as is" and no guarantee or warranty is given that the information is fit for any particular purpose.



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LOGTABLE

Version	Date	Change	Author	Partner
0.1	19-08-19	Definition of the Table of Contents	Marc Lange, Tino Marti	EHTEL
1.0	17-09-19	First version of the flyer	Tino Marti	EHTEL
1.1	24-09-19	Review of the flyer contents	Lucie Keunen, Francesco Torelli	A7, ENG
1.2	03-10-19	Improvement of the visual representations	Stephan Schug, Tino Marti	EHTEL
1.3	14-10-19	Reviewed version of the flyer	Tino Marti	EHTEL
2.0	29-10-19	Incorporation of the final version of three scenarios illustrations	Tino Marti	EHTEL
2.1	14-11-19	Chapter one included	Tino Marti	EHTEL
Vfinal	15-11-19	Final review and version for submission	Laura Pucci	ENG

ACRONYMS

Acronym	Term and definition
A5	Paper size 148 x 210 mm
D2D	Device-to-device
EHR	Electronic Health Record
IEHR	InteropEHRate project
IHS	InteropEHRate Health Services
IRS	InteropEHRate Research Services
PDF	Portable Document File
S-EHR	Smart Electronic Health Record

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1. INTRODUCTION

1.1. Scope of the document

This deliverable addresses the project goals included in the work package dedicated to communication, dissemination and collaboration activities. The scope of the document is the design of the first version of the project flyer intended to raise public awareness about the project goals, technical approach and expected results.

1.2. Intended audience

The project flyer conveys the key messages of InteropEHRate to a wide range of audiences encompassing from the health and technology sector to policy-makers and general public. Although the main audience will be participants of technical and health sector related conferences, addressing multiple audiences requires an additional effort to express in lay language the various technical aspects of the project. Elements like the slogan, infographics and a responsive design have been accurately reflected to achieve the maximum communication effectiveness.

1.3. Structure of the document

This document is structured in two sections. The main section is developed in chapter 2, describing the contents and design elements of the project flyer. The second section enumerates additional applications of the design produced. Finally, two annexes illustrate the final output of the project flyer and the kakemono.

1.4. Updates with respect to previous version (if any)

This is the first version of this deliverable.

2. PROJECT FLYER

The project flyer is aimed to disseminate the aim and objectives of InteropEHRate in different printed formats. Initially, it is designed as a two-pages leaflet (A5 size) that will be used as a handout in the events where InteropEHRate will be presented.

An electronic copy of the flyer in PDF is attached to this document.

2.1. Front cover

On the front cover, the flyer displays the project logo and the graphic elements identified as part of the branding. Underneath, it also displays the links to InteropEHRate digital communication channels, i.e. website and Twitter handle.

In the centre of the page, a new slogan has been developed with the participation of all partners to summarise the key message of InteropEHRate: "*Your health data available and shareable when and where you need*"

Figure 1 – Project flyer front cover

2.2. Inside content

Pages 2 and 3 are considered inside content of the folded A5 project flyer. It contains the following sections that were developed through iterations with work package 9 partners:

Key goal:

Europe needs to shift from closed technological "walled gardens" inhabited by national healthcare organisations, to a global ecosystem based on an open health platform, where software vendors, institutions and citizens of different countries may securely collaborate, to improve healthcare and medical research, thanks to common technologies.

Our key goal is to complement and integrate the current interoperability infrastructures with new technologies for health data exchange centred on the person, based on a bottom-up approach that does not require the coordination by a superior authority and that leaves more control of health data to the people.

Project aim:

InteropEHRate aims to support peoples' health by opening them up to new ways to make health data available whenever and wherever needed. To make this possible, key health data is managed in "patients' hands", i.e. through Smart Electronic Health Records (S-EHR) on mobile devices. Data is always transferred via highly secure channels including a direct device-to-device (D2D) communication. Patients are in full control of their data and its routes.

InteropEHRate is developing open interchange protocols supporting patient-centred exchange of health records between patients, healthcare actors and researchers. Thus, the project will contribute to the next steps in the follow-up of the February 2019 EC recommendation C(2019) 800 and help to pave the way towards an open European Electronic Health Record (EHR) exchange format and process. It will specifically add a decentralised, patient-driven bottom-up approach as an alternative method to the top-down approach of exchanging patient data exclusively via the national contact points for eHealth.

Core functionalities of InteropEHRate:

- Patients are in control of all personal health data and can collect, see and share it with healthcare professionals, researchers or whoever they want.
- People are hence mediators for health data exchange that can also be transferred privately and securely through device-to-device protocols.
- The patient is not locked with one vendor and may change the S-EHR app or move data between cloud storages.
- The S-EHR app and cloud vendors may be different.
- The cloud storage can be used for emergencies, like a national EHR.

- InteropEHRate will define vendor-independent protocols for direct communication with patients and vendor-independent guarantees to be fulfilled by the apps and service providers for secure storage of health data on mobile and on cloud.

InteropEHRate technical approach:

The project will release an open specification to securely exchange health data using the InteropEHRate protocols between different persons' S-EHRs, and different applications of researchers and healthcare professionals of different countries. To facilitate the creation of a new ecosystem of applications based on this open specification, InteropEHRate will also release a reference implementation of the following key elements:

- **S-EHR mobile app (Data container)**: Prototype able to store securely any health data about a single citizen, generated by the citizen itself or by the healthcare professionals. The S-EHR mobile app will be able to exchange health data with healthcare professionals and researchers of different countries using the InteropEHRate protocols.

- **S-EHR cloud**: Prototype of a service managed directly by the citizen, able to store on the cloud the personal health data collected by the S-EHR mobile app. Citizens may choose to use the S-EHR mobile app without using the corresponding S-EHR cloud storing data only on the smartphone.

- **InteropEHRate Health Services (IHS)**: A set of service components reusable by any healthcare organization, offering the implementation of the InteropEHRate protocols for the exchange of health data between citizens' S-EHRs and healthcare professionals Apps. IHS will exploit existing infrastructures for cross-border identification of citizens and will assure the respect of strong security requirements.

- **Electronic Health Record (health professional access)**: Application exploiting the IHS and used by healthcare professionals to read from and write any relevant health data on the S-EHR of the patients who have given their consent.

- **InteropEHRate Research Services (IRS)**: A set of service components reusable by any research centre offering the implementation of the InteropEHRate protocols for requesting to the citizens and receiving from their S-EHRs health data donated for research purposes.

Visual illustrations

Figures 2 and 3 exhibit the visual illustration of three user cases of InteropEHRate (scenarios). The first visual describes the transferability of health data between health providers based on the S-EHR data container under the control of the patient (scenario 1).

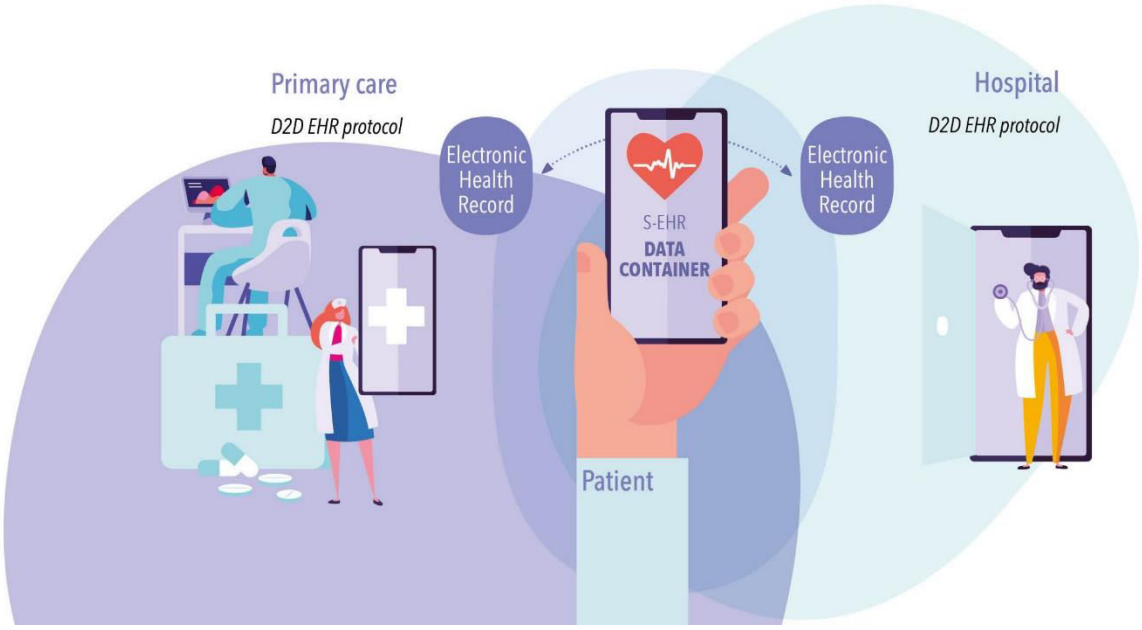

Figure 2 – Visual illustration scenario 1

The second visual describes two additional scenarios: (i) access to patient data in case of an emergency through remote EHR protocol and the S-EHR Cloud (scenario 2); (ii) donation of health data for research purposes (scenario 3).

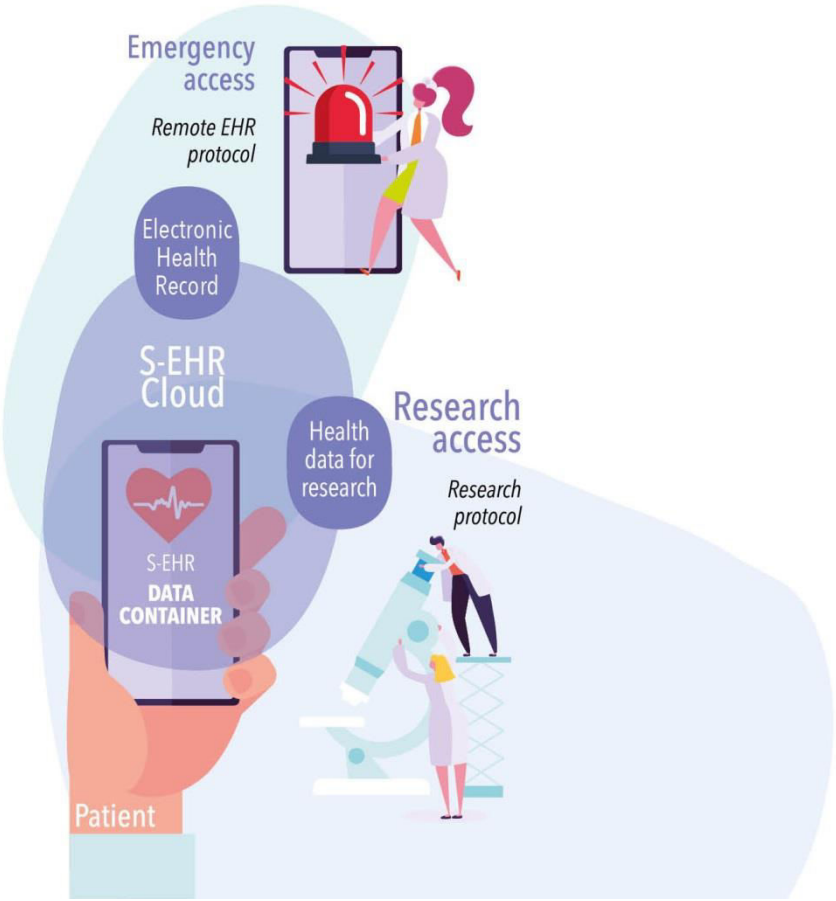

Figure 3 – Visual illustration scenarios 2 and 3

2.3. Back cover

On the back cover of the project flyer, the following information is displayed:

- About the project.
- InteropEHRate Consortium: nominal lists of the project partners, type of organisation and geographical distribution with geo-localised map.
- Contact details.

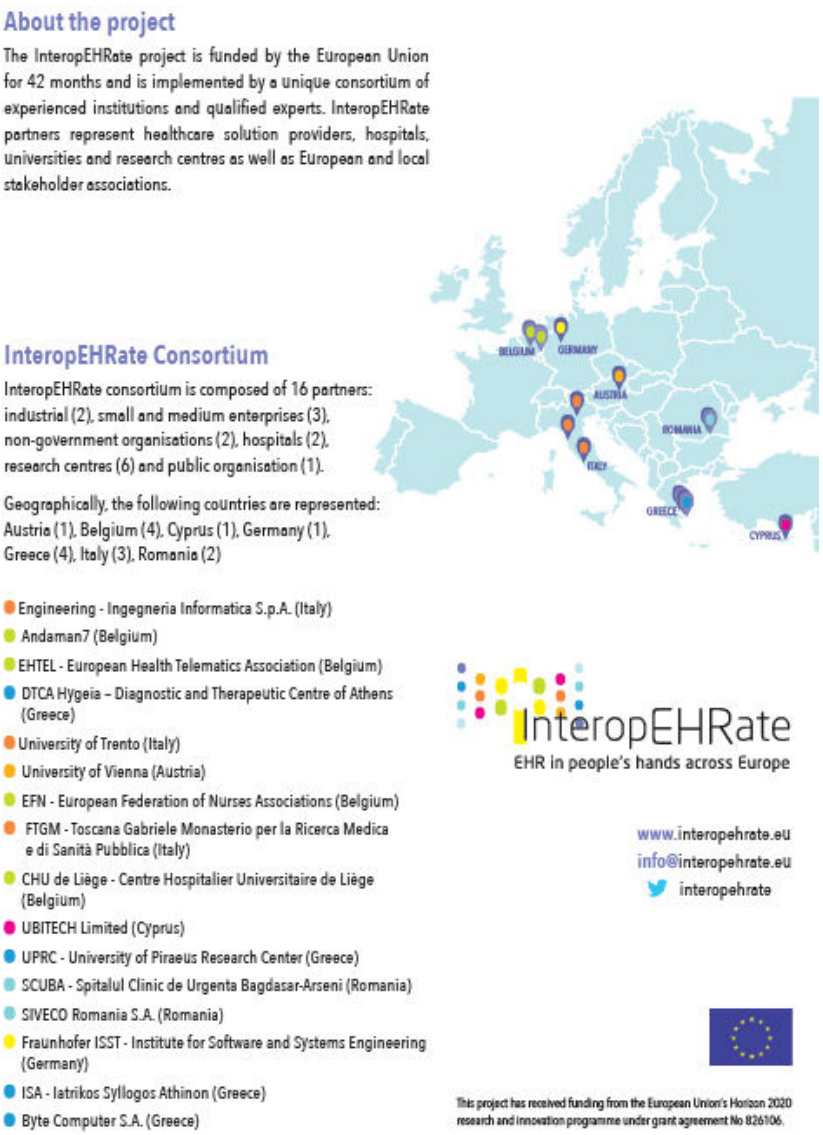

Figure 4 – Back cover

3. OTHER APPLICATIONS

Additional applications of the project flyer are the kakemono and the project poster that will provide an augmented presence of InteropEHRate in conferences, workshops or other dissemination events where the progress and results will be presented.

Figure 5 – Kakemono

ANNEXES
PROJECT FLYER AND KAKEMONO

Your health data available and shareable when and where you need

InteropEHRate

EHR in people's hands across Europe

www.interopehrate.eu

interopehrate

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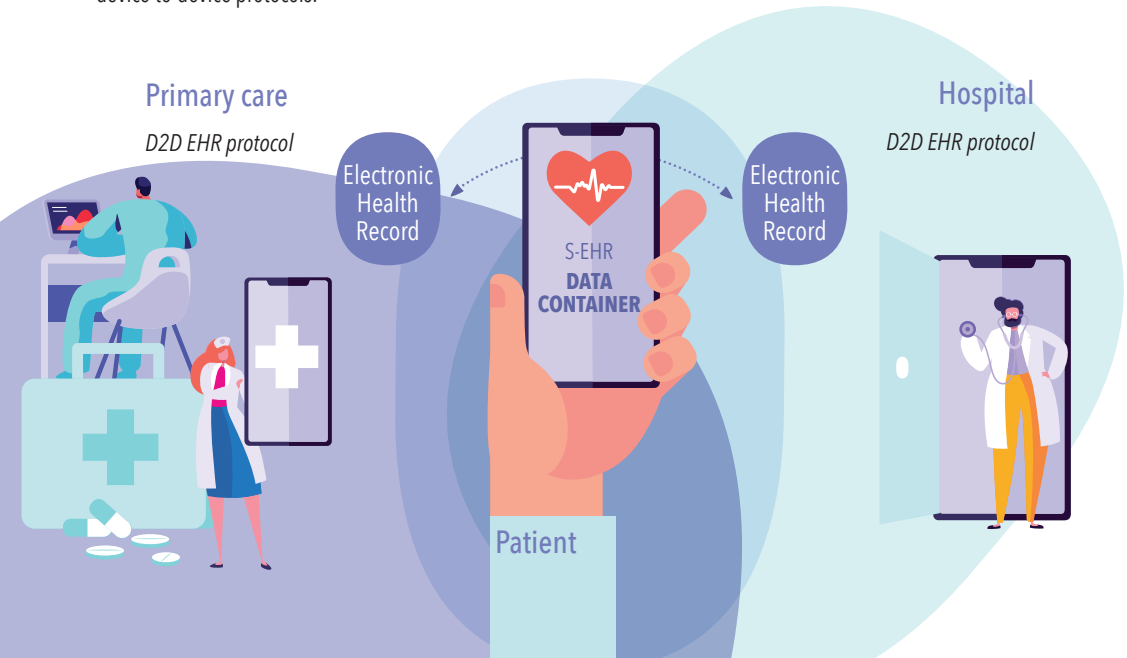

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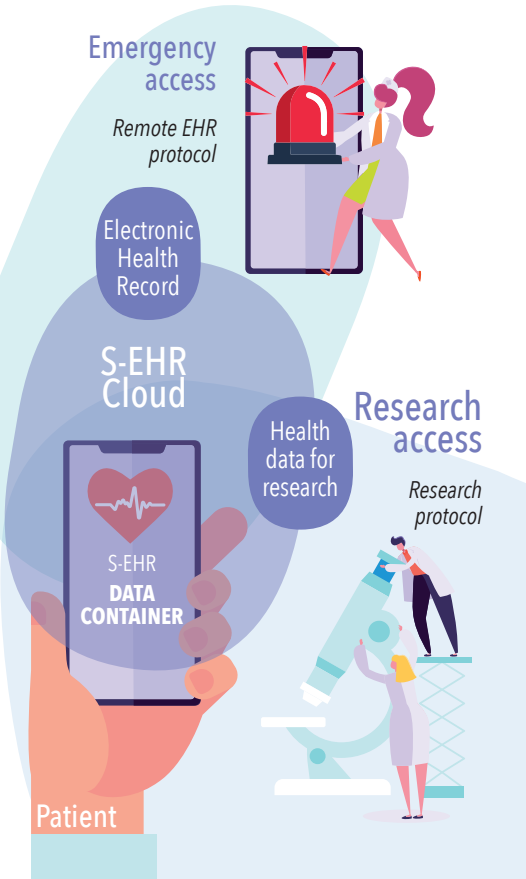
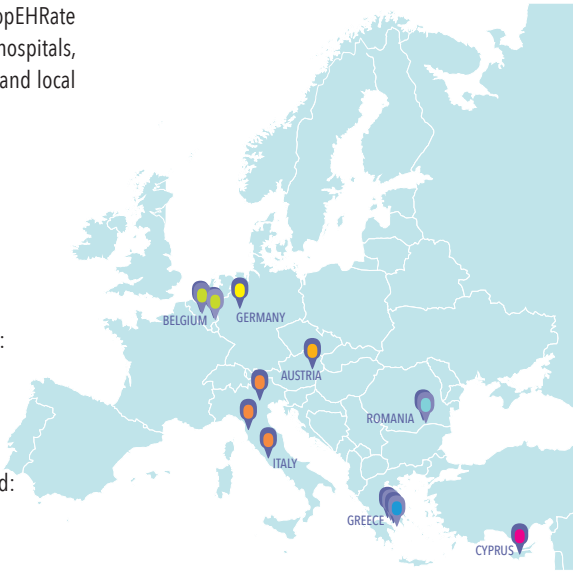


About the project

The InteropEHRate project is funded by the European Union for 42 months and is implemented by a unique consortium of experienced institutions and qualified experts. InteropEHRate partners represent healthcare solution providers, hospitals, universities and research centres as well as European and local stakeholder associations.



InteropEHRate Consortium

InteropEHRate consortium is composed of 16 partners: industrial (2), small and medium enterprises (3), non-government organisations (2), hospitals (2), research centres (6) and public organisation (1).

Geographically, the following countries are represented: Austria (1), Belgium (4), Cyprus (1), Germany (1), Greece (4), Italy (3), Romania (2)

- Engineering - Ingegneria Informatica S.p.A. (Italy)
- A7 Software (Belgium)
- EHTEL - European Health Telematics Association (Belgium)
- DTCA Hygeia – Diagnostic and Therapeutic Centre of Athens (Greece)
- University of Trento (Italy)
- University of Vienna (Austria)
- EFN - European Federation of Nurses Associations (Belgium)
- FTGM - Toscana Gabriele Monasterio per la Ricerca Medica e di Sanità Pubblica (Italy)
- CHU de Liège - Centre Hospitalier Universitaire de Liège (Belgium)
- UBITECH Limited (Cyprus)
- UPRC - University of Piraeus Research Center (Greece)
- SCUBA - «Bagdasar-Arseni» Clinical Emergency Hospital of Bucharest (Romania)
- SIVECO Romania S.A. (Romania)
- Fraunhofer ISST - Institute for Software and Systems Engineering (Germany)
- ISA - Iatrikos Syllogos Athinon (Greece)
- Byte Computer S.A. (Greece)

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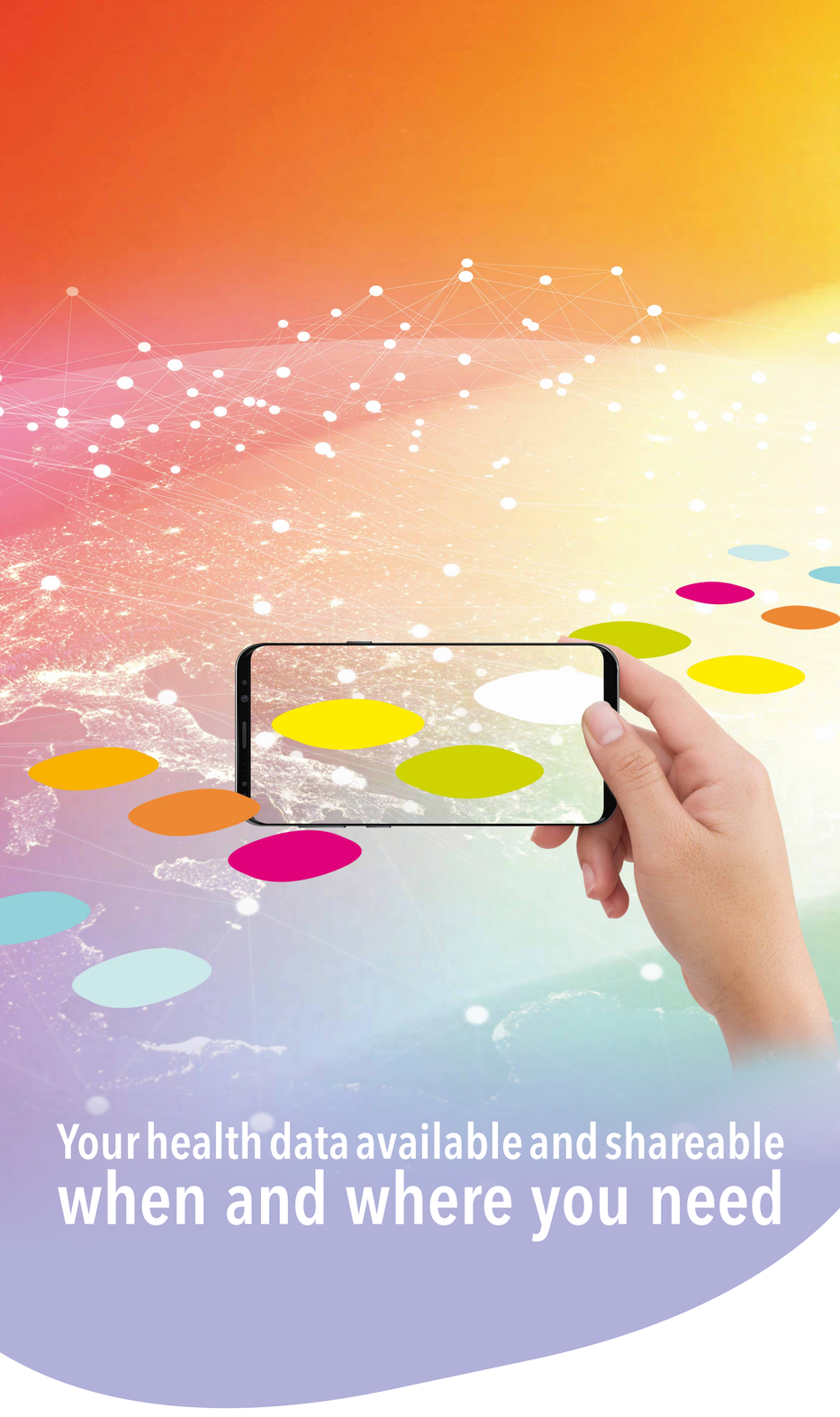

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