



**‘Access to Healthcare’ Workshop  
27-28 September 2018**

**Access to Healthcare, Portugal**



# Laboratoires de Proximité

Proximity Labs or « City-Labs »

## Beneficiaries:

### Funded

- Cliniques Universitaires Saint-Luc: University Hospital
- Université Catholique de Louvain: Academia, IT group
- Health First Europe: Communication, dissemination
- European Medical Association: GP network

### Unfunded

- Médecins du Monde: NGO
- Roche Diagnostics: POCT potential provider
- Radiometer: POCT potential provider
- GKo&Co: mobile app start up

## “City-labs” Objectives:

- Experience a next generation of care centres relying on Point of Care testing and supporting transfer of innovations from laboratory medicine to primary care. NOT to create a new network of sample collection centres. More a “label” for the next generation of care centres.
- Develop Mobile Health applications to empower patients and to improve the prevention and monitoring of selected chronic diseases.

## (co)funded by ERDF and Brussels Region

- Budget : 1 736 295 €
- Duration : 5 years (2016-2021)

## Project partners



La Région et l'Europe investissent dans votre avenir ! • Het Gewest en Europa investeren in uw toekomst!



*If you are in Sweden, you have an 8.5% chance of dying after an acute myocardial infarction.*

*In Hungary, it's 18.8%, according to the OECD.*

*Inside Germany, your odds of needing a second operation after hip replacement vary 18-fold from one region to another.*

*Within Britain, odds of dying after bypass surgery vary four-fold, according to ICHOM (International Consortium for Health Outcomes Measurement).*

**We need better data about what works and doesn't work in treating specific kinds of patients across Europe.**

**From the data, we can develop standards for best practice in treatment:**

**Which care pathways,**

**Which medicines and equipment,**

**What kind of doctor and nurse training,**

**What kind of hospital and system organisation works best?**

Digital health: A time to act

A report of a Healthy Measures High-Level Roundtable, Vienna, 25 May, 2018

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## Some trends that have influenced the project idea

### Technologies

- Molecular diagnostics
- POCT (Point of Care Testing)
- Data / EHR
- Care pathways
- Financing / OoP
- Competition
- Sustainability
- ...

### Patients / citizen

- Consumers
- Services
- Digital
- Empowerment
- Direct To Customer / ST
- ...

## Vienna, May 2018 meeting conclusions addressed by « City-Labs »:

1. Establish a robust, dedicated and sustainable EU-level IT infrastructure and set standards to assist member states in implementing national digital health programmes, support cross-border healthcare and enable the safe and ethical re-use of pseudonymised patient data for research.
- 2. Put a focus on applying digital health tools and methods to modernise primary care, integrate health and social care and provide channels for information to flow between healthcare providers, to ensure continuity of care.**
- 3. Promote sharing of data among care professionals and biomedical researchers, to ensure the benefits of digital health infrastructures are delivered.**
4. Devise a strategy for fostering health literacy at a national and EU level and establish an EU level survey of progress to promote positive competition.
5. Re-orientate medical education, moving away from the sole on focus specialisms, to foster development of healthcare professionals with a holistic view of physiology and disease – and the potential to become flexible, empathetic generalists.
- 6. Capitalise on patients' involvement in medical education and medical research and in the care cycle.**
7. Consider an EU-backed programme of research to demonstrate the added value of training patients.
8. Prove, and then communicate the benefits - to win citizens' trust in the use of their health data for research.
9. Involve patients from the preliminary stages of every clinical research project.
- 10. Use digital health tools to support patients in self-care.**

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# City-labs Objective 1:

Experience a next generation of center to support the transition of POCT / Innovations to primary care.

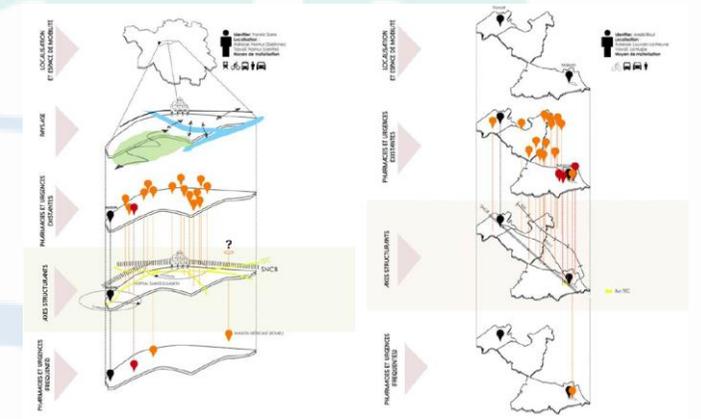
## WHAT

- Blood (sample) collection
- (satellite connected to reference lab)
- POCT (ISO)
- Education , training, coaching, e-learning
- Prevention
- Incubator

## WHO

- Patients with priority on selected chronic diseases (diabetes, heart failure, fertility,...)
- Physicians
- HCP (Nurses, pharmacists...)
- Researchers
- IVD and Pharma
- Companies

## WHERE



To create a “label” that could identify anywhere in Europe any sample collection entity supporting patients along their care pathway according to validated SPOs, technologies, education, services in compliance with EU regulatory environment.

Deliverable: validated components, user’s manual and due diligence procedure

# Operational structure



**City-Labs**  
Votre laboratoire de proximité  
Uw lab in de buurt  
Your lab in the neighbourhood

- **Technology Incubator**
- **Label content development site: incl. training and information...**
- **Validated label content operation**

Q4 2018



**Technology and SOP initial validation site**



**Mobile apps, Secured cloud, EHR, Access to Health networks, ...**

**UCLouvain**



**City-Labs**  
Votre laboratoire de proximité  
Uw lab in de buurt  
Your lab in the neighbourhood

**Validated « label » content operation**

Q2 2019

**Dedicated network, Website, Secured Cloud, EHR**

# City-labs Objective 2:

The digital experience / environment



Eglé mobile app



« how to » Chatbot

Patients



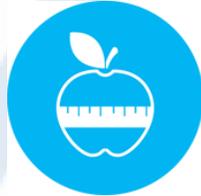
Physicians



Friends & Relatives



3rd party services



99%  
OF DISEASE MANAGEMENT  
IS IN THE HANDS OF  
INDIVIDUALS AND THEIR  
FAMILIES

Nurses



Health  
Networks



Insurances



Medical providers



# Patient

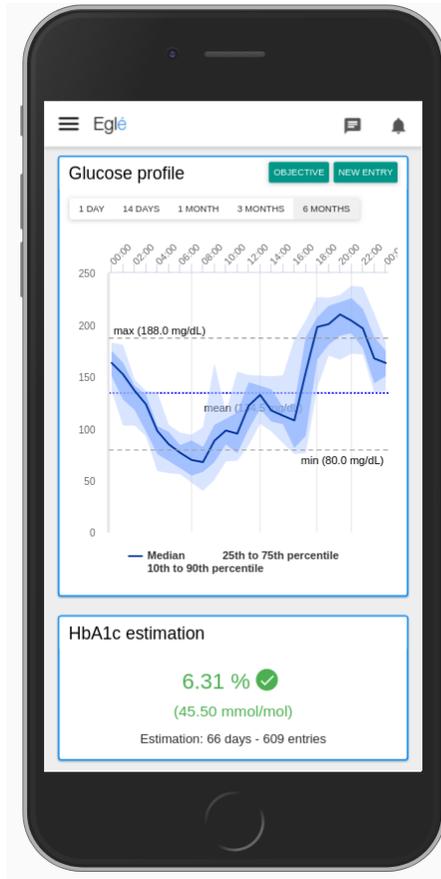
Daily monitoring

Treatment Assistant

Gamified coaching

HbA1c estimation

Chat



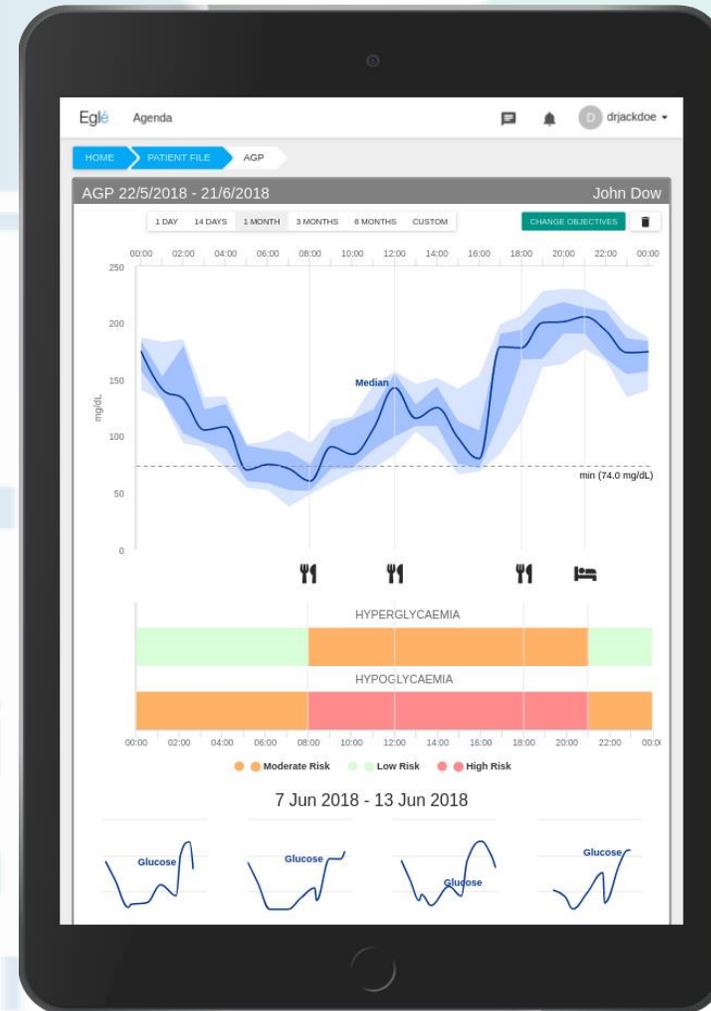
# Diabetologist

Decision support

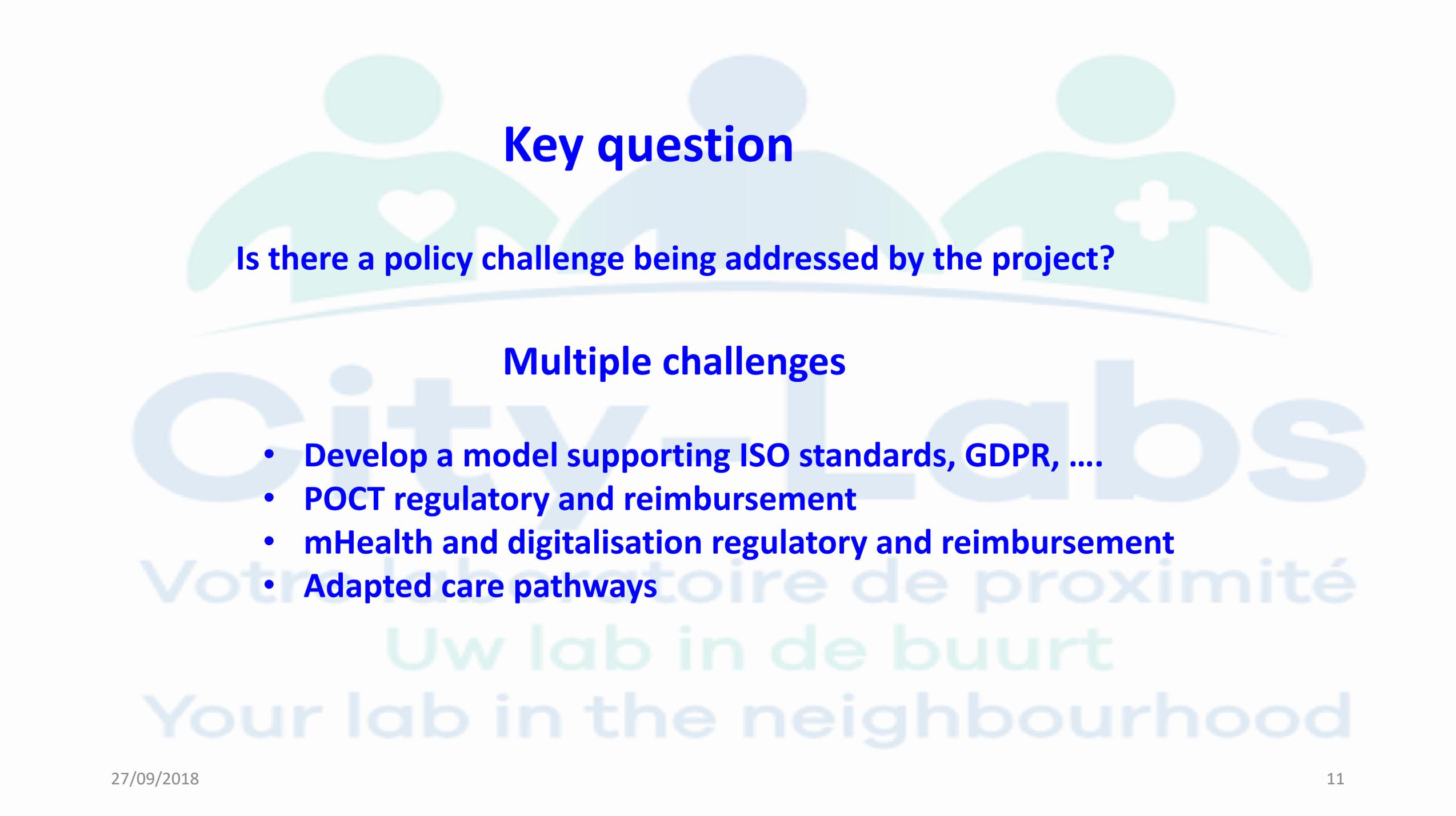
Visualization

Video consulting

Appointment



Eglé - Type I diabetes Mobile application



## Key question

Is there a policy challenge being addressed by the project?

### Multiple challenges

- Develop a model supporting ISO standards, GDPR, ....
- POCT regulatory and reimbursement
- mHealth and digitalisation regulatory and reimbursement
- Adapted care pathways

## Key question

Is the project targeting any specific problem/s related to the e-Health sector?

## Multiple challenges

- Improve the prevention and monitoring of chronic diseases (diabetes, heart failure...)
- Develop interoperable and multifunctional applications



Every 6 seconds a person dies from diabetes.

By 2040, 1 in 10 adults will have diabetes.



## Key question

Is there any success factor that was key to enable this project?

## Multiple factors

- **Multidisciplinary exchanges: care providers along the care pathway, patients, IT developers, POCT technology providers, regulatory experts, serial entrepreneurs, PPP, .....**
- **Definition of users needs: patients and care-providers**
- **Validation of POCT devices and mHealth application**
- **Co-creation / user experience / patient empowerment**

# Key question

Has the project experienced major problems or challenges?

In what way these problem have been tackled?

## Problems and solutions

**Problem: Setting the scene**

Administrative issues for setting the ambulatory care facilities.

**Solution(s):**

Legal expert support. Dialogue with regulator.

**Problem: Dissemination & exploitation**

Business models (« label » and e-Health apps).

**Solution(s):**

Benchmarking, PPP, think tank of « *being there before entrepreneurs* »

**Problem: Operating in multiple environments**

Model (technologies, SOPs, apps,....) interoperability.

**Solution(s):**

« Local » partnerships,...

# Key question

After the ESI Funding period, will the project continue?  
If (and hopefully) yes, how will it be funded?

## Vision

Using a labelled “City-lab” somewhere in EU guarantees the patient equivalent quality of care as “home” and secured data addition to his/her EHR where it is centralized.

## Challenge

Need to validate a « business model » compatible with funding requirements of laboratory medicine and efficient care pathways accessible to all.

## Funding

Public and private. Collateral projects. PPP. Spin-off(s).

**The future is:**

**Us...**

**with some help from  
technologies...**

**Many thanks from the  
City-labs Team**



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*“That's all Folks!”*