



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Health systems, medical products and innovation
European Reference Networks and Digital Health

Web conferencing support system for the clinical management of COVID19 outbreak (COVID19 -CMWSS)

Introduction and scope:

The evolution of the COVID19 pandemic is affecting the European Member States (EU MS) with different levels of severity and different timing and the epidemiological situation is evolving very quickly.

Many patients are in the need of highly specialised care in third level hospitals. The practical experience on how to manage the patients and in particular the severe cases is scarce and scattered in Europe. While the experience and the number of cases treated by some Hospitals (and MS) is important, due the accumulated expertise, other are still starting to deal with complex patients.

The concrete techniques and treatments applied to the COVID19 patients are in many cases experimental and there are some limitations to reach the knowledge generated during the last months and weeks.

The system could help the healthcare professionals that are directly in charge of the patients by allowing having a quick exchange of knowledge and experiences. This will facilitate the clinical decision making process and improve the capacities of the clinicians and ultimately to benefit the patients suffering of the COVID19 infection.

The setup of the COVID19 CMSS communication system is based on the experience and know-how gained with the ERNs system.

The system could also serve as a basis for the future development of a ERNs on rare and low incidence infectious diseases as proposed in the feasibility study recently published by DG SANTE on the opportunity of setting-up a European Expert Network for rare communicable diseases and other rare pathologies in the context of mobility and globalisation.

- The scope of the project is not to address the strategic, organisational, logistical and public health (epidemiological or surveillance) aspects but to focus exclusively on the support to clinicians in their daily practice.

Description of the COVID19 -CMSS system:

The Web conferencing support system for the clinical management of COVID19 patients (COVID19 -CMSS) will support all EU hospitals treating complex COVID19 cases by providing a communication mean allowing clinicians to consult other clinicians from all Europe on the more complex cases and exchange/compare information/diagnosis.

The Web Conferencing system aim is to allow clinicians to communicate easily with any other colleagues across the EU and EEA to exchange knowledge and to discuss cases.

The exchange of knowledge and clinical experience can represent an important contribution that could benefit hundreds of patients and healthcare professionals.

The Web conferencing system used is a commercial solution (WeBex) that will be provided free of charge by the European Commission (EC) to the clinicians.

The WebEx application main characteristics and functionalities allow for sharing of computer screens (text, X-rays etc...) and for using mobile devices to communicate (like skype but with a high level of security).

Most countries have identified and designated a number of reference centres that will be the users of the platform/ helpdesk of the web conferencing COVID19 -CMSS .

In order to make the system manageable each Hospital should identify 1 or 2 contact persons (clinicians or case managers) that would be the initiators of the system and the interlocutors with their peers in other centers.

Characteristics of the COVID19- CMSS communication platform:

The platform consist of the following:

- 1. A central helpdesk: That will organise and manage the operation of the system. The helpdesk will** support the clinicians and will organise at their request webex conferences with other clinicians located elsewhere in Europe. The helpdesk will be managed by a team of people of DG SANTE with a mix of profiles (IT managers, policy officials and administrative support).
- 2. Webex as communication tool:** The communication system is based in Webex, a secure web conferencing system that allows for simultaneous connection of up to 100 participants. The EC has a corporate license and fully dedicated WebEx accounts will be activated depending on the needs of the system. The operational model is based in the support provided to the 24 ERNs

- ✓ WebEx includes most of the functionalities that a clinician will need to quickly and easily discuss a concrete patient case or to organise webinars to discuss clinical practice related issues etc.
- ✓ Allows sharing screens (images, videos etc. and attachments) and includes a messaging system.
- ✓ Allows both web connection through a computer or by using mobile devices (Telephones and tablets). Simple telephone connection is also possible.

3. **A simple and easy procedure and protocol to set Web conferences and Webinars** following the request of any of the Hospitals identified as **reference** centres across the EU. A factsheet to be distributed to all the involved clinicians will provide them with the main characteristics of the system and with the operational details they have to follow.

Basic Scheme of the workflow of the system:

- a) A clinician decides to set-up a web conference to discuss clinical cases.
- b) The clinician identifies the centers or people he wants to contact from an available list provided to them.
- c) The clinician contacts the helpdesk in SANTE (sending a email to the functional mailbox SANTE-COVID19@ec.europa.eu) and indicates who shall be invited and the timing of the conference.
- d) The helpdesk organises the conference and sends the invitation through outlook to the participants including the links to the WebEx.
- a) The leading clinician and the invited participants discuss the case, exchange information and close the conference. The Commission will not store the content of the conference.

Logistical and procedural steps:

- **Creation of the database of users and hospitals:** We have set an exhaustive list of all the hospitals by country already registered in the ERNs system. That includes more than 350 Hospitals located in the 27 MS plus UK and Norway.

This list will be distributed through the Health Security Committee to the MS national contact points so that each MS can select the hospitals that will participate in the action and include the contact details of 1 or 2 persons (clinicians / case managers) per hospital.

With the agreement of the HSC, the request for the clinicians information could be also be sent to the list of Hospital managers (CEOs & Medical Directors) maintained by DG SANTE (> 350 recipients) to speed up the process.

The spreadsheet containing the personal data of the users will be stored in a protected environment (Confluence space) hosted by DG SANTE, where access is limited to authorized people (i.e. the operational team, IT helpdesk).

Each clinician included in the spreadsheet will be added to a mailing list and will receive all the operational details, supportive documents and the database of appointed clinicians and hospitals. In this way, each clinician involved can identify and select the potential participants to invite to a web conference. The list or specific contact details can also be shared with the members of the Health Security Committee and with other clinicians, upon request.

- Information package: A simplified and clear information set containing all necessary documents (functionalities, procedures, privacy statement etc) will be prepared and sent to all the MS contact points and eventually to all the identified users.

Data protection measures:

- A privacy statement regarding the processing of personal data on the list in compliance with the Regulation (EU) 2018/1725 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data has been prepared and will be shared with all the involved actors. A record on the database will be also produced.
- The healthcare professionals are responsible for the exchange of data that takes place between them and which are processed outside of this context. The EC is not the controller of these data as it will not have any influence over it and will not take part in these meetings.
- The healthcare professionals should not use data that could lead to identification of a patient (name, surname, exact data of birth, exact address etc.), but only the necessary clinical information that can support the diagnosis and treatment of a COVID-19 patient (ex. symptoms, x-rays etc).