CED RESOLUTION

CED Resolution on Data Sharing as part of eHealth: Workflow, Prescription and Protection
I. INTRODUCTION: DENTISTRY AND EHEALTH

The Council of European Dentists (CED) is a European not-for-profit association which represents over 340,000 dental practitioners across Europe through 32 national dental associations and chambers in 30 European countries. Established in 1961 to advise the European Commission on matters relating to the dental profession, the CED key objectives are to promote high standards of oral healthcare and dentistry and effective patient-safety centred professional practice.

While the cornerstone of the dentist - patient relationship is face-to-face contact, digital health services play an important role in supporting and enhancing communication and sharing of knowledge with patients. In addition to that, advances in digital technology are providing new diagnostic tools, documentation capabilities and fabrication methods that enhance dentists’ ability to provide optimal care.

In light of the importance of this topic and constant developments in the field, the CED carried out a survey among its Members to investigate their opinion on the use of digital technologies in dentistry. The result of this activity is translated in this Resolution, outlining the main CED areas of concern on this issue (with supporting information points from the survey), as well as recommendations on improving the status quo. These recommendations concern dentists, policy-makers, as well as other actors of relevance.

II. CED AREAS OF CONCERN

1. Digital Workflow

One of the main benefits of the use of digital tools in dentistry is patient empowerment, allowing to equip the patient with the data and information related to his/her health as well as the immediate flow of information between the dentist – patient, dentist - dentist and other health professionals. In most countries, the patient can always access such data upon request.

The CED survey concluded that the vast majority of dentists already use digital technologies in the dental office, mostly on a daily basis. However, it also recognises the need to support and assist those countries that are facing issues – for example, there are still many countries where electronic health records (EHR) are not available; additionally, in most countries, data is shared between medical professionals but not with other institutions/organisations electronically.

2. ePrescriptions

In most countries ePrescriptions are not operable and the percentage of dentists using a digital format varies significantly from country to country - from 10% in Lithuania to 98% in Estonia. Similar discrepancies are observed in the validity of electronic prescriptions, starting from 1 month in Croatia and Lithuania to 24 months in Finland. Nevertheless, the system is perceived as quite to very useful, with good readability as its main advantage, a permission of antibiotics
prescriptions in all countries and using existing identification documents (e.g., identity card or professional card) as part of the process.

However, ePrescriptions raise concerns about medical privacy and data protection. According to the results of the CED survey, in the vast majority of countries where ePrescriptions are fully operational, the patient cannot choose the format of the prescription; furthermore, this also depends on the prescription formats available in the dental practice.

3. Data Protection

The patient’s consent to use their data is required in most countries, especially under certain conditions i.e. data being used for research and publications. Commonly, dentists ask for consent to use data for treatment at the first visit. Furthermore, different countries use different means for the exchange of data (e.g. with dental technicians and dental laboratories) with either paper forms or email being used.

In terms of transparency and user access to the electronic health record, in most countries identity is verified via an ID card or other digital form of identification (e.g., code, digital signature, personal username and password). Only a few respondents addressed transparency in their reply - in those cases, the national EHR tracks who was accessing the data and when.

While few countries (Latvia, Hungary, Belgium, Lithuania) indicated that they had cases related to cybersecurity in dentistry, all dentists and their staff have ethical and legal obligations to protect the personal and sensitive information of patients. This includes privacy and confidentiality obligations. With this in mind, concerns about data protection (especially in cross border information exchange) remain a dominant issue.

III. CED RECOMMENDATIONS

The development of eHealth solutions should be based on a user-centred approach, adjusting it to the needs of dentists instead of creating an additional burden or raising the cost of the dental practice. The involvement of healthcare professionals at the early stage of every discussion on digital technologies in healthcare is a prerequisite in making the system operational.

A guiding vision of CED regarding the future of dentistry is that every European has access to quality oral health care provided by qualified, skilled and fully competent dental practitioners, in a comfortable and cost-effective manner, using the most appropriate technology.

The CED welcomes the European Union’s initiatives aiming to provide its citizens access to safe and top-quality digital services in health and care. In light of this and the points above, the CED would like to outline the following recommendations on the topic:

- The CED supports the definition of a minimum common set of patient data for the exchange of core information to ensure effective interoperability of eHealth systems.
• The CED believes that digitalisation can be useful in transferring knowledge for education purposes, as long as patient confidentiality is secured.

• Therefore, more investment and promotion of digital literacy is required (at national, regional and local level), through financing models and reimbursement schemes. This should cover appropriate education, identification of barriers to digital tools access, training and support of dentists and the dental team.

• Priority should be given to the implementation of digital skills education into the dental studies curriculum.

• The CED supports activities aiming to increase the transparency of digital activity in relation to access to data. The patient needs to be informed who accessed his or her medical record and when, ensuring that personal health data is used in a manner which is scientifically sound and ethically acceptable.

• The CED believes that by complying with data protection regulations, conducting regular updates of the IT system and proper supervision of the dental team, dentists can be digital leaders, contributing to coordinated efforts preventing cyber-attacks. This requires responsibility to be taken by national governments and other relevant actors (e.g. software developers), increasing state protection against electronic threats and cyber-attacks.

• As cybersecurity is going to become a more prominent problem in the future, the CED calls for coordinated actions between all Member States to detect and prevent the disruption or misdirection of services at very early stage.

• The CED highlights that in order to enable ePrescriptions usage at national level and in a cross-border setting, the system should be user-friendly and integrated in a shared digitalised EHR system, allowing healthcare professionals involved in patient care to access necessary patient information.

***

Unanimously adopted by the CED General Meeting on 16 November 2018

---

Dentists in most countries had to comply with the Data Protection organisation or the Data Protection Act. As of 25 of May 2018, dentists in all countries in the European Union have to comply with the General Data Protection Regulation (GDPR). At the time of completion of the CED survey in question, the General Data Protection Regulation was not in place yet – therefore, contributors to the survey provided their answers in relation to the organisation of Data Protection.