TECHNICAL REPORT (PART B)

COVER PAGE

Part B of the Technical Report must be downloaded from the Portal Technical Report (Part B)/Termination Report screen, completed and then assembled and re-uploaded as PDF on that screen.

PROJECT	
Project number:	[101129187]
Project name:	[Estonia towards MyHealth@EU]
Project acronym:	[EST-2-MyHealth]

REPORTING PERIOD ⚠ *Please note that you must report on the entire reporting period.*	
RP number:	*[1]*
Duration:	from [01/11/2023] to [31/04/2025]

TABLE OF CONTENTS

#@PER-REP-EU4H@#
#@PRO-GRE-PG@# [This document is tagged. Do not delete the tags; they are needed for the processing.]

1. OVERVIEW OF THE PROGRESS

1.1 Summary of work performed and achievements, results and impacts

[OPTION 1 by default (all except OG):

Work performed and main achievements

Short summary of progress towards the project objectives. Highlight significant activities and achievements. Provide clear and measureable details.

Analyse the outcome of the project (so far) and its (actual and expected) impact (on target groups, change, innovation etc.), including a description of the European dimension and added value. For the Final Report, include the conclusions of the action.

Report on objectives not fully achieved or not on schedule.

⚠ *Do not simply cut and paste the project summary (filled in online on the Summary for Publication screen). Contrary to the summary, this section is for reporting to the EU and will not be published.*

The main objective of this project has been ensuring stable routine operations and necessary further developments of the already operational NCPeH.

Main achievements under the proposed action have been so far:

- Bringing Patient Summary service to a new platform – main developments have ended, and procurement finished. However, there is still a need for additional testing and follow-up developments which are currently taking place. When the solution gets deployed live it will mean a more reliable and sustainable service for the citizens and ease the continuous upgrade process for developers. The major upgrade of the Estonian Health Information System is still in progress as there are also other services besides Patient Summary that need to be brought to the new platform together.

- Improving national allergy related data exchange standards - Estonia is currently in the analysis stage and developments are set to begin at the end of 2025. Meetings with stakeholders have been held and will continue. According to the plan the allergy data should be seen on Estonian patients PS-s in 2026, which will help foreign doctors to access important health data of Estonian patients and will ensure the information about allergies is complete.

- Implementing upgrades to the new versions of MyHealth@EU artefacts adopted yearly by the eHMSEG and participating in yearly test events - In the Spring of 2024 Estonia participated in the formal and upgrade test event for OpenNCP Wave 7. As a result, we were able to successfully upgrade our services to the new wave in Autumn of 2024 with all other Member States and got to continue routine operations with ePrescription and Patient Summary services.

  Through all of 2024 while being in routine operations, Estonia opened services with new country pairs – Greece, Latvia, Lithuania, Czechia, Finland.

  During Spring 2025 Estonia took part in the next test event and is currently in the process of fixing the issues found during testing and preparing to go live in the following Autumn. There are plans to open services with new joining countries.

  All of this has meant that Estonia has successfully implemented the yearly upgrades and kept the services running. With that, the usage of the services has grown, Estonian citizens get access to a more reliable healthcare abroad and foreign citizens receive better healthcare in Estonia.

- Translation of the Orphanet rare diseases nomenclature – procurement preparation has taken more time as Estonia had to agree with international coordinating which processes are essential for this specific project. Procurement is set to take place this year and translation process will begin. This will make ORPHAcodes available in Estonian language to Estonian health professionals and when included on the patient summaries of foreign patients' Estonian health professionals can understand the information in their own language, again making healthcare safer for foreign patients.

#§PRO-GRE-PG§# #@CON-SOR-CS@#]

#§PRO-GRE-PG§# #@CON-SOR-CS@#]

1.2 Consortium set-up

Participants *Report on changes in the consortium composition (including structural, legal or management changes, if any).*
See Technical Report (Part A).

Consortium cooperation and division of roles (if applicable) *Report on changes in the way the participants work together (Beneficiaries, Affiliated Entities, Associated Partners, etc.).*

1.3 Project teams, staff and experts

Project teams and staff

Report and explain deviations from Annex 1 of the Grant Agreement regarding the organisation of staff or project teams. Provide CVs of key actors that had to be replaced (if required).

Due to several staffing changes during the reporting period, there have been deviations from the staff originally listed in Annex I of the Grant Agreement. The following table summarises these changes.

Name and function in Annex 1	Organisation	New person	Reason for change	Date of Change
Katre Pruul, project manager	TEHIK	Aurelia Mihk	Resignation from organisation	October 2023
Andre Lehis, project manager	TEHIK	Andry Silla	Resignation from organisation	October 2023
Greete Mõttus, project manager	TEHIK	Marilin Prants	Resignation to another project	September 2024
Jeremin Freed Meister, technical personnel	TEHIK	Klaus Martin Vare	Resignation to another project	January 2025
Ingrid Hanst, technical personnel	TEHIK	Erle Imala	Reassigned to another project	March 2024
Hedvig Soone, technical personnel	TEHIK	Carmen Mäe	Resignation to another project	September 2024
Kerli Linna, technical personnel	TEHIK	Carmen Mäe	Resignation to another project	September 2024

The change with the biggest impact to the project has perhaps been the resignation of Katre Pruul and with that a new member Aurelia Mihk joining in her place in TEHIK. However, with the help and support from MSAE expert Jaanika Merilo and other TEHIK experts the project has been able to continue as planned and no major deviations from the original project plan have occurred. There have also been

changes to other project managers and technical personnel, but these changes have not generated any gaps where certain roles weren't filled and that has meant the project was able to continue normally.

1.4 Consortium management and decision-making

Consortium management and decision-making (if applicable)

Report on important changes in the management or decision-making mechanisms.

Insert text

#§CON-SOR-CS§# #@PRJ-MGT-PM@#

1.5 Project management, quality assurance and monitoring and evaluation strategy

Project management, quality assurance and monitoring and evaluation strategy

Report on changes to the overall project management concept, quality assurance and monitoring and evaluation strategy (if any).

Insert text

#§PRJ-MGT-PM§# #@FIN-MGT-FM@#

1.6 Cost effectiveness and financial management

Cost effectiveness and financial management *(n/a for Lump Sum Grants)*

Inform about significant budget overruns or important changes in the financial management (if any).

In the beginning of the project there were three subcontracts planned. S1.2 included both PS new platform development subcontracting and national allergy data exchange standard creation subcontracting. Since they are both their own projects and taking place at slightly different times, it was decided that there is a need for two separate subcontracts and therefore the budget between these projects was divided as well.

That meant that procurement for PS developments started with a budget of 110 000€. However, as the scope grew, this budget was not enough, and it was decided that some remaining important developments can be financed under S1.1 (developments for cross-border services to ensure their availability) and some of it under our national budget. It did not seem reasonable to cut the budget for allergy as it is known to be a bigger project which needs all its allocated budget. It is foreseen that not all S1.1 will be used strictly for S1.1. Additionally, the subcontracting partners for both S1.1 and S1.2 were the same, which made it possible to continue the work right away, only under a different contract. Otherwise, a need for a new subcontract would've risen and that would also bring uncertainty about the new contract partner and might delay the project.

As the Patient Summary platform developments are still ongoing, then it is not possible to conclude how big the exceeding amount will be yet. Under S1.1 there was 10 000€ allocated to platform developments, out of which 9447.03€ have been used.

#§FIN-MGT-FM§# #@RSK-MGT-RM@#

1.7 Risk management

Critical risks and risk management strategy

Report on the state of play concerning the risks and risk mitigation measures (if any).

See Technical Report (Part A).

#§RSK-MGT-RM§# #@IMP-ACT-IA@#

1.8 Impact

Impact

Report on changes in your impact analysis/strategy (if any) and the effects on the project/need for adaptations.

Insert text

#§IMP-ACT-IA§# #@COM-DIS-VIS-CDV@#

1.9 Communication, dissemination and visibility

Communication, dissemination and visibility of funding

Report on the communication and dissemination activities undertaken (to whom, which format, how many, etc.).

Describe how the visibility of EU funding was ensured.

If you described your project on your website(s) and/or social media accounts, please provide the links.

Most of the communication for operational cross-border services has been previously performed and Estonia has mainly continued to raise awareness of the services. There are also many activities planned regarding the allergy project specifically, as this will have the biggest impact nationally on our health professionals. For Estonian citizens allergy data to be present on their patient summaries, the health professionals must be informed about the new standards and how to use them.

TEHIK website already has a dedicated page about cross-border data exchange for the whole public. Information about the current project and funding was added to the page and as we're reaching the important milestones the page is expected to be updated - https://www.tehik.ee/piiriulene-andmevahetus.

TEHIK has also created a separate page for the allergy data exchange project to the whole public and end-user organizations - https://www.tehik.ee/allergiaandmed.

TEHIK has recently opened a new web page Teabekeskus, all information will be transferred to this page as well, available to the whole public and relevant end-user organizations - https://teabekeskus.tehik.ee/et/teenused/tis-teenused/piiriulene-terviseandmete-andmevahetus. A more specific page for EST-2-MyHealth project will be added by TEHIK.

For Allergy data exchange standard several dissemination meetings have been held with medics from different fields: family doctors, allergists, nurses, emergency doctors etc.

Regarding cross-border services in general, meetings with family doctors and hospital developers were held by TEHIK to raise awareness of the Patient Summary service. There were two meetings where the service was introduced.

TEHIK has sent out several press releases when opening services with new joining countries. There is a mailing list for pharmacies and important information regarding the identification of patients and important information has been shared.

Visibility of EU funding has been ensured by adding a funded by the European Union emblem and specifying the action is co-funded.

See also Technical Report (Part A).

#§COM-DIS-VIS-CDV§# #@SUS-CON-SC@#

1.10 Sustainability and continuation

Sustainability, long-term impact and continuation

Report on changes in your sustainability analysis/strategy (if any).

For the Final Report, describe the follow-up of the project after the end of the EU grant. How will the results be used or further developed. Describe the strategy to ensure sustainability of results and long-term impact. Comment on possible synergies/complementarities with other (EU funded) activities (if any).

Insert text

#§SUS-CON-SC§# #@FOL-UP-FU@#

1.11 Follow-up to EU recommendations

Follow-up to EU recommendations

Highlight corrective actions taken as a result of EU monitoring activities (including follow-up to EU project reviews, if any). List each recommendation/comment and explain how they have been followed up.

Insert text

#§FOL-UP-FU§#

#@WRK-PLA-WP@#

2. WORK PLAN, WORK PACKAGES, ACTIVITIES, RESOURCES AND TIMING

2.1 Work packages, activities, resources and timing

WORK PACKAGES

Work Package 1

Work Package 1: [Management and coordination]

Activities

Report on the implementation status of the activities that were to be implemented during the reporting period and explain deviations from Annex 1 of the Grant Agreement. In case an activity was not implemented or a deliverable not produced, please explain why.

Task No (continuous numbering linked to WP)	Task Name	Implemented? (Yes/No/Partially)	Justification (explain what was done and by whom; explain what was not done and why not; indicate how you intend to handle the situation and new timing; indicate if it was a one-off issue or how you intend to avoid similar issues in the future)
T1.1	Participation in the European MyHealth@EU governance framework and activities	Yes	Aurelia Mihk has been an active member of the eHMSEG, followed the annual activities and has participated in the eHMSEG regular meetings. In addition, she has participated in the following work groups: • ePrescription Task Force • Patient Summary Task Force • KPI Task Force • Service Desk Task Force Jaanika Merilo has been an active member of the eHN and taken part of the regular meetings and activites.
T1.2	Consortium Operating Procedures Definition	Yes	Project has a designated Confluence space maintained by TEHIK, where the project plan has been published and all relevant information about the project can be found. All team members have access to the space and can modify the page as needed.

T1.3	Coordination of the project management	Yes	Regular meetings have been held between TEHIK and MSAE to monitor the progress of the project. Deliverables and reports have been put together by TEHIK and MSAE project managers.
T1.4	Consortium meeting	Yes	Kick off meeting was carried out by TEHIK and MSAE back in November 2023. The timeline of the developments was agreed upon by participants and the main starting point was agreed to be the first of January 2024. Regular meetings did not start before the Autumn of 2024, as this was when the developments and sub-projects were set to begin, they are led by Aurelia Mihk. The only exception were regular cross-border developments which were led by Aurelia Mihk, weekly meetings have taken place since the beginning of the project. MSAE and TEHIK project managers did meet before the official meetings in 2024 began and kept track of the overall progress.
T1.5	Legal management	Yes	TEHIK and MSAE legal teams are aware of the project and no legal issues have been identified so far.
Other issues *Mention and explain unexpected events and adjustments that had to be made. Explain impact on other tasks, available resources and planning/timing.*		Insert text	
Milestones and deliverables (outputs/outcomes)			
See Technical Report (Part A).			

Budget implementation — Use of resources (deviations) *(n/a for Lump Sum Grants) (n/a for Additional Prefinancing Report)* *Explain deviations from the budget planning (i.e. differences between actual and planned use of resources, especially for personnel).* *Include explanations on transfers of cost categories in the estimated budget (if applicable)* *Don't forget to attach the detailed cost reporting table (if any).*
Insert text

Other issues	Insert text

Work Package 2

Work Package 2: [Dissemination, training and support]			
Activities *Report on the implementation status of the activities that were to be implemented during the reporting period and explain deviations from Annex 1 of the Grant Agreement. In case an activity was not implemented or a deliverable not produced, please explain why.*			
Task No (continuous numbering linked to WP)	Task Name	Implemented? (Yes/No/Partially)	Justification (explain what was done and by whom; explain what was not done and why not; indicate how you intend to handle the situation and new timing; indicate if it was a one-off issue or how you intend to avoid similar issues in the future)
T2.1	Communication and dissemination Communication strategy and its execution with reports	Yes	Dedicated Confluence page has been created by TEHIK and Communication Strategy Plan was delivered to EU on time. Communication, Dissemination and Training plan was put together by TEHIK and MSAE.
T2.2	Health professional dissemination and education	Partially	Health care professionals have been continuously informed about the cross-border services (e.g. when opening services with new countries) and press releases have been sent from TEHIK according to the communication plan. Presentations have been made by TEHIK to Health Professionals to raise awareness about Patient Summary. For Allergy data exchange standard several dissemination meetings have been held with medics from different fields: family doctors, allergists, nurses, emergency doctors etc, by TEHIK.
T2.3	Citizen dissemination and motivation	Yes	TEHIK web page has been updated by TEHIK with relevant information about the project and new services – project web page has been kept up to date.
Other issues		Insert text	

Mention and explain unexpected events and adjustments that had to be made. Explain impact on other tasks, available resources and planning/timing.	
Milestones and deliverables (outputs/outcomes)	
See Technical Report (Part A).	

Budget implementation — Use of resources (deviations) *(n/a for Lump Sum Grants) (n/a for Additional Prefinancing Report)* *Explain deviations from the budget planning (i.e. differences between actual and planned use of resources, especially for personnel).* *Include explanations on transfers of cost categories in the estimated budget (if applicable)* *Don't forget to attach the detailed cost reporting table (if any).*	
Insert text	
Other issues	Insert text

Work Package 3

Work Package 3: [Evaluation and sustainability]			
Activities *Report on the implementation status of the activities that were to be implemented during the reporting period and explain deviations from Annex 1 of the Grant Agreement. In case an activity was not implemented or a deliverable not produced, please explain why.*			
Task No (continuous numbering linked to WP)	Task Name	Implemented? (Yes/No/Partially)	Justification (explain what was done and by whom; explain what was not done and why not; indicate how you intend to handle the situation and new timing; indicate if it was a one-off issue or how you intend to avoid similar issues in the future)

T3.1	Evaluation and sustainability plan	Yes	Evaluation and sustainability plan was composed by MSAE and TEHIK.
T3.2	Mid-term evaluation report	No	To be implemented in the next reporting period.
T3.3	Final evaluation report	No	To be implemented in the next reporting period.
Other issues *Mention and explain unexpected events and adjustments that had to be made. Explain impact on other tasks, available resources and planning/timing.*		Insert text	
Milestones and deliverables (outputs/outcomes)			
See Technical Report (Part A).			

Budget implementation — Use of resources (deviations) *(n/a for Lump Sum Grants) (n/a for Additional Prefinancing Report)* *Explain deviations from the budget planning (i.e. differences between actual and planned use of resources, especially for personnel).* *Include explanations on transfers of cost categories in the estimated budget (if applicable)* *Don't forget to attach the detailed cost reporting table (if any).*	
Insert text	
Other issues	Insert text

Work Package 4

Work Package 4: [Maintenance and development]

Activities

Report on the implementation status of the activities that were to be implemented during the reporting period and explain deviations from Annex 1 of the Grant Agreement. In case an activity was not implemented or a deliverable not produced, please explain why.

Task No (continuous numbering linked to WP)	Task Name	Implemented? (Yes/No/Partially)	Justification (explain what was done and by whom; explain what was not done and why not; indicate how you intend to handle the situation and new timing; indicate if it was a one-off issue or how you intend to avoid similar issues in the future)
T4.1	Implement upgrades to the new versions of MyHealth@EU artefacts adopted yearly by the eHMSEG and participate in Annual Upgrade Pre-Production Testing	Yes	Estonia took part of the annual Upgrade Pre-Production Testing in Spring 2024 and Spring 2025; test event participation was led by TEHIK and Estonia received the eHMSEG decision to continue routine operations in 2024.
T4.2	Data availability, alignment with eHN guidelines and other service improvements	Partially	TEHIK and MSAE started a project to improve data availability of the allergy section on Patient Summary, project is led by Marilin Prants. Stakeholder interest has not been as high as expected and in addition, this task has taken more time due to high workload of the staff members. However, team members have considered that there is a sufficient time buffer, allowing project managers to plan accordingly so the outcome can still be achieved. The task to bring Patient Summary service to a microservice was led by Andry Silla and while the procurement is finished, there are still tasks that will continue. Additional need for developments came out during testing and to go live with the new platform, there is a need to wait for dependant services to be ready, so everything would work together seamlessly. TEHIK has been in contact with INSERM to understand the rules of translating the ORPHACode nomenclature. It took more timeas expected and the official translation is yet to start, However TEHIK is currently preparing for the procurement, and the translation is set to begin in the second part of 2025.

T4.3	Planning and reporting on service operation and maintenance	Yes	Service operation and maintenance report was put together by TEHIK and MSAE.
Other issues *Mention and explain unexpected events and adjustments that had to be made. Explain impact on other tasks, available resources and planning/timing.*		Insert text	
Milestones and deliverables (outputs/outcomes)			
See Technical Report (Part A).			

Budget implementation — Use of resources (deviations) *(n/a for Lump Sum Grants) (n/a for Additional Prefinancing Report)* *Explain deviations from the budget planning (i.e. differences between actual and planned use of resources, especially for personnel).* *Include explanations on transfers of cost categories in the estimated budget (if applicable)* *Don't forget to attach the detailed cost reporting table (if any).*	
Insert text	
Other issues	Insert text

Subcontracting

Subcontracting (new subcontracts) *(n/a for Lump Sum Grants) (n/a for Additional Prefinancing Report)*

Report on new subcontracts. Explain the specific circumstances that caused the need for a subcontract

Include only subcontracts that are best-value-for-money and for which there is no conflict of interest. Keep in mind that subcontracting is not possible for key coordinator tasks and may normally not cover a major part of the action.

Subcontract number	Subcontract name	Description	Costs (EUR)	Justification (why did subcontracting become necessary?)	Best-value-for-money

(continuous numbering linked to WP)	(subcontracted action tasks)	(including task number and BEN/AE to which it is linked)			(how did you ensure it?)
S1.5					
S1.6					
…					
S2.5					
S2.6					
…					

Other issues *If subcontracting for the project rises above 30% of the total eligible costs during the project implementation, give specific reasons. Mention and explain other issues, if needed.*	Insert text

Timetable

Timetable (projects of more than 2 years) *Report on deviations from Annex 1 of the Grant Agreement.* *Fill in the planned implementation in beige and the deviations in red. Adapt and repeat lines/columns as necessary.*																							
Starting date:	**01.11.2023**																						
ACTIVITY	**YEAR 1**				**YEAR 2**				**YEAR 3**				**YEAR 4**				**YEAR 5**				**YEAR 6**			
	Q 1	**Q 2**	**Q 3**	**Q 4**	**Q 1**	**Q 2**	**Q 3**	**Q 4**	**Q 1**	**Q 2**	**Q 3**	**Q 4**	**Q 1**	**Q 2**	**Q 3**	**Q 4**	**Q 1**	**Q 2**	**Q 3**	**Q 4**	**Q 1**	**Q 2**	**Q 3**	**Q 4**

Task 2.1 Health professional dissemination and education																							

#§WRK-PLA-WP§#

#@ETH-ICS-EI@#

3. OTHER

3.1 Ethics

Ethics
If your Application Form contains a section on ethics, report on any changes to ethics issues identified in Annex 1 of the Grant Agreement (if any).
Insert text

#§ETH-ICS-EI§# #@SEC-URI-SU@#

3.2 Security

Security
If your Application Form contains a section on security, report on any changes to security issues identified in Annex 1 of the Grant Agreement (if any).
Insert text

#§SEC-URI-SU§# #@DEC-LAR-DL@#

4. DECLARATIONS

[OPTION 1 by default (all except OG):

Double funding	
Information concerning other EU grants for this project ⚠ *Please note that there is a strict prohibition of double funding from the EU budget (except under EU Synergies actions).*	**YES/NO**
We confirm that to our best knowledge neither the project as a whole nor any parts of it benefit/have benefitted from any other EU grant *(including EU funding managed by authorities in EU Member States or other funding bodies (e.g. EU Regional Funds, EU Agricultural Funds, tc)*. If NO, explain and provide details	Yes
We confirm that to our best knowledge neither the project as a whole nor any parts of it are (nor will be) submitted for any other EU grant *(including EU funding managed by authorities in EU Member States or other funding bodies (e.g. EU Regional Funds, EU Agricultural Funds, etc)*. If NO, explain and provide details.	Yes

#§DEC-LAR-DL§# *]*

HISTORY OF CHANGES		
VERSION	PUBLICATION DATE	CHANGE
1.0	01.04.2021	Initial version (new MFF).
2.0	02.06.2025	Aurelia Mihk – draft version

2.2	16.06.2025	Aurelia Mihk - integrated changes according to comments made by team members. P1.9 added information about allergy communication, linked relevant web pages.