

## Post-Pandemic Telehealth Services Assessment: What will we do from now on?

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**\*Corresponding author:** Angélica Baptista Silva, National School of Public Health Sergio Arouca, Oswaldo Cruz Foundation, Brazil

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**Angélica Baptista Silva<sup>1\*</sup> and Helena Maria Almeida Macedo Loureiro<sup>2</sup>**

<sup>1</sup>National School of Public Health, Brazil

<sup>2</sup>Higher School of Health, Portugal

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### Opinion

Distance consultations and other services concerning the population's health care require a detailed analysis of civil society, health professional entities and national governments after facing the COVID-19 pandemic. The literature on monitoring and evaluating telehealth and digital health actions has shown multiple experiences of assessing the maturity of these services in health systems at the local and national levels [1-3]. To assess the current state of telehealth and digital health services in health systems, it will be necessary to fill in the gaps of the lack of definition of the terminology [4], revisit service typologies despite the efforts already undertaken [5], find items in common and what will be the core to evaluate emerging tools and services.

The maturity model is an exciting and practical type of assessment in the global context. Study maturity of an organization is a training process that shows a characterization of the current state of an organization through stages of maturity and promotes continuous improvement by identifying good practices in an evolutionary process [5]. However, human rights violations caused by the inappropriate use of artificial intelligence and big data technologies [6] and structural health inequities [7] need to be among the factors observed to measure this maturity, especially in Low-and Middle-Income (LMIC) countries. Just take a quick look at the numbers from countries like Germany and Tanzania related to two issues: The number of doctors per inhabitant and the maternal mortality ratio. According to the World Bank, in 2017, there were six doctors per 100,000 inhabitants in Tanzania, while in Germany, there were 424 for the same number of inhabitants [8].

By observing the maternal death computed by the WHO in the same period, it is possible to verify that in Germany, five women die out of every 100,000 births and in Tanzania, 524 women died out of 100,000, a health event that is preventable in most situations and that reflects inequalities in access to services [9,10]. It is also essential to highlight the strategic function of telehealth in this situation. Specialist doctors are concentrated in large urban cities, while there is a lack of health professionals in rural areas. In this sense, situations often arise in which general practitioners and nurses who take care of small towns have to make complex decisions, requiring support and a second opinion. Moving through areas such as forests, ice and sand deserts can be slow and costly, taking many people's lives. Telehealth activities can prepare critically ill patients and grow the Primary Health Care resolution. However, significant population concentrations require a care infrastructure with health facilities at different levels of complexity and specialized professionals.

The lack of definition of the business model and the legislation related to the digital health ecosystem can also cause great harm, such as the invasion of privacy, circulation, and unbridled

commerce of the population's personal health data. In response to this, it becomes necessary to involve stakeholders with state programs of business education and the inspection of compliance by startups and large companies with national and international legislation on data protection [11]. Another critical activity is to strengthen cost-effective initiatives that organize health systems and prioritize public health problems detected by epidemiologists in the respective territories, such as, for example, mobile applications to clarify pregnant women about their condition [12] and actions of innovative remote family planning [13].

Finally, the relationship between healthcare managers, startups, multinational companies, and government can improve significantly with the application of a maturity model of telehealth services that is resilient to the policy agenda [14] following the international standards [15] and the needs of the LMIC, and the Global South. This maturity of the services requires a multidimensional model like some that already exist [16], which can help managers or independent evaluators observe the weaknesses of their services in digital health [17] and in which aspect they can evolve. The nations must have a technological development project for digital health, stimulating the health literacy of citizens and training specialized health professionals allied to an economy focused on the insertion of public goods and the well-being of their population.

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