

Breakout session 5

Best practices of cross-border health cooperation
between the Netherlands and Germany

Best practices of cross-border health cooperation between the Netherlands and Germany

- | Kathrin Boerner, Cross-border Institute of Healthcare Systems and Prevention, University of Oldenburg
- | Toon de Groot, Medische Spectrum Twente and Leonie Friedrich, UKM International
- | Susanne Sivonen, ITEM

Moderator: Gregor Däubler, Federal Ministry of Health, Germany and Daniela Gornyk, Cross-border Institute of Healthcare Systems and Prevention

Collaboration between Groningen-Oldenburg:

Cross-border Institute of Healthcare Systems and Prevention (CBI)

Kathrin Boerner

Carl von Ossietzky University of Oldenburg



Symposium on cross-border healthcare in the DE-NL border region

October 30, 2025



The journey of founding the CBI

2012

Medical faculty at University of Oldenburg based on „European Medical School (EMS) Oldenburg-Groningen“



2018

Evaluation of the EMS Oldenburg-Groningen:
Urgent recommendation to establish cross-border cooperation with Groningen more firmly in research

2023-2024 Systematic strategic development process



28.05.2025 Signing of Cooperation Agreement UOL - RUG

2019

Founding of the Cross-border Institute of Healthcare Systems and Prevention (CBI)

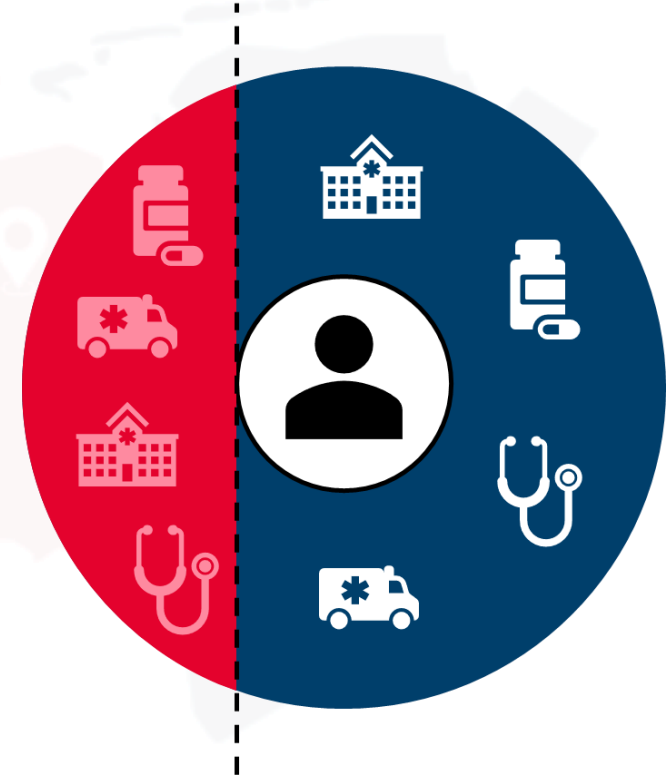


The Ems Dollart Region (EDR): A prototypical rural border region



Common challenges in rural border regions? Definitely in our region ...

- Amplified population aging effects and associated healthcare needs
- Socioeconomic disadvantage and related healthcare disparities
- Weak health service infrastructure, workforce shortages
- Transportation and distance as major barriers to access
- Reduced radius of care options due to border proximity



CBI: Goals

Catalyst and hub for initiatives and projects on health and healthcare in the northern DE/NL border region

Research

... aimed at improving health and healthcare

Networking

... with and among regional actors and stakeholders

Transfer

... of insights and solutions into and beyond the region

CBI projects: CHARE-GD

Comparison of healthcare structures, processes and outcomes in the Northern German and Dutch Cross-border region

CHARE-GD I (2021-2025)

- Cross-border Health and Health Services Data: The Health Data Compass
- Urinary Tract Infections: Primary Care and Antibiotic Resistance
- Total Hip Arthroplasty: Influence of Patient and Health System Characteristics on Outcomes
- Primary Care in Nursing Homes: Influence on Health Outcomes of Residents

CHARE-GD II (2022-2026)

- Inventory of Health and Contextual Data: Interdisciplinary Cross-Border Research
- Antibiotic Prescription for Upper Respiratory Infections: Decision-Making Processes of GPs and Patients
- Early and Late Infections After Implant Surgery: A Cross-Border Comparison
- Multidrug-Resistant Bacteria: Differences in Infection Prevention and Control Measures
- Use of Closed Doors in Dementia Wards: Differences in Cultural and Moral Perspectives
- Workforce Issues: How to Deal with Shortage of Care Staff in Hospitals?



**Niedersächsisches Ministerium
für Wissenschaft und Kultur**


These projects were funded by the Ministry of Science and Culture of Lower Saxony (MWK) as part of the Niedersachsen 'Vorab' Program. (Grant Agreement No. ZN3730 (I) / ZN3831 (II))

CHARE-GD I: Example nursing home care

Primary Care in Nursing Homes: Influence on Health Outcomes of Residents

Goal to identify differences and similarities in healthcare in German and Dutch nursing homes

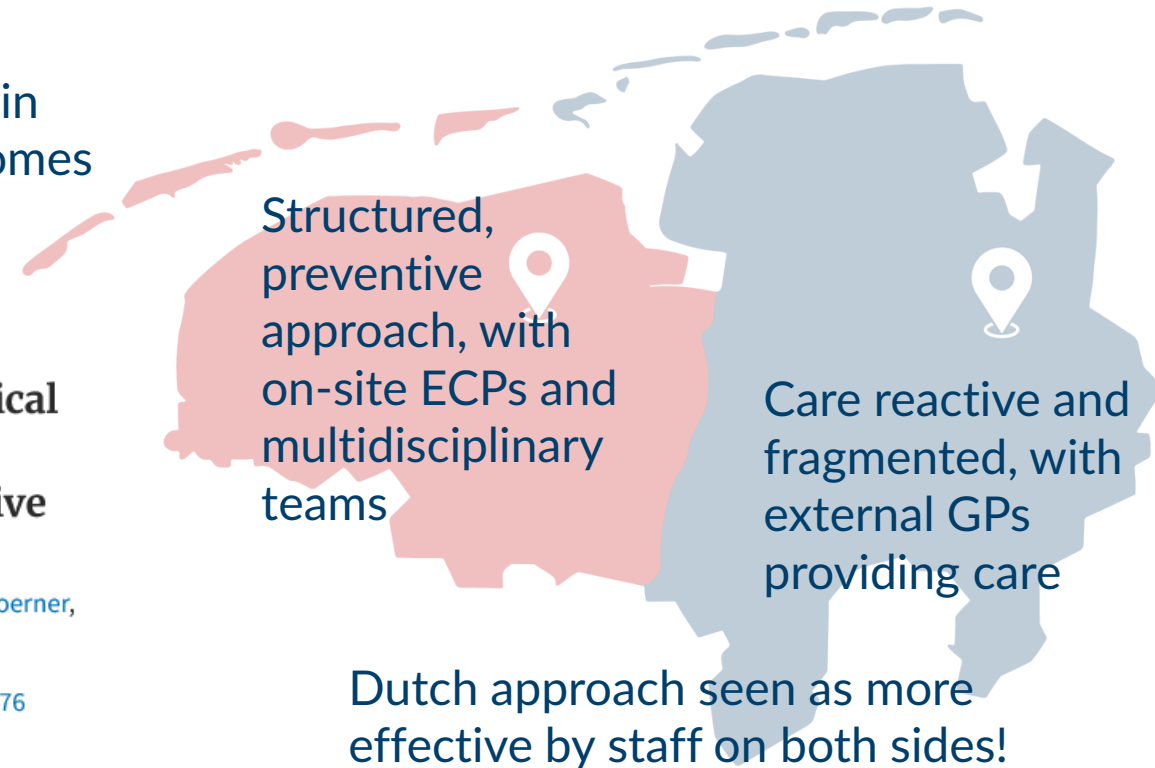
JOURNAL ARTICLE

Perspectives of healthcare professionals on medical care in nursing homes in Germany and The Netherlands: an explorative study using qualitative content analysis 

Alexander M Fassmer , Adele Grenz, Markus Ennen, Sytse U Zuidema, Kathrin Boerner, Sarah I M Janus, Yvet Mooiweer, Falk Hoffmann

European Journal of Public Health, ckaf176, <https://doi.org/10.1093/eurpub/ckaf176>

Published: 26 September 2025



CHARE-GD I: Example hip replacement

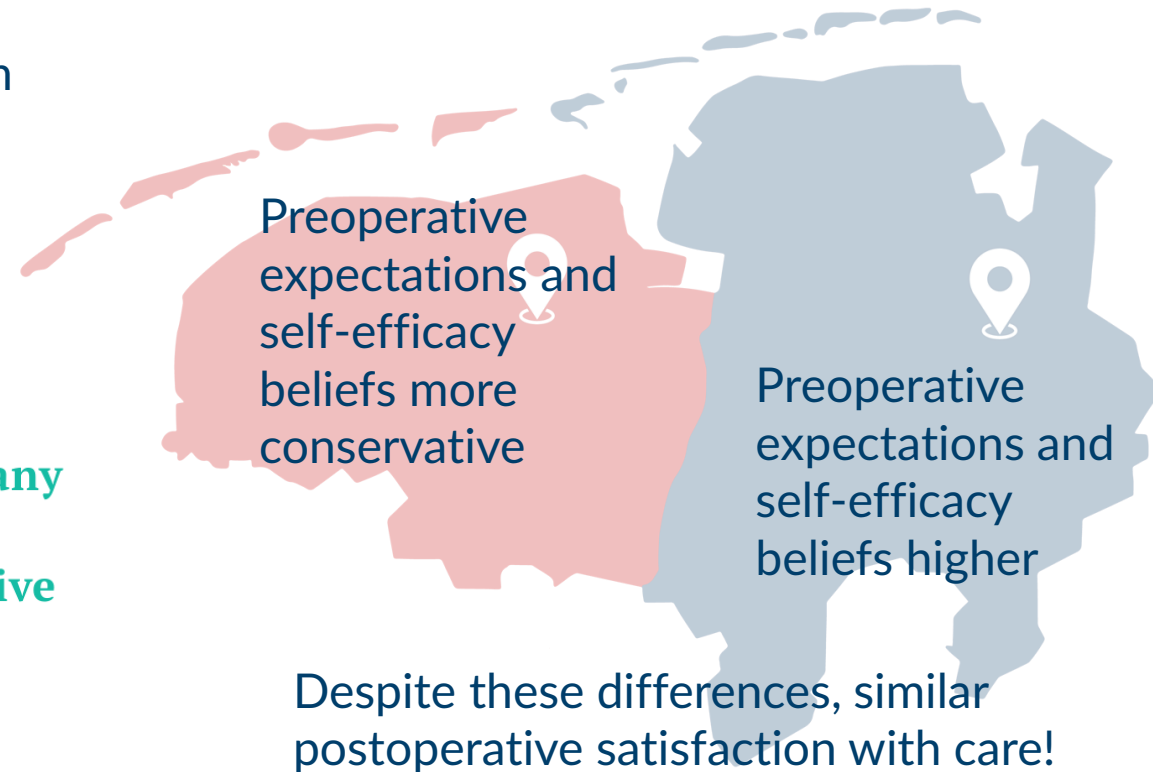
Total Hip Arthroplasty: Influence of Patient and Health System Characteristics on Outcomes

Examine how differences in the organization of care affect pre- and postoperative outcomes in Dutch and German patients

Open Access Original Article

Total Hip Arthroplasty: The Influence of Different Management Structures in Germany and the Netherlands on Preoperative Expectations, Self-Efficacy, and Postoperative Satisfaction

Yvet Mooiweer ^{1, 2}, Roy Stewart ³, Baukje Dijkstra ⁴, Robert Oosterveld ⁵, Martin Stevens ^{2, 6}, Gesine H. Seeber ^{6, 2}



Current project: Health4DE-NL



Deutschland – Nederland

Health4DE-NL

Cross-border cooperation in healthcare for more healthy years in the DE-NL border region

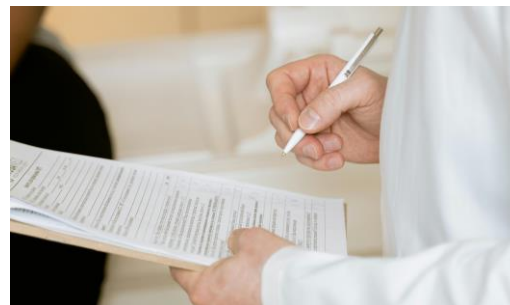
Infrastructure

Build a strategic cross-border health network in our region and along the DE-NL border



Framework

Conduct a health systems performance analysis to work towards health equity



Connection

Strengthen the connection and cooperation of public health offices from both sides of the border



Society

Implement public engagement activities to empower citizens about the care of their health



CBI: Associated projects (Selected)

- **Interreg xPEDition Pain (2023-2027)** – Pain Prevention and Treatment of Chronic Pain in the Ems-Dollart-Region
- **Interreg BUILDING BRIDGES (2024-2027)** – Cross Border Resource Pooling and Strengthening Healthcare
- **KPF Interreg Speed Up! (2024-2025)** – Accelerating Implementation of Sensors/Robotics in Healthcare Across the Dutch-German Border Region
- **INGVER Connect (2024-2027)** – Coordination and Networking for Healthcare (in the Border Region)
- **PJNeeds (2024-2028)** – Development of a Cross-border Supportive Rehabilitation Program



Where we are: Lessons learnt

- Importance of establishing research infrastructures, know-how, and networks of researchers and partners in the region
- System differences emerge as key challenge for transferring insights to the „other side“
- Research beyond comparative perspective needed



Key Insight: We are not twins but neighbors!



Leer, February 2019



Groningen, November 2024

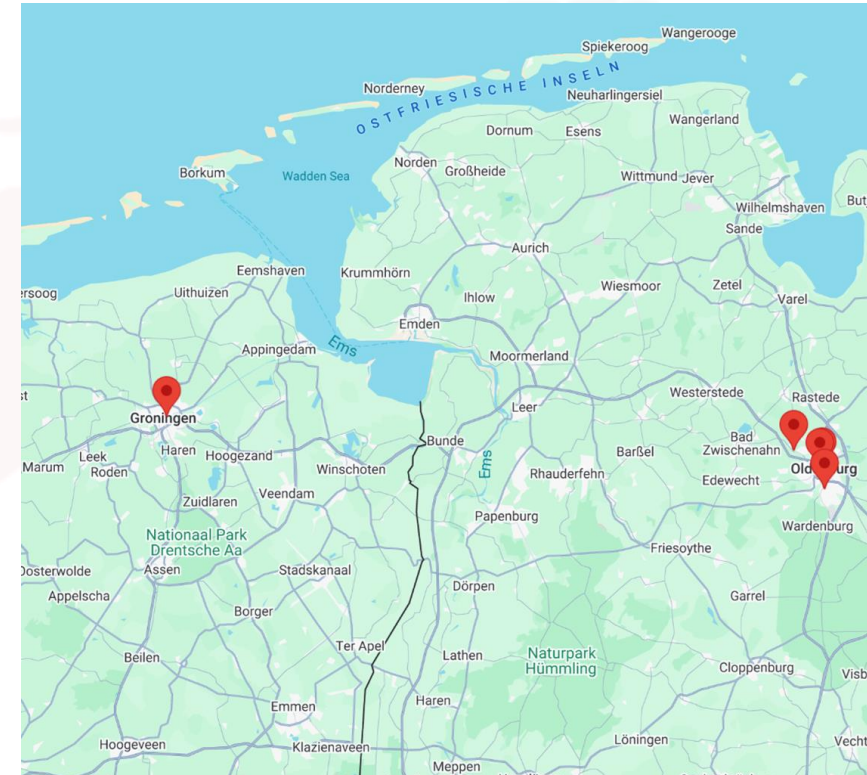
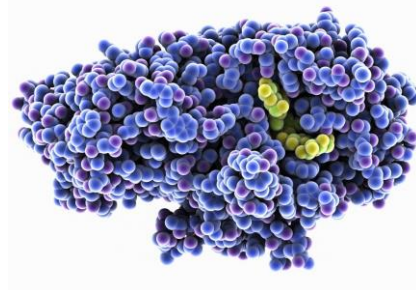


Papenburg, June 2025

What's ahead of us

- Less country comparison, rather aiming to understand challenges within respective systems, developing context-specific solutions
- Identify needs for cross-border use of services, paving the way across borders
- Participatory approach (with and from our region)

CBI as generator and multiplier of models and methods enabling and furthering the analysis, evaluation, and optimization of healthcare in rural border regions!



Connect with the CBI

Executive board



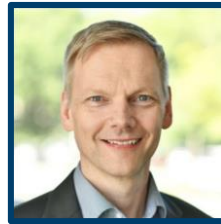
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Möchten Sie mehr erfahren?

Meer weten?

Website



<https://uol.de/en/cbi>



Best practice of cross-border health cooperation between the Netherlands and Germany

Collaboration between MST Enschede and UKM Münster

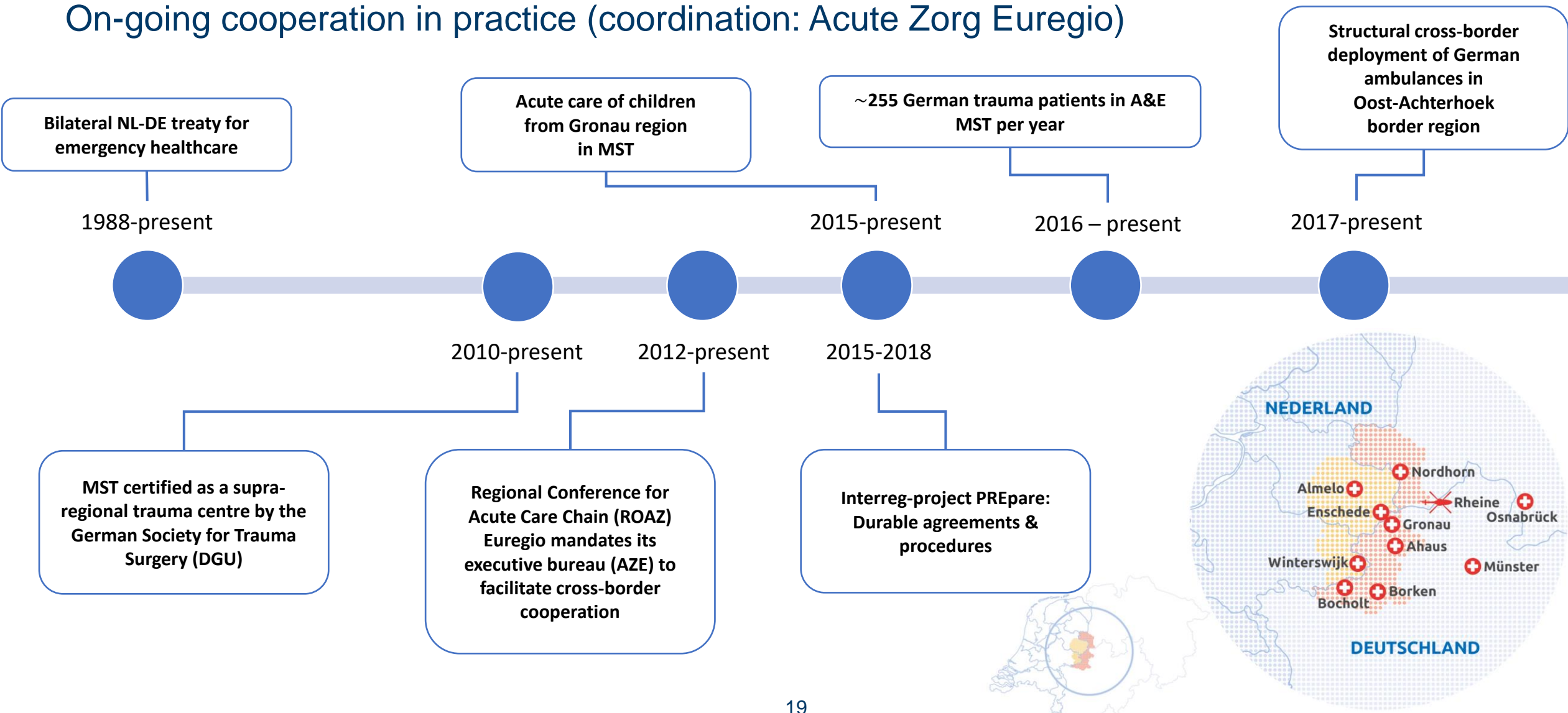
Toon de Groot and Leonie Friedrich

30-10-2025

Our network:



On-going cooperation in practice (coordination: Acute Zorg Euregio)

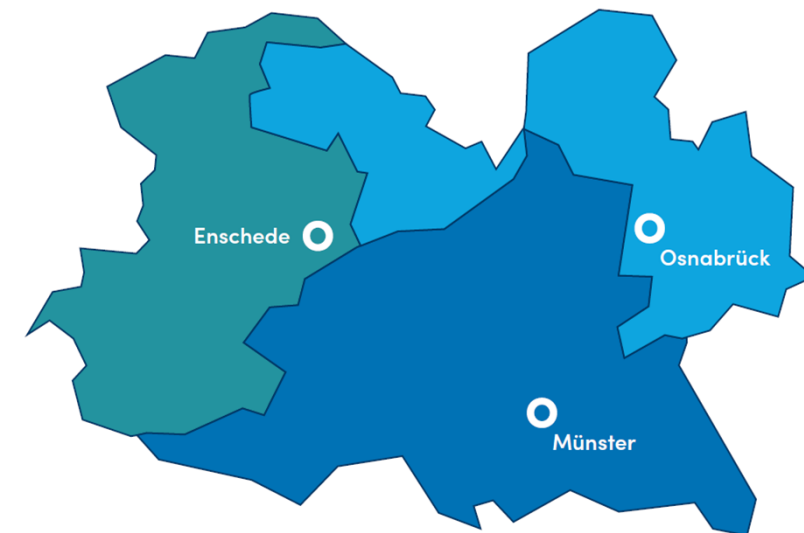


Lessons learned: legal barriers for closer cooperation

1. Lack of explicit permission for **ambulances to use optical and acoustic signals** on their own initiative (without intervention from dispatch centres) on the neighbouring country's territory
2. Lack of explicit permission for **ambulances to transport opiates across the border** (standard inventory & medication necessary for patient transfer)
3. Lack of explicit **regulation of liability**:
 - a. In the **event of medical errors** on the neighbouring country's territory
 - b. In the **event of involvement of ambulances in traffic accidents** during deployment on the neighbouring country's territory

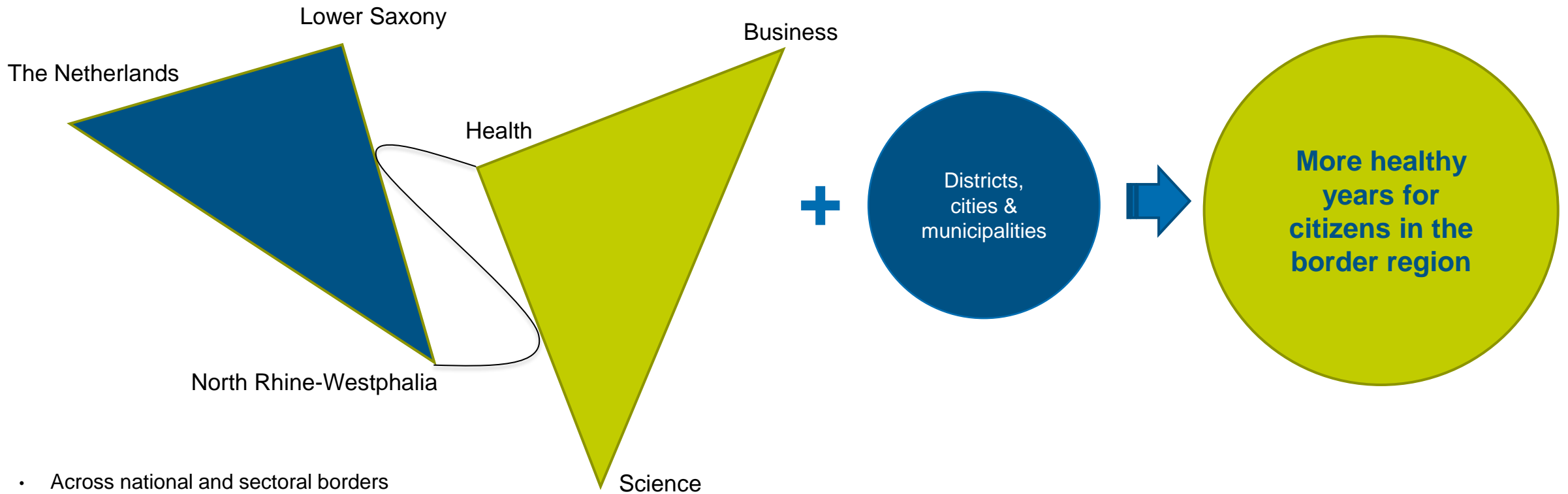
Regional focus beyond acute healthcare

The EUREGIO NL-NRW-NDS is uniquely positioned to be a model region for future-proof, sustainable **360-degree healthcare** due to the close collaboration between the universities (**University of Twente** and **University of Münster**) and hospitals (**MST** and **UKM**) on both sides of the border.



Double triad in the border region

A joint task



- Across national and sectoral borders
- Involvement of the entire region

Activities within the scope of 360°(with examples from 2025)

More than **35**
events

(since the beginning of 2024)

- Match-Making events with MST, Klinikum Osnabrück and Radboud Nijmegen
- Hauptstadtkongress, European Week of of Regions and Cities (EWRC)
- SchlauRaum, Uni Medizin on the Road

7 projects with
360° participation

- Interreg - BRIDGE
- Interreg - CARE-FLOW
- Interreg - ELFI, *applied*
- Interreg - ORION, *applied*
- Interreg - Binational Health Institute (BIHI), *application phase*

Ca. **10**
networks

- TECH.Land
- REACH
- AG Präventionsnetzwerk / Positieve gezondheid (Oost-Nederland & Münsterland)

Research & Technology of the Future - Focus Areas for the Next 5-10 Years

- **Personalised prevention:** integration of genetic, lifestyle, social and environmental data for early risk assessment and tailored preventive care.
- **Individual health promotion** through **technology**.
- **Digital care** pathway models: for patient-centred, networked medicine.
- **Artificial intelligence:** for diagnostics, therapy optimisation and preventive risk models.
- **Big data:** use of routine clinical data for research and care.
- **Translational approaches:** faster implementation of scientific findings in clinical practice.
- **MedTech solutions:** less healthcare professionals providing more healthcare.





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Emergency and planned cross-border healthcare collaboration between South Limburg (NL) – Aachen (DE)

Examples of practises & remaining challenges

Susanne Sivonen, LL.M.

Legal researcher ITEM



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- *Institute for Transnational and Euregional cross border cooperation and Mobility - ITEM*
- Founded in 2015, is the pivot of research, counselling, knowledge exchange, and training activities with regard to cross-border mobility and cooperation
- ITEM Cross-Border Impact Assessments, advice NL ministeries on 'border effects'
- *Schakelpunt Grensbelemmeringen Vlaanderen-NL*
- Several INTERREG-projects



Emergency healthcare: EMRIC



- EMRIC: Started as Interreg, more than 10 years a partnership between emergency services in the Euregio Meuse-Rhine
 - Collaboration NL-BE-DE of fire brigades, ambulance services, and other emergency services
 - Approximately 900 cross-border ambulance deployments annually
 - Dutch burn patients usually taken to Uniklinikum Aachen (closer than NL)
- Legal agreements
 - 2013 EMR Agreement Cross-border Neighbourly help in Ambulance Care (*Stadt Aachen, Städteregion Aachen, Kreis Heinsberg, GGD Zuid Limburg*), based in EU Treaties, Anholt Treaty and Joint Declaration of Ministries NL-NRW



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Interreg



Co-funded by
the European Union

Meuse – Rhine (NL – BE – DE)

EDEN-Medical

Emergency healthcare: EDEN-Medical

- Response to crisis situations like the COVID-19 pandemic or recent floods: risks for stock management, medical goods delivery, and lab capacity
- Need for more resilient and cooperative cross-border medical logistics
- The EDEN-Medical project aims to improve cross-border transport of medical goods—such as medicines, blood samples, and lab materials—through innovative drone logistics



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Planned healthcare: examples..

- Reimbursement of care: In the Euregio Meuse-Rhine, Noord + Rijn-Waal there is an agreement between health insurers CZ and AOK
- Maastricht UMC+ and Uniklinik RWTH Aachen actively collaborate to provide liver transplants for patients, exchange of digital data (radiological images)
- The European Vascular Centre Aachen-Maastricht cardiothoracic surgery
 - Large vessel surgery, where surgeons operate on a patient at Aachen Hospital while a neurophysiologist in Maastricht monitors the patient's condition real-time from a distance



Planned healthcare: Euregional Paediatric Surgery Center



- The hospitals in Maastricht, Aachen, and Liège are situated just a short distance apart across national borders, making cross-border cooperation practical and enabling children to receive care close to their homes rather than travelling far within their own countries
- Innovative approach: surgeon travels to patient
- Pooling of healthcare resources, research and expertise in response to centralisation of services
- Future plans: a legal entity for a true Euregional Center



Conclusions & Recommendations

- Fragmented practises across border NL-DE
 - Exchange of best practises & network: HEALTH4NL-DE
- Centralisation of policies bring availability of (specialised) HC in risk in border regions
 - National governments lack focus on solutions provided by cross-border cooperation
- More structural solutions would be desirable, in field of
 - Reimbursement of healthcare costs
 - Recognition professional qualifications
 - Health data exchange
 - Financing beyond Interreg-project basis
 - Governance of border obstacles & cooperation
 - BRIDGEforEU: Cross-border Coordination Points
 - Learning from *Schakelpunt Vlaanderen-NL*





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Cross-border



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Thank you!

Susanne Sivonen, LL.M.

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More information and publications:

www.crossborderitem.eu