

CONCLUSIONS OF THE FORUM EUROMED HEALTH 2005
Barcelona, November 14 and 15, 2005

• **Health Models**

Area dedicated to the analysis of processes for the reform of healthcare systems.

On the reforms of Social Security systems and on reforms in the management of healthcare services

- Definition of a series of strategies and Initiatives for cooperation in healthcare matters for the Mediterranean area which could be the object of joint work in the future:
 - Study and definition of the catalogue of services covered by the public sector in different countries and an international comparison.
 - Creation and exchange of instruments for control of the system and management of institutions. With this in mind, the following considerations of general character were presented:
 - “Do not copy foreign models for the sake of copying them”. It is necessary to seek the solutions that best adapt to the social reality of each country.
 - Promote improvement of information systems and specifically, improve the follow-up of the processes for contracting, accrediting, assessment and control.
 - Accept the diversification of actors in the field of management of healthcare services, always with the objective of improving the results.
 - Work on a common focus for some health problems: AIDS, bird flu, etc.
 - Generate initiatives to maintain health in the centre of the political debate, in spite of competition and globalisation.

On investments and the participation of private initiative and international institutions

- An innovative and interesting formula for public sector-private sector collaboration, which shows its usefulness for the public sector provided it maintains adequate economic and legal controls.
- At the moment the only experience is in the construction of hospitals and an evaluation of already completed experiences is proposed.
- The southern Mediterranean countries are very interested in these models for financing investments, but mention the difficulty of applying them, basically

because of legal and political aspects and the lack of a private sector willing to collaborate with the government.

On transformations in the models for the management of public health

- Confirmation of the progressive evolution from an administrative public health model towards a model that includes public health actions as another part of healthcare systems. Actions are progressively being taken closer to citizens, who are the reference points, and on risks.
- The new models being proposed put emphasis on decentralisation, participation and communication. The latter two aspects are the real instruments for making the majority of interventions effective. Mention was also made of the increasing weight of an intersectoral and multidisciplinary approach to the development of public health.
- The models of public health presented by southern Mediterranean countries reveal the challenges facing public health in these countries. Challenges that are closely related to the degree of social and economic development, as well as the presence of health factors that are different from those of northern Mediterranean countries.
- The experience of Catalonia shows how the integration of various processes and institutions enables advancing towards a model of reform that attempts to be both participative and effective. The new agency to be created, decentralised in the territory, is aimed at the integration of the existing series of resources to provide Public Health services as a regular part of the healthcare system.

On the control of smoking

- Today there is an important need to take global action against cigarette smoking from five different approaches:
 - Legally – regulating spaces, etc.
 - Financially – increasing taxation.
 - Controlling promotional campaigns that encourage the habit.
 - Aiding smokers to overcome their addiction, offering support.
 - Educating and informing the population – not only in prevention in the case of youths, but also directly addressed to smokers.
- On the other hand, it is necessary to combine and coordinate efforts between the areas of organised civil society (associations, charities, and not only from public health, etc.) and government.

- **E-Health**

Area dedicated to analysing the application of information and communication technologies to the field of healthcare systems

On the strategies and models for its application

- E-health provides enormous potential for improving the mobility of patients and professionals and the access, quality, security and productivity of healthcare services.
- The advantages of the process of development of e-health initiatives on a regional level are put into evidence. The improvements in citizen accessibility and its usefulness for professionals are multiplied by the scale economies that result when the investments in ICT infrastructures exceed small geographic areas or specific suppliers.

On integral attention for patients

- Demand for priority actions on policies that encourage the spread of an integrated model for attending to patients with the support of ICT.
- This emphasis on priority must be accompanied by the definition of the organisational aspects of the new healthcare model in regard to the interactions between professionals on different healthcare levels.
- Presentation of the importance of standardisation of clinical practice by means of clinical guidelines, as they must become the basis for articulating the new roles of professionals and patients in this healthcare model.
- Proposal for the consensuated and successful adoption of specific models of interoperability between different agents in order to promote the sustainability of the new healthcare model.

On research, development and innovation

- We are confronted by the same problems facing other communities in the world. We form part of a global community and therefore it is necessary to combine forces to solve global problems, together. This is the commitment that we must assume.
- We are facing an unprecedented opportunity to optimise healthcare systems through e-health.

- We must make people, not patients, responsible for taking care of their own health. This self-responsibility will be much easier to assume thanks to information technologies as they permit each person to have a very exhaustive knowledge of their state of health.

• **Free circulation of patients and professionals**

Area dedicated to the analysis of healthcare quality and safety, the role of professionals, all in the framework of free circulation

On quality, safety and satisfaction

- Quality is one of the most important concerns of all current governments present. Furthermore, the mobility of people means that the subject of quality has become more relevant over the last few years.
- In 1999 the European Union began a process of reflection on the subject of patient mobility and quality which has today led to the creation of a High Level Group to study various subjects including patient safety and mobility.
- In 2002 the WHO launched the “World Alliance for Patient Safety” which has been presented here. It mentions the objectives to be shared by all countries of the Mediterranean Area, basically clean care to reduce infections and the participation of patients and citizens in safety matters that affect them.
- Emphasis was placed on the importance of exchanging information and experiences in the field of quality between Mediterranean countries and the convenience of doting these forums with continuity.

On the mobility of patients and citizens

- People move between countries for different reasons and, on certain occasions use the healthcare services of the destination countries either because they become ill during one of these stays abroad, or because the movement was specifically to be able to access the healthcare services in a country other than theirs.
- There are various situations where patients are treated in countries other than their own and each requires specific consideration and treatment (tourists, long-term residents, health tourists).

- It would be a good idea for countries of the European Union to have a common basic catalogue of healthcare services to which all European citizens would have access, and know that they had a right to receive.
- It is important to establish common standards of quality in healthcare services, and that citizens be aware of them.
- Not only the countries of the northern Mediterranean area have healthcare services to offer and it is not only for this reason that citizens move between different countries. The countries of the southern Mediterranean area also offer quality healthcare services that could be made available to all citizens, at competitive prices, and which could be taken into consideration when designing the offers of healthcare services.
- The continuity of healthcare services is basic when there is an international movement of patients. They have the right, and healthcare professionals and authorities the duty, of guaranteeing that information on the healthcare provided travel with the patient so that when he/she returns to his/her country of origin they can continue with the healthcare process in an integral, coordinated and continued manner.

On the challenges of healthcare professions

- The free circulation of professionals must be based on accreditation of their professional qualifications and that it is not necessary to homologate, but rather to harmonise academic titles.
- The planning of human resources is a very complex process that has to consider new information and communication technologies (telemedicine).
- There is a need for healthcare systems to attain a greater level of flexibility to adapt their professionals to social and technological challenges.
- Recommendations that the different countries introduce incentives to maintain the minimum number of professionals necessary to satisfy their needs.

On policies for migration and health

- The relevance of a holistic approach to migration and health, combining political, social and healthcare aspects. Adopting a multidisciplinary perspective that includes psychology, psychiatry, anthropology, sociology and other relevant disciplines, all working together, should allow the phenomenon of migration to be approached in a suitable way.
- The importance and, at the same time, need for training and technical preparation of all healthcare professionals in aspects of cultural competence.
- Specific mention of good practice in different countries, emphasising the importance of prevention, integration and co-ordination of different healthcare and social systems when attending to the migrant population.

• **Medical Digital Imaging** **Seminar on medical digital imaging and information technologies**

On models of deployment, experiences and applications

- The image is not just another element of the Electronic Medical Record (EMR), it is a critical aspect and becoming even more so. Without image there is no EMR.
- In the opinion of the experts, the best approach is to establish territorial, regional or even supraregional (European) PACS (of medical images, not only x-rays), making images available to everyone that requires them provided they are necessary, as well as making them accessible to the patient.
- The projects for digitalisation must consider:
 - TECHNOLOGY: today this is not a problem, but it is much better to use and share a single platform than to combine multiple platforms from different suppliers.
 - ORGANISATION: integration in the workflow. This is the most complex aspect as it affects professionals and organisations.
 - LEGAL ASPECTS: resolve international consensus.
- “Film & paper no longer work”. In a digital environment (digital image) more can be done in less time, even though there are more limitations and more complex and dispersed environments. The digital environment is also less vulnerable than the manual one (example of “Katrina”).
- Share experience: The technical errors and difficulties encountered by those who initiate the process should enable others to avoid them, saving both time and money.

On research, development and innovation

- It is necessary to have new models for investment and management of infrastructures (ASP). Sharing infrastructures enables considerable savings, avoids initial costly investments, and allows payment to be made in terms of use.
- The digital image contains much more information than we can process. It enables us to increase our capacity for diagnostic detection or to present new challenges:
 - CAS: image guided surgery or “Surgical PACS”: use during the operation, in real time, interactively or for planning or simulating surgery.

- CAD: digital mammography.
- Combination of anatomical, functional and molecular information.
- From the point of view of service provision, working on a network enables professionals to access knowledge, to share it, thus to eliminate the barriers of space and time.