A critical review of reorienting health services

SUGGESTIONS FOR NEXT STEPS

ILONA KICKBUSCH GHC
GRADUATE INSTITUTE

HPH VIENNA 2017
SOLIDARITY HUMAN RIGHTS

HOSPITALS BOMBED
Reorient health services

The responsibility for health promotion in health services is shared among individuals, community groups, health professionals, health service institutions and governments. They must work together towards a health care system which contributes to the pursuit of health. The role of the health sector must move increasingly in a health promotion direction, beyond its responsibility for providing clinical and curative services.

Health services need to embrace an expanded mandate which is sensitive and respects cultural needs. This mandate should support the needs of individuals and communities for a healthier life, and open channels between the health sector and broader social, political, economic and physical environmental components.

Reorienting health services also requires stronger attention to health research as well as changes in professional education and training. This must lead to a change of attitude and organization of health services, which refocuses on the total needs of the individual as a whole person.
Dealing with change

increase in healthcare needs

changing health care needs – chronic diseases

Evolution of medicine and medical technology

Demographics – ageing – migration

decrease in resources

changing social values

digital society

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Triple aim of health system

TRIPLE AIM

- Improve the Patient EXPERIENCE
- Achieve Better HEALTH Through Improved Outcomes
- Manage or Reduce COSTS

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Dealing with diversity

GLOBAL CARE CHAIN
DEALING WITH COMPLEXITY
The user should not be learning the language of the device – the device must learn the language of the user.

Der Spiegel Nr.41/10.10.11 S 75

READABLE SYSTEMS
HOSPITALS THEN ....
REIMAGINE HOSPITALS

- HOSPITALS WILL BECOME OPEN AND DISTRIBUTED ORGANIZATIONS

Leading hospitals will not be defined by the physical structures and will be organized so they deliver services at different locations. (IESE 2015)
Sustainable (health care) systems

- Designing systems with inherent “resilience” by taking advantage of fundamental properties such as diversity, efficiency, adaptability, and cohesion.

- Recognizing Health (care) as a social system
Leading hospitals will systematically redesign the service experience with innovation to become really patient centered.
BE GREEN

A GREEN HOSPITAL

Orientated towards the north, making good use of the sun and lots of natural light throughout the building.

Energy from solar panels on the roof will generate around 40% of domestic hot water in ward areas.

Use of materials with a high recycled content and sustainable flooring, joinery and furniture.

Water efficient fittings throughout.

Energy efficient lighting, heating and cooling.

A black water treatment plant will clean water for reuse on toilet flushing and watering the gardens and roof. Park.

More bike parking space.

Water efficient landscape - watering system.

A gas-fired cogeneration power plant, which simultaneously produces electricity and heat. Generating electricity with gas produces far less CO2 than coal generation.

Paints, carpets and joinery free of Volatile Organic Compounds and formaldehyde to improve indoor air quality.

Drought - tolerant and native plants.

Bioenergy fuel boiler that uses alternative fuel sources to produce hot water.
BE HEALTHY

Global Green and Healthy Hospitals | Agenda Goals

<table>
<thead>
<tr>
<th>Leadership</th>
<th>Chemicals</th>
<th>Waste</th>
<th>Energy</th>
<th>Water</th>
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<tbody>
<tr>
<td>Prioritize environmental health as a strategic imperative</td>
<td>Substitute harmful chemicals with safer alternatives</td>
<td>Reduce, treat and safely dispose of healthcare waste</td>
<td>Implement energy efficiency and clean, renewable energy generation</td>
<td>Reduce hospital water consumption and supply potable water</td>
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<tr>
<th>Transportation</th>
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<tr>
<td>Improve transportation strategies for patients and staff</td>
<td>Purchase and serve sustainably grown, healthy food</td>
<td>Prescribe appropriately, safely manage and properly dispose of pharmaceuticals</td>
<td>Support green and healthy hospital design and construction</td>
<td>Buy safer and more sustainable products and materials</td>
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</tbody>
</table>
To reduce potential infections all surfaces are made of solid materials that are often used in kitchen countertops. A light at the entrance reminds staff to wash their hands before entering the room. Information and data can be added to patient records here as well as at a control panel.
Patients will take a more active role in the design of hospital services and participating in activities to **redesign** care processes so patients’ needs and views are considered.

case managers will reach out to coordinate care for patients at home
Health (wellbeing and care) is created at the local level in the settings of everyday life, in the neighbourhoods and communities where people of all ages live, love, work, shop and play.
Hospital as relationship: Health literacy

- HEALTH LITERATE ORGANISATIONS – READABLE SYSTEMS – INCLUDING Health coaches who will focus on patient tracks in a proactive manner, and will be either hospital or primary care-based but with strong links to hospitals’ knowledge and professionals

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New professional roles, for disease-specific case management, healthcare service personalization, team coordination, and follow-up for patients that will also act as the first levels of contact for patients in specific disease groups.

Health coaches will be critical
Robots – guide and receptionist
Patient safety

- Patient Safety Summit on 29/30 March 2017

PATIENT SAFETY GOALS

- **GOAL 1**: Identify Patients Correctly
- **GOAL 2**: Improve Effective Communication
- **GOAL 3**: Improve the Safety of High-Alert Medication
- **GOAL 4**: Ensure Correct-Site, Correct-Procedure, Correct-Patient Surgery
- **GOAL 5**: Reduce the Risk of Health Care-Associated Infections
- **GOAL 6**: Reduce the Risk of Patient Harm Resulting from Falls

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Co-operation

process-oriented teams and integrated care models
Professionals will work in multidisciplinary and process-oriented teams, **blurring the existing discipline boundaries** between physicians, nurses and other healthcare professionals. IESE 2015
Health system CO production

The “team” from the patient point of view

Husband/Wife
Friends
Children
Parents
Patient
Nurse/Assistant Nurse
Physician
Other Resources

CO-PRODUCTION of Health and Wellbeing in Scotland

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The health system supports the patient and her carers – starts with where people live, love, work and play.

Health promotion, prevention, integrated care, ambient assisted living, PCMH patient centered medical home are conceived as a system, not as silos.

The interface with other systems – social care – is a quality standard.

Interface through new technologies.
The concept of 'health citizenship' refers to health knowledge that integrates the lay knowledge of patients and that this integration is translated into health actions such as clinical communication and the planning of health care, programs, and policy. (Groleau 2011)
Ottawa Charter

Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love.

Health is created by caring for oneself and others, by being able to take decisions and have control over one's life circumstances, and

By ensuring that the society one lives in creates conditions that allow the attainment of health by all its members.
Rule #1
Do No Harm