

## “Benefits of Integrated People-Centred Care in Times of Crisis: Moving Towards More Efficiency in European Health Systems”

On 6 October 2020 AIDS Healthcare Foundation (AHF) Europe and ProMIS (Programma Mattone Internazionale Salute) organized the webinar entitled “Benefits of Integrated People-Centred Care in Times of Crisis: Moving Towards More Efficiency in European Health Systems” with the participation of Filip Domanski (DG SANTE), J. Olekas (MEP, Lithuania, S&D), A. Zakowicz (AHF Europe), Maddalena Illario (Federico II University of Naples), Nicola Scomparin (ProMIS) and moderated by Brussels communicator Ms Jacki Davis.

In a fruitful debate, speakers analysed the major challenges for the implementation of integrated people-centred care and discussed several lessons learned from the COVID-19 crisis response. The participants expressed their strong determination and engagement to work on providing more quality, people centered and inclusive health services to the European citizens.



**Filip Domanski. Policy Officer at DG SANTE.**

In a developed world primarily focused on chronic diseases, we have been shocked by the fact that other public health threats such as communicable diseases could cause such a grave impact.

The COVID-19 crisis and the situation in nursing homes have highlighted the lack of a strong link between health and social care. The EU has focused on providing medical equipment but has forgotten to promote social care, neglecting one of the main components of integrated care.

The epidemiological differences between Lombardi and Veneto regions in Italy are partially explained by the more developed integrated care in the Veneto region. This factor released hospital capacity to focus on the most severe cases while offering adequate treatment to patients in ambulatory, primary or remote care.

From the people centred care perspective, the current situation has underlined the importance of having a clear focal point where patients can receive integral medical care. The cooperation between different levels of health systems is the only way to reduce the number of interlocutors to treat a patient. The COVID-19 crisis could become an opportunity to improve integrated care. The management of the COVID-19 pandemic is a complex problem highlighting the need for closer cooperation between different health professionals and institutions. The forthcoming Health Program will move forward in that direction through the transformation and strengthening of health systems.



**Juozas Olekas, MEP, Lithuania, S&D.**

Strengthening healthcare in the EU requires 1) a more ambitious EU health budget; 2) stronger prevention, with a common vaccination calendar; 3) investment in health research and; 4) stronger reference centres for the treatment so that patients can easily identify and reach them.

The COVID-19 crisis has shown that Member States cannot act on their own in the management of certain topics such as response to public health threats. European countries should refrain from taking

uncoordinated measures and should seek for common solutions at European Union level. The EU definition of Public Health is too narrow, and we should take more determinants into account in order to be better prepared.

In order to ensure that people get quality access to health, J. Olekas revalidated the right of every European citizen to be treated in any Member State according to state-of-the-art techniques and technologies and under the highest professional standards. This is even more relevant in cases such as rare diseases or COVID-19, when transfer of patients should be possible among Member States. A centralized patient centered approach at the EU level would allow to achieve those goals.



**Maddalena Illario, MD, PhD, Endocrinologist Department of Public Health/R&D, Federico II University and hospital of Naples.**

The COVID-19 crisis has underlined the need for shorter communication chains between health professionals and health policy makers. Authorities should take into account all relevant voices when setting up preparedness plans, and not rely on specific expertise only in the midst of public health emergencies.

Collecting the know-how gained from handling the COVID-19 situation and bringing it at European level is essential to increase our preparedness and avoid the repetition of a crisis of such magnitude. In this sense, Italy has collected the learned experiences and has put them in a matrix defining operative, normative and policy recommendations.

Current and future public health challenges cannot be faced solely relying on improving hospital beds and equipment but also on investing in community services, integrated care, administrative capacity to deliver the highest performance and reducing the gaps between countries and regions. One of the challenges is ensuring that health services continue to be provided also during the emergencies to ALL patients. Non-profit organizations have largely shown their capacity in emergency situations to not leave anyone behind. More investment is needed on these organizations to enlarge their scope and reach more citizens. There has been lot of work put into the development of networks and the structured involvement of all relevant parties, but engagement can still be improved.



**Anna Zakowicz, Deputy Bureau Chief, AHF Europe.**

One of the barriers for implementation of people centred care is the traditional way in which care is provided. We must look beyond the biomedical paradigm and take a more holistic approach to health care with stronger focus on prevention.

The distinction and intersections between integrated and people centred care still need to be clarified.

Integrated care addresses the coordination between different health services and institutions and how the provision of services to patients is conducted. People centred care is a broader concept that focuses on the needs of persons, patients, families and communities and engages them in the coproduction of care, shaping the provision of health services from the preventive to the medical care stages. A firmer commitment to people centred care in the next EU for Health program is crucial to materialize the progress. The change in paradigm has to come with the education and training, avoiding repeating the same models.

In order to better implement people centred care we have to overcome the divisions such as of communicable or non-communicable diseases. People centred care needs a cross sectorial focus that could be established by bringing different players and sharing experiences.



**Nicola Scomparin, ProMIS.**

Health projects must follow a bottom-up approach, identifying people and patients' needs to raise them at political level and allocate them proper funds.

The difference between integrated and people-centred care is a relevant one, but given the likeness of their needs, INCASO project's core objective was to first draw the European attention to the topic as a whole.

ProMIS leads projects identifying and promoting best practices on health prevention at local level to scale them up to different countries and to give the opportunity to the communities to participate in existing networks and learn from different experiences. INCASO aimed to bring together all the needs and expectations on integrated and people-centred care to communicate them as a single voice to the European Commission.

The improvement of integrated and people centred care requires the training of health professionals, especially in everything related to e-Health to enable the communication in the same digital language across the health system. On the other hand, patients also need to be empowered to the use these technologies and ensure they receive an adequate service.