

Redesigning health system from the users

Speakers: **Véronique ANATOLE-TOUZET**, General Manager, University Hospital Center Rennes | France; **François-Emmanuel BLANC**, General Manager, Central Agricultural Social Insurance Agency – CCMSA | France; **Gérard RAYMOND**, President, France Assos Santé | France; **Pascal ROCHÉ**, CEO, Ramsay Santé | France

Led by: Jean-Paul SEGADE, President, CRAPS | France

Several approaches allow for an efficient integration of users in the organisation of the healthcare system

Within healthcare institutions, the involvement of users in the organization of the healthcare system must become a reflex and be integrated into the different facilities' culture. Although there are already bodies that include users within institutions, these instances do not necessarily allow subjects to be addressed in depth. For example, the scope of the users' committee is generally limited to the management of complaints and claims. The creation of a joint committee involving user representatives and health professionals enables to work on more concrete subjects. These include for instance the co-construction of a discharge kit for hospitalised patients, a patient charter, discharge protocols, etc. Similarly, involving users in the governance of projects or in steering committees can help refocusing on more professional subjects.

Upstream involvement of users in the definition of public health policies, is a way of integrating them into the organisation of the health system. In Nordic countries, each year, users define public health indicators to measure the success of the policies put in place. These indicators are also defined with users to identify care pathways that best meet their needs.

Finally, elected representatives may also be involved in the governance of social security organisations. Indeed, these structures participate in the organisation of the healthcare system. By being a part of their governance, elected representatives have thereby the opportunity to carry out projects at a local scale in accordance with the needs of the population. This approach has, for example, enabled the introduction of remote assistance in certain areas or the treatment of the ill-being of the agricultural population at a national level. Indeed, social security organisations are bound to the national territory which allows them to carry the important messages coming from the local level.

Nevertheless, the integration of users in the organization of healthcare provision faces several challenges

Over the course of successive reforms, the number of stakeholders responsible for the organisation of healthcare has increased. Initially, only the state and the national health insurance were considered responsible for the provision of healthcare. Gradually, users, insurance companies and local authorities have gained their share of responsibility in the provision of healthcare. This shift from two to five stakeholders has made discussions more complex. For instance, local authorities tend to favour proximity of care, while health professionals grant more importance to the quality of care. The multiplicity of stakeholders in charge of organising the health system can thus represent an obstacle to the evolution of the healthcare offer.

Furthermore, the new stakeholders involved in the organisation of the healthcare system face the challenge from shifting from simple advisers to active participants. As far as elected representatives are concerned, this involves making them responsible for financial matters but also for the management of the health system (organisation of primary care at the level of the municipalities, transformation the gradation of care supply, training of health professionals, etc.). As for users, their participation was initiated during the Covid-19 crisis, when they contributed to the decisions taken, particularly concerning the TousAntiCovid platform. This form of participation, which is still exceptional, should become part of the current approach.

There is a key challenge to rethink the healthcare system by acknowledging first the demands and needs of local territories. To succeed in doing so, users should be integrated in the redesigning of the healthcare system. In this state of mind, healthcare stakeholders are particularly demanding regarding the results of the next

National Council for Health Refoundation (CNR). Although no subject should be avoided, some issues seem to be unavoidable, in particular: the attractiveness of some regions in the field of health, the hardship of night work and on-call duty, as well as the increase in wages, especially in the public sector.

Technology as a lever and example for the integration of users in the redefinition of the health system

Technology represents a major aid in improving access to care for patients. The development of these innovative systems is partly based on listening to the needs of users and of local territories. Indeed, telemedicine, remote monitoring and tele-expertise can help overcome the difficulties associated with the shortage of health professionals and the problems of medical attractiveness of certain regions. In addition to reducing inequalities in access to care, technology can also be a tool for personalised prevention advice and follow-up, particularly for chronic diseases.

Digital technology also allows for a better integration of elected representatives in the redesigning of healthcare systems. For instance, specific applications have been developed to train elected representatives in the healthcare system. In addition, they can have access to information on a regular basis through a newsletter system. The aim of these systems is to enable elected representatives to make informed decisions within their territories.

However, the efficiency of digital technology in the health field depends on the integration of the stakeholders in its use. Indeed, digital technology must be able to create links between all the players. To this end, institutions must ensure that all citizens and health professionals take ownership of the new tools available today such as “Mon Espace Santé”.