

TALK WITH AURÉLIEN ROUSSEAUMinister of Health and Prevention | France

With Guy VALLANCIEN, President of CHAM | France

The French healthcare system is both "outstanding and vulnerable"

The current state of the French healthcare system can be described as both "outstanding and vulnerable". Several measures and policy illustrate the quality and performance of the French healthcare system e.g., the medical regulation chain of healthcare access services (SAS), the emergency medical assistance service (SAMU), or even the psychiatric regulation telephone line. However, the French healthcare system also faces challenges such as the inability for some hospital departments to provide additional beds. Improving the healthcare system also implies to tackle issues related to working conditions e.g., exposure to occupational health risks, professional mobility, lessening of professional commitment of new generations.

Prevention is key to increase healthy life expectancy

France global health strategy 2023-2033 aims at improving the healthy life expectancy of the French population and to ensure the sustainability of the healthcare system. To achieve these goals, preventive actions are essential (e.g., vaccination, promotion of precautionary measures, or disease prediction). Hence, the sustainability of the French healthcare system relies on investments in research and innovation in the field of prevention.

Health related interprofessional collaborations are essential to improve the quality of care

Developing interprofessional collaboration potentially entails the reappraisal of roles and the division of tasks between physicians and other caregivers. Hence, experimentations are ongoing regarding the optimization of healthcare organization and care pathways. These experimentations also favor preventive and personalized medical approaches. Territorial Professional Health Communities (CPTS) and multi-professional health care centre (MSP) are at the forefront of technological and organizational innovations, especially those participating in experiments within the framework of the French innovation funding program "Article 51".

Smaller structures, consisting of a few physicians, should not be overlooked as they are the gatekeepers of the system and as they meet the largest volume of healthcare demand in France. Rethinking the different levels of care in hospitals is important. The latter could provide 3 different levels of care:

- A first level of proximity without surgical interventions,
- A second level incorporating surgery and maternity wards,
- A third level reserved for advanced expertise and higher education.

The development of higher education programs beyond the framework of teaching hospitals (CHU) completes this structuration.



The organization of emergency departments remains a significant challenge in France

Dealing with complex decisions in the absence of simple solutions calls for a collective response, involving both local authorities and the Regional Health Agencies (ARS). The medical regulation chain of healthcare access services (SAS) is crucial in facilitating medical consultation planning. Given the predictability of most urgent cases, a possible organizational strategy could also be to assign the direct management of emergencies to each medical specialty, thereby relieving the burden on general emergency services. Moreover, digital devices could help anticipate and better manage the need for emergency beds in hospitals.

Furthermore, the policy introduced by the Prime Minister, to increase the attractiveness of night shifts through salary raises contributed to the opportunity to increase the number of inpatient beds.

Enhanced collaboration is required between the public and private healthcare sectors

The interaction between the public and private sectors is essential for healthcare management in France. A principle of equity must be respected between those two sectors. It involves standardizing the remuneration policy or adopting common constraints in terms of care provision (e.g., participation in emergency care). The COVID-19 crisis has particularly intensified interactions between these two sectors: twenty percent of patients in intensive care units were treated in private healthcare institutions in Île-de-France.

Limiting the increase in healthcare spending is necessary

The growth of healthcare spending must be carefully monitored. It is especially influenced by the access to innovative medicines and treatments. Hence, the Social Security Finance Law (PLFSS) will include measures to encourage the use of biosimilar products and rapid diagnostic test (RDT) for sore throats to reduce antibiotic consumption. This issue requires a collective, transparent, and perennial approach to managing and regulating expenses.