



INNOVATION FOR MORE HEALTH

MetaForum "Innovation in the Health System" 2007-2009





Sustainable through Innovations for more health

The German health system is not sufficiently prepared for important megatrends and thus not sufficiently prepared for the future. In order to cope with the large challenges, mere enhancements within the existing structures are not sufficient.

Over a three-year period, the MetaForum "Innovation in the Health System", with members from the whole health sector (supervised by the Fraunhofer Institute for Systems and Innovation Research and reputable experts) have established the pivotal needs for innovation and developed recommendations for action in order to start fundamental processes of change.

Health policy needs to change its perspective from a disease-oriented approach to a strategy that secures and promotes health and quality of life sustainably.

- *Health must become a cross-sectoral field for action.* It cannot be considered to be a separate functional topic any more. The cooperation and networking amongst the health-related service-providers, with other fields of policy-making and with the health-relevant stakeholders outside the healthcare system, must be regarded as a priority task in order to make optimal use of the necessary competencies to maintain and promote health and care for the ill.
- *Self-determination, participation and self-responsibility of the citizens and patients must become the basis for all services.* The health system needs a fundamental re-orientation in order to optimally support citizens, insurees and patients as active doers and to allow the holistic realisation of their needs and urges in their health processes.
- The economic relevance of health-related activities needs new evaluation. In an increasingly globalised economy, the health of the citizens is becoming a location factor. *Investments in the maintenance and promotion of health ensure the economic productivity and societal welfare of a country.* The health system is an important economic driving force that has to be used as a part of the active economic and employment policy as well as of research and education policy.

The MetaForum underlines the overarching values that the European Union has set out for the health systems: universality, access to good quality care, equity, and solidarity. To guarantee these in the future, the MetaForum has identified *eight areas of particularly urgent need for innovation*:

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| • more active participation | • more investment in health |
| • more transparency | • more orientation towards outcomes |
| • more sustainability | • more integration |
| • more subsidiarity | • more economic and societal benefit |

For these areas of innovation, a number of innovation impulses were developed which use existing trends and kick-off dynamics *to make the health sector a learning system* and change it to reach the goals and values of overriding importance. The organisers of the MetaForum, along with the participants, will further discuss these recommendations with their addressees and support their implementation.

We wish to thank the more than 200 participants of the MetaForum from all areas of the health system, who have financed their participation themselves, for their time and generous contributions to the discussions. We thank the Chairman Prof. Dr. Kurt H. Biedenkopf, Secretaries of State Prof. Dr. Frieder Meyer-Krahmer, Dr. Klaus Theo Schröder and Hartmut Schauerte for their contributions, Prof. Dr. Ilona Kickbusch for co-creating the content, the leaders of the working groups Frau Andrea Fischer, Priv.-Doz. Dr. Dorothee Gänshirt, Prof. Dr. Klaus-Dirk Henke, Prof. Dr. Jürgen M. Pelikan, Dr. Thomas Reiß, Prof. Dr. Friedrich Wilhelm Schwartz, the speakers Jens Kaffenberger, Dr. Paul Smit, Prof. Dr. Birgit Vosseler and Prof. Dr. Thomas Zeltner, Dr. Albrecht Kloepfer for his work as moderator, and MSD SHARP & DOHME GmbH, B. Braun Melsungen AG, KKH-Allianz and the Federation of German Industries (BDI) for providing unlimited financial support



Concluding document for the MetaForum
“Innovation in Healthcare” 2007-2009
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Innovation for more health

During the MetaForum “Innovation in Healthcare”, about 200 stakeholders from the whole health system, supervised by the Fraunhofer Institute for Systems and Innovation Research and reputable experts, have discussed the basic principles and goals of innovation for more health over a three-year period and have compiled this concluding document.

The present concluding document summarizes the fundamental developments and the most important goals for the health system and specifies the central need for innovation. Priority areas for innovation are identified, where the need for action exists. Recommendations for action in the form of innovation impulses follow, which will develop inherent dynamics in order to induce processes of change in the direction of sustainable maintenance of health, health promotion and healthcare.

A. Introduction

A1: Innovation in the health system

Innovation in the health system consists of more than just the development and introduction of new products, processes, and structures. Rather, a fundamental change in perspective is required if radically new possibilities for improving the health system are to be identified and put into practice. This applies to many areas, however above all it implies the need for a paradigm shift from a disease-oriented to a health-preserving approach; the orientation of the health system towards citizens, health-insured individuals, and patients as active participants, the holistic consideration of people's requirements and needs, and the concept of health as an essential foundation and opportunity for social and economic development in all fields of policy-making. Health can no longer be seen as a separate functional scope of action but as a targeted goal for all sectors and the whole of society.

B. Demand for innovation

The MetaForum recognises an urgent demand for fundamental changes in six megatrends which are globally effective. These megatrends challenge the sustainability of the health system with regard to funding and quality of medical care. Guaranteeing more health and security of care can only be achieved if social groups, even groups not explicitly involved in the healthcare system, take responsibility and if the meaning of health benefits and prevention are newly defined from an economic point of view.

B1: Megatrends

The German health system needs a comprehensive reorganisation in order to react to six megatrends:

- Globalisation and Europeanization: International and European rules and standards, internationality of choices, interculturalism of demand, mobility of patients and providers
- Demographic reorganisation and change: Ageing of the population and of the service providers, decline in total population, migration
- Rapid increase in chronic and mental diseases
- Continued increase in health and disease costs and increased relevance of the consumers in the health market
- Technological change: Scientification of medicine, use of new information technologies, predictive and personalised medicine
- Individualisation of way of living and a new active and holistic understanding of healthcare by responsible insurees and patients

B2: The need for sustainability

In its current organisational and financial state, the German healthcare system is not sufficiently prepared for the megatrends and is therefore not sustainable. Fundamental principles of German welfare and healthcare – solidarity and equal chances for health – can only be ensured in the future through a dramatic reorientation and with long-term investment. The health system needs to be put in a position to adapt to changes in general conditions, needs and requirements.

B3: Relation to health and society

Maintaining, improving and restoring health is the duty of every individual citizen, of the specialised institutions as well as of society as a whole. The multitude of health determinants and health-relevant stakeholders outside the system of care for the sick will need to make more allowances. New forms of politics and types of cooperation will need to be developed in order to face up to the pressure of the various megatrends in an adequate and pro-active way.

B4: Economic importance

The economic importance of the German health system is understood in a limited sense – generally as a burden factor. Health is one of the supporting pillars of productivity in our society. The health system itself is not only a precondition for productivity but also, as a growth market for capital, employment, products and services, it has become a significant economic driving force which needs to be taken into consideration in the national product and as part of active economic and employment policy.

B5: Generation of value

A lack of a systemic view in health politics and the minimal cooperation and networking of health-related stakeholders amongst one another, with other political areas and with service providers outside of the healthcare system, is having a negative effect on the quality and costs of the system. The stakeholders in formal and informal provision of health services need to cooperate in a phased way so that their respective expertise can be used to an optimum. The optimal provision and coordination of competencies and technical infrastructure lay the ground for the efficient generation of value.

¹ The health system is understood as a wide area of the state, economy and society which includes the care for the sick, nursing and other forms of explicit management of illness and health. Nevertheless, according to the MetaForum, the health system also includes activities relevant for health beyond the healthcare system (relevant areas of education, research, economy etc.) and the informal sector (within families, neighbourly help and voluntary efforts).

C: Overarching values

If innovations are to contribute to a future sustainable health system, they should not just react to current demand but should orientate themselves towards superior values and principles. The European Union pursues the superior values of equity of health chances, comprehensive supply, access to high-quality care, distributive equity and solidarity² in health systems, whereby equal opportunities and solidarity are of most fundamental importance.

C1: Equal opportunities regarding health

The equality of chances for a healthy life is part of the principle of social justice. Access to a healthy and health-promoting lifestyle – the determinants of good health – and to prevention and treatment of sickness should be ensured independent of income or wealth; existing discrimination must be balanced out. Health cannot just be understood as the absence of illness but should be considered as the sufficient fulfilment of needs and wants regarding physical, mental and social well-being.

C2: Solidarity

Solidarity regarding the financing of maintaining good health, as well as of the care for the sick, contributes to the implementation of social security and is still supported by the citizens. The personal responsibility of the individual for his or her health must be supplemented by services by which the community supports persons concerned throughout times of specific burdens and illnesses. Social measures must be open to all concerned and must be effective to avoid diseases and to reduce burdens.

D: Superordinate objectives of an innovative health system

The MetaForum has developed three strategic directions towards which innovations of a modern health system should orientate themselves. A system which takes these factors into consideration and cultivates them will lead to more health and wealth than one that neglects them.

D1: Orientation to health and quality of life

The health system, including health politics, should be sustainably geared towards good health, quality of life and coping with chronic diseases. Preventing and treating diseases can only be one of many contributions; these factors should be imbedded in healthy conditions for everyday life, protection from health hazards, active health promotion and giving the population the abilities needed to live healthy lives.



Figure 1: Values, goals and urgent areas of innovation

Source: Fraunhofer ISI 2009

² Council Conclusions on Common values and principles in European Union Health Systems (2006/C 146/01).

D2: Sovereignty of the users

Health can only be achieved by the citizens themselves, who have to be supported by health promoting framework conditions and by professional services, if needed. The health system needs to be geared towards users, patients, clients of health insurance companies and citizens instead of service providers and payers. They are granted with supreme sovereignty in defining and carrying out their individual health goals. Their active behaviour has to be used and encouraged, thus the maximum possible self-determination and freedom of decision must be ensured, the necessary competencies for involvement must be conveyed and if necessary the users have to be supported by professionals in the adequate utilisation of services.

D3: Cross-sectoral action: Health in all policies

In order to reach a comprehensive understanding of health and its determinants, health needs to be recognised as a shared task for all political areas, all ministries and all parliaments at all levels of the federal state. The parliaments, all ministries and governmental departments should contribute towards health with all their best coordinated intentions and thereby take the unequal distribution of educational chance, power, money and other resources into consideration. Good health contributes to productivity in education, research, economy, employment etc. and becomes a critical basis and chance for society's efficiency.

E: Urgent areas of innovation

Particularly urgent areas of innovation can be deduced from the values and overarching goals on one hand and from the deficits of the health system on the other. They are connected by dynamic interdependence and interaction with the values and overarching goals as well as with each other (e.g. transparency regarding performance quality can lead to better patient sovereignty). This dynamic contains high potential for innovation.

E1: More active participation

The health system is based on citizens' self-determination in all decisions regarding their health. It encourages their rights, their competencies, their chances to co-determine and act in the planning and organisation of the health system, in the system of care and in the market. The requirements needed are both the readability of the system and the competencies of the citizens to act in a health-promoting way and shape and use the offers in a responsible manner. The clearly apparent developments in society need to be acted upon and encouraged. This can be realised especially at local or regional level.

E2: More investment in health

Efforts for good health need to be understood by individuals, institutions and the community as an investment in citizens' welfare and in the productivity of the community. Healthy growing up, working and ageing, reduction of avoidable invalidity, morbidity and mortality improve both the quality of citizens' life as well as the competitiveness of the economy. Resources, where possible, need to be channelled towards maintaining health, prevention and health promotion. Compensation for health treatment should be aligned with the health gains which are reached.

E3: More transparency

The need for transparency in the health system is tremendous, in both prevention and care. This must be ensured in an optimal way for everyone involved but especially for the users, insurees and citizens. Transparency is also significant for providers, financiers and politicians, which is valid with regard to products, structures, processes and outcomes as well as to quality, costs and choice. Assessment criteria and processes should also be transparent. Bringing about transparency should be an obligation for all decision-makers, producers and service providers. It is only through sufficient transparency that the system can be regulated reliably and that informed and active participation is possible.

E4: More orientation towards results

The health benefit for citizens is the guiding political principle for organising and financing the health system. Structures and processes for health should be efficient throughout the whole of society and should be measured against the benefit in health for the citizens. The condition for realising this guiding principle is to establish good health as a goal and dimension in many political areas.

E5: More sustainability

Sustainability in the health system means attentive resource use, permanent affordability, fairness between generations, protecting sufficient qualified and motivated staff as well as the system's ability to react to changed basic conditions. Sustainability needs to become a guideline for priority decisions, financing plans and incentives. Particular consideration is needed in maintaining health and healthcare for children, which is also a task for society as a whole under financial aspects. In the long term, the climate change will be a huge challenge for public health. Environmental sustainability therefore also means safeguarding health. By using materials and energy economically, the health system could also achieve its own relevant contribution to reducing climate change.

E6: More integration

Integrated and networked models of care, which clients can choose from, need to replace the fragmented forms of care available. Financial incentives must encourage this development. Integrated services should be developed for maintaining good health by prevention and health promotion as well, e.g. under the setting-approach within companies, schools, nursery schools, leisure centres etc. Better integration of prevention and health promotion with sickness care, nursing and social services contributes to an improvement in the quality and sustainability in the results of treatment.

E7: More subsidiarity

Subsidiarity in the health service needs to be re-thought out and implemented anew. Health is the task of a huge number of people and protagonists in the public and private sectors, whose activities must link together and complement each other in a flexible way. This includes each individual being responsible for his or her own lifestyle, which can be complemented with care and welfare provision by state facilities when needed. In the health system this takes a variety of offers for granted which precede and follow the medical care system: new approaches in nursing, the support of patients', insurees' and citizens' active participation and allowing self-help by offering a suitable framework. Rigid structures, hierarchy in the division of labour and models for financing must be abandoned.

E8: More economic and societal benefit

The health economy must be acknowledged and understood in its contribution towards economic growth and to health and quality of life on all social levels. New strategic directions are needed which transcend above the current areas of responsibility in health politics, include other ministries and develop new partnerships. Economically rational action, i.e. applying available resources in places which can expect the largest health benefits from a societal perspective must be allowed by organising transparent structures and processes.

F: Exemplary impulses for innovation

Innovation impulses are activities which use existing trends and unfold an own dynamism in order to change the health system towards its overarching goals. The innovation impulses each contribute to more than one of the above mentioned areas of innovation (e.g. goals for health foster user orientation, results orientation and facilitate integrated care across different institutions). They can be considered separately, but mostly will have larger effects along with others (e.g. obligation to disclose data along with a patient platform for more transparency). Most of the effects can only be expected in an indirect way, as for example more transparency enables the taking over of responsibility and this leads to more efficient utilisation of care.

The following innovation impulses were identified as especially effective by the MetaForum working groups.

Innovation impulses for more orientation towards results and more integration

- Statutory and private health insurance companies, the Robert-Koch-Institute as well as the public health service together with citizens, insurees and patients define joint measurable and comparable health targets at national and regional level (e.g. vaccination rates, sports activities) and establish corresponding regular reporting.
- The relevant ministries of health, food, agriculture and consumer protection, of families, seniors, women and youth, of environment, of traffic, construction and urban development, of research and education issue a common research programme to develop outcomes criteria and quality standards from the users' point of view which are oriented towards health instead of illness. As a result, instruments for evaluation are available, which are routinely applied by the suppliers and the results of which are made publicly available.
- The health insurance companies are obliged by the legislator to publish the health-related outcomes for their insured persons in an aggregated form.
- The statutory health insurance companies together with the scientific societies, service providers and manufacturers develop integrated plans for regional healthcare (paths of treatment) and cross-sectoral mechanisms of remuneration to create more efficient courses of treatment and to establish transparency.
- The associations of health insurances, hospitals, primary care physicians and other health service providers introduce a plan for reimbursement aimed at health outcomes (pay for performance; payment only for proved improvement of health) first at a municipal and regional level in form of a pilot phase. This process is accompanied by an evaluation and the results are published, so that the new principle can evolve and spread in the sense of a "learning system".
- The legislator merges care for sickness and long-term care in a unified service area.

Innovation impulses for more active participation and more transparency

- The Ministry of Health creates the conditions along with the Federal Government for realising the patient's rights to obtain his or her own personal health data (from the patient's obligation to allocate the information to the system's obligation to provide the information). Besides the legal preconditions, this includes the technical infrastructure.
- The legislator creates a transparency obligation for all decisions made in healthcare. Insurers' and suppliers' data are made available to research institutions and to the public.
- Patients and civil unions set up an internet platform for assessing health innovations.
- The health insurance companies develop optional tariff models with favourable conditions for users who actively take part in their own health process.
- In cooperation with the local authorities, the health insurances offer health coaches to insured persons in order to offer them support in navigating the health system.

Innovation impulses for more subsidiarity

- Legislators, government and self-government create conditions which allow the transference of suitable duties, which have so far been reserved for physicians or have been covered insufficiently, to other health professions. The latter are furnished with larger autonomy.
- Universities and technical colleges develop curricula in which health professions are prepared for providing integrated care in common teaching units.
- The ministries of culture and education / MCE-conference and the Ministry of Health systematically integrate health education into the curricula from kindergarten up to professional continuous education levels.

Innovation impulses for more sustainability, more investment in health and more economic and societal benefit

- The Federal Government analyses regulatory obstacles for the health economy with its huge number of goods and job markets and reduces these obstacles with the Federal Parliament, the federal states and local authority districts as far as possible.
- The public media launch a concerted effort to spread a good example for health in all areas of life amongst children and youngsters.
- The Federal Parliament and the Federal Government conclude a national pact with other social groups for children's and youth's health.
- Ministry of Health, Ministry of Finance and Ministry of Labour agree on a non-contribution policy by the public healthcare insurances for labour costs and develop alternative financing models.
- Parliament defines the criteria for a benefits catalogue and checks this regularly with regard to the admission of innovations and also with regard to the removal of benefits.

These activities will separately or conjointly, directly or as interim steps lead to more active participation, more investment in health, more transparency, more orientation towards results, more sustainability, more integration, more subsidiarity and lead to more economic and societal benefit and thus contribute to a durable healthcare provision. Mere developments within the existing structures of the health or illness care system will not suffice to reach these goals. Initiators and participants of the MetaForum will further discuss these recommendations with their addressees and further interested persons and support their implementation.



Contact: Dr. Bernhard Bührlen
Fraunhofer Institute for Systems and Innovation Research
Telephone: +49 (0) 721/6809-182
E-Mail: bernhard.buehrlen@isi.fraunhofer.de
Internet: <http://www.metaforum-innovation.de>