

Introduction to Spanish and Catalan Public Health Care System



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Introduction to the Spanish and Catalan Public Healthcare System



Barcelona

 **Bellvitge**
Hospital Universitari



Introduction to the Spanish Public Healthcare System

CHARACTERISITICS of the SPANISH HEALTH SYSTEM

- Funded by Taxes
- Decentralized to Autonomous Community Governments
- Universal Coverage and Free Access
- Large Portfolio utilities and very high Quality
- Co-payment on Drug Prescription
- Provision mainly by Public Institutions



Introduction to the Catalan Public Healthcare System

1986 Spanish Health System (“NHS”)
Ley General de Sanidad (LGS)

1990 Llei Ordenació Sanitària de Catalunya



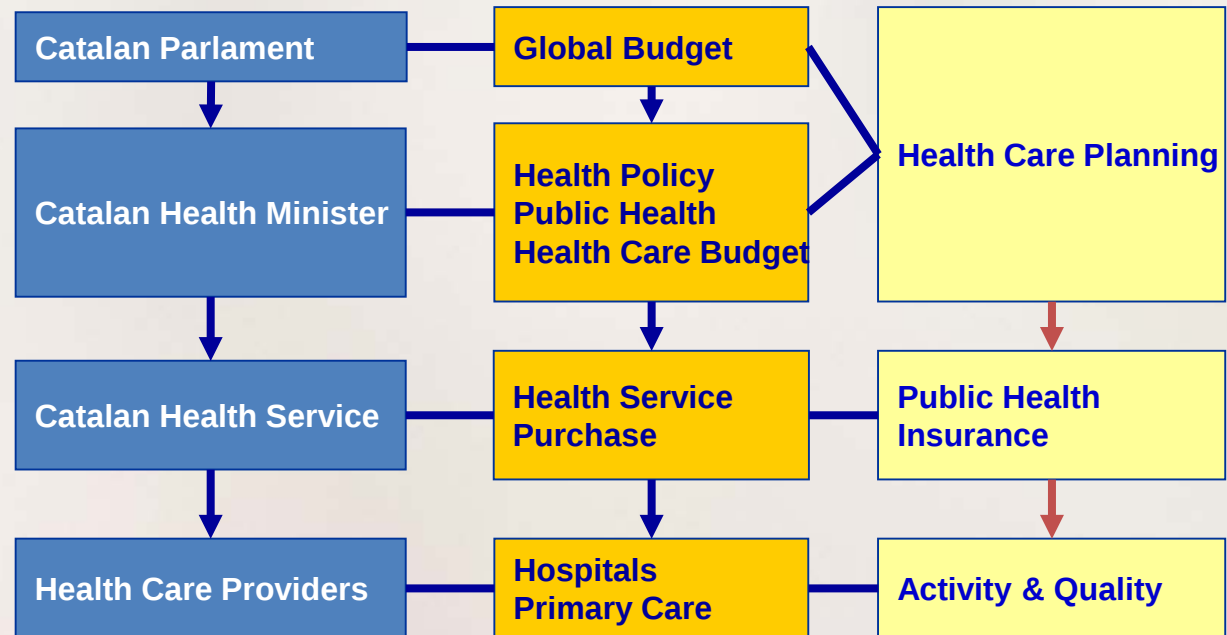
Health Care Department
Catalan Health Service
Hospitals, PCC

Health Policy, Planning
Finances, Funding
Health Care Suppliers

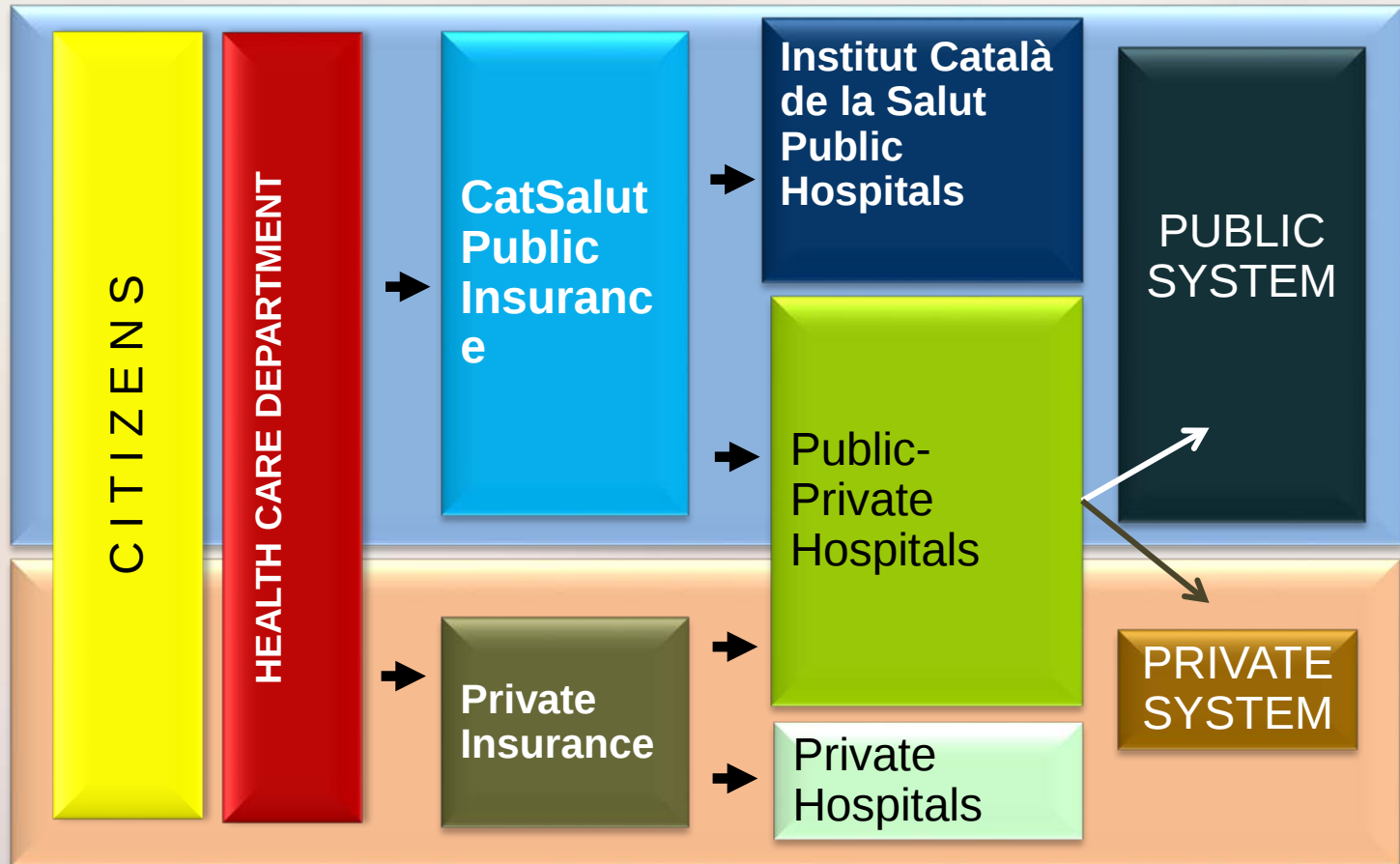
Primary Care Centers
350

Hospitals
68

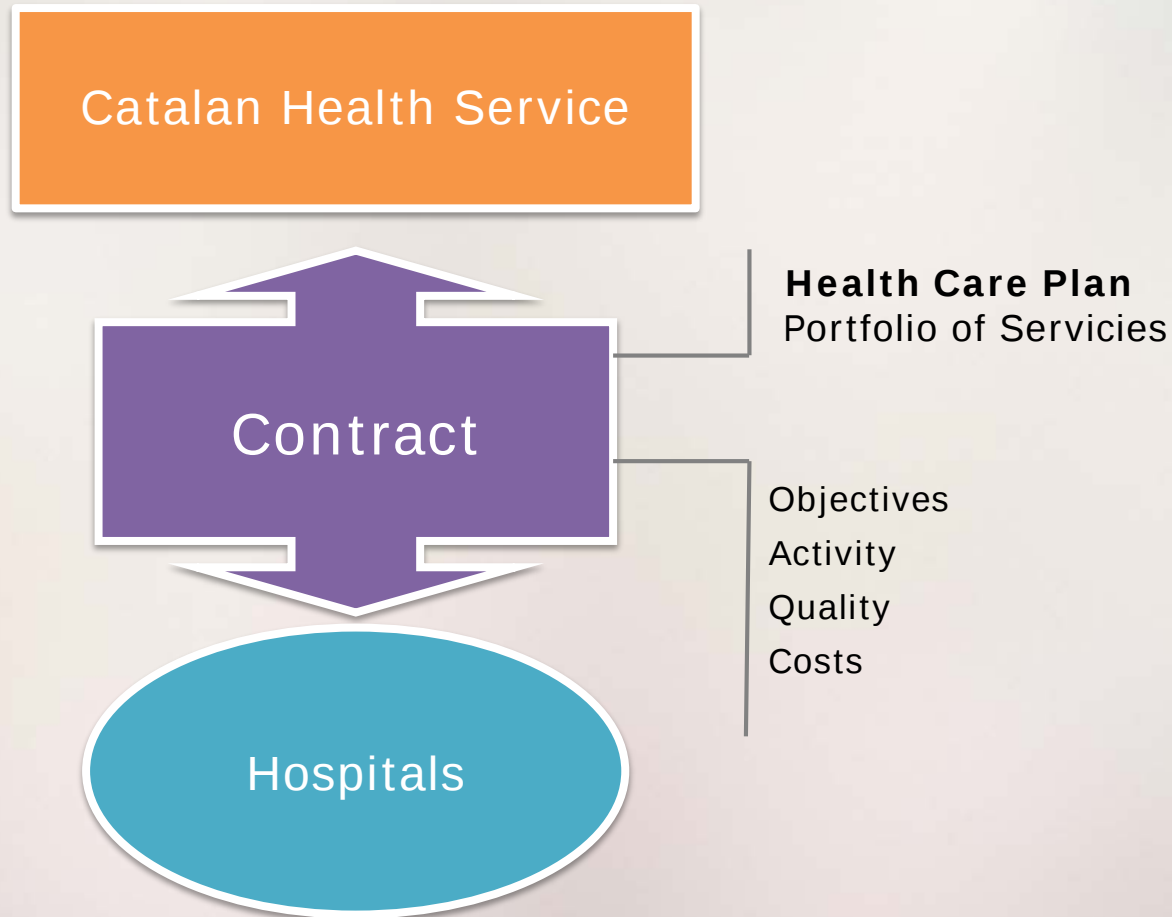
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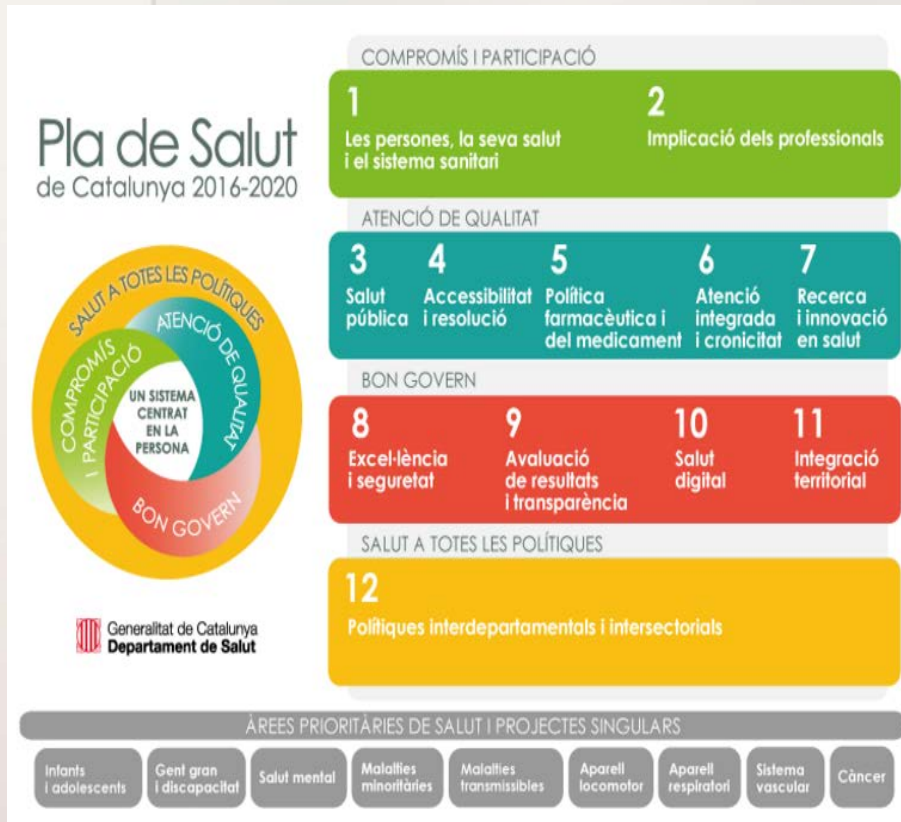
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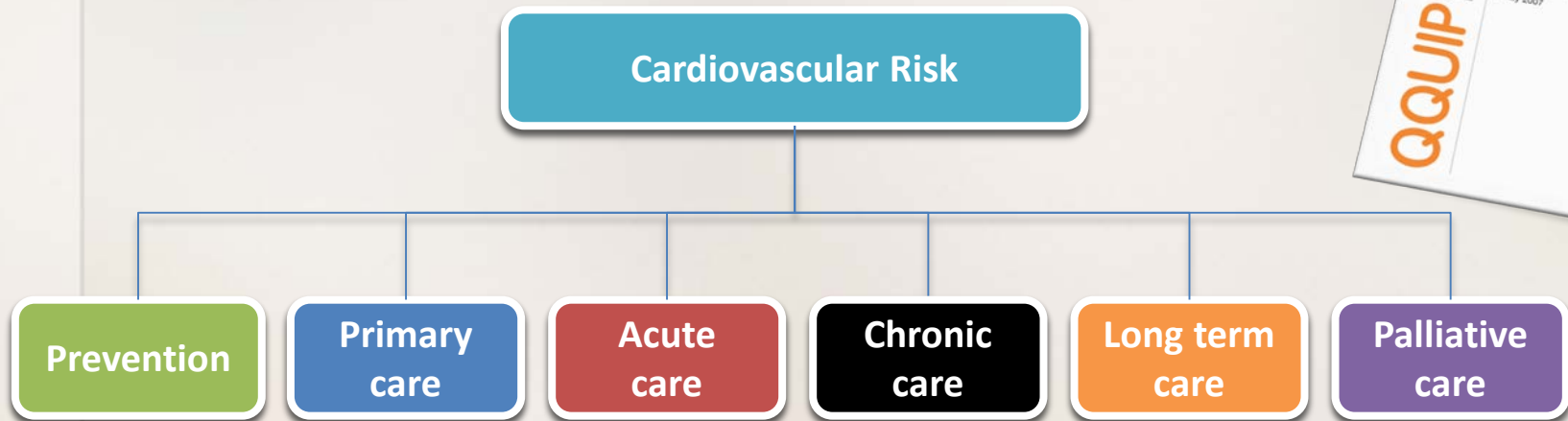


Catalan Healthcare Plan

- Health needs and goals
- Portfolio of Services
- Funding and Resources
- Outcomes: Activity, Quality and Costs
- Sustainability of System

Healthcare Delivery Models for Heart Failure: The Continuum of Care

The Health Foundation is an independent charity working to improve the quality of healthcare in the UK

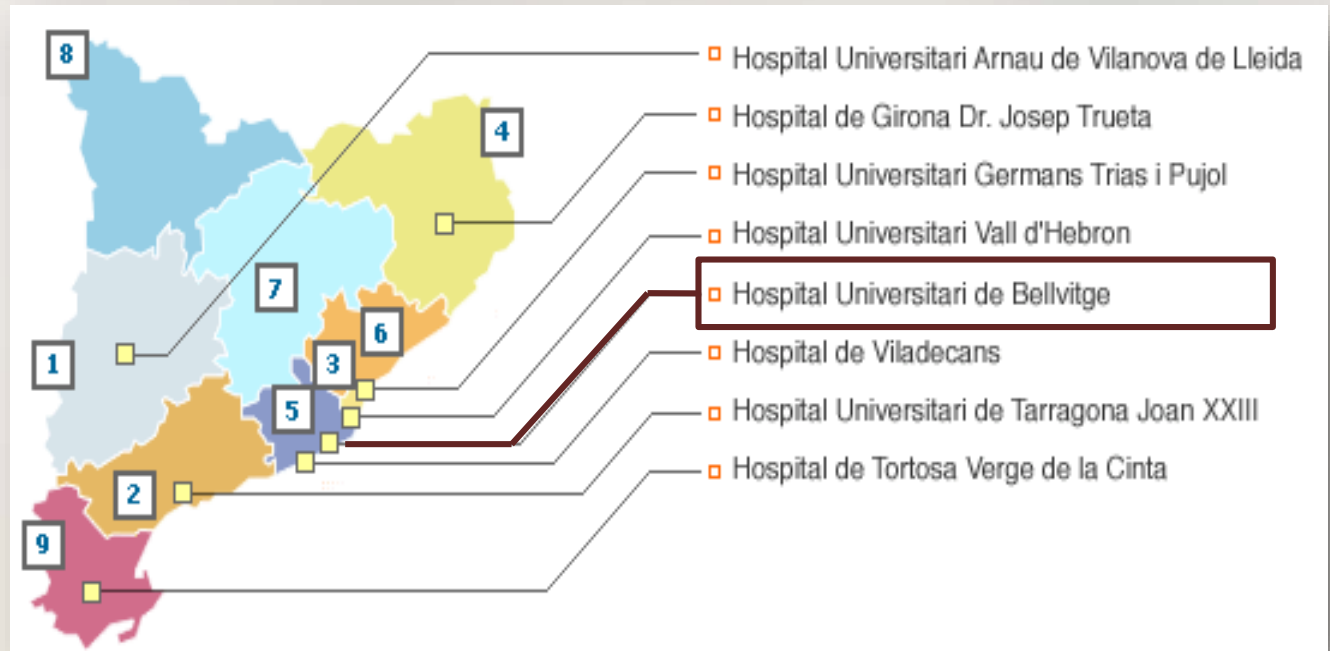


Heart Failure traverses the *continuum* of care because chronic conditions call for different needs in different settings:

1. monitoring of symptoms in the primary care setting
2. effective treatment of exacerbations in the acute care setting
3. long-term care due to increased frailty and palliative care at the end of life.

XCorbella

Introduction to the Bellvitge University Hospital



Introduction to the Bellvitge University Hospital

Bellvitge University Hospital (Barcelona South Metropolitan Area)

Primary Care Hospital	300.000 population
Secondary Care Hospital	1.3 M population
Tertiary Care Hospital	2 M population

750 beds

30 OR

3.500 workers

270 M € budget

40 specialties (adults)

33.000 inpatients/year (9.500 high complexity)

180 organ transplants/year

110.000 ED visits/year

12.000 major surgery interventions/year

450.000 outpatient visits/year



Introduction to the Bellvitge University Hospital



UNIVERSITAT DE
BARCELONA

Medicine, Nursing, Odontology, Podology
40 Masters and PostGraduated Studies
500 medical students



HUB-ICO-UB
2on Spanish ranking
800 researchers
4.000 impact factor/year
26 M € budget

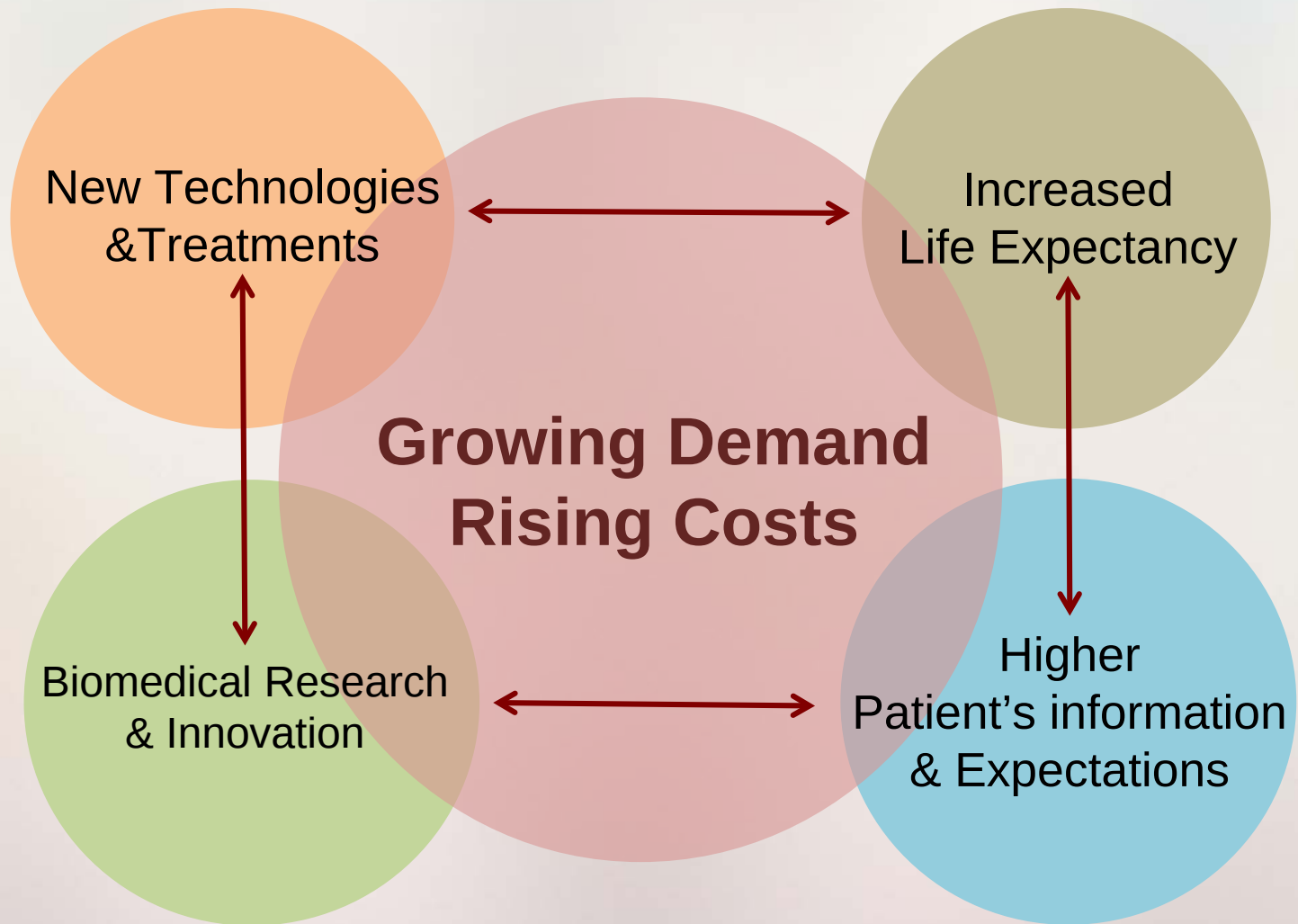
Determinants of Current Healthcare Context



**new changes...
new problems...
new needs...
new challenges...
to face and solve !**

Aging
Chronicity
Multi-morbidity
Social changes
New diseases
Role of patients
Higher information
More expectations
Growing demand
Rising costs

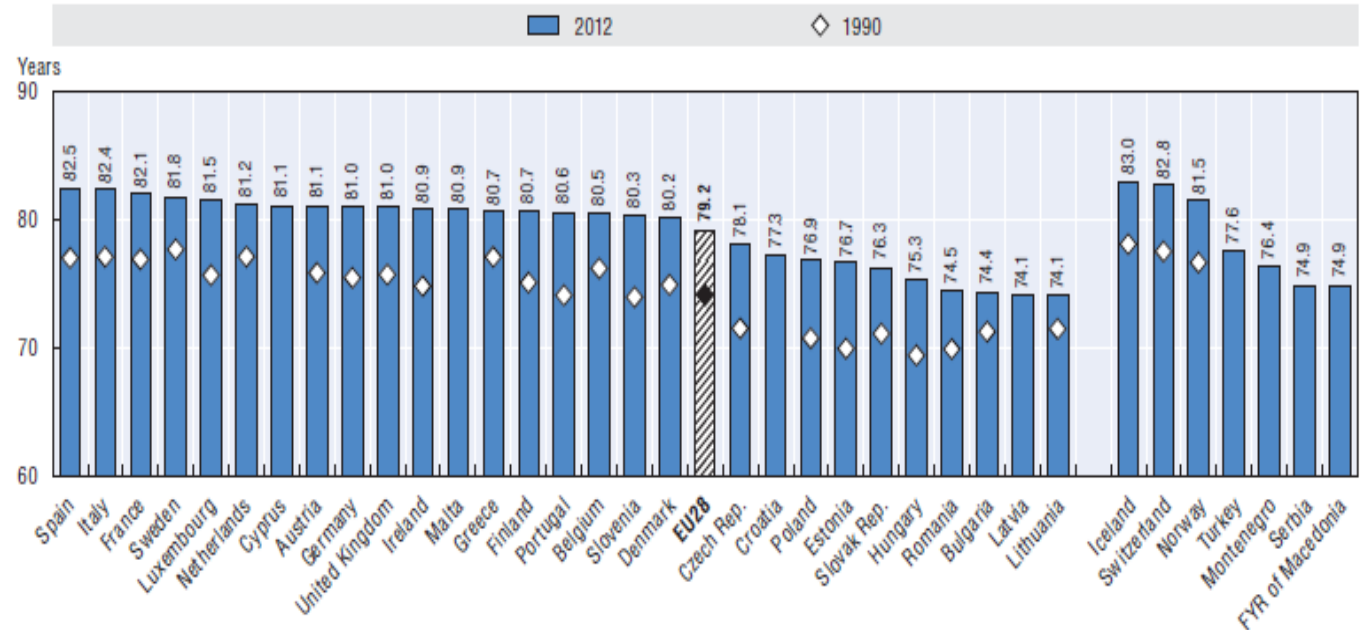
Determinants of Current Healthcare Context



Determinants of Current Healthcare Context



1.1.1. Life expectancy at birth, 1990 and 2012



Source: Eurostat Statistics Database completed with data from OECD Health Statistics 2014, <http://dx.doi.org/10.1787/health-data-en>.

Determinants of Current Healthcare Context

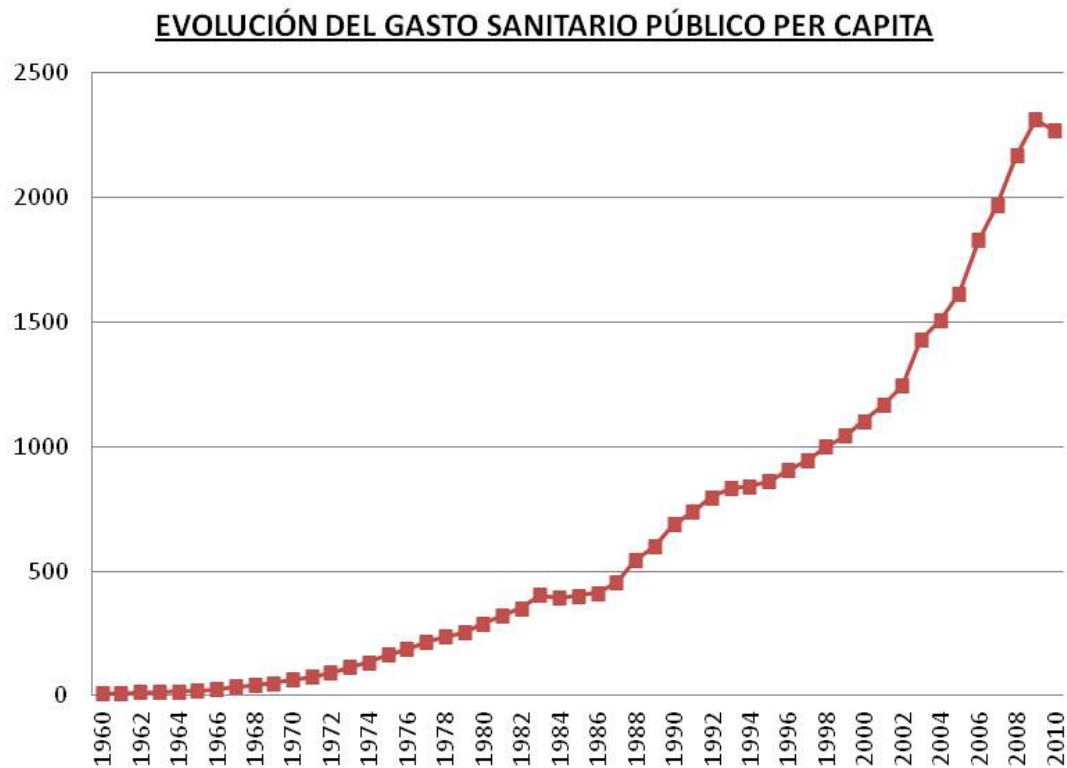
**Patient Needs
Rising Costs**

**Limited Financial
Resources**



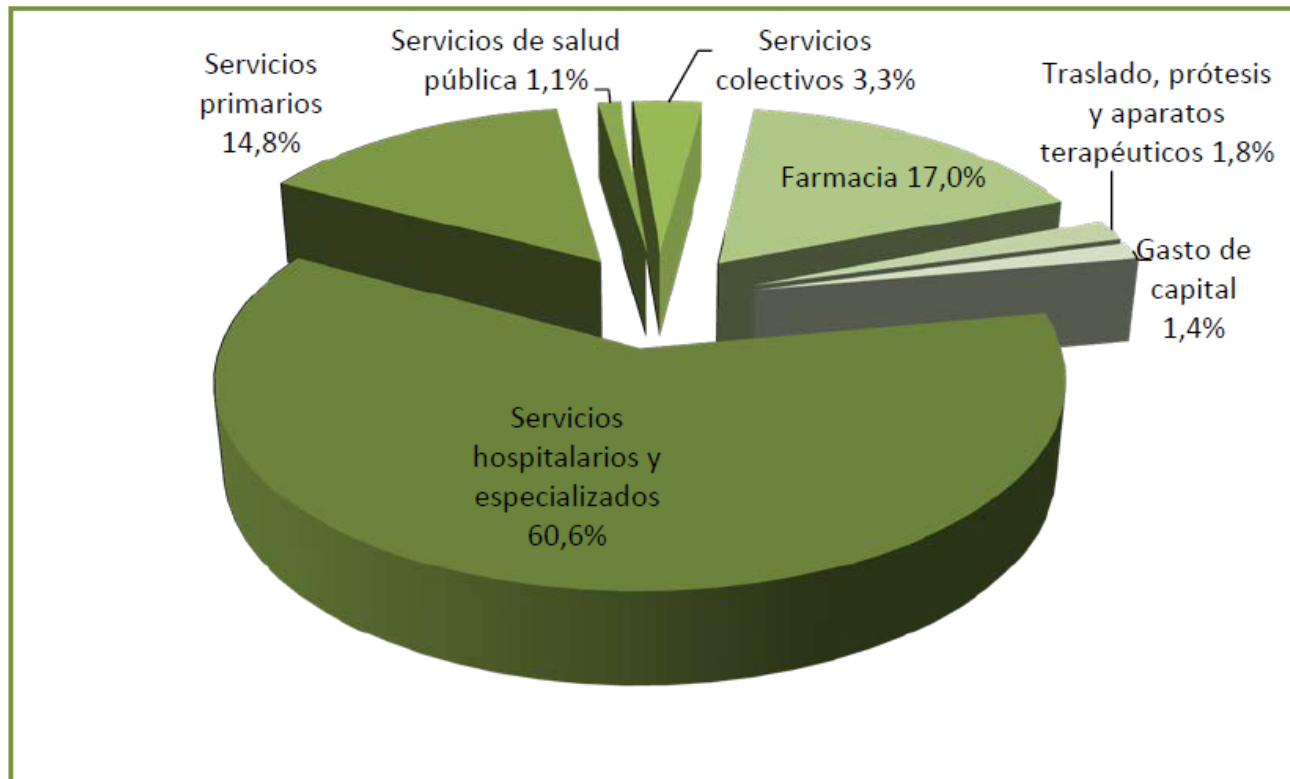
Health care is on a collision course with economic reality

Evolution of Healthcare Expenditure in Spain



Distribution of Healthcare Expenditure in Spain

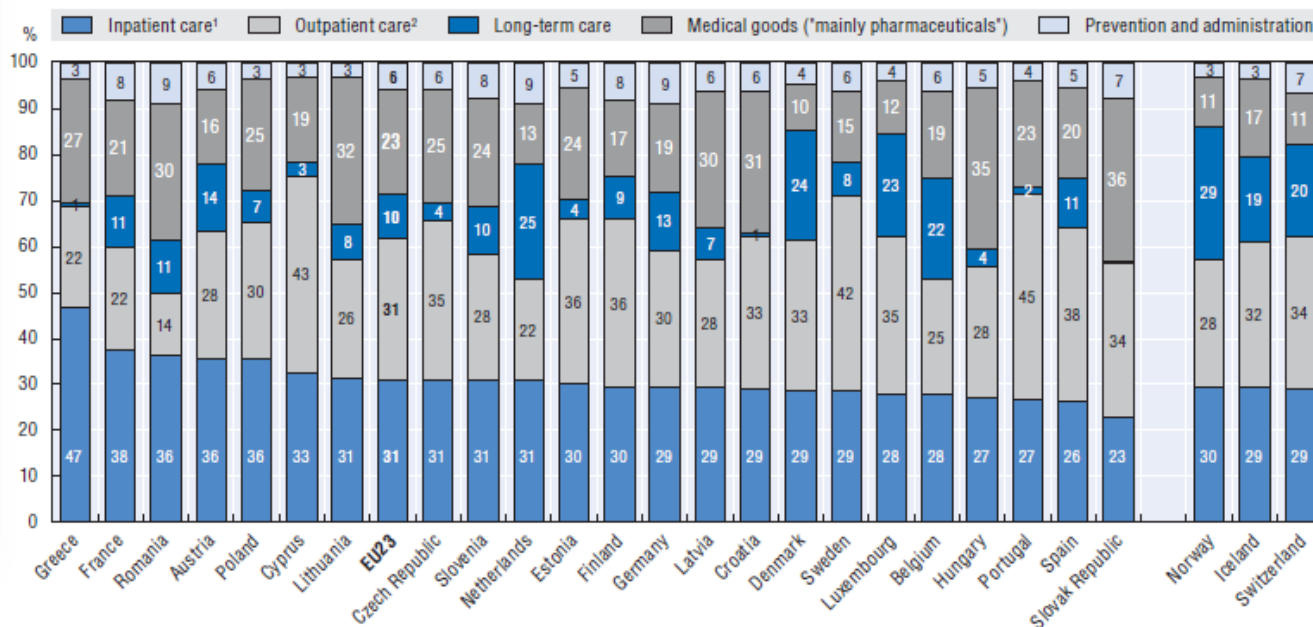
Gráfico 4. Gasto sanitario público consolidado según clasificación funcional. Estructura porcentual. España, 2013



Distribution of Healthcare Expenditure in Europe



6.3.1. Current health expenditure by function, 2012 (or nearest year)



Note: Countries are ranked by inpatient care as a share of current health expenditure.

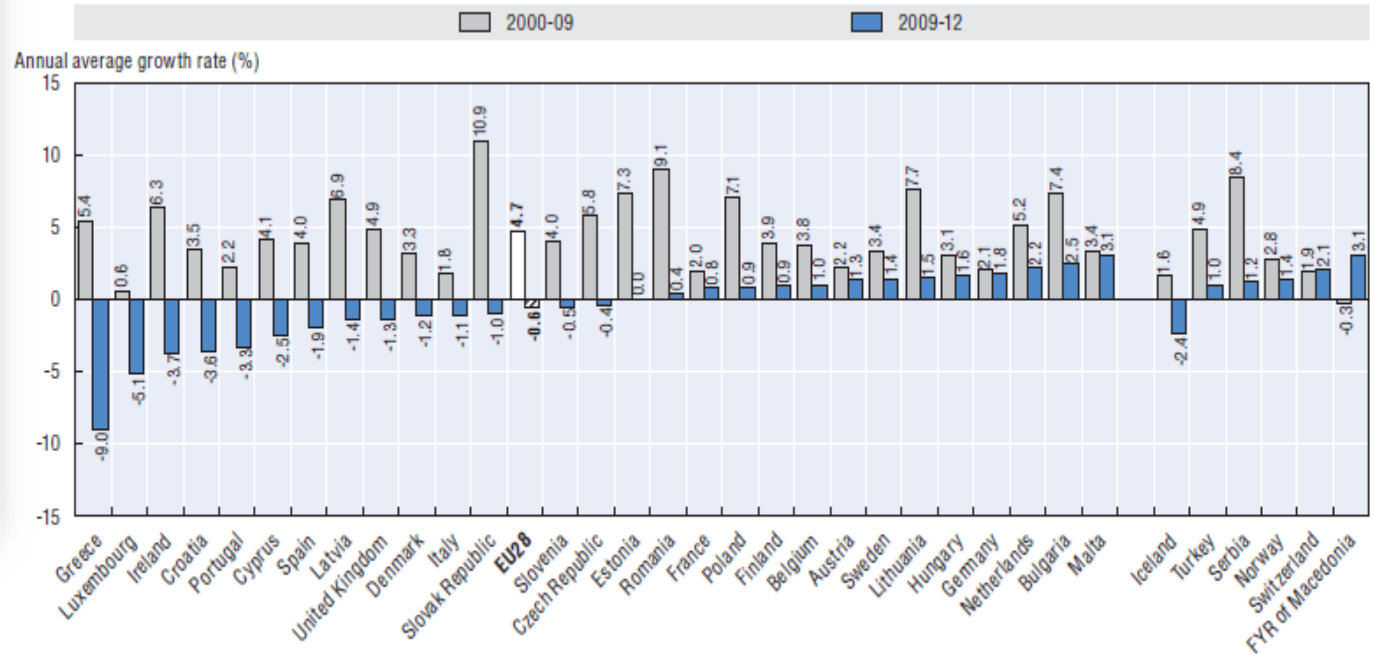
1. Refers to curative-rehabilitative care in inpatient and day care settings.

2. Includes home-care and ancillary services.

Source: OECD Health Statistics 2014, <http://dx.doi.org/10.1787/health-data-en>; Eurostat Statistics Database for non-OECD countries.

Evolution of per Capita Health Expenditure in Europe

6.1.2. Annual average growth rate in per capita health expenditure, real terms, 2000 to 2012 (or nearest year)



Source: OECD Health Statistics 2014, <http://dx.doi.org/10.1787/health-data-en>; Eurostat Statistics Database; WHO Global Health Expenditure Database.

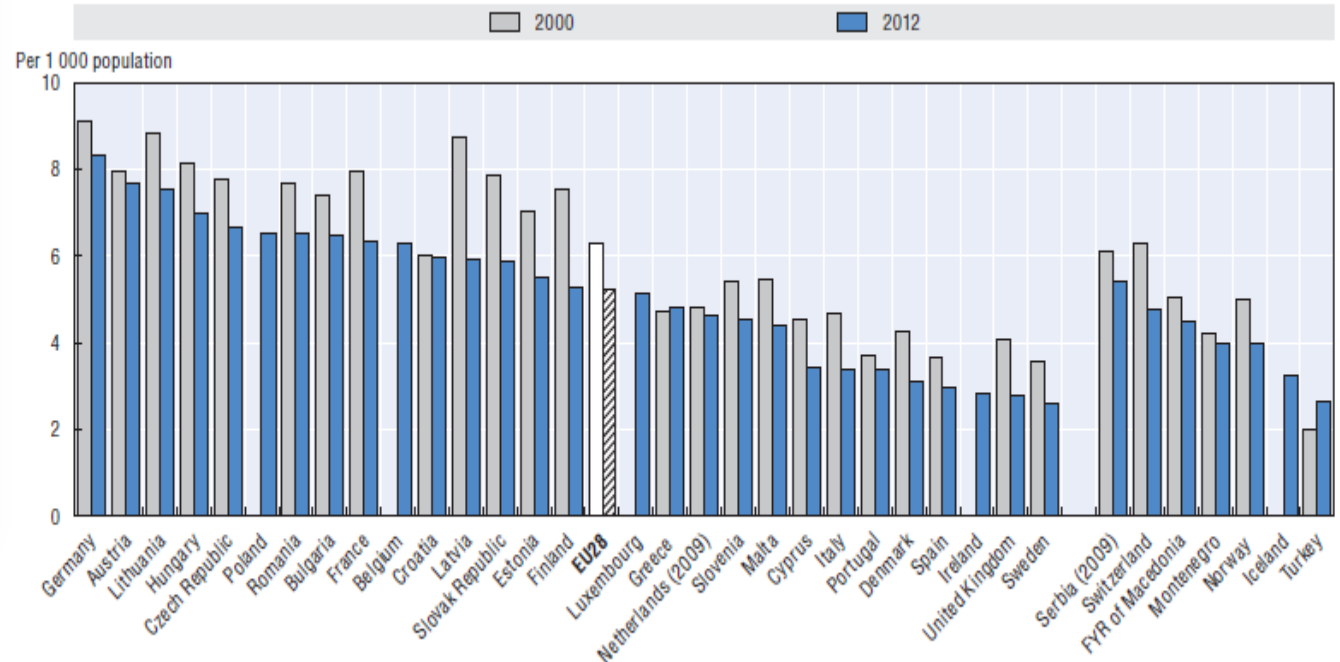
StatLink <http://dx.doi.org/10.1787/888933155816>



Evolution of Hospital Beds per 1000 population in Europe



3.5.1. Hospital beds per 1 000 population, 2000 and 2012 (or nearest year)



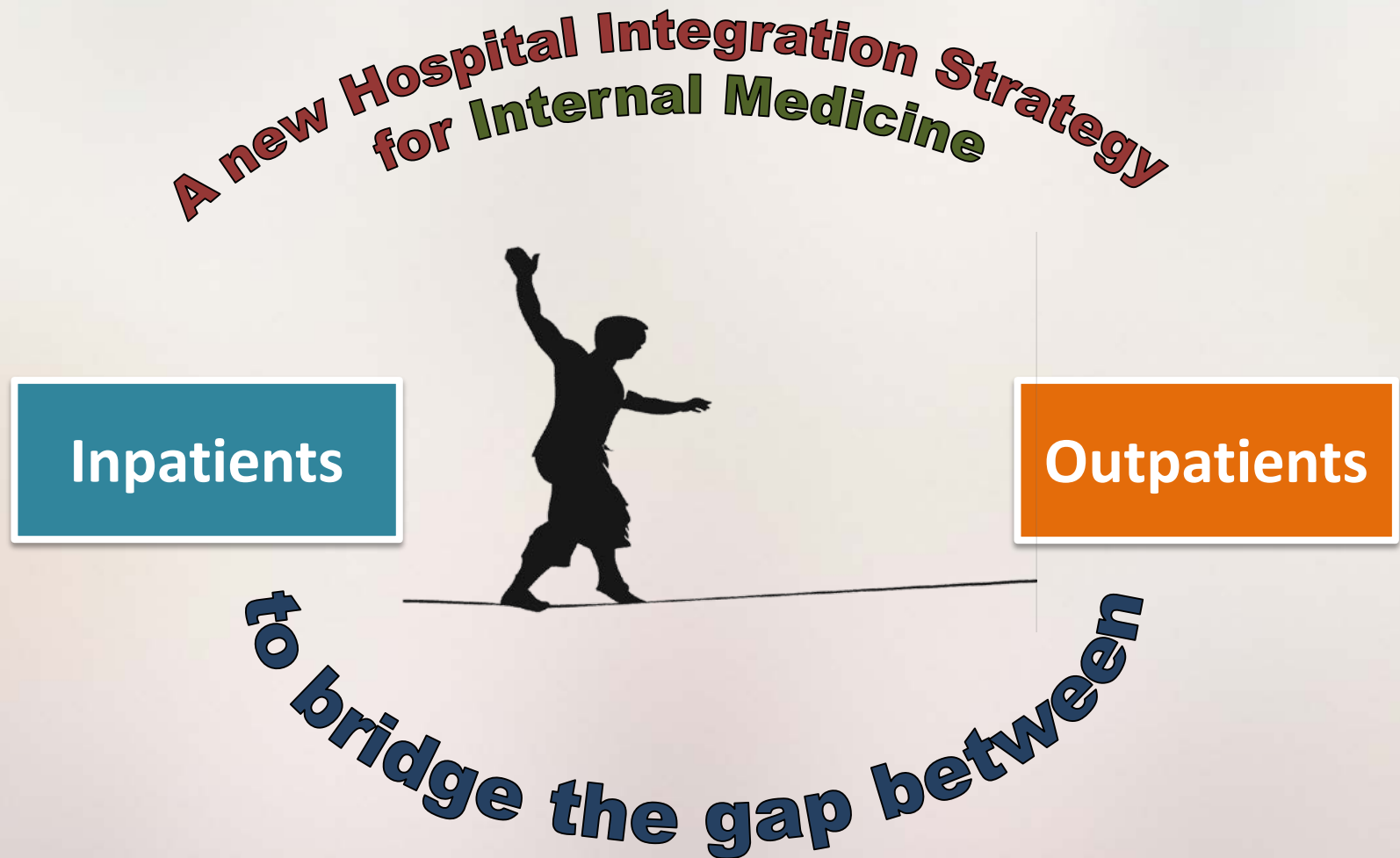
Source: OECD Health Statistics 2014, <http://dx.doi.org/10.1787/health-data-en>; Eurostat Statistics Database; WHO Europe Health for All Database.

Determinants of Current Healthcare Context

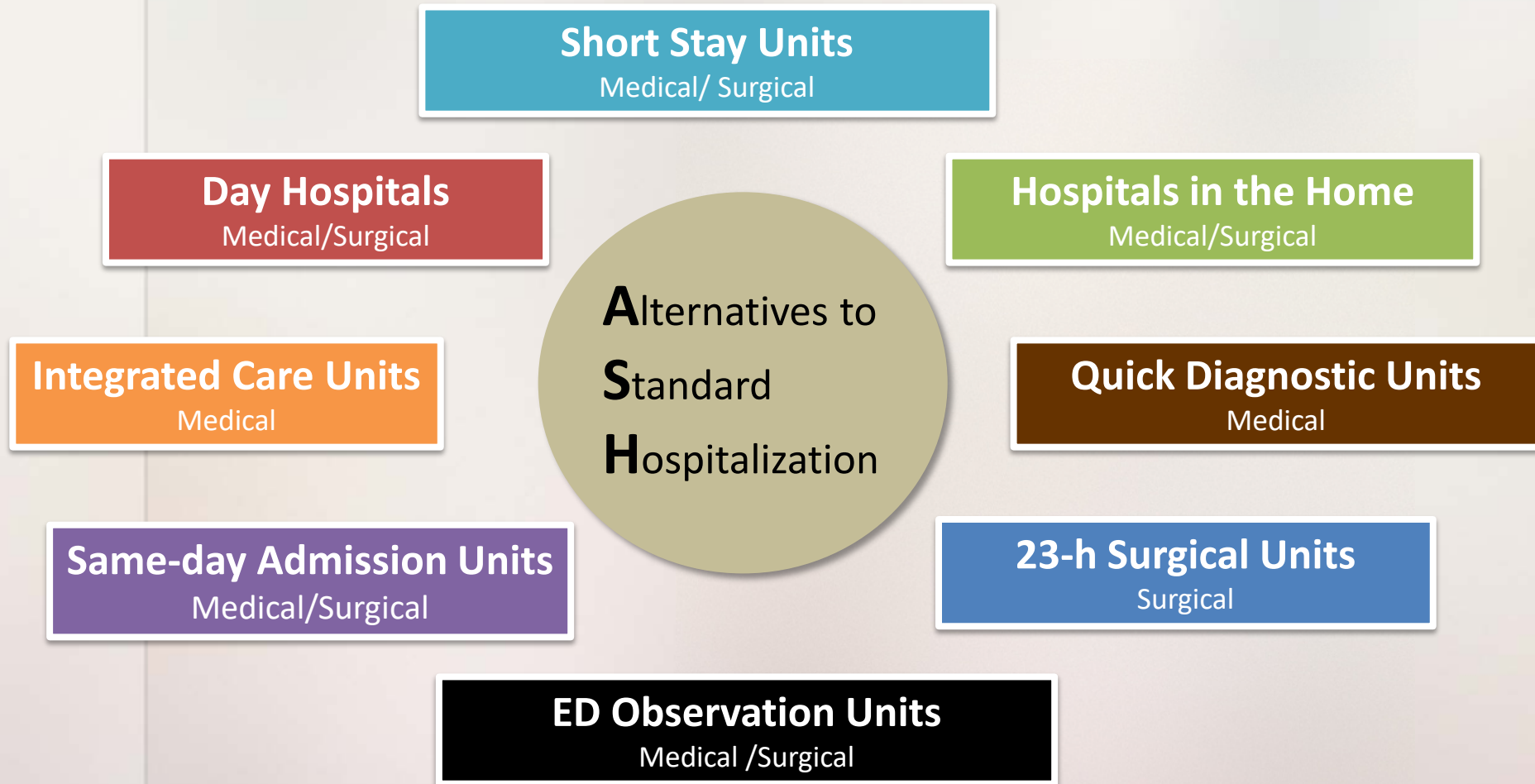
Lack of hospital beds forces to shorten hospital stays



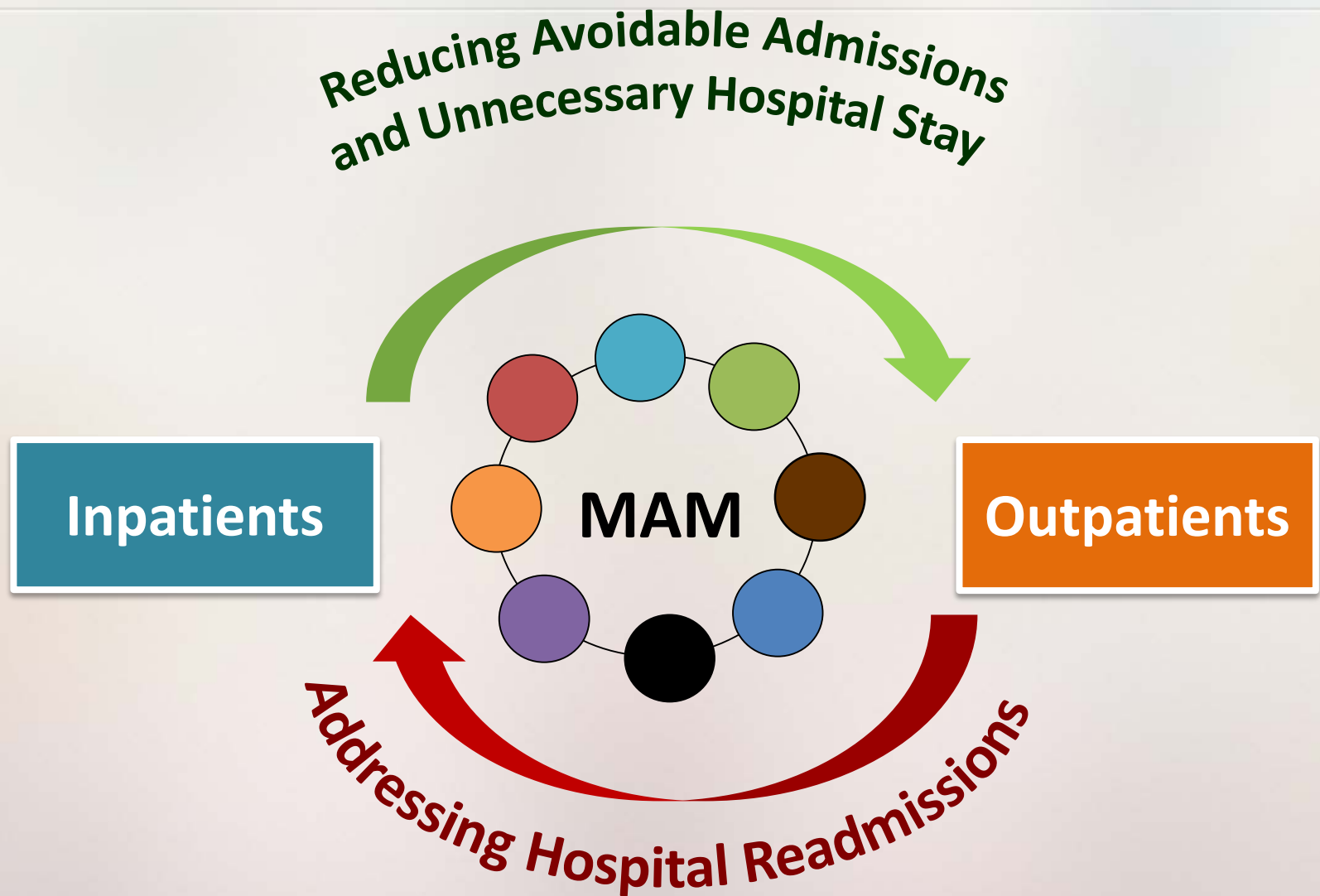
Role of Internal Medicine



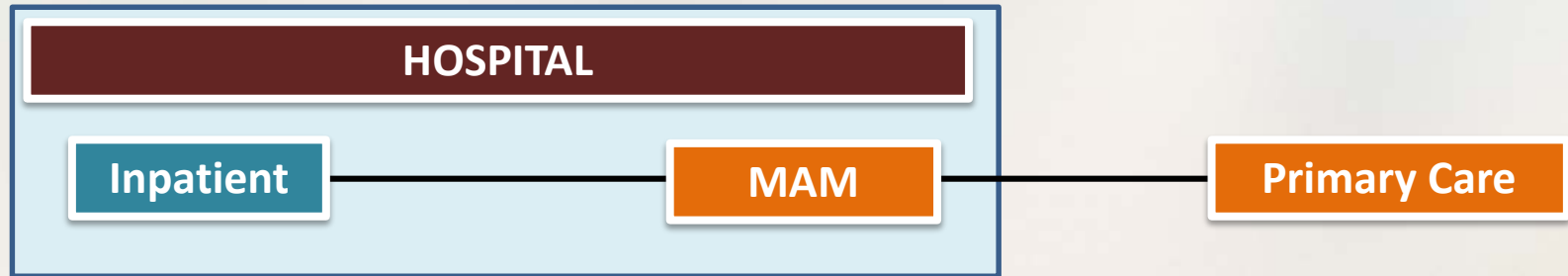
To bridge the gap between Inpatient and Outpatient Care



To bridge the gap between Inpatient and Outpatient Care

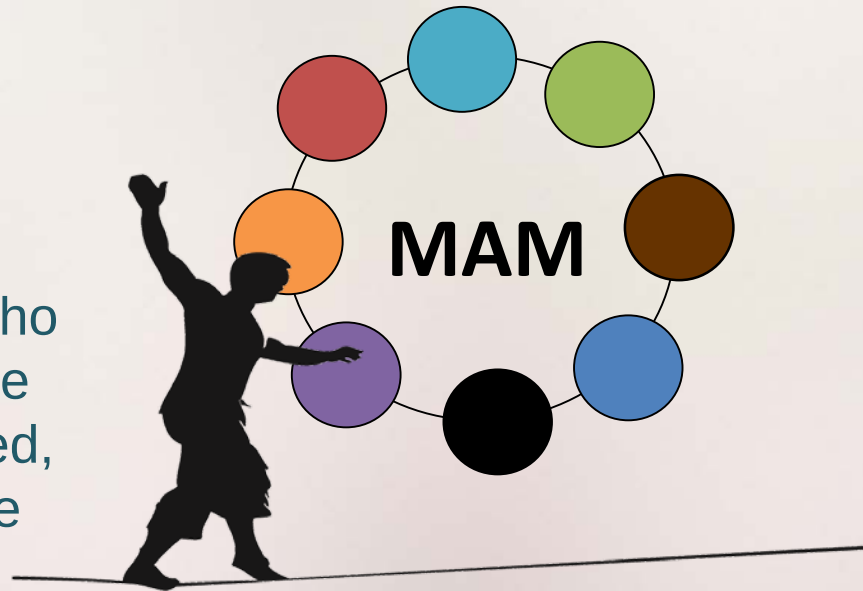


To bridge the gap between Inpatient and Outpatient Care



In

Patients who have to be hospitalized, should be there

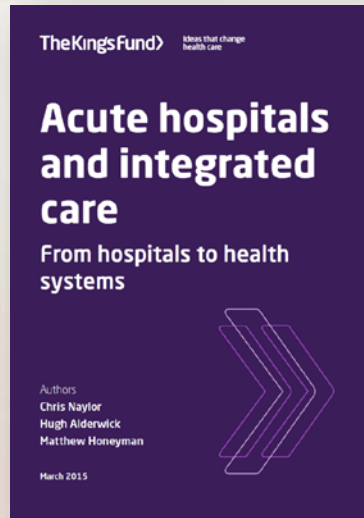


Out

Patients who do not have to be hospitalized, should not be there

To bridge the gap between Inpatient and Outpatient Care

Our Internal Medicine Department



Inpatient Care

Leadership in the attention to severely ill admitted patients

- Acute exacerbation of Multi-morbidity & Geriatrics
- Active medical support to Surgical Departments
- Chronically critically patients after ICU admission
- Complex and Rare Diseases

Outpatient Care

Leadership in the use of “Major Ambulatory Medicine” by using “Alternatives to Standard Hospitalization”

Primary Care

Leadership in the prevention and continuum care of adult patients with various medical conditions and chronic diseases.