

IHF MEMBERS SURVEY – Hospitals and Multi-Chronic Conditions

A survey on “Hospitals and Multi-Chronic Conditions” was sent to IHF Full Members and Associate Members in countries not represented by Full Members.

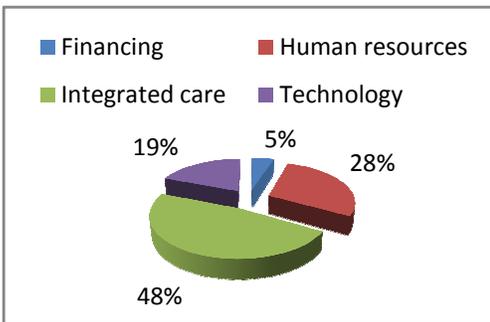
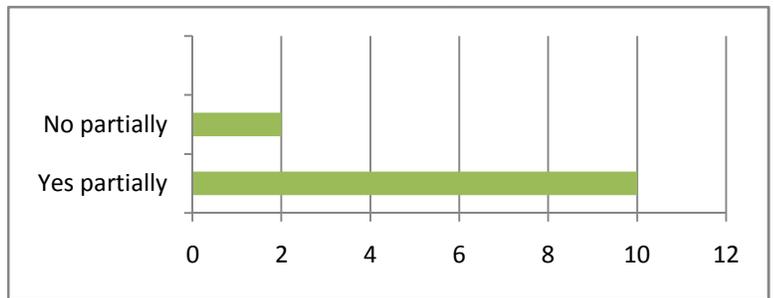
The total number of respondents was 12 from the following Countries: Australia, Austria, Belgium, Canada, France, Japan, Korea, Philippines, Republic of Moldova, Switzerland, United Arab Emirates and United States of America.

All the 12 surveyed organizations agreed that responding to health needs of multi-chronic condition (MCC) patients represents one of the major challenges hospitals will have to face over the next decade.

MCC CHRONIC & SPECIFIC CHRONIC DISEASES	10
IMPUR MANAGEMENT	8
INTEGRATED CARE	4
QUALITY	4
TECHNOLOGY	3
TERMINAL PATIENT	2

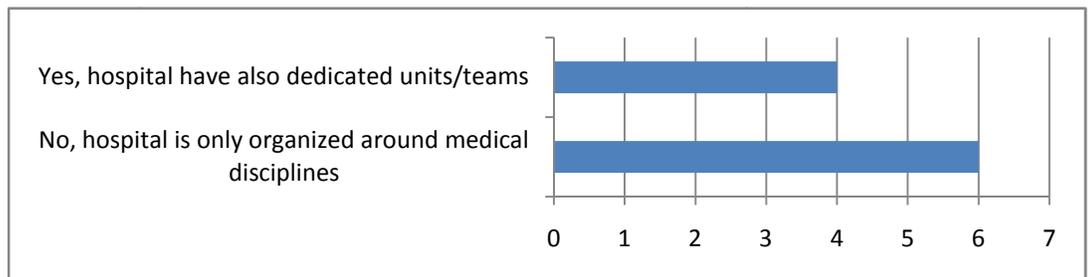
The complexity of the healthcare panorama is growing and hospitals will have to face new challenges. The organizations surveyed were asked to highlight the 3 major challenges hospitals will face over the next decade. A summary of the responses is showed in this table:

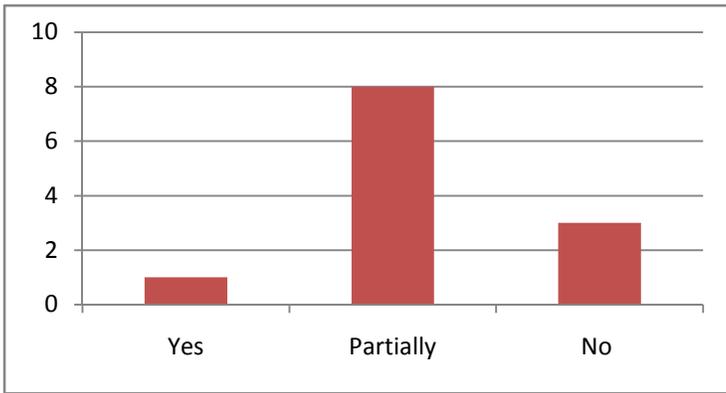
The majority of the surveyed organizations consider that hospitals were responding adequately to the health needs of MCC patients. The principal elements of weakness are the fragmentation of care (inside and outside the hospital) and the limited efficiency.



From the answers provided, it is possible to identify four principal areas of improvements for hospitals in order to better respond to MCC patients’ needs: financing, human resources, integrated care and technology. For almost all respondents the improvement of integrated care results to be the principal area to be improved.

For 50% of the surveyed organizations hospitals are only organized around medical disciplines and there are no dedicated units or organizational frameworks for treatment of MCC patients. In the majority of cases of those who answered positively to the question, the primary MCC for which units and frameworks were established was diabetes.



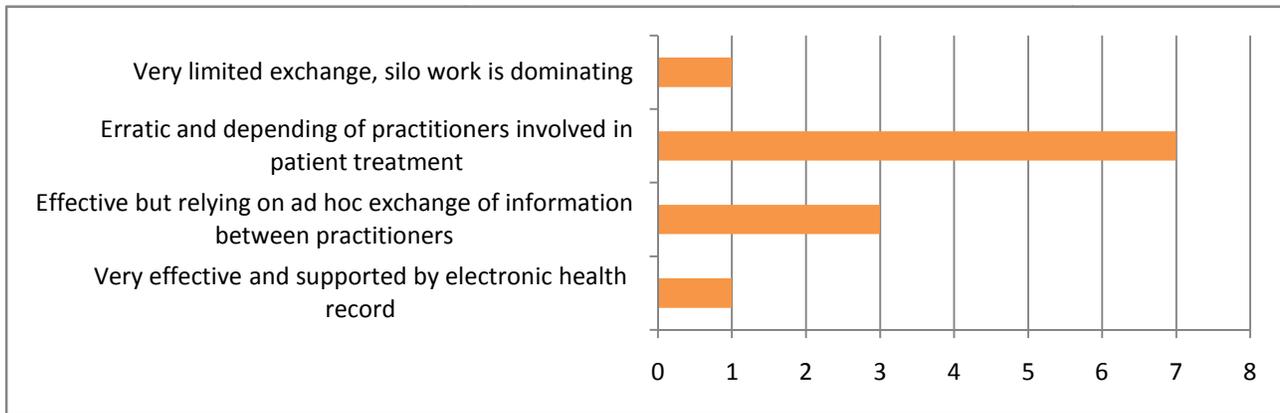


This chart shows the answers provided by all respondents concerning the quality of collaboration between hospitals and other health professionals/organizations responsible for the care of MCC patients.

Hospitals, for the majority of the surveyed organizations, form an integral part of the formal network in MCC patient care. However, form 75% of the answers appears that these networks are inadequate in meeting much of the needs of the

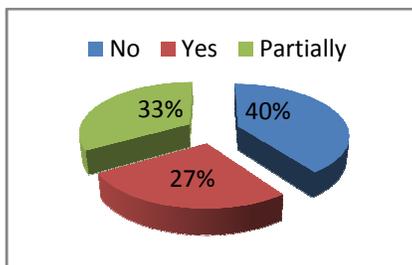
patients. Regarding the leadership role played by the hospital in these networks, the majority considers this may vary depending on the country's care network system.

The chart below shows that the majority of respondents consider as erratic the continuum of care for MCC patients in the process of patient transfer between hospitals and other healthcare organizations.



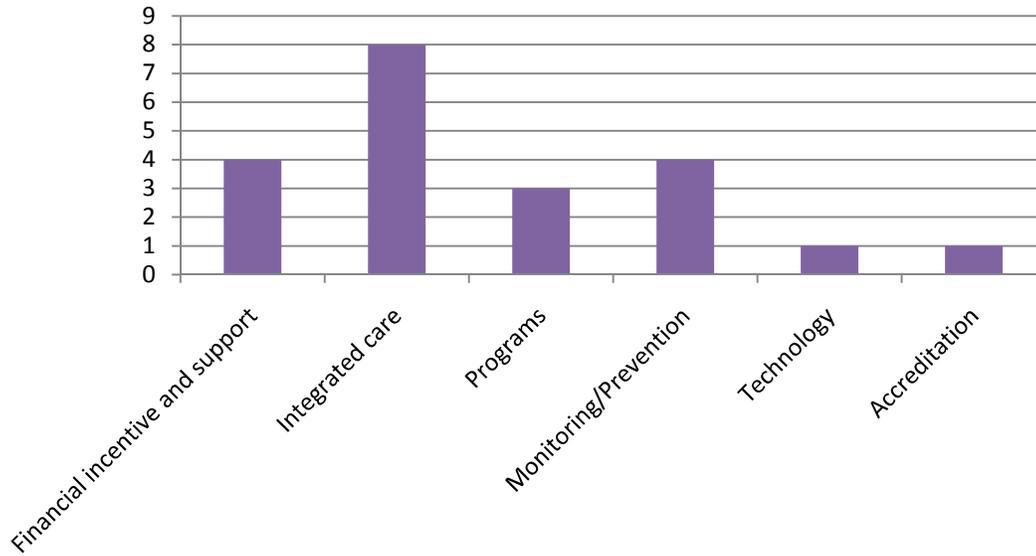
For more than 80% of the organizations surveyed, the payment system represents an obstacle for hospitals in the care of MCC patients.

More than 50% consider that hospital staff (including medical doctors) is well trained to respond to the needs of MCC patients. Furthermore, nine out of twelve answered that organizational structures of hospitals are inadequate to meet the needs of MCC patients.



This table shows that the majority of respondents consider that hospitals are not playing a significant role in supporting patient empowerment.

The primary measures that would reduce admission or readmission of MCC patients as suggested by the surveyed organizations are listed below:



Analysis of this survey shows that Multi-chronic Conditions represent an issue of growing concern within the respondent countries and that it can be assumed that MCC will have a significant impact on hospitals.

The responses indicate that hospitals clearly have limited capacity to respond to MCC due to the effects of such factors as lack of strategy, absence of qualified staff, limited resources, etc. The definition of an effective clinical pathway would probably represent the best solution from the patient perspective. At the same time it would be necessary to develop a comprehensive and multi-dimensional approach from and for the hospital, which will financing mechanisms, technology, monitoring, professional specialization, etc.

Is reasonable to assume that MCC will become one of the major challenges for hospitals in the incoming years and the definition of an effective strategy should be first step to be undertaken.