

Volume 14, Issue 2/2012 - Interview

The Austrian Healthcare System

Facts and Figures

Austria is a democratic republic situated in central Europe, which covers a territory about 84,000 square kilometres. It has nine provinces including Vienna as its capital. About 8.5 million inhabitants live there and demographic forecasts predict that the population will grow to more than nine million by 2030.

Since 1955 Austria has been a member of the United Nations and since 1995 a member of the European Union with the adoption of the euro (EUR) as its currency in 2002. Austria has one of the most generous systems of social security and health services for all people within Europe.

The costs for healthcare in Austria (Health Accounts/OECD 1990 to 2009 in Mio Euro – a summary of private and public costs) are rising and cost pressure in the Austrian healthcare system is increasing.

Healthcare Services

The Austrian healthcare system is characterised by a high density of easily accessible healthcare facilities. Austria has a high standard of compulsory state funded healthcare. Private healthcare is also available in the country. There are three areas of social insurance in Austria: Health, accident and pension. The Austrian healthcare system is based on statutory social insurance, regulated by law with the most important legislative basis of the General Social Insurance Act (ASVG). In Austria, there are about 28 social insurance institutions under public law. As soon as a person takes up occupation they are automatically covered by insurance. Insurance contributions are calculated on the basis of a person's income. All insured people have a legal right to a large number of benefits. The main principles are solidarity, affordability and universality. The variety of services are:

- Primary healthcare services provided by contract physicians of the Austrian social health insurance funds;
- · Special in-patient and out-patient care;
- Emergency care;
- · Maternity services;
- · Psychotherapy;
- X-ray and laboratory tests;
- Physiotherapy, ergotherapy, speech therapy, curative massage;
- · Dental services;
- Ambulance services:
- Mobile and home care:
- · Preventive health services;
- · Rehabilitation and long term care services; and
- Care for people with disabilities.

Patients can choose their family physician and have free access to most other medical care.

The e-card system (a citizen ID card which contains an electronic signature and a personal data including their date of birth and social security number) monitors all health claims electronically.

Key Planning Instruments

There are a number of key planning instruments aimed to improve the cooperation among the individual actors in the healthcare system and also between the different levels of healthcare provision in the whole country. The most important are:

The Austrian Health Care Structure Plan (ÖSG) which includes

- Core objectives and planning principles as well as descriptions of methods and quality criteria;
- · Benchmarks regarding number of inpatients to be expected in all healthcare regions and healthcare zones of Austria;

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- An analysis of the situation in the areas of outpatient medical care, extramural therapeutic, psychological and psychosocial care, rehabilitation, and care for older people and long-term care; and
- Capacity planning for hospitals at provincial level (number of beds per discipline and locations for provision of specialised services; updated biomedical equipment plan); a number of data are provisional or only serve the purpose of general information after adoption of the individual Regional Health Care Structure Plans.

The Regional Healthcare Structure Plan (RSG), which includes detailed plannings in the different healthcare regions, built up to the ÖSG. Cooperations between the hospitals (organisational consolidations, medical centres) and cooperations with the extramural area are forced

In-Patients

Healthcare in Austria traditionally shows a strong weighting on hospital care. In 2009 about 64,300 hospital beds in 267 hospitals were available for in-patient care; 52,200 of these beds were for acute care (Source: WHO 2009).

Austria has a network of state-maintained public and privately owned hospitals. Most people use the General Hospital, which deals with a wide variety of disease and injury. All state hospitals are open to all insured patients, including private. Patients are admitted to hospital either through the emergency department or through a referral by their doctor. Once a patient is admitted, treatment is controlled by one of the hospital doctors.

The quality of hospital rooms varies according to the quality of a person's healthcare insurance scheme. Privately insured patients will get a single or double room. State insured patients may have to share with maybe two or three other people but there are no differences in medical care.

BUKO, the National Association of Hospital Management

Organisation

Austria is a federal republic consisting of nine states. Each has its own autonomous union of managers, responsible for the administrative and financial business in the hospitals. These nine unions are combined in the National Association of Hospital Managers. The BUKO consists of the chairman and a delegate of each state and is a stage for ideas, communication and information and service-platform for all Austrian Hospital managers, especially financial directors of hospitals. BUKO facilitates national and international contacts and the global exchange of experiences. Inputs, opinions and questions of general hospital management, health economics, financing and operating control are discussed in the public view or within the policy maker unit.

BUKO provides a basic fee for securing the service provision in community health

Further Education and Cooperation

The Austrian congress of hospital management is the most important activity in the public arena. This congress takes place annually and is arranged by a different federal state of Austria each year.

In 2012 The Federal State of Tyrol will present the 55th Austrian Congress of Hospital Management from the 14th to the 16th of May in Innsbruck, the capital of Tyrol. The slogan for this year is "best available technology". For further information on this event, please visit: http://www.krankenhausmanagement2012.at. These congresses, which are designed to be multidisciplinary in nature are the most important events for hospital managers in Austria. Many attendees also come from other countries.

The BUKO also collaborates with the industry and cooperates with producers and trading companies of medical products in Austria to improve process organisations, create standards or to discuss future prospects. Periodical meetings take place.

The education of young managers is one of the most important missions in the BUKO's targets. Some years ago the Austrian Institute for Hospital Management (ÖIK) was founded to offer different courses, workshops and seminars. All the themes and issues are current and applicable to today's situation. The lecturers are longstanding hospital professionals and experts in hospital management. Due to its excellent reputation and in face of more and more private competitors, the training courses, arranged by ÖIK are very successful and mostly fully booked.

General principle

The Austrian association of hospital managers (BUKO) sees its function as being an important voice in the healthcare system in Austria. The principal objective is to make a contribution to the Austrian healthcare system, so that high quality is warranted to all Austrian citizens.

Austrian Network for Patient Safety (ANetPAS)

The Austrian Network for Patient Safety was founded in 2008 after a political recommendation some years before. It is an autonomous platform made up of relevant institutions and experts on the Austrian healthcare system, in particular experts in patient safety and total quality management. The healthcare sector is full of complex challenges: Quality of care, patient safety and individual patient satisfaction. Therefore, the main objectives and activities of the AnetPaS are:

- To support, develop and coordinate projects and activities to bring forward patient safety and to reduce errors in healthcare;
- · Scientific research on patient safety;
- Education and further training;
- To be a platform for activities and projects; and
- To cooperate with international networks.

The question of patient safety has become a public issue and is of more and more importance during a hospital stay. Questionnaires have shown that patients believe in supporting doctors and nurses to avoid human error. Therefore it is very important to involve the patients fairly in the process of care. The target is to have well informed and alert patients. This goal can be reached using a patient safety guide.

Patient Safety Guide - a Successful Medium

The target is to improve the patient safety by offering a code of practice. It includes suggestions for patients: How to act and how to add their contribution for a successful care.

For most people contact with healthcare institutions is often like entering a foreign culture. The daily routine and working processes in hospitals seem curious und confusing for them. The patient safety guide is an instrument for the patients to support their uncertainty and to help them understand the hospital world.

It is important to inform the patients about the necessary steps of care so that they are able to decide responsibly and adequately in view of their disease and care. The patient safety guide offers many letters of recommendation and information for the patients. For example:

- · How to prepare themselves for discussions with doctors and nurses;
- · How it is possible to ask questions about their disease, about the plan of care and therapy and about the expectant results of care;
- · How to keep the overview of all the information they will get; and
- · How to make an active contribution to avoid errors and unwanted situations.

The patient safety guide is used like a diary. Patients have the possibility to make individual notes. It is an information source and will motivate patient-doctor cooperation.

Trygfonden, a Danish institution specialised in general safety activities, and the Danish Association for Patient Safety developed the contents of this guide some years ago. The Austrian Network for Patient Safety (ANet- PAS) were given approval to translate it into German and to adapt this exemplary guide to the Austrian situation.

This patient safety guide will be introduced for the first time in Austria's public and private hospitals this year. A test run will start in spring 2012 in Vienna. A scientific evaluation will be performed by the Karl Landsteiner Association for Clinical Risk Management, situated in Vienna's Hietzing Hospital, under the direction of Dr. Brigitte Ettl, Medical Director of the Vienna Hietzing Hospital and the Neurological Centre Rosenhügel.

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