

## Volume 9, Issue 1 /2007 - News

### Members

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#### Austria

##### Austrian Congress for Hospital Management 2007

The successful Austrian Congress for Hospital Management (see last Congress [www.ovkd.at/archiv.htm](http://www.ovkd.at/archiv.htm)) will take place for the 51 st time from 14 - 16 May 2007 in Krems an der Donau (Lower Austria).

The main theme will be "How much 'private' can healthcare tolerate?" In many European countries, the traditionally (mostly) public health and hospital systems are facing a crisis and often – allegedly – on the brink of financial ruin. A way out of this situation is to increasingly make use of private structures.

At the Congress, acclaimed experts will present and critically analyse the conflict between private and public systems. One of the questions that will be dealt with is: "Are public health systems really more expensive? Are private health providers gaining more ground? Is private care better? Is the healthcare system without private contributions affordable?"

Delegates will look at the chances, potential and limits that key players in the healthcare system are bound to come across, as well as determining who is responsible for development and who the driving forces are.

A detailed programme can be found at: [www.ovkd.at/veranst.htm](http://www.ovkd.at/veranst.htm) and [www.noe-khm.at](http://www.noe-khm.at).

Registration can also be done via these websites.

#### France

##### Hospital 2012

Minister for Health, Xavier Bertrand, launched the "Hospital 2012" plan, which, after Hospital 2007, sets out the directions for hospitals from 2007-2012. The focus will be placed principally on the improvement of working conditions for staff and provision for families. Xavier Bertrand stated: "I want day nurseries in all hospitals for all staff, I would like spaces for families, and for carers because they spend a great deal of their time at the hospital". The second priority will be to continue to place hospitals within the safety requirements (fire, asbestos, etc.), particularly those hospitals whose equipment is most decayed. The entire renovation and reorganisation of all emergency services is also planned, and the Minister has announced his intention to increase the share of expenditure on hospital IT to 3% by 2012, compared with 1.7% today.

#### Finland

##### Restructuring of Local Government and Services

Significant restructuring of local government and services is currently taking place in Finland. The objective is to have local governments that are financially and operationally stronger whereby services will increasingly be offered in cooperation with various suppliers.

This objective forms a sound structural and financial basis for the services that municipalities currently offer bearing the required standard of quality, effectiveness, availability, efficiency, and technological advancement in mind. The restructuring of primary healthcare production and organisations calls for the inclusion of at least 20 000 inhabitants per area offering healthcare and social services.

The restructuring of local government and services means more changes for the Finnish social sector because there is no service structure requiring a minimum of 20 000 citizens to be served. Under the framework law – allowing the restructuring – districts can pool their resources to offer social and healthcare services.

The city of Kajaani and its surrounding municipalities were the first to do so, thus creating the Kainuu model in 2005 (until 2012). Kainuu is an administrative experiment and includes all healthcare units (primary health centres and hospital), social services, primary and secondary schools and vocational school, police for industry, trade, and other lines of business.

About 21 hospital districts are already cooperating and not only because of the legislation.

Highly demanding and unusual illnesses will be centralised in one or two hospitals in Finland. There is a growing call for the State to shoulder the financial responsibility for unusual, expensive-to-treat and rare illnesses such as ALS patients. Cooperation between hospital districts, including – in some cases – primary health centres is increasing in terms of financial administration and service tasks such as shared IT systems and procurement.

## **Spain**

### **Private Security Services**

The health authorities in Murcia have decided to employ the services of private security companies in order to protect hospital staff from violent patients. In 2006, violent occurrences in the region's hospitals increased by 38%. The security officers will work in the health centres and the emergency services. They will not be armed.

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