

TRANSFORMING ACCESS TO CARE WITH THE SWISS LEARNING HEALTH SYSTEM

Swiss Learning Health System Faculty of Health Sciences and Medicine University of Lucerne Access to care European Public Health Week 24 May 2023

Speakers







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Outline

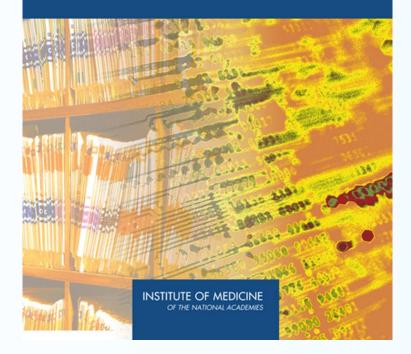
- 1. Introduction
- 2. The Swiss Learning Health System
- 3. Learning cycles in the Swiss health system
- 4. Learning cycles in access to healthcare
- 5. Lessons learned within the Swiss Learning Health System





THE LEARNING HEALTHCARE SYSTEM

Workshop Summary

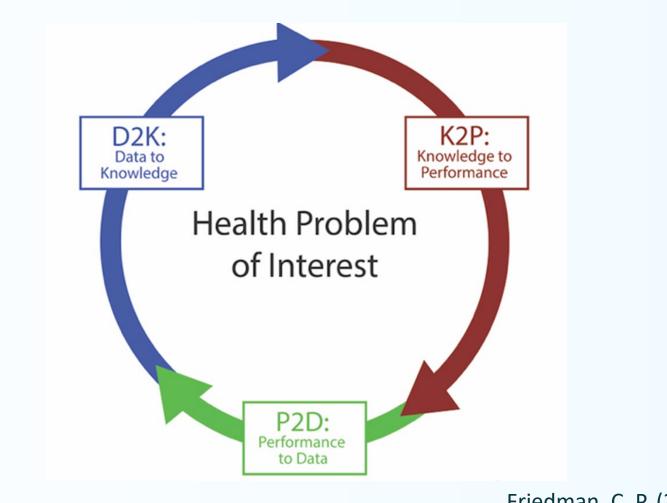




EDITED BY KABIR SHEIKH AND SEYE ABIMBOLA







Friedman, C. P. (2022)

Addressing the complexity of health systems

Because of their complexity health problems often defined as "fuzzy" (or "wicked")

- hard to define and resolve in a traditional way
- involve many interdependencies and stakeholders, often multicausal and socially complex
- pandemics, rising healthcare costs, digital divide, ageing



Learning Health Systems ...

• ... are a departure from data practices that are governed by the intended use for data (research, quality improvement, clinical care, public health etc.).

• ... aim at enabling continuously and rapidly operating cycles of study, feedback, and practice change, regardless of the original intention for data collection.

Platt, J. E., Raj, M., & Wienroth, M. (2020)

Learning Health Systems ...

Cetter Learning Health Systems improve individual and population health by marrying discovery to implementation (...).

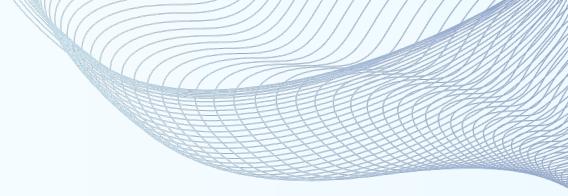
Friedman, C. P. (2022)

Ongoing learning via dialogue between science, policy and practice

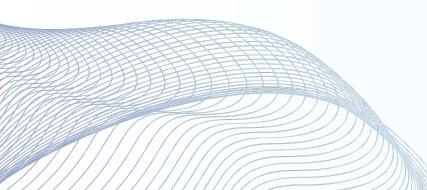


Knowledge translation: evidence

dissemination and application



The Swiss Learning Health System



The Swiss context



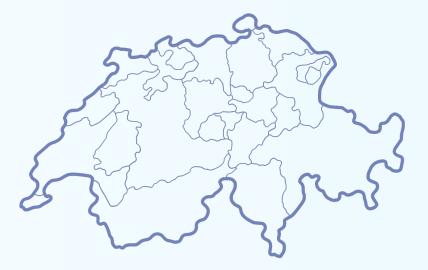
Population: 8.7 million

 predominantly urban, with three-quarters living in towns and cities



Highly decentralized health care system:

- 26 cantons
- each is independently responsible for funding, monitoring, coordinating, and promoting health care





Life expectancy is one of the highest in the world (83 years)

Who we are?

The Swiss Learning Health System (SLHS) –

A national health systems and services research initiative that aims at bridging the gap between research, policy and practice.

We seek to link all stakeholders in the Swiss health system – patients, providers, insurers, researchers and policy-makers – to enable the development and continuous integration of evidence-informed solutions.

Swiss Learning Health System

Our growing network



Our growing network

- 11 partner universities
- Health System Advisory Board:
 11 representatives from policy and practice
- Governing Board:
 33 academic professionals
- International partners





The overarching objective is to strengthen the Swiss health system and create a culture of shared decision-making in which sound scientific evidence is continuously integrated into the health system.

- **1** Establish a bridging mechanism between research, policy, and practice;
- 2 Build scientific capacities for health systems and services research;
- 3 Develop standards for the management of health information.

Promoting learning cycles in the Swiss health system

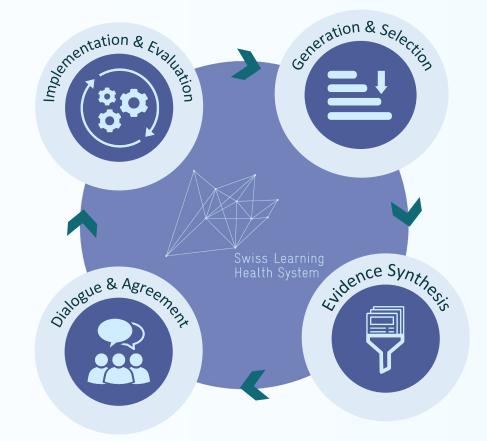
Bridging mechanism of the SLHS

Monitoring and Evaluation

SLHS monitors and evaluates implementation of measures to enhance the quality of health systems

Stakeholder Dialogues

Stakeholders work and discuss issues together to solve problems in the Swiss health system



Issue Identification & Prioritization

SLHS identifies and prioritizes pressing topics and challenges in the Swiss health system

• Collaboration in the network

Policy Briefs

SLHS produces evidence syntheses (Policy Briefs) as input for stakeholder dialogues

Collaboration with stakeholders

What have we done so far?

Since 2017...

50+ PhDs

PhD Students and Alumni involved

26 Policy Briefs & Stakeholder Dialogues

90+ professionals

Participated in stakeholder dialogues

- 60+ people from policy and practice
- 30+ researchers

Evaluations have shown a high level of satisfaction:

- provision of policy briefs as a basis for discussion
- composition of stakeholders





Improving access to care: role of learning cycles

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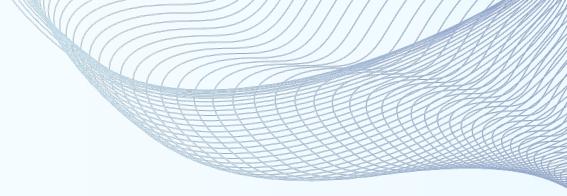
1. Collect and analyse health data:

- Identify gaps in care and areas of unmet need
- Pinpoint populations at risk of poor health outcomes for tailored interventions
- Detect disparities in healthcare access and outcomes among different demographic groups
- Address health inequities by examining social determinants (income, education, race)

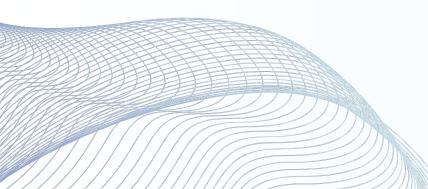


2. Facilitate an open dialogue:

- Promote issue identification and evidence generation with input from all stakeholders
- Enhance stakeholder connections for faster research-to-policy implementation



Access to care in SLHS projects



Sustainable Financing of Psychosocial Services for Refugees

The Issue:

- Many asylum seekers suffer from mental health problems due to the situation in their country of origin, the migration process or post-migration stress factors.
- Psychosocial services (+ outpatient psychiatric therapy if needed) are much more effective for this group than inpatient therapy in a psychiatric clinic.
- But who should pay for such psychosocial services?

Stakeholder Dialogue: Representatives from cantonal departments (health, social affairs, integration) from several cantons, regional integration structures, psychiatry/psychology, social work and a psychosocial service for refugees.

Policy Brief Recommendations:

- 1. Promoting financing solutions with cantonal involvement
- 2. Increasing transparency for providers and case managers
- 3. Establishing transparency on the costs of health and social care for refugees and potential savings

Authors:

Mélanie Stamm, MA - ZHAW Zürcher Hochschule für Angewandte Wissenschaften, School of Management and Law, Winterthurer Institut für Gesundheitsökonomie Franziska Rhiner, MA - NCBI Schweiz «Brückenbauer*innen und Trauma»



Nachhaltige Finanzierung von psychosozialen Angeboten für psychisch belastete Geflüchtete Mélanie Stamm, Franziska Rhiner

LINK TO THE BRIEF

Policy Brief #15

Advanced Practice Nurses (APNs) in General Practice

The Issue:

- Switzerland: 2/3 of patients 65+ y.o. can be cared for by specialist nurses (APNs and MPAs) as a complement to medical treatment in a GP's office
- But: lack of the legal framework for independent provision of services by APNs and MPAs
- Specialist nurses' roles have not been clearly defined, nor are they able to bill their services independently

Stakeholder Dialogue: A stakeholder dialogue was conducted based on a policy brief, involving a panel of 13 experts

Policy Brief Recommendations:

- 1. Development of a legal framework for scope of practice and job description for APNs and MPAs
- 2. Publicize the role of APNs and MPAs
- 3. Create funding opportunities for services provided by APNs and MPAs in primary care practices

Authors:

Renata Josi, Dr. phil. - curafutura, Schweiz Stefan Gysin, Dr. med. - Departement für Gesundheitswissenschaften und Medizin, Universität Luzern

Stefan Essig, Dr. med. et phil.- Institut für Hausarztmedizin und Community Care Luzern (IHAM&CC), Schweiz



APN in der Hausarztpraxis

Wie kann der Einsatz von Pflegeexpertinnen APN in neuen Modellen der medizinischen Grundversorgung gefördert werden?

Renata Josi, Stefan Gysin, Stefan Essig

Policy Brief #4

Health Insurance Literacy

The Issue:

- Limited health insurance literacy (HIL) is associated with poor insurance choices, inadequate healthcare use and access
- This affects both individuals and the healthcare system
- Swiss health insurance system: Complex design and growing costs
- Need to empower individuals, especially those with limited HIL, to make informed health-related decisions

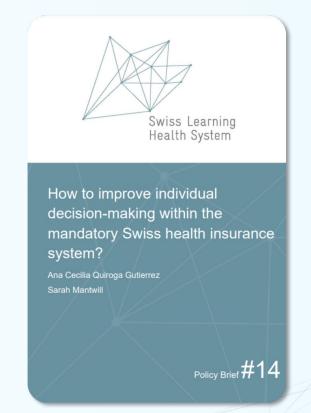
Stakeholder Dialogue: Panel discussion and workshop with health insurance providers and researchers

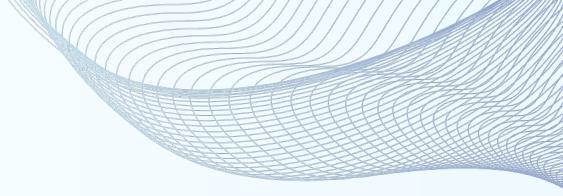
Policy Brief Recommendations:

- 1. Further data collection and monitoring to assess the levels of HIL and to identify vulnerable groups in Switzerland
- 2. Provide appropriate tools and information for decision support,
- 3. HIL skill development and strengthening through compulsory education

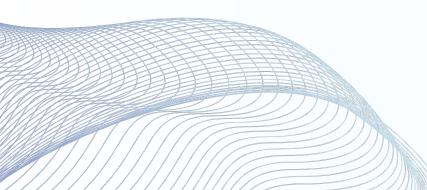
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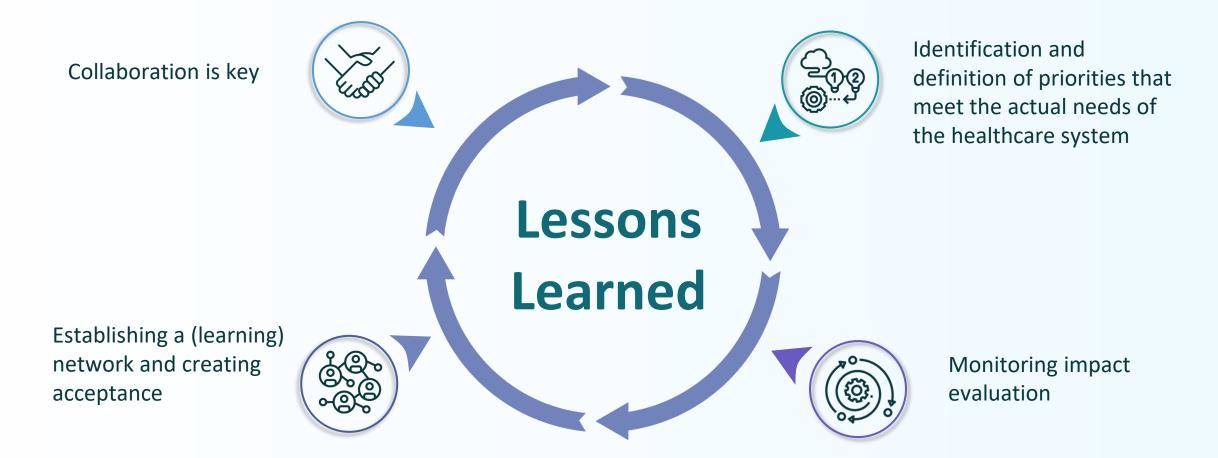




What are the lessons learned?



Establishing continuous dialogue takes time and resources



Thank you for joining us today!

Do you have questions?

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