

General practice, primary healthcare and the community: linking the dots

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1



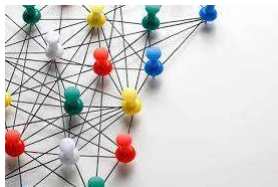
The diagram consists of a large grey circle with four quadrants. The top quadrant shows a stethoscope on a document with the word 'huisarts' (general practitioner) written on it. The left quadrant shows a woman in a blue jacket presenting to an audience. The center quadrant features a circular portrait of a woman with glasses. The right quadrant depicts a research process with the word 'RESEARCH' in the center, surrounded by terms like 'Search', 'Data', 'Analysis', and 'Wow! Great Culture!'. At the bottom of the circle are three black dots.

 Universiteit Antwerpen
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2

2

Content



- Healthcare challenges and Primary Healthcare in the 21st century
- Recent evolutions in the Belgian Healthcare sector
- Primary care research: needs and examples
- Key messages

3

Enormous challenges in healthcare

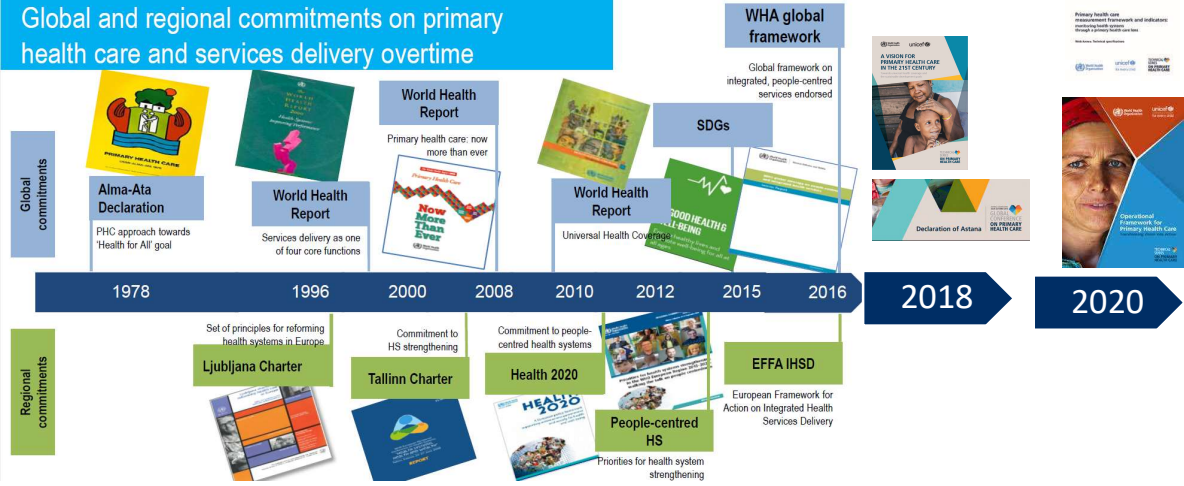


- Aging population
- Rise of chronic conditions
- Increasing health inequality
- Changing expectations and needs (patients and healthcare workforce)
- Shortage in staff
- Scientific innovations/technology
- Rising budgets
- ...

4

Challenges and changes

Global and regional commitments on primary health care and services delivery overtime



Integrated care based on primary healthcare – WHO vision – Hans Kluge Eerstelijnsconferentie 2017



Health and wellbeing for all = strong primary healthcare



Primary healthcare

- Integrated health services to meet people's health needs throughout their lives
- Addressing the broader determinants of health through multisectoral policy and action
- Empowering individuals, families and communities to take charge of their own health.

https://www.who.int/health-topics/primary-health-care#tab=tab_1

7

Primary Healthcare in Belgium



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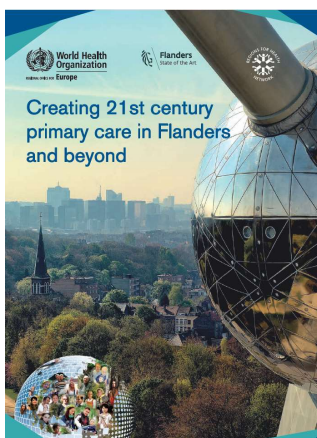
Primary Healthcare in Belgium

- Based on principles of independent medical practice - most GPs are self-employed
- Currently we have 2 financing mechanisms – GP (and patients) have to choose:
 - Fee for service
 - Forfait per registered patient ('Integrated needs-adjusted capitation')
 - (proposal: mixed system)
- GPs have no gate-keeping role – but there is a GMF (Global Medical File)
- GP workforce:
 - 1.14 GPs per 1000 inhabitants – but unequally distributed
 - GP trainees: 40% of total trainees

9

Evolutions in the Belgian Healthcare Sector

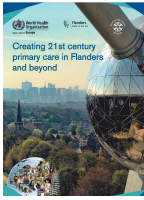
Flanders: reforming primary care



New Deal in the GP practice




10



Paradigm shift

From	To
Supply-led care	Person-centred care
Passive client	Active client
Fragmented and monodisciplinary	Integrated and multi-/pluti-/transdisciplinary
Separation between care and welfare	Care and welfare are linked
Sickness and cure	Health, behaviour, prevention, care as well as cure
Input	Outcome
Institutional	In familiar surroundings
Silo-organization	Comprehensive organization

Source: Flanders Agency for Care and Health.


11

11

Primary care reform in Flanders


Primary Care Zones

- Basis for effective integrated care and services at a local level
- 60 in Flanders
- 75000 – 125000 inhabitants
- Care board: authorities, health sector, well-being sector, people with care needs

Wat is een eerstelijnszone?


Eerstelijnszones zijn opgericht om het werk van lokale overheden, zorg- en hulpverleners bet. Een effectieve en kwalitatieve eerste lijn waar de burger centraal staat en die toegankelijk is.

Onderstaande animatievideo legt je alvast de essentie uit.



EERSTELIJNSZONE
Bekijken op YouTube

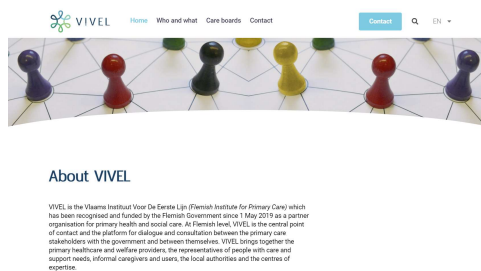
Ook het verhaal van Sam helpt je te begrijpen waarom de wijzigingen nodig zijn.


12

12

Primary care reform in Flanders

Flemish Institute for Primary Care



We need to learn from one another, by trial and error. VIVEL will not solve all problems by itself. It is precisely by working closely with the primary care zones, the authorities and all other stakeholders that we will be able to seek out the solutions. This is a commitment we need to take on together.
- VIVEL Chairman Gerrit Rautas

13

New Deal for the GP practice



□ Sufficient GP (practices) equally spread

- Proportion of GP trainees: 40% of total trainees
- Incentives to start practice/working in 'deprived' area



□ Lifting administrative overburdening

- Sick leave note
- Attestation for medication



□ Improving accessibility

- Third party payment
- Focus on < 25 with Global Medica File and increased reimbursement



14

New Deal for the GP practice



RIGHT CARE
RIGHT TIME
RIGHT PLACE

□ Organisation of care

- ‘The right care at the right place by the right person’
 - GP surrounded by team of professionals
 - Primary care psychologist
 - Care trajectories (e.g. diabetes care, perinatal care)
 - Supported by technological innovation (teleconsultations)
- Multidisciplinary integrated patient file
- Well planned out of hours care (continuity AND wellbeing GPs)



□ Financing primary care

- Move away from fee for service towards an integrated financial model

15

Linking Primary Care research

PHC component

- Integrated health services to meet people's health needs throughout their lives
- Addressing the broader determinants of health through multisectoral policy and action
- Empowering individuals, families and communities to take charge of their own health.

Attention point for research

- Interdisciplinary research(ers)
- Involving healthcare professionals as research partners
- Research into digital health solutions
- Intersectoral research(ers) – involve stakeholders and policy makers
- Involve patients and communities as research partners

16

Interdisciplinary collaboration in research

University of Antwerp Login - NL | EN

PUBLIC MENTAL HEALTH Q

Partners Staff members Contribution

Public Mental Health



research | Open Access | published: 27 September 2020

Unmet mental health needs in the general population: perspectives of Belgian health and social care professionals

Eva Rens , Geert Dom, Roy Remmen, Joris Michielsens & Kris Van den Broeck

International Journal for Equity in Health **19**, Article number: 169 (2020) | [Cite this article](#)

5918 Accesses | 4 Citations | 4 Altmetric | [Metrics](#)

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Interdisciplinary and Intersectoral collaboration


CARE AND THE NATURAL LIVING ENVIRONMENT Q

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Care and the natural living environment

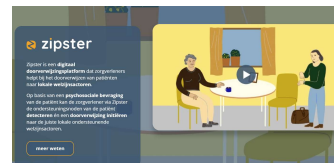



'Nature on prescription'

 18

18

ZIPSTER: Digital referral and linking platform focussed on psycho-social needs



- Supports healthcare providers in mapping psychosocial needs and refer patients to local welfare partners.
- ‘Social prescribing’
- Implementation via Primary Care Zones
- Since 2020



Outreach work and co-creation with communities



Health Kiosk
Local ‘bottom up’ initiatief



Community Health Workers
Pilot project Federal Government
‘Reverse Innovation’
‘Access to care model’



Key messages - Connecting the dots



- To implement the core components of strong primary care
- Innovative approaches to primary care research are needed
- **Collaboration and linking**
 - Practice and research
 - Professionals and community
 - Healthcare, welfare, education, urban design,...
- Take context into account and embrace complexity
- Get familiar with implementation science

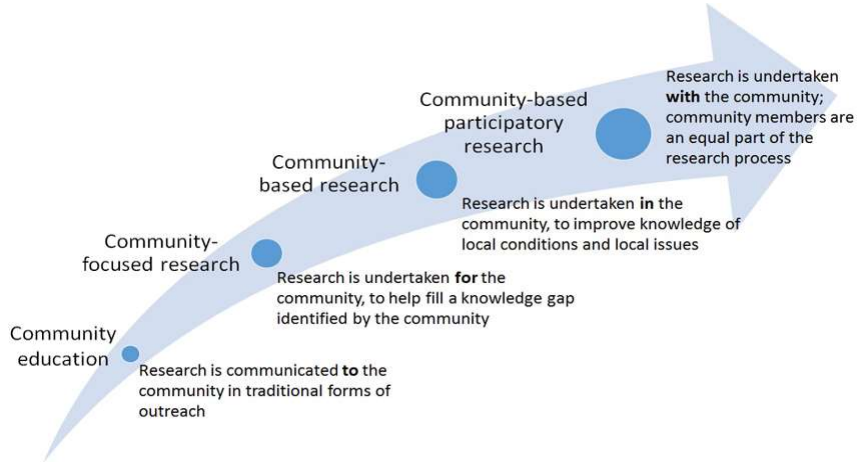


21



22

Community engaged research



KBS



← Terug naar overzicht

Het begon met een kiosk op een plein in Bergerhout. Een plek waar de buurtbewoners even konden rondneuzen en informatie vinden over gezond leven. Nog geen half jaar later is de Gezondheidskiosk uitgegroeid tot een ontmoetingsplek, die buurtbewoners en organisaties samenbrengt in een steeds groter web van initiatieven met een gezonde randje.

Aanleiding zijn in publieke ruimte
Het gezondheidskioskje staat op een plein van 2000 vierkante meter in de buurt Bergerhout in de wijk Bergerhout. Dit is een woon- en leefgebied met een hoge diversiteit aan achtergrond en levenswijzen. Het is een gebied met veel sociale en culturele verschillen. Dit is een gebied met veel sociale en culturele verschillen. Dit is een gebied met veel sociale en culturele verschillen.

De kiosk als hefboom
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Conclusie
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<https://www.fondsdanieldeconinck.be/story/binnen-zonder-kloppen-de-gezondheidskiosk-als-hefboom/>