The principles of quality person centred care provision are always the same, depending on the jurisdiction, they are just adopted and advanced in different ways

**NEW policy briefing**

Picker Institute Europe has published a new briefing; “Person-centred care in Europe: a cross-country comparison of health system performance, strategies and structures.” The document provides an overview of the different approaches taken to providing quality healthcare across Europe. Looking specifically at the person-centred care interpretations and strategies taken in England, Italy, Spain, Germany and the Netherlands. With the aim of advancing understanding of the ways in which different national services:

- Have chosen to focus on the needs of their users.
- Have adapted to address financial pressures and efficiency challenges.

Highlighting the briefing’s core value, Giuseppe Paparella, Policy Officer at the Picker Institute said “Despite the international prominence of the concept of person-centred care, the practice and policy of different nations is not always well publicised, and there have been few attempts to compare and contrast the way in which the principles of person centred care are being adopted and advanced in different jurisdictions. In recent years, it has taken on heightened prominence, with many health services and providers explicitly aspiring to provide person centred care.”

**Key highlights include:**

**Quality and efficiency levels**

- In England, recent inquiries on the failings at Mid Staffordshire NHS Foundation Trust and the Freedom to Speak Up review have led to a heightened emphasis on delivering high quality, safe and compassionate care – but this emphasis is tested by limited resources and significant pressures to make efficiency savings. Faster growth in staff numbers may outpace growth in the numbers of patients treated or improvements in the quality of their care. If so, there will be a slowdown in productivity growth. By international standards, access to care is excellent, but - according to the latest OECD’s Health at a Glance report - the quality of care is still uneven and continues to lag behind that in many other OECD countries.

- The German health care system is recognised worldwide as providing good quality care, short waiting lists and attentive service. A key component of this is the significant amount of money spent on health care, (over 11% of their GDP, which is expected to increase further in the future). This means that Germany’s health care system is expensive, however it remains pretty efficient given the money invested. Greater efforts are needed to improve continuity of care for people living with one or more chronic diseases.

- Although levels of health spending below other high-income OECD countries, in Italy access to care is automatic and universal for each citizen, and indicators of quality of care for both primary care and hospital care are above the average in many areas. However, Italy is lagging behind in some areas, like long-term care and prevention of non-communicable diseases. The Italian health care system has been recently considered the third most efficient globally, as judged by Bloomberg Rankings.
In the Netherlands, the introduction of universal private insurance is said to have created a culture of practice innovation. This has resulted in more focus on prevention and delivery of more care for chronic conditions through primary care. As for quality indicators, the Netherlands spends more money on short-term admissions for mental and behavioural disorders than other OECD members. Almost one-quarter (23%) of total expenditure at Dutch hospitals including mental health (GGZ) institutions is on account of mental health care services.

In Spain, significant measures have been adopted nationally in the past few years in order to achieve better efficiency: salary reduction of 7.1%; slight increase in working hours for GPs and nurses in primary care; reduction in pharmaceutical expenditure; reduction of the national health budget by 13.7% in 2012 and 22.6% in 2013. As a result, when it comes to quality care, there is evidence of gaps in the continuity of care for the growing number of people living with one or more chronic diseases.

Cost-effectiveness of person-centred care: the value-based approach

Comparison of developments in each of the five countries shows that the adoption of value-based models to healthcare has taken different shapes across Europe. At the core of value-based healthcare is maximizing value for patients: that is, achieving the best outcomes at the lowest cost. It is interesting therefore to see how different health systems are pursuing their own value agenda:

- England and Germany have been at the forefront in introducing many aspects of value based healthcare, including cost benefit assessment of health technology and evidence-based protocols for individual disease.
- The Netherlands have also been early adopters, with the latter benefiting from its position as a smaller country - in this group of five - with a collegial community of healthcare providers.
- By contrast, in other large European economies such as Italy and Spain, implementation of value based healthcare has been more fragmented, with individual institutions often taking the initiative.

Implications for future practice

Looking to the future, there is a general suggestion that person-centred care provision and cost-effectiveness will become the fundamental elements of effective healthcare system management.

Many barriers to the full implementation of person-centred care remain, including financial, physical, education and emotional support for individual patients. Likewise, patients’ involvement needs to be factored into any policy agenda that affects patients’ lives, not just restricted to healthcare but to include social and economic policies and regulatory policies. If core interpersonal values and patients’ needs for better involvement, more effective communication and better coordination of care are built into each healthcare system, it will support the overall health and wellbeing of the population, in turn resulting in social, health and economic gains for all.

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