



## Workshop Report

# Follow-up care / post-acute care / aftercare, long-term and palliative care (Evaluation of current situation and planning of new strategies)

January 19th 2017

The Ministry of Health of the Czech Republic, Prague

Institute of Health Information and Statistics of the Czech Republic

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Evropská unie  
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# PROGRAMME



Chairs: Alena Šteflová and Andrea Pokorná

- 09:00            Opening of the workshop
- 9:10–9:20       Alena Šteflová  
Introduction – activities of WHO country office in the Czech Republic
- 9:20–9:40       Ladislav Dušek, Andrea Pokorná  
The Czech National Health Care Information System – sources for follow-up and long-term care description and evaluation
- 9:40–10:00      Manfred Huber  
Reforming long-term care in the context of WHO action plans
- 10:00–10:20     Jiří Krejčí  
Organizational culture as an important factor in the quality of care
- 10:20–10:40     Ondřej Sláma a Jan Švancara  
The last hospitalisation of cancer patients in post-acute and long-term care setting and in-patient hospices
- 10:40–11:00     Martin Loučka  
Hospital palliative care in the Czech Republic: experiences from pilot project
- 11:00–11:10     Discussion
- 12:00–12:20     Hana Matějovská Kubešová  
When is the real moment of acute care transition to aftercare?
- 12:20–12:35     Václav Volejník  
Practical notes from non-acute care provider's point of view
- 12:35–12:50     Iva Holmerová  
Dementia as a challenge and opportunity of long-term care
- Discussion / General discussion / Wrap-up of the workshop

# WORKSHOP (ROUND TABLE)

## FOLLOW-UP CARE / POST-ACUTE CARE / AFTERCARE, LONG-TERM AND PALLIATIVE CARE

### (EVALUATION OF CURRENT SITUATION AND PLANNING OF NEW STRATEGIES)

On 19 January 2017 a round table workshop dedicated to long-term and palliative care was held at the Ministry of Health of the Czech Republic (MoH CZ). The expert meeting was held in cooperation with the World Health Organisation country office in the Czech Republic (WHO) and with the participation of WHO international expert **Dr. Manfred Huber**, Coordinator for Healthy Ageing, Disability and Long-term Care (WHO Regional Office for Europe).

The main organiser of the meeting was the Institute of Health Information and Statistics of the Czech Republic (IHIS) in cooperation with the above mentioned WHO country office in the Czech Republic and representatives of the Ministry of Health of the Czech Republic (Health Services Department, International Department and Concepts and Strategies Unit). Among the invited guests were representatives of the Ministry of Labour and Social Affairs of the Czech Republic (MLSA), representatives of



of the health insurance companies, and in particular representatives of health and social services providers, i.e. clinical experts providing inpatient (hospital), outpatient and community care.

Scientific programme was introduced by the main organiser **assoc. prof. Dr. Andrea Pokorná, Ph.D.**, who welcomed the guests and opened the meeting. The workshop was intentionally conceived as a round table with active participation of 44 leading Czech experts (from among the providers of health services, representatives of health insurance companies, MoH CZ and MLSA, see above). Discussed were the findings of the analysis of source data accessible in the National Health Information System (NHIS), which were complemented by interesting lectures in the frame of the rich accompanying scientific programme, confronted and interpreted with the experience of clinical experts.

Director of the WHO country office in the Czech Republic, Dr. Alena Šteflová, Ph.D., MPH, firstly described the activities of the WHO on national level in the Czech Republic and within the framework of the international cooperation, evaluated current situation and plan of new strategies with the possibility of future cooperation. In the following lecture **assoc. prof. Dr. Ladislav Dušek, Ph.D. and assoc. prof. Dr. Andrea Pokorná, Ph.D.** summed up National Health Information System and its main data resources for evaluation of follow-up, long-term and palliative care. Particular findings confirmed not only the possibility to use the data from the NHIS but also the need of corresponding choice of data resources and necessity of validation of the data acquired in cooperation with clinical workers and the Ministry of Health of the Czech Republic. Analyses were aimed at evaluation of structure of hospital bed fund for post-acute care and regional differences in this area. Furthermore, analysis of cases of hospitalisation with providers of follow-up, long-term and palliative care and mortality data were presented.



Workshop's international guest **Dr. Manfred Huber, Ph.D.** introduced the long-term care reform in the context of the WHO activities and the importance of the reform vis-à-vis individual member states' projects. He expressed his thanks to the organisers for well-considered choice of lectures, including the rather neglected issue of "Organisational Culture" which was dealt with by MSc. Jiří Krejčí, director of a hospice care provider and facility (TŘI, o.p.s.) in Čerčany.

**Dr. Ondřej Sláma, Ph.D.**, oncologist and expert on palliative care from Masaryk Memorial Cancer Institute in Brno, emphasised findings based on mortality data acquired from providers of health services. It followed from the analysis that in hospitals, most patients die in acute-care wards, which ranks us behind the most developed countries.

The morning programme was concluded by lecture of **Dr. Martin Loučka, Ph.D.** from Centre of Palliative Care and Division of Medical Psychology, Third Faculty of Medicine of the Charles University in Prague, introducing the current situation in hospital palliative care in the Czech Republic. Furthermore, interesting pilot projects supported by AVAST Foundation were mentioned.

The afternoon programme started by lecture of **Prof. Dr. Hana Matějovská Kubešová, CSc**, head of Internal, Geriatric and Practical Medicine Clinic of the University Hospital in Brno, seeking to answer the

question “When does acute care in fact end and follow-up care begins in geriatric patients?”. Mentioned were the barriers related to continuity of care not only when transferring patients from acute care to follow-up care with regard to limited hospital bed fund, but also the issue of personal capacities. **Dr. Václav Volejník**, director of Rehabilitation Institute Luže Košumberk followed-up with emphasis on the need to update the terminology related to defining the content and scope of follow-up and long-term care, with regard to demographic changes in the society and composition of patients in establishments providing non-acute or post-acute services. He underlined the necessity of legislative changes which had already been initiated in particular with regard to delimitation of medical and social border line. The lecture of **assoc. prof. Dr. Iva Holmerová, Ph.D.**, Alzheimer Europe (president), Gerontology Centre and Faculty of Humanities of Charles University CELLO, given on “Dementia as a Challenge and Opportunity for Long-term Care”, aimed at ethical dilemmas in care for patients suffering from cognitive impairment and PALLIARE best practice recommendations.



At the end, realisation of action plans (AP) within the Health 2020 Strategy was discussed, in particular National Action Plan for Alzheimer Disease and Similar Diseases for the period 2016 – 2019 (the currently critical step is the clarification of responsibilities within the Ministry of Health) and Action Plan aimed at enhancing quality, availability and effectiveness of follow-up, long-term and home care. Briefly discussed was the pilot project currently running in Brno in cooperation with general practitioners aimed at timely detection of dementia (partially funded by General Health Insurance Company within the framework of prevention), which drew a significant response among GPs. With regard to the results of the pilot project, it may be extended to other regions of the Czech Republic. Furthermore, the issue of patients with refractory wounds was discussed, including experience learning and creation of a database in this field in the framework of planned bilateral agreements on cooperation (BCA) 2018-2019. Discussed was palliative care and the need to extend the services of mobile hospices but also the improvement of identification and satisfying the needs of the families taking care and reinforcing community care in this field, as well as need of popularisation of the issue both with experts and general lay population and society. Representatives of the Ministry of Health presented currently running activities aimed at changing of legislation on medical-social border line in cooperation with MLSA, which should improve the continuity of care and especially passageway of patients through the system and the legislative anchoring of care. The Ministry of Health in cooperation with MLSA are preparing new legislation and related implementing rules, consulting extensively experts within clinical practice. In the

future, care should be based on long-time sustainable community and field care with accessible hospice and long-term hospital care in case of need. Dr. Manfred Huber, Ph.D. expressed the expectation and preparedness to share WHO experience and possibility of specific implementation for instance in the field of quality of care indicators in the framework of palliative care.

Significant benefit of the workshop for all participants was the **drafting of strategic targets** based on previous discussion. Particular steps should be aimed at following areas:

- a) **Legislation** – Act No. 372/2011 Coll. – terminology – NEW definition of content of care, supplement of categorisation of patients + corresponding implementing rules accurately defining procedures for
  - a. Categorisation of patients in follow-up, long-term and palliative care
  - b. Defining of particular parts and procedures of care and standardisation and procedures in the field of medical-social border line
  - c. Endorsing of field services for special palliative care.
- b) **Educational activities** – general public and experts
  - a. Support of family, consulting
  - b. Volunteering
  - c. Support of patients' organisations – centralisation of experience acquired and results sharing
  - d. Evaluation and quality check of educational activities
- c) **Support of use of objectifying tests, scales and instruments**
  - a. For categorisation of patients, overall objective evaluation of patient status
  - b. Role of scientific societies in the framework of creation of Clinical Recommended Practices
- d) **Civic interaction with the system**
  - a. Support of municipal awareness – natural contact points – model example HELP DESK (GP),
  - b. Continuity and sharing of information and practices among MoH CZ and MLSA.

At the end of the meeting, an agreement on further cooperation was concluded in realising the bilateral agreement on cooperation between WHO/Europe, MoH CZ and IHIS for 2018 and 2019 aimed at the area of restructuring of follow-up, long-term and palliative care in the framework of national strategies.

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