



Aspirations and Reality in Austerity: Reflections on the Resilience of the Irish Health System

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The Resilience Project

- Resilience of the Irish Health System: Surviving and utilising the economic contraction
- Jan 2011 – Jan 2014
- Initial Collaboration:
 - Centre for Health Policy and Management, TCD
 - Economic & Social Research Institute
 - WHO, Health Systems Strengthening, Barcelona
- Broader Collaboration



Project Aims

Overall Aim:

to identify best practice guidelines and strategies for how the Irish health system can

- withstand the current crisis (in terms of protecting resources for health and managing resource scarcity well)
- benefit from the opportunities that the recession brings to pursue reform and alleviate system bottlenecks.
- build the resilience of the Irish health system in anticipation of future crises

An iceberg floating in the ocean. The tip of the iceberg is above the water line, and the much larger, submerged part is below. The sky is blue with light clouds, and the water is a deep blue. The text is overlaid on the image in white.

Performance Metrics

Decision-making

System Dynamics & Constraints



Health System Resilience

Financial resilience:

the protection of funds for health care, and particularly that of the vulnerable, in the face of economic contraction.

Adaptive resilience:

the ability of government and providers to manage the system with fewer resources, through efficiencies, while not sacrificing key priorities, benefits, access or entitlements.

Transformatory resilience:

the ability or capacity of government to design and implement desirable and realistic reform when the current organisation, structures and strategies are no longer feasible.

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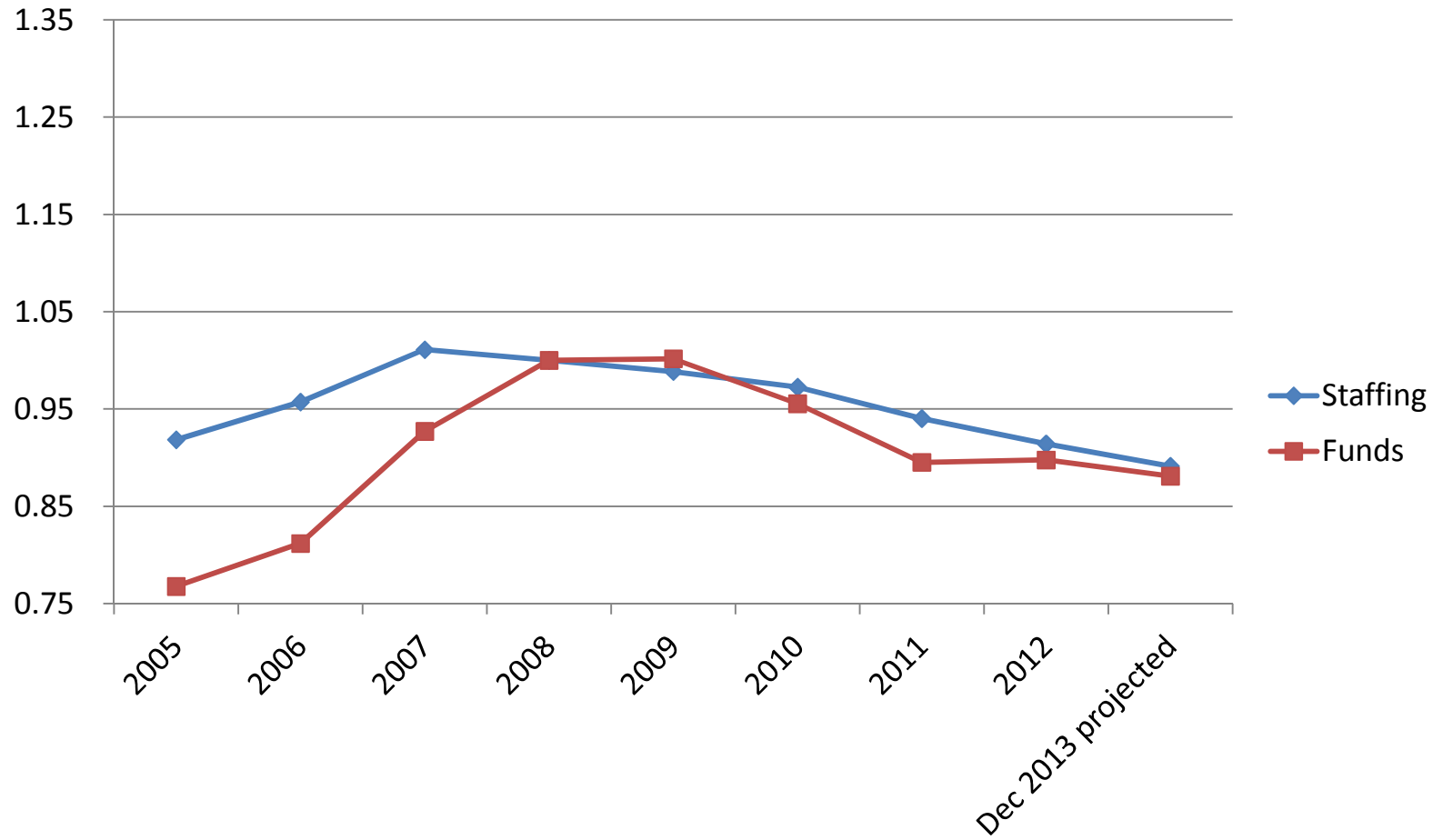
Performance Metrics

Decision-making

System Dynamics and Constraints

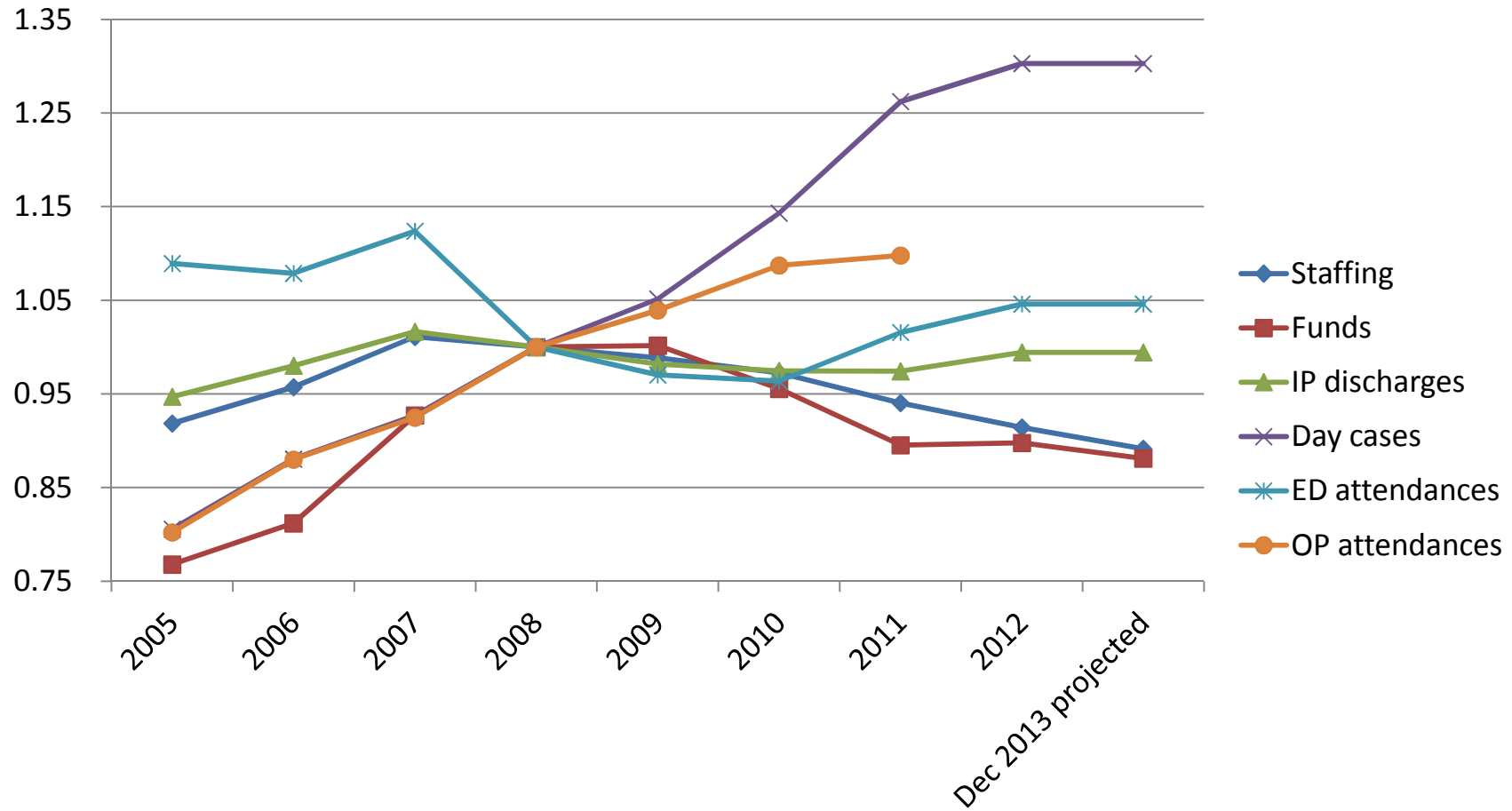


Less





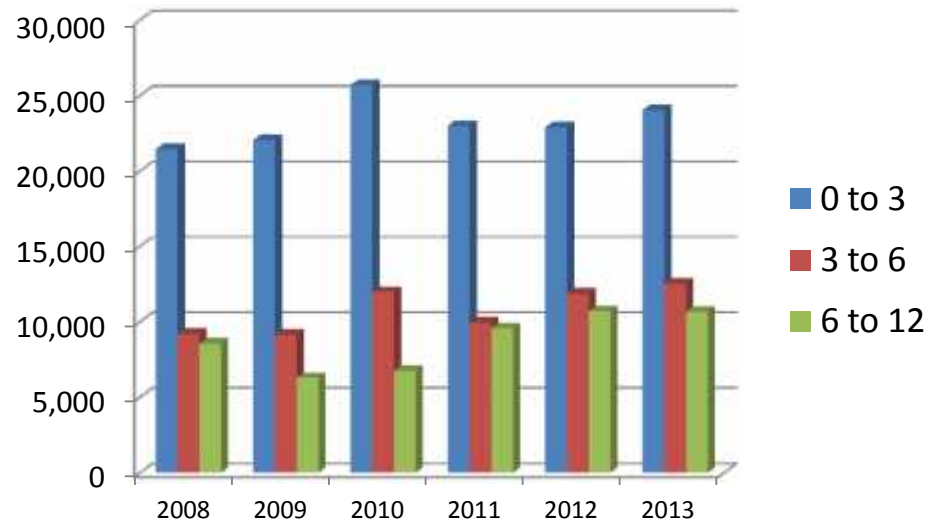
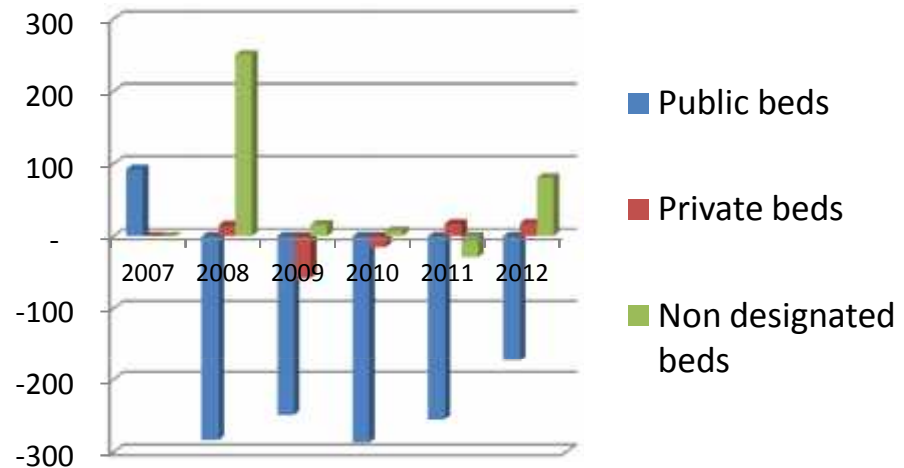
But more with less





Increased Rationing – Eventually Inevitable?

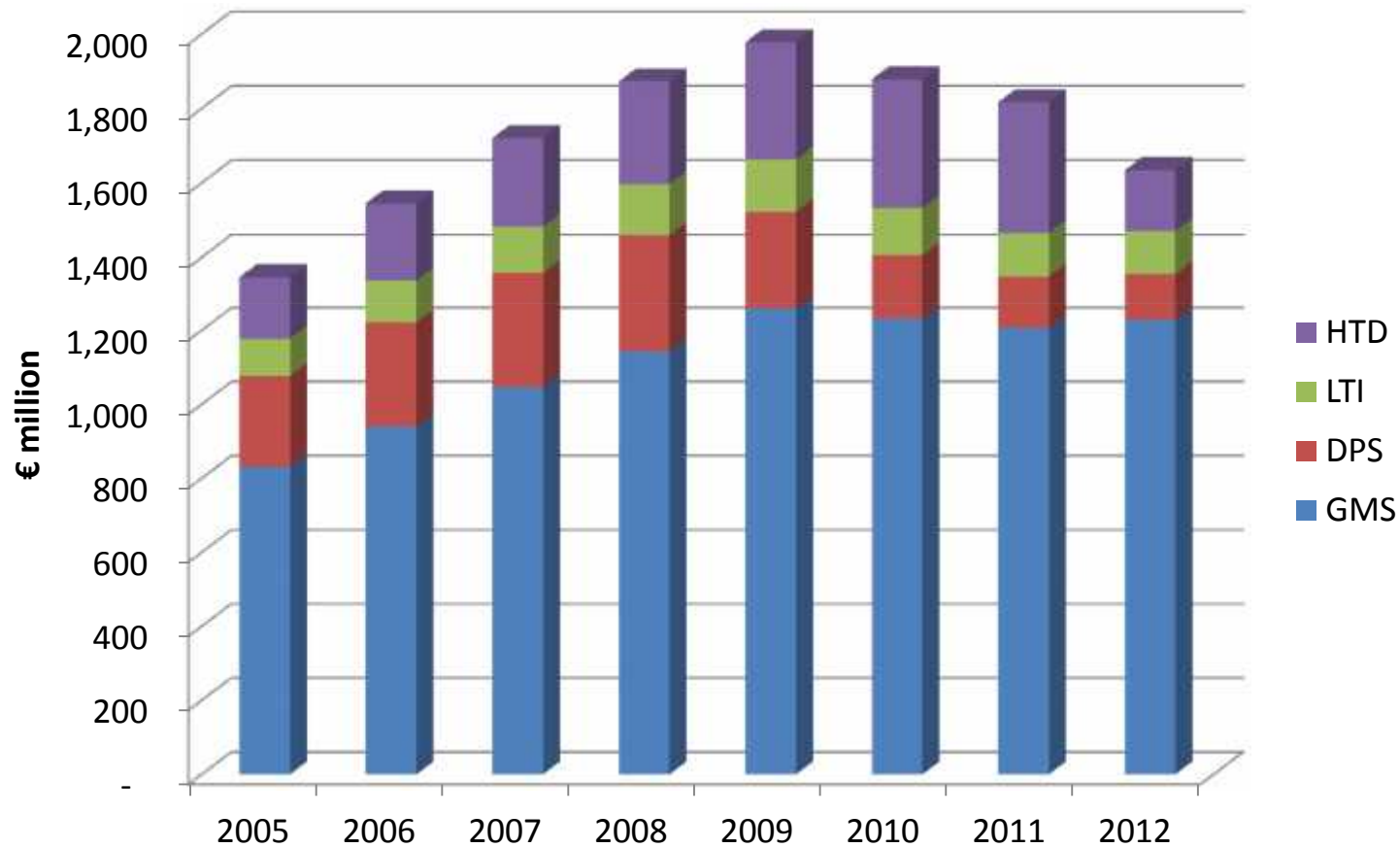
- Fewer hospital beds year-on-year
- Efficiencies (ALOS, Increased Daycases)



- Now leading to increased waiting times and trolley counts
- **Tipping Point**



Savings in Drug Schemes: Efficiencies or Cuts





System Transformation



- Free GP care
 - Phases 1 and 2 not implemented
 - Rethink
- UHI – multiple private insurance model
 - New risk equalisation mechanism
 - “The Path to Universal Care”
 - Money Follows the Patient (Single Fund?)
 - Big Questions:
 - Complexity, Cost-control and Capacity
 - 2016?



- <http://www.medicine.tcd.ie/resilience4health/>
- Key Indicators and sources
- Publications
 - Reports, peer-reviewed articles and chapters, policy briefs
- Linkages, News and Commentary

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Performance Metrics

Decision-making

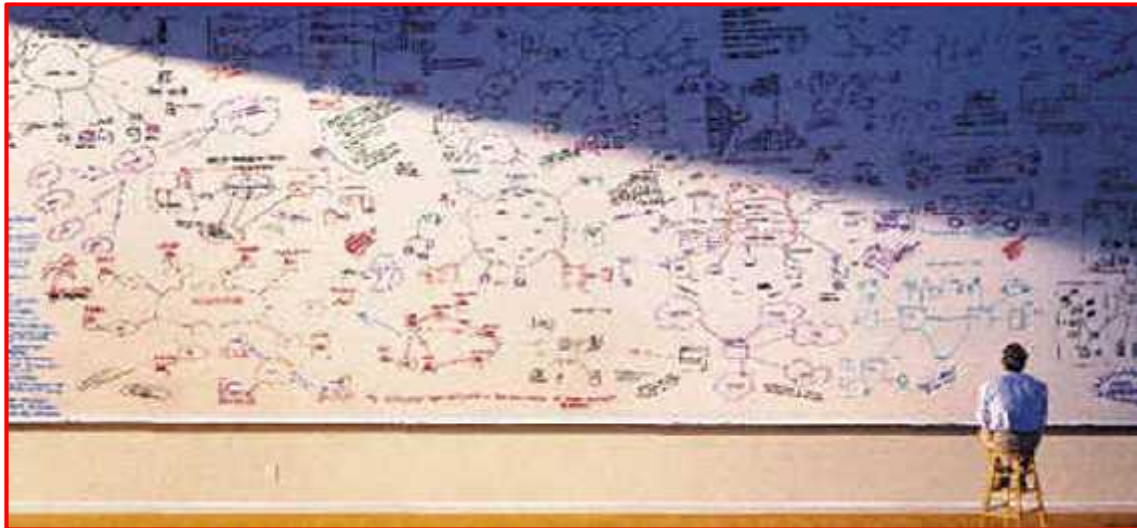
System Dynamics and Constraints



Key Challenges identified by Decision-Makers

- **Countering organisational fragmentation ...**

‘the history of the health system is one of incremental additions ... a tendency to give money and resources’; arrangements which seem ... ‘mind bogglingly; they’re beyond the bounds of the comprehension of the human mind’

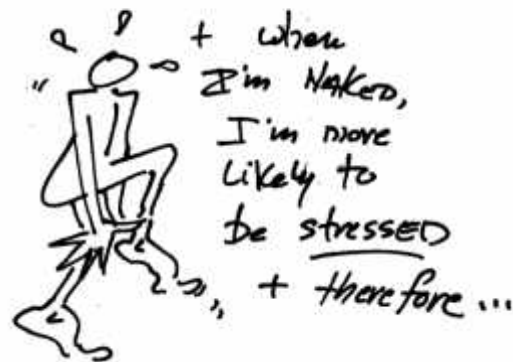




Key Challenges identified by Decision-Makers

- **Generating management capacity ...**

‘the management resource is in decline overall because senior people are leaving and not being replaced. The capacity of management to respond to the times we’re in is one of the key limiters to getting maximum benefit’





Key Challenges identified by Decision-Makers

- **Facing doubts about the political will/leadership to implement reform ...**
- ‘for me, until you have political reform you’re never going to have real reform in the public health system’
- ‘when you standardize you begin to see the inefficiencies in the system ... we have learned a lot certainly, with a question, is the political will there to take it on and sort it out?’





Key Themes from Decision-Makers making decisions ... are there ...

- **Signs of hope?**
- 'I think there is more of a cultural acceptance of the need to change. So in terms of a strategic development the fact that we are in such huge economic and financial difficulty means that people are likely to be far more open to looking at alternative major reforms in healthcare than they would have been previously'



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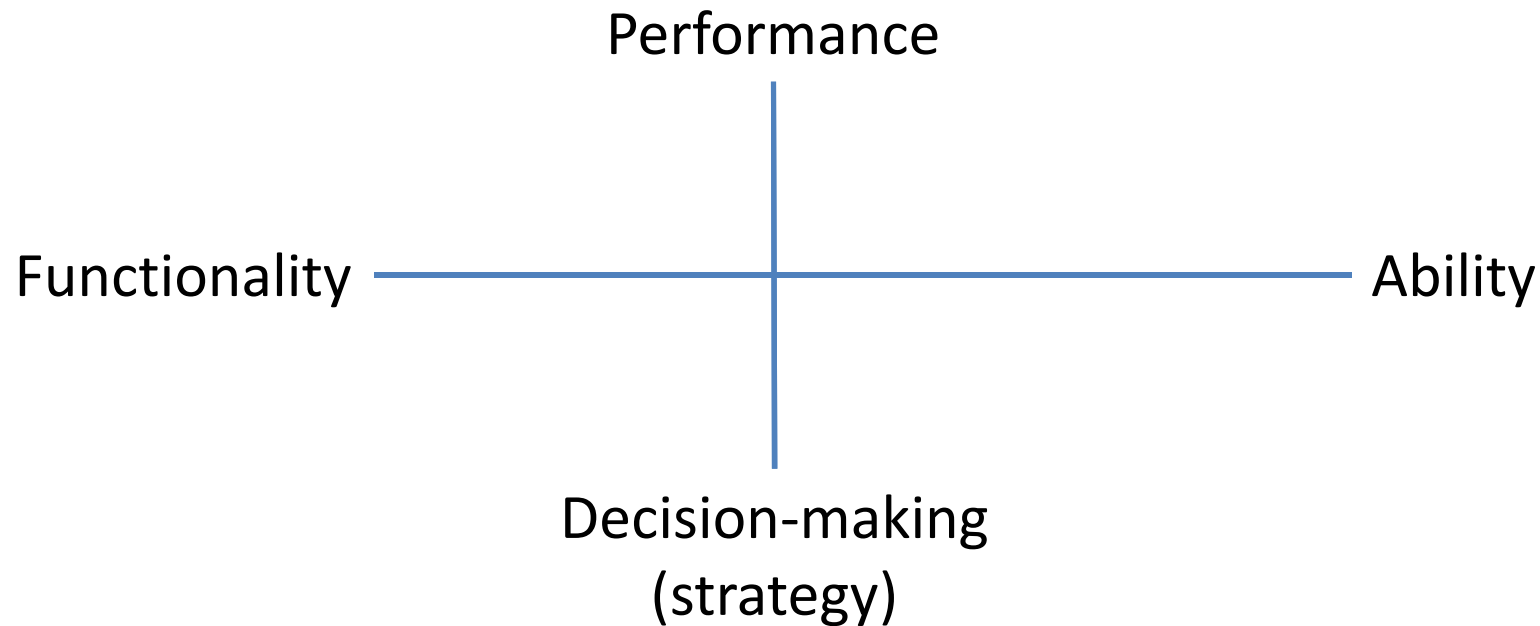
Performance Metrics

Decision-making

System Dynamics and Constraints



Framing the dynamics of resilience to better understand the complex connections



Understanding the links between these challenges is critical ...



Reflections on Coping

- Efficiency Gains
 - More from less
 - Low-hanging fruit picked
 - But now what?
- System constraints
 - Easy change and hard change
- Universalisation – which way?
- Capacity, decision making and political will



Outline for the morning

1. To draw lessons from country case studies (Estonia, Spain)
 - Dr Triin Habicht, DoH, and Prof José R Repullo, National School of Public Health
2. To highlight the key findings from Oslo II
 - Dr Matt Jowett, WHO
3. To showcase the Observatory Rapid Response
 - Dr Anne Nolan, ESRI, and Dr Sarah Thomson, European Observatory and LSE
4. To encourage knowledge exchange
 - You!



A very
tight fit!



The End



Thank you