

*MAPHM Public Health Symposium
Mater Dei Hospital - Malta
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**“THE EU IMPACT ON PATIENT CARE AND WORKFORCE MOBILITY IN A SMALL STATE.
CHALLENGES AND OPPORTUNITIES IN THE TREATMENT OF CANCER AND RARE DISEASES
AND ON PATIENTS’ ACCESS TO MEDICINES”**

Dr. Gisella Orsini

Dr. Natasha Azzopardi Muscat



Co-funded by the
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SMSHealth.eu Project

- 3 year project co-funded by the Erasmus + Programme (September 2015 / August 2018).
- Project network: Malta, Estonia, Slovenia, Iceland and The Netherlands

RESEARCH QUESTIONS

- (i) What are the challenges (or opportunities) experienced by health systems in small states?
- (ii) What are the characteristic features of health system reforms in small states?
- (iii) What role does the EU play in influencing small state health systems?



Preliminary findings from the SMSHealth project - Malta

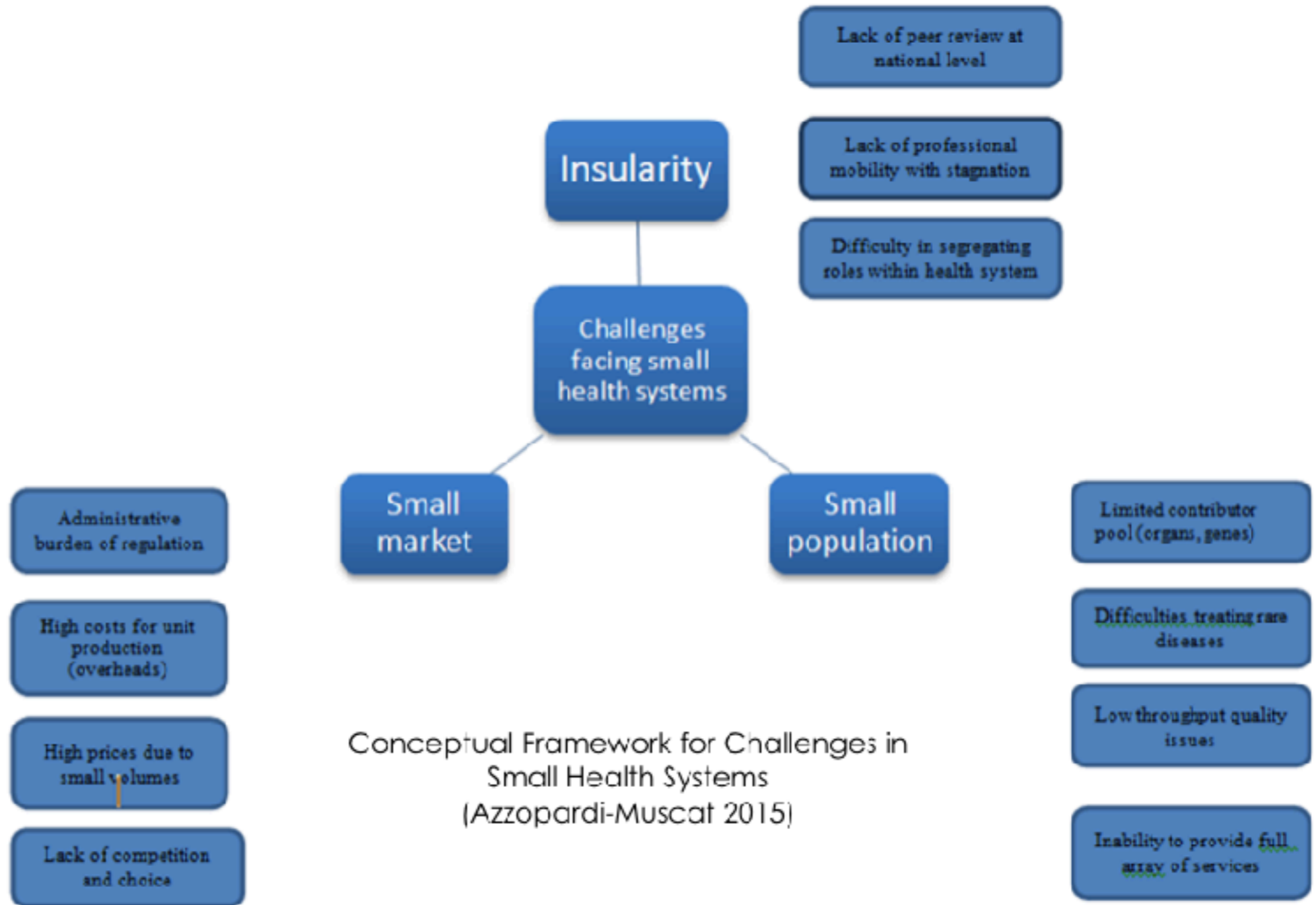
Face-to-face semi-structured interviews with experts on medicines policy, health care workforce mobility, cancer, rare diseases (N=10)



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Conceptual Framework for Challenges in Small Health Systems (Azzopardi-Muscat 2015)



Challenges

- Access to medicines appears to be an issue of concern in Malta: **small market/unattractive market, little negotiation power, limited purchasing power (cancer/rare diseases)**
- Health care workforce **shortage**, (especially nurses/highly specialised professionals) due to: (i) mismatch between demand and supply of labour (ii) **limited economic resources** (iii) **absence of specialised training and courses**
- **High dependence** on small numbers of highly specialised health care professionals
- **Lack of highly specialised professionals** (small population - low demand)
- **Service driven** rather than research driven
- **Lack of resources** (human and financial) — (rare diseases).
- Patients who require highly specialised care are **sent/treated overseas: small population/few cases**



Opportunities

- Easier **population health surveillance**
- Small population - good opportunity for **research**

NONE OF OUR PATIENTS ARE LOST TO FOLLOW UP, BECAUSE YOU CAN'T ESCAPE FROM THIS ISLAND. I MEAN, WE ARE ALL HERE. IN FACT, OUR FOLLOW UP IS USUALLY ABOVE 95%.

(MLT #05)

WE HAVE A LOT OF APPROACHES FROM INTERNATIONAL CONSORTIA TO JOIN WITH THEM. OUR DATA QUALITY HAS A HIGH REPUTATION, AGAIN SIMPLY BECAUSE WE ARE A SMALL COUNTRY AND IT'S VERY DIFFICULT NOT TO BE 100% COMPLETE. BECAUSE IT IS EASIER TO CAPTURE THE CASES.

(MLT #09)





Opportunities

- Policy makers – “helicopter view” of health issues

“SO WE END UP HAVING A BROAD VIEW, WHICH IS A POSITIVE THING. AND USUALLY A BROADER VIEW THAN SOMEONE COMING FROM A BIGGER COUNTRY. BECAUSE WE ARE INVOLVED IN MANY THINGS; WE DON'T JUST SPECIALISE IN ONE PARTICULAR THING. SOMETIMES WE CAN SEE THINGS THAT OTHER COUNTRIES DON'T SEE. I THINK THIS IS ONE OF OUR MAJOR CONTRIBUTIONS. IT'S A POSITIVE THING THAT YOU HAVE A BROAD VIEW, THAT YOU ARE INVOLVED IN MANY THINGS.”
(MLT #06)

- Easier to lease between groups – to address issues in health care - “one level bureaucracy”

“LIAISONS BETWEEN GROUPS IT'S EASY BECAUSE IT'S CLOSE. THERE IS ONE LEVEL OF BUREAUCRACY. OVER HERE, IT IS JUST ONE LEVEL, YOU GET THROUGH THAT, AND ALL IS DONE. SO THAT IS AN ADVANTAGE.
(MLT #05)



The influence/role of the EU

- The EU can enhance cooperation among member states, networking, sharing of data
- The EU facilitates Health care workforce mobility (exchange of knowledge/employment of foreign professionals)
- The EU has positively impacted the educational system
- EU funds (ERDF, EU funded projects) **essential** for improving health care services (e.g: new Oncology Hospital - Sir Anthony Mamo Oncology Centre, opened in 2014; setting up of the Maltese Biobank).
- The EU is perceived positively: (i)**drive for change** (e.g: implementation of colorectal and cervical screening programs) (ii) provides **guidelines** (iii) enhances **quality**

Conclusions

- positive impact from the EU on the domestic health system:
 - (i) the use of EU funds allowed important health services improvements, which would have not been possible due to the limited economic resources
 - (ii) Networking and cooperation at EU level (rare diseases, cancer and health workforce mobility)
 - (iii) the EU has served as important driver of change (also thanks to its technical guidance).
- Access to medicines – negatively impacted by the EU legal framework – more pronounced in relation to orphan drugs, and therefore in relation to rare diseases
- The EU needs to acknowledge small states' features and challenges, by moving away from “one size fits all” approach.

Conclusions

Despite the limitations of being a small country (small population, small market, limited economic and human resources), the **Maltese health system appears to adequately respond the populations' needs and expectations.**

“small states can succeed in having a strong public health system in spite of the disadvantages associated with small size, if these states adopt policies leading to good governance”

(Briguglio & Azzopardi-Muscat, 2015)





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THANK YOU!

<https://www.smshealth.nl>



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