"Informed patients, treatment that reflects actual needs, stable financing – in this interview Director Uwe Schwenk discusses why Germany’s healthcare system has to focus more on the people who use it. He also discusses the issues the Bertelsmann Stiftung’s Health projects are currently focusing on.

INTERVIEW

“The system needs to focus more on the people who use it”

What would you say the main challenges are for the German healthcare system?

Many people consider our healthcare system to be one of the best in the world. And as a society we can undoubtedly be a bit proud of that, not least because it offers a large part of the population access to a full range of services. Yet when people talk about the high quality of our healthcare system, it reminds me of the story of the frog in the pan of water. If you heat the water up quickly, the frog jumps out. If the temperature is only increased gradually, the frog grows
lethargic. Ultimately, it no longer has the strength to escape. In other words, we need to be wary of changes that creep up on us.

There is growing pressure for reform in all industrial nations, since people are getting older and the number of chronic, degenerative illnesses is growing. More and more people need many years of treatment or nursing care. In addition, costs are rising because of advances in medical technology. We therefore have to ask ourselves how we're going to deal with the resulting financial burdens – through the existing statutory insurance system, through additional private insurance or, in case those two are not sufficient, by increasing government-funded social assistance programs. Those are the challenges facing policymakers and society at large, and both must react. The sooner they do so, the easier it will be to jump out of the pan.

Another problem typical of highly developed countries is that there are people who are receiving too much care, people who don't receive enough care and people who are receiving the wrong care. That means despite the high quality, the system is not necessarily providing patients with what they actually need. Some procedures are carried out far too often, others too rarely or in a way they shouldn't be. That's an issue, and not just in Germany. Here's an example: In our project Faktencheck Gesundheit (Healthcare Fact Check), we've been able to show that tonsillectomies are performed in some parts of Germany eight times as often as in others, a difference that cannot be justified from a medical point of view.

Treatment outcomes, moreover, are often only average, despite the fact that people in Germany go to the doctor and are treated in hospitals much more than people in other countries. And there are clear differences in the quality of the country’s hospitals, doctors and nursing homes – a very important consideration for people using the system, since they are, for the most part, free to choose their own provider.

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Which developments are particularly relevant for the work you do?

In addition to the lack of focus on quality and what is actually needed, in past years we've also seen a fundamental change in the roles that exist within the healthcare system. Patients are playing an increasingly active part in their
treatment and want to be more involved in making decisions. At the same time, greater demands are being placed on doctors. They are expected to be up to date on the latest medical developments and to interact more with other doctors and healthcare providers. In addition, they’re expected to be empathetic and capable of responding to patients’ concerns.

Germany’s healthcare system is not doing enough to keep up with these developments. Many people do not yet have the know-how to take on the responsibility of being a “co-producer” of their own health. During their training, moreover, doctors are not adequately prepared for the new challenges that await them, such as communicating with patients.

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What are the goals of the Bertelsmann Stiftung’s Health projects?

To put it concisely, we want a healthcare system that focuses on the people. After all, as banal as it might sound, it’s the people needing medical and nursing care, and their families, that the system is supposed to serve. And they are the ones paying for it, a fact that sometimes gets forgotten. We want to help ensure that the quality of care increases where it is not yet adequate. And we want treatment to better reflect people’s actual needs. Given the tendency I’ve already mentioned for some people to receive too much care, we are very deliberately sending the message “less is sometimes more.”

Some officials in the healthcare field like to say that we’ve done everything we can and, since resources are limited, we can’t afford everything on our wish list. Our answer to that is: Before talking about cutting back, we have to become more efficient. Services should not be reduced only to lower costs. They should be provided and made use of more efficiently.

We want a system that is stable financially and that is based on solidarity. We want everyone to have access to suitable, quality care. Through our projects like Weisse Liste (White List) or our Befunddolmetscher website, which translates medical diagnoses into language the general public can understand, we want to empower people to make better decisions when it comes to health issues. In terms of providing care, we have to continue improving the coordination among healthcare providers and their organizational networks.
For us, the healthcare system is more than just a tool for repairing what’s broken. Ensuring better health for everyone in society needs, therefore, to become a key goal in all policymaking areas. Health-promoting measures have to be integrated into all areas of life – in daycare centers, preschools, schools, workplaces and the community.

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Which goals are you pursuing in the area of nursing care?

We face a number of special challenges in this area. More and more people are requiring nursing care, and yet the number of caregivers is declining. Our ‘Pflegereport 2030’ (Nursing Care Report 2030) showed that there will be a shortage of 500,000 caregivers in Germany by 2030 if current trends continue. We fundamentally believe that people should receive home care before they are placed in a facility, not only since that will help reduce the shortage of caregivers, but because it better reflects what people want and need. In addition, communities must be given greater responsibility to manage resources, since nursing care always takes place locally.

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How would you describe the role that a foundation like the Bertelsmann Stiftung plays in the area of healthcare?

Many actors in the healthcare field – doctors, hospitals, health insurance companies, patients’ organizations and businesses – are constantly talking about what the right thing to do is. Since we are a foundation, we’re impartial in this area and can point out problems and developments that are potentially heading in the wrong direction. We can gather knowledge and provide access to decision makers. In addition, we can help close the gaps that arise for whatever reason. One example is our Healthcare Fact Check, which we use to call attention to variation in provision among Germany’s various regions.

How do you identify your topics?
We are constantly analyzing Germany’s healthcare system, based on current findings and on reforms carried out in Germany and other countries. The key here is the topic’s social significance and whether or not the Bertelsmann Stiftung can contribute through one of its projects – in other words, if we can make a difference. As a private operating foundation we design and develop our projects ourselves. At the same time, we cooperate with an extensive network of experts on almost all of our projects. We try to bring together organizations and individuals with the same goals.

How do you approach your projects?

Since we carry out our own projects, we not only want to analyze problems, we want to have a positive impact on society as a whole. In those areas where we don’t yet know enough, we carry out research to shed more light on the subject. In terms of Germany’s healthcare system – with all of its institutional interdependencies – we’ve also been concerned with bringing additional momentum to those changes that have already been identified as necessary.

We believe that all roads lead to Rome. We therefore address decision makers in the political and administrative spheres using studies and approaches that are as hands-on as possible. We also address the public, not least because we believe that they are part of the solution in many areas. As patients, family members and even as voters, they help stabilize and improve our healthcare system, directly and indirectly. Weisse Liste is a good example. We use it to make the services and quality of healthcare providers transparent to the public, thereby supporting patients as they decide which provider to use. We also promote competition within the system so that the quality of care increases and services more accurately reflect current needs – in the area of nursing care, for example. Individual needs and a constantly improving system are two sides of the same coin.

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PROJECTS

The Digital Patient

Neuordnung Krankenhaus-Landschaft

Patients with Impact

Weisse Liste