

DELIVERING INTEGRATED SERVICES IN PUBLIC HEALTH – SOCIAL – EDUCATION FIELD

1. The project

As a result of the participative process of co-creating the LAP with all stakeholders, at the end of the 4D Cities URBACT project in which we saw best practices from the other cities involved, the things that we learned lead us to the conclusion that all the proposed projects are interlinked and directly co-dependent one to each other.

We are proposing a number of 5 projects (initiatives) that are addressing the needs of the population in an integrated manner, in Health Field, Social Field, Education

- Integrated Centre for Socio – Economical – Medical Analysis Initiative
- Re-opening the Public Hospital from Baia Sprie as a centre for terminal-phase patients palliative care with 20 beds.
- Units and projects for services outside the hospital Initiative
- Baia Sprie population as co-owners and co-generators of their own health Initiative
- Centre for Smart Development Initiative

The main project and by far the most challenging one is **Re-opening the Public Hospital from Baia Sprie as a centre for terminal-phase patients palliative care with 20 beds**. In the current resume of the LAP, the main focus will be on this initiative, underlying the interconnections between all proposed projects.

2. The context

In 2011, the Romanian Minister of Health closed the local Chronic Disease Hospital Baia Sprie, and by that, the entire Baia Sprie area (consisting of 22.500 people) was left with no option for local medical services.

This action has to be linked together with the fact that the region was always a mining region, that more than 70% of active population was involved in mining industry, and that once with the closing of the mines Baia Sprie was left with a huge economic problem, doubled by the medical problem, due to the chronic diseases of the miners.

In august 2011, at the initiative of Baia Sprie Mayor and after a public subscription, Medspria was borne as a private medical company. The initial Medspria shareholders structure consisted of 77 individuals, 9 companies, Baia Sprie City Council and a nurse union. The objective of Medspria was to re-open the hospital at its full capabilities. It was the only hospital closed by the Government that was re-opened. Even more, a new concept was raised – placing the people in the centre of the health care system, being co-producers and co-owners of their own health and health system generator. Although the great idea behind the project, its objective is not yet met, the hospital running currently only 5 medical units and facing huge underfinancing problems.

3. The rationale

Physical rehabilitation of the old hospital building is needed in order to be able to function as a hospital in modern conditions. Contracting good doctors and hiring personnel is a must after the rehabilitation. Opening the hospital as a centre for terminal-phase patients' palliative care.

Yearly, aprox. 1400 new cases of cancer are identified in Maramureş county (0.28% of the county population). Out of this number, more than 50% (700-800) people are dying the same year. There are not enough beds in hospitals and not enough specialised personnel to take care of people in terminal phases of their lives (data collected from interviewing Dr. Dumitru Filip – chief oncologist at public county hospital Baia Mare and Dr. Calin Pop – former General Manager at public county hospital Baia Mare).

4. The Theory of Change

We want to be able to take care of these people in terminal phase of their lives, offering them professional medical services and assistance, psychological and/or religious counselling, decency and dignity by not being thrown out of the hospitals and sent home to die alone.

A hospital that can offer medical services with permanent care with 20 beds can address 5-7% of the total number of 700 people annually (if referring only to the Baia Sprie area population related to the total number of population in Maramureş county) and 35-45% of the total number of 700 people (if referring to Baia Sprie area population together with Baia Mare area population – Baia Mare is the capital of the county located only at 15 km distance from Baia Sprie). The people involved are those being ill and also their families.

We will be able to take care of 20 people that nobody else wanted to take care of. More, we will offer not only medical services and a bed to stay in, but also present other people that cured from the same "final" condition with good care, keeping the loved one close, treating not only the body but also the soul. We will have doctors and nurses that will talk to people, treating them as people, and not only as sick dying people. We will also have priests that will offer their time and attention to people who will ask for them. We will offer psychological consulting for the family.

5. The project objectives

Create an integrated view and approach in seeing and addressing Public Health, by gathering together all the actors, all the stakeholders and linking them in offering better services for the population in all inter-related fields: Social, Educational, Health.

Regarding the Public Hospital Initiative, the objective is to re-open it as a centre for terminal-phase patients palliative care with 20 beds.

6. The local policies and areas involved

We are developing projects in Health area, Social area and Education area in an integrated manner, realising that all the projects we proposed for LAP are in fact projects with links in all of the 3 domains.

We reached the final form of the LAP after many ULSG encounters, after all the URBACT meetings, summer universities, elected representatives training sessions, national dissemination schemas. We hope that in the time of implementation of the projects all these actors will still work together and improve current projects and develop further ones.

For instance, The Project of Integrated Centre for Socio – Economical – Medical Analysis Initiative will give data and support for a best decision in what kind of units and projects are proper to develop outside the hospital, but also an interested view of the link between lack of education and lack of health.

Moreover, by trying to convince as much as possible from the total population of becoming shareholders in MedSpria, they will earn the right to choose for their own health, by creating themselves the exact services they need.

The Centre for Smart Development will give the frame where NGO's and private companies can deliver education, basic education related to health or advanced trainings needed in order to be able to serve in medical field (nurses...)

7. The governance. Who does what

The project coagulates the following actors, stakeholders in a strong partnership: MedSpria board, Mayor of the city and local City Council (local government), terminal phase patients, families of the patients, National House of Health – Maramures county, county public hospital.

MedSpria board will invest time and money in the project, being the investors, for renovating 1 floor of the hospital building facilities for 20 beds, hiring doctors, nurses, setting the partnership with churches and psychologists.

For the patients in terminal phase of their lives, and for their families, there will be organised discussions with other sick people that were cured, psychological meetings, they will be the beneficiaries of the treatment in a decent, loving environment. They will have the time to prepare in silence and in dignity, with the help of a priest or a psychologist for the big passing by, having their families close.

The National House of Health – Maramureş county will be involved in the operational stage of the hospital, by supporting a part of the costs of the hospitalisation and services. The objective is to proof that the case ("externalising" services to private hospitals) can be a best practice that can be replicated for other services in any place of Romania.

For the Public County Hospital, there will be a decreasing demand for one request, allowing doctors and nurses to have less patients for which they can allocate their time and resources. In terms of costs and bed, there will more available beds for patients with good chances to be cured.

For the big public – people living in Baia Sprie area, they will be the indirect beneficiaries of the project and at the same time they will be co-owners and co-producers of their own health, by becoming shareholders in MedSpria.

8. What we learnt. How we use it

Starting with summer 2011, after the closing of Chronic Disease Hospital Baia Sprie, the city, through its Mayor and local Council were convinced that if they could reopen the hospital, all the medical problems of the people from Baia Sprie area would be solved.

Working within URBACT II Programme, by being a partner of the 4D Cities project, gave the opportunity to the City of Baia Sprie to meet other cities, to face others problems, to see others best case scenarios, to ask its citizens, to create and generate meetings of the ULSG, in just a few words - to broader the view. So, this document changed before even started to exist from a LAP on opening the hospital to its initial state to a LAP for Integrated Public Healthy Services in Baia Sprie.

As a result of the participative process of co-creating the LAP with all stakeholders, at the end of the first year participating in 4D Cities URBACT project, the focus of the LAP is set to be as follows: a Local Action Plan for Integrated Public Healthy Services on 4 major priorities of the city: **Public Health, Social field, Economic field, Education.**

Running more than 15 meetings with all the members of the ULSG on one hand, and 3 big meetings with more than 50 persons from all types of stakeholders around the city on the other hand, when writing down the projects to be eligible in the final form of the LAP, the conclusion was surprising. All of the projects had some interconnections between them, and most important, all of the projects had touched points in 3 major fields: **Health, Social, Education.**

The conclusion is that we narrow the approach and eliminated the segregation between projects – having 2 projects on Social field, and 3 on Health ... and in the end we developed all the projects in order to have good roots in a new centralising field: **Public Health – Social – Education Field.**

9. The innovation

We promote the concept - Baia Sprie population as co-owners and co-generators of their own health Initiative. By this initiative, we are trying to attract more than 50% of the adult population of the Baia Sprie area as shareholders and active actors in defining, controlling, financing and monitoring all aspects related to public health through a private medical company – MedSpria.

We also promote the concept of externalising a series of services out of the big public health system into smaller, private units, dedicated and focused to a relatively small niche, where patients will be better treated and public money will be better spent.

10. The benefits

- *Regarding MedSpria unit and board, MedSpria will become the standard in treating people in last phase of their lives*
- *Regarding patients in terminal phase of their lives, we will be able to provide extension of their life with loved ones close, with hope and peace in mind*

- *Regarding the National House of Health – Maramures county (governmental institute for health), the case will become a best practice that will be extended to other services*
- *Regarding Families of the sick people we will be able to increase awareness about cancer*
- *Regarding Public county hospital we will be able to increase the number of beds for people not in terminal phase of their lives and to be able to transmit more hope for the sick people with good chances to cure*

11. The measurement

We expect to reach the outcomes described earlier by measuring the following indicators:

- *Double the life expectancy for more than 20% of hospitalised people*
- *5% of the hospitalised people will not die (unless much later and/or by another cause)*
- *1 new kind of service will be “externalised” from the public county hospital to private ones*
- *Create a support group for cancer in Baia Sprie*
- *2 events yearly for disseminating the importance of prevention of cancer by screening*
- *Oncologist training programs for every family doctors in Maramures*
- *Extend the number of beds with 50% in next 3 years*
- *10% more time for the doctors to talk with patients*
- *5-10 more free beds available monthly in public county hospital*

12. The transferability

When the initiative will be fully operable it will bring hope and dignity to patients in terminal phases of their lives and their families. It will also be a proof that the concept of externalizing services out of the public health system (services with impact) is working.

Every community will be able to find biggest problem inside and try to solve it the same way we are doing it.

Conditions – open mind, public awareness and a lot of work.

13. The next steps

Step 1

A feasibility and technical study for the rehabilitation will be run by an external partner (architects house, consultants company) that will be contracted in order to deliver the technical parts and annexes.

Step 2

Identifying possible existing funding schemas.

Step 3

Physical rehabilitation of the building.

Endowing the new units with specialised equipment, drugs and supplies.

Step 4

Contracting good doctors and specialized personnel. Opening and running the new hospital and medical units.

14. I want to know more

Mr. Dorin Pașca – Mayor of the city of Baia Sprie

Mr. Zoltan Molnar – Medspria Medical Unit Manager

Mr. Iulian Furnea – External expert, advisor for 4D Cities project

Mr. Bogdan Breban – Projects Implementation Unit, Baia Sprie City Council