





#### TO-REACH -

Transfer of Organisational innovations for Resilient, Effective, equitable, Accessible, sustainable and Comprehensive Health Services and System

#### **COUNTRY REPORT Austria**

#### Introduction

The Austrian national consultation workshop took place on 12 April 2018 in Vienna, Austria, at the premises of the national public health institute Gesundheit Österreich GmbH (briefly: GOeG), who is the To-Reach partner for Austria. GOeG organised the meeting in close cooperation with the Austrian Federal Ministry of Labour, Social Affairs, Health and Consumer Protection.

Participants of the plenary session were mainly stakeholders of the public sector, academia, NPOs and NGOs.

Participants included representatives of

- the Austrian Federal Ministry of Labour, Social Affairs, Health and Consumer Protection.
- the Austrian Public Health Institute,
- the Austrian Research Promotion Agency,
- the Main Association of Austrian Social Security Institutions,
- the Medical University of Vienna,
- · the Institute for Advanced Studies,
- patient advocates,
- the Austrian Red Cross,
- the European Centre for Social Welfare Policy and Research,

- dwh GmbH Simulation Services und Technical Solutions and
- the Austrian Federal Ministry of Education, Science and Research.

The team invited representatives from around ten more institutions (e.g. the Austrian Public Health Society, the Health Care Research Institute of the Upper Austrian Doctors' Association and further universities etc.) who but could not attend for time constraints and/or because of conflicting appointments.

## 1.0 Brief Event Description

Country: Austria

Date: 12 April 2018

Starting time: 14:30 / Ending time: 16:30

Organising Institution: Austrian Public Health Institute (GoeG)

Report drawn up by: Claudia Habl, Isabella Röhrling

## Description of activity:

The Austrian Public Health Institute (GOeG) organised the Austrian national consultation and chose the format of a plenary session in order to provide all participants with the opportunity to discuss relevant aspects in an open-minded environment and promote an active discussion between different stakeholders of the national healthcare system. The language of the national consultation was mainly German to increase convenience of the national decision makers and experts in the field of health system organisational research in Austria.

The plenary session included three main activities:

Activity 1: Presentation of current research activities in the field of health system research in a European context by the Austrian Research Promotion Agency FFG.

Astrid Hoebertz

Activity 2: Presentation of the project to-reach by the Austrian Public Health Institute GOeG, Claudia Habl

Activity 3: Plenary discussion moderated by the Austrian Public Health Institute GOeG, Claudia Habl

The discussion in the plenary session covered following questions:

- 1. What are the most important challenges that you would like to see solved within the health system of your country? How can health services and policy research help to address this?
- 2. Of these challenges, which could be addressed more effectively by using research at the European Level?
- 3. Are you aware of solutions from other countries that you would like to implement in your country? What factors need to be taken into account so that these can be implemented within your country context?

Due to the tight schedule and the lively ongoing debate on questions 1 and 2, question 3 was not dealt with in detail during the plenary session.

## Consultation's programme:



Sehr geehrte Damen und Herren,

bereits vorab vielen Dank für Ihre Teilnahme am Kamingespräch im Rahmen des "EU Horizon 2020"-Projekts TO-REACH <a href="https://to-reach.eu">https://to-reach.eu</a> an der GÖG am 12. 4. 2018 von 14.30–16.30 Uhr im Sitzungszimmer UG1–UG2, Eingang Biberstraße 20, 1010 Wien.

#### Programm Kamingespräch

Moderation: Mag. Claudia Habl

14.30-14.45	Begrüßung und Projektvorstellung durch die GÖG	
14.40-15.00	Projekte und Aktivitäten im Bereich der Gesundheits-	
	systemforschung in Ö und der EU von Dr. Astrid Hoebertz (FFG)	
15.00-16.30	Informationsaustausch und Brainstorming in puncto	
	Gesundheitssystem- und Versoraungsforschung	

#### Inhalte Kamingespräch

Im Rahmen des Kamingesprächs sollen insbesondere folgende Fragestellungen der Gesundheitssystemforschung in Österreich besprochen werden:

- » Was sind die wichtigsten aktuellen Herausforderungen des österreichischen Gesundheitssystems, die gelöst werden müssen? Wie können Politik und Versorgungsforschung zur Lösung beitragen?
- » Welche dieser Herausforderungen k\u00f6nnten besser gemeinsam auf EU-Ebene gel\u00f6st werden?
- » Sind Ihnen Lösungen aus anderen Ländern bekannt, die Sie gerne in Österreich umsetzen möchten? Welche Faktoren müssen zur Umsetzung im nationalen Kontext berücksichtigt werden?



# 2.0 Description of Participants attending Consultation

Total number of participants: 13

to-reach: Kamingespräch 12.04.2018, 14.30-16.30

Bitte beachten Sie, dass Ihre Daten für Projektzwecke elektronisch durch die GÖG verarbeitet werden und Ihre Teilnahme im Bericht an die EU dargestellt wird.

	Nachname	Vorname	Institution
1.	AUER	Clemens M.	BMASGK
2.	HOEBERTZ	Astrid	FFG
3.	GOLTZ	Andreas	HVB
4.	SIMON	Judit	MUW
5.	DORNER	Thomas	MUW
6.	CZYPIONKA	Thomas	IHS
7.	OSTERMANN	Herwig	GÖG
8.	HABL	Claudia	GÖG
9.	BACHINGER	Gerald	NÖ PPA
10.	PILZ	Sigrid	W PPA
11.	WILD	Monika	Rotes Kreuz
12.	EICHWALDER	Stefan	BMASGK
13.	BAUER	Gudrun	Euro Centre
14.	POPPER	Niki	DWH
15.	RÖHRLING	Isabella	GÖG
16.	BAUER	Hemma	BMBWF

The gender distribution of participants at the Austrian national consultation was very balanced, with six females to seven males.

Participants are attributable to following sectors:

Public sector: 6

• Private sector: 3

• NGOs/NPOs: 2

• Academia: 2

All participants, independent of the sector, are academics and actively involved in research and/or policy activities in the Austrian healthcare system. Furthermore, eleven participants are actively involved in similar activities on the European level.

Representatives of following organisations were present at the national consultation:

- Austrian Federal Ministry of Labour, Social Affairs, Health and Consumer Protection
- Austrian Public Health Institute
- Austrian Research Promotion Agency
- Main Association of Austrian Social Security Institutions
- Medical University of Vienna
- Institute for Advanced Studies
- Patient advocates
- Austrian Red Cross
- European Centre for Social Welfare Policy and Research
- dwh GmbH Simulation Services und Technical Solutions
- Austrian Federal Ministry of Education, Science and Research

Representatives of following organisations excused themselves shortly before the national consultation but were interested in the topic.

 UMIT - Private University for Health Sciences, Medical Informatics and Technology

- Danube University Krems
- Health insurance funds
- Austrian Medical Association

The discussion between the participants was fruitful and balanced without one group dominating the discussion.

An important side learning was that especially the high level decision makers present were rarely familiar with the presented EU health care research projects. Researchers seem to need to improve their efforts to share their lessons learned with decision makers.

# 3.0 Description of Health System Research Funding and Organisation

The overall national research strategy of the federal government of Austria aims for an R&D quota of 3.76 percentage points in the course of EU 2020. Overall spending on research and development in Austria amounted for appr. three percent of the national GDP, whereof around 50 % are financed by companies und 30 % by the federal state of Austria. In 2015, R&D on medicine and health sciences, including all economic sectors, accounted for appr. 825 million  $\in$ .1

Relevant research funding organisations in the field of health in Austria are the

- Austrian Science Fund (FWF, <a href="https://www.fwf.ac.at/en/">https://www.fwf.ac.at/en/</a>) and the
- Austrian Research Promotion Agency (FFG, <a href="https://www.ffg.at/en">https://www.ffg.at/en</a>).

Non-university research organisations active in the field of health are:

- Ludwig Boltzmanngesellschaft (LBG, <a href="http://www.lbg.ac.at/the-men/english-information">http://www.lbg.ac.at/the-men/english-information</a>)
- Christian Doppler Research Association (CDG, https://www.cdg.ac.at/en)
- Austrian Academy of Sciences (ÖAW, <a href="https://www.oeaw.ac.at/en/">https://www.oeaw.ac.at/en/</a>)
- Institute of Science and Technology Austria (IST Austria, https://ist.ac.at/)
- Austrian Institute of Technology (AIT, <a href="https://www.ait.ac.at/en/">https://www.ait.ac.at/en/</a>)
- A few regional organisations

In general, national research programmes do not include a thematic cluster on health. In contrary to a number of other EU countries, there is no specific body or agency and thus no earmarked budget line in charge of co-funding health care (system) research in Austria.

A more general cluster called 'Life Sciences' focuses on medicine and pharmacy, but also includes other topics like biotechnology or medical decives.

<sup>&</sup>lt;sup>1</sup> Statistik Austria (2017) F&E in allen volkswirtschaftlichen Sektoren

Research activities on the Austrian health care system are categorised either in the thematic cluster 'Life Sciences' or other clusters on social sciences, depending on the research topic.

However, national calls on health system research or research projects on the Austrian health system are scarce. No research-funding programme focuses on health system research in particular.

There are two non-university research organisations active in the field of health care system and organisation research, the Austrian Public Health Institute (GOeG, <a href="https://goeg.at/">https://goeg.at/</a>) and the Institute for Advanced Studies Vienna (IHS, <a href="https://www.ihs.ac.at/">https://goeg.at/</a>) and the Institute for Advanced Studies Vienna (IHS, <a href="https://www.ihs.ac.at/">https://www.ihs.ac.at/</a>). Also, a few regional university research organisations like, e.g., the Private University of Health Sciences, Medical Informatics and Technology (UMIT, <a href="https://www.umit.at/page.cfm?vpath=index">https://www.umit.at/page.cfm?vpath=index</a>) in the Tyrol or the JOANNEUM RESEARCH Research (<a href="https://www.jo-anneum.at/en/health/productssolutions/health-care-research/">https://www.jo-anneum.at/en/health/productssolutions/health-care-research/</a>) in Styria have activities in the field.

#### 3.1 Domestic Research Priorities

The results presented in this section are the outcome of the plenary discussion of the national consultation. There is no explicit ranking applicable for the research priorities, but elements linked to **primary respectively integrated care** as well as topics around the **digitalisation of health care** were addressed by most participants.

Overall, the four thematic clusters are broad research priorities further defined by their sub-priorities.

Additionally, stakeholders present at the national consultation received the opportunity to provide feedback and amendments on the minutes of the national consultation. This version includes the outcome of the national consultation.

Figure 1 depicts the overall outcome of domestic research priorities. Some domestic research priorities are interdisciplinary and, therefore, not apply exclusively to one thematic cluster. The four broad thematic clusters and national priorities are:

- healthcare system design
- digital health & data
- innovation
- socio-demographic aspects

A potential ranking of the priorities is difficult to conduct, as many priorities are interdisciplinary, i.e. affecting more than one stakeholder group. Therefore, sub-priorities do not follow a classification.

National research priorities also represent recommendations for European research priorities.

Figure 1: domestic research priorities

- harmonization of healthcare pathways
- improved transferability of knowledge/ establish interfaces between stakeholders (public sector, private sector, academia, etc.)
- integrated/patient-centred care & patient involvement
- centralised quality indicators and quality/risk management
- · health work force: planning & training
- sustainable financing
- primary care

Healthcare system design

- analysis of routine data
  →improves transparency of healthcare system
- homogenous registries
- data collection & non-exclusive data exchange
- Big Data & its utilization within different stakeholder groups & for different purposes
- improve access to ehealth solutions for patients
- healthcare system planning based on data analysis
- improve evidence base for health policy decision makers

Digital health & data

## Innovation

- medical technologies, assessment & appraisal
- new methods & means, e.g. economic evaluation
- mission oriented R & D:
   disinvestment & clever investment decisions, e.g.
   areas unattractive for industry research but with
   high burden of disease/high patient need
- monitoring and alignment of healthcare pathways (within and between patient(s) & system)
- integration of research results in practice

## Socio-demographic aspects

- inequalities
- demographic change: challenges & adaptations
- assessment of health care needs of population
  (→ affecting public health priorities)
- cross-border health care and patient mobility
- cultural preferences
- behavioural preferences
- promote informed patient & patient choice
- health prevention & promotion (health literacy)

Stakeholder/s proposing or supporting this priority
 Consensus priority or unique (minority proposal)

All stakeholders of the national consultation endorsed the definition of the four broad thematic clusters (main priorities) and its sub-priorities. Some priorities and/or sub-priorities can be associated to specific stakeholder groups, entailing a higher importance. Nonetheless, all stakeholder groups agreed on the general importance of the respective priorities and/or sub-priorities.

## • Why was this priority proposed?

The stakeholders proposed the above listed priorities and sub-priorities as being the most important current challenges of the domestic healthcare system. Participating stakeholders were renowned health policy decision-makers, patient representatives and researchers in the field of the healthcare/health system.

Which domestic health system challenge would it seek to address?

Research priorities and sub-priorities reach beyond current domestic challenges of the healthcare system and rather represent a collection of the most important research priorities overall. Information collected covers the most relevant topics for national and European research agendas.

## 3.4 European Research Priorities

As previously mentioned, national research priorities align with European research priorities. Additionally, participants addressed following points being relevant for research projects on EU level:

- Improve sustainability of project results; highest impact of EU project results in countries with project lead, lower impact in other countries
- enhanced transferability of project results into national settings to improve sustainability and added value of project/project results
- ONE European database for all health-related data incl. system information, indicators and outcomes.

- Availability of data for secondary use, accompanied with appropriate legal conditions taking data protection issues into account
- Interfaces and cooperation between different stakeholder groups of the healthcare system
- Determination of burden of disease throughout Europe; research agenda should focus on high burden of disease, specifically without incentives for industry to perform research (e.g. dementia)
- · Development of standardized quality indicators and monitoring

## 3.5 Transferring Knowledge and Capacity

Due to time constraints, the topic of transferring knowledge and capacity was not covered at the national consultation. During the session, it was mentioned though, that closer collaboration between different stakeholder groups also cross-country is necessary to improve research activities and subsequent use of research findings.

# 4.0 Barriers and facilitators to Health Systems Research Funding and Organisation

Barriers on the national level are

- limited networking and interconnectedness between different national stakeholder groups
- Determination of national priorities is difficult because of diverse stakeholder interests
- limited access to information/data of the healthcare sector outside of stakeholder groups
- Guarantee for publication and dissemination of project and research results
- limited access to innovative health services, e.g. due to specific patient target group or geographic regions

In the session, participants focused on the research priorities and potential barriers. Facilitators seemed of lower importance compared to the elimination of barriers, which would facilitate health system research.

# 5.0 Expectations from a programme of organised Health Systems Research at European level

National and European research priorities (see 3.1 & 3.5) represent expectations for the content, including organizational aspects, for organized Health Systems Research at European level.

#### 6.0 Reflections

Overall, the Austrian Public Health Institute (GOeG) and the participants were satisfied with the outcomes of the national consultation.

Participants included almost all major actors in the field of health system research in Austria. Participants of the national consultation represented a good mix of stakeholders from various fields, e.g. health policy makers, academia, patient representatives, etc.

Due to the casual format of the plenary session, the discussion took place in an open and affirmative atmosphere.

There is one general remark on the organization of the national consultation. The session was too short to cover all relevant questions that mainly resulted from limited availability of specifically high-ranking participants.