

# **Annual Conference, Lyon, France June 27<sup>th</sup>-29<sup>th</sup> 2007**

# Hosted by IFROSS - the Institute of Research and Training for Health Organisations, Université Jean Moulin, Lyon

# **Call for Papers**

### "MANAGING VALUES IN HEALTH CARE"

EHMA's Scientific Advisory Committee is now seeking oral presentations and posters on the theme 'Managing values in health care' to be presented at the Annual Conference. The submission deadline is 15th January 2007. Authors whose papers are selected for presentation will be advised by March 6th 2007.

Submission format: Online at: www.ehma.org enquiries to ehma@ovation.ie

#### **Deadlines**

**15 January 2007** Submission of abstract

**06 March 2007** Authors of selected papers to be advised

**04 May 2007** Submission of final presentation

Deadline for presenters conference registration\*

\*Place in final programme and abstract book cannot be guaranteed to authors not registered by this date.

#### The members of the Scientific Committee are:

- Prof. Pauline Meurs, Erasmus University Rotterdam, The Netherlands (Chair)
- Prof. Reinhard Busse, Berlin University of Technology, Germany
- Ms. Elisabeth Petsetakis, National School of Public Health, Greece
- Dr. Miklós Szócska, HSMTC, Semmelweis University, Hungary
- Dr. Ruth Young, King's College London
- Mr. Didier Vinot, IFROSS, Université Jean Moulin Lyon 3, France (Co-opted for 2006-7)

#### Introduction

New values have been introduced in health care in the last two decades. The introduction of regulated competition in a number of countries has been accompanied by greater discretionary power for health care delivery organisations and a more dominant role for patients. These have led to greater freedom of choice for patients and freedom of strategy for delivery organisations. Making profit in health care has become increasingly acceptable (at least in some countries) as has the use of market-driven incentives such as claiming a larger market share. Money has become a value in itself. Sometimes it seems as if we are dealing with a money-driven system with efficiency as the principal performance indicator for success.

It seems as if this new market/profit/efficiency paradigm has transformed health care into a business similar to any other business, ignoring the original core values in health care - equal access for all citizens, a solidarity based system, quality standards set by the professional community, and caring and serving as values in themselves. Health care delivery occurs largely as an interaction between professional and patient. The quality of the relationship between professional and patient is vital for the quality of care in all health care organisations.

There is a serious risk that values will disappear in face of market forces that can undermine the solidarity of the system, introducing inequality in access and quality. The currently popular performance indicators primarily measure quantifiable outputs and unfortunately we do not have efficiency parameters which can measure caring, compassion and empathy. It therefore becomes difficult to convince managers and policymakers that these are values which deserve serious attention.

Health care delivery needs to be based on trust - trust between doctor and patient but also trust between policy makers and health care managers. This trust relation is at risk when control mechanisms, accounting procedures and measurable indicators and benchmarks are used as the basis to judge performance. There is a need to reconcile both elements – values and measurable performance. High trust needs high transparency.

#### Aim of the conference

During the 2007 conference we will explore different approaches to values in Europe. The aim of the conference is to explore the relationship between values and performance measures, going beyond the ideological dichotomy of public-private, and state versus market. Instead of increasing the gap between a market and efficiency-oriented approach on the one hand, and a caring and serving approach on the other hand, we want to focus on the possibilities and practices of more effective combinations of these two sets of values. The conference seeks to explore how the clash between value sets can be addressed. Is it possible to reconcile both sets of values and look for a common denominator?

#### Keynote speakers

Keynote speakers will address the following themes:

- Analysis of the French health care system: **Jean-Paul Claverenne**
- Value driven health care in France: to be announced
- *Values*: a philosophical and historical perspective on values in modern society with a focus on the issue of trust: **Dame Rennie Fritchie**
- Values in health care: changes, clashes and combinations over time: Prof. David J. Hunter
- *Managing values in health care*: focusing on how to work with values in health care organisations: **to be announced**

#### Main issues

How can we reconcile the market-related aspects of consumer driven care with the caring and serving values? Is it possible to have a health care system that at the same time introduces market incentives and

fosters equal access for all citizens? Can professional values and standards be matched with cost effectiveness and efficiency targets and output control?

How far do managerial tools really achieve better health, or have they diverted managers from caring for patients and better health for the population?

What kind of leadership is required to handle the growing number of ethical issues and questions that confront health care professionals and managers on a daily basis?

How can the usual dichotomy between management and professionals be bridged in favour of a cooperative strategy towards a common goal?

How can we incorporate the promotion of health as a value in itself and the value of professional work in the delivery of health care?

Experience in combining these two perspectives and the need to develop the concepts further takes place at different levels:

- a) At the policy level we see that, in many countries, healthcare reforms try to accommodate market forces and regulated competition with solidarity, equal access and national professional quality standards. Although the discretionary power of service deliverers increases, they are still embedded in a national policy framework.
- b) At the organisational level the possible clash between the two value sets is visible, especially in terms of the relationship between management and professionals.
- c) At the community level there is also a search for a combined strategy to give greater voice to consumers, trying to meet the needs of the population and improve their health while, on the other hand, the continuity goals, efficiency targets of the service deliverer might not favor such a community orientation.

#### Sub-themes

The issues described above will be used as a framework both for the conference and the parallel sessions. The conference will have four principal tracks for the parallel sessions:

#### I VALUES IN HEALTH CARE

What are the dominant values in health care? What have been the changes over time and what are the significant clashes? In this track we explore different value sets in different countries with a specific focus on the introduction of new values.

#### II HOW ARE VALUES MANAGED AT THE SYSTEMS LEVEL?

In this track we analyse health care reforms at the system level in terms of value changes and new value mixes. The focus is not only on analysis but also on the evaluation of the introduction of the reforms.

How does the mix of values work at system level? What is the consequence of the health care reforms in different countries for the hierarchy of values in the system? What are the interesting combinations and what kind of tools, processes and incentives have been put in place at the systems level? Has it been possible to reconcile market incentives with a solidarity based system? How can equal access for all, on the one hand, and more freedom of choice for patients, on the other hand, be managed?

#### III HOW ARE VALUES MANAGED AT THE ORGANISATIONAL LEVEL?

In this track the focus is on the tools, incentives and processes at the organisational level. Again the focus is not only analysis but also an evaluation of managerial programmes and activities.

How does the mix of values work at organisational level? How can the different orientations between management and professionals be managed and reconciled? How can the expectations of patients be aligned with the possibilities of the service deliverers? What are the tools, processes and incentives that incorporate different sets of values? What is the added value of clinical

governance in this respect? Are there specific organisational development programmes that try to introduce a new organisational culture and behaviour that incorporates a new set of values?

#### IV OUTCOMES OF VALUE-DRIVEN HEALTHCARE

In this track we want to explore experiences with new success indicators that incorporate values. Performance indicators are developed with measurable outputs, while the 'softer' aspects of health care are omitted, although these aspects are often decisive for the satisfaction of patients and overall quality of the service.

How can these softer aspects – and the values that they represent - be measured? How can the policy-makers and managers be convinced that these success indicators are as valuable as other performance indicators?

#### Additional workshops and sessions

In addition to the above sub-themes which relate to the conference theme, participants are invited to submit abstracts for any of the following additional workshops or parallel sessions:

#### 1. Special Interest Groups on:

Management development Healthcare workforce issues Primary health care

#### 2. European Health Policy

#### 3. Invitation to organise workshops:

Following the successes of last year's conference workshops, the EHMA Board and the Scientific Committee would again like to invite EHMA members to propose workshops which they may wish to organise *either* on the conference theme *or* on any other specific issues that may be of interest to other EHMA members. These workshops *must* have a multi-national character. Applications should be submitted in a word document following the outline below by email only to Máire Coyle at <a href="maire.coyle@ehma.org">maire.coyle@ehma.org</a>.

#### Submission conditions and guidelines

**Individual submissions** for the parallel topics and additional workshops may fall into three categories:

- 1. Traditional papers to be presented in parallel sessions (maximum 15 minutes presentation, with PowerPoint if necessary)
- 2. Short workshop presentations to be presented in workshop sessions (maximum 5 minutes verbal summary)
- 3. Poster presentations

Please note that abstracts accepted for all of the above categories will be printed in the Book of Abstracts. While the majority of submissions will be accommodated in their category of choice, the Scientific Advisory Committee reserves the right to reallocate abstracts to another category based on available time slots and session perspective.

Abstracts for all three types of presentations should be prepared according to the online abstract form (outline below). Authors are requested to categorise their presentation according to:

- Theme (sub-theme or listed additional session themes)
- Submission type (parallel, workshop, poster)

Please note that only online abstracts can be accepted.

## Online submissions to be made by 15<sup>th</sup> January 2007 to www.ehma.org

### **Contact Details:**

General conference enquiries:
Máire Coyle
EHMA Projects and Membership Manager
+353 1 2839299
maire.coyle@ehma.org

Online abstract submission enquiries:
Ovation
+353 1 6637946
ehma@ovation.ie

## APPLICATION TO ORGANISE A CONFERENCE WORKSHOP

Applications must be submitted in the following format:	<ul> <li>Theme and sub-themes</li> <li>Identify the relevance of this workshop to EHMA members</li> <li>Potential number of participants</li> <li>Speakers already identified</li> <li>Contact details of person responsible for organising this workshop</li> </ul>
Typeface:	Times New Roman, 10pt, no CAPS except in abbreviations.
Submission details:	Applications must be submitted in a word document by email only to Máire Coyle at <a href="maire.coyle@ehma.org">maire.coyle@ehma.org</a>
Submission deadline:	15th January 2007
Length of workshop:	90 minutes maximum
Registration Fee:	With the exception of the invited keynote speakers, those who are presenting papers will pay the early registration fee (estimated to be less than €600) as well as their own travel and accommodation costs.

## Abstract Guidelines

Online Abstract Submission Format: Authors will be prompted to fill in the following fields when submitting an abstract	<ul> <li>Title</li> <li>Authors</li> <li>Presentation type (Parallel, Poster, Workshop)</li> <li>Theme Selection (Conference sub-theme I – IV, Special Interest Group 1 – 3, European Health Policy)</li> <li>Presenting author's name</li> <li>Presenting author's short biography (max 100 words)</li> <li>Research question/hypothesis (if applicable) (Academic based papers)</li> <li>Context of case/What was the issue?/What happened? (Management, practical based papers)</li> <li>Background and connection to conference theme</li> <li>Theories/methods/materials (choose whichever is applicable)</li> <li>Results and discussion:</li> <li>What other issues would you like to have discussed in the session at which you will be presenting? (Parallel &amp; Workshop Only)</li> <li>Keywords</li> </ul>
Typeface:	Times New Roman, 10pt, no CAPS except in abbreviations.
Length of abstract:	600 words (max) including title, authors, and keywords.
Length of presentation:	Parallel: maximum 15 minutes with PowerPoint Workshop: maximum 5 minutes verbal summary Poster: Appropriate display space will be provided for the duration of the conference (including a table with space for delegates to talk with the presenter and display boards for the poster.) Detailed information on poster size etc. will be provided closer to the conference date.
Keywords:	Must include countries referred to in abstract.
Criteria for evaluation:	<ul><li>(1) Relevance to the conference theme</li><li>(2) Added value</li><li>(3) Methodological soundness</li><li>(4) Clarity of writing.</li></ul>
Submission deadline:	15th January 2007
Presenting author:	The main author(s) or a co-author only may present papers. Presenting author(s) should be marked with '*' on form
General:	Papers should be based on practical experience, empirical research or scientific reflections. Authors are particularly requested to highlight clearly the contribution of their paper to the conference theme.
Registration Fee:	With the exception of the invited keynote speakers, those who are presenting papers will pay the early registration fee (estimated to be less than €600) as well as their own travel and accommodation costs.