Rapid Response to Future Challenges in Health

Report on a WHO Workshop (Futures Fora Inaugural Meeting)

London, United Kingdom
4–5 July 2001
ABSTRACT

The meeting brought together chief medical officers and other high-level decision-makers from those Member States of the WHO European Region that lack a liaison officer, to identify how WHO might best support them in the complex, unpredictable environment of western Europe. The meeting operated on several levels, testing how this type of futures forum generates useful dialogue and planning further work. It also considered specific issues, including management in uncertainty, communicating across boundaries, inequity and quality. It underlined the importance of sharing knowledge and experience, providing policy-makers with well evaluated and accessible data and evidence-based public health actions. It was agreed that the Regional Office should respond to short-term information needs and manage the knowledge base for long-term strategy by convening annual Futures Fora, and by facilitating ad hoc meetings to pool experience in the face of emergencies. Future discussion topics were identified, as were other services WHO might provide.

Keywords

INFORMATION SERVICES
INFORMATION SYSTEMS
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**Introduction**

The Rapid Response to Future Challenges in Health meeting brought together chief medical officers and other high level decision-makers from the “countries without liaison officers” of the European Region of WHO. Its objective was to identify how the Regional Office might support them in the complex and unpredictable environment of Western Europe. The meeting was designed to operate on a number of levels. It acted as a pilot to test whether a group of this type could generate useful dialogue and gave an opportunity to see how such discussions work in practice. It provided a platform for consideration of specific issues. It also allowed detailed planning of the approach to future meetings and the drafting of a list of the types of services that the Regional Office should provide.

The meeting underlined the importance of evidence-based public health actions and of the complexity of marshalling the immense range of information available. There is a need to sift, evaluate and shape data so that it is can be accessed and used by policy-makers. The Regional Office has a recognized role responding to short-term information needs and managing the knowledge base for long-term strategy.

**Key theme discussions**

- **Managing in uncertainty** addressed the pressures on health systems leaders to respond rapidly in moments of crisis and dissected the implications of relationships with the press and the public when there is neither time nor the evidence to give definitive answers. It identified the “culture” mismatch between scientists and the general public and the communications divide between them. It gave rise to a discussion of risk and of communication strategies and began the process of setting out the services WHO might offer western European Member States.

- **New ways of information: challenge and opportunity** used the example of the social and health services interface to look at the implications for patients of failures to communicate across internal, organizational divisions. It led on to discussion of the difficulties in making comparisons between health care systems and even in agreeing common terminology. It flagged the need for cross border agreement of definitions and quality measures while highlighting the cultural and political barriers to achieving these goals, even across boundaries inside countries.

- **Managing social values and political expectations: challenge and opportunity** involved two separate presentations. The first addressed how socioeconomic inequalities in health persist despite the moral consensus on equity and the economic benefits of social cohesion. Strategies to address the issue (improving the position of the poorest or diminishing differences across populations) were discussed. The inequities between age groups, geographically remote populations and chronic/acute diseases were raised, as were the problems of poorly covered minorities and immigrants.

The second presentation focused on changing health systems, specifically the use of clinical teams to achieve quality. It stressed the importance of patient centred services and accountability, and highlighted the role of an open, blame-free environment and investment in staff esteem/motivation in achieving system objectives. The group raised issues of dealing
with “bad” doctors under a “no punishment” policy and the difficulty Ministries face mandating changes in clinical practice. Accreditation was identified as another strategic approach to enhancing quality.

**Sharing knowledge between countries**

The meeting recognized the important role for a forum, which could create opportunities for senior, western European policy-makers to work together. It was agreed that:

- **Sharing experience across borders can support national decision-makers**, which is not to say that solutions can be transferred in their entirety from one country to another or that all national experience will be relevant to other Member States. Political, structural, cultural and economic considerations make each country’s system unique. Nonetheless, enormous amounts of innovation have taken place over recent decades and policy-makers should benefit from others’ know-how.

- **Learning can only take place if the experience of national decision-makers is made explicit** and accessible to international counterparts. This implies agreeing a core set of terms to describe common health and social issues; capturing, recording and reporting case-studies in an easily understood format; and ensuring methodology is consistent so that like is compared with like.

- **Information can only be made accessible if governments report their experience and data** and begin to tackle the complexity of describing their health systems, detailing changes as they occur.

- **Openness and asking the right questions are crucial**, and facilitating settings where national decision-makers can discuss issues without judgment will support rapid responses at critical moments but also longer-term planning and strategy development.

**Setting up the Futures Fora series**

The discussion demonstrated the benefits of an exchange of experience even at a relatively informal level. It was clear that countries frequently struggle with their own dilemmas in isolation, unaware of innovation and reforms taking place elsewhere and with nowhere to report their own insights.

It was agreed that there was a role for WHO in facilitating sharing of experience and in managing knowledge. The group agreed that there should be annual Forum meetings between the Chief Medical Officers and other high level decision-makers of Western Europe to:

- discuss key themes of strategic importance
- establish a supportive working group with a reasonable degree of continuity
- encourage consensus building around clear policy positions.

WHO was asked to convene and support the group. Its role was to facilitate the identification of key issues for discussion (on-going and topical) and to support the preparation for meetings (analysis, position papers, systematic reviews of evidence, recruitment of experts to advise on specific themes). It was agreed that up to four key themes be addressed at each meeting, one or
two of which would be “on-going” issues followed up over two to four years while others could be topical issues, discussed as a “one-off”. Furthermore, each meeting would scan the horizon for emerging issues. WHO also offered to investigate web-based discussions that might take place between meetings. The Futures Fora was to “rotate” between Member States with the hosts providing meeting facilities and any hospitality while participants covered their own travel/hotel expenses.

It was also agreed that WHO should consider facilitating ad hoc meetings based on the Futures Fora to respond to emergency issues where warranted. Meetings would be proposed by one or more countries and would allow key decision-makers to pool experience and share research and strategic thinking.

**Potential topics to be addressed**

The themes that were mentioned included:

- Choosing financing and payment mechanisms, transferring models between countries.
- Communications, particularly methods/best practice in dealing with the media and the public, approaches to delivering complex or “shade of grey” messages and the implications of the internet.
- Ethics and the practical implications of national responses to stem-cell research and genomics.
- Minority or migrant population access to health care and how health systems treat ethnic groups.
- New technologies and their implications for health systems.
- Performance, outcome and process measurement and the difficulties around meaningful and timely comparative data and of including determinants of health indicators.
- Political constraints on health decision-makers.
- Poverty and responding to multi-factoral socioeconomic pressures on health.
- Risk and uncertainty, and how relative risk can be displayed in tables and costed.
- Telemedicine and e-medicine and its likely impact on health care.
- The aging population, models of care provision and their costs.
- The implications of globalization for health care and Europe’s contribution to global priorities.
- Using future oriented scenarios and modelling for disaster preparedness and for routine planning.

**Other services countries would like to receive from WHO**

In addition to a Future Fora series it was suggested that WHO might add value by setting up other services, including:
• **Validation and broad endorsement of national policies**, confirming to national governments and to the wider public the scientific value of positions taken by the health leaders of Member States. WHO might also advocate core values and positions (i.e. on tobacco or nutrition). It will be crucial for WHO to maintain its independence and integrity if it is to offer effective support.

• **A Regional intelligence service** managing the mass of knowledge available and including analysis, surveillance, health problem assessment and the production of comparative information. It might set up a clearing house (or network of clearing houses) to organize and disseminate intelligence.

• **A series of case studies** capturing and analysing know-how and policy relevant experience. Ideally these might include a clearing house of policy-makers experiences, a databank recording ideas and ways particular challenges have been met at different levels, and future oriented scenarios. It will be important to manage this initiative actively and to encourage participation.

• **Clearly stated concepts, frameworks and approaches to methodology** to help Member States standardize how health care systems and the policy-making process can be understood and resolve common measurement problems.

• **Position papers on emerging and future problems**, which would involve horizon scanning, the clear statement of issues, reference to relevant expertise, and consensus building.

• **Education and training materials** that will allow the transfer of knowledge and experience between senior policy-makers and address the needs of politicians.

• **A network of liaison points in western European countries** so that the focal points in ministries of health, responsible for reporting national developments to WHO and channelling WHO recommendations into national decision-making, are able to pool their experiences.

• **Working in partnership.** The contribution of the European Commission and the Council of Europe and the implications of One WHO were acknowledged; the Regional Office will facilitate appropriate partnerships in responding to western European needs.
Annex 1

PARTICIPANTS

Professor Lucien Abenhaim
Directeur général de la santé
Ministère du Travail et des Affaires sociales
8 Avenue de Ségur
F-75350 Paris 07 SP, France
Tel: +33 140564040
Fax: +33 140564056
E-mail: Lucien.Abenhaim@sante.gouv.fr

Professor Franz Baro
WHO-Collaborating Centre for Research and Training in Psychosocial and Psychobiological Factors
c/o Cité Administrative de l’Etat – Quartier Esplanade 3.03
The Federal Ministry of Social Affairs, Public Health and the Environment
International Relations Division
Boulevard Pachéco 19, boîte 5
1010 Brussels, Belgium
Tel: +32-2/210.44.62.
Fax: +32-2/218.67.46.
E-mail: leen.meulenbergs@health.fgov.be

Dr Yitzhak Berlovitz
Associate Director-General
Ministry of Health
2, Ban Tabai Street
P.O. Box 1176
Jerusalem 93591, Israel
Tel: +972 2 5681300
Fax: +972 2 6725823
E-mail: berlo@moh.health.gov.il

Mr Nick Boyd
Branch Head, International and Industry Division
Department of Health
Richmond House, 79 Whitehall
GB-London SW1A 2NS, United Kingdom
Tel: +44 2072104851
Fax: +442072105829
E-mail: nick.boyd@doh.gsi.gov.uk
www: doh.gsi.gov.uk

Dr Ray Busuttil
Director General (Health)
Ministry of Health, Palazzo Castellania
15, Merchants Street
Valletta, Malta
Tel: +356 243066
Fax: +356 224884
E-mail: Contact:
moira.e.azzopardi@magnet.mt
www: Julia.Gale@doh.gsi.gov.uk
doht.gsi.gov.uk

Professor Liam Donaldson
Chief Medical Officer
Department of Health
Richmond House, 79 Whitehall
GB-London SW1A 2NS, United Kingdom
Tel: +44 1712105150
Fax: +44 2072105407
E-mail: Contact:
Julia.Gale@doh.gsi.gov.uk
www: doh.gsi.gov.uk

Mr David Á. Gunnarsson
Secretary General
Ministry of Health and Social Security
Laugavegur 116
IS-150 Reykjavik, Iceland
Tel: +354 5609700
Fax: +354 5519165
E-mail: postur@htr.stjr.is
Professor Aidan Halligan  Tel: +44 2072105334  
Director  Fax: +44 2072104902/90  
National Clinical Governance Support Team  E-mail: Aidan.Halligan@doh.gsi.gov.uk  
Department of Health  www: cgsupport.org  
Richmond House, 79 Whitehall  
London SW1A 2NS, United Kingdom  

Dr Lars E. Hanssen  Tel: +47 22248888/11/13  
Director General of Health  Fax: +47 22249590  
Norwegian Board of Health  E-mail: lars.hanssen@helsetilsynet.dep.no  
P.O. Box 8128 Dep.  
N-0032 Oslo, Norway  

Mr Lorenz Hess  Tel: +41 313229649  
Head, Media and Communications  Fax: +41 313249033  
Federal Office of Public Health  E-mail: lorenz.hess@bag.admin.ch  
P.O. Box 2644  
CH-3001 Berne, Switzerland  

Dr James Kiely  Tel: +353 16354251  
Chief Medical Officer  Fax: +353 16710148  
Department of Health  E-mail: Jim.Kiely@health.irlgov.ie  
Hawkins House  
Hawkins Street  
IRL-Dublin 2, Ireland  

Mr Anthony Kingham  Tel: +44 2072104871  
Section Head  Fax: +44 2072105752  
International Branch  E-mail: tony.kingham@doh.gsi.gov.uk  
Department of Health  www: doh.gsi.gov.uk  
Richmond House, 79 Whitehall  
GB-London SW1A 2NS, United Kingdom  

Professor J. Herre Kingma  Tel: +31 703405655  
Inspector-General  Fax: +31 70 3405140  
Ministry of Health, Welfare and Sport  E-mail: jh.kingma@igz.nl  
P.O. Box 20350, Parnassusplein 5  
NL-2500 EJ The Hague, The Netherlands  

Mr Leonard Levy  Tel: + 44 20 7210 5683  
International and Constitutional Branch  Fax: + 44 20 7210 5752  
Department of Health  E-mail: leonard.levy@doh.gsi.gov.uk  
Room 546 Richmond House  
79 Whitehall  
London SW1A 2NS, United Kingdom  

Dr Isabel de la Mata Barranco  Tel: +34 915961559/599  
Deputy-Director  Fax: +34 915964478/63  
Health Planning  E-mail: idelamata@msc.es  
Ministry of Health and Consumer Affairs  
Paseo del Prado 18-20  
E-28071 Madrid, Spain
Dr Rubén Moreno Palanques  
Secretary of State  
Ministry of Health and Consumer Affairs  
18-20 Paseo del Prado  
E-28071 Madrid, Spain  
Tel: +34 915961559/599  
Fax: +34 9159644  
E-mail: rmorenop@msc.es

Dr José Mendes Nunes  
Deputy Director-General of Health  
Ministry of Health  
Alameda D. Afonso Henriques, 45  
P-1056 Lisbon Cordex, Portugal  
Tel: +351 218430646  
Fax: +351 218430655  
E-mail: josemunnues@dgasud.min-saude.pt

Dr Nina Rehnqvist  
Deputy Director-General  
National Board of Health and Welfare  
Rålambşvägen 3  
S-106 30 Stockholm, Sweden  
Tel: +46 855553240  
Fax: +46 855553006  
E-mail: nina.rehnqvist@sos.se

Dr Nicolas Rumé  
Directeur adjoint  
Directeur de la Santé  
Villa Louvigny  
Allée Marconi  
L-2120 Luxembourg, Luxembourg  
Tel: +352 4785588  
Fax: +352 26200144  
E-mail: Nicolas.Rume@ms.etat.lu

Dr Yitzhak Sever  
Director  
Department of International Relations  
Ministry of Health  
2, Ban Tabai Street  
P.O. Box 1176  
Jerusalem 93591, Israel  
Tel: +972 26787382  
Fax: +972 26787982  
E-mail: -

Dr Marita Sihto  
Senior Researcher  
National Research and Development Centre for Welfare and Health (STAKES)  
Siltasaarenkatu 18, P.O. Box 220  
FIN-00531 Helsinki, Finland  
Tel: +358 939672336  
Fax: +358 939672485  
e-mail: marita.sihoto@stakes.fi  
www: stakes.fi

Dr Pat Troop  
Deputy Chief Medical Officer  
Department of Health, Room 117  
Richmond House, 79 Whitehall  
GB-London SW1A 2NS  
United Kingdom  
Tel: +44 207210559  
Fax: +44 2079304636  
e-mail: pat.troop@doh.gsi.gov.uk
Mr Helmut Voigtländer  
Director  
Sub-Directorate Z2  
EU Affairs, International Cooperation  
Federal Ministry for Health  
D-53108 Bonn, Germany  
Tel: +49 2289410  
Fax: +49 2289414912  
e-mail: leip@bmg.bund.de

Mr John Wyn Owen  
Secretary  
The Nuffield Trust  
59 New Cavendish Street  
GB-London W1M 7RD, United Kingdom  
Tel: +44 2076318450  
Fax: +44 2076318451  
e-mail: jwo@nuffieldtrust.org.uk  
www: nuffieldtrust.org.uk

WHO Regional Office for Europe

Dr Marc Danzon  
Regional Director  
WHO Regional Office for Europe  
Scherfigsvej 8  
DK-2100 Copenhagen Ø, Denmark  
Tel: +45 39171371  
Fax: +45 39171888  
E-mail: mda@who.dk

Dr Yves Charpak  
Senior Policy Adviser to Regional Director  
WHO Regional Office for Europe  
Scherfigsvej 8  
DK-2100 Copenhagen Ø, Denmark  
Tel: +45 39171610  
Fax: +45 39171888  
E-mail: ych@who.dk

Ms Suszy Lessof (Rapporteur)  
Research Coordinator  
WHO Regional Office for Europe  
Scherfigsvej 8  
DK-2100 Copenhagen Ø, Denmark  
Tel: +45 39171254  
Fax: +45 39171870  
E-mail: sul@who.dk

Dr Herbert Zöllner (Secretary)  
Regional Adviser, Futures Fora and Head, Core Country Support  
WHO Regional Office for Europe  
Scherfigsvej 8  
DK-2100 Copenhagen Ø, Denmark  
Tel: +45 39171347  
Fax: +45 39171818  
E-mail: hzt@who.dk

Mrs Janet L. Leifelt  
Programme Assistant  
Futures Fora  
WHO Regional Office for Europe  
Scherfigsvej 8  
DK-2100 Copenhagen Ø, Denmark  
Tel: +45 39171539  
Fax: +45 39171818  
E-mail: jan@who.dk
Annex 2

PROGRAMME

Wednesday, 4 July 2001

Introduction

12:00 – 13:15 Lunch

13:15 – 14:00 Registration

14:00 – 14:15 Welcome and introduction

Managing in uncertainty

14.15 – 15:00 Making good decisions in the face of uncertainty

15:00 – 15:20 Obtaining valid and useful information for decision-making

15:20 – 15:40 Sharing information with the public: the experience

15:40 – 16:00 Break

New ways of information: challenge and opportunity

16:00 – 16:45 Improving communication on health care

16:45 – 17:30 Regulating medical services, goods and advice provided via internet

Evening

Dinner at Royal College of Physicians

Thursday, 5 July 2001

Changing social values and political expectations: challenge and opportunity

09:00 – 09:45 Responding to changing consumer values and expectations

09:45 – 10:30 Changing the way health systems work

10:30 – 11:00 Break

Which WHO support?

11:00 – 11:45 Future scope and organization of “Futures Fora”

11:45 – 12:30 Other support

Closure

12:30 – 13:00 Concluding session

13:00 Lunch and departure for home countries