Fernando Prados Roa – Deputy Minister of Health, SERMAS, Community of Madrid, Spain



What sets us apart in healthcare is our professionals

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Fernando Prados Roa, deputy minister of health for Madrid, discusses the health paradigm of the community and elaborates on the role of SERMAS in managing and coordinating the city's public healthcare system.

Could you begin by introducing SERMAS – the Madrid health service – and its attributes and achievements?

The SERMAS is a complex system of healthcare centres, from primary care, emergency centres, and higher-level specialization hospitals. These centres form a network that aims to provide universal healthcare which has been in place for quite some time. Anyone who requires service inside the system is guaranteed access in Madrid according to the two principles of the Spanish healthcare system: equality and free access. The system is made to deliver all the necessary healthcare and medical processes to patients.

The Madrid system has a principle of freedom of choice on the part of the patient. The patient can select his specialty doctor of choice according to his own criteria; citizens design their care in alignment with their unique requirements. It is a complex system that requires strong organization across all levels.

You took the position of deputy minister of health in May 2018. What have been your aspirations and priorities in the past few months?

Indeed, I took this role just a few months ago, but I had the fortune of being the vice minister of humanization of health beforehand. This position required competencies such as the investigative abilities and an understanding of health services which I also draw on at SERMAS. This has helped me understand the main themes and be aware of the programs and challenges we're facing in this new position. SERMAS is implementing very ambitious programs such as our humanization plan and the prevention of cancer plan amongst others. After much development over recent years, we are finally beginning to reap the benefits of utilizing these plans.

Furthermore, the system has the challenge of ensuring that the population lives longer everyday which brings forward the topic of chronicity and the challenge of complexity. Health is an area which requires vast resources and we must transform the system's functionality to make it more efficient. We have state-of-the-art hospitals that use the latest generation therapies, which are costly. To guarantee efficiency we must concentrate resources so that talented doctors can continue to deliver results.

In your opinion what are the factors that have brought contributed to Madrid's high life expectancy and the longevity of its citizens?

We have a concentrated population with half of the citizens in the community of Madrid living in the city. The health resources are closely available to patients, which may play a part. However, the secret to longevity is surrounding this as well. What sets us apart in healthcare is our professionals. We have a very strong system of education; our medical universities are of a high quality. Professions in the medical field are highly sought after by students. Furthermore, many of the public health centres offer students the opportunity to learn, gain experience, and put their studies into practice. When they enter the workforce, our healthcare professionals are experienced and have been trained in an advanced system. Even after education, they have enough resources to treat and diagnose patients in the public health system. Our different health systems also compete internally to attract and retain the best talent for further development.

Can you explain the internal decision-making process of SERMAS in terms of pricing and reimbursement matters?

We have a centralized structure of investigation which creates regulations for the three systems of health. The first is the emergency centres, primary care centres, and hospitals. SERMAS creates the general regulations and criteria of care, however, each centre has their own autonomy to decide on themes such as resource allocation and acquisition of drugs and technologies. Each centre has its own directors which establish their operational infrastructure which is always in alignment with the SERMAS criteria.

How does SERMAS guarantee the financial sustainability of the healthcare system in the face of the challenge of an aging population?

We see the aging population as a success and a measurement of the quality of the healthcare system we have in Spain. However, it is true that the innovation in technology and medicine has created a challenge in this sense. The population must see the healthcare system as their own. Patients themselves are stakeholders who must take part in the system as they benefit from it. The focus now is to leverage the efficacy and reduction of costs by having patients take an active role in their health. Their responsibility is to promote their own wellbeing, maintain control of their healthcare, and be educated; especially with the rise of chronic illnesses.

Our wish is to establish a centre in which patients can access all their treatment needs in the most efficient way possible. Logically, we must increase the number of resources allocated to chronic disease. Now that we have more hospitals and clinics, along with patient freedom of choice, we have the opportunity to establish centres specifically for pathology treatment. In regard to specialization and patient treatment, there will be a greater need to meet individual needs.

Around 46 percent of the population in Madrid are also enrolled in private insurance, what is the role of the private sector in the healthcare ecosystem?

Being that the private sector has the capacity to capture such a high quantity of patients when in competition with a very strong public system, it means the sector is performing exceptionally well. It is absolutely essential that private insurance is adapted to the system. There is a union between the two systems in four contexts; the publicly managed centres, patient assistance managed by public foundations and companies and the management of the foundation Jimenez Díaz. Each

citizen is entitled to treatment in each of these systems as long as they are in accordance with the system criteria.

In many health systems, citizens with higher financial status enrol in private insurance schemes in order to reach access to what is not offered by the public system. Contrarily, in Spain, we have a public excellent healthcare system which completely covers all beneficiaries. The private system is not a fragmentation of healthcare in Spain; there continues to be a link between the two sides.

On average, the population visits the doctor 6.5 times a year. Does SERMAS have a strategy to regulate this potentially excessive figure?

Coming from a background in urgent care, I believe that if a patient visits a healthcare institution it is because they feel it is necessary. In Spain, there is a mindset of “I have what I have and am going to the doctor” at any level of concern, which does result in many negative diagnoses. The Spanish healthcare system is so complete and accessible that it creates the opportunity for patients to schedule visits for almost any reason. However, a majority of patients do only visit healthcare centres when they feel it is absolutely necessary.

In the end, the patients are the owners of the healthcare system and we must encourage them to be more engaged in their own health. This is a matter of education of patients in the system. Despite this, I still believe that patients have the right to medical care whenever they feel it is necessary and therefore it is also the responsibility of the system to adapt. In this regard, there is a management tactic in place to prioritize patient needs within healthcare.

Can you explain further how the humanization plan of SEMAS is empowering patients to participate in their well-being outside of the healthcare system?

This program has ten lines, the tenth being the Madrid School of Health which aims to educate patients in regard to areas such as chronic disease, elderly populations, and pathology. The idea is to bring the necessary information on health to citizens in accordance with their needs. It is more efficient to educate caretakers and patients on how they can manage their conditions outside of the clinics to reduce the burden of the healthcare system.

How is SERMAS integrating new technologies and innovative trends such as digitalization into the healthcare system?

In SERMAS, we currently have five director generals in charge of personalization, finance and economics, coordination, IT systems, and infrastructure. These last two directors have a crucial role in contributing to the vitality of the system. We are working to create an IT system to link healthcare across the entire system, which is something we lack at the moment. This will help to reach more complete integration of the health systems such as hospitals, primary care centres, and urgent care centres. Due to the rapidly changing nature of technology, many institutions have their own IT system, therefore, the aim is to unite the centres in this regard to establish stronger collaboration networks of data exchange.

What would you like international healthcare stakeholders to know about Madrid's health services?

Thanks to the efforts of many health players over time, we are able to enjoy a universal system of healthcare with we are greatly proud of. We have been able to establish an environment of accessibility and affordability for all citizens and now we endure the challenges of how to continuously sustain and improve this system.

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