



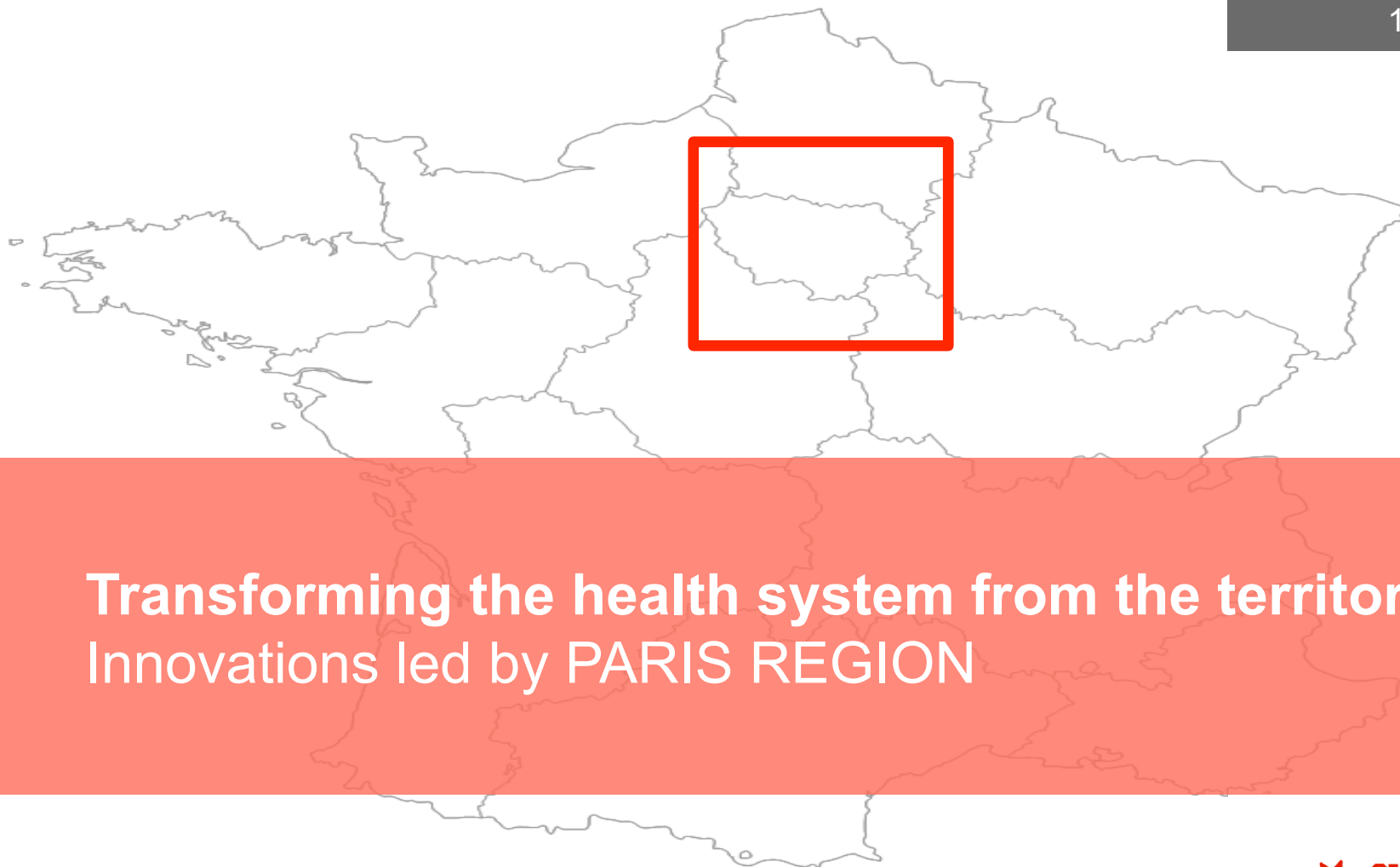
Mr. Cédric Arcos

**Deputy Director General of the Region
Île-de-France**

Motor of an innovative health ecosystem



13/09/2019



Transforming the health system from the territories
Innovations led by PARIS REGION

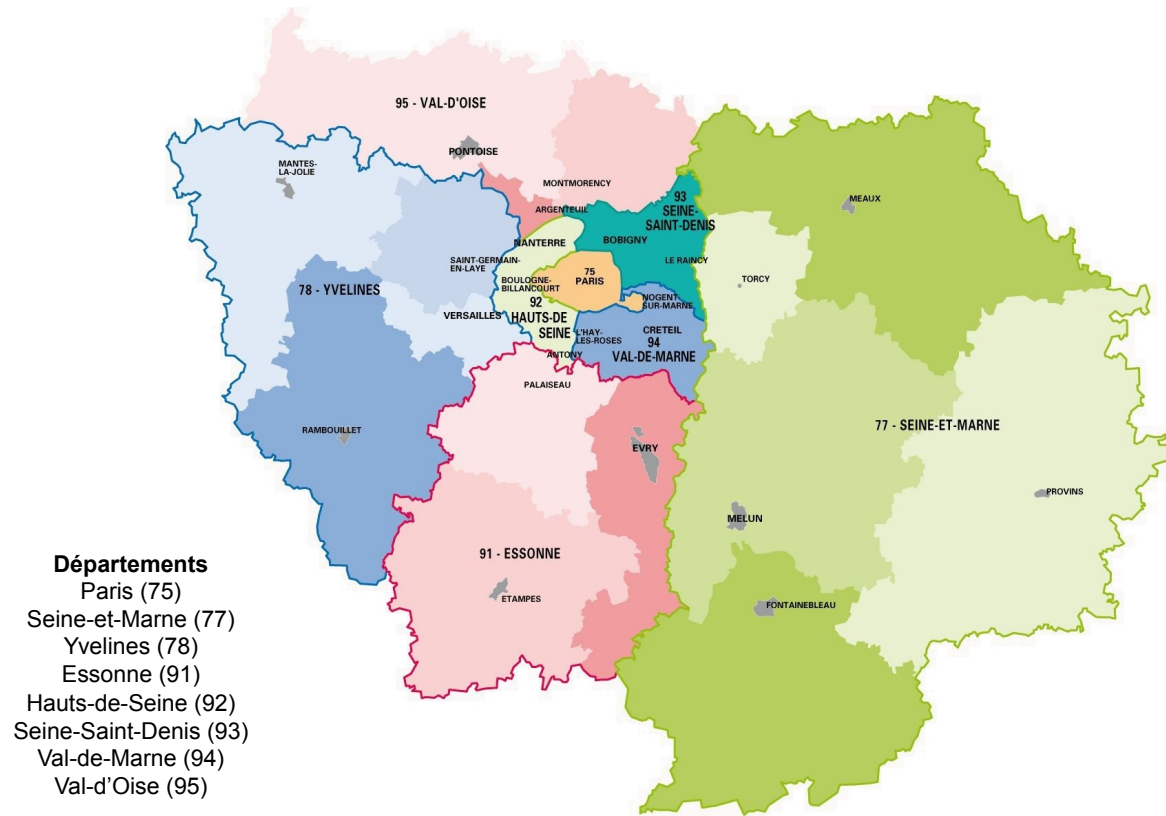
 **SUMMARY**

- 1. Île-de-France (or Paris) region: a territory, a local authority**
- 2. The wealthiest region of France, with highest income gaps**
- 3. Overall health indicators are positive, despite glaring health inequalities**
- 4. The French healthcare system is centralized and state-driven**
- 5. Health goes beyond health: a territorial approach to health**
- 6. The three pillars of the regional action in the field of health**



ÎLE-DE-FRANCE (OR PARIS) REGION: A TERRITORY, A LOCAL AUTHORITY

The territory is very dense and diverse



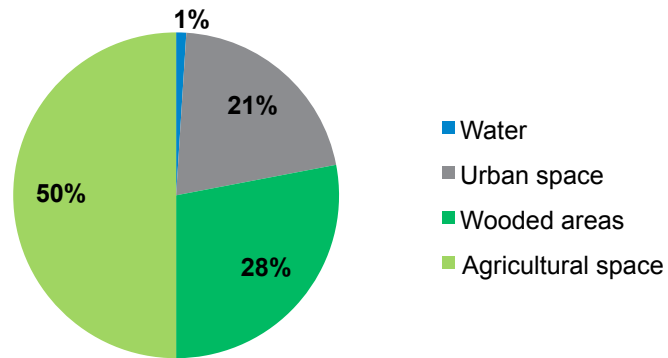
MAP OF PARIS REGION



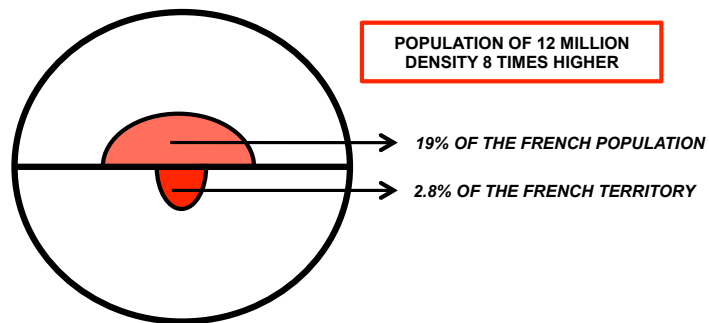
ÎLE-DE-FRANCE (OR PARIS) REGION: A TERRITORY, A LOCAL AUTHORITY

The territory is very dense and diverse

TERRITORY



POPULATION



KEY FIGURES

€ 670 BILLION
OF GDP

ONE FOURTH OF THE FRENCH
GDP

1 OUT 4

ONE OUT FOUR "FRANCIEN"
IS 20 YEARS OLD OR
YOUNGER

50 MILLION

50 MILLION TOURISTS PER
YEAR (430 MUSEUMS, 4
UNESCO WORLD HERITAGE
SITES)

1 MILLION

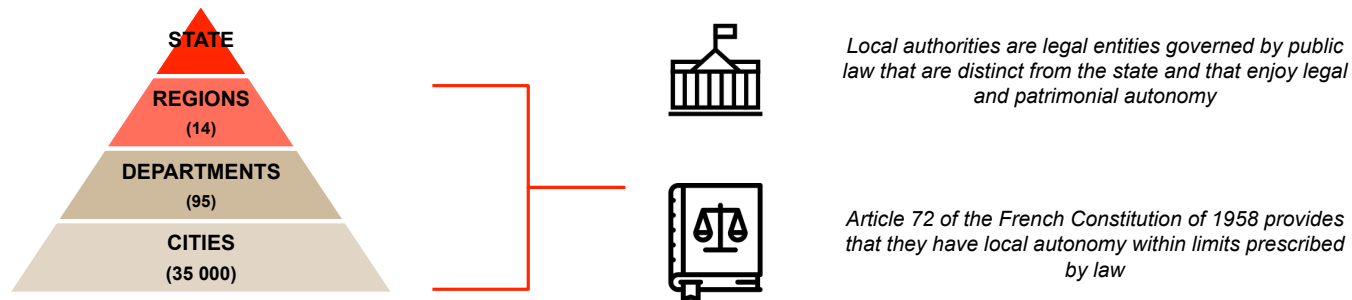
1 MILLION COMPANIES IN ALL
SECTORS OF ACTIVITY

6.3 BILLION

6.3 BILLION JOBS (23% OF
TOTAL JOBS)

✧ ÎLE-DE-FRANCE (OR PARIS) REGION: A TERRITORY, A LOCAL AUTHORITY
The Regional Council of Île-de-France

LOCAL AUTHORITIES IN FRANCE



THE REGIONAL COUNCIL OF ÎLE-DE-FRANCE

EXECUTIVE BOARD

- The executive board prepares and executes the regional assembly's deliberations and manages the regional administration

REGIONAL ASSEMBLY

- The regional assembly meets in plenary session and standing committee about once a month. It also votes the major decisions engaging the financial future of the region.

ADMINISTRATION

- The administration implements the decisions made (1 800 administrative officers + 8 500 in the colleges)

 **ÎLE-DE-FRANCE (OR PARIS) REGION: A TERRITORY, A LOCAL AUTHORITY**
The Regional Council of Île-de-France

REGIONAL ASSEMBLY



BUDGET

€ 5 BILLION IN 2019

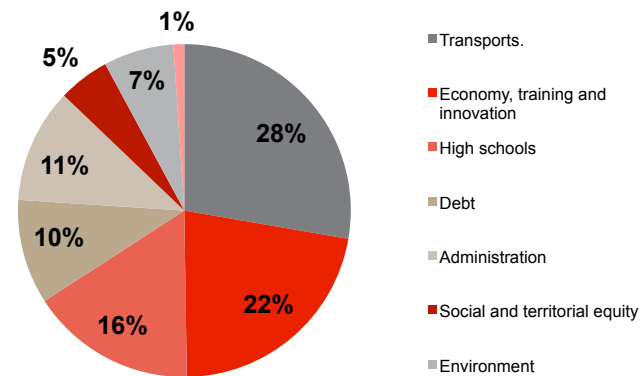
50% OF INVESTMENT EXPENDITURE
 50% OF OPERATING EXPENDITURE

→
 LONG-TERM INTERVENTIONS

COMPETENCIES



EXPENDITURE BREAKDOWN (%)



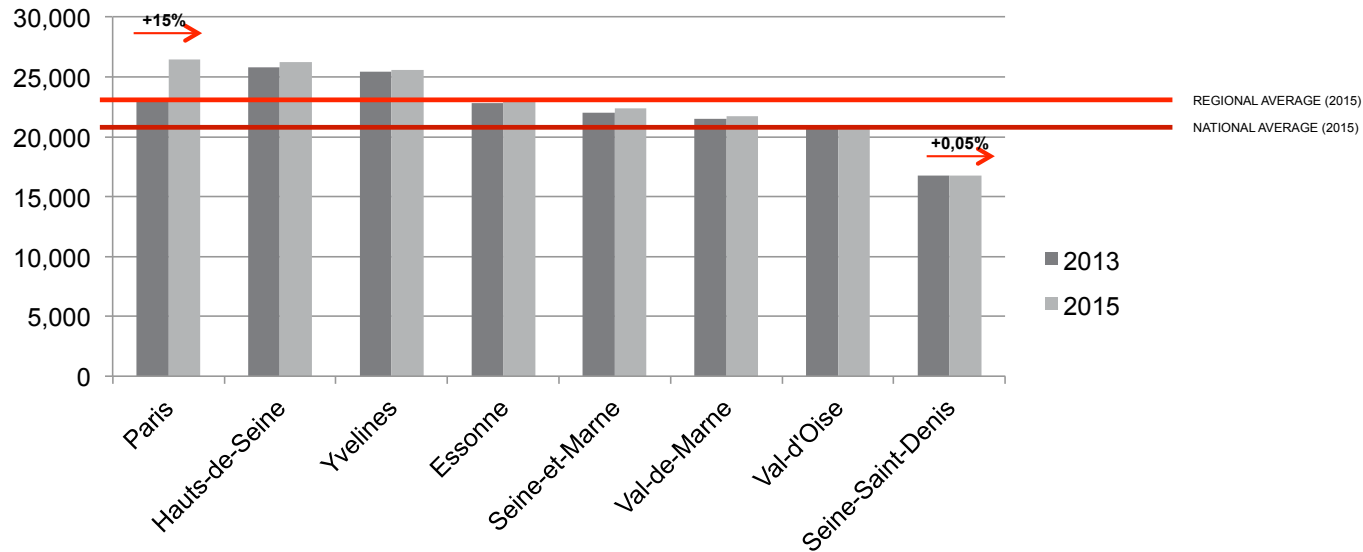
Funding of training centers and schools for health workers : € 250 million



THE WEALTHIEST REGION OF FRANCE, WITH HIGHEST INCOME GAPS

Differences between inner city and suburbs, urban and rural areas

ANNUAL MEDIAN INCOME (€)



Source : INSEE (2019)

ANNUAL INCOME GAP OF € 10 000 BETWEEN SEINE-SAINT DENIS AND PARIS IN 2015

Seine-Saint Denis is an underprivileged area where 15% of the population gets the RSA (a welfare benefit of €550 per month for people without any financial resources)

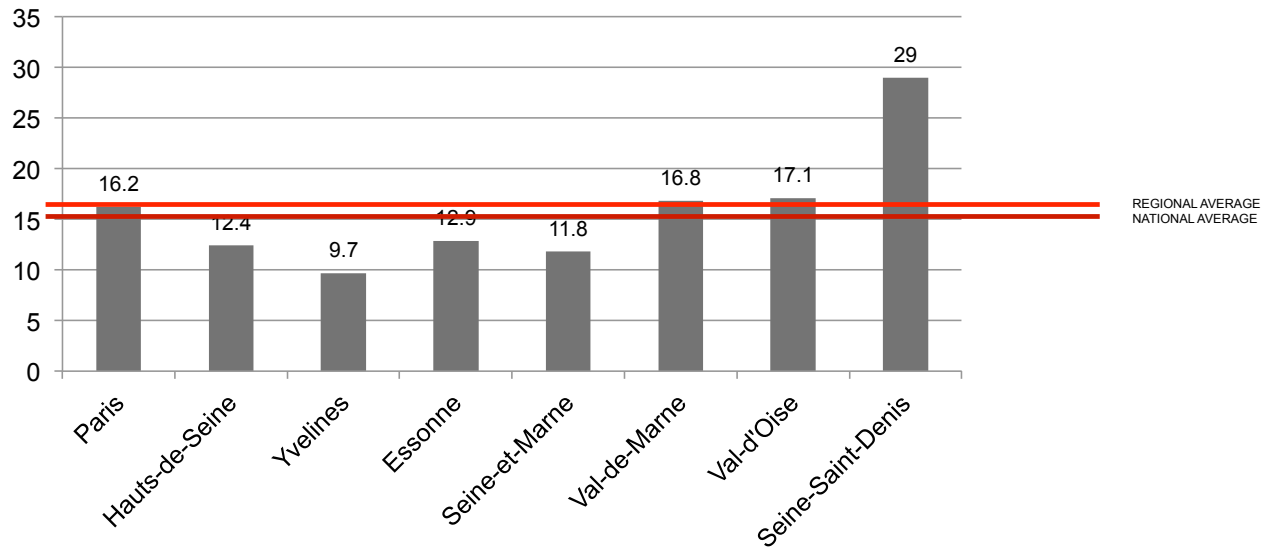




THE WEALTHIEST REGION OF FRANCE, WITH HIGHEST INCOME GAPS

A very high poverty rate in certain areas as compared to national average

POVERTY RATE (% OF THE POPULATION)



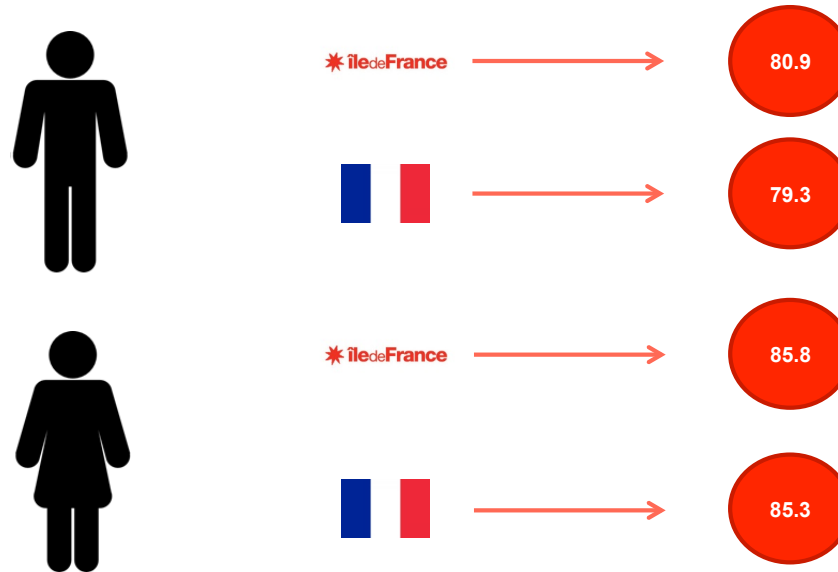
Source : INSEE (2019)

KEY FIGURE

In the region, 640 000 households live with less than 1 026€ per month (60% of the median income)

 **OVERALL HEALTH INDICATORS ARE POSITIVE, DESPITE HEALTH INEQUALITIES**
Positive health indicators

LIFE EXPECTANCY AT BIRTH (IN YEARS OF AGE)



Source : Regional observatory for health (2016)

EVITABLE MORTALITY RATE (% OF TOTAL DEATHS)



Source : *Ibid.*

OVERALL HEALTH INDICATORS ARE POSITIVE, DESPITE HEALTH INEQUALITIES
Social inequalities, health inequalities

SOCIAL GRADIENT OF HEALTH

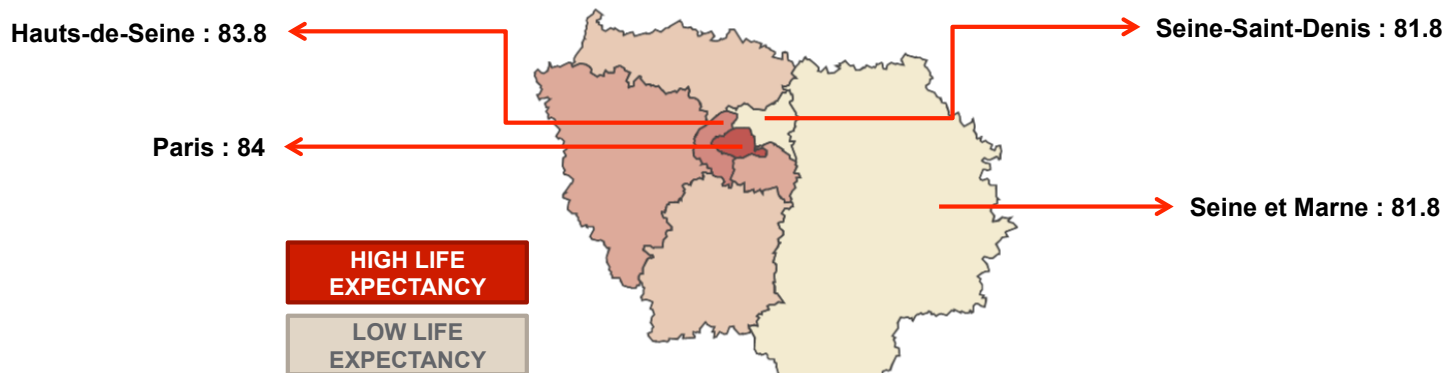


STANDARDIZED BY AGE AND SEX MORTALITY RATES (FOR 100 000)

REGIONAL AVERAGE	688
Seine-et marne	788
Hauts-de-Seine	645
Paris	625

Source : Regional observatory for health (2013)

INEQUALITIES REGARDING LIFE EXPECTANCY AT BIRTH (IN YEARS ON AGE)



Source : Regional observatory for health (2013)

OVERALL HEALTH INDICATORS ARE POSITIVE, DESPITE HEALTH INEQUALITIES
Health inequalities along the suburban rail line RER B



A map published in 2012 by Professor in Health Improvement Emmanuel VIGNERON shows health inequalities along the RER B, an 80km-long suburban rail line that crosses Paris region from North to South.



There are striking differences regarding mortality rates all along the line, even when age, sex and revenue effects are neutralized by using a standardized mortality ratio (GMR) which compares observed deaths to expected deaths in the regional population: 0.7 at Port-Royal, 1.3 at Stade de France.



“IN LESS THAN 15 MINUTES, THE RISK OF DYING IN A GIVEN YEAR INCREASES BY 82% WHEN YOU COME FROM HEALTHY NEIGHBORHOODS OF PARIS (PORT ROYAL, LUXEMBOURG) TO LESS FAVORED NEIGHBORHOODS OF THE REGION (STADE DE FRANCE)”



OVERALL HEALTH INDICATORS ARE POSITIVE, DESPITE HEALTH INEQUALITIES

Social inequalities, health inequalities

MEDICAL REGIONAL DEMOGRAPHY

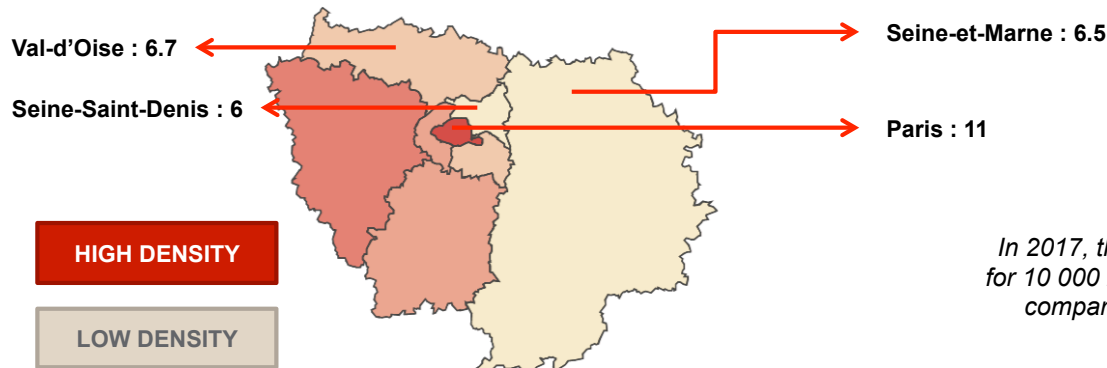


*Between 2007 and 2015, there was a 6% decrease in the medical demography
Loss of 1835 doctors in 8 years*



*One city out of two in Paris region does not have any general practitioner (GP)
This situation affects **430 000 people** who live in **650 cities** of the region.*

LIBERAL PRACTITIONER DENSITY (FOR 10 000 INHABITANTS)



In 2017, there are 7.5 liberal doctors for 10 000 inhabitants in the region, as compared to 9 for 10 000 at the national level

Source : Regional observatory for health (2017)

 **THE FRENCH HEALTHCARE SYSTEM IS CENTRALIZED AND STATE-DRIVEN**
Healthcare expenditure are regulated at the national level



FRENCH PARLIAMENT

VOTES FOR THE BUDGET OF



SOCIAL SECURITY BODIES
NATIONAL INSURANCE FUND (GNAM)

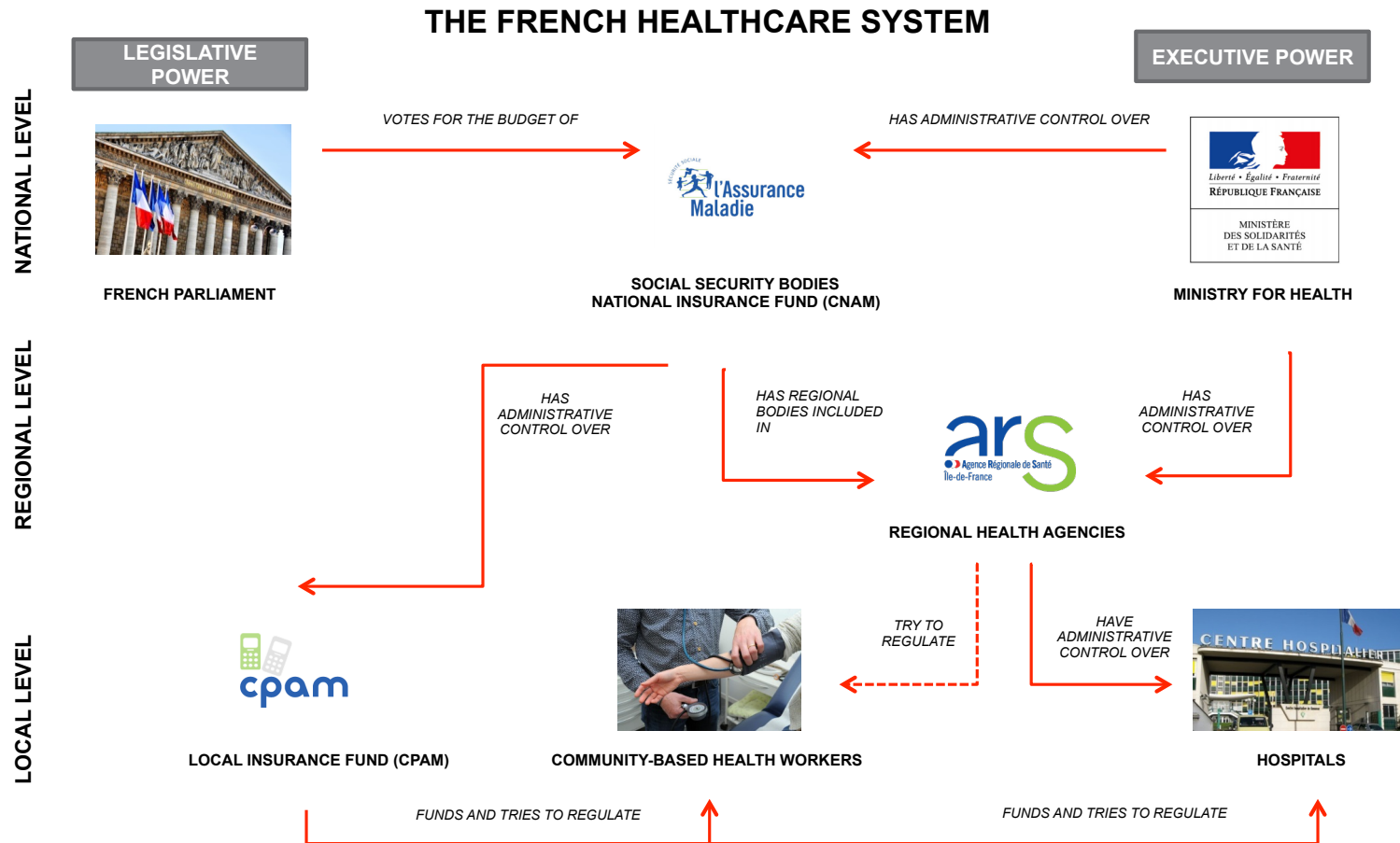


Healthcare expenditure of social security bodies are capped by the French Parliament (so-called ONDAM). Each year, the French Parliament votes for the budget of social security and for an annual growth rate for healthcare expenditure.



THE FRENCH HEALTHCARE SYSTEM IS CENTRALIZED AND STATE-DRIVEN

French Parliament, Minister for Health and Social Security Bodies





THE FRENCH HEALTHCARE SYSTEM IS CENTRALIZED AND STATE-DRIVEN

Weak involvement of local authorities in the healthcare system

LOCAL AUTHORITIES AND HEALTHCARE?



REGIONAL HEALTH AGENCIES

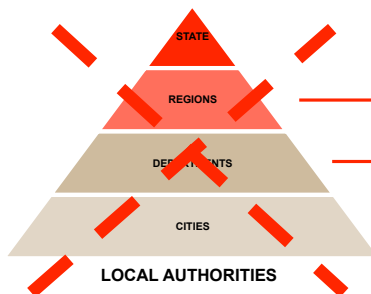
In 2009, Regional health agencies (ARS) are created to implement a more coordinated health policy at the regional level. They regroup powers that were previously in the hands of social security bodies, regional/departmental directorates of health and social affairs and but also in the hands of other public agencies.

They act within the framework of the Regional Health Plan (PRS), a planning tool designed to define some priorities for 5 years in the field of health policies.

REGIONAL HEALTH POLICY



**ACTIONS AT THE REGIONAL LEVEL
THAT HELP TO ACHIEVE NATIONAL
HEALTH POLICY GOALS**



The Region only issues an opinion regarding the adoption of the PRS but it has no other competencies in the field of healthcare.

The Department has competencies in the field of child protection, disability, elderly, but it has no competencies in the field of healthcare.

The Municipality has not competencies in the field of healthcare, even if mayors hold chairs of hospital supervisory boards in every city.



THE FRENCH HEALTHCARE SYSTEM IS CENTRALIZED AND STATE-DRIVEN

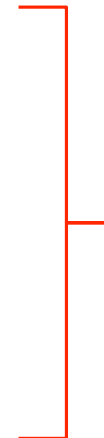
Recent reforms in the field of healthcare : a greater territorial anchorage of health services?



In 2018, the minister for health Agnès BUZYN presented a five-year strategy to reform the French healthcare system. This strategy aims to modernize health and social sectors and to increase cooperation between hospitals and community-based health workers (especially general practitioners).

To achieve these goals, several announced measures go towards a greater territorial anchorage of health services.

- Struggling against medical wastelands
- Settling a bundled payment for chronic diseases (diabetes, chronic renal failure)
- Creating labelled “proximity hospitals” which will have to deal with emergency care
- Creating 1000 territorial communities of health workers (CPTS) to increase cooperation between them



**A GREATER
TERRITORIAL
ANCHORAGE OF
HEALTH SERVICES**



HEALTH GOES BEYOND HEALTHCARE: A TERRITORIAL APPROACH TO HEALTH

Why does Paris region deal with health?

PARIS REGION'S APPROACH TO HEALTH

Improving access to health and prevention is a powerful way to improve equity across territorial and social lines and to restore confidence in the future



An ambitious policy in the field of health is therefore necessary to build a region of solidarity



As a transversal subject, health must permeate all regional policies



Paris region looks forwards to act in this perspective

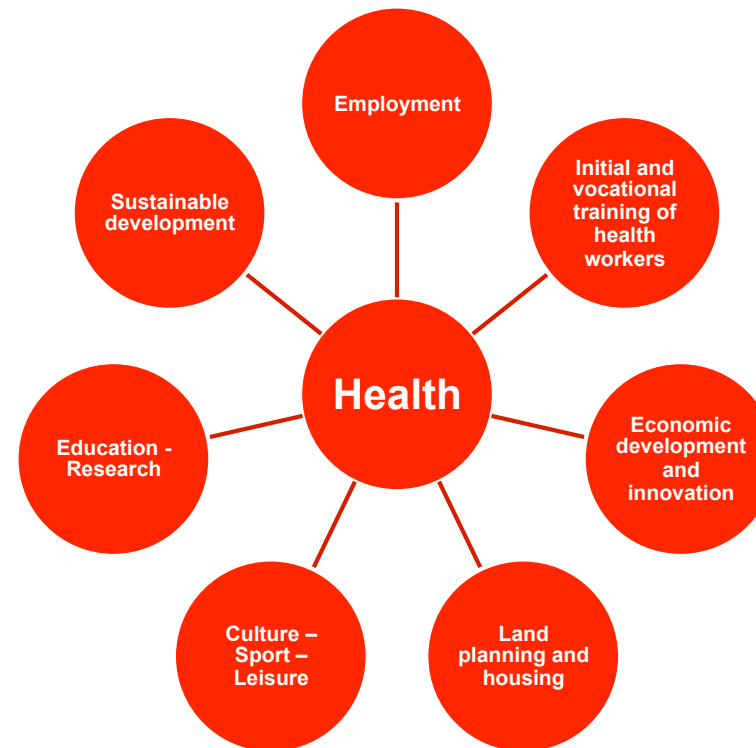


HEALTH GOES BEYOND HEALTHCARE: A TERRITORIAL APPROACH TO HEALTH

Why does Paris region deal with health?

PARIS REGION'S APPROACH TO HEALTH

All of these policies have a strong bearing on health and health equity.





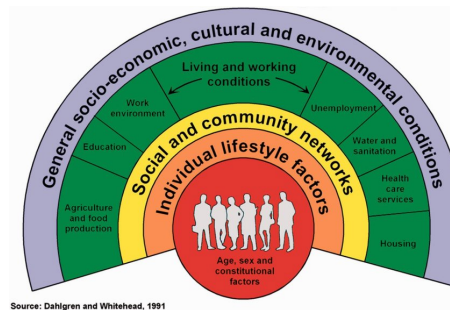
HEALTH GOES BEYOND HEALTHCARE: A TERRITORIAL APPROACH TO HEALTH

Why does Paris region deal with health?

There are **social determinants of health**, this is to say “*circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness*” (WHO).

The health status of a population is not only affected by the healthcare system :

- Rise in the world population since 1700s (and therefore health improvement) is related to social and economic changes rather to public health policies (McKeown, 1976).
- Healthcare services are important, but there are other factors related to agriculture and food production, education, working environment, living and working conditions, unemployment, water and sanitation (Dahlgren, Whitehead, 1992).
- UN CESCR General Comment No. 14 evokes “*underlying determinants of health, such as food and nutrition, housing, access to safe and potable water and adequate sanitation, safe and healthy working conditions, and a healthy environment*”.





HEALTH GOES BEYOND HEALTHCARE: A TERRITORIAL APPROACH TO HEALTH

Why does Paris region deal with health?

DO WE NEED A TERRITORIAL APPROACH ?



According to the Regional observatory for health (ORS), there are specific health issues in Paris region related to healthcare access, patient base and specific ways of life. This seems to require more targeted health interventions and greater cooperation between all actors involved in the health system at the regional level.

In this perspective, some authors emphasize that health policies have to focus on a relevant area of public health (“territoire pertinent de santé publique”) in order to take into account all health needs and social determinants of health in this area (Bréchat, 2016).

When health policies are implemented in relevant areas of public health, a greater coordination between payers and providers (for example) becomes possible. Therefore, it becomes easier to tackle issues such as health inequalities, to develop adequate care pathways...

SPECIFIC HEALTH ISSUES IN PARIS REGION

HEALTHCARE ACCESS



650 cities without any doctor in 2019

PATIENT BASE



42% of all people getting treatment for HIV in 2016 (more than 50 000 individuals)



37% of national reported tuberculosis cases

WAY OF LIFE



¼ Francilien smoke on a regular basis



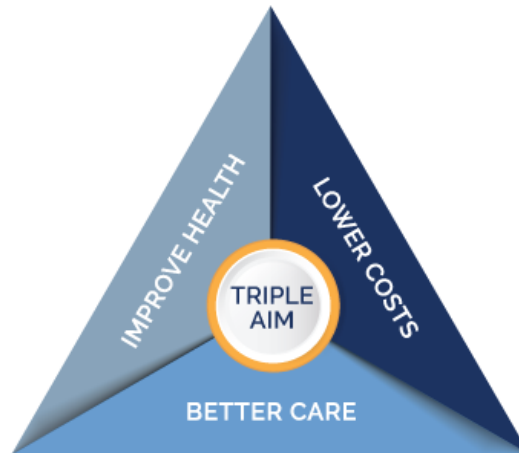
Average age to gave birth is higher (31.5 versus 30.1 in France)



HEALTH GOES BEYOND HEALTHCARE: A TERRITORIAL APPROACH TO HEALTH

Why does Paris region deal with health?

TRIPLE AIM MODEL (BERWICK *et al.*, 2008)



Three main goals have to be achieved

- Improving the health status of the population
- Increasing quality of care
- Keeping healthcare costs under control

MAIN QUESTION

Is the current health system organization efficient to achieve these goals?

FOCUS – 1 : INTEGRATED MANAGED CARE SYSTEMS IN THE U.S.



Kaiser Permanente is an integrated managed care system based in Oakland, California. With 12.2 million health plan members, this is the largest in the US.

The quality of care is considered as very high, especially because coordination of all actors involved allow to insist on preventive care.



Intermountain Healthcare is another integrated managed care system based in Utah and Idaho. With 37 000 employees, it is the largest private employer in Utah.

These health maintenance organizations (HMO) provide all health services needed in a given territory (health insurance, health workers, health facilities).

As pointed out by some authors, such health systems allow to target efficiently social determinants of health in a territory (Bréchat, 2016).

Such an approach also helps to make health the motor of an economic development in the area.

Only focusing on healthcare is not enough. What about regulating the healthcare system at a territorial level, but with a global perspective?

FOCUS – 2 : THE SPANISH HEALTH SYSTEM, A TERRITORIAL APPROACH



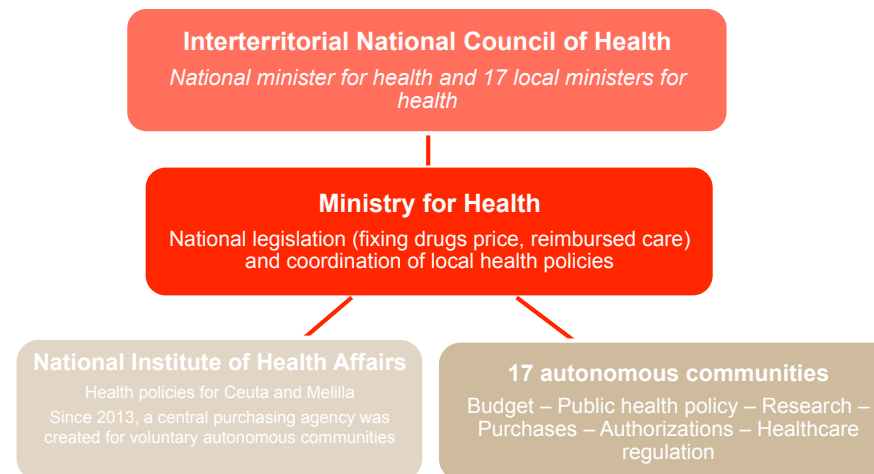
In spite of the economic crisis of 2008-2009 and a poverty rate of 30% in 2015, health indicators in Spain are quite positive.

- #1 LIFE EXPECTANCY IN THE EU (83.4 in 2017)
- #1 LIFE EXPECTANCY “IN GOOD HEALTH” IN THE EU (65.8)
- VERY LOW INFANT MORTALITY (2.7)



All autonomous communities are in charge of steering health policies in the country (17). The ministry for health is only involved to coordinate public policies and to ensure that the health system remains equal for citizens (still very important).

THE SPANISH HEALTHCARE SYSTEM IS DECENTRALIZED



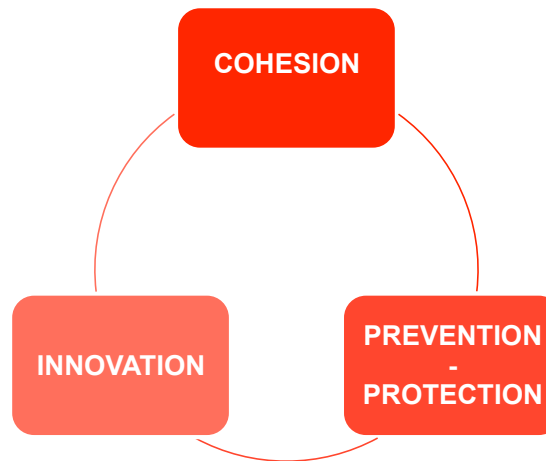


THE THREE PILLARS OF THE REGIONAL ACTION IN THE FIELD OF HEALTH

Health equity in all regional policies

Paris region puts health at the heart of its policy priorities and has developed an ambitious approach where health is integrated into all regional policies. Indeed, health is a key condition for economic development and territorial cohesion. It is also a strategic economic sector in order to prepare for the future of regional territory and population.

This innovative approach falls under the notion of integrated health system.



LAND PLANNING

The ambition of Paris region is to think about health at the scale of major territorial programs. To prepare the future of the region and ensure a balanced development of territories, it is essential to think upstream the organization of health, to anticipate needs of the population, in particular by integrating **the impact of future transport lines** and to structure a modern care offering within new urban areas.

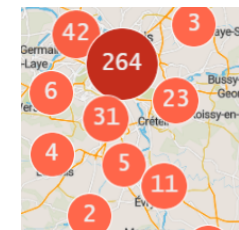


Grand Paris Express

STRUGGLING AGAINST MEDICAL WASTELANDS IS A PRIORITY OF THE REGIONAL ACTION (€ 4,5 MILLION INVESTED IN 2019)

Saving community medicine has become a priority issue. Therefore, the region is committed to **support installation of health workers** by granting them installation aids (up to 50% of incurred expenses).

The region also funds the creation of collective exercise structures such as health centers to fight against medical deserts (80 since 2016).



Health centers in Paris region

ATTRACTIVENESS OF HEALTH PROFESSIONS

Housing is expensive in the region, especially around Paris. To attract and retain health workers such as nurses or assistant nurses, the region will **help building 10,000 homes** for these professionals within 5 years.

PREVENTION - PROTECTION

SUICIDE PREVENTION OF HEALTH WORKERS

The region supports actions to prevent suicide of health workers with a **call center and a dedicated phone line**. Health workers are also trained to detect high risk situations.

PROMOTING YOUTH HEALTH

Actions on the ground of the Regional Center for Information and Prevention of AIDS in favor of youth health (CRIPS) : Preventive actions in the field of sexuality, addictive behaviors, **for instance during music festivals** especially when they are financially supported by the region.

FIGHTING AGAINST HIV (€ 1.5 MILLION INVESTED IN 2019)

20% of Parisian affected by HIV do not know their serological status. An ambitious project was launched, which is named "*For an Île-de-France without AIDS*". The project focuses on **HIV testing and early detection**, which are considered as the most efficient action levers to eradicate the disease.

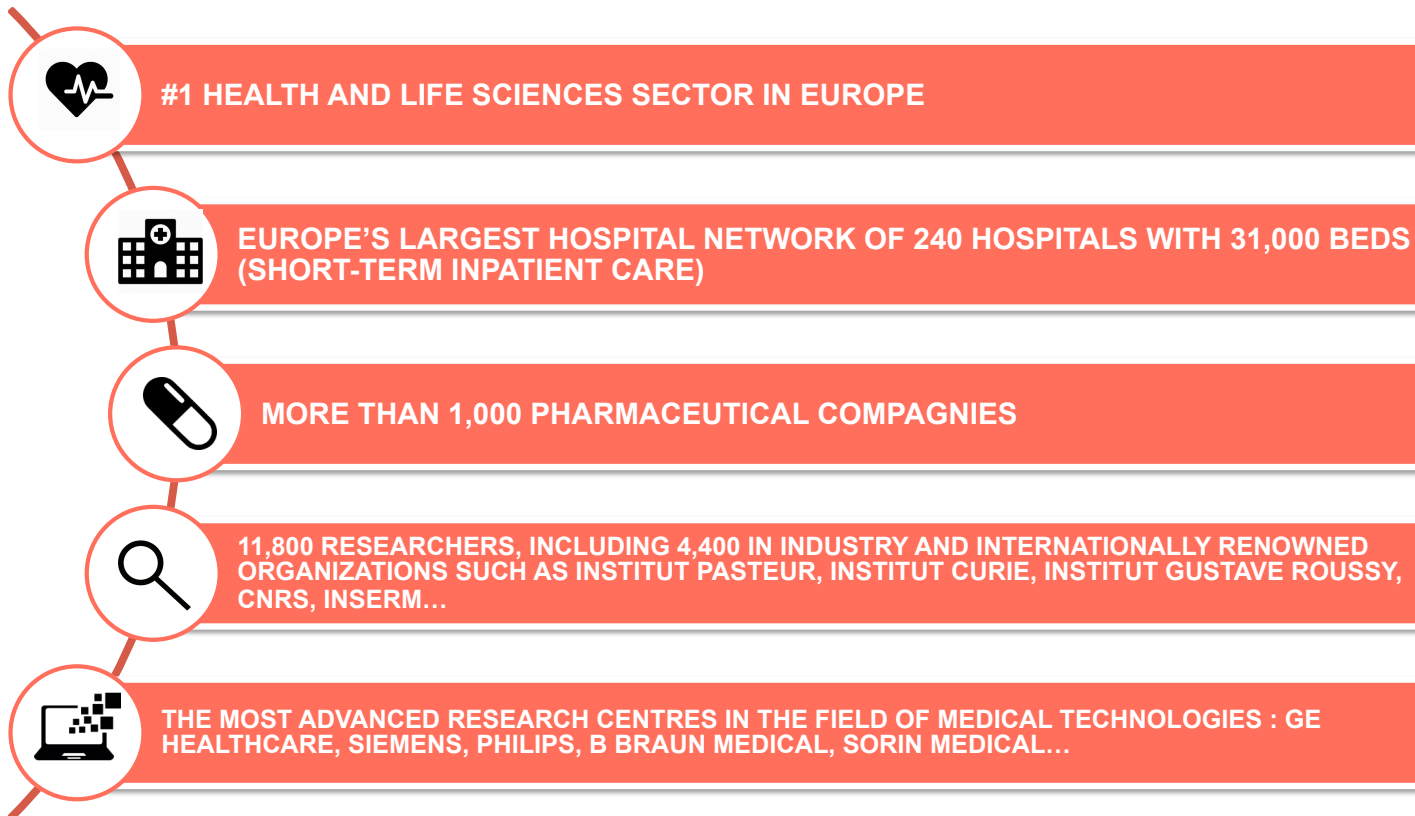
CANCER

The region supports a **free place to rebuild after cancer** (RAFAEL INSTITUTE). Medical and paramedical professionals work together to create personalized rehabilitation programs, during and after cancer treatments. The goal is to switch from a disease-centered medicine to a patient-centered medicine, where a patient considered as a whole, with a life plan.



Actions on the ground of the CRIPS

PARIS REGION IS THE EUROPEAN HEALTH CHAMPION



INNOVATION

HEALTH AS ONE OF THE FIVE PRIORITY INDUSTRIAL SECTORS

Paris-Saclay (research-intensive and business cluster) or at **Cancer Campus** (biocluster) aim to create ecosystems in which researchers, academics, hospitals and industry can meet and work together.

MEDICEN (competitiveness cluster) aims to create a favorable environment to develop innovative health technologies. Including more than 350 members, this cluster initiated 400 certified projects in 2017.

As part of its interventions regarding economic development, Paris region made the health sector as **one of the five priority industrial sectors**. Health is deeply considered as a source of wealth, growth and employment.

PROMOTING NEW WAYS OF PRACTICING MEDICINE

In 2019, Paris region will launch **an experiment in telemedicine** for rural areas, with professionals already established in these areas in order to strengthen the supply of care (in partnership with AXA and NILE CONSULTING).

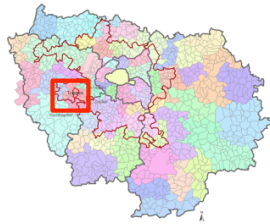
The region will also support a project to **develop exchanges and coordinated practices** between health workers. The objective is to better identify needs of the territory and to use innovative solutions and data to reinforce the quality of care pathways.



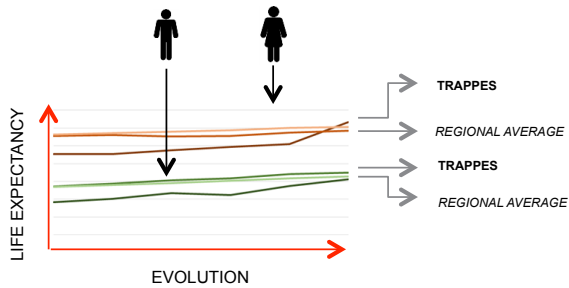
Paris-Saclay Cluster



★ FOCUS – 3.1 : ALLIANCE OF HEALTH PROFESSIONALS IN TRAPPES



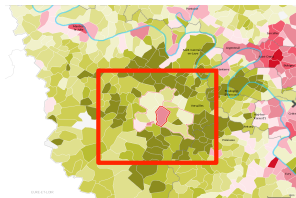
Trappes is a underprivileged city of 33 000 inhabitants located in Essonne (91). There is about 60% of social housing and 40% of the population has not any diploma. This rate is almost 2 times higher than regional average.



Health indicators are not very positive in the city as there is a shorter life expectancy, an higher infant mortality and an higher prevalence of some diseases (obesity, lung cancer, diabetes...).

→ Before 65 years old : overmortality by cancer (especially lung cancer), higher prevalence of cardiovascular diseases...

→ After 65 years old : higher prevalence of cardiovascular diseases and diabetes



HIGH INCOME

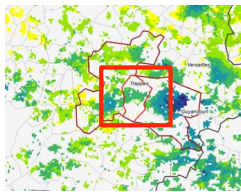
LOW INCOME

However, Trappes belongs to a group of municipalities that are very wealthy ("Communauté d'agglomération de Saint-Quentin-en-Yvelines"). Therefore, there are actually numerous health resources around the city that can be used to improve the health status of the population (e.g. nearby hospitals, well-settled health workers...).

FOCUS – 3.2 : ALLIANCE OF HEALTH PROFESSIONALS IN TRAPPES



The Regional observatory for health (ORS) is an autonomous agency placed under the authority of Paris region. It was used to complete a mapping regarding the situation in the city : social and economic indicators, health indicators, public actors...



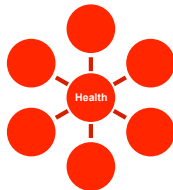
Access to emergency care for example is very important in the city since there has been a steady loss of general practitioner (GP) for many years. There are still many doctors who practice in the city, but they are in a situation of over activity (when compared to regional or agglomeration average).

LOW ACCESS

HIGH ACCESS



The Region will bring all health workers around the table and will ask them about ways to improve health indicators of their own choice (≠ to enforce actions). Currently, two topics were chosen, “health status of women” and “access to emergency care”.



Eventually, the Region will use all available policy levers to help health workers to target together selected health issues (prevention, investment aids, training, transports).

→ Making a car available for home visits?

→ Creating a new bus stop nearby health workers' home?

Health is very important regarding territorial cohesion and development. Besides, it was also a crucial topic during recent social protests (“yellow jacket movement”).

A more integrated and territorial approach has to be developed regarding healthcare.

Paris region is totally committed to this cause. This long-term policy will eventually give results.