

From left: Ronny Kretschmer, Die LINKE parliamentary group, Deputy Chairman of the Committee for Social Affairs, Health, Integration and Consumer Protection, Member of the Brandenburg State Parliament / Carla Kniestedt, Alliance 90/The Greens parliamentary group, Member of the Committee for Social Affairs, Health, Integration and Consumer Protection, Member of the Brandenburg State Parliament / Daniel Keller, Chairman of the SPD parliamentary group, Health Policy Spokesperson, Brandenburg State Parliament / Prof. Dr Michael Schierack, CDU parliamentary group, Spokesperson for Science, Research and Health in the CDU parliamentary group. Right: Moderator Matthias Gabriel, editor in charge at KomPart-Verlag (AOK)..

AOK Forum live in Potsdam: 'Brandenburg has the choice: For healthcare with a future!'

Teichert: 'Thinking healthcare in an integrated way'

With a view to the upcoming state elections in Brandenburg on 22 September 2024, politicians discussed the challenges and opportunities for healthcare in the state as part of the 'AOK Forum live' talk format at the Old Town Hall in Potsdam, within sight of the Brandenburg state parliament. The title of the event: 'Brandenburg has the choice: For healthcare with a future'.

>> 'Our lives are finite, as are our resources.' Prof Stefan Heinemann, Professor of Business Ethics at FOM Essen University of Applied Sciences and member of the Scientific Advisory Board for Digital Transformation at AOK Nordost, summarised the dichotomy of human life in this way. On the one hand, everyone knows that the mortality rate for humans is precisely 100 per cent - we will all die and that's okay - but until then, the motto is: 'try to live as healthily as possible'. Theologian Heinemann continues: 'And if we fall ill, we naturally want the best possible care. So far so good, really.' Being and staying healthy and becoming healthy is a 'relatively intrinsic need'. Everyone wants to be treated 'somehow fairly and justly', regardless of their individual phase of life and starting situation; however, in reality it is clear that what always reads so well doesn't quite work: On the one hand, needs are growing and increasing; on the other, resources are not increasing.

According to Heinemann, the context is also different. Brandenburg, for example, is very different from North Rhine-Westphalia, where he comes from. In Brandenburg, the area is an issue and, above all, 'justice in the area'. Here, the basic principle of solidarity is reaching its limits in the desire to achieve a great deal and even more, with potentially less and less money. One possible solution: a complete reorganisation - away from 'all these solidarity-based systems' - a second and more effective one: more efficiency. Heinemann: 'One possible solution is to create or strengthen structures that can deal with complexity in a slightly different way.' For the expert on the economics and ethics of digital technologies, this is where the 'much-cited phenomenon of digitalisation' comes into play.

This, and artificial intelligence in particular, is needed because we cannot do without solidarity for normative reasons. 'AI is a very sharp sword,' warns Heinemann, but also sees a great opportunity: 'It is the first time in the history of mankind that we have an instrument like this at our disposal.'

At this point, the economist and ethicist referred to Homer's Odyssey and its journey between the monsters Scylla on the larger of the two opposing rocks of the strait and Charybdis on the other: The Greek was clever and would have chosen the wise middle way of reason, which he also advises in dealing with AI: to choose a wise path between the fear of being de-humanised and de-professionalised by technology and the approach of domesticating AI and putting it in its place. Heinemann: 'Then we will be doing a tremendous thing in human history, because we are all the last generation that can still do this.'

Despite Heinemann's emphatic words in favour of a positive approach to digitalisation and AI in particular, both topics were sidelined in the subsequent mentimeter survey due to the current situation. When participants were asked which healthcare policy issues would play the biggest role in the coming legislative period and in the upcoming state elections in Brandenburg, the keywords 'hospital reform' came first, followed by 'care' and 'funding', with digitalisation coming last.

Digitalisation was also not mentioned in the subsequent opening statements by the panel guests - all state politicians from Brandenburg. Daniel Keller, Chairman of the Brandenburg SPD parliamentary group and health policy spokesperson for the Brandenburg state parliament, emphasised that the state had increased investment in hospitals, would train and support more doctors itself in the future and would like to consolidate the Euro 18 million Pact for Care.

Prof. Dr Michael Schierack, spokesperson for science, research and health for the CDU parliamentary group, on the other hand, argued that the task of the future will be how to organise healthcare in rural regions. The main question here is how the inpatient and outpatient sectors can be organised together and how logistics structures can be strengthened. This requires not only money, but also specialised staff and not only the state, but also the federal government.

Ronny Kretschmer, deputy chairman of

the Committee for Social Affairs, Health, Integration and Consumer Protection and member of the Brandenburg state parliament for the Left Party parliamentary group, explained that patients ultimately don't care whether they are treated by a doctor in hospital or by a colleague in private practice; the most important thing is that they are treated at all if they need treatment. Or that they get a place in a nursing ward or access to adequate outpatient care. Kretschmer: 'These are the problems that affect people in rural areas.' His petition is therefore for cross-sectoral, regionalised care planning, from medical care to nursing care.

This would only work as a team and with the existing care structures, added Mr Schierack. A 'new team spirit' is needed here. This is the only way to overcome a sectoral view. This was still conceivable 10 or even 15 years ago, but we will see that this approach will no longer work and will not work in the future, especially in rural areas. Schierack: 'We must all take responsibility together, because we have this responsibility.' However, federal legislators must create the necessary conditions for this.

Carla Kniestedt, member of the Committee for Social Affairs, Health, Integration and Consumer Protection and member of the Brandenburg state parliament for the Alliance 90/The Greens parliamentary group, was a little resigned. She could not remember how many times these or similar topics had been discussed in front of this or other audiences, she said, adding that it was slowly becoming impossible to 'keep up the act'. She could also no longer hear the term 'model', now it was time to 'do'. On the one hand, this requires each individual professional group that plays a role in this complicated and complex healthcare system to step out of their personal role: 'If everyone only moves in their own area, we won't get anywhere.' On the other hand, new regulations need to be created so that carers and other professions can work more responsibly. In her opinion, the KV must also move and allow the state to gain access to outpatient centres and not immediately refer to its own sovereignty.

Keller pointed out that it is a question of whether I support the hospital reform or point the finger at the federal government. It must also be critically scrutinised whether it is justifiable for a stroke in the Uckermark to receive different treatment than in Potsdam. Or whether it is justifiable that a heart attack, statistically proven, has a different mortality rate in a rural area than in an urban area. SPD politician Keller's suggestion and wish: 'We need to discuss this with the people of Brandenburg and, above all, we need to explain that the issue of quality plays a major role in hospital reform.' We also need to be honest about the fact that the distances for many elective procedures will have to be longer in future.



From left: Ursula Nonnemacher, Minister for Social Affairs, Health, Integration and Consumer Protection of the State of Brandenburg, and Daniela Teichert, Chairwoman of the Board of AOK Nordost. Photos: AOK Nordost/Christian Marschler.

Health Minister Ursula Nonnemacher then took stock of the past few years. 'The entire legislative period was characterised by major crises. During the pandemic, we implemented a huge vaccination campaign, African swine fever, the war in Ukraine, which brought more than 60,000 refugees to Brandenburg - we have been cushioning crises and putting together rescue packages the whole time,' said Nonnemacher. That is why she is frustrated and annoyed to a certain extent that there is so much dissatisfaction, even though so much has been achieved. 'It's difficult to react to pure scaremongering with politics.' With regard to the hospital reform, she believes it is crucial that the federal states provide good support and implement it well. However, she is very concerned about the backwardness of prevention. 'None of this is rocket science.' The five most important points for protection against coronary heart disease are very easy to implement, but Germany is already falling behind in terms of life expectancy. In her opinion, something urgently needs to change here, otherwise 'at some point we will no longer be able to manage care', said former emergency physician Ursula Nonnemacher, who will no longer be standing in the upcoming state elections.

In her closing remarks, Daniela Teichert, CEO of AOK Nordost, called for new answers to the issues facing the healthcare system. However, in her opinion, hospital reform is not the solution, but it is necessary to think about the entire healthcare system in an integrated way. It is important to utilise the available data. 'We must finally use the data for demand planning,' said Daniela Teichert, drawing a link to Heinemann's keynote speech. For her, digitalisation offers a great opportunity to secure the supply of the future with fewer resources. Artificial intelligence plays a role in this. 'This can be a real opportunity for individualised medicine .' <<

von: MVF-Editor-in-Chief Peter Stegmaier

Zitationshinweis

Stegmaier, P.: „Teichert: 'Thinking healthcare in an integrated way'", in „Monitor Versorgungsforschung" (04/24), S. 12–13. http://doi.org/10.24945/MVF.04.24.1866-0533.2642