

## ‘How does your health system work?’: a workshop at the WONCA Europe Conference 2012....

...that has stimulated multiple debates on health systems financing among European general practitioners, and has highlighted an opportunity to strengthen understanding of health systems in post-graduate general practitioner training

*by Stephanie Kumpunen, Luisa Pettigrew, Greg Irving and Sietse Wieringa*

Last week around 2000 general practitioners (GPs) met in Vienna to discuss the theme of *The Art and Science of General Practice* at the annual **WONCA Europe Conference** (4-7 July). Yet one of the most conversation-starting topics on the agenda could be argued was neither directly art, nor purely clinical science. Over 200 GPs from around the world participated in a workshop on health systems financing, and were intrigued to learn more about the methods used to collect, pool and spend funds in health systems. The audience ranged from medical students to senior members of the profession, and highlighted broad differences in the levels of understanding of how health systems function. Some questioned why it was the first time in their careers that they had been given the opportunity to get an overview of the theory behind the core principles of health systems financing.

During the workshop speakers discussed the policy goals and financial functions of health systems, archetypical models of health systems financing (i.e. Beveridge and Bismarck style systems), and the advantages and disadvantages of the varied methods of paying general practitioners (e.g. capitation, fee-for-service, salary). Cross-country comparisons stimulated significant discussion. Participants debated the respective benefits of health systems funded from social insurance or tax-based contributions from the perspectives of tax-paying citizens, patients and healthcare providers, and acknowledged that there is no perfect model. They also questioned whether wearing the hat of a patient – as opposed to that of a GP – changed their preferences for particular models of financing. Clare Gerada, Chair of the Royal College of General Practitioners (RCGP), who attended the workshop, summarised participants’ comments in an article sent out to 44,000 GPs following the event in her weekly **RCGP update**, later re-posted on **nhsmanagers.net**. In her article she argues that UK GPs and patients most value the policy goals of equality and safety, which have been realised in the NHS model over the last 64 years. Since Clare’s article the open-access presentation created by the workshop organisers (and authors of this blog post) entitled ‘**Do you understand how your health system works? A whistle-stop tour of European health systems**’ has been viewed over 500 times.

While at the conference, the organisers were approached by attendees looking to learn more about health systems, as well as to better understand how their own system functions compared to those of their international peers. This seemed to highlight a considerable appetite amongst GPs to develop their understanding of health systems and for this to be offered early in their careers. In some cases this need was driven by the extended commissioning role that will be taken on by GPs across England in 2013. Indeed, the RCGP has been quick to offer more substantial training in health systems financing and commissioning at all levels, beyond that of the core clinical competencies traditionally offered; however, it has also acknowledged that the opportunities for GP trainees to develop a broader view of health systems have been limited by an already busy three-year training programme.

The good news is that the timing for the identification of this gap couldn’t be better, as the **RCGP recently recommended** that GP training should be extended from three to four years, one of the key objectives of which is to provide GP trainees with a greater opportunity to learn about the impact of health systems on patient outcomes. We suggest that action to shape the **proposals**

within the existing GP curricula should be taken now as joint efforts between clinicians, non-clinical researchers and educators both in the UK and overseas. So – who is up to the challenge?

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