


Development of hospital pharmaceutic services : between search for efficiency and preservation of autonomy of professionnals



D. Vinot, S. Fraisse, J.-P. Reymond,
C. Rigaud-Bully, H. M.Spath.
LASS UMR CNRS 5823,
18, rue Chevreul 69007 Lyon - France
vinot@univ-lyon3.fr

1



Plan

- Context
- Method
- Results
- Perspectives

2



Context

- Swiss Global Health context : decentralization and autonomy
 - « The most American of European Health Systems » *DC Lambert*
 - Private insurances
 - Public hospitals depend on towns
- Wallis specific context :
 - 6 public hospitals
 - Population of 320, 000 persons, in rural and relative poor country
 - Mountain & urgency

3



Question & hypothesis

- In which measure centralization of pharmaceutical services is more cost-effective than specific small units in each hospital ? (Scale effects) - Politically correct question
- Why people cannot renounce for their autonomy, even for quality & costs saving ? (Implicit question)

4



Method

- Analysis of Swiss & Wallis Health laws, analysis of Health Regulation
- Visit of each hospital :
 - Evaluation of implementation and organization of hospitals' pharmaceutical services
 - 24 semi directed interviews with physicians, nurses, and managers
 - Analysis of discours and practices of pharmacists

5



Results

- Expectation for supplementary pharmaceutical services in the sense of a better quality of the process of care.
- ... but with no costs of coordination !
- Paradoxal injunction (Watzlawick 1986) :
 - The supplementary costs that the application of the law represent for each hospital if they want to change by themselves without cooperating with the other hospitals
 - The risk for the practitioners to be questioned in their freedom of prescription of drugs.

6



Analysis

- A problem similar to networks organisation problems, specially concerning :
 - Financing of the network,
 - repartition of responsibility,
 - respect for the autonomy of the actors,
 - fear of the fusion of the culturally different structures,
 - problems of integration and coordination between structures and actors ...,
- Quality of care vs quality of professionnals ? The lack of pyramidal structures, but the unefficiency of transverse coordinations
- When coordination needs to meet contractualisation !

7



Perspectives

- Solve the problem relative to the concept of a shared decision
- Evidence of incapacities of a regional sanitary economic planning...
- Bulding a specific methodology to analyze the nature of the relationship between integration and coordination

8



Proposals for a Methodology

- Aim of the coordination/integration
- Actors of coordination/integration
- Space of coordination/integration
- Ressources for the coordination/integration
- Tools for the evaluation of the coordination/integration

But was is the question ?

9



Conclusion

- What is the field of this research ? Health economics, sociology, pharmaceuticals, health management ?
- Can we answer with pertinency to question of coordination if we analyze it with « specialists eyes »?
- What should we do as researchers in such a situation :
 - Answer the official question, knowing it will be in coherence between common laws of research ?
 - Test new solutions, which seem to be peripheral to the central question, but which could be able to rethink the system in place ?
- Shall we be wrong with precision, or shall we be vaguely right ?

10