

Study HSR 2008-35 Financing of home nursing in Belgium

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Research question and structure of report

- Is the current financing of home nursing adequate?
- Organisation and financing
 - Belgium
 - 4 European countries
- Tools for measuring the patient dependency in home nursing
- Discussions with Belgian stakeholders

Belgium

- A mixed system
 - Fee for service: technical interventions
 - Lump sum payment: BESADL
- Specific costs for home nursing organizations
- A subsidy for the costs related to computerization
- Reduced social tax contributions and Social Agreements

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The Netherlands, France, Germany and England

- Discussion on borderline home care - home nursing
- Differentiation post acute – long term care
 - Post-acute: similar to hospital case mix system
 - Long term basic care: per diem rate, based on dependency (e.g. G: Pflegestufe)
 - Technical care: fee-for-service system
- Work differentiation : nurses vs nursing aids
- Financing ~ qualification level

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Tools for measuring the patient dependency

- Tools
 - BESADL
 - APA
 - RAI-HC
 - AGGIR
 - SMAF
- Tools initially not created for financing purposes.
- A perfect encompassing registration tool does not exist.

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Stakeholder dialogue

- 4 meetings, 25 participants
 - governmental agencies, NIHDI, sickness funds, self-employed nurses and employee nursing organizations.

Main remarks

- The lack of a global vision on health care organisation
- Critique on fee-for service
 - Obsolete nomenclature: missing activities
 - Inadequate pricing
- Agreement on the further development of mixed system (fee-for-service & lump sum/case-mix financing)
- Better control mechanisms and clarity about sanctions

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Recommendations

- Vision & Objectives
 - Hospital – home
 - Integration of home help, home care and home nursing
 - Value coordination and continuity of care
- Financing mechanisms should support objectives
 - E.g. for chronic patients the emphasis could be set on self-care support

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Recommendations

- A mixed financing model
 - Distinguish post-acute home nursing and long-term home nursing
 - Long-term care
 - basic care and follow-up of chronic conditions: differentiation in lump sum fees based on an evaluation of patient dependency
 - technical / specialised care: a fee-for-service payment system.
- Fees should be based on evaluation of real costs

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Recommendations

- Characteristics of the nurses such as the qualification, level of expertise and experience could be considered

Research agenda

- Comparative field study of dependency scales
- Study P4Q initiatives in home nursing



THANK YOU!



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