"Continuity of health & social care for chronically ill & socially deprived populations: Options & Solutions for the Brussels region"

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Continuity of health & social care for chronically ill & socially deprived populations

Options & Solutions for the Brussels region

Triple jeopardy in Brussels

Fragmentation of health & social care

Lack of continuity for chronically ill & socially deprived populations

Which solution(s) in continuity of health & social care for the chronically ill & socially deprived populations at the regional level?

Which solution(s) in continuity of health & social care for the chronically ill & socially deprived populations at the individual level?

Stakeholder analysis with mixed methodology and experimental design
Priority solutions in continuity of health & social care in Brussels in 2015-2016 (n=172)

Models of continuity of care

- Integration
  - Governance: 48%
  - Organisation: 23%
  - Funding: 36%

- Coordination
  - Governance: 49%
  - Organisation: 54%
  - Funding: 29%

- Linkage
  - Governance: 3%
  - Organisation: 23%
  - Funding: 35%

Domain of intervention

Governance
Organisation
Funding

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Recommendations for the future of continuity of health & social care for socially deprived & chronically ill patients in the region of Brussels

1. Increasing coordination in governance
   ⇒ Unique procedure of access to health services

2. Supporting integrated financial solutions
   ⇒ Having a fix-payment for mental health & primary care

3. Upgrading the role of CPAS/OCMW in health issues
Comments, questions and further information

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