



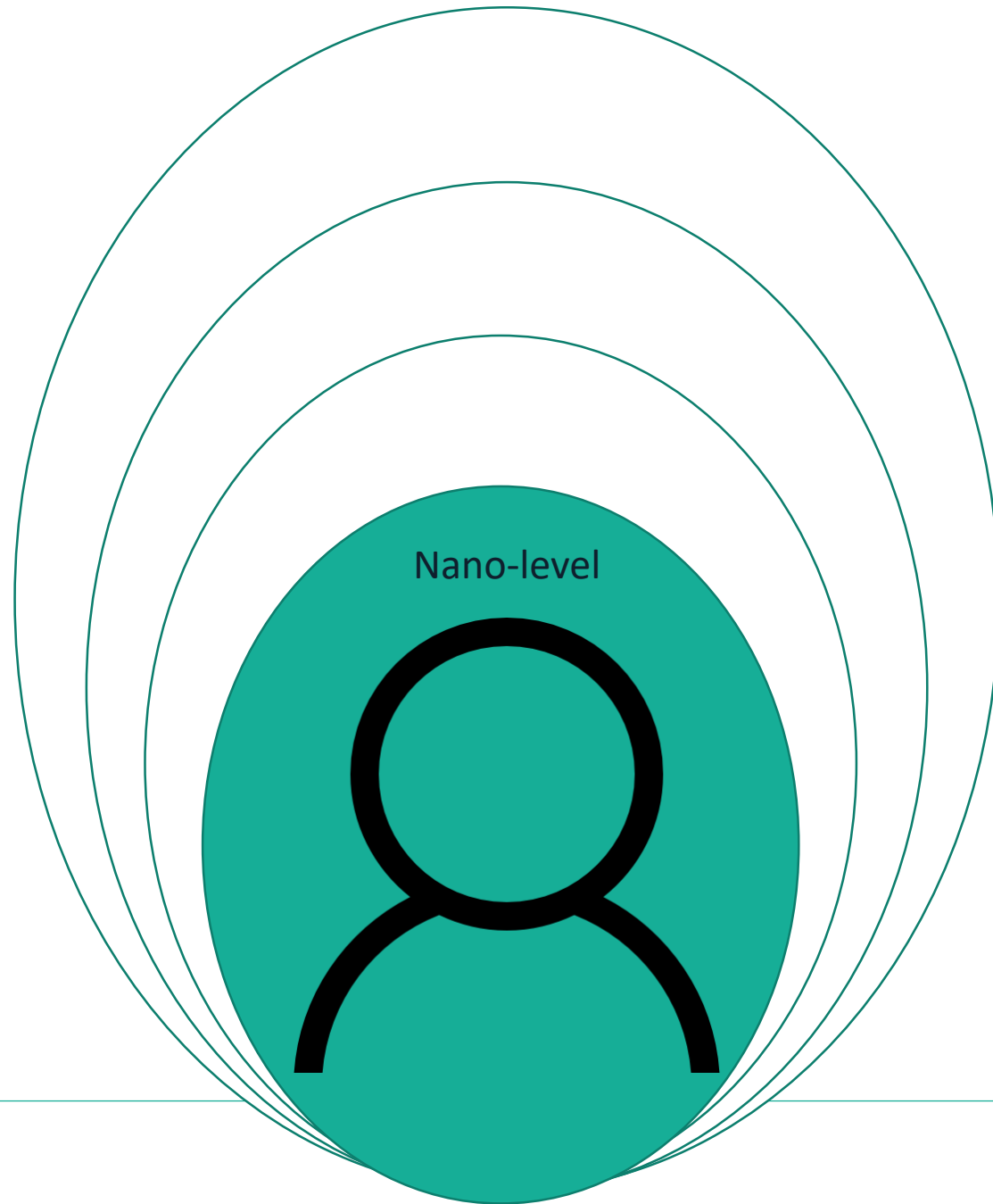
Vereniging van
Wijkgezondheidscentra

Community Health Center Botermarkt in Ghent (BE)

Patients, the community together with the interprofessional team, that makes the difference!

Karen Verkoelen, Manager Health Promotion, CHC Botermarkt

Veerle Vyncke, Federation of Community Health Centres (Flanders)





1 september 1983



Jan De Maeseneer
Family Medicine
and Primary Care
At the Crossroads of Societal Change

Individual patient encounter

⇒ change the circumstances in which people live,
work, age (social determinants of health)

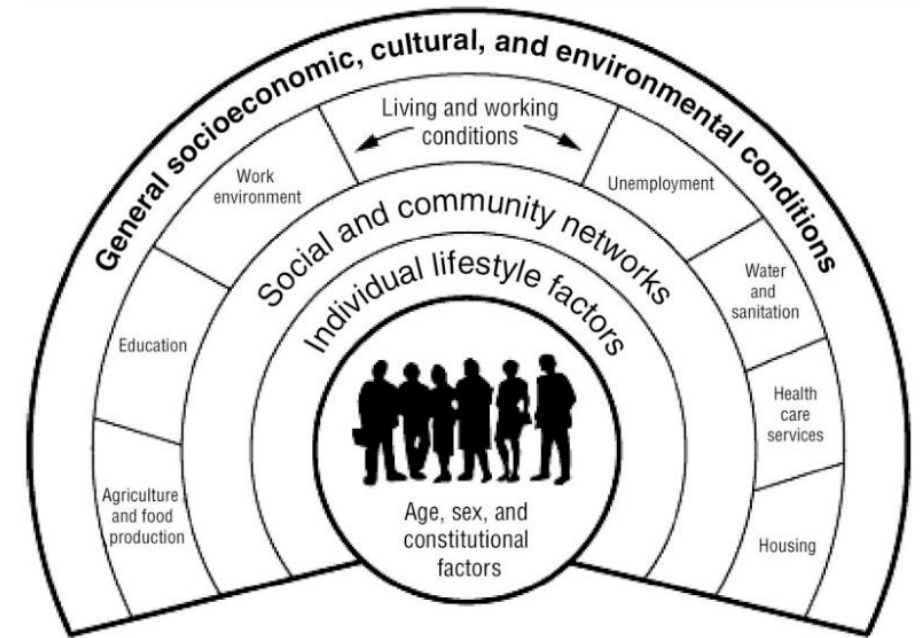
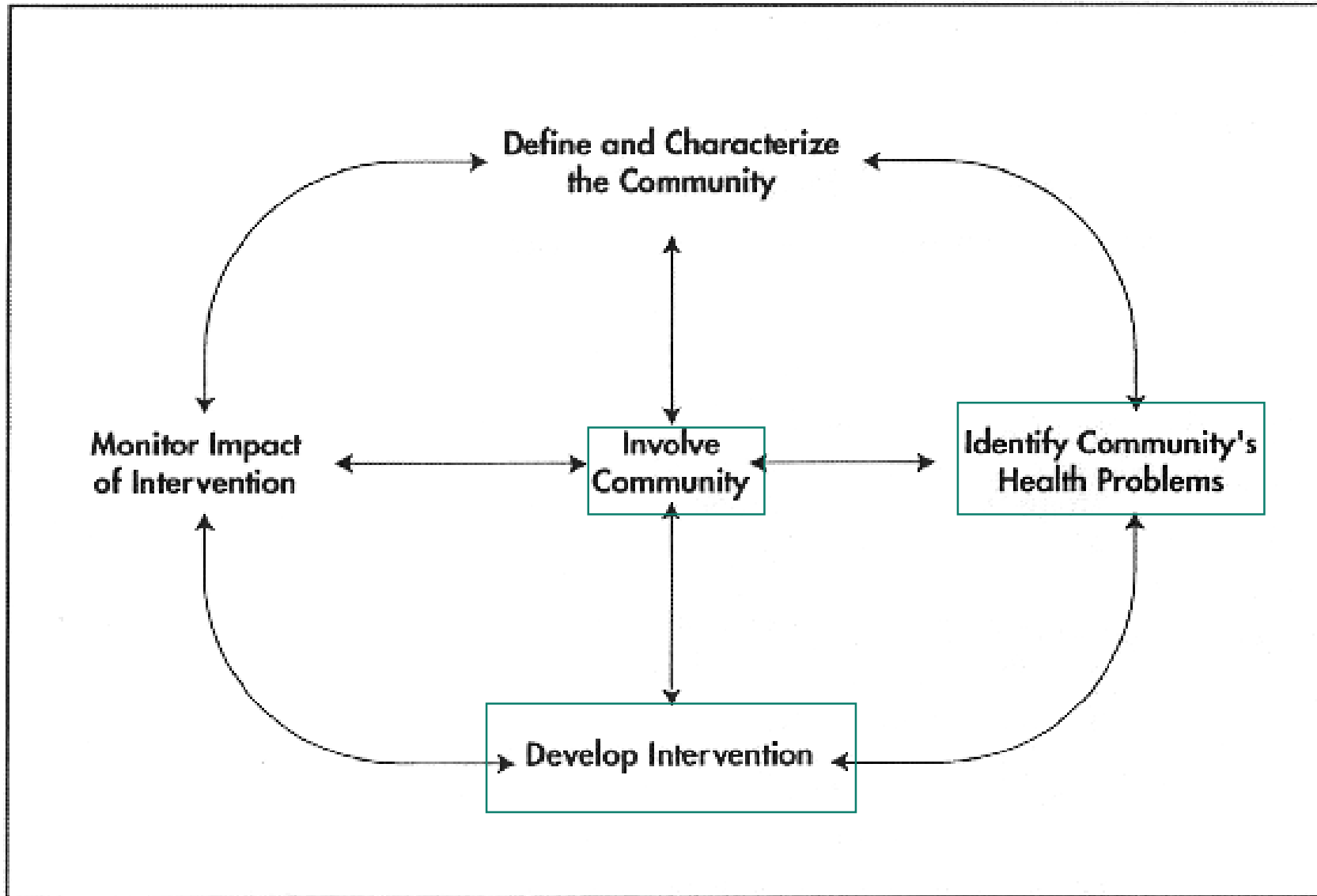
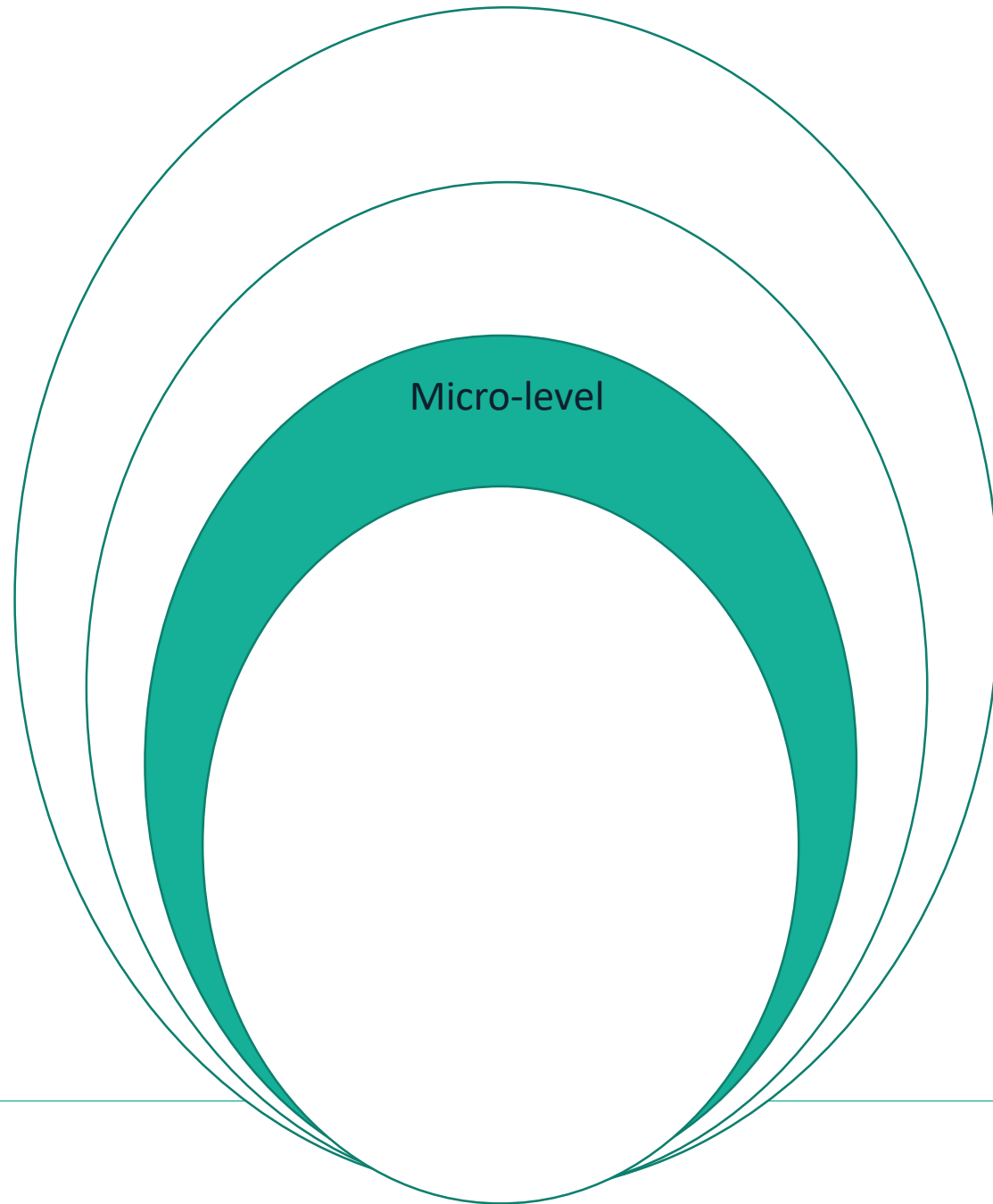


FIGURE 1.2: The COPC Process







- Interdisciplinary team: GPS, nurses, administrative staff, nutricians, dentists, social workers, psychologists, health promotor...
- 6500 patients; 95 nationalities, socioeconomic vulnerability



BELGIUM

- > 175
- 4% of the Belgian population
 - Main source of funding = need based capitation
 - GP
 - Nurse
 - Physiotherapist
- No co-payment for patient

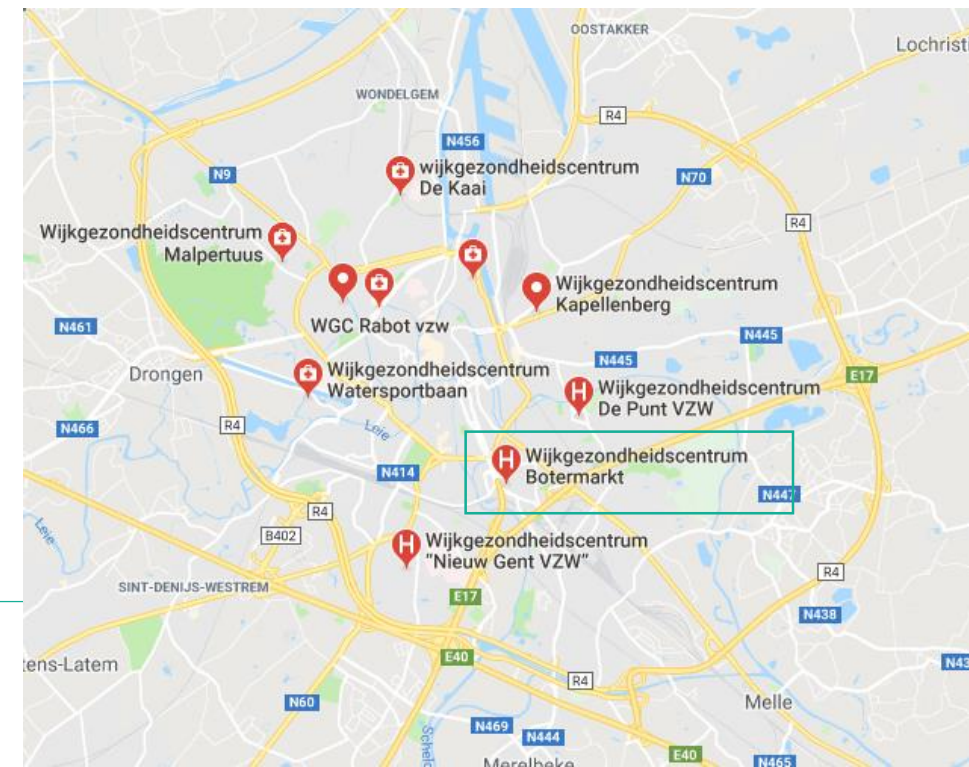
CITY OF GHENT

- 10 CHCs



FEDERATION OF COMMUNITY HEALTH CENTRES (FLANDERS)

- 33 centres
- Not-for-profit
- Min. 3 disciplines => integrated primary care
- +- 85 000 patients



INTERNAL

Identification of care needs in individual
care provider-patient encounters



INTERNAL

Identification of care needs in individual
care provider-patient encounters



Interdisciplinary patient case discussions:
identify relevant care needs



'Rest Rusts'

- Outreaching program towards homebound elderly
- GP – nurse – health promotor – local school - ...
- Targeted health risk = sedentary behaviour
- Patient goals : tailored movement exercises (goal-oriented care)



- Involvement of **all** (in)formal care providers: shared vision
- Motivation for patient

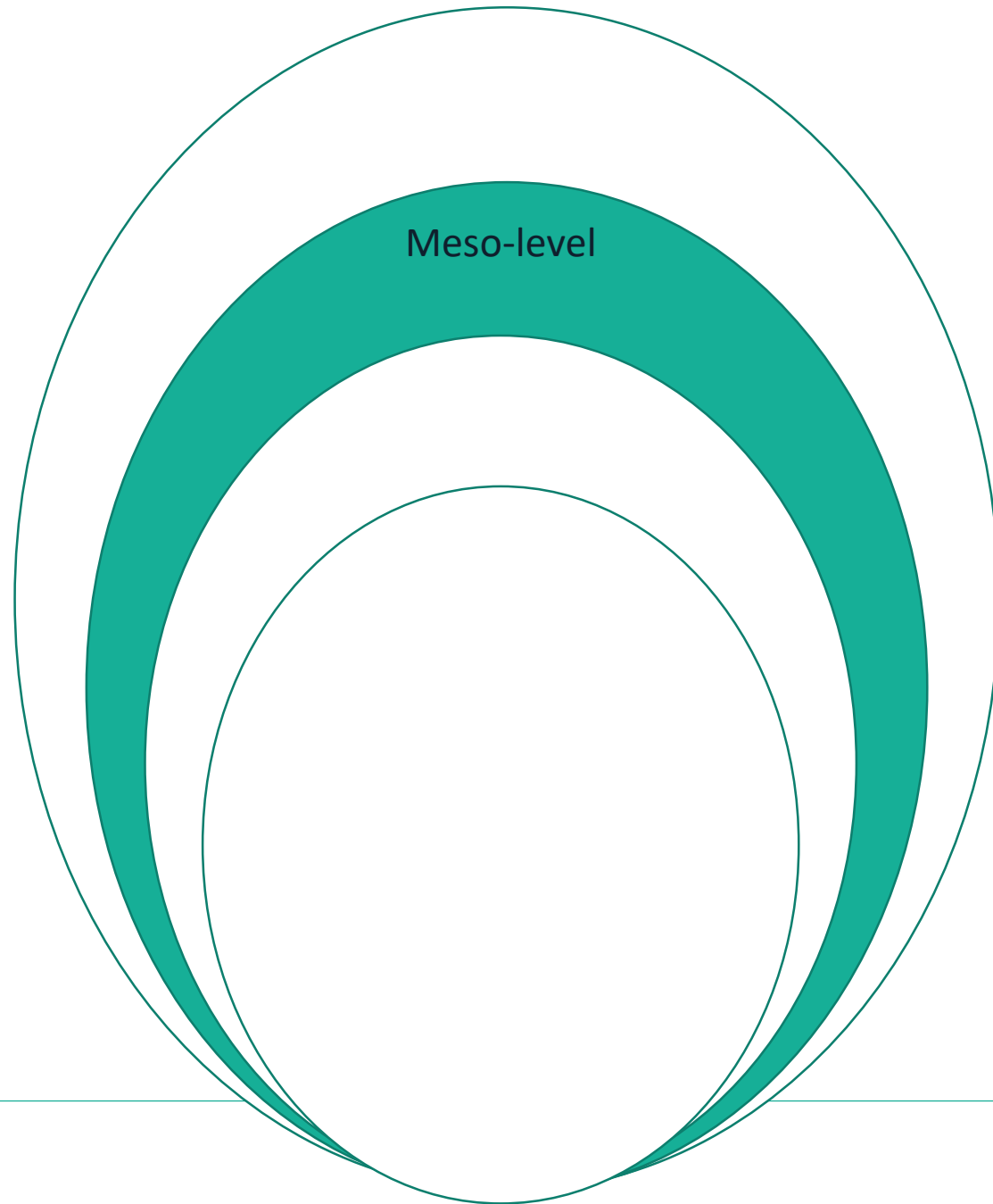


Hoe ga je te werk?

- o Ga rustig zitten op een stevige stoel (zie afbeelding 1)
- o Vouw je handen en vingers (zie afbeelding 2).
- o Breng je ellebogen naar elkaar toe. Je onderarmen botsten nu tegen elkaar.
- o Draai 5 keer met je polsen (zie afbeelding 3).
- o Draai nogmaals 5 keer, maar nu in de andere richting.
- o Hou je handen gevouwen en je onderarmen tegen elkaar.
- o Strek je vingers (zie afbeelding 4).
- o Vouw je handen opnieuw, maar geschrinkt ten op zichte van de vorige keer.
- o Draai 5 keer met je polsen. Verander hierna van richting, draai nogmaals 5 keer
- o Je bent klaar!

Herhaal deze oefening 4 keer per dag!





INTERNAL

Identification of care needs in individual care provider-patient encounters



Interdisciplinary patient case discussions: identify relevant care needs



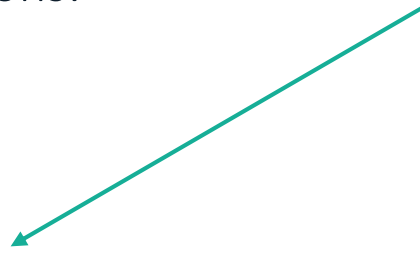
Prioritization and validation of care needs in the population using data and experiences of relevant stakeholders at regional and city level

EXTERNAL



Supportive city administration & council

- 'Social coordinator' in every community
 - Coordination of local interprofessional meetings care & welfare organisations
- Local thematic networks on local priorities: working groups



Signalisation to health board of city

Multiloog

Expert via lived-experience





Goal

- Co-creative process
- Improve accessibility of services for individuals with mental vulnerability & creating new 'welcoming/lowthreshold' meeting places



CHC: supportive context at mesolevel

- 40 years of presence in the community
- Interdisciplinary team, oriented towards needs in the community
- Funding system (needs based capitation financing) stimulates
 - Focus on health promotion
 - Interprofessional collaboration



Macro-level



Capitation vs fee-for-service financing in Belgium

Evidence on cost-effectiveness & quality of care

- Comparable societal cost, less costly secondary care
- Comparable or better quality of care
 - Influenza vaccination in elderly
 - Cancer screening in women (breast – cervix)
 - Drugs prescribing
 - Antibiotics – generics
 - Follow-up of diabetics

Care model in line with current reforms

- Development of primary care zones in Flanders
 - integrated community care for individuals and families, accountability for a population , integrating health and welfare
 - Flemish Minister for Welfare, Health and Family Jo Vandeurzen
 - Primary care conference (2017)
 - Work in progress



Concluding

One interprofessional team

to listen & see what happens in the community

And as such build resilience in the community & its members





Solidarity

Connectedness

Resilience of Communities

Building bridges, no walls

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