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Preventative Healthcare Mecklenburg-Western Pomerania

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Authors: Martina Richwien, martina.richwien@ifok.de, Agnes Pechmann, pechmann@dialogik-expert.de
Sponsors: Federal Ministry of Transport, Building and Urban Affairs of Germany
Ministry of Education, Sciences and Culture of Mecklenburg-Western Pomerania
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Organizer: Institut für Organisationskommunikation (IFOK) Berlin, Inno AG, Karlsruhe und Rostock, Henning Banthien, henning.banthien@ifok.de, Martina Richwien, martina.richwien@ifok.de
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Purpose

The German federal state of Mecklenburg-Western Pomerania plans to increase its competitive capabilities. Mecklenburg-Western Pomerania aligned its research activities in a case study using a regional foresight approach. Considering possible futures is the first step toward influencing today's decision. This is effective through the means of a regional foresight process where the actors are encouraged to build networks and alliances. Accordingly, this foresight served as a means for building competency in Mecklenburg-Western Pomerania related to healthcare.

Mecklenburg-Western Pomerania: a European Foresight Model Region?

Research and development take an ever-larger area within the development of the European Union to one of the most competitive and most dynamic market areas in the world. Strengthening research and development is also an important task for the state of Mecklenburg-Western Pomerania. With the state initiative "Research creates jobs - future for Mecklenburg-Western Pomerania", the state government has developed an instrument to bundle university research with enterprises, focusing on specific medical areas to ensure effective utilization of research results and international positioning. The integration of still single key personnel is needed next to a systematic, long-term approach to achieve the goals and to have a sustainable impact on the structures of research institutes, companies and administration. Regional foresight has been seen as a suitable instrument to tackle these formulated

challenges. The Ministry of Education, Sciences and Culture of Mecklenburg-Western Pomerania gave the main impulse to organise such a regional foresight. Parallel the Ministry was represented in a EU working group named UPGRADE. The Research Directorate-General of the EU initiated the working group in December 2003. The working group was concerned with the practical implementation of regional foresight processes. The Ministry of Education, Sciences and Culture could gain the Federal Ministry of Transport, Building and Urban Affairs of Germany as a partner for proceeding regional foresight pilot action.

Focus on Prevention and Health Promotion

Regional foresight is a tool that can be applied to nearly every area, in which changes are expected and aspired, especially if the area under discussion has a strategic importance for the region. The areas of preventive medicine and health promotion show multiple promising activities in the region. Next to the



state initiative “MV tut gut” (Mecklenburg-Vorpommern - Mecklenburg-Western Pomerania healthcare economy does good), the state offers international competitive research in the area of preventive medicine. Examples for this are the main research area “Community Medicine” at the University Greifswald or the prevention health research at the University Rostock. Furthermore, the health market is one of the new growth markets. This fact is undisputed in the relevant literature. Beside the increasing therapeutic potential, an important aspect of the health market is the demand for products for holistic health and health promotion. This development was also one of the outcomes of the German national foresight process “FUTUR”. See Foresight Brief No. 1

<http://www.efmn.info/kb/efmn-brief01.pdf>

The Participatory Approach

Regional foresight can be understood as an enterprise, which integrates elements of future research and future management, strategic planning, networking and participation. It is generally accepted that there is no standard process for regional foresight. Conditions in each region, strategic goals and institutional framework vary too widely. Central elements of foresight processes are described below:

- Issue identification and focusing on specific aspects
- Selection of participants to support network building
- Development of a vision
- Implementation

The regional foresight in Mecklenburg-Western Pomerania started with a pre-determined set of issues to be discussed. Figure 1 shows the working steps of the process.

Participants: The participants for the regional foresight were selected on the basis of a co-nomination process. The readiness and ability for open and constructive co-operation with the partners and the technical authority of the participants were the central criteria in the selection process. All representatives in the sense of the Triple Helix were integrated.

Variables, Vision Building and Key Issues: Global and specific trends related to the sector health and prevention were adapted to the conditions of Mecklenburg-Western Pomerania. Variables were formulated referring both to social and technological trends. They served as the starting point for outlining first pictures of desirable futures. The variables were discussed and contrasted with their attraction and their existing regional

competencies. The findings of the discussion were the development of strategic key issues.

Implementation and Focus Groups: To delve into the key strategic areas, focus groups were formed. These working groups took up the most attractive key issues and developed them further. In interdisciplinary discussions, the participants compiled strategies and concrete recommendations for action to convert these visions into real life.

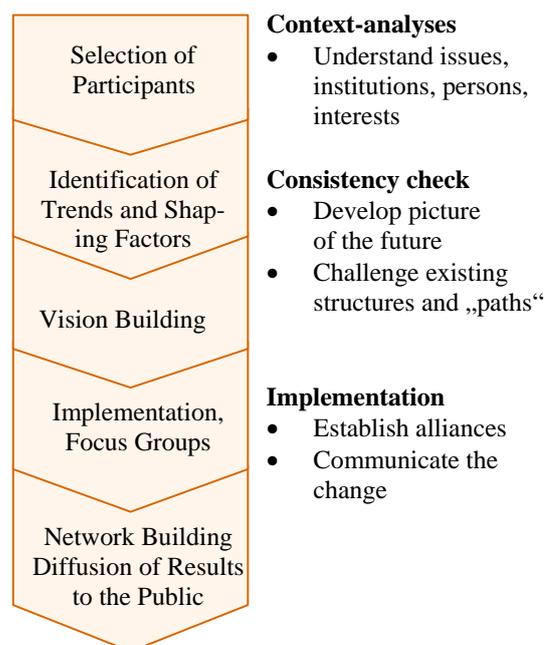


Figure 1: Process scheme

Network Building and Communication: The work of the focus groups consistently required inclusion of the overall context and a discourse with decision makers not included in the direct process. Two special committees of the foresight initiative were responsible for this integration activity.

The first committee, the steering committee, played an important role for the supra-regional anchorage and communication. The committee consisted of recognized personalities with high integration traits. The second committee, the strategy committee, formed the content and strategic roof of the focus groups. Further communication instruments like public meetings for back feeding the results to policy makers or publishing brochures for the diffusion of results were especially designed for the project.

Key Topics – Challenges and Opportunities

Relevant trends in the field of medical prevention with importance for and impact on Mecklenburg-Western Pomerania like the stronger role of prevention in medical care, the development of new services and new products (self payment), the

further development of patient rights and technological drivers were discussed. The following scheme gives an overview of the trends and variables discussed.

Figure 2: Examples for discussed shaping factors

Prevention in the field of medical care	Obligatory prevention programs, new organisational structures, new evaluation methods of medical treatment, virtual partnership etc.
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Consumer behaviour and new services	Holistic services, additional medical needs (fitness, nutrition), patient as customer (marketing and certification), etc.
Technological drivers	Regeneration and cell therapy, new systems for diagnosis, E-health, etc.

Identification of important key issues for Mecklenburg-Western Pomerania in health prevention was based on a discussion of the relevant trends and key factors and the already existing regional strengths. The following seven key issues were identified:

- Regenerative medicine
- Community medicine
- Integrative prevention
- New integrated care structures
- Health education
- Drug prevention
- Screening activities

Three out of the seven key topics were then addressed further, compiling a more detailed picture of the future and specifying recommendation for action.

Regenerative Medicine

Regenerative medicine describes the research committed to the reestablishment of malfunctioning cells, tissue and organs both by biological substitution, e.g. by in vitro cultivated tissue, and by stimulating endogenous regeneration and repair processes. Molecular-biological basic research, material science, biotechnology, chemistry and applied medicine need to be combined for this research. A substantial goal of regenerative medicine is to eliminate and/or to avoid various problems of the transplantation medicine and to open new perspectives with the regeneration of tissue, so far not accessible for transplantation. That includes stem cell transplantation. The goal of the focus group “Regenerative Medicine” was the creation of a scientific and clinical network, which would serve present needs and would support as well the building of a social network. Partners of this process were the research institutes with its scientists, companies based in Mecklenburg-Western Pomerania, local health organizations, hospitals, technology transfer organisations, venture capitalists, start-up companies, actors from education and information. Workshops and other meetings, even on international level, achieved the goal by establishing new partnerships between the actors and policy involved. In addition, epidemiological studies were included, whereby a connection to the Community Medicine was made.

The Social Dimension and other Success Factors

The regional foresight process of this study has been designed as a pilot action and as a case study to demonstrate and to ver-

Community Medicine

The focus group “Community Medicine” worked on a flexible access to healthcare and prevention in the rural area. Healthcare access structures, considering the increase of the age-conditioned diseases, must be adapted. This concerns a healthcare access centre, which is connected via tele-medicine to the university clinic Greifswald. This means health-related activities: Services and systems are performed remotely by means of information and communication technology. It serves health prevention, disease control, healthcare services, and is beneficial for training, management and research in the health sector. The training and the employment of a “community nurse” is a central point of the new health access concept putting major emphasis on preventive actions in the domestic range. She supports the physicians in the region in their obligation to ensure health access. Other tasks are to determine the risk potential in households, to examine reciprocal effects of medicines and to accompany the support by tele-medicine. Another topic of “Community Medicine” addresses health prevention on the basis of lifecycle models. In different phases of the lifecycle, health prevention is to be carried out in the direct living environment of people. For each phase of the lifecycle it has to be clarified what form of prevention with which activities are reasonable and cost-effective.

Integrative Prevention

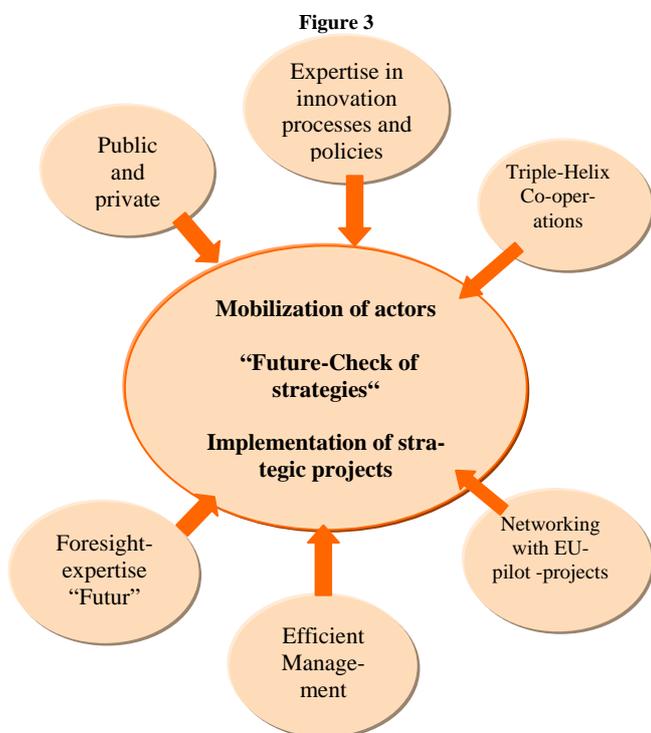
The focus group “Integrative Prevention” had the goal to initiate a Center for Integrative Prevention (CIP). Under a holistic approach, not only clinical medicine, but also non-medical fields were included. International and inter-disciplinary networking took place. Renowned research institutes worked together with partners like insurance companies, hotels, fitness centres or rehabilitation hospitals. In the CIP, patients, employees, tourists and others interested are to be examined regarding their physical fitness. Aspects of grouping according to certain criteria are to be analysed and aspects of occupational medicine would be addressed. This work is to be accompanied by several research projects.

Effective Communication with the Public

Foresight is often used as a means for communication, since the process enables to loop back to the discussion in politics as well as to the one in and with the public. In the case of this foresight process, events with lively public response were held with discussions about political, economic and institutional parameters of a future healthcare economy in Mecklenburg-Western Pomerania.

ify the foresight process as an effective tool of innovation policy. The scope of this foresight process was determined prior to the start. The duration was 15 months and the spectrum of the topic was restricted to health prevention as one of the core competencies of Mecklenburg-Western Pomerania. The restriction on this topic has proven sensible for at least two rea-

sons. First the outcome of the pilot process could be related to the outcomes of the national foresight process “FUTUR” and second it was possible to bundle resources.



Foresight is a tool to support long-term planning. The “*Blueprints for foresight actions in the Regions UPGRADE*” recommend three years and minimum runtime for regional foresight processes considering that economic perspectives are implemented over the long run. It also needs time to strengthen the social capital by increasing the capability to form networks and by co-operation capabilities. Research politics and economic potential are evaluated under mid- and

long-term perspectives. With this in mind, the presented results need to be reviewed.

Success Factors Identified

In the foresight process several success factors were identified (see. Fig. 2). The participation of the relevant actors of the innovation system of the Triple Helix was a main success factor. The reflection of possible future activities can only be as good as the expertise provided. Hence it was necessary to search for expertise on a broad base with no restriction to the region and, then to integrate this result with the competency in the region for optimum stipulation. The support from political decision makers in the state and catching up with international know how and developments were important success factors. Important, as well, was the experience introduced from other foresight processes, and the efficient management of the process. Tasks such as time and resources planning of the social dimension next to the project management were vital. During the whole process enabling a culture of learning and feeding into the learning process as well as supporting a culture of change had to be ensured.

Recommendations

So far, the foresight process was successful and the results can be valued as positive. The motivation and the participation of key actors were extraordinary. In addition, the successful implementation of first actions like the community nurse and the concept of integrated health access were vital. Since the guiding vision was described only in main streaks, it is desirable to develop the vision to a full-fledged version to have its full potential unfold. Given the limited time frame, the results of the pilot action can be viewed as very successful. Therefore the recommendation can be given to further advance the regional foresight activities in Mecklenburg-Western Pomerania and broaden the thematic spectrum.

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About the EFMN: Policy Professionals dealing with RTD, Innovation and Economic Development increasingly recognize a need to base decisions on broadly based participative processes of deliberation and consultation with stakeholders. One of the most important tools they apply is FORESIGHT. The EFMN or European Foresight Monitoring Network supports policy professionals by monitoring and analyzing Foresight activities in the European Union, its neighbours and the world. The EFMN helps those involved in policy development to stay up to date on current practice in Foresight. It helps them to tap into a network of know-how and experience on issues related to the day to day design, management and execution of Foresight and Foresight related processes.