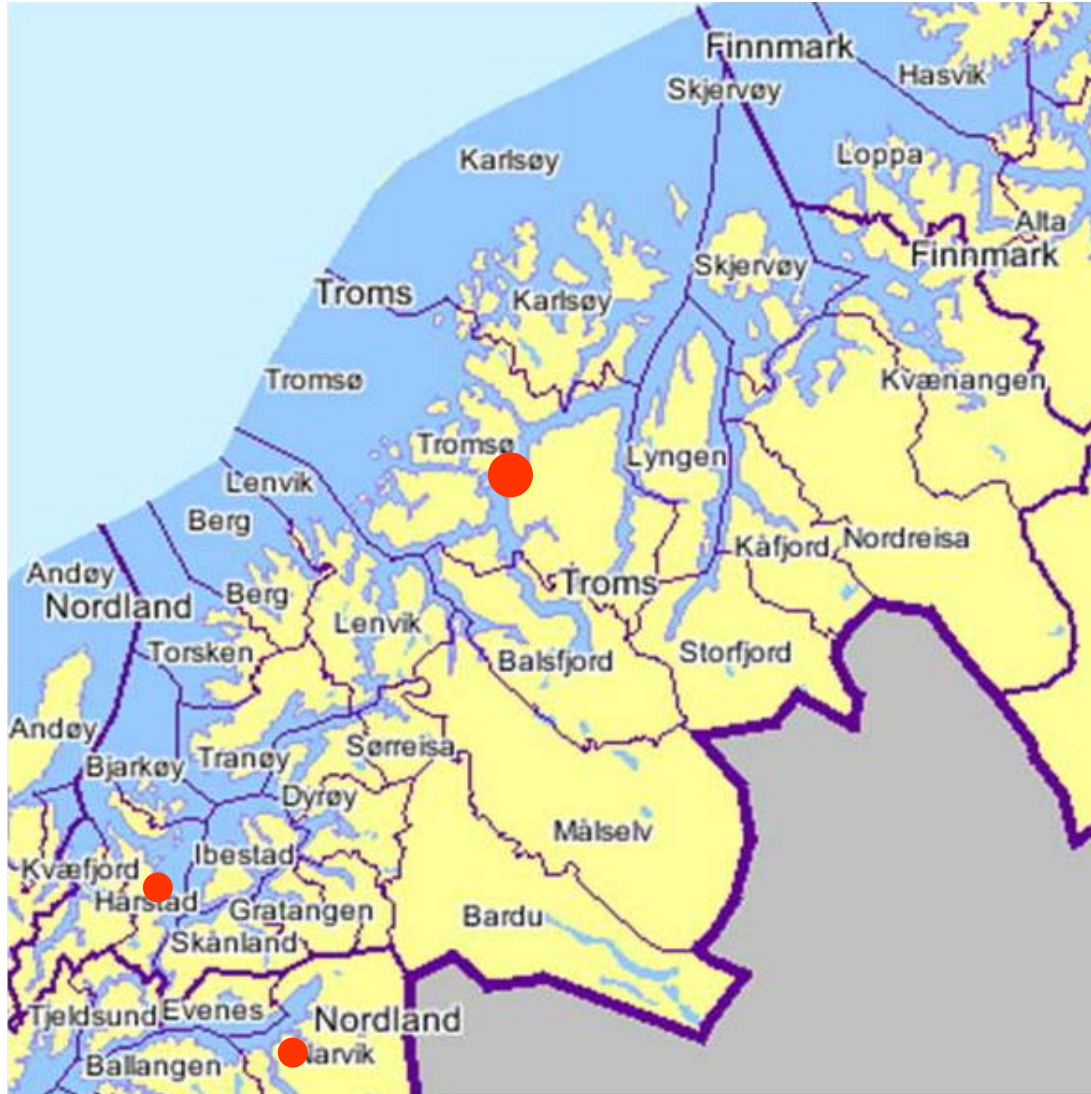


Acute Care at Rural General Hospitals: How the we meet the challenges

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Remote thinking?

- Rural; synonyms
 - Country, countryside...
- Remote; synonyms
 - Distant, isolated, inaccessible
- Local; synonyms
 - Restricted, narrow, limited





MABIT

MABIT

Et næringsrettet FoU-program innen marin bioteknologi i Nord-Norge

MABIT skal være en aktiv pådriver og koordinator for å styrke FoU og industrielle aktiviteter innenfor marin bioteknologi i Nord-Norge.

MABIT-programmet skal bidra til økt verdiskapning i fiskeri- og havbruks- næring og bioteknisk industri.

MABIT-programmet skal:

- finansiere næringsrelevante FoU-prosjekter som kan føre til kommersiell utnyttelse



Foto: Erling Svendsen





Social, economic and institutional contributions to communities

- Interviews with key residents in 8 communities in Scotland and Australia
- Impact far beyond provision of health care
 - Employment
 - Viability and vitality of communities
 - Attracting and retaining business and people

Aims

- High quality health care for the north by being a complete university hospital for patient treatment, research and teaching
 - Patient focused
 - International perspective
 - Leadership in regional professional networks
 - High level of service to other hospitals, primary care and patients

Cooperation

- Integrate the rural general hospitals

Development of the University Hospital of North Norway

Strategies

- New organisational and leadership structure
- Documentation of outcomes
(clinical quality registries)
- Clinical pathways
- Cooperation with the university

Two hospital classes??

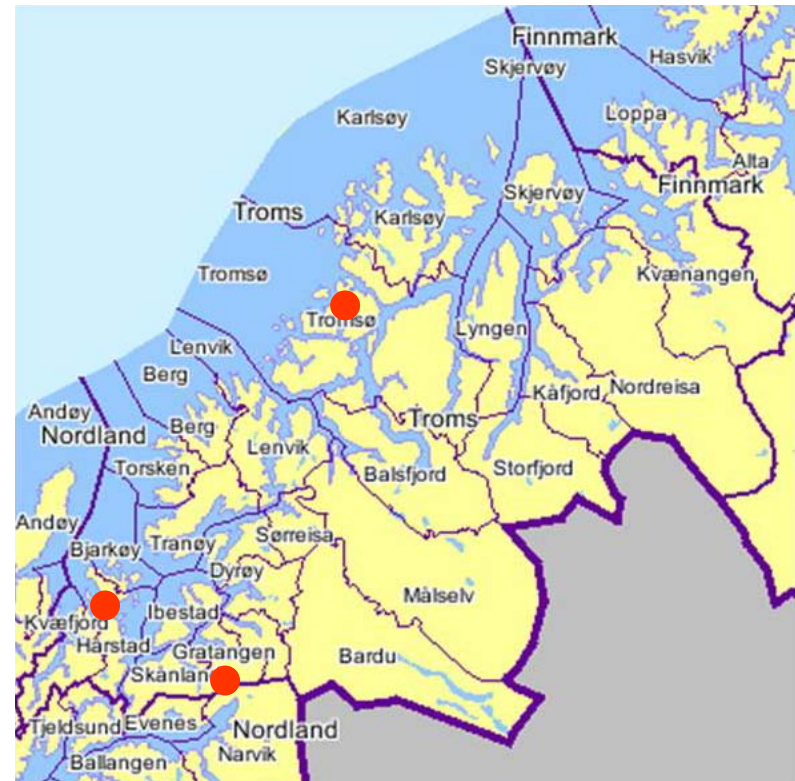
- Local Acute Hospitals
- Local Hospital with adjusted acute functions
- Not very useful, in our setting, because we want networking, not isolated categories

Rethinking development...

- Is not about taking services away (centralisation), but about changing the way we deliver the them
- It's not about three hospitals, but about one
- It's not about three cities, but about one catchment area

Challenges for the local services

- Staff recruitment
- Repute
 - Including quality
- Investments
- Communications (Narvik)

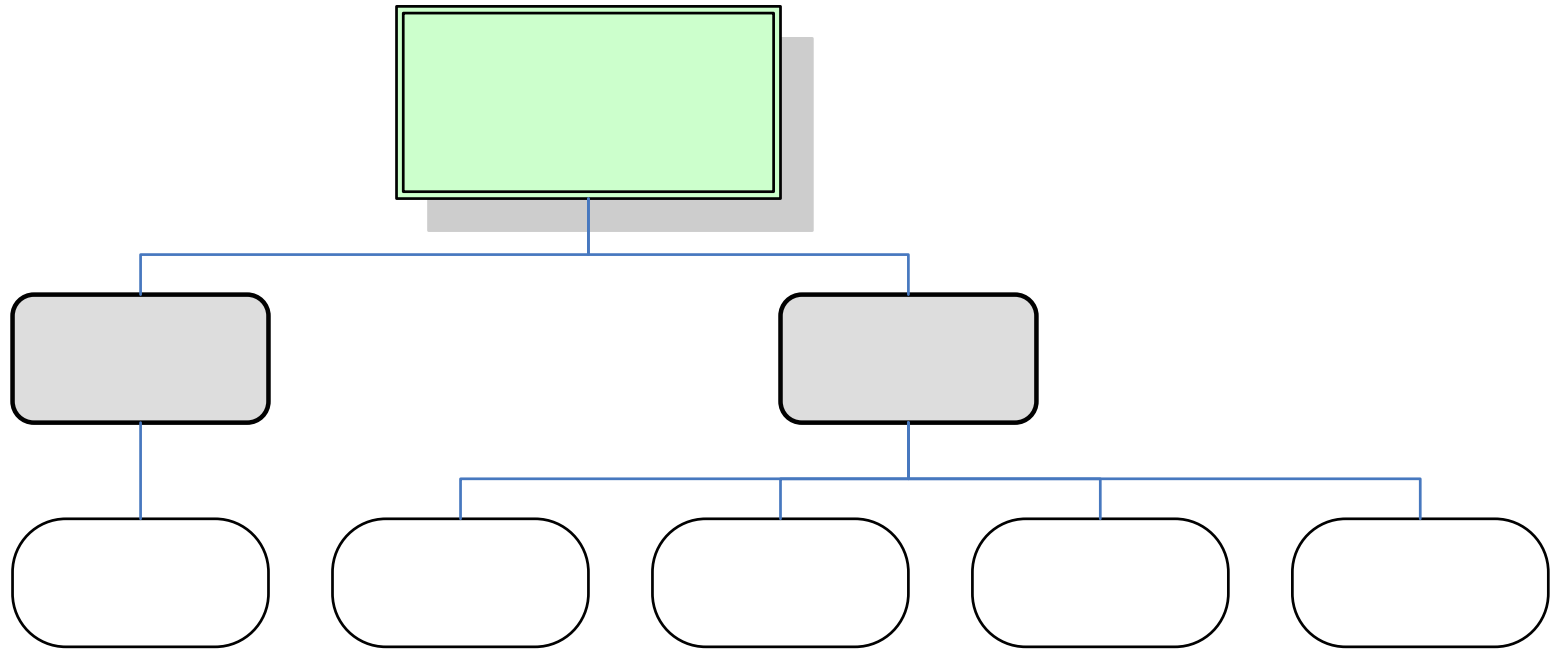


Surgeons

- 32 new specialists in general surgery in 2006
 - 14 trained in Norway
 - Lowest since 1972

Hospital	Now	In 5-10 yrs
Kirkenes	0	0
Hammerfest	4	1-2
Harstad	4-5	4-5
Narvik	2-3	1
Stokmarknes	2	0
Lofoten	1	1
Rana	5	4-5
Sandnessjøen	3	0
Mosjøen	2	1

Acute- and pre-hospital clinic



Through going professional leadership

- Interdisciplinary teams on all levels
 - Clinic
 - Department
 - Section
- Through going professional leadership on all levels
- Head of clinic responsible for
 - Staff recruitment and specialist training programs
 - Quality systems and clinical pathways
 - Work share and ambulant services between locations

Repute

- Leadership responsibility
 - Stop questioning the quality
 - Provide the quality
 - Engage in the necessary infrastructure, for example transport



Investments

- High quality diagnostic work is the key to the right clinical pathway, and equal quality
- Cannot be achieved without high quality diagnostic equipment
 - CT, ultrasound
 - MRI
 - Endoscopy
 - Telemedicine

New hospital in Narvik

- New building (not renovation)
- June board meeting:
 - Schedule for concept phase planning, adapted to the new concept
 - Decision on location

Conclusions

- The challenges are as they (always?!) have been
 - Services of equal quality
 - Staff recruitment
 - Work share between hospitals
- We rethink the problem
 - One hospital, one catchment and service area
 - Through going professional leadership