

# Features

## Interview with Lukas Engelberger

BY VIVIAN BEETLE



Lukas Engelberger;  
Photo: Brigitta Hänggi

Horizon recently had the opportunity to meet with Lukas Engelberger, Member of the Executive Council and Head of Public Health Department of the Canton Basel-Stadt, to discuss the health system and health planning in Basel-Stadt. Centrepoint is very grateful for the extraordinary time Engelberger provided and the interest he showed in our community.

Born and raised in Basel, Engelberger's interest in government and public service date from his high school days when he ultimately became President of the High School Student Union of Switzerland. He remained active in political activities while earning his law degree at the University of Basel and continuing his law studies in Fribourg, London and Bern.

Within the Christian Democrat Party (CVP), he served in leadership roles with the Young CVP Basel and at the national Young CVP. In 2004, he was first elected to a seat in the Parliament of Canton Basel-Stadt, a part-time position.

Upon joining the law department of Hoffmann-La Roche Ltd in 2005 for a nine-year employment, Engelberger was afforded international exposure, business experience and perspectives on an industry integral to the history and economy of Basel.

After a special election in 2014, Engelberger was voted in to serve out a vacant seat on the seven-member, full-time Executive Council (Regierungsrat) of the Canton Basel-Stadt, and assumed leadership of the Public

Health Department. His transition from business to government, bridging from private sector to elected office, is quite typical in Switzerland.

All seats in the Basel-Stadt government (Parliament and Executive Council) will face election in the autumn of 2016, and winners will take office in February 2017. Engelberger has recently indicated his intention to run for re-election in the fall.

The Public Health Department, one of the seven within the executive government, is constitutionally charged with the protection and promotion of the public health. The Department's present head count of nearly 500 employees will decrease to roughly 350 when the Public Dental Clinic becomes a separate public corporation in 2016. Currently, the overall budget is nearly CHF 550 m. Its very broad mandate covers a wide range of functions including:

- Hospitals and clinics
- Supervision of healthcare professionals (e.g., permits and standards)
- Epidemiology (including reportable diseases)
- Forensic medicine
- Nuclear, biologic and chemical risk
- Food safety
- Veterinary medicine

**Horizon:** How is responsibility assigned between federal and cantonal levels?

**Engelberger:** The Federal authorities are first and foremost responsible for the compulsory health and accident insurance as well as for the legislative and regulatory framework for other aspects of the health system. All other areas of healthcare rest in the jurisdiction of the Canton.

**Horizon:** What is the financing structure?

**Engelberger:** According to federal law for cost sharing, the Canton is the co-payer of at least 55% of inpatient care to all health institutions. As of 2016, Basel-Stadt will be paying 56%. The mandatory health insurance system plans are then responsible for the balance. For general services such as counselling, or social services there are public subsidies but not direct reimbursement. Health insurance plans address the costs of outpatient care.

**Horizon:** What distinguishes public versus private health institutions?

**Engelberger:** The public institutions include a set of "public corporations" (hospitals or clinics), which are owned but not operated by the Canton, while private institutions are owned and operated independently. The boards of the public institutions are appointed by Basel-Stadt.

Presently there are a total of 14 hospital/clinics in the Canton of which 4 are public. Both categories must adhere to the standards and principles of cantonal health policies and practices.

**Horizon:** What, if any, are the specialities of the institutions of the health system in Basel?

**Engelberger:** Regarding the four public hospitals:

- The University Hospital is the main hospital with a full range of services and clinics except specialised paediatric and geriatric care. It does have dedicated women's health and maternity units.
- Felix Platter Hospital, which is currently under re-construction, specialises in geriatric care.
- Specialising in paediatric care, the University Children's Hospital of Both Basels (UKBB) moved into its modern new building in Basel just 5 years ago.
- The University Psychiatric Clinic focuses on mental health, both inpatient and outpatient.

A few private examples that complement the public system are St. Clara Hospital, Bethesda Hospital, Adullam and Merian Iselin Clinic. The last one, for example, specialises in orthopaedic surgery by participating physicians, but with no operational clinic.

**Horizon:** Could you explain the arena of elderly and long-term care?

**Engelberger:** The current nursing home plan calls for maintaining the capacity to accommodate 22-23% of the 80+ year-old population in Basel-Stadt. The Canton provides the requisite counselling and maintains waiting lists for patients of nursing homes. The Canton itself does not own nor run nursing homes. This is the task of independent entities such as the Burgerspital, a municipal institution of Stadt Basel.

Historically, the Burgerspital, which was established 750 years ago, was

the early public hospital and hence the precursor of the University Hospital. Today it is the largest owner and operator of nursing homes in the Canton, which are augmented by a number of private religious-based or commercial organisations. Together all providers account for a total of 34 care facilities.

The financing structure for nursing home care has three components - insurance coverage, cantonal budget and individual payment, inclusive of social security support. In general the medical care is supported by insurance, individual cost-sharing up to 20% and then by the Canton. Housing and meals are payable by the individual, with cantonal assistance in cases of economic need.

At present, the overall nursing home system cares for close to 3000 patients (of which nearly 2200 are women). The annual cost to all payers for the entire system is CHF 300 m for which the Canton currently pays about one-third.

**Horizon:** What are the most effective health education or promotion initiatives?

**Engelberger:** The department has a broad range of health education and promotion programmes focused on children, youth and adults. These include: child nutrition, school-age dental health, physical activity promotion, weight control, sexually transmitted disease prevention, including HIV, and smoking, alcohol and drug abuse prevention or control.

Two distinct examples are the veterinary programme for children regarding safe behaviour (Do's and Don'ts) around dogs and the early detection Mammography Screening programme for women ages 50-70.

**Horizon:** What are the most challenging health promotion needs?

**Engelberger:** It is especially challenging to achieve successful health messaging. One example is the difficulty of effectively reaching adolescents with communications in order to dispel misconceptions around HIV, hepatitis and other health risks.

**Horizon:** What are the current policies regarding immunisation in Basel-Stadt, for example, children, healthcare workers or the elderly?

**Engelberger:** Certain immunisations for children are systematically provided through the schools. Participation is assumed unless a parent actively opts out. Facilities for the elderly also offer immunisations to their clients. There is no consensus regarding mandated requirements for healthcare workers but, institutions do offer influenza immunisations to their employees.

**Horizon:** How is ambulance and emergency response provided in Basel-Stadt?

**Engelberger:** This service actually comes under the jurisdiction of the Justice and Safety Department, whereby calls to 144 are coordinated through the „Sanität“ centre.

**Horizon:** How is it decided where an ambulance takes a patient for medical care?

**Engelberger:** To the extent capable, each patient can direct the ambulance as to where they are taken. Otherwise, the default is the University Hospital.

**Horizon:** How is follow-up care assigned; to which institutions, if necessary?

**Engelberger:** This is a medical consideration depending on a number of factors such as institutional capacity, professional specialisation, and patient needs.

**Horizon:** Going forward, what are major challenges for public health in Basel?

**Engelberger:** In general, there are two critical health policy and planning concerns for Basel at this point.

The first entails coordinated health planning within the region. A regional approach is underway to create a health

planning zone for Northwest Switzerland including Basel-Stadt, Basel-Landschaft and portions of Aargau and Solothurn. An initial impact of such planning would likely be the creation of a Group of Public Hospitals for the region.

The second need is for greater integration of treatment pathways. This is especially aimed to prepare for the anticipated shortage 10 to 20 years from now of general practitioners (“house doctors”), who currently serve to manage the interface of inpatient and outpatient care. One example would be that Felix Platter Hospital will integrate a General Practitioner partner.

Overall the integration of treatment could result in shorter hospital stays and less treatment in hospitals. Further, as of 2017, a new law will allow Cantons to create systems for online administration of health data.

**Horizon:** In closing, do you have any particular thoughts for newcomers to Basel-Stadt as they seek to understand and enter the health care system?

**Engelberger:** There are two particular facets I would underscore. One is that residents should confidently rely on the mandatory health insurance scheme. Second is the understanding that hospital and nursing homes have an enduring critical need for a range of employees. In Basel close to 40% of these are non-Swiss and up to half are border commuters. Maintaining staffing will remain an important challenge.

Finally, medical care, in Basel and Switzerland overall, is very accessible and reliable, for a price - through taxes and health insurance. If a person is unable to pay, however, the Canton may offer assistance or a subsidy.



*In May 2015, the Grosse Rat (Parliament) of Basel-Stadt approved plans for the replacement and construction of Klinikum 2 building, which was built in 1974 as part of the University Hospital on Petersgraben. (Architect's rendering).*