



Some Hypotheses about the Benefit of the Meikirch

Until recently the term health has remained fuzzy. The definition of health of WHO is not even accepted by all UN agencies. Therefore, everybody can think about health what she or he wants and what presently is most useful. Consequently, also the term healthcare system is foggy. Our hypothesis postulates that this is the principle reason for current failures of health care systems. With the help of the MM the concept of health becomes solid and useful in practice. Our hypothesis postulates that introduction of the MM will improve health care systems and reduce their costs. Here are few examples.

Examples in Public Health

- The MM should become part of the mission statement of every organization. Thereby the leadership can develop a health-supporting attitude toward all employees.
- The MM is the basis of a general culture of health. This concerns principally the non-communicable diseases. We have learned that up to date knowledge about health cannot prevent humans from getting at the mercy of various health problems. A most visible example is obesity. Today the consequences of healthy food and healthy exercises are well known, but they are not lived universally. A similar situation exists regarding venereal diseases. Health competency and a health culture, i.e. more than knowledge, are needed, to reduce the prevalence of heart and vascular diseases and some malignancies. This problem is even more pressing for immigrants.
- The MM must be taught already in schools, and repeatedly presented to people throughout the whole life. Within this context the concept of health as physical capabilities (in the MM the biologically given potential) is to be complemented by psychosocial capabilities (in the MM the personally acquired potential). Voluntary associations may contribute much to a culture of health.

Healthcare

- All patients need to know the MM and to understand when a physician speaks to them about it. In chronic diseases competent self-leadership by the patients is of paramount importance.
- The elements of the MM are part of every first consultation. Even later it must be considered repeatedly, e.g. as part of a complex adaptive system. Currently time pressure often leads to the neglect of elements of the MM. To compensate for resulting insecurity more diagnostic tests may lead to increased costs.
- The MM is particularly important postoperatively, because it supports cooperation of patients with the medical staff. This is particularly helpful in rehabilitation.
- Particularly in all health care organizations, the MM is to be part of the mission statement and the institutions must be reorganized correspondingly.
- All decisions by physicians are soft judgements that may be influenced by nudging and incentives. For this reason, ambulatory and hospital care are organized best as nonprofit organizations. Physicians may receive fixed adequate salaries devoid of additional compensations for special services. Outstanding best examples are the Mayo Clinic and the Cleveland Clinic. Within the United States both are considered to be outstanding for patient care. In both chief executives are physicians, ethical standards are emphasized, research and teaching are important.
- Nursing has long been cared according to standards resulting from the MM. Currently this often is impeded by undue time pressure. As a result, nurses may abandon their profession leading to care deficits. Only the most attractive hospitals may retain adequate numbers of nurses.
- To reduce health care costs Michael Porter's bundled payment requires that care induced health gains be measured. This may not be feasible for all patient problems. In contrast, Brent James believes that capitation is the best method to reduce waist and thereby to diminish health care costs.