



# Latest developments in healthcare

6 December 2021

via WebEx

moderator *Dr. Draško Veselinovič*

*President of the Management Board, SBRA, Brussels*

On 6 December 2021, a scientific meeting was coorganised by the **Slovenian Business & Research Association (SBRA)**, **New University, University of Ljubljana** and the **University of Maribor** regarding the **latest developments in healthcare**. The presentations and roundtable discussion covered current healthcare policies, as well as future trends, and recent game-changing discoveries. In this context, the meeting also touched upon a **fairly important topic of harm reduction**.

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## KEYNOTES:

**16.00 – 16.15** *Prof. Dr. Andrzej Fal, President of the Polish Society of Public Health, Head of the Department of Allergology, Lung Diseases and Internal Medicine at the Central Clinical Hospital and Professor at the Medical University of Wrocław and Cardinal Stefan Wyszyński University in Warsaw*

**16.15 – 16.30** *Dr. Tina Bregant, spec. pediatrics, spec. FRM, former Secretary of State at the Department of Health*

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## ROUND TABLE: Placing health policy in scientific, ethical and health and social harm reduction frameworks

**16.30 – 18.00** Participating

- *Prof. Dr. Matej Avbelj, Rector of New University*
- *Prof. Dr. Jernej Letnar Čerňič, Dean of the European Faculty of Law*
- *Assoc. Prof. Dr. Blaž Ivanc, Deputy Chairman of the Quality Commission, Faculty of Medicine, University of Ljubljana*
- *prof. ddr. Timotej Jagrič, Faculty of Economics and Business, University of Maribor*

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The **conclusions** from the event are as follows:

1. The discussion showed that people, potential patients, are not “central” in creating health policies both in the developed world; and even more so in Slovenia.
2. Policies in general - and in this context also health policy - must take significantly greater account of the results of scientific research activities. Public health policies must also take into account the plurality of stakeholders and the fact that people have high expectations of the health care system.
3. Greater cooperation between healthcare providers, regulators and many stakeholders in healthcare is needed for better progress and development of the healthcare system. Greater digitalisation and innovation are essential for greater sustainability and efficiency of health systems.
4. For research in general – and in this context also for health care – it is essential to allocate more funds from the state budget in Slovenia. However, especially because of the future demographic trends, GDP alone in the long run as a key source for public health is limited and therefore the financing of health will need to be restructured - to include everyone, including insurance companies operating in this field. One of the solutions is to actively involve employers in the system through collective insurance. Tax incentives could thus encourage their proactivity in the field of prevention, such as caring for the health of their employees.
5. 90% of premature deaths in the EU are the result of poor systemic care in the field of prevention. It has been noted, that harm reduction measures are the right direction. This is a principle that promotes alternative, scientifically proven approaches or products that replace harmful lifestyles with less harmful ones. The principle of harm reduction is a motivation for a healthier lifestyle and has already been proven to work in the field of non-communicable chronic diseases. Last but not least, vaccination against COVID-19 is proof of this. It is important to take into account of scientific facts, access to the right information and also the right of people to be informed.
6. The COVID pandemic has led to a real test of the sustainability of national health systems around the world, and it can be said that there are few countries that can prove themselves by means of harm reduction and vaccination measures. Unfortunately, Slovenia is not among them. With the COVID crisis, the "life expectancy" indicator began to fall throughout Europe; as well as in Slovenia.
7. The Slovenian healthcare system needs a thorough reform across the board, but due to the limited time, a lively debate on this topic could not provide thorough answers. In any case, in addition to the necessity of some changes, it also served with some objective dilemmas.
8. The European Union spends a lot of money on healthcare in general; this is also one of the priorities in the Slovenian smart specialisation strategy, which consequently means, in addition to Brussels, domestic tenders for grants for the introduction of various innovations and advances in healthcare. For further information regarding tenders and grants, contact the [Slovenian Business and Research Association \(SBRA\)](#) in Brussels.
9. The EU-13 lags behind the most developed parts of the EU in virtually all indicators of the development of health systems.