Impact of Climate Change on Healthcare System and Public Health

In the UN Climate Change Conference held in Copenhagen in December, 2009, governments around the world have reached preliminary consensus to address critical issues such as mitigating the greenhouse effect, environmental protection, clean energy and sustainable development. In addition, a statement was made appealing to national medical associations and physicians to join hands with governments, nongovernmental organizations and communities through health education to the public and participation in disaster response systems. Commitment from medical professionals has profound contribution to the society, including a country’s capacity for disaster preparedness.

On 23 January, 2010, the TMA, in collaboration with National Taiwan University Hospital (NTUH) and NTUH Yunlin branch, organized the “Forum on Global Warming and Health,” the first formal occasion in Taiwan that highlighted global warming and medicine. We invited leading medical professionals, government officials and experts and participants to analyze the causation, impact and solutions of the crisis from the perspectives of medicine and public health, respectively. Recommendations from policy, medicine, education to the broader environmental awareness were made at the forum. The conference also echoed the appeal of the Intergovernmental Panel on Climate Change to adopt a vegetarian diet to help brake global warming. Effective ways to save energy and reduce greenhouse gas emission were also elaborated to ensure sustainable health for both human species and the earth.

Medical Malpractice Disputes and Physician-Patient Relationship

Physicians and patients have long maintained amiable relationship of mutual trust. However, there is a growing trend of medical malpractice disputes in the recent decade. In case of a medical malpractice lawsuit, both parties are subject to considerable energy, time and cost input. It also casts a heavy load for the justice system in dealing with such cases. Physicians under the pressure of litigation are bound to collect and present evidence in order to self-defense, which distracts them from carrying out routine responsibilities and furthermore, compels them to be conservative with treatment, retreating to so-called defensive medicine. This development produces no benefits to the patients on one hand, and increases the cost of medical care on the other. Many outstanding physicians who wish to avoid civil compensation as well as criminal charges accompanied by medical disputes tend to move themselves to fields involving lesser risks.

Given that medical practice inevitably faces uncertainty and high risks, and in order to prevent defensive medicine and tension between physicians and patients, the TMA urged the government to promulgate or amend legislation concerning disputes and criminal responsibilities. In December, 2009, a workshop, attended by law experts and health professionals with an aim to articulate legal responsibilities in medical malpractice disputes, reached the following conclusion: healthcare institutes and personnel who cause damages to patients due to intention or negligence while performing duties are liable for damage compensation. Healthcare personnel who cause patients’ deaths or injuries due to intention or gross negligence while performing duties are liable for criminal responsibilities.
Passage of such legislation is expected to effectively resolve medical disputes and enhance harmony between physicians and patients.

**Strengthened Community Based Healthcare System for an Ageing Population**

To provide continuous holistic care and achieve the goal of “ageing in place,” community clinics and primary care institutes in Taiwan would like to assist the government in the making of a user-friendly healthcare system for senior citizens by utilizing health resources and strengthening healthcare infrastructure in the community in order for the elderly to age in place.

To this end, the TMA proposes the following 6 strategies.
- Introduction of telemedicine,
- Improvement of rural healthcare,
- Implementation of referral system,
- Adjustment of national health insurance payment,
- Establishment of a community centered mid-term healthcare plan, and
- Establishment of DRG-based payment scheme by taking into account patient’s age, disability and disease severity.

We believe this plan will help strengthen community based healthcare system for an ageing population.

**Quality of Healthcare in Rural and Off-shore Areas**

To enhance emergency and critical care, improve quality of service and promote people’s welfare in rural and off-shore areas, more attention should be paid to problems facing these areas, namely the communication and education divide between rural and urban areas. It is necessary to implement short-term programs that address the situation. To meet the health needs of people living in rural and off-shore areas, especially those in need of emergency and critical care, mid- and long-term programs should also be in place so that problems with healthcare quality in hardship areas could be lessened. Strengthened capability of specialized, emergency and critical care relies on resource input from the public sector able to build up early child care with professional support for rural children suffering from development delay.

**Seminars on Safety and Quality of Healthcare**

Patient safety issues have received attention from around the world in recent years. Considering that an increasing incidence of medical disputes raises legal and ethical debates, TMA looks into the matter from the perspectives of system, regulation and quality before offering recommendations.

Since 2008, the TMA and partners such as Formosan Medical Association, NTUH, Taiwan Joint Commission on Hospital Accreditation and Taiwan Association of Medical Education jointly organized over 20 nationwide interdisciplinary seminars on safety and quality of healthcare. Experts and scholars were invited to analyze and comment on case studies from different view points including evidence-based medicine, ethics and law. Outside the physical venue in NTUH, health professionals from around the country also enjoyed access to simultaneous participation in all sessions through video conference technology. About 40,000 people joined the forum, making it an event of highest number of participants in a single continuous educational program.

All sessions were videotaped and made available online to provide another option to receive continuous medical education. The multiple channels of participation benefited more than 100,000 people in total, enabling heavily-loaded physicians to quickly update their professional knowledge and become aware of new regulations, as well as exchanging opinions with peers. The goal of barrier-free learning has been achieved.

This forum also successfully established a platform for communication among the medical community, Department of Health and Bureau of National Health Insurance. Case analyses presented in the forum helped health authorities identify problems with regards to the system, laws and regulations and auditing, providing a useful reference for further policy making.

**“Cherish Your Life” Concert**

Suicide rate is on the rise. Suicide has been one of the 10 leading causes of death for 10 consecutive years. To make the society aware of the importance of this issue, the TMA, along with Taiwan Bar Association, Taiwan CPA Association and National Architect Association, initiated a suicide awareness campaign titled “Cherish Your Life.” This campaign raised the public awareness of the issue of suicide and provided resources for people to seek help.
prevention campaign by organizing four “Cherish Your Life” concerts in northern, central, southern and eastern Taiwan, respectively. The concerts conveyed heart-warming and encouraging messages with a humanitarian spirit and concern for the vulnerable population. They called for people to value life and hope for the best. They also reminded the society to take suicide prevention seriously. In the concerts, health messages were transformed into powerful and pleasant sound of music, which purified the heart and soul of participants and helped them move toward a life full of hope and worth living.

Publications

Taiwan Medical Journal is a monthly publication. Every month, more than 40,000 copies are delivered to physicians, healthcare institutes of all levels and professional societies around Taiwan, as well as medical associations in other countries. It is Taiwan’s most representative medical journal. Soon after I became president of TMA, TMJ has undergone changes in terms of artistic layout and content. Some of the articles, especially regarding key issues, were solicited from specialists, aiming to present truth, expert opinions, solutions, and to help readers understand the current situation and burning issues. Through this communication tool, there will be less misunderstanding, stronger coherence, better environment to practice medicine, and eventually better care for the people.

In 2010, the TMA published 5-volume Taiwan Medical Series, covering Transparency, Medical Ethics in a Globalized World, Patient Safety-Case Studies, Medical Law—Understanding National Health Insurance, and Arts and Humanities for Physicians. The Taiwan Medical Series compiled excerpts from Taiwan Medical Journals to serve readers by categorized articles.

Active Participation in International Affairs

Since 2007, delegates of TMA attended the course “Caring Physician of the World” organized by the World Medical Association (WMA). We also took part in WMA’s other activities such as assemblies, conferences, declaration making, to name a few. In 2009, with Taiwan finally becoming an observer in the World Health Assembly, we are able to contribute in health in Asia Pacific as well as the world. Some of our activities last year include:

Conclusions made in the 26th CMAAO Congress suggested progress reports on 3 key issues brought up by the WMA Assembly this year, which are task shifting, prescription writing, and tobacco control. In particular, the Congress designated tobacco control as a routine agenda for CMAAO and decided that tobacco-related resolutions, progress and reports will be delivered at the WMA Assembly. In July this year, the TMA prepared a draft statement “Strengthening of Primary Care” which is to be presented later in this meeting and receive comments from member colleagues.

The TMA was invited by the Medical Association of Thailand to host the third-day session of the first International Summit on Tobacco Control in Asia and Oceania Region with participation from twelve member states. The Sampran Declaration on Tobacco Control in Asia and Oceania Region was made at the conference and endorsed by participating members. The CMAAO Congress will review the declaration to solicit its position in terms of tobacco control.

Furthermore, the 60th WMA Annual Meeting in New Delhi, India announced the Declaration of Delhi on Health and Climate Change, urging governments of the world to pay attention to the impact of climate change on global health. The declaration shows the commitment of the health professionals to combat global warming and prepare ourselves to respond to global health crisis. The TMA plans to organize seminars in Taiwan to address this issue.

Welcome to Taiwan

After a decade, the TMA has the honor again to host the 27th CMAAO Congress and 47th Council Meeting in 2011. We are fully committed to making this event a success. Due to rising suicidal deaths all over the world and to respond to World Health Organization’s endeavor to improve mental health for mankind, a tentative theme has been proposed as “From Suicide Prevention to Health Promotion: The Role of Physicians.” Through this grand gathering, medical organizations in the region will have opportunities to exchange and cooperate. I cordially invite all colleagues to join us in Formosa, and be my guest.
The UN Climate Change Conference held in Copenhagen in December 2009

The Statement of the United Nations Framework Convention on Climate Change (UNFCCC)

To adopt a vegetarian diet to help brake global warming

Forum on Global Warming and Health; in Taiwan

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2. Medical Malpractice Disputes and Physician–Patient Relationship

In Case of a medical malpractice lawsuit, both parties are subject to considerable energy, time and cost input.

Influences
- In order to self-defense, physician distracts their routine responsibilities.
- To move the field involving lesser risks.
- The patients can not get the perfect care.

Solution
- Taiwan Medical Association urged the government to promulgate or amend legislation concerning disputes and criminal responsibilities.

TMA reached the conclusion:
Physician–Patient Relationship

Healthcare institutes and personnel who cause damages to patients due to intention or negligence while performing duties are liable for damage compensation. Healthcare personnel who cause patients' deaths or injuries due to intention or gross negligence while performing duties are liable for criminal responsibilities.

3. Strengthened Community Based Healthcare System for An Ageing Population

Target:
To provide continuous holistic care and achieve the goal of 'ageing in place'

The TMA proposes 6 strategies:
- Telemedicine
- Improvement of rural healthcare
- Implementation of referral system
- Adjustment of national health insurance payment
- Establishment of a community centered mid-term healthcare plan
- Establishment of DRG-based payment scheme by taking into account patient’s age, disability and disease severity.
4. Quality of Healthcare in Rural and Off-Shore Areas

**Targets:**
- Emergency and critical care
- Improve quality of service
- Promote people’s welfare in rural and off-shore areas

**Suggestions:**
More support and attention should be paid by government.

5. Seminars on Safety and Quality of Healthcare

‘Seminars on safety and quality of healthcare’ are organized over 20 nationwide interdisciplinary.

**Major Activities:**
- To analyze and comment on case studies from different viewpoints including evidence-based medicine, ethics and law.
- Most people also enjoyed access to simultaneous participation in all sessions through video conference technology.

**Main Achievements:**
More than 40,000 people joined the forum simultaneously.

- The goal of barrier-free learning has been achieved.
- To establish a platform for communication successfully.
6. “Cherish Your Life” Concert

Background:
Suicide rate is on the rise and has been on of the 10 leading causes of death for 10 consecutive years.

Goals
➢ To call for people to value life and hope for the best.
➢ To remind the society to take suicide prevention seriously.

7. Publications

➢ Instructions
➢ 「Taiwan Medical Journal」 is a monthly publication.
➢ Every month, more than 40,000 copies are delivered to physicians, healthcare institutes of all levels and professional societies around Taiwan, as well as medical associations in other countries.

In 2010, TMA published 5-volume Taiwan Medical Series:
➢ Transparency
➢ Medical Ethics in a Globalized World
➢ Patient Safety — Case Studies
➢ Medical Law — Understanding National Health Insurance
➢ Arts and Humanities for Physicians

8. Active Participation in International Affairs

➢ Attended the Caring Physician of the World, organized by the World Medical Association.
➢ Attended the WMA’s other activities such as assemblies, conferences, declaration making, to name a few.
➢ Translated the WMA’s declaration in Chinese.
In 2009, with Taiwan finally becoming an observer in the World Health Assembly.

TMA joined:
- WMA announced the Declaration on Delhi on Health and Climate Change during the 60th WMA Annual Meeting in New Delhi in 2009.
- TMA Drafted the "Strengthening of Primary Care in Asia and Oceania Region".

TMA joined:
The first International Summit on Tobacco Control in Asia and Oceania Region

Endorsement by 18 Countries.

9. Welcome to Taiwan

After a decade,
- Taiwan Medical Association has the honor to host the 27th CMAAO Congress and 47th Council Meeting in 2011.
- The Tentative theme has been proposed as "The Role of Physicians in Suicide Prevention".