

Willingness of Maltese Patients to access Cross-border Healthcare

Maria-Louisa Busuttill (B.Sc. M.Sc.)

Malta Health Network

3rd May 2016

Historical Background

- 30 year history of cross-border collaboration between Malta and the United Kingdom
 - Governmental agreement
 - Specialised care abroad
- Directive 2011/24/EU has been implemented in a context where a long standing history of arrangements for cross-border care exists

Conceptual Framework

Socio-Demographics

Education

Occupation

Literacy on cross-border healthcare

Patients' perceptions/experiences whilst receiving treatment abroad
Waiting times
Specialized care
Quality of care

Patients' experiences

Familiarity/understanding processes
Level of satisfaction

Patients' expectations

Patients' needs
Trust
Geographical proximity
Culture

Willingness to access cross-border healthcare

Financial resources

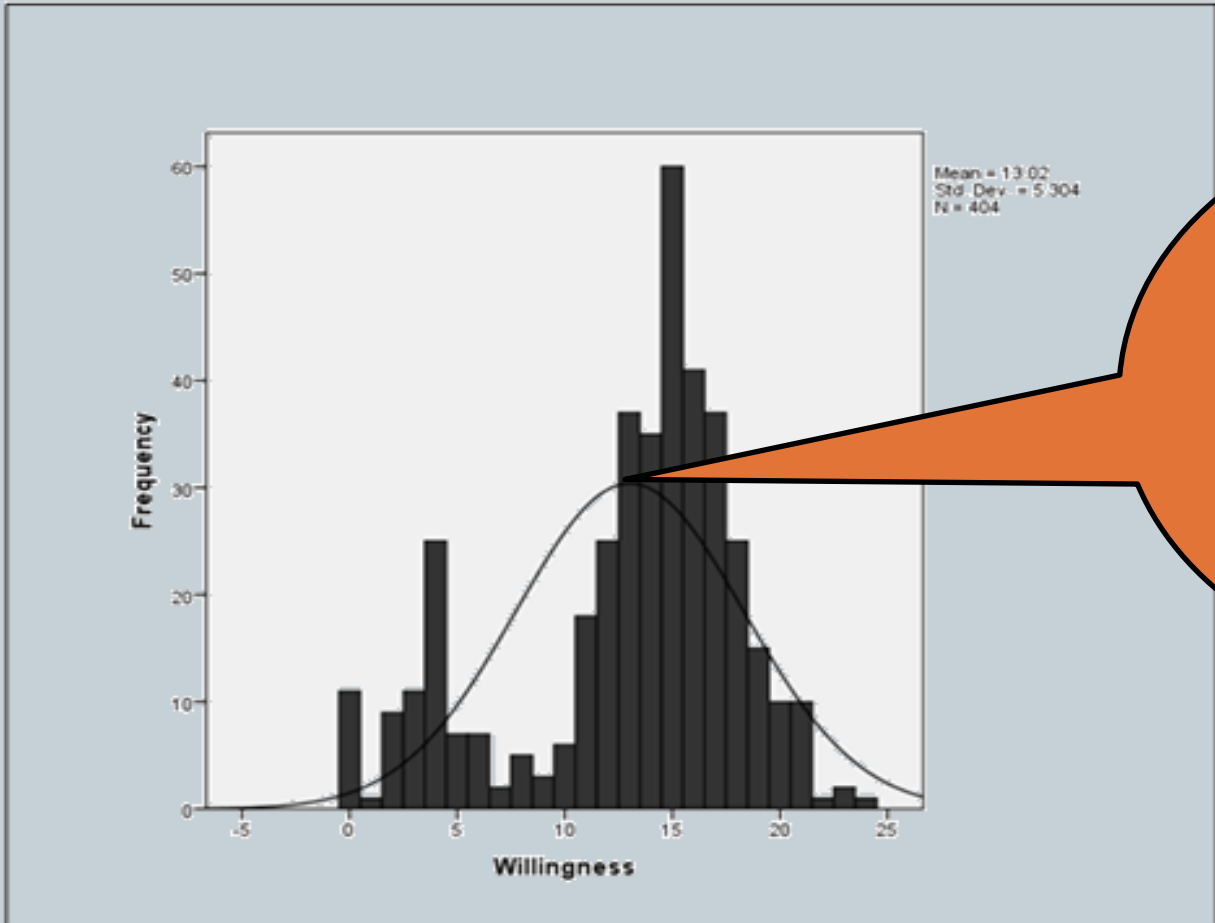
Age

Language literacy

Methodology

Total Number of patients receiving treatment abroad	Speciality	Outpatient Department
26%	Paediatric Cardiac Surgery	Cardiac Laboratory Department
46%	Oncology (Haematology)	Medical Outpatients
18%	Neuro-Surgery	Surgical Outpatients
36%	Ophthalmology	Ophthalmic Outpatients
22%	Oncology	Paediatric Outpatients

Maltese patients are willing to access cross-border healthcare



Mean Willingness:
13.02
(total score 24)
SD: 5.304

Factors Influencing Access to Cross-border healthcare

Age, education, language literacy, literacy on cross-border healthcare and financial resources were found to have a significant association with willingness to cross-border healthcare

Barriers to access cross-border healthcare

- Good quality health service within the domestic health
- Payment of transport
- Lack of comprehensive information
- Fear of the unknown

■ Agree

**Eastern
Europe**

25.7

France

38.4

Germany

48.2

Italy

59.7

**United
Kingdom**

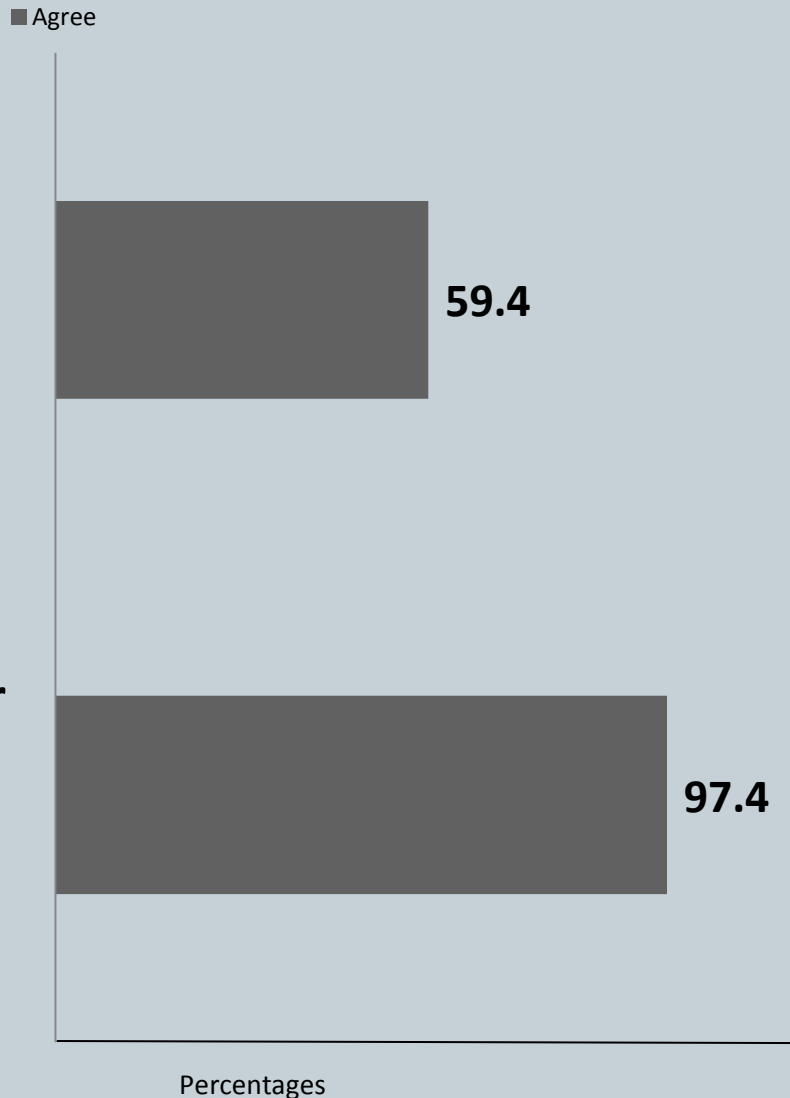
89.1



Percentages

My decision to use cross-border healthcare would be based on patients' experiences

→ My decision to use cross-border healthcare would be based on recommendations provided by GP/specialist



■ Yes

Information sources managed by the Ministry responsible for health



Information provided by specialist

87.6

Information provided by General Practitioner

76.2

Information provided by National Contact Point

67.1

Information sources that one could manage personally

Information provided by family and friends

45.0

Information provided by internet

30.4

Information provided by media

22.5

Percentages

Recommendations

- Equipped GPs with relevant information.
- Develop the role of National Contact Points.
- Educate the public on the differences between specialised care programme and patients' rights under EU directive.
- EU policy should consider focusing on country specific factors to access cross-border healthcare.

Effective Implementation

- Recommendations should be context specific
- Patients need to be well informed
- National Information Campaign
 - Explain difference between medical and additional expenses
 - Information on waiting times
 - Tools of disseminating information
 - Interoperable information tools



Conceptual Framework

Patients' experiences in the host health system

Financial resources

Education

Language literacy

Age

Willingness to access cross-border healthcare

Patients' experiences in the domestic health

Patients' expectations

Literacy on cross-border healthcare



Thank you