

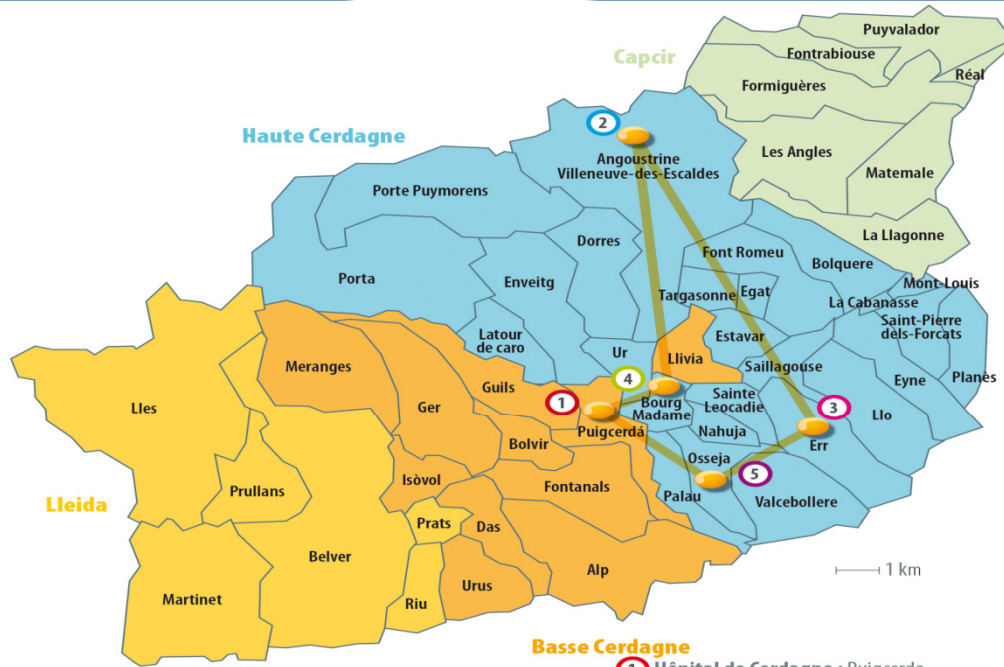
CROSS-BORDER HOSPITAL OF CERDANYA



SEPTEMBER 2016



HOSPITAL DE CERDANYA / HÔPITAL DE CERDAGNE
AECT - Agència Europea de Cooperació Territorial GECT - Groupement Européen de Coopération Territoriale



Basse Cerdagne

- ① Hôpital de Cerdagne : Puigcerdà
- ② SRR les Escaldes : Angoustrine
- ③ Maison de santé médicale Joseph Sauvy : Err
- ④ MECSS les Touts Petits : Bourg Madame
- ⑤ La Perle Cerdane : Osseja



History (2003-2010)

- **11th January 2003** : Signature of a draft agreement between Generalitat of Catalonia and the Regional council of Languedoc-Roussillon, which plans the realization of a preliminary study in the creation of a cross-border hospital with an INTERREG II financing
- **17th October 2005** : signature of the joint declaration of intentions on the cooperation between the Minister for Health of the Generalitat of Catalonia and the French Minister of Health and Solidarities.
- **5th July 2006** : Implementation of the EGTC by the European parliament and the European Union Council (CE n°1082/2006)
- **Juillet 2007** : the Minister Mr. Xavier Bertrand and the Counselor Ms. Marina Geli agree to frame all the project in the constitution of the European Grouping of Territorial Cooperation. In October of the same year, financial commitments are taken for the construction of the Hospital of Cerdanya at the level of 40 % for France and 60 % for Catalonia
- **27th June 2008**: Signature of a framework agreement on cross-border healthcare cooperation between the French Republic and the Kingdom of Spain.
- **April 2010**: Convention of cross-border healthcare cooperation and creation of the EGTC Hospital of Cerdanya signed on 26.04.2010 by the President of the Generalitat of Catalonia, the French Minister of Health Ms Roselyne Bachelot, the Director General of the Regional Agency for Health of Languedoc Roussillon and the Director General of the French National health insurance fund of the Workers.



The EGTC Hospital of Cerdanya

Aims at implementing the governance of a cross-border hospital which will take care of the patients of French and Spanish Cerdanya

Its seat is located in Puigcerda

The members of the EGTC-HC are:

- For Spain: the government of Catalonia
- For France: the government of the French Republic
the Regional agency of Health Languedoc-Roussillon
the national health insurance fund

The statutes of the EGTC-HC specify the 60/40 distribution between Spain and France, as well in the governing bodies as in the financing of the investments, the equipment and the functioning of the hospital of Cerdanya.

Access to care:

The cross-border hospital : a French hospital for French population and a Catalan hospital for the Catalan population.



Different governance bodies

2011: Establishing of the governance bodies

- The Board of directors (Conseil d'Administration)
- The Advisory board (Conseil Consultatif)
- The Executive board (Bureau Exécutif)
- The direction of the EGTC-HC



Different steps in the implementation of the project

- From 2007 : provision of grounds for the construction of the hospital of Cerdanya
- 2008 : Authorization of the construction of the hospital of Cerdanya with a 31 million euro budget approved by France and Spain
- 2008 : Calls for tenders, execution of the works by UTE Copisa Constructora Pirenaica limited company and Agefred SA.
- 23rd of February 2009 : Beginning of the works
- September 2012 : delivery of the building
- 2013 : installation of the biomedical equipment
- 19th of September 2014 : the hospital starts to function



Equipment of the Hospital

- 64 beds of complete hospitalization (MCO)
- 28 external consultation centers
- 1 sector of operation block with 4 operation rooms, a delivery room, a room for endoscopy and a sector of post-operative recovery
- 1 day hospital of 10 beds
- 1 sector for dialysis
- 1 sector for the ER with 15 Boxes
- Medical image (scanner-MRI, conventional radiology, ultrasound)
- Laboratory, pharmacy
- Helicopter station

Financial aspects

Financing the investment

- The total amount of the operation is 31 000 000 € distributed as follows:
 - ERDF Funding : 60% of total cost that is to say **18 600 000 €**
 - For the Generalitat of Catalonia: **7 440 000 €**
 - For France through the EGTC-HC: **4 960 000 €**
- To date, the ERDF paid 15 524 024,84€, it thus remains 3 075 975,16€ to receive

Financing the equipment

- Amount for the project 10 000 0000 €:
 - Catalonia 60% that is to say 6 000 000 €
 - France 40% that is to say 4 000 000 €



Financing the budget of functioning of the hospital

- The statutes of the EGTC-HC plan that during the first 5 years, the functioning will be financed by a global subsidy, at the level of 20 million euros for the French participation (8 million euros a year paid by the French health insurance in twelfth, 12 million euros a year paid by Catsalut monthly).
- After these 5 years, it will be necessary to create a new model of financing to take into account a pricing of the activity. This initiative will apply " in the respect for the principle according to which the share of the sanitary services paid off for the French insured patients, fixes the share of the French contribution to the budget of the Hospital of Cerdanya ".



Getting the Hospital started

The functioning of the hospital brings in various structures, with the internal staff managed directly by the EGTC-HC, and with the staff bound by contracts of employment with outside structures:

- The integration of the Foundation of Puigcerdà (former hospital) in the EGTC-HC with transfer of the staffs, 146 concerned positions. The whole department of radiology is under the responsibility of the Hospital of Perpignan through an international cooperation agreement approved by the Board of directors on June 18th, 2014.
- The logistic services (catering, bio-cleaning, textile cleaning) representing 24 positions, are done by Sanitary GCS Pôle Sanitaire Cerdan of which the EGTC-HC is a member.
- The department of dialysis is under the responsibility of the hospital of Manresa through an international cooperation agreement, with the participation of the association AIDER.

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- Several agreements were concluded with health-related establishments closely located, Catalan (Foundation, Park Tauli) and French (Médipôle) allowing to set up specialized external consultations.
 - Mixing of the French and Catalan professionals: **244 positions** (among which 184 Catalans and 60 French)
 - 2016: Transfer of the paramedics (SMUR, managed by the hospital of Perpignan) to the hospital of Cerdanya which works next to the Catalan paramedics (SEM). 1st stage before the creation of a single unified service (SMUR-SEM)
 - The medical practices and medical protocols were already set up at the opening of the hospital in medicine surgery, obstetrics, and dialysis and some protocols are currently in a process of formalization



Example of obstacle : the status of the personnel 1/2

- Issue : Make work together Spanish and French healthcare professionals in the same conditions, to take care as well of Spanish, French, and sometimes foreign patients (logic of a joint venture).
- Obstacles met: Healthcare is a regulated sector, mainly of the domain of States with different ways of financing the activities (bismarckian financing (FR) or Beveridge (ES)), the decrees of competence are not all harmonized (radio manipulators, office executives), the working time is not the same (1688 hours ES, 1547 hours FR), the purchasing power parity are different (salaries, taxes)
- Solutions identified: they are essentially empirical, pragmatic. Example: to recruit the French nurses (nurses with a state recognized degree = IDE) under Spanish contract (harmonized working time, the salaries for beginners are higher)



Example of obstacle : the status of the personnel 2/2

- However, this question is not solved for the doctors, with differences of treatments between Spanish and French doctors (the working time is of 37,5 hours in Spain for doctors with an employee status, while in France the statuses are either employees, or liberal, overall payment or one-off payment).

At the moment, a study is being carried to objectify wage differences (fixed, variable, use working time limits fixed by the directives of the EU), a unique status specific to the EGTC-HC would allow to improve the professional relations

- Difficulties with the professional orders and the recognition of degrees between States: the procedure of recognition requires a lot of formalism (several months were needed to know the required justification documents), the professional orders charge doctors who practice on both sides of the border, the amounts of contributions are very different (Example: 30 € for a nurse (IDE) in FR, 600 € in ES)



Example of obstacle : the governance of the hospital

- Issue : the decision-making requires numerous exchanges, with legal obstacles (different legal systems between both countries), the language barrier, the criticisms on the slowness of decision-making
- Solutions: the direction consists of a Director General and a Deputy Director General (DG/DGA) of different nationalities, the Executive Board (management board with the representatives FR and ES of financing partners) is gathered once a month
- The institutional difficulties are almost quite settled today: regulation on the functioning of the bank accounts, acquisitions of holdings of the EGTC-HC in the geriatric and pediatric sector, preliminary authorization request for the refund of the care in France

Example of obstacle: managing State-level related questions

Issue: difficulties for the States to handle the binational or cross-border questions in their common law, bound to their national ground

- Security : authorities of Criminal Investigation Department (Police Judiciaire) in the event of a traffic accident in France, the victims hospitalized in Puigcerdà cannot be interrogated by the French police forces (**obstacle not solved**)
- Declaration of births and nationality (**problem solved** for the services of French health insurance and social security), a French protocol allows to reimburse the care of the newborn child with a document from the Spanish registry office (état civil). The transcription of this document in the French law is still a **problem to be solved**.
- Death certificates and return of bodies to the French territory: French patients who die at this hospital are considered to die abroad, the transport of body is regulated by the convention of Strasbourg, an international agreement FR/ES is to be signed (**in progress**) to relieve the procedures. On the other hand, the regulations of funeral services remain to the state (difficulties for the French funeral services to practice in Spain)



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