



The Future of Hospitals and Healthcare



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President 1996 – 1998

I was actively involved in HOPE, as head of the Irish delegation, for over 20 years up until 2004.

In this short address, I would first like to say something about that period. I will then refer to some developments that took place in the EU during the time when I was President of HOPE from 1996 -1999 and, finally, I want to say something about the EU of today.

In 1981, at the beginning of the period I speak about, Greece joined the EC, as it was known then, and brought the number of members to 10. By 2004, when my involvement in HOPE ended, the number of members of the EU had increased to 25.

Expansion, progress, optimism and growing solidarity characterised that period in Europe. Expressions such as 'The European Project', 'The Single Market' (free movement of goods, people and services), 'Social Solidarity', 'Europe of the Citizens' and 'Social Dialogue' were heard frequently and were spoken with pride.

In HOPE, we were concerned that developments in healthcare lagged behind developments in other sectors.

In 1991, the Maastricht Treaty, which contains the first specific mention of Public Health, and the Community Charter of Basic Social Rights were adopted. At the same time that the Maastricht Treaty was adopted, HOPE held the first in a series of European Health AGORA in Paris. They contributed significantly to debate on healthcare at European level.

I was elected President of HOPE at the Plenary Assembly in Paris in 1996. There, we concluded that the focus of HOPE should be expanded to include the healthcare systems within which hospitals work. This change was significant for a number of reasons. For example, it emphasised the importance of viewing healthcare as more than just treating illness and it contributed to the developing European social dialogue.

In April 1998, the European Court of Justice delivered the 'Kohll and Decker' judgments, which held that the fact that national rules governing health care fell within the category of social security regulations did not exclude them from the scope of Treaty provisions on free movement.

This was an important development: the thin end of a much bigger wedge, or so we thought! HOPE availed of every opportunity offered to stress the importance of these judgments and advocated for the free movement of patients in the EU.



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On 1st January 1999, the currencies of 11 EU countries were replaced by the euro and responsibility for EU monetary policy was transferred to the European Central Bank. The euphoria surrounding the developments taking place masked what were design and structural flaws in the edifices that appeared to promise so much.

One of my fondest memories as President of HOPE is of the Assembly held on the beautiful Greek Island of Crete.

It was a very successful business meeting and we experienced warm friendship and generous hospitality.

My wife and I stayed on for a few days afterwards and I can still vividly recall sitting in the sunshine one morning at the palace in Knossos, and feeling privileged to be in a place where the Minoan civilization, one of the great civilisations of the ancient world flourished four millennia earlier.

Sitting there, I was mindful of the debt of gratitude we owed Greece and the people of Greece for their contribution to all we hold dear in Europe: philosophy, democracy, politics, literature and the arts, sport and trade.

Fast-forward twenty years.

When we experienced a global recession, we discovered that the EU institutions and structures are seriously flawed. Monetary Union without Fiscal Union struggled to cope with the severe shock being experienced. The absence of political union exposed the limitations of how a crisis can be managed.

Social Solidarity became one of the first victims of the recession as bank debt was converted to sovereign debt and the protection of the banking system became the overriding priority.

The Greek people, in particular, have not been well served by their own public representatives or by the EU. It is ironic that the case for debt forgiveness for Greece is supported by the IMF but not by the ECB. It is to the great credit of the Greek people that, notwithstanding how they have been treated as an EU Member State, they continue to offer refuge and safe passage to all the displaced people who reach their shores.

In Europe we deride Donald Trump for threatening to erect a wall to prevent Mexicans from entering the USA illegally while at the same time we tolerate the erection of many miles of razor wire along our borders as a means of controlling the movement of migrants. Tear gas and rubber bullets have been fired at migrants, some of them women and children, sheltering in EU territory. The migrant crisis in Europe is above all a humanitarian disaster, it is a major political issue, and for



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those of us working in healthcare it is a challenge the like of which our generation of managers has never faced before.

The physical and mental health needs of those who survive the hazardous journeys involved in getting from war torn countries to Europe can only be imagined. The resources to assess let alone cater for their needs have, so far, been entirely inadequate.

The vision of the founders of what is now the EU remains valid but needs to be reimagined. The original goal of 'Peace in Europe' has been realised, but the European Project is stalled and is at risk of regressing. Latter day leaders of the calibre of Schuman and Monnet are needed.

In conclusion, I wish you, our successors in HOPE, success in pursuing your goals for improving the health of the citizens of Europe.