## The Debureaucratization Strategy for the Portuguese Health Service through Effective Communication

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Abstract: A debureaucratization strategy for the Portuguese Health Service was assumed by the Executive Board of the SNS, in deep articulation with the Shared Services of the Ministry of Health. Two of the main dimensions were focused on sick leaves (SL), that transform primary health care (PHC) in administrative institutions, limiting access to patients. The selfdeclaration of illness (SDI) project, through the National Health Service Contact Centre (SNS24), began on May 1, 2023, and has already resulted in the issuance of more than 300,000 SDI without the need to allocate resources from the National Health Service (NHS). This political decision allows each citizen, in a maximum 2 times/year, and 3 days each time, if ill, through their own responsibility, report their health condition in a dematerialized way, and by this way justified the absence to work, although by Portuguese law in these first three days, there is no payment of salary. Using a digital approach, it is now feasible without the need to go to the PHC and occupy the time of the PHC only to obtain an SL. Through this measure, bureaucracy has been reduced, and the system has been focused on users, improving the lives of citizens and reducing the administrative burden on PHC, which now has more consultation times for users who need it. The second initiative, which began on March 1, 2024, allows the SL to be issued in emergency departments (ED) of public hospitals and in the health institutions of the social and private sectors. This project is intended to allow the user who has suffered a situation of acute urgent illness and who has been observed in an ED of a public hospital or in a private or social entity no longer need to go to PHC only to apply for the respective SL. Since March 1, 54,453 SLs have been issued, 242 in private or social sector institutions and 6,918 in public hospitals, of which 134 were in ED and 47,292 in PHC. This approach has proven to be technically robust, allows immediate resolution of problems and differentiates the performance of doctors. However, it is important to continue to qualify the proper functioning of the ED, preventing non-urgent users from going there only to obtain SL. Thus, in order to make better use of existing resources, it was operationalizing this extension of its issuance in a balanced way, allowing SL to be issued in the ED of hospitals only to critically ill patients or patients referred by INEM, SNS24, or PHC. In both cases, an intense public campaign was implemented to explain the way it works and the benefits for patients. In satisfaction surveys, more than 95% of patients and doctors were satisfied with the solutions, asking for extensions to other areas. The administrative simplification agenda of the NHS continues its effective development. For the success of this debureaucratization agenda, the key factors are effective communication and the ability to reach patients and health professionals in order to increase health literacy and the correct use of NHS.

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