

“Coordinator of the Conciliation Judicial Center of the Federal Court of Piauí, The Federal Judge Marina Cavalcanti explains how it was developed the project that increased the ability to treat patients with cancer in Teresina and which enabled hosting people from other locations. The initiative is from the Public Policy Conciliation Center and resulted in the installation of the Unit of High Complexity in Oncology which will offer hospital care which includes surgery and chemotherapy.”

According to the survey "Estimativa 2016 - Incidência de Câncer no Brasil "of the National Institute of Cancer (Inca), are estimated for 2016, in Brazil, 61,200 new cases of prostate cancer; 57,960 new breast cancer cases; 16,660 new cases of colon and rectum cancer in men and 17,620 in women; 17,330 of new cases of cancer of the trachea, bronchi and lungs among men and 10,890 among women; 12,920 new cases of stomach cancer in men and 7,600 in women; 16,340 new cases of cervical cancer, among other types of the disease.

This high incidence rate causes high demand in hospitals throughout the country, and patients from poor regions, where the public health structure cannot treat everyone, end up looking for care in better equipped capitals. The problem is that hospitals and health care facilities of larger cities cannot absorb the demand. It was the case of Teresina, in Piauí, where a proposed initiative by Federal Court of the State was able to improve care for patients with cancer.

“Primeira Região em Revista” invited the Federal Judge, from the Judicial Section of Piauí, Marina Rocha Cavalcanti Barros Mendes to talk about the project that resulted in the installation of Unit of High Complexity in Oncology (Unacon) in the University Hospital of the Federal University of Piauí (HU/UFPI). "Teresina is a health center in the region, but it was rejecting outpatient care especially for budgetary reasons" explains what motivated the initiative of the Public Policy Conciliation Center of the Judicial Center for Conciliation of the Judiciary Section of Piauí, where she is the coordinator.

The magistrate talks about the main difficulties of the local healthcare system that triggered the initiative of the project and how the Unit will serve the population. She also states that on a new project initiated by the Center intends, through conciliation, to broaden discussions that are initially individual to a collective scope. "Decisions that take the perspective of only one of the affected individuals by the lack or absence of a public policy result in a partial solution, which does not solve completely the problem ", says Marina. Read the full interview below.

In the beginning of May, it was inaugurated in the Hospital of the Federal University of Piauí (UFPI), the Unit of High Complexity in Oncology (Unacon), where the initial ideal was suggested by you and it is the result from the developed work by Public Policy Conciliation Center of the Judicial Center for Conciliation of the Federal Justice in Piauí. What motivated the initiative?

The initiative appeared from a public civil action in which the Federal Prosecutor's Office requested that the City of Teresina refrained from denying healthcare to out-of-state patients in the State of Piauí, which occurred mainly with patients from the State of Maranhão mainly in oncology. Teresina is a healthcare reference center in the region, however was rejecting the out-of-state care specially because of budgetary reasons. The lawsuit was the pilot experiment that started the Public Policy Conciliation Center. During the positions identification hearing,

where each party presented its considerations, possibilities and difficulties in solving the problem, it was found that there were two obstacles to patient care: budget and capacity.

To solve the budget issue, an electronic patient flow, between Piauí and the closer cities of Maranhão, where each external patient enters the health system of Teresina referenced in the city of origin, allowing the transfer of funds without questioning from the parties involved.

To solve the issue of capacity, the University Hospital of UFPI was invited to participate in the hearing sessions and undertook the responsibility to install the oncology service (surgical and chemotherapy). Once installed, the Ministry of Health would make an effort to supply the radiotherapy equipment, so that care would be in complete. The surgery service (Unacon) was inaugurated at the beginning of May, and during the ceremony, it was announced part of the budget for the construction of a special site to receive the radiotherapy equipment, when, all the challenges outlined in the agreement of the case would be materialized.

What is the main objective of the project and how will it contribute for the fulfillment of judicial requests regarding healthcare of the region?

The main objective was the expansion of the oncology service in Teresina's public health system to meet the out-of-state patients demand who resort to the city.

From the judicial perspective, the agreement to accept patients from Maranhão in the healthcare system of Teresina puts an end to a historical sequence of hundreds of individual requests filed by the patients that had their cancer treatment denied.

Unacon's assistance will be focused only on cases arising from lawsuits or will integrate the structure of care of the Unified Health System (SUS)?

Unacon is part of the public health system and serves both the patients of Piauí and those out-of-state. There are 25 hospitalization beds, five of intensive care unit (ICU) and 12 armchairs for outpatient chemotherapy. The treatment will be focused on the five types of cancer with higher incidence in Piauí: prostate, female breast, cervical, lung and rectal colon.

Is there an intention to expand the project and to install other units not only focused on the area of oncology, but to other areas of healthcare?

There are still no plans to install other units towards other healthcare areas, because in the above mentioned public civil action, the denial of care occurred especially in the area of oncology. Nothing prevents, however, to seek the same solution in other areas, if similar problem were found.

A recent research by the National Council of Justice (CNJ) on the judicialization of healthcare in Brazil revealed the necessity to intensify the space for institutional dialogue to the effectiveness of the right to health, transferring responsibility and dialoguing with the various social actors involved in its implementation. In what form this behavior can be taken in the Federal Court, especially in the First Region, to reduce complaints on healthcare, expand the access to healthcare to the population to health care and minimize judicial proceedings overload?

Public policies, among them those related to healthcare, are extremely complex. It must be recognized that a complete solution requires the problem to be seen from different angles, not only from the judge, but from the administrator, the physician, the manager. That is the importance of conciliation in the area of public policies, because it allows openness to a constructive dialogue and multifaceted analysis, without the severities of the traditional bureaucratic proceedings.

Individual decisions, when it comes to public policies, such as the ICU bed reservation for a specific individual, although they are indispensable for safeguarding from the imminent risk of essential values such as life, are not enough for the complex system of rights in which we live today. Decisions that adopt the perspective of only one of the individuals affected by the lack or absence of a public policy generate a partial solution, which does not completely solve the problem. Therefore, countless similar complaints persist.

From this perspective, seeking to reduce complaints and adopting more rational and effective procedures, the Public Policy Conciliation Center of the Federal Court of Piauí is initiating a pilot project called "Containment Mechanism of Repetitive Claims" in which it is intended, in the context of conciliation, to broaden the discussion initially individual for the collective scope in a way that the problem brought to trial is resolved in its entirety.

In the last edition of the Award Conciliar é Legal, the Judicial Branch of Amapá (SJAP) received an honorable mention by a work also focused on the claims in healthcare, where the objective is to reduce judicial proceedings of healthcare by conciliation. How do you evaluate initiatives like this? Do you believe that actions of this nature can be replicated in other structures of the Federal Justice and in the Judiciary as a whole?

I assess the initiatives to reduce judicial proceedings on healthcare as extremely important through conciliation, as is the case of the experience developed by the Judiciary Section of Amapá. These are procedures that are in tune with the more current challenges faced by the Justice system, the challenge of being effective.

Conflicts involving public policies such as healthcare policies require changing the way in which the judicial proceeding is seen because they have a peculiarity in relation to the other claims: all parties involved want the claimed public policy to be materialized. The divergence is only about the obligations of each one and the path to be adopted to achieve the objective. In traditional proceedings the plaintiff and the defendant requests are opposite, and in the end, when a ruling is defined, there is one loser and one winner. In proceedings involving public policies, if the public policy is implemented, all parties are winners. Instead of opponents, they are partners in the adequate and effective solution, having the Judicial system as a catalyst and guarantor.