

# WP6 - Multimorbidity

WP6&WP7 Joint meeting

06/11/2014



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# WP6. DEVELOPMENT OF COMMON GUIDANCE AND METHODOLOGIES FOR CARE PATHWAYS FOR MULTI-MORBID-PATIENTS

**WP leader - AIFA** - Italian Medicines Agency, Italy

**WP co-leader VULSK** - Vilnius University Hospital Santariškių Klinikos - Lithuania

# Associate Partners

1. Netherlands institute for health services research (NIVEL) - Netherlands
2. TU Dresden (TUD) - Germany
3. The Aragon Health Sciences Institute (IACS) - Spain
4. Department of Health (DHS) - United Kingdom
5. National Institute for Health and Welfare (THL) - Finland
6. “Sotiria” General Chest Diseases Hospital of Athens (GCDHA) - Greece
7. European Patients' Forum (EPF) - Belgium
8. Instituto de Salud Carlos III (ISCIII) - Spain
9. European Institute of Womens Health (EIWH) - Ireland
10. National Center of Public Health and Analyses (NCPHA) - Bulgaria

# Objective

To design and develop innovative, cost-efficient and patient centred approaches for multimorbid patients with chronic conditions, including secondary prevention interventions, early diagnosis and adherence to treatment and medicine regimens (to address polypharmacy)

# Tasks

**T1. Identify targets** of potential interventions for management of multi-morbid patients (M 1-12)

**T2. Review existing care (pathway) approaches** for multi-morbid patients (M 1-12)

**T3. Assess and select good practices** on management of multi-morbid patients (M 13-24)

**T4. Define multi-morbidity case management training programmes** (M 25-36)

# Task 1

**Title:** Identify targets of potential interventions for management of multi-morbid patients

**Leader:** IT

**Aim:** Identify population(s) at high and very high care demand (utilization of resources, of negative health outcomes, complexity of their chronic conditions), by a analysis of existing national databases and literature review

**Deliverables:** Report from data analysis and evidence from literature to identify high care demanding population

# Task 1 – Strategy, databases

1. Define characteristics of databases
2. Identify databases available among AP
3. Define a general framework for data analyses
  - Define ‘high care demand’
  - Identify ‘exposure’ (i.e. diseases, age, gender)
4. Analyses performed locally
5. Results collected and centralized in a single document

# Task 2

**Title:** Review existing care pathway approaches for multi-morbid patients

**Leader:** NL

**Aim:** To provide an overview of care pathway approaches for multi-morbidity patients in Europe, description of their characteristics and analysis of their efficacy to improve patient outcomes, healthcare use, cost-effectiveness, applicability and replication in other regions/settings

**Deliverables:** 7-12



# Task 2 - Strategy

1. Review of international literature
2. Extra data collection and analysis within ICARE4EU project
3. Analysis of data available from other relevant European projects

*\* NIVEL was involved in this previous review. RIVM, the National Institute for Public Health and the Environment, Centre for Prevention and Health Services Research, in the Netherlands was the coordinator of the previous review (Task leader).*

# Country survey

## **Aim**

To trace, describe and analyse innovative, patient centered, multi-disciplinary care approaches targeting patients with multi-morbidity (or their care providers) in 30 European countries

## **Method**

- via country expert-organizations
- online survey (start: February 2014)
- use of additional data from European statistical data bases, HiTs, previous European projects

## **For CHRODIS-JA:**

- specific questions added to the survey
- analysis of data focusing on care pathways within healthcare
- special attention to the chain of care, polypharmacy and medication management, e.g. patient safety, adherence

# Timeline

|        | Year 1 |   |   |   |   | Year 2 |  |  |  |  | Year 3 |  |  |  |  |  |
|--------|--------|---|---|---|---|--------|--|--|--|--|--------|--|--|--|--|--|
| Task 1 | █      | █ | █ |   |   |        |  |  |  |  |        |  |  |  |  |  |
| Task 2 |        |   |   | █ | █ | █      |  |  |  |  |        |  |  |  |  |  |
| Task 3 |        |   |   |   |   |        |  |  |  |  |        |  |  |  |  |  |
| Task 4 |        |   |   |   |   |        |  |  |  |  |        |  |  |  |  |  |

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| Task 4 |        |  |  |  |  |  |        |  |  |  |  |  |        |  |  |  |  |  |

# Task 3

**Title:** Assess and select good practices on management of multi-morbid patients

**Leader:** LT

**Months:** 13-24

**Aim:** Developing a common model for multimorbidity management, based on identified good practices which are easy to apply and replicate in different settings

# Task 3 – Strategy

1. Based on T1 and T2 outcomes
2. Real-life multimorbidity clinic/existing good practices
3. Assessment of potentially beneficial interventions
4. Results summarized in a single document

# Characteristics of assessments

1. Effectiveness on outcomes
2. Cost-effectiveness
3. Applicability and replicability

# Timeline

|        | Year 1 |  |  |  |  |  | Year 2 |  |  |  |  |  | Year 3 |  |  |  |  |  |
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| Task 4 |        |  |  |  |  |  |        |  |  |  |  |  |        |  |  |  |  |  |



# Task 4

**Title:** Identify targets of potential interventions for management of multi-morbid patients

**Leader:** IT

**Aims:** Review of existing training programmes on the multimorbidity management for care personnel, and development of the relevant common training programme to be easily used in different settings and regions

# Strategy

- Key experts involved in training of healthcare professionals will be identified (AP) and will be invited to participate in a focus group in order to prioritize the professional skills and competencies needed for caring for multi-morbid patients
- Create a synergy with WP7

# Timeline

|        | Year 1 |  |  |  |  |  | Year 2 |  |  |  |  |  | Year 3 |  |  |  |  |  |  |  |  |  |  |
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| Task 4 |        |  |  |  |  |  |        |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |

# Milestones

**M6.1** Research/desk work on collection of data/literature/evidence

**M6.2** Review existing care pathways based on existing literature, case studies and evidence

**M6.3** Meetings with experts to assess the accuracy of collected evidence/case studies and select good practices and identify commonalities for care management of multimorbidity

**M6.4** Meetings with experts to discuss skills and competencies and develop training curricula

# The Joint Action on Chronic Diseases and promoting healthy ageing across the life cycle (JA-CHRODIS)\*

**\* THIS PRESENTATION ARISES FROM THE JOINT ACTION ON CHRONIC DISEASES AND PROMOTING HEALTHY AGEING ACROSS THE LIFE CYCLE (JA-CHRODIS) WHICH HAS RECEIVED FUNDING FROM THE EUROPEAN UNION, IN THE FRAMEWORK OF THE HEALTH PROGRAMME (2008-2013)**

