Joint Action on Chronic Diseases and Promoting Healthy Ageing Across the Life Cycle

# **1ST GENERAL ASSEMBLY**

"Towards good practices in prevention and care of chronic diseases, for a healthier tomorrow"

## **DISCUSSION GROUP**

19 February 2015 Brussels, Belgium



This document arises from the EU CHRODIS Joint Action which has received funding from the European Union, in the framework of the Health Programme (2008-2013). Sole responsibility lies with the author and the Executive Agency for Health and Consumers is not responsible for any use that may be made of the information contained therein

### Background

The Joint Action CHRODIS is a European collaboration consortium with the main objective of promoting and facilitating a process of exchange and transfer of good practices between European countries and regions, addressing chronic conditions, with a specific focus on health promotion and primary prevention as well as the management of diabetes and multi-morbidity conditions.

JA-CHRODIS brings together 67 associated and collaborating partners from national and regional departments of health and research institutions, from 25 EU Member States and Norway.

JA-CHRODIS main governing body is the General Assembly, composed by one representative per Associated Partner. A year after the project's launch, the General Assembly holds its first meeting, with the presence of representatives of DG SANTÉ, from the Consumers, Health, Agriculture and Food Executive Agency (Chafea) and the integration of the Stakeholders Forum in an open session.

The target audience will be integrated by experts on chronic diseases and healthy ageing, policy-makers, health professionals from all over Europe.

### Objective

The General Assembly's 1<sup>st</sup> Meeting aims to analyze the first year of JA-CHORDIS experience and to create debate around the outcomes of the core work-packages. The meeting will seek to discuss over critical areas of the 2015 work plan.

An overall overview of the project and the main highlights and outcomes of the core work-packages will be presented and participants will have the opportunity to make their contribution on specific topics.

### Discussion Groups.

Discussion groups will be organized based on topics proposed and moderated by the work-package leaders and co-leaders and their teams. This will give attendees the opportunity to participate actively, to share their expertise and help create synergies among the associated partners. According to the number of attendees the following discussion groups will be set up:

### Group 1: Dissemination and Outreach. Moderators: Ingrid Stegeman and Anna Gallinat (WP2: Dissemination and Communication).

The main JA-CHRODIS target groups are (i) primary: political level, (ii) secondary: scientific level and (iii) tertiary: the general population and other interested





stakeholders. JA-CHRODIS dissemination activities will ensure that these groups are aware of and engaged in the Joint Action, so that it can contribute to make a sustainable impact on policy making and in the prevention and more effective treatment chronic conditions across the EU.

#### Questions:

- How can we best optimize our dissemination activities?
- How can we improve (political) stakeholders' implication and which would be the appropriate entry points for stakeholders.

### Group 2: Care delivery models. Moderators. Marina Maggini. (WP7 Diabetes. A case study on strengthening health care for people with chronic diseases.)

Diabetes is the fourth most common cause of death in Europe. The effective treatment and management of diabetes calls for comprehensive approaches to care that empower patients and enable them to self-manage their disease to the best possible extent. One of the JA-Chrodis goals is to improve coordination and cooperation among Member States to act on diabetes, including the exchange of good practices across the EU.

### Question:

- Why setting up an integrated care scheme is not an easy journey?
- What are the barriers?
- How can we cross organizational boundaries?

### Group 3. Patient empowerment and active living with Chronic Diseases. Moderator: Jelka Zaletel (WP7 Diabetes. A case study on strengthening health care for people with chronic diseases.)

Chronic Diseases affect a high percentage of an ageing population. One of the main issues of older adults living with chronic conditions is their will to stay active in the sense of being in charge of their own lives for as long as possible optimizing opportunities for health, participation and security and, where possible, to contribute to the economy and society. Promoting an active life can also benefit in the selfmanaging of the chronic diseases.

JA-Chrodis aims to include empowerment and self-management promotion in the best practices development.

Questions:

• How can we create awareness among the different groups of interest (citizens, health professionals) of the need for self-empowerment in health promotion?



www.chronicdiseases.eu



• How can patients and families interact effectively with health services and be active partners in managing diseases?

# Group 4: The role of health promotion in chronic care. Moderators: (Sybille Gerstl, BZgA). (WP5: Good practices in the field of health promotion and chronic diseases prevention across the life cycle)

Preventive healthcare is especially important given the worldwide rise in prevalence of chronic diseases and deaths from these diseases. Prevention throughout life is effective and must be regarded as an investment in health in the general population and among people at risk.

### Question:

Which experiences exist in the implementation of expanded chronic care models in partner countries?

Group 5: Bridging the gap between knowledge and practice in management of Chronic multimorbid patients. Moderator: Graziano Onder and Rokas Navickas. (WP6: development of common guidance and methodologies for care pathways for multimorbid patients)

European Health care systems are facing the challenge of caring for complex patients characterized by the presence of co-occurring, multiple chronic diseases, and a condition known as multimorbidity. Multimorbidity has a relevant impact on patients' outcomes and health care costs in both younger and older adults.

### Questions:

- What are the main obstacles found in the translation of knowledge into the clinical practice in management of multimorbid conditions?
- What resources do we have to help close the gap?

### Outcomes of the Discussion Groups.

The Discussion groups will have one hour to exchange and debate ideas over the topics. After this period, they will complete a template where they will present their topic, the questions that have been discussed and the main conclusions. A final report will be elaborated and distributed among partners and made public through the JA-CHRODIS web page.



