

First results of JA-CHRODIS after 1 year

1st General Assembly

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Why are our efforts worth in JA-CHRODIS?

- Today, NCDs represent the major share of the burden (77%) of disease in Europe and are responsible for 86% of all deaths.
- They affect more than 80% of people aged over 65 and represent a major challenge for health and social systems.
- 70 to 80% of health care budgets, an estimated € 700 billion per year are spent on chronic diseases in the European Union.



Urgent measures are needed!

As a consequence

A coalition across society is needed towards

- more effective and smarter approaches to the prevention of chronic diseases,
- the preservation of the best possible health status, and
- the sustainability of modern health systems.

The goal

To maximize the healthy life years enjoyed by EU citizens and to trigger economic and social development

JA-CHRODIS is funded by the European Commission

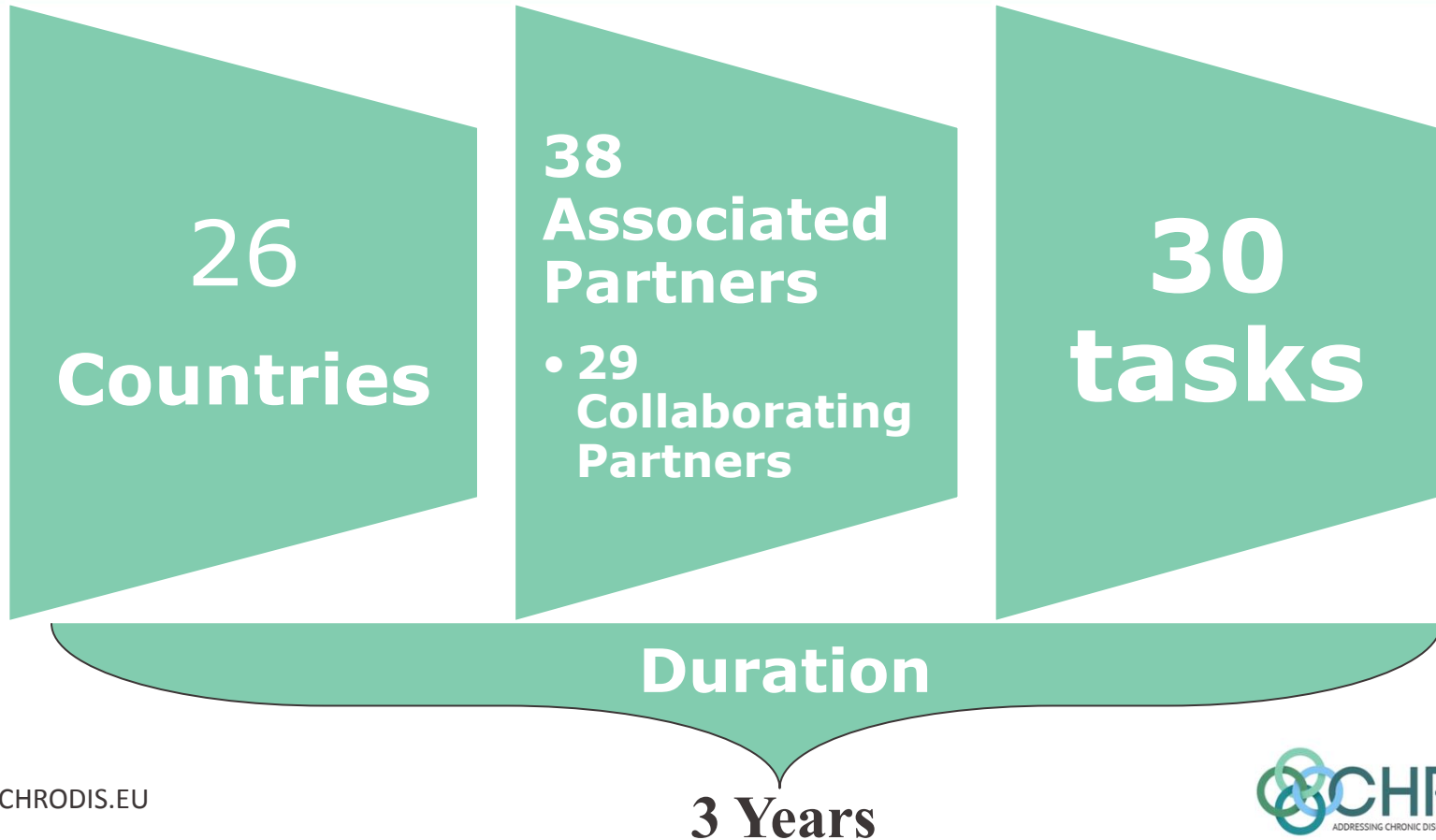


Objectives:

- To improve citizens' health security
- To promote health, including the reduction of health inequalities
- To generate and disseminate health information and knowledge

Addressing chronic diseases and promoting healthy ageing across the life cycle	4.2.1.1	€ 5 000 000
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JA-CHRODIS – its composition at present



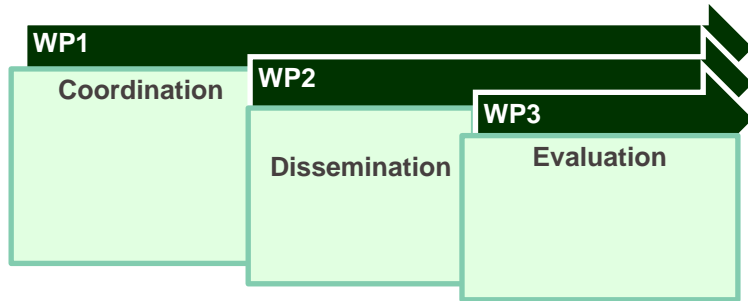
Key financial figures

- Total Budget: **9,2 Million Euros**
- EU Contribution: 4,6 Million Euros
- 39 months (1st January 2014 to 31st March 2017)
- 33,324 person days
- 132 Public Officials / 96 Non-Public Officials



Activities ongoing in JA-CHRODIS

Horizontal work



WP4

Platform for knowledge Exchange

WP5

Good practices in the field of health promotion and chronic disease prevention across the life cycle

WP6

Development of common guidance and methodologies for care pathways for multi-morbid patients

WP7

Diabetes: a case study on strengthening health care for people with chronic diseases

Core work

WP1 activities during the 1st year

Tasks/ Deliverables	Due time	Deviation	Reasons	% accomplishment
Coordination structure				100
Kick off , EB, stakeholder meetings	Jan 2014/ 6 months	No		100
SOP	M2	2 months	The review process by all partners took more time than expected	100
Work plan	M2	No		100
Progress reports	M6 & M12*. (plus M7- M11)	No		100
Intranet Mgmt. Tool	N.D			100
GB	N.D			18/31 countries

WP2 activities during the 1st year

Tasks/ Deliverables	Due time	Deviation	Reasons	% accomplishment
Communication Strategy (incl. reporting back template)	M3	9 months*	Integrating outcomes communication training + discussions with WP leads, receiving and integrating CHAFAEA and coordinator's comments	100%
Stakeholder mapping & contact database	M3 & M7	1 month & none	Initial delay in Communication Strategy	Both 100%
Visual identity (incl. logo and templates)	M3	2 months	Delayed decision-making process	100%
Website	M6	1 month	Integrated comments following 3rd EB meeting	Continuous
Promotional material	M10	No		100

WP4 activities during the 1st year

Tasks/ Deliverables	Due time	Deviation	Reasons	% accomplishment
Agreement on a modified calendar	M1	6 months*	Required after kick off meeting/	100
4.1.1 Selection of Assessment Criteria: Delphi Health Prom & Prev.	M6*	3 months	Accommodation to new timeline + delays on background material first Delphi	ongoing
4.1.1 Selection of Assessment Criteria: consensus tool	M6*	3 months	Linked to Delphi 1 delay	100
4.6: Technological Platform: PKE user requirements design	M9*	3 months		<ul style="list-style-type: none"> • Background decisions done • Platform structure ready to implement functionalities • User requirements pending EB approval

WP5 activities during the 1st year

Tasks/ Deliverables	Due time	Deviation	Reasons	% accomplishment
Country reviews	M8	3 Months	Summer break, individual timelines for partners	100%
Template selection criteria for Good Practice	M10	2 weeks	Results from partners, conceptual uncertainties in the analysis process,	100%
WP meetings	2014			100%

WP6 activities during the 1st year

Tasks/ Deliverables	Due time	Deviation	Reasons	% accomplishment
Identify targets of potential interventions for management of multi-morbid patients	M6	6 months	Database quality checks and analysis needed more time, as many partners analyzing their data independently	100
Review existing care (pathway) approaches for multi-morbid patients	M12	Up to 30 days	Finalizing the data in the specific way, adapted for the Delphi process	100
Joint WP6/WP7 meeting in Vilnius on the 7 th of Nov, 2014	2014	none		100
Review paper of international literature	M12	none		100
Data collection and analysis within the ICARE4EU project	M12	none		100

WP7 activities during the 1st year

Tasks/ Deliverables	Due time	Deviation	Reasons	% accomplishment
Community of practice	M2	2 months	Technical design of the landing page embedded in ISS institutional web site	100
Literature review on effective strategies prevention management health promotion education	M7	N		100
	M12	N		100
Definition of tools for the collection of data	M7	2 months	Revision of the questionnaire after the WP7 meeting in July	100
Mapping NDPs	M7	2 months		100
Task leader meeting	2014	N		100
WP7 Workshop	Dec.	Ant/ Nov	Joint WP6-WP7 meeting	100
Identification of social and psychological barriers for the access to care and for empowerment	Dec			

In summary (I)

- WP1 (other last minute accomplishments)
 - (MSSSI, Spain) organized the respective 1st Advisory Board and Governing Board yesterday
 - Advisory Board held its 1st meeting also yesterday
 - A selection procedure for the inclusion of new CPs has been agreed by the EB
- Web page and Dissemination Strategy implemented (WP2)
- PKE (WP4)
 - user requirements designed - most of them under development
 - Hardware: (server machines to support development) already set up
 - Software: content and user management software decided under development
 - Expert panels (Delphis) meant to define criteria for assessing practices, interventions and policies ongoing

In summary (& II)

- Country reviews on good practices in the field of health prevention and promotion of chronic diseases have been finalised **(WP5)**
- Analysis of current databases addressing multi-morbid conditions performed **(WP6)**
- Questionnaires launched and under preliminar analysis (WP7) on:
 1. Prevention and management of diabetes, and
 2. National Diabetes Plans

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EXPERTS ACROSS EUROPE ARE JOINING FORCES

TO IDENTIFY AND EXCHANGE THE BEST APPROACHES
TO PREVENT AND MANAGE CARDIO-VASCULAR DISEASE,
STROKE AND DIABETES TYPE II



KNOWLEDGE PLATFORM

Repository of validated good practice to
prevent and manage chronic disease.

[READ MORE](#)

HEALTH PROMOTION

Good practice in health promotion and primary
prevention of chronic disease, and their
transferability.

[READ MORE](#)

MULTI- MORBIDITY

Guidelines on innovative and effective care for
multi-morbid patients.

[READ MORE](#)

DIABETES TYPE II

European cooperation in diabetes as a case
study for tackling chronic disease.

[READ MORE](#)

Your collaboration is needed

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NEWSLETTER

The first JA-CHRODIS newsletter is now available!



- Discover why and how governments across the EU are working together to tackle chronic diseases and promote healthy ageing
- [WATCH](#) why the European Commission initiated JA-CHRODIS
- Find out how you can take part in our work
- Receive updates on the Joint Action's progress!

[HAVE A LOOK](#)[SUBSCRIBE](#)

EVENTS & MEETINGS

« FEBRUARY 2015 »						
MON	TUE	WED	THU	FRI	SAT	SUN
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	1

[VIEW ALL UPCOMING EVENTS](#)

WWW.CHRODIS.EU

Please send your dissemination activities to WP2

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Financial overview 2014

EXPENDITURES 2014					
Direct eligibles costs					TOTAL
E1. Staff					1.827.905,42 €
a. Costs pertaining to national officials					1.035.197,93 €
b. Costs not pertaining to national officials					792.707,48 €
E2. Travel costs and subsistence allowances					97.214,88 €
E3 Equipment					425,79 €
E4. Consumables & supplies directly linked to the project					165,01 €
E5. Subcontracting costs					79.604,68 €
E6. Other costs					28.690,55 €
Total direct eligible costs					2.034.006,33 €
E7. Overheads					137.805,55 €
TOTAL - EXPENDITURE 2014					2.171.811,88 €
PERSON DAYS CONSUMED 2014					
					TOTAL
E1. Staff					8.330
a. Costs pertaining to national officials					4.783
b. Costs not pertaining to national officials					3.547

1st Pre-financing payment: 1,4 M €

Used 2014 (79%):

1,1 M € (including overheads)

On the other side...

- Delayed activities and subsequent replacement of the WP3 structure
 - New leader: AQuAS (Catalonia, Spain)
 - New leader APDP (Portugal)
 - WP3 will minimize the delay with the new structure
- Intensive effort for the integration of activities in a big JA
- Update of dedication vs. real effort in the different WPs

The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*



Co-funded by
the Health Programme
of the European Union

* This presentation arises from the Joint Action addressing chronic diseases and healthy ageing across the life cycle (JA-CHRODIS), which has received funding from the European Union, under the framework of the Health Programme (2008-2013).