

CHRODIS - JA

The Joint Action on “Chronic Diseases and Promoting Healthy Ageing across the Life Cycle”.

Curso “La Política de Investigación e Innovación en el marco europeo y nacional”

UIMP

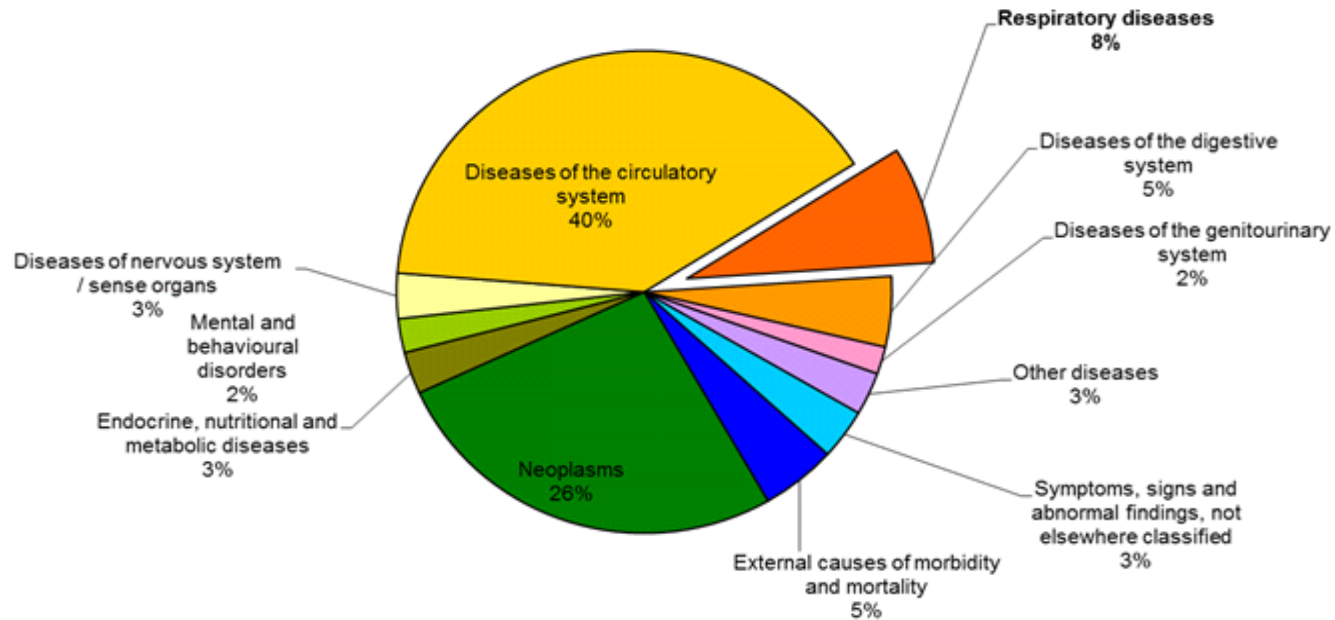
2 de julio de 2014



Juan E. Riese
Institute of Health Carlos III, Spain

Chronic diseases. The overall situation

European Union (27 countries) - 2008

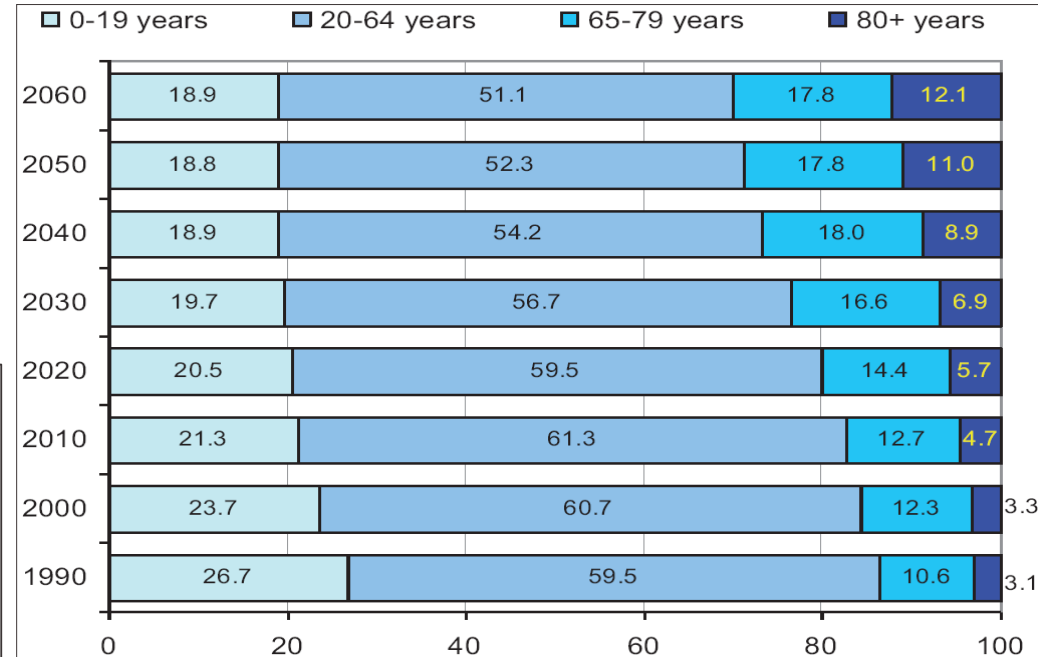
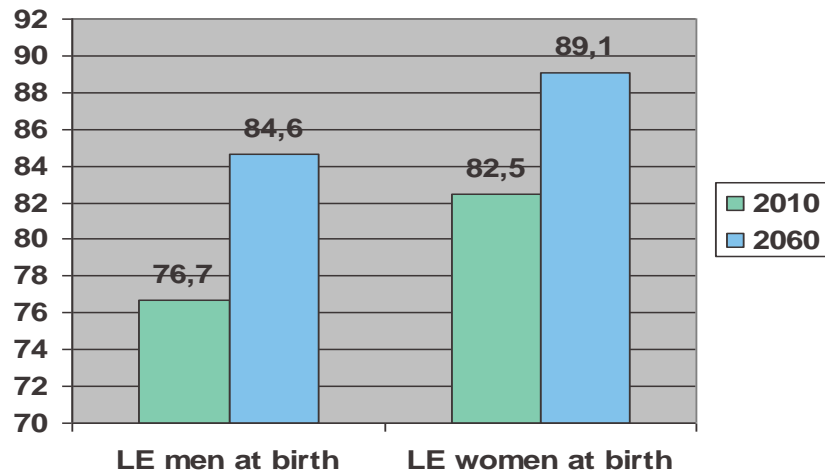


Demographic change in Europe

Population age structure 2010-2060 (EU27)

65+: increase of 71.8 %
80+: increase of 157.4 %

Life expectancy at birth 2010-2060



Source: Demography report 2010.

Source: Data based on
Ageing Report 2012.

Chronic conditions & multimorbidity evidence & challenges

- ❑ **80% of people >65 affected with chronic conditions i.e. heart failure, diabetes, depression, hypertension, osteoarthritis, osteoporosis etc.**

⇒ *these NCDs are in majority preventable*

- ❑ **multimorbid patients register: ↑ mortality rate, ↑ healthcare costs, & have: ↑ risk of hospital admissions, ↓ perception of physical & mental health, ↓ quality of life, ↓ functional capacity**

⇒ *treating patients rather than specific diseases – care models of disease management rather than chronic conditions programmes*

- ❑ **interactions among medications, among treatments**

⇒ *risk of polypharmacy & adverse medicines events*

What the JA should be

- It is a networking effort of the participant National Governments
- It is a linkage and exchange methodology, based on the current policy agenda and existing experiences across Europe
- It is an initiative using scientific methodology –sound and replicable- to inform about the best policies and practices
- In summary, it is an initiative meant to yield an EXCHANGE KNOWLEDGE SYSTEM focused on informing on the best policies and practices as well managers and practitioners on how to act when implementing policies and practices on chronicity.

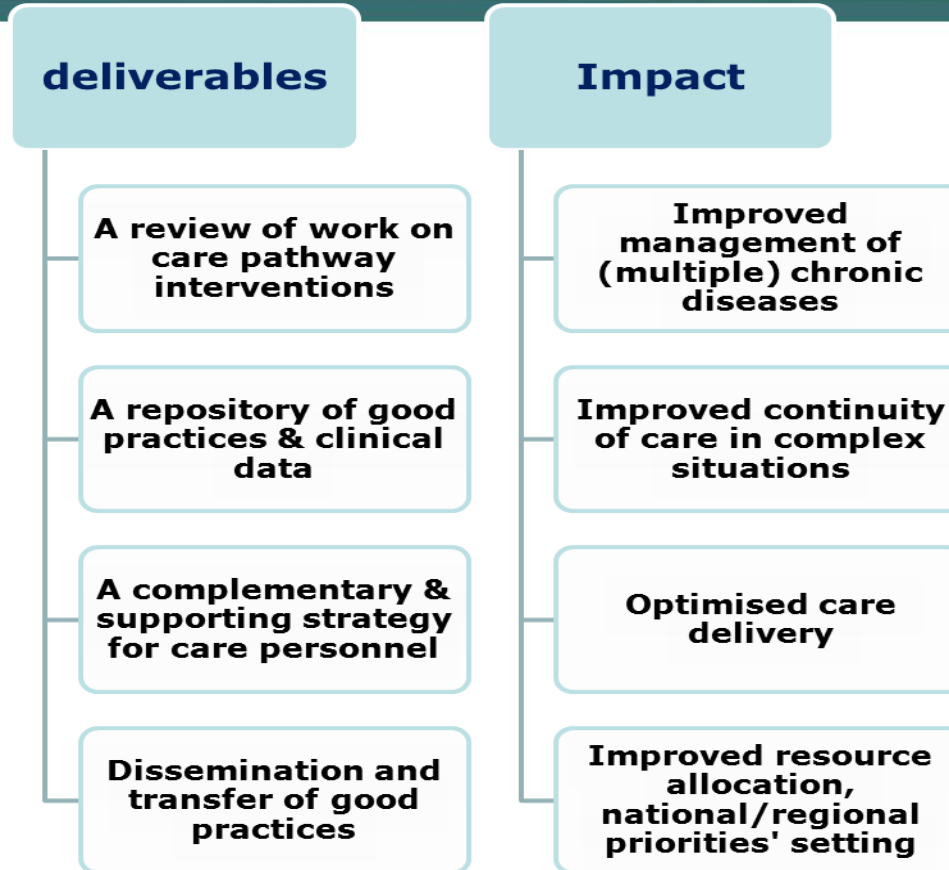
What the JA on Chronic Diseases should not be

- It is not a mere think tank pouring opinions about the strategies within each participant country;
- It is not a research project focused on specific research questions
- It should not end by giving recommendations solely
- The goal is not to earn money...

La JA de enfermedades crónicas

- 3 required minimum WPs (max. 10 topics in total)
- Max 5 Mio. Euros (cofund 50%)
- 3 further horizontal topics were required by DG-SANCO:
 - Coordination
 - Dissemination
 - Evaluation
- Deadline for submitting the proposal: March 22nd, 2013

Required by DG-SANCO



Milestones while writing the proposal

1. DG-SANCO call
2. Mandate from the Spanish Health Ministry (MSSSI)
3. Acceptance of the coordination by ISCIII
4. Consortium set up
 - a. Meetings in Luxemburg
 - b. Midterm evaluation
5. The technical part of the proposal is written (final version)
6. The budget is developed
7. Negotiation step

Three Award Criteria with different weights

- A. Policy and contextual relevance of the Joint Action: threshold is 20 points.
- B. Technical quality of the Joint Action: threshold is 15 points.
- C. Management quality of the Joint Action and budget: threshold is 15 points.

In addition, for the criterion 'Overall and detailed budget including financial management' under the award criterion 'C. Management quality of the project and the budget' the threshold is set at 5 points.

Any proposal that does not reach all the above thresholds will be rejected.

Timeline

- **Early February 2013:** Draft proposal submitted for 1st check
- **February 18-19, 2013:** Evaluation workshop in Luxemburg
- **March 22, 2013:** Deadline for submitting the proposal (final evaluation)

Understanding CHRODIS-JA

4 dimensions to describe and analyse CHRODIS and its work packages.

1. Good practices
2. Exchange and transfer
3. Specific focus: health promotion and prevention, multimorbidity, diabetes
4. Sustainability

Guidelines, Practices and Good Practices in CHRODIS-JA

- **Guidelines.** These are documents containing the essential criteria and elements needed for a practice to be effective and efficient.
- **A Practice.** The way someone is applying the guideline or best available evidence in a specific situation and context, mediated by available resources, organizations, institutions, or local culture. The guideline provides the practice with roots in science and evidence.
- **A Good Practice.** It is that is worth disseminating because it is based on best available evidences, is associated with good outcomes and may inspire practices in different contexts.

ORGANIZING EXCHANGE AND TRANSFER. CHRODIS-JA

- Existing evidences or guidelines may be difficult to apply in specific contexts or settings. Because the contexts are highly variable, and practices are very much dependent on the context, there is a great variety of practices across Europe.

Organizing the existing information.

The Platform for Knowledge Exchange (PKE).

- **Collecting potential good practices to build the clearinghouse, screening potential good practices following the criteria that will be elaborated**
- **Advising in the evaluation of practices with weaker evidence base.**
- **Selecting those suitable for exchange, transfer or up-scaling to make them available for the help desk of the PKE.**
- **Setting up a help desk to provide advice based on the pool of good practices, upon demands for advice to transform an existing practice or introduce a new one.**

Other important activities. EIP-AHA

- In addition to the PKE, CHRODIS-JA will implement specific activities to organize a continuous flow of good practices.
- To set up close links to the EIP-AHA, which is an European platform for the exchange of good practices. Dissemination activities should be also understood in this context.



EUROPEAN INNOVATION PARTNERSHIP

on Active and Healthy Ageing

[Home](#) > [About](#)

[Home](#)

[Members](#)

[Projects](#)

[Funding](#)

[Forum](#)

[Resources](#)

[Events](#)

[News](#)

[About](#)



Welcome to the Marketplace for Innovative Ideas

This platform is a communication and information hub for all actors involved in Active and Healthy Ageing throughout Europe; the place to promote news and events, to meet and exchange ideas with peers and potential partners on innovative projects in this challenging field. Join our growing and fruitful community and let's work together to make the EU a place of excellence in innovation for healthy ageing! [More ...](#)



EIP on AHA highlights

Working together for longer healthier lives: New EC video to promote healthy ageing



Get involved! >>

THE FOCUS: HEALTH PROMOTION AND PREVENTION, MULTIMORBIDITY, DIABETES

- **CHRODIS focus on these three areas. The exchange and transfer of good practices will be related to these health problems. While the PKE will provide the means to receive and disseminate good practices, it has to be fed with:**
 - specific criteria to complete the screening and evaluation tools,
 - existing potential good practices to exchange or upscale
 - organized flow of advice demands.
- **This feeding will be provided by WP 2, 5, 6, and 7.**

ENSURING SUSTAINABILITY

- **To implement the PKE will take much time and effort, that would not be worth if the PKE would work for just one year or even less. Once CHRODIS has a mechanism to organize the exchange and transfer of good practices, the PKE should stay operational as long as it has support from health authorities (national authorities, European Council and European Commission) and there is a demand for it.**

Partners CHRODIS-JA

26
Countries

36
Associated Partners
• **23**
Collaborating Partners

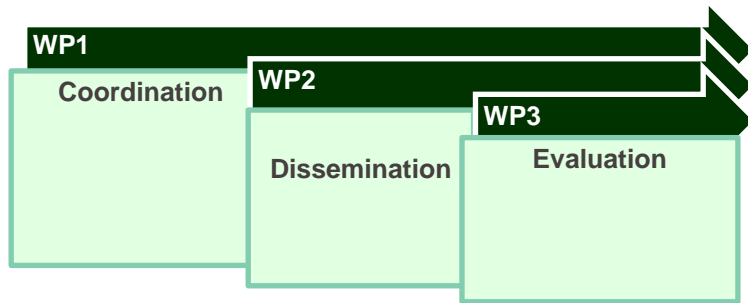
30
tasks

Duration

3 Years

The structure of CHRODIS-JA

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

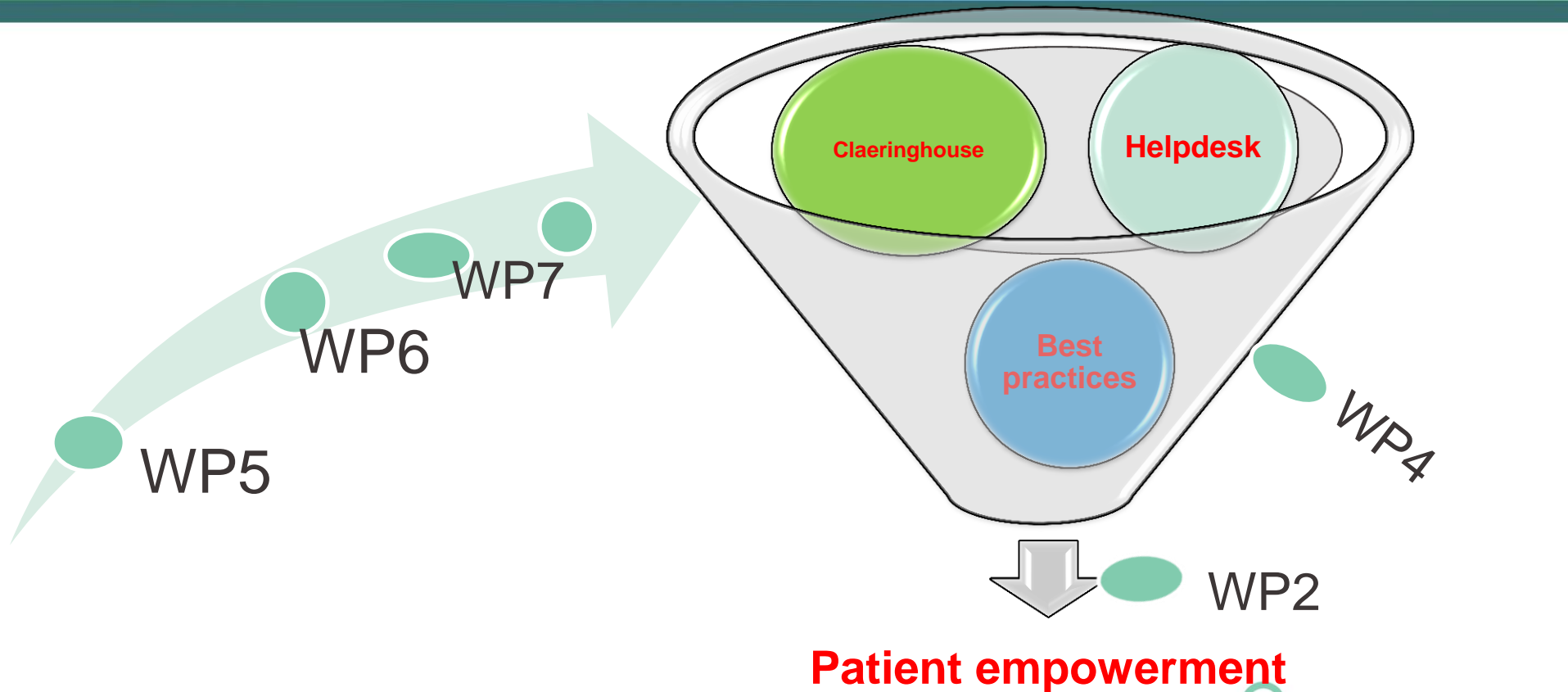
Development of common guidance and methodologies for care pathways for multi-morbid patients

WP7

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

Core work

Interaction in CHRODIS-JA



WP2 - Dissemination

- Dissemination Strategy including guidance.
- Visual Identity promotional materials: leaflet, posters.
- CHRODIS-JA website
 - To be linked with WP4 Platform for Knowledge Exchange (on-line help desk, clearinghouse)
- Bi-annual newsletter
 - Content provided by the coordinator, WP leads and EuroHealthNet
 - EU developments and updates on other JA's and on EIP AHA
- Webinars
 - Discussion of general outcomes and share good practices
- CHRODIS-JA section on EIP AHA.

WP3 - Evaluation

- **Monitor progress.**
- **Ensure evaluation delivered on time.**
- **To assess the impact of the Joint Action.**

THE CORE WORK PACKAGES – WP4

- A platform for knowledge exchange will be developed as an agora, where decision-makers, caregivers, patients, and researchers, will be ideally able to exchange the best knowledge on chronic care across Europe.
- It will be composed of two outputs:
 - a web-based clearinghouse, and
 - an on-line help-desk

Clearinghouse: objectives

- Building a dynamic repository of those considered best practices under the CHRODIS standards.
- Setting a digital library with all the high quality knowledge (disease-specific reports, methodological handbooks, CC interventions, etc.) produced by the different WPs.
- Gathering on-line resources about Chronic Care.

Help desk: objectives

- Assessing chronic care (CC) experiences within the JA, using the CHRODIS standards.
- Providing information and advice on the best existing methodology aimed at implementing CC interventions in different contexts.
- Providing information and advice meant to improve the potential effectiveness and efficiency of interventions in Chronic Care.

THE CORE WORK PACKAGES – WP5

- It aims to identify highly promising, cost-effective and evaluated health promotion and chronic disease prevention practices (among the elderly) and to promote the exchange, scaling up and transfer of effective approaches to different regions and countries.
- The focus will be on activities that address major risk factors such as poor diets, physical inactivity, smoking and alcohol abuse as well as the wider determinants that influence the development of chronic diseases, particularly diabetes type II and cardiovascular diseases.
- The central focus will be put on eliminating health inequalities and a specific focus on addressing the needs of elderly and disadvantaged groups such as migrants, lower socio-economic groups, and unemployed people.

THE CORE WORK PACKAGES – WP6

- 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).

THE CORE WORK PACKAGES – WP7

- To improve coordination and cooperation of Member States to act on diabetes.
- To focus on aspects of primary prevention, identification of people at high risk, early diagnosis, secondary prevention, and comprehensive multifactorial care, with attention to equity, and how social determinants may affect people's access to care.
- To explore the significance of health literacy and patient empowerment.
- To support the development and implementation of Member States' National Diabetes plans.

CHRODIS-JA

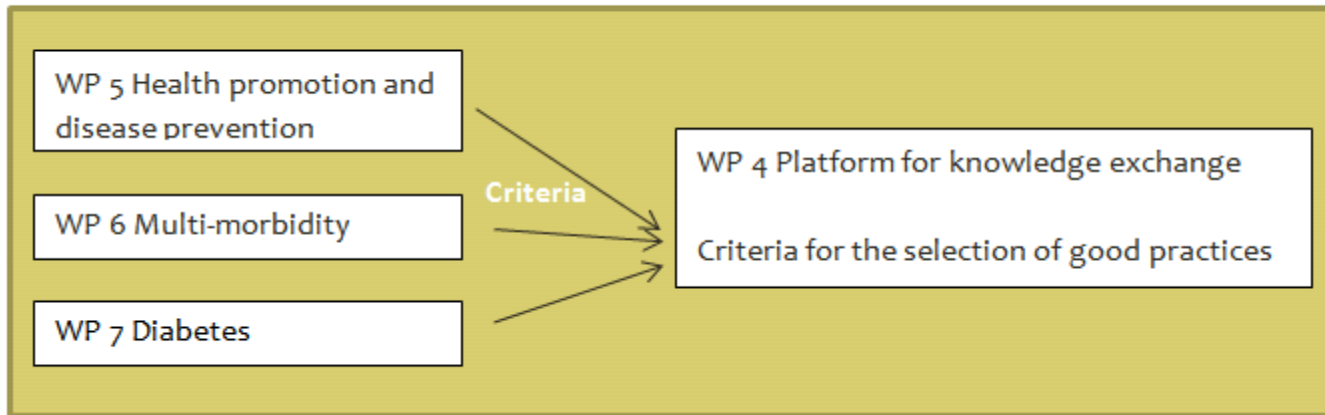
A SHARED PROJECT JOINING EFFORT FOCUSING COMMON GOALS ON CHRONICITY

To be delivered at the end of the 3-years funding by the EC:

- **A platform for knowledge exchange**
 - where decision-makers, caregivers, patients, and researchers, will be ideally able to exchange the best knowledge on chronic care across Europe
 - based on the web-based repository and the online help-desk fed by the core WPs
- **Activities disseminated by WP2**
- **JA performance and outputs evaluated by WP3**
- **With the aim to be a sustainable action after the 3-years EC funding**

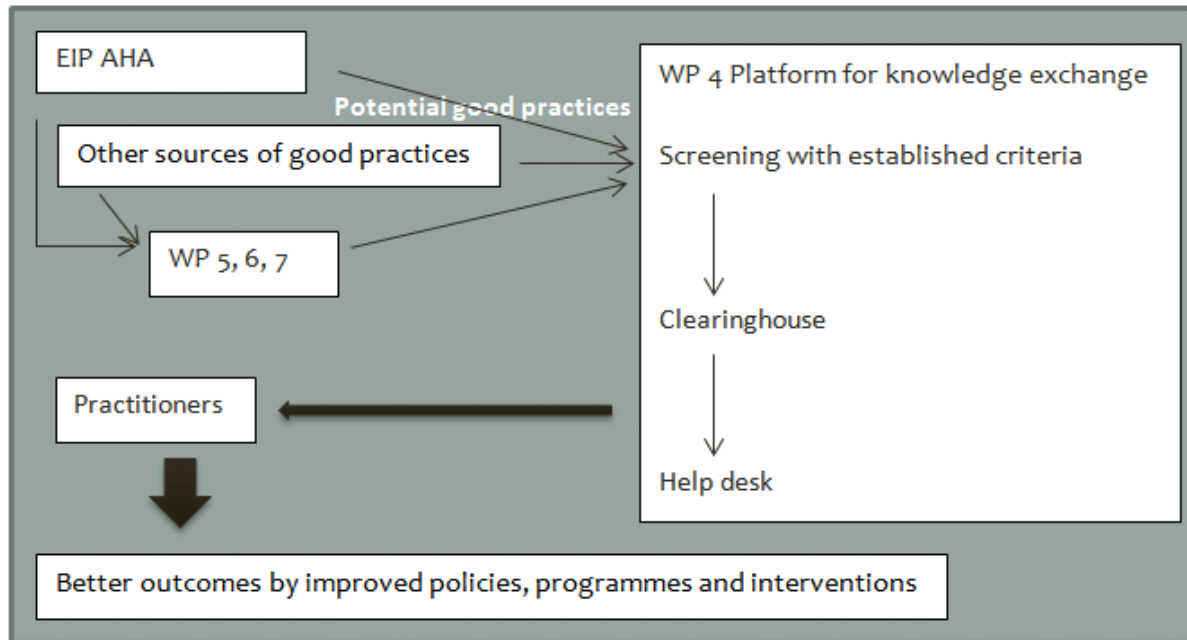
The crucial role of WP4

1 Using quality criteria for practices



The general sense of developing CHRODIS-JA

2 Organizing the flow of good practices



UPDATE

- **Kick-off (30.01.2014), 2 EB meetings organized, SOP delivered**
- **Coordination management team completed**
- **Governing Board on sustainability being set up (MSSSI)**
- **Advisory Board being set up**
- **Dissemination strategy draft ready. Web to be fully operative in July 2014**
- **WP4: Assessment tools and criteria for Delphi consultations are being developed**
- **WP5: Questionnaire on Good Practices in the Field of Health Promotion and Primary Prevention being filled by partners**
- **WP7: Mapping questionnaire on National Diabetes Plans being drafted**

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).