40% of all spending on public services is accounted for by interventions that could have been avoided by prioritising a preventative approach (Scotland)



3% of health care budgets are spent on health promotion



Aim: To identify the best approaches to prevent, manage and treat chronic disease

Cardiovascular Diseases • Stroke • Diabetes type-2 • Multi-morbid conditions

Jan 2014 - Dec 2016

26 Member States, 36 associated partners

Led by: Ministry of Health, Spain and Health Institute Juan Carlos III

EuroHealthNet Members: BZgA (DE), NIJZ (SL), RIVM (NL), THL (FI), IPH-IE

Role of EuroHealthNet:

- Co-lead on Good practice in health promotion and primary prevention
- Lead on Dissemination: visual identity, stakeholder mapping, Communication Strategy, website, biannual newsletters
- Executive Board Member



www.chrodis.eu on-line July 2014

Approach – work strands

- ➤ **Good practice** in health promotion and primary prevention across the life cycle (BZgA [DE] + EuroHealthNet co-lead)
- Development of common guidance and methodologies for care pathways for multi-morbid patients
- ➤ Diabetes: a case study on strengthening health care for people with CD

"Clearing House"



Platform for Knowledge Exchange

For decision-makers, caregivers, patients, and researchers





Good practice in health promotion and primary prevention

Tasks:

- 1. Country Reviews / health promotion/primary prevention 'landscape' (2014)
 - -How identify good practice/databases? Criteria?
 - -Economic Analysis
 - -Foresight Studies
 - -Gaps and Needs?
 - + Supplementary Studies
- 2. Identification of Good Practice Criteria (end 2014)
- 3. Identification of Good Practice -3 per country (2015)
- 4. Conference(s?) to exchange (end-2015)
- 5. Study visits / Transferability (2016)

