

Review highest priority project issues: Towards sustainability by assessing the added value

Topic Proposal 1: Evaluation plan:

WP activity assessment and global impact of the JA-CHRODIS

6th Executive Board Meeting


11th of June, Treviso (Italy)



WP3: Evaluation. Carme Carrión (Aguas)

WP1: Coordination. Teresa Chavarría (ISCIII)

11th of June. Session II: Review of highest priority project issues towards sustainability. 14:30-17:00.



TP1	14:30-15:15 (45 minutes)	Topic Proposal 1: Evaluation plan: WP activity assessment and global impact of the JA-Chrodis. Presentation: WP3 (with support of the Coordination Team) Guided Discussion: Coordinator.
TP2	15:15-16:00 (45 minutes)	Topic Proposal 2. Dissemination of the JA at the policy level: target groups, messages and formats. Presentation: WP2 (with support of the Coordination Team). Guided Discussion: Coordinator
TP3	16:00-16:45 (30 minutes)	Topic Proposal 3: Road Map for collaboration with the EIPonAHA initiative. Presentation: WP Leaders involved. Guided Discussion: Coordinator.
	16:45-17:00	Wrap up (Coordinator)
Social event organized by host		

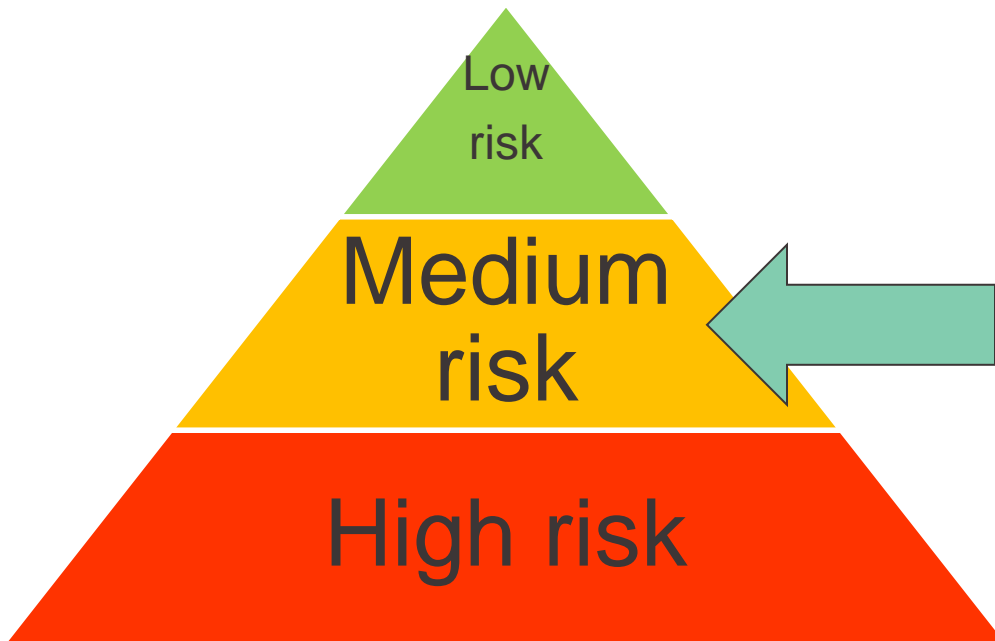
Evaluation plan: WP activity assessment and global impact of the JA-CHRODIS

JA-CHRODIS Evaluation Plan: present status.

- The evaluation plan was to be developed in 2014.
- This could not be achieved due to work package leader withdrawal.
- New partners began field work of the Evaluation plan in February 2015.
- A proposal of WP indicators has been discussed with WP Leaders and should be concluded by the end of June.
- Final Work Plan should be concluded in July.



Level of Risk of the topic



We are on the right track, but we cannot relax.

Structure of the Work Plan

- Logical Framework.
- Indicators proposal: detailed description of the indicators and the methodology used to evaluate each WP.
- Global Impact Assessment proposal: description of the dimensions/indicators proposed to evaluate the outcomes of JA-CHRODIS.

Why is it important to include an impact assessment proposal of the JA-CHRODIS in the Evaluation Plan?

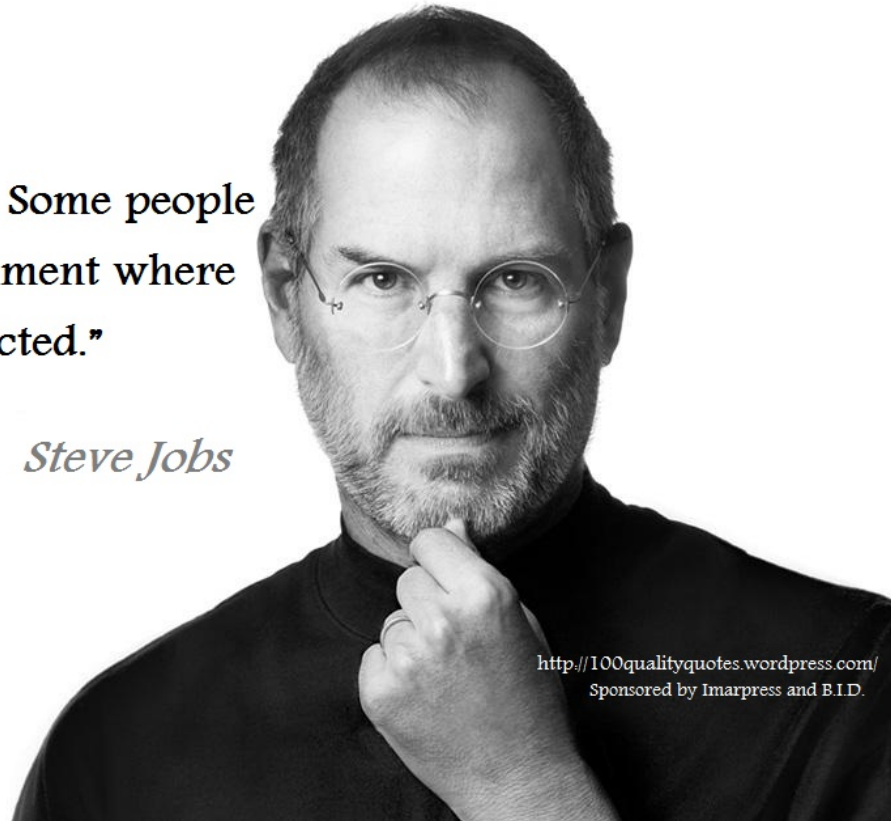
- Strengthen the quality of JA's outcomes:
 - Evaluation helps to clarify objectives, define outputs, results and outcomes, describing the **theory of change** related to our main objective goal: the exchange and transfer of good practices.
 - Impact assessment shows how effective an action has been and the extent of its impact at the point of assessment.
- Reinforce the sustainability of the JA-CHRODIS (will feed the Governing Board's actions for sustainability).

Documents at the EC level that support a complete Evaluation and Impact Assessment of the JA-CHRODIS.

- Conclusions on the Mid-Term Evaluation of the Health Programme (2008-2013):
 - Scope for improvement of intervention logics and indicators in proposals of the funded projects (pages 79-80).
- Conclusions from the Court of Auditors Health Programme 2003-2007:
 - Definition of expected project results, identification of target groups and planning for sustainability the exception rather than the rule.

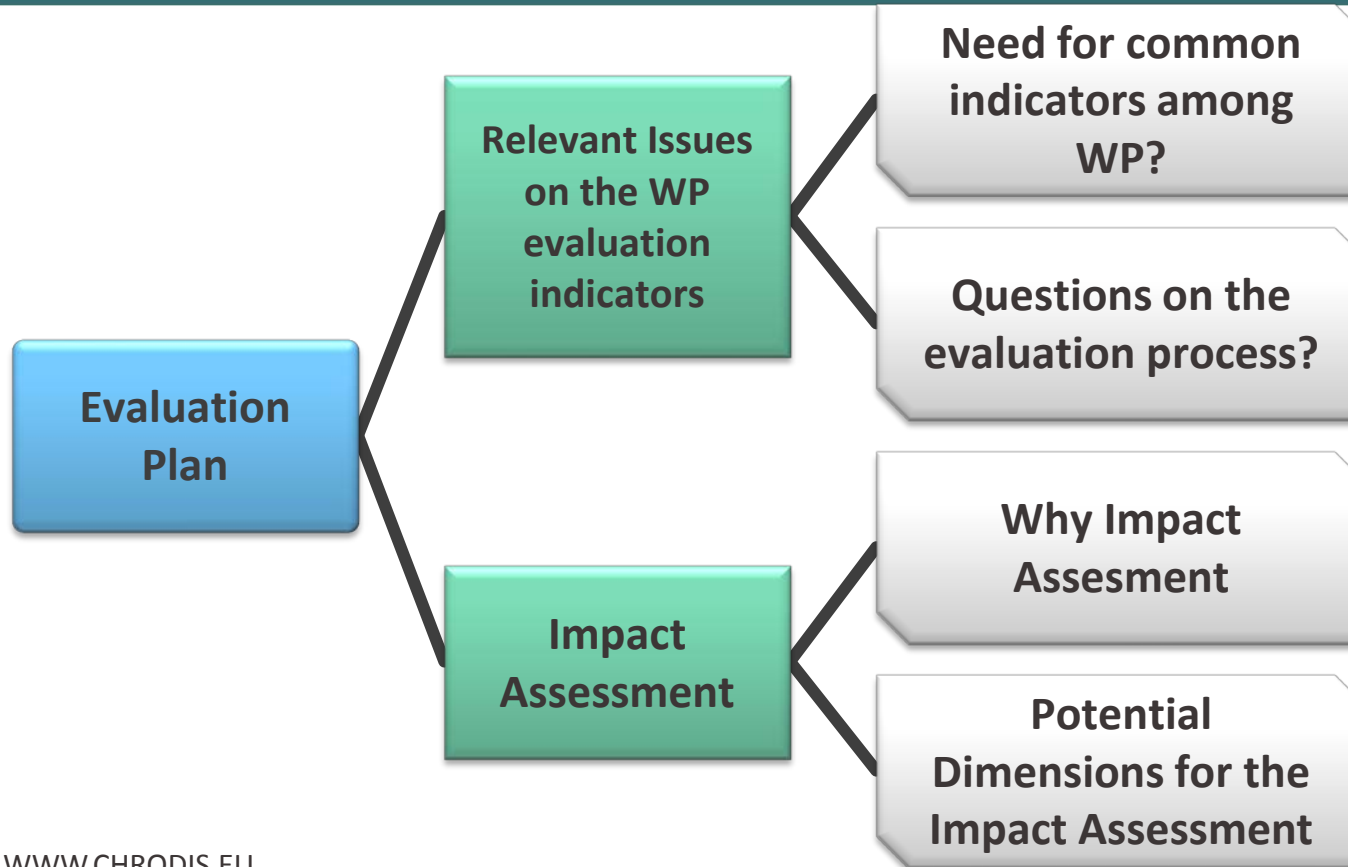
“Be a yardstick of quality. Some people
aren't used to an environment where
excellence is expected.”

Steve Jobs

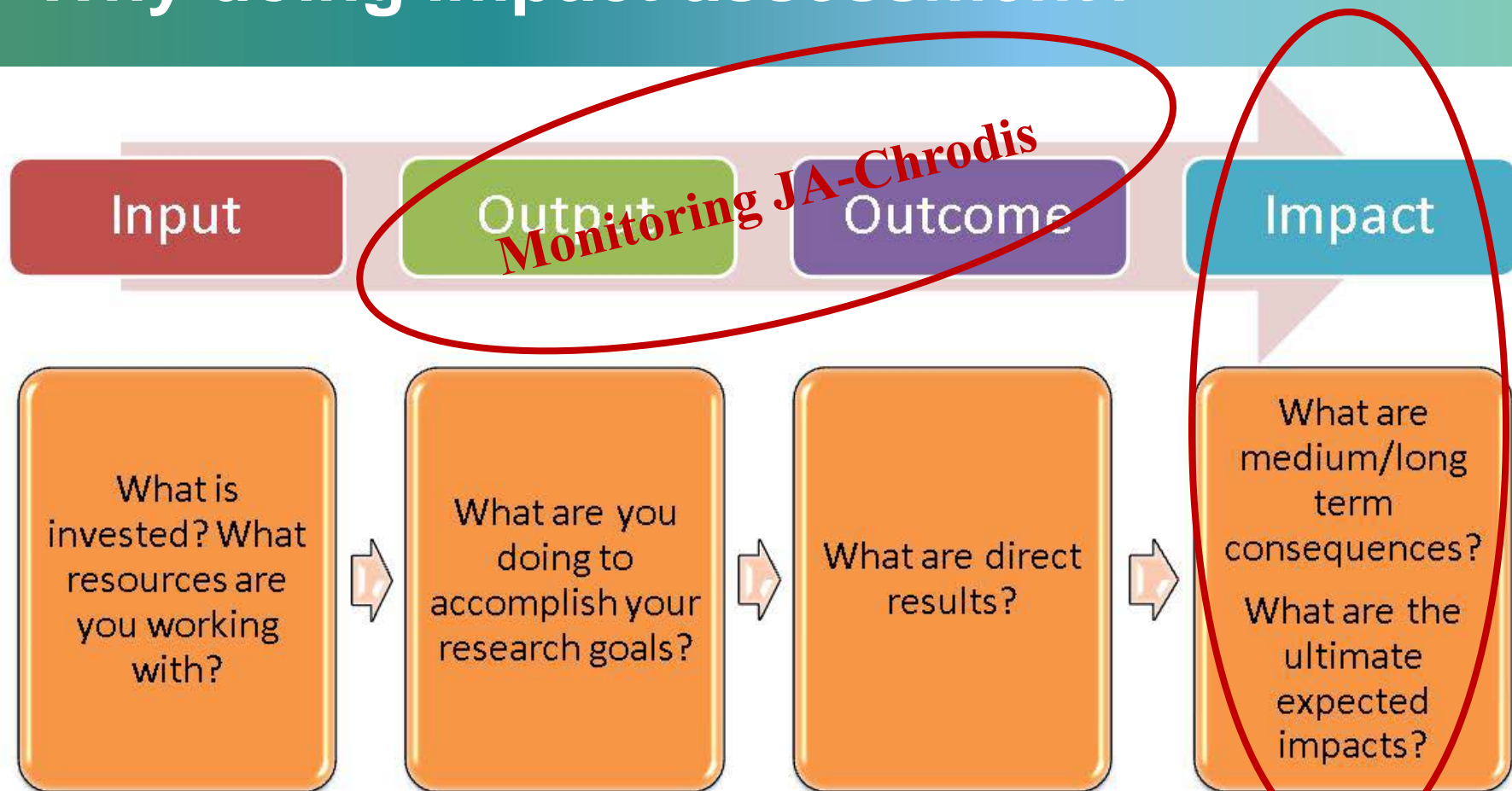


<http://100qualityquotes.wordpress.com/>
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What has to be discussed in this slot?



Why doing impact assessment?



Why doing impact assessment?

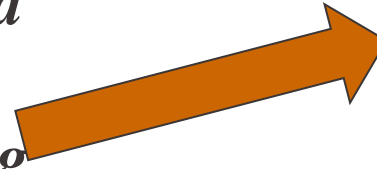
Accountability???

“to show that money and other resources have been used efficiently and effectively, and to hold to account”



Proposal of Dimensions for the Impact Assessment

“The objective of CHRODIS-JA is to promote and facilitate 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 prevention of chronic conditions, multi-morbidity and diabetes.”



Implicit result in improved outcomes of policies, programmes and clinical or public health interventions on chronic conditions.

Grant Agreement Number 2013 22 01

ADDRESS CHRONIC CONDITIONS

REVIEW EXISTING PRACTICES & LITERATURE

WP 5 Health promotion and prevention of chronicity
WP 6 Common guidance for care pathways for multi-morbidity
WP 7 Diabetes: a case study

IDENTIFYING POTENTIAL GOOD PRACTICES

WP 2 Dissemination
WP 5, 6, 7
WP 1 Coordination / EIP AHA

FACILITATE EXCHANGE & TRANSFER

PRACTICES SELECTION CRITERIA Delphi WP 4, 5, 6, 7
PLATFORM FOR KNOWLEDGE EXCHANGE WP 4
SELECTING GOOD PRACTICES WP 2, 5, 6, 7

PROMOTE EXCHANGE & TRANSFER TRAINING & RECOMMENDATIONS

WP 5 Conference seminars / Study visits
WP 6 Case management training
WP 7 Education strategies professionals and patients /
Guideline NDP

TRANSFER OF GOOD PRACTICES

NEW GOOD PRACTICES for

Policy makers / Public health officials /
Health care managers / Clinicians
Population

BETTER QUALITY OF CARE
BETTER HEALTH OUTCOMES

Proposal of Dimensions for the Impact Assessment

DIMENSION	ADDRESSING CHRONICITY. SELECTION OF POTENTIAL GOOD PRACTICES
CRITERIA	

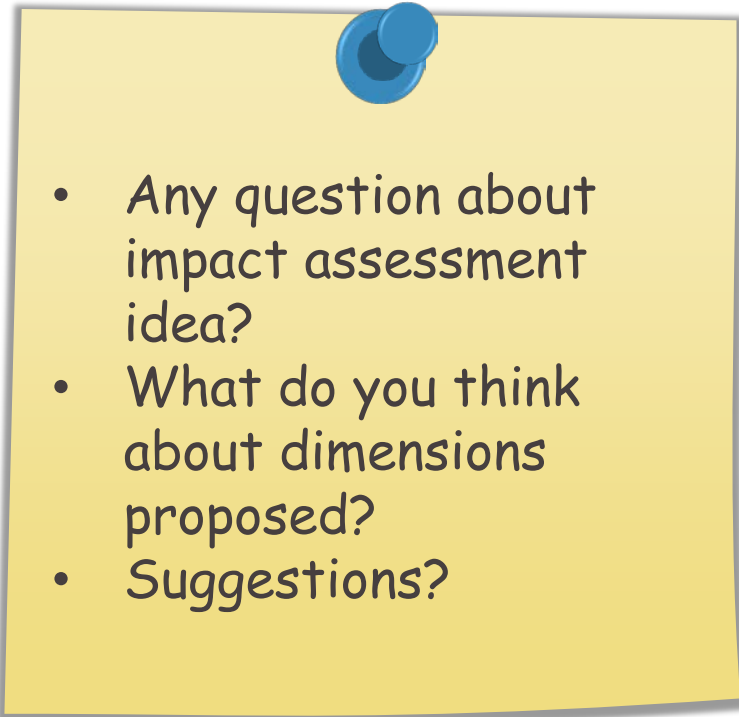
DIMENSION	FACILITATE EXCHANGE & TRANSFER, BUILDING PKE
CRITERIA	PROFESSIONALS ARE TRAINED AND TRANSFER GOOD PRACTICES THE PKE IS WELL KNOWN, IS SATISFACTORY AND THEY UPLOAD THEIR PRACTICES

DIMENSION	PROMOTE EXCHANGE AND TRANSFER, TRANSFERABILITY OF GOOD PRACTICES
CRITERIA	GOOD PRACTICES ARE WELL DESCRIBED, TRANSFERRED AND EVALUATED

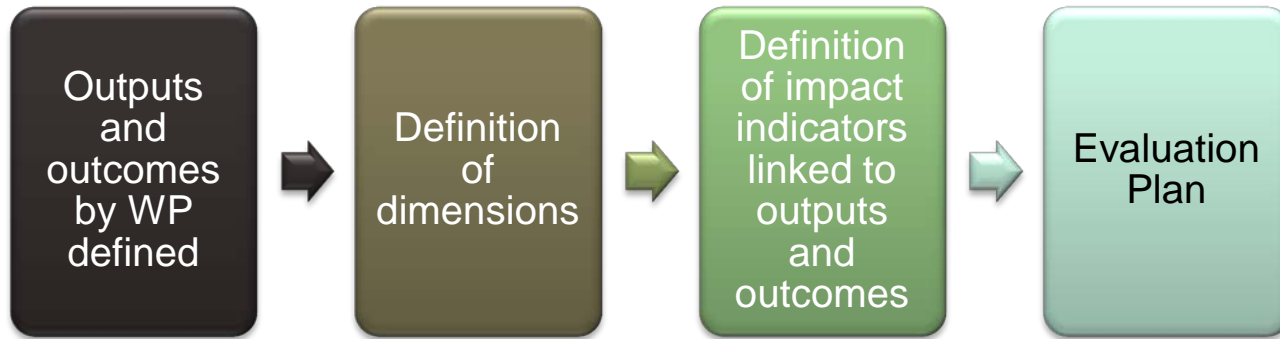
DIMENSION	EFFECTIVENESS (MAIN OBJECTIVE)
CRITERIA	GOOD PRACTICES ARE EXTENDED, INCREASE QUALITY OF CARE AND HEALTH CARE OUTCOMES

<div> <div>DIMENSION</div> </div>	<div> <div>PROMOTE EXCHANGE AND TRANSFER, TRANSFERABILITY OF GOOD PRACTICES</div> </div>	
<div>Output</div>	<div>Outcome</div>	<div>IMPACT</div>
<div> <div>Number of good practices in the clearinghouse</div> <div>Number of study visits</div> <div>N of multi-morbidity case management training programmes implemented</div> </div>	<div> <div>Short list of best practices for scaling up or transferring</div> </div>	<div> <div> <div>Number of (600?) new or innovative practices are implemented based on good practices of the PKE</div> <div>Proportion of new or innovative practices based on the PKE which are evaluated</div> </div> </div>

Questions addressed to the EB

- 
- Any question about impact assessment idea?
 - What do you think about dimensions proposed?
 - Suggestions?

Contingency or mitigation plan



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).

Review highest priority project issues: Towards sustainability

Dissemination of the JA at
Policy Level



Presenter

Ingrid Stegeman and Anna Gallinat
EuroHealthNet

Dissemination at the policy and health professional level: target group, messages and formats (1)

Effective Dissemination

- Broad messages through e.g. newsletters, updates, press releases raise awareness about JA-CHRODIS;
- To maximise effectiveness/sustainability **target messages to specific audiences**;
- **Messages to and formats** used to reach policy makers, practitioners, and the → scientific community **may differ**;
- Also differences within these target groups.



E.g. differences between policy makers at EU, national, regional, local level and differences between EU MEPs, EC officials, EU Health attaché's, COR reps.



E.g. policy briefs, scientific articles, reports with references to further information, conferences, meetings

Dissemination at the policy and health professional level: target group, messages and formats (2)

Dissemination Guidance document:

Interest			
P O W e r		Low	High
	Low	Minimal effort	Keep informed
	High	Keep satisfied	<u>KEY PLAYER</u>

Figure 2: Identifying Key Stakeholders (Mendelow)

Key questions

- What are our objectives?
- Who can help us achieve these?
- What do they need to know from JA-CHRODIS to influence them to take the action needed to help achieve our objectives?

Dissemination at the policy and health professional level: target group, messages and formats (3)

- Example WP 5 –good practices in health promotion

Message to policy makers:

Health promotion is an important part of the solution to growing health-care needs/costs, but requires more resources and stronger commitment across government

Kinds of policy makers (or advisors to policy makers) at EU-level that can help achieve more resources/stronger commitment:

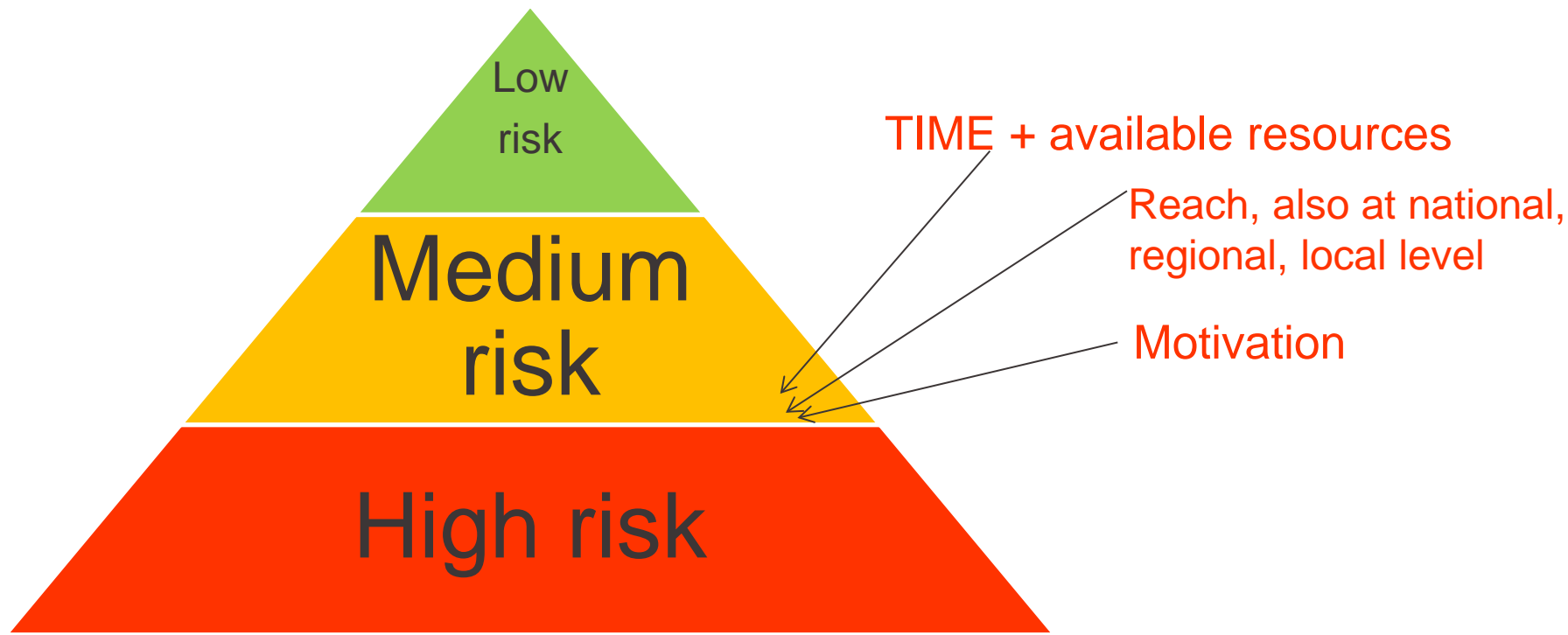
EU level: EC officials, MEPs, Health Attaches, CoR representatives

Formats to reach them: policy briefs, briefings at events, bi-lateral meetings

Versus message to practitioners:

There are good practices out there – learn from European colleagues

Level of Risk of the topic



Action plan

Use available resources wisely to achieve best impacts:

Think first about what impacts we would like to achieve.

Prioritise who should know/what they should know/what we would like them to do, to ensure this.



WP leads undertake this exercise for their respective work packages with the engagement of their partners

(+ ask partners to update stakeholder lists with results of this exercise in mind)



WP leads commit to at least three actions, beyond planned activities, to follow up on priorities

Questions addressed to the EB



- What are planned activities in your WP to disseminate to specific 'key players'?
- Is this contingency plan feasible? (*identifying 'key players' that can help achieve objectives and planning more dissemination activities to engage them.?*)
- Who should be responsible for shaping main WP outcomes into policy-briefings?
- How can we involve the governing board in policy-level dissemination?
- How can we engage JA-CHRODIS partners more?

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Topic Proposal 3:

Road Map for collaboration with the EIPonAHA initiative

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WP1: Coordination. Teresa Chavarría (ISCIII) WP2: Communication. Ingrid Stegeman and Anna Gallina.
WP4: Enrique Bernal and Ramón Launa.
WP6: Graziano Onder and Rokas Navickas
WP7: Marina Maginni and Jelka Zalatel.

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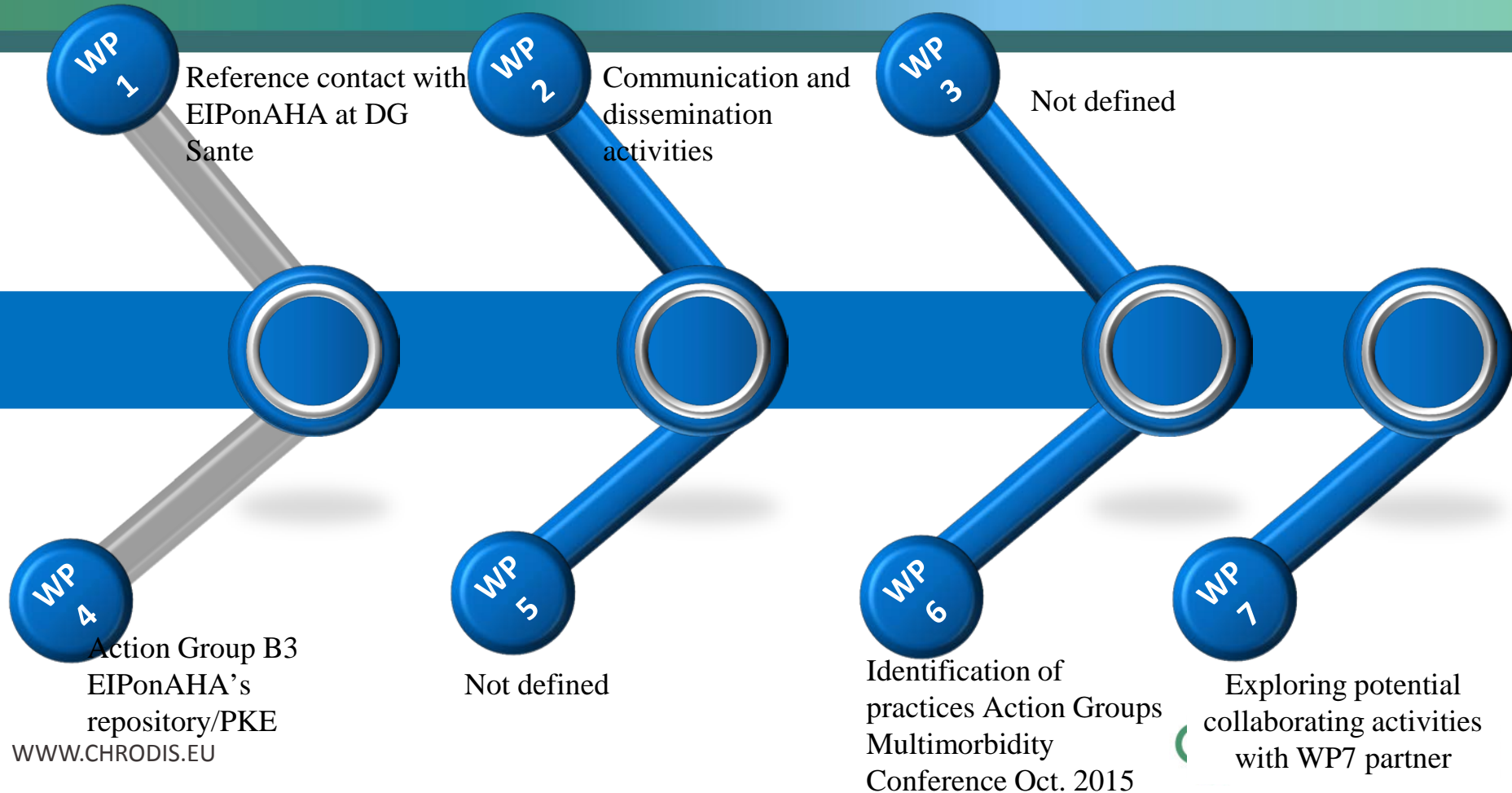
EIPonAHA's RoadMap for Action Groups and Reference Sites 2015

Relevant information

- EIPonAHA has established a Road Map 2015 for the Action Groups and Reference Sites:
 1. Implementation of their Action Plans (including their involvement in the development of the repository –ProEIP-).
 2. Call for reference Sites.
 3. Monitoring.
 4. Communication.
 5. Market Place-Repository.



CHRODIS collaboration with EIPonAHA



JA-CHRODIS-PKE and EIPAHA repository: Convergence Challenges

**EIP-AHA and C-PKE
common classification**

**C-PKE as assessment tool for
EIPAHA B3 AG members**

Convergence

**EIPAHA repository registries
linked to the C-PKE Digital Library**

JA-CHRODIS-PKE and EIPAHA repository: Issues that can impact on the assessment, exchange and transfer of practices

EIPAHA repository functionalities including “submission of new content”

EIPAHA repository first version available by June 2015

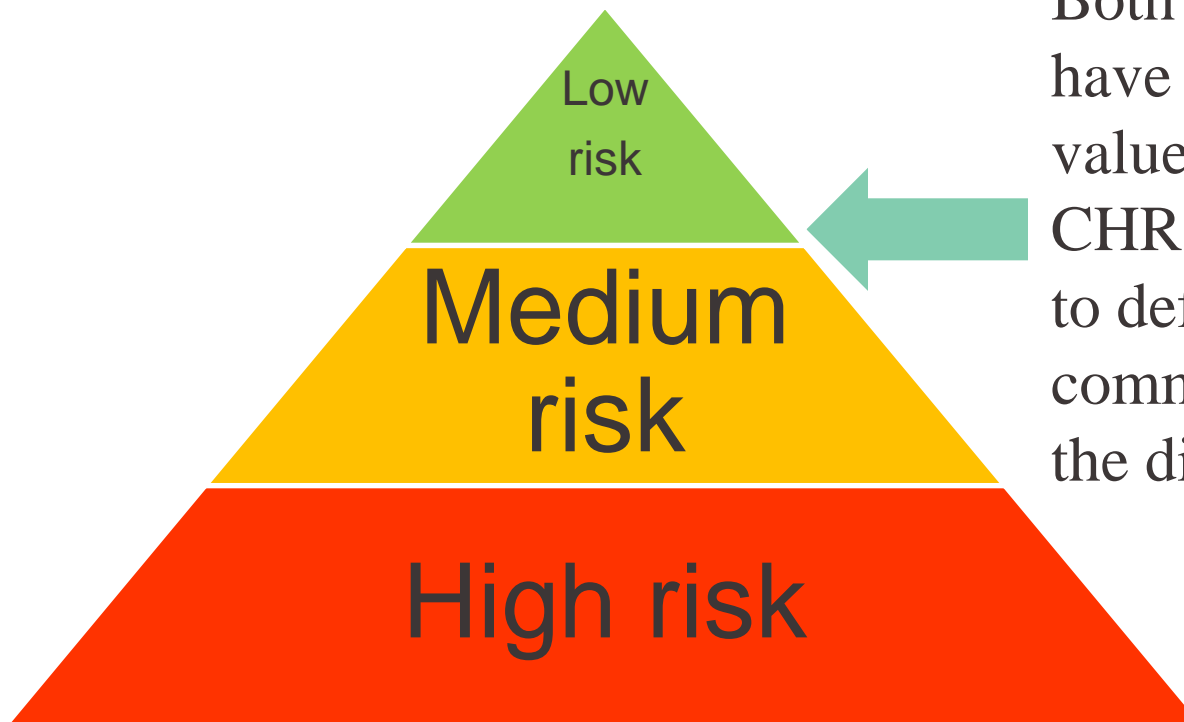
Convergence

EIPAHA repository classifies practices as good/notable/promising, and CHRODIS-PKE as best/good/candidate

Why is it important for JA-CHRODIS this collaboration.

- Sustainability: EIPonAHA's Action Groups will be encouraged by the EC to submit practices/interventions to our PKE. Viceversa for JA-CHRODIS partners.
- EIPonAHA's repository (ProEIPAHA): convergence elements that can contribute to future communication among platforms.
- Build on Synergies: creating synergies means becoming more than a sum of the parts. Building bridge among professionals, stakeholders, patients...
- Identification of uncovered necessities or divergencies can help JA-CHRODIS to focus our activities.

Level of Risk of the topic




Both initiatives have their values, but JA-CHRODIS has to define and communicate the difference.

Contingency or mitigation plan



Questions addressed to the EB

- 
- Do you think we considering all possibilities of collaboration?
 - Do you think the proposed Road Map for the PKE and ProEIPAHA's repository considers all relevant elements?
 - What is the JA-CHRODIS added value with respect to the EIPonAHA's repository.

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Priority topic goes here



Presenter
Institution

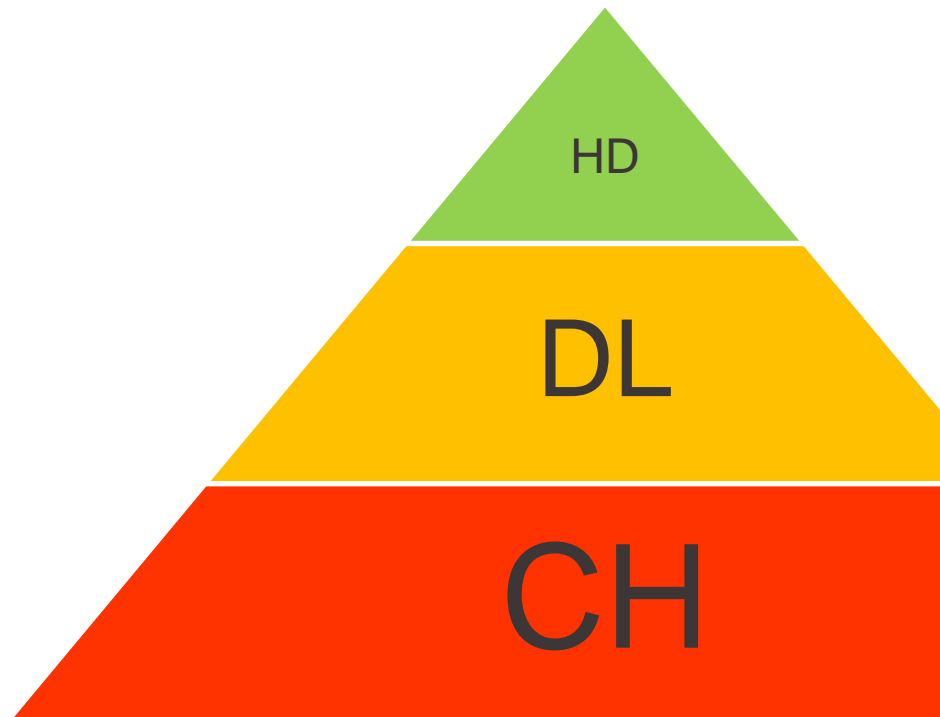
PKE & EIP-AHA repository

Relevant information

- EIP-AHA needs a repository of innovative practices
- Open call – PROEIPAAHA – to fund this repository
- No previous coordination with CHRODIS JA
- EC wants us to find synergies
- **CHRODIS JA is looking for some convergence; some risks are envisaged**

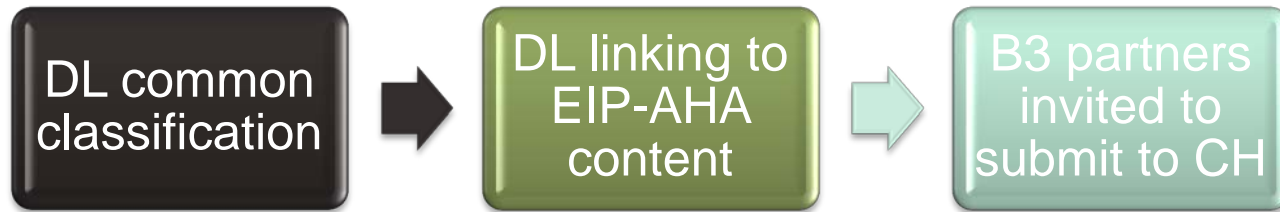


Level of Risk of the topic



- Parallel assessment process
- Easier submission
- Availability June 2015

Contingency or mitigation plan



Questions addressed to the EB

- How to avoid double categorization of practices (Promising, Notable and Good)?

- GB to warn EIP AHA about the risks.
- GB to suggest EIP AHA to store practices as viable and/or mature

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