

JA Chrodis

Assessing practices on chronic diseases and chronic care



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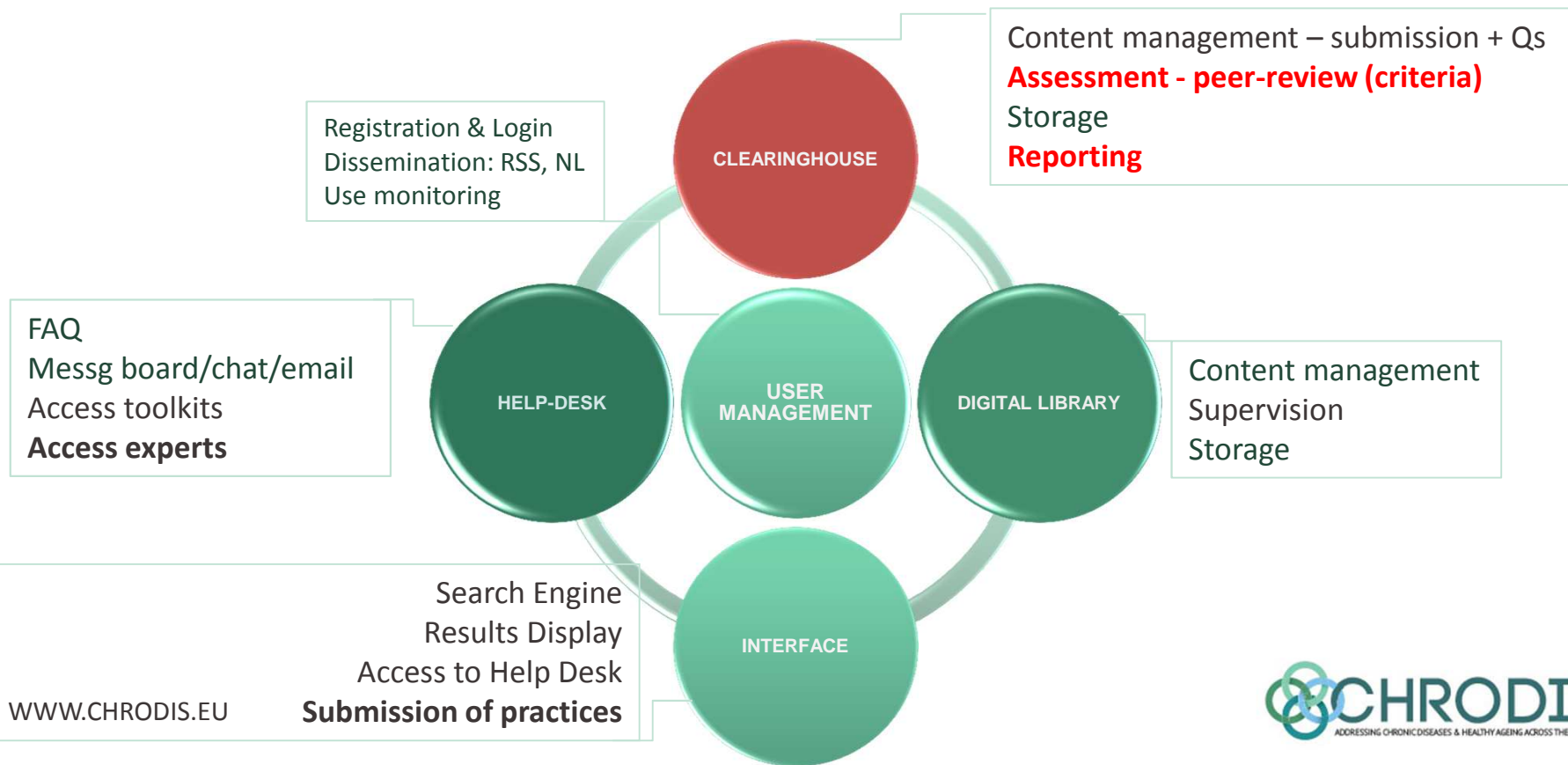
KNOWLEDGE PLATFORM

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

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 **CHRODIS**
ADDRESSING CHRONIC DISEASES & HEALTHY AGEING ACROSS THE LIFE CYCLE

PKE COMPONENTS



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Delphi-RAND modified panels

DEFINITION OF ASSESSMENT CRITERIA



FOUR EXPERT PANELS WILL AGREE ON THE CRITERIA & CATEGORIES UNDER WHICH PRACTICES SHOULD BE ASSESSED

On health promotion and prevention

On organizational or systemic change

On patient empowerment practices

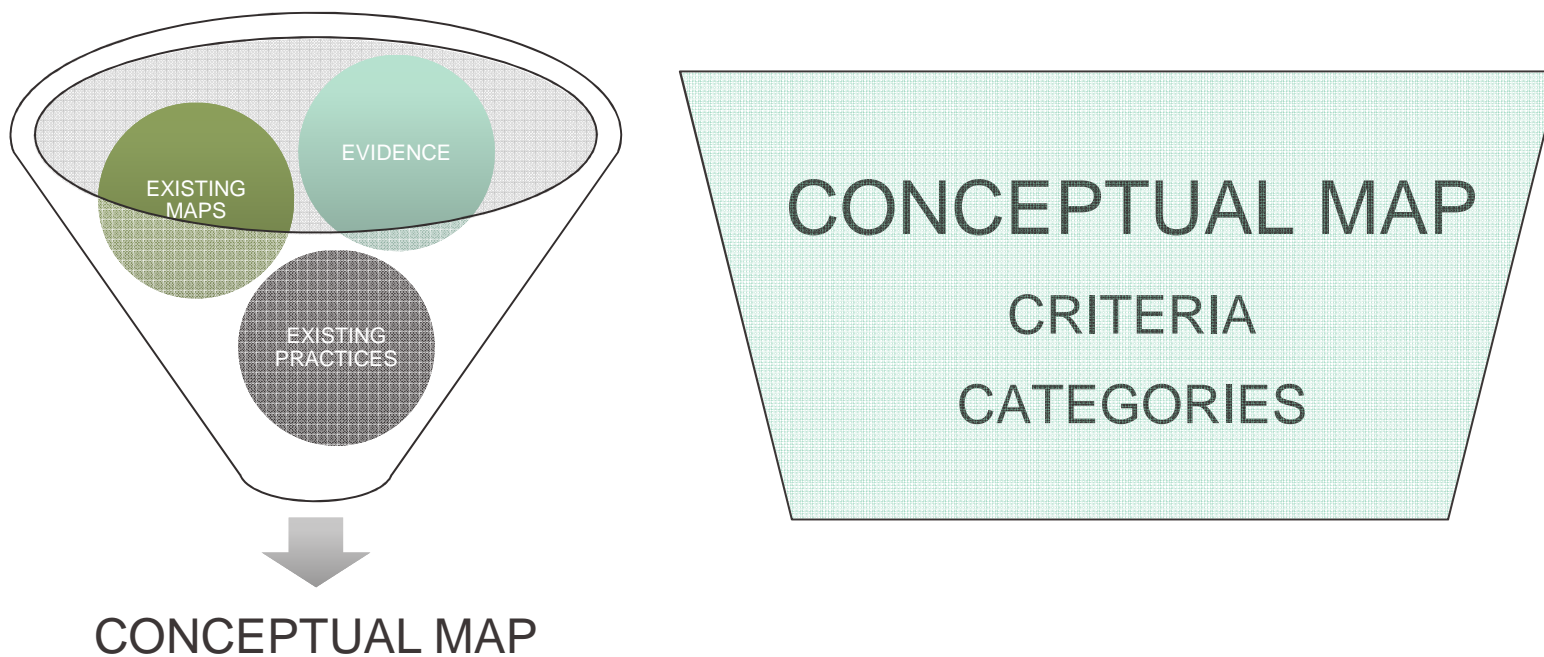
On diabetes – as disease-specific case study



CONSENSUS PANEL: 7 stages

- KNOWLEDGE REVIEW
- BUILDING A CONCEPTUAL MAP OF CRITERIA AND CATEGORIES
- BUILDING AN ON-LINE QUESTIONNAIRE
- 1ST ON-LINE ROUND - RELEVANCE
- 2ND ON-LINE ROUND - PRIORITY
- FACE TO FACE MEETING – SCALE AND WEIGHTS
- FINAL LIST OF ASSESSMENT CRITERIA

Background material feeding experts discussion



Criteria & categories

(examples from the Delphi on health promotion and primary prevention)

- Length of the experience
- **Comprehensiveness**
 - addresses several risk factors at the same time
 - addresses several determinants of health at the same time
 - aligned with a policy plan at any decision level
- Multi-stakeholder approach
- Ethical considerations
- Adequacy in terms of capacity and
- Equity
- Target group
- Empowerment and participation
- Sustainability
- Scalability
- Innovation

HOW TO REACH CONSENSUS (i)

3 - The intervention addresses several risk factors or determinants of health at the same time

1 2 3 4 5 6 7 8 9

Not relevant at all

Highly relevant

1 - The intervention is aligned with a comprehensive approach to health promotion

1 2 3 4 5 6 7 8 9

Lowest priority



Highest priority

Those relevant with high consensus go to the 2nd round

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
1	Driver	Question ID	N	Median	IQR	Q1			3	4	5	6	7	8	9	Relevant	moderate	no	Total (noUS)
2	1	1	27	6	2	5		1	3	3	7	6	4	2	1	7	16	3	26
3	2	2	27	7	1	7		2	0	1	1	2	9	11	2	22	4		26
4	2	3	27	7	3	5		3	0	4	4	3	4	9	2	15	11		26
5	2	4	27	8	1	7		4	0	0	3	3	6	12	2	20	6		26
6	3	5	27	8	1	7		5	0	0	0	5	8	7	6	21	5		26
7	3	6	27	8	2	6		6	1	0	1	5	6	11	2	19	6	1	26
8	3	7	27	6	2	5		7	1	1	5	10	6	2	1	9	16	1	26
9	3	8	27	6	2	5		8	0	2	5	8	8	1	2	11	15		26
10	3	9	27	7	2	6		9	0	1	0	10	7	7	1	15	11		26
11	3	10	27	7	2	6		10	0	0	3	5	9	6	4	19	8		27
12	3	11	27	7	1	6		11	0	0	4	6	13	3	0	16	10		26
13	3	12	27	7	1	6		12	0	2	3	7	10	4	0	14	12		26
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15	5	14	27	8	1	7		14	0	0	2	1	7	13	3	23	3		26
16	5	15	27	8	1	7		15	0	0	0	3	7	9	7	23	3		26
17	6	16	27	8	1	7		16	0	0	1	1	7	10	7	24	2		26
18	6	17	27	8	1	8		17	0	0	0	1	4	13	8	25	1		26
19	7	18	27	8	1	7		18	0	0	0	3	6	13	4	23	3		26
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21	7	20	27	7	1	7		20	0	0	0	5	10	9	2	21	5		26
22	7	21	27	7	1	7		21	0	0	2	3	9	10	2	21	5		26
23	7	22	27	8	1	7		22	0	0	2	3	6	14	1	21	5		26
24	8	23	26	7	1	7		23	0	1	1	1	12	9	1	22	3		25
25	8	24	27	8	1	7		24	0	0	0	1	9	12	4	25	1		26
26	8	25	27	8	1	7		25	0	0	0	3	9	11	3	23	3		26
27	8	26	27	7	1	7		26	0	1	0	3	10	6	6	22	4		26
28	9	27	27	7	1	7		27	0	0	1	3	12	9	1	22	4		26

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HOW TO REACH CONSENSUS (& ii)

1/15   **Comprehensiveness of the intervention**

The following items are those on which all experts have agreed as being highly relevant (7-9 score) for assessing practices during the 1st round.

1 - The intervention is aligned with a comprehensive approach to health promotion

1 2 3 4 5 6 7 8 9

The following items are those for which experts' opinions were divided and no consensus was achieved in the first round

3 - The intervention addresses several risk factors or determinants of health at the same time


1 2 3 4 5 6 **7** 8 9

Not relevant at all Highly relevant

N: 1

Median score

1 2 3 4 5 6 7 8 9

 Move the pointer over the chart to get descriptions of represented items

F2F GOAL

Decide on criteria and categories that will compose the final questionnaire to be used to assess practices throughout peer-review

On those highly relevant and priority criteria

12	Evaluation framework and regularity	50	Outcomes assessment focused on health impact (i.e. mental, physical and social status)
14	Relevance and assessment outcomes	54	Evaluation results were relevant (focused on health impact and satisfaction with care experience), and linked to the stated goals and objectives.
14	Relevance and assessment outcomes	55	Evaluation results were linked to actions to reshape the implementation accordingly.
		56	Outcomes assessment enabled outcome-based contracts (few, clear, concise and readily communicated indicators).

Tasks

- Avoid duplications across categories
- Merging category 50 with 54?
- Rephrasing any
- Allocating 100 points across categories

Final task: weighting criteria (allocate 100)

SHARE

1. Leadership	
2. Interaction with regular care delivery structure and society network	
3. Intervention Design	
4. Patient centeredness	
5. Context and Determinant Analysis	
6. Capacity and Resources	
7. Sustainability	
8. Evaluation	
9. Scalability and knowledge exchange	
10. Implementation	

WP7 Delphi - planning

- **Background material:**
 - **Criteria** from the other **3 D** and Criteria from **WP 7** work – **merged into a single list of criteria & categories**
- **How many rounds?**
 - Maybe 2 - we could skip relevance, 1st on priority and F2F
- **Experts recruitment**
 - WP7 partners plus any other missing profile
- **Timeline**
 - First online round: **15th February - 14th March** (a week extension till 21st March)
 - Second online round: **11th April – 9th May** (a week extension till 16th May)
 - Face to face: **16th - 17th June 2016**

Experts' job

Agreeing on:

1. the list of relevant **categories and criteria** for practice assessment
2. attaching a **relative weight** to each **category**
3. Attaching a **relative weight** to each **criteria**



** This presentation arises from the Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS), 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 Consumers, Health, Agriculture and Food Executive Agency is not responsible for any use that may be made of the information contained therein.*

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Experts recruitment from WP#7

- Expert profiles: **structural** representation of the **range of views** on the **key elements to assess a practice**
 - **Area of expertise:** clinical, epidemiology, social intervention, management, economics, policy;
 - **Type of stakeholder:** health professionals, patients, decision-makers and academics;
 - **Type of health system:** gate-keeping/free navigation, community anchored/individual patient anchored, in-patient oriented/outpatient and home care oriented, integrated with social care/ coordinated with social care, intensity of cost-sharing, etc.
- Country and gender balance