

Joint Action on Chronic Diseases and Promoting Healthy Ageing Across the Life Cycle

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

Report
4th WP7 Meeting
Workshop on NDP
20 - 21 October - Ljubljana, Slovenia



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The objective of this 4th meeting was analyse collected data on processes in NDP development, implementation, sustainability. This meeting will also aim to present an update of the work package activities, to exchange and receive the contribution from the participants, to improve the collaboration among all the partners towards achieving the objectives of the WP7.

The list of participants that included experts policymakers from WP7 is available.

AGENDA

- Opening session
- Expectations and support from EC
- Workshop to complement and give opinion on Policy Brief on National Diabetes plans
 - What does the Policy Brief seek to achieve?
 - Content and structure of the Policy Brief
 - Key messages and policy options
- Update of WP7 activities
- Quality criteria for diabetes prevention and care – The Delphi method
- Quality criteria – The lists
- SWOT Analysis
- Social and psychological barriers for the access to care
- The process toward the draft Recommendations
- Report on prevention and management of diabetes
- Practices on diabetes prevention and care

October 20th

Opening session

Jelka Zaletel and Marina Maggini welcomed all the guests and thanked for numerous participation. They emphasised the importance of this meeting due to further steps and development of JA CHRODIS.

Tatjana Buzeti (Ministry of Health, Slovenia) welcomed all the guest and participants of the meeting. She presented Slovenia's activity in the field of tackling chronic diseases, like diabetes. Recently Slovenia has been active in many fields. Thorough health system analysis is in progress, which will serve as a basis for the health system reform. National dietary in activity plan has been adopted this year. Also a lot of work has been done in the field of inequality and empowerment of patients and health care workers. JA CHRODIS is recognised as an important contribution to knowledge exchange, exchange of good practices, and a case study in other fields (e.g. other chronic diseases).



Overview of the progress in the WP7

Teresa Chavarría Giménez emphasised that the work on WP7 is progressing well, as well as on the other work packages. Communication is good, there have been a number of good articles published. The CHRODIS mission is not only to disseminate but also to reach other stakeholders and policy makers. It is important to understand the added value of JA CHRODIS, which is to work together in cooperative way in order to make changes, to cross boundaries and to learn from each other.

Expectations and support from EC

Wolfgang Philipp from the European Commission talked about the beginning of this joint action, of its roots and commented the work done so far on JA CHRODIS, and WP7. He also thanked the organization team for preparing this meeting. Commission offers its political and financial support for the development of policies, which could be implemented. He explained the EC's expectations from JA-CHRODIS team. Diabetes stood out from the beginning of this JA. Better management of chronic diseases will result in better leadership of health care systems. This will be achieved by common work from the EC and Member States. Already after 22 months there are some important documents produced. Policy Brief will be an important contribution to JA with its significant results.

Key points of debate

EC does not have a special role in promotion of JA results. Results will be disseminated through the existing, usual channels on national levels. There is no current plan to organise a meeting between EC and health ministries of Member countries, however the results will be included in future political framework.

Workshop to complement and give opinion on Policy Brief on National Diabetes Plans

What does the Policy Brief seek to achieve?

Jelka Zaletel introduced Ellen Nolte and Erica Richardson from the European Observatory on Health Systems and Policies, who moderated the workshop.

Ellen Nolte presented an overview of data and information gathered so far, what still needs to be done, etc. She emphasised that Diabetes is a case study and will serve as a mean of broader understanding of policy making. This policy brief is actually a broad policy mapping. We also have to keep in mind, where Diabetes can contribute to other WP's and in general. The role of Observatory is to take the collected data of WP7 and produce a Policy Brief, which will be as useful as possible. A Policy Brief provides evidence for policy making, not policy advice.

Key points of debate

- *It is important to clarify what will be included in Policy Brief. To describe the outputs of*



the mapping process, to clarify unanswered questions, to highlight good practices that have the potential for scalability or exchange. Additionally the role of NDP was discussed (where they work and how they work), what is its added value, and how can NDP contribute to the proceedings of chronic diseases in general.

- **Summary of key points (Ellen Nolte)**

- *To describe countries' experiences in the development, implementation and evaluation on national diabetes plans.*
- *To understand the added value of NDPs: what is their use and usefulness.*
- *To identify the key facilitators and barriers that make successful NDP.*
- *To assess the lessons that can be learned from NDPs for the development of national strategies for the prevention and management of chronic diseases more broadly.*
- *Keep in mind: Different stakeholders perspectives.*
- *Different starting points.*
- ***Should not compare or rank but focus should be on learning.***

Content and structure of the Policy Brief

Ellen Nolte emphasised four important questions for the content and structure of Policy Brief:

- What examples of “good practices” should be included as textboxes (if any) given that this one of the core objectives of JA CHRODIS?
- How do we address gaps in the evidence collected?
- How do we address the issue that some countries might wish to add further information post-questionnaire?
- There is a suggestion to include tables: which aspects would participants like to see addressed in tables?

Identified cases (examples): Key elements to be considered, success (clinical outcomes, marketing messages: benefits to others- making the business case), other points to include (PLWD – discrimination, stigma, obesogenic society – why wasn't included?).

Key messages and policy options

Issues to consider as proposed by partners/contributors:

- *It is possible to list the facilitators and barriers as identified in this survey and offer some suggestions for the on going monitoring and evaluation of the performance and reviews of NDP's?*
- *What is the impact of having (or not having) an NDP? What works and what doesn't? What are the recommendations?*

- *Is a NDP necessary at all? Is the real important difference the presence or absence of a strategic framework dedicated to diabetes? What facilitates/inhibits the development of such a framework? Is it better for it to be covered under a broader NCD strategy?*
- *How much do local conditions influence NDP processes – are we looking to recommend an ideal NDP or local modifications of some general framework?*
- *How far are we from a European Diabetes Plan? (Do we need it?)*

October 21st

Update of WP7 activities

Marina Maggini and Jelka Zaletel presented an update of WP7 activities.

For the tasks 1 - 4 (prevention of diabetes focused on people at high risk, management of diabetes, health promotion interventions, education strategies and training for professionals) the following have been accomplished: data collection, analysis of data by topic and Country, finalized report, description and collection of practices, definition of quality criteria and SWOT analyses.

For the task 5 (National Diabetes Plans) the following: data collection, analysis of data, drafting report, agreement to write Policy Brief, workshop on Policy Brief.

The WP7 deliverable is: recommendations to improve early detection and preventive interventions, to improve the quality of care for people with diabetes, and to develop National Diabetes Plans. Definition and agreement on a common minimum set of indicators.

Our commitment is to participate in the definition, writing recommendations, to influence policy and decision makers, disseminate results.

Quality criteria for diabetes prevention and care – The Delphi method

Enrique Bernal Delgado presented how to assess practices on chronic diseases and chronic care within the Delphi method. An expert panel (representatives of WP7 partners) will agree on criteria and categories under which practices should be assessed.

The list of criteria developed by WP7 will be used by WP4 team to build a conceptual map of criteria and categories, and to define the questionnaire with the final list of criteria to be submitted to the expert panel.

Quality criteria – The lists

Valentina Strammiello and Mayur Mandalia presented the point of view of the European Patient forum on the preliminary lists of quality criteria on prevention, health promotion, management, education and training. They will suggest other

criteria to be added to the list.

Key points of debate and agreements

The list of criteria is open for discussion until the end of November. For now it is important not to miss any important criteria.

Timeline: first and second online round questionnaire in February-March 2016, face to face in April, final report on the end of April-beginning of May.

Partners will be invited to submit an expert (one expert per partner). The list of experts should be finalised by the end of November.

SWOT Analysis

Angela Giusti presented the scope and the methodology of the SWOT analysis on National policies and programs on prevention and care of Diabetes. She explained how the Country SWOTs will be analysed, and presented some preliminary results of the analysis conducted on the SWOT submitted by the partners

Key points of debate and agreements

Partners are invited to overview all the SWOT analyses on the platform. Partners can also update their analysis, include new dimensions, new stakeholders, etc. The limitation is one SWOT analysis per country. Deadline is 15th November. The overall analysis will be completed by the end of December.

Partners' presentations:

Brigitte Domittner – presented a SWOT analysis from Austria.

Venessa Maria More, as representative of European institute of Women's Health, presented a SWOT analysis from a gender perspective.

Thodoris Katsaras from a 1st Regional Health Authority of Attika presented a SWOT analysis on prevention and management of Diabetes in Greece.

Vendula Blaya-Nováková presented Diabetes strategy in the National Health System in Spain.

Ana Cristina Portugal presented a SWOT analysis on National Plan for Diabetes Prevention and Control in Portugal.

Key points of debate and agreements

Social economic factors are much worse with women than men. There are not a sufficient number of women in clinical trials.

Anne-Marie Yazbeck emphasises that the findings from SWOT analysis should be reflected in Policy Brief.

Social and psychological barriers for the access to care

Silke Kuske presented a systematic review on barriers for access to health care service.

Key points of debate and agreements

Authors of research wish to have partners input into dimensions of access. Together with “Potential access” and “Realized access” also “Equitable and Inequitable access” will be included. Geographical aspects will be considered.

Practices on diabetes prevention and care

Monica Sørensen presented practices on diabetes prevention and care in Norway, and Manuel Antonio Botana Lopez on Galician diabetes experiences in Spain.

The process toward the Recommendations and the Deliverable

Marina Maggini and Jelka Zaletel presented the main activities of WP7 in the next months and in 2016: finalizing Policy brief and Guide on NDP, Delphi consultation, finalized recommendations on prevention and care of diabetes, dissemination of results.

Deliverables: Policy brief on National Diabetes Plans and Guide for National Diabetes Plans

Policy Brief on NDP – timeline:

- Send your inputs as soon as possible to jelka.zaletel@kclj.si; you could be contacted as well from Ellen Nolte/Erica Richardson.
- Next draft of Policy Brief will be available on Nov 5th 2015 for consultation.
- Consultation with WP7 partners+respondents+workshop participants will be done until Nov 10th EOB, sent to jelka.zaletel@kclj.si.
- Policy Brief – version for consultation will be published on Nov 13th 2015 on the CHRODIS web site.

Guide on NDP – timeline:

- First draft app. December 29th 2015.
- Consultation with WP7 partners until app. January 31st 2016.
- Meeting on Guide on NDP during GA, first week of February 2016.
- Final Guide: end of February 2016.



Deliverables – Recommendations on prevention and care:

Content:

- Country experiences (data from the Report).
- Examples of good practices (from those reported by partners).
- Strengths and weakness (from SWOT analyses).
- The recommendations (based on the results of the Delphi).

Recommendations on prevention and care – timeline

- Final list of quality criteria – end of November 2015
- Delphi: definition of the expert panel – November 2015
- Drafting the report /deliverable – end of December 2015
- Delphi: setting the questionnaire – January 2016
- Delphi: round questionnaires – February - March 2016
- Delphi: face-to-face meeting – April 2016
- Formulating the recommendations – April - May 2016
- Reviewing the report /deliverable – May 2016
- Finalizing the report /deliverable – June 2016

Meetings (*date-venue TBD*):

- April (DELPHI) + general WP7 meeting
- June?
- September/October

Key points of debate and agreements

SWOT analysis should be forwarded to The European Observatory on Health Systems and Policies/Ellen Nolte, because of the importance of findings.

Partners will be consulted to define the dates of the meetings to be held during the 2016.

Partners will be reminded and encouraged for further cooperation on dissemination.

The WP7 deliverable is defined (in the Grant Agreement) as follows: “Recommendations to improve prevention of diabetes, and improve the quality of care for people with diabetes”, and its content is described as “Recommendations to



improve early detection and preventive interventions, to strengthen health literacy, patient empowerment and training for health professionals especially, and to develop National Diabetes Plans. Definition and agreement on a common minimum set of indicators.

Marina Maggini and Jelka Zaletel propose to split the deliverable in three parts that may constitute three deliverables. This will help in the process of definition of the document and in the subsequent dissemination of the results.

Deliverable A:

Recommendations to improve early detection and preventive interventions, to improve the quality of care for people with diabetes. Definition and agreement on a common minimum set of indicators – finalized in June 2016.

Deliverable B:

Policy brief on National Diabetes Plans - finalized in February 2016.

Deliverable C

Guide for National Diabetes Plans - finalized in March 2016.

The WP7 partners will be consulted on this proposal. If agreed, the proposal will be submitted to the Coordination team, the EB and to CHAFEA for the amendment.

The participants considered this 4th meeting very useful, they appreciated the organization, the networking and experiences exchange. WP7 has developed a good work.

