

JA-CHRODIS GOVERNING BOARD MEETING

2nd meeting of the Governing Board
JA-CHRODIS
3th February 2016



Follow up on JA-CHRODIS: main milestones & future steps

2nd meeting of the Governing Board
JA-CHRODIS
3th February 2016



Carlos Segovia
Instituto de Salud Carlos III

Follow up on JA-CHRODIS: main milestones & future steps



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SCIENTIFIC
PUBLICATIONS



COUNTRY REPORTS



DELPHI
CONSULTATIONS



GOOD PRACTICES



POLICY BRIEF

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Publications & reports



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Guidelines for Authors

JOINT ACTION ON CHRONIC DISEASES AND
HEALTHY AGEING ACROSS THE LIFE CYCLE

- Report on review of the medical literature and care approaches, administrative databases analyses. (Multimorbidity Work Package)
- “Time to face the challenge of multimorbidity” article in the European Journal for Internal Medicine. (Multimorbidity Work Package)
- *Annali* monograph on diabetes. (Type 2 Diabetes Work Package)



WWW.CHRODIS.EU



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Publications & reports

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European Journal of Internal Medicine
Volume 26, Issue 3, Pages 157-216 (April 2015)
Special Issue on Multimorbidity in the Elderly

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☐ Editorial Board
Page i
 PDF (116 K)

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 PDF (136 K)

Special Issue on Multimorbidity in the Elderly



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Publications & reports



CHRODIS
ADDRESSING CHRONIC DISEASES AND
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Home / MULTIMORBIDITY EXPERT MEETING

« ALL EVENTS »

« CONFERENCE 'WHICH PRIORITIES FOR A EUROPEAN POLICY ON MULTIMORBIDITY?' » EUROPEAN EXCHANGE STUDY VISIT – ASSURING QUALITY IN THE REFORMED ENGLISH NHS »

MULTIMORBIDITY EXPERT MEETING

OCTOBER 28, 2015 @ 09:00 - 17:00

The main achievement during 2015 for the JA-CHRODIS work package on multimorbidity was the development of a framework for care of multimorbidity patients that can be applied across Europe.

First, we identified a list of 20 components across five domains from existing published comprehensive care programs for patients with multiple chronic conditions or frailty. An expert meeting was held in Brussels on October 28, to discuss the components. Sixteen were selected after discussion. During the meeting the experts discussed the definition of the components, aims, key characteristics, target population and relevance for patients with multimorbidity in order to develop a framework for care of multimorbidity patients, including recommendations for delivery of system design, decision support, self management support, clinical information systems, and community resources.

« DIABETES: A CASE STUDY ON STRENGTHENING HEALTH CARE FOR PEOPLE WITH CHRONIC DISEASES »

EUROPEAN EXCHANGE STUDY VISIT – ASSURING QUALITY IN THE REFORMED ENGLISH NHS »

CONFERENCE 'WHICH PRIORITIES FOR A EUROPEAN POLICY ON MULTIMORBIDITY?'

OCTOBER 27, 2015



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Publications & reports

PUBLICATIONS

Home

Annali, the journal of the Italian National Institute of Health, has published a short **monograph** on diabetes, realised with the contribution of the WP7 task leaders. *Annali* is an indexed, peer reviewed, open access journal. The papers focus on the aspects of “quality criteria” and “indicators” as essential tools to monitor the quality of care for people with diabetes. The paper on National diabetes plans outlines the relevance of NDP as a comprehensive action plan to improving diabetes policy, services and outcomes.

Read the papers:

- **Monograph's preface**
- **Education and health professionals training programs for people with type 2 diabetes: a review of quality criteria**
- **Quality indicators for diabetes prevention programs in health care targeted at people at high risk**
- **Health promotion interventions in type 2 diabetes**
- **Health promotion interventions in type 2 diabetes (supplementary materials)**
- **National Diabetes Plans: can they support changes in health care systems to strengthen**



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Publications & reports



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OUTCOMES

The main outcomes of JA-CHRODIS work on diabetes ~~will be:~~

- A **monograph** on diabetes published on *Annali*, the journal of the Italian National Institute of Health
- A final **report** with the results of the survey on practices for prevention and management of diabetes
- **SWOT analysis overview** of national or sub national policies and programs on prevention and management of diabetes
- A set of comprehensive good practices to address type 2 diabetes
- Guidelines on how to develop National Diabetes Plans
- Stronger European cooperation on the prevention and management of type 2 diabetes

DIABETES: A CASE STUDY ON STRENGTHENING HEALTH CARE FOR PEOPLE WITH CHRONIC DISEASES

OCTOBER 10, 2011 @ 09:00 - OCTOBER 21, 2011 @ 14:00



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Country reports



REPORTS

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Overview

In these **country reviews**, 14 partners in JA-CHRODIS WP 5 outline the health promotion and primary prevention landscape in their country. They also describe how they identify and promote good practice, as well as relevant forecasting and cost-effectiveness studies in this area. Finally the country reviews identify gaps and needs in relation to health promotion and the prevention of chronic disease.

Based on 14 country reports, JA-CHRODIS has written an **overview report** which finds significant differences in systems and structures across partner countries, some of these differences include evaluation, monitoring, research and capacity and capacity development. The overview shows that there is a strong need for consistent investment in health promotion and primary prevention in order to reduce the burden of chronic diseases and make health systems more sustainable.

Led by EuroHealthNet ▶

COUNTRY REPORTS

The country reports provide an overview of the health promotion and primary prevention landscape in 14 European countries.

- Bulgaria
- Cyprus
- Estonia
- Germany
- Greece
- Iceland
- Ireland
- Italy
- Lithuania
- Norway
- Portugal
- Spain
- The Netherlands
- United Kingdom

COUNTRY REPORTS AND OVERVIEW

The country reports have been produced by partners in work package 5 to provide an overview of existing work in relation to good practices for chronic diseases and healthy ageing.

- Bulgaria
- Cyprus
- Estonia
- Germany
- Greece
- Iceland
- Ireland
- Italy
- Lithuania
- Norway
- Portugal
- Spain
- The Netherlands
- United Kingdom

- **Overview report – Health Promotion and Primary Prevention in 14 European countries: a comparative overview of key policies, approaches, gaps and needs**

Follow up on JA-CHRODIS: main milestones & future steps

Delphi panels for good practices criteria



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DELPHI PROCESS

Home / Our Work / 04 Knowledge Platform / Activities / DELPHI PROCESS



At
Four
prev
and 3
polic

The first two delphi panels have been carried out and finalised now.

1. Download the final report on health promotion and primary prevention [here!](#)
2. Download the final report on organizational interventions [here!](#)

The first two delphi panels have been carried out and finalised now.

1. Download the final report on health promotion and primary prevention [here!](#)
2. Download the final report on organizational interventions [here!](#)

Follow up on JA-CHRODIS: main milestones & future steps

Good practices



The screenshot shows the JA-CHRODIS website header with the logo and navigation links. Below, a 'Selection' section is highlighted with a green checkmark icon. It describes the selection of good practice approaches across Europe based on criteria developed in Task 2 (mid 2015), led by YPE. At the bottom, a banner for the 'JA-CHRODIS CONFERENCE JOINING FORCES IN HEALTH PROMOTION TO TACKLE THE BURDEN OF CHRONIC DISEASES IN EUROPE' held on 24-25 November 2015 in Vilnius, Lithuania, is visible.

CHRODIS
ADDRESSING CHRONIC DISEASES AND
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ABOUT US OUR WORK OUR PARTNERS

Selection

Selection of good practice approaches across Europe based on the criteria developed in Task 2 (mid 2015)

Led by YPE ▶

JA-CHRODIS CONFERENCE
JOINING FORCES IN HEALTH PROMOTION
TO TACKLE THE BURDEN OF CHRONIC
DISEASES IN EUROPE
24-25 November 2015 • Vilnius, Lithuania

SELECTING 41 GOOD PRACTICES

JA-CHRODIS has produced a summary report on good practices in health promotion and primary prevention of chronic diseases across Europe. It was developed on the basis of the Joint Action's key objective to facilitate the exchange of good practices in tackling chronic diseases among EU countries and regions. The report contains 41 good practice examples from 13 partner countries, reflecting a broad thematic range of interventions across the life cycle and for various settings as well as examples of policies and strategies.

The good practice examples in the summary report are sorted by the stage of life cycle they address. To receive an overview on good practices by country please refer to the executive summary.

Download the documents here

- Full summary report
- Annex outlining all 41 good practices
- Executive summary
- Good practices in health promotion and disease prevention – outcomes at a glance

Follow up on JA-CHRODIS: main milestones & future steps

Monitoring & evaluation

Sustainability



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DELIVERABLES

Year 2 Deliverables



D05: Evaluation Plan: The monitoring and impact assessment framework for JA-CHRODIS

D05-01 Evaluation Plan – Part I: Monitoring

D05-02 Evaluation Plan – Annex: Indicators description

D09: Annual reports on sustainability

D09-01.01 Reports on the conclusions of the discussion of the Ministries of Health Forum on the future plans for making the activities of JA-CHRODIS sustainable in time

Follow up on JA-CHRODIS: main milestones & future steps

Dissemination



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[RESOURCE](#)

JA-CHRODIS NEWSLETTER AND UPDATES

December 2015 – Update

November 2015 – Newsletter (Diabetes)

October 2015 – Update

September 2015 – Update

July 2015 – Newsletter (Health Promotion)

June 2015 – Update

April 2015 – Update

February 2015 – Newsletter (Welcome)



Follow up on JA-CHRODIS: main milestones & future steps

Dissemination



Follow up on JA-CHRODIS: main milestones & future steps

Coordination



Home Admin Account People Files Close session

File List

Chrodis

Public

JA-CHRODIS: Descript

Dissemination resources

Monthly updates WP

SOP- Standard Operat

Technical and financial

General Assembly

WP4 -PKE

Governing Board

Executive Board

WP1 - Coordination

WP2 - Dissemination

WP4 - Platform for Knowlec

WP5 - Health Promotion an

WP6 - Multimorbidity

WP7 - Diabetes

Folder: Public

Create subfolder>Create new document>Edit folder data>Delete folder

Public folder

Amendment

JA-CHRODIS: Description of Work

Dissemination resources for JA-CHRODIS partners

Monthly updates WP

SOP- Standard Operational Procedure & Guidelines

Technical and financial reports

General Assembly

WP4 -PKE

Follow up on JA-CHRODIS: main milestones & future steps Coordination

1ST ADVISORY BOARD & 1ST GOVERNING BOARD MEETING

FEBRUARY 18, 2015



Follow up on JA-CHRODIS: main milestones & future steps

Analysis of progress

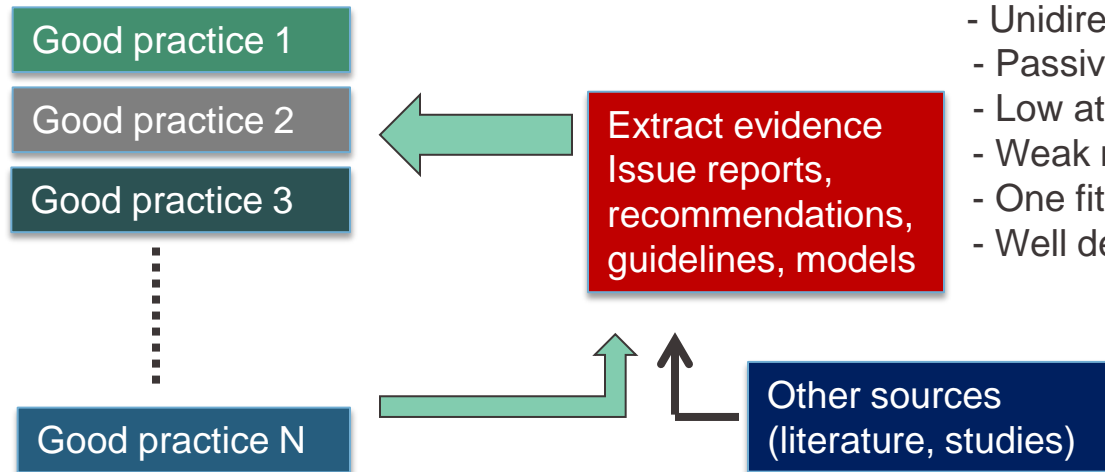
The general and strategic goal: **Good Practices**

How to exchange and transfer good practices?

Modality A: dealing with evidences, generalizations, average or controlled practices

E.g.: definition of one cost-effective intervention (ideal)

- Unidirectional: practice – expert - practice
- Passive role for implementers
- Low attention to context
- Weak role for JA-CHRODIS
- One fits all
- Well defined what to do



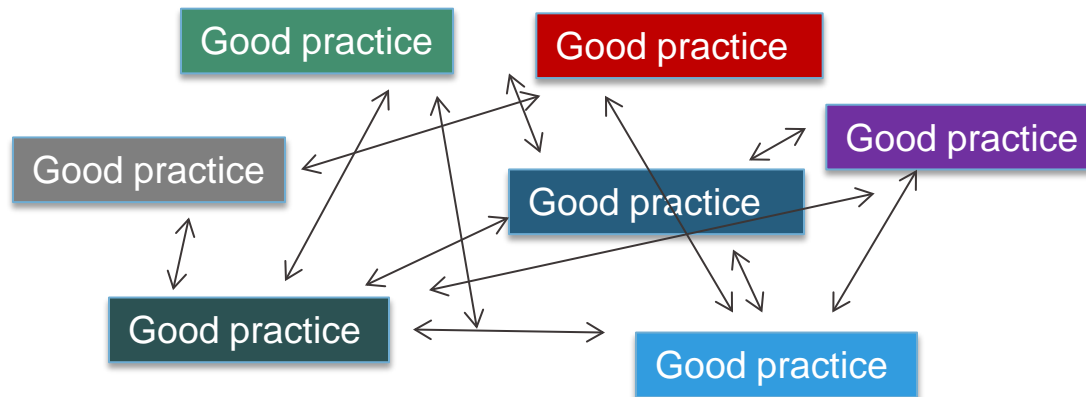
Follow up on JA-CHRODIS: main milestones & future steps

Analysis of progress

The general and strategic goal: **Good Practices**

How to exchange and transfer good practices?

Modality B: dealing with particular modalities of implementation of the ideal recommended intervention



- Multidirectional
- Implementers protagonists
- High attention to context
- Many different possibilities
- Strong role for CHRODIS
- Well defined what to do & how

Real implemented interventions less cost-effective - less effective or more expensive than the ideal
Learn from each other how to implement it better or diminish costs

Follow up on JA-CHRODIS: main milestones & future steps

Future steps

Future steps:

- Improve modality B of dealing with good practices:
 - Capturing potential good practices
 - Organize peer review
 - Organize help desk
 - Communities of practice
 - Collaborate with GB for recommendations
- Improve dissemination & web
- Establish alliances
- Increase interaction amongst partners & stakeholders
- Work closer with AB & GB

Follow up on JA-CHRODIS: main milestones & future steps



Co-funded by
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The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*

* 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). 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 in the information contained therein.

WP4: Platform for Knowledge Exchange

2nd Governing Board meeting
JA-CHRODIS
3rd February 2016



Enrique Bernal-Delgado
Aragon Health Science Institute (IACS)

GETTING A SET OF CRITERIA FOR PRACTICE ASSESSMENT

DELPHI OUTPUTS

2 sets of criteria published, 2 more coming

WP 4 PLATFORM FOR KNOWLEDGE EXCHANGE

**Task 1: selecting CHRODIS criteria
to assess good practice in
interventions related to
chronic conditions**

**INTERIM REPORT 1: Delphi Panel on Interventions
in the area of health promotion and primary
prevention of chronic diseases**



This document arises from the CHRODIS (Chronic Diseases and Healthy Ageing Across the Life Cycle) project, which is funded by the European Union under the Horizon Europe programme. The views and opinions expressed in this document are those of the author(s) only and do not necessarily reflect those of the European Union or the CHRODIS project.

WP 4 PLATFORM FOR KNOWLEDGE EXCHANGE

**Task 1: selecting CHRODIS criteria to
assess good practice in interventions
related to chronic conditions**

**INTERIM REPORT 2: Delphi Panel in the area of
organizational interventions focused on dealing with
chronic patients with multiple conditions.**



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Developing an infrastructure aimed at knowledge exchange

PKE

BASIC STRUCTURE

REGISTRATION

**HELP
DESK**

Front desk tools – chat, message board
Client service tools
Tools for knowledge base maintenance

**ADMIN
SERVICES**

**CLEARIN
GHOUSE**

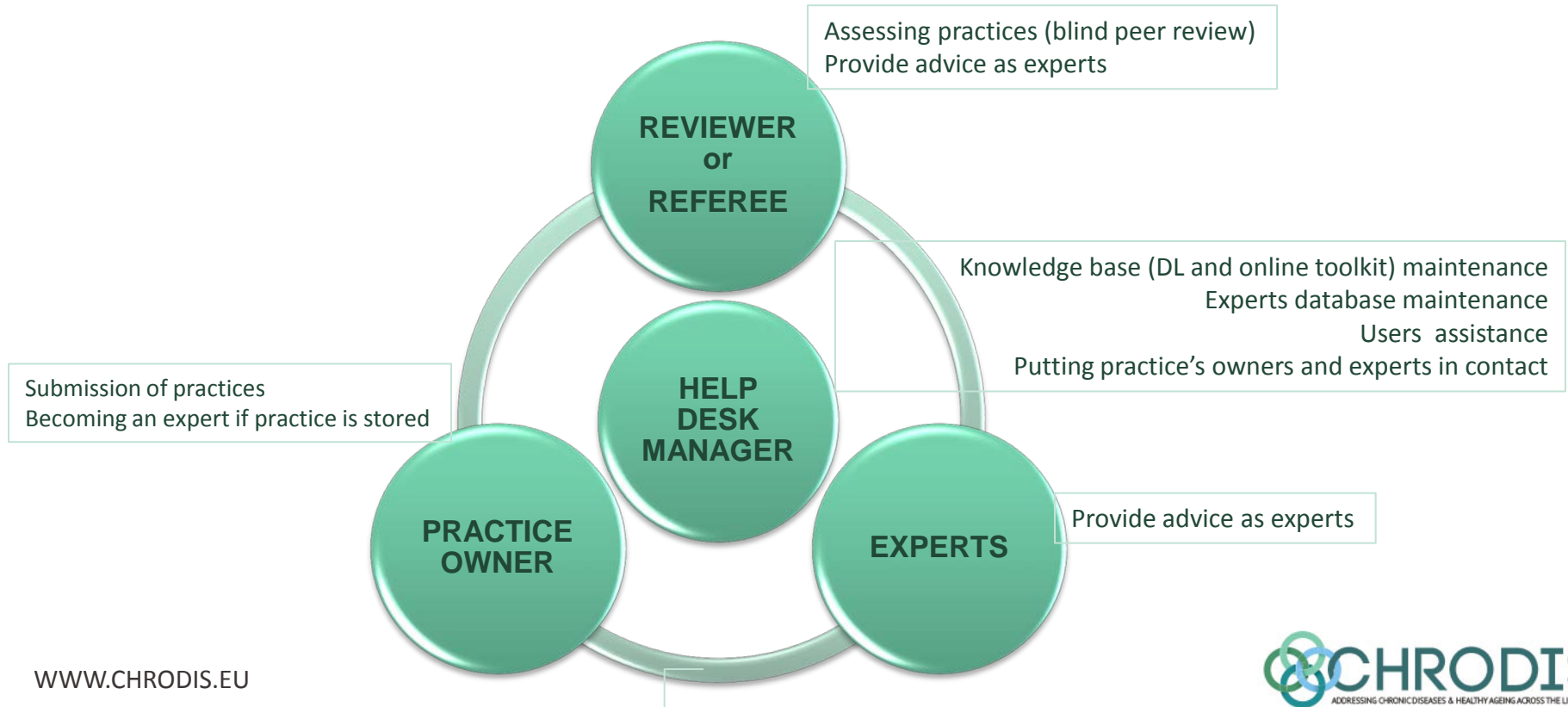
Submission of practices
Peer review
Storage
Reporting to owners

**DIGITAL
LIBRARY**

Submission of documents
Storage


SEARCH ENGINE

USERS' ROLES




Home page

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CHRODIS
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PLATFORM FOR KNOWLEDGE EXCHANGE

where decision-makers, caregivers, patients, and
researchers across the EU can find and share the best
knowledge on chronic diseases.

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Registration



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First Name (Required)

This field is required.

Middle Name

Last Name (Required)

Screen Name (Required)


Email Address (Required)

SAVE

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Gender


Male




1351

[type the text]

[PRIVACY & TERMS](#)



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Profile

Rebidos - pacoramon@... Search - PKE-PILOT

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You are signed in as FRANCISCO RAMÓN ESTUPIÑÁN ROMERO

MY ACCOUNT

MY ACCOUNT DETAILS MY WORKFLOW TASKS

DETAILS

Screen Name (Required)
pacoramon

Email Address (Required)
pacoramon@gmail.com

Title
Mr.

First Name (Required)
Francisco

Middle Name
Ramón

Last Name (Required)
Estupiñán Romero

Suffix
Sr.

User ID
12735

Gender
Male

Job Title
Researcher

Change Delete

Francisco Ramón Estupiñán Romero

USER INFORMATION

Details
Password
Interest / Competence Info
Privacy

IDENTIFICATION

Organization
Addresses
Phone Numbers
Websites
Social Network

MISCELLANEOUS

Notifications

SAVE CANCEL

Dashboard: all functionalities integrated

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- ADD CONTENT
 - Media Resource
 - Chronic-Care Practice
- ACTIVITY
 - My Saved Searches
 - My Media Resources
 - My Chronic-Care Practices
- ASSESSMENTS
 - Media Resources
 - Chronic-Care Practices

My Chronic-Care Practices

IN PROCESS PRACTICES

Area of Interest	Title	Creation Date	Last Update
No records found.			

SUBMITTED PRACTICES

APPROVED PRACTICES

REJECTED PRACTICES

CANCELLED PRACTICES



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SUBMISSION

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ASSESSMENTS

- Media Resources
- Chronic-Care Practices

To begin with the process of creating a new Chronic Care Practice, you are required to define the Knowledge Area the Practice will belong to, the Chronic Condition it will focus on, as well as a descriptive title.

Area of Interest *

- ☐ Diabetes
- ☐ Health Promotion and Prevention
- ☐ Multimorbidity / Organizational Interventions
- ☐ Patient Empowerment

Chronic condition *

Title *

250 characters remaining

NEXT

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Practice Description

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ASSESSMENTS

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- Chronic-Care Practices

Chronic-Care Practice

Practice Description Assessment Criteria

Area of Interest: Health Promotion and Prevention

Title: *

Title

4995 characters remaining

Summary (abstract):

5000 characters remaining

Keywords:

Add keyword

Keywords suggested from MeSH:

Query MeSH

Country: *

Select one

Practice Description

health promotion and primary prevention

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- ASSESSMENTS
 - Media Resources
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Chronic-Care Practice

Practice Description | Assessment Criteria

Area of Interest: Health Promotion and Prevention

Describe the Chronic-Care Practice you are about to submit, filling out every category of each assessment criteria.

- DESCRIPTION OF THE PRACTICE
- TARGET POPULATION
- EQUITY
- EMPOWERMENT AND PARTICIPATION
- COMPREHENSIVENESS OF THE INTERVENTION
- ETHICAL CONSIDERATIONS
- EVALUATION
- SUSTAINABILITY
- GOVERNANCE AND PROJECT MANAGEMENT
- POTENTIAL OF SCALABILITY AND TRANSFERABILITY

TOP

SAVE SAVE AND SUBMIT

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Practice Description

multimorbidity and organizational interventions

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My Media Resources
My Chronic-Care Practices

ASSESSMENTS
Media Resources
Chronic-Care Practices

Chronic-Care Practice

Practice Description Assessment Criteria

Area of interest: Organizational Interventions

Describe the Chronic-Care Practice you are about to submit, filling out every category of each assessment criteria.

- CONTEXT AND NEEDS ANALYSIS
- OBJECTIVES AND TARGET GROUP
- CARE INTERVENTION DESIGN
- CHANGE MANAGEMENT
- INTERACTION WITH RELEVANT SOCIETAL STRUCTURES
- RESOURCES AND INFRASTRUCTURE
- EVALUATION
- SUSTAINABILITY AND SCALABILITY

TOP

SAVE SAVE AND SUBMIT

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OTHER RESOURCES



Media Resource

To begin with the process of creating a new Media Resource Link, you are required to define the Knowledge Area the Media Resource will be associated to, the Chronic Condition it will focus on, as well as a descriptive title.

Area of interest *

- ☐ Diabetes
- ☐ Health Promotion and Prevention
- ☐ Multimorbidity / Organizational Interventions
- ☐ Patient Empowerment

Chronic condition *

Autoimmune diseases

Title *

250 characters remaining

NEXT



Media Resource

Description

Language & Coverage

Authors & Contributors

Link

Area of interest: Health Promotion and Prevention

Title: *



Title of the Media Object Link, provided in the previous step

4939 characters remaining

Summary (abstract):



5000 characters remaining



Media Resource

Description

Language & Coverage

Authors & Contributors

Link

Set the Country the Media Resource you are about to link comes from, the language the Media Resource It was created, as well as the geographical and culture region the Media Resource is targeted.

Area of interest: Health Promotion and Prevention

Country:

Select one ▼

Language:

Select one ▼

Coverage:

Select one ▼

Nomenclature of Territorial Units for Statistics:

NUTS-1: Select one ▼

NUTS-2: Select one ▼

NUTS-3: Select one ▼

<< BACK

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CANCEL

Media Resource

Description

Language & Coverage

Authors & Contributors

Link

Set the ownership of the Media Resource you are about to link, by defining the authors and contributors that have participated in the working out of the associated content, as well as their hosting organizations.

Area of Interest: Health Promotion and Prevention

Authors and Contributors:

Author:

Add

Organization:

Author Name ↕

Organization Name ↕



Remove



<< BACK

NEXT >>

CANCEL

Media Resource

Description

Language & Coverage

Authors & Contributors

Link

Set the URL link to the Media Resource that is of your interest, as well as its content media info type.

Area of interest: Health Promotion and Prevention

URL Link:

Content type:

- ☐ Web page
☐ Video
☐ Document

<< BACK

FINISH

CANCEL

ASSESSMENT

Reviewer or Referee

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- Chronic-Care Practices

ASSIGNED PRACTICES

Area of interest	Title	Assignment Date	
Health Promotion and Prevention	Intervention on Diabetes Prevention and Screening in vulnerable populations of the Metropolitan Lisbon Area	2016/01/20	★ Assess

ASSESSED PRACTICES



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Chronic-Care Practices

Diabetes Counselling On Wheels – Early Detection And Counselling On The Subject Of Diabetes For Citizens Of Turkish Origin And The Rural Population

Area of interest: Health Promotion and Prevention
Chronic condition: Diabetes

Practice Description

Practice Assessment

For each criterion assessment, set the agreement / disagreement level with respect to the proposal carried out by the author of the practice by using the slider elements provided to that effect, according to the likert scale:

1 Fully disagree	2 Disagree	3 Uncertain	4 Agree	5 Fully agree
---------------------	---------------	----------------	------------	------------------

DESCRIPTION OF THE PRACTICE

Mobile diabetes prevention and counselling services targeting older, rural populations with a special attention for Turkish migrants

1. Was the design of the intervention appropriate and built upon relevant data, theory, context, evidence, previous practices (including pilot studies)?

Yes

Level of agreement: 1 2 3 4 5

2. Did the design thoroughly describe the practice in terms of purpose, SMART objectives, methods (i.e. recruitment, location of intervention, concrete activities, and timeframe (sequence, frequency, and duration))?

Yes

Level of agreement: 1 2 3 4 5

TARGET POPULATION

EQUITY

EMPOWERMENT AND PARTICIPATION

COMPREHENSIVENESS OF THE INTERVENTION

ETHICAL CONSIDERATIONS

EVALUATION

SUSTAINABILITY

GOVERNANCE AND PROJECT MANAGEMENT

POTENTIAL OF SCALABILITY AND TRANSFERABILITY

Provide general assessment comments on the practice you have just assessed so that the author of the practice can improve it if necessary:

5000 characters remaining

Questionnaire for reviewers

Chronic-Care Practices

Intervention On Diabetes Prevention And Screening In Vulnerable Populations Of The Metropolitan Lisbon Area

Area of interest: Health Promotion and Prevention

Chronic condition: Diabetes

Practice Description

Practice Assessment

For each criterion assessment, set the agreement / disagreement level with respect to the proposal carried out by the author of the practice by using the slider elements provided to that effect, according to the likert scale:

1 Fully disagree	2 Disagree	3 Uncertain	4 Agree	5 Fully agree
---------------------	---------------	----------------	------------	------------------

DESCRIPTION OF THE PRACTICE

The intervention was developed to address the needs of vulnerable urban populations, with concomitant reduced access to healthcare, in regards to diabetes prevention and screening/diagnosis. This was implemented in collaboration with municipalities and local social partners of the Metropolitan Lisbon Area, between 2008 and 2014. Implemented activities included training sessions about diabetes prevention and management for both healthcare and social care professionals, sessions about diabetes prevention and healthy lifestyles promotion for the adult population, and diabetes risk screening sessions also for the general population.

1. Was the design of the intervention appropriate and built upon relevant data, theory, context, evidence, previous practices (including pilot studies)?

Yes

Reviewer #1's level of agreement:

1	2	3	4	5
---	---	---	---	---

Reviewer #2's level of agreement:

1	2	3	4	5
---	---	---	---	---

Level of agreement:

1	2	3	4	5
---	---	---	---	---

2. Did the design thoroughly describe the practice in terms of purpose, SMART objectives, methods (i.e. recruitment, location of intervention, concrete activities, and timeframe (sequence, frequency, and duration))?

Yes

Reviewer #1's level of agreement:

1	2	3	4	5
---	---	---	---	---

Reviewer #2's level of agreement:

1	2	3	4	5
---	---	---	---	---

Level of agreement:

1	2	3	4	5
---	---	---	---	---

TARGET POPULATION

Adult population located at low socioeconomic neighbourhoods in the Lisbon Metropolitan Area. Also, healthcare and social care professionals that cover the mentioned neighbourhoods.

1. Was the target population/s defined on the basis of needs assessment including strengths and other characteristics?

Yes

Reviewer #1's level of agreement:

1	2	3	4	5
---	---	---	---	---

Reviewer #2's level of agreement:

1	2	3	4	5
---	---	---	---	---

Level of agreement:

1	2	3	4	5
---	---	---	---	---

Questionnaire for referees

MY RECORDS

MY CHRONIC CARE PRACTICES

You are signed in as FRANCISCO RAMÓN ESTUPIÑÁN ROMERO

Platform for Knowledge Exchange

SEARCH DASHBOARD HELP DESK

Dashboard

- ADD CONTENT
 - Media Resource
 - Chronic-Care Practice
- ACTIVITY
 - My Saved Searches
 - My Media Resources
 - My Chronic-Care Practices
- ASSESSMENTS
 - Media Resources
 - Chronic-Care Practices

My Chronic-Care Practices

IN PROCESS PRACTICES

Area of Interest	Title	Creation Date	Last Update
No records found.			

SUBMITTED PRACTICES

APPROVED PRACTICES

REJECTED PRACTICES

CANCELLED PRACTICES



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ja-chrodis-ple-0.4.0

MY SAVED SEARCHES



My Saved Searches

1. Name of searching text

Text provided in the search input text in order for the PKE-Search Engine to carry out the searching process.

Advanced search: yes Filter criteria: yes

- View
- Delete
- Run

2.



Text provided in the search input text in order for the PKE-Search Engine to carry out the searching process.

Advanced search: no Filter criteria: yes

3. Name of searching text

Text provided in the search input text in order for the PKE-Search Engine to carry out the searching process.

Advanced search: no Filter criteria: no

255 results from <Search Text>, filtered by <Filter criteria>

1. The WHO Health Promoting School framework for improving the health and well-being of students and their academic achievement
Keyword1, Keyword2, keyword3, keyword4
★★★★☆ 25 👍 👁 125
2. Sexual health promotion for young people delivered via digital media: a scoping review
Keyword1, Keyword2, keyword3, keyword4, keyword5, keyword6
★★★★☆ 15 👍 👁 75
3. Can community-based peer support promote health literacy and reduce inequalities? A realist review
Keyword1, Keyword2
★★★★☆ 52 👍 👁 525
4. START (STrategies for RelaTives) study: a pragmatic randomised controlled trial to determine the clinical effectiveness and cost-effectiveness of a manual-based coping strategy programme in promoting the mental health of carers of people with dementia
Keyword1, Keyword2, keyword3, keyword4, keyword5
★★★★☆ 25 👍 👁 125
5. Interventions with user involvement to promote self-efficacy or coping, for patients with long term health challenges
Keyword1, Keyword2, keyword3, keyword4
★★★★☆ 2 👍 👁 925

HELP DESK

Help Desk (contact support)

You are signed in as FRANCISCO RAMÓN ESTUPIÑÁN ROMERO

Platform for Knowledge Exchange

SEARCH DASHBOARD HELP DESK

Help Desk

SUPPORT
Contact Info


CHANGE LOG
Update History

Contact Info

If you need to contact the PKE staff, please send an e-mail to: helpdesk-pke@chrodix.eu

In case you want to report a bug or any malfunction, try to include in the message:

- **Subject:** a meaningful short description of the issue
- **Body:** a detailed description of the issue, specifying the steps followed which led to the current situation under study, accompanied by screenshots and potential error messages.

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ja-chrodix-pke-0.4.0

Help Desk (contact records)

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Platform for Knowledge Exchange

SEARCH DASHBOARD HELP DESK

Help Desk

SUPPORT
Contact Info

CHANGE LOG
Update History

Update History

ja-chrodis-pke.0.5.0 – 2016/01/26

Added:

- Delphi 2 - 'Multimorbidity/Organizational Interventions' form feature
- MeSH terminology-based Practice tagging feature.
- Practice submission confirmation dialog feature.

Changed:

- Improved Keywords field.
- Updated descriptive labels.
- Removed user's birthday field from user's profile section.

Bugs Fixed:

- Syntactic/Semantic errors in labels.
- "while-updating-form-response" error when dropdowns elements don't have a right value set, at the time of saving the Practice.

ja-chrodis-pke.0.4.0 – 2015/11/23

Added:

- Reviewer/Referee user's personal Dashboard feature, including 'Assigned Practices' and 'Assessed Practices'.
- Reviewer user's CC-Practice reviewing form feature.
- Referee user's CC-Practice reviewing form feature.
- CC-Practice submission process workflow feature.
- Automatic CC-Practices classification process from referee's level of agreement.
- Improved CHRODIS-PKE web theme compliant with the JA-CHRODIS website look&feel.
- CHRODIS-PKE-ControlPanel web theme compliant with the JA-CHRODIS website look&feel.

Changed:

- Greater Info icon.
- Improved font types.
- Improved CC-Practice creation oriented descriptive messages.
- Set 'Search' page as the default landing page.
- 'Save&Finish' button replaced by 'Save&Submit' button.
- 'Save and Save&Submit' buttons order.



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The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*

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Additional slides

PKE Roles

- User
 - Reviewer
 - Referee
 - Help-desk manager
 - Sys. admin
- **User:** all functionalities except those reserved to reviewers and referees
 - **Reviewer:** user's attributions plus reviewing functionalities
 - **Referee:** reviewers' attributions plus referee functionalities

NB.

- *Reviewers and referees are also by default users*

PKE Roles

- User
- Reviewer
- Referee
- Help-desk manager
- Sys. admin

- **Manages** his/her profile
- **Receives** potential PKE notifications addressed to him/her
- **Submits a practice for evaluation**
- **Accesses all best practices** stored in the Clearinghouse
- **Downloads a best practice** (including metadata)
- **Searches for specific registries/entries** in the Clearinghouse
- **Stores a defined number of specific search queries** in his/her profile
- **Submits media resources** to be published in the Digital Library
- **Searches for specific media resources** in the Digital Library
- **Access** to media resources referenced within the Digital Library
- **Communicates with the Help-desk manager for support, to report bugs or to make suggestions/requests**
- **Contributes to ensure PKE quality**
- **Re-shapes the platform** by identifying needs and improvements
- **Promotes practices stored in the clearinghouse** through ratings (stars/rage system)

PKE Roles

- User
 - Reviewer
 - Referee
 - Help-desk manager
 - Sys. admin
- **Assess practices submitted by users, assigned to him/her by the system and belonging to the “Area of Interest” defined in his/her profile**
 - Through the assessment tools built from the Delphi panels
 - **Scores practices** according to the on-line questionnaire
 - **Approves** media resources submitted by users to the Digital Library, assigned to him/her by the system and belonging to the “Area of Interest” defined in his/her profile

PKE Roles

- User
- Reviewer
- Referee
- Help-desk manager
- Sys. admin



Solves *disagreement* between two reviewers in the application of the JA-CHRODIS criteria for a given “Area of Interest”

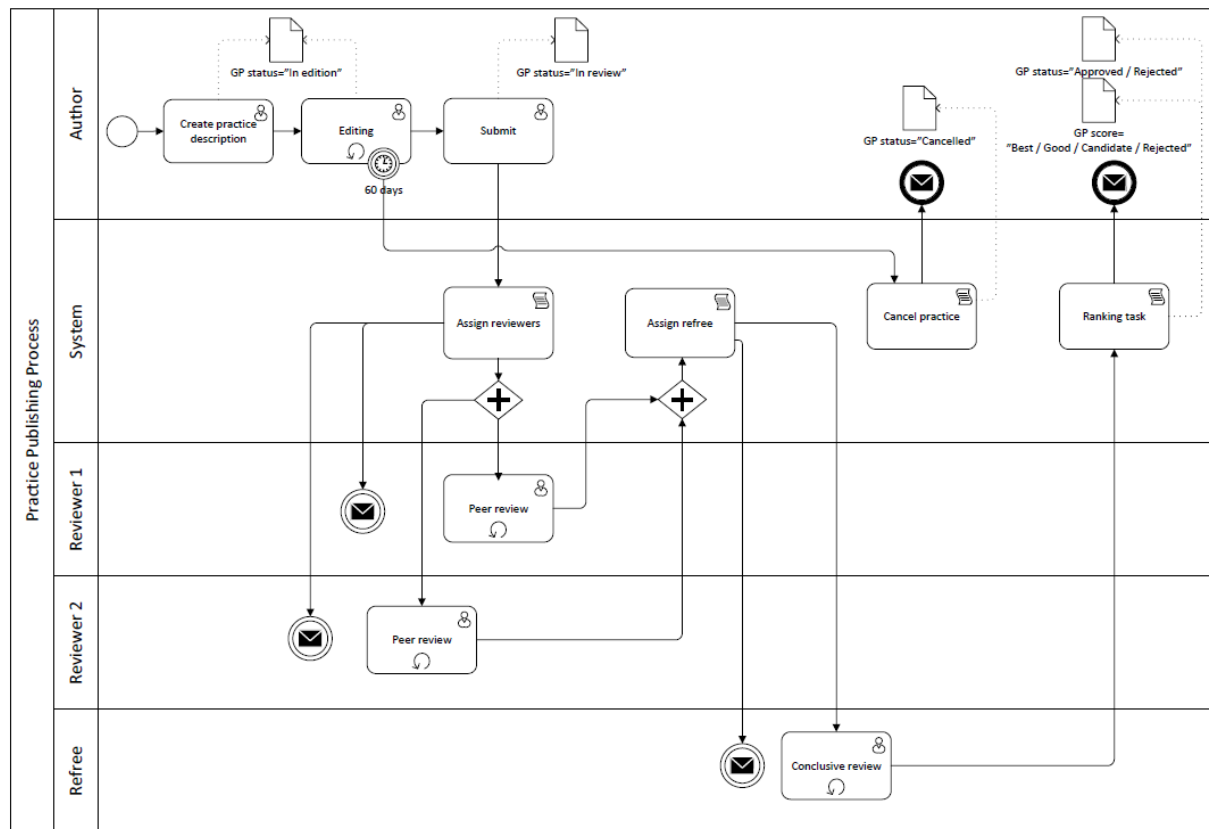
PKE Roles

- User
 - Reviewer
 - Referee
 - Help-desk manager
 - Sys. admin
- ***Acts as the contact point between users and PKE, throughout synchronous (chat) and asynchronous (ticket platform) communication systems. Conventional email possible as well***
 - ***Creates and sustains a knowledge base on the use of PKE: FAQ, tutorials, and other guidance material***
 - ***Manages the glossary of terms for the PKE***
 - ***Assists users on the use of all PKE functionalities: submission of practices or media resources, assessment process, etc***
 - ***Manages support demands, bug reports, suggestions/requests***

PKE Roles

- User
- Reviewer
- Referee
- Help-desk manager
- Sys. admin
 - ***Maintains the PKE*** (e.g., bugs reports, [work-load reports](#), etc.)
 - ***Assures the availability of the PKE infrastructure***
 - ***Analyses users' metrics*** (e.g., # practices submitted, #contents uploaded, # searches by user, etc.)

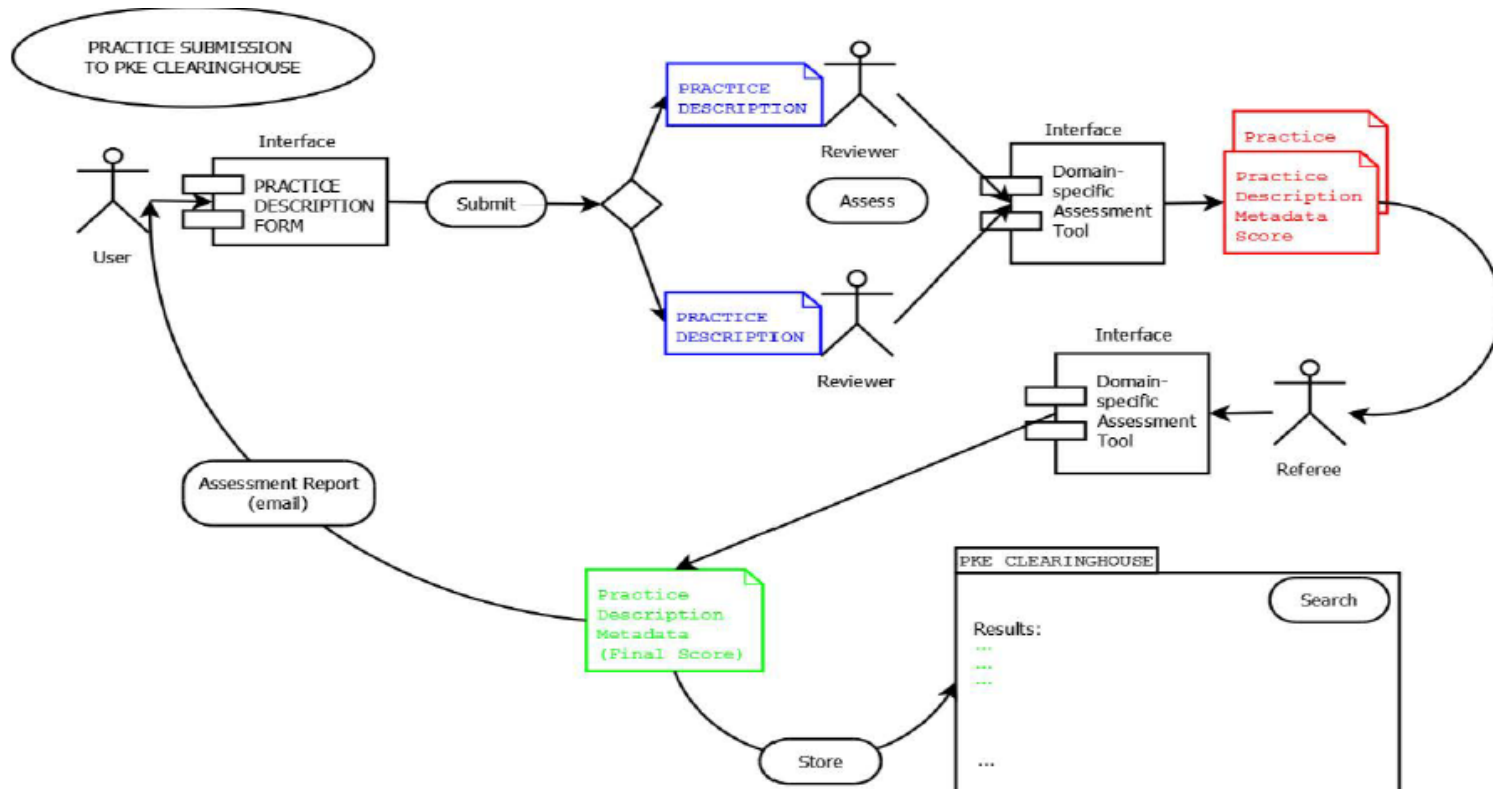
Chronic-Care practice assessment process



1st PKE Piloting

- Pre-production version (v0.3/v0.4) of the PKE stable available at:
<http://pilot-pke.telemedicina.isciii.es/>
 - 27 alpha test users registered in the platform
 - Roles were assigned in order to test assessment processes and platform workflow
 - 19 feedback:
 - 6 technical issues (mostly related with upgrading the PKE version to v0.4 during the extended period of the piloting)
 - 13 suggestions and comments on different aspects of the interface, design, workflows and interaction with the PKE
- Main suggestions from 1st piloting has not yet been implemented on current version (v0.5) as we needed to program the submitting form for multi-morbidity and organizational interventions, and test MeSH integration for keyword retrieval.


workflow




Folder with loose elements

- With this template there is a folder 'Artwork PPT' with loose graphic elements that you can import and use freely.
- If you need help on anything, please contact: helpdesk-pke@chrodis.eu


Help Desk Manager (technical support platform)



Automation & Management Software



ServiceTonic Support



[Home](#) [Solutions](#) [New ticket](#) [Ticket history](#) [Help](#)

[Soporte ServiceTonic](#) [preferences](#) [logout](#)

Support Service

Portal: <http://support.servicetonic.com>
Mail: support@servicetonic.com
Teléfono: +34 902 006 544

Support Service Hours
Monday to Friday 09:00-18:00 (CET)

Contact us

+34 902 006 544

[ServiceTonic](#)

[ServiceTonic.es](#)

[ServiceTonic-España](#)

Documents of interest

[Product data sheet](#)

[Tech-Specs](#)

[New functionalities 5.0](#)

[Installation Guide](#)

[Ticket Management](#)

Tickets

Todos mis tickets

Entry ID	Title	Status	Ticket type	Creation date	Last updated
ST-12804	RV: Compra de ServiceTonic	Closed	Request	26/01/2016 13:25	26/01/2016 16:33
ST-12710	Estado de la licencia de ServiceTonic en modo localhost	Closed	Request	18/01/2016 12:45	19/01/2016 14:50
ST-12583	Apache Tomcat de ServiceTonic	Closed	Question	22/12/2015 17:20	18/01/2016 16:19
ST-12538	ServiceTonic - expiración de licencia	Closed	Question	14/12/2015 12:30	18/01/2016 16:19
ST-12378	Problemas instalación ServiceTonic	Closed	Question	13/11/2015 16:40	18/01/2016 16:18
ST-12678	URL de la aplicación y Prioridad acceso portal	Closed	Question	13/01/2016 13:46	15/01/2016 15:00
ST-12701	Roles posibles para un Agente	Closed	Question	15/01/2016 12:07	15/01/2016 13:36
ST-12700	Instalación patch_5.0.11891 de ServiceTonic en Linux	Closed	Question	15/01/2016 10:57	15/01/2016 13:17
ST-12671	URL de Servicio	Closed	Incident	13/01/2016 10:39	14/01/2016 10:06
ST-12647	Plantilla de Contactos - Campos predefinidos	Closed	Question	11/01/2016 10:38	12/01/2016 11:20



[See more...](#)

Help

Libraries

Most Viewed

ServiceTonic Help (6369)

Main Page (5083)

Portal URL (1584)

Most used

Business Rules Management (78)

Survey creation and configuration (54)

Mobile Navigation (36)

Most Rated

Mobile Navigation (4/7)

ServiceTonic Help (4/1)

Mobile Configuration (0/0)

Most Recent

Mobile Configuration (2016-01-14 10:03)

Ticket maintenance (2016-01-14 09:58)

History (2016-01-14 09:58)

Help Desk Software by ServiceTonic

Status 2016/01/13

First Name	Last Name	Title	Status	Review 1		Review 2		End review	
				Date	Score	Date	Score	Date	Score
Esther	Gonzalez	Croí MyAction- A Community Based Cardiovascular Disease Prevention Programme Ireland	In edition	NULL	0	NULL	0,000	NULL	0
Luciana	Costa	Up-to-date health - Running and Walking Center in Tondela	In edition	NULL	0	NULL	0,000	NULL	0
Rogério	Ribeiro	<i>Intervention on Diabetes Prevention and Screening in vulnerable populations of the Metropolitan Lisbon Area</i>	In review	NULL	0	16/12/2015 20:15	0,522	NULL	0
Theodoros	Katsaras	<i>ToyBox Intervention - Greece</i>	In review	NULL	0	16/12/2015 20:36	0,695	NULL	0
Gigja	Gunnarsdottir	<i>The Welfare Watch (Velferðarvaktin)</i>	In review	NULL	0	18/12/2015 12:48	0,759	NULL	0
Alexander	Haarmann	Diabetes Counselling on Wheels - early detection and counselling on the subject of diabetes for citizens of Turkish origin and the rural population	In review	NULL	0	NULL	0,000	NULL	0

2nd Meeting of the Governing Board

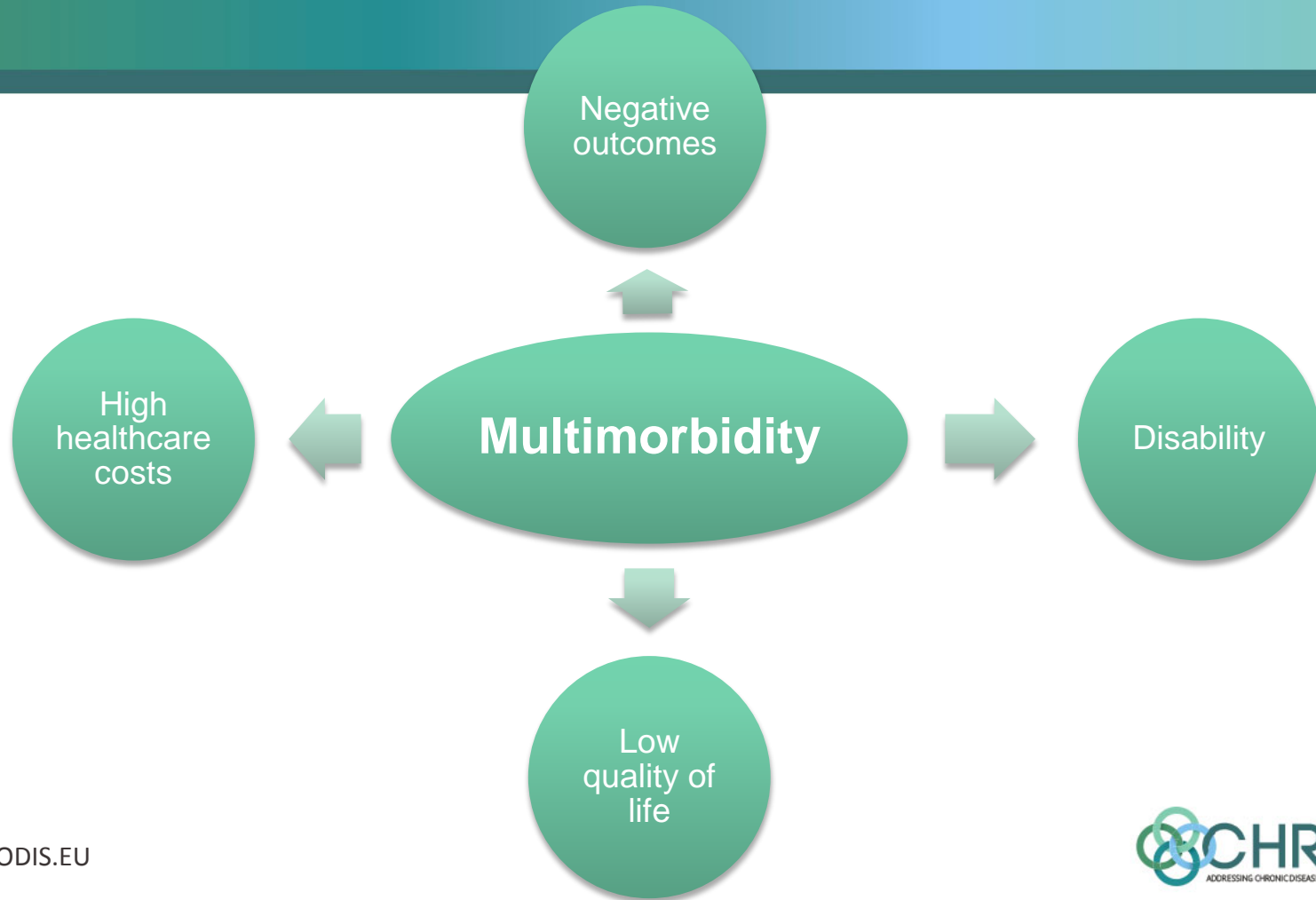
WP6 Multimorbidity JA-CHRODIS

Madrid, 3rd of February 2016

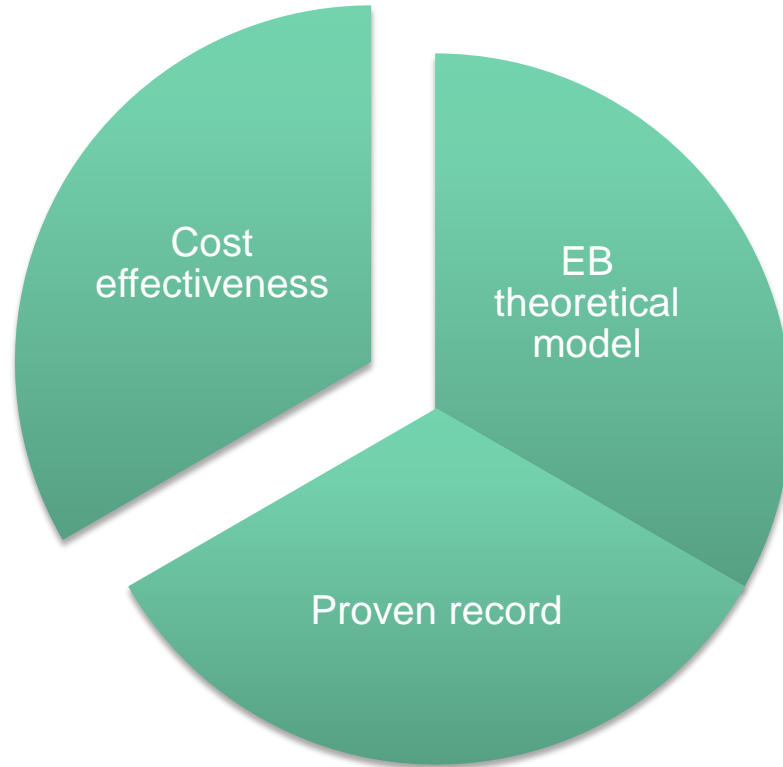


Rokas Navickas
Elena Jurevičienė
VULSK
JA-CHRODIS Multimorbidity WP co-leader

Scale of problem



Evidence Based Medicine



Original list of components, identified by a systematic review

Delivery of system design:

- ✓ Regular comprehensive assessment
- ✓ Multidisciplinary team
- ✓ Individualized care plans
- ✓ Appointment of a case manager

Decision support:

- ✓ Implementation of evidence-based medicine
- ✓ Team training

Clinical information system :

- ✓ Electronic patient records and computerized clinical charts
- ✓ Exchange of patient information
- ✓ Uniform coding of patients' health problems
- ✓ Patient platforms allowing patients to exchange information with their care providers

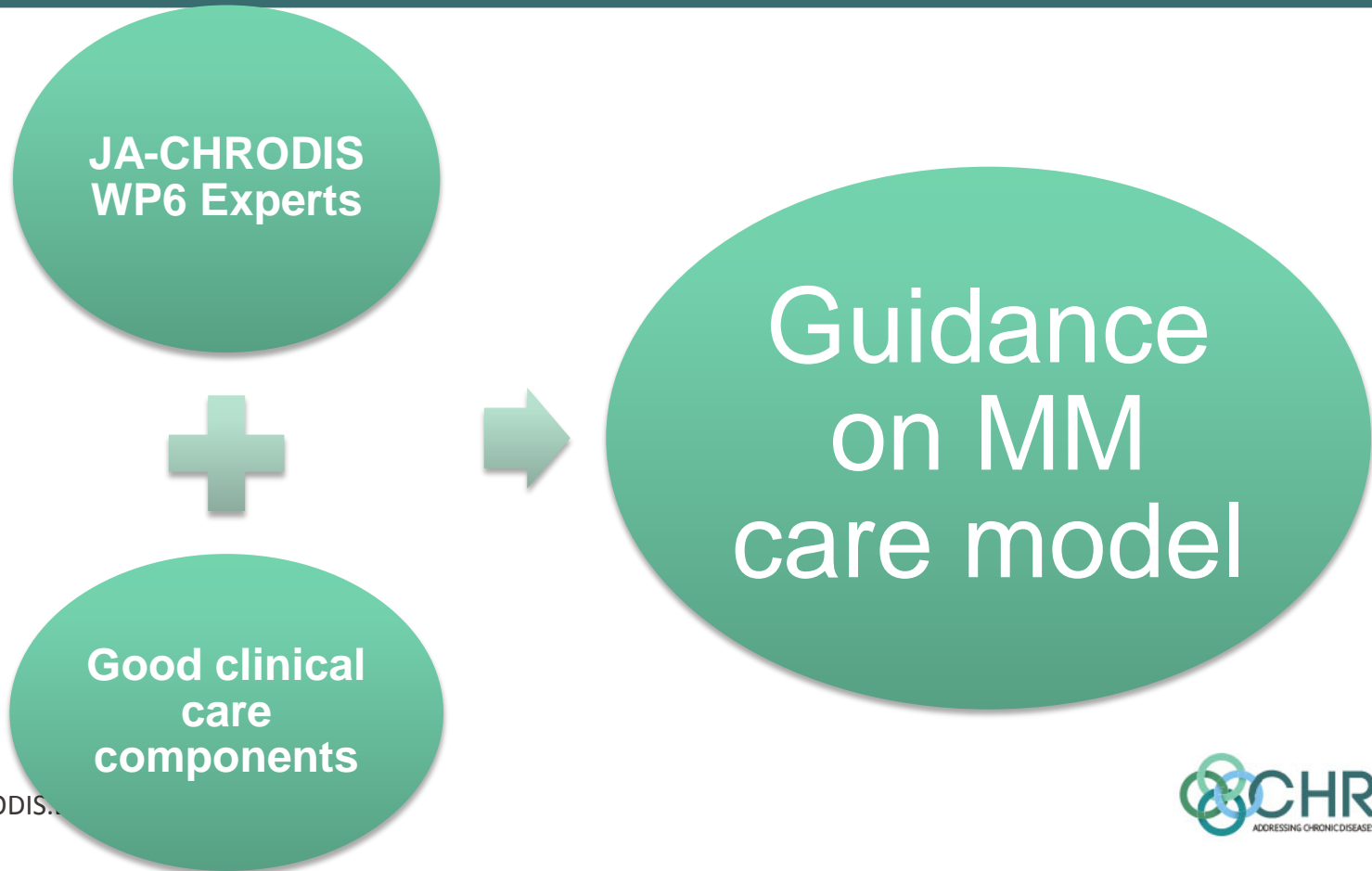
Self-management support :

- ✓ Training of care providers to tailor self-management support for patients
- ✓ Providing options for patients to improve their health literacy
- ✓ Patient education
- ✓ Involving family members and family education
- ✓ Offering approaches to strengthen patients' self-management and self-efficacy
- ✓ Involving patients in decision-making
- ✓ Training patients to use medical devices, supportive aids and health monitoring tools correctly

Community resources:

- ✓ Access to community resources
- ✓ Involvement of social network
- ✓ Psychosocial support

EXPERT CONSENSUS



DELIVERY OF THE CARE MODEL SYSTEM

- Regular comprehensive assessment of patients
- **Multidisciplinary, coordinated team**
- Professional appointed as coordinator of the individualized care plan and contact person for patient and family (“case manager”)
- Individualized Care Plans

DECISION SUPPORT

- Implementation of evidence based practice
- **Training members of the multidisciplinary team**
- Developing a consultation system to consult professional experts

SELF MANAGEMENT SUPPORT

- Training of care providers to tailor self-management support based on patient preferences and competencies
- **Providing options for patients and families to improve their self-management**
- Shared decision making (care provider and patients)

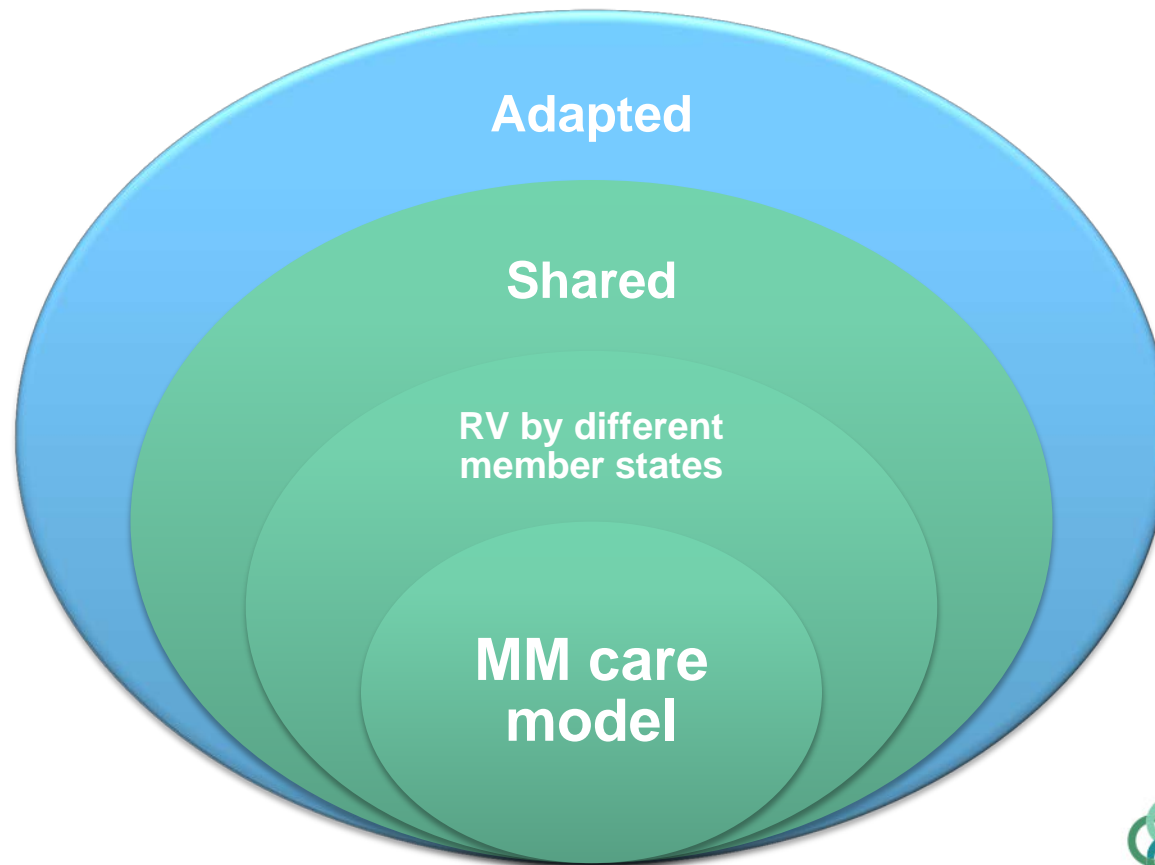
INFORMATION SYSTEMS AND TECHNOLOGY

- Electronic patient records and computerized clinical charts
- **Exchange of patient information** (with permission of patient) between care providers and sectors by compatible clinical information systems
- Uniform coding of patients' health problems where possible
- Patient-operated technology allowing patients to send information to their care providers

SOCIAL AND COMMUNITY RESOURCES

- Supporting access to community- and social-resources
- **Involvement of social network** (informal), including friends, patient associations, family, neighbours

THEORY TO PRACTICE



The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*

Thanks for your attention!



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2nd Meeting of the Governing Board

JA-CHRODIS

Madrid, 3rd of February 2016



Survey to GB on priorities on JA-CHRODIS activities and areas of work

In which of the following fields would the exchange of good practices across Europe benefit your country more?

Promotion & prevention:

- Activities promoting health literacy
- Health education experiences at schools
- Implemented health promoting environments
- Health promoting legislation (including tax policies)
- Implemented early detection and management of risk factors for chronic diseases
- Initiatives for the early diagnosis of chronic diseases in primary care
- Evaluation experiences of health promotion or prevention initiatives
- citizen empowerment
- communities empowerment
- other (prevention & promotion)

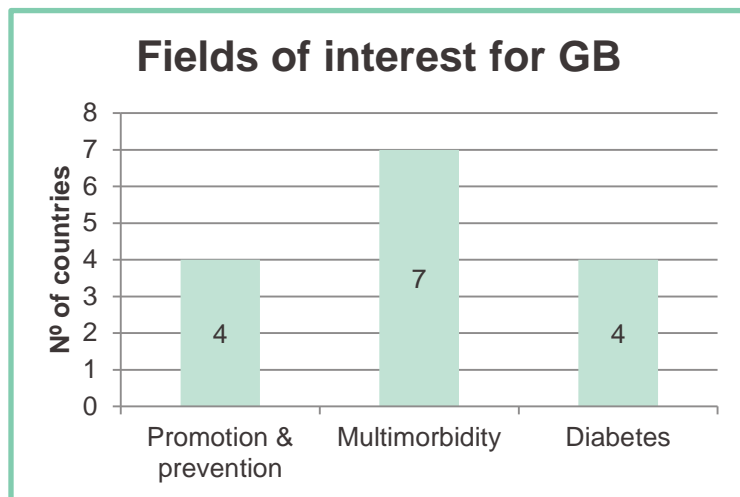
Multimorbidity:

- Implemented comprehensive and multidisciplinary needs assessment
- Coordination, comprehensiveness and continuity of multi-professional health services in primary care
- Intervention for the control of poly-medication
- Experiences in coordination of specialized and primary health care
- Coordinated health and social services at local level
- Evaluation experiences of multimorbidity initiatives
- patient & caregivers empowerment
- other (multimorbidity)

Diabetes

- Implemented diabetes prevention programmes (national or regional. E.g.: National Plans, Strategies, etc.)
- Implemented diabetes prevention activities or interventions at local primary care level
- Implemented interventions for the early detection of diabetes in primary care
- Experiences in health education and self-care of people with diabetes
- Coordinated health and social services at local level
- Evaluation experiences of diabetes initiatives
- patient empowerment
- other (diabetes)

Survey feedback: 8 out of 17 GB members



Promotion & Prevention

- Implemented health promoting environments 50%

Multimorbidity

- Coordination, comprehensiveness and continuity of multiprofessional health services in primary care 88%
- Experiences in coordination of specialized and primary health care 63%
- Implemented comprehensive and multidisciplinary needs assessment 63%
- Coordinated health and social services at local level 50%
- Evaluation experiences of multimorbidity initiatives 50%

Diabetes

- Implemented diabetes prevention programmes 50%

How can WP5 contribute to achieve GB's priorities on the exchange of good practices on promotion & prevention?

Promotion & prevention

Implemented health promoting environments	50%
Health promoting legislation (including tax policies)	38%
Implemented early detection and management of risk factors for chronic diseases	25%
Initiatives for the early diagnosis of chronic diseases in primary care	25%
Evaluation experiences of health promotion or prevention initiatives	25%
Coordination across sectors and levels	13%
Health in all policies	13%
Health education experiences at schools	13%
Communities empowerment	13%

Related Outcomes from WP5

- Definition criteria for the identification of good practices
- Collection of good practice examples for health promotion
- Projects & activities all across Europe
- Most different approaches, scopes, settings, ages, groups...
- Safeguarding & facilitating transferability
- Study visits for inspiration of upcoming projects

Added value

- Easily accessible information
- Established network of contacts along lines of interests & needs

How can WP6 contribute to achieve GB's priorities on the exchange of good practices on Multimorbidity?

Multimorbidity

Coordination, comprehensiveness and continuity of multi-professional health services in primary care	88%
Experiences in coordination of specialized and primary health care	63%
Implemented comprehensive and multidisciplinary needs assessment	63%
Coordinated health and social services at local level	50%
Evaluation experiences of multimorbidity initiatives	50%
Intervention for the control of poly-medication	38%
Patient & caregivers empowerment	25%

- Multidisciplinary, coordinated team
- Training members of the multidisciplinary team
- Self-management
- Exchange of patient information
- Involvement of community and social network

How can WP7 contribute to achieve GB's priorities on the exchange of good practices on Diabetes?

Diabetes

Implemented diabetes prevention programmes (national or regional. E.g.: National Plans, Strategies, etc.)	50%
Implemented diabetes prevention activities or interventions at local primary care level	38%
Implemented interventions for the early detection of diabetes in primary care	38%
Experiences in health education and self-care of people with diabetes	38%
Evaluation experiences of diabetes initiatives	38%
Patient empowerment	38%
Coordinated health and social services at local level	25%

Recommendations to improve early detection and preventive interventions, and to improve the quality of care for people with diabetes based on:

- ✓ overview on programs/practices on prevention and management of diabetes, education of patients and training for professionals *(available)*
- ✓ collection and description of 'potential good practices' *(on going)*
- ✓ SWOT analysis on successful strategies *(available)*
- ✓ criteria for good practices (Delphi method) *(on going)*

Mapping NDPs to identify key enablers and barriers to the development and implementation of NDPs

- ✓ Policy brief on National Diabetes Plans *(available)*
- ✓ Guide for National Diabetes Plans *(on going)*

Feeding PKE

The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*

Thanks for your attention!



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QUESTIONS TO FACILITATE DISCUSSION

2nd Governing Board Meeting
JA-CHRODIS
3rd February 2016



Institution: Secretariat of the Governing Board--
MSSSI

Question 1

- a. What should be done to keep chronic diseases on the political health agenda of the European Union?**
- b. How could the GB members steer this discussion in the respective Member States?**

Question 2

- a. Would the creation of a permanent network or working group of governmental representatives on chronic diseases from Member States at the EU level, managed by the European Commission, be useful to drive the chronic disease agenda further?**
- b. And to generate impact in Member States in respect to the prevention and management of chronic diseases?**

Question 3

- **Which of the products of JA-CHRODIS, developed up to now, do you find useful and have the potential for implementation or further development into national policies or activities in response to chronic diseases?**

Question 4

- **What could you do to facilitate the exchange of good practices identified by JA-CHRODIS, and other EU projects with respect to chronic diseases in your country?**

Question 5

- **Regarding the promotion of a continuous exchange of good practices, the document “The Sewing Thread of JA-CHRODIS” includes different elements. What is your opinion of them and how could you support them at the country level?**



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The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*

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CONCLUSIONS AND NEXT STEPS

2nd Governing Board Meeting
JA-CHRODIS
3rd February 2016



Institution: Secretariat of the Governing Board--
MSSSI

CONCLUSIONS

- The involvement and feedback of the GB on JA-CHRODIS and its products is of crucial relevance for this Joint Action.
- The GB should disseminate the products of the JA-Chrodis to different stakeholders through different means. They should promote the implementation and exchange of good practices; establish synergisms between the national methodology for the collection, selection, and continuous exchange of good practices and the ones proposed at JA-Chrodis and its PKE.

CONCLUSIONS

- The GB should make efforts to keep chronic diseases at the European health agenda.
- A permanent network of governmental representatives on chronic diseases at EU level could be useful, but it needs to be effective and produce something.
- Key components of the Multimorbidity Care Model are not disease specific, but structural aspects of the health system. The GB would like to see examples not only of what to do, but also of how to do it.

NEXT STEPS: JA-CHRODIS Governing Board Frame work plan

		2015											
	Documents (deliverables/milestones)	J	F	M	A	M	J	J	A	S	O	N	D
WP2	Website: promotional materials, newsletters, stakeholder mapping, guidance document, etc.							FYI					
WP3	Interim evaluation reports												FYI
WP4	Selecting CHRODIS criteria to assess good practice in interventions related to chronic conditions: health promotion and primary prevention.									FYI			
	Selecting CHRODIS criteria to assess good practice in interventions related to chronic conditions: organizational interventions with particular emphasis in interventions on multimorbid patients.												FYI
WP5	Identification of 3 Good practices per participating MS in health promotion and primary prevention of chronic diseases: Report, annex and executive summary.									FYI			
	Country reviews on health promotion and chronic disease prevention approaches									FYI			
WP6	Report from data analysis and evidence from literature to identify high care demanding population									FYI			
	Report on care pathways approaches for multimorbid chronic patients (included the meetings with experts to assess accuracy of collected evidence and select good practices, identify commonalities for care management of multi-morbid patients)												Feedback
WP7													

NEXT STEPS: JA-CHRODIS Governing Board Frame work plan

		2016 & 2017														
	Documents (deliverables/milestones)	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M
WP2	Website: promotional materials, newsletters, stakeholder mapping, guidance document, etc.	FYI														
WP3	Final evaluation report															FYI
WP4	Selecting CHRODIS criteria to assess good practice in interventions related to chronic conditions: patient-driven.			FYI												
	Selecting CHRODIS criteria to assess good practice in interventions related to chronic conditions: Diabetes								FYI							
	Link to PKE: Help-desk services, clearing-house and Digital library piloting	FYI														
	Link to PKE: online Help-desk with expert consultants, providing on-line tools and meaningful information													FYI		
	Link to PKE: Clearinghouse with practices of excellence in chronic care across Europe, based on a valid and sound set of criteria													FYI		
WP5	Recommendation report on applicability and transferability of practices into different settings and countries												Feedback			
WP6	Reports on meetings with experts for designing multi-morbidity case management programmes												Feedback			
WP7	"National Diabetes Plans in Europe: What lessons are there for the prevention and control of chronic diseases in Europe? Policy brief"		FYI													
	Guide for NDP			Feedback												
	Recommendations to improve the quality of care for people with diabetes: minimum set of indicators						Feedback									

NEXT STEPS:

- Collect feedback from the Governing Board to JA-CHRODIS' key deliverables/milestones.
- Follow up on the efforts done by the members of the GB to keep chronic diseases in their national and EU health agenda, and the extent of how the products of JA-CHRODIS could impact on national policies/plans.
- GB next face to face meeting: June 2016



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The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS)*

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