

# The process toward the Recommendations



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# Deliverable 4A

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



cross-national recommendations based on existing knowledge and existing successful strategies

Finalized recommendations - June 2016

# Recommendations

- Not clinical guidelines but scientific advice on diabetes
- A high quality report which may be effectively used in policy making

*"Scientific advice on health is defined as the solicited or unsolicited analysis of a defined public health, health care or health policy problem, based on updated scientific knowledge, considering also relevant expert judgement, practical experience, and ethical, cultural and societal values and implications, with conclusions and recommendations for health policy." (EuSANH-ISA)*

# Recommendations

Based on

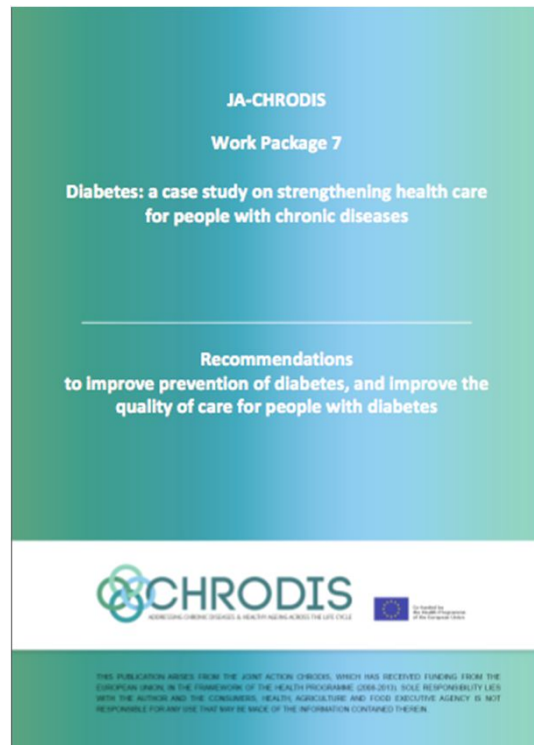
- ✓ quality criteria identified by WP7 partners: prevention focused high risk people, health promotion, management, education, training for professionals
- ✓ criteria reviewed and weighted by a panel of experts through a Delphi process
- ✓ results from Delphi 1 (Prevention and health promotion), Delphi 2 (organizational interventions, with particular emphasis in interventions on people with multi-morbidity), and Delphi 3 (empowerment) could be integrated

# 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



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## Content

*List of contributors*

Key messages

Executive summary

Introduction

JA-CHRODIS and WP7

The problem (*the questions, the mandate*)

Scope and structure of the document

Background

Diabetes prevention and care

Country experiences (*data from the Report*)

Examples of good practices (*from those reported by partners*).

*Examples of GPs on patient empowerment (EPF)*

Strengths and weakness (*from Country SWOT*)

Analysis of barriers for access to care

Methods

The literature review

The preliminary lists of criteria

The Delphi process

The recommendations (*based on the results of the Delphi*)

The indicators: a common minimum set

Lessons learned - Investing in the future

References

Appendices

Literature (Systematic reviews) relevant to the recommendations

Declaration of conflict of interest (*is to be included?*)

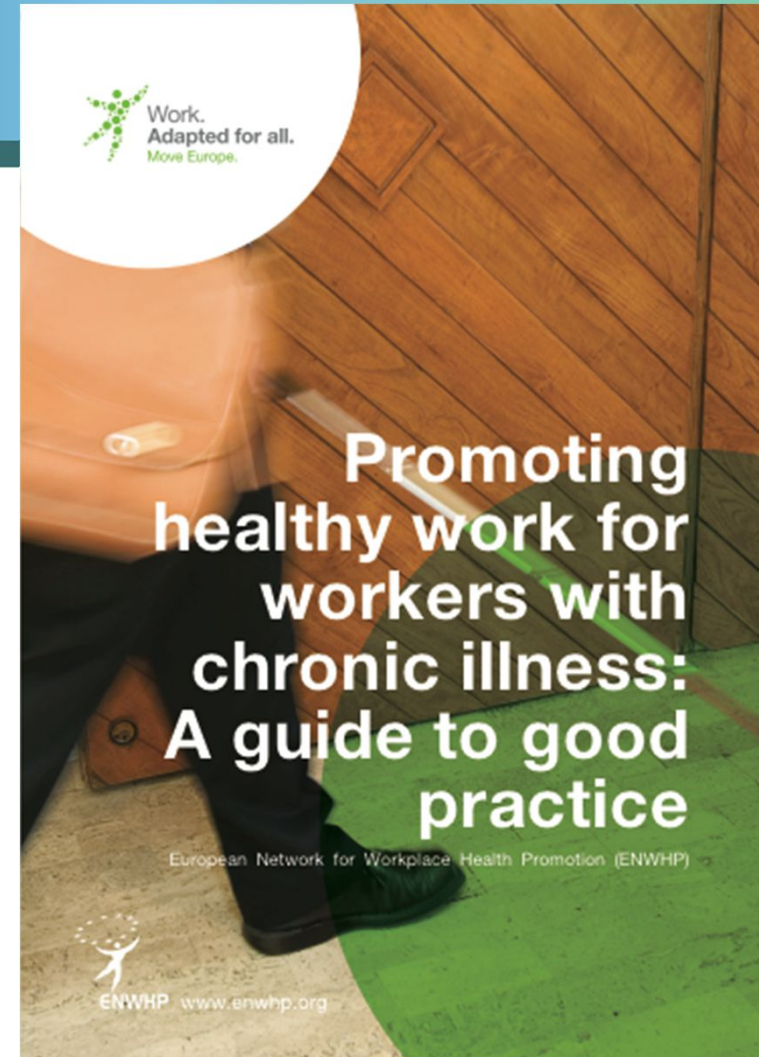
... an example

## A good practice guide on chronic illness at work



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of the European Union

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... an example

## Recommendations table

General recommendations	
Recommendation	Promote trusting communication and sincerity
Description	Many individuals live with a chronic condition that is not visible. Getting support depends on the individual feeling able to talk about their condition, and not hiding it for fear of the consequences, such as losing a job or being discriminated against.
Measures and programmes	
Recommendation	Assess the needs of the affected person
Description	Make sure the person with the chronic illness is fully participating in the assessment process; identify their needs and tailor the programmes accordingly.
Recommendation	Individual return-to-work plans embedded in Integrated Disability Management Programmes
Description	Chronic diseases can rarely be treated in isolation, therefore any model of care should not focus on a single disease but offer a comprehensive solution. Additionally, Disability Management Programmes need to be flexible, as one part of the overall programme.
Co-operation	
Recommendation	Improvement of co-ordination and co-operation
Description	The return-to-work process needs to engage the various parties in a joint process with better co-operation between employers, employees, healthcare providers, benefit/welfare authorities and public employment services.
Recommendation	Identify and define the role of each party
Description	Clearly defined roles and responsibilities makes for more effective delivery of services and saves resources.
Recommendation	Ensure transparency
Description	Transparency is essential in ensuring the quality of services. Integrate administration and communication systems to guarantee reliable and regular communication.
Recommendation	Ensure continuity and sustainability of services
Description	The management of chronic illness necessitates long-term and sustained effort rather than a single, one-off intervention.
Research, evaluation and evidence – find out what works	
Recommendation	Monitoring of the programmes
Description	Evaluate the process against international standards.
Recommendation	Evaluation of the programmes
Description	Rigorously evaluate services and programmes (especially concerning employment and rehabilitation).



# The panel of experts

Expert	Partner	Professional Profile	Country
Eva-Maria Kernstock	Gesundheit Österreich GmbH	expert in health policy analysis and mapping, public health expert	Austria
Filippo Graziani	EFP	Professor of Periodontology	Belgium
Agnieszka Daval-Cichon	EHFF	Project manager and policy officer in the area of public health	Belgium
Alberto Piaggese	EWMA	Endocrinologist, expert on diabetic foot care	Denmark
Dimitri Varsamis	NHS England	National clinical policy and strategy programme manager	England
Tiina Laatikainen	THL	professor of health promotion (UEF)	Finland
Michel Varroud-Vial	Ministry of healthth	diabetologist, medical adviser to the general director for health care organisation	France
Karen Budewig	Federal Ministry of Health	Specialist in Public Health Medicine	Germany
Silke Kuske	HHU	research associate	Germany
Andreas Birkenfeld	TUD	Prof. for Metabolic Vascular Diseases, Diabetogist	Germany
Andreas L. Birkenfeld	TUD	Professor of Metabolic Vascular Medicine	Germany
Jan Schulze	TUD /SLÄK	Diabetologist, Past-President of the Chamber of Physicians	Germany
Evi Diamanti Kandarakis	YPE	Prof. of Endocrinology, specialized In Diabetes management	Greece
Peggy	EIWH		Ireland
Gerardo Medea	ISS	General Practioner, member of Italian GP Society	Italy
Stefano Nervo	ISS	Representative of Patient association, Diabete Forum	Italy
Roberto D'Elia	Ministry of Health	Specialist in Public Health Medicine	Italy
Ingvild Felling Meyer	The Norwegian Directorate of Health	MD	Norway
Monica Sørensen	The Norwegian Directorate of Health	Senior Advisor Diabetes	Norway
Lurdes Serrabulho	APDP	Nurse, specialized in Public Health	Portugal
Manuel Teixeira Veríssimo	Gabinete de Gestão de Projetos	President of the Portuguese Society of Internal Medicine	Portugal
João Malva	Gabinete de Gestão de Projetos	Researcher Coordinator at the Faculty of Medicine, University of Coimbra	Portugal
Cristian Andriciu	EPF	expert at Romanian Diabetes Federation	Romania
Milivoj PiletiÄ	NIJZ	Diabetologist - Researcher	Slovenia
Jana Klavs	NIJZ	president of national association of nurses in endocrinology	Slovenia
Xavier Cos Claramunt	ISCIII	General Practitioner	Spain
Eduard Montanya Mias	ISCIII	scientific director of the Spanish Diabetes research network	Spain
Anne-Marie Felton	FEND	Diabetes Specialist Nurse & Global Advocacy	UK

28 experts  
16 countries

# Recommendations – timeline

- |  |                     |
|--|---------------------|
| ✓ Final list of quality criteria         | November 2015       |
| ✓ Delphi: definition of the expert panel | January 2016        |
| ✓ Drafting the deliverable               | February            |
| ✓ Delphi: setting the questionnaire      | February - March    |
| ✓ Delphi: round questionnaires           | April               |
| ✓ Delphi: face-to-face meeting           | Brussels, May 12-13 |
| ✓ Formulating the recommendations        | May - June          |
| ✓ Finalizing the deliverable             | June                |

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



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*\* 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.*