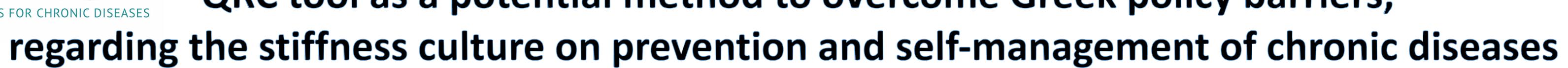
# CHRODIS+

### Quality Criteria and Recommendations (QCR)

## QRC tool as a potential method to overcome Greek policy barriers,





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NGRESS



### Abstract

### Problem Description

Greek health system presents weak primary care and chronic disease prevention, high morbidity and high costs for the State health budget.

### Available knowledge

- Lack of potential education of medical and paramedical personnel regarding preventive medicine and integrated care
- Lack of potential self-management training of chronic disease patient from health system personnel.

### Rationale

The importance of self-management, secondary prevention and Integrated Care approach in people with hypertension and diabetes, has been extensively proved.

### Specific aims

- Improvement of hypertension and diabetes patients' self-management through education and training.
- Improvement of involved professionals' (medical and paramedical healthcare personnel) capacities for the management of hypertension and diabetes and for patient's education on lifestyles and selfmanagement.

### Key performance indicators

Four improvement areas with 2-3 key performance indicators for each area were defined.

PATIENT VOICE PATIENT EDUCATION

> TRAIN THE TRAINER

BREAK THE BARRIERS

OVERCOME GREEK POLICY BARRIES AND STAFF CULTURE ENFORCING SELF MANAGEMENT OF DIABETES AND HYPERTENSION









- High level of education and knowledge from Greek trainers (Experts in Greece are very familiar with the educational procedure since a lot of seminars and lectures in Greek medical societies events and congresses took place every year)
- Social media are very strictly and well corporates with doctors in health topics and supports patient voice
- Communities of patients with chronic disease already exist

### Barriers

- Stakeholders stiffness culture
- Legislative barrier
- **Financial Crisis**

### Key messages

- 1. Patient voice in not a usually "tactic" in Greek medical culture (revealed by using the QRC tool).
- 2. Greek people health prevention culture is at very low level (revealed by using the QRC tool)
- 3. Patients' resignation from the education and training process for their disease/s and for their treatment regimens (revealed by using the QRC tool)
- 4. The QRC tool must be developed in a parallel way with flexibillity according every country special needs.
- 5. The QRC tool could be a possible potential way to <br/>broke> the barriers between politics the stakeholders.

### Aknowledgements

We thank all the stakeholders (medical and paramedical staff for their contribution







### QRC tool as a potential method to overcome Greek policy barriers, regarding the stiffness culture on prevention and self-management of chronic disease (diabetes, hypertension)



chrodis.eu

### Abstract

### Problem Description

Greek health system presents weak primary prevention, promoting high morbidity of chronic disease patients e and so high costs for the state's health's budget

### Available knowledge

a)lack of potential education of the medical paramedical personnel regarding preventive medicine culture and integrative care

b)lack of potential self-management training of chronic disease patient from health system personnel.

#### Rationale

We need to try new policies regarding chronic disease prevention and self-management training of the chronic disease patient and train also the trainer, instead of focusing on pharmacotherapy.

### Specific aims

- General purpose:Education of medical and paramedical staff in the fields prevention, and other integrated care strategies.
- healthcare population: Target professionals and 60 patients (30 males diagnosed females) with hypertension and/or diabetes, aged>60 years old
- Quality criteria: implementation ocal working group, expect 'Interaction with regular and relevant systems', in order to overcome the stakeholder collaboration barriers

### Key performance indicators

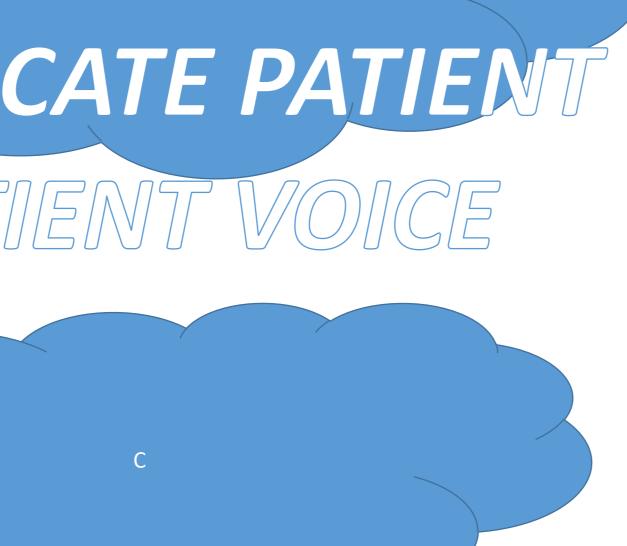
4 improvement areas with 2-3 performance indicators for each area were enabled

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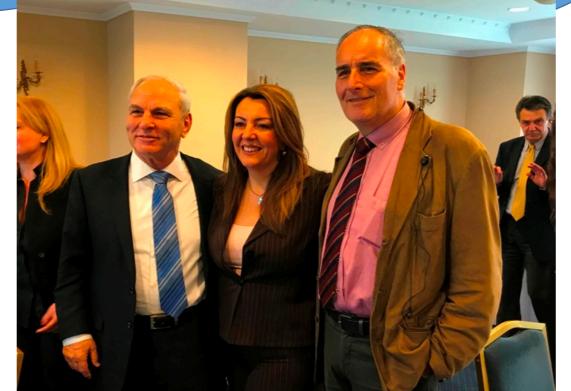
BREAK THE













### Enablers

- High level of education and knowledge from Greek trainers (Experts in Greece are familiar with the educational procedure since a lot of seminars and lectures in Greek medical societies events and congresses took place every year)
- Social media are very strictly and well corporates with doctors in health topics and supports patient voice
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### Barriers

Stakeholders stiffness culture

**Legislative barriers** 

**Financial Crisis** 

### Key messages

- 1.Patient voice in not a usually "tactic" in Greek medical culture (revealed by using the QRC tools)
- 2.Greek people health prevention culture is at very low level (revealed by using the QRC tools)
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