Best Practices in action: how to transfer, implement, and sustain effective health promotion interventions for children (0-12)

Module 1 - Transferability and Sustainability of Best Practices in Health Promotion and Childhood Obesity Prevention

Session 1.1 - Transferability and sustainability: an overview across EU Joint Actions and other initiatives

Unit 1.1.2 - "Sustainability of the Joint Action CHRODIS+: Main results and lessons learnt"

Lecturer: Paolo Michelutti (Fondazione Policlinico Gemelli – Rome, Italy)

Slide 1 & 2

This morning my role is to speak a little bit about the main evidence and results about the sustainability in CHRODIS+ and I have to say that frankly, I will repeat most of the words that were already presented by the previous speakers. So, I have no surprises for you. And so, I think that this is something that we needed to discuss in the round table, as the last session, because basically you already listened some of the challenges about the sustainability, about the transferability and those challenges and the lessons learned are also the ones that I'm going to present to you in that were the results of the CHRODIS+ that as you can see from…

Slide 3 - Joint Action Chrodis+ (2017-2020)

…the first slide, it was a Joint Action –just for the ones that were not involved– that started in 2017 and was closed in 2020. And just few words about this Joint Action. It was a Joint Action on chronic diseases and about implementing good practices or best practices –as we want to call them– and it was based on a previous Joint Action. This Joint Action was CHRODIS+ because it was the follow up of the Joint Action of the previous one that was the Joint Action of CHRODIS. And the best practices that were implemented in CHRODIS+ where the best practice that were analysed in the previous project. So, we had 21 implementation sites and 21 pilots implementing good practices in four areas: Health Promotion and Primary Prevention; Integrated Multimorbidity Care; the Quality Care for People with Chronic Diseases; and Chronic Disease management in the working place.

Slide 4

Just other few words about the good practices that were implemented. So, in the area of the Health Promotion & Primary Prevention, we had five practices: the Lombardy Workplace Health Promotion Network; Active School Flag, JOGG practice; Toy Box, and Successful Aging. Then the Integrated Multi Mobility Care Model implementation that was implemented in five pilot sites and then the Quality Criteria Recommendation Tools that also was tested in different settings. And the last but not least, the good practice in the working workplaces. Basically, we had two practices. The first was a training for managers, and the second one a toolkit for improving well-being, health and work participations.

Slide 5 - Sustainability challenges and evidence identified

So, as I said, nothing new and no surprises for you, in these slides I try just to summarize the main evidence from the pilot implementation. So, from the implementation perspective and the experience that we had in the different pilot sites. Sorry for the repetition but maybe it can be useful, as I said, for the roundtable. First of all, from the point of view of the integration of those practices, of course, I have to say the involvement of key stakeholders was an important issue as the use of effective communication channels. And the third pillar for an effective implementation was the alignment between the best practices implementing and the already existing policies.

From the point of view of the Sustainability Mechanisms, of course, find the right funds, the resources were a key issue, especially in a long-term perspective; the institutional support of all the institutions and the institutional body involved in the implementation; to have a specific workforce dedicated to the implementation. Some of the speakers previously mentioned the workforce and the workforce shortages as a challenge for an effective implementation. And well, I just point out on the last point of this second pillar, the policy dialogues that actually were one of the success factors in CHRODIS+. We had one policy dialogue in each country that was involved in in CHRODIS+ and two European policy dialogues. These policy dialogues, we had a methodology to manage the policy dialogues, a methodology that was provided by the EuroHealthNet and we had a very, very good result. So, if I have to point out from between all these factors, one of the most important was really those policy dialogues. Maybe, we can discuss a little bit later during the round table about that.

The third pillar was one of the focus for the CHRODIS+ Joint Action on the sustainability: the EU Added Value, and we highlight that is important to exchange the knowledge, to exchange the good practices, to harmonize the regulation between the countries, between the Member States; and to foster the cross-sectoral engagement in order to boost efficiency and innovations in the different settings.

About the Policy & Community Engagement, for sure the health in all policies issue was a successful factor; as the intersectoral collaboration; in particular to have comprehensive prevention strategies. And about prevention, talking about the management of chronic diseases CHRODIS+ Joint Action really highlighted that prevention and promotion strategy are really the most sustainable way on which we can manage the chronic diseases, health promotion, primary prevention and patient empowerment. And what's important to embed all these policies in different environment like schools and workplaces.

Slide 6 - Sustainability mechanisms identified and recommended

Now, the last three slides are to describe what are the main recommendations of the CHRODIS+ about the sustainability mechanism. So again, I'm going to repeat some concept. So, about the involvement of these stakeholders, the CHRODIS+ recommendation is to try to involve all the stakeholders not only in health sector but also in other sectors, and try to have those stakeholders involved in what we call the local implementation working groups that we find out that were really an efficient way to have good results from the implementation.

About the intersectoral collaboration, the recommendation is to establish collaborative framework to formalise the collaboration between different sectors. So, it's important also the formal part, not only the practice, but also to formalise those networks and, as I said, involving also non-health stakeholders.

About the resources, the recommendation of CHRODIS+ was to engage funding bodies and also try to create the synergies between the different funding sources at EU level, national level, regional and local level. And talking about EU funds, also to use in a synergic way all the different possibility and options that today we have with the different programs founded by the EU Commission.

Slide 7 - Sustainability mechanisms identified and recommended

The three recommendations about those 3 factors. Institutional Governance Structures, the recommendation was to integrate the successful pilot practices into existing healthcare system and policies. And this is a really key, just to avoid that the pilot experience remain as a sort of experimental experience when shot and then when the project will close also the pilot will end.

Very important, also from the workforce perspective, the Capacity Building and Training, here the suggestion and the recommendation is to develop training programs to improve the capacity building of all the stakeholders involved in the practice; and especially also the citizens and the patients, in particular for the training using the digital tools.

Data-Driving Decision Making and Monitoring. Of course, we are all aware of the importance to have the right data to measure the impact of the pilot. And so, here the recommendation was to create and implement a robust monitoring framework to measure the results of the pilot.

Slide 8 - Sustainability mechanisms identified and recommended

This is the last series of recommendation and so the last slide. About the digital and technical infrastructure this recommendation maybe is taken from granted today because we are always talking and we are implementing our country's digital solution but was not granted in 2020. So, the recommendation is: develop and scale digital health solution.

About the EU Added Value, again, maybe we already taking for granted, but it's important to continue to invest in EU-wide networks, Joint Actions, projects or, for example, opportunity like this conference to exchange our opinion, to discuss about what works and what does not work.

And the last one is about the Patient Engagement, the citizen engagement. And we always talk about the importance to have the patient at the centre, to involve the citizen. But somehow maybe, the risk is really to forget about that. And so, the last recommendation is to develop the participatory approaches where patients and community are directly involved, especially because, at the end, most of the pilots that we have in our projects are implemented at local level. So, it's important of course to have the national bodies involved because of the national regulation and so on. But first of all, it's important also to involve the local communication.

Slide 9 - In Summary

And this is just a final synthesis with all the most important items that I already mentioned.

Slide 10 - Thank you

And that's it from my side.