National CVD Prevention Coordinators Training

EuroPRevent Dublin 5 May 2012

Implementation: practicalities and role of National CVD Prevention Coordinators

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Outline

- General background
- Guidelines
- The prevention cycle
- Barriers to implementation
- Strategies to improve implementation
- Prevention implementation: role of National CVD Prevention Coordinators





General Background







Guidelines on Prevention



Research

SCORE, HeartScore Evidence based reviews



94,98,03,07,12

EuroAspire
SURF Audit

Implementation

PIC

Nat. Co-ord
EuroAction
Political Actions

Respectively of the second society of the seco

www.escardio.org/EACPR

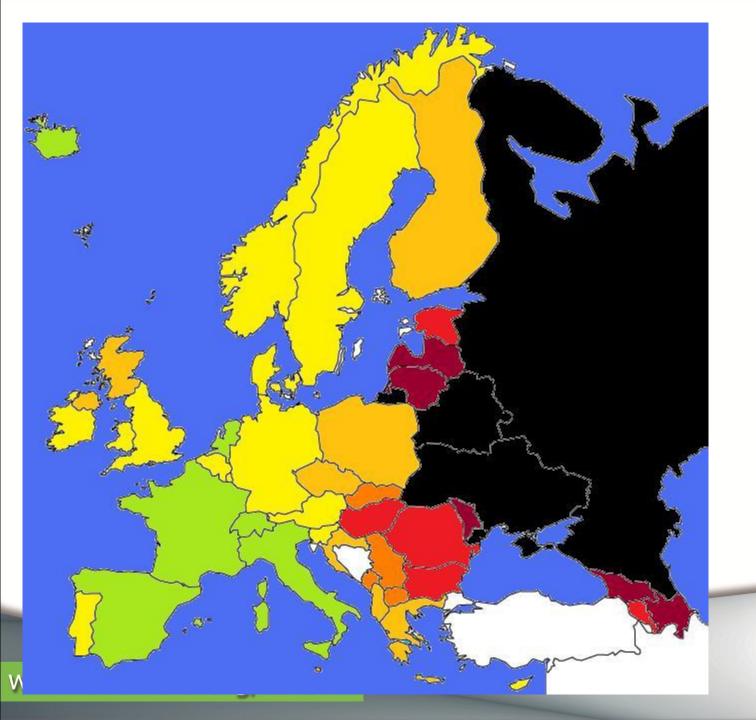
European Prevention implementation is complex- many players are involved

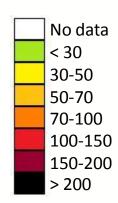
- 1. The EU- vital but no legislative framework
- 2. Individual Departments of Health-like their independence
- 3. ESC/EACPR
- 4. PIC partner European Specialist groups
- 5. National Cardiac and other specialist and GP societies
- 6. Nurses and allied health professional, European and National
- 7. Educators- 1st 2nd & 3rd level
- 8. Industry- Pharma, Food, Exercise, Neutral

It's like herding cats!









Age standardised CHD mortality rates (under 65) in men & women





The European Heart Health Charter and the Guidelines on cardiovascular disease prevention

- The European Heart Health Charter advocates the development and implementation of comprehensive health strategies, measures and policies at European, national, regional, and local level that promote cardiovascular health and prevent CVD
- The Joint CVD prevention guidelines aim to assist physicians and other health professionals to fulfil their role in this endeavour, particularly with regard to achieving effective preventive measures in day-to-day clinical practice
- They reflect the consensus arising from a multidisciplinary partnership between the major European professional bodies represented



Implementation of CVD guidelines

- 1. Knowledge of JTF5 guidelines
- 2. The gap between recommendations and clinical practice
- 3. Barriers to implementation
- 4. Strategies to improve implementation
- 5. Practicalities



European Guidelines on CVD Prevention

Fifth Joint European Societies' Task Force on cardiovascular disease prevention in clinical practice

Available on-line from 3 May 2012







European Society of Cardiology (ESC)

European Association for Cardiovascular Prevention & Rehabilitation (EACPR)





European Society of Hypertension (ESH)

International Society of Behavioural Medicine (ISBM)





European Heart Network (EHN)

European Association for the Study of Diabetes (EASD)





European Atherosclerosis Society (EAS)

International Diabetes Federation Europe (IDF-Europe)



International Diabetes Federation



European Society of General Practice/Family Medicine (ESGP/FM)/Wonca







Utility of Guidelines

- Guidelines alone are good for the vanity of the authors and bad for rain forests; they are a waste of time without a defined implementation strategy
- Hence the Prevention Implementation Committee and other implementation efforts



"Said is not heard, heard is not understood, understood is not agreed upon, agreed is not applied, applied is not at all maintained."

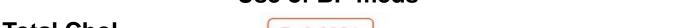
> Konrad Lorenz, 1903-1969 [Thank you, Ulrich Keil]

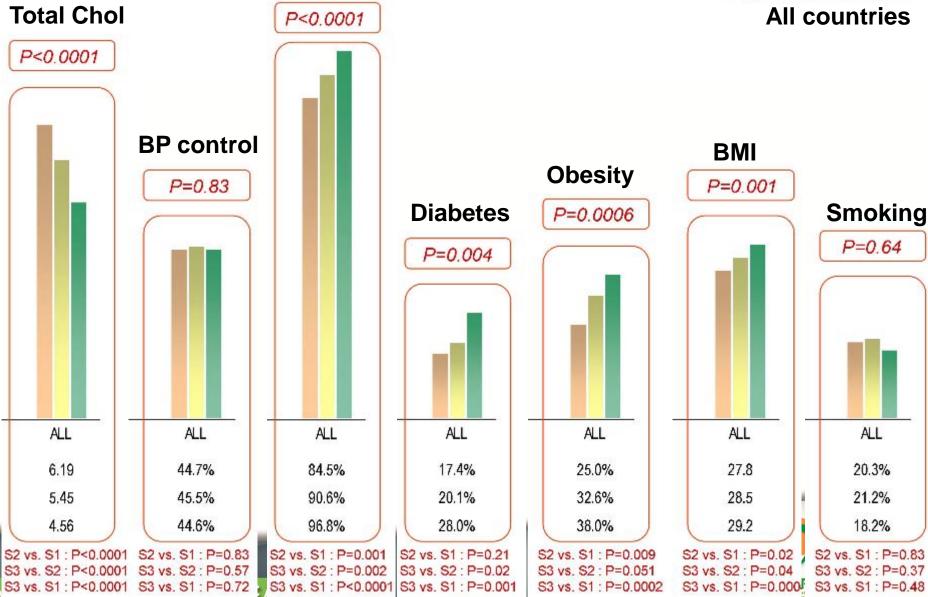




Use of BP meds







Factors Impeding the Practical Implementation of Cardiovascular Prevention

An international market research project in 6 countries: Germany, France, Italy, Spain, the United Kingdom and Poland













- PRESENTATION CHARTS -

Psyma International Medical Marketing Research GmbH Gartenweg 2 90607 Rückersdorf/Nürnberg Germany

phone: +49-911-95 785-0 fax: +49-911-95 785-33

e-mail: info@psyma-international.com website: www.psyma-international.com This study was commissioned by

European Society of Cardiology (ESC)

Cardiovascular Round Table (CRT)

Task Force 4

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Barriers to implementation

REACT study, Hobbs FDR, Erhardt L, Family Practice 2002 ESC CRT Market research survey, Graham I, EJCPR 2006 Benchmarking Study, M McGee 2011

- Lack of patient compliance
- Lack of time
- Lack of budget
- Guidelines too complicated, confusing, too much information)
- Guidelines too general (do not fit my patient)
- Unhelpful government health policies (assistance, remuneration, patient education)
- Can be difficult to find who is responsible in Government





Barriers to implementation

Pearson 1996; European Guidelines 4th Joint Task Force 2007

- Patient (Person)
- Physician
- Health Care Settings
- Community/Society





SUMMARY:

Key factors to increase usage of guidelines

- Simple, clear, credible national guidelines
- Sufficient time
- Facilitatory government policy:
 - -Who is in charge?
 - -Defined prevention strategy
 - -Reimbursement for health professionals
 - -public awareness and education from school on
- Multidisciplinary implementation strategy- with teeth





Strategies to improve implementation

Sophie Squarta Camille Pfaff Ian Graham



Implementation strategies: European level

- 1. Publication of Guidelines in relevant journals
- 2. The Prevention Toolkit, comprising the Guidelines (paper and electronic), risk chart, summary page, link to GLT etc
- 3. A defined dissemination strategy
- 4. Implementation Committees/Groups: Prevention Implementation Committee
- 5. Presentations at international conferences of the participating societies
- 6. Directly influencing EU health policy- for example through the Luxembourg Declaration and the European Health Charter- the product of a partnership between the EU, WHO, ESC and EHN



Implementation strategies: National level

- 1. Adapt the European Guidelines to suit the local culture
- 2. Formation of a multidisciplinary implementation group: might include-
- -professional and voluntary bodies
- -medical and other health professionals with appropriate skills
- -educators
- -business people
- -politicians.
- Needs to be more than merely advisory: should inform and shape health policy. Some have used "Prevention Summit" conferences
- 3. Multi-faceted communications using all available media to doctors, medical and paramedical students, and ultimately all adults and children, including schools



2012 National CVD Prevention Coordinators

✓ 57 National CVD Prevention coordinators in 48 countries
(32 confirmations; 15 replacements and 9 new countries)

Congratulations on your renewal/appointment!



New Health Professional e-Toolkit

- √ 1500 free copies available at EuroPRevent 2012 (EACPR/ESC stand)
- √ 8500 free copies (updated) at ESC Congress 2012
- ✓ Templates can be provided to National Cardiac Societies for translation!

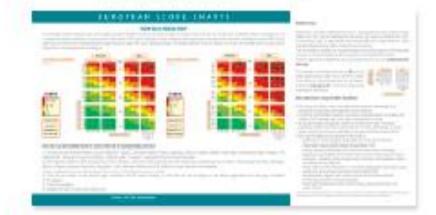






A printed copy of the European SCORE Risk Charts (High & Low risk)





A CD-Rom with:





The European SCORE Risk Charts (High & Low Risk)



A Patient info Poster to print



A Risk Assessment Memocard



HeartScore®

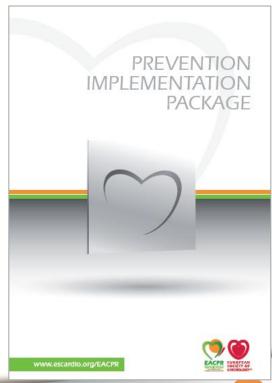




National CVD PreventionCoordinators « survival kit »

Prevention Implementation Package

- Your Role & Responsibilities
- A Contact List
- Guidelines What is new ?
- Strategies for Implementation
- Available Tools
- Useful Information







Forming a multidisciplinary implementation group Process-

- The ESC asks National Cardiac Societies to nominate a National Co-ordinator(s) to develop and lead the multidisciplinary implèmentation group which will develop-National guidelines if needed
- Partnerships between politicians, health professionals, educators and business
- A defined communication strategy
- An evaluation and audit (EuroAspire, SURF) strategy
- BUT it must have teeth. This requires high level political representation if it is not to be a talking-shop. Indeed...
- This process has been variably successful. It is now proposed that there may be two national co-ordinators-one a cardiologist and one from the Department of Health/ Health Service Executive



PIC & National Co-ordinators-Likely most effective actions?

- 1. Driving National alliances
- 2. Simpler Guideline materials
- 3. How-to manual
- 4. Benchmarking and audit
- 5. Lobbying EU policy



Thank you



Next Steps

Give us your feedback!

- Short survey to be sent after the meeting

Make yourself heard!

 Interviews will be conducted for the EACPR e-newsletter. EACPR Team will contact you shortly

Meet with your peers!

European forum on CVD Prevention (ESC Congress Munich)