Implementation conditions of good practices within the context of primary child health care in EU countries

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Today’s overview

1. Background MOCHA
2. Methods
3. Summary and lessons learned
Background

- To improve new models for health systems to make them patient-centered, prevention-oriented and efficient

- Identifying of basic models of children’s primary health care and to describe them
Theoretical framework

Primary care system structure
- Governance
- Economic conditions
- Workforce development

Primary care process
- Access
- Continuity of care
- Coordination of care
- Comprehensiveness of care

Outcome
- Quality of care
- Efficiency of care
- Equity in health

Implementation conditions

Kringos et al., 2010

Models of Child Health Appraised
(A Study of Primary Healthcare in 30 European countries)
Research question

- Which determinants facilitate and hinder implementation of good practices?

- Explorative design
Case study

Variety of aspects of primary care
> prevention, chronic diseases, diagnosis

Variety in ages

Variety in cases
> psychosocial and physical

Based on other studies within MOCHA

1. Mental Health
2. Immunization
3. Sexual Health
4. Asthma

Aim of MOCHA is to cover the full spectrum of childhood

Models of Child Health Appraised
(A Study of Primary Healthcare in 30 European countries)
Participants

- Experts (n=32 each country)
  - policy makers
  - professionals
  - scientists

- Countries: Sweden, Italy, Poland, Germany, Cyprus and the Netherlands
  - differences in access (GP based, paediatrician based, mixed)
  - differences in prevalence of health outcomes of children

Aim of MOCHA is to cover the full spectrum of childhood
Structured questionnaire

1. Availability of a guideline and/or procedure
   • ‘In your country, is a guideline or a formal procedure formulated for diagnosis of asthma in children aged over 6 years?’

2. Extent of implementation
   • ‘In your opinion, to what extent does the primary care practitioner implement the actions of the guideline or formal procedure in the intended way?’

3. Barriers and facilitators of implementation
   • TNO model for implementation
   • ‘Primary care doctors in my country have the knowledge to perform spirometry for diagnosing asthma in children aged over 6 years as intended’.
TNO model for implementation

Model to get insight into barriers and facilitators

- Good practice: For example, complexity
- Professional: For example, knowledge
- Organization: For example, time available
- Social political: For example, legislation

Fleuren et al., 2004; 2012
Summary and lessons learned

• **Contribution of this study**: we will provide a description of the barriers and facilitators of the implementation of good practices

• **Challenge**: Diversity of primary health care models across European countries.
More information?

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