



## **European Forum for Primary Care**

### **Activity Report, July 2017 – June 2018**

#### **Introduction**

After having operated for more than 6 years as an informal network, the European Forum for Primary Care (EFPC) was formally established as an Association under Dutch law in September 2011. The Association year runs from July to June.

This Activity Report covers the period July 2017 - June 2018, presented to the members by the Executive Board at the General Assembly of the EFPC.

#### **General Reflection**

The EFPC has had a successful year regarding content and the way our advocacy for the development of Community Oriented Primary Care was received in Europe.

The young Primary Care experts continued their activities resulting in more persons involved and playing an active role towards the EFPC Crete conference.

The current Executive Board remained highly influential on policy making in Europe with Tino Marti being part of the WHO Primary Health Care unit for the European region in Almaty, chair Sally Kendall active in the launch of the EU flu vaccine campaign and meetings at high level of the EU on Health Technology Assessment strategies.

Former chairman Jan De Maeseneer remained chair of the EU Expert Panel on effective ways of investing in health.

Financially it was a more difficult year with a drop in numbers of members, institutional as well as individual. New strategies have to be developed to get more members and the secretariat lacks the capacity (mainly time but also expertise) to assure that the added value of our activities is sufficiently communicated with our membership and potential new members.

Nevertheless the activities performed are all received well. In particular we can mention the series of lunch-webinars every third Tuesday of the month. Also the Porto conference was evaluated well, with many interactive sessions. In Porto we returned again to the formats we have been exploring in Amsterdam and Barcelona and invested more in the connection with the Portuguese primary care representatives.

The EFPC Mental Health Working Group developed their own position statement.

#### **Highlights 2017-2018 according to the EFPC Executive Board members**

- Porto Charter on Public Participation in Health and Primary Care  
<http://www.euprimarycare.org/news/porto-charter-walking-breaks-porto-2017>

- European Symposium 'Integrating Primary and Community Care'. 2 March, 2018. Kent (United Kingdom) <http://www.euprimarycare.org/news/european-symposium-integrating-primary-and-community-care-2-march-2018-kent-united-kingdom>
- Representation Diana Castro Sandoval & Jan-Jacob Delanoye in the third edition of the European Health Parliament which this year has the motto: Let's make health great again!  
<http://www.euprimarycare.org/news/two-efpc-members-european-health-parliament>
- A series of EFPC lunch-webinars <http://www.euprimarycare.org/efpc-webinars> tackling topics like Strengthening primary care systems across OECD countries, Communication & Intercultural Issues: Research, Education and Practice, Integrated Care for children in Primary Care; Child Health GP Hub model.
- Partnering in the EU funded PARADISO and ORAMMA projects on the issue of Primary Care and vulnerable groups in Europe <https://oramma.eu/>
- EUR-Human Project shortlisted for the EU Health Award 2017  
<http://www.euprimarycare.org/news/eur-human-project-shortlisted-eu-health-award-2017>
- Thanking Jan De Maeseneer at his last performance as EFPC chair at the Porto 2017 conference



## **Brief pre-view of the next Association year, July 2018 – June 2019.**

Based on the three strategic objectives for the period 2018-2021:

1. To intensify the advocacy for the importance of strengthening primary care,
2. To consolidate and expand the network of primary care policy, research and practice stakeholders in European countries,
3. To take a position in relevant primary care related discussions, based on research and practice evidence,

the EFPC has identified the following plans for the upcoming association year:

### Public participation in Primary Care

Started in 2017 the EFPC will continue its work for patient/citizen participation in 2018/2019.

This in order to guarantee that public participation initiatives are directly linked with decision and policy making. Based on for example Dutch and Portuguese initiatives like “More Participation, better health” (MPbh) the EFPC wants to elaborate on the awareness and willingness to involve patients, their representatives, and users of health services.

This can lead to projects related to citizens’ participation in health education activities or to empower communities to build innovative strategies of participation in health planning, care delivery and health research.

One important internal aspect is involving a patient/citizen representative in our governance structure, starting with an EFPC advisory board member.

### Interprofessional Primary Care research

In 2018, to be continued in 2019, we will start the development of capacity building towards a primary care research network. This will strengthen the link between policy, practice and research in the domain of interprofessional primary care by leading a “A European PRImary care Multi-prOfessional Researcher network” (PRIMORE) funded by the Norwegian Research Council. We are aware of the existence of single profession networks, such as EGPRN (European General Practice Research Network). However, these networks have a different approach and often focus on clinical subjects. We see a niche in bringing together researchers and building capacity in areas, such as community oriented primary care, goal oriented primary care and patient/citizen participation. Such areas require a multi-professional and interdisciplinary approach.

The scientific programme of the network will firstly be multi-professional, bridging the mono-disciplinary (nurses, physiotherapists, general practitioners, pharmacists etc.) and multidisciplinary approaches (researchers from different disciplinary backgrounds and open for different theoretical and methodological approaches) prevailing in primary care research. Secondly, it will promote research in areas of primary care that have been poorly studied until now, such as community oriented primary care, goal oriented primary care, patient/citizen participation and the equity effects of strong primary care. Thirdly, it will be cross-sectoral, for example by working together with researchers of human resources for health on the issue of recruiting and retaining a competent workforce and good employment and integration of an increasingly multi-cultural workforce within the primary care services. Regular meetings will be organized for members of the network, including webinars and a summer-course for early career researchers to further develop their professional and research skills. Besides we will organize an early spring international seminar each year for 50 to 80 senior researchers in the field of primary care to discuss future perspectives and develop strategies to provide guidance how to

proceed in the field of primary care research. The first of these seminars is planned to take place at the #EFPC2019 conference in Nanterre, France. This will result in a statement that provides guidance to the multi-professional primary care research community.

On this topic and in this project the EFPC will have an intensive collaboration with the Norwegian member, the Center for Care research, represented by Frode Jacobsen and Hilde Elin Haaland-Kramer as the leading agency of the PRIMORE project. From the EFPC perspective, there will be an active role for all Primary Care research members and leading researchers from the different universities and institutes like NIVEL, Marmara university, Medical university of Vienna, CSeRMEG, university of Kent, etc. Proposed leading researcher is Ass Prof Mehmet Akman, current Advisory Board member of the EFPC and already for many years an active member of the EFPC.

### Community Oriented Primary Care

Both initiatives, public participation and interprofessional primary care research, come together in the plans to promote in 2018/19 even more the concept of Community Oriented Primary Care.

Community Health Centres (CHCs) are community-oriented primary care (COPD) organizations that deliver health and social services through interprofessional teams, addressing the specific needs of local communities. CHCs involve members of the community in planning and programming and employ a multi-sector approach to address social determinants of health. CHCs currently exist in dozens of countries around the world and have been demonstrated to improve accessibility of health and social services; reduce health inequalities; improve health outcomes; and contribute to the cost-effectiveness and sustainability of health systems. Scale-up of CHCs around the world presents the global community an opportunity to fulfil the potential of primary health and achieve commitments to sustainable developments goals.

In a follow up of the Global Conference on Primary Health Care 25-26 October 2018 - Astana, Kazakhstan and a publication in the WHO Panorama journal, the EFPC plans to support countries in the WHO European region in their development of Primary Care and to explain interested countries the format of Community Health Centers and guide country representatives how to implement such formats based on European wide experiences within the EFPC association. The EFPC secretariat and Board members will closely look at funding opportunities in the aftermath of the Kazakh summit. Primary Health Care Research & Development (PHCR&D), the official journal of the EFPC, will pay special attention to the 40 years after the Alma-Ata Declaration requesting papers for a special issue on integrated primary care and multidisciplinary primary care teams.

### Members engagement and recruiting new members

In addition to the above mentioned plans the EFPC has to develop a strategy to establish more involvement of EFPC members and to engage more with potential new members. This strategy should be implemented not only by the secretariat or the governing bodies but also by individual members in order to have the needed impact. This should include dissemination activities in other networks, social media, conferences, etc.

The best way of dissemination of our thoughts and ideas is when others start talking about us. How to achieve this should be an essential part of our strategy. A strategy with guidance for all members is planned to be ready by November 2018, starting implementation on the 31<sup>st</sup> of December 2018.

## Report 2017 - 2018

The objectives and vision of the EFPC are described in the Statutes and basic documents. They feature on the website of the EFPC. This report details the activities of the EFPC in these 12 months (July '17 – June '18), against the background of its organisational aims.

### Main activities.

- EFPC two-weekly newflash (already running from May 2006 onwards) and the use of Social Media, like LinkedIn PC Forum (6351 members) and an EFPC Twitter account with 1909 followers.
- The 12<sup>th</sup> EFPC yearly conference in Porto, Portugal (25/26 September 2017) with 250 delegates including strong and relevant contributions of EU HTA stakeholder group, OECD, PGEU, EQUIP and other international networks. With a large presence and relevant contributions of the hosting country, we did much better than the year before in Latvia. At the conference the Porto Charter on Public Participation in Health and Primary Care was developed.
- EFPC-Kent European Symposium 2018 Integrating Primary and Community Care: an international perspective: 2 March 2018, Canterbury Cathedral Lodge. Discussions took place on how we can integrate health care systems to bring communities closer to primary care, and improve health outcomes for some of the most vulnerable in society.
- Workshops and presentations at various international conferences of related networks such as WONCA Europe (GPs) conference in Krakow, Vasco da Gama (Young GP's) meeting in Porto, EU Health Parliament closure in Brussels, EU Flu vaccine manifesto launch in Brussels, stakeholders meeting in Brussels led by Commissioner Andriukaitis on Health Technology Assessment.
- Joint statements together with a number of like-minded NGO's have been made at the WHO Regional Committee 67 in Budapest
- EFPC joined forces with over 40 organisations for asking the European Commission President Jean Claude Juncker to do more for health in Europe. This petition comes after the President presented a White Paper on the Future of Europe earlier this year, outlining 5 scenarios with the option of do "less" in certain areas that could lead to less EU action on health after 2020.
- Two young members of the EFPC, Diana Castro Sandoval and Jan-Jacob Delanoye took part in the EU and industry funded initiative EU Health Parliament (<http://www.healthparliament.eu/partners/>), which brings together young health care professionals throughout Europe to provide the European Commission with advice on certain urgent topics. Diana was involved in a committee on outcome-based health care systems and Jan-Jacob in a committee on health workforce planning.
- Our EFPC Chair Sally Kendall who is also a professor working within the Centre for Health Services Studies within the School of Social Policy, Sociology and Social Research (SSPSSR) at the University of Kent, has been awarded MBE in Queen's Birthday Honours List in recognition of 30 years of research in nursing and health visiting.
- A large number of EFPC webinars with a range of topics like Strengthening primary care systems across OECD countries, Operational Refugee and Migrant Maternal Approach (ORAMMA Project), Integrated Care for children in Primary Care; Child Health GP Hub model, WHO

Integrated health services delivery transformations for people-centered health systems and State of the art of the Moldovan Primary Care modernization.

- The Primary Care and Mental Health Working Group worked on a position statement based on the achievements in the previous years.
- EFPC has been involved in EU funded projects:
  - PACE project (comparing the effectiveness of Palliative Care for Elderly people in long-term care facilities in Europe),
  - ORAMMA (Operational Refugee and Migrant Maternal Approach)
  - PARADISO (Participatory Approach for Raise Awareness and Discrimination against Sexual and gender Orientation in healthcare sector)
- The EUR-Human Project was shortlisted for the European Health Award 2017 after an initiative of the EFPC secretariat; the award in 2017 went to the Gen-Equip project.
- The Working Group You&EFPC with a focus on the involvement of Young Primary Care experts in the EFPC held its' first meeting in Porto on Saturday 23 September.
- Responses to international consultations, like the WHO public consultation for the renovation of the Alma Ata declaration for the Second International Conference on Primary Health Care: Towards Universal Health Coverage and the Sustainable Development Goals.
- Submission of a paper for the WHO Panorama journal with the title "Community Health Centres (CHCs), a century of "Alma Ata""
- The EFPC joint several EU project proposals as a partner, mainly to be active in the field of dissemination, but none of them was successful to receive funding; the competition is very high and so chances for success limited
- Representation at the meetings of the EMA Health Care Professional Working Party in London and working on the development of a joint statement for "Strengthening collaboration between EMA and general practitioners/family physicians".

### **Broadening membership of the EFPC towards an equal distribution of members throughout Europe .**

Over the years, the EFPC has continuously emphasised the need for primary care that is multidisciplinary and community based. With General Practitioners as the key professional, a series of other medico-social professions in various constellations help to form primary care teams. Gradually, the EFPC succeeds in involving members from various professions. Establishing mutual association membership<sup>1</sup> for European/international associations of primary care (related) professions is one of the strategies. Now in June 2018, the EFPC has 33 associated members. New associated members are The European Network of Medical Residents in Public Health (EuroNet MRPH) and Healthcare Information For All (HIFA). The EFPC attracts members throughout Europe; see the institutional membership list on the EFPC website. <http://www.euprimarycare.org/members/institutional-members>.

The EFPC succeeds to facilitate participation of members with limited resources in activities like conferences and webinars. Keeping the membership fees low for those groups helps them to maintain the connection with other members.

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<sup>1</sup> Associated membership: mutual recognition as a member without charging membership fee and without voting rights in each other's General Assemblies.

The geographical distribution is still a matter of concern with a majority of members in the western part of Europe with remarkable black spots like Luxemburg, Finland, Ireland, Bulgaria, Croatia and Serbia. As we are following the WHO European Region members state list we also lack the involvement of the Eastern European and central Asian states of the former Soviet Union. In relation to the newly formed WHO primary care unit in Almaty it makes sense to focus as well on members from this region.

The secretariat has been working hard, together with our institutional member from Norway, the Center for Care Research with Frode Jacobsen, on a project proposal for a European Network on Interprofessional Primary Care research called PRIMORE. This summer we got the positive response from the Norwegian Research Council that this project will receive funding for a three year period starting late 2018 or beginning 2019.

For the current number of members see below the graph on page 12.

## Governance, growth and (financial) sustainability of the organization

### Governance, Executive & Advisory Board

The EFPC held its 2017 General Assembly on September 24 in Porto, Portugal. The current Executive Board (Sally Kendall, chair; Danica Rotar, vice-chair; Tino Marti, treasurer; Peter Groenewegen, member; Cagri Kalaca, member) has met 6 times (2 on-site & 4 on-line meetings). The agenda covers, amongst others, EFPC's response to invitations from other organisations, profit and non-profit, for collaboration, practical planning of activities and the follow up of the financial situation of the EFPC.

The Advisory Board, consisting of 20 members met in Porto (24/9/17) and Kent (1/3/18).

Name	Country	Profession
Leen De Coninck	Belgium	Occupational Therapist
Mehmet Akman	Turkey	GP
Aigars Miežitis	Latvia	Health Economist
Lorna Hall	UK	Dietitian
Victoria Vivilaki	Greece	Midwife
Henk Parmentier	UK/Netherlands	GP/Mental Health
Imre Rurik	Hungary	GP/Occupational Medicine
Kathryn Hoffmann	Austria	GP/Public Health
Katerina Venovska	Macedonia	GP/Public Health
Mehmet Urgan	Turkey	GP
Tiago Pinto	Portugal	Nurse
Antoni Peris	Spain	GP/Manager
Jamie Wilkinson	UK/Belgium	Pharmacist
Alessandro Mereu	Italy	GP
Robin Miller	UK	Social Worker
Helene Colombani	France	GP/Public Health
Metka Žitnik Šircelj	Slovenia	Nurse
Kate O'Donnell	UK	GP
Harry Longman	UK	Engineer
Jill Long	Ireland	Physiotherapist

The role of the Advisory Board members showed its added value for international consultations. The Advisory Board members succeeded to mobilize their network, making sure many and valuable contributions were communicated with for example the European Commission.

In a mid-term meeting in Kent an interactive workshop was organized by the Executive Board tackling topics like the involvement of young professionals in the EFPC, interprofessional working within the network, the financial burden and sustainability of the EFPC.

The next onsite Advisory Board meeting is scheduled for the 23<sup>rd</sup> of September in Heraklion in which the plans for the PRIMORE project financed by the Norwegian Research Council will be further discussed and put into operational plans for the coming years.

A balanced geographical and professional, including patients/citizens representatives, distribution among the Advisory Board members is important and will have its positive effect on acquiring new

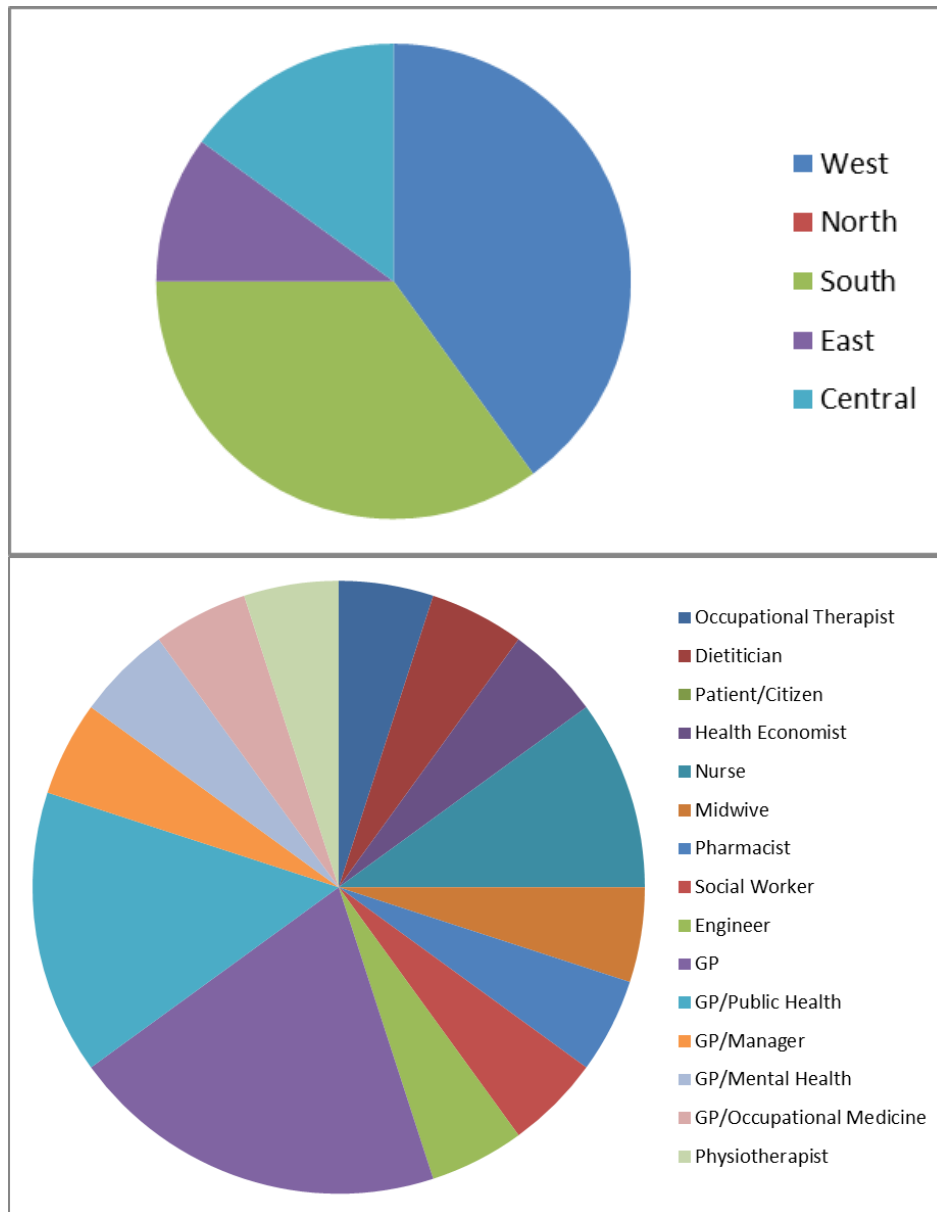


members, an increase of discussion via the PIE platform (EFPC platform for sharing “Problems, Idea’s & Experiences) leading to more profound ideas on how to move forward in developing health systems and also in invitations from other networks to present our vision.

In the past Association year Secretariat, Executive Board and Advisory Board members held presentations or represented the EFPC at various conferences/meetings:

- Diana Castro Sandoval and Diederik Aarendonk at the closure meeting of the EU Health Parliament in Brussels on 24 April;
- Diederik Aarendonk at the EU Flu vaccine manifesto launch in Brussels, also on the 24<sup>th</sup> of April;
- Elena Petelos and Diederik Aarendonk at the stakeholders meeting in Brussels led by Commissioner Andriukaitis on Health Technology Assessment
- WONCA Europe conference in Krakow, 24-26 May 2018
  - Alessandro Mereu and Diederik Aarendonk organized a workshop about the Community Health Centre model
  - Mehmet Akman, Henk Parmentier and Diederik Aarendonk organized a workshop about inequities in preventive and therapeutic primary care services

The current geographical (Europe) and professional distribution within the Advisory Board is presented in the graphs below:



There are still no representatives from patient/citizen groups in Europe, although attempts have been made.

And there is still an over-representation from the Western part of Europe. In particular we need more Northern and Eastern European representatives.

With several vacancies for new Advisory Board members at the Heraklion General Assembly the diversity can further grow.

### **Governance, secretariat**

Diederik Aarendonk and Diana Castro Sandoval continued their role as coordinators of the EFPC, running the secretariat at the NIVEL premises in Utrecht, the Netherlands, for 2017/2018.

They receive financial and administrative support from Irene Cubells based in Barcelona.

Between the 1<sup>st</sup> of November and the 28<sup>th</sup> of February Diederik Aarendonk had a long break of 4 months, leaving the secretariat in the hands of his colleagues.

### **Growth**

The growth of the EFPC is mainly measured in terms of number of members. This year a decreasing number of institutional and individual members was seen. (See below ad 3, membership fees) Different reasons might have been important for the decrease like the difficult economic situation in the health care sector in large parts of Europe but also the limited capacity of the EFPC secretariat to provide a proper follow up on all current and potential members. The fact that the secretariat has been functioning with 50% capacity less during the winter months of this association year did not help to provide this proper follow up. It remains always difficult to assure visibility and showing our membership and potential members the added value of our work which is often invisible. A strategy to do this differently is highly needed.

### **Financial sustainability of the EFPC**

The separate financial report details the financial status of the EFPC. Balancing income and expenses will remain a particular challenge during the coming years.

On the expenses side: the EFPC has operated with a secretariat of 1.1 FTE for the year 2017/2018 based at NIVEL, the Netherlands Institute for Health Services Research in Utrecht. In addition administrative support is provided by Ms Irene Cubells based in Barcelona. The secretariat spends 30 % of its time on purely administrative matters and 70 % on organising (contributions of) members and content matters of the EFPC. This includes attendance of conferences and network events, preparation of policy statements and development of project proposals. We might try to reduce the administrative part by exploring easier and better solutions for our member and conference administration.

The salary administration is executed by a private service based in the Netherlands. The premises is rented from NIVEL including ICT support.

Other expenses are the organisation of conferences and facilitation of Board activities and project implementation. This year an extra mid-term conference was organized in Kent, the home base of our new chair, Sally Kendall.

In general, the EFPC has the following sources of income:

1. Institutional funding
2. Project activities
3. Membership fees.

The income from membership fees provides the EFPC a guaranteed and long-lasting income with a large freedom in the way EFPC operates in comparison with institutional and project funding.

Ad 1

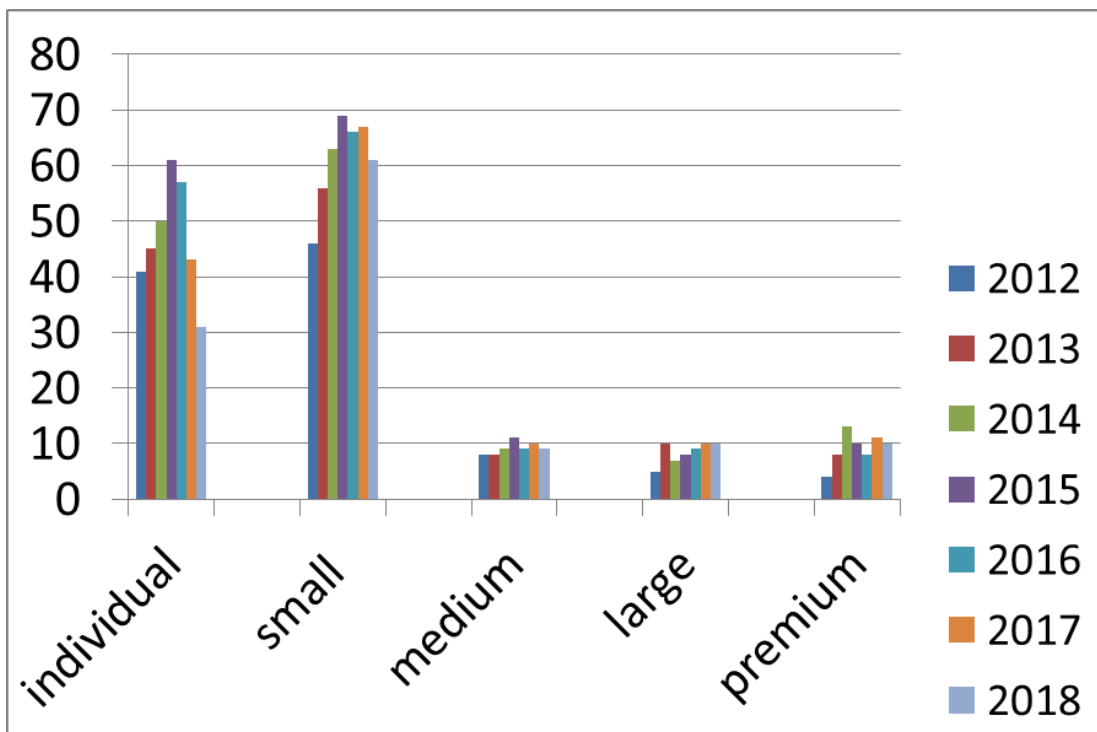
The EFPC did not receive any institutional funding in the previous association year

Ad 2

The EFPC's conferences, study visits and development of Position Papers are main activities. The EFPC is still partner in a FP7 project on Palliative Care led by the Free University of Brussels which runs for another ½ year, in DG Sante projects on refugee care (ORAMMA) led by the TEI Athens and a project on training of Primary Care professionals in relation to the care for the LGTB community in Europe (PARADISO). Both projects will end at the end of 2018.

Ad 3

The number of members now counts 89 institutional members. The total number of individual members is 31. (see below the graph of the number of the different member groups for the EFPC Association).



We have seen a difficult year regarding membership. Both the numbers of institutional and individual members have gone down. It becomes more and more difficult to connect with potential new members in such a way that they register. A renewed strategy has to be developed in order to assure a sound financial prospective of the EFPC.

In Autumn 2015 EFPC established a collaboration with the publishers of Primary Health Care Research & Development (PHCRD), Cambridge University Press (CUP). This collaboration will be continued for another 3 years. The journal will be moving to an Open Access model from 2019 onwards. Prof Sally Kendall, editor in chief of PHCRD, is our liaison with also Prof Peter Groenewegen (EFPC Executive Board taking part in the editorial board. Dr Mehmet Akman (EFPC Advisory Board) is an Associate Editor. PHCRD will be publishing a special issue in 2019 to commemorate Alma Ata 40.