
The current Executive Board of five members will be enlarged to six members the next association year, saying goodbye to Prof Peter Groenewegen and Prof Danica Rotar-Pavlic after a long period of active Executive Board membership. Their roles will be taken over by Dr Alessandro Mereu and Drs. Tjard Schermer. In addition You&E FPC member, Dr Andrea Canini will become a member of the Executive Board to assure a smooth alignment with the young primary care professionals within the EFPC membership.

In the Advisory Board some changes will come whereas current members Harry Longman, Jamie Wilkinson, Lorna Hall, Tiago Pinto and Alessandro Mereu will step down. An invitation for submission of CV’s and letters of intention has been issued to all members to fulfil the vacancies. The candidates will be nominated after CV’s and background have been checked by the current Executive Board. In Heraklion the General Assembly will select the candidates for the open places.

For the period 2018-2021 EFPC has three strategic objectives:

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.

Objective 1: EFPC will contribute to and improve advocacy in relation to promoting the importance of strengthening primary care.

The rationale behind this objective is that Primary Care does not develop without specific policy investment. The current trend in many European countries is increasing specialization and commodification. Patients often expect to get the best possible care from the most specialized providers, where the focus is often disease orientated rather than public health or community based. Strong Primary Care functions best when it is responsible for a defined group of patients, a patient list or a community, and where generalist care controlled by gatekeeping to specialist services is in place. By advocating for active policies that restrict the access to specialist care, EFPC intends to influence policy and service provision at local and country level.

EFPC will provide and use information and intelligence to stakeholders at different levels. At the European level, EFPC focuses on the European Union and WHO Europe; at national and regional level the focus is on policy makers, patient organisations and professional bodies.

The general inputs to this consists of the work of the secretariat of the EFPC which is a professional, salaried secretariat, currently consisting of a senior coordinator who acts as director and a junior coordinator. Much of the general inputs come from the individual members, the Advisory Board members, and Executive Board members (all voluntary).

The overall impacts to be expected from activities focused on the first objective are that we create awareness of the importance of strong primary care for population health and equity amongst relevant stakeholders. We also aim to contribute to stronger primary care policies at European and national levels. Finally, the EFPC will contribute towards the implementation of results of international research projects in which the EFPC participates.

Objective 2: Consolidating and expanding the network of policy, research and practice stakeholders in European countries.

There is a need for a stable and extended European Forum that can increase its capability to influence policy and practice through the network and advocacy work at different levels across EU countries. As primary care policy expands, there will be even greater need to work closely with national and local stakeholders in the implementation of evidence informed policy and practice. Supported by the EFPC secretariat, the EFPC will create a sustainable network and increase capacity and capability in the following ways:

- Promote the organisation across country-based health care systems, universities and NGOs using social media, word of mouth, regular newsletters and a well maintained website.
- Offer networking opportunities to members and stakeholders including webinars on a monthly basis and an annual conference.
- Cross-country study tours by key members of EFPC in specific areas of expertise
- Information and debate opportunities through seminars and published papers
- Development of special interest groups to both widen and intensify the core areas.
Increase capacity and capability to influence and inform policy decisions at local level.

The general inputs used to further this objective are the same as in the previous objective (activities of the secretariat, the members, the Advisory Board and the Executive Board). As a result of the activities towards this objective we expect that the larger health care community is aware of EFPC positions and opinions and is forwarding and using our messages. By increasing the network with more members, influence will increase, the number of people getting our messages will grow and the financial position of the EFPC will be maintained. The latter is important from the point of view of providing independent evidence to stakeholders.

Objective 3: Taking position in relevant discussions, based on research and practice evidence.

To enable evidence-informed policymaking and to connect policy, practice and research in order to create knowledge exchange, the EFPC regularly develops Position Papers. The Position Papers are written by working groups consisting of members from different professional and geographic backgrounds. They bring together research evidence as well experience from practice. The Position Papers are published on the website as well in the official journal of the EFPC Primary Health Care Research & Development.

Apart from general inputs previously mentioned, the emphasis lies here with the active members of the EFPC. The Position Papers have a measurable impact as they are published in an official journal. Consequently the normal metrics (and altmetrics) of scientific articles can be counted. From the past these show that the position of primary care is widely known in the health care field and beyond and knowledge about European developments in primary care is available and used.

Annual plan 2018-2019

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). 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 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 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 are 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 fulfill 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 WHO European regional member states 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. 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 plans 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 governance 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 a basic part of our strategy. A strategy with guidance for all members is planned to be ready by November 2018, starting implementation on the 31st of December 2018.