European Forum for Primary Care

Activity Report, July 2020 – June 2021

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 2020 - June 2021, presented to the members by the Executive Board at the General Assembly of the EFPC.

General Reflection

2020-2021 has been again a strange year due to all COVID19 regulations which impacted the work and activities of the EFPC.
The cancellation of the EFPC2020 Ljubljana conference and now again the EFPC2021 Bergen conference has its’ consequences. The small online conference in 2020 instead was not providing the same ambiance as we always experience at onsite conferences.

We tried to invest more in online activities and connections, including the organisation of a series of interactive webinars. EFPC Working Groups were stimulated to become more active. In particularly the Mental Health and Prison Health WG had some tangible output with the publication of their Mental Health Position paper and a webinar on Cases of Primary Care in closed settings/prisons. A new EFPC WG was started on environmental issues called Greener Primary Care.
The vaccination WG was very active in supporting a range of statements together with linked networks like the call to action for global, European and national stakeholders and governments to strengthen pandemic preparedness and responsiveness by taking a life- course immunization (LCI) approach and a call for Equitable Access for Vaccines and Treatment during COVID-19 Pandemic Around the world.

EFPC acted as one of the active Allies Improving Primary Health Care which is an alliance setup by the Primary Health Care Performance Initiative which started a global campaign named “#StrongwithPHC”.
And we joined the 30by2030 campaign calling for major international donors to assign a part of their vertical (disease-oriented) categorical budgets, increasing to 30% by 2030, to strengthening horizontal Primary Health Care systems.
The EFPC succeeded in the publication of a BMJ Opinion Piece called “Dealing with the collateral damage of covid-19: It’s not all about cure—it’s about care”. In the framework of the PRIMORE project the EFPC organized an Online Masterclass in Interprofessional Primary Care research aiming at early career researchers to further develop their professional and research skills.

Partially due to COVID19 constrains, the finances remain a challenge. Similar to last year we did not have EU funded projects running. The setup of a Strategic Task Force should lead to new opportunities to engage with potential sponsors and members.
Highlights 2020-2021 according to the EFPC Executive Board members

- Statements
  - A call to action for global, European and national stakeholders and governments to strengthen pandemic preparedness and responsiveness by taking a life-course immunization (LCI) approach which will expand access to vaccines, improve uptake, and ensure optimal protection of all populations.
  - Call for Equitable Access for Vaccines and Treatment during COVID-19 Pandemic
    http://euprimarycare.org/2021/03/04/wfpha-press-release/
  - Open Letters To: President of the 2021 G20 Summit & President of the 2021 G7 Summit
    http://euprimarycare.org/2021/04/23/open-letters-to-president-of-the-2021-g20-summit-president-of-the-2021-g7-summit/

- PRIMORE Masterclass | Interprofessional PC Research
  http://euprimarycare.org/2020/08/19/primore-masterclass-interprofessional-pc-research/

- A series of EFPC lunch-webinars tackling topics like "Cases of Primary Care in closed settings/prisons"

- Joining the Allies Improving Primary Health Care and starting the global campaign “#StrongwithPHC”

- EFPC 2020 Online Conference including a virtual site-visit to the Ljubljana Health Centre with a focus on their achievements in handling the COVID19 crisis
  http://euprimarycare.org/2020/05/20/efpc-2020/

- EFPC Position Paper for Primary Care Mental Health, Time for change, now more than ever!
  published in PHCRD
  http://euprimarycare.org/2020/12/09/mental_health_paper/

- BMJ Opinion Piece “Dealing with the collateral damage of covid-19: It’s not all about cure—it’s about care”

- Establishment of a new Working Group on Greener Primary Care
  http://euprimarycare.org/2021/04/09/greener-primary-care/

- Primary Sources contribution “Primary care response to COVID-19 in Italy: pearls and pitfalls”
Report 2020 - 2021

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 ‘20 – June ‘21), against the background of its organisational aims.

Main activities.

- EFPC fortnightly newsflash (already running from May 2006 onwards) and the use of Social Media, like LinkedIn PC Forum (6434 members) and an EFPC Twitter account with 2195 followers.
- The 15th EFPC yearly conference: Online with an interactive program
- The PRIMORE project kept its’ activities with an Online Masterclass on Interprofessional Primary Care research aiming at early career researchers to further develop their professional and research skills.
- Workshops and presentations at various (inter)national conferences of related networks such as Health First Europe, EuroHealthNet, Österreichisches Forum Primärversorgung im Gesundheitswesen (OEFOP), WHO Regional Committee for Europe, WONCA Europe, etc.
- Statements developed on
  o A call to action for global, European and national stakeholders and governments to strengthen pandemic preparedness and responsiveness by taking a life-course immunization (LCI) approach which will expand access to vaccines, improve uptake, and ensure optimal protection of all populations
  o Call for Equitable Access for Vaccines and Treatment during COVID-19 Pandemic
  o Open Letters To: President of the 2021 G20 Summit & President of the 2021 G7 Summit
  o EUFlu vaccine day
- BMJ Opinion Piece “Dealing with the collateral damage of covid-19: It’s not all about cure—it’s about care”
- A variety of EFPC webinars with a range of topics like "Cases of Primary Care in closed settings/prisons", "Primary Health Care Research and Development Journal" and “Put the Horse Before the Cart”, a video webinar exploring investment in health workforce and how COVID-19 has influenced this.
- Start of the new EFPC Working Group on Greener Primary Care.
- Joining the Advisory Board of the EU project AHEAD: Action for Health Equity Against medical Deserts led by the Dutch EFPC member WEMOS
- Responses to international consultations like the Expert Panel on effective ways of investing in health (organisation of resilient health and social care following the Covid-19 pandemic) and EMA (ICH Guidelines).
- Publication of the EFPC Position Paper for Primary Care Mental Health, “Time for change, now more than ever!” in Primary Health Care Research & Development (PHCRD), the official journal for the EFPC

European Forum for Primary Care
Otterstraat 118-124, 3513 CR, Utrecht, The Netherlands tel +31 30 272 9611
info@euprimarycare.nl
www.euprimarycare.org
• Editorial for the spring 2021 Healthcare Professionals Crossing Borders (HPCB) newsletter “EFPC: COVID-19 urges person-centred, community oriented integrated primary care” by Diederik Aarendonk, Sally Kendall, Andrea Canini & Maria van den Muijsenbergh
• The EFPC joined an EMA Tender project proposals (Quality, efficacy and safety studies on medicines). We are awaiting the results.
• The EFPC submitted a proposal for the WHO Academy to develop a Primary Health Care course
• The EFPC initiated the development of a COST action proposal on “Promoting sustainable integrated healthcare by digital interprofessional platforms/tools for interprofessional collaboration as a means of achieving patient-centered care” to be submitted at the end of October 2021 in close collaboration with many EFPC members, including all European professional association, and led by the University of Nijmegen.
• Primary Sources contribution “Primary care response to COVID-19 in Italy: pearls and pitfalls” by Andrea Canini
• After cancellation of the #EFPC2020 Ljubljana conference, the EFPC secretariat started to develop a small online event instead consisting of a pre-conference day with a virtual site-visit and masterclass and a two main conference with on day one a key-note lecture and the General assembly and on day two a few theme based workshops.
• Submission of the RESET-ID project proposal “Behavioural, social and economic impacts of the outbreak response” on the EU call SC1-PHE-CORONAVIRUS-2020-2C led by Lorena Dini. Unfortunately this huge effort of Lorena and a number of EFPC members to produce a project proposal in only two weeks time was declined.
• The EFPC joined the Allies Improving Primary Health Care, an empowered, vocal and engaged community, uniting to achieve reliable and resilient primary health care which started a global campaign named “#StrongwithPHC”. Together with AfroPHC, AMREF, WONCA, JHPIEGO and many other linked networks we are uniting behind strong primary health care for all.
• The EFPC joined the campaign calling for major international donors to assign a part of their vertical (disease-oriented) categorical budgets, increasing to 30% by 2030, to strengthening horizontal Primary Health Care systems so that all diseases can be prevented and people treated in a comprehensive way.

• PRIMORE Masterclass: Interprofessional PC Research 27, 28 & 29 September 2020 which aimed at early career researchers to further develop their professional and research skills.
• Partnering the peoples’ summit ‘Co-Building A New Eco-Social World: Leaving No One Behind’
• Involvement of Walter Marrocco (EMA Working Group) in the study “Implementing new Diagnostics in European community care to Advise management of respiratory infections: a qualitative study (IDEA)”
• Active Involvement if the EU HTA pool, Health Care Provider pillar via Elena Petelos
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\(^1\) for European/international associations of primary care (related) professions is one of the strategies. In the previous association year we established such a mutual association with International Alliance of Patients’ Organisations (IAPO) and the African Forum for Primary Health Care (AfroPHC).

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.

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, 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. For this year we welcomed new members from Ireland, Spain and the UK in particular.

We achieved a stable number of members and we still believe in the importance of being a membership driven association, as well from a content and financial perspective. Financially it is a more secure finance source than conference or project sources. And from a content perspective our membership is the biggest source for producing any material or activity. Based on this output we need to be able to raise more interest from other potential members. For this some temporarily project funding or institutional sponsoring is needed to get our messages better spread.

For the current number of members see below the graph on page 10.

---

\(^1\) Associated membership: mutual recognition as a member without charging membership fee and without voting rights in each other’s General Assemblies.
Governance, growth and (financial) sustainability of the organization

Governance, Executive & Advisory Board

The EFPC held its 2020 General Assembly on September 28 via an online zoom connection. The current Executive Board (Sally Kendall, chair; Harry Longman, treasurer; Alessandro Mereu, member; Maria van den Muijsenbergh, member; Judith de Jong, member; Andrea Canini, member) has met 6 times, all online meetings.

In spring the Executive Board agreed to nominate Maria van den Muijsenbergh as the new chair of the EFPC, taking over the role of Sally Kendall who will end her second term this year.

The agenda of the previous year covered EFPC’s involvement in statements of other organisations, practical planning of activities hampered by the COVID19 regulations and the follow up of the financial situation of the EFPC.

The Advisory Board, consisting of 20 members met twice online (28/9/20 and 8/3/20).

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 statements focussed on the vaccination strategies for COVID19.

The next Advisory Board meeting is scheduled for the 6th of September as an online meeting due to the cancellation of the Bergen 2021 conference. In this meeting two Advisory Board members will end their activity in the Advisory Board. They have played an outstanding role in pushing the EFPC further as an important network when it comes to improvement of the health of Europeans.

A balanced geographical and professional - including patient/citizen representatives - distribution among the Advisory Board members is important and will have its positive effect on acquiring new members, an increase of discussion via online platforms (e.g. PIE 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.

The EFPC secretariat and board members performed presentations for various conferences/meetings (WONCA, Austrian Primary Care Forum, etc) resulting in the following list:

- RC70 WHO Regional Committee for Europe, 14/15 September 2020 (Diederik Aarendonk)
- Österreichischen Primärversorgungskongress, 19 September 2020 (Maria van den Muijsenbergh, Jan De Maeseneer & Diederik Aarendonk)
- WONCA Berlin online conference, 16-19 December 2020, Key-notes (Sally Kendall, Maria van den Muijsenbergh & Andrea Canini)
- Webinar European Innovation and Knowledge mHealth Hub, 23 October 2021 (Harry Longman)
- International Hospital Federation Virtual Forum Learning from COVID-19, Transforming Health Services, 4/5 November 2020 (Jan De Maeseneer)
- Health First Europe, “Integration of health and social care to tackle disease outbreaks”, 26 January 2021 (Diederik Aarendonk)
- International Scientific Conference of Primary Care in Slovenia – ISCPC, 12 February 2021 (Sally Kendall)
- International committee of two Belgian Chairs in primary care, 3 May 2021 (Diederik Aarendonk)
- EuroHealthNet & Institute of Positive Health: invitational meeting on the concept of positive health and community health care, 22 June 2021 (Diederik Aarendonk & Jan De Maeseneer)
- WONCA Europe 2021, Round table session 10 July 2021 (Maria van den Muijsenbergh, Leen De Coninck, Metka Zitnic and Paula Vassallo)

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. In the upcoming General Assembly a candidate of the International Alliance of Patients’ Organizations will nominate herself.

From a geographical perspective we need more Northern and Eastern European representatives. With two vacancies for new Advisory Board members at the upcoming General Assembly the diversity can further grow.

**Governance, secretariat**

Diederik Aarendonk continued his role as coordinator of the EFPC running the secretariat at the NIVEL premises in Utrecht, the Netherlands, for 2020/2021. Since the start of 2021 without the support of a junior coordinator,

The administrative support comes from Irene Cubells based in Barcelona.
Growth

The growth of the EFPC is mainly measured in terms of number of members. This year the number of institutional remained stable and a small drop for individual members was seen. (See below ad 3, membership fees)
It remains always difficult to assure visibility and showing our membership and potential members the added value of our work which is often invisible. Certainly now with the COVID19 regulations which hampers the activity of the association. This will be a continuing challenge for which we have formed a “Strategic Task Force” to develop a plan which might provide growth in the coming years.

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 as it was in the previous years.
On the expenses side: the EFPC has downsized its’ secretariat by ending the contract of the junior coordinator and has operated with a secretariat of 0,4 FTE for the year 2020/2021 based at NIVEL, the Netherlands Institute for Health Services Research in Utrecht. In addition administrative support was provided by Ms Irene Cubells based in Barcelona. This size is probably the lower limit for running the secretariat in order to have sufficient organizing capacity.
The secretariat spends 20 % of its time on purely administrative matters and 80 % on organising (contributions of) members and content matters of the EFPC. This includes attendance of meetings and network events, preparation of policy statements and development of project proposals.
The salary administration is executed by a private service based in the Netherlands. The premises is rented from NIVEL including ICT support which was offered for free this last year.
Other expenses are limited now in COVID-19 mode although normal overhead like insurances, communication, etc remains a substantial expense.

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. We are happy with this business-model as it remains a rather confident source of funding, compared with for example project funding or the positive balance from a yearly conference. If the latter would have been our main source of income we would have been in big trouble after again a cancelled conference this year. Still additional funding is needed to let the association flourish and to increase the capacity of the secretariat. A 30/40K institutional funding on a yearly basis would be sufficient. Attempts are now developed to have this extra funding assured.

Ad 1
The EFPC did not receive any institutional funding in the previous association year
Ad 2
The EFPC’s conferences, webinars and development of Position Papers are main activities. The EFPC is not anymore involved in EU funded projects. On the other hand it receives project funding from the Norwegian Research Fund for its’ PRIMORE project, led by its’ Norwegian member, the Centre for Care Research which will end in the upcoming association year.
Ad 3
The number of members now counts 74 institutional members. The total number of individual members is 29. (see below the graph of the number of the different member groups for the EFPC Association).
The numbers of institutional and individual members have been stable but with less activities, due to the reduced capacity of the EFPC secretariat, we fear to fail in keeping members on board. For the same reason it is even more difficult to connect with potential new members in such a way that they register. Extra efforts in the follow-up of potentially interested persons/institutes plus offering interesting activities was rather difficult in the previous year and will be a challenge in 2021/2022.

Primary Health Care Research & Development (PHCRD) of Cambridge University Press (CUP) remains our preferred journal for publication. Prof Sally Kendall remains editor in chief of PHCRD and is our liaison with also long lasting EFPC members Peter Groenewegen and Mehmet Akman taking part in the editorial board.

The EFPC Mental Health 2020 Position Paper “Time for change, now more then ever!” has been published in the journal.