

CemPaC Strategy Board Meeting 22 March 2018

Dublin, Ireland.

Present:

Graham Baker- Quality Institute for Self-management Education and Training

Kristine Sorenson- Global Health Literacy Network

Kaisa Immonen- European Patients Forum

Nicolai Holm Faber- Danish Committee on Health Education

Lars Munter- Danish Committee on Health Education

Katrín Fjeldsted- CPFME

Cecilia Vera- Munoz Madrid Technical University

Prof Anne Rogers- Southampton University

David Somekh- EHFF

Jim Phillips- CEmPaC

Jeni Bremner-CEmPaC

Suzanne Melin-Robert Bosch Foundation

Apologies:

Careum

Medizinische Hochschule Hannover- Marie Luise Dierks

International Association of Patient Organisations

Introductions:

The meeting opened with **general introductions** during which the depth of experience of the strategy board was acknowledged.

During a longer round of more in-depth introductions the Programme Board members were asked to talk about their interest in programme board of CEmPaC and what they brought to it. Their responses included:

- Working with groups of 'hard to reach' people and connecting with them- through a mix of 1:1 personal interaction and also technology.
- Social network innovation: Findings that network efficacy leads to individual efficacy. Focus on developing empowered networks not empowered individuals.
- System Change: Approaching health professionals who have been ill and have experienced the system to act as empowerment champions.
- Transferring approaches from other sectors (such as hand hygiene in nursing homes).
- Engaging with the professional autonomy of doctors.
- Active and health ageing.
- Understanding the role of Health Literacy as a key approach to developing accessible services

History

An introduction to CEmPaC explaining its deep roots into the ENOPE network followed. (Slides attached.)

Models

The key to CEmPaC's work is an agreement about the underlying models for our work. During a discussion about the models a number of points were raised:

- Patient activation is only a partial approach.
- Translational issues from the different models of empowerment.
- Philosophy/ key principles behind the work.
- What is being human? Gaps in care.
- Before/during/after being a patient- our roles change as our status changes.

- There's a need to look beyond a focus on the individual.
- If you send a perfectly empowered patient back to a poor environment you lose the empowerment.
- Patient systems of implementation.
- Emerging evidence of the importance of the relationship between self/communities/networks
- Collective efficacy and relational health literacy

Key principles to drive CEmPaCs work:

Existing models are too inflexible, so it is important to focus on principles. And to use any approach or model that is suitable; and that meets these principles.



The concept of collective efficacy and relational health literacy is as important, if not more so than individual, so the website needs to reflect this by including a communities section.

Conference

Early and late 2019 with final one at the end of 2020.

Suggestion to link the three conferences, maybe developing themes in the first two that come together in the final conference.

Potential venues for the conferences, Berlin, Denmark or Austria (to link into the presidency).

Opportunities for CEmPaC to join with other conferences:
EPF conference in 2019 which is focussed on meaningful patient involvement.
Dublin Conference on Health Literacy.

It was agreed that we will try not to clash with anything else and explore the possibility of holding some kind of symposia at the end of 2018.

Other ideas:

Base the conference in a location where we can showcase the work they are doing.

The first conference could focus on the communities strand of CEmPaC work and then run as a rolling learning event in a locality.

Think about the offer we could make to the hosts to support the work that they are doing.

Could we develop an award – ‘the empowerment location/city of Europe?’

Need to look at “big ideas”

At the end of the meeting we asked each member of the programme board to close with both an offer for CEmPaC and an ‘Ask’.

Celia

Offered best practice case studies.

To support developing the business case for empowerment.

Ann

Offered a blog and evidence collation against the key themes for the evidence centre.

She asked for input into the collective self efficacy measure and links into genie.

Nicolaj

Offered to comment on the blogs as they go up, and asked that other member of the programme board do the same.

Will translate the ‘loss of control argument’ for the website.

He asked for input into their research into measures to support collaboration.

David

Offered EHFF support on our twitter presence and suggested a YouTube channel for interviews etc.

Lars

Offered 1200 words by May, and a case study from Denmark.

To publicise existence of CEmPaC at an EU level.

Kaisa

Support for our social media work.

Blog.

Links into patient organisations in countries.

Highlight CEmPaC in EPF communications.

Suzanne

To support our work to get the second tranche of funding.

Translation of the German action plan (attached).

Use of the Berlin venue for meetings/conference

Next Meetings:

Copenhagen in November 2018

Berlin in May 2019

