



Joint Action on CVDs and diabetes

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DP-g-22-06.03 Direct grants to Member States' authorities: prevention of NCDs – cardiovascular diseases and diabetes

OBJECTIVES, SCOPE AND ACTIVITIES

The aim of the joint action(s) is to reduce the burden of NCDs and related risk factors, both at personal and societal level, targeting or addressing the specifics of cardiovascular diseases and diabetes and their health determinants, as necessary.

Structure of coordination



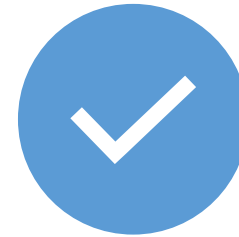
**GENERAL OBJECTIVE
SPLIT IN SPECIFIC
OBJECTIVES (1 PER WP)**



**NOMINATION OF A WP
LEADER**



**DESCRIPTION OF THE
TASKS AND PLANNING**



**DESCRIPTION OF
MILESTONES AND
DELIVERABLES**



**ALLOCATION OF
RESOURCES TO COVER
EXPENSES(STAFF
+OTHER COSTS)**

Structure of coordination



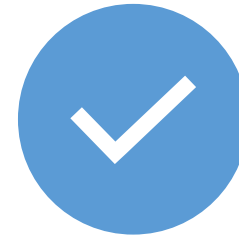
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1st coordination meeting (11 May 2022)



Definition of *technical WP* and their specific objectives



Nomination of *writing panels for each WP*



Description of the tasks and planning

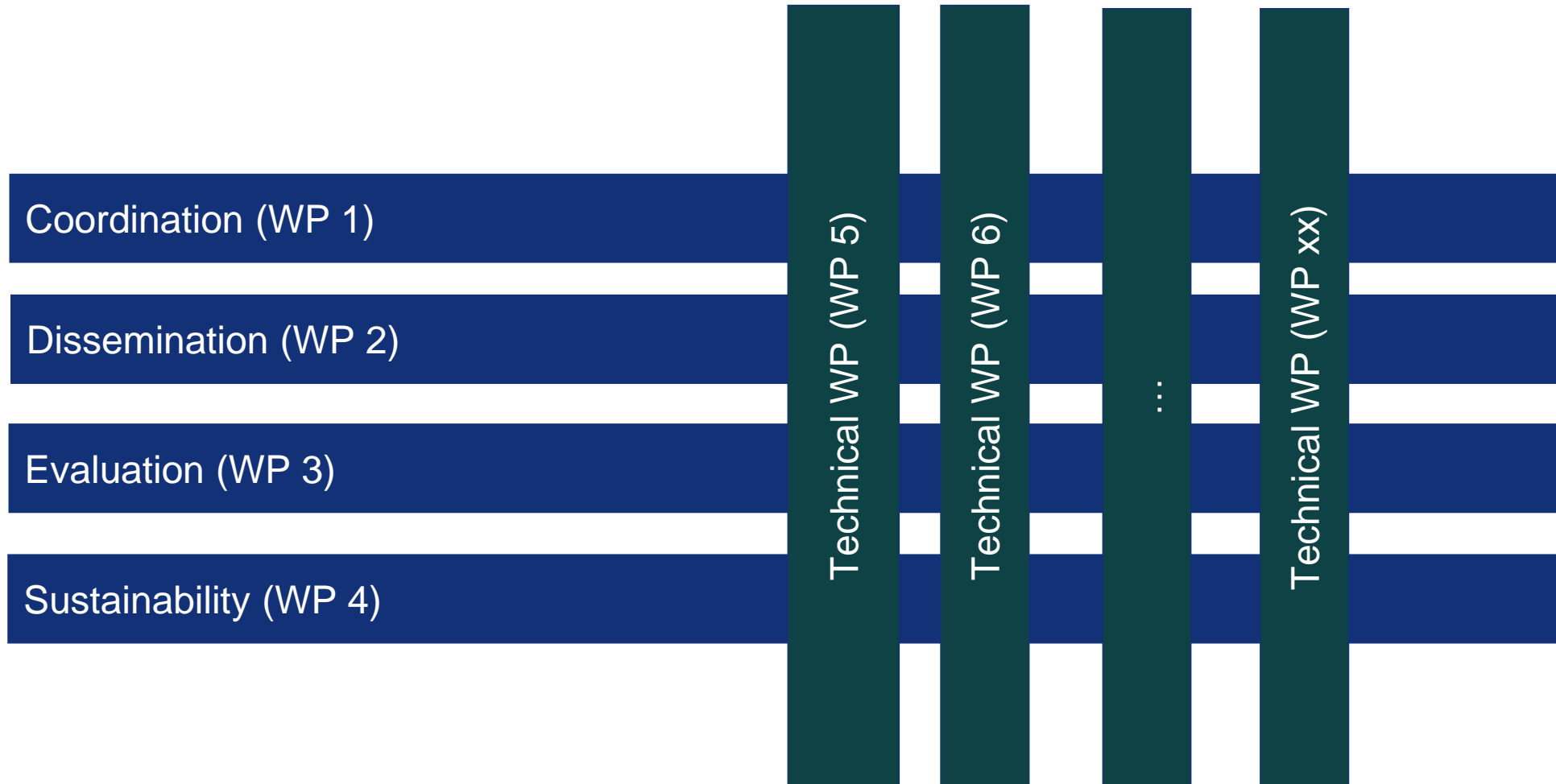


Description of milestones and deliverables

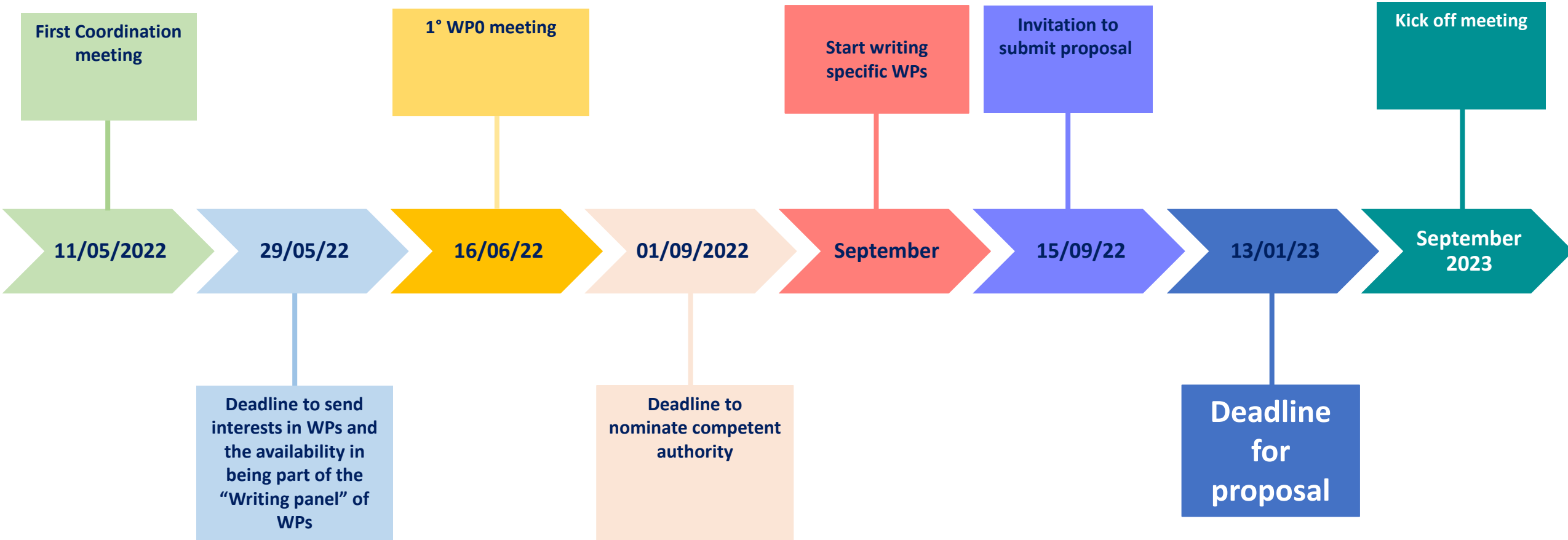


Development of a coordination plan

Structure of a JA



Timeline of coordination



WPs outlined through the coordination meeting

WP0 – Integrative approach

**WP1 -
Information
and raising
awareness on
diabetes, CVD
and their risk
factors and
Health literacy**

**WP2 - Data on
diabetes and
CVD /
registries**

**WP3 - Improve
screening for
(high risk of)
diabetes and
CVD**

**WP4 - Improve
patient care
pathways
(personalised),
promote
integration of
care and
support
disease
prevention**

**WP5 - Improve
support to
patients with
diabetes and
CVDs, and
diabetes and
CVDs (self-)
management,
including
digital tools**

**WP6 - Increase
and support
labour
participation
of people
living with
diabetes and
CVDs**

WPO - Objectives

1. Ensure that all work packages cover transversal aspects, divided into three levels:
 - a. social determinants (age, sex, socioeconomic factors, vulnerable populations, health inequalities);
 - b. cultural sensitivity;
 - c. dissemination and accessible information (health literacy, digital literacy, health information)
2. Define a methodology/framework for implementation in WP1-WP6
3. Improve/provide information for decision-making

2nd writing panel meeting planned on 05 September 11.00 -13.00 (CEST)

WPO –Tasks

1. Review other European projects and find the link with JA
2. Identify and integrate strategies for including and covering transversal and and intersectional aspects at three levels
 - i) social determinants (age, sex, socioeconomic factors, vulnerable populations, health inequalities);
 - ii) cultural sensitivity;
 - iii) dissemination and accessible information (health literacy, digital literacy, health information).
3. Identify elements and principles for improving current practices
4. Development a methodology for WPs implementation (PDSA cycle) (here could be also included the transversal and and intersectional aspects)
5. Define process and measurable indicators
6. External monitoring the implementation (here could be also included the transversal and and intersectional aspects)
7. Provide information for decision making

WP1 - Information and raising awareness on diabetes, CVD and their risk factors and Health literacy

- Perform literature review on the topic.
- Design/review and pilot-test a plan to improve information on diabetes and CVD and their risk factors and raise awareness of these conditions and their risk factors among the general population, and among vulnerable and high-risk groups.
- Pilot implementation of interventions to improve health literacy specific for diabetes and CVD, in addition to a more general approach to improve health literacy and digital literacy in the suggested collaborative action on Health determinants.

1st writing panel meeting planned on 08 September 11.00 -13.00 (CEST)

WP2 - Data on diabetes and CVD / registries

- Design/review and pilot-test a plan to improve data availability, including, for example, the establishment and networking of (population-based) diabetes or CVD registries.
- Standardisation of data collection, data sharing, assessment of diabetes complications in specific registries.
- Case study to assess cost-effectiveness of specific interventions based on data collected

1st writing panel meeting planned on 12 September 11.00 -13.00 (CEST)

WP3 - Improve screening for (high risk of) diabetes and CVD

- Design/review and pilot-test of evidence-based guidelines for population and/or opportunistic screening on diabetes, CVD and *clinical risk factors (risk assessment – risk stratification)*, including, for example, the joint definition of ethical guidance, minimum standards, and packages for the training of healthcare professionals.
- Develop and implement integrated screening strategies, i.e. for type 2 diabetes, high blood pressure, and hypercholesterolemia.
- Standardisation of screening procedures (Health Examination Survey)

1st writing panel meeting planned on 15 September 11.00 -13.00 (CEST)

WP4 - Improve patient care pathways (personalised), promote integration of care and support disease prevention

- Design/review and pilot test of a health system model to deliver person-centred and integrated care adjusted to multi- morbidity and encompassing prevention (Re-orienting health systems towards health promotion and disease prevention, integrating lifestyle assessment and intervention into the practice of primary care professionals).
- Pilot test should cover important aspects of care and prevention, including:
 - Use of digital tools in the care pathways – create links with WP5
 - Peer support
 - Patient involvement in decision making
 - Physical activity
 - Healthy diet

Interventions should consider to be focused on gender differences and specific age groups – Adolescents/end-of-life

1st writing panel meeting planned on 16 September 11.00 -13.00 (CEST)

WP5 - Improve support to patients with diabetes and CVDs, and diabetes and CVDs (self-) management, including digital tools

- Design/review and pilot-test a plan to improve support to patients' (self-) management of diabetes or cardiovascular diseases, including the use of digital tools and medical/wearable medical devices by healthcare professionals and patients to support disease (self-management). Including, for example, an industry self-registry database of related apps.

Create a link with WP4

1st writing panel meeting planned on 26 September 11.00 -13.00 (CEST)

WP6 - Increase and support labour participation of people living with diabetes and CVDs

- Design/review and pilot-test a plan to increase and support labour participation of people living with cardiovascular/diabetes diseases.
- Plan interventions for risk assessment in the labour place. See also work-based interventions under Health determinants, Integrated approach.

Build on what produced in the JA CHRODIS

1st writing panel meeting planned on 03 October 11.00 -13.00 (CEST)

Contatti

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