

## Evidence-Informed Policy and Stakeholder Dialogue

### Course description

A learning health system relies on cyclical dynamics to identify issues in the health system, systematize relevant evidence, present alternative courses of action, collaboratively agree on the best action, and implement and monitor the change. For this process to be successful there is need for a structured dialogue between different stakeholders (e.g., representatives of the government, public health administration, health care providers, insurers and patients) to identify and understand the critical issues and collaboratively identify the best and most feasible response for implementation. As part of this course, students will simulate a stakeholder dialogue to better understand the underlying mechanisms and challenges in bridging research, policy and practice. Students will take different roles and prepare the dialogue accordingly. An introduction to the evidence-informed policy framework and argumentation theory will provide the theoretical foundation. In addition to active participation in the dialogue, it is expected that students engage in a post-dialogue discussion about the achieved goals.

### Learning objectives

The objectives of this course are i) to learn the basics of argumentation theory, ii) to understand the structure and value of policy briefs in evidence-informed policy-making, and iii) to execute a stakeholder dialogue on a current issue in the health care system, including the in-depth study of a policy brief.

### Grading

Grading for this course is based on

- i) active participation in the introductory class on argumentation theory and on policy briefs, including related online activities (20%),
- ii) preparation of a position paper depending on the assigned role prior to the stakeholder dialogue (40%),
- iii) active participation in the stakeholder dialogue in the assigned role and in the post-dialogue discussion (40%).

A grade of 4.0 or higher is required to successfully complete the course.

### Course schedule

20.09.2018, 09:30 – 16:00 in room 3.B58

- Bridging Research, Policy and Practice
- Policy Briefs as Input to Stakeholder Dialogues
- Introduction to Argumentation Theory

13.11.2017, 09:30 – 12:00 in room 1.B05 (Group 1)  
13:30 – 16:00 in room 3.B47 (Group 2)

- Stakeholder dialogue
- Post-dialogue discussion

### **Goal of the stakeholder dialogue**

Students will be assigned to two different groups.

#### Group 1 (Health Communication):

The topic of the stakeholder dialogue will be on the topic of how care for multimorbid patients can be improved. While the policy brief is written from a (general) European perspective, the dialogue will focus on the Swiss health system.

Similar to many other European countries also Switzerland is facing an increasing prevalence of multimorbidity, due to advances in medical technologies and increased longevity. Yet, the Swiss health care system is still largely organized around single diseases, which may not be necessarily responsive to the needs of patients with multimorbidity.

The goal of the stakeholder dialogue is to reach agreement on policy options discussed in the policy brief, and to develop actions that foster integrated care solutions in Switzerland.

#### Group 2:

The topic of the stakeholder dialogue will be on the topic of eHealth and how it can improve care for people with multimorbidity. While the policy brief is written from a (general) European perspective, the dialogue will focus on the Swiss health system.

Even though Switzerland has formulated an eHealth strategy that includes the implementation of electronic health records, relatively little attention has been paid on how to use eHealth solutions to enhance care for multimorbid patients (e.g. interoperability of eHealth solutions; regulations for mobile health solutions and legal status; training and educational campaigns to promote uptake of eHealth solutions).

The goal of the stakeholder dialogue is to reach agreement on policy options discussed in the policy brief, and to develop actions that foster eHealth solutions to improve care for multimorbid patients.

### **Stakeholders and position papers**

Students will be assigned a specific role in the stakeholder dialogue, including representatives of the government (e.g., the Federal Office of Public Health, or the Swiss Conference of the Cantonal Ministers of Public Health), health care providers (e.g., public and private hospitals, physician associations, nurses), health insurers and patients.

In the preparation of the stakeholder dialogue, each student has to write a position paper. The position paper outlines the view of the stakeholder on the policy options presented in the policy brief and to what extent they agree or disagree with the proposed solutions. The position paper must carefully explain why there is agreement or disagreement, and for the latter case, also explain what additional steps (e.g., further research, clarification about legal issues, alteration of proposed solution) would be necessary to achieve agreement. The position paper should not exceed 4 pages (DinA4, 12pt Arial font, 1.5 line spacing) and must be written in a way that is accessible for all participants of the stakeholder dialogue (taking into account their different backgrounds). Deadline for the **submission of position papers** is **Nov 06, 6pm** via moodle.

### **Schedule of stakeholder dialogue**

The stakeholder dialogue will take place on **Nov 13, 09:30 – 12:00 in room H1B.05 (Group 1) and 12:15 – 16:00 in room 3.B47 (Group 2)** The session will be structured in a short introduction to the rules of the stakeholder dialogue, the actual dialogue, and a post-dialogue discussion.

There is no need to prepare anything for the day of the stakeholder dialogue beyond the position paper and reading the policy brief.

### **Readings**

**Required readings for the stakeholder dialogues are:**

#### Group 1:

Rijken, M., Struckmann, V., van der Heide, I., Hujala, A., Barbabella, F., van Ginneken, E., & Schellevis, F. (2017). *How to improve care for people with multimorbidity in Europe?*. World Health Organization, Regional Office for Europe.

#### *Optional Readings/Resources:*

Filliettaz, S. S., Berchtold, P., Kohler, D., & Bridevaux, I. P. (2017). Comprehensive overview of integrated care in Switzerland: Results of the 1st Swiss Survey on Integrated Care. *International Journal of Integrated Care*, 17(5).

Déruaz-Luyet, A., N'Goran, A. A., Senn, N., Bodenmann, P., Pasquier, J., Widmer, D., ... & Zeller, A. (2017). Multimorbidity and patterns of chronic conditions in a primary care population in Switzerland: a cross-sectional study. *BMJ open*, 7(6), e013664.

#### Group 2:

Barbabella, F., Melchiorre, M. G., Quattrini, S., Papa, R., & Lamura, G. (2017). *How can eHealth improve care for people with multimorbidity in Europe?*. World Health Organization, Regional Office for Europe.

*Optional Readings/Resources:*

De Pietro, C., & Francetic, I. (2018). E-health in Switzerland: The laborious adoption of the federal law on electronic health records (EHR) and health information exchange (HIE) networks. *Health Policy*, 122(2), 69-74.

eHealth Suisse, Kompetenz- und Koordinationsstelle von Bund und Kantonen - <https://www.e-health-suisse.ch/startseite.html>

**Required reading on the evidence-informed policy approach is:**

<http://www.health-policy-systems.com/supplements/7/s1>

(Please be aware that these are multiple articles)

**Further information and optional readings:**

<http://www.who.int/evidence/about/en/>

<http://www.euro.who.int/en/data-and-evidence/evidence-informed-policy-making>

<http://www.campbellcollaboration.org>

<http://training.cochrane.org>

Boaz A, Ashby D, Young K (2002). Systematic Reviews: What have they got to offer evidence based policy and practice? *ESRC UK Centre for Evidence Based Policy and Practice: Working Paper No. 2*.

Bosch-Capblanch X (2011). Handbook for Supporting the Development of Health System Guidance. Basel: Swiss Centre for International Health, Basel, Switzerland.

Bosch-Capblanch X, Lavis JN, Lewin S, Atun R, Rottingen JA, Dröschel D, Beck L, Abalos E, El-Jardali F, Gilson L, Oliver S, Wyss K, Tugwell P, Kulier R, Pang T, Haines A (2012) Guidance for evidence-informed policies about health systems: rationale for and challenges of guidance development. *PLoS Medicine* 9, e1001185-.

Choi BCK, Pang T, Lin V, Puska P, Sherman G, Goddard M Ackland MJ, Sainsbury P, Stachenko S, Morrison H, Clottey C. (2005). Can scientists and policy makers work together? *Journal of Epidemiology and Community Health* 59(8): 632-637.

Culyer AJ, Lomas J (2006). Deliberative processes and evidence-informed decision making in healthcare: do they work and how might we know? *Evidence & Policy* 2(3): 357-71.

Grossmann C, Goolsby WA, Olsen LA, McGinnis JM (2011). Engineering a Learning Healthcare System: A Look at the Future: Workshop Summary (IOM Roundtable on Value and Science-Driven Health Care). National Academies Press.

Hanney SR, Gonzalez-Block MA, Buxton MJ, Kogan M (2003). The utilisation of health research in policy-making: concepts, examples and methods of assessment. *Health Research Policy and Systems* 2003, 1:2.

Johns Hopkins School of Public Health. Writing Policy Briefs: A Guide to Translating Science and Engaging Stakeholders. At [http://www.jhsph.edu/research/centers-and-institutes/womens-and-childrens-health-policy-center/de/policy\\_brief/index.html](http://www.jhsph.edu/research/centers-and-institutes/womens-and-childrens-health-policy-center/de/policy_brief/index.html).

Lavis JN (2009). How Can We Support the Use of Systematic Reviews in Policymaking? *PLoS Medicine* 6(11): e1000141.

Lavis JN, Permenand G, Catallo C, BRIDGE Study Team (2013). How can knowledge brokering be advanced in a country's health system? Policy Brief 17 (BRIDGE Series), World Health Organization.

- Lavis JN, Rottingen JA, Bosch-Capblanch X, Atun R, El-Jardali F, Gilson L, Lewin S, Oliver S, Ongolo-Zogo P, Haines A (2012). Guidance for evidence-informed policies about health systems: linking guidance development to policy development. *PLoS Medicine* 9, e1001186-.
- Lewin S, Bosch-Capblanch X, Oliver S, Akl EA, Vist GE, Lavis JN, Gherzi D, Rottingen JA, Steinmann P, Gulmezoglu M, Tugwell P, El-Jardali F, Haines A (2012). Guidance for evidence-informed policies about health systems: assessing how much confidence to place in the research evidence. *PLoS Medicine* 9, e1001187-.
- Lomas J (2005). Using Research to Inform Healthcare Managers' And Policy Makers' Questions: From Summative to Interpretive Synthesis. *Healthcare Policy* 1(1): 55-71.
- OECD (2010). Engaging citizens in policy-making: Information, Consultation and Public Participation. PUMA Policy Brief No. 10. July 2010.
- Olsen LA, Aisner D, McGinnis JM (2007). The Learning Healthcare System: Workshop Summary (IOM Roundtable on Evidence-Based Medicine). National Academies Press.
- Wallace J, Nwosu B, Clarke M (2012). Barriers to the uptake of evidence from systematic reviews and meta-analyses: a systematic review of decision makers' perceptions. *BMJ Open* 2012;2:e001220.
- Wallace J, Byrne C, Clarke M (2014). Improving the uptake of systematic reviews: a systematic review of intervention effectiveness and relevance. *BMJ Open* 2014;4:e005834.
- WHO (2016). Using research evidence for policy-making. *Report of the 3rd EVIPNet Europe multicountry meeting. World Health Organization.*