

IT TAKES TWO TO IMPROVE EUROPEAN CHILD HEALTH (CARE)



EUROPEAN PUBLIC HEALTH CONFERENCE

WORKSHOP

SATURDAY NOVEMBER 12TH 2022

TIME: 09.00 – 10.00

LOCATION: GAMMA 8-9

BERLIN - GERMANY

Objectives

Many societal developments have an impact on health care in general and on child health care in particular. Internationally challenges include an aging population, more cultural diversity, and a rising prevalence of chronic diseases among children and adolescents, revealing potential risks for child health care. A strong focus must be placed on prevention strategies that are effective, sustainable, and equitable. Planning and implementing prevention strategies may require shifts in the organization of care, such as the forging and strengthening of interdisciplinary and intersectoral partnerships within a country. A promising example of such partnerships is the collaboration of public health with paediatrics. Both professional groups acknowledge the call for greater integration since prevention strategies can only be achieved and sustained by working together.

The objectives of this workshop are to:

- Provide a selective overview of three partnerships and plans for cooperation between public health and paediatrics.
- To exchange experiences and possibilities with the audience to pave the way for further successful partnerships.

In this workshop, we outline the partnership and plans for cooperation between public health and paediatrics in three European countries: Netherlands, Ireland and Switzerland. In the first presentation, **Danielle Jansen and Károly Illy** will share the new vision towards the year 2030 of the Dutch Paediatric Society in which building blocks are presented to guarantee accessible, high-quality, timely and effective care for every child. One of the building blocks to be highlighted is the interprofessional collaboration between paediatricians and public health professionals. In the second presentation, **Julia Dratva and Susanne Stronski** from Switzerland will present a shared paediatric and public health vision of a digital child health booklet. The digital booklet will empower parents and adolescents, provide access to personal health irrespective of place or time, improve sharing health information among care professionals, thus ensuring continuity of care and limiting redundancy of investigations and in addition, and provide data for public health research and monitoring. Challenges and solutions will be shared with the audience. In the third presentation, **Michal Molcho** will review the status of children health in light of public health in Ireland, a country with the largest population of children compared to all other European countries, and the potential implication of the lack of multidisciplinary public health. Michal will present recommendations from new, post COVID-19, reports that recommend diversifying public health and highlighting the need for multidisciplinary public health. After the three presentations, we engage the audience by asking for their experiences and sharing the examples of collaborations between public health and paediatrics, as well as barriers and facilitators. At the end of the workshop, we would like to summarize the results of the workshop in an overview of preliminary best practices.

Key message: Global climatic, societal, and politic developments reveal potential risks for child health and health care, which must be countered effectively, sustainably and equitably.

Key message: Greater integration of prevention across sectors is elemental and can be achieved through interprofessional partnerships.

CHAIRS



Julia Dratva, Vice President of the EUPHA section on Child and Adolescent Public Health (CAPH)

ZHAW Zurich University of Applied Sciences, Winterthur
Switzerland, University of Basel, Basel, Switzerland
drat@zhaw.ch



Danielle Jansen, Steering Committee member of the EUPHA section on Child and Adolescent Public Health (CAPH)

Ass. prof. University Medical Center Groningen,
The Netherlands, d.e.m.c.jansen@umcg.nl

PROGRAM

Opening 09.00 – 09.05

Presentation 1 09.05 – 09.17

Danielle Jansen & Károly Illy.

The vision of Dutch paediatric care until the year 2030: prevention and collaboration as key ingredients

Presentation 2 09.17 – 09.29

Julia Dratva & Susanne Stronski

Toward a digital child health booklet

Presentation 3 09.29 – 09.41

Michal Molcho

Towards a multidisciplinary public health?

Discussion 4 09.41 – 10.00

PRESENTATION 1: 09.05 – 09.17**The vision of Dutch paediatric care until the year 2030: prevention and collaboration as key ingredients.**

Danielle Jansen, d.e.m.c.jansen@umcg.nl

Associate professor

University Medical Center Groningen, Department of General Practice and Elderly Care Medicine, Groningen, the Netherlands.



Károly Illy, voorzitter@nvk.nl

Paediatrician and chair Dutch Paediatric Society

Hospital Rivierenland, Tiel, the Netherlands

Dutch Paediatric Society, Utrecht, the Netherlands



There are many societal developments in The Netherlands that have or will have an impact on Dutch paediatric care. These developments both reveal potential risks in paediatric care and require future improvement of paediatric practices to achieve the best possible outcomes for Dutch children. To realise this, the Dutch Paediatric Society decided in their renewed vision to have a closer focus on prevention and on building partnership with public health, by implementing a building block 'Interprofessional Collaboration between Paediatricians and Other Health Care Providers'.

This building block formulates the wish of the Dutch Paediatric Society to work together in networks with other domains of care, such as public health. Preferably, it will be a flexible network in which the disciplines involved align the needs of the specific child. In order to develop and participate in such a network, paediatricians and public health professionals actively have to invest in connecting, establishing, and further developing professional networks (including patient societies).

A first precondition for the development and successful functioning of such a network is the implementation and use of a joint electronic medical record in which all diagnostics, treatment plans and positive health aspects of the child are collected, and which is accessible to all professionals involved. A patient record which guarantees a barrier-free exchange of medical and non-medical information between paediatricians and public health professionals within the framework of the current privacy legislation.

A second precondition regards an improvement of the paediatric training curriculum in which the paediatrician of the future will gain knowledge of positive health and integrative medicine. The future paediatrician must be trained to function in networks and to make connections. In this presentation we present an update of the implementation of this building block: what is already realised and how.

PRESENTATION 2: 09.17 – 09.29**Toward a digital child health booklet**

Julia Dratva, Julia.dratva@zhaw.ch

Director of Institute, Institute for Public Health
ZHAW Zurich University of Applied Sciences, Winterthur Switzerland,
University of Basel, Basel, Switzerland



Susanne Stronski, Susanne.Stronski@BERN.CH

Paediatrician, MPH, Swiss Society of Pediatrics „paediatric schweiz“.
Health Services City of Bern, Switzerland



Public health, paediatrics as well as other health professionals share the interest in providing services and improving conditions to ensure life-long health and well-being of children and adolescents. In this interprofessional setting and aim, parents are central partners, as are adolescents when they take over the responsibility of their own health. Ensuring the availability of health data for parents and adolescents at any given time and place is a key factor to empower and improve health management and literacy, providing continuity of health information along the care chain, and analysing health data of healthy and sick children is of high importance. The digital booklet will have a positive impact on sharing of health information among care professionals, thus ensuring continuity of care and limiting redundancy of investigation, and in addition provide data for public health research and monitoring of health and determinants.

The Swiss Society of Paediatrics, the ZHAW/Institute of Public Health and the Kollegium of Hausarztmedizin (general practices) founded an association to digitalize the current paper child and adolescent health booklet with the aims:

1. Empower parents as "owners" of health data to take responsibility and have greater autonomy in managing their child's health and illness
2. Provide a digital infrastructure for
 - low-threshold and reliable source of advice
 - easy update of data/information, digital communication with parents
 - sharing of data with professionals and non-professionals involved in care of child.
3. Monitoring of children's health data (parental consent provided)

The speakers will present their collaboration and project, its current status, as well as challenges and solutions found.

PRESENTATION 3: 09.29 – 09.41**Towards a multidisciplinary public health?**

Michal Molcho, Michal.molcho@universityofgalway.ie

BA, MA, PhD, Professor of Children's Studies
Discipline of Children's Studies, School of Education,
University of Galway



With 24% of under 18 years old, Ireland has the largest population of children compared to all other European countries. Health promoting programmes are part of the core curriculum on primary school and in the early years of secondary schools, however, the delivery of the Social, Personal and Health Education programme is inconsistent. Ireland also subscribed to the idea of Health in All Policies, and indeed, develop a holistic health strategy (Healthy Ireland), and a comprehensive child health strategy (Better Outcomes Better Future), but these were not fully implemented and new strategy are delayed. While on the policy front Ireland is very progressive, when it comes to healthcare, Ireland is lagging far behind many European countries. Ireland does not offer a universal healthcare, but those under 7 years old are entitled to free visits to the family doctor. While acute care in public hospitals is subsidized, primary care is not. Entitlement for some cover (called medical card) is mean tested rather than universal. Around 40% of the population has private health insurance that mainly provides some access to private hospital, access to primary health care, and to family doctors, still require full pay. In addition, Ireland does not have school nurses, let alone school doctors, making access to health particularly difficult. In the absence of access to primary care, preventative care is limited and relays predominantly on education. This also extends to public health. Ireland does not recognise non-medical public health, and the focus of public health is prevention of infectious disease, despite the burden of non-communicable diseases. The recent advances in public health included offering public health doctors constant status (with equivalent pay), and extending public health staffing from infectious diseases to also include epidemiology. A recommendation that was made in 2018 to generalise public health is yet to be implemented. This presentation will review the status of children health in light of public health in Ireland, and the potential implication of the lack of multidisciplinary public health. It will present recommendation from new, post COVID-19, reports that recommend diversifying public health and highlighting the need for multidisciplinary public health.

DISCUSSION 3: 09.41 – 10.00