

# Patient & Carer Involvement in Guidelines?

Susanna Palkonen, EFA
<a href="mailto:susanna.palkonen@efanet.org">susanna.palkonen@efanet.org</a>
<a href="mailto:www.efanet.org">www.efanet.org</a>





N

P

P

0

#### **Quality of** life

Life: Managing everyday & special situations/environments

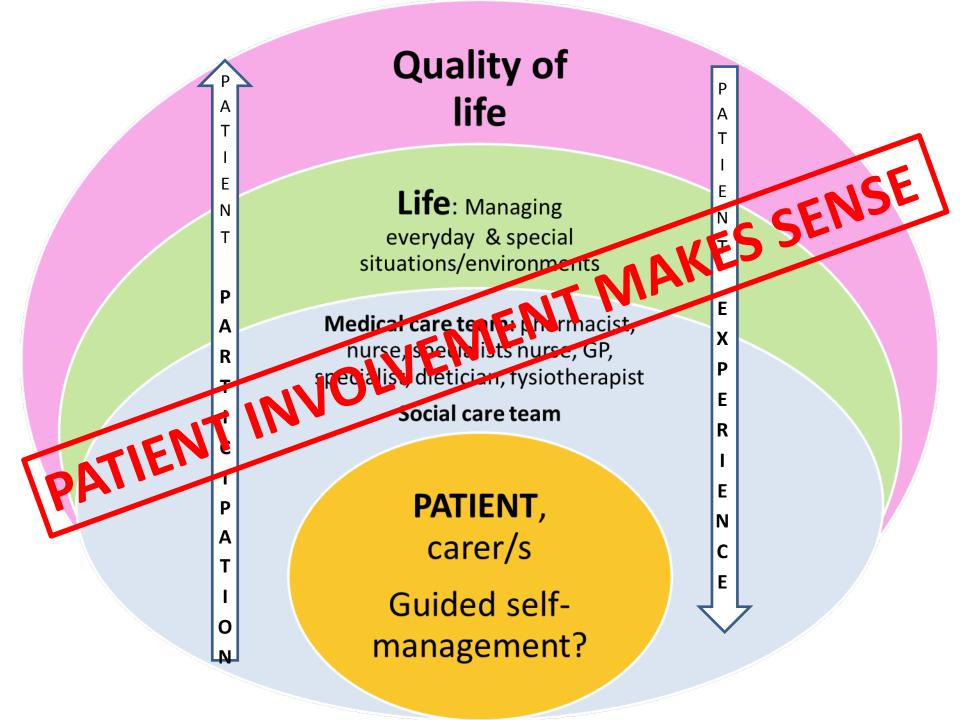
Medical care team: pharmacist, nurse, specialists nurse, GP, specialist, dietician, physiotherapist Social care team

> PATIENT, carer/s

Guided selfmanagement?

Ε Ν Т E X P Ε R E Ν C E

Α





#### Models

- 'Consumerist' model -> right to be involved: empowered, active patient, informed choice, personalised HC
- 'Democratic' model -> democratic, accountable HC policy base on values
- 'Expert patient' model -> patients' experiential knowledge & quality of HC



### Evidence?

- Involvement of patients and public increasingly advocated by
  - 1. Quality standards for guideline development
  - 2. Editorials in medical journals
  - 3. Research articles
  - 4. Increasingly public authorities
  - 5. And of course patient group
- AGREE Collaboration 2003. Qual Saf Health Care. 1(1):18-23. Institute of Medicine 2011 Clinical Guidelines We Can Trust. Improving the use of research evidence in guideline development 2006. Health Res Policy Syst, 4, 22.
- 2. The next step in guideline development 2008. JAMA, 300, 436-8. Paternalism or partnership 2008. Ir Med J, 101, 232. Public involvement in guideline production; CMAJ 176(9)1308-9.
- 3. Patient and Public Involvement in Clinical Practice guidelines 2011. Med Decis Making 31(6):E45-74. How to integrate individual patient preferences in clinical practice guidelines? A research protocol. Implement Sci.:5:10. A strategy for patient involvement in clinical practice guidelines 2011. BMJ Qual Saf20(9):779-84. Raising the standard: practice guidelines & consumer participation. Int J Qual Health Care 8:485e90. Do clinical practice guidelines incorporate evidence on patient references? Med Dec Making 2007;27:E63-4. Why Consider Patients Preferences? 2009. Mad Care 47:908-15. Bringing the Patient back in. Int J Technol Assess Health Care, 18(4). 747-761.

#### lergy and Airways Disea Tools/Training (for involvers&involved)

- G-I-N PUBLIC Toolkit: Patient and Public Involvement in Guidelines <a href="http://www.g-i-n.net/document-store/working-groups-documents/g-i-n-public/toolkit/toolkit-combined.pdf">http://www.g-i-n.net/document-store/working-groups-documents/g-i-n-public/toolkit/toolkit-combined.pdf</a>
- EPF Value+ toolkit for 1. EU project co-ordinators, leaders & promoters 2. patient groups/patients http://www.eu-patient.eu/whatwedo/Projects/EPI led-EU-Projects/ValuePlus/
- ELF European Patient Ambassador Programme EPAP www.epaponline.eu
- EFA Meet & Greet EU institutions training & 2014 EMA training for members





he Value+ Toolkit

For Project Co-ordinators, Leaders And Promoters On Meaningful Patient Involvement



### Common mistakes...

- Last minute
- Tokenistic endorsement
- Not planned
- Not resourced
- No training
- Meaningful patient involvement: From the beginning to the end

To think: usually one patient/patient representative expected to deliver patient perspective

## Meaningful patient involvement







**INFORMATION** 

**DIALOGUE** 



#### **PATIENT**



**REVIEW** 

REVISION





## Good Practice: EMA

- Patient and Consumer Working Party PCWP
- Patient reps in Management Board
- Patient reps/patients in PRAC, PDCO, COMP
- Patient involvement in guidelines
- Patient involvement in SAGs
- Patient reviewers for PILs & EPARs
- Patient reviewers in safety communications
- Plan to involve in guidelines
- Training: annual training day, online modules, videos

http://www.ema.europa.eu/ema/index.jsp?curl=pages/partners\_and\_networks/general/general\_content\_000317.jsp&mid=WC0b01ac058003500c



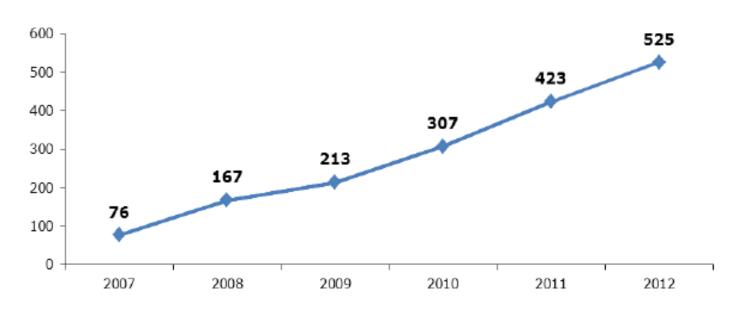
# Good Practice: EMA

#### Activities are split into three categories;



- activities in which patients/consumers are members, alternates or observers,
- 2. activities involving individual patient experts, and
- 3. activities requiring organisation representatives.

#### Overall number of patients and consumers involved in Agency activities 2007-2012

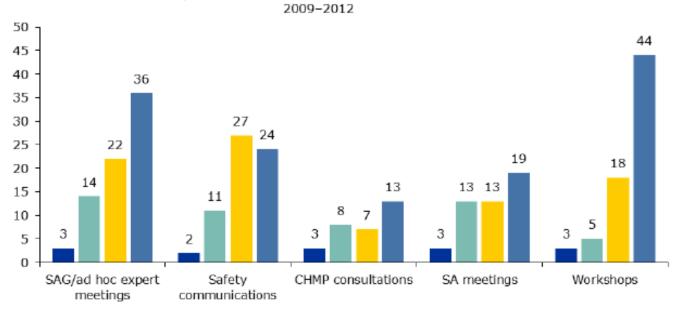




# Good Practice: EMA



#### Comparison of involvement in core activities



U-BIOPRED Annual Meeting 2011, Barcelona
U-BIOPRED Patient Input Platform in action: members present themselves to U-BIOPRED partners



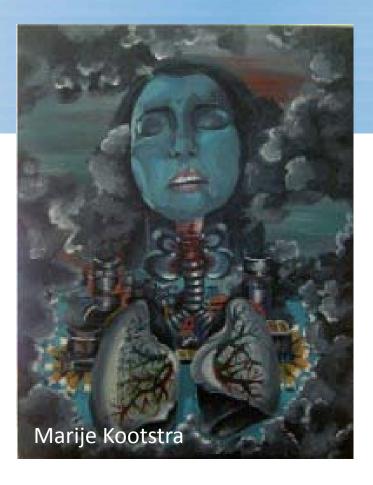
http://www.europeanlung.org/en/projects-and-research/projects/u-biopred/who-is-involved/advisory-boards

# Patient groups as partners Patients Associations Patients Associat

- Informed patient
- Representative patient voice versus individual patients
  - For example for EMA SAG, 2 patients/patient reps
     will be reimbursed. EFA would send 1 informed
     patient, 1 EFA rep (patient or not)
- Difference between patient representative and individual patient

# EFA: Allergy and Airways Diseases Patients Associations \*\*\*Current situation in our disease areas

- GINA no involvement
- GOLD no involvement
- ARIA EFA rep in ARIA Committee
- ERS no involvement, but on their way to do so, facilitated by ELF and their PAG
- EAACI some ad hoq and some organised involvement through POC. On their way.





Asthma as seen by patients
U-BIOPRED Asthma Art Contest winners









# Thank you for your attention!

European Federation of Allergy and Airways Diseases Patients'
Associations (EFA)

EFA 35 Rue du Congrès 1000 Brussels, Belgium www.efanet.org

