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# Models of Child Health Appraised

(A Study of Primary Healthcare in 30 European countries)

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## Welcome

This issue marks the start of the final year of MOCHA. It looks like being an exciting twelve months, as we delve deeply into the data we have gathered over the past couple of years, and appraise the very different models of primary care that exist in the EU and EEA.

Our discussions about how to approach our final reports, publications and disseminations, have led us to think about the fundamental reason for the MOCHA project. It comes down to the right of every child, whatever their situation in life, to enjoy optimal health. At present there are still inequalities in health across Europe, which is something that we, and the health systems and services in each country have a duty to address. The United Nations Convention on the Rights of a Child enshrines a child's right to health: "*Children have the right to good quality health care – the best health care possible – to safe drinking water, nutritious food, a clean and safe environment, and information to help them stay healthy. Rich countries should help poorer countries achieve this*", and this is the underpinning philosophy of our work. The ongoing economic and political turbulence in Europe acts to remind us how important it is to advocate and care for the younger generation. There are many good practices and models of care in place in the EU and EEA, which we can all learn from, and which will benefit children's health – MOCHA hopes to facilitate this sharing of knowledge and good practice.



## Conferences

Dr Paul Kocken and colleagues from work package 9 Validated Optimal Models of Children's Preventative Orientated Primary Health Care and WP 3 School and adolescent health presented their work at the **European Union for School and University Health and Medicine (EUSUHM)** Congress on 6th – 8th September 2017 in Leuven, Belgium. They ran a successful workshop entitled Building Optimal Models for Primary Child Health Care; in which they discussed components of well working child health care systems with an audience

## MOCHA Partners

Imperial College of Science,  
Technology and Medicine,  
London UK

Trinity College Dublin  
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University College Dublin,  
Ireland

University Medical Center  
Groningen, Netherlands

Consiglio Nazionale Delle  
Ricerche, Italy

University of Surrey, UK

Karolinska Institutet, Sweden

TNO The Netherlands Organisation  
for Applied Scientific Research

King's College London, UK

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Uniwersytet Medyczny w Lublinie,  
Poland

UiT The Arctic University of  
Norway, Norway

Haskoli Islands, Iceland

European University of Cyprus,  
Cyprus

Universiteit Twente, Netherlands

Syddansk Universitet, Denmark

University of Keele, UK

Boston Children's Hospital, United  
States

Hospices Cantonaux, Switzerland

Murdoch Children's Research  
Institute, Australia

of mainly school doctors and nurses; this helps feed into the final year of the MOCHA project. The WP 9 team gave another presentation at the conference about their work to gain insight into the implementation conditions of good practices within the context of varying models of primary child health care in EU countries. They presented factors influencing practices such as immunization in hard to reach groups and assessment of mental health problems in children. These factors are relevant for implementing models of primary care and policy decisions around the models of care.

Professor Mitch Blair was a keynote speaker at the **European Federation of Primary Care annual conference** in Porto, Portugal, 24<sup>th</sup>-26<sup>th</sup> September. The topic of the conference was *The citizen voice in primary care: the social commitment to "health for all"*. Professor Blair presented the work of MOCHA and how it closely reflects this theme of strengthening primary care in order to improve social cohesion and reduce inequities in health. Professor Blair also ran a workshop in the conference, discussing *Selected Key Items from initial analysis of use of electronic records in Children's Primary Care in EU and EEA Countries as of 2016*. The analyses were based on questions answered by our 30 MOCHA country agents. The workshop was a platform to discuss the possibility of devising and applying metrics on the impact of Electronic Health Records use on service provision and children's health outcomes.

Members of the MOCHA project will also present at the **International Society for Quality in Healthcare** (ISQua) conference in London, in October 2017. The event takes place at the Queen Elizabeth Conference Centre, in Westminster. MOCHA will be conducting two workshops, on *Listening to Children's Voices*, led by Dr Manna Alma; and *Reconceptualising standards of care integration for children with complex care needs at the acute community interface*, led by Prof Maria Brenner. We will also present two facilitated posters: *Societal Alerts for Safe and High Quality Care for Children*, by Dr Kinga Zdunek; and *Enabling Client-based Assessment of Quality of Integrated Care for both Adults and Children*, by Professor Michael Rigby.

Professor Maria Brenner will attend the **Paediatric Nurses Association of Europe (PNAE)** meeting to be held in Reykjavik in October 2017, and has been invited as a guest speaker at the **4th PNAE Congress on Paediatric Nursing** in Athens in June 2018.

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## Project news

Congratulations to Professor Danielle Jansen, who has been appointed the programme leader of research into Midwifery at the Department of General Practice at the University Medical Center Groningen.

We are delighted to welcome Shalmali Deshpande to MOCHA. She joins the research team on WP8 *Electronic Records to Enable Safe and Efficient Models*. Among her many tasks, Shalmali will be looking at the data collected via electronic records, and how such records are used in practice in the different MOCHA countries to see how they contribute to better communication and collaboration in primary care, and between primary and secondary care.



## MOCHA Work Packages

- 1: Identification of Models of Children's Primary Health Care. Lead: Prof Mitch Blair
- 2: Safe and efficient interfaces of models of primary health care with secondary, social and complex care. Lead Prof Maria Brenner
- 3: Effective models of school health services and adolescent health services. Lead Prof Danielle Jansen
- 4: Identification and application of innovative measures of quality and outcome of models. Lead: Dr Nadia Minicuci
- 5: Identification and use of derivatives of large data sets and systems to measure quality. Lead: Prof Simon de Lusignan
- 6: Economic and skill set evaluation and analysis of models. Lead: Prof Heather Gage
- 7: Ensuring equity for all children in all models. Lead: Prof Anders Hjern
- 8: Use of electronic records to enable safe and efficient models. Lead: Prof Michael Rigby
- 9: Validated optimal models of children's prevention-orientated primary health care. Lead Dr Paul Kocken
- 10: Dissemination. Lead Prof Michael Rigby
- 11: Project Management. Lead: Prof Mitch Blair

## Latest deliverables

The summer has been a very busy time for the project. Work Package 2 submitted two key deliverables at the end of July. *Final Report on the current Approach to Managing the care of children with complex care needs in the Member States* looked at how children with complex care needs access primary care services, such as routine immunisations and screening programmes. Professor Maria Brenner and team also investigated how the primary and community care systems in the 30 MOCHA countries work to meet the needs of these children. Ultimately, children with complex care needs have a right to as full a childhood as possible – which is an important aspect of optimal health and development. This interface has never been investigated in this way and at this level of detail before, and it has led to some incredibly interesting findings.



The *Final Report on models of children's social care support across the EU and the relationship with primary health care* was an investigation of social care provision for children with complex care needs in Europe. The social care systems are very different across the continent, and yet children with complex care needs can be particularly vulnerable, and they and their families are often in need of good social care support that closely works with their medical and nursing support. Dr Austin Warters and team have identified several innovative themes in the report. Both deliverables can be found on our website [www.childhealthservicemodels.eu/publications/deliverables/](http://www.childhealthservicemodels.eu/publications/deliverables/)

We have also begun to receive data from the Health Experiences Research Group (formerly DIPEX). They have been conducting semi-structured interviews and focus groups with children and their families about how they use primary care in their country, and what they think could be improved. This information is incredibly important, and valuable to triangulate our results from data, policy and scientific literature.

## Project meetings

Work Package 2 held an informative meeting at Trinity College Dublin on September 18<sup>th</sup> and 19<sup>th</sup>. At the meeting researchers from WP2 Professor Maria Brenner, Dr Elena Montanana Olaso, Dr Stine Lindstrøm Kamionka, Dr Manna Alma, Keishia Taylor, Dr Miriam O'Shea, Dr Colman Noctor, Dr Ingrid Wolfe and Rose Satherly met with Project Leader Prof Mitch Blair, Deputy Prof Michael Rigby and Dr Denise Alexander to discuss the synthesis of the results from community nursing care, nursing training, mental health provision, social care provision met to discuss the synthesis of their results into the final WP2 Report, which is due in November 2017. Together with these teams, Dr Daniela Luzi, Dr Fabrizio Pecoraro and Dr Oscar Tamburis discussed how the innovative



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use of Unified Modelling Language (UML) can contribute to the report. UML produces graphical illustrations of the processes used in different countries when performing certain functions – such as the pathway of care experienced by a child with a traumatic brain injury, or who has been diagnosed with Autism.

The project as a whole is currently preparing for our **Final General Meeting in Riga**, Latvia; which will take place at the end of October. In this meeting we will discuss emerging themes with project members, country agents and members of our External Advisory Board.