





The FOODia-Net Protocol

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The FOODia-Net Protocol as a key tool for Integrated Care (IC)

- Diabetes Mellitus is one of the most widespread chronic diseases in the world (from 400 million to 600 million by 2035)
- Unhealthy lifestyles are one of the main risk factors for the onset of MD and its complications
- To combine a multidisciplinary / multiprofessional care approach with the promotion of both patients' Food literacy and correct lifestyle and Patient engagement can improve chronic diseases management at global level
- Five Italian Regions are currently collaborating in the framework of the National Centre for Diseases Control and Prevention (CCM) Research Call funded by the Italian Ministry of Health to conceive, co-design and test a new tool to support IC
- The FOODia-Net protocol is an innovative task shifting operating protocol aimed at promoting patient engagement and food literacy about diabetes and its complications





The FOODia-Net Project Partnership

Tuscany

ARS TOSCANA agenzia regionale di sanità





5 Italian Regions

- 1 Northern Region
- **3 Central Regions**
- **1 Southern Region**

6 Participating Units

- 2 Health and social care Regional Agencies
- 1 Health and social care District Agency
- 1 Research Institute
- **1 Local Health Authority**
- 1 University







Lazio









Project duration: 30 months (14 March 2019 - 14 September 2021)

WCPH2020 15.10.2020



Specific goals

- To map professionals (in primary and secondary care setting) and "lay" resources (citizen and patients associations) involved in Diabetes prevention and management, collecting information about their good practices in training initiatives and patients involvement, in order to involve them in piloting the Foodianet Task shifting protocol
- To diagnose the patients' average levels of food literacy (FL) and engagement (PE) in the prevention of DM and its complications in the 5 Regions involved
- To conceive and co-design an operational task shifting model (FooDIA-Net Protocol) for the promotion of food literacy and engagement in the prevention of DM and its complications
- To implement a "cascade training" on the protocol identifying specific educators that will play the role of "task-shifters" towards an increasing number of "task shiftees"
- To develop a web-based platform specifically designed to both support educators in performing the protocol during a pivotal study, collecting research data, and carry out a web based survey to evaluate population levels of food literacy and engagement in the prevention of DM and its complications
- To disseminate the project results and facilitate the scaling up of good practices





Professional resources mapping (Primary care)

- From 77 to 100% of the existing DM Clinics in the selected areas
- 296 (41%) professionals in 20 GPs groups
- FOCUS ON: professional resources and organizational models, good practices and training sessions, initiatives usually performed in the field of DM prevention and management and in the field of patient empowerment with the help of additional professionals (nurses, psychologists, expert patients)

16/20 Counselling on lifestyle

11/20 Initiatives targeted to operators to improve Awareness raising and team work training (GPs and Nurses) and to promote patient engagement (GPs, Nurses, Psychologists and expert Patients)

7/20 Meetings among Patients and Professionals (nutrition, physical activity, voluptuary habits, prevention of complications)

Mixed Approaches: educational and training initiatives, distribution of informative material

GPs Training Main Needs: Multidisciplinary Team-working, Counseling, Patient Engagement Promotion, Promotion of Healthy Lifestyles and Food Literacy



Professional resources mapping (Secondary care)

- From 77 to 100% of the existing DM Clinics in the selected areas
- 428 (59%) professionals in 69 Local Health Authorities/Hospital clinics
- FOCUS ON: professional resources and organizational models, good practices and training sessions, initiatives usually performed in the field of DM prevention and management and in the field of patient empowerment

66/69 Multidisciplinary Teams

66/69 Health literacy promotion educational events

64/66 Patients recall activities on topics related to prevention

4/64 Activities aimed at increasing patients' empowerment

Mixed Approaches: educational initiatives, distribution of informative material, conferences, listening desks, website, remote initiatives

Specialists Training Main Needs: Team-working, Task-shifting, Counseling, Patient Engagement Promotion, Promotion of Healthy Lifestyles and Food Literacy





Lay resources mapping (Patients' associations)

To carry out a strategic recognition of specific Patients' Associations /"lay" resources in the area, with reference to the Associations of citizens, patients and care givers, relevant for their active actions in the field of DM and its complications preventions



- 90% of the Diabetes Associations active in the considered areas
- 9 Associations characterized by variable extension (national/regional/local)
- 8/9 Associations organize events on nutrition and health literacy promotion
- 8/9 Associations implement periodic prevention initiatives
- 6/9 Associations include professionals among their members, nurses in particular
- 6/9 Associations collaborate with LHA or Hospital Clinics
- 51 Preventions Initiatives at any rate

Mixed Adopted Approaches to prevention activities: Conferences, Educational Initiatives, Learning materials distribution, Toll-Free Number, Website Activation, Listening Desk Institution, Distance learning.







«Me and my Diabetes?» QUESTIONNAIRE

to assess **self efficacy and attitude toward food** of diabetic people to investigate the three dimension of **health engagement** (cognitive, behavioral, emotional) to **identify improvement areas to promote self engagement** and to better manage Diabetes

Questionnaire Topics

Personal data

(age, sex, educational level, time from diagnosis)

to get informed on Diabetes





(how do I feel about my health status...?)

PHE -5 scale*





Diabetes and lifestyle

(how much do I know about ...?)

*Graffigna et al. 2015

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THE FOODIA-NET PROTOCOL

Baseline FL & PE assessment

(«Me and my diabetes» questionnaire)



Educational purpose only

Food literacy Patients Engagement



Patients split into 3 levels according to baseline assessment (basic – medium – advanced)

Final FL & PE assessment after four weeks



interaction with
"educator" by
asynchronous messages
on the web platform

Patient-targeted training (exercises and contents to manage, properly classified in 3 teaching paths respectively related to the 3 levels of patients expertise)



KNOW YOUR SELF





CASCADE TRAINING (November – December 2020) First level training will target 5 GPs and 5 Diabetologist selected by professional mapping **TASK SHIFTER** (voluntary participation) (Diabetologists + GPs) Second level training will target 15 health care TASK SHIFTEE EDUCATORS TASK SHIFTEE SECOND LEVEL (GPs, Diabetologists, **EXPERT** (GPs, Diabetologists, professionals or Lay resources (3 for each Project Unit) Dietitians, Psycologists, PATIENTS/ASSOCIATIONS Dietitians, Psycologists, **TRAINING** belonging to Task shifter organizations further Professionals..) further Professionals...) **TASK SHIFTEE EDUCATORS ##** (GPs, Diabetologists, Dietitians, TASK SHIFTEE Psycologists, further (GPs. Diabetologists. Professionals, Expert Patients..) Dietitians, Psycologists, further Professionals..) Pilot study: 25 educators TASK SHIFTEE EDUCATORS **TASK SHIFTEE** (GPs. Diabetologists. (GPs, Diabetologists, (GPs, Diabetologists, Dietitians, Psycologists, Dietitians, Psycologists, *Nurses, Psychologists*) further Professionals. further Professionals..) **Expert Patients..)** will enroll 4 patients each, to use Foodianet PROTOCOL DISSEMINATION (=THIRD LEVEL TRAINING) protocol as an additional **PATIENTS PATIENTS PATIENTS PATIENTS** tool to manage Diabetes Task shifters and Task shiftee' educators will be listed in a specific board published on the Foodianet web platform. WCPH2020 15.10.2020 REGIONE PUGLIA

WEB-BASED PLATFORM

Public and Private Area

- Log in
- Authentication
- User Profiles

Communication & Dissemination Area

- The Protocol
- Task shifting
- Educators board
- Maps

Training Area

- Excercises Test
- Diary
- Training courses
- Training Subjects
- Info Charts

Interaction Area

- Private conversation between patients and educators
- Group conversations between educators
- Patients' sharing training experience with educators





Management Functionalities

- Contents publication
- Data mining
- Help desk
- Dashboard

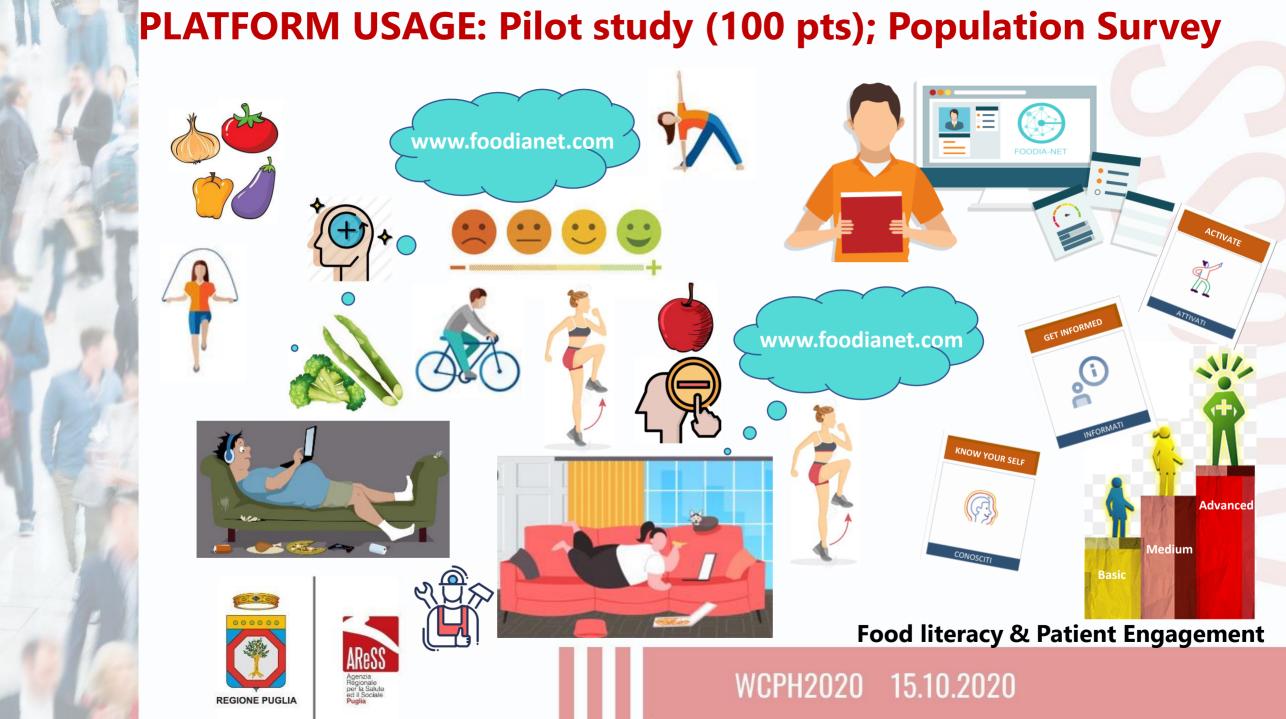
Access Profiles:

- P1 Guest User
- P2 Registered User
- Protocol Trained Professional
 - Protocol Trained Lay Operator
- P5 Administrator











Conclusions and a sign to sustainability

- The project will end on September 2021
- Pilot study outputs will help to refine the protocol
- HL Survey will help recognize unmet educational needs among population in the selected areas
- The web based platform, specifically developed to perform Foodianet Protocol, will be delivered to Ministry of Health
- Every Health care Organization will be able to use the platform only ensuring maintenance and appropriate organizational setting
- Educators Register on the platform will be implemented proportionally to the cascade training on the protocol by Organizations that will disseminate it
- Cascade training on the protocol can be useful linked to Continuous Education Learning Credits for Professionals
- Foodianet platform will help professionals, patients, citizens, associations etc. to find information about the task shifting protocol, to find out on how take part to training courses, initiatives, etc. supporting project deliverables' survival.





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