

ANNUAL REPORT 2018 EVIPNet Europe

Towards a world in which the best available research evidence informs policy-making



Evidence-informed
Policy Network
(EVIPNet) Europe

Abstract

This report provides an overview of the achievements of the Evidence-informed Policy Network (EVIPNet) Europe in 2018. These included completed evidence briefs for policy, situation analyses, and multiple country-specific workshops and other activities raising awareness of EVIPNet Europe's aims. A second cohort of countries working on evidence briefs for policy for antimicrobial resistance was established. This cohort will promote continued peer support and learning from the experience of each other, as well as that of the first cohort. Capacity-building activities included the flagship Advanced Course on Health Information and Evidence informed Policy-making, aimed at strengthening countries' capacity to collect, analyze, report on and use evidence for policy-making. EVIPNet Europe's academic profile continued to grow with publication of three peer reviewed journal articles in 2018 and presentations at the European Public Health Conference and European Implementation Collaborative Conference. EVIPNet also continued its successful collaborations with the McMaster Health Forum, Cochrane, and the Wellcome Trust. Goals for 2019 include publishing the evaluation of EVIPNet Europe, developing and piloting a tool for evaluating the EBP process, and re-establishing a fully functional and staffed WHO EVIPNet Europe Secretariat.

Keywords

EVIDENCE-BASED PRACTICE HEALTH POLICY HEALTH SERVICES RESEARCH POLICY MAKING EUROPE

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Abbreviations

AMR	antimicrobial resistance
ASP	antimicrobial stewardship programme
EBP(s)	evidence brief(s) for policy
EHRN	European Health Research Network
EHII	European Health Information Initiative
EIP	evidence-informed policy
EVIPNet	Evidence-informed Policy Network
KT	knowledge translation
KTP	knowledge translation platform
K2P	knowledge to Policy
QES	quality evidence synthesis
SDG	Sustainable Development Goal
WHO	World Health Organization

Foreword

In 2018, the Evidence-informed Policy Network (EVIPNet) in Europe continued to make progress in its mission to foster, expand and strengthen networks supporting evidence-informed decision-making. Achievements have been made in each of its strategic directions – Supporting knowledge translation (KT) networks, Strengthening KT capacity, Supporting KT innovations, and Catalysing KT at regional and national levels.

Following the success in 2017 of the first cohort of countries working on evidence briefs for policy (EBPs) on antimicrobial resistance (AMR), a second AMR EBP cohort has been established. A three-day intensive capacity-building workshop involving the cohort participants was, facilitated by the McMaster Health Forum, furthering strengthened the Forum's collaboration with EVIPNet Europe.

EVIPNet's progress in 2018 is also evident in many individual country achievements, including (among others) Hungary's publication of its AMR EBP, Poland's completion of a situation analysis of the evidence-informed policy (EIP) landscape in Poland, and Kazakhstan's inclusion of KT as a key competency for Master and Doctoral students. Two more countries – Austria and Turkey – joined EVIPNet Europe, furthering expanding the European KT network.

EVIPNet Europe continued to raise its profile in 2018, with three EVIPNet Europe articles published in peer-reviewed journals, and presentations given at the 11th European Public Health Conference, the 5th Global Symposium on Health Systems Research, the European Implementation Collaborative Conference, and other international meetings. The year also provided an opportunity to reflect on EVIPNet Europe's strengths and potential for improvement, with an evaluation of the programme conducted in the summer of 2018 (due to be published in 2019).

The successes of EVIPNet Europe would not be possible without collaboration. The WHO Secretariat of EVIPNet Europe thanks all member countries for excellent teamwork; the members of the EVIPNet Global Steering Group and EVIPNet Europe Steering Group for their dedication to supporting EVIPNet's vision; the external partners who make it possible for EVIPNet Europe to continue growing by sharing their invaluable expertise and funding resources; and our WHO colleagues across the world for their continued support.

The EVIPNet Secretariat would particularly like to thank the Wellcome Trust for their ongoing support of EVIPNet Europe through the Secondment Fellowship programme. It would also like to thank its partners the McMaster Health Forum, the Knowledge to Policy (K2P) Center at the American University of Beirut, and Cochrane for continued collaboration in building capacity for evidence-informed policy-making.

WHO Secretariat of EVIPNet Europe

Objective

The objective of this report is to provide an overview of EVIPNet Europe's activities from January to December 2018 and to demonstrate EVIPNet Europe's progress and achievements during that period.

Background

EVIPNet was established at global level in 2005, as a response to resolution WHA58.34 on health research at that year's World Health Assembly (1). The programme's aim is to minimize the gap between research and policy-making. In the WHO European Region, EVIPNet Europe was established in October 2012 by the WHO Regional Office for Europe's Division of Information, Evidence, Research, and Innovation under the umbrella of WHO's European Health Information Initiative (EHII), to promote the systematic use of health research evidence in policy-making. EVIPNet envisions a world in which the best available and context-sensitive evidence is used to inform health policy-making. It therefore contributes to the aim of the WHO EHII: to improve the health of the people of the WHO European Region by enhancing the information on which policy is based.

With Austria and Turkey joining in 2018, EVIPNet Europe now includes 21 member countries, contributing to the strong regional capacity-building network. The network's aim is to promote EIP through the establishment of Knowledge Translation Platforms (KTPs), including developing EBPs, convening policy dialogues, and engaging in regional EVIPNet Europe capacity-building activities. In all activities, member countries benefit from cross-network exchange of experience, guidance from international experts in the field of KT and EIP, and the support of the WHO EVIPNet Europe Secretariat.

In working towards its aim, EVIPNet Europe further contributes to the implementation of the European policy framework Health 2020 (2) and the Action plan to strengthen the use of evidence, information and research for policy-making in the WHO European Region (3). Supporting the implementation of the action plan and its principles, EVIPNet Europe also contributes to the achievement of the United Nations Sustainable Development Goals (SDGs) (4).

¹ Members include Albania, Austria, Bulgaria, Estonia, Georgia, Hungary, Kazakhstan, Kyrgyzstan, Lithuania, Poland, Republic of Moldova, North Macedonia, Romania, Russian Federation, Serbia, Slovakia, Slovenia, Tajikistan, Turkey, Turkmenistan, and Ukraine.

EVIPNet Europe's activities in 2018

EBPs

A key EVIPNet Europe tool is the EBP, which synthesizes the best available research evidence to answer a specific policy problem in a concise way. It is used to create awareness among policymakers and other stakeholders of the urgency of a health problem and the need to adopt certain preferred policy options or interventions. EBPs have the potential to improve the likelihood that policymakers will read, consider and apply the research findings, using them to inform policy decisions.



Dr. Kaelen Moat (McMaster Health Forum) facilitates an interactive workshop on developing EBPs. ©WHO

The second AMR EBP cohort of countries² met in Belgrade, Serbia on 27–29 June 2018. Representatives from each of the participating member countries took part in an interactive three-day workshop to kick-start their AMR EBP work, facilitated by the Managing Director of the McMaster Health Forum, Dr. Kaelan Moat. Participants developed draft terms of reference for their EBPs and agreed on a joint work plan for the cohort going forward. This collaborative working as a cohort will allow for greater peer support and exchange of lessons learned and experiences among members.

The cohort is supported by the WHO EVIPNet Europe Secretariat, the McMaster Health Forum and the Control of Antimicrobial Resistance Programme at the WHO Regional Office for Europe. The Republic of Moldova, Romania and Serbia are all in the final stages of drafting their EBPs, which will be published in 2019, and Bulgaria has made important initial steps toward establishing an EBP team and clarifying the specific AMR problem that will be addressed.



The second AMR EBP cohort meets in Belgrade, Serbia on 27–29 June 2018. ©WHO

² The second cohort comprises Bulgaria, Republic of Moldova, Romania and Serbia.

Meanwhile, the first cohort that was initiated and trained in mid-2017 achieved major milestones in 2018. In Slovenia, the EBP entitled Antibiotic prescribing in long-term care facilities for the elderly was published (5). It proposes policy options that include improving monitoring of antibiotic use and AMR in long-term care facilities; developing and implementing guidelines for diagnosing and treating infections; continuing education for health professionals; and raising awareness among long-term care facility residents and their visitors.



Stakeholders gather at a policy dialogue in Ljubljana to discuss policy options put forward in Slovenia's EBP on antibiotic prescribing practices in long-term care facilities. ©WHO

Following publication of the EBP a <u>policy dialogue and stakeholder consultation</u> were held, at which the Ministry of Health announced that the all proposed policy options should be reflected upon and integrated into the new national strategy for AMR.

The North Macedonian team has developed an EBP entitled *Promoting appropriate use of antibiotics at hospital level to contain antibiotic resistance in North Macedonia.* The draft EBP was shared for comments with the wider professional and academic community at two meetings, during which evidence from the practice of primary care providers, clinical doctors, and other specialists directly affected by the current policies in their everyday practice was discussed as a basis for further strengthening the EBP. Its publication in North Macedonia in 2019 will be particularly timely, contributing to the consultation processes for the country's new Strategy for Prevention and Containment of Antimicrobial Resistance 2019–2023, which is also expected to be adopted in 2019.

The EIP work on AMR of both country cohorts was pioneered by Hungary. In early 2017, the EBP entitled *Promoting the appropriate use of* antibiotics to contain antibiotic resistance in human medicine in Hungary (6) was finalised, which contributed to spurring action on the policy options outlined in the EBP, including developing national antimicrobial a stewardship programme (ASP); strengthening undergraduate and postgraduate health professional training on prudent antibiotic prescribing; and raising public awareness on this topic.



Hungary's EBP on the appropriate use of antibiotics serves as a guide to countries in the second AMR EBP cohort. ©WHO

Situation analyses

An EVIPNet Europe country situation analysis is a systematic and transparently conducted approach to developing a deeper understanding of the major factors that may facilitate or hinder the successful establishment of a KTP in a specific country context. Using EVIPNet

Europe's Situation analysis manual (7), country teams are guided to ensure a systematic approach, including conducting a literature review, key informant interviews, and a comprehensive analysis of survey data.

In Poland, a situation analysis of the EIP landscape was completed in November 2018 by researchers from Jagiellonian University Medical College in Krakow and representatives of the Ministry of Health, with technical input from EVIPNet Europe. The result was shared at stakeholder а consultation (8). Key conclusions included that although systematic mechanisms for EIP are missing in Poland, the importance of EIP is recognized in the country and a growing



Poland holds a multi-stakeholder consultation on its situation analysis of EIP in the country. ©WHO

number of activities and initiatives may be conducive to establishing a KTP and promoting EIP. The situation analysis formed the basis of a proposed KTP model in Poland that would take the form of network with a joint secretariat (administrative office) positioned within the Ministry of Health, supported by continued training in KT tools.

In February 2018 EVIPNet Europe members from Kyrgyzstan presented the results of their situation analysis of EIP in the country at a round table meeting of stakeholders, chaired by the State Secretary of the Ministry of Health. In May 2018, with the support of the WHO EVIPNet Europe Secretariat and the WHO Kyrgyzstan Country Office, a workshop was held in Bishkek to strengthen the skills of network members in incorporating feedback from the round table meeting and in linking principal findings from the situation analysis to key concepts in the EVIPNet framework. The workshop was led by Professor Mark Leys.³

Kazakhstan also completed a situation analysis in 2018, which highlighted a discrepancy between the declared political support of the EIP in Kazakhstan and the actual practice of EIP in the country. The team suggested several practical solutions, including raising awareness of EIP among policy-makers and identifying country team leaders to support and promote EIP activities in Kazakhstan (9).

In November 2018, Estonia began conducting a situation analysis of EIP, with stakeholder consultations planned for spring 2019 (9).

Other country-specific activities

EVIPNet Europe member countries have been engaged in other activities that have raised awareness of EIP and the EVIPNet Europe initiative.

In Bucharest, Romania on 27–30 June 2018 a masterclass was held on "Evidence-informed health policies: relevance to individuals, communities and populations' health". Key speakers included Dr. Claudia Dima, from the Romanian National Institute of Public Health,

³ Faculty of Medicine and Pharmacy at the University of Brussels' Department of Health Sciences, and Chair of the EVIPNet Europe Steering Group.

along with EVIPNet members. The aims of the masterclass included encouraging young health practitioners across various health disciplines to engage in the EVIPNet process, including evidence-informed practices and health research.

During the visit of the Standing Committee of the Regional Committee (SCRC) to Slovenia in February 2018 the Slovene EVIPNet team took the opportunity to present to the SCRC their experience of EIP within the EVIPNet programme and how Slovenia has benefited from this capacity-building initiative.

Lithuania has been active in promoting EVIPNet Europe by presenting its work in a series of workshops (in February, March and May 2018) related to EIP implementation. National partners including the Minister of Health attended the workshops, the last of which was chaired by a Vice Minister of Health, and was considered a great achievement, as it was the first meeting of the KTP Coordination Board and involved a number of stakeholder institutions.

In Hungary, one of the chief EBP authors, Dr. Emese Szilágyi gave a presentation entitled "Promoting the responsible use of antibiotics to combat antibiotic resistance – presentation of a policy brief" at the 30th Annual Congress of the Hungarian Hospital Association in Eger on 26 April 2018.

In Bulgaria, a workshop introducing EVIPNet Europe in the country was organized and hosted by the National Center of Public Health and Analyses in Sofia. This was a great initiative of the EVIPNet Bulgaria national champions in collaboration with the WHO Country Office, bringing together stakeholders in the field of health information and policy-making to learn about EVIPNet Europe and to exchange ideas and knowledge.

Meetings and conferences

EVIPNet Europe members and the WHO EVIPNet Europe Secretariat continued to raise the profile of the network by participating in major international meetings and conferences.

EVIPNet Europe was front and centre at the European Implementation Collaborative Conference in May 2018 in Copenhagen, Denmark, at which EVIPNet Europe Coordinator Tanja Kuchenmüller⁴ was invited to present the work of the network in front of an international audience of researchers, policy-makers and civil society members.

⁴ WHO Regional Office for Europe's Knowledge Management, Evidence and Research for Policy-Making Unit leader, coordinating EVIPNet Europe.

EVIPNet Europe held the flagship Advanced Course on Health Information and Evidence informed Policy-making in Bohini, Slovenia from 28 May to 1 June 2018. The aim of the course was to enhance member countries' capacity to collect, analyse, report on and use evidence for policy-making. The course included a focus on policy evaluation and KT, facilitated bv Professor Nick Mays.5 Participants had the opportunity to put KT concepts into practice by searching for and using systematic review evidence to develop briefs on policy-relevant issues.



Participants review the agenda for the Advanced Course on Health Information and Evidence informed Policymaking in Bohinj, Slovenia on 28 May to 1 June 2018.

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At the <u>68th session of the WHO Regional Committee for Europe</u> in Rome, Italy on 18 September 2018, a ministerial lunch was held on "Innovations in Health Information Systems". Representatives from Estonia's Ministry of Health presented their EIP experience with developing their EBP on sugar-sweetened beverage taxation (10). Professor Göran Tompson⁶ gave a provocative speech. Starting with a quote from Goethe: "Knowing is not enough, we must apply. Willing is not enough, we must do", Professor Tompson emphasized the importance of EVIPNet Europe in view of the fact that commitment to implement the *Action plan to strengthen the use of evidence, information and research for policy-making in the WHO European Region (3)* (Action Area 3) had been adopted by all WHO European Region Member States. He described the network as an excellent opportunity for countries to strengthen institutional capacity-building to improve health governance and policy-making with the aim of accelerating progress towards achieving the SDGs.

On 4 October 2018 at the European Health Forum in Gastein, Austria, Tanja Kuchenmüller⁴ participated in a panel and represented EVIPNet Europe's perspective for a workshop on "Research knowledge translation for policy development: barriers and facilitators", organized by Gesundheit Österreich GmbH and the European Observatory on Health Systems & Policies to promote the network and its mandate. During the session, Tanja presented an impulse statement on "EVIPNet Europe – global evidence for local decision-making", consisting of three key messages.

- 1. EVIPNet Europe operates under the WHO EHII and is one of the key mechanisms to promote the systematic and transparent use of evidence in national health policy-making across the WHO European Region.
- 2. The best available global evidence, contextualized to the local level and provided in a timely and user-friendly manner, is required to promote sound local decision-making.
- 3. Despite effective KT mechanisms, research evidence remains just one of the factors influencing policy processes.

The press release on the session (11) can be accessed on the website of Gesundheit

⁵ London School of Hygiene & Tropical Medicine, and WHO EVIPNet Europe Secretariat.

⁶ Senior Professor of International Health Systems Research at the Karolinska Institute, Co-founder of the Swedish Institute for Global Health Transformation (SIGHT) at the Royal Swedish Academy of Sciences, and EVIPNet Europe Steering Group member.

Österreich GmbH.

The official launch of the WHO European Health Research Network (EHRN) in Ukraine was held on 17–19 October 2018. The EHRN, under the auspices of the WHO EHII, aims to provide strategic direction and leadership to its network member countries in national health research systems strengthening, by coordinating technical expertise, regional experiences and a platform for communication, exchange and advocacy. National health research stakeholders gathered at the launch to discuss how health information, health research and KT contribute to evidence-informed policy-making. They explored country-driven approaches to advancing national health research in Ukraine. Importantly, they also learned about EVIPNet Europe and its role in fostering member countries' capacity in systematically and transparently using research in health decision-making, including showcasing the successful KT work of Hungary.

On 1 December 2018 at the 11th European Public Health Conference in Ljubljana, Slovenia, the authors of the Hungarian EBP, together with colleagues from the WHO EVIPNet Europe Secretariat, presented a poster entitled "Evidence synthesis for policies to address antibiotic misuse in Hungary". The poster, which generated much interest among the conference attendees, outlined the process of EBP development and the three evidence-based policy options proposed in the Hungarian EBP. The Kazakhstan team presented the key results of their (above-mentioned) situation analysis on EIP, as well as the strategic activities have since been conducted – these included raising awareness of EIP among stakeholders using webinars and identifying the Republican Center for Health Development as an institution to house a KTP in the country. Dr. Claudia Stein⁷ made a presentation at the Conference, highlighting the experience of the Regional Office as a knowledge broker, with EVIPNet Europe at the core of this role, operating under the umbrella of the WHO EHII and in view of implementing the EIP action plan (3).

Collaborations

EVIPNet Europe has expanded its existing partnership with McMaster Health Forum. Building on the successful collaboration with the K2P Center at the American University of Beirut during the work of the first cohort of countries on AMR EBPs, the Forum continues to support the second cohort; Dr. Kaelan Moat participated in the second cohort's first meeting in Belgrade in June 2018 and will continue to provide expert input as the countries progress with their EBP development. Collaboration was also established between the AMR cohorts and WHO Regional Office for Europe's Control of Antimicrobial Resistance Programme, which continues to provide technical expertise.

⁷ WHO Regional Office for Europe's Director of the Division of Information, Evidence, Research and Innovation.

EVIPNet Europe has continued to strengthen its partnership with Cochrane, together facilitating two workshops on 14 and 16 February 2018 on systematic reviews and qualitative evidence synthesis (QES) for policy-making. Through a combination presentations. of hands-on exercises, interactive sessions, plenary sessions and group discussions, participants were trained in Cochrane's methodology and the conceptual and practical applications for conducting systematic reviews and QES. Plans are being made to establish a more formal partnership between the WHO EVIPNet Europe Secretariat including Cochrane. a new WHO Collaborating Centre.



Livia Puljak (Cochrane Croatia, Professor at the University of Split School of Medicine), leads a training session on evidence synthesis. ©WHO

EVIPNet Europe also continues its successful collaboration with the Wellcome Trust through the Secondment Fellowship programme, which enables researchers funded by the Trust to spend a period of six months seconded to the WHO Regional Office for Europe. During this period secondment fellows work on a specific project in line with EVIPNet Europe's strategic priorities and their own skills and interests, supporting the work of EVIPNet Europe.

Governance

Steering Group

The WHO EVIPNet Europe Secretariat continues to be supported by the EVIPNet Europe Steering Group, whose membership remains unchanged from 2018 and consists of experts in KT, EIP and public health research. This Steering Group has three subgroups focusing on situation analyses, monitoring and evaluation, and communication and advocacy, respectively. The WHO EVIPNet Europe Secretariat remains actively engaged in the EVIPNet Global Steering Group.

Monitoring and evaluation report

Over the summer of 2018, an evaluation of EVIPNet Europe was conducted by an external consultant. The aim was to assess the effectiveness of EVIPNet Europe as a mechanism for translating evidence into policy, to learn lessons about KT and EIP and inform future developments and strategic planning of the network. The evaluation covered EVIPNet Europe from its inception to the end of 2018, at the levels of the WHO EVIPNet Europe Secretariat and the 21 current member countries of the network. Quantitative and qualitative data collection was informed by the indicators and tools included in the draft EVIPNet Europe monitoring and evaluation framework. The evaluation report is in the process of being finalized and will be circulated to network members in the summer of 2019. It will include lessons learned and recommendations going forward.

Publications

EBPs

The Hungarian EBP, Promoting the appropriate use of antibiotics to contain <u>antibiotic</u> resistance in human medicine in Hungary (6) and the Slovenian EBP, Antibiotic prescribing in long-term care facilities for the elderly (5) were both published in 2018. The Estonian EBP, Reducing the consumption of sugar-sweetened beverages and their negative health impact in Estonia (10) is now available on the WHO Regional Office for Europe website in Estonian and Russian.

Situation analyses

EVIPNet Europe's first situation analysis was published by Slovenia in 2017 *(12)*. It is the first one globally and it is available on the <u>Regional Office website in English and Russian</u>. Alongside increasing capacity-building efforts, one of the key needs identified by the Slovene Ministry of Health was to establish EIP infrastructure.

Capacity-building tools

As a step towards strengthening the human resources and capacities required at national level, EVIPNet Europe initiated a train-the-trainer strategy, with the aim of developing national champions throughout the WHO European Region so that they can facilitate future workshops on EIP. The facilitator's guide (13) is now available on the WHO Regional Office for Europe website.

Peer-reviewed publications

EVIPNet Europe members disseminated important findings related to the programme with the following peer-reviewed publications in 2018.

- Biermann O et al. Policy dialogues facilitators' perceived role and influence. *International Journal of Health Governance* 2018;23(2):120–133 *(14)*.
- Mihalicza P et al. Qualitative assessment of opportunities and challenges to improve evidence-informed health policy-making in Hungary-an EVIPNet situation analysis pilot. *Health Research Policy and Systems* 2018;16(1):50 (15).
- Scarlett J et al. Evidence-informed Policy Network (EVIPNet) Europe: success stories in knowledge translation. Case study and lessons learnt. *Public Health Panorama* 2018;4(2):161–169 (9).

Conclusions and outlook

In summary, EVIPNet Europe made great progress in 2018 toward promoting EIP in member countries, through the successful development of EIP tools, including the situation analysis and the EBP. Capacity-building activities and strengthened collaboration with EIP partners also contributed to raising the profile of EVIPNet Europe globally. Encouraged by the achievements of 2018, the network looks forward to further progress in 2019. In addition to continuing the above activities, specific goals for 2019 include:

- finalizing and publishing the evaluation of EVIPNet Europe, and using the findings to identify and develop new strategic directions for the network;
- further promoting the evaluation of EVIPNet Europe's work through the development and piloting of an EBP rapid assessment tool, allowing countries to assess and learn from their experiences in developing and disseminating an EBP and to share good practices across the network;
- re-establishing a fully functional and staffed WHO EVIPNet Europe Secretariat to ensure stability and continuity of the technical support provided to network members.

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