



FOCUSPREV II

Results consensus groups Zurich

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Methodology

- Consensus groups (less strict than focus groups)
- Groups of 5/7 and 7/9 participants, 60% rural
- Audio-digital recording
- Hand written protocols (two)
- Analysis
- Coding process
- discussion



Patient information tools

- Still to be improved for the less intellectual..
- Comments on content
- Download version, should accept individual extensions
- Mandat of the patient remains always starting point
- Motivation to make a check up is crucial
- Clear public health mandate helpful



Prevention card

- Which target group? Only people with pre-existent elevated level of health literacy will use it
- Actualizing is crucial. Who? Where? When?
- Lots of problems in application
- Reimbursement?
- Risk of data abuse



Prevention card II

- Booklet type:
 - Gives more options
 - Ampel Schema has to be modified
 - Changing norms and guidelines....
 - Motivation?
- Vaccination leporello-Type:
 - Seems astonishingly simple and practical, but
 - Additional value probably too low
- Electronic version: has it all....



Further points

- Leaflet for medical record: standardized, adapted for scanning. Electronic version more realistic
- Education
 - Content information and use of the tools...
 - MI and SDM for younger colleagues
 - Integration in existing formats, congresses...
- Website: core element of the system
- MPA: may become involved in performance, testing & assessment, coaching...



General considerations

- GPs are in a good position to deliver preventive services
- Neutral tools in a world of commercial interests important
 - How to prioritize in a general check up, time limits?
 - Evidence based algorithm
 - Data should be analyzable → digitally
 - Modules
- Information tools, materials and checklist for physicians are crucial