Evidence-informed Policy Network (EVIPNet) Europe

Evidence brief for policy (EBP) workshop in Warsaw, Poland
23–25 September 2015

Introduction
EVIPNet Europe is a WHO Regional Office for Europe initiative. It aims to increase country capacity in developing health policies informed by the best available research evidence – in line with and in support of "Health 2020" implementation (1). EVIPNet Europe institutionalizes knowledge translation (KT) – the process of fostering research use in policy-making – through the establishment of national country teams (2). These groups plan and implement KT activities at country level. This summary describes the first EBP workshop of EVIPNet Poland, jointly organized by WHO and the Ministry of Health (MoH) of Poland.

Background
In 2013, the MoH in Poland successfully applied to EVIPNet Europe as a pilot phase, which consists of the establishment of a country team and the planning and implementation of the full EVIPNet action cycle (2). Based on an internal assessment conducted by the MoH, it was proposed that the country team would best be located within its own institution for two reasons: (i) in Poland such location guarantees sustainable development of the country team/KT platform (its services will be demanded and used) and addressing priority health policy problems, and (ii) the role of data protection laws (health care data in Poland is owned by the MoH).

EBPs and the aim of the EBP workshop in Poland
After the country launch of the EVIPNet Initiative in Poland in March 2015, a first national KT capacity-building workshop on EBP took place in September 2015. An EBP synthesizes evidence about a policy-relevant, prioritized policy issue, tapping into different research methods. It clarifies underlying problems, proposes options to address these, evaluates potential risks, benefits and costs, and outlines key implementation considerations.

The main aims of the workshop were to raise participants’ awareness of the tools and resources available to support the use of research evidence by health policy-makers and stakeholders; to enhance participants’ skills in acquiring, assessing, adapting and applying research evidence; and to teach the fundamentals of how to prepare EBPs and organize policy dialogues.

Participants included policy-makers and researchers from the MoHs in Lithuania and Poland, the National Institutes of Hygiene in both countries, the Institute of Public Health in Belgrade, the Polish National Institute of Public Health and the Agency for Health Technology Assessment and Tariff System as well as major academic institutions in the country.

The EBP workshop days
The three-day workshop consisted of 14 sessions that took the form of lectures and group discussions, and promoted "learning by doing". The sessions were facilitated by Dr Ulysses Panisset (Federal University Minas Gerais, Brazil and former coordinator of WHO EVIPNet) and Mr Péter Mihalicza (National Healthcare Service Center, Hungary and member of EVIPNet Europe).
Day 1 focused on explaining the EBP and its benefits. Participants became familiarized with the list of questions that the EBP can answer when (i) identifying the problem, (ii) forming options to address that the problem, and (iii) identifying barriers to implement these options. The methodological approach was based on the SUPPORT tools (3) and the SURE guides (4). The relation between clear identification of the policy issue and the development of the solution was emphasized. The theoretical sessions were complemented by small work groups and discussions. Based on health priority problems that participants had identified prior to the workshop, four groups examined the following topics:

- the problem of lacking indicators for primary health care evaluation in Poland;
- high hepatitis C prevalence in Poland and its management in primary health care;
- polypharmacology among elderly in Poland; and
- high suicide rates and mental health issues in Lithuania.

Day 2 concentrated on the concept and use of systematic reviews in evidence-informed policy-making (EIP). Participants learnt what types of systematic review should be used in each component of the EBP, how to find scientific evidence (e.g. Health Systems Evidence, PubMed health systems queries and the Cochrane Library) and how to assess a systematic review using the AMSTAR measurement (5). In groups, participants started to develop draft outlines of EBPs (related to pre-identified health priority problems) and to develop a work plan outlining how work on the EBP would continue after the workshop.

Day 3 further built on the group work and featured a consultation with experts and other participants. The last lecture given at the workshop was on policy dialogues and their organization. In the final wrap-up session, participants presented their draft EBP and decided on the next steps that should be taken to complete it. These steps include a review of the EBPs by Dr Panisset and developing EBP work plans by participants. The MoH team will furthermore take the development of an EBP forward – in collaboration with Dr Panisset – and create a work plan for the next step, that is organizing a policy dialogue.

Outputs and next steps of the EVIPNet Europe EBP workshop

- Participants involved in the workshop prepared their first draft outlines of the EBP, which was discussed with feedback from experts and other participants.
- The facilitators provided a work-plan matrix to guide the groups on how to prepare an EBP. Groups are now expected to appoint a leader to submit the final EBP three months after the workshop (by the end of November 2015). Facilitators will have a special focus on the MoH team writing about problem issues related to effectiveness of primary health care in Poland. This support will include teleconferences and email exchanges.
- After November, the groups will be provided with professional feedback on their EBP from EVIPNet Europe.
- The facilitators will provide a work plan on how to prepare policy dialogues as a next step to the EBP.

References

4. SURE Collaboration. The SURE guides for preparing and using evidence-based policy briefs.