

Guideline Implementation EU

Association of A
PHYSIOTHERAPSTS in P
PARKNOOMS P
Disease 0
EUROPE E
P PARKNOOM





Conclusions:

- Optimize implementation plans
- 2. Need for European Guideline
- 3. Questionnaire to gain insight in current care & unmet needs
- 4. Outcome assessment project

2. European guideline

2. European guideline

Project leaders: Samyra Keus & Marten Munneke Endorsed by the APPDE, KNGF and ER-WCPT

24 months (july 2010 - july 2012)

Funding: 60% KNGF; 40% ER-WCPT members?

2. European guideline

All EU countries asked to participate via ER-WCPT

Positive response to date:

 •UK
 •Belgium
 •Portugal

 •Italy
 •Finland
 •Norway

 •Switzerland
 •Austria
 •Ireland

 •Denmark
 •Luxembourg
 •Czech Republic

 •Cyprus
 •Germany
 •Sweden

Systematic

- ✓ Update Dutch guideline
- √ Additional EU unmet needs > key questions > recommendations

Unmet needs

- 1) Focus groups & web-based forum guideline users (ParkinsonNet)
- 2) EU questionnaire

3. Questionnaire (Dec 2010-Feb 2011)

Start implementation & guideline:

Where are we now? What can be improved?

EU survey:

- current care = information for implementation, e.g. which expert PTs to involve and what competences to address in education to work according to the guidelines
- unmet needs (barriers & learning needs) = questions > recommendations EU guideline; networks

3. Questionnaire (Dec 2010-Feb 2011)

Development: existing questionnaires & guideline

Web-based

- 1. Random selection (600) of all working members
 - Reliable insight current care
 - · Compare between countries
 - Evaluate within countries
- 2. Open invitation 'experts'
 - Increase data on barriers & learning needs therapists

3. Questionnaire (Dec 2010-Feb 2011)

E-mail invitation

- 1. Yes/No & nr of patients treated
- 2. For all participating PTs, 5 min., e.g.
 - Demographic & professional characteristics PTs
 - General barriers in delivering optimal care
- 3. Extra, for PTs treating >4 PD patients/yr*, 20 min., e.g.
 - Measurement tools: use & competence
 - Systematic identifying treatment goal
 - Use of specific treatment strategies
 - Use of protocols

* based on Nijkrake et al, 2009