



DELIVER

NEWSLETTER

17th September 2024

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Deliver Project EU



@Deliverproject1



DeliverProject EU



For more information on the DELIVER Project please visit www.deliverproject.eu or send an email to deliver.thk@radboudumc.nl

World Patient Safety Day: Advancing the Quality and Safety of Oral Healthcare through the DELIVER Project

17th September 2024

As we celebrate World Patient Safety Day, the DELIVER project takes pride in its role in the global mission to enhance healthcare quality and patient safety. Launched in August 2022 and funded by the European Union, the DELIVER project is on a mission to transform oral healthcare across Europe, creating practical tools and strategies that uphold the highest standards of care.

The goals of the DELIVER project align closely with the vision of the WHO European Centre of Excellence

for Quality in Care and Patient Safety. This vision, inspired by the European Programme of Work (EPW) 2020–2025 – ‘United Action for Better Health in Europe’, emphasises the importance of cohesive policies, robust structures, and adequate resources in healthcare. The DELIVER project contributes to this vision by focusing on three key phases:

1. Setting Priorities for Quality Improvement
2. In-Depth Analysis of QI Approaches
3. Synthesising Knowledge into Practical Tools.

DELIVER: DELiberative ImproVEment of oRal care quality

PHASE 1

Priority Setting



PHASE 2

In Depth Analysis of QI approaches



PHASE 3

Integrative Synthesis of DELIVER Quality improvement toolkit



Project Partners:

Radboud University
Medical Centre
(Radboudumc)

Universitätsklinikum
Heidelberg
(UKHD)

University of Manchester
(UMIMAN)

Karolinska Institutet
(KI)

Ministry for Health &
Active Ageing
(MHA)

Stichting Vrije Universiteit
(VU-ACTA)

University of Copenhagen
(UCPH)

University of Porto
(ISPUP)

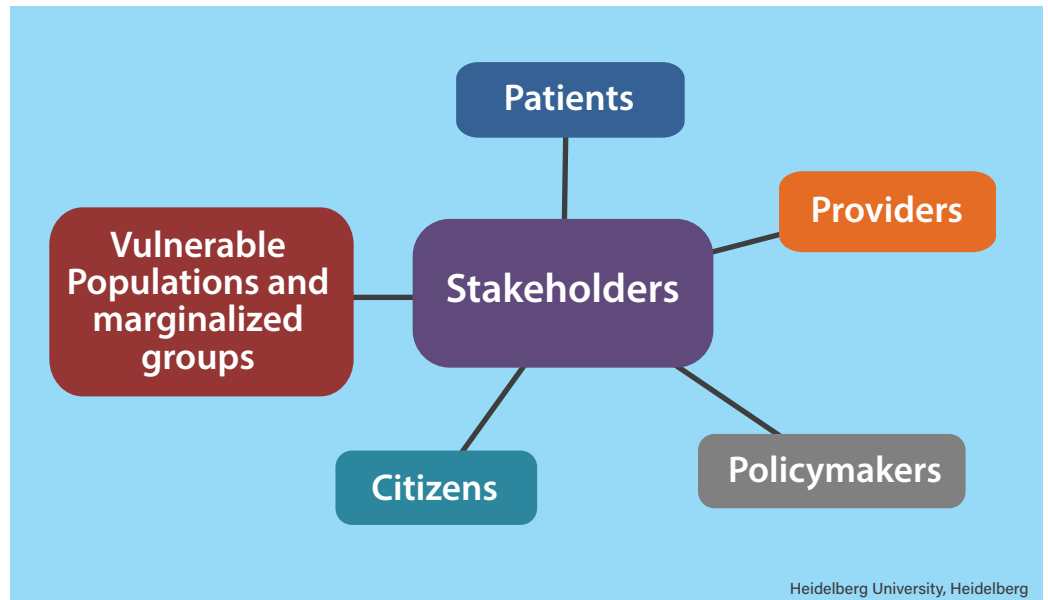
aQua-Institut GmbH
(aQua)

Stichting Lygature
(LYG)

To date, the DELIVER project has accomplished PHASE 1 of the project. The project's mapping (led by the University of Heidelberg) of the current situation of oral care quality improvement across European countries and the co-development of a set of quality indicators for applicability on the practice-, community-, and policy-levels provide a solid foundation for the subsequent project activities.

In close collaboration with diverse stakeholder groups, the DELIVER project has consented:

1. a definition of oral care quality
2. a list of pressing issues concerning oral care quality improvement
3. a list of quality indicators for practice-, community-, and policy-levels. These inputs will be foundational for the monitoring framework



Setting Priorities for Quality Improvement

In its initial phase, the DELIVER project has made significant strides in establishing the foundation for quality improvement in oral care. The project's unique approach involved the collaborative development of a definition of oral care quality with 44 stakeholders, using the innovative World Café methodology and online workshops. This definition underscores the importance of care being equitable, accessible, patient-centred, safe, effective, efficient, and timely.

Expanding on this definition, the project adopted a comprehensive approach to identify critical issues related to oral care quality at the practice, community, and policy levels. This was achieved through the Nominal Group Technique, engaging 39 stakeholders to highlight key concerns such as affordability, accessibility, workforce effectiveness, and interdisciplinary collaboration. The meticulousness of this process ensures that no aspect of oral care quality is overlooked.

A significant achievement was the development of a core set of quality indicators for oral care. Through a systematic review of peer-reviewed and grey literature, the project identified over 1,000 indicators. These were then rigorously refined through a RAND/UCLA process involving multiple workshops and surveys across several

European countries. The final list, which includes indicators across domains such as accessibility, safety, equitability, effectiveness, efficiency, timeliness, and patient-centeredness, is a testament to the project's unwavering commitment to rigour and excellence.

Additionally, a situational analysis was conducted to assess the status of quality improvement across Europe. This involved desk research and semi-structured interviews with key stakeholders at practice, community, national, and global policy levels. The findings revealed significant gaps and opportunities in the quality improvement landscape, providing a solid foundation for the project's next steps.

Quality definitions: Domains of quality

Care should be:



Case studies on quality improvement on the practice-, community-, and policy-levels

The project has now entered the second phase of the project which focuses on testing and refining quality improvement (QI) approaches through multi-country case studies. This phase involves the development of tools and protocols that will be implemented in real-world settings.

On the level of dental practices, one of the key initiatives is the creation of a PROMs (Patient-Reported Outcome Measures) and PREMs (Patient-Reported Experience Measures) dashboard. This dashboard allows for the systematic collection and analysis of patient feedback, helping practices to identify areas for improvement. Moreover, DELIVER is pioneering the use of natural language processing to analyse unstructured patient feedback. By leveraging advanced topic modelling techniques, the project is extracting actionable insights from patient reviews, enabling dental practices to better understand and respond to patient experiences.

On the community-level, DELIVER has made strides in engaging vulnerable populations. Multistakeholder teams have been established in both urban and rural areas in the Netherlands and Denmark, focusing on improving access to oral care for underserved communities. These teams include a wide range of professionals and citizens who are working together to co-design solutions that address local needs.

On the policymaking level, DELIVER has engaged with various stakeholder groups in the Netherlands and Germany and identified priorities to improve resource allocation for oral healthcare. Given the previous absence of evidence-informed deliberative processes for oral health care, particular attention was given to clear and concise steps for stakeholder engagement as well as careful selection of case studies to facilitate constructive dialogues. In close collaboration with policymakers, citizens, providers, and insurers, the DELIVER case studies are now focusing on consenting recommendations to optimise the design of oral care benefit packages (with emphasis on disease prevention) and areas of oral health care which have previously been struggling with lack of necessary resources (e.g. oral health care for people with disabilities or living in nursing homes).

In addition, the team from Lygature, Radboud, and Medlaw Consult Foundation (up to December 2022) have looked into creating the answer to the question:

How is adherence to professional guidelines assured via legal instruments, commissioning of oral health services and payment systems? By mapping the standards

according to the axes' provenance, scope and consequences.

The team started an extensive desk research into the legal status of various formally non-binding instruments concerning health care quality in several EU jurisdiction. The more detailed research led to the conclusions that there are not only substantial differences between the legal systems in the various member states, but also substantial differences in the implementation of EU directives as it comes to professionals and registration of these professionals. The outcome to several yardsticks shows limited similarities between the several member states.

As the development for guidelines in oral health is mostly a national issue and limited in comparison with other healthcare disciplines, the research emphasizes an EU basis for development as well.

During the last few months, representatives from the Academic Centre for Dentistry Amsterdam (ACTA) have organized meetings in urban and not-so-urban regions in the Netherlands, gathering with citizens and professionals both working in oral health care and elsewhere.

In Amsterdam, a successful dinner meeting was held with a group of young adults in a community center in a relatively socially deprived area of in Amsterdam. They expressed a need for clear communication from oral health professionals about what benefits and costs may be expected from a visit to an oral health practice. To some of these youngsters, it was a real shock to find out that at the age of 18 years, you are suddenly expected to arrange your oral health care by yourself. That includes the financial and administrative burden of oral care. Whereas the need for contact with an oral health care practice did not seem obvious to all of them in the absence of oral pain, they did appreciate the importance of dental esthetics and a nice smile!

We are furthermore in the process of interviewing citizens who benefit from an (oral) urgency fund in the municipality of Rotterdam.

In the (more or less) rural area of Friesland we are organizing focus group meetings with social workers, an oral hygienist and community nurses. Many consider preventive care to be the work of others than dentists. They feel that discussing oral health is taboo and strongly depends on relational factors. They also expressed that rules and regulations should be redesigned to encourage rather than discourage including oral health care in general community nursing. They are committed to think and organize further focus groups with us.

DELIVER at the Dutch Dental Science Days (13-14 June 2024, Lunteren, the Netherlands)

The Dutch Dental Science Days 2024 took place on June 13th and 14th at 'De Werelt' in Lunteren (The Netherlands). Researchers from all dental and dental hygiene schools in the Netherlands presented and gave updates on their own research, participated in a poster session and connected with fellow researchers. During the conference, two PhD candidates of the Radboudumc KVM team presented their research carried out within the Horizon Europe projects DELIVER.



▼ **Sehida Begovic** presented a **situational analysis of the community-level oral health** in Amsterdam. A Social Arenas map showed the various interactions between stakeholders in oral health and social care. Stakeholders agreed on the need for simplified access to oral care for citizens and on the need for social support. They also emphasized the issue of unclarity about who is responsible for oral healthcare and quality improvement at the community level. This highlights an urgent need for improved governance.

▼ **Ziade Sarroukh** presented his study on the **political economy of priority setting and resource allocation in oral health: a narrative review and stakeholder interviews across four European countries.** Pressing oral health care challenges pose dilemmas of prioritization for governments. This study aims to identify key determinants of prioritization in oral health policy in Denmark, Germany, the Netherlands and the United Kingdom.

▼ Meanwhile **Sterre Gitz** received the "Best oral presentation PhD candidates" prize for her presentation **'Poverty-Fighting Organizations in the Netherlands: Possible Key Figures in Improving Oral Health of a Vulnerable Population!'** This work provides background data to the team meetings we are currently setting up in a village in the Dutch rural area of Friesland.

Oral Care Quality Improvement at Community Level



Linnea Eisemann de Almeida, University of Copenhagen, presenting her work on **Situational Analysis of Quality Improvements in Danish Oral Healthcare at CED IADR in Geneva** on September 12th 2024. The University of Copenhagen is currently collecting data for quality improvement initiatives at the community level in Danish community stakeholder groups.

Online event

2024

Improving Diagnosis for Patient Safety

17 SEPTEMBER

From 16:00 to 18:00 CEST

Open Webinar

The European Commission encourages all projects funded under the topic "Enhancing quality of care and patient safety" to participate in networking and joint activities, including workshops and exchanging knowledge.

On this occasion, taking advantage of the significant opportunity presented by the World Day for Patient Safety, the consortia of these projects have organised this online session to reflect on the importance and strategies for improving diagnosis for patient safety, using the WHO's slogan "Get it right, make it safe!".

The primary aim of this session is to encourage researchers, clinicians, and policymakers to adopt and promote effective strategies for achieving accurate and timely diagnoses in the areas addressed by the participating projects, which include perioperative care, prescription of benzodiazepines, polymedication, and oral care.

In accordance with the World Health Organisation's recommendations, this session will focus on sharing experiences, knowledge, and recommendations from the different projects' perspectives to address the following questions:

1. What is the importance of diagnostic errors in the areas covered by the project?
2. What are the crucial steps to understand the diagnostic process?
3. What types of solutions, interventions, and recommendations are available to promote safe diagnosis?
4. How can different stakeholders contribute to reducing diagnostic errors?

A summary of the joint recommendations will be shared after the session via email or social networks.

Programme

16:00 – 16:15
Welcome EU Officer

16:15 – 16:35
SAFEST project
www.safestsurgery.eu

SAFEST 

16:55 – 17:15
SAFEPOLYMED project
www.safepolymed.eu



16:35 – 16:55
BE-SAFE project
www.besafe-horizon.eu

BE-SAFE 

17:15 – 17:35
DELIVER project
www.deliverproject.eu



17:35 – 17:55
Questions and Answers
(Discussion)

17:55 – 18:00
Closing Remarks and End of the Event

How to register

Scan



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