



# **Criteria to select best practices - a proposal from the Commission**

**John F Ryan**  
**Director**  
**DG SANTE**



# Why work with best practices? - 1

*Conclusion from the reflection process on innovative approaches for chronic diseases (Sept 2013):*

*"There is a need for sustainable and coordinated approaches which fully explore the potential of prevention and build upon the identification and dissemination of good practice."*



## Why work with best practices? - 2

*- many of the actions co-funded from the Health Programmes identify "good" or "best" practices, but:*

- not with the same method and*
- not available in the same place*

*- work elsewhere: EIP AHA, research programmes*





## Why work with best practices? - 3

- *"best" practices help us to define "how" to best implement a specific policy*

*-it is not about*

- "what should be done" (to be defined by Member States)  
or
- "why do we need to act"





## Objectives

- *provide a core set of criteria to select "best" practices*
- *make selected practices systematically available in a "resource centre"*
- *support the transfer of "best" practices between countries*





## Steps taken so far

- *literature review regarding "best" practices selection*
- *review of key Health Programme actions selecting "best" practices*
- *produce a set of criteria and submit it to expert advice, including WHO*





## Steps ahead

- *develop an evaluation methodology*
- *refine the criteria concerning possible weighing, scoring, thresholds etc.*
- *provide a full method for criteria application*





# **PROPOSAL FOR A CORE SET OF CRITERIA TO SELECT BEST PRACTICES**







## What is a "best" practice? - 1

- *a relevant policy or intervention implemented in a real life setting and*
- *which has been assessed in terms of adequacy and equity and*
- *effectiveness and efficiency related to process and outcomes*





## What is a "best" practice? - 2

*- Other criteria are important for a successful transferability of the practice:*

- a clear definition of the context*
- sustainability*
- intersectorality*
- participation of stakeholders*



## The criteria set

- *divided in 3 sub-sets:*
  - *inclusion criteria*
  - *core criteria*
  - *qualifier criteria*





## Inclusion criteria

- Relevance: political/strategic context of the practice or intervention, which needs to be clearly explained and considered.
- Intervention characteristics: the existence of a situation analysis, established objectives, a consistent methodology etc.
- Evidence and theory based: scientific excellence or other evidence was used, analysed and disseminated in a conscious, explicit and thoughtful manner.
- Ethics: respectful with ethic values and guarantees the safeguarding of dignity



## Core Criteria

- *Effectiveness and efficiency: the degree to which the intervention was successful in producing a desired result in an optimal way. It measures the extent to which the objectives of quantity, quality and time have been met under real conditions at the lowest possible cost.*
  - *outcome and/or process evaluation*
- *Equity: the practice should take into account the needs of the population (men and women) when allocating the resources and identify and reduce health inequalities.*



## Qualifier Criteria - 1

*- TRANSFERABILITY: to which extent the implementation results are systematized and documented, making it possible to transfer it to other contexts/settings/countries or to scale it up to a broader target population/geographic context.*

*- SUSTAINABILITY: assesses the practice's ability to be maintained in the long-term with the available resources, adapting to social, economic and environmental requirements of the context in which it is developed.*



## Qualifier Criteria - 2

*-INTERSECTORAL COORDINATION: assesses the ability of the practice to foster collaboration among the different sectors involved in the domain of interest.*

*- PARTICIPATION: assesses the inclusion of stakeholders throughout the whole life cycle of the process and the ability of the practice to foster collaboration among the different sectors involved.*



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# RESOURCE CENTRE







# The planned resource centre

*IT platform with 2 main functions:*

- 1. Best practice collection and evaluation*
- 2. Digital library*





## Conclusions

- *one way of achieving EU added value is through exchange, implementation and transfer of best practices*
- *new initiative to better support EU co-funded actions and thus Member States in this work*
- *common criteria and methodology for selecting "best" practices*
- *resource centre to host practices and other documents and tools*
- *Health Programme support for best practice implementation and transfer*





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**THANK YOU VERY MUCH**

