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Email:	m.blair@imperial.ac.uk
Method of presentation:	oral presentation
Abstract title:	<p>Stakeholders' views on scenarios on European child healthcare systems and how potential changes might be achieved</p> <p>The Models of Child Health Appraised (MOCHA) Project – www.childhealthservicemodels.eu –aims to describe and appraise various models of primary child health care in Europe and make recommendations as to optimal systems' components of child healthcare. The purpose of this study was to analyse stakeholders' views on imaginary scenarios of child healthcare systems' components in the future, and how potential changes might be achieved.</p> <p>A questionnaire about three scenarios on imaginary features of the child healthcare system in the future was filled in by 45 stakeholders of 15 EU countries. Scenario 1 (S1) considered specialized preventive health services for measles vaccination. Scenario 2 (S2) considered working in multidisciplinary teams in chronic care for children with asthma and complex needs. Scenario 3 (S3) considered confidential access for early identification of mental health disorders in adolescents.</p> <p>The stakeholders expressed a need for improvements to the child healthcare system . The majority of the stakeholders were in favour of changing the systems' components presented in the three scenarios, such as improved access, availability of workforce or care coordination. (S1 78%, S2 90%, S3 71%). However, not all stakeholders considered the three scenarios feasible for their country (S1 56%, S2 30%, S3 24%). They identified the current healthcare system and service provision as the major barrier for the implementation of these scenarios.</p> <p>There was a high level of agreement among stakeholders on three potential scenarios for improvement, however, barriers were identified for the implementation of the forecasted system components.</p> <p>Eline Vlasblom, TNO, Child Health department, Leiden, Netherlands Gaby de Lijster, Child Health department, Leiden, Netherlands Mitch Blair, Imperial College London, UK Paul Kocken, Child Health department, Leiden, Netherlands</p>
Background:	
Method:	
Results:	
Discussion:	
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