Launch of the Euro Diabetes Index
Guide for local partners

EU Launch – September 17, 2014
Dear Colleagues and Friends,

As you know, diabetes is one of the most critical issues facing healthcare systems across the EU, with a high burden of disease and rising prevalence. The diabetes community has been advocating for many years to make diabetes a policy priority in all European countries with some successes. These include the 2012 EU resolution calling on the EU Commission and Member States to develop and implement a targeted EU Diabetes Strategy and, at the end of 2013, a work package dedicated entirely to diabetes in the EU’s Joint Action on Chronic Diseases. These achievements make important steps forward, but more work is needed to ensure that diabetes is recognised as a key public policy priority across Europe and allocated sufficient resources to reduce the heavy burden of the illness.

Understanding how practice and outcomes vary across Europe has the potential to increase the pressure on individual countries and also the EU as a whole to prioritise diabetes by showing how others are doing it better, and how to make improvements. This information is now available: Health Consumer Powerhouse (HCP) has developed the Euro Diabetes Index which will rank 28 EU Member States (plus Norway and Switzerland) according to their performance in diabetes care. Already in 2008 HCP presented the inaugural Euro Diabetes Index, now to be repeated. Offering data to compare the late development it will be a powerful tool for closing country specific gaps in diabetes care and improving the treatment of the disease.

The Index will be launched in September 2014 with the overarching objective to empower patients and physicians, raise awareness about the conditions, promote comprehensive national strategies on diabetes, and track critical aspects of performance in addressing the disease from the perspective of the patient in any of the 30 different national health care systems surveyed.

However, if we are to make the best use of the Index and move the diabetes agenda forward, we need a collective effort from all those involved in diabetes advocacy so that we can continue the momentum of the launch and spread the messages across Europe.

This Guide has been produced to provide information for organisations who are involved in raising awareness about the Index and support you in your activities to use the Euro Diabetes Index in your countries. It includes:

- Information about the Index, key findings, how it can be used and how it was produced
- Specific information to support its Europe-wide launch at the annual conference of the European Association for the Study of Diabetes (EASD) on 17 September 2014
- General information about diabetes to frame discussions about the Index
- Templates and plans for national launches.

Thank you for all your hard work to date and we hope that you will find this Guide a useful resource for your diabetes advocacy going forward. Please do let us know what more we can do to help – we look forward to receiving your feedback.

Good luck!

Johan Hjertqvist
Founder and President
Health Consumer Powerhouse Ltd.
THE EURO DIABETES INDEX

What is the Index and why has it been created?

The situation for diabetes differs from country to country across Europe. There are vast differences in prevention, diagnosis, and access to treatment, available information and the social attitudes towards patients. The development of patient empowerment action promotes and stimulates health care systems. In the case of diabetes, this is particularly relevant, as it is a complex health condition requiring a coordinated approach from several types of health care services, often over a long "time period" for each individual. Furthermore, the assurance of good prevention strategies and the cooperation between countries would be an asset for the future of the care of this condition.

The Euro Diabetes Index is an analysis of how the 28 EU Member States (plus Norway and Switzerland) perform against a series of indicators with regard to type 1 and 2 diabetes. This information has been brought together and ranked in a way to create a powerful tool to increase the dynamic around policy change at the European and national levels. It is a unique opportunity for patients and anyone concerned about closing gaps in diabetes care by learning, benchmarking and fostering good practices from other countries.

By highlighting the shortcomings and flaws in the systems of individual countries as well as better practices in other countries, the Index will not only provide patient groups and other engaged stakeholders with arguments and evidence to make the case for action but will also allow us – and our stakeholders, including policy-makers – to understand in which particular areas changes and actions are required in every national system.

The Index will enhance and supplement existing initiatives to provide an even stronger and more comprehensive platform for advocacy activities across Europe. If launched and used effectively, the Index has the potential to move the call for quality care in diabetes to the forefront of health policy debates in Europe, not least due to the peer pressure it will create among countries to improve their performance by providing better healthcare.

What does it look like and how can people use it?

The full Index will consist of the following documents, published and freely downloadable and will include:

- A full narrative report
- Presentation of the Index
- A stand-alone matrix of countries with "traffic light" evaluation of performance

The Index will be accessible and freely downloadable from the website www.healthpowerhouse.com. The information collected for each indicator will be simplified into 3 categories in a "traffic light" qualifiers (good=green, intermediate=yellow, not good=red) and presented in a football league-style table. This makes it very easy for any user of the Index – patients, physicians, other stakeholders– to get a quick overview of the current situation in each country, as well as similarities and differences with their neighbouring or reference countries. In addition to the highly user-friendly data that is presented, there will be key, fact-backed messages that can be used by visitors to the site in their own advocacy work.

The main audience of the Index will be European and national policy makers and their influencers, including patients, the medical community and media. The secondary audience will be the diabetes community, particularly online, and the wider public at large.
This Euro Diabetes Index will be the second of its kind; the first was conducted in 2008. The 2014 Index will show where individual countries have made progress and how they rank against their peer in any of the indicators researched. Ideally the Index will be regularly updated as new policy developments occur (e.g. development and implementation of national plans for diabetes). This will allow the further tracking of developments and improvements in the different countries.

What are the key findings?

In general, there is some improvement comparing with 2008, particularly regarding quality data acquisition. A number of countries started audits or annual data collection publications to increase awareness and improve outcomes. Nevertheless, there is still a long way to reach an optimal care provision and management of diabetes in Europe.

1. Still, only few countries report having national diabetes registries. The lack of reliable data in indicators regarding process and outcomes is unfortunately widespread.
2. The comparability of data collected is poor across the EU. The indicator definitions vary enormously from country to country, sometimes making it impossible to compare data from different countries.
3. There are important differences between sedentary lifestyles in different European countries. Physical activity varies between countries and individuals. Eating habits are also very different between countries but in general a rather low intake or non-optimal intake of dairy vegetable and fruits and a growing consumption of soft drinks and inexpensive fast foods high in fat, salt and calories. Lack of regular physical exercise and inappropriate nutrition is causing an increase of obesity all over Europe - one main risk factor for Diabetes type 2.
4. Early detection and appropriate intervention presents an opportunity to improve outcomes for people with type 2. It seems there is almost no systematic screening in any of the high-risk populations anywhere in Europe. Screening is frequently not uniform or systematic, also within the same country or region, very much depending on individual doctors' knowledge and keenness.
5. There are a number of factors hindering optimal management of diabetes:
   a. The provision of drugs and devices for proper management of the disease is essential. Surprisingly, in the past few years a high number of countries have been reducing the provision of such essential materials. Higher private co-payments are required from patients and families to receive correct disease management.
   b. Good access to efficient and structured patient education for patients and families. However, it seems patients receive different degrees of quality of education depending very much on the local professional teams.
6. The lack of data made it hard to compare indicators regarding Procedures and Outcomes. But in general it seems there is the tendency to follow recommendations and guidelines. More and more patients are being followed on regular basis to monitor and prevent secondary complications than was the case in 2008.
7. Access to foot care improved in the past years. However, a broad majority of countries still do annual foot check-ups on less than 60% of diabetics.
8. Eye care for diabetics is far from being where it should be e.g. the lack of data on this subject in all countries is remarkable. A low proportion of patients get regular examinations (every two years). The quality of those examinations is also differing.

What are the key messages?

- The diabetes epidemic is taking its toll on European citizens with more than 32 million people diagnosed with the disease and many more undiagnosed.
• The cost of treatment in Europe in 2013 is already €106bn and set to rise still, but we are not managing the condition effectively.
• Diabetes is still a major cause for kidney failure, blindness, foot and leg amputation and heart disease and care varies significantly across Europe.
• Improved efficiency in care delivery needs to be supported by an infrastructure that includes a dedicated policy framework, a retinopathy screening programme, robust IT systems in general practice and a financial incentive structure to promote quality assurance. This could reduce the burden of illness in every country, prevent hundreds of thousands of deaths, improve the lives of millions of patients and significantly increase work productivity.
• Good access for patients and families to structured education to learn how to effectively manage the disease, access to high quality multidisciplinary teams, and systematic check-ups to reduce secondary complications would help rapidly improving outcomes.
• Policy adaptations and clear priorities are recommended to close gaps identified in the Diabetes Index in national diabetes care by learning from best practices across the continent.
• Despite ongoing improvements, more efforts must be made urgently, more tailor-made solutions need to be found, care must become more individualised and patients should be more closely engaged in managing their disease.

Who produced the Index and how was it developed?

Health Consumer Powerhouse (HCP) has received financial support to further develop the comparative index ranking of 28 EU Member States (plus Norway and Switzerland) first published in 2008, according to country performance with regard to type 1 and 2 diabetes over the course of 2014.

HCP, the leading European provider of consumer information on health care, worked with experts from across Europe and the different fields of diabetes to develop a number of indicators for assessing diabetes care. 28 indicators from a long list of indicators were scored in a systematic manner to reflect and compare the healthcare situation in the different EU countries (plus Norway and Switzerland), from perspectives ranging from prevention policies to access to treatment, the management of the disease and patient outcomes.

The indicators were organised into the following categories:
• Prevention
• Case finding
• Range and reach of services (“Generosity of care”)
• Access to Treatment/Care
• Procedures
• Outcomes

Once the indicators were defined, HCP gathered information from a variety of sources including existing data, country visits with experts and face-to-face interviews. To be used as a feed-back information, an e-questionnaire was designed to collect responses from patient organisations representatives and other relevant stakeholders. One benefit of collecting data in this fashion is that it opens and fosters a dialogue with key stakeholders. All contributors and responsible authorities in each country were given the opportunity to review their own preliminary results before publication of the Index.

This project of developing a comparative diabetes Index received an unrestricted research grant from MSD.

More information about HCP and their work is available at www.healthpowerhouse.com.
LAUNCHING THE INDEX

European launch

Official event launch
The Euro Diabetes Index will be launched officially at a multi-stakeholder seminar on 17 September 2014, at the annual conference of the European Association for the Study of Diabetes (EASD). EASD is one of the most prominent annual European events on diabetes, where the latest scientific information is shared not only with the medical community but also EU and national policy-makers, and wider stakeholder audiences. In 2014, EASD will take place in Vienna, Austria, a member state that is also a particularly important connecting point between pan-European efforts such as the EU Joint Action on Chronic Disease and national policy environments.

Timing: 09.00 – 11.00h
Venue: Derot Hall, Vienna Congress Centre, Vienna, Austria

Interested stakeholders from across the diabetes community, such as patient groups, medical experts and other health care professionals, health institutes, media and policy experts, are encouraged to get involved and draw attention to the launch with national stakeholders who are likely to be attending or interested in the Index. In the appendices of this Guide you will find:

• A draft programme and running order
• A letter to send to stakeholders about the launch
• Additional information about attending the Euro Launch of the Index at EASD for those wishing to invite stakeholders to the event, or attend themselves.

Webinar
In addition to the panel presentation and discussion, the launch of the Index will also be webcast for those unable to attend in person. To join the webinar, enter http://bambuser.com/channel/healthpowerhouse into your browser and follow the instructions on screen.

Media
To maximise media attention to the news around the Index, the interest of local journalists and representatives of the online diabetes communities, such as prominent diabetes bloggers, will be sought proactively to encourage attendance and facilitate reporting about the Index. Journalists will be included in the invites to the launch and there will be an opportunity for questions and answers during the event. For those unable to travel to Vienna, it will also be possible to pose questions through the webinar.

30 different versions of a core press release in all official languages and tailored to the 30 countries surveyed by the Index, highlighting the respective ranking of the country in question, will be produced and distributed under embargo shortly before launch day by HCP. Members of the diabetes community are also encouraged to engage with local journalists by distributing the press release and informing them about the webinar.

National launches

Following the European launch event in Vienna, it is hoped that interested members of the diabetes community will organise a series of national launch events to capitalise on the Index and build on the momentum of the supra-state launch. In addition to presenting findings in the Index of relevance to the country in question, the national launch events will aim to assess and
discuss implications of the Index findings and possible national solutions to the shortcomings identified. Ideally, each event will produce a deliverable such as a call to action or some recommendations addressed to national decision-makers. This will be based on a consensus from attendees, national policymakers, practitioners, and other stakeholders, including media.

National organisations are the key to organising these events and ensuring their success, given their relationships with national decision makers – the ultimate gatekeepers to drive change in diabetes care. In the appendices, you will find templates to support your involvement in a national launch of the Index.

National launches of the Index should take place between the launch in Vienna on September 17 and the World Diabetes Day on November 14, 2014. They should ideally be organised by partners in the diabetes patient community, for instance in cooperation with the local diabetes association linked to IDF Europe. The goal is to bring together key policy-makers (Ministers, officials of national and regional ministries, members of national and regional parliaments), key opinion leaders (academics, think tanks, media, celebrities), and other stakeholders (clinicians, patients, payers) for a multi-stakeholder roundtable that will discuss the Index’ findings for the country in question and propose possible policy actions and solutions.

In the appendices of this Guide you will find information to help organise a national launch, including:
- Guidance on how to coordinate with other stakeholders to organise a national launch
- Suggested format and flow for a roundtable event
- Support for engaging the media in promoting the launch including a template press release
- Suggestions about how to utilise social media to promote the Index and the launch.

HCP will also produce press releases in local languages to be used by other stakeholders in the diabetes community to highlight the launch. These will be available in September prior to the launch, when the Index has been finalised. Post-launch, every release will be available on the HCP website.

HCP recognises that local stakeholders are most familiar with their environment, and as such, advise that the supporting information is adapted as needed to suit custom and best practice in each country.
**SUPPORTING INFORMATION**

**Diabetes facts and figures**

- In 2013, more than 32 million Europeans live with diabetes, i.e. 8.1% of the population.
- By 2035, the population living with diabetes is expected to increase to 38 million.
- Only 50% of the population with diabetes have been diagnosed.
- Over 50% of adults with diabetes fail to reach the levels of blood sugar required.
- In 2013, Europe spent €106bn on treating diabetes.
- Diabetes is a major cause of kidney failure, blindness, foot and leg amputation and heart disease.
- One in ten deaths in Europe can be attributed to diabetes – equalling 619,000 deaths in 2013.
- Europe is home to the highest number of children with type 1 diabetes in the world.
- Europe has the highest incidence rate for new cases of type 1 diabetes in children.
- There is growing evidence that type 2 diabetes in children and adolescents is increasing.
- Young people with type 2 diabetes risk developing complications earlier in life, with devastating consequences for their families and society.
- Currently, reliable data on the true costs of caring for people living with diabetes is scarce. The issue of having accurate and timely data on diabetes medicines and medical devices thus needs to addressed, as currently decisions are being made in the absence of such information.
- A rise in diabetes and diabetes-related complications will put a severe strain on healthcare systems which currently spend on average an estimated 10% of their budget on diabetes care. In some countries, this figure is as high as 20%.

**What have the milestones been in driving diabetes policy?**

- In 2006, under the Austrian EU Presidency, the European Parliament in its Written Declaration on Diabetes called on the Commission and Council to recognise Diabetes as an urgent public health issue and identify priority actions in “the programmes” of future Council presidencies.
- The United Nations, at the Summit on Non-Communicable Diseases in September 2011, adopted a political declaration on the Prevention and Control of Non-Communicable Diseases.
- This was followed by an endorsement of the World Health Assembly in 2012, of the NCD Global monitoring Framework, with the aim to reduce premature deaths from non-communicable diseases by 25% by 2025.
- Most prominently, in its Resolution of 14 March 2012 on Addressing the EU Diabetes Epidemic, the European Parliament has called on the EU Commission and Member States to develop and implement a targeted EU Diabetes Strategy to prevent, diagnose and manage diabetes and to provide education and foster research.
- Also, in the Melbourne Declaration on Diabetes at the World Diabetes Congress of the International Diabetes Federation (IDF) held in Melbourne, Australia in December 2013, members of more than 50 National Parliaments have committed themselves to tackling the global challenge posed by the surging worldwide diabetes pandemic.
- The European Union, in December 2013, announced the Joint Action on Chronic Diseases to run from 2014-2016, which includes a Work Package entirely dedicated to Diabetes.
Contact information

For more information about the Index or the European launch event, please contact:

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APPENDICES

Draft programme for the European launch event

Multi-stakeholder seminar and press briefing 9.00h-11.00h

The launch event itself will take the format of a multi-stakeholder workshop and press briefing consisting of the presentation of the Index and its key findings and a panel debate focusing on best-practices, closing gaps and discussing on policy solutions.

Journalists with an interest in diabetes will be alerted to the opportunity to attend the launch at the congress or join the webinar.

Given the likelihood that some interested stakeholders and journalists may not be able to travel to Vienna, the session will also be webcast, with opportunities to feed into the Q&A session via a moderator in the room. Attending the webinar is free of charge.

Following the meeting, there will also be an opportunity for journalists in attendance to have 1:2:1 interviews with panellists.

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<th>Timing</th>
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<td>Johan Hjertqvist, HCP</td>
<td>Welcome</td>
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<td>09.05 – 09.25</td>
<td>Dr. Beatriz Cebolla, HCP</td>
<td>Index presentation. Key findings, recommendations for change.</td>
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<td>09.25 – 09.35</td>
<td>Prof Thomas Wascher, President of the Austrian Diabetes Association (OEDG)</td>
<td>What does the index mean to the physician community? How to improve quality of care, increase awareness within the community, follow guidelines and standardize processes.</td>
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<td>09.35 – 09.45</td>
<td>Mrs Sandra Bršec Rolih, Croatia, board member, International Diabetes Federation (IDF) Europe</td>
<td>The usefulness of the index for advocacy, increasing awareness and point to good practice.</td>
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<td>09.45 – 09.55</td>
<td>Dr. med. Carsten Petersen, Diabetes-Schwerpunktpraxis Internistische Gemeinschaftspraxis SL, Germany</td>
<td>aha! – a family doctors approach to dmt2-prevention. Early detection of patients with an existing dtm2 through screening; a regional project in Schleswig.</td>
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<td>09.55 - 10.05</td>
<td>Dr Jelka Zalatel, Co-Chair of National Diabetes Programme coordination group, Ministry of Health, Slovenia</td>
<td>Reviewing regional practices and performance in Slovenia after the implementation of National Diabetes strategy.</td>
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<td>10.05-10.15</td>
<td>Dr Fred Storms, Senior Advisor to CBO Dutch National Institute for Quality in Health Care, The Netherlands</td>
<td>A good diabetes registry critical for articulating and measuring progress of diabetes policies.</td>
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<td>10.15 – 10.25</td>
<td>Dr. Juan Riese, Scientific and Technical Advisor and Coordinator of the Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (CHRODIS-JA) Health Institute Carlos III</td>
<td>Integrated approach to tackle diabetes and other chronic diseases for a greater impact in European health: The Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (CHRODIS-JA)</td>
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Template letter to stakeholders

Subject line: Launch of the Euro Diabetes Index 2014

Dear [insert name]

I am writing to alert you to the launch of the Euro Diabetes Index in Vienna this week.

As you know, the situation with regard to diabetes differs enormously from country to country. There are vast differences in prevention, diagnosis, access to treatment or available information, just to name a few. This year, the leading European provider of consumer information on health care, Health Consumer Powerhouse (HCP) has developed a comparative index ranking 28 EU Member States (plus Norway and Switzerland) according to their performance with regard to Diabetes care. This year’s Index is a full update of the inaugural Euro Diabetes Index from 2008, which provides a unique and critical analysis of the development – even lack of development – since 2008.

The Index will be a powerful instrument for understanding the situation across Europe and within Member States for patients with diabetes, and for closing country specific gaps in diabetes care and improving the treatment of the disease. The Index will be launched in September with the overarching objective to empower patients, raise awareness about the conditions, promote comprehensive national strategies on diabetes, and track critical aspects of performance in addressing the disease from the perspective of the user in any of the 30 different national health care systems surveyed.

[As appropriate]
To welcome the launch of the Index and to review what this means for [your country], we [name of your organisation] will be organising a workshop to examine the findings and the implications for patients in [your country]. Given your interest in diabetes / As a leading expert / Building on our previous contact [personalise as appropriate], I would very much welcome your participation in our national event. This will be an important moment to share your expertise and views to drive forward improvements in diabetes care for [country you are in].

[Or]
I would be happy to provide you with further information in the context of a personal meeting at your convenience. Please do let me know if this would be of interest.

I look forward to your reply.

Kind regards,

Information on attending the launch of the Euro Diabetes Index launch event at EASD

The launch of the Euro Diabetes Index is taking place at the 50th Annual meeting of the European Association for the Study of Diabetes (EASD). People wishing to attend the launch of the Euro Diabetes Index must therefore be registered for the whole EASD congress. Registration is €750 for each non-EASD member (there are differing fees for different levels of EASD membership).

To register for EASD please visit this website:
http://www.easd.org/images/easdwebfiles/annualmeeting/50thmeeting/Registration.html

Further information:
• Bank transfer payments are only possible before 05 August 2014; credit card payments are possible at all times.
• Registrations are personal: once registered no name changes are possible.
• Cancellations must be sent in writing to the EASD Registration Department. EASD will charge a handling fee of Euro 50 for cancellations received before 25 August 2014. There will be no refund for cancellations received after this date or onsite.
• A plan of the congress centre is below for information.

Template plan for national launch event

How will the launch communication be coordinated in a country?
Appoint or act as Index communications coordinator: To facilitate the coordination and management of the launch, ideally, a local patient group would act as Index communications coordinator. The coordinator would serve as main point of contact in a given country for the central campaign management team.

How should awareness among local stakeholder audiences be raised?
To make a difference in policy focus, policy-makers, media and key opinion leaders in each country need to know about the Index and its findings. Only then will they consider the need for action. It is therefore of utmost importance that you inform any policy-maker, journalist or other stakeholder that you will be in contact with between now and the launch September 17 about the Index, its objective and its upcoming launch about the Index.

At EU level, meetings with Members of the European Parliament, European Commission officials, the EU Presidency and the European Centre for Disease Prevention and Control (ECDC) are planned to be scheduled to inform about the Index and to build anticipation and interest in the Index ahead of the launch.
How to enrol media support locally?
To achieve visibility for the Index and create public pressure on policy-makers to act, strong media coverage across Europe is needed. Between now and the launch date you can help ensure strong coverage in your country by:

- Identifying key journalists from your market for watching the webinar, reporting about the Index and staying interested in policy change to improve diabetes care and fighting the disease.
- Briefing national journalists ahead of the launch whenever you meet them or in the context of dedicated briefing meetings.

How to enrol political engagement for change and improvement of care?
As part of the local launch and post launch activities, identify best leverage points in the Index for creating local traction, bring key stakeholders, including political players, together in round-table discussions etc., to build consensus on the need for change and on the focus of change.

What considerations must there be for a national launch?
The event at national level should be addressed to: national and regional policy-makers and relevant national stakeholders including hospital managers, supportive patient groups, clinicians and local media.

The following aspects are recommended to be taken into consideration when organising national launches:

- Policy-makers with a personal interest in diabetes seem to be particularly well positioned to provide support to the diabetes cause and to host the event. This might help in attraction relevant audiences and will give political credibility to the event.
- Engaging a professional moderator, such as a knowledgeable, journalist to moderate the debate is advisable to ensure the discussion stays focused and delivers the desired outcome
- The workshop should be outcome focussed by giving it objectives, such as the elaboration of an action plan, call to action or concrete improvement of a particular area of care.
- A venue that is close to policy-makers e.g. Parliament often proves critical to attract the attention of policy makers.
- Journalists should be invited to attend the workshop as appropriate, but also to offer individual and exclusive interviews to them
- Each event should be relevant to the particular constellation, interest and focus of the national stakeholders to be involved. Information should be adapted and tailor made to the local environment.

What format could a national launch take?

Title: Workshop on quality assurance of diabetes care provision in the EU – the Euro Diabetes Care Index in [NAME OF THE COUNTRY]
Host: Health Ministry
Moderator: Health journalist
Duration: 2h30 (max)

Meeting flow:
- Presentation of the Index by a representative from HCP or the organiser of the in-country launch, followed by Q&A with the audience
- Panel discussion (Speakers 5-10 minutes presentations):
  - Improving the living conditions of viral disease patients, ELPA representative
  - Health threats and viral diabetes: the role of the EU, European Commission representative
  - Improving the management of viral diabetes patients, Hospital manager representative
  - The social and economic impact of viral diabetes: preventing the disease and its progression, Health Minister
Template press release

We are happy to make available information about the index ahead of publication for your work and are also able to answer any questions you might have. **We do, however, ask that you remember this information is not for public use until after publication, and ask that you respect the embargo below.**

**EMBARGOED UNTIL 09:00 17 September 2014**

**Study: [Country] comes X out of XX in new EU diabetes care league table**

*Strengths in X and Y, deficits in Z – National Plan on Diabetes Care necessary to improve coordination of efforts - Publication on 17 September in Vienna*

A new study of diabetes care in Europe has ranked [country] below-ahead X other countries. [country] performed especially well/badly on X; other issues such as [insert relevant country information] were better/worse than the average across the continent.

Diabetes can lead to cardiovascular disease, blindness, kidney failure, loss of limbs and loss of life, but importantly is preventable. Around 60 million people in Europe suffer from the condition, X million in [country], and prevalence is rising due to increases in overweight and obesity, unhealthy diet and physical inactivity.

The Euro Diabetes Index has been put together by the Swedish think tank Health Consumer Powerhouse (HCP) to highlight where countries are doing well at providing treatment and care for people with diabetes, to drive best practice across Europe.

First place on the Euro Diabetes Care Index is held by XX, followed by ZZ and YY. The XX position is partly due to [insert reasons], according to the research.

One of the leading experts in medical research on diabetes in the UK, [Name, Institution], commented on the findings:

“[Country]’s ranking of Xth place in the Euro Diabetes Care Index shows the level of focus that has gone into addressing the condition. It is vital that we build on existing programmes and awareness campaigns and take this to the next level. The Diabetes Care Index is a valuable tool for understanding what other countries are doing successfully to tackle this issue and we will be speaking to Ministers in the coming months about how we can take this learning to influence our own work.”

The study supports calls for increased X and Y in [country]

ENDS

Notes to editors:

For further information, please contact [in-country contact] or learn more about the index on the website: [http://www.healthpowerhouse.com](http://www.healthpowerhouse.com)
Social media engagement ideas

Social media offers a number of opportunities to help build awareness of the 2014 EURO Diabetes Index in the run up to the launch in September, as well as keeping the momentum going around national launches and outreach in the months afterwards. Below we have outlined a number of potential activities that can be undertaken without involving significant extra resource of either time or funding.

The main targets for social media engagement will be people and organisations who will help drive awareness of the Index and the launch event – patients and other national patient groups, journalists and key opinion leaders. In addition, some of these channels will enable reaching those who will use the Index themselves – clinicians and policy makers.

- Raise awareness the launch through Twitter, Facebook, LinkedIn, organisation and personal blogs and other channels.
- Proactive tweets/messages can be put out on a regular basis to build momentum. Opportunities to do this include:
  - Alerting people about the European launch
  - The main findings of the Index
  - The findings about your country
  - Video clips of speakers from the European launch (which will be available on YouTube)
  - News about a national launch
  - Information about the speakers that will take part
  - Highlights of the conversations
  - Links to news coverage

For example:
- New ranking of #diabetescare in Europeans countries to be published in Sept. More info @ www.healthpowerhouse.com #eurodiabetesindex
- #eurodiabetesindex launch 17 Sep @ #EASD2014. Looking forward to hearing about #diabetescare across EU. Listen in www.healthpowerhouse.com
- [country] is [ranking] out of 30 euro countries. See where more work is needed & how others are doing www.healthpowerhouse.com #eurodiabetesindex
- Meeting with ministers today to discuss #diabetescare in [country] & what we can learn from #eurodiabetesindex. More info later!

- You can also raise the Index in conversations through social media, using hashtags and links to where the Index is hosted (either on your or on HCP’s website). You can also use hashtags to link to other conversations and increase the reach of your comments. Some examples of the popular hashtags include:
  - #diabetescare
  - #eurodiabetesindex
  - #EASD2014
  - #eudiasbetes
  - #diabetesprevention

- Message bloggers and active participants of social media at other organisations and ask them if they will mention the launch or the index.
  - @[twitter handle of blogger], hope you and your followers will be interested in the #eurodiabetesindex that’s launching at #EASD2014 – more info @ www.healthpowerhouse.com

- Include the hashtags and Twitter handles in newsletters and other communications that go out from your organisation.