

EUROPEAN FORUM FOR PRIMARY CARE

2022 Conference



Ghent, Belgium | September 25th – September 27th

PROGRAMME BOOK & INFORMATION



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Discussion: There is a varied understanding of which community members should be involved, what CP&CE mean in practice and which functions they fulfil for the CdS and 'the community'. It is important that involved actors compound, through exchange, to a common idea of CP&CE to facilitate practice implementation also on a larger scale. Simultaneously, a shared understanding should consider the heterogeneity of specific local contexts to promote ad-hoc needs-based participatory approaches.

Abstract ID: EFPC20221696

“IMPLEMENTING FOUNDRY: REGIONAL AND VIRTUAL EXPANSION TO IMPROVE ACCESS TO PRIMARY HEALTH CARE YOUTH IN BRITISH COLUMBIA, CANADA”

Authors: Karen Giang
Julie Zimmerman
Elise Durante
Emilie Mallia
Steve Mathias
Skye Barbic

Key Words: youth, primary health care, integrated youth services, Foundry

Purpose: Foundry provides services to youth age 12-24 through a Primary Youth Health Care Model. The purpose was to evaluate the outcomes of service utilization for primary care at Foundry in 11 centres.

Methods: Data were analyzed using R for all youth clients accessing in-person (April 27th, 2018-April 30th, 2022).

Findings: The mean client age was 19.62 years (SD = 3.57) and clients most commonly identified as female (62%). 31,462 unique youth received 245,699 services at Foundry during the four year period. Mental health (27.2%, n=67,514), Physical health (22.2%, n=54,533), Sexual Health (14.2%, 34,986), Walk-in Counselling, (12.7%, n=31,122), and Substance Use (6.6%, n=16,210) describe the five most frequented services. Illness/Injury (n=15,880), Prescriptions (n=17,176), and transcare (n=7216) were the most frequented reasons for physical health services. Birth control (41.6%) and STI testing/treatment (32.9%) were most frequently sexual health services accessed. Over 60% of youth scored "high" or "very high" for distress and 29% had a self-rated mental health of "poor".

Discussion: Overall, Foundry has continued to reach the target age group of 12-24 years, a range of youth with complex needs and service requests. Primary care plays a critical role as Foundry continues to expand both physical centres and virtual primary health services.

Abstract ID: EFPC20221715

“LONG COVID IN PRIMARY CARE: STUDY AMONG BELGIAN GENERAL PRACTITIONERS.”

Authors: Sarah Moreels



17th EFPC Conference Ghent | Integrated Community Care: a new opportunity for Primary Care

Sherihane Bensemmane
Robrecht De Schreye

Key Words: long COVID, primary care, epidemiology, Belgium

Purpose: With the COVID-pandemic going on for over two years, the number of patients suffering from long-term COVID-related symptoms is increasing. Many of these patients are treated by general practitioners (GPs). However, little is known about the definition of long COVID GPs use, or the care provided for these patients in primary care.

Methods: An online survey was carried out among all GPs of the Belgian network of Sentinel General Practices (N=84) during spring 2022. The survey has 16 (ordinal, open-ended or multiple choice) questions. Descriptive analysis (with Pearson' chi2) were performed. A case definition for long COVID was not included, as there is currently no widely accepted definition available in general practice.

Findings: 48 GPs (well distributed across all Belgian regions) completed the questionnaire. To identify long COVID patients, GPs considered the duration of symptoms (from 4 weeks to 5 months). 75% of participating GPs indicated to have contact with long COVID patients in their practice. No difference was found between practice type, GP's gender or age. A median of 2 long COVID patients per 1000 active patients was estimated.

Long COVID patients suffer mainly from fatigue (92%), breathing difficulties (80%), concentration/memory problems (64%), impairment in daily functioning (63%) and smell/taste disorder (46%). GPs are consulted biweekly by 19% and monthly by 33% of these patients. Half of them is followed up by only the GP and 31% in multidisciplinary cooperation.

Other healthcare professionals involved include pneumologists, physiotherapists, specialists in physical medicine/rehabilitation and neurologists.

Conclusions: A majority of GPs frequently provide care to long COVID patients and take a key role in the coordination of care for these patients. Although evidence-based clinical practice guidelines are not yet available, the duration of complaints and most occurring symptoms were identified among long COVID patients in Belgian general practice.

Abstract ID: EFPC20221734

“TOWARDS INTEGRATED CARE IN BELGIUM'S COMPLEX HEALTHCARE SYSTEM: AN IMPLEMENTATION STRATEGY BASED ON VICINITY TEAMS AND A MIXED FINANCING MODEL”

Authors: Marie Van de Putte
Gijs Van Pottelbergh

Key Words: vicinity teams, Cappuccino model, neighborhood tailored

Purpose: Leuven Cares (Zorgzaam Leuven) started a change management project in 2018, aimed at chronic care integration and realizing quintuple aim for a population of 102000 inhabitants.

Theory: An approach with vicinity teams and mixed funding model aims better multidisciplinary care neighborhood tailored, evidence based chronic care and a strengthening of cooperation between primary care providers.