

DR Barometer European Advocacy Workshop Breakout Session Outline - Day One	
13:00 – 13:15	<p>Introduction to breakout sessions</p> <p>Moderators: Dr. Jane Barratt and Ms. Michelle Sylvanowicz</p>
13:15 – 14:30	<p>Session One: Improving Vision Health Outcomes</p> <p>Use the template to record discussions.</p> <p>Task 1: Understand the topic.</p> <p>a) <i>Read your group's scenario.</i></p> <p>b) <i>Reference - DR Barometer Report</i></p> <p>c) <i>Record practical and / or anecdotal knowledge about the topic.</i></p> <p>Task 2: Discuss and clarify the group's goal and desired outcome and outputs.</p> <p>a) <i>What is the overall goal related to the topic (e.g. improved patient education that impacts the conversation with the health care professionals)?</i></p> <p>b) <i>What is it that we want to achieve and why?</i></p> <p>c) <i>What are the milestones and indicators of success?</i></p> <p>Task 3: Brainstorm learnings from existing programs.</p> <p>a) <i>Identify existing practices and their components.</i></p> <p>b) <i>What are the success factors / or reflect on why they were not successful?</i></p> <p>c) <i>What are the lessons to be learned and how can they be applied to our program?</i></p>
14:30 – 15:00	<p>Health Break</p>
15:00 – 15:45	<p>Session One Continued</p> <p>Task 4: Propose a program to achieve the goal that is being addressed.</p> <p>a) <i>What is the purpose of the program?</i></p> <p>b) <i>What are the tactics / strategy?</i></p> <p>c) <i>Who is the target audience?</i></p> <p>d) <i>Who are the key stakeholder groups that need to buy-in to the program for it to succeed?</i></p> <p>e) <i>What are the roles and responsibilities of each stakeholder group?</i></p> <p>f) <i>Who are the critical influencers, who can they influence and what needs to happen for them to be engaged.</i></p>
15:45 – 17:00	<p>Session Two: Speed Dating - Exchanging and Enhancing Ideas</p> <p>Working groups will present 'their strawman' (starting point) of the proposal to 2-3 other groups in a speed dating approach to gain feedback and insights.</p> <p>After 10 minutes, we rang a bell and give the instruction, "Shake hands and move on." After three rounds, we will stop.</p>

**DR Barometer European Advocacy Workshop
Breakout Session Outline - Day Two**

9:15 – 9:30	<p>Setting the Scene – Toward Communities of Practice Moderators: Dr. Jane Barratt and Ms. Michelle Sylvanowicz</p>
9:30 – 10:00	<p>Health Break</p>
10:00 – 12:00	<p>Session Three: Building a Community of Practice for Change Building on the previous day’s work and feedback from other groups, use the template to document a more substantial proposal that leads to achieving the goal.</p> <ul style="list-style-type: none"> - Project: Confirm the purpose and objectives - The who and the whom: Confirm stakeholders (including influencers and those to be influenced) and the target audience - Actions: Determine actions for each objective, and when and how these will be implemented and by whom - Evaluation and Impact: Outline mechanism for evaluating progress and how the impact of the program will be measured. - Sustainability, Replicability, and Scalability: Determine whether the program is a once-off or requires sustaining; whether the program can be replicated, and whether the program can be scaled up.
12:00 – 12:45	<p>Lunch</p>
12:45– 14:30	<p>Session Four: Refining Strategies for Success Each breakout (working) group will pitch their program in such a way as to enrol attendees to invest their time and be members of this community of practice. (10 minutes)</p>

Breakout Session Group Scenarios			
Community of Practice	Group 1	Group 2	Group 3
Patient Education and Empowerment	Adults with diabetes who have not been diagnosed with a retinal disease; and have little or no awareness of the eye complications associated with diabetes	Adults with diabetes who have received a positive screening test for diabetic retinopathy	Adults with diabetes whose vision complications have progressed to diabetic macular edema and are receiving treatment
Guidelines and Protocols for Healthcare Professionals (HCPs)	HCPs are not aware of guidelines / protocols for vision health of adults with diabetes	HCPs are aware of but not implementing available guidelines / protocols	Guidelines / protocols are not up to date and thus patient care is not being optimized
Coordinated Care	Health care professionals (HCP) who are committed to a coordinated care model / approach but do not know where to start	A coordinated care model / approach exists but there appears to be essential infrastructural elements missing, such as: (1) Comprehensive needs assessment (2) Individualized care planning (3) Access to needed services and equipment (4) Communication and monitoring	A coordinated care approach is in place, with all essential components present, but there are areas for improvement across the system