

# **Minutes of the General Assembly 2017**

October 26, 2017 - Seville, Spain

Participants in-person: Rudi Gasser (Victoria-Australia), Miriam Gunning (Ireland), Ann O'Riordan (Ireland), Laura Antón (Catalonia-Spain), Gry Kjevik (Norway), Claudia Kurat (Austria), Stanislav Losse (Czech Republic). Daniel J. López Vega (Andalusia-Spain), Aurora Martínez Loscertales (Andalusia-Spain), Ana Ruíz Bernal (Andalusia-Spain), Maria Luz Peña González (Basque-Country, Spain), Ronald Rodríguez Cogollo (Basque-Country, Spain), Luis Gutiérrez (Cantabrian-Spain), Mª Jesús Garcia Blanco (Galicia-Spain), Jorge Suanzes Hernández (Galicia-Spain), Adelaida Lozano Polo (Murcia -Spain), Bärbel Strecker (Switzerland), Joan Davis (Illinois, USA).

Online: Christa Rustler (**Germany**), Shu-Ying Lo (**Taiwan**), Maxwell (**Taiwan**), Sinikka Krogerus (**Finland**), Lourdes Lázaro Asegurado (**Burgos-Spain**). Roberto Cabestre Garcia (**Argaon-Spain**), Blanca Ma Benito Fernández and Emma del Castillo (**Cantabrian-Spain**).

**Collaborative Partners: (Online)** Thor Bern Jensen **(HPH Secretariat)**, on behalf of Sally Fawkes **(HPH Governance Board)** the HPH named person for collaboration under MoU.

**Apologies**: Susann Koalick (**Switzerland**), David Chalom (**Sweden**), Nicolas Bonnet (**France**), Ülle Ani (**Estonian**), George Magradze (**Georgia**) Florin Mihaltan (**Romania**), Wael Safwat Abd Elmeguid (**Egypt**)

Type of meeting: In person meeting from 10:00 to 13:00h

# 1. Welcome and Introduction

Ms. Miriam Gunning (chair) opened the meeting by welcoming everyone to Seville and invited all (in person and \*online) to briefly introduce themselves. Then the meeting agenda was approved for the General Assembly 2017.

# 2. Statement from the Chair

Ms. Miriam Gunning (Chair) outlined the key activities and achievement of the Board and Global Network during the exciting and busy year of 2017.

- Change of network name: the association name was changed from ENSH to Global Network for Tobacco Free Healthcare Service (Global Network or GNTH).
- **Membership designation**: a change in membership now reinforces that members are healthcare services rather than networks. The Global Network has 33 registered members, in 19 countries across 4 continents, the majority of which are networks (regional/national) with multiples of committed healthcare services.
- **GOLD Process**: the GOLD Process 16/17 was completed in April 2017, after an interval of 2 years. In all there were 14 participants from 5 network members

<sup>\*</sup> this was unsuccessful due to the computer and online technical problems at the time.



and the Process concluded in April with the successful organization of the GOLD Forum Event in Vienna.

- Collaboration: with the Austrian HPH Network resulted in the successful Tobacco Free Preconference (including GOLD Fourm Event) being held in conjunction with the 25<sup>th</sup> International Conference of Health Promoting Hospitals and Health Services (HPH).
- Personal appreciation was expressed to Susann Koalick (Switzerland) for
  two specific proactive activities. (1) The organization with Italian colleagues of
  a joint HPH/GNTH Tobacco Free workshop in Mendrisio (Ticino) Switzerland
  in April 2017 and (2) presentation of a poster on behalf of the Global Network
  and GOLD Forum members at the 6th International City Health Conference
  'Empowerment, Engagement and Partnership: participating to develop healthy
  cities' in Basel, Switzerland in September 2017.
- Contributions were highlighted: from Prof. Joan Davis (US), for her collaboration and sharing of professional expertise, Ann ORiordan, for her hard work and efforts to keep the Board and administration of the global network on track and from Rudi Gasser for the financial support gained from Bawon Health and for tremendous efforts of his colleagues in the development of the new website for the Global Network.
- **Finally,** Miriam thanked the Andalusian Network, Daniel, Ana and Aurora for the hosting of this year's General Assembly and for the integration and organization of their regional tobacco conference within the 11 Global Forum.

# 3. Financial Reports

Dr. Rudi Gasser (Treasurer) presented the Financial Report for the year 2016/2017.

The summary Income & Expenditure for the period of 1st of July 2016 to June 30th,

2017 was outlined. Figures were highlighted with respect to:

- **Income**: Barwon Health grant of 18.000 euro and GOLD Process fees,
- Expenditure: salary for administrator position, an important and ongoing expenditure. Preconference organization and GOLD Forum Event, reimbursement of 500 euro for overpayment.
- Balance: Cash surplus noted.

See figures outline above and in the previously circulated Financial Report.

Expenditure - in euro Income - in euro Admin/Salaries 8.000.00 Barwon Health 18,000.00 Office Equip 1,728.38 Travel Taiwan 1,157.00 Office Supplies 163 45 GOLD Process fees 6.964.60 1,740.38 Travel Expenses 129.65 Meetings €26,121.60 Website GOLD Process 16/17 4.355.85\* Miscellaneous €16,210.73 Surplus '17 € 9,910.87 \*Reimbursement room hire overpayment Vienna - € 500

**SUMMARY OF INCOME & EXPENDITURE 2016/2017** 

Financial Report 2016/2017

**Estimated Budget for 2017/2018** presented based on maintaining activity levels in line with the previous year.



**Noted:** Barwon Health income grant of 18.000 for the year 2017/2018 has been received. This is the final of the 3-year committed funding from Barwon Health.

**Decision:** The Financial Accounts were approved unanimously by members (in person and online) at the General Assembly.

Summary Estimated Budget 2017/2018 Financial Year July 1st, 2017 /June 30th 2018		
Income – in euro  Barwon Health 18,000.00  GOLD process fees 7,000.00  Preconference fee 27,000.00	Expenditure – in euro Admin/Salaries/Travel Office Equip/Supplies Design/Print/ Materials Website Global Meetings Workshops/Training GOLD Process 16/17 Bank fee Miscellaneous	11,000.00 1,500.00 1,000.00 6,000.00 2,000.00 2,000.00 3,000.00 50.00

\*\*\* Due to computer and technical problems at this time, a change in agenda was proposed and agreed with a move to the next agenda item.

# 4. Collaboration under MoU: Endgame - Joint Project

Mr. Thor Bern Jensen (Technical Officer - The International HPH Secretariat), who was participating on behalf of Ms. Sally Fawkes (HPH Governance Board) the designated HPH person for collaboration under MoU, was invited to speak.

Due to the technical problems, Thor had to present unfortunately without aid of the prepared slide presentation. These slides along with the Global Network statement "GNTH and HPH working together towards the Tobacco 'endgame' can be found in Appendices 1-2,

# Key points raised were with respect to:

- Long history of collaboration between the two networks, particularly in the joint Tobacco Free United (TFU) taskforce
- Mutual membership with commitment to tackling tobacco
- Synergy of GNTH 8 Tobacco free standards and HPH 5 standards
- Sharing of good practice within international HPH Conference sessions and collaboration on successful Tobacco Free preconferences.

**Noted:** (1) collaboration has already commenced on a preconference for Bologna, 6<sup>th</sup> of June 2018, draft programme currently under discussion. This event will again be in conjunction with International HPH Conference 26<sup>th</sup> 6-8 June 2018, to which all are invited to participate. And (2) HPH Governance Board is due to meet in December when concrete proposals for joint action could be considered.

Miriam thanked Thor for his participation and acknowledged the strong history of collaboration. She also highlighted the absence of a concrete response from HPH to Global Network statement for joint action on the Endgame shared with Sally Fawkes in advance of the General Assembly. It was felt that in the absence of a concrete response from HPH, further planned discussion on the topic and ways to move collaboration forward needed to be deferred.



In reply, Thor clarified that as he had no mandate to speak on the collaboration, he would immediately email Sally Fawkes with a view to an early online discussion meeting in November being arranged with Sally. Then if concrete actions or a project outline was agreed, he would bring this to the HPH Governance Board meeting in December for an official response.

# 5. Coordinating Center Report

A brief Coordinating Center report was presented with an overview on membership status, activities undertaken, and actions achieved during the past year.

# Membership 2017

**Noted**: the membership slide reflected the change in membership designation.

- Czech Republic was welcomed as a new network member. The previous single members are founding members of the Czech Republic national network.
- French network it was reported that it had been re-launched on 24<sup>th</sup> October. Dr. Rudi Gasser had participated and represented the Global Network. Rudi reported on French interest for closer collaboration in the future and possible joint working with Swiss Network on a Spring Frenchspeaking Workshop in 2018
- Prof Joan Davis was welcomed as a new individual Associate member.



**Potential new members**: many new contacts were established in 2017, the most promising and committed of these being in the Netherlands with a potential

member network joining in 2018. The Global Standards are currently being translated in to Dutch with an online meeting proposed for November.

# **Key membership aspects**

Members were reminded of the network name change and new logo. Details of which will be re-circulated after the General Assembly.

The importance of updating membership and contact details for the new website. It is hoped to have this updating process completed before the end of the year.



# Activity and achievements 2016 - 2017

Details of activities undertaken by the Coordinating Centre, the Board and network members were highlighted in an overview slide.

# Key achievements

- Membership of the Framework Convention Alliance (FCA)
- GOLD Process 2016/2017
- Collaboration with Austrian HPH Network on a Tobacco Free Preconference, Vienna, Austria
- Re-branding: as Global Network and Logo updated
- Operational Plan 2017/2018 Collaborative activities Network activities Board Meetings - Monthly x 11 City Health International 2017 Website - Members login / Resource Sept17, Basel, Poster Presentation /Self-Audit/ Toolkit WCTOH 2018 - 6-8 March '18 Online member meetings -South Africa, Poster Presentation Training/information/support Materials - complete updating Spring Workshop - French speaking Strategy/Sustainability - Sub Group Swiss 2018 GOLD Forum Process - Sept '17 -26th International HPH Conference -Mar '18 Co-organiser - General Assembly, Training Workshop – Oct '17,Seville Tobacco PreConference – 6th June 18 GOLD Forum - 6th June, Bologna, General Assembly 2018 – Date + Venue

3rd Global Forum - Date +Venue

- Statutes and Code of Conduct revision and updating of core materials
- Website consultation and development of the new Global Network

# Activity and targets for 2017 - 2018

It was proposed that activities for the period 1st July 2017 to June 30th 2018 should remain in line with the previous year with one new focus on sustainability.

2<sup>nd</sup> Global Network Symposium

Details of proposed activities to be undertaken by the Coordinating Centre, the Board and network members were highlighted in an overview slide.

Key target: Sustainability

A new strategy is needed to build on the current Strategy 2015-2018. Funding and options sources need to considered does the long-term as requirement for the sustainability of the Coordinating Center and function.



It was hoped that input from Joan Davis in the discussion session and afternoon training workshop would provide guidance for this necessary focus and activity.



# 6. Network Business - Statutes 2017 and Code of Conduct

The revised and updated Statutes and Code of Conduct were presented for approval to the General Assembly.

It was noted that the documents had been circulated in advance of the GA. All new and updated parts had been highlighted and feedback, amendments and queries invited. No feedback had been returned within the set timeframe, although very late feedback had been received from the German Network. Despite the GA time limitations these queries were raised with some discussion and clarification given.

**Art. 5 Membership: Designation** - emphasis is now placed on the healthcare services as the member rather than the network coordinating institution.

**Code of Conduct** – clarification was given that members have the responsibility to comply with the code. It is the responsibility of member to make disclosures of actual or perceived "conflicts of interest" in advance or at the time of engagement in Global Network activities or any decision-making process. Declaration in advance was an unnecessary administrative burden unless integrated into the membership application.

**Exclusion criteria** – proposal for the inclusion of "e-cigarette industry" along with tobacco industry was agreed. The new input in the Statutes should be in keeping with already agreed terminology (i.e. associated devices/e-cigarettes) in the Statutes.

**Membership voting** – proposal for definition to be included in the Statutes. As the Swiss Statutes template was followed in Statutes revision, this was not considered necessary. Confirmation would be sought however to ensure that definition of voting In the Statutes was not a legal required under Swiss law. Definition of voting was planned for inclusion in the Operations Manual. It was however acknowledged that a final and fair solution on the voting process is still under consideration such as proportional voting. Member inputs were invited, and the matter was referred to the Board for early consideration.

**Decision**: Members approved the Statutes and Code of Conduct pending the inclusion of the agreed inputs and clarifications. This was a majority decision of members present (in person and online) with one abstaining member.

# 6. Network Activities – GOLD Process and new Global Network Website GOLD Process

In the absence of Ms. Susann Koalick, Lead for the GOLD Process 2016/2017, this report was presented by Ms. Ann ORiordan

Due to a recent bereavement Susann was unable to attend. Miriam expressed the sympathy and condolence of the GA to her.

A successful GOLD Process 2016-2017 concluded in April with the GOLD Forum Event in Vienna. In





all, 11 new and 2 renewal candidates from 4countries received the GOLD Forum award and 4-year membership GOLD Forum.

The GOLD Process 2017/18 commenced in September with 15 candidates nominated from 7 countries. 3 of which are renewal candidates.

External Observer for the GOLD Process 2017/18 is Ms. Kate Frazer (University College Dublin, – School of Nursing, Midwifery and Health Systems) Ireland.



The next GOLD Forum Event is planned for the 6<sup>th</sup> of June in Bologna.

Susann raised a few questions for consideration by the General Assembly and Board on the continuation and sustainability of the GOLD Process. Due to time limitations these were deferred for discussion and consideration later.

#### New Website.

Dr. Rudi Gasser was proud to launch the new Global Network website – www.tobaccofreehealthcare.org.

Rudi thanked his colleagues Fiona and Lydia in the Victorian Network for their support and expertise in the development of the new website.

The launch of the website signals the move from the ENSH website to the Global Network website. Shortly the Coordinating Center will introduce the email address of **info@tobaccofreehealthcare.org** 



The website launch is the public and open access part of the website.

Phase 2, the members login section is now underway. This part of the development focus on the content management system for website. It will look at development of the membership profiles, resources and the online Self-Audit tool.

To be a focal resource for Global Network members, it is vital that members play an active role in its development. Consultation and feedback will be specifically requested and encouraged in relation to the Members Profile and GOLD Forum sections.



- Member shared resources (potentially based on the VNSHS function) including process /system for categorisation
- Finalisation of the Client Relationship Management System (CRM) - the current Global Network membership database will form the basis of the CRM. Once finalised, this will provide the basis for an emarketing strategy to members and non-members.
- Development of member profile function and member login to access (similar to VNSHS)
- Development of an online audit function. This
  requires further consultation with the web provider and
  Global Coordinating Centre.
- Development of payment portal (if required)



- Members feedback will be important, particularly on what information should be displayed that will encourage participation, interaction and downloads.
- The need to bear in mind the burden of translations was also stressed, as was the need for contributions from members to the news and events sections.

# 7. Board Election

It was reported that many postal ballots had already been received. Final ballot papers were collected from members present and a small break was taken to allow for the counting of votes.

The election outcome was announced by Dr. Gasser, who as Head of the Coordinating Center fulfilled this position on the Board.

- Ms. Gry Kjevik, [Norway] was deemed elected.
- Laura Anton [Catalonia] and Claudia, Kurat [Austria] were elected to the Board for the first time.
- Susann Koalick [Switzerland], Shu Ying Lo [Taiwan] and Daniel López Vega Spain – Andalucia] being re-elected for second term
- And, Miriam Gunning, [Ireland] for third and final term.

While not elected, it was hoped that input from Safwat Abd Elmeguid, Wael [Egypt] into the work and activities of the Global Network would be encouraged.

Sincere thanks, were expressed to Dr. David Chalom, outgoing Board member for his passion, commitment and input over the past two years. It was hoped that David would remain active as an Associate member in the Global Network.

Members of the new Board were welcomed and congratulated by the General Assembly and it was hoped that an early meeting would be convened to appoint the Executive Officers of the Board.

\*\*\*\* Despite the agenda time over run, the importance of final agenda item was stress and members agreed to extend the meeting time to continue.

# 8. Global Network Sustainability - facilitated discussion.

Prof Joan Davis was introduced and invited to facilitate discussion among members on the critical topic of sustainability - operational & strategic planning.

Presentation outline slides can be found in appendix 3

Joan opened by sharing information on her personal experience and expertise gained with working and guiding organization to build and develop sustainable entities.









In Joan's experience a key requirement is a shared vision and mission. In marketing the simplicity and clarity of the key statement of purpose is vital.

Joan then invited all GA members to write down what the Global Network was for them personally. From feedback, she felt that there is a wide variation in what members

1. For Global Network sustainability: an immediate step might be to focus on a clear, simple statement of purpose for the network. This statement can then be used to match with the values and supportive actions of potential funders.

To illustrate this point, Joan outlined an example of a large US non-for-profit Healthcare Service provider that was willing to provide funding to associations projects and initiatives that demonstrate community involvement and support.

This was because these activities were in line with their mission and values. The marketing point here is that this will

provide them with bragging rights, positive press, and a demonstrated commitment to the community they serve.

2. For Global Network sustainability, consideration should be given to the reasonable expectation that member hospitals / health systems and GOLD Forum Members might be willing to support not only the concept but financially support the organization (ie Global Network) that provides such a strong framework for tobacco free healthcare institutions.

Outlined also for discussion was the value of approaching a variety of potential partners outside of the Global Network such as WHO, Global Bridges, Kaiser Permanente, Mayo Clinic, ATTUD.

This raised issue of protecting the Global Network from vested and commercial interests. In the past involvement with Global Bridges had been rejected as their early funding came directly from the pharmaceutical industry. In reply Joan stated that this may have been the case that currently there was no involvement or influence from any vested commercial industry.

- 2. For Global Network sustainability There are two key considerations
- 1. All potential funding organizations would operate on a not for profit basis
- 2. What are the GNTH offering potential funders

#### **Our Mission**

The Global Network Seeks to:

- 1. Recruit
- 2. Motivate
- 3. Guide healthcare services globally

In the implementation of their tobacco management policies.

# Southern Illinois Healthcare (SIH) http://www.sih.net/

- · This large, regional healthcare system provides funding to a variety of community and association initiatives that support health and wellness in the region http://www.sih.net/ways-to-give/sih-foundation/
- · SIH is a private not-for-profit not a government entity. They fund projects to demonstrate community involvement and support.
- Their activities also <u>demonstrate commitment to their mission</u>. It is reasonable to expect the hospitals / health systems that are Gold Members to support not only the concept but financially the organization that provides such a strong framework for tobacco free healthcare institutions
- This provides them with bragging rights, positive press, and a demonstrated commitment to the community they serve



Time did not allow for the planned SWOT analysis. Joan suggested it was a useful and important exercise that might be undertaken by the new Board.

Some discussion key points were suggested:

- Name change to Global Network in 33 countries
- Build new collaborations
- Build on / add on to existing activities / programs
  - WHO Hospital Systems Responsiveness
  - Hospital Wellness, health promotion
  - Two International Hospital Associations/Networks: Tobacco and Health Promotion "Tobacco Free United" – created a task force
- GNTH representatives for suggestions on "how to work better together" then bring feedback for discussion at a Board meeting
- Accreditation activities

Miriam thanked Joan for sharing her time and expertise with the GA and again offered apologies for the time difficulties that made further discussion on this critical topic impossible.

# 9. General Assembly 2018

Miriam announced that the date and venue for the 2018 General Assembly had yet to confirmed. The value and importance of twining the GNTH General Assembly with a national/regional event such as the Andalusia Event on 27<sup>th</sup> October was highlighted.

Members were invited to consider the potential and possibility of hosting the General Assembly 2018. All offers would be welcome by the Board.

**10. AOB** – no any other business items were presented.

# 11. Closure

Miriam declared the GA closed by again thanking the Andalusian Network for their hosting of the GA, organizing and hosting the 112nd Global Forum to which all participating members were looking forward to attending. Thanking online participants for their attendance and patience with all the technical difficulties and inviting all present to join her for lunch in advance of the Training Workshop which now had a delayed start time of 14.30pm.

# Operational & Strategic Planning Discussion Recruit, Motivate, Guide

- SWOT Analysis: reflect from your perspective:
  - Strengths: 2 things that have worked to meet our mission
  - Weaknesses: 2 things that did not work to meet our mission
  - Opportunities: 2 ideas you have to sustain ENSH
  - Threats: 2 threats that may hinder our efforts to advance our mission



# Appendix 1. GNTH Statement to HPH on Endgame joint working. GNTH and HPH working together towards the Tobacco 'endgame'

Tobacco 'endgame' is a main topic of conversation in many countries. The question for us is what is meant by this topic and how can health professionals and health services play a central role?

Tobacco 'endgame' has emerged in recognition of the nature of the global public health emergency created by tobacco use and tobacco promotion. The Global Network of Tobacco Free Health Services (GNTH) believe that through close collaboration and partnership working the GNTH and HPH can support health professionals and health services to actively engage in eradicating the threat of tobacco on the health of future generations?

It is widely agreed that translating the tobacco 'endgame' into action requires a multi-faceted, population and risk based approach with a strong focus on prevention and denormalisation of tobacco use. Health services hold the key to successful implementation of this approach having developed and implemented comprehensive tobacco free policies which have radically changed the culture of tobacco use in services and settings globally.

Comprehensive Tobacco management, based on the Global Network of Tobacco Free Health Services (GNTH) Standards and Concept details an approach that holds promise for health services all over the world placing themselves as leaders in the Tobacco 'endgame'. This model has proven to be successful in a variety of health services globally with varying political and cultural practices.

In many countries health services are a major employer and in all cases, health services have contact and influence with a large cohort of the population.

The HPH have access and credibility with health services that are not currently using the GNTH principles and practice but are struggling to find solutions to the challenges they face in managing tobacco addiction/dependence.

Through partnership working, together we can create innovative new smoking cessation support services to reach hardcore smokers, stay ahead of the changing world of tobacco use and promotion, use examples of working strategies to successfully develop toolkits that will ensure consistency and sustainability in tobacco management in our health services and in essence, ensure healthcare services at national and global level make a crucial contribution to the achievement of the tobacco 'endgame'



# Appendix 2: HPH presentation to the General Assembly on collaboration.

# **HPH and GNTH** - a long succesful partnership

Thor Bern Jensen, Technical Officer WHO Collaborating Centre for Evidence-based Health Promotion in Hospitals & Health Services, Denmark (WHOCC DK)

# CENTRE ( HEALTH PROMOTION REGION

HEALTH 1

REGION

# Close ties and collaborations

- MoU 2016-2019
- As a natural result of closely related focus areas, HPH and GNTH have long been working together on the mutual interest in abolishing tobacco use in first hospitals and now the entire health sector.
- TFU was a succesful HPH Task Force
- Mutual interest in a Tobacco Endgame
- · And for years the int. HPH conferences have had a pre-conference on tobacco control (TFU and ENSH and GNTH)

# HPH on smoke free policies

- HPH Letter of Intent: "Develop a written policy for health promotion and support the implementation of a smoke free hospital / health service as key action area;"
- Local involvement and collaboration in member countries
- WHO Manual and self-assessment forms -(currently being updated)

# The original standards Developed by WHO/HPH Published in 2006 (reprinted in 2010)

- The 5 standards (40 MEs + 18 indicators): 1. HP Management policy
- Patient Assessment
- Patient Intervention and Information
- Promoting a healthy workplace
- Continuity and cooperation



Important tool to assess, monitor and improve HP in hospitals.

Based on two complementary approaches of quality assessment:

- 1) Standards: professionally consented required level of achievement
- 2) Indicators: tool to assess performance in terms of process and outcome

Among the most downloaded documents on the WHO Europe website!

# Further developments to improve implementation (models)



- Management policy
- **Patient Assessment**
- **Patient Intervention and** Information
- Promoting a healthy workplace
- Continuity and cooperation



# How to update and revise?

- 1. Conduct systematic literature review (a.m. Cochrane)
- 2. Review policies and identify elements to tie in
- 3. Update and revise accordingly (APLHA version)
- 4. Conduct a clinical pilot test (incl. non-hospital settings)
- 5. Update and revise accordingly (BETA version)
- 6. Conduct an expert review in WHO, HPH and beyond
- 7. Update and revise accordingly
- 8. Finalize editing, layout and publication
- 9. Monitor and follow-up in HPH (in a new Task Force)



# 1. The systematic reviews

### **Surprising results:**

Among patients, more and more evidence has been gathered showing

- Significant effects of Intensive Interventions
- No or minimal effects of Brief Interventions

# 🎞 CLINICAL HEALTH PROMOTION CENTRE 🎕

# 2. The policy review

#### Examples of key policies reviewed

- Essential Public Health Operations (EPHOs)
- Framework for Actions on Integrated Health Services Delivery (EFFA IHSD)
- Coordinated/Integrated Health Services Delivery (CIHSD)
- Health 2020: A European policy framework and strategy for the 21st century
- Transforming our world: the 2030 Agenda for Sustainable Development
   Better non-communicable disease outcomes: challenges and opportunities
- Better non-communicable disease outcomes: challenges and opportunities for health systems
- Non-Communicable Diseases Global Action Plan 2013-2020
- Roadmap of actions to strengthen implementation of the WHO Framework Convention on Tobacco Control in the European Region 2015–2025: making tobacco a thing of the past
- Physical activity strategy for the WHO European Region 2016–2025
- WHO European Food and Nutrition Action Plan 2015-2020
- European action plan to reduce the harmful use of alcohol 2
- · The European Mental Health Action Plan







https://www.hphconferences.org/



# GNTH – HPH pre-conference, Bologna June 6, 2018

- Working title: TOBACCO FREE STANDARDS ACHIEVING CHANGE IN HEALTHCARE SERVICES: SHARING EVIDENCE-BASED POLICIES AND PRACTICES
- Morning Session: Global Network GOLD Forum Event
- Afternoon: Collaboratie Workshop: Connecting national strategies with evidence-based practice









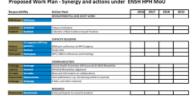
# **GNTH – HPH pre-conference,** Bologna June 6, 2018

- Registration site will be open start November <a href="https://www.hphconferences.org/">https://www.hphconferences.org/</a>
- As will the site for submitting abstracts Deadline December 21, 2107
- Everyone is invited to participate in all three days – and the HPH Network and the local hosts invite GNTH to share their knowledge and projects at the main conference



# **Future collaboration**

- HPH welcome concrete ideas for joint projects and collaborations – Sally Fawkes and GNTH will continue communication
- Endgame
- HPH Governance Board will meet primo
   December , where I will present GNTH's ideas
   and suggestions for a continued fruitful and
   close collaboration
   Proposed Work Plan Synergy and actions under ENSH HPH MOU
- · Updated workplan



Appendix 3. Joan Davis presentation to the GA on







#### Our Mission

ENSH-Global Network Seeks to:

- 1. Recruit
- 2. Motivate
- 3. Guide healthcare services globally

In the implementation of their tobacco management policies.

# Southern Illinois Healthcare (SIH) <a href="http://www.sih.net/">http://www.sih.net/</a>

- This large, regional healthcare system provides funding to a variety of community and association initiatives that support health and wellness in the region http://www.sih.net/ways-to-give/sih-foundation/
- SIH is a private not-for-profit not a government entity. They fund projects to demonstrate community involvement and support.
- Their activities also demonstrate commitment to their mission. It is reasonable to expect the hospitals / health systems that are Gold Members to support not only the concept but financially the organization that provides such a strong framework for tobacco free healthcare institutions.
- This provides them with bragging rights, positive press, and a demonstrated commitment to the community they serve.

# Potential Partners

- WHO
- · Global Bridges
- Kaiser Permanente
- · Mayo Clinic
- ATTUD

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# Operational & Strategic Planning Discussion Recruit, Motivate, Guide

- SWOT Analysis: reflect from your perspective:
- Strengths: 2 things that have worked to meet our mission
- Weaknesses: 2 things that did not work to meet our mission
- Opportunities: 2 ideas you have to sustain ENSH
- Threats: 2 threats that may hinder our efforts to advance our mission

**Discussion: Key Points** 

- Name change Global Network, 33 countries
- · Build new collaborations
- Build on / add on to existing activities / programs
  - · WHO Hospital Systems Responsiveness
  - · Hospital Wellness, health promotion
  - $\bullet \ \, \text{Two Hospital Associations: Tobacco and Health Promotion "Tobacco Free United"} \ \text{Network-created}$
  - \*\* Requesting specific ideas how to work together ENSH rep will present at Board meeting
  - · Accreditation activities

6 11/7/2017 Add a footer