

interventions targeted the patient level, 3 addressed the organisational level and 3 the macro level. All these interventions were adapted to the regional context and 2 were tested into practice by professionals and patients.

Conclusions:

The collaborative approach used in this project allowed for the development of interventions tailored to both the needs of patients and professionals. These interventions potentialize each other and contribute to the healthcare personalisation in a health promotion perspective. Despite the challenges of the collaborative approach, this project succeeded in making both patients and professionals actors of the research.

Key messages:

- Healthcare personalisation helps to integrate patient preferences into healthcare, but it remains unclear how to put it into practice.
- Co-created interventions have a better potential to improve quality of care for both patients and healthcare professionals.

Participate Brussels, a collaborative research on healthcare personalisation for chronic patients

Marie Dauvrin

M Dauvrin^{2,3,1}, T Lenoble², O Schmitz³, J Servais³, I Aujoulat³

¹Belgian Health Care Knowledge Centre, Brussels, Belgium

²Centre de Recherche Vinci, Haute Ecole Léonard de Vinci, Brussels, Belgium

³Institute of Health and Society, UCLouvain, Brussels, Belgium

Contact: marie.dauvrin@kce.fgov.be

Background:

Integrating patients' preferences in the management of chronic diseases improves patient compliance and quality of care: this assumption is at the core of the healthcare personalisation. However, it is unclear how healthcare personalisation is negotiated and put into practice by patients and healthcare professionals. The collaborative research Participate Brussels aimed at co-constructing interventions promoting healthcare personalisation for persons living with a chronic disease in the context of the Brussels region, Belgium.

Methods:

In a first step (2018-2019), 46 professionals (nurses, physicians, social workers, alternative practitioners...) and 26 adult patients living with a chronic disease participated in comprehensive interviews. Data were analysed using the ground theory approach. Results of these interviews were discussed between patients and professionals during 6 analysis seminars in 2019-2020 where researchers acted as facilitators of the dialogue by using participative methods. Finally, solutions to improve healthcare personalisation were prioritized and co-created by patients and professionals in 2020-2021.

Results:

Eleven interventions to improve healthcare personalisation for persons living with a chronic disease were co-constructed by patients, healthcare professionals, and researchers. Five