

Deliverable 2.4:

Summary of publications and communications

WP 2: Dissemination

ACT@Scale
Advancing Care Coordination
and Telehealth @ Scale

Document Information

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Short description of the Deliverable: (as in the DoW)

Summary document containing all publications and communications done during the project.

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Executive Summary

Throughout this document, the dissemination activities performed during the project are accounted for along with a plan for the dissemination activities in the last phase of the project.

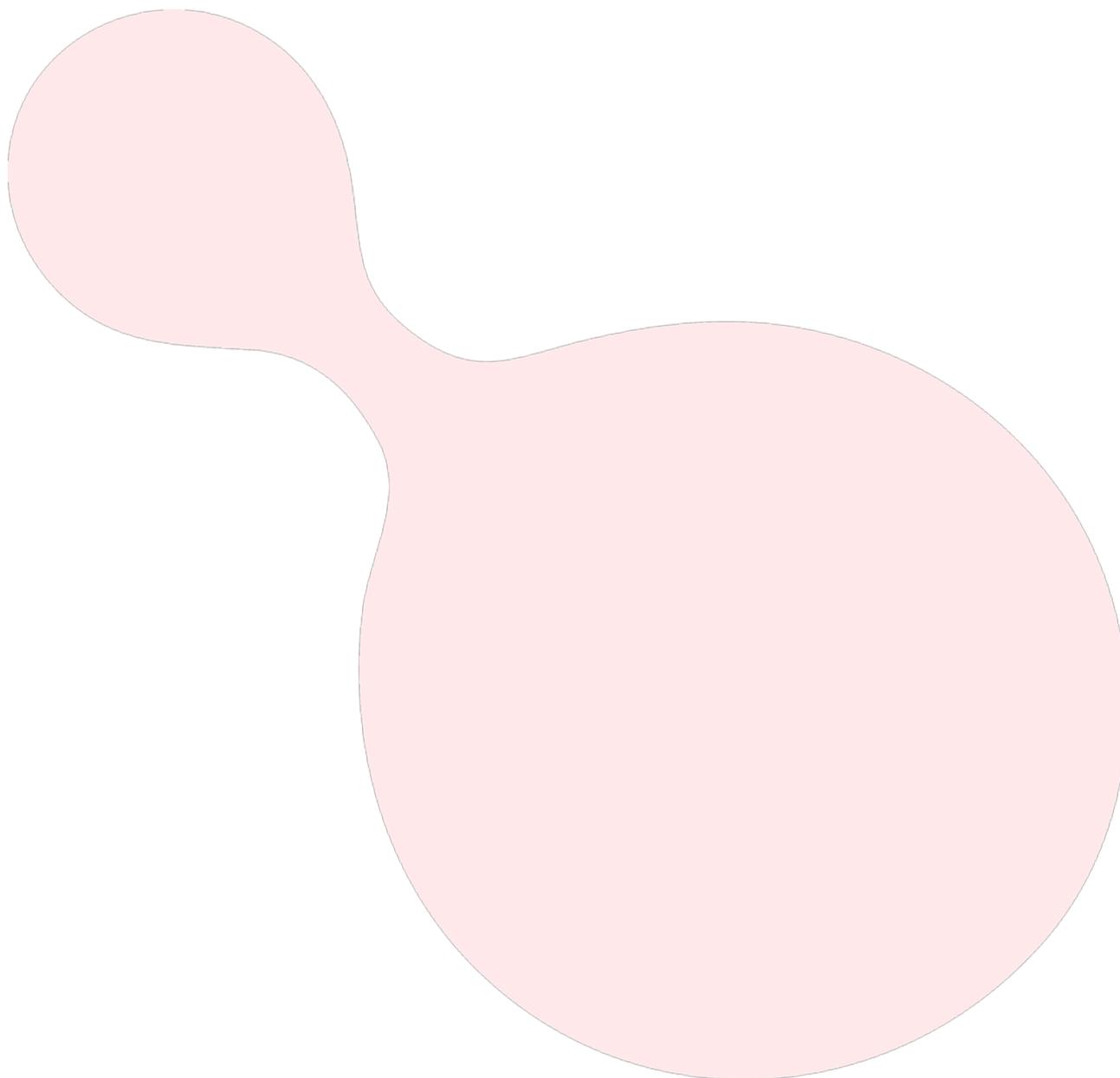
Chapter two describes the dissemination achievements and evaluates the effects of the activities. In this section, the project's Twitter activity and the effects are described including total number of tweets (583) and the outreach (227 followers of the Act@Scale Twitter profile). Also, the content of the Act@Scale leaflet along with the effect and outreach is accounted for. The leaflet has been updated during the project's lifetime as the project evolved and this required a new leaflet in terms of content. Furthermore, the website, being the primary dissemination channel, is described followed by a section on the results from Google Analytics showing the actual effect of the website, meaning number of visitors, their location, and which pages they visited. Additionally, offline activities, such as conferences, events, carried out during the project are presented in a table showing partners involved, location, dates, etc. Another table presents publications, articles, scientific articles and appearances in media. The project has collaborated with a number of other projects and initiatives, such as CHAFEA Health Systems Assessment for Integrated Care-Optimity advisors, SCIROCCO and EIP on AHA, in order to draw on and share experience, e.g. Act@Scale partner regions have participated in the online self-assessment developed by EIP-AHA B3 and SCIROCCO.

The third and final part of the deliverable contains the procedures for the final dissemination phase. The European Commission has selected several programmes from Act@Scale as part of their selection of good practices. Besides appearances in conferences, a number of videos are planned for this phase. These will be filmed in two rounds, and feature members of the project and present the outcomes and lessons learned. A handbook is planned to be developed and printed, which will function as one of the final outcomes of the project, as it will contain all the important results and achievements of the Act@Scale project. Additional dissemination activities include a layman's version of the final report, making the discoveries of the project accessible for everyone with an interest in the work regardless of their scientific background. Furthermore, changes will be made on the website towards the finalisation of the project to ensure that the website content is useful and relevant even beyond the project lifetime.

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1 Introduction

1.1 Purpose and structure of this document

This deliverable contains an explanation of how the dissemination and communication strategy have been applied (March 2016 to October 2018) and how the project has responded to the work package's objectives. Furthermore, this deliverable contains a plan for the final dissemination phase of the project.

1.1.1 Structure of the document

This document consists of 3 chapters followed by 2 appendices:

- Chapter 1: Introduction. This first chapter provides a brief introduction in order to describe the purpose of the document and provide the structure of the document.
- Chapter 2: Dissemination achievements. This chapter presents the dissemination activities that have been performed throughout the project according to the dissemination plan.
- Chapter 3: Plan of the dissemination phase. This chapter provides a detailed dissemination plan for the last 6 months of the project.

Appendices:

- Appendix A: ACT@Scale leaflet
- Appendix B: Dissemination reporting sheet
- Appendix C: ACT@Scale Infographic

1.1.2 Dissemination objectives

In order to maximise the effect of the project's dissemination efforts, the activities of WP2 Dissemination were founded on a set of common objectives described in deliverable D2.3: Dissemination Plan.

The activities of the dissemination work package have the following objectives:

- To ensure that the project has high visibility in order to create scientific and social awareness of its deployment.
- To encourage open dialogue with scientific and social communities about the project's aims, methods and outcomes.
- To disseminate and spread the results of the project in order to improve the knowledge about the implementation and upscaling of care coordination and telehealth services, and to build a shared information basis to support decision making processes related to the adoption of such services.
- To communicate with other similar or complementary projects and initiatives.
- To establish the project's visual identity.

These objectives were identified in D2.3, together with an analysis of the key stakeholders to be targeted by the dissemination activities throughout the project, in order to address the right target audience at the right level (international, national, regional, and local). These key stakeholders and target groups were identified and defined in order to optimize the dissemination efforts. The term 'target groups' implies all groups of people that could have an interest in the activities and results of ACT@Scale. The reasons for their interest may vary, and may be personal, professional, or scientific.

1.1.3 Target audiences

The audience of ACT@Scale was grouped into the following categories representing the project's whole range of stakeholders:

- Policy makers
- Health authorities, care providers, and health insurers
- Citizens/patients and their associations
- Professionals and their associations
- Research and scientific communities
- Competence centres in integrated care & care coordination, eHealth, telehealth, and chronicity
- Other relevant projects and initiatives
- General public
- Press and media

The objectives and the target audiences were to be reached through six identified dissemination channels.

1.1.4 Dissemination channels

Dissemination efforts will follow six main communication lines:

- The ACT@Scale website, which acts as a living window of the project and will be updated regularly with news and results throughout the lifetime of the project.
- ACT@Scale leaflet, which was produced at the beginning of the project. This will be supplemented with other forms of printed or online information documents.
- ACT@Scale Final Dissemination event which will aim to gather relevant stakeholders for a presentation of the project's final results as well as discussions of the way forward for care coordination and telehealth services.
- Exchange of experience and collaboration with other relevant projects and initiatives.
- The ACT@Scale twitter profile, which acts as a quick and easy communication channel reaching a broad audience including and surpassing the key stakeholder groups described above. It allows for external stakeholders to follow and reach the project in an informal yet informative manner.

- Various publications, journals, conferences and abstracts act as an important communication line to reach relevant stakeholders and target groups through the presentation and discussion of ACT@Scale results and achievements.

2 Dissemination achievements

This chapter presents a summary of the dissemination activities performed in ACT@Scale throughout the project duration. The chapter will describe the dissemination achievements and how the different dissemination tools and channels have contributed to the objectives of WP2.

2.1 Social media

Twitter was chosen as the project's social medium as it is dynamic and vibrant, but still widely used for professional purposes. In addition, several of the project's key stakeholder groups are active on Twitter, e.g. the European Commission, other EU funded projects, researchers, policy and decision makers, etc., which makes twitter a great tool to reach a broad audience.

In terms of the ACT@Scale social media coverage, the specific objective was to make a minimum of two tweets per week.

ACT@Scale has been active in 30 months, which is approximately (30*4) 120 weeks. During these weeks, a number of 584 tweets have been shared. These tweets have been shared among the followers of the ACT@Scale twitter profile, which comprises 227 twitter users. Furthermore, a number of these tweets have been retweeted, making them visible to a higher number of audiences.

The followers of the ACT@Scale twitter profile comprises stakeholders from each of the categories of the target audiences identified in D2.3.

The content of the tweets have been a mixture of activities on the websites, retweeting relevant news from related projects and stakeholders, and from dissemination activities performed by the project partners as participation in conferences and publications. A Twitter profile has a headline photograph and in ACT@Scale, the photograph has been updated for each General Assembly to mark the visits to each partner region and to present the team working in the project.

ACT@Scale has reached its objective of minimum 2 tweets per week, and has used the twitter profile to engage and inform key external stakeholders of project activities and results.

2.2 ACT@Scale leaflet

The ACT@Scale leaflet was produced at the beginning of the project and distributed to all partners as well as at several conferences. The leaflet was designed for a broad audience, and aimed to raise awareness of the project.

During the project, the leaflet has been updated to incorporate the changes and achievements of the project. Due to several factors, the information on the partners and programmes in the project has changed. These changes are reflected on the new leaflet, which contains the new partners: Gesundes Kinzigtal, Optimedis AG and University of Dundee, together with the programmes of the new partners. Furthermore, the programme of Region of Southern Denmark has been replaced by another program: Video Consultation for relatives, which is also updated on the leaflet.

In the progress of updating the leaflet, the content now also includes the achievements halfway as a mean to distribute the results of the project to a broader audience. The decision to include the achievements is relevant due to the progress of the project. The updated leaflet is focused more around the status of the project, where the first version was more forward-looking.

The updated leaflet is visible in the appendix as: Appendix A: Updated ACT@Scale leaflet.

2.3 Merchandise

ACT@Scale has produced different merchandise items to be handed out at conferences, events and among project participants.

The merchandise counts pens, post it notes and tote bags with the ACT@Scale logo.

2.4 Website

The website of the project is considered the main dissemination channel for ACT@Scale, as it is considered the right mechanism to reach the wider public and to disseminate the project's activities and outcomes regularly according to its progress.

This section will present the changes and updates made for the different pages on the websites during the project.

- The front page shows the logo, the project's full name, a list of most recent news from the project, and the partners.
The most recent project news are featured on the home page, to ensure that visitors receive the most recent actions taken by the project on the very first page, including a direct link to the specific news item.
In the top left corner, the logo is animated for the first 15 seconds on every page. Furthermore, the page shows the EIP on AHA logo to underline the close collaboration between the partnership and the project.
The page also provides direct access to the projects Twitter profile.

- The page “About the project” provides an overall description of the project supplemented by an interactive timeline showing key events and milestones of the project. The timeline has been updated during the project with the conferences and events that all the partners have participated in to highlight the project partner’s participation and visibility during the project. Furthermore, this page has also been updated to incorporate the results and achievements halfway of the project to reflect the progress of the project. In addition, the changes in the consortium are reflected on this page.
<https://www.act-at-scale.eu/about-the-project/>
- The page “Services” provides information about the different services implemented and upscaled by the partners and deployment sites in the project. This page has been updated to reflect the changes in the programmes and the deployment sites. This page provides the services in a dynamic manner as the different services appear when the mouse is hovering over the specific region. Furthermore, to give each service a visual identity, icons for each service have been developed and placed on this page next to the respective service.
<https://www.act-at-scale.eu/services/>
- The news page provides a list of news from the project. When clicked, each of the news items shows a short description as well as a link to the partners directly linked to the specific topic. This page has been updated continuously with news of the project including results, participation in conferences, and collaboration with other relevant initiatives. Currently, the news page contains 46 news items.
<https://www.act-at-scale.eu/news/>
- The page “Partners” shows an interactive map of the consortium. This page has been updated alongside with the other pages, to reflect the changes in the partner structure and these changes have applied to the interactive map. Furthermore, since the General Data Protection Regulation (GDPR) has become effective, ACT@Scale has distributed and collected consent from the consortium of ACT@Scale to be able to feature contact information and pictures of the partners on the website.
<https://www.act-at-scale.eu/partners/>
- The page “Deliverables & publications” has been used to provide access to the deliverables produced during the project lifetime as well as any relevant publications related to the project. To adapt according to the progress of the project, this page has been further developed. The page has been divided into two pages with one called:

“Publications” and the other “Results and deliverables”.

On the “Publications” page, the publications are placed with a small paragraph explaining the content. On this page are also the presentations from several conferences and events.

On the “Deliverables” page, the visual placement of the deliverables has been altered to include a small paragraph explaining the objective of the work packages. This paragraph and inclusion of the increasing number of deliverables have made the overview of the page more reader friendly.

<https://www.act-at-scale.eu/publications/>

<https://www.act-at-scale.eu/deliverables/>

- The page “ACT Programme” was originally placed in the top menu to provide information about the connection between ACT@Scale and the now finalised ACT programme, including the ACT Cookbook. This page has been moved from the main menu to be placed in the page “About the project”. The reason is that the top menu should make room for a new page “Recommendations”. Furthermore, as the project is moving into its final phase, this extra space in the top menu is used to share the results and achievements of the ACT@Scale project.
<https://www.act-at-scale.eu/about-the-project/>
- The page “Recommendations” has recently been implemented in the top menu to provide the results and achievements from the ACT@Scale project as recommendations. Currently, the content of this page is comprised of the lessons learned from the Transferability Event: *Telehealth and Care Coordination: What we did right and what we did wrong? Experiences on the collaborative methodology* at WHINN 2017, Odense. These lessons learned/tips are provided as internal links with the tip being the headline with a hyperlink to a page that explains the lessons learned with the regional example that supports the tip. This site will be further developed during the final dissemination phase and will be further explained in the next chapter.
<https://www.act-at-scale.eu/recommendations/>
- The contact page contains contact information for the project coordinator in Philips, if visitors wish further information regarding the project.
<https://www.act-at-scale.eu/contact/>

2.4.1 Google Analytics

To further investigate the reach and diversity of the audiences, the website has used Google Analytics to provide an overview of the activity on the website. Furthermore,

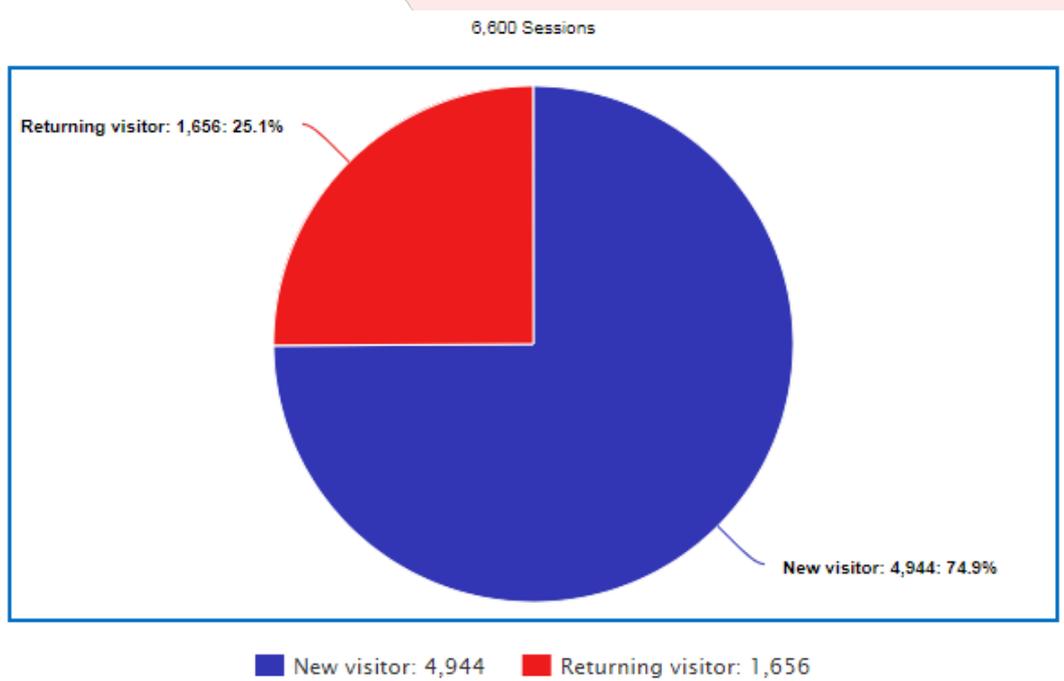
analytics provides insights on the type of audiences that visits the website, which makes this a tool to analyse which audience the website attracts.

Visitors:

During the project lifetime (1 March 2016 to 19 September 2018), the website has attracted 4944 New Users¹ that have made 6,600 sessions². This means that 25.1 percent of the new users are returning visitors, which is depicted below.

More specifically, this means that 4944 individuals have visited the ACT@Scale website. Out of those, 1656 individuals, 25% of the 4944 individuals, have returned to the website for more information, becoming “returning visitors”.

Adding the new visitors (4944) to the number of returning visitors (1656) gives you the total number of sessions (6600) on the website since the launch of the website in 2016. A session is the total visit on the website. This means that 1 session is the total period of time from when you enter the website until you close the website.



Location of visitors:

¹ New Users: The number of first-time users during the selected date range

² Sessions: Total number of Sessions within the date range. A session is the period time a user is actively engaged with your website, app, etc.

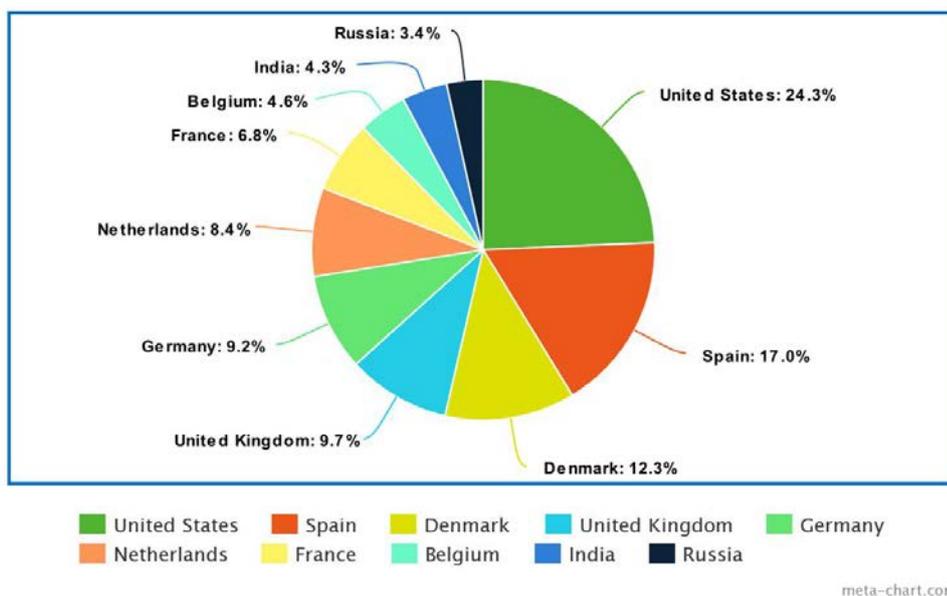
Definitions by Google Analytics

Based on the 6600 sessions on the website, the users are located from all over the world, the top 10 locations being United States, Spain, Denmark, United Kingdom, Germany, Netherlands, France, Belgium, India, and Russia, which is depicted below.

Several of the countries reflects the location of partner regions, which conclusively means that ACT@Scale as a project has managed to attract attention in local environments through regional deployment and service sites. This local awareness has attracted residents from the host country to the website, which is evident in the graph below.

Furthermore, looking at the high number for United States, ACT@Scale has reached an international audience beyond EU.

Location based on sessions



The website was seen as the main dissemination channel for ACT@Scale and was considered the right mechanism to reach the wider public. Looking at these numbers, the website can be concluded to have had extensive reach and reached audiences from multiple countries, not just in the EU.

Most visited pages by users:

The total amount of page views³ during the projects range: 1. March 2016 to 19. September 2018 is **17766**. In the table below, the page views are sorted by the number of views on each page.

Page	Pageviews. Total: 17,766
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³ Page views is the total number of pages viewed. Repeated views of a single page are counted. Definition by Google Analytics

1. Front page	5,587 (31.45%)
2. About the project	1,446 (8.14%)
3. Partners	1,134 (6.38%)
4. Deliverables and publications	1,991 (5.63%)
5. Services	840 (4.32%)
6. News	671 (3.78%)
7. Partners/Philips Electronics - Netherlands	627 (3.53%)
8. ACT programme	593 (3.34%)
9. Sharebutton	591 (3.33%)
10. Partners/Philips	461 (2.59%)

Referrals:

Referrals relates to channels that have provided access to the ACT@Scale website. Google Analytics shows that 1370 of the sessions have been from links on other pages, medias, etc, acting as referrals.

Referral source	Total sessions from referrals: 1370
1. Whinn.dk	158
2. t.co	134
3. actscale-production.ehv.campus.philips.com	40
4. kronikgune.org	39
5. reddit.com	32
6. localhost:3000	27
7. twitter.com	26
8. agingwellhub.org	24
9. cimt.dk	23
10. abc.xyz	22

The page that has referred most of the visitors to the ACT@Scale is whinn.dk. This is the conference that hosted the ACT@Scale Transferability event in October 2017, where the means were to share knowledge and learn from others experiences and lessons learned. By attracting visitors to the website through whinn.dk is, besides the event, another way of stating that the event reached its goal by sharing knowledge of the ACT@Scale project through the website.

Looking at the table, it is evident that it attracts much attention being visible on the different sites, whether it is conference websites or project partner's local website. Furthermore, it is also a reassurance that twitter has the intended function by drawing audience to the website.

2.5 Overview of dissemination activities

During the project, WP2 has created a dissemination reporting sheet, which aimed to collect information on the different partners' dissemination activities throughout the project. This reporting sheet have been distributed multiple times to the partners and updated accordingly.

This overview of activities aims to investigate if the project has reached the target groups identified in the stakeholder analysis in the dissemination plan (D2.3), with the reported activities. This dissemination reporting sheet is placed in the appendices as Appendix B.

2.5.1 Presentations of project (conferences, events, visits to region by external guests etc.)

The ACT@Scale consortium has attended 32 conferences or events with various events involving attendance by multiple partners. These events include both large international conferences and local conferences and workshops performed by partners. The specific objective states that the project should be presented at (at least) one large conference every year, which has been met.

In addition, the partners of ACT@Scale have at this moment 7 planned activities that are taking place in the Fall 2018 (4) or next year 2019 (3).

Furthermore, WP2 has handed out the merchandise to the partners that has been distributed during several of the below mentioned conferences and events. The Power Point templates that was prepared in the beginning of the project have been used extensively, which have established the project's visual identity and given the project high visibility.

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
1	Kick-off meeting, General Assemblies	Every 6 months	Luxembourg, Thessaloniki, Groningen, Odense, Bilbao (each region will host one session)	All partners		
2	Dutch Cardiology Conference	24 March 2016	Amersfoort, the Netherlands	UMCG	clinicians, decision makers, industry	
3	ICIC – International Conference for	23-25 May 2016	Barcelona	Multiple partners	researchers, clinicians, managers,	https://integratedcarefoundation.org/event

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
	Integrated Care 2016			rs	industry, policy makers	s/ivic16-16th-international-conference-integrated-care-barcelona
4	eHealth Week	8-10 June 2016	Amsterdam	Philips Health care	carers, policymakers, decision makers, authorities, patients, general public, industry	http://www.ehealthweek.org/ehome/128630/eHealth-week-2016/
5	eHealth European Congress	16-17th June 2016	San Sebastian, Spain	Basque Country		https://ehealthdonostia.com/
6	Signo - XIII Conference of Management and Evaluation in Health	27 October 2016	Ciudad Real, Spain	Basque Country	policymakers, decision makers, authorities,	http://www.fundacionsigno.com/archivos/20161017090133.pdf
7	B3 Action Group Meeting	2 November 2016	Brussels	Philips Health care	policymakers, decision makers, authorities,	
8	Preconference event to the European Public Health Conference	9 November 2016	Vienna, Austria	Philips Health care		https://ephconference.eu/
9	Dutch Federation of University Medical Centers annual conference	25 November 2016	Utrecht, the Netherlands	UMCG	researchers, clinicians, authorities, policy makers, decision makers	
10	Dutch national e-health week	26 November 2016	Groningen, the Netherlands	UMCG	researchers, clinicians, nurses, managers,	

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
					policy makers, educators	
11	ATOS e-Health cafe	25 January 2017	Amstelveen, the Netherlands	UMCG	managers, industry, policy makers, authorities, decision makers	
12	HIMSS, Dutch roundtable discussions	20-24 February 2017	Orlando, US	UMCG	industry, authorities, decision makers, policy makers	
13	Transferability meeting between ACT@Scale and other European Projects	11 April 2017	Netherlands	Philips Electronics		
14	ICIC – International Conference for Integrated Care 2017	8-10 May 2017	Dublin, Ireland	Kronikune, AQUAS, NIRE, UMCG, Philips Electronics, Osakidetza, Philips Health care	researchers, clinicians, managers, industry, policy makers	https://integratedcarefoundation.org/event/s/icic17-17th-international-conference-on-integrated-care-dublin
15	EIP AHA B3 Webinar on European Integrated Care practices and Evaluation Framework	23 May 2017	Webinar EIP AHA	All partners	policymakers, decision makers, authorities, general public, industry	https://www.eventbrite.co.uk/e/webinar-advancing-care-coordination-and-telehealth-at-

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
						scale-eip-b3-webinar-tickets-34617343406
16	eHealth European Congress	15-16 June 2017	San Sebastian, Spain	Kronik gune	decision makers, authorities, patients, general public, industry	https://ehealthdonostia.com/comunicaciones/
17	WHINN: Week of Health and Innovation (Cluster Meeting on Non-Communicable diseases) + (ACT@Scale transferability conference)	10-12 October 2017	Odense, Denmark	All partners	policymakers, decision makers, authorities, industry	http://www.whinn.dk/
18	EIPonAHA B3 action group meeting	15 November 2017	Bruxelles	Kronik gune, Philips Health care	members of the B3 Action Group	
19	SCIROCCO conference	21 November 2017	Glasgow, Scotland	Philips Health care, Kronik gune, RSD	Public policy-makers, healthcare professionals, representatives of social care, housing and voluntary sectors, academia and end users	http://www.scirocco-project.eu/events-calendar/category/scirocco-event/
20	EIPonAHA Conference of Partners	27-28 February 2018	Bruxelles	Philips Health care, Kronik gune	policymakers, decision makers, authorities, industry	https://ec.europa.eu/eip/ageing/sites/eipaha/files/events/20180222_co

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
						p_programme_for_publication_
21	X National Congress on Multimorbid Patient Healthcare	1-2 March 2018	Zaragoza, Spain	Kronik gune	health managers, health professionals, policy makers, researchers	http://www.congresocronicos.org/
22	Integrated services: organizational healthcare models in the framework of chronic diseases (PROMIS)	26-27 March 2018	Turin, Italy	Philips Health care	policymakers, decision makers, authorities, industry,	http://www.promisalute.it/servizi/eventi/cerca_fase03.aspx?ID=2889
23	Special interest group VALUE	29 March 2018	Groningen, the Netherlands	UMCG	researchers, policy makers	
24	Local Workshop	17 April 2018	Odense, Denmark	RSD	Decision makers, Programme Managers and clinical staff	
25	1st Conference on European Projects in the Basque Health System in Integrated Care and Research in Health Services.	25 April 2018	Victoria, Basque Country	Kronik gune, Osakidetza	policymakers, decision makers, authorities, industry	
26	XII EUROPEAN PATIENTS' RIGHTS DAY 2018	23 May 2018	Brussels	Philips	carers, decision makers, patients,	http://www.activcitizenship.net/primo-piano/254-

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
					industry	xii-european-patients-rights-day-2018.html
27	XII International Symposium of AENTDE	24-25 May 2018	Cadiz, Spain	Kronik gune	researchers, clinicians	https://www.entde.com/pages/jornadas/simposiums/xii_simposium/representacion?lang=en
28	ICIC – International Conference for Integrated Care 2018	23-25 May 2018	Utrecht,	Philips Health care, Kronik gune, AQuAS, RSD, UMCG, Optim edis	researchers, clinicians, managers, industry, policy makers	https://integratedcarefoundation.org/events/icic18-18th-international-conference-on-integrated-care-utrecht
29	European Telemedicine Conference	27-29 May 2018	Sitges, Barcelona	Philips Health care	Industry, clinicians, managers	https://www.himsseuropeconference.eu/sitges/2018/about
30	International HPH Conference 2018	6-8 June 2018	Bologna	AQUAS	carers, policymakers, decision makers, authorities, general public, industry	https://www.phconferences.org/bologna2018/program-proceedings/?L=0
31	EHMA 2018	June 20, 2018 – June 22, 2018	Budapest	AQUAS	health managers, health professionals, policy makers, researchers and educators	http://ehma.org/event/ehma-2018-annual-conference-making-happen/

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
32	Local Workshop	28th June 2018		Catalonia	Decision makers, Programme Managers and clinical staff	
Planned:						
33	Multimorbid patient integrate care day.		9 October 2018	Victoria, Basque Country	Kronikguna, Osakidetza	representatives from all local organization (OSIs)
34	WHINN 2018		9-11 October 2018	Odense, Denmark	RSD	https://www.whinn.dk/
35	AAL Forum: AGEING WELL IN THE DIGITAL AGE: A growing community of change makers		26 September 2018	Bilbao, Spain	Philips Healthcare	https://www.aalforum.eu/
36	EUPHA 2018		28 November - 1 December 2018	Ljubljana, Slovenia	tbd	https://epconference.eu/repository/conference/2018/Ljubljana_2018_A-5_card_def.pdf
37	ICIC – International Conference for Integrated Care 2019		1-3 April 2019	San Sebastián, Spain	Optimedis, Aquas	https://integratedcarefoundation.org/events/icic19-19th-international-conference-on-integrated

No.	Conference/event	Date	Location	Partners Involved	Target groups	Link to conferences, events etc.
						-care-san-sebastian-basque-country
38	ACT@Scale 2nd Transferability event + ACT@Scale Final Conference		Spring 2019	San Sebastián, Spain	All partners	To be linked with ICIC19
39	International Family Nursing Conference (IFNA)		13-16 August 2019	Washington DC	RSD	https://internationalfamilynursing.org/

This table makes it evident that ACT@Scale has been present and visible at international, national and local level with events ranging from large international conferences to local workshops.

From D2.3 the stakeholder analysis identified the target groups. These were: carers, policymakers, decision makers, authorities, patients, general public, and industry.

Through the dissemination reporting sheet, the partners have reported which of these target groups have been present at the different conferences and events. Decision makers and policy makers have often been in the audience when ACT@Scale has presented at the mentioned events. These target groups hold decisive power in the process of upscaling new care services and their decisions and recommendations form the basis for new developments in health and care. Presenting ACT@Scale results to these stakeholders is a great opportunity to gain influence on policy areas, which is an objective of the ACT@Scale project.

At several events, care professionals have been present. This is an important target group, because they are the ones who are incremental in the implementation, in which it is important to raise their awareness about the potential benefits of new forms of delivering healthcare.

2.5.2 Publications/articles/scientific articles and appearance in media

During the project's lifetime, a number of publications have been published. Such publications are a great mean to reach various stakeholders, obtain contacts, and get the message across.

Following the specific objectives, ACT@Scale should have made an appearance in the media at least every six months. Looking at the appearances in media and publications below, this objective has been met.

Author(s)	Date published	Title	Where	Link to conferences, events etc.
Cristina Bescós	16 December 2016	El cuidado conectado: desde la sala de espera a la sala de estar	Philips Health care: Share Innovation	http://www.compartinnovacion.philips.es/salud-conectada/articulos/el-cuidado-conectado-desde-la-sala-de-espera-a-la-sala-de-estar
Maureen Rutten-van Mölken	28 June 2017	Common Challenges Faced in EU-funded Projects on Integrated Care for Vulnerable Persons	International Journal of Integrated Care. 2017;17(2)	https://www.ijic.org/articles/10.5334/ijic.3104/
Helen Schonenberg	December 2017	Telehealth and Care Coordination: What we did right and what we did wrong? Experiences on the collaborative methodology	ACT@Scale Website	https://www.act-at-scale.eu/wp-content/uploads/2014/08/ACT@Scale-Telehealth-and-Care-Coordination-Lessons-Learned-WHINN-2017.pdf
AQuAS	28 June 2018	Local workshop: Patient empowerment: Best practices detected and	AQuAS website, twitter and in	

Author(s)	Date published	Title	Where	Link to conferences, events etc.
		health professional's needs	InfoAQ uAS.	
UMCG	24 January 2017	Radio interview ACT@Scale project		http://www.rtvnoord.nl/nieuws/173138/Onderzoeker-UMCG-E-health-is-in-Nederland-nog-beperkt .
Philips Electronics			International Journal of Integrated Care. 2017	https://www.ijic.org/articles/abstract/10.5334/ijic.3387/
Helen Schonenberg , Steffen Pauws, Ioanna Chouvarda, Cristina Bescos, Stan Newman, Josep Roca, Stefan Störk, David Barrett, John Cleland, Andrea Pavlickova, Montse Moharra, Marco Nalin, Maarten Lahr, Esteban de Manuel Keenoy	16 December 2016	What does it take to make integrated care work?	International Journal of Integrated Care. 2016;16(6):A113	https://www.ijic.org/articles/abstract/10.5334/ijic.2661/
Montserrat Moharra , Emili Vela, Ivan Dueñas-Espín, Steffen Pauws, Cristina Bescos, Isaac Cano, Montserrat Cleries, Joan Carlos Contel, Esteban de Manuel Keenoy, Judith Garcia-Aymerich, David Gómez-Cabrero, Rachelle Kaye, Maarten M.H. Lahr, Magí Lluch-Ariet, David Monterde, Joana Mora, Marco Nalin, Andrea	16 December 2016	Health risk assessment and stratification in an integrated care scenario	International Journal of Integrated Care. 2016;16(6):A322.	https://www.ijic.org/articles/abstract/10.5334/ijic.2870/

Author(s)	Date published	Title	Where	Link to conferences, events etc.
Pavlickova, Jordi Piera, Sara Ponce, Sebastià Santaeugenia, Helen Schonenberg, Stefan Störk, Jesper Tegnér, Filip Velickovski, Christoph Westerteicher, Josep Roca				
CHAFEA		18th International Conference on Integrated Care: great participation at Chafea's Implementation Rooms	Chafea news on website	http://ec.europa.eu/chafea/news/news592.html
(Planned) Professor David Barrett, University of Hull	tbd	tbd	tbd	

2.5.3 Exchange and experience with other relevant projects and initiatives

The ACT@Scale project has collaborated with multiple relevant projects and initiatives during its lifetime. The aim of these collaborations has been to exchange knowledge and create synergies between the projects. The list includes:

- Optimity Advisors

- o Optimity Advisors is an initiative that aims to guide organisations in designing and implementing strategies to transform businesses to make them more sustainable and measurable in the pursuit of growth. In today's Digital Age, the organizations that survive and thrive transcend outdated systems and operations, and embrace true transformation (through better design). Optimity Advisors guide that journey. Optimity Advisors and ACT@Scale are both Chafea initiatives working in different areas to achieve different goals. Through this collaboration both initiatives have shared the different expertise and the outcomes and experiences from both projects with the goal of increasing the learning curve. By learning from each other's results and learnings when entering

into collaboration, this leads to the creation of synergies that is rewarding for both initiatives.

– **SCIROCCO**

- ACT@Scale has collaborated with SCIROCCO, which is an EU-funded project focusing on further advancing the Maturity Model into a validated and tested self-assessment tool that will support the regions in successfully scaling up and transferring good practices in integrated care across European regions. The development of the Maturity Model is a key achievement of the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA)'s B3 Action Group on Integrated Care. The conceptual model will provide regions with the tools for assessing their readiness for integrated care. ACT@Scale's partner regions have participated in the online self-assessment and the maturity model have been used to capture the structure of the health system as part of the process-structure-outcomes framework applied within ACT@Scale. This collaboration has created synergies by providing usable outcomes for both projects.

– **SELFIE, SUSTAIN, TOPICS-MDS, ZONMw**

- ACT@Scale has participated in Transferability meetings focusing on outcomes between ACT@Scale and the abovementioned related EU initiatives. These meetings are an initiative of Dutch researchers involved in EU-funded integrated care evaluation projects. The intention of these meetings is to share knowledge and experience, particular in the area of measured outcomes. The discussions have featured project scopes: goals, target population, participating programmes and outcomes. The meetings gave a good overview of the commonalities and differences between the projects, programmes and research topics. In addition, a more elaborate discussion on the challenges of evaluating integrated care in general and our experiences and views on that, took place.

– **EIP on AHA – B3 Action Group**

- ACT@Scale is very active in the EIP on AHA B3 Action group on integrated care. The participation is through the programmes and deployment sites. Furthermore, the ACT@Scale project coordinator Cristina Bescos, Philips Healthcare is an active member of the action group. ACT@Scale has collaborated with the partnerships multiple times during the project's lifetime, in which good practices have been shared with other related initiatives. The coherence between the project and the partnership has led to synergies, both between different initiatives, but also between the members of partnerships.
- At the Conference of Partners of the European Innovation Partnership on Active and Healthy Ageing on 27-28 February 2018 in Brussels WP2 prepared an Infographic, which includes key information about the project, including achievements. The infographic was featured and visible to all the

partners of the EIP on AHA and was part of disseminating the results of the ACT@Scale project. The infographic is put in the appendices section as Appendix

It is important to exploit the possible synergies with other EU funded projects, and other initiatives with similar or complementary fields of interest. This allows for the exchange of knowledge and experiences, and, at the same time, creates a dissemination channel to a large community of potential adopters of the ACT@Scale services and recommendations.

3 Final dissemination phase

This chapter provides a dedicated dissemination plan for the last six months of the project as disseminating and communicating the results and lessons learned from the project and ensuring wide awareness are crucial aspects in order to sustain impact beyond the project lifetime. This phase focuses on disseminating the results and achievements of the project to a broad audience and the chapter is structured around the activities that will take place during the next six months.

3.1 Conferences and events

As mentioned above, ACT@Scale has already 7 planned events and conferences in which partners will present results from the project. These events include presentations related to the overall results and achievements of the project, but also results from the individual programmes presented by the programme managers. These events will have visibility in the form of news items on the website, which will be prepared in advance and through social media: Twitter before, during, and after the event.

EC selection of good practices

The European Commission is preparing to present a collection of good practices in which multiple programmes from the ACT@Scale projects have been selected as part of the 12 good practices for showcasing scaling-up of integrated care. The practises are regional experiences, which in most cases are composed of a strategic approach and one or more programmes strongly linked to the strategy. A final selection will take place end of September and the chosen practices will be showcased in an event in Italy on 12-13 December 2018.

This is a great opportunity for ACT@Scale and if ACT@Scale regions are chosen as good practices in the final selection, there will be high visibility on Twitter and on the website.

Final conference:

To ensure that the project results reach maximum exposure, ACT@Scale aims to host the ACT@Scale Final Conference in combination with the International Conference on Integrated Care 2019 (ICIC19) **1-4 April 2019**. We believe that the project's achievements will fall in line with and support synergies with the content for ICIC19. ACT@Scale has been present at the ICIC conferences during the project lifetime with great success which supports the assumption that the ICIC19 audience will be suitable for dissemination of ACT@Scale results and at the same time provides possibility to reach a broader audience.

We aim to target at least 80 key opinion leaders and European managers for the final ACT@Scale event.

The final conference will provide input for the deliverable D2.5 Final Dissemination Event, which will include a summary of the audience, exposure and output from the conference, and also the actions taken place at the final conference.

Press release:

A press release related to the final conference and the closing of the project will be prepared and published by Philips Healthcare; the coordinators of ACT@Scale. The press release will be developed in the beginning of 2019 and published approx. one week before the final conference: **End of April 2019**.

In addition to the press release, information regarding the final conference will be sent to the group behind the Chafea Newsletter to get maximum exposure of the event and attract a wider audience. This information will be sent to the European Commission **Medio February**.

3.2 Videos

During the dissemination phase, WP2 will prepare short videos of selected members of the ACT@Scale project to sum up lessons learned, recommendations in a vibrant and interactive way. The videos will also make the messages of ACT@Scale more "personal" as there is a person behind the message.

Activities related to the videos:

- The videos will be published on the website and generate high visibility through social media; Twitter.
- As the videos will be launched on Twitter, the videos are short (approx. 2 minutes) but with a clear message.
- The videos will feature ACT@Scale members answering 2-3 questions.
- The questions will appear as text in the video before the person answers the question.
- The name of the person, title, and role in project will be stated as text in the bottom-left corner when the person is speaking.

- There will be two rounds of videos to capture two different messages.
- In both rounds, the person, who is to be filmed, will have received the questions in advance.
- The focus of round 1 will be the content of the project's work packages, and the focus of round 2 will be outcomes for the project's programmes.
- In both rounds, the person to be filmed will have the opportunity to approve the video before it is launched on the website and social media.

1st round:

The 1st round will feature the work package leaders of:

- WP3: Evaluation
- WP4: Transfer of Good Practices & Data Analytics
- WP5: Stakeholder and Change Management
- WP6: Service Selection
- WP7: Sustainability and Business Models
- WP8: Citizen Empowerment

The specific questions in round one are:

- WP3:
 - o *What are the key features of the evaluation in ACT@Scale?*
 - o *Can you briefly provide highlights on the preliminary results?*
- WP4:
 - o *What are the key features of data analytics and the transfer of good practices in ACT@Scale?*
 - o *Can you briefly provide highlights on the preliminary results?*
- WP5-WP8:
 - o *What are the key features of the driver: [the work package driver] in ACT@Scale?*
 - o *Why is [the work package driver] an important aspect in scaling integrated care?*
 - o *Can you briefly provide highlights on the preliminary results?*

The 1st round will also include interviews with two specialist advisors and the questions for them are:

- *How is ACT@Scale relevant for today's challenges in healthcare?*
- *In your opinion, why is it important to study the process of scaling?*

The first round of videos will be filmed during the General Assembly on 2-3 October 2018, and will be launched **Early December 2018**.

We plan one round of feedback for the participants to approve the videos. The round of feedback will take place **Medio November**.

2nd round

The 2nd round of videos will be filmed on the last General Assembly in March 2019. This round will feature the programme managers and will be launched **Mid-/End-March 2019**.

The specific questions in round two are:

- *What is the most important outcome for your programme?*
- *What do you think is/are the key outcome/s of ACT@Scale?*

The 2nd round will also include an interview with the coordinator of ACT@Scale and the questions are:

- *How is ACT@Scale relevant for today's challenges in healthcare?*
- *What do you think is/are the key outcome/s of ACT@Scale?*

We plan one round of feedback for the participants to approve the videos. The round of feedback will take place **Medio March** just before the project is finalised.

3.3 ACT@Scale Handbook

As a final outcome of the ACT@Scale project, a handbook will be developed and published. The handbook draws on experience from the cookbook developed in the predecessor to ACT@Scale, the ACT programme⁴. The handbook is a means to gather all the important results and achievements of the ACT@Scale project. As ACT@Scale aims to identify good practices and make them transferable to other settings, a handbook should serve as a manual for other regions aiming to upscale integrated care services. Being a manual, the book should be “handy” in mind and in hand and therefore, the size will be A5 with a spiral back, which makes it easy to turn to the desired page.

The content of the ACT@Scale handbook will include the experiences gathered and achievements reached by the project. Furthermore, recommendations based on project results and identified good practices will be a key feature in the handbook.

The handbook will be divided into 4 chapters.

1. The first chapter will present the scope of the project. This will include the challenge the project seeks to address and purpose of the project.
2. The second chapter will present the methodological framework of the project, which will include:

⁴ https://www.act-programme.eu/sites/all/themes/act/files/ACT_Cookbook_final.pdf

- a. The collaborative methodology of the Plan-Do-Study-Act process documented by WP3.
- b. The evaluation framework developed and applied by WP4.
3. The third chapter will focus on the deployment recommendations in relation to the four drivers that were identified as key elements to be addressed for a successful upscaling process:
 - a. Stakeholder and change management
 - b. Service selection
 - c. Sustainability and business models
 - d. Citizen empowerment
4. The last chapter of the handbook will present the identified good practices including the tips provided by the ACT@Scale programmes.
WP2 will prepare a template for the wanted information, to ensure alignment in the information provided by each region.

The content for the handbook will partly be collected from the deliverables of the respective WP's and from input provided by the partners. The deadlines for the relevant deliverables are 1 January 2019. However, the structure for the handbook will be provided **Medio December 2018** to initiate the collection of input.

To ensure the best possible result and ownership from the partners, there will be two iterations for feedback on the handbook.

- The first version of the handbook will be ready **Medio January** and sent to partners
 - o Deadline for feedback: one week after
- The second version of the handbook will be ready **1 February** and sent to partners
 - o Deadline for feedback: one week after
- Coordinator sign off: **Medio February**.
- The handbook will be ready for print **Medio February 2019**.
- The handbook will be launched **1 March 2019**.

WP2 will print 150 copies, where 80 will be distributed at the Final conference.

The handbook will also serve as the final position paper to be completed as part of deliverable D2.6 Final Position Paper.

3.4 Website

In the final dissemination phase, the website will create strong visibility. The dissemination activities planned for the website are the following:

- News items of the planned attendance at conferences and events will be prepared and put on the website (**Ongoing effort**).

- The videos will play an important role in attracting visitors to the website. The videos will be launched on Twitter where a link to the website will be provided along with the video in the tweet (**December 2018 and March 2019**).
- A new page “Recommendations” has been developed (**September 2018**) and will be updated to host more content. Currently, the page includes the lessons learned from the Transferability Event, *Telehealth and Care Coordination: What we did right and what we did wrong? Experiences on the collaborative methodology* at WHINN 2017, Odense. In the coming months (**Final deadline March 2019**), the page will be expanded to include the part of the handbook related to recommendations (chapter 3 and 4).
- The remaining content of the handbook will be included on a new planned page called “Insights” which will host the videos as well as the methodological framework presenting the output from the PDSA cycles and the Evaluation framework (chapter 2). The “Insights” page will be launched together with the videos **early December 2018**.

3.5 Additional dissemination activities

Book Chapter

Currently, the ACT@Scale project is working on appointing a group to write a contribution for the book: *How to deliver Integrated Care. A Guidebook for Managers*. The editorial team led by Henk Nies and Axel Kaehne is inviting expressions of interests⁵ from academics and other interested parties to contribute to an edited book on the implementation of integrated care. The editorial team is looking for contributing team comprising academics and practitioners of integrated care solutions to ensure that contributions are relevant and topical to programme managers, programme planners, and commissioners.

ACT@Scale plans to contribute in the form of a book chapter, utilising and leveraging the competences and experiences of the project partners. The contribution from ACT@Scale will be a shared effort from the consortium.

The deadline for expressions of interest is 1 October 2018 but an extension has been requested to ensure alignment of the consortium.

Layman’s version of the final report

WP2 will prepare a document that present project results in a more understandable manner. This document should target the wider public, to make sure this segment also

⁵ https://integratedcarefoundation.org/wp-content/uploads/2018/07/Call-for-Expression-of-Interest_Book-Integrated-Care_Kaehne-Nies-amended-003.pdf

has access and benefits from the project results. The document will be prepared in parallel with the final report and as the report targets the general public, it will be written in “easy” language and focus more on the overall results and making the scientific results more accessible to layman. This document have deadline **1 March 2019**.

4 Conclusion

The D2.4 deliverable contains a summary of all publications and communications carried out during the project and a plan for the final dissemination phase, which is the last six months of the project.

The purpose of this document has been to explain how the dissemination and communication strategy has been applied throughout the project, and how this strategy has responded to the work package’s objectives.

The dissemination achievements of the ACT@Scale project include:

- Social media
- ACT@Scale leaflet
- Website
- Participation in conferences, events
- Publications
- Collaborations with relevant initiatives

4.1 Dissemination achievements

Twitter was chosen as the social media channel due to its dynamic and vibrant qualities and because it is widely used for professional purposes. The specific objective, in terms of social media coverage, was to make a minimum of two tweets per week. Producing 583 tweets during its lifetime, ACT@Scale has reached this objective and has used the Twitter profile to engage and inform key external stakeholders of project activities and results.

The leaflet has been altered and now includes the consortium changes and the involvement of new programmes. In addition, the updated leaflet includes the project’s achievements halfway.

The website has been regularly updated with project results and news items. Changes, as the implementation of new pages including achievements and recommendations, have been implemented to ensure that the website is updated with the most recent information from the project. Furthermore, using Google Analytics, the number of visitors and their location has been presented, including the most visited pages and the referral sites. The website has been proven to be a successful tool for dissemination to a wide audience.

The consortium of ACT@Scale has participated in numerous conferences and events, reaching a total of 32 up until now, with 7 planned events taking place in the fall 2018 and 2019. The events range from large international conferences to local workshops including key target stakeholders as audience. The participation in conferences and events has supported and will support the successful dissemination of ACT@Scale activities and outcomes.

To ensure that the project has high visibility in terms of scientific and public awareness of its deployment, ACT@Scale has published articles and appeared in the media through other websites, journals and radio shows.

To communicate and create synergies with other similar or complementary projects and initiatives, ACT@Scale has collaborated with relevant initiatives as the Optimity Advisors, EIP on AHA B3 Action Group, and a number of relevant EU projects, which has allowed for the exchange of knowledge and experiences.

4.2 Final dissemination phase

The final dissemination phase has been outlined and includes:

- Participation in conferences and events, including ACT@Scale final conference
- Videos
- ACT@Scale handbook
- Website
- Additional dissemination activities

ACT@Scale has a number of dissemination activities planned during the next six months. This involves participation in a number of conferences and events, including the final conference, which ACT@Scale aims to host in combination with the International Conference on Integrated Care 2019, to ensure that the project results have maximum exposure. In relation to the final conference, a press release will be published by Philips and information will be sent to the group behind the Chafea newsletter to attract a wider audience.

Furthermore, dissemination activities include the development of short videos of selected members of the ACT@Scale project to sum up lessons learned, recommendations in a vibrant and interactive way, which will be launched through Twitter and put on the website. The videos will be launched in two rounds, where the first round focuses on the content of the work packages and the second focuses on the key outcome for the project's programmes.

As one of the final outcomes of the ACT@Scale project, a handbook will be developed and published as a means to gather all the important results and achievements of the ACT@Scale project. As ACT@Scale aims to identify good practices and make them

transferable to other settings, a handbook will serve as a manual for other regions aiming to upscale integrated care services.

Additional dissemination activities include a contribution to a book named: *How to deliver Integrated Care. A Guidebook for Managers*. ACT@Scale plans to contribute by utilising and leveraging the competences and experiences of the project partners.

This deliverable makes it evident that the ACT@Scale partnership works effectively to disseminate and spread the results of the project in order to improve the knowledge about the implementation and upscaling of care coordination and telehealth services.

5 Appendices

5.1 Appendix A: Updated ACT@Scale leaflet

Front and back side:



The inside pages:

About the project

Implementation of innovative healthcare solutions is on the agenda in regions across Europe. ACT@Scale taps into experiences from successful real life deployment projects in 6 European regions and moves beyond condition-specific areas by focusing on how innovative healthcare solutions are scaled up successfully on an organisational level. By using indicators to assess real world services and linking drivers and outcomes, ACT@Scale provides guidance on changing care service delivery in European regions and beyond.

ACT@Scale is a partnership of innovative European healthcare regions, industry, and academia with potential to transform cure and care services from pilots to scaled up, routine care practice for the benefit of the European population. ACT@Scale consolidates identified best practice Care Coordination and Telehealth concepts that can be leveraged by the participating regions but also transferred to other regions.

Goals & methods

The overall goal for ACT@Scale is to identify, transfer, and scale up operational Care Coordination and Telehealth good practices with the target of reaching a total of 75,000 care recipients across regions and programmes in multiple European countries.

ACT@Scale activities are built around key methods and aspects needed in order to reach the project goal. At the same time, the activities reflect the areas that need to be addressed in an upscaling process:

- Stakeholder and change management
- Service selection
- Sustainability and business models
- Citizen empowerment

Achievements halfway

In the project, the exploration of the key areas will show how to ensure the optimal upscaling process of technology and services across 6 regions in 5 EU countries. A holistic assessment will be performed based on an agreed minimum dataset of indicators supported by local and centralised data management tools, i.e. an Evaluation Engine.

One year still remains of ACT@Scale but halfway through the project life time, the following outputs have been generated:

- Maps of maturity for the 4 key areas of the programmes
- Evaluation framework and minimum dataset, condensing the data collection approach and dependencies
- Collaborative methodology - Plan Do Study Act (PDSA) - 1st applied cycle completed

Services

ACT@Scale is targeting different good practices in the Basque Country, Catalonia, Kinzigtal, Northern Netherlands, Scotland, and Southern Denmark, who are all in the process of implementing novel Care Coordination & Telehealth services and processes on a larger scale

The diversity in the services is unique and will generate knowledge about upscaling across programmes and health issues.

Region	Programme	Target Group
Basque Country	Multimorbid Population Integrated Intervention Programme	Complex multimorbid patients
	Telemonitoring services for Congestive Heart failure	Heart failure patients
Catalonia	Healthcare support programmes for nursing homes	Elderly living in institutionalised homes
	The Chronic Patient Programme - Badalona Serveis Assistencials	Complex chronic and frail patients
	Support of complex case management - AISBE	Complex patients that require linking tertiary care with the community
	Collaborative self-management services promoting healthy lifestyles: physical activity - AISBE	Chronic patients in need of physical activity promotion
Kinzigtal	Integrated care for subacute and frail older adults - PSPV	Frail elderly patients
	Personalised Health Coaching	Risk patients with e.g. chronic diseases, multimorbidity
	Personalised physical training and exercise	Risk patients e.g. with obesity, osteoporosis, and need of muscular skeletal strengthening
Northern Netherlands - Groningen	Asthma / COPD Telehealth service	Patients suffering from asthma and / or COPD
	Embrace	Citizens above the age of 75
Scotland	Heart Failure Programme	Complex heart failure patients
	Diabetes self-management - online records access	Diabetes patients
South Denmark	Diabetes telemonitoring services - foot screening	Diabetes patients / private podiatrists
	Video Consultation for relatives	Citizens with hematologic diseases and their relatives

ACT@Scale supports the EIPonAHA initiatives and delivers input and knowledge to the partnership. Project results will facilitate decision-making at EU policy level, and show payers, practitioners, and providers how patient care can be improved in light of an ageing society and pressured care systems under restricted budgets.

5.2 Appendix B: Dissemination reporting sheet

ACT@Scale dissemination activities - reporting

Consortium overall

Presentations of project (conferences, events, visits to region by external guests etc)									
No.	Partner regions	Partner organizations	When	What	Where	Audience/participants approx number	Target group: carers, policymakers, decision makers, authorities, patients, general public, industry, other?	Link to conferences, events etc.	Graphic material (pictures, posters, power point presentations, etc.)
1	All partners	All partners	Every 6 months	Kick-off meeting, General Assemblies	Luxembourg, Thessaloniki, Groningen, Odense, Bilbao (each region will host one session)				
2	Northern	UMCG	24-03-2016	Dutch Cardiology Conference	Amersfoort, the	50	clinicians, decision		

D 2.4: Summary of publications and communications

	Netherlands				Netherlands		makers, industry	
3	Multiple partners		23-25 May 2016	ICIC – International Conference for Integrated Care 2016	Barcelona		researchers, clinicians, managers, industry, policy makers	https://integratedcarefoundation.org/events/icic16-16th-international-conference-integrated-care-barcelona
4		Philips Healthcare	8-10 June 2016	eHealth Week	Amsterdam		carers, policymakers, decision makers, authorities, patients, general public, industry	http://www.ehealthweek.org/ehome/128630/eHealth-week-2016/
5	Basque Country	Kronikgune	16-17th June 2016	eHealth European Congress	San Sebastian, Spain			https://ehealthdonostia.com/
6	Basque Country	Kronikgune	27 October 2016	Signo - XIII Conference of Management and Evaluation in Health	Ciudad Real, Spain		policymakers, decision makers, authorities,	http://www.fundacionsigno.com/archivos/20161017090133.pdf
7		Philips Healthcare	02-11-2016	B3 Action Group Meeting	Brussels		policymakers, decision makers, authorities,	
8		Philips Healthcare	9 November 2016	Preconference event to the European Public Health Conference	Vienna, Austria			https://ephconference.eu/
9	Northern	UMCG	25-11-2016	Dutch Federation of University Medical	Utrecht, the	300	researchers, clinicians,	http://www.nfu.nl/nieuws-brief/meet-greet-

D 2.4: Summary of publications and communications



	Netherlands			Centers annual conference	Netherlands		authorities, policy makers, decision makers	citrienfonds	
10	Northern Netherlands	UMCG	25-01-2017	Dutch national e-health week	Groningen, the Netherlands	150	researchers, clinicians, nurses, managers, policy makers, educators	https://www.health-holland.com/events/2017/01/ehealth-week	
11	Northern Netherlands	UMCG	26-01-2017	ATOS e-Health cafe	Amstelveen, the Netherlands	50	managers, industry, policy makers, authorities, decision makers		
12	Northern Netherlands	UMCG	20-24 February 2017	HIMSS, Dutch roundtable discussions	Orlando, US	300	industry, authorities, decision makers, policy makers	http://www.himssdutchealthexchange.org/ehome/182472/473769/	
13		Philips Electronics	April 11 2017	Transferability meeting between ACT@Scale and other European Projects	Netherlands				
14	Northern Ireland, Northern Netherlands	Kronikgune, AQUAS, NIRE, UMCG, Philips Electronics, Osakidetza,	8-10 May 2017	ICIC – International Conference for Integrated Care 2017	Dublin, Ireland		researchers, clinicians, managers, industry, policy makers	https://integratedcarefoundation.org/events/icic17-17th-international-conference-on-integrated-care-dublin	

D 2.4: Summary of publications and communications



	Catalonia, Basque Country	Philips Healthcare						
15	All partners	All partners	23 May 2017	EIP AHA B3 Webinar on European Integrated Care practices and Evaluation Framework	Webinar EIP AHA		<p>policy makers, decision makers, authorities, general public, industry,</p> <p>https://www.eventbrite.co.uk/e/webinar-advancing-care-coordination-and-telehealth-at-scale-eip-b3-webinar-tickets-34617343406</p>	
16	Basque Country	Kronikgune	15-16 June 2017	eHealth European Congress	San Sebastian, Spain		<p>decision makers, authorities, patients, general public, industry</p> <p>https://ehealthdonostia.com/comunicaciones/</p>	
17	All partners	All partners	10-12 October 2017	WHINN: Week of Health and Innovation (Cluster Meeting on Non-Communicable diseases) + (ACT@Scale transferability conference)	Odense, Denmark		<p>policy makers, decision makers, authorities, industry</p> <p>http://www.whinn.dk/</p>	
18	Basque Country	Philips Healthcare, Kronikgune	15-nov-17	EIPonAHA B3 action group meeting	Bruxelles		<p>members of the B3 Action Group</p> <p>http://www.scirocco-project.eu/events-calendar/category/scirocco-event/</p>	
19	Basque Country	Philips Healthcare, Kronikgune, RSD	21-nov-17	SCIROCCO conference	Glasgow, Scotland		<p>Public policy-makers, healthcare professionals,</p> <p>https://www.scirocco-project.eu/event/meeting-the-challenge-of-ageing-putting-the-citizens-at-the-heart-of-integrated-care-</p>	

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							representatives of social care, housing and voluntary sectors, academia and end users	in-europe/	
20	Basque Country	Philips Healthcare, Kronikgune	27-28 February 2018	EIPonAHA Conference of Partners	Brussels		policy makers, decision makers, authorities, industry	https://ec.europa.eu/eip/ageing/sites/eipaha/files/events/20180222_cop_programme_for_publication_1.pdf	
21	Basque Country	Kronikgune	1-2 March 2018	X National Congress on Multimorbid Patient Healthcare	Zaragoza, Spain		health managers, health professionals, policy makers, researchers	http://www.congresocronicos.org/	
22		Philips healthcare	26-27 March 2018	Integrated services: organizational healthcare models in the framework of chronic diseases (PROMIS)	Turin		policy makers, decision makers, authorities, industry,	http://www.promisalute.it/servizi/eventi/cerca_fase03.aspx?ID=2889	
23	Northern Netherlands	UMCG	29-03-2018	Special interest group VALUE	Groningen, the Netherlands	30	researchers, policy makers		
24	RSD	RSD	17-apr-18	Local Workshop	Odense		Decision makers, Programme Managers and clinical		

D 2.4: Summary of publications and communications



						staff		
25	Basque Country	Kronikgune, Osakidetza	25-apr-18	1st Conference on European Projects in the Basque Health System in Integrated Care and Research in Health Services.	Victoria, Basque Country	policy makers, decision makers, authorities, industry		
26		Philips	May 23, 2018	XII EUROPEAN PATIENTS' RIGHTS DAY 2018	Brussels	carers, decision makers, patients, industry	http://www.activecitizenship.net/primopiano/254-xii-european-patients-rights-day-2018.html	
27	Basque Country	Kronikgune	24-25th May 2018	XII International Symposium of AENTDE	Cadiz, Spain	researchers, clinicians	https://www.aentde.com/pages/jornadas/simposiums/xii_simposium/presentacion?lang=en	
28	Multiple partners		23-25 May 2018	ICIC – International Conference for Integrated Care 2018	Utrecht,	researchers, clinicians, managers, industry, policy makers	https://integratedcarefoundation.org/events/icic18-18th-international-conference-on-integrated-care-utrecht	
29		Philips healthcare	27-29 May 2018	European Telemedicine Conference	Sitges, Barcelona		https://www.himsseuropeconference.eu/sitges/2018/about-european-telemedicine-conference	
30	Catalonia	AQUAS	June 6-8 2018	International HPH Conference 2018	Bologna	carers, policy makers, decision makers, authorities, general public, industry	https://www.hphconferences.org/bologna2018/program-proceedings/?L=0	CAT: In dropbox

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31	Catalonia, Basque Country	AQUAS, Kronikgune	June 20, 2018 - June 22, 2018	EHMA 2018	Budapest	health managers, health professionals, policy makers, researchers and educators	http://ehma.org/event/ehma-2018-annual-conference-making-happen/	CAT: In dropbox
32	CAT	CAT	28th June 2018	Local Workshop		Decision makers, Programme Managers and clinical staff		
33	Basque Country	Kronikgune, Osakidetza	9 October 2018	Multimorbid patient integrate care day.	Victoria, Basque Country	representatives from all local organization (OSIs)		
34	RSD	RSD	9-11 October 2018	WHINN 2018	Odense	policymakers, decision makers, authorities, industry		
35	All partners	All partners	Fall 2018	ACT@Scale 2nd transferability event	tbd			
36			28 November - 1 December 2018	EUPHA 2018	Ljubljana, Slovenia		https://ephconference.eu/repository/conference/2018/Ljubljana_2018_A-5_card_def.pdf	
37	All partner	All partners	Spring 2019	ACT@Scale Final Conference	tbd			

D 2.4: Summary of publications and communications

	s							
38	Catalonia	Optimedis, Aquas	1-3 April 2019	ICIC – International Conference for Integrated Care 2019	San Sebastián, Spain		researchers, clinicians, managers, industry, policy makers	
39	RSD	RSD	13-16 August 2019	International Family Nursing Conference (IFNA) - (Preparing abstract)	Washington DC			

5.3 Appendix C: ACT@Scale Infographic

ACT@Scale

About the project

ACT@Scale taps into experiments from successful real life deployment projects in 5 European regions and makes beyond-visibility specific areas by focusing on how successful real life solutions are scaled up successfully on an organisational level.

By using innovations in digital and social services and linking citizens and businesses, ACT@Scale will provide guidance on changing real-world delivery in European regions and beyond.

Experiences in DG4H → ACT → ACT@Scale

Goals & methods

Identify, monitor and build up existing and operational Care Coordination and Telehealth pilot projects with the target of reaching a total of 75,000 user (patients) across regions and pilot projects in multiple European countries.

ACT@Scale activities are built around key methods and inputs needed to scale the project goal:

- Stakeholder and change management
- Service definition
- Sustainability and business models
- Change implementation

Achievements

The project has purchased the following outputs:

- 1) **Physical reality** in the different areas of the program, using an agreed standard and visual representation. These maps have already been published on the EIP (AMA-E) group for other regions to replicate their successful case scenarios (October May 2017) and in collaboration with other EU projects.
- 2) **Evaluation Framework and evidence database**, providing the view collection approach and definitions (T4) framework has been published in several EU forums, and in alignment with several international projects (ICC 2017).
- 3) **PCMA Methodology** with a first collaborative cycle completed. The methodology and first lessons learned will be the basis of the sustainability plans developed by ACT@Scale in collaboration with the WIMMERSI pilot in October (2017). This methodology will be applied in 18 CRODAS 6. [Read more about WIMMERSI](#)

The project supports the following activities and services: **Healthcare**, **Education**, **Business**, **Government**, **Healthcare**, **Education**, **Business**, **Government**.

ACT@Scale results papers will be available for download and will be a total of 4 papers including all from European regions.

Scaling Up Care Coordination and Telehealth deployment across European regions

