

External Evaluation

Interim Report

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1 Scope of the Interim External Evaluation.

The interim external evaluation of the “**H-CARE: “Launching of Sector Skills Alliance for Training & Apprenticeship of Health Care and Food Supplements Salespersons”**” project is a formative evaluation focusing on the level of achievement of project activities and products/outputs, compared to the foreseen and contractually agreed aims, objectives and results. The evaluation will further examine the roles and contributions of individual partners in achieving the project goals. Finally, the evaluation will consider, to what extent, the partnership as a whole has managed and communicated with stakeholders on a national and European-level and upon the potential for mainstreaming, multiplication and sustainability of the end project results.

All of the above rely primarily upon quantitative approaches (data collection, data analysis) although the interim external evaluation report also includes qualitative reflections based upon observations of and discussions with project partners and upon the perceived success of the project in achieving the goals of the Leonardo da Vinci programme and the priorities of the related Leonardo da Vinci Call for Proposals.

At no stage does the evaluation attempt to measure the impact or effectiveness of the project from the perspective of identified target groups or sectors.

Findings from the evaluation exercise, presented in this interim external evaluation report, expect to support all project partners when considering future, similar exercises (projects) and to provide recommendations with regard to valorisation (mainstreaming and multiplication) and potential sustainability of the developed products/results beyond the lifetime of the current project.

The interim external evaluation considered the following three questions:

- WHAT activities took place (coherence between activities undertaken throughout the project lifetime and those foreseen and contractually agreed)
- WHAT products/results were developed and produced by the project (coherence between products/results actually achieved by the project and those foreseen and contractually agreed)
- WHICH organisations were actively involved in the project (in addition to project partners,

WHAT stakeholders were involved, WHEN and HOW)

Results of the interim evaluation exercise are presented in the current report, and reflect the feedback received from all partners, apart from P2 who did not provide feedback.

2 Project background

This chapter gives a short overview of the aims and objectives of the project, as well the main outcomes of the projects as can be found in the contract.

2.1 Summary

As mentioned in the proposal:

The project will take up the problem of the shortage of skilled professionals in the specific area of trade with medical assistive technologies and devices and food supplement at European level. It will analyse the training standards in the field of trade with medical assistive technologies and devices and food supplement professions in the participating European countries. It will provide national qualification descriptions (by learning outcomes) and will build them on “Integrated Competencies Framework For Public Health Workforce Development” (promoted on 20.12.2011) and with EQF, so that the existing qualifications in this field will become more transparent and comparable. Thus, the employability of professionals in trade with medical assistive technologies and devices and food supplement will be improved across Europe and their professional mobility will be facilitated.

Furthermore, the project partners will provide suggestions and will develop training modules in the field of trade with medical assistive technologies and devices and food supplement. This will improve the training quality of VET in this sector.

This project is funded by the Leonardo da Vinci Programme of the European Commission, under the supervision of the Turkish National Agency.

2.2 Project duration

The project has a 2 ½ -year duration, and runs from the 1st of January 2014 till the 30th June 2016.

2.3 Target groups

The target groups of this proposal are:

- Unemployed graduate adults (18+) who are seeking employment in the Health Care and Food Supplements sectors
- Current employees at aforementioned sectors who would like to increase their sales skills and competitiveness
- VET trainers and VET training centres

- Trade companies (SMEs) in the field of Health Care

2.4 Aims & Objectives

The **project aims** to provide an innovative and practically oriented training curriculum for Health sector stakeholders, who offer services in assistive technologies, medical devices and food supplements. The project will introduce **training on Health care and food supplements salespersons**, through VET blended learning **curriculum** that embraces the use of a **wide range of training approaches, such as e-learning** (by WCAG 2.0 SCORM platform), **group work and apprenticeship**, which will bring the **acquired skills and knowledge into the tangible practice**. This novel way of cross-sector collaboration needs to ensure that the learner will be **able to gain competences and skills** in a way that will be beneficial for both: for the learner and clients, who in a short term period will take advantages of high quality services. The learners can have direct access to training material even when being on the job. At the same time by using the newly developed curriculum of this project, the employers in health and food supplement sector will save time and financial resources.

The project concrete objectives are:

- To create a specific **H-CARE VET curriculum** taking into account individual needs of employers, salespersons and clients in the **Health Care sector**:
 - **Customisation** (TR, BG, AT, BE, RO) of the curriculum and nationally adapt it;
 - Production of the training materials as both paper versions and **exchangeable learning modules (SCORM compliant learning courses)** based on recognised and validated learning outcomes through ECVET implementation
- To provide free of charge blended training, based on specially designed training modules:
 - M1. Health Care Introduction & Health prevention guidelines;
 - M2. Trading with medical devices (MD), Assistive technologies (AT) and food supplements (FS)
 - M3. Communication & Work with disabled customers;
 - M4. Sales management skills;
 - M5. Entrepreneurship skills;
 - M6. E-commerce (FS, AT & MD);
 - M7. Apprenticeship.

The modules will be elaborated by sector organizations, which possess both: theoretical knowledge and market skills to guarantee that the content is useful and fully practically oriented.

- To reduce the effect of economic crises by development of “a new skills for a new jobs” in one of a most stable sector, which needs high qualified staff to continue its growth;
- To offer prequalification of unemployed into a new non-existing in Europe job profile “**Health Care and food supplements salesperson**”
- To set up the **occupational core profile for: “Health Care and food supplements salesperson”**
- To launch an apprenticeship programme in **Health sector**, based on common procedures and quality assurance standards, applied in each participated country (TR, BG, AT, BE, RO)

2.5 Main outputs

Tangible outcomes of the project will be:

Result	Language	Medium	When
1.1 Communication strategy	EN	Report	M3
1.2 IPR agreement	EN	Other	M19
1.3 Project steering group minutes	EN	Report	After every meeting
2.1 Survey questionnaire	EN, TR, BG, RO, DE	Other	M2
2.2 Consolidated survey findings	EN, TR, BG, RO, DE	Report	M6
3.1 Development of the H-CARE curriculum	EN, TR, BG, RO, DE	Service/Product	M12
3.2 Set up of the Open distance learning platform	EN, TR, BG, RO, DE	Service/Product	M9
4.1 H-CARE VET training modules	EN, TR, BG, RO, DE	Service/Product	M21
4.2 H-CARE EQAVET tool	EN, TR, BG, RO, DE	Service/Product	M20
5.1 Occupational core profile of “Health Care and Food Supplement Salesperson”	EN, TR, BG, RO, DE	Service/Product	M21
6.1 Consolidated Piloting Report	EN	Report	M29
6.2 Evaluation materials - Observational Checklists, User Questionnaire / Interviews	EN, TR, BG, RO, DE	Other	M22
7.1 Quality strategy	EN	Report	M3
7.2 External evaluation report -interim & final	EN	Report	M16 / M30
7.3 Financial Auditors' Report	EN	Report	M30
8.1 Dissemination strategy	EN	Report	M1
8.2 Project website	EN, TR, BG, RO, DE	Service/Product	M2

Result	Language	Medium	When
8.3 Production and distribution of dissemination materials	EN, TR, BG, RO, DE	Service/Product	M5 / M28
8.4 Final EU Conference in Brussels	EN	Event	M29
9.1 Exploitation strategy	EN	Report	M20

Table 1: Project results

2.6 Partnership

In order to improve the readability, the partners within the H-CARE partnership are referred to as P1, P2, ..., Pn within this report. The table below associates the name of the organisation with a specific number. The original P3 as mentioned in the proposal left the consortium and was replaced by a new Romanian partner which also took over all the responsibilities.

No.	Country Code	Name Of Organisation
P1	TR	Istanbul Education Authority - Lifelong Learning Department
P2	BE	European Medical Association
P3	RO	"Grigore T. Popa" University of Medicine and Pharmacy Technical University "Gheorghe Asachi", Romania
P4	AUT	BFI Institute of Vocational Education
P5	BG	National Agency for Vocational Education and Training
P6	BG	ZGURA-M LTD.

Table 2: H-CARE partnership

3 *Elaboration of Evaluation tools and Establishment of Evaluation Methodology*

After the tender procedure for the recruitment of an external evaluator that was undertaken by P1 in January 2014, Mr. Karel Van Isacker was selected. He attended the Kick-off meeting in Istanbul (Turkey) and the Third Transnational meeting in Sofia (Bulgaria) and presented the following outline of the evaluation methodology which will be used throughout the project life cycle:

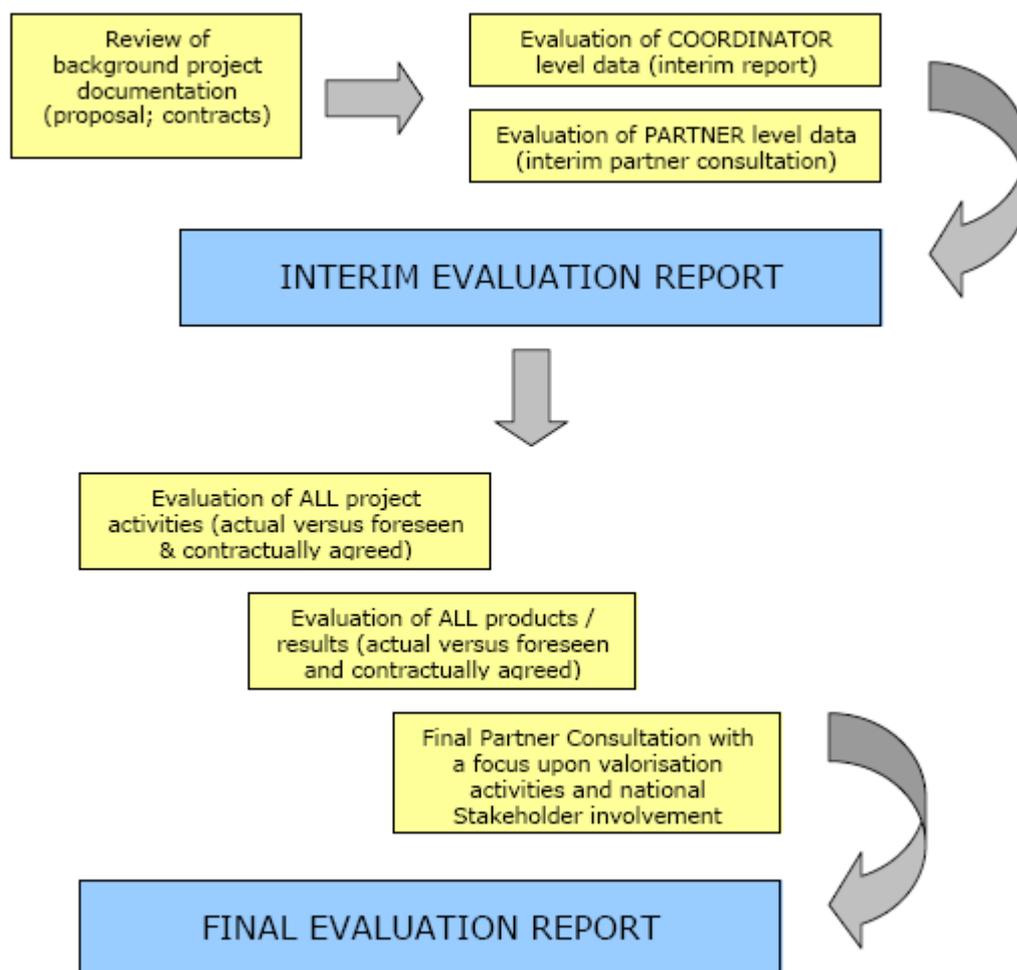


Figure 1: Outline of Methodology

4 Project activities and achievements

The role of the partners in the project partnership is for most partners involved very clear, as is reflected in the collected feedback from each partner, related to each work package. However the intensity with which they are committed is not always the same (see later in the reporting). The latter seems to be connected to a lack of understanding of the rules that apply under the LLP program. The different work packages (WPs) were revised after the kick-off meeting, and defined the involvement of the different partners in the various WPs as follows:

Work Package	Duration	Start	End	Involved Partners
WP1 - PROJECT SET-UP AND MANAGEMENT	30 months	M1	M30	P1 - leader. All partners are involved
WP2 - RESEARCH AND NEED ANALYSIS	6 months	M1	M6	P4 - leader. All partners are involved
WP3 - DEVELOPMENT OF CURRICULUM OF "HEALTH CARE AND FOOD SUPPLEMENT SALESPERSON"	6 months	M7	M12	P3 - leader. All partners are involved
WP4- CREATION OF MODULE'S CONTENT	10 months	M12	M21	P1 - leader. All partners are involved
WP5 – CREATION OF JOB CORE PROFILE OF "HEALTH CARE AND FOOD SUPPLEMENT SALESPERSON"	4 months	M18	M21	P5 - leader. All partners are involved
WP6 – PILOTING	8 months	M22	M29	P6 - leader. All partners are involved
WP7 – QUALITY ASSURANCE & EVALUATION	30 months	M1	M30	P6 - leader. All partners are involved
WP8- DISSEMINATION	30 months	M1	M30	P2 - leader. All partners are involved
WP9- EXPLOITATION	12 months	M19	M30	P5 - leader. All partners are involved

Table 3: Work packages

4.1 Meetings

A total of 3 Transnational Partner Meetings took place during the first half of the project in Istanbul, Turkey (20-21 February 2014), in Vienna, Austria (26-27 June 2014) and in Sofia, Bulgaria (28-29 January 2015). Partner meetings were managed by the Contractor (P1).

A detailed feedback on the satisfaction with the meetings follows later on.

It was agreed that the fourth partners meeting will be held in Bucharest, Romania – 29-30 September 2015 (working days), and the final meeting will be held on 26 May 2016 (working day) in Brussels, Belgium in coincidence with the final EU conference of the project which will be held on 27 May 2016.

Next we assess the progress in each WP against the set deadlines and the identifiable results.

4.2 Project Set-Up and Management (WP1)

4.2.1 Objectives

- To introduce solid management structures and effective coordination and communication among partners
- To ensure that the project is established on a robust and secure organisational structure with clearly defined management functions.
- To establish rigorous systems for activity and financial monitoring.
- To ensure a clear understanding by all partners of their specific roles and responsibilities in the work plan and of the timing of detailed tasks.
- To make best use of a full range of internal communication processes to ensure effective communication within the partnership, including a collaborative environment.

4.2.2 Tasks

Type of task	Status
Formalization of the project teams.	Done by all partners
Finalisation of work schedule, communication strategy.	Done
Establishment of online communication tool for sharing files, setting up a project calendar, while also a dedicated mailing list will be established from the very beginning of the project.	Done at beginning of project

Type of task	Status
Establishment of partners' feedback tools and deadlines.	Done
Development of effective financial monitoring mechanisms.	Done and ongoing
Setting up of the project steering board (2 persons per partner who should attend all partners meetings).	Done, although not all partners come with 2 representatives.
Setting up of national advisory boards, 1 per country meeting 4 times within the project duration. Advisory boards will consist of employer from Health sector, employees from the health sector, and young graduates from the educational institutions, policy makers, VET trainers, and umbrella organizations on the sector level.	The NABs were set up in all countries apart from BE. Although according to the proposal this is the task of P2, it was agreed (and captured only in the 2 nd project meeting) that P2 as a dissemination leader responsible for the EU dissemination is not obliged to organise an NAB. Details on results from those meetings have been reported during each TSN meeting. It would be good that a list of members and their emails are provided also via the project intranet, together with a summary of the discussed issues and the received feedback.
Elaboration of forms for quarterly financial monitoring	Done
Signing of IPR agreement.	This was planned to be completed in M19, in accordance with the application form page 23
Organisation of the kick-off meeting in Turkey.	Done

4.2.3 Results

Result	Language	Medium	When
1.1 Communication strategy	EN	Report	M3: completed
1.2 IPR agreement	EN	Other	M19: to be done
1.3 Project steering group minutes	EN	Report	After every meeting, completed for

Result	Language	Medium	When
			first 3 meetings

4.2.4 Activities & Achievements

Monitoring and reporting systems were put in place at the outset of the H-CARE project.

All partners were informed of their reporting responsibilities.

An online platform was also established at <http://healthcaresales.eu/intranet/login.php> to enable internal partner document-sharing.

4.2.5 Divergences / Changes

More frequent communication in between the meetings would be recommendable, using e.g. Skype. This is especially needed since P1 representatives changed three times due to internal reasons and this could hamper the project continuity. It must be highlighted here that P6 managed to support P1 and all other partners.

Although agreed differently, P2 directly contacted the H-CARE Project Officer at EACEA for an internal staffing issue P2 faced. P1 pointed out that this is not the correct approach, and that furthermore all communications with the EACEA PO should go via P1. This process is clearly stated in the signed partners' agreements at the beginning of the project to ensure a smooth project management and follow-up of the H-CARE project by P1. This incident was also duly noted in the minutes of the 2nd project meeting.

4.2.6 Conclusions

The work programme was so far achieved with some minor delays which are however not expected to influence the successful project progress. Reporting mechanisms were put in place at an early stage in the project and partners regularly reviewed progress either through the submission of reports or through discussion and review during transnational partner meetings. P1 and P6 as internal quality management leader hereby applied a detailed follow up and involved partners in this process

4.3 Research and Need Analysis (WP2)

4.3.1 Objectives

- To engage active involvement from our end user groups in identifying the barriers they

experience, their needs and key issues in trying to enter the health sector labour market and to gain a greater understanding of the current national situation and issues on educational context required in workplaces in each partner country.

- To ensure that the forthcoming production of a H-CARE curriculum meets the user needs and requirements of health care and food supplement salesperson
- To define a set of learning activities appropriate to, and usable across, the range of user needs.
- To obtain a good perception of the need for adjustments in training practices to enable the beneficiaries to achieve short term success.
- To gain familiarity with the nature and potential value of adjustments in training methods and in their learning strategies to meet beneficiary's needs.
- To identify and highlight similarities and differences between national contexts in the partner countries.

4.3.2 Tasks

Type of task	Status
Defining the methodology to be used for the research, ensuring all stakeholders have been contacted and involved.	Done
Design of the questionnaire for the survey and implementation through offline and online (using Open Source Lime survey platform) questionnaires.	Done
Translation of the questionnaire in TR, BG, DE, RO.	Done
Survey and data collecting. 100 respondents to be reached in each country (employers from Health Care sector, employees from the Health Care sector, young graduates from the educational institutions, adults educators, VET schools, etc.)	Done.
Qualitative and quantitative analysis of findings (national and comparative).	Done, and available in different languages. However, it was pointed out by the external evaluator during the 3rd project meeting to

Type of task	Status
	<p>take into account the following recommendations :</p> <ul style="list-style-type: none"> • Add an “Introduction to the Health care system in Europe” which should be provided by P2. • Although P2 recommended also a chapter on the “Socio-economic aspects” to be included as part of the report, this was finally not included.
Organization of the 2nd project partnership meeting in Austria	Done

4.3.3 Results

Result	Language	Medium	When
2.1 Survey questionnaire	EN, TR, BG, RO, DE	Other	M2: completed
2.2 Consolidated survey findings	EN, TR, BG, RO, DE	Report	M6: 1 st version is available, while the executive summaries are available in the project partner languages.

4.3.4 Activities & Achievements

All consolidated data was concluded in the national reports, While a review by the external evaluator highlighted a number of issues that have been addressed in a revised 2nd version.

4.3.5 Divergences / Changes

A new version has been created of D2.2 after comments by the external evaluator.

4.3.6 Conclusions

Despite the delay of some actions all results were achieved according to the work programme. The conclusions are very comprehensive and well-structured. The WP outcomes were uploaded onto the project website at www.healthcaresales.eu. The work package is hereby completed successfully.

4.4 Development Of Curriculum Of “Health Care And Food Supplement Salesperson” (WP3)

4.4.1 Objectives

- To design and develop a curriculum of “Health Care and Food Supplement salesperson”
- To collect materials and activities suitable for VET blended learning of “Health Care and Food Supplement salesperson”.
- To launch an Open distance learning platform
- Implementation of ECVET principles for recognition and validation of learning outcomes in the curriculum development
- Establishment of clear linkage with the EQF (Level 4 & 5)

4.4.2 Tasks

Type of task	Status
Design and development of a curriculum of “Health Care and Food Supplement salesperson”, based on ECVET principles, including EQF recognition	The curriculum has a revised title “VET Curriculum for medical devices, assistive technologies and food supplements salespersons”. The curriculum was finalised by 31 March 2015. It was agreed among partners that the implementation of the ECVET principles needs more time than the initially planned.
Customization and localization of the curriculum – TR, BG, RO, AT	In progress
Collection of materials and design of practical activities for “Health Care and Food Supplement salesperson”	In progress
Launching of an Open distance learning platform (P1)	Done, but it was P6 that supported this due to their extensive experience in that field.

4.4.3 Results

Result	Language	Medium	When
3.1 Development of the H-CARE curriculum	EN, TR, BG, RO, DE	Service/Product	M12: Completed
3.2 Set up of the Open distance learning platform	EN, TR, BG, RO, DE	Service/Product	M9: Completed

4.4.4 Activities & Achievements

The learning platform is available via <http://www.healthcaresales.eu/elearning> with an English, Bulgarian, Romanian, German and Turkish interface, while curriculum completion allows WP4 to take off.

4.4.5 Divergences / Changes

4.4.6 This WP was completed and provides the input for WP4. Conclusions

WP3 and WP4 coincide in their work, thus avoiding a possible knock-on effect. The third project meeting proved to be very helpful in this to ensure that all partners at least have a good understanding of what is expected to be in the modules, while each partner also presented a detailed outline of their curriculum units (see D3.1). The learning platform D3.2 was implemented and deployed by P6.

4.5 Creation Of Module's Content (WP4)

4.5.1 Objectives

- To empower the defined curricula that will increase the employment potential and opportunities for the target group and sector.
- To use Experts from throughout Europe to input innovative VET-related content and practice.
- To investigate the best balance of knowledge competences and creativeness to allow all users to most effectively explore 'how things currently are' and 'how they could be'.

4.5.2 Tasks

Type of task	Status
Examine Results of work package 2 to identify the final content of the modules	Done
Development of learning content through a curriculum (defined in WP3) via cooperative development	Ongoing
Identify additional materials and adaptation of materials to deliver curriculum (all Partners)	Ongoing
Writing of paper based support materials – draft and final version	Pending
Training content	Ongoing
Confirm the methodology by which the content of the learning objects will be scoped by the user	Done

Type of task	Status
Work with sector bodies to develop the learning content	In progress
Within the respective transnational partner meeting analyse the results from the user groups in each partner country, to collaboratively produce the final format of the module	In progress
Agreement of final version before translation and gathering feedback from the local focus groups	To be done in September 2015.
Development of EQAVET validation control tool for assessment of the obtained skills and knowledge	This will be done when the first version of the modules is ready in June 2015.
Translation (EN, BG, DE, TR, RO)	To be done in September 2015
Production of the course material	To be done
Uploading specific pilot testing course content and supporting content to e-platform	To be done
Organisation of the Third TSN meeting in Bulgaria	Done

4.5.3 Results

Result	Language	Medium	When
4.1 H-CARE VET training modules	EN, TR, BG, RO, DE	Service/Product	M21
4.2 H-CARE EQAVET tool	EN, TR, BG, RO, DE	Service/Product	M20

4.5.4 Activities & Achievements

This WP has started and work is progressing in parallel with WP3.

4.5.5 Divergences / Changes

This WP just started, but depends also on the progress in WP3. A knock-on effect by minor delay in WP3 was avoided.

4.5.6 Conclusions

WP4 should be strictly time managed.

4.6 Quality Assurance & Evaluation (WP7)

4.6.1 Objectives

- To ensure robust quality management and transparent evaluation.
- To actively engage all partners in the quality management process from the very start.

- To appoint an experienced external evaluator with a brief to provide formative evaluation and feedback throughout the project, in addition to overall summative reports to accompany the Interim and Final Reports
- To operate rigorous and systematic activity and financial monitoring using well-established, user-friendly systems.
- To maintain effective reporting between National advisory groups and Transnational Steering Groups.
- To produce the Interim and Final Reports, incorporating feedback from all partners.
- To build on and draw together quality management procedures embodied in all other work packages.
- To monitor the impact and sustainability's steps undertaken by partners

4.6.2 Tasks

Type of task	Status
Finalization of quality management strategy.	Done
Appointment of an external evaluator (tender procedure to be applied) by P1	Done
Continual open and shared discussion within the partnership to ensure the maintenance of shared ownership of the work plan and shared commitment to the quality management strategy.	Ongoing
Regular reviews of progress against the work plan.	Ongoing
Shared participation in the evaluation and peer review of project outputs during their production and as finished products.	Ongoing
Regular reviews of progress at national advisory groups and at meetings of the Transnational Steering Group.	Reported during each TSN meeting by each partner. Should be kept on the intranet by using slides when presenting this at the meetings.
Preparation of impact and sustainability checklist, containing short and long term indicators for measuring of the progress, realized by the project	Done and used continuously to support WP7 activities.

4.6.3 Results

Result	Language	Medium	When
7.1 Quality strategy	EN	Report	M3: Completed
7.2 External evaluation report -interim & final	EN	Report	M16: Completed M30

Result	Language	Medium	When
7.3 Financial Auditors' Report	EN	Report	M30

4.6.4 Activities & Achievements

P6 is leading this WP in a very efficient manner, however partners need to also ensure they provide the needed feedback and input, as all partners are involved in this WP.

4.6.5 Divergences / Changes

All partners need to contribute here as defined in the proposal and as also confirmed during the 3rd project meeting.

4.6.6 Conclusions

Quality control is efficient as it has highlighted some issues with some of the project outputs which have been corrected. Such a strict quality control is obvious and to the benefit of the project.

4.7 Dissemination (WP8)

4.7.1 Objectives

- To ensure that knowledge of the establishment and purpose of the project reaches all target users and all target sectors in all partner countries throughout the project, and where possible beyond.
- To maintain a vigorous campaign of publicity in all partner countries for the project throughout its progress and support e.g. also piloting.
- To ensure that the outcomes of the project are recognised among all sector organizations and users in all partner countries.

4.7.2 Tasks

Type of task	Status
Finalisation of the dissemination strategy.	Done, but needs a to updated during the second project period .
Identification of key national dissemination targets and media in each partner country, but also on EU level.	Done, but needs to be updated during the second project period
Identification of key European level dissemination targets and media.	Done, but needs to be updated during the second project period

Type of task	Status
Intensive use of stakeholder members of National Advisory Groups as support for dissemination.	Done, but needs to be reported on.
Production of dissemination materials	Done and of good quality.
Attendance at key EU conferences related to project outcomes.	Ongoing and so far achieved – evidences are available on the project website.
Setting up of a project website (using open source Word Press CMS), which will communicate directly a Twitter, Slideshare and Facebook page, using the “Network Publisher” plugin for WordPress.	Done, available at www.healthcaresales.eu.
All partners will release information about the project through articles in newspapers / magazines / newsletters (≥ 7 per country), news releases (≥ 6 per country), PPT presentations within events (≥ 7 in each country and 5 on EU level), TV and radio announcements (≥ 2 per country), and press conferences (≥ 1 per country)	Ongoing
Organization of final TSN meeting and final EU Conference on European level in Brussels, Belgium	Will take place at end of project. A date was set for 27 May, 2016, however P2 will need to provide soon further information.

4.7.3 Results

Result	Language	Medium	When
8.1 Dissemination strategy	EN	Report	M1: Completed but needs to be updated in the second project period
8.2 Project website	EN, TR, BG, RO, DE	Service/Product	M2: Completed
8.3 Production and distribution of dissemination materials	EN, TR, BG, RO, DE	Service/Product	M5: Completed M28
8.4 Final EU Conference in Brussels	EN	Event	M29: Preparations started

4.7.4 Activities & Achievements

Dissemination starts from the start of the project and runs till the end of the project. Here is an overview of the corrective activities needed to keep this WP on track:

- P2 as WP leader needs to take an active role in gathering the information.
- Additionally, all partners need to produce a revision of the stakeholders mapping document and ensure that they have contacts with all listed target stakeholders (see proposal):
 - Job seekers
 - Current employers
 - VET trainers
 - VET training centers
 - NGO's
 - Policy makers
 - NAB members (to be uploaded onto ATutor)
 - Confederation of Trade Unions
 - Medical staff
 - Training staff
 - Trade companies (SMEs) in the field of Health Care
 - University medical school
 - Family and social policy ministry
 - Health education school
 - Ministry of health
 - Association of private hospitals
- The associate partners that were identified in the annex to the proposal have been reached out to, and should next be involved. The dissemination strategy needs to be updated by P2, including also an events calendar to keep track of where partners have, or could promote the project.
- The partners should continue providing detailed information on the identification of key national dissemination targets/media in each country, also on EU level.
- P2 as WP leader needs to actively pull information from partners regularly and provide this to P6 (who is responsible for the website). The partners can announce the Final conference as soon as the venue is decided (P2 responsibility).

- A more active usage of social media is needed.
- P2 had raised at the kick-off that they had the EMA TV online channel, however it is not clear how this will be used. It is equally stated in the H-CARE Dissemination strategy that this channel will be used. Since P5 is already making a video, it would be good to have this equally published via P2's channel.

4.7.5 Divergences / Changes

More efforts are expected during the second project period when the main deliverables will be available in all partners' languages, ready to be piloted.

4.7.6 Conclusions

WP8 needs to speed up in the 2nd project period to promote the project outcomes to the project's stakeholders. This should also be reflected in more regular updates to the project website.

5 Partners' consultation.

All partners, with the exception of P2, participated in the 2 interim partner consultations (see Annex 1 for the questionnaires used). We also based our findings on the observed 2 project meetings, the communications via the mailinglist, the minutes of all the meetings, de project intranet and the direct contact we had with project partners.

The consultations focused upon the organisation and management of the project, the partner roles and their contributions, the dissemination and valorisation activities, and last but not least the involvement of stakeholder groups.

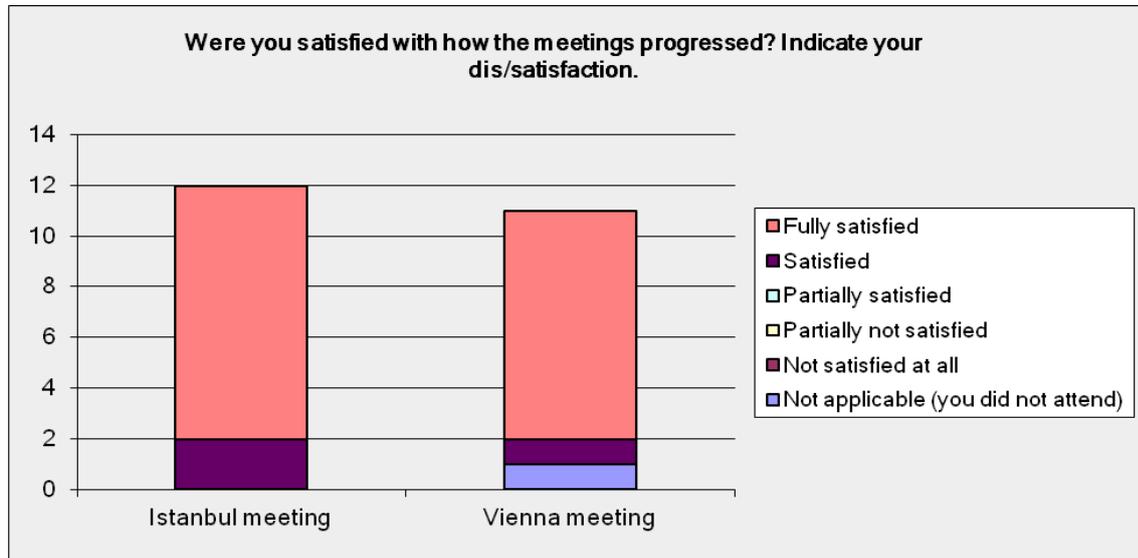
5.1 The partners' role

5.1.1 Previous experience in LLL programme

During the kick-off meeting, 3 partners had considerable questions regarding the LLL programme, and expressed they had also no previous expertise/experience in LLL programme funded projects. One partner is rather used to work in Framework Programme funded projects, hence some rules were not entirely clear from the onset, a confusion that for at least one partner is still causing some issues. P1 needs to closely follow up with this partner to ensure no further misunderstandings occur, especially then regarding the contractual obligations for this partner, as set out in the project contract. A frequent refreshing up the administrative and contractual obligations is a must during each meeting as already have been done during 2nd and 3rd TSN meetings.

5.1.2 Project meetings feedback

Overall, project partners expressed their satisfaction with how all project meetings were organised and progressed. This obviously in the result of a tight cooperation between P1 and P6 who were the core developers of the proposal and have a thorough understanding of the project itself.



5.1.3 Expectations of partners during project meetings

Partners were also asked to explain their main hopes and expectations. Following feedback was provided:

- *Clearness about the forthcoming workpackages;*
- *Progress Reports, Planning the next Period*
- *Understanding the project activities*
- *Good collaboration between partners*
- *A better understanding of the objectives, tasks and project activities.*
- *Cooperation with the partners with the purpose of quality implementation of the activities*
- *To achieve the objectives of the meetings.*
- *Common understanding of project aims and goals; collaboration between partners, entire dedication to success achievement*
- *Good partnership and achievement of project goals.*
- *To meet partners and define the milestones of the project*
- *Common understanding about the project concept and the strategy to achieve project expected results and outcomes.*
- *Set up partners' goals, development of a team spirit and common agreement about the next steps, deadlines and activities to be done.*
- *Realisation of the research phase and identification and analysis of the user requirements*

gathering process and proceeding with the development of the HCARE curriculum.

- *To evaluate the progress, work packages, problems (if there is any) works done*

Above statements clearly indicate that the partners should continuously have good guidance for the different steps in the project, in order to achieve the envisaged outcomes.

When asked what aspects of the project meetings partners enjoyed the most, following feedback was provided:

- *Communication with the partners;*
- *Meet the Partners, talks beside the meeting*
- *Good organization*
- *A fruitful collaboration*
- *Collegial atmosphere and fruitful collaboration.*
- *The good communication and cooperation with the partners*
- *That all planned agenda items were completed.*
- *Meeting new people*
- *Each partner is participating actively and giving ideas which will help to improve the quality of the project implementation.*
- *Partners motivation*
- *To meet new people, to share information, to do something together*
- *The ability to share opinions and to know more about the situation of the health care system in partners' countries.*
- *Collaboration of partners, achievement of project tasks*

Above clearly highlights the need for a good cooperation/collaboration and communication among partners. In light of the fact that some partners are less experienced, these aspects will be crucial to ensure the project stays on track.

Asked what partners did not like, following elements were mentioned:

- *Partners should not interrupt each other and mutual trust should be a must.*
- *Talks out of the subject.*
- *The coordinator did a lot of activities to allow the rest of the partners to understand the point of view and those attendees have been supported to receive more information on the topics.*
- *Some of the participants need to further understand the rules of the Administrative and*

Financial Handbook LLP 2013 in order to follow the rules correctly without additional personal interpretation.

Above issues came back across all meetings, and indicated that there is need for every partner to contribute but also respect the opinion of others. In fact, partners have each a very specific expertise, and this should be complementary. This aspect was observed especially during the Sofia meeting and was also raised during the feedback at the end of the meeting. All partners agreed mutual respect is important to ensure a successful project. One participant carefully commented that “Problem solving skills were increased as well as the empathic behaviour towards those participants who are ‘a bit nervous’.”, while another partner stated that “Every partner has its own experience and knowledge. In each meeting I believe that every partner learns new things from each other. For me it is the collaboration and being more punctual.”

5.1.4 Detailed feedback on Istanbul / Vienna / Sofia meeting

	Istanbul	Vienna	Sofia
Meeting agenda and preparation	Very good - Good	Very good - Good	Very good - Good
Presentation of the project's overview by the coordinator	Very good - Good	Very good - Good	Very good - Good
Timing of activities		Very good - Good	Very good - Good
Completion of agreed tasks		Very good - Good	Very good - Good
Clearness of next steps	Very good - Good	Very good - Good	Very good - Good
Sum-up of the results and conclusion of the meeting	Very good - Good	Very good - Good	Very good - Good
Contribution of participants (participation in the discussions etc.)	Very good - Good	Very good - Good	Very good - Good
Organisational aspects (e.g. meals, hotel)	Very good - Good	Very good - Good	Very good - Good
WP1 Project Set-Up And Management (M1-30)	Very good - Good	Very good - Good	Very good - Good
WP2 Research And Need Analysis (M1-6)	Very good - Good	Very good - Good	Very good - Good
WP3 Development Of Curriculum Of "Health Care And Food Supplement Salesperson" (M7-12)		Very good - Good	Very good - Good
WP4 Creation of modules content (M12-21)			Very good - Good
WP5 Creation of job core profile of “health care and food supplement salesperson” (M18-21)			Very good - Good
WP7 Quality Assurance & Evaluation (M1-30)	Very good - Good	Very good - Good	Very good - Good

	Istanbul	Vienna	Sofia
WP8 Dissemination (M1-30)	Very good - Good	Very good - Good	Very good – Average

While all WPs scored positively, WP8 was considered being average by half of the respondents after the Sofia meeting. This needs to be corrected as mentioned before.

Some partners did indicate that the contribution of participants (participation in the discussions etc.) could be better.

A question that allowed people to assess the leadership of each WP, indicated a good leadership for every WP,. One partner clearly stated though that “The dissemination leader should be active to lead the partners in terms of dissemination, its reporting and visibility to the wider audience.”

5.1.5 Involvement in WPs

It is striking that even after the 2nd project meeting at least half of the partners are not aware that they are involved in every WP and have been allocated maneffort to complete their tasks. Below table shows the feedback received on which we base our concern.

To what WP(s) do you or will you contribute?		
Answer Options	Response Percent	Response Count
WP1 Project Set-Up And Management (M1-30)	57.1%	8
WP2 Research And Need Analysis (M1-6)	85.7%	12
WP3 Development Of Curriculum Of "Health Care And Food Supplement Salesperson" (M7-12)	85.7%	12
WP4 Creation Of Module's Content (M12-21)	78.6%	11
WP5 Creation Of Job Core Profile Of "Health Care And Food Supplement Salesperson" (M18-21)	71.4%	10
WP6 Piloting (M22-29)	71.4%	10
WP7 Quality Assurance & Evaluation (M1-30)	50.0%	7
WP8 Dissemination (M1-30)	92.9%	13
WP9 Exploitation (M19-30)	64.3%	9

The feedback we received on the next question reflects this again, an additional question focused on the knowledge of the Project proposal and the Financial guidelines. 1 partner stated not having read either of these, while another partner stated not understanding it entirely. This is the case for the partners who are not experienced in LLP.

We presented these findings also during the Sofia meeting, insisting all partners need to check their

project contract (proposal) extremely careful, and if aspects are not clear, they should contact P1 to ask for clarification. All partners confirmed that they fully understood that.

5.1.6 Associate partners involvement

Project partners need to involve the associate partners they enlisted in the project proposal, or at least provide an update (especially P3, who identified new associate partners) as there are currently gaps (in orange) as is clear from below table:

Please indicate which associate partner you have already involved and how (multiple options possible).							
Answer Options	Face-to-face (minutes available)	Mailing (proof available)	Network meeting (proof available)	Press release (proof available)	Not contacted yet	We will not contact them	Response Count
EPMA (European Predictive, Preventive, Personalized Medicine), Belgium	1	1	1	0	7	5	14
E.D.A. (European Depression Association), Belgium	0	1	1	0	7	6	14
King Abdulaziz University S.A, Turkey	0	1	0	0	8	5	14
Duchmed Bulgaria, Bulgaria	2	1	1	0	9	3	14
Liveda Med 2000, Bulgaria	2	1	1	0	9	3	14
RSR Bulgaria, Bulgaria	2	1	2	0	9	3	14
Abott Bulgaria, Bulgaria	2	1	2	0	9	3	14
BFI OÖ - New perspectives and better opportunities in life, Austria	4	1	0	0	5	5	14
SOB – Steyr School of Social Care, Austria	1	0	0	0	7	6	14

Please indicate which associate partner you have already involved and how (multiple options possible).

Answer Options	Face-to-face (minutes available)	Mailing (proof available)	Network meeting (proof available)	Press release (proof available)	Not contacted yet	We will not contact them	Response Count
ABZ Braunau, Austria	1	0	0	0	7	6	14
BBRZ Med, Austria	1	1	1	0	7	5	14
Jugend am Werk GmbH, Austria	2	1	0	0	7	5	14
FAB, Austria	1	0	0	0	7	6	14
Suleiman Sah University, Turkey	1	1	0	0	8	5	14
Istanbul Health Tour Service, Turkey	0	1	0	0	8	6	14
Ministry of Health, Turkey	0	3	1	0	6	5	14
Cluj Napoca Medical University, Romania	0	0	0	0	7	7	14
University of Medicine and Pharmacy Carol Davila of Bucharest, Romania	0	0	0	0	7	7	14
Victor Babes University of Medicine and Pharmacy of Timisoara, Romania	0	0	0	0	7	7	14
University of Medicine and Pharmacy Targu Mure, Romania	0	0	0	0	7	7	14

5.1.7 How do partners assess the H-Care Management and Coordination?

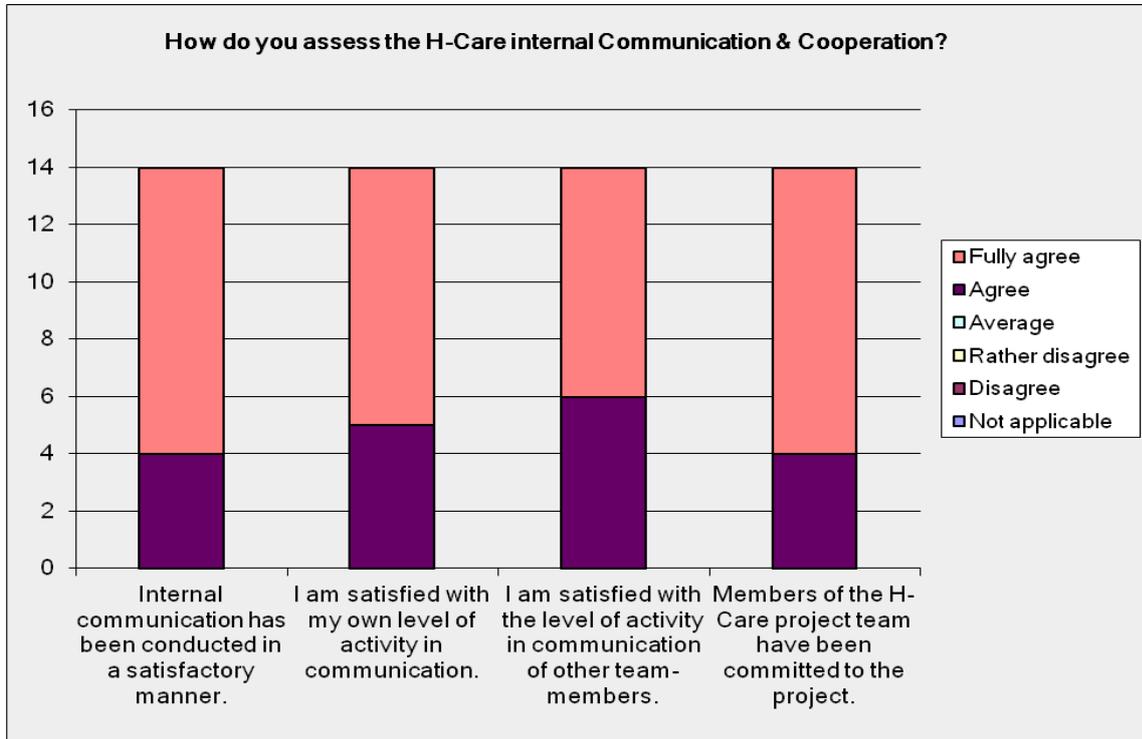
5.1.7.1 Is the project well managed?

Asked on whether the project was properly managed, the majority indicates they believe it is. P1 and P6 as internal quality management leader need to pay special attention to this.

How do you assess the H-Care Management and Coordination? Is the project well managed?						
Answer Options	Fully agree	Agree	Average	Rather disagree	Disagree	Response Count
The project is well managed overall.	11	1	2	0	0	14
Work packages are well coordinated.	11	2	1	0	0	14
Partners are aware about their responsibilities.	8	5	1	0	0	14
Financial management is well implemented.	11	2	1	0	0	14
Tasks have been implemented as planned.	11	2	1	0	0	14
Deadlines have been met.	10	2	2	0	0	14
There is appropriate contribution of partners.	11	2	1	0	0	14
Products/Results are of high quality.	11	2	1	0	0	14

5.1.7.2 How do you assess the H-Care internal Communication & Cooperation?

This aspect is evaluated positively, however considering the delays that occur, it seems that this needs to be improved.



5.2 Personal motivation levels

2 partners reported an average motivation level, which was closely linked to their lack of experience on working in LLP projects, hence the need for regular reminders regarding the project management and administration.



6 Final conclusion

At the Interim report stage the H-CARE project has progressed, but faces some minor delays, more specifically:

- in WP2: final version of outputs has minor delay due to the large number of involved respondents and the need for more time to finalise the findings ;
- in WP3: defining the final version of the curriculum has a minor delay due to the need for more time planned for the implementation of ECVET, in coincidence with the preparation of the job profile. In this respect the coordinator P1 has ensured that the creation of course material (WP4) has been initiated as well, thus aiming to avoid any further knock-on effect;
- in WP8: starting and carrying out the various activities needs more intensive leadership by P2.

Recommendations

- WP4:
 - o Further delay in production of H-CARE modules should be avoided.
- WP8:
 - o WP leadership should be improved to actual undertake dissemination actions, preparations, etc. It is applaudable that P6 has been very proactive, however since they are not WP leader, this is also limited to their assigned resources. Some activities need to be updated during the second project period by WP leader P2:
 - Update the dissemination strategy;
 - Prepare final report on realised dissemination activities by all partners;
 - Upload all outputs (when the final versions are available) to the project website, and this in the respective language versions;
 - Initiate all activities, capturing also all relevant events for the project in an events calendar;
 - Continue preparation for the organisation of the final event in Brussels (is also part of WP9);

Finally, the collaboration among all partners could be more effective and efficient by having them contribute more actively to all project domains, including the dissemination and valorisation activities. A broader EU-wide impact is also expected to be ensured once the modules are available online.

ANNEX 1: Partner consultation questionnaires

The questionnaires can be found at:

- <https://www.surveymonkey.com/s/h-care>
- <https://www.surveymonkey.com/s/HCARE-2>