



Health C – Improving crisis Communication Skills in Health Emergency Management

Final Report

Public Part

Project information

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Executive Summary

The actual context of globalization where information circulates faster than ever crossing borders without verification/control is demanding new initiatives to improve the control over information and the communication standards. This is of higher importance in emergency scenarios related to health threats that have a large potential of causing problems of international level.

In an emergency situation, health managers, communication managers, population and media are all requested to respond rapidly and effectively in order to maintain or restore normal conditions. This is possible only if extensive preparedness planning programmes are in place and if communication tools and guidelines are available in advance for the all actors involved. For this reason, training and capacity building efforts aimed to develop the professional skills in crisis communication and management within a community or an organization are becoming really important, for the entire society.

Health C Project (Improving Crisis Communication Skills in Health Emergency Management) is a two year initiative co-funded by the European Commission in the framework of the Lifelong Learning Programme, sub-programme Leonardo da Vinci, Development of Innovation aimed to support health authority staff to develop the skills required for managing communication in emergency situations linked to a health crisis, specifically in the event of transnational emergencies.

The main achievements of the HEALTH C project include a course in communication in emergency situations, as well as the related training materials, including a toolkit containing guidelines and support documents. The course contents represent the most important achievement of the project as they include information on three key modules: i) Communication processes and skills which provide the theoretical framework for the course, ii) Communication through traditional media, which is of major importance, as it is the most commonly used, and reaches almost everyone, and finally iii) Communication through Social Media, which is increasingly being used in our society and in emergency situations.

The population targeted by the course materials is represented by the target groups and beneficiaries identified in the HEALTH C Project. Direct target groups are professionals from health institutions, emergency organisations and civil protection and health authorities, and indirect targets include communication experts, the media, civil organizations and the the public at large.

Direct Target Groups	Indirect Target Groups
Hospitals	Communication experts
Emergency infrastructures	The media
Civil protection	Civil organizations
Local and regional health authorities	The general public

Given that the target groups are diverse, it was crucial to take account of the differences in the level of communication expertise and skills from one learner to the next. To achieve this, the contents developed allowed users to navigate freely within the content – some users already know much of the information and have specific interests, while others may need to review all the information available. Among the various professionals from all these organizations, different profiles of learners can be found, from healthcare professionals to communication specialists.

- **Health professionals** sometimes need to communicate with other institutions when their expert knowledge is required. The course therefore is useful for healthcare professionals, enabling them to acquire skills in communication and to avoid mistakes when communicating that might cause alarm or generate problems.

• **Communication professionals** from emergency-related institutions need to communicate on a daily basis. The course helps them to improve their skills and to access the guidelines and tools they need in their daily activities. Depending on their role within the communication department, they will gain more value from different aspects of the course contents.

The course includes information on **using social media for emergencies**. Social networks are certainly gaining in importance, and are increasingly being used by healthcare professionals. The course content is useful for professionals who actively use social media to improve their skills in Social Media communication, as they especially need to understand its impact when used for communication in a crisis or emergency situation. Under the WP5 of the HEALTH C project, a pilot course was organised in 4 different countries – Portugal, Italy, Spain and Germany. The pilot course aimed providing health authorities' staff with specialized skills in how to make an effective use of traditional and new communication channels in an emergency context, as well as providing a widespread access to the mentioned crisis management communication capacities for health authorities. The course was held using a blended learning approach and integrating the use of the toolkit, made with contents and interactive materials. The pilot involved approximately 58 participants in the face-to-face sessions; and 119 in the online part. The participants were mainly health professionals, communication experts, and personnel from civil protection organizations.

The project consortium includes entities from 6 European countries (Portugal, Spain, Italy, Belgium, Germany and Denmark) comprising training providers, ICT developers, consultancy companies, universities and health related organisations. Together the consortium gathers the necessary skills and competences to implement the project activities. All partners were involved in all project activities and work packages (WP). In the implemented work plan, four WPs have a transversal nature: project management; project monitoring and evaluation; dissemination; and exploitation; and the other 4 have a more technical basis, namely: identification of target groups' training needs and competencies; collection of good practices in crisis communication; development of the training course and organization of a pilot course.

Dissemination and Exploitation plans, a large variety of activities, adequate instruments and channels, have been used by partners with positive results in the engagement of the target groups in the project activities and in generating awareness to the project. After 2 years of project implementation of the project, the actual main efforts of the consortium are focusing in to assure the maintenance and further sustainability and development of the project outputs and activities after the end of the project. A comprehensive range of activities aimed at reaching the project target groups and final end-users after the end of the HEALTH C project are planned. To achieve this, the following points were considered and are being pursued: Since the beginning of the project, the target groups/end users/public and stakeholders of the project's results were clearly defined and involved in the project activities namely in the conception and testing of the materials; Continuous efforts were implemented during the project implementation to ensure that these identified target groups/end users/public and political stakeholders were involved and deeply engaged in the project activities specially the pilot course implementation; A detail planning of how during and after the end of the project the results will be exploited and sustained was discussed and prepared among the partnership; The main goal is to guarantee that the project results are available, visible, used, transferred and even improved after project conclusion; It's also essential to ensure that the networks created by the project are enhanced and continue to be used and updated in a sustainable way; Also it's crucial to ensure that the transfer of knowledge and methodologies is set up.

Finally, these considerations resulted on a strategy and definition of concrete actions to be implemented, which represent a real commitment and engagement of the partners to exploit the project results. **For more information or to have access to the project main achievements please visit us at: www.healthc-project.eu.**

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1. Project Objectives

Health C - Improving Crisis Communication Skills in Health Emergency Management - is a two year initiative co-funded by the European Commission in the framework of the Lifelong Learning Programme; sub-programme Leonardo da Vinci, Development of Innovation. The central aim of the project is to support health authorities' staff in the development of the competences for better management of communication in emergency situations caused by a health crisis in a scenario of transnational emergencies.

The general objective of the project is to set up a common pattern of content in communication of crisis situation with the final scope of developing a training course and a set of communication tools for increase the skills competences of the health sector staff, specifically in what concerns the use of social media.

The main expected results include therefore a training course in communication in emergency situations and the respective training materials, supported by other additional resources offered in a toolkit. Addressing health authorities managers, crisis managers, communication managers and operative staff, the course focus on the communication strategy with the general public and the. However and due to the actual importance of social media and networks, special focus will be given to the new communication channels and how can they become a valuable tool in the management of an emergency situation, especially for the involvement of population in general and media.

The project is primarily focus on how health authorities should deal with a crisis emergency in terms of communication procedures, but also on how health authorities should cooperate with population and media to improve the crisis management. In order to reinforce the two way communication channel (health authorities to population and media and vice versa) the project previews the involvement of representatives of the population in general and media in different activities and moments.

Due to the different realities at national and local level in what is concerned to the management of health crisis scenarios, the training course contents and toolkit have had into consideration the national/local conditions and needs and thus, offers tailored national information for the local health authorities' managers and personnel for communicating better at a crisis situation.

Considering the overall general objectives, the project addresses in particular managers working at hospitals, emergency infra-structures, civil protection services, regional and local health authorities. Nevertheless, Health C will also have impact in the communication experts, media in general, civil organizations, population that somehow will be indirect beneficiaries. In detail, the specific objectives of the Health C project are the following:

- To identify new skills and competencies in the area of communication in health crisis management;
- To raise the awareness of local health authorities on the use of new communication media channels in the management of emergency situation;
- To involve general population and media in this crisis communication initiative in order to increase and improve their capacities of reaction in an emergency situation.

In order to reach the above specific objectives, the following activities were developed/implemented:

- Conduct an investigation and research on the national realities on managing systems of crisis communications;

- Implement national focus groups and surveys to representatives of the target groups that provided knowledge and feedback for designing the training materials and the course structure;
- Investigate on better practices of communication in crisis situations that support the definition of communication guidelines;
- Design a training course from a functional point of view focusing on different professionals' competencies and including a special focus on how to use new communication channels in an emergency situation;
- Build-up and make available a set of complementary training and informative resources in an accessible tool-kit;
- Test the training course materials with representatives of the target groups.

2. Project Approach

The Health C project work plan was divided into 8 work packages (WP) led by different partners, with different objectives and durations. However all partners are deeply involved and contributed to the general implementation of the project activities, aiming to assure the European dimension of the project achievements. Below is presented a description of the project approach per WP.

WP 1 – Project Management

Coordinated by INOVA+

Duration: 24 months

Actual Status: on going

The overall objective of WP1 was to assure the project coordination and communication, guaranteeing that it runs smoothly, on time, on budget in the agreed quality standards and according to the plans.

Under coordination of INOVA+ but with the involvement of all partners, project management activities are also contributing to monitor the project progress and its achievements as well as the communication flows between the project coordinator and the EC services, the coordinator and partners and between partners.

In the framework of the project, 5 partners meetings were organised to better plan and monitor the project progress, and several distance meetings were held using VOIP. Communication with and between partners was assured by different means, including regular email, phone contacts and by the use of distance web conference services.

To facilitate the sharing of information and the access to documents (being internal documents, project reports and deliverables or dissemination materials) a Dropbox folder was created and access provided to all staff members involved in the project. Thus, each one could consult and download project related documents anywhere and anytime and also share information (besides the usual share of information by email).

In order to better monitor the project expenditures, a quarterly reporting scheme was being implemented allowing a constant monitoring of the project progress in terms of technical and financial execution.

WP 2 – Identification of Target Groups' training needs and competencies

Coordinated by HOPE

Duration: 11 months

Actual Status: ended

Coordinated by HOPE, WP2 aimed at mapping the competences and needs of the target groups in order to better understand their training needs and expectations, allowing identifying the real gap and the existing knowledge of the target group, in order to avoid redundancy and out-of-purpose effort, and maximizing the efficiency and innovative potential of the project.

The results of the WP2 are fundamental for the other project related activities, mainly for defining the structure of the training course and its main contents and better shape the nature and contents of the tool-kit- All partners were involved in the WP2 activities that were implemented as follows:

- Definition of the methodology for the implementation of WP2 and the templates for identification of the contact list and of weaknesses, strengths and competences of the target groups;
- Desk research for the identification of background data on how health crisis communication is carried out in the different countries and at European level;
- Elaboration and implementation of an EU-scale survey supporting the identification of the weaknesses, strengths and competences of the target groups and of expectations for the training course on crisis communication;
- Elaboration of a report mapping of weaknesses, strengths and competences of the target groups,
- Elaboration of a Background Report.

WP 3 – Collection of good practices in crisis communication and integrated focus groups results

Coordinated by LMU

Duration: 10 months

Actual Status: ended

WP3 is coordinated by LMU with involvement of the whole consortium and aimed at developing and present a set of good practices and recommendations for crisis communication at an EU level related to health sector, more specifically, for the management of the communication channels and tools and for the construction and deployment of effective messages during a health emergency.

To achieve these objectives the following activities were implemented:

- Elaboration of guidelines for the implementation of the national Focus Groups;
- Implementation of 3 Focus Groups at national levels with representatives of the different target groups addressed by the project;
- Desk research and literature review on good practices of communication in crisis and emergency situations and of the existing training materials;
- Elaboration and implementation of an EU-scale survey supporting the identification of the weaknesses, strengths and competences of the target groups and of expectations for the training course on crisis communication (in interaction with the WP2);
- Elaboration of communication guidelines for emergency management.

The main results of this WP were compiled in three public documents that can be consulted at the project website: i) Better Practice Handbook - collecting a set of good communication practices; ii) Focus Groups Findings report containing the analysis of the conclusions of the experts contributions and its impact for the project development; iii) Communication Guidelines for the health emergency scenarios. These results were of high importance for the definition of the structure and contents of both the training course and of the additional resources that will be available on the tool-kit and thus are informing the WP4.

WP 4 Development of the training course, including training material and the tool-kit

Coordinated by ARTICA

Duration: 9 months

Actual Status: ended

The main achievements of the HEALTH C project include the training course in communication in emergency situations, as well as the related training materials, including a toolkit containing guidelines and support documents. Gathering the results and experiences of the previous WP2 and WP3, and with coordination of ARTICA, these achievements were developed under the WP4. The following materials were developed:

- **Course Contents:** These represent the most important achievement of the project as they include information on three key modules: i) Communication processes and skills which provide the theoretical framework for the course, ii) Communication through traditional media, which is of major importance, as it is the most commonly used, and reaches almost everyone, and finally iii) Communication through Social Media, which is increasingly being used in our society and in emergency situations.
- **Toolkit Resources:** These are a set of support documents, guidelines and templates that cover the key aspects of the course content, thereby providing ready-to-use information for use in daily activities.
- **Self-Assessment Tests:** These were a way for learners to evaluate the knowledge they have gained of the topics studied.
- **Evaluation Questionnaires:** These form the main source of feedback from learners and helped HEALTH C project team, to review the work carried out during the project and identify areas of improvement.
- **LinkedIn Group:** A LinkedIn Group has been created by the project in order to foster communication and the exchange of practices among professionals in Europe.
- **Online Platform:** All the previously mentioned materials have been integrated within an online Moodle-based platform, which will help to disseminate them further and made it easier for learners to take the course, as online information can easily be accessed by a large number of users without the extra costs associated with providing physical materials.

The training course has a special focus on new social media/network and online tools used as helpful channels in emergency situation and will be developed in b-learning and with hands on job resources for easy utilization at the daily work. The course materials were made available online, in English and in all partners' languages (Portuguese, Spanish, Italian, French, German and Danish) through the **HEALTH C eLearning platform**, currently found at <http://healthcmoodle.eu/>, including all the content and additional resources developed by the project.

WP 5 - Organization of a pilot course in different countries**Coordinated by ASL
BRESCIA****Duration: 7 months****Actual Status: ended**

Under the WP5 (coordinated by ASLB), a pilot course was organised in four different European countries – Portugal, Italy, Spain and Germany. The pilot course aimed providing health authorities' staff with specialized skills in how to make an effective use of traditional and new communication channels in an emergency context, as well as providing a widespread access to the mentioned crisis management communication capacities for health authorities.

The course was held using a blended learning approach and integrating the use of the tool-kit, made with contents and interactive materials. The pilot involved approximately 58 participants in the face-to-face sessions; and 119 in the online part. The participants were mainly health professionals, communication experts, and personnel from civil protection organizations. The piloting of the training course and of the tool-kit, allowed the consortium to test and validate the final project results and assess if they meet the real needs of the target groups. In addition, the scale of the pilot courses allowed for one-to-one interaction between trainers/tutors and learners. A specific methodology was developed by ASL BRESCIA (the WP coordinator) for the delivery of the test and piloting of the training course in the above participant countries. This methodology included the test of the contents, of the platform features and of the tool-kit, gathering relevant feedback from the participants. During the piloting stage an effective evaluation of the training modules and organization was done through the implementation of a set of questionnaires in order to collect the feedback from the pilot course participants'.

The overall feedback of the participants was very good, with some differences registered between the three modules proposed, suggesting a need of training linked with practical application of the contents. It is worth to mention that the module that received a higher evaluation score is the one that **represents the core subject of the project – use of social media applied to health communication management in crisis and emergency situations**. This feedback is a clear hint regarding the strong need for deepening this theme among health professionals. The quick development of social media in the last years – strongly related to the spread of mobile usage of the internet – has impacted communication dynamics, and it seems that health institution professionals are aware that there is a need for knowing these tools and eventually use them in their occupational context.

WP 6 – Quality Assurance and Evaluation**Coordinated by AaSHCC****Duration: 24 months****Actual Status: ended**

WP6 aims were related to the internal evaluation of the project results and project activities. AsSHCC was leading the WP activities with the involvement of all partners and activities are being implemented accordingly to the Quality Management Plan defined at an earlier stage of the project (which includes indicators, tools and criteria used in the project control procedures).

Monitoring and interim reports were produced allowing the consortium members to be aware of the project rhythm and if its progress as well as of the quality of the main deliverables, the main deviations and its causes and of possible correction measures to be implemented.

Apart from the regular and continuous monitoring and assessment of the project, an internal Quality Board was implemented. This board evaluated the quality of the project results and activities at international level, considering the planned products of each WP, planned time limits and communication between the project partners. It also investigated the quality of the project results assessing its usefulness and accuracy.

WP 7 – Exploitation of the results

Coordinated by INOVA+

Duration: 24 months

Actual Status: ended

Coordinated by INOVA+ the WP7 was devoted to the exploitation of the project main results. This has started in the beginning of the project by elaborating an Exploitation Plan for the sustainable usage of the project results with higher impact on the target groups and stakeholders and higher potential of use and transfer. Thus all partners were and are involved in the WP activities by contacting regularly the project stakeholders' at national level and by preparing the soil for the future usage/transfer of the project results.

An initial draft plan for the exploitation of the project results was already draw and a more complete version was elaborated in the second year of the project, gathering feedback of the materials developed under WPs 4, 5 and 6. Partners also agreed on the conditions for the utilization of the project results and on the IPR issues. As a final point, these considerations resulted on a strategy and definition of concrete actions to be implemented, which represent a real commitment and engagement of whole partnership to exploit the project results.

WP 8 - Dissemination of project results and activities

Coordinated by INOVA+

Duration: 24 months

Actual Status: ended

The dissemination of the project was crucial to reach the project goals and to involve the target groups in the project activities, attracting and engaging them. The aim of the WP8 coordinated by INOVA+ with the involvement of all partners was as follows: To elaborate a detail dissemination plan based on the national ambitions of each partner; To elaborate a list of contacts to be reached over the project implementation; To generate awareness to the project aims and most relevant activities by developing and delivering a project brochure and poster in partners languages; To develop, launch and maintain updated the project website; To assure the regular communication of the project activities, results and achievements; To organise and promote a final conference in Italy to present and discuss the project results; To monitor the dissemination activities and achievements.

INOVA+ presented a methodological approach to the WP and supported partners in the definition of the national plans and ambitions and of the activities to be implemented. The following main activities we implemented: Project logo and visual image/identity; National plans and overall dissemination strategy; List of contacts; Dissemination instruments: A4 info sheet; project brochures; project poster; newsletter template, etc.; Launch of the public website and maintaining it updated; Print and distribution of the info pack; Continuous and regular communication with project target groups and public in general (including inviting them to participate in the project activities – pilots, final conference, national events,...); Publishing news on newsletters and websites about the Health C project; Creation and animation of the LinkedIn group; Releasing several editions of the newsletters, updating the LinkedIn group and the news area in the project website, releasing informative emails; releasing articles and news; attending events to present the project, etc; Elaboration of an

Interim dissemination report; organisation of and participation in events to promote the project at national and European levels (including a final conference held in Italy).

The impact achieved by these activities is perceived as very good and relevant feedback was received. From the large variety of activities implemented in partners' countries as well as outside the partners countries (due to HOPE profile) allow us to reach different dimensions covering face-to-face, media-based and paper-based activities. A large number of stakeholders and of target groups is being constantly addressed (more than 2 000 members were included in the stakeholders' lists) by the dissemination and exploitation activities, as well as the public in general. The consortium generated a high level of awareness among both the targets: around 5 000 stakeholders were aware of the more and more than 30 000 persons have been in touch with Health C related information, presentations or activities.

3. Project Outcomes & Results

The project outcomes and results were delivered to bring added value to the project target groups and to meet their needs and expectations. Initial plans have been adapted to the targets needs and some new deliverables were developed as a consequence. The public reports are available for download at the project official website: www.healthc-project.eu and further information can be provided by request.



Internal Management Manual

The Internal Management manual provides an overview of the Health C project, the expected results and timeline. It aims to be used as a guide to all partners highlighting the details on partners’ roles and responsibilities’ and the WPs details.

The management plan includes also a presentation of the project team members, the management principles and rules to use in case of disputes and/or conflicts and finally an overview on the rules for a correct financial management and report of the project expenditures.

Internal Management Report

The Internal Management Report covers the aspects related to the Kick-Off meeting of the Health C project and presents the meeting agenda and venue, the meeting minutes, the list of participants and a detailed on the activities/plans for the coming months.

From the minutes of the Kick-Off meeting partners are able to access to the discussions and findings, namely to the common understanding about the project main target groups and beneficiaries’, the concepts of crisis and emergency to use within the project implementation and the methodological approach for each of the WP’s of the project.



Internal Management Reports – Interim and Final Reports

The interim and final reports provide an update on the project execution on the technical and financial implementation.). Both were developed in the second year and are aligned with the official reporting periods and templates.



Methodology, contact list and template for identifying weaknesses, strengths and competences of the target groups

Internal document presents the methodology and templates conceived to the WP2. It includes a brief overview on the project objectives and target groups as well as the project basis concepts. In higher detail the WP2 methodological approach is presented including the timeline for the implementation of the expected activities, partners' responsibilities.

Mapping the weakness, strengths and competences of the target groups

The mapping of weaknesses, strengths and competences of the target groups (SWOT analysis) aims to identify target groups' training needs and competences. The main objective of the SWOT is to serve as guideline for the development of the training course and the respective training materials, including a tool-kit. This report presents a global SWOT analysis and also an overview of the national situations, presenting commented SWOT national analysis on the countries that are part of the Health C consortium.



Background Report

The background report is the result of a desk research conducted by partners aimed at generating a common understanding on the respective health systems and the way in which they operate in an emergency situation. An overview of relevant existing partnerships and mechanisms at international and EU level is also provided.

Setting up the basis for the future work to be carried out, the overview of the different national contexts supports partners in the analysis of competences and needs of the target groups and in the design and development of the training course and the related materials, which constitute the main objective of the project.

Best Practices Handbook

The good practices handbook presents some relevant good practices collected and that were used to build additional resources included in the toolkit. Among the better practices identified it is possible to find communication models illustrating communicational processes such as "*The Crisis and Emergency Risk Communication Model*" or the "*Three stage approach and Situational Crisis Communication Theory*". The better practices includes also examples on how to communicate adequately using the traditional media (journalistic rules, preparing press releases, Do's and Don'ts in communication, etc.) and also the social media.





Focus Group Findings

Three different Focus Groups were promoted in 3 partner's countries (GE, IT and PT). The Focus Groups report presents the guidelines used for implementing the meetings, including recommendations for preparing the focus groups, inviting participants, defining the activities to implement, etc., as well as a summary of the most relevant discussions and findings, comparing the outcomes. The data presented is divided in the answers to the following key questions: i) which challenges and problems have health authorities and health professionals identified in health crisis communication in Europe? ii) Which solution do the health authorities and health professionals suggest to improve the health crisis communication in Europe?

Communication Guidelines

The report on Communication Guidelines covers the needs of crisis communication considering different realities of the partners' countries. These guidelines will also be used as additional resources for the course participants and included in the tool-kit.

Besides, this report also presents an analysis of some of the survey findings, in the part related to the usage of ICT based tools and of e-Learning courses by the target groups, allowing the consortium to better understand the features to develop and to include in the training platform.



Training Course “Communication in Health Emergency: All You Need To Know”

The course materials are available online through the HEALTH C eLearning platform, currently found at <http://healthcmoodle.eu/>, including all the content and additional resources developed by the project. The platform is ready to be easily installed and moved to other servers, thereby make it easier to continue to make use of the project's tools and materials, after the end of the project.

The HEALTH C course includes contents **for improving communication capabilities and skills during a health crisis or an emergency situation**. The content is designed for blended learning delivery, with an introductory face-to-face session, as well as detailed content structured across 3 modules: **Face-to-face session; Module 1: Communication processes and skills; Module 2: Interacting and communicating with the traditional media; Module 3: Use of social media in crisis communication**. Each module is divided into four lessons that organize the content into a meaningful structure, and at the end include a Module Conclusion designed to summarize the module's main information, as well as an Evaluation questionnaire designed to obtain feedback from learners on the module they have just finished. These will helped us to analyse the work carried out during the project and to identify areas of improvement for future work. Each lesson within the modules includes a Self-Assessment questionnaire, designed to help learners evaluate their work and their recently acquired knowledge. We believe that the self-assessment process also improves the learning and user experience during the course. Moreover, each lesson includes a source references used in the content development of the lesson, thereby making it easier for users to find the related sources, should they wish to study specific topics in greater depth.

Toolkit

The purpose of the toolkit is to increase the range of resources on offer for the community of professionals involved in the emergency communication process. This Toolkit, which can be used on a daily basis, is a set of guidelines summarizing the key points to remember when communicating in an emergency or crisis situation. This Toolkit covers all the content modules, from general communication aspects, key aspects of the traditional media and guidelines for using social media. In the next section, there is an overview of all the information included in this toolkit. Each resource is aimed at specific professionals to help them in their daily activities. This said, anyone interested in communication during a health crisis or emergency may find it useful to review the content so as to better understand their own work and the work of others. This output is available for download in the website, training platform and USBs.



Report on Pilot Course Organisation

As mentioned before, under the HEALTH C project, a pilot course was organised in 4 different countries. The course was held using a blended learning approach and integrating the use of the tool-kit. The pilot involved approximately 58 participants in the face-to-face sessions; and 119 in the online part. The participants were mainly health professionals, communication experts, and personnel from civil protection organizations. The piloting of the training course and of the tool-kit, allowed the consortium to test and validate the final project results and assess if they meet the real needs of the target groups. In addition, the scale of the pilot courses allowed for one-to-one interaction between trainers/tutors and learners. This information was gathered and analysed in this report allowing the consortium to better understand the feedback from the participants and the potential necessary improvements.



Quality Assurance and Evaluation Plan

The Quality Assurance and Evaluation Plan is an internal document aimed at ensuring consistency and compatibility of the project with its assumptions and goals, efficient achievement of its objectives and practical applicability of project outcomes and deliverables. Consequently the quality management will support the project management and contribute to minimizing of project and quality risks.

This plan includes quality guidelines outlining project timing, quality procedures, deliverables evaluation and review processes. Included in the plan it's also possible to find the evaluation questionnaires being used for assessing the partners meetings and to assure the monitoring of the project progress. The information gathered during this evaluation process was organized in several other reports developed for internal use and monitoring of the project.

Exploitation Plan

The final version of the Exploitation Plan on the Health C project was released at the end of the project providing an overview of the project exploitation activities. It aims to be used as a guide to all partners highlighting the details on partners' activities and responsibilities'. This final version contains partners' intentions towards exploiting the project results to support their own business or activities.



Dissemination Plan

The Dissemination Plan presents the communication strategy and supporting partners' dissemination activities. It provides guidelines and instructions for partners' continuous dissemination activities and also an overview on the project visual identity and logo as well as a presentation of the most relevant dissemination instruments to be used and activities to be performed. A calendar and distribution of tasks is also presented as well as monitoring and evaluation scheme.



Dissemination Materials and Dissemination Report

This deliverable presents the dissemination materials produced as well as some tips for its usage, allowing partners to have access to an organized and harmonized set of tools and guidance. It covers the following materials:

- A4 Info Sheet presenting the project
- Website
- Poster
- Brochure
- e-Newsletters
- Brochure for the final conference



Also a set of **dissemination materials** were developed in order to support partners' dissemination and exploitation activities and to create a uniform approach when communicating outside the consortium.



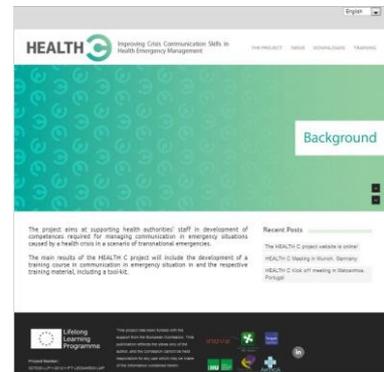
A4 informational Sheet

Since an initial stage of the project that an A4 informational sheet that could be printed and delivered by hand as if it was a project presentation brochure, or be sent by email in *pdf format was developed.

Two colour versions were created including information on: overall project objectives and main expected results, indication of the project target groups and beneficiaries' and presentation of the partners.

[Health C website \(http://healthc-project.eu/en/\)](http://healthc-project.eu/en/)

The project website is one of the main dissemination tools in use in the framework of the project and after it ends. The website offers: i) Project brief description, presentations of project partners, aims, objectives, results and links to other resources; ii) News area where posts were included about the project progress but as well on the project main theme: crisis communication in health emergency management; iii) Download area where the dissemination materials as well as the public deliverables are available for consultation; iv) Training informational area where the presentation of the training course and of the tool-kit is available.



[Project Poster](#)

The project poster aims to present briefly the project objectives and its main thematic area as well as providing the consortium contacts, providing stakeholders and the public in general of contacting directly the consortium members.

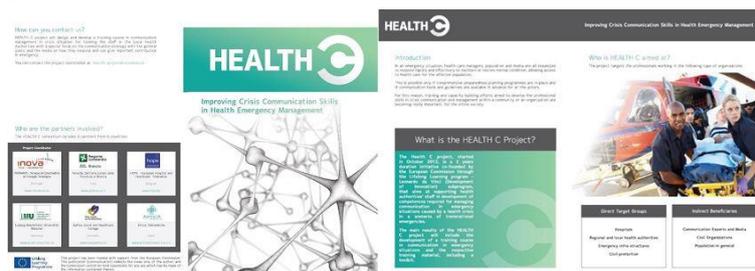
It was used in events and distributed to public bodies of the public sector interested in the project, generating awareness and interest for the Health C project.

[Project Brochure](#)

The project brochure is the visit card of the project, and was delivered and sent (in paper and digital version) to the various stakeholders, allowing a fast understanding of the project's aims and objectives and also to present the project partners. The brochure is available in electronic and paper version allowing its delivery in face-to-face events and also by email.

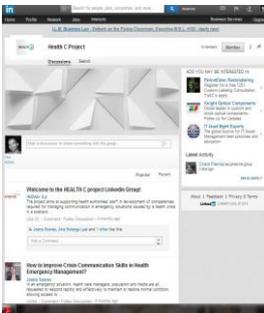
This version was used during the project's life time to promote awareness and interest on Health C project and will has download version at the project website. It sets out the project's objectives, the consortium members, expected impact, the target groups, contact information and further information channels (highlighting the project website).

An English version is available aimed at being used in all possible situations and contexts and in different countries. However, bilingual versions are also available with the information in English and in partners' languages allowing its distribution to national contacts.



Project Newsletter

During the project 2 “official” eNewsletters were developed in order to inform about the project main achievements – guidelines and training materials/course. The objective was to perform a major release via emailing (digital version), face-to-face events (paper based version) and posted on the project website news on the development of the Health C project, generating interest and awareness to the project and also sharing the project results and knowledge. Besides these newsletter also target and direct mailing was made to the targets as it proved to be more efficient than mass mailing releases.



LinkedIn Group

A LinkedIn Group was created to promote the project and aiming to facilitate networking activities at European Level, allowing increasing the project awareness in social media.

4. Partnerships

The consortium has been gathered with the intent to serve the main objectives of the project and to ensure its successful and smooth implementation. It consists of 6 partners from Portugal, Italy, Belgium, Germany, Denmark and Spain that collectively represent a balanced mix of skills and expertise – development and integration of ICT, Research and Development, Communication in the health sector knowledge, Management and Training Competencies. This consortium shares the following key-success factors:

- Valuable Communities of relevant contacts;
- Well-combined variety of institutions;
- Skills and competences for the delivery of results.

The Health C partnership was organised to participate in this project due to the complementary skills, expertise and competences within this project's team.

It is also important to highlight that this consortium assures a good geographical coverage, including countries from North of Europe (Denmark), Central Europe (Germany and Belgium) and Southern Europe (Portugal, Italy and Spain). It is also remarkable the inclusion a non-governmental organization with a large network of relevant stakeholders in the Health sector, enlarging the potential of a higher representativeness of the different European realities and also enhancing the potential of the dissemination and exploitation of the project. Looking at partners profiles it's important to highlight the main profile of each one:

	<p>P1 - INOVAMAIS - Serviços de Consultadoria em Inovação Tecnológica, S.A. Portugal www.inovamais.pt</p> <p>INOVA+ is the Portuguese leading company in the field of the promotion and management of international projects on Innovation, Training and Research & Technological Development. INOVA+ has a wide experience in Research and Technological Development projects in ICT for Health, Training actions and project management and will offer its experience in the training development, training materials and its technological supports, project management, dissemination, and results exploitation.</p>
	<p>P2 - ASL BRESCIA - Azienda Sanitaria Locale della Provincia di Brescia. Italy www.aslbrescia.it</p> <p>ASL Brescia is one of the largest Local Health Authorities in Italy located in Brescia province in Lombardia region. It operates autonomously with regard to organization, administration, management of assets, accounts, management and technology, in order to guarantee health services. Its aim is to investigate the population's health needs and the weight of the most common risk factors for acute and chronic diseases in the area, to plan the health services required to respond to the population's health demands, to pay the hospitals and other local authorities for the services they provide, and to evaluate the effectiveness, safety and cost-benefit ratios of the health services provided according to standards of quality. ASL Brescia has knowledge and specific needs for training in the preparedness and response to tackle health crisis.</p>
	<p>P3 – HOPE - European Hospital and Healthcare Federation Belgium www.hope.be</p> <p>HOPE is a European association and that includes national hospital associations or representatives from national hospital owners' organisations of the EU-28 Member States as well as Serbia and Switzerland as observer members. HOPE members are covering almost</p>

80% of hospital activity in the EU and almost all the research developed in hospitals. HOPE mission is to promote improvements in the health of citizens throughout the EU and a uniformly high standard of hospital care to foster efficiency, effectiveness and humanity in the organisation and operation of hospital services and of the health systems within which they function. HOPE is pursuing its mission through information, representation, exchange, study, education and research activities. In the field of management of crisis and respective communication, HOPE has recently published “The Crisis, Hospitals and Healthcare”. HOPE has also participate in the advisory board of REACT “Response to Emerging infectious disease: Assessment and development of Core capacities and Tools” a European project co-financed within the public health programme.



P4 – LMU - Ludwig-Maximilians-Universität München | Germany | www.en.uni-muenchen.de

LMU is a public entity foundation with 18 faculties, being one of the leading research universities in Europe. The “Institut für Kommunikationswissenschaft und Medienforschung” as part of the faculty for social sciences is one of the largest and most successful communication departments in German-speaking countries. Its competencies reach from journalism and public relations to media effects. It is a member of the initiative “Munich Center of Health Sciences” combining substantial competencies from various disciplines in the field of quantitative health sciences aimed to improve health and health care. It has gained substantial competencies in health and risk communication, specifically communication and dissemination of health risks and health knowledge, health campaigning and evaluation of mediated health and risk communication.



P5 – Aarhus Social and Healthcare College | Denmark | www.sosuaarhus.dk

Aarhus Social and Health Care College, based on the International Department’s long-standing experience in implementing EU projects at all levels, has a relevant experience in delivering the project’s quality assurance and evaluation package. It also has specialized competence in developing high quality of pedagogical and didactical competences among a group of multimedia designers – to make sure that the college have both the needed competences among multimedia designers and to provide among teachers, to develop, produce and use high quality based educational material. A strong experience in evaluation and quality assurance activities has been developed.



P6 – Artica Telemedicina | Spain | www.articatelemedicina.com

ARTICA Telemedicina was created with the objective of bring to the market technological solutions for the health sector. ARTICA applies its knowledge on technology in medicine, health and social sectors and will contribute to the project by developing adequate tools for health systems based in new technologies to improve health care and medical work. The working team of ARTICA consists of professional profiles highly qualified with extensive experience in the fields of research and development, participating in many European projects and clinical trials.

5. Plans for the Future

After 2 years of project implementation, the main objective of the consortium right now is to (continue to) implement a set of combined efforts to assure the maintenance and further development of the outputs and activities after the end of the project. This includes a comprehensive range of activities aimed at reaching the project target groups and final end-users of the HEALTH C project. To achieve this, the following points were considered:

- Since the beginning of the project, the target groups/end users/public and stakeholders of the project's results were clearly defined and involved in the project activities namely in the conception and testing of the materials;
 - Continuous efforts were implemented during the project implementation to ensure that these identified target groups/end users/public and political stakeholders were involved and deeply engaged in the project activities specially the pilot course implementation;
 - A detail planning of how during and after the end of the project the results will be exploited and sustained was discussed among the partnership;
 - The main goal is to guarantee that the project results are available, visible, used and even improved after project conclusion;
 - It's also essential to ensure that the networks created by the project are enhanced and continue to be used and updated in a sustainable way;
 - Also it's crucial to ensure that the transfer of knowledge and methodologies is set up.

Therefore, the **Exploitation Strategy of the HEALTH C project** was defined in order to:

- Plan a process with a comprehensive range of activities able to reach the project target groups and the final end-users of the HEALTH C project;
- Present the project results with higher exploitation potential and provide plans for its use and exploitation;
- Highlight the positive impact of the project on the defined target groups;
- Assure the sustainability of the project results;
- Contribute to further develop, improve and increase what has been done in terms of materials, activities and results.

Following the above axes of this strategy, it was possible to analyse and select a set of project results that have a higher exploitation potential, namely:

- ✓ Project Website; Networks of Contacts; and Other communication materials;
- ✓ Good Practices Handbook and Guidelines for Communication;
- ✓ Training Course Materials and Toolkit;
- ✓ Project Methodology/Work plan and Lessons Learnt.

It was also made an analysis of the **exploitation tools and means available for the HEALTH C partners and that will be used to facilitate sustainability of the project results**. Those include:

- ✓ The HEALTH C Website; flyer and USBs;
- ✓ Participation in events, workshops and conferences;
- ✓ Promotion of the project in LinkedIn;
- ✓ Consider further improvement of project results;

- ✓ establishment of synergies with relevant projects/initiatives,
- ✓ And, transfer activities/methodologies (to other sectors/fields, languages, countries, etc.), in particularly considering its application/customisation for other areas like crisis communication in schools and in the security field (for first responders).

Finally, this strategy resulted in the definition of a set of concrete actions (included with more detail in the exploitation plan) to be implemented, which represent a real commitment and engagement of the partners to exploit the project results.

6. Contribution to EU policies

The Health C project achievements will contribute to the EU policies related with employment and lifelong learning through the creation and testing a vocational training course in a very demanding and specific area/sector where there's a lack of resources or solutions. In detail, the project results will contribute to:

A. Reinforce of the role of lifelong learning to social cohesion, active citizenship, intercultural dialogue, gender equality and personal fulfilment.

Intercultural dialogue is one of the basic aspects to assure prevention and an adequate management of conflicts and emergency and for assuring social cohesion. Thus the Health C project by improving communication skills and competences of the target groups is taking the communication issues to a higher level and promoting the adoption of better practices and common guidelines to improve the communication in the crisis and emergency scenarios (as well as the monitoring processes of the traditional and social media during those periods).

B. Encourage the best use of results, innovative products and processes and to exchange good practice in the fields covered by the Lifelong Learning Programme, in order to improve the quality of education and training.

The project aims to deliver an innovative communication training system and package including a blended learning training course structure, tailored learning contents and a tool-kit with additional resources. By other hand the project results will promote the acquisition of new skills and competences by managers and staff of the health sector that is usually involved in the managing the emergency scenarios. This will have a relevant impact in the increase of the qualifications of the staff of this sector and thus will contribute for better jobs and for retaining qualified persons at the labour market.

Considering the project thematic area, we must highlight its importance in the actual context of a globalization and where information circulates faster than ever across borders without verification/control. In this sense the threats resulting from health crisis or emergency can easily cause cross-border problems and have international impact. For this reasons, the EC established already some mechanisms supporting EU-wide coordination on crisis management.

In an emergency situation, health managers, communication managers, population and media are all requested to respond rapidly and effectively in order to maintain or restore normal conditions. This is possible only if extensive preparedness planning programmes are in place and if communication tools and guidelines are available in advance for the all actors involved. For this reason, training and capacity building efforts aimed to develop the professional skills in crisis communication and management within a community or an organization are becoming really important, for the entire society.

However it is mostly noticed that there is a large tendency for each of the countries to develop their own risk management and communication policies. Despite the fact of each one's policies be effective, there is a lack of standardization and interoperability at EU scale and thus, in a real scenarios, lack of coordination and communication can be the bigger issues and cause even more damages that the crisis or emergency situations by themselves.

Considering this perspective, initiatives such the Health C project are essential to provide a backbone for developing transnational plans to address crisis management communication in the health sector through coordination mechanisms or processes, analysis of information using the same approaches, tools and indicators, and communicating effectively at a high

level of efficiency. In fact, the Health C aims at developing a specific knowledge in a given area/sector but that can be used all over Europe.

The main motivation of the project is related to the fact that nowadays the knowledge society and social media channels and instruments open new perspectives creating conditions for generating new ways to respond to emergency as well as new competences and new skills. However, the new social media channels and instruments are also causing several constrains and difficulties to the daily activities of health and communication managers when facing a crisis or emergency scenario. Apart from communicating adequately using these new channels and tools is also important to know how to better monitor them and the information that there circulates at a speed never seen.

As a consequence, Health C aims to contribute to improve this situation by finding a common knowledge and by developing common guidelines on communication in health emergency management, offering an innovative training course and a tool-kit of additional resources. This innovative approach will focus also on how health authorities can improve the cooperation with the others actors involved in the emergency (usually the population and the media) in order to deal with the emergencies condition in the best and quickest way not only improving their communication standards but also monitoring better different sources of information.

