

Annex13

Dissemination Plan Simpatie (WP8)



Lead Partner: CBO

Involved partners: All partners

Table of contents:

1. Introduction	3
2. Overview Dissemination Plan	4
3. Overview Deliverables and messages to communicate	5
4. Communication methods.....	6
5. Target groups	7

1. Introduction

The dissemination plan is part of Work Package 8 of the Simpatie project. Please find below some general information on this work package.

1. Results to be achieved

Objectives:

Results are disseminated to the wider public and involved parties.

2 Deliverables

Dissemination targets as defined in strategy (dissemination plan) deliverable D7.4

3. Methodology

Web-based communication has been selected as the main dissemination instrument. An interactive website has been developed and all project reports and deliverables have been made accessible. In addition the website has functioned for the duration of the project as a project management tool. The technical details of building a website and transforming reports into easily accessible repositories, fall outside the scope of this final report though and therefore will not be described here.

During the negotiation phase of the project, DGSANCO requested to develop a dissemination plan for project results also. Therefore, early February 2006 two professional communication companies have been invited to submit a proposal to develop a communication plan for Simpatie project based on the terms of reference that were sent to them. For the terms of reference, see Annex11 of the final Simpatie report. The company that was selected developed a dissemination plan. Afterwards the project partners provided input for a communication plan using the plan of the company as a basic document. The final communication plan was developed using input from all partners.

4. Description of work

A website was set up during the first year of the project to inform the public and to enable dissemination of the project results. The website contains general information on the project, as well as all reports of the different work packages. Furthermore all WP reports have been transformed into a format that makes the information easily accessible for the visitor of the website.

This dissemination plan has been developed using the input from the partners. This included advice on how to involve the organisations and their constituencies that are in the network of the partners.

2. Overview Dissemination Plan

In order to make the communication that can be done based on the Simpatie project clear in overview, a table has been made that distinguishes target groups, deliverables / messages to communicate, and communication methods (see Table 1).

Overview Dissemination plan

Target group*	Deliverables / messages**	Communication methods***
Policy makers in health care and related areas	1.3, 3.1, 4.1, 4.5	1, 2, 3, 4, 6, 7, 10, 13
NGO's (representing parties relevant for health care)	1.3, 1.4, 1.5, 3.1, 4.1, 4.5, 5.1, 6.1	1, 2, 3, 4, 6, 7, 13
Broad (lay) public	1.3, 1.4	1, 8, 9
Quality Professional Community	1.3, 2.1, 2.2, 3.1, 4.1, 4.5, 5.1, 6.1, 7.1	1, 2, 3, 4, 6, 7, 8, 12
Scientific community	1.3, 2.1, 2.2, 4.1, 4.5, 5.1, 6.1, 7.1	1, 2, 3, 4, 6, 7, 8, 12
Project participants and relations	All	1, 2, 3, 5, 10, 11

*See paragraph 5

**See paragraph 3

***See paragraph 4

Some remarks here:

- WP 2 will be available on the Simpatie website as a database. This will probably be the way in which the WP2 will be used most. Therefore the WP2 report does not appear often in the table above.
- Communication methods: this subdivision has been made for the total group. Not all methods may be applicable to all members of a certain group, however in general terms they are 'look-a-likes' and should be approached in the same way where possible.

In the remainder of this documents the different columns of the table above are further elaborated on:

- On the next page an overview is given of all the outputs of the project (column 2 of the table above).
- Then communication methods are displayed
- Followed by further elaboration of the different target groups of the overview above

3. Overview Deliverables and messages to communicate (Table 2)

Overview of Deliverables and messages to communicate

Nr. for overview table	WP Messages / Deliverables to communicate	Type of report	Lead
1.1	1 Final Simpatie report	Full deliverable report	CBO
2.1	2 Final report of the mapping exercise, work package 2 of the project	Full deliverable report	ESQH
2.2	2 Appendix: Good practice in patient safety in Europe – A compendium	Full deliverable report	ESQH
3.1	3 Recommendation Rec(2006)7 of the Committee of Ministers to member states on management of patient safety and prevention of adverse events in health care	Full deliverable report	CoE
4.1	4 Patient Safety Vocabulary (ENGLISH)	Full deliverable report	ESQH
4.2	4 Patient Safety Indicators	Full deliverable report	ESQH
4.3	4 Appendix – Characterisation of the 42 established PSIs	Full deliverable report	ESQH
5.1	5 Improving Patient Safety through external auditing	Full deliverable report	HAS
6.1	6 Improving patient safety in healthcare organisations	Full deliverable report	CBO
7.1	7 Conference report “Building a Strategy for Patient Safety in Europe” incl. the Strategy Framework	Full deliverable report	CPME
8.1	8 Dissemination plan	Full deliverable report	CBO/All
1.3	1 Press Release (one for lay public and one for policy makers)		CBO/All
1.4	1 Factsheet		CBO/All
1.5	Standard Powerpoint presentation on Simpatie project 1	Standard Powerpoint presentation on Simpatie project	CBO/All
4.4	4 Patient Safety Vocabulary (Other languages?)	short version or full report	ESQH
4.5	4 Patient Safety Indicators	Short version folder	ESQH
4.6	4 Patient Safety Indicators	Short lay version folder	ESQH
6.2	6 Improving patient safety in healthcare organisations	Book with complete chapters	CBO

4. Communication methods

The communication methods that can be identified are diverse in nature. Some general principles can be mentioned before going into further detail of the different communication methods:

- In any case the Simpatie website should be considered as the core tool for diffusion of information. As a principle all partners' websites should have a visible link to the website. Then an active work of convincing organisations outside the project to do so should be undertaken.
- The major international and European conferences in the coming year could be targeted as well as national conferences but using the national member in a country to play this role. This necessitates a good analysis of potential conferences at national, European and international level.

The communication methods that have been identified are displayed below (Table 3).

Nr.	Methods of approaching / Communication methods
1	Simpatie website
2	Websites partners/organisations
3	Newsletters partners/organisations
4	Presentation at conferences
5	Direct mailing
6	Direct personal contact
7	Press release (EU Policy Press)
8	Press release (General Press)
9	Interview by journalists
10	Distribute paper format of WP reports
11	Books to be ordered via Simpatie website (and partner websites)
12	Organisation of meeting / hearing
13	virtual communities on lifelong learning (www.trainingvillage.gr www.cedefop.eu.int)

Ad 2: refers to a link from partners or other organisations' websites to the Simpatie website, or simply displaying of information on their websites.

Ad 7+8: Two different press releases can be made, one for general public and one for policy makers

Ad 10: A paper version of WP reports can be distributed at events of the Simpatie partners

Ad 11: WP reports can be advertised for on the Simpatie website, but also on the partners' website

Ad 12: These refers to meetings of existing constituencies where Simpatie can be invited to, e.g. EP hearing, etc.

5. Target groups

This overview provides a list of key international/European organisations and national bodies with a strong international profile. In addition it is envisaged that the project partners would disseminate findings to their national contacts that would then carry on with local information (also in national languages). This is being facilitated with centrally developed inventories and overviews.

The different target groups mentioned in the Overview (see chapter 2) are elaborated on in this chapter. The following tables are portrayed:

- Table 4. Policy makers
- Table 5. Broad (lay) public
- Table 6. NGOs
- Table 7. Quality Professional Community
- Table 8. Scientific community

Table 4. Target group: Policy makers
Policy makers in health care and related areas
WHO - World Alliance for Patient Safety
WB (World Bank)
International Labour Organisation
OECD
Council of Europe
European Commission: DG SANCO
European Commission: DG Social Affairs
European Commission: DG RTD – Research
European Commission: DG EAC - Education and Culture
European Commission: DG Enterprise
OSHA (European Agency for Safety and Health at Work)
ECDC (European Centre for Disease Prevention)
MEPs: Committee on the Environment, Public Health and Food Safety
MEPs: Committee Internal Market and Consumer Protection
MEPs: Committee Employment and Social Affairs
EU Member States Permanent Representation
High Level Group
European Health Policy Forum
National Ministries of Health

Table 5. Target group: Broad (lay) public
Broad (lay) public
BEUC (consumers)
Members of WHO World Alliance for PS 'Patient Safety Champions'
National patient organisations with stated interest in Patient Safety (see mapping exercise)
German Coalition for patient safety (APeV)
Danish Society for Patient Safety
National Patient Safety Agency (NPSA, UK)
National Platform for Patient Safety (Netherlands)

Table 6. Target group: NGOs
NGO's (representing parties relevant for health care
CPME (doctors)
PWG (junior doctors)
UEMS (medical specialists)
UEMO (General Practitioners)
AEMH (hospital physicians)
EMSA (Medical Students)
WMA (World Medical Association)
EFN (Nurses)
HOPE (hospital organisations)
PGEU (Community pharmacists)
EAHP (Hospital pharmacists)
EFPIA (pharmaceutical industry)
AIM (insurers)
ESIP (insurers)
EPF (patients)
IAPO (patients)
LMCA (patients)
AvMA (patients)
National patient organisations with stated interest in Patient Safety
EHMA (health management)
EPHA (public health)
WFME (medical education)
EHTEL (health telematics)
Eucomed (medical devices)

Table 7. Target group: Quality Professional Community
Quality Professional Community
ESQH
ISQuA
Accreditation institutes
Health Foundation
Picker institute
WHO observatories
Kings Fund
Karolinska Institute
Medical (News) Journals:
Journals/Newsletters of national members CPME
Journals/Newsletters of 'Provider' category under NGOs
Online Medical News:
Medical News Today
Reuters Health
Euractiv, Health
Health First Europe

Table 8. Target group: Scientific Community
Scientific community
Expert group mapping exercise (WP2)
Universities
Research Centres
Researchers
<i>Scientific Medical Journals:</i>
Public Health Journal (Univ. Oxford)
Lancet
BMJ
BMJ: Quality and Safety in Health Care Journal
Oxford International Journal for Quality in Health Care
Emeralds International Journal of Health Care Quality Assurance
ISQUA The International Journal for Quality in Health Care
Elsevier Science: International Journal for Quality in Health Care
Journal of Patient Safety
The Joint Commission Journal on Quality and Patient Safety