D9.2 – Dissemination and Communication Plan

WP9 – Dissemination and Exploitation

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Table of Contents

List of Acronyms

EoL	End Of Life
EC	European Commission
EU	European Union
GDPR	General Data Protection Regulation
H2020	Horizon 2020
IPR	Intellectual Property Rights
KPIs	Key Performance Indicators
LTC	Long Term Care
MOOC	Massive Open Online Course
NGO	Non-Governmental Organisation
PC	Project Coordinator; Palliative Care (depends on context)
PM	Project Manager
PoD	Public Outreach and Dissemination form
QoL	Quality of Life
SME	Small and Medium size Enterprise
WP	Work Package
WPL	Work Package Leaders

InAdvance

1. Executive Summary

InAdvance project introduces a new model of early palliative care aimed to older people. The project focuses on the impact acute and chronic pain, life-threatening non-communicable diseases, side effects and consequences of diseases and their treatments have on Quality of Life (QoL).

The Dissemination and Communication Plan is a public report in the list of deliverables of InAdvance project. The **purpose** of this deliverable is to establish a 4-year strategy and framework for future activities for InAdvance project brand building and increasing the impact of the project. This deliverable is part of the Work Package 9 (WP9) Dissemination and Exploitation, which is led by Salumedia. Within the project's duration the WP9 will submit a total of three deliverables: D9.1 Project Website and Social Media Channels, during M3; D9.2 Dissemination and Communication Plan, during M6; and D9.3 Innovation and Exploitation Plan, during M12.

The overall **objective** of the activities is to ensure the sustainability and transferability of project results, both during and also after the project duration. **Dissemination** will be focused on recruiting samples and raising the impact of the project at medium-term and sustainability at long-term, while the **Communication** strategy will aim at enhancing the public engagement.

The **strategy** is built around three evolving stages: *1. Implementation, 2. Development, and 3. Sustainability*. It will start by spreading the awareness of PC and reaching as many stakeholders as possible for supporting the recruitment. As continuation the focus shifts on spreading the project results, and also reinforcing the recruitment and further engaging healthcare professionals. Towards the end of the project the emphasis will be on enforcing the networks of decision makers, politicians, investors, as well as healthcare professionals and researchers.

This document is built using the Integrated Marketing Communication strategy. It starts by 1) analysing the current situation and 2) the objectives in terms of communication and dissemination of the InAdvance project. Based on the objectives, this deliverable introduces 3) the identified strategy to achieve the objectives, 4) the action plan, and in the end of this document we define 5) some control mechanisms to measure the success of such activities during the project.

Successful Communication and Dissemination will require active participation of all the Work Packages (WPs) during the entire project. **This plan is a dynamic document and will be updated whenever needed,** including new instruments or modifying procedures and protocols if it is required as the project advances and if the set qualitative and quantitative metrics are not reached. Integrating the received feedback and the needed modifications will be a consequence of its execution.

2. Introduction

Dissemination is a central part of the European research and innovation funding Horizon 2020 (H2020) program. This plan defines the dissemination and communication strategy and actions that will be used for the InAdvance project to increase its overall impact. The plan is followed up, revised and updated regularly.

The InAdvance project introduces a new model of early palliative care (PC) aimed to older people. The project focuses on the impact acute and chronic pain, life-threatening non-communicable diseases, side effects and consequences of diseases and their treatments have on Quality of Life (QoL) among patients and their families, as well as the performance at service providers level.

The overall aim of the InAdvance project is to improve the benefit of the PC interventions for patients, families and caregivers, and professionals through the design of effective, replicable and cost effective early PC interventions focused on and oriented by the patients.

Communication and Dissemination will require interaction with all the Work Packages (WPs) during the entire project. For example the interaction between the project and patients' representatives and end-users in WPs that require end-user feedback (e.g. in WP3, WP4, WP5, WP6, WP8), support in further technical developments in WP4 and WP7, as well as the cooperating in dissemination of scientific publications and reports from all WPs aiming at particular audiences (e.g. patient associations, PC community).

Consequently, each partner will be committed to support dissemination activities across their ecosystem of stakeholders, given the fact that the main objective is to enhance the impact of the project communicating its objectives and results, and to support the recruitment of patients and end-users. In addition, project partners need to keep record of all their dissemination activities and report them to the WP9 leader SALUMEDIA, both as they occur as well as afterwards in each internal reporting period.

The structure of this deliverable 9.2 Dissemination and Communication Plan is based on the Integrated Marketing Communication strategy, and consists of the following 5 parts:
1. Situation Analysis – Where are we now?
2. Objectives – Where do we want to be?
3. Strategy – How do we get there?
4. Action Plan – What do we need to get there?
5. Control – How do we monitor performance?

3. InAdvance Project Background and Current Position

InAdvance project joins together 11 partners: five research partners (two of whom have direct access to services for trial sites), a hospital, a healthcare system, a NGO, two Small and Medium Size Enterprises (SMEs) and a EU-wide organization (of non-profit organisations of and for people aged 50+). Together the InAdvance project partners cover scientific, clinical, social and technical competences and also gather the perspectives and experiences of different professionals necessary to develop comprehensive research, approaches and protocols related to PC provision and policy making.

InAdvance project started on the 1st of January 2019 and at the time of writing this deliverable the project is still in its early stages. So far we have created the website for the project, established all the previously planned social media channels (in Twitter, Facebook, LinkedIn, and Research Gate) and published a press release. Three local newspapers in the area of Valencia (Spain) have interviewed the project Coordinator the University of Valencia.

4. Purpose and Scope of the Dissemination and Communication Plan

The Purpose of this deliverable is to define strategies for raising awareness and engaging audiences, and how to be more effective in dissemination and communication. This includes a clear communication strategy that identifies the relevant audiences to target and the appropriate channels to use for that throughout the project duration.

The Scope of this plan is for 4 years, and the plan is revised annually during months 12, 24, 36, and 48. In addition all consortium members are asked to support the WP9 by reporting single upcoming activities that can be communicated instantly as they happen through different social media channels through filling and sending Appendix 1 to WPL; as well as through internal reporting with Appendix 2 that needs to be filled and sent twice a year with partners' dissemination activities.

The dissemination includes communication by means of a public website, forums, public health events, conferences, workshops, journals and other publications and engagement with news and posts in social media. In addition, the project aims to proactively inform and involve the intended user community to increase awareness about integrated PC.

5. Objectives

One of the over-reaching objectives of H2020-funded research projects is to reinforce the leadership of Europe in Science. Therefore, synergies and alliances between different stakeholders will be pursued within various dissemination activities.

The **Overall Objective** covering the full WP9 on Dissemination and Exploitation is to ensure the **Sustainability and Transferability** of project results, also beyond the timeframe of the project.

Dissemination will be focused on recruiting samples and raising the impact of the project at medium-term and sustainability at long-term, while the **Communication** strategy will aim at enhancing the public engagement.

5.1 Dissemination Objectives

The three main dissemination objectives are:
1. To disseminate the value of InAdvance interventions in PC.
2. To disseminate the value of InAdvance to different stakeholders (defined later in paragraph 6.2 Stakeholders).
3. To maximise the impact of project results in all their forms, e.g. educational materials, software, guidelines or policy recommendations.

5.2 Communication Objectives

The main communication objectives are:
1. To raise awareness about PC among relevant audiences and the general society.
2. To raise the impact of the dissemination.
3. To contribute to the public engagement.
4. To foster community building.
5. To enhance the sustainability of the exploitation measures undertaken at long-term and, most important, after the project execution.

Communication will be impact-driven and aimed at achieving project-wide objectives. Communication activities will enhance and support the objectives of each WP. This will be done in close cooperation with the WP9 leader (SALUMEDIA) and each WPL.

Secondary objectives of communication are:
- To contribute to its long-term maintenance and the consolidation of new partnerships, networks and alliances sustainable at long-term.
- To enhance and build the project's corporate identity.

Communication activities will be aligned with the dissemination strategy and its phases and target groups, as defined in more detail below in Section 6 Strategy. However, communication admits broader means and a wide variety of topics, methodologies for reaching the general society and end-users and resources to

be used; in sum:

__While Dissemination is addressed to optimize the impact and the implementation, the Communication strategy's goal is to raise awareness and to spread information related to the main topic of the project to all target groups enhancing the dissemination performance and the project visibility.__

Communication activities are core for the successful execution of the project, and maximizing its impact. The consortium agrees to have a cohesive and integrated approach to communication in the project and to adapt language and means to each phase and group. This collaboration in communication will be a **proactive consortium-level initiative.** With that regard, each partner and WPL will be coordinating with the WP9 to update the communication plan and for achieving a unified strategy between the WPs and throughout the project's duration.

6. Strategy

The importance of strategy is to bring focus to our actions and means to reach the objectives, set up in previous Section 5. That includes the definition of strategies to disseminate the project results, and most importantly to support the outreach and impact of any project output, such as results and data.

The dissemination strategy will be fully synchronized with the WP1 of Management, which addresses the Intellectual Property Rights (IPR) strategy. Further, dissemination also supports the exploitation of the output from all WPs. Integrated communication campaigns (i.e. implemented through the combination of several communication instruments) should cover a wide variety of means in a coordinated way and must be designed specifically for one/two interrelated target groups (e.g., patient associations and end-users).

However, connections between communication and dissemination are a dynamic process and must be coordinated and impact-driven since the beginning. This, for instance, will facilitate that open access published results are disseminated in a timely manner in social media channels of the project to relevant stakeholders. Further, online communication efforts (e.g. blog posts, infographics) can rely on deliverables to create communication materials in what is normally defined as "content marketing".

Therefore, the **Dissemination Strategy** will foresee three stages in which the **Communication Strategy** will also evolve:
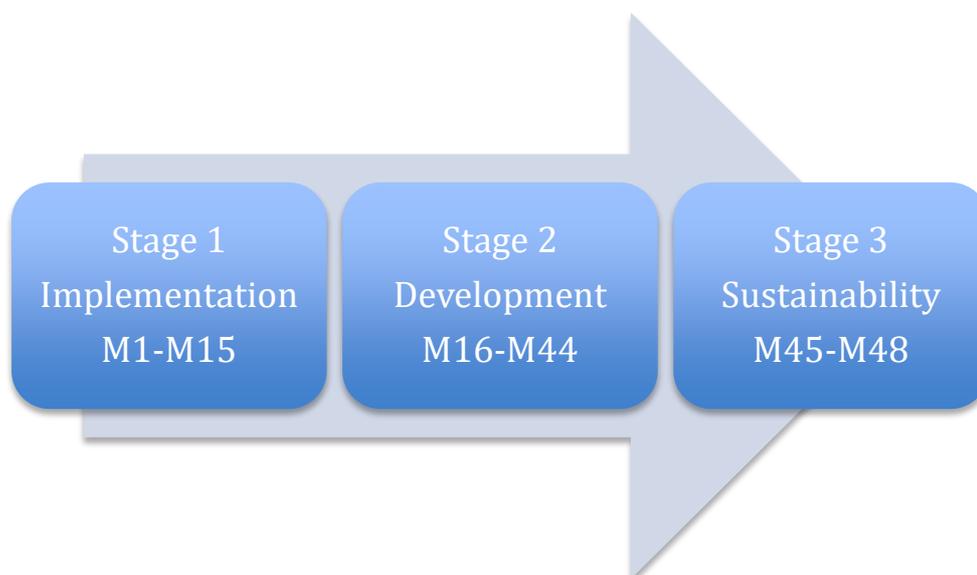

Figure 1 Three stages of dissemination strategy

6.1 Target Audience

Based on the preliminary stakeholder analysis, key stakeholders have been identified that need to be engaged with for maximising the impact of the project

and forming the InAdvance community. The project will engage in particular with the following target groups:

1. **Patients and relatives or informal caregivers:** Relatives of patients with chronic conditions requiring PC, patients.
2. **Civil society:** Older people's and patient associations, informal carers organizations, older/patient advocate, NGOs, etc.
3. **Care professionals and health and social care organizations:** Nurses, geriatricians, PC specialists, general practitioners, hospices, primary care centres, medical and scientific associations, social services, social workers, psychologists, etc.
4. **Policy Makers and Health Organizations:** Decision-making bodies, such as health ministries, social affairs ministries, health insurances (at local, regional and national levels).
5. **Scientific community:** Researchers in the field of chronic conditions, PC, Ethics, Sociology of Health, Social Epidemiology, Health Economics, Health Policies, etc.
6. **Companies:** Entrepreneurs, insurance companies and investors.
7. **General society:** Citizens.

Same targets are foreseen for both the Dissemination and Communication strategies, while activities will be clearly differentiated; i.e. **dissemination** will be focused on recruiting and raising the impact of the project at medium-term and sustainability at long-term, while the **communication** strategy will aim at enhancing the public engagement throughout the project.

For maximising the impact of the project, InAdvance consortium will tailor dissemination activities and communication strategy specifically for each stakeholder segment, adapting how the project is explained and the means used for translating the results to the whole society. For example, we will take special care of using a simple and clear message when disseminating the results to the general public (direct or via mass media). In order to ensure that the dissemination strategy is well suited to the project and its targets, **multiplier groups** will be identified and engaged with, such as associations of professionals, older people and patient advocates, decision-making bodies, public administration and insurance companies. Health and social care professionals, such as nurses, social workers, geriatrists, and PC specialists will act as **multiplier actors**.

6.2 Stakeholders

InAdvance will seek a close cooperation with European organisations such as *associations of older people, patient associations*, and *medical and scientific associations*. Furthermore, we will actively look for close cooperation and participate in communities generated across other H2020 funded projects such as **PACE**: Palliative Care for Older People in care and nursing homes in Europe (funded through FP7 Programme); in particularly projects related to PC, and especially those funded in the same call (SC1-BHC-23-2018: Novel patient-centred approaches for survivorship, palliation and/or end-of-life care) such as **MyPal**: Fostering Palliative Care of Adults and Children with Cancer through

Advanced Patient Reported Outcome Systems, and **LIVE**: Living well, dying well; as well as others related to chronicity, integrated care or health in ageing; and other initiatives (e.g. related COST actions or the EIP-AHA).

The *Non-Academic Sector* will be especially targeted, including health and social care organizations, technology-based companies (and SMEs in particular), business incubators, sectorial trade-fairs, health management events, etc.

The *Academic Sector* is also important for the dissemination of the results of the project, in particular through the participation of the consortium in scientific conferences and workshops, such as the International Congress on Palliative Care or the International Conference on Integrated Care. The impact in terms of media attention and presence of relevant stakeholders (e.g. policy makers) will be a relevant factor when selecting he conferences to attend. We will focus on international conferences hosted in **Europe**, so we can promote both the project and European leadership in Science. In addition special attention is given to **national and local** events, meaning that consortium partners should identify regional events of interest where InAdvance can be promoted.

Stakeholders' interest on the InAdvance project will be encouraged through several means, such as press releases, social networks, the project website, articles in journals, etc. Early mobilisation and engagement of relevant stakeholders with focused events along the project in order to raise awareness on the project objectives and a final workshop/conference for showing them the main outcomes achieved. Dissemination and Communication activities will be increased and/or adapted if necessary.

Participation of partners in the activities of relevant international networks and initiatives in the field of chronicity, long-term care, integrated care, PC and data mining that also will have a positive impact in terms of dissemination, exploitation and transferability actions include, but are not limited to:

- EIP-AHA (European Innovation Partnership on Active and Healthy Ageing), an initiative launched by the EC to foster innovation and digital transformation in the field of active and healthy ageing.
- European Association of Palliative Care (EAPC) the main PC organisation in Europe. It provides a forum for all of those either working, or with an interest in PC throughout Europe and beyond. They organise a congress annually.
- Hospice UK, the National charity for hospice care, supporting over 200 hospices in the UK.
- Scottish Partnership for Palliative Care (SPPC), a collaboration of organizations involved in providing care towards the EoL in Scotland. SPPC membership includes all the territorial NHS Boards, all Scottish hospices, and a range of professional associations, many national charities, local authorities, social care providers and universities.
- Portuguese Continued and Integrated Care Network, a Network of public and private Organisations that provide continued care and social support to people that are in a dependency situation, either at home or institutionalised.

- Local Council for Social Action (CLAS), a council-based forum that relies on participation, representation and articulation between public bodies and private social initiative in Portugal.
- UMP (Union of Portuguese Misericordias), an "umbrella" organisation that acts as the promoter of the core values, roles and activities of the Portuguese Misericordias as well as of all the Misericordias around the world.
- European Regional and Local Health Authorities (EUREGHA), a reference networks that aims at promoting collaboration amongst regional and local health authorities in Europe.
- European Connected Health Alliance (ECHAlliance) that facilitates international multi-stakeholder connections around ecosystems in the field of health and social care.
- International Medical Informatics Association (IMIA) that can support the strategy to develop IT based solutions in a worldwide scale.
- Community of Regions for Assisted Living (CORAL), a European network of regions collaborating in the field of Ambient Assisted Living and Active and Healthy Ageing.
- European Local Inclusion & Social Action Network (ELISAN), aimed to ensure an effective and coherent implementation of social policies in Europe.
- Bulgarian Long-term and Palliative Care Society, a non-government organization for public benefit aiming at establishing and development of the long-term care and palliative medicine, of health and medical science in the interest of the patients, their families, their relatives and the society.
- European Network of Living Labs (ENoLL), which is the international federation of benchmarked Living Labs in Europe and worldwide.
- Valencia Region VLC-EIP Reference Site, a network involving healthcare, public health and research centres as well as universities or non-profit organizations and SMEs.
- Process Mining for Health Care, group aimed to promote cooperation and sharing knowledge among multidisciplinary stakeholders in the use of Process Mining technologies in the healthcare domain.

6.3 InAdvance Project Brand

For building project visibility across different stakeholders, to raise its presence and awareness, and to ensure consistency throughout the project duration, designing a brand identity of the project, i.e. project's logo and dissemination templates, is the first dissemination task that was accomplished in the first months of the project duration.

As a recommendation, when referring to the research project, it should be always as "InAdvance project" in order not to confuse it with other established companies and websites that have the name "inadvance" only. The longer reference to the project is: "**InAdvance: Patient-centred pathways of early palliative care, supportive ecosystems and appraisal standard**".

The logo of the project was agreed on after the discussion in the Kick-Off Meeting (February 2019), and in a separate Doodle poll, and is as follows:

The logo text font is Ubuntu. The main colour is **blue**, because blue brings feelings of calmness and serenity, is often described as peaceful, tranquil, secure and orderly, people connect blue to stability and reliability. We keep insisting on the fact that palliative care is about living, not about dying. It's about ensuring quality of life and dignity to people with a life-threatening health situation. The used colour blue codes are:
- RGB 103 135 183
- HEX/HTML #6787B7

The heart in the logo shows that the project cares for patients, wants to bring hope to patients in PC, and the project is for common good. The codes in the colour **red** used in the heart are:
- RGB 255 0 3
- HEX/HTML #FF0003

6.4 EU Emblem

According to the signed Grant Agreement: "Unless the Commission requests or agrees otherwise or unless it is impossible, any dissemination of results (in any form, including electronic) must:
a) Display the EU emblem, and
b) Include the following text:

'This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 825750'."

6.5 Key Communication Topics

In order to achieve a successful Public Engagement, and contribute to the education and capacity building activity framed within the project, the Communication will be focused on the following key messages:
- The health-illness continuum from chronic illness to advancing illness.
- Myths of PC: PC, terminal illness and death.
- The integration between curative care and PC.
- Social, psychological, spiritual and ethical aspects related to PC.

6.6 #Hashtag

The hashtag to be used throughout the project lifecycle when disseminating and communicating the project in social media is:

#INADVANCEproject

In addition other recommendable hashtags related to the project itself to be used are as follows:

#GeroTwitter #AgeingEqual

EU and H2020 wise recommendable hastags to be used are as follows:

#H2020 #HorizonEU #ResearchImpactEU #EUfunded #openaccess

6.7 Online Presence

Website and blog:

Figure 2 InAdvance project's website landing page

The web domain for the project is www.inadvanceproject.eu . The primary aim of the website is the dissemination; however, it could be used for communication purposes too. For example, posts on general information about PC can be published for covering white spaces in the publications calendar, when partners did not attend to any event or there is not any output to promote.
Strategy stages: 1-3

Third parties websites:
Guest posts, articles in online magazines, etc. contribute to engage a broader public and spread the knowledge about the project and, most importantly, the innovations in PC.
Strategy stages: 2 and 3

Social media channels:

![InAdvance logo]

Facebook and *Twitter* profiles communicate the project results and outputs, as well as process information and general information about PC focused on key communication topics as specified earlier above. In addition, a *LinkedIn* group and a *Research Gate* project page will be implemented aimed at health and social professionals, companies, investors and research community. Presence in other social media channels will be assessed as the project advances.

Project's established social media accounts for the partners to follow are:
- Twitter: https://www.twitter.com/@InAdvance_eu
- Facebook: https://www.facebook.com/InAdvanceProject
- LinkedIn: https://www.linkedin.com/groups/8764868/
- Research Gate: https://www.researchgate.net/project/InAdvance-Patient-centred-pathways-of-early-palliative-care-supportive-ecosystems-and-appraisal-standard
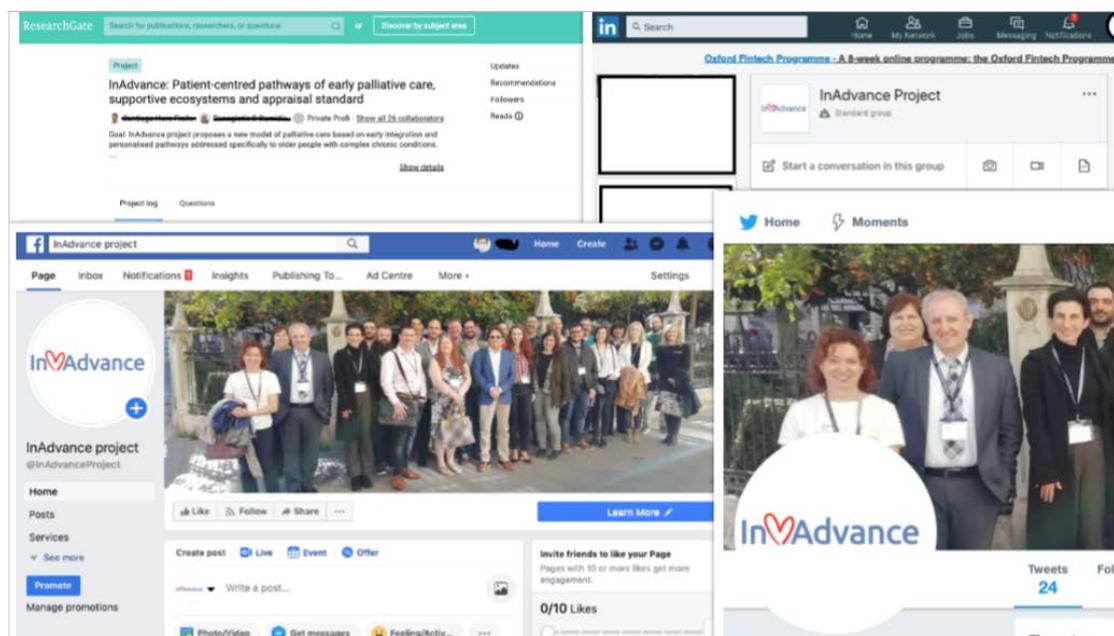
Figure 3 InAdvance project's social media presence

Additional relevant and interesting Twitter accounts for project partners to follow are: @EU_H2020 @EUScienceInnov @EU_Commission
Strategy stages: 1-3

Newsletter:
A semi-annual *newsletter* will be sent briefing the main challenges and successes of the InAdvance project to a joint and protected list of contacts. We encourage the consortium partners to forward the newsletter to their network of contacts asking them to subscribe to it. In InAdvance website there is also a form for people to subscribe to the newsletter. The form is easy to fill for users to provide us with their email. Once we got their contact, they will receive a first email for confirming their subscription. Subscription will only take place once the user has confirmed their will to be in the diffusion list. Also, at every email we send, there will be an "unsubscribe" button available to demand us to delete their contact

from our dissemination list. The list of subscribers will be registered according to the European GDPR compliance. Finally, the Terms and Conditions of use and the General Data Protection and Privacy Policy will be available at any moment to every subscriber. With all this measures, we commit to respect the GDPR.
Strategy stages: 1-3

6.8 Press Kit and Dossier

Two *press-kits* and a *dossier* joining all relevant materials and explaining the project in all languages of partners involved in the consortium will be elaborated in order to contact press, mass media and researchers for (a) asking for support in recruiting sample; and (b) wide spreading the project outcomes.
Strategy stages: 2 and 3

6.9 Press Releases, Appearances on Radio and TV

At a later stage in the project a wide variety of Dissemination & Communication campaigns, tailored to each target group and well suited to an integrated communication modality (i.e. combination of several communication instruments) will be spread. These will have required strong relations with media and local stakeholders and spreads information about the project and its results, in order to involve new stakeholders and ensure a long-term maintainability; and about PC in general terms for better informing the general society and, most importantly, end-users and patient advocates about the latest research in the field in an understandable language by adequate means.
Strategy stages: 3

6.10 Open Access Publications

Scientific dissemination includes journals, conferences, academic events and synergies, for instance: related to the algorithm development (WP2); presenting needs analysis findings; comparing the needs analysis from a cross-national perspective (WP3); presenting the InAdvance project intervention protocols (WP3); presenting the results of the trials (WP5 and 6); presenting a comparison of the study findings from a cross-national perspective (WP5 and 6); or presenting the training approach and experiences (WP4).

These dissemination activities will take advantage of the *Open Data Pilot* and the *General Data Protection Regulation (GDPR)*, which for example defines the use of open access strategies for publications.

According to the principle of *Open Science*, the results arising out of this research will be published in open access journals. Furthermore, in order to guarantee the free access and the preservation and duration of the project findings, the results will be held in a repository for scientific publications included in OpenAIRE. The rights to copy, distribute, search, link, crawl and mine will be provided under the condition of the appropriate authors' citation. When possible, the open access

clause available at the Participant Portal will be added to publishing agreements.
Strategy stages: 3

6.11 Others

In addition, a set of *posters*, *leaflets*, *flyers* and/or *informative printable materials* will be designed and produced during the project lifetime.

Additionally, the contents developed along the project (especially those under the WP4) could be transformed into *informal and non-formal education means* for improving competences of care professionals, service managers, Bachelor students (i.e. Medicine, Nursing, Social Work, etc.) or patients and families.

After the project life, *MOOC* (Massive Open Online Course) would be an exploitation strategy to be considered for InAdvance project findings. In this regard, SALUMEDIA, UPV and AUTH have long experience in MOOCs for health literacy.
Strategy stages: 1-3

Table 1 Three stages of dissemination strategy

1. Implementation			
Stage: 1		Time: M1-M15	Target audience: 1-4
Objective: To reach as many stakeholders as possible for improving and supporting the recruitment strategy. To optimise the impact reached in the following months, mainly regarding the recruitment strategy, dissemination actions and communication campaigns.			
Means: Direct engagement; Platforms, Alliances and synergies; Conferences attendance; Newsletter: special release and first release summarising the project scope and preliminary results; Press release to various specialized magazines aimed at care professionals.			
2. Development			
Stage 2		Time: M16-M44	Target audience: All
Objective: To spread the InAdvance project results to the whole society and, specifically, for those in need of PC and their informal caregivers. To reinforce the recruitment strategy by reducing the dropout rate. To engage health professionals and decision-makers. To recruit Civil Society entities as a multiplier group with a high potential for raising awareness of the project outcomes.			
Means: Platforms, alliances and synergies; Direct engagement; Scientific dissemination (i.e. conferences attendance and academic journals); Newsletter (semi-annually); Press releases and appearances in professional media.			
3. Sustainability			
Stage 3		Time: M45-M48	Target audience: All
Objective: To consolidate a strong network of healthcare professionals, investors, civil society entities, decision makers or politicians and researchers for assuring the long-term viability and the potential scaling-up of the project.			
Means: Integrated dissemination campaigns (i.e. combination of several			

dissemination instruments) adapted to each target group spreading the project results and long-term expectations; scientific dissemination; synergies; participation in professional workshops and conferences aimed at care professionals; service planners and policymakers, participation in investment forums to support exploitation activities.

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7. Action Plan

Dissemination and communication action plan involve a yearly reviewed and updated Dissemination Plan, and a clear communication policy for relevant audiences to target and the appropriate channels to use throughout the project duration.

The dissemination includes communication by means of a public website, forums, public health events, conferences, workshops, journals, other publications and engagement with news and social media. In addition, the project aims to proactively inform and involve the intended user community to increase awareness about integrated palliative care.

This will be done in close alignment with all the WPs, as it supports their work (e.g. contacting relevant stakeholders) and also as a way to maximise their impact (e.g. dissemination in social media of academic outputs).

Outreach activities will be designed to foster collaboration with related projects (e.g. other project funded in the call), European Initiatives, Patient and Scientific Associations, among others. Communication and dissemination will be organised by combining face-to-face events with online channels and traditional press strategies.

As part of the Open Data Pilot, dissemination will promote, when possible, the use of creative common licenses to allow re-purposing project outputs (e.g. slides from conferences).

Being a European network of Older people's organisations, AGE will be able to support WP9 leader for the dissemination of the project findings among relevant EU stakeholders and national older people's organisations, co-organise awareness raising activities on integrated palliative care, for example, for EU stakeholders. AGE will also provide support to WP9 leader when organising the final event where the project findings will be shared with the public.

Below in Table 2 is a list of WP9 Deliverables and Milestones, and in Table 3 a GANTT chart of the WP9 activities:

Table 2 List of WP9 Deliverables and Milestones

No.	Title	Lead Beneficiary	Type	Dissemination level	Due Date (months)
D9.1	Project website and social media channels	7 - SALU	Other	Public	3
MS22	Launch of website	7 - SALU	-	-	3
D9.2	Dissemination and Communication Plan	7 - SALU	Report	Public	6
D9.3	Innovation and Exploitation Plan	7 - SALU	Report	Confidential, only for members of the consortium	12

				(including the Commission Services)	
MS23	Newsletters	7 - SALU	-	-	48
MS24	Final workshop	10 - AGE	-	-	48

Table 3 GANTT chart of InAdvance project WP9 activities

Deadlines:	▮	
Ddevelopment process	▯	
Timeline from month 1 to month 48		

Tasks	Stage 1 (M1–M15)	Stage 2 (M16–M44)	Stage 3 (M45–M48)
Create Project website and social media channels	M1–M3 (deadline M3)		
MS22 Launch of website and blog	M1–M3 (deadline M3)		
Deliverable 9.1 Project Website and Social Media Channels	M1–M3 (deadline M3)		
Deliverable 9.2. Dissemination and Communication Plan	M1–M6 (deadline M6)		
Internal Progress Report 1 from WPL to WP9	M1–M6 (deadline M6)		
Internal Progress Report 2 from WPL to WP9	M6–M12 (deadline M12)		
Deliverable 9.3 Innovation and Exploitation Plan	M6–M12 (deadline M12)		
Third parties websites		M15–M48 (deadline M48)	
Press kit and dossier		M15–M44 (deadline M44)	
Periodic Report 1 to European Comision	M1–M18 (deadline M18)		
Internal Progress Report 3 from WPL to WP9		M18–M24 (deadline M24)	
Internal Progress Report 4 from WPL to WP9		M18–M30 (deadline M30)	
Periodic Report 2 to European Comision		M18–M36 (deadline M36)	
Internal Progress Report 5 from WPL to WP9		M30–M42 (deadline M42)	
Periodic Report 3 to European Comision		M30–M48 (deadline M48)	
Press releases, appearances on radio and TV	M1–	–M44	
Open Acces publication	M1–	–M44	
Use of Social media	M1–	–M48 (deadline M48)	
MS23 Newsletters development and distribution	M1–	–M48 (deadline M48)	
Others	M1–	–M48 (deadline M48)	
MS24 Final workshop	M1–	–M48 (deadline M48)	

8. Control

It is important to control the strategy, i.e. to monitor performance, in order to know if the set strategy works for reaching the objectives or if we need to change and modify it. Communication will also be a reactive activity requiring close monitoring of project strategic objectives and risk management. For example, if the risk management (WP1) identifies as emerging risk the lack of engagement with a certain stakeholder, then the communication plan will be updated to contact more stakeholders in order to reduce existing dependencies.

Throughout the project's life stakeholders' interest will be encouraged through several communication means, such as newsletters, press releases, social networks, the project website, articles in journals, etc. Early mobilisation and engagement of relevant stakeholders are expected to be achieved with focused events along the project in order to raise awareness on the project objectives and a final workshop/conference for showing them the main outcomes achieved.

The ultimate measure of success of the dissemination and communication strategy and activities will be the level of exploitation of the project results beyond the lifetime of the project.

8.1 Evaluation Methods

The dissemination and communication will be periodically evaluated from a quantitative and qualitative point of view; periods for reporting are specified in the next sections.

8.1.1 Qualitative Evaluation

Qualitative evaluation will be aimed at gathering the overall impressions from directly involved partners and stakeholders in order to collect suggestions for improving the performance of the actions implemented. Thus the key evaluation question would be:

> ➢ *How could the dissemination and communication be improved in terms of: (a) overall performance; (b) engagement; and (c) raising awareness?*

Partners will discuss around this question during meetings, and results will be annotated, translated into new strategic guidelines, integrated within this document and, also, within the reports.

8.1.2 Quantitative Evaluation

At this stage, Key Performance Indicators (KPIs) should be understood as mere estimations, aimed at guiding the action and approaching well the channels and actions to be scheduled and conducted.

Table 4 InAdvance project Communication and Dissemination KPIs

Type	KPI
ICT companies engaged with the project	>20
Related EU-funded projects	>10
Researchers engaged	>100
Investors reached and engaged	>15
Public administration officers involved	>20
Offline dissemination and communication performance	
Attendance to non-academic fairs and events	>15
Attendance to non-academic workshops and seminars	>20
Attendance to EC events and info days	>4
Organisation of workshops	2
Dissemination materials designed[1]	10
Press releases or press articles published	>11
Non-peer reviewed articles in the specialised press published	>10
Journal articles, peer-reviewed, published	>20
Peer-reviewed articles after the project end	>10
Proceedings or position papers published	>10
Attendance to conferences and congresses	>20
PhD or MSc Dissertations (on going[2] or published)	1 PhD or 2 MSc
Attendance to Scientific workshops or special sessions	10
Online communication performance	
Engagement rate (general)[3]	2,8%
Twitter engagement	2%
Facebook engagement	3,5%
Twitter: followers	150
Facebook: fans	100
Website visitors	200 per day (mean)

8.2 Periodic Reports

Periodic reports are official reports to be submitted to the European Commission (EC) in the terms stated in the Grant Agreement. The Project Coordinator will be

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[1]:Includes materials such as: Leaflet for experts (academia), Leaflet for health and social care staff, Leaflet for users (patients and families), Poster, and Banner, etc. All the materials should be in English and in the different national languages of the consortium partners.

[2] The research plan should be submitted and approved for being quantified.

[3] Please, notice that ResearchGate, LinkedIn, etc. have not native apps for measuring engagement rates; manual measurement is not possible because these do not provide complete information about impressions, actions and reach rates.

in charge of the preparation of these reports with the inputs and collaboration of the whole consortium including the status and activities of WP9 Dissemination and Exploitation.

Along the project life three periodic reports will be prepared and delivered to the EC:
- Period 1: from M1 – M18 (from January 2019 to June 2020).
- Period 2: from M19 – M36 (from July 2020 to December 2021).
- Period 3 (final): from M37 – M48 (from January 2022 to December 2022).

8.3 Internal Reports

Besides the official periodic reports, a regular and closer tracking of the project progress will be performed through internal reporting. Appendix 1 shows a Public Outreach and Dissemination (PoD) form intended to be filled out **beforehand or right after** an event, and Appendix 2 includes a Periodic Communication Report to be filled up and returned to the WP9 leader SALUMEDIA **regularly every six months**. WP9 leader will send a separate email reminder to all the consortium members about it. The purpose of the reports is to keep a log of activities and their reach.

Established periods for filling out and delivering Appendix 2 Periodic Communication Report to the WP9 leader are:
- Progress period 1: from M1 – M6 (from January 2019 to June 2019).
- Progress period 2: from M7 – M12 (from July 2019 to December 2019).
- Progress period 3: from M19 – M24 (from July 2020 to December 2020).
- Progress period 4: from M25 – M30 (from January 2021 to June 2021).
- Progress period 5: from M37 – M42 (from January 2022 to June 2022).

8.4 Online Analytics

The InAdvance project website has set Google Analytics for keeping track on the amount of visitors, origin of visitors, how long they spend on average on the website and in which pages. Also all the feedback received through the website will be recorded and analysed.

Twitter, Facebook, LinkedIn and Research Gate all have their own native statistic tools set up for monitoring and tracking the public engagement, and the amount of impressions and likes the posts received by the posts. SALUMEDIA has also set up a Cyfe account for the purpose of tracking the project's online activities. Cyfe is a cloud-based dashboard for monitoring all project data in one place, e.g. social media, analytics, and marketing.

9. Conclusions

The main goal of InAdvance project is to improve the benefit of the PC interventions for patients, families and caregivers, and professionals by designing early PC interventions focused on and oriented by the patients.

This plan defines the dissemination and communication strategy that will be implemented to increase the impact of InAdvance project.

The structure of this plan strengthens its value since it provides with a whole comprehension of the process. Thus, we start analysing the current situation where we are and continue reviewing where we want to be as objectives. This transition will be based on a specific strategy to achieve the goals, performing what needs to be done and measuring the effectiveness of those actions in order to address difficulties when they appear.

Difficulties and risks that could threat the project might me due to the fact that InAdvance project joins up to 11 partners from different backgrounds. These include cultural gaps. Also, there might be risks that depend on the performance of different actions. In this section, we try to evaluate those risks before they come in order to set preventing measures. Risks and their corresponding avoidance measures are treated in the following table:

Risk:	Risk mitigation measures:
Incoordination between teams, misunderstandings. Overlapping functions. Cultural gaps.	1) The consortium agrees to have a cohesive and integrated approach to communication. 2) Continuous and proactive collaboration between WPs and WP9 to update communication status. 3) Create a GANTT chart to schedule dissemination and communication actions and share with partners. 4) Keep action performance registered and shared with partners & follow up and update GANTT chart. 5) Internal Reporting periods have been established.
Not achieving a KPI	1) Communication will be impact-driven and adapted to target trough collaboration between WP9 leader and each WPL. 2) Well described target audience. 3) Identifying multiplier groups and stakeholders that might help us to reach our target receptors. 4) Real time follow up of the process so actions can be modified in order to achieve the KPI.
Failing to ensure its long-term	1) Building solid partnerships, networks,

maintenance.	and alliances that are sustainable at long-term. 2) Establishing a plan for maintenance after the project finishes.
Failure to gather qualitative evaluation	Creating an easy-to-fill form that we can share with partners and stakeholders to gather their impressions.
Difficulties in raising awareness of the project results towards relevant stakeholders	1) Stakeholders' interest will be encouraged through several means, such as emails, press releases, social networks, the project website, articles in journals, etc. 2) Dissemination activities will be increased and/or adapted if necessary.

Although there are some difficulties, this plan also counts on many risk mitigation measures. Most of difficulties are related to coordination, which means there is an actual need of optimizing communication strategies within InAdvance partners. Having said so, this plan has been elaborated at an early stage of the project so it stays flexible and responsive, in order to provide with solutions to any problem that may occur.

InAdvance

Appendix 1: Public Outreach and Dissemination (PoD) form

	Please fill below
Implementing partner (1)	
Type of activity (2)	
Title / topic of activity	
Organiser	
Dates	
Location (3)	
Other parties involved (4)	
Short summary of the activity (5)	
Overview of what was disseminated	
Type of audience (6)	
Number of people (7)	
Web links to the activity (8)	
Any supporting images or pictures?	Yes / No
Can InAdvance project disseminate the event?	Yes / No

1) Beneficiary and person's name
2) Press release, radio or TV interview, newspaper article or interview, peer reviewed journal publication, conference or poster presentation, exhibition, workshop, roundtable discussion, one-to-one meeting, webinar, podcast, networking event, other
3) City and country
4) Other parties both inside and outside of InAdvance
5) Short summary, not more than 500 words
6) General public, experts (what type of experts), etc.
7) Estimation of the amount of people reached
8) If applicable

Appendix 2: Periodic Communication Report

Media for General Public
Table 1 Press release, radio and TV interview, newspaper article and interview, non-scientific and non-peer-reviewed publication, newsletter, etc.

Date and place	Author	Title	Short description of contents	Name and type of the media channel	Link to the publication *(if not available online, please scan and attach to email)*	Target group and impact *(approx. number of views and audience reached)*

Scientific and Expert Community
Table 2 Peer-reviewed journal publication, conference or poster presentation, exhibition, etc.

Date and place	Author	Title	Short description of contents	Name and type of the media channel	Link to the publication *(if not available online, please scan and attach to email)*	Target group and impact *(approx. number of views and audience reached)*

Table 3 Workshop, roundtable discussion, hackathon, one-to-one meeting, webinar, podcast, training, etc.

Date and place	Name of the participant/s from your organisation	Title of event	Organiser	Short description of the event	Link to the event	Target group and impact *(approx. number and type of audience)*

Networking with Other Projects and Organisations
Table 4 Networking event and activity, meeting, etc. outside of InAdvance project

InAdvance

Date and place	Name of the participant/s from your organisation	Title of event	Other organisation, person and project	Short description of the event	Links *(to the event, project, organiser etc.)*	Target group and impact *(approx. number and type of audience)*

Online dissemination
Table 5 Online discussion, website, social media, video, etc.

Date and place	Name of the participant/s from your organisation	Title *(if applicable)*	Name of the online media channel	Type and short description of the activity	Links	Target group and impact *(approx. number and type of audience)*

Other
Table 6 Printed materials (leaflets, brochures, etc.) and other dissemination activities

Date and place	Name of the participant/s from your organisation	Type of activity	Title of the activity	Short description of the activity	Links	Target group and impact *(approx. number and type of audience)*

Pictures
Table 7 Supporting pictures, graphics and screenshots, etc. from activities

Title and date of the activity	Picture(s)	Author	Can the picture be used in InAdvance project dissemination

			purposes?
			Yes / No

Appendix 3: Check-list for dissemination materials

All materials designed should accomplish these required items:
- ❑ EC Acknowledge and Project Reference.
- ❑ Branding: colours, fonts and margins.
- ❑ InAdvance Logo.

Only for larger charts, graphics, infographics, and printable material.
- ❑ Acronym explanation.

To explain the acronym is not needed for Social Media images less than 1000x1000 px.

Check-list for texts
- ❑ Typographies used are in-line with the style guidelines delivered by SALUMEDIA.
- ❑ Legibility (27'', 21'', 15'',10'', smartphones Android&IOS, MACBook).
- ❑ Size.
- ❑ Margins and shadows allow visibility and facilitate readability.
- ❑ Orto-typography revised.
- ❑ Grammar revision completed.

Check-list for pictures published on the internet, including also posters:
- ❑ Resolution: at least, 100ppt.
- ❑ Type PNG-24.

Check-list for printable materials (should be applied to posters presented to congresses and conferences)
- ❑ At least, 300ppt resolution.
- ❑ Profile: CMYK – FOGRA27[4].
- ❑ Type TIFF, PSD, AI and/or PDF.
- ❑ Safe margin: 10 mm.
- ❑ Crop marks.
- ❑ Bleed area: from 2mm to 10mm or more depending on final document size[5].
- ❑ Sample before order: check resolution and edges.

Check-list for videos
- ❑ EC Acknowledge and Project Reference.
- ❑ Branding: colours, fonts and margins (specially, when publishing on YouTube).
- ❑ INADVANCE Logo.
- ❑ Ortotypography revised.
- ❑ Grammar revision completed.

If the video includes subtitles or texts:

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[4] Standard

[5] Bleed area is a non-printable area which avoids white spaces while a guillotine is being using. Trim area is the final design of the printable work and safe margin allows to cut safely, avoid scratching or guillotine pressure markings.

- ❏ Legibility (27'', 21'', 15'',10'', smartphone Android&IOS, MACBook).
- ❏ Adequate size (check also EC acknowledge in low-resolution YouTube videos).
- ❏ Image, pictures and photos resolution (27'', 21'', 15'',10'', smartphone Android&IOS, MACBook).
- ❏ Audio quality, volume and background noises.
- ❏ Dropped frames revised.
- ❏ Ortotypography revised.
- ❏ Grammar revision completed.