



D2.4 Scirocco Website

WP 2 Communication and Dissemination



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P	Public
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V03	10 August 2016	Content update based on lessons learned from development	Stephan Schug	Marc Lange, Andrea Pavlickova, Donna Henderson
V04	11 August 2016	Review of proposed changes and update	Marc Lange	Andrea Pavlickova, Stephan Schug, Donna Henderson
V05	18 August 2016	Review of the final draft provided by WP2	Andrea Pavlickova	Donna Henderson
V1.0	19 August 2016	QA & final approval	Donna Henderson	

Statement of originality

This deliverable contains original unpublished work except where clearly indicated otherwise. Acknowledgement of previously published material and of the work of others has been made through appropriate citation, quotation or both.

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1 Introduction

1.1 Project goal to be promoted by the web site

SCIROCCO aims to develop the Maturity Model¹ into a validated and tested self-assessment tool that will facilitate the successful scaling up and transfer of good practices in integrated care across European regions. The project will explore how matching the complementary strengths and weaknesses of regions can deliver two major benefits:

- A strong basis for successful twinning and coaching that facilitates shared learning;
- A practical support for the scaling up of good practices that promote active and healthy ageing and participation in the community.

SCIROCCO will help regions to identify:

- The contextual requirements of a good practice that is being considered for adoption;
- The level of maturity required for the health and social care system to adopt a particular good practice;
- The actions that more progressive regions have taken in order to be successful;
- Lessons learned from these pioneers to overcome barriers and accelerate results;
- The process of information sharing on lessons learned to help other aspiring regions to speed up their own adoption.

1.2 Objective of the project website

The objective of Scirocco website is to:

- Promote the project goal and explain how Scirocco can help regions in scaling-up integrated care solutions;
- Be a reference point for dissemination of project findings and networking;
- Host resources and project deliverables.

Scirocco website targets readership of:

- Community of the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA);
- Decision makers (CEO, CMO and middle management) in health and social care delivery organisations, public administrations, voluntary and third sector;
- Policy makers.

1.3 Key elements of website

The url link to Scirocco website is <http://www.scirocco-project.eu/>

Key elements of Scirocco's website are:

- The Maturity Model in its initial and refined versions;
- Information about project partners;
- Good practices on integrated care in 5 Scirocco European regions;
- Results of maturity assessment of good practices;
- Methodology for self-assessment process;
- Results of twinning/coaching activities in 5 Scirocco regions;

¹ The first version of the Maturity Model was developed by the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA)'s B3 Action Group on Integrated Care.

- Online self-assessment tool.

The website will also include:

- All project deliverables and other relevant documents produced by project;
- Information on dissemination activities to provide visitors with an insight on project activities and progress;
- Direct access to social networks to encourage and enable visitors to easily interact with the project;
- Links to other related websites from to enable visitors to learn more about the project and its environment.

2 Functional requirements

2.1 Project requirements

The following requirements have been established to accommodate project's objectives and standards for an EU project website:

- Balanced, inviting homepage, attracting visitors' interest in project concept and deliverables;
- Responsive web design, making the website accessible from various devices, including mobile devices;
- Flexible repository for resources and deliverables;
- Social media buttons and an option to display recent project related tweets;
- Efficient search facility;
- A contact form for other experts / organisations interested in project updates;
- Extra “doormat” navigation (the bottom part of Figure 1) to support an easy access to website content;
- Easy and extensible navigation allowing quick access to all sections of the website.

A mock-up below provides an example of the overall layout and functionality of homepage (not intended as a visual reference for the actual design of the website).

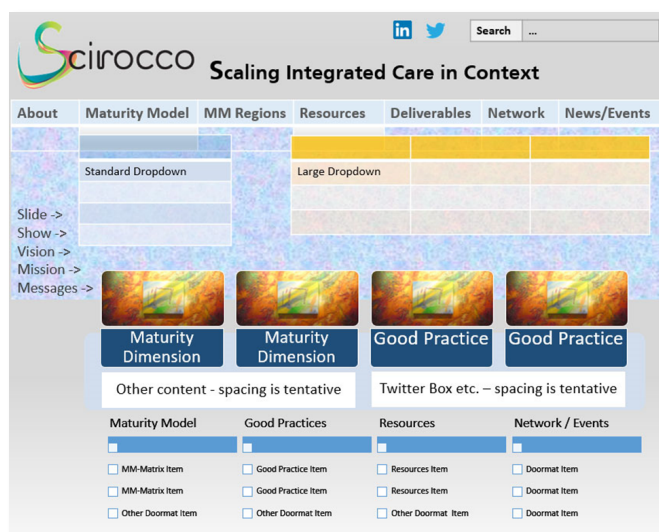


Figure 1: Mock-up to guide the development of website

Bespoke graphic design is used to translate the concepts of the project into visual messages. These visualisations will be used throughout the website and shall - along with the project's logo and colour schema - define a unique, recognisable visual language for the project. Adding to the accessibility and usability of the homepage, these visualisations will also serve also as quick navigation buttons (cf. (Figure 1); examples labelled “Maturity Dimension” and “Good Practice”).

3 Technical requirements

3.1 Off-the-shelf tools

To minimise setup and programming costs, the website is built on a standard CMS (WordPress) supported by a carefully selected basic template and additional plugins where needed.

3.2 Responsive web design for mobile devices

The website team (WP2) has ensured that the website has been designed to be accessible from various devices, including mobile devices:

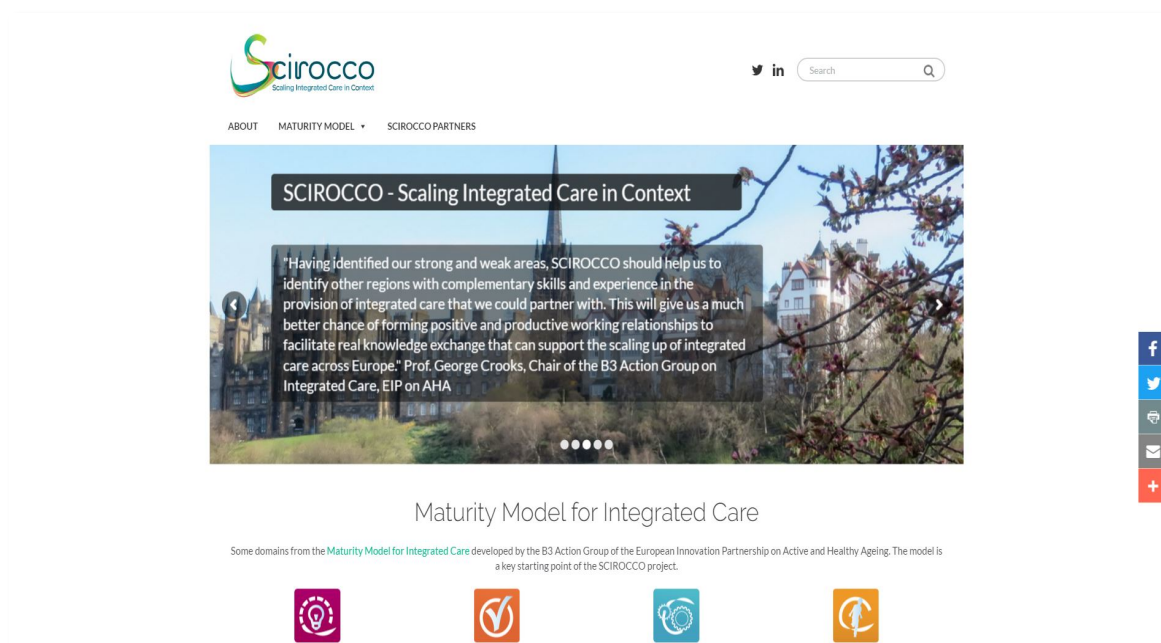


Figure 2: Scirocco home page on PC

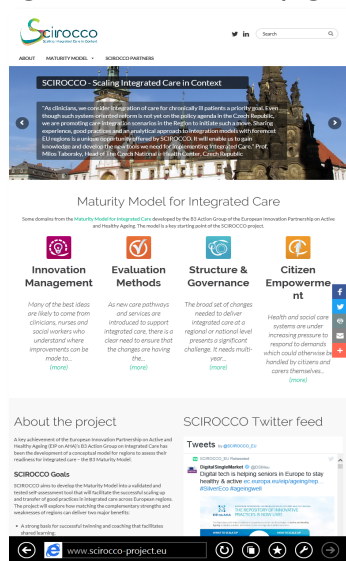


Figure 3: Home page on tablet

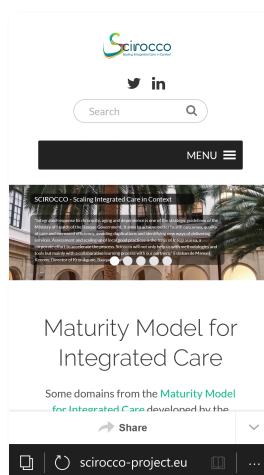


Figure 4: Home page on smartphone

4 Editorial Policy

4.1 General principles

Governed by the principles of networking and sharing between the participating regions, the majority of content elements of website will be provided by SCIROCCO project partners.

The website team (WP2) are responsible for:

- Collecting and reviewing the various input elements, e.g. good practices, lessons learned, events and relevant news.
- Publishing the content elements both on the homepage as well as within the thematic sections (channels) of the website. The intention is to make the website appealing to regular visitors by placing new elements temporarily on the homepage, as well as locating them in the respective section of the website for long-term access.

Overall, the website should be recognisable by a unique look and feel across all content.

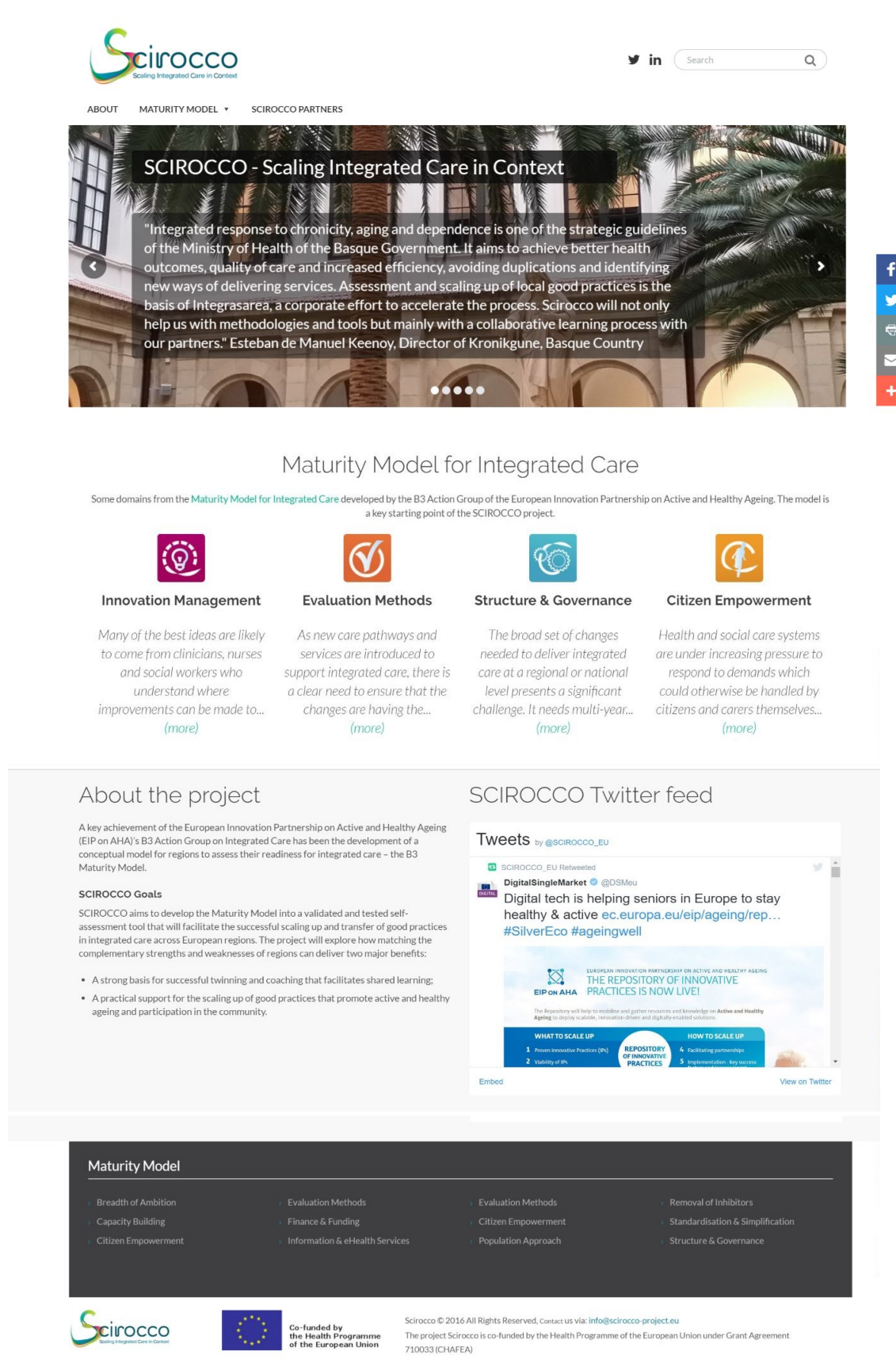
5 Homepage

5.1 Specification

The website specification defines the following elements of homepage:

- Visual teaser elements
 - Short statements from 5 Scirocco regions on their expectations from project;
 - 12 dimensions of Maturity Model;
- Access to all sections (“Channels”) of website;
- About the project and project goals - aligned to the project leaflet;
- News and Events will be added at a later stage.
- Social Media Buttons (and display of latest tweets)
- Site wide full text search.

5.2 Released by M3







SCIROCCO - Scaling Integrated Care in Context

"Integrated response to chronicity, aging and dependence is one of the strategic guidelines of the Ministry of Health of the Basque Government. It aims to achieve better health outcomes, quality of care and increased efficiency, avoiding duplications and identifying new ways of delivering services. Assessment and scaling up of local good practices is the basis of Integrasarea, a corporate effort to accelerate the process. Scirocco will not only help us with methodologies and tools but mainly with a collaborative learning process with our partners." Esteban de Manuel Keenoy, Director of Kronikgun, Basque Country

Maturity Model for Integrated Care

Some domains from the [Maturity Model for Integrated Care](#) developed by the B3 Action Group of the European Innovation Partnership on Active and Healthy Ageing. The model is a key starting point of the SCIROCCO project.

 <p>Innovation Management</p> <p>Many of the best ideas are likely to come from clinicians, nurses and social workers who understand where improvements can be made to... (more)</p>	 <p>Evaluation Methods</p> <p>As new care pathways and services are introduced to support integrated care, there is a clear need to ensure that the changes are having the... (more)</p>	 <p>Structure & Governance</p> <p>The broad set of changes needed to deliver integrated care at a regional or national level presents a significant challenge. It needs multi-year... (more)</p>	 <p>Citizen Empowerment</p> <p>Health and social care systems are under increasing pressure to respond to demands which could otherwise be handled by citizens and carers themselves... (more)</p>
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About the project

A key achievement of the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA)'s B3 Action Group on Integrated Care has been the development of a conceptual model for regions to assess their readiness for integrated care - the B3 Maturity Model.

SCIROCCO Goals

SCIROCCO aims to develop the Maturity Model into a validated and tested self-assessment tool that will facilitate the successful scaling up and transfer of good practices in integrated care across European regions. The project will explore how matching the complementary strengths and weaknesses of regions can deliver two major benefits:

- A strong basis for successful twinning and coaching that facilitates shared learning;
- A practical support for the scaling up of good practices that promote active and healthy ageing and participation in the community.

SCIROCCO Twitter feed

Tweets by @SCIROCCO_EU

SCIROCCO_EU Retweeted
DigitalSingleMarket @DSMeu
Digital tech is helping seniors in Europe to stay healthy & active ec.europa.eu/eip/ageing/rep...
#SilverEco #ageingwell

THE REPOSITORY OF INNOVATIVE PRACTICES IS NOW LIVE!

WHAT TO SCALE UP

1. Proven Innovative Practices (PIPs)
2. Viability of IPIs

HOW TO SCALE UP

4. Facilitating partnerships
5. Implementation - key success

REPOSITORY OF INNOVATIVE PRACTICES

Embed View on Twitter

Maturity Model

<ul style="list-style-type: none"> • Breadth of Ambition • Capacity Building • Citizen Empowerment 	<ul style="list-style-type: none"> • Evaluation Methods • Finance & Funding • Information & eHealth Services 	<ul style="list-style-type: none"> • Evaluation Methods • Citizen Empowerment • Population Approach 	<ul style="list-style-type: none"> • Removal of Inhibitors • Standardisation & Simplification • Structure & Governance
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Scirocco
Scaling Integrated Care in Context

Co-funded by the Health Programme of the European Union

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The project Scirocco is co-funded by the Health Programme of the European Union under Grant Agreement 710033 (CHAFEA)

Figure 5: Scirocco homepage released by M3

6 Website sections (“Channels”)

6.1 “About” section

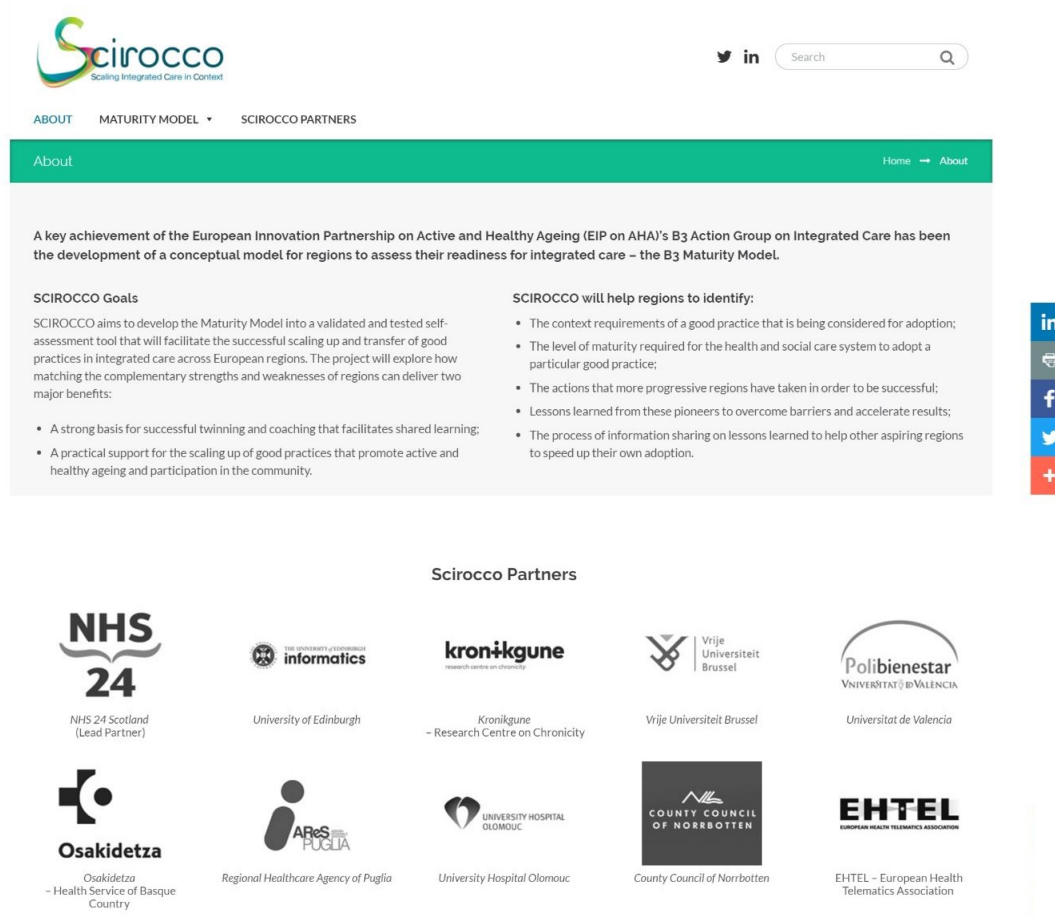


Figure 6: “About” section released by M3

6.2 “Maturity Model” section

6.2.1 Specification

The Maturity Model section includes

- A section home page with the overall picture of Maturity Model with a new graphical visualisation of the project;
- 12 sub-sections providing details on each of the 12 dimensions of Maturity Model; the initial content of these sub-sections was provided by B3 Action Group on Integrated Care and will be refined on the basis of the Scirocco findings.

The results of the self-assessment (connected to the section “Scirocco European Regions”) and access to online tool will be added over time.

6.2.2 Released by M3

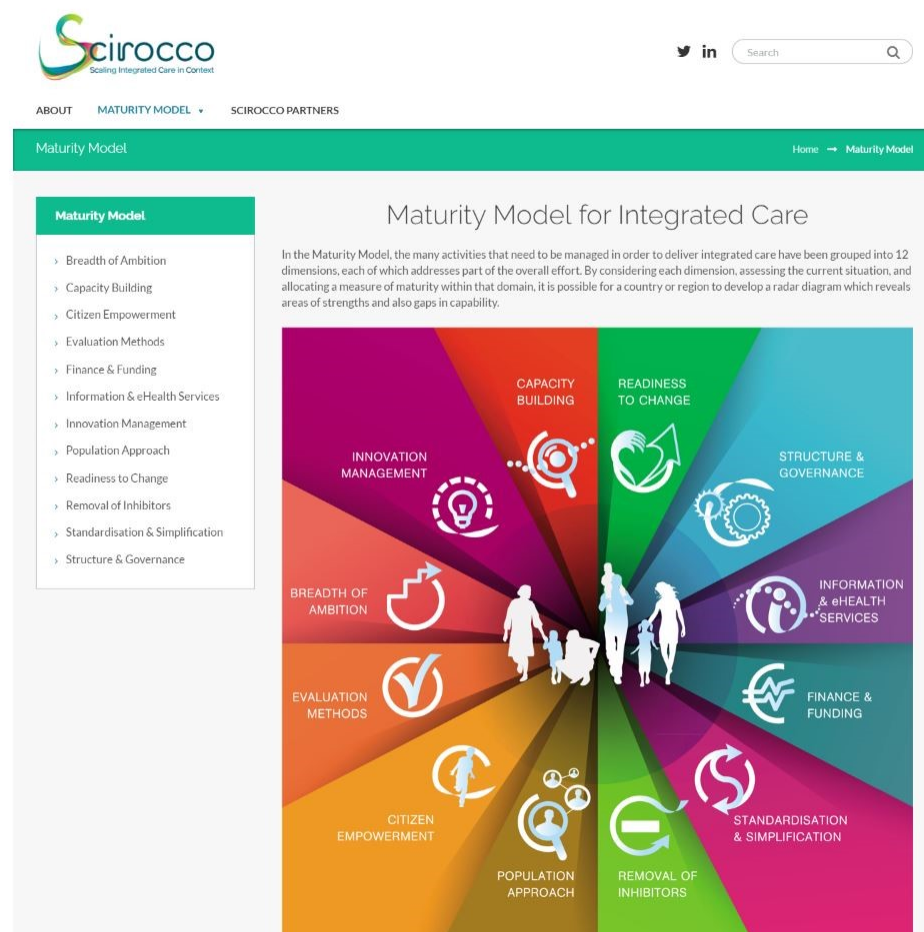


Figure 7: Homepage of the “Maturity Model” section released by M3

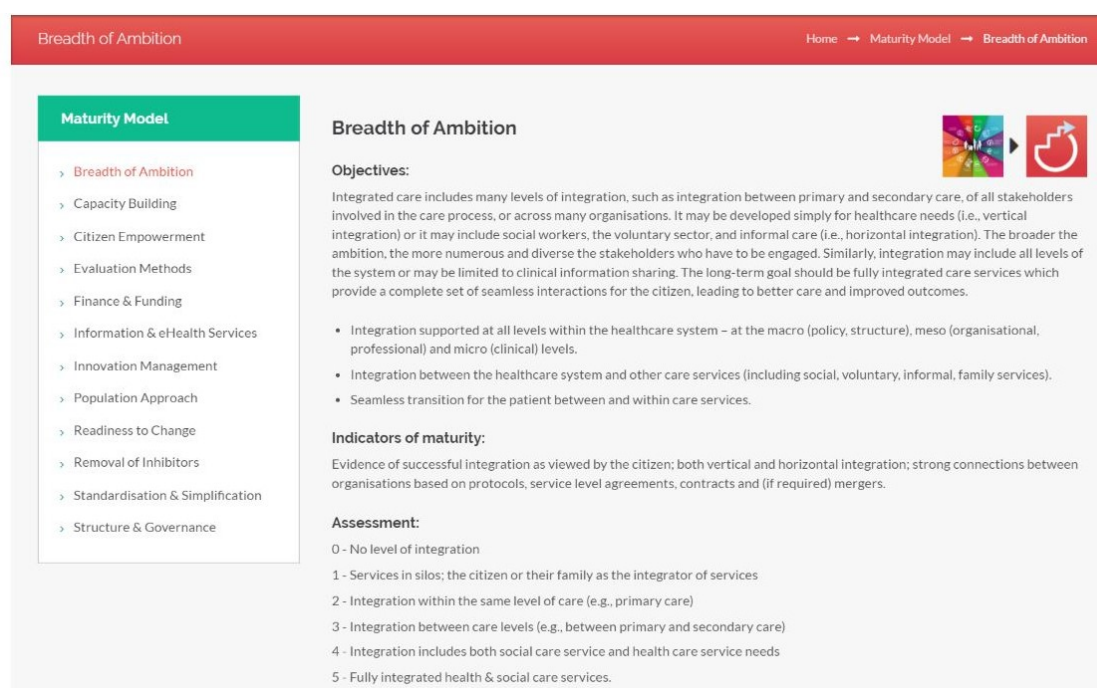




Figure 8: Example of a sub-section of the “Maturity Model” section released by M3

Citizen Empowerment
Home → Maturity Model → Citizen Empowerment

Maturity Model

- › Breadth of Ambition
- › Capacity Building
- › Citizen Empowerment
- › Evaluation Methods
- › Finance & Funding
- › Information & eHealth Services
- › Innovation Management
- › Population Approach
- › Readiness to Change
- › Removal of Inhibitors
- › Standardisation & Simplification
- › Structure & Governance

Citizen Empowerment

Objectives:

Health and social care systems are under increasing pressure to respond to demands which could otherwise be handled by citizens and carers themselves. The evidence suggests that many individuals would be willing to do more to participate in their own care if easy-to-use services, such as appointment booking, self-monitoring of health status, and alternatives to medical appointments, were available to them. This means providing services and tools which enable convenience, offer choice, and encourage self-service and engagement in health management.

Indicators of maturity:

At-scale use of teleservices; multi-channel ways to access care services; citizen portals offering booking & prescriptions refills; online access to health records; recommended apps and health management services, which are also integrated with medical records.

Assessment:

0 - No systematic plan for empowerment

- 1 - Citizens are not involved in decision-making processes and do not participate in the co-design of their services
- 2 - Policies to support citizens' empowerment and protect their rights, but may not reflect their real needs
- 3 - Incentives and tools to motivate and support citizens to co-create health and participate in decision-making processes
- 4 - Citizens are supported and involved in decision-making processes, and have access to information and health data
- 5 - Citizens are involved in decision-making processes, and their needs are frequently monitored and reflected in service delivery and policy-making.



Figure 9: Example of a sub-section of the “Maturity Model” section released by M3

Innovation Management
Home → Maturity Model → Innovation Management

Maturity Model

- › Breadth of Ambition
- › Capacity Building
- › Citizen Empowerment
- › Evaluation Methods
- › Finance & Funding
- › Information & eHealth Services
- › Innovation Management
- › Population Approach
- › Readiness to Change
- › Removal of Inhibitors
- › Standardisation & Simplification
- › Structure & Governance

Innovation Management

Objectives:

Many of the best ideas are likely to come from clinicians, nurses and social workers who understand where improvements can be made to existing processes. These innovations need to be recognised, assessed and, where possible, scaled up to provide benefit across the system. At the same time, universities and private sector companies are increasingly willing to engage in open innovation, and innovative procurement, in order to develop new technologies, test process improvements and deliver new services that meet the needs of citizens. There is also value in looking outside the 10 system to other regions and countries that are dealing with the same set of challenges, to learn from their experiences. Overall, this means managing the innovation process to get the best results for the systems of care, and ensuring that good ideas are encouraged and rewarded.

- Adopting proven ideas faster.
- Enabling an atmosphere of innovation from top to bottom, with collection and diffusion of best practice.
- Learning from inside the system, as well as from other regions, to expand thinking and speed up change.
- Involving universities and private sector companies in the innovation process (i.e., 'open innovation').
- Using innovative procurement approaches (Pre-Commercial Procurement, IPP, PPP, Shared Risk, Outcome-Based Payment)
- Using European projects (e.g., Horizon 2020, EIP, CEF).

Indicators of maturity:

Innovation management methods; outreach to regions; creative involvement of academic & industry relations; innovative procurement methods.

Assessment:

0 - No plan for innovation management

- 1 - Isolated innovations across the region/country, but limited visibility
- 2 - Innovations are captured and published as good practice
- 3 - Innovation is governed and encouraged at a region/country level
- 4 - Formalised innovation management process in place
- 5 - Extensive open innovation combined with supporting procurement & the diffusion of good practice.


Figure 10: Example of a sub-section of the “Maturity Model” section released by M3

Structure & Governance
Home → Maturity Model → Structure & Governance

Maturity Model

- › Breadth of Ambition
- › Capacity Building
- › Citizen Empowerment
- › Evaluation Methods
- › Finance & Funding
- › Information & eHealth Services
- › Innovation Management
- › Population Approach
- › Readiness to Change
- › Removal of Inhibitors
- › Standardisation & Simplification
- › **Structure & Governance**

Structure & Governance



Objectives:

The broad set of changes needed to deliver integrated care at a regional or national level presents a significant challenge. It needs multi-year programmes with excellent change management, funding and communications, and the power to influence and (sometimes) mandate new working practices. This means alignment of purpose across diverse organisations and professions, and the willingness to collaborate and put the interest of the overall care system above individual incentives. It also 3 means managing the introduction of eHealth services to enable integrated care in a way that makes them easy to use, reliable, secure, and acceptable to care professionals and citizens alike.

- Enabling properly funded programmes, including a strong programme, project management and change management; establishing ICT or eHealth competence centres to support rollout; distributed leadership, to reduce dependency on a single heroic leader; excellent communication of goals, progress and successes.
- Managing successful eHealth innovation within a properly funded, multi-year transformation programme.
- Establishing organisations with the mandate to select, develop and deliver eHealth services.

Indicators of maturity:

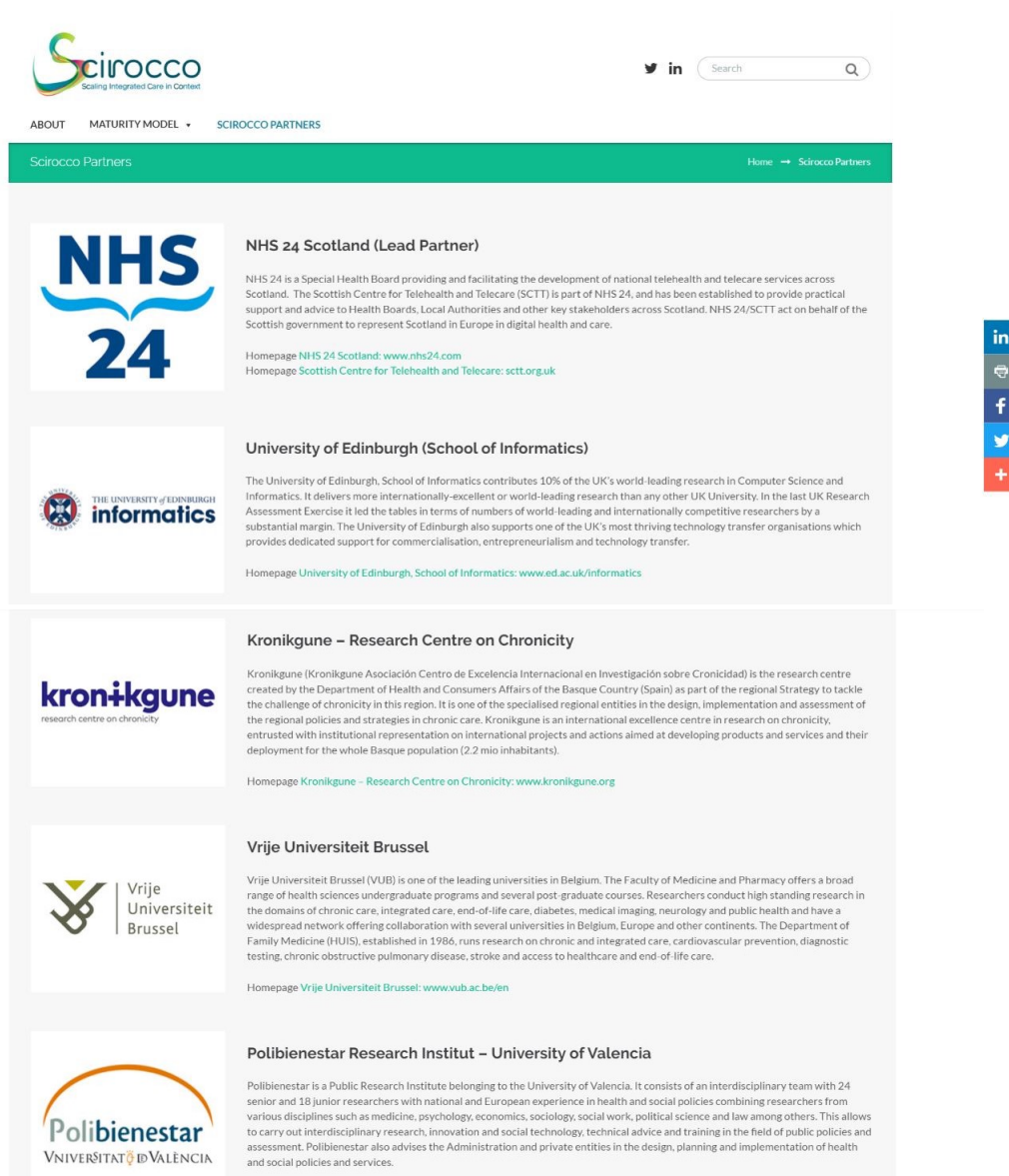
Evidence of effective planning and management of change, including stakeholder involvement; collective decision-making; benefits realisation; regular communication of progress; establishment or re-orientation of eHealth competence centres, usability labs etc.

Assessment:

- 0 - No overall attempt to manage the move to integrated care
- 1 - Change underway, but with fragmented organisations & plans
- 2 - Formation of task forces, alliances and other informal ways of collaborating
- 3 - Governance established at a regional or national level
- 4 - Roadmap for a change programme defined and broadly accepted
- 5 - Full, integrated programme established, with funding and a clear mandate.

Figure 11: Example of a sub-section of the “Maturity Model” section released by M3

6.3 “Partners” section



Scirocco
Scaling Integrated Care in Context

ABOUT MATURITY MODEL SCIROCCO PARTNERS

Scirocco Partners Home → Scirocco Partners

NHS 24 Scotland (Lead Partner)

NHS 24 is a Special Health Board providing and facilitating the development of national telehealth and telecare services across Scotland. The Scottish Centre for Telehealth and Telecare (SCTT) is part of NHS 24, and has been established to provide practical support and advice to Health Boards, Local Authorities and other key stakeholders across Scotland. NHS 24/SCTT act on behalf of the Scottish government to represent Scotland in Europe in digital health and care.

Homepage NHS 24 Scotland: www.nhs24.com
Homepage Scottish Centre for Telehealth and Telecare: sctt.org.uk

University of Edinburgh (School of Informatics)

The University of Edinburgh, School of Informatics contributes 10% of the UK's world-leading research in Computer Science and Informatics. It delivers more internationally-excellent or world-leading research than any other UK University. In the last UK Research Assessment Exercise it led the tables in terms of numbers of world-leading and internationally competitive researchers by a substantial margin. The University of Edinburgh also supports one of the UK's most thriving technology transfer organisations which provides dedicated support for commercialisation, entrepreneurialism and technology transfer.

Homepage University of Edinburgh, School of Informatics: www.ed.ac.uk/informatics

Kronikgune – Research Centre on Chronicity

Kronikgune (Kronikgune Asociación Centro de Excelencia Internacional en Investigación sobre Cronicidad) is the research centre created by the Department of Health and Consumers Affairs of the Basque Country (Spain) as part of the regional Strategy to tackle the challenge of chronicity in this region. It is one of the specialised regional entities in the design, implementation and assessment of the regional policies and strategies in chronic care. Kronikgune is an international excellence centre in research on chronicity, entrusted with institutional representation on international projects and actions aimed at developing products and services and their deployment for the whole Basque population (2.2 mio inhabitants).

Homepage Kronikgune – Research Centre on Chronicity: www.kronikgune.org

Vrije Universiteit Brussel

Vrije Universiteit Brussel (VUB) is one of the leading universities in Belgium. The Faculty of Medicine and Pharmacy offers a broad range of health sciences undergraduate programs and several post-graduate courses. Researchers conduct high standing research in the domains of chronic care, integrated care, end-of-life care, diabetes, medical imaging, neurology and public health and have a widespread network offering collaboration with several universities in Belgium, Europe and other continents. The Department of Family Medicine (HUIS), established in 1986, runs research on chronic and integrated care, cardiovascular prevention, diagnostic testing, chronic obstructive pulmonary disease, stroke and access to healthcare and end-of-life care.

Homepage Vrije Universiteit Brussel: www.vub.ac.be/en

Polibienestar Research Institut – University of Valencia

Polibienestar is a Public Research Institute belonging to the University of Valencia. It consists of an interdisciplinary team with 24 senior and 18 junior researchers with national and European experience in health and social policies combining researchers from various disciplines such as medicine, psychology, economics, sociology, social work, political science and law among others. This allows to carry out interdisciplinary research, innovation and social technology, technical advice and training in the field of public policies and assessment. Polibienestar also advises the Administration and private entities in the design, planning and implementation of health and social policies and services.

Figure 12: “Partners” section (part 1) released by M3






 <p>Osakidetza</p>	<p>Osakidetza – Health Service of Basque Country</p> <p>The Basque Country (Euskadi) has a universal health insurance system which is financed through general taxes. The public healthcare provider is Servicio Vasco de Salud-Osakidetza. All the public hospitals and primary care centers of the Basque Region are under this governmental organization. The Basque Health System (Osakidetza) has a target population of more than 2 million inhabitants. Currently, aging and chronic conditions account for 80-% of the medical consultation in the Basque Country taking 75% of the total health budget.</p> <p>Homepage Osakidetza – Health Service of Basque Country: www.osakidetza.euskadi.eus/r85-ghhome00/es</p>												
	<p>Regional Healthcare Agency of Puglia</p> <p>Ares Puglia (Agenzia Regionale Sanitaria della Puglia) is the technical support of the Regional Government's Healthcare Department. Together with Health Districts and Hospital Trusts it is responsible for organizing healthcare services of the entire region in order to guarantee the adequate delivery of services.</p> <p>Homepage Regional Healthcare Agency of Puglia: www.sanita.puglia.it/web/ares</p>												
	<p>University Hospital Olomouc</p> <p>The University Hospital Olomouc (Fakultní Nemocnice Olomouc – FNOL) is a major regional hospital providing general and specialised healthcare services. They are, in particular, focusing on telemonitoring of patients with advanced failure or heart infarct. The aim is to improve the health conditions of the target populations. FNOL is a Reference Site of the EIP on AHA and has been rewarded by EC for its excellence in innovation.</p> <p>Homepage University Hospital Olomouc: www.fnol.cz</p>												
	<p>County Council of Norrbotten</p> <p>The County Council of Norrbotten (Norrbottens Läns Landsting – NLL) is a public elected body and serves the residents of Norrbotten. NLL is the main provider of health care, including primary health care in the county of Norrbotten with a population of about 240.000 inhabitants. The County Council also supports research and education and contributes to the development of Norrbotten, and works with culture, public transport and regional cooperation.</p> <p>Homepage County Council of Norrbotten: www.nll.se</p>												
	<p>EHTEL – European Health Telematics Association</p> <p>EHTEL is an association that brings together a wide range of stakeholders crucial for the improvement of health and social care with health IT. EHTEL provides its 60+ corporate members with a platform for information, representation, networking and co-operation. With EHTELconnect (www.ehtelconnect.eu), the association draws on the expertise of EHTEL's highly experienced and multi-stakeholder membership to offer expert advice and educational services to individuals and organisations working in the field of digital healthcare.</p> <p>Homepage EHTEL: www.ehtel.eu</p>												
<p>Maturity Model</p> <table border="1"> <tbody> <tr> <td>Breadth of Ambition</td> <td>Evaluation Methods</td> <td>Evaluation Methods</td> <td>Removal of Inhibitors</td> </tr> <tr> <td>Capacity Building</td> <td>Finance & Funding</td> <td>Citizen Empowerment</td> <td>Standardisation & Simplification</td> </tr> <tr> <td>Citizen Empowerment</td> <td>Information & eHealth Services</td> <td>Population Approach</td> <td>Structure & Governance</td> </tr> </tbody> </table>		Breadth of Ambition	Evaluation Methods	Evaluation Methods	Removal of Inhibitors	Capacity Building	Finance & Funding	Citizen Empowerment	Standardisation & Simplification	Citizen Empowerment	Information & eHealth Services	Population Approach	Structure & Governance
Breadth of Ambition	Evaluation Methods	Evaluation Methods	Removal of Inhibitors										
Capacity Building	Finance & Funding	Citizen Empowerment	Standardisation & Simplification										
Citizen Empowerment	Information & eHealth Services	Population Approach	Structure & Governance										

Figure 13: Partners page (part 2) released by M3

6.4 “Scirocco European Regions” section

The specification foresees the following elements for Scirocco European Regions section:

- Description of health and social care environment of five regions;
- Description of the selected Good Practices and their maturity requirements. It is expected that this section will undergo dynamic updates in the course of the project.
- Local / regional events will play a crucial role for the networking and exploitation of Scirocco findings. Events will regularly be published on the website - here the content will include also national languages besides English.

This section will be developed after M3 and will be released as appropriate during Y2.

6.5 “Resources and Deliverables” section

The following elements are foreseen to be included in a “Resources and Deliverables” section:

- Project Leaflets;
- Recommended reading;
- Articles and other scientific materials;
- EC documents and other project-related documentation;
- Project presentations; This subsection will hold generic project presentations and other relevant presentations by project partners at international, national and regional events;
- Deliverables; Final, public deliverables will be available for download.

This section will be developed after M3 and will be released as appropriate during Y1.

6.6 “Network” section

The following elements are foreseen to be included in a “Network” section:

- Policy Advisory Board and Stakeholder liaison
The section will inform about policy advisory board activities once the board has been launched in the second part of the project.
- EIP on AHA, AER, CORAL, EUREGHA and other networks
Scirocco operates in the environment of EIP on AHA and other relevant European networks. Some content will be copied for convenience of the website visitors; other content will be made available via annotated links. For convenience and a streamlined user experience, iFrames will be applied for displaying third party content inline within the site as feasible.

This section will be developed after M3 and will be released as appropriate during Y2.

6.7 “News and Updates” section

The specification foresees the display of “News and Updates” on the homepage. This section will include:

- Results of workshops, conferences and other public events organised by Scirocco;
- News about the release of deliverables and other relevant dissemination materials.

This functionality will be developed after M3 and will be released as appropriate during Y1.

6.8 “Events” section

The specification defines the display of Events as an upcoming functionality of the website.

This functionality will be developed after M3 and will be released as appropriate during Y1.