



PROJECT ASSEMBLY MEETING

29 OCTOBER 2020, WARSAW, POLAND

VIRTUAL



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WELCOME & MEETING OBJECTIVES

Donna Henderson

Scottish Government



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Meeting Objectives – Day 2

- ▶ To review the progress in knowledge transfer process, including implementation plans of SCIROCCO Exchange regions;
- ▶ To agree the approach/process for improvement planning.

Meeting Agenda

09.30	Welcome & Introductions
09.40	WP7 Knowledge Transfer
10.40	Coffee Break
11.00	WP8 Improvement Planning
12.30	Polish Musical Surprise
13.00	End of Meeting



SCIROCCO EXCHANGE KNOWLEDGE TRANSFER PROGRAMME

Johanna Pacevicius

Assembly of European Regions



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Objectives

1. To **design bottom-up personalised assistance** and practical support to tailor the local needs and priorities in 9 European regions that are seeking the support in preparing their ground for the transition and scaling-up of integrated care and/ or to improve their existing system and service design.
2. To **facilitate the purposely designed knowledge transfer** in 9 European regions in order to prepare the local environment for implementation and scaling-up of integrated care.

Knowledge Transfer Programme

2 Documents:

- ▶ **Description of Knowledge Transfer activities** with purpose and details about organisation
- ▶ **Overview of same Knowledge Transfer Programme** in one spreadsheet, to identify quickly which objectives can be achieved via each knowledge transfer activity

Personalisation of knowledge transfer

Partners choose the type of knowledge transfer activity which fits best their local needs and priorities, based on:

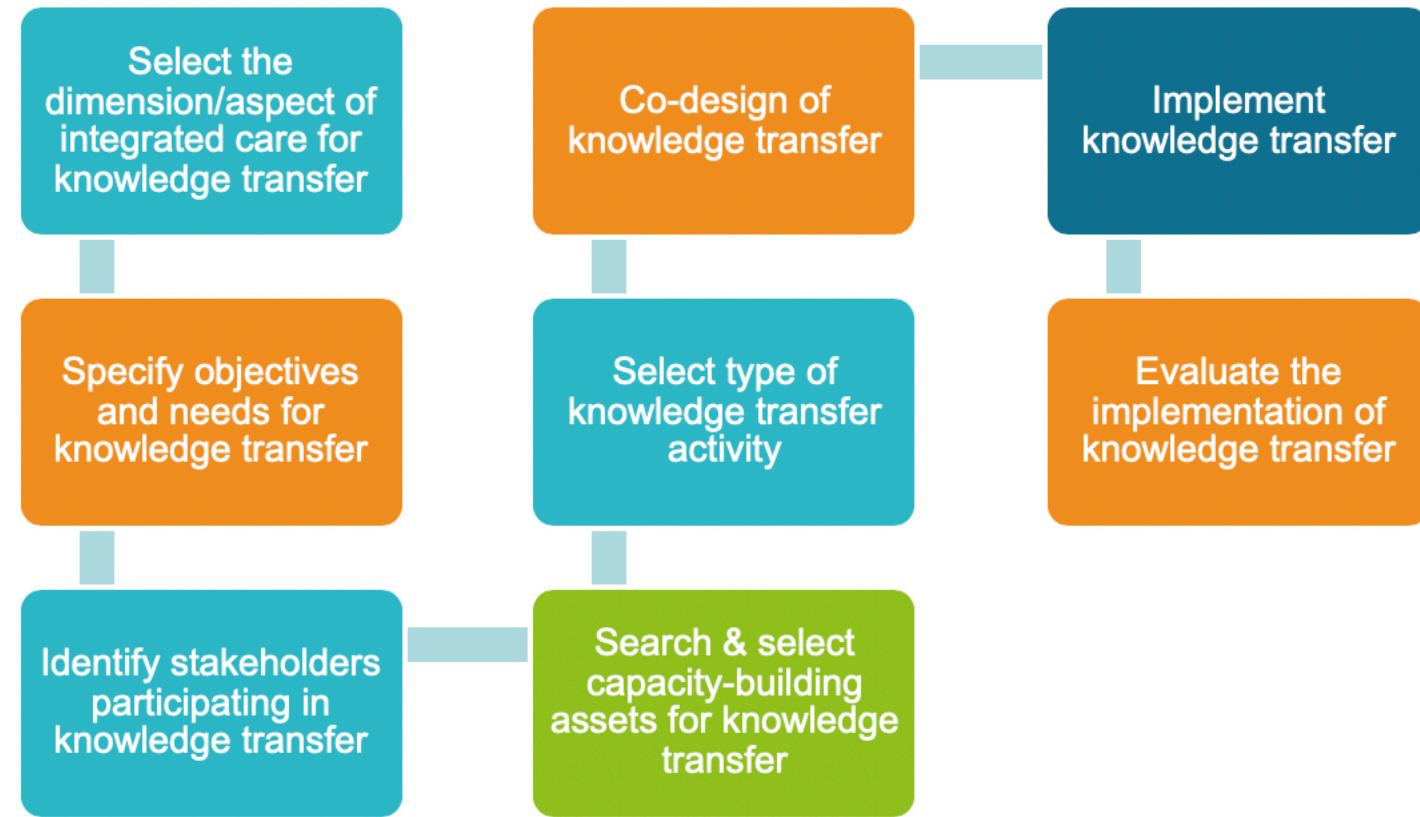
- ▶ results of the maturity assessment for integrated care in each region (WP5)
- ▶ dimension of SCIROCCO Exchange Maturity Model chosen for improvement (WP7)
- ▶ expectations in terms of improvement
- ▶ assets selected in the Knowledge Management Hub for the facilitation of knowledge transfer (WP4-WP6)
- ▶ resources of individual regions
- ▶ knowledge from both the partner region and AER regarding cultural aspects and the ways in which knowledge transfer activities are most efficient

Activities in the Knowledge Transfer Programme

The Knowledge Transfer Activities are classified into 5 main categories:

- Expert mission to receiving region
- Events in receiving region, or in other relevant place, with peers and experts from SCIROCCO Exchange Consortium
- Capacity-building activities in receiving region or elsewhere if relevant
- Study visit to transferring entity/ region
- Exchange, secondment or placement of staff

Knowledge Transfer process



	A	B	C	D	E	F	G	H
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Table 2: Specification of the needs and objectives of Knowledge Transfer (KT) Programme

Region	What is your objective?[1]	What needs to change to reach this objective?	How can be the change delivered?	Who can deliver this change?[2]	How to measure this change?[3]	Expected timeline	Envisaged type of KT activity[4]
Basque Country							
Flanders							
Germany							
Lithuania							
Poland							
Puglia Region							
Scotland							
Slovakia							
Slovenia							

[1] The purpose of this question is to better understand what health and social authority wants to achieve with the knowledge transfer in a selected dimension of SCIROCCO Exchange Maturity Model. For instance, is it to raise the maturity along a particular dimension and/or improve the existing level of maturity, increase the knowledge or understanding of integrated care, improve the capacity of the staff etc. Please refer to WP7 spreadsheet "Overview of Knowledge Transfer Programme".

[2] Please think about the stakeholders/organisations which need to be involved in this knowledge transfer process.

[3] The purpose of this question is to better understand how we will know the anticipated change was achieved.

[4] The proposed KT activities include; expert missions to receiving regions; events in the receiving regions; capacity-building activities; study visits to transferring regions; exchange, secondment and/or exchange of staff.

Trends

- ▶ The COVID-19 pandemic has generally **confirmed the results of the maturity assessments**
- ▶ A number of partners are starting their activities within their own ecosystem:
strengthen the links between stakeholders
encourage & support collaboration
engage stakeholders
- ▶ Some partners have already identified practices they are particularly interested in in other regions
their activities aim to **strengthen links with these regions first** and enable operational learning
- ▶ Other partners will start by searching the knowledge management hub to identify relevant assets first
- ▶ The approach of partners is slightly different from classical good practice sharing projects: partners build on findings from previous and current projects to empower their own stakeholders. **Knowledge is mediated rather than merely shared** (which avoids information overload and disengagement from stakeholders)
- ▶ At the same time **partners are paving the way for autonomous use of information and knowledge** by stakeholders be it on funding opportunities for Puglia, tools for integrated care systems for Lithuania, examples on integrated care systems for Slovakia
- ▶ Workshops will be organised between partners on shared challenges

Anticipated challenges/concerns

► Availability of stakeholders:

- first the challenge seemed to be to move everything online
- growing concerns about the possibility to work with stakeholders at all as they are focused on managing the sanitary situation and not available, even for an hour online event.

A large, abstract graphic on the left side of the slide consists of several overlapping, flowing ribbons in various colors including green, yellow, orange, red, and blue, creating a dynamic, swirling effect.

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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN THE BASQUE COUNTRY

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Osakidetza, Basque Country



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Setting priorities for knowledge transfer

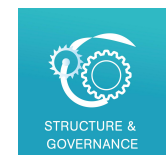
Outcomes of the maturity assessment



Dimensions for the knowledge transfer



Potential dimensions for coaching of other regions/countries



Objectives of knowledge transfer

► Interest in three dimensions:

Process Coordination

- Definition of integrated Clinical processes and Pathways
- Strengthening the relationship between the health and social systems

Removal of Inhibitors

- Increase collaboration at both levels of care: hospitals and primary care
- Increase collaboration at the local level with social services and community
- Work more as a team: achieve broader consensus in complex settings

Citizen Empowerment

- Increase the participation of the population in co-creating activities as:
 - Planning the school of health
 - Self-management

What needs to change to deliver these objectives?

- ▶ Both professionals and patients need to know how to both generate opportunities for co-creation and seize them.
- ▶ There needs to be an environment of trust where stakeholders can collaborate without fear
- ▶ A cultural shift is needed

Envisaged type of knowledge transfer activities to deliver this change

- ▶ Including citizen empowerment on top of the political agenda
- ▶ Training professionals and patients
- ▶ Using proper communication strategies (both top down and informal such as via social media)
- ▶ Sharing good practices to share knowledge at local, regional, national and international level
- ▶ It is necessary to create moments, places, opportunities for stakeholders to share experiences and work together on processes. This will create better mutual understanding and build trust

Implementation of knowledge transfer activities in the Basque Country

- ▶ Work with the rest of the Scirocco Exchange regions to gather information on their achievements (good practices, innovative processes, etc.) in:
 - ▶ Process coordination
 - ▶ Removal of inhibitors
 - ▶ Citizen empowerment
- ▶ Once we agree on the activities to learn from, start defining knowledge transfer activities. Starting from bilateral calls, to webinars or online study visits.

Anticipated challenges/concerns

- ▶ The Basque Healthcare system is now focused on safeguarding the health of the population and minimizing the impact of the pandemic
- ▶ It is difficult to carry out research work (as knowledge transfer activities), but we believe it is vital not to stop. Having said that, we expect them to decrease greatly



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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN FLANDERS REGIONS

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Setting priorities for knowledge transfer



Objectives of knowledge transfer based on the Flanders needs

- ▶ **Population approach:**

Interpretation of data by the 60 local Primary Care Boards and the local authorities who will use the Flemish Care Atlas

- ▶ **Process coordination:**

Improved and sustainable coordination between health and social care

- ▶ **Evaluation: upscaling what exists and is efficient**

- ▶ **Increase knowledge at local level (60 Primary Care Boards) thanks to other countries experiences**

- ▶ **Flanders works towards a goal-oriented care, meaning integrating the health and social care in function of the life goals for a person with a care need.**

What needs to change to deliver these objectives?

- ▶ **Continued efforts to work on change management**
= plan for the long term; structural and financial reinforcement of Care Boards and the Regional Care Zones in Flanders
- ▶ **Goal-oriented care**
extra dimension in the MMA?
any experience?
- ▶ **Use of Digitalisation for GOC**
Any experience? Flanders would like to use a Digital Care Plan

Envisaged type of knowledge transfer activities to deliver this change

- ▶ Addressing population approach and process coordination where it has been successfully implemented by Scirocco partners with the Primary Care Institute of Flanders - VIVEL
- ▶ Exchange on experiences – peer discussions between implementors in countries / regions and the Flanders local level = coaching
- ▶ Evaluation and monitoring methods for regional and local level = cooperation with VIVEL and Flanders Institute for Quality of Care

Anticipated challenges/concerns

- ▶ **Convincing the local level**

 - Any good practices?

- ▶ **Timespan longer than project**

 - Do we need to formalise our cooperation?

- ▶ **Belgium state structure requires internal tuning**



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Setting priorities for knowledge transfer



Setting priorities for knowledge transfer



Digital Infrastructure

Population approach

Process Coordination

Citizen Empowerment

Objectives of knowledge transfer

To improve the integrated care system along dimensions prioritized through the maturity assessment through bilateral exchanges with partners to both share our knowledge and learn.

To build relationships with subject matter experts from regions at various stages of integrated care on dimensions of integrated care.

What needs to change to deliver these objectives?

- Strengthened digital infrastructure
- Improved population approach
- Improved process coordination
- Improved citizen empowerment

Envisaged type of knowledge transfer activities to deliver this change

- Peer to peer bilateral exchanges (virtual or in-person study visit)

Implementation of knowledge transfer activities in Werra Meissne Kreis (Germany)

- Identifying SCIRROCO partners that have an advanced digital infrastructure embedded in their integrated care system
- Identifying SCIRROCO partners that experienced similar struggles in starting out their integrated care system
- Preparation for study visit (coordination and jointly creating an agenda)
- Conducting the study visits in 2021

Anticipated challenges/concerns

- We are keen to explore virtual options, however recognizing that face to face exchanges are often preferred. To that end, we plan for exchanges to occur in 2021, however the plans will be dependent on how the COVID situation unravels in Europe.



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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN LITHUANIA

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Setting priorities for knowledge transfer



The spider diagram of the total results

The results of the self-assessment process before the consensus-building workshop and after vary quite strongly. The following three dimensions were highlighted as priority dimensions for changes:

- Process Coordination,
- Removal of inhibitors,
- Capacity Building.

Objectives of knowledge transfer

To encourage cross-boundary collaboration and to remove some of the key bottle neck, such as coordination of care in order to:

- ▶ improve continuity of care and communication among healthcare professionals and levels of care;
- ▶ increase the knowledge and understanding of integrated care.

What needs to change to deliver these objectives?

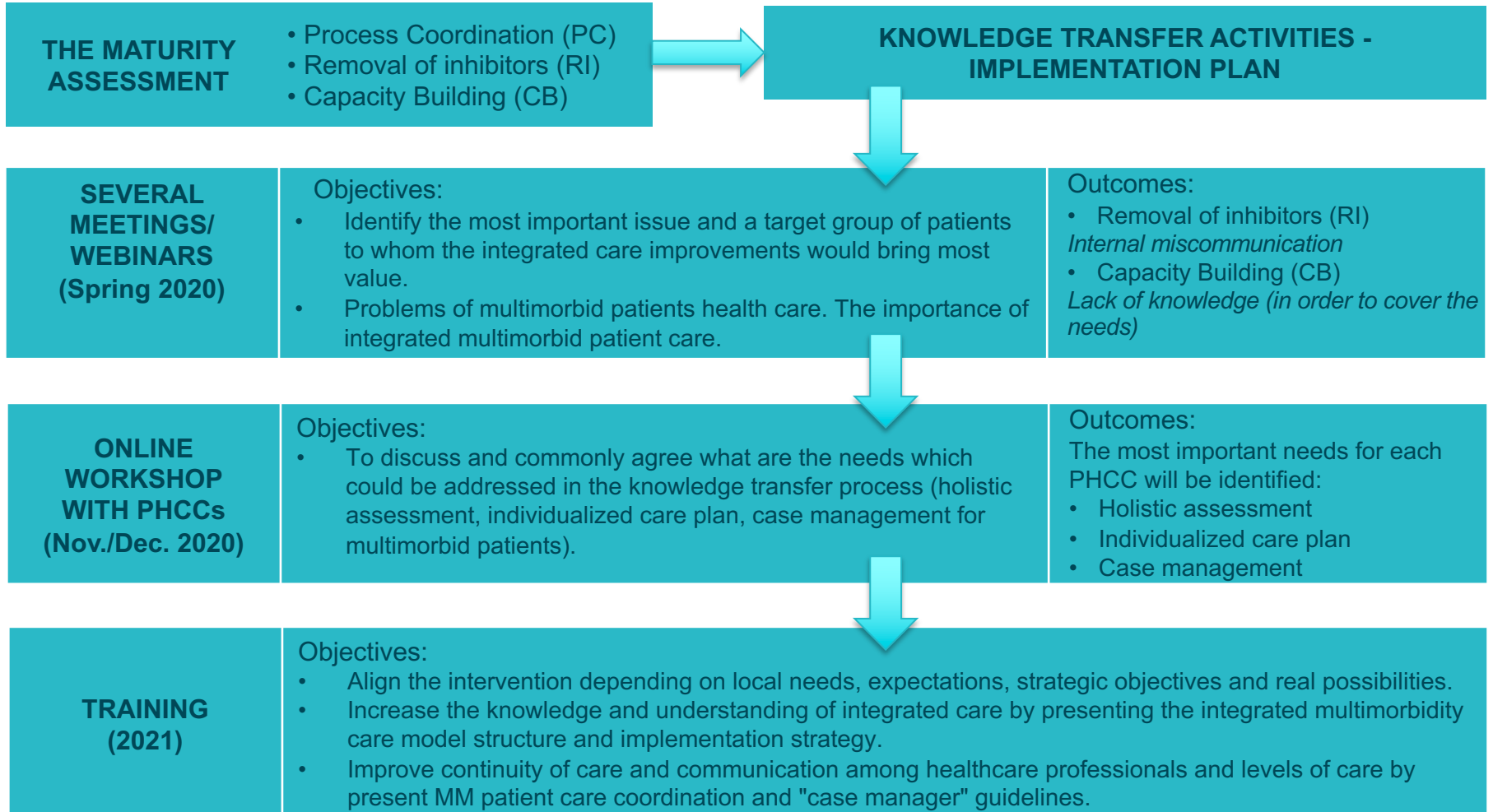
Stakeholders need to learn to work together, share experiences and lessons learnt. There is a need to increase the knowledge and understanding of integrated care:

- ▶ Better defined role of the multidisciplinary primary care team and coordination among healthcare professionals;
- ▶ Increase the knowledge and skills of healthcare professionals on multi-morbidity;
- ▶ Represent clear responsibilities and supporting tools for the team members;
- ▶ Perception of the knowledge exchange routine.

Envisaged type of knowledge transfer activities to deliver this change

- ▶ Capacity building on cross-boundary working and improving communication+ collaboration;
- ▶ Information sessions for healthcare professionals;
- ▶ Study visits;
- ▶ Teaching/brainstorming sessions/follow-up calls.

Implementation of knowledge transfer activities in Lithuania



ACCI questionnaire (Assessment of Chronic Illness Care) for each PHCC before and after the intervention will be used.

Anticipated challenges/concerns

- ▶ It could be that trainings will have to be transferred to the online format. Due to it some delays could be expected.



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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN PUGLIA REGION

Serena Mingolla
AReSS Puglia



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Setting the priorities for knowledge transfer



Bari Local Health Authority final spider diagram



Brindisi Local Health Authority final spider diagram



Barletta-Andria-Trani Local Health Authority final spider diagram



Foggia Local Health Authority final spider diagram



Lecce Local Health Authority final spider diagram



Taranto Local Health Authority final spider diagram

Setting the priorities for knowledge transfer

	Tool Dimensions											
Organisation	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
BA LHA	3	3	2	4	1	2	3	4	3	4	3	3
BR LHA	3	4	4	3	3	3	3	4	3	4	3	3
BT LHA	3	2	3	4	1	1	4	2	2	4	3	3
FG LHA	4	2	3	2	3	1	4	3	1	1	2	2
LE LHA	2	2	4	3	4	3	3	3	3	3	2	3
TA LHA	2	2	3	3	0	1	3	3	2	1	2	3

Dimensions			
Q1	Readiness to Change	Q7	Population Approach
Q2	Structure & Governance	Q8	Citizen Empowerment
Q3	Digital Infrastructure	Q9	Evaluation Methods
Q4	Process Coordination	Q10	Breadth of Ambition
Q5	Finance & Funding	Q11	Innovation Management
Q6	Removal of Inhibitors	Q12	Capacity Building

Legend				
				5 to 4
				3 to 2
				1 to 0

Setting the priorities for knowledge transfer

Major strengths include:

Q3 - Digital Infrastructure

Q4 - Process Coordination

Q8 - Citizen Empowerment

Q7 - Population Approach



Setting the priorities for knowledge transfer

Weaknesses

Q5 – Finance and Funding

Q6 - Removal of Inhibitors

Q9 – Breadth of Ambition



What needs to change to deliver these objectives?

The crosscutting identified weaknesses are:

- ▶ **Q5 Finance and Funding.** Although Puglia is one of the Italian regions with the highest level of performance in the use of European funds, the health sector suffers from the lack of specialized and / or dedicated h. resources;
- ▶ **Q6 Removal of Inhibitors.** The obstacles are twofold: cultural (also related to the advanced age of h. resources and the low turn-over); and IT skills if we consider the use of new technologies in the integrated care sector;
- ▶ **Q10 Breadth of Ambition:** Integration is still under experimentation (Puglia Care 3.0 model) while several e-Health good practices are still on the verge of being scaled up as a result of a positive assessment by the Regional HTA centre

Setting the priorities for knowledge transfer

Objectives of knowledge transfer

The objective of the KT programme in Puglia is to plan initiatives to fill the gaps emerged thanks to the Integrated care maturity level assessment in the Region.

Envisaged type of knowledge transfer activities to deliver this change

- ▶ Training and Communication emerged as relevant levers of organizational change according to the involved Stakeholders
- ▶ **FIRST ACTION:** Organisation of a workshop with 6 LHAs in November 2020

The objective of this workshop is to discuss the outcomes of the maturity assessment process in 6 LHAs in Puglia and commonly agree on the needs to be addressed in the knowledge transfer process in order to get buy-in and engagement of stakeholders in this process. The workshop will be held virtually.

Implementation of knowledge transfer activities in Puglia – next tasks

- ▶ 1. Map stakeholders to be invited for the meeting
- ▶ 2. Prepare agenda for the meeting
- ▶ 3. Prepare some initial thoughts on the needs to be addressed in the knowledge transfer process in order to facilitate the discussion on the day
- ▶ 4. Organise the logistics of the meeting
- ▶ 5. Promote the workshop
- ▶ 6. Write short report about the outcomes of the workshop

Anticipated challenges/concerns

- ▶ **The pandemic and the response of the stakeholders**



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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN POLAND

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Setting priorities for knowledge transfer



The overall outcomes show that primary care in Poland is making significant progress in all dimensions, but mostly due to the fact that PHC take part in a pilot project POZ PLUS that generates new pathways, adopts new solutions, and forces cooperation between primary and specialised care.

Objectives of knowledge transfer

- ▶ **Improve the overall maturity for integrated care at national level; support initiated digitalization of health sector**
- ▶ **Engage relevant stakeholders to contribute to transforming the existing system of healthcare towards integrated care system on the basis of experience gained through implementation of pilot project of integrated care in PHC facilities**
- ▶ **Change the perception and understanding of integrated care**
- ▶ **Initiate collaboration between stakeholders from health and social sector**

What needs to change to deliver these objectives?

The stakeholders involved in the pilot project of integrated care need to:

- ▶ share their knowledge of integrated care in order to change the perception and understanding of integrated care within health sector
- ▶ be more willing to initiate collaboration with social care

Envisaged type of knowledge transfer activities to deliver this change

- ▶ Organisation of workshop / breakfast briefings between stakeholders of health and social sector
- ▶ Study visits to share knowledge of best practices in other regions/countries
- ▶ Production of educational materials on best practices

Implementation of knowledge transfer activities in Poland

- ▶ preparatory work for workshops with 10-15 selected PHC facilities that can be perceived as initiators of change in digitalisation of their system, integration with social care
- ▶ Identification of stakeholders from social sector

Anticipated challenges/concerns

- ▶ Due to pandemic it can be difficult to encourage the PHC facilities to take part in any additional activities



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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN SCOTLAND



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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN KOSICE REGION, SLOVAKIA

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IMPLEMENTATION OF KNOWLEDGE TRANSFER IN SLOVENIA



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10.40 – 11.00 COFFEE BREAK



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IMPROVEMENT PLANNING

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Meeting in Brief

Goal

To **share** and **discuss** next steps for WP8 and draw connections to how this supports countries in furthering their integrated care initiatives

Objectives

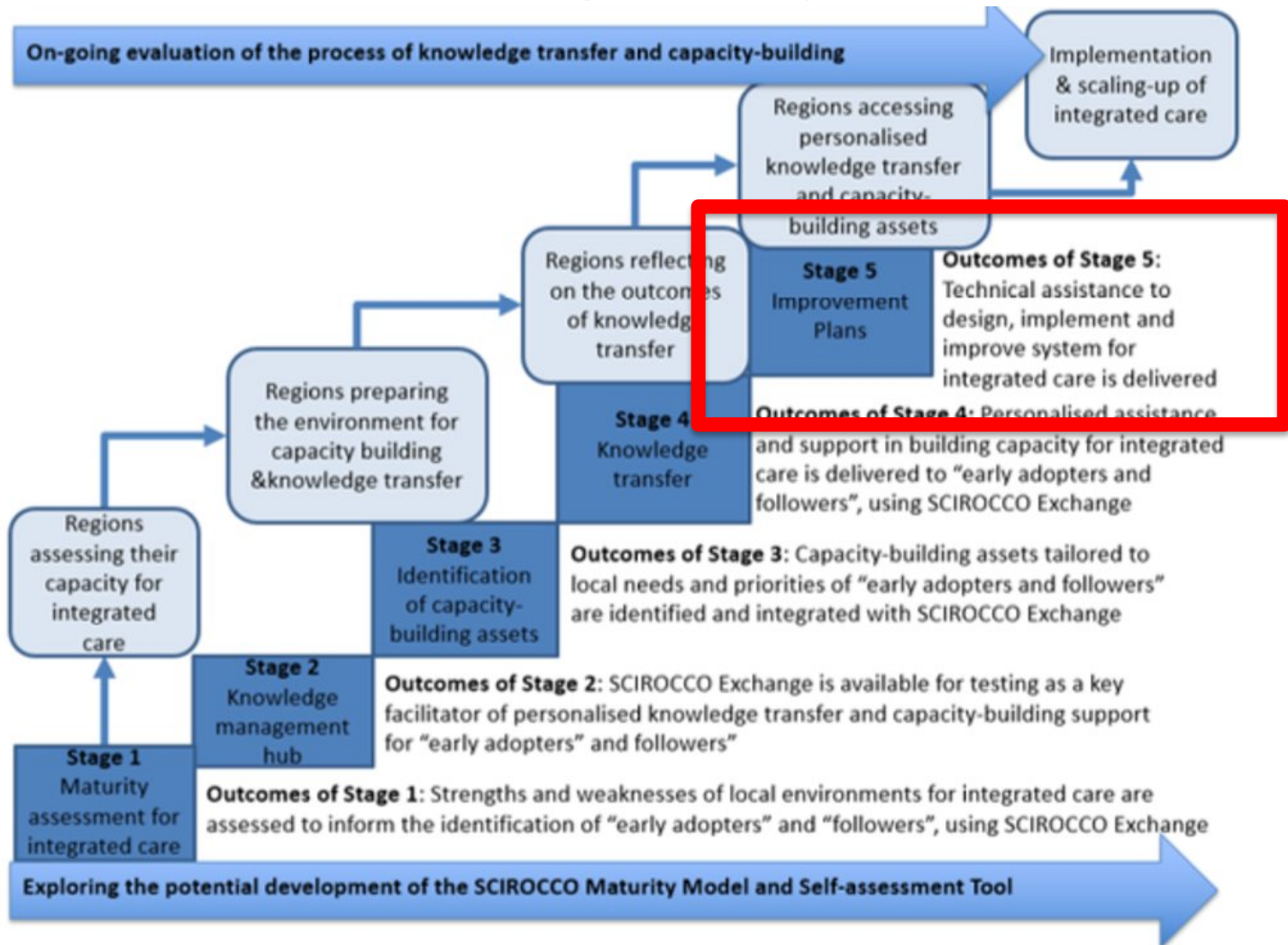
- Ensure that all project teams are clear on what this WP entail, our approach and why
- Clarification with other WPs on how we can streamline their WP outputs with our workflow
- Share and discuss a realistic timeline for WP8 activities

Agenda

- 1. Where does WP8 fit into the overall SCIROCCO Exchange Project?**
 - a) Current approach and linkages with other WPs
- 2. What is our approach to WP8 Improvement Planning?**
 - a) Templates 8.1 and 8.2
 - b) Questions and feedback
- 3. What is a logic model? Theory of change? <Working session>**
 - a) Introduction to logic models
 - b) Walk through the construction of a logic model example
- 4. Let's review the timeline**

Where does WP8 fit into the overall SCIROCCO Exchange Project?

Where does WP8 fit into the overall SCIROCCO Exchange Project?



WP8 Approach

WP 8 Task	Deliverable	What?	Who?
01 Mapping of current evidence and existing assets in improvement	Improvement in integrated care – existing evidence and practice	Review existing evidence (international)	WP8
		Consolidate existing organizational improvement activities (national and regional -> 8.1)	Regions
02 Codesign a personalized improvement plan	Personalized improvement plan (by region)	Synthesize results from IC profile, MA, KT and integrate with proposed improvement strategies	WP8
		Template 8.2	Regions
03 Support regions in effective stakeholder engagement to optimize successful implementation of improvement plan	Logic model (by region)	Introduce topic and facilitate working sessions	WP8
		Participate in bilateral calls and complete logic models	Regions

What is our approach to improvement planning?

WP 8.1 Mapping of Existing Improvement Methods and tools

Purpose:

To identify **tools, frameworks, repositories, and good practices** at the national and regional level related to improvement planning in the context of the 12 dimensions of integrated care as identified within the SCIRROCO project. The outcomes of this mapping will be linked to SCIROCCO Exchange Knowledge Management Hub as one of the capacity-building assets for integrated care.

WP 8.1 Mapping of Existing Improvement Methods and tools

- Is there a national or regional **policy** for improvement?
- Is there a national or regional **organization** in charge of improvement?
- Please identify regional and national resources that supports improvement

	Name of Resource	Type of Resource	Geographical Scope	Source Organization
Readiness to Change				
Structure and governance				

WP 8.2 Personalized improvement planning environmental scan

Purpose: To map existing improvement tools and methods within SCIROCCO Exchange regions to inform next steps of improvement planning.

Region: Kosice, Slovakia

Improvement strategy name and description

MASTER PLAN for the establishment of integrated healthcare centers in the Kosice region

- Increase the availability and effectiveness of primary healthcare provision
- Improve interprofessional collaboration (health and social services)
- Improve HCPs retention, strengthen health promotion campaign, decentralize decision making processes, improve patient centered care

WP 8.2 Personalized improvement planning environmental scan

Purpose: To map existing improvement tools and methods within SCIROCCO Exchange regions to inform next steps of improvement planning.

Improvement tools or methods

[if known, refer to specific Improvement Intervention Type: LEAN, accreditation/certification, audit and feedback, Model for improvement, Six sigma, Kaizen]

Investment projects on (re)building integrated care centers in 25 proposed municipalities

WP 8.2 Personalized improvement planning environmental scan

Purpose: To map existing improvement tools and methods within SCIROCCO Exchange regions to inform next steps of improvement planning.

Resources allocated

[Specific funding for improvement strategies? Period ?]

A total of 25,308 000 € is planned to be used for (re)building integrated care centres in the Kosice region

WP 8.2 Personalized improvement planning environmental scan

Purpose: To map existing improvement tools and methods within SCIROCCO Exchange regions to inform next steps of improvement planning.

Scale of intervention/level of change

[regional, institutional, department, practice groups,]

There is a need to check the current level of the project implementation through communication with the Kosice region.

WP 8.2 Personalized improvement planning environmental scan

Purpose: To map existing improvement tools and methods within SCIROCCO Exchange regions to inform next steps of improvement planning.

Description of data usage and feedback systems

[Which databases are being used? hospital, GP, regional monitoring data, survey data? Is data collected alongside the intervention, have indicators been formulated]

Regional monitoring data were used (e.g. number of healthcare professionals, number of hospitals, number of schools, accessibility of transportation, number of inhabitants (< 15 000), support of council, availability of building, etc.) for situational analysis and identification the target areas.

Questions?

What is our approach to improvement planning?

What is a logic model?

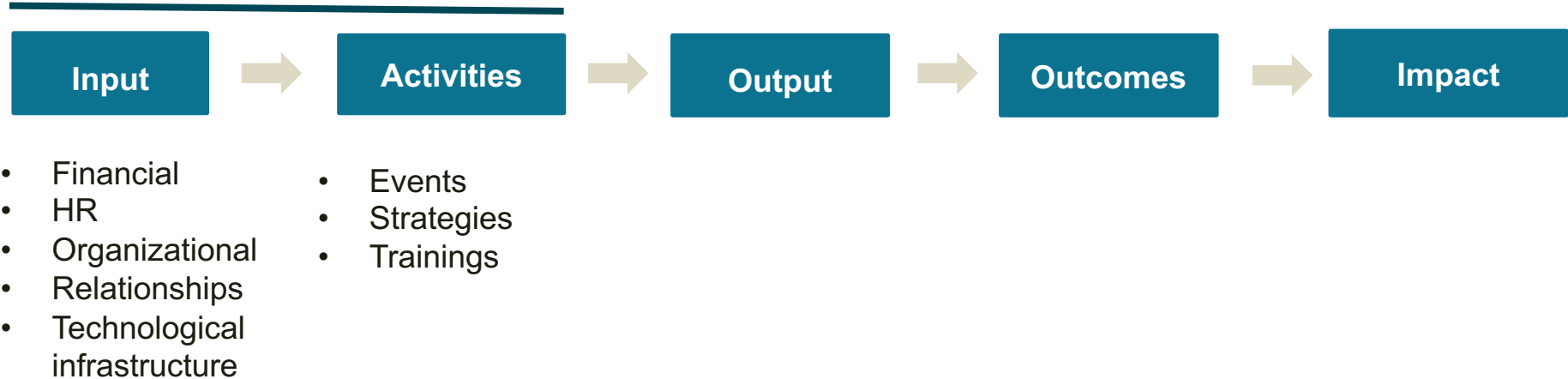
Planned Work



De Silva, Mary J., et al. "Theory of change: a theory-driven approach to enhance the Medical Research Council's framework for complex interventions." *Trials* 15.1 (2014): 267.

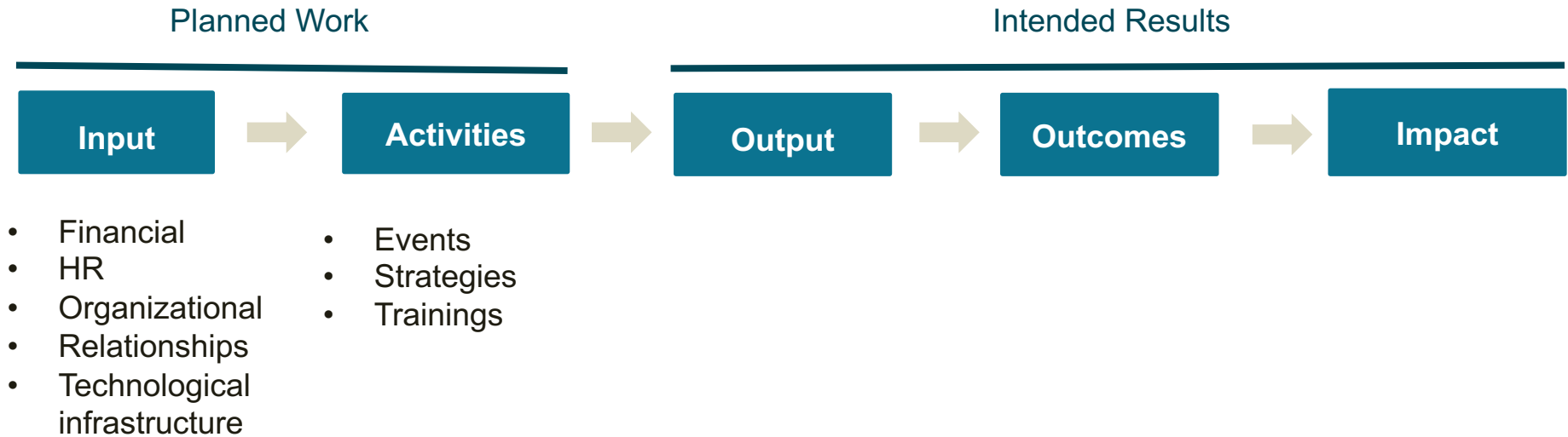
What is a logic model?

Planned Work



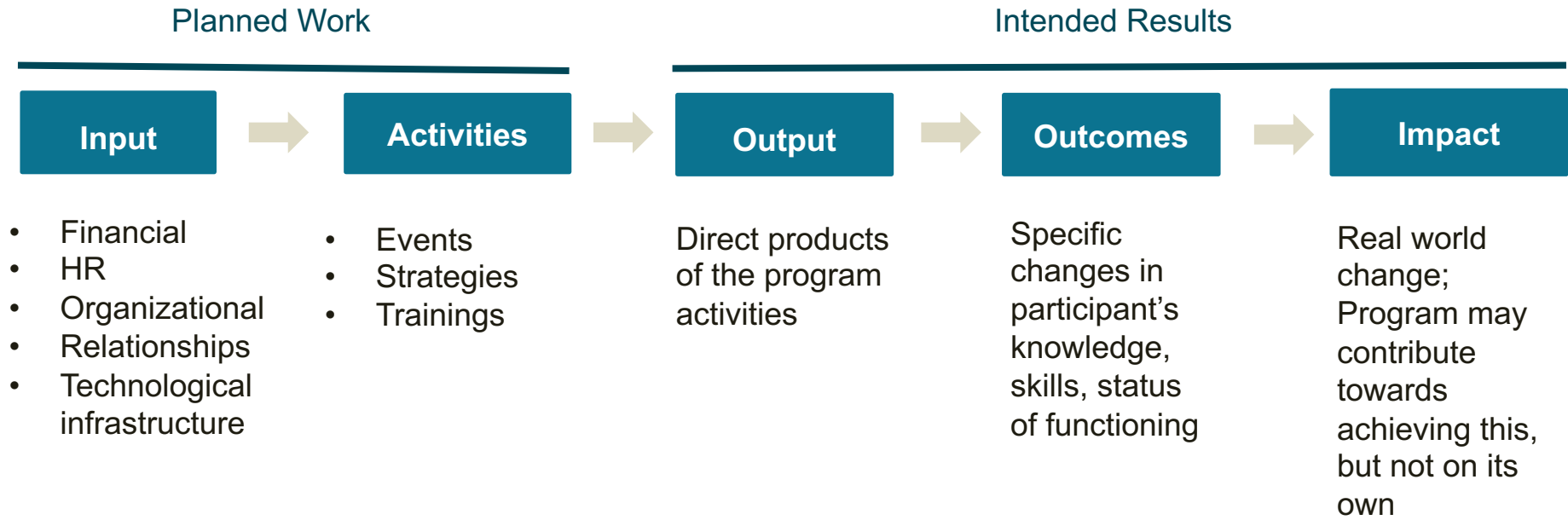
De Silva, Mary J., et al. "Theory of change: a theory-driven approach to enhance the Medical Research Council's framework for complex interventions." *Trials* 15.1 (2014): 267.

What is a logic model?



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What is a logic model?



De Silva, Mary J., et al. "Theory of change: a theory-driven approach to enhance the Medical Research Council's framework for complex interventions." *Trials* 15.1 (2014): 267.

Logic Model Example 1 – Let's bake a cake!

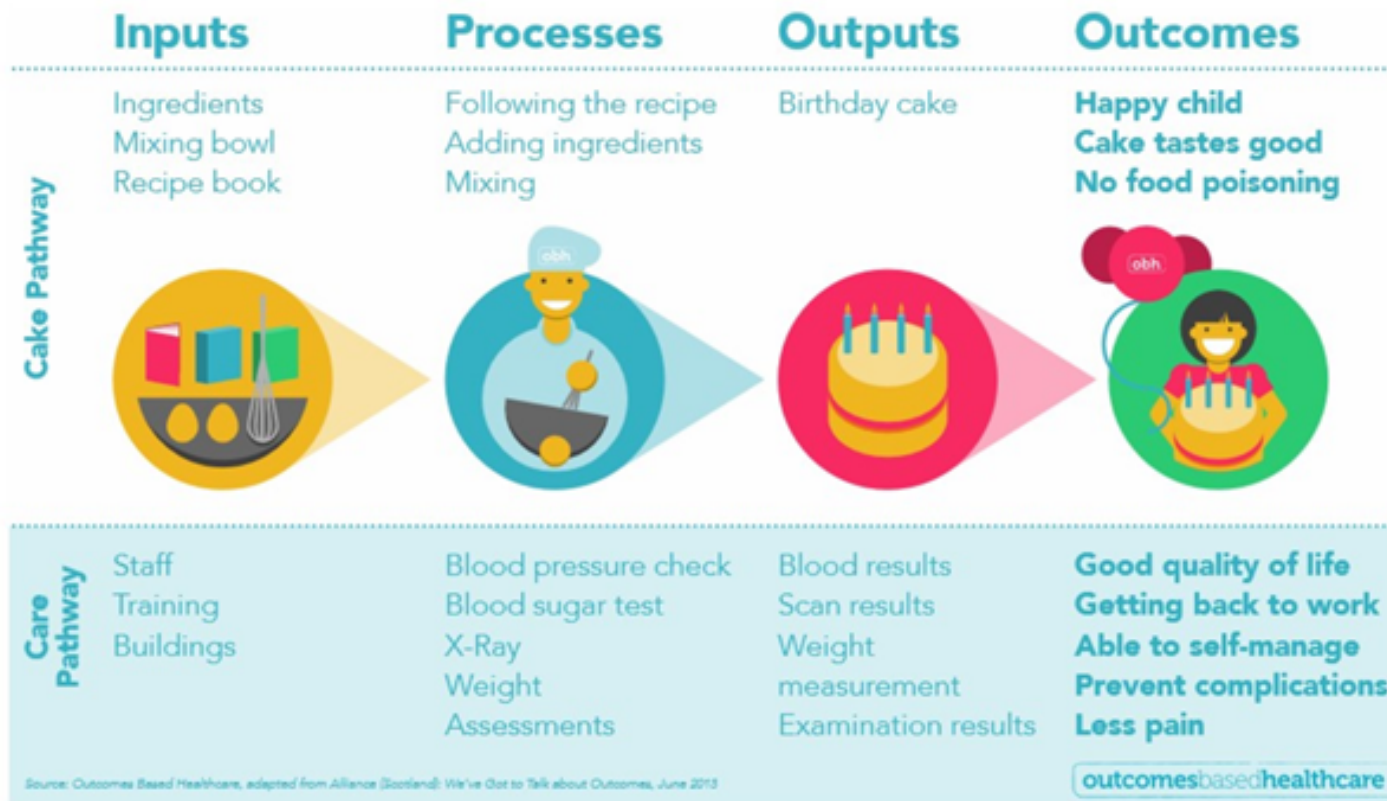


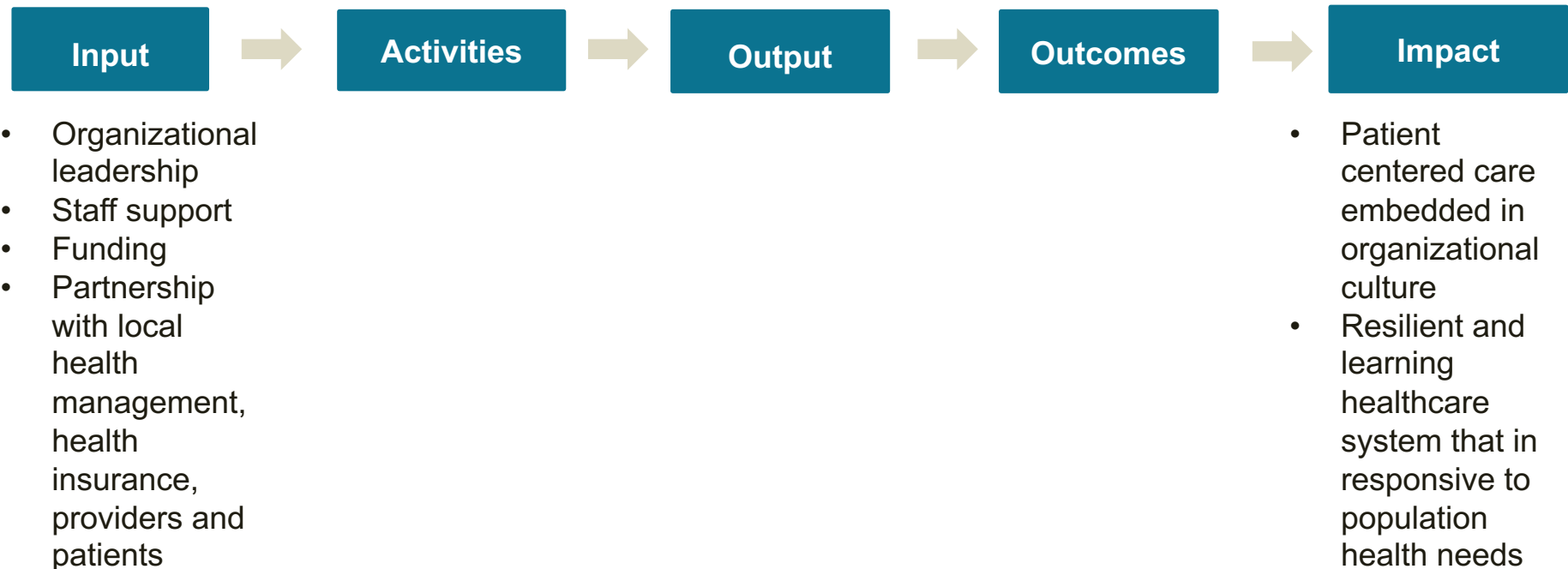
Figure 3 - Types of quality measures across care pathways (Source - OBH, Adapted from Alliance (Scotland): We've Got to Talk about Outcomes, June 2013).

De Silva, Mary J., et al. "Theory of change: a theory-driven approach to enhance the Medical Research Council's framework for co interventions." *Trials* 15.1 (2014): 267.

Why Logic Models?

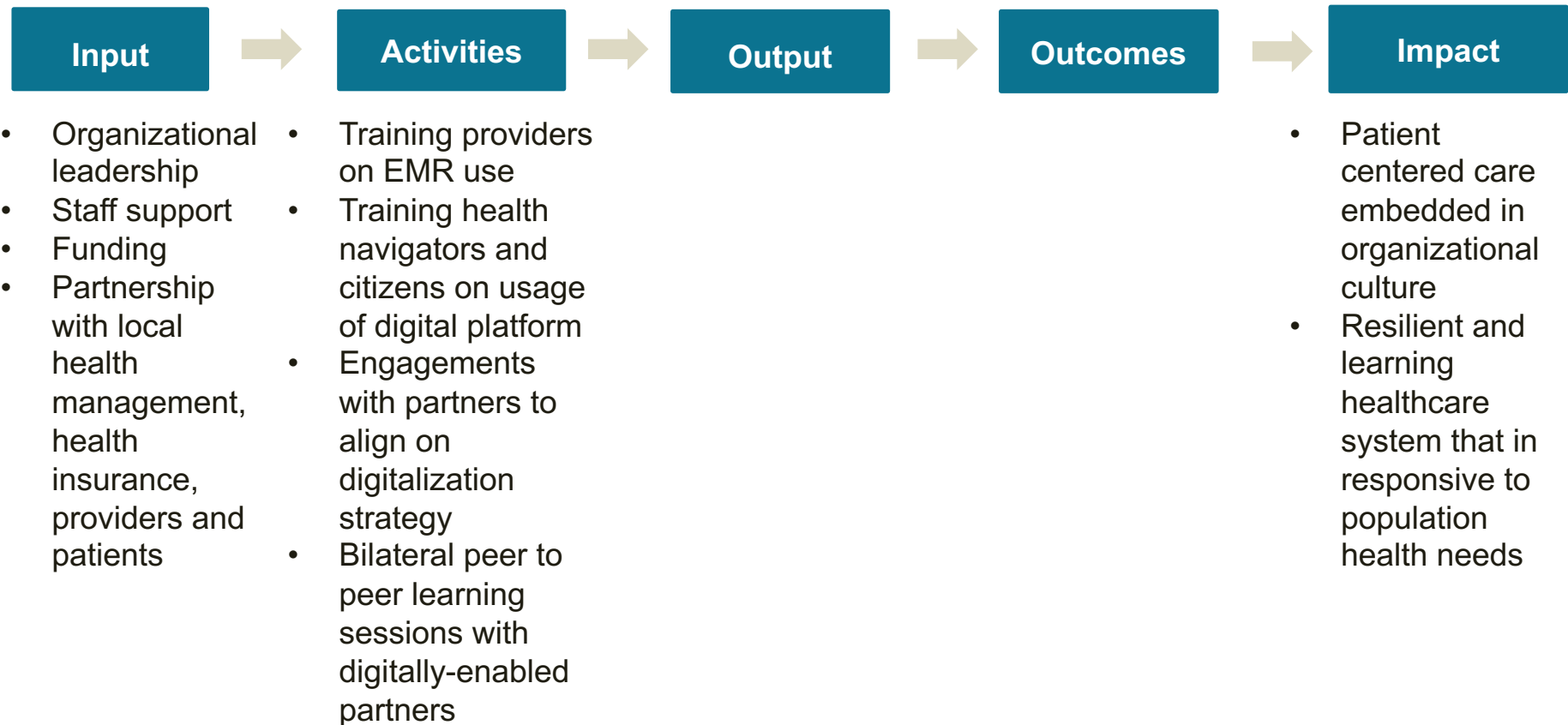
Logic Model Example – WMK (Germany)

Focus Area: Digital Infrastructure



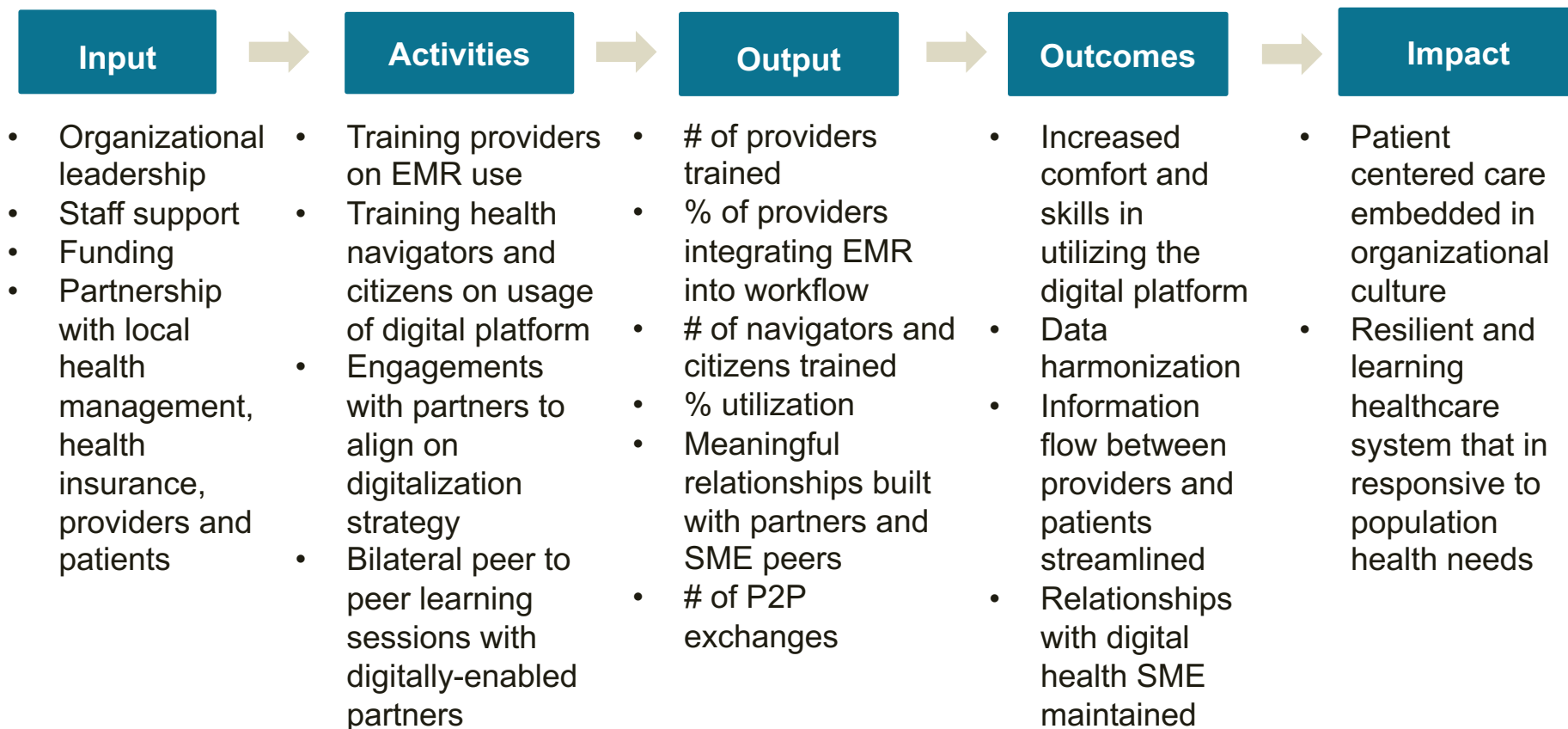
Logic Model Example – WMK (Germany)

Focus Area: Digital Infrastructure



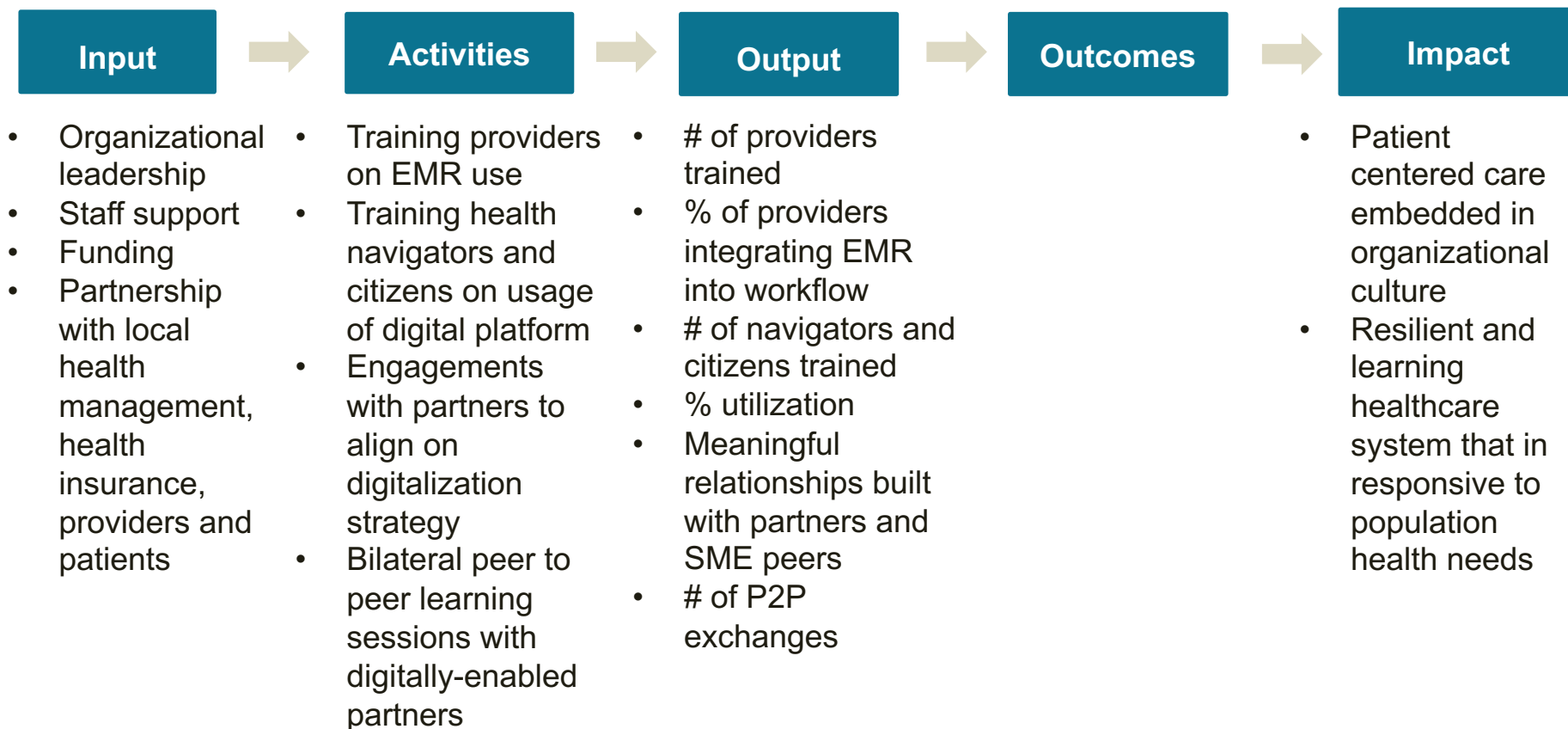
Logic Model Example – WMK (Germany)

Focus Area: Digital Infrastructure



Logic Model Example – WMK (Germany)

Focus Area: Digital Infrastructure



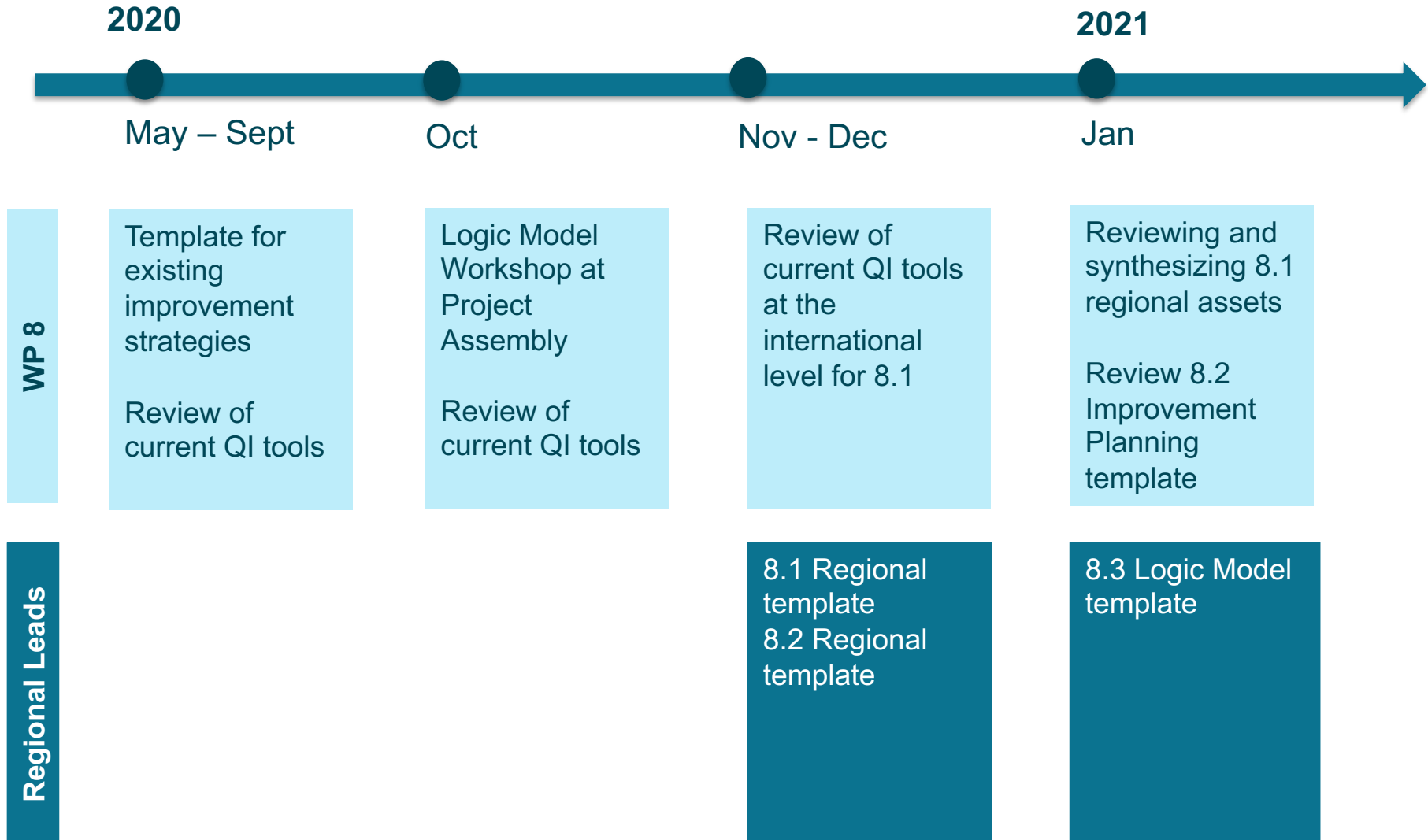
Why Logic Models?

Why Logic Models?

- To establish a shared understanding of what the program is, where it's headed and how progress can be measured → facilitating communication and concise messaging
- Improve stakeholder engagement
- Articulate and test the logic behind your program/project/initiative
- Inform evaluation studies, illuminate causal assumptions in the link between activities, outputs and outcomes

Let's review the timeline

WP8 Improvement Planning Timeline



WP8 Improvement Planning Timeline

2021



Feb - Apr

May - Aug

Sept – Dec

WP 8

Facilitating
bilateral calls
with regions to
solidify logic
model

Synthesizing
results from
MA, KT, logic
model, existing
improvement
strategies

Personalized
improvement
plan
consolidation
and
dissemination

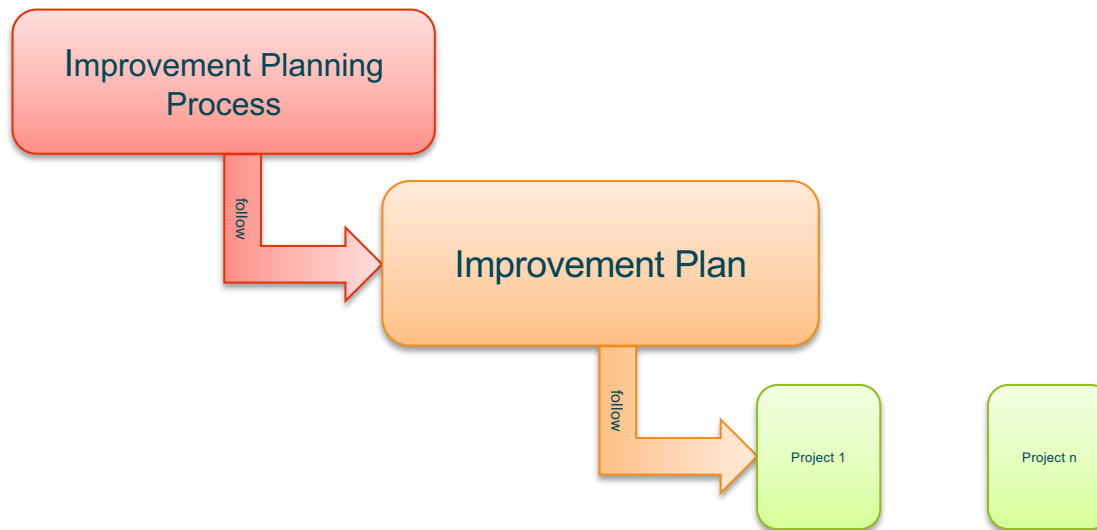
Regional Leads

Regional Logic
Model
workshops

Presentation of
regional logic
model at Project
Assembly

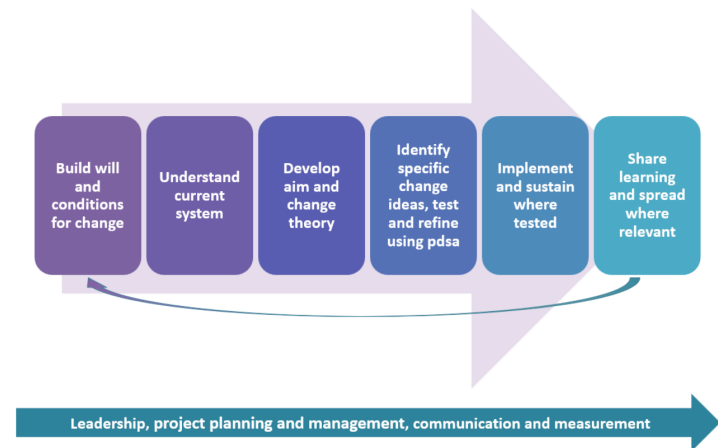
Logic Model
completion

Connection to WP8: Improvement Planning

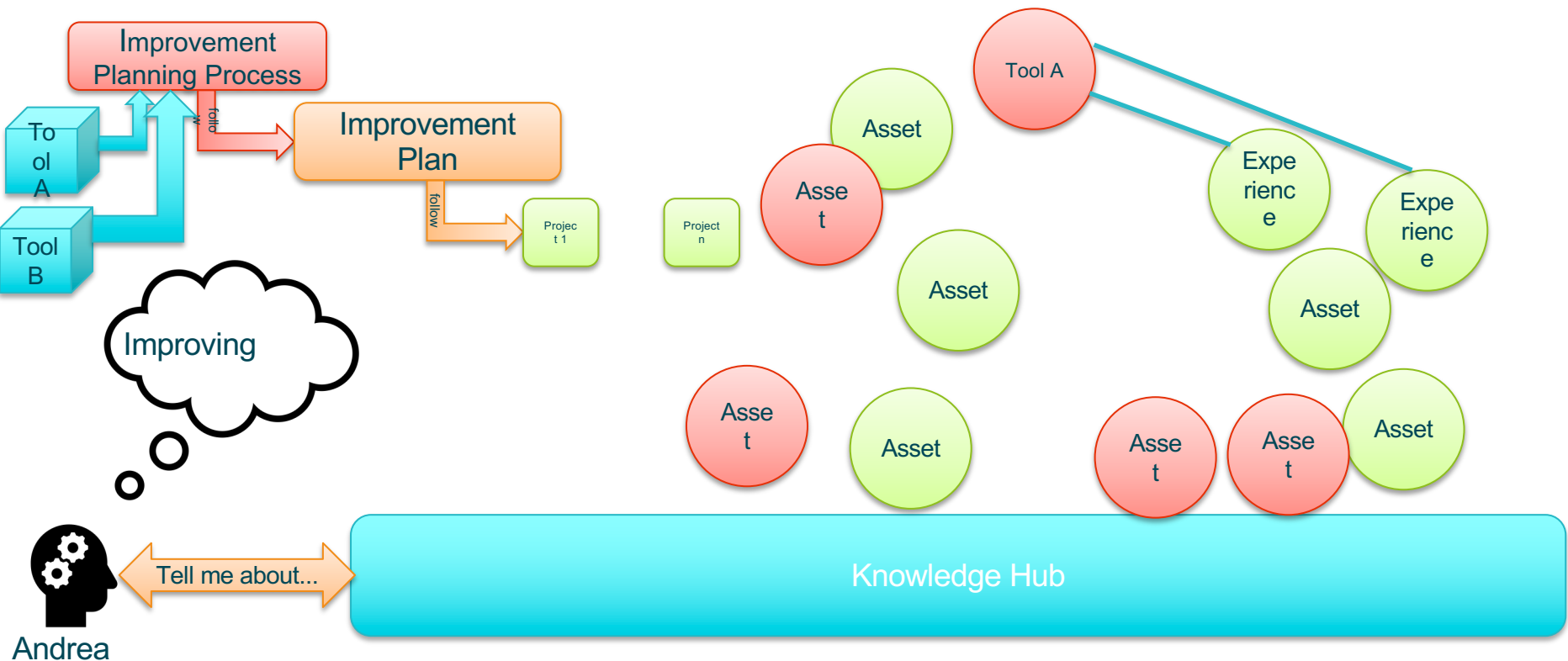


Questions?

- ▶ **Is the previous picture correct?**
- ▶ **Will we have assets relevant to things like improvement planning processes?**
- ▶ **Do we want to consider tool use?**
- ▶ **How can we make this sustainable?**
(process transfer is hard work for the donor?)



Supporting Process Transfer

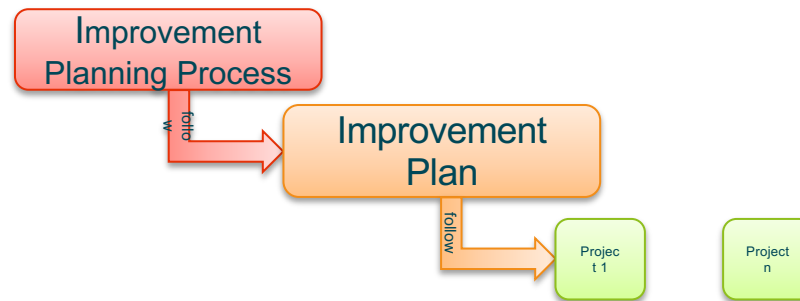


Improvement Planning

- ▶ Improvement planning uses a wide range of tools (e.g. NHS England seems to use around 100 or more...)
- ▶ Should we look at transfer of tool expertise?
- ▶ Should we try to have some sort of rating or experience report on particular tools in context?
- ▶ How to make that lightweight enough to be sustainable?
- ▶ Tools are often not well integrated...
- ▶ Should we look at how the hub could contribute to integration – integrating knowledge across tools?

Summary

- ▶ **There are lots of opportunities to personalise interaction with the knowledge hub to personalise knowledge transfer.**
- ▶ **All of those are available for personalisation in relation to improvement planning... BUT**
- ▶ **Improvement planning processes are structured and complex - do we want to look at how to transfer such processes in more detail?**





POLISH MUSICAL SURPRISE

<https://akademia.nfz.gov.pl/sciocco-exchange/>



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(Chafea)



END OF MEETING



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