



**Deliverable N. 3.1**

**Communication, Dissemination and  
Exploitation Plan**

**WP3**



## Document Summary

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## Contributors

- ProMIS

### DISCLAIMER

Funded by the European Union under the Horizon Europe Framework Programme - Grant Agreement N<sup>o</sup>: 101095654.

Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or European Health and Digital Executive Agency (HADEA). Neither the European Union nor the granting authority can be held responsible for them.



## History

Revision	Date	Modification	Author
1	28/12/2024	An integration was made in Section 3.2 to the table summarizing the Dissemination and Communication channels and content for the different target groups (line “Civil society and end users (patient/citizen advocacy groups, formal and informal care organisations)”) in response to the comments included in the 1st Project Review Consolidated Report (HE) (reporting period from 1/1/2023 to 30/6/2024).	ProMIS
2	28/12/2024	An additional section (4.1) detailing the internal communication among partners was added to the document in response to the comments included in the 1st Project Review Consolidated Report (HE) (reporting period from 1/1/2023 to 30/6/2024).	ProMIS
3	28/12/2024	In integration in Section 4.2 External Communication, in the table, line “Social Media”, was made in response to the comments included in the 1st Project Review Consolidated Report (HE) (reporting period from 1/1/2023 to 30/6/2024).	ProMIS

## Executive Summary

This report describes the Communication, Dissemination and Exploitation strategy developed by the THCS partnership.

The Communication, Dissemination and Exploitation Plan will firstly lay out the target groups and the objectives of the strategy, which are:

- to increase the visibility of the Partnership and the impact of the knowledge generated by its activities;
- to promote synergies and actively engage with relevant stakeholders and/or initiatives connected to the transformation of health and care system;
- pave the way to a sustainable cooperation between policy makers and research funders of the countries involved in the Partnership.

After that, the document will describe in detail the Communication strategy, with the objective of promoting the action itself and its results to a multitude of audiences, including the media and the public.

The next section will discuss the Dissemination strategy, which will be achieved not only through the same channels and tools as described in Communication, but also via specifically designated activities.

Exploitation of results and Intellectual property rights will be as well discussed in the document.

Finally, the document will tackle monitoring and reporting, which will steer the implementation of the Communication, Dissemination and Exploitation Plan.

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# 1 Introduction

The general objective of the European Partnership on Transforming Health and Care Systems (THCS) is to contribute to the transition towards more sustainable, efficient, resilient, inclusive, innovative and high-quality people-centred health and care systems equally accessible to all people. The idea is to catalyse such transformation by building an open and supporting Partnership where all stakeholders can work together to stimulate and nurture R&I activities.

The Partnership will seek in particular to foster the transition towards people-centred health and care systems, enabled by integrated services both across and beyond traditional health and care boundaries and by focusing on all the relevant dimensions for the delivery of health and care systems for all. Through its general, specific and operational objectives, the Partnership will contribute to priorities of the:

- “Communication on effective, accessible and resilient health systems”<sup>1</sup> (COM(2014) 215 final), which highlights a number of initiatives through which the EU can support policy makers in the Member States by focusing on actions to: (1) Strengthen the effectiveness of health systems, (2) Increase the accessibility of healthcare, (3) Improve the resilience of health systems. The methods and tools provided will allow Member States to achieve greater effectiveness, accessibility and resilience of their health systems.
- “Communication on enabling the digital transformation of health and care in the Digital Single Market; empowering citizens and building a healthier society”<sup>2</sup> (COM(2018) 233 final), which highlights that to date, the uptake of digital solutions for health and care remains slow and varies greatly across Member States and regions. In particular, it points out that further action at EU level is crucial to accelerate the meaningful use of digital solutions in public health and healthcare in Europe as innovative digital solutions can boost people's health and quality of life and enable more efficient ways of organising and delivering health and care services. For this to happen, they must be designed to meet the needs of people and health systems and be thoughtfully implemented to suit the local context. Digital technologies should be seen as an integral

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<sup>1</sup> <https://eur-lex.europa.eu/legal-content/en/ALL/?uri=CELEX%3A52014DC0215>

<sup>2</sup> <https://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:52018DC0233>

part of health and care and geared towards the wider objectives of health systems.

The Partnership will also support the objectives of the EU4Health Programme (REGULATION (EU) 2021/522<sup>3</sup>): a) improving and fostering health in the Union to reduce the burden of communicable and non-communicable diseases, by supporting health promotion and disease prevention, by reducing health inequalities, by fostering healthy lifestyles and by promoting access to healthcare; b) protecting people in the Union from serious cross-border threats to health and strengthening the responsiveness of health systems and coordination among the Member States in order to cope with serious cross-border threats to health; c) improving the availability, accessibility and affordability of medicinal products and medical devices, and crisis-relevant products in the Union, and supporting innovation regarding such products; d) strengthening health systems by improving their resilience and resource efficiency, in particular through: i) supporting integrated and coordinated work between Member States; ii) promoting the implementation of best practices and promoting data sharing; iii) reinforcing the healthcare workforce; iv) tackling the implications of demographic challenges; and v) advancing digital transformation (more details are provided in section 1.1.3).

In addition, the Partnership will contribute to achieving the UN Sustainable Development Goals, in particular Goal 3 “Good Health and Well-being”, and its sub-target on achieving “universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all”.

One of the specific objectives (SO5) of THCS is to “Increase stakeholders’ involvement and capacity building”. This SO aims at strengthening health and care ecosystems to take a comprehensive and wide perspective in supporting health and care systems transformation across Europe and at increasing health literacy among the population, while also assessing and improving the digital skills that health professionals need beyond understanding how digital services work.

To achieve this specific objective, some concrete actions are envisaged:

- Establish a multi-stakeholder/ecosystem collaboration platform for providing schemes

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<sup>3</sup> <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32021R0522>

supporting upscaling considering a quintuple-Helix Model approach.

- Create enabling environments for the use of technologies applying standard methodologies for their assessment and appraisal (real-life validation).
- Increase dissemination and exploitation of results from research and innovation activities involving patients and the general public.

## 2 Definitions

Based on the EC Research & Innovation Participant Portal Glossary/Reference Terms<sup>4</sup>, communication, dissemination and exploitation are defined as follow (see also fig.1 below):

- **Communication:** Taking strategic and targeted measures for promoting the action itself and its results to a multitude of audiences, including the media and the public, and possibly engaging in a two-way exchange. Communication activities:
  - reach out to society as a whole;
  - demonstrate how EU funding contributes to tackling societal challenges;
  - are strategically planned with pertinent messages, right medium and means.
- **Dissemination:** The public disclosure of the results by appropriate means, other than resulting from protecting or exploiting the results, including by scientific publications in any medium. Dissemination:
  - promotes the circulation of knowledge and results to the ones that can best make use of them;
  - is enabling the value of results to be potentially wider than the original focus;
  - it is an essential element of all good research practice and a vital part of the project plan.
- **Exploitation:** The use of results in further research and innovation activities, including among other things, commercial exploitation such as developing, creating, manufacturing and marketing a product or process, creating and providing a service, or

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<sup>4</sup> <https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/support/glossary>

in standardisation and policy making activities.

- Recognise exploitable results and their stakeholders, identify the value added from their use;
- Partners can exploit their results or let them being exploited by interested third parties.

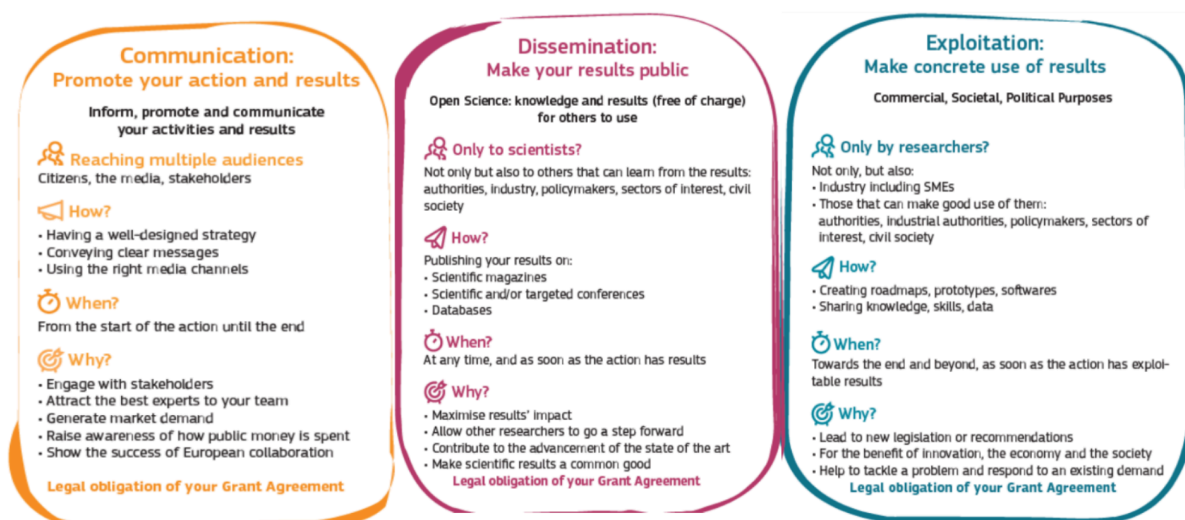


Fig.1: definitions of communication, dissemination and exploitation

## 3 Objectives and target audiences

### 3.1.: Objectives

The overarching objectives of communication, dissemination and exploitation activities pursued by THCS are:

- to increase the visibility of the Partnership and the impact of the knowledge generated by its activities amongst selected target groups and all other relevant stakeholders at local, national, EU and international level;
- to promote synergies and actively engage with relevant stakeholders and/or initiatives connected to the transformation of health and care systems, so as to increase mutual awareness and establish an effective and efficient collaboration to avoid duplication of

investments, work and related activities;

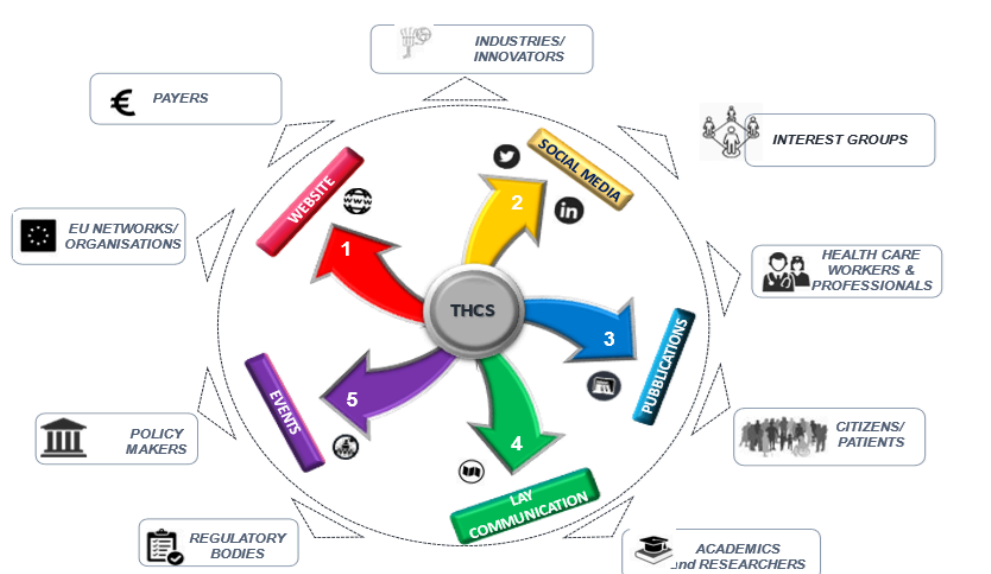
- pave the way to a sustainable cooperation between policy makers and research funders of the countries involved in the Partnership in order to ensure an alignment of priorities for health and care systems transformation in the long run.

### 3.2.: Target Audiences

Target of the Communication, Dissemination and Exploitation Plan are:

- research and innovation organisations;
- policymakers;
- health and care authorities;
- research and innovation funding organisations;
- healthcare providers;
- health & care professionals;
- Private Sector, Health and care entrepreneurs, Innovators;
- Civil society and end users (patient/citizen advocacy groups, formal and informal care organisations).

The Strategy will engage with these target groups at all levels, meaning local, regional, national, european and international.



The table below summarises the Dissemination and Communication channels and content for the different target groups.

Target Group	Dissemination Channels	Content
 <p><b>Research and Innovation Organisations</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Knowledge Hub</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Funding opportunities</p> <p>Results of funded projects – scientific publication, case studies, policy briefs</p> <p>Capacity building activities</p> <p>Key Events</p> <p>Synergies with EU initiatives</p>
 <p><b>International/European, national, regional and local Policy Makers</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Knowledge Hub</li> <li>● Events</li> <li>● Webinars</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Policy briefs</li> <li>● Online Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Results of funded projects – Policy Briefs</p> <p>European, national, and regional policies linked to the Partnership</p> <p>Capacity building activities</p> <p>Key Events</p> <p>Synergies with EU initiatives</p>
 <p><b>Health and care authorities</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Fact sheets</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Results of funded projects</p> <p>Fact sheets highlighting good practices</p> <p>Fact sheets highlighting key tools supporting implementation and transferability</p> <p>Capacity building activities</p>
 <p><b>Research and Innovation Funding Organisations</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Policy briefs</li> <li>● Fact sheets</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Results of funded projects</p> <p>Fact sheets showing the progress of the Partnership in achieving its outcomes through the funding of R&amp;I</p> <p>Fact sheets highlighting good practices and key tools developed within the Partnership</p> <p>Capacity building activities</p>
 <p><b>Health and Care Professionals</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Fact sheets</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Results of funded projects</p> <p>Fact sheets highlighting good practices and key tools developed within the Partnership</p> <p>Training and Capacity building activities</p> <p>Key events</p>

 <p><b>Health and Care Providers</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Fact sheets</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Results of funded projects Fact sheets highlighting good practices and key tools developed within the Partnership Training and Capacity building activities Key events</p>
 <p><b>Private Sector, Health and care entrepreneurs, Innovators</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Results of funded projects Fact sheets highlighting good practices and key tools developed within the Partnership Training and Capacity building activities Key events</p>
 <p><b>Civil society and end users (patient/citizen advocacy groups, formal and informal care organisations)</b></p>	<ul style="list-style-type: none"> <li>● Website</li> <li>● Webinars - Info days</li> <li>● Newsletter</li> <li>● Social media (LinkedIN, YouTube, Facebook and Instagram)</li> <li>● Events</li> <li>● On-line Trainings – capacity Building</li> <li>● Workshops</li> </ul>	<p>Work of the partnership itself Results of funded projects Fact sheets highlighting good practices and key tools developed within the Partnership Training and Capacity building activities Key events</p>

### 3.3.: Responsibilities among partners

Cooperation, as well as regular input and contributions by the Consortium are necessary to ensure that communication and dissemination activities realise their full potential. Partners are encouraged to share with the task leader (ProMIS) all relevant information that might be used for the purpose of this plan, and they are expected to notify the coordinator and the task leader of completed deliverables, publications, and any promotional events. The Consortium is also encouraged to further disseminate and share relevant communication and dissemination material through their own channels (contact databases, social media, other media, local stakeholders) in order to ensure that existing resources, relationships, and networks are taken advantage of, and that the contact to the target groups is strengthened.

## 4 Communication

### 4.1.: Internal Communication

Considering the complexity of the THCS Partnership, the goal of its Internal Communication (IC) strategy is to maintain organizational members well-informed, connected, integrated, and motivated; avoid duplication of efforts; promote the efficient use of project results; achieve the joint attainment of THCS' goals.

The IC will ensure an efficient flow of information and data throughout the course of the partnership among the main consortium partners (beneficiaries) and affiliated entities. It will also ensure that all partners are aware of the planning, progress, outputs (deliverables, milestones, publications, etc.), and events (meetings, workshops, seminars, webinars, etc.) conducted by the Partnership

The audience of the THCS IC includes:

- Beneficiaries and Affiliated Entities;
- European Commission and HADEA officers involved in THCS Partnership activities;
- Experts appointed as members of the Advisory Board.

The main tools for internal communication are e-mail, meetings (in person and online) and the online repository (Owcloud).

#### 4.1.1.: E-mails

The primary communication channel for internal communication among consortium members will be e-mails. To better target each communication, a contact list (Excel file) has been created and is regularly updated. The contact list categorizes every contact, specifying their affiliation to specific WPs and other internal bodies, and includes the main contacts for each Task and Subtask of the corresponding WP. It allows filtering based on specific needs (e.g., consortium partners, GA members, SG members, AB members, WPx members, WP roles).

The CT is responsible for keeping the contact list up to date, while each partner is responsible for promptly communicating any changes that need to be made. The contact list is available on the THCS internal portal (see below).

To minimize unnecessary email traffic, recipients are requested to reply only to the sender if they have queries about an email. Additionally, emails will only be sent to individuals directly involved in the subject matter, as detailed in the contact list.

To reduce the carbon footprint of internal communication, documents will preferably not be attached to emails. Instead, a link to the appropriate location (e.g., the THCS internal portal) will be included whenever possible, to avoid overloading recipients' inboxes.

The coordinator, in cooperation with WP3, must ensure efficient, timely, and controlled communication among all partners throughout the project duration.

#### **4.1.2.: Meetings**

Face-to-face meetings will take place at various points throughout the project and are generally planned well in advance (see below for the schedule of THCS internal meetings). Occasionally, face-to-face meetings may also include virtual participants when circumstances prevent some attendees from traveling.

Online meetings will be conducted via videoconference using commonly available tools such as Teams, Webex, Gmeet or similar platforms.

For both face-to-face and online meetings, an agenda will be prepared and sent to all participants in advance. The meeting organizer (Coordinator, WP leader, Chair, or Co-chair) will be responsible for taking notes and preparing draft minutes. These draft minutes will be distributed to all participants for review and comments before finalizing them.

The agenda, final minutes, and any associated meeting resources (e.g., presentations, documents, etc.) will be published in the appropriate folder on the THCS internal portal.

Schedule of the internal meetings:

- Consortium meetings: once per year (virtual and/or in presence if necessary)
- SB meetings: every two months (in presence and online)
- GA meetings: 3 times per year, 2 in presence and 1 online
- WPs, tasks, and subtasks meetings: as often as necessary. It is recommended to organise such meetings either as associated events to the aforementioned meetings or as virtual meetings. They should follow the general rules mentioned above for preparation and reporting (agendas and minutes are obligatory)

#### 4.1.3.: Internal online repository

An online platform for content collaboration, file sharing, and syncing, hosted by OwnCloud (<https://thcs-owncloud.cbim.it/index.php/login>), has been in use since the project's inception. This platform ensures a well-organized, efficient, and user-friendly repository that meets the partnership's collaborative needs, enhances information exchange among all partners, and facilitates internal communication.

To ensure easy access to information at any time, documents on the internal portal are organized into folders. Access to these folders is restricted to partners involved in specific activities or WPs, with robust firewall architecture in place to prevent potential conflicts of interest.

Main folders available on OwnCloud include:

- Work Packages (WPs): Each WP folder contains substructures for tasks, deliverables, milestones, partners, and relevant documents. Additional subfolders can be created upon request by the WP leader.
- Project Documents: Subfolders include administrative documents (Consortium Agreement, Grant Agreement, Annual Working Plans, Budget, etc.), approved deliverables (validated by the EC), reviewed and approved milestones, templates, and a communication toolbox.
- Contact Mailing List: Includes essential contact information for all partners.

- **Agendas and Meeting Minutes:** Contains meeting reports and PowerPoint presentations (PPTX).
- **Additional Folders/Subfolders:** These include various topics, with new folders created upon request by the WP leader to the CT and WP3.

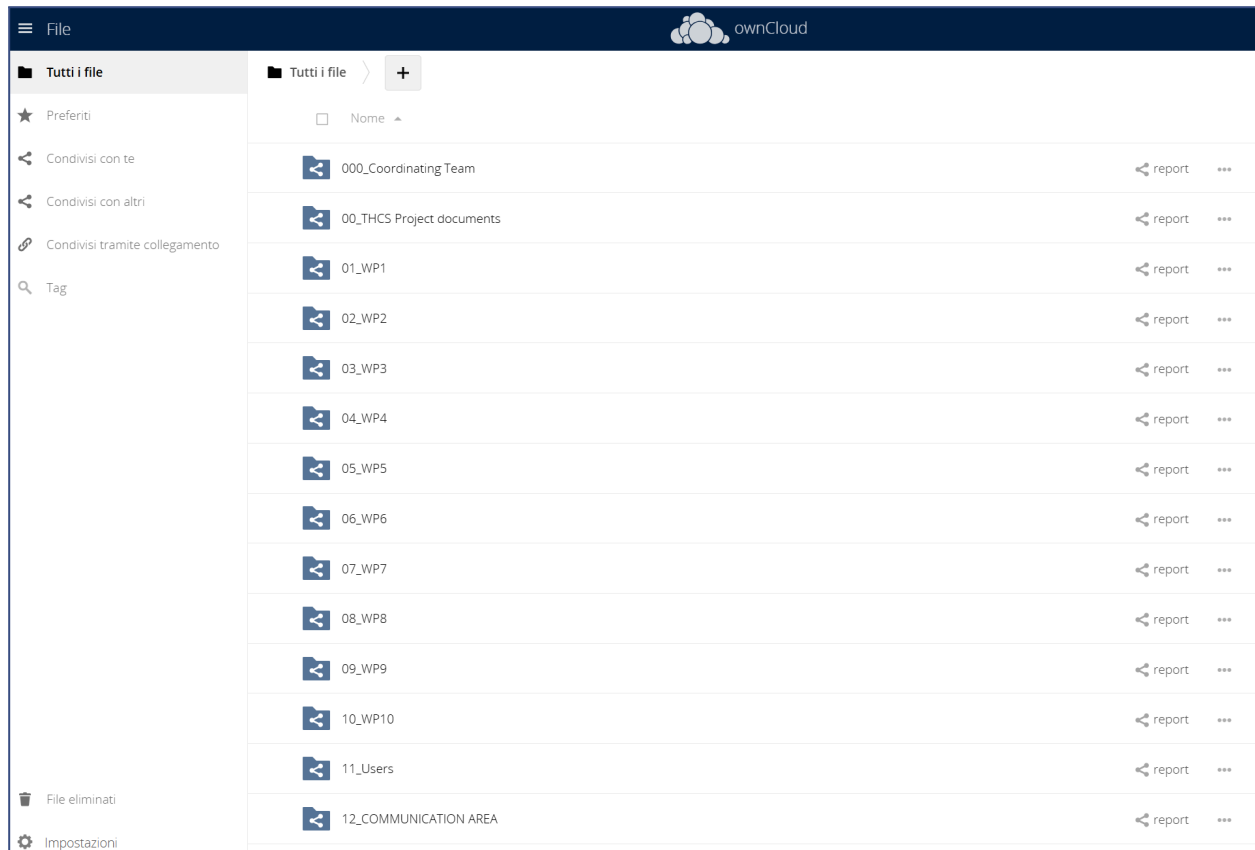


Fig.2:THCS Owncloud internal repository

To ensure the repository remains functional and efficient, the following guidelines have been agreed upon:

- **Document Uploads:** Project partners are allowed to upload digital files directly. When communicating changes to uploaded documents, specify the folder location if it is not immediately clear (e.g., WPx/xx/...).
- **File Format:** If Word or Excel files contain complex formatting, figures, or graphs, verify that these features are preserved after uploading. If not, convert the files to PDF before uploading.

- Document Coding System: Adopt a consistent naming convention for files, such as: year-month-day\_THCS\_WPx\_ShortNameOfDocument. This applies to both original files and subsequent updates or versions.
- Quality Control: The CT and WP3 will oversee the quality of the repository, ensuring that folders and subfolders are properly structured and that documents are uploaded to the correct locations.

To ensure adequate involvement of all partners and to monitor compliance with the IC by THCS partners, information will be periodically gathered through direct feedback from the partners and by tracking visits to the THCS internal portal.

Main responsibilities of all THCS partners include:

- notify other participants about the availability of new project outputs and/or documents uploaded to the internal portal.
- Use the THCS mailing lists for general communication and Notify the CT and WP3 promptly of any changes to the contact list.
- Participate in scheduled face-to-face and online meetings to communicate progress to partners.
- Use THCS templates for all project-related communication activities.

Specific responsibilities of Work Package Leaders are:

- Provide regular updates and content on the progress of their work package at the scheduled SB meetings.
- Ensure that potential conflicts of interest are identified and addressed promptly

## 4.2.: External Communication

THCS will develop and implement the following external communication activities that will also serve for dissemination purposes (see section 5), and help raise awareness among the stakeholders identified in previous sections.

All communication activities will contribute to the promotion of gender equality and

non-discrimination. Communication materials will use gender inclusive language and positive visual representations. Communication channels accessible to a general audience, in particular to persons with disabilities, or people from marginalised groups will be employed.

Activity	Description	KPI	Value/Aim
<b>Website</b>	<p>A website dedicated to the Partnership was developed as an entry point for a variety of external stakeholders, as well as to support the partners involved in the Partnership to share information in a consistent way. It is the principal online communication platform for sharing the materials developed by the Partnership. The website will also host the monitoring and evaluation tool of the Partnership, which will include information on the funded projects.</p>	<b><i>N. of Sessions / year:</i></b>	5.000
<b>Social Media</b>	<p>THCS will primarily use LinkedIn and Youtube as communication support channels. All the project news, events, materials, outcomes, etc. will be communicated on these channels. If needed, additional social media accounts on different platforms (Facebook, Viadéo, etc.) could be created according to the trends in the different regional areas to reach out to all the targeted stakeholders.</p> <p><b>LinkedIn</b> - <a href="http://www.linkedin.com/in/thcs/">www.linkedin.com/in/thcs/</a>: as LinkedIn is mainly used to engage with a more professionalised audience, the project’s LinkedIn profile aims both at raising awareness about the project in general and increasing dissemination via this channel at a later stage once tangible outputs (e.g. research papers and learnings) become available. To maximise visibility and reach, both the profile and THCS messages posted should be promoted by consortium partners and shared on consortium partner’s organisational and individual professional accounts/online presences.</p>	<b><i>N. of followers at the end of the project lifespan:</i></b>	LinkedIn: 2.000 Facebook and Instagram: 1000 YouTube: 100
	<p><b>YouTube</b> <a href="http://www.youtube.com/@THCS-HorizonEU">www.youtube.com/@THCS-HorizonEU</a>: A dedicated YouTube channel has been created to host all relevant visual content produced by the partnership. This includes</p>	<b><i>N. of impressions (across all post and all channels) per month:</i></b>	4.000

	<p>promotional videos showcasing the partnership itself, as well as videos highlighting specific events and milestones, such as the launch of new JTCs</p> <p><b>Facebook and Instagram:</b> In response to the feedback provided in the 1st Project Review Consolidated Report (HE) and to enhance engagement with citizens, THCS will establish profiles on both Facebook and Instagram starting in 2025.</p>	<p><b>N. of Social media engagements (across all post and all channels) per month:</b></p>	100
<b>E-newsletter</b>	<p>Newsletter will be planned bi-annually, consisting of a short summary of work and progress made by Partnership funded projects and side activities and next events, including scientific and policy related news in an easy-to-read format. The newsletter will be released to a targeted recipients' list (respecting GDPR rules).</p>	<p><b>N. of releases per year:</b></p>	2
		<p><b>Opening rate:</b></p>	75%
<b>Knowledge Hub (public portal)</b>	<p>The Partnership Knowledge Hub will act as a multifunctional platform fostering capacity-building support, exchange of good practices, knowledge and experience of different health and care actors at macro, meso and micro level engaged in the health and care systems transformation. It will include a portal open to the general public, where all different target groups will be able to access the knowledge produced by the THCS consortium.</p>	<p><b>N. of Monthly sessions:</b></p>	100
<b>Mass media</b>	<p>Short 'press release-style' communications will be prepared and dispatched at key action moments (Kick-off meeting, JTC results, key events)..</p>	<p><b>N. of press releases per year:</b></p>	1
<b>Webinars</b>	<p>Several webinars will be organised targeting various tiers of stakeholders to introduce the methodologies and share good practices, to network with other European initiatives and plan common activities, to share lessons learnt, project results and activities, etc</p>	<p><b>Different KPIs depending on the nature and topic of the webinar</b></p>	N/A

<b>Posters</b>	Flyers and posters detailing THCS stakeholders and objectives will be created and used during all the events. One poster will be also created at the beginning and at mid-term in order to highlight the outcomes of funded projects and side activities.	<b>N/A</b>	N/A
<b>Factsheets and leaflets</b>	Promotional material, such as fact sheets (1 or 2 pager documents highlighting the key takeaways from THCS activities, funded projects, or other side activities) or leaflets will be produced and disseminated at key action moments.	<b>N. of Factsheets and leaflets produced over the project lifespan</b>	5
<b>Communication Events</b>	<b>National, regional and local events:</b> thematic workshops and other events to promote the partnerships and its activities (notably its JTCs) will be organised throughout the project lifespan, along a multi-layered approach that will facilitate the set-up of targeted content at different levels: at macro-level to policy makers, at meso level to health and care professionals, and at micro-level addressing local communities of stakeholders on specific topics related to the projects funded by the Partnership and more in general to relevant good practices.	<b>N. of events:</b>	At least 2 times/year
	<b>European and international events:</b> Conferences, workshops and other events will be organised to promote the partnerships and its activities (notably its JTCs) and to connect with the broader international community and other relevant stakeholders (Partnerships, Joint Actions, programmes). Events will be both informative and also dedicated to address specific topics and/or stakeholder groups. Matchmaking events will also be organised to facilitate new collaborative actions, e.g. in connection with JTCs launched by the Partnership.	<b>N. of events:</b>	At least 2 times/year
	<b>Annual Conference:</b> An Annual Conference will be organised to present to the general public and discuss the progress of the Partnership, its good practices and the results achieved.	<b>Rate of external attendees over partners:</b>	30/70

### 4.3.: THCS Visual Identity

A strong visual identity has an impact on the project members and improves the target groups' awareness of the project. The establishment of a visual identity for the project at the very beginning includes, first of all, a logo design:



Fig.3: THCS logo (with transparent and coloured background)

In order to ensure a consistent appearance of the project, various templates have been professionally designed as the partnership develops, including: word templates for project reports, deliverables, meeting agendas, minutes, news Feed, messages, as well as a powerpoint

presentation template, and templates for the project leaflets and the factsheets.

The template includes the THCS logo, the European flag (emblem) and funding statement as specified in Article 17.2 of the Grant Agreement, and the disclaimer excluding the European Commission responsibility (as written in Article 17.3 of the Grant Agreement) - see below. It is recommended that participants agree with the coordinator and WP3 leader on any modification of the templates.

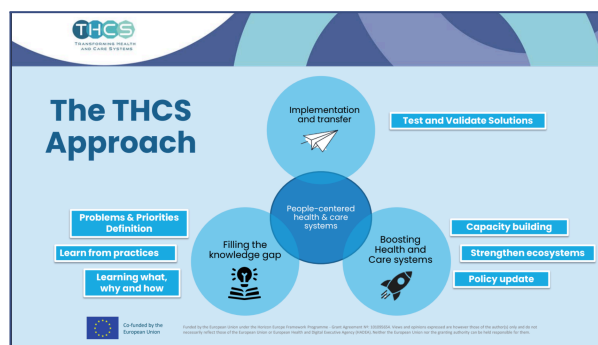


Fig. 4: examples of the THCS Word and Powerpoint templates

Unless the Commission requests or agrees otherwise or it is impossible, any communication or dissemination activity (in any form, including electronic) must display the EU emblem and include the following text:

- For communication activities: "Funded by the European Union under the Horizon Europe Framework Programme - Grant Agreement N°: 101095654. Views and opinions expressed are those of the author(s) only and do not necessarily reflect those of the European Union or European Health and Digital Executive Agency (HADEA). Neither the

European Union nor the granting authority can be held responsible for them”.

- For infrastructures, equipment and major results: “This [infrastructure] [equipment] [insert type of result] is part of a project that has received funding from under the Horizon Europe Framework Programme - Grant Agreement N°: 101095654”.

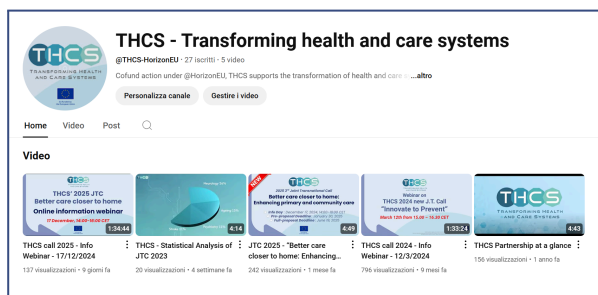
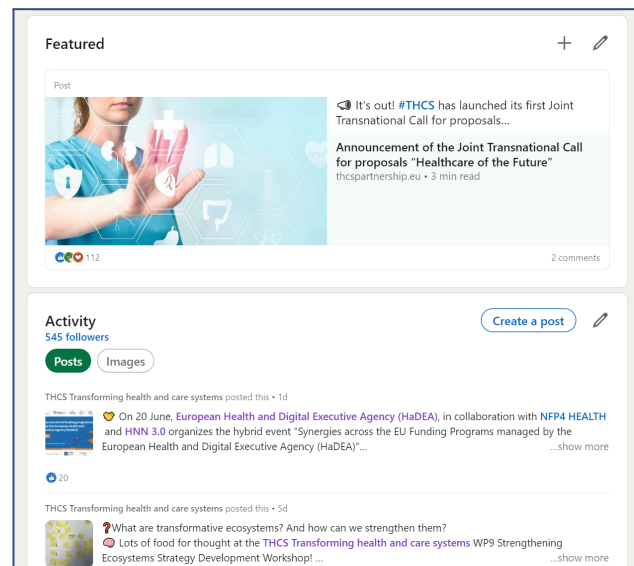
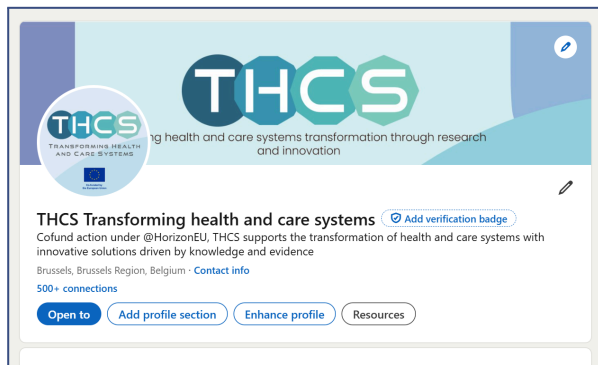


Fig.5: THCS LinkedIn and Youtube pages

When displayed together with another logo, the EU emblem must have appropriate prominence. For the purposes of their obligations, the beneficiaries may use the EU emblem without first obtaining approval from the Commission. This does not however give them the right to exclusive use. Moreover, they may not appropriate the EU emblem or any similar trademark or logo, either by registration or by any other means.

## 5 Dissemination

One of the main goals of the Partnership is to support health care authorities in their uptake of evidence-based decisions in transforming health and care systems. Particular attention will

therefore be put on adequate dissemination of the results of funded projects and of exchange promoted within the partners involved in Partnership to a wide spectrum of health and care stakeholders making them aware of possible innovative opportunities.

The visibility and dissemination of THCS project results will be achieved mostly through the same activities and tools as described above in sections 3 (Objectives and target audiences) and 4.1 (External Communication).

Furthermore, additional activities dedicated specifically to dissemination will be foreseen:

<p><b>Scientific publications</b></p>	<p>To maximise the impact of the knowledge produced by the partnership, knowledge produced will need to be able to inform policy and practice. The elaboration of collaborative papers on targeted results evidence-based and rigorous in nature achieved by the Partnership will be supported through the allocation of specific budgets.</p>	<p><b><i>N. of publications over the lifespan of the project (OPEN ACCESS)</i></b></p>	<p>5</p>
<p><b>Knowledge Hub (public portal)</b></p>	<p>As described in previous session (4.1) the Partnership Knowledge Hub will act as a multifunctional platform fostering capacity-building support, exchange of good practices, knowledge and experience of different health and care actors at macro, meso and micro level engaged in the health and care systems transformation.</p> <p>It will include a portal open to the general public, where all different target groups will be able to access the knowledge produced by the THCS consortium and therefore all the results of its activities and the ones of the funded projects.</p>	<p><b><i>N. of Monthly sessions:</i></b></p>	<p>50</p>
<p><b>Dissemination events</b></p>	<p>In the framework of its dissemination strategy, THCS will organise events to promote the public disclosure of its results and the results of funded projects.</p>	<p><b><i>N. of events:</i></b></p>	<p>6 in total</p>

## 6 Exploitation and Intellectual property rights

The rights of the participants to the Partnership in terms of Intellectual Property (IP) will be properly acknowledged and distributed in relation to the results identified in their background or generated by the activities of the Partnership to avoid conflicts during the exploitation phase. To this purpose, a map of IP background in terms of proprietary know-how generated in Research and Development activities will be carried out.

The outcomes that will be identified as of exploitable interest will be monitored and terms and conditions regarding IP included in the Consortium Agreement (CA), specifying the rights and obligations between the beneficiaries, including joint ownership by several beneficiaries.

All participants will be involved in defining and implementing the IP approach to results:

- to be commercially or industrially exploited and;
- protecting them is possible, reasonable and justified.

When deciding on protection, the beneficiary must consider its own legitimate interests and the legitimate interests (especially commercial) of the other beneficiaries.

## 7 Monitoring and Reporting

Monitoring of dissemination and communication activities is a continuous process in THCS, with reporting scheduled on an annual basis to ensure the strategy remains on track and that problems can be ruled out quickly.

The initiative will be based on achieving the targets set out as communication key performance indicators that are listed in the project Description of Action and are described in more detail above. These indicators were identified by THCS as key metrics for the project's dissemination and communication activities. Different communication channels are used, including the project's online portal, social media, events, news, webinars, workshops, meetings with key actors, and dissemination materials.

Quarterly monitoring will be conducted to follow up progress on these key performance indicators and steer the implementation of the project's dissemination and communication plan.