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D5.5.4 Mid-term conference: proceedings

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Abstract

This deliverable documents the ENGAGED mid-term conference held immediately after the end of the 2014 Arctic Lights conference. This larger conference was held in Kiruna, Sweden and brought together a range of stakeholders including largely regional health authority representatives. More than 50 participants attended the ENGAGED mid-term conference. The participants undertook interactive exercises on three topics of direct pertinence to ENGAGED: developing a joining strategy for the Active & Healthy Ageing community; choosing key issues to be resolved; and sharing tips and tricks on mutual learning.

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Dissemination Level		
PU	Public	X
PP	Restricted to other programme participants (including the Commission Service)	
RE	Restricted to a group specified by the consortium (including the Commission Service)	
CO	Confidential, only for members of the consortium (including the Commission Service)	

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1.0	29-01-2015	Diane WHITEHOUSE (EHTL)	First draft of summary report, based on standard project event report and with rapporteurs' notes added.
1.1	03-02-2015	Marc LANGE	Small textual modifications made.
1.2	18-03-2015	Marielle SWINKELS	Approved for upload to website.
2.0	18-03-2015	Diane WHITEHOUSE	Sent for upload to website.

Reviewed

Marc Lange
DONE.

Approved

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0 Abbreviations

ALEC	Arctic-Light e-He@lth Conference
CIP ICT-PSP	Competitiveness and Innovation Framework Programme ICT Policy Support Programme
CORAL	Community of Regions for Assisted Living
EHTEL	European Health Telematics Association
EIP AHA	European Innovation Partnership on Active & Healthy Ageing
ENGAGED	Community building on active and healthy ageing
ICT-PSP	ICT Policy Support Programme
NGO	Non-governmental organization
SE	Sweden.

1 Executive summary

This report is deliverable D5.5.4 on the mid-term conference of the ENGAGED thematic network.

The deliverable documents several aspects of the ENGAGED mid-term conference held immediately after the end of the 2014 Arctic Lights conference: its background, organization, dissemination activities, and content.

The larger, Arctic Lights conference was held in Kiruna, Sweden and brought together a range of stakeholders including largely regional health authority representatives. It took place on 4-5 February 2014. This umbrella conference's focus was on co-creating patients.

The ENGAGED mid-term conference was entitled "Building a learning community for Active & Healthy ageing solutions". It was held in Kiruna, Sweden on the morning of 6 February 2014 in the Scandic Ferrum hotel immediately following the end of the Arctic Lights conference.

More than 50 participants attended the ENGAGED mid-term conference. The participants undertook interactive exercises on three topics of direct pertinence to ENGAGED: developing a joining strategy for the Active & Healthy Ageing community; choosing key issues to be resolved; and sharing tips and tricks on mutual learning.

The mid-term conference had several goals.

- To offer people the opportunity to learn about the results of the ENGAGED project and its lessons learned one year into the project.
- To collect people's input and feedback for ENGAGED's future work on three critical issues.
- To invite people and other participants in their networks and organizations to join more actively in the Active & Healthy Ageing learning community.

The dissemination activities carried out during and after the event include: use of Twitter during the event, Storify and a Yammer write-ups, a press release and an article in both the ENGAGED no.3 newsletter and the AER no. 15 newsletter after the event. Posters and leaflets about the ENGAGED project were used to support the conference. Photographic and video records of the event were kept. Dissemination included photographs of the conference that could be used in related supporting documents, and the creation of a video.

EHTEL was the lead on the conference organization.

All of the conference activities are outlined in two chapters of the report.

- Chapter 3 describes the purpose, organization and content of the event. It provides access to the presentations made.

- Chapter 4 presents information on the dissemination activities associated with the conference.

In terms of the conference content, the report's appendices are particularly useful. Appendices E-G outline the content of the conference. It is this content which was used to validate ENGAGED's first 12 months of work, and to prepare for its road mapping activities which took place throughout 2014.

2 Introduction

This report is deliverable D5.5.4 on the mid-term conference of the ENGAGED thematic network.

The conference was entitled "Building a learning community for Active & Healthy ageing solutions". It was held in Kiruna, Sweden on the morning of 6 February 2014 in the Scandic Ferrum hotel. The conference took place immediately following the Arctic Lights conference, which had taken place on 4-5 February 2014. The umbrella conference's focus was on co-creating patients.

The document is organized as follows:

- Chapter 3 describes the purpose, organization and content of the event. It provides access to the presentations made.
- Chapter 4 presents information on the dissemination activities associated with the conference.
- Chapters 5 to 11 are all appendices. Appendix A contains the full list of attendees.

Particularly the content of the appendices was used to validate ENGAGED's first 12 months of work, and to prepare for its road mapping activities.

3 Conference details

This chapter describes briefly the background to this mid-term conference and its purpose, organization and content.

Background to ENGAGED, its events and activities

The ENGAGED thematic network is focused on building a learning community with different kinds of stakeholders and experts across Europe. Its aim is for people to solve together the issues and challenges raised that emerge during the innovation process in different areas of Active & Healthy Ageing. The specific fields experiencing innovation challenges can include independent living, integrated care, health and prevention, and age-friendly environments.

During the ENGAGED project, different kinds of events and “learning experiments” are being organized that use methods and tools which can support learning, the dissemination process, and the building of the Active & Healthy Ageing community across Europe.

This event was the ENGAGED mid-term conference. It was held at the very beginning of M13 of the project.

Purpose of the conference

This mid-term conference had several goals.

One of the goals was to offer people the opportunity to learn about the results of the ENGAGED project and its lessons learned one year into the project.

Another goal was to collect people’s input and feedback for ENGAGED’s future work on a number of critical issues. The questions included the development of a joining strategy for the extension of the Active & Healthy Ageing learning community; future key issues which are of interest to people who want to resolve them together; stimulus of the uptake of innovations across Europe; and tips and tricks for mutual learning about all of these important matters.

A third goal was to invite people and other participants in their networks and organizations to join more actively in the Active & Healthy Ageing learning community.

Preparation of the conference

The preparation lead was taken by EHTEL.

Preparing the conference also involved contributions to be made by around a dozen of the ENGAGED project partners. There were many large and small responsibilities and tasks, and lots of people in the networks contributed in a diversity of ways (from staffing registration tables; being

available to pro-actively greet and network with attendees from new organizations; writing agendas, scripts and sets of inscriptions; handling the taking of photos and videos; etc.).

Key to the event was a focus on the conference content and what were the expectations for the conference outcomes.

Given the interactive character of the conference, preparation of the event required a lot of concentration on organization and process.

A series of conference calls and a couple of physical meetings were held. They were used to brainstorm the conference content and the participative methods the event facilitators would use to work dynamically with the conference attendees and to inspire them to offer their input on next directions in the field of Active & Healthy Ageing. The instruction sheet that was developed for the organisers and participants is included as Appendix D.

Conference attendees' mind map of the ENGAGED community

To capture a sense of the interests and concerns of the conference attendees, when registering participants were asked to complete a Google doc ahead of the event itself: Google doc

https://docs.google.com/forms/d/1BNXmMUIB_jDt8w_w-WiOx2PVreYldrdQuAopzNhaNNA/viewform?formkey=dGVMLVN4WDQ4akVFNnJSSThES3JuWmc6MA&fromEmail=true.

The form asked about the people's expertise and activities, and those of their organizations on a number of themes related to community building, mutual learning and people's networks. It was ENGAGED's idea to create an overview of the general background information and experience of all the participants who attended the ENGAGED event: the data was used to create a "Mind Map"-style diagram of the connections among the project's participants and their wider networks (see Figure 10).

This visual (Mind Map) organization of the ENGAGED community network is available in electronic format. It is intended to be used in conjunction with the outcomes of a number of other ENGARD deliverables.

Location and attendees

The mid-term conference took place at the Viscariasalen Room, Hotel Scandic Ferrum, Lars Janssonsgatan 15, 981 31 Kiruna, Sweden on Thursday, 6 February 2014.

The conference was organized in the context of the Arctic Lights conference at Kiruna. Kiruna, a town of 20,000 inhabitants, is the most northerly town in Sweden in the Norrbotten region/Lapland. It is famous for four items: for its mining, for the fact that its centre will be shifted geographically by three kilometres due to subsidence, its space research, and its tourism – even in the depths of winter. The town's rural and

regional aspects, and its concentration on health and active ageing, made it a very good fit for ENGAGED's mid-term conference.

The conference took place on the morning immediately after the main part of the 2014 Arctic Lights conference.



Figure 1: Arctic Lights 2014 conference (ALEC)

The conference was followed, during the afternoon, by an ENGAGED project steering committee meeting.

Given the setting of the wider conference and the follow-up with a project steering committee, this ensured that 60 persons were registered at the ENGAGED mid-term conference. The event was attended by leading speakers, facilitators and experts, on the one hand, and by international stakeholder representatives as well as those from Sweden as a whole and the local region of Norrbotten. Project team members and senior representatives from the project's partners also participated.

Over 50 persons contributed actively to the mid-term conference discussions. A full list of attendees is produced in Appendix A.

Agenda

The conference agenda is shown in Table 1 below.

Table 1: Conference agenda

Building a learning community for Active & Healthy ageing solutions ***ENGAGED Midterm Event***

Thursday 6 February, Scandic Hotel Ferrum in Kiruna (Sweden)

8:00	REGISTRATION AND WELCOME BREAKFAST
8.30	PLENARY SESSION
8.30 hrs	<i>Introduction Engaged</i> by Daniel Fernandez Buckley , EHMA Project team member of ENGAGED
8.40 hrs	<i>Inspiration of field experience on Innovation and Engagement</i> by Rachelle Kaye, Director, Maccabi Institute for Health Services Research; Deputy

Director, Department of Planning and Finance,
Maccabi Healthcare Services (Israel)
9.00 hrs *Introduction to Interactive Tables* by the moderator
Jolanda Schneider, Province of Noord-Brabant (NL)

9.05 hrs **THREE THEMATIC INTERACTIVE TABLES (3 rounds)**

9.05 hrs **Round 1 of 3 thematic tables**

Table 1: A joining strategy for the community of Active & Healthy Ageing
Why should we join the learning community of Active & Healthy ageing solutions? And who do we need to join the learning community?

Facilitator: **Sabine Wildevuur**, Waag Society and
Rapporteur: **Andreas Braun**, Fraunhofer.

9.05 hrs Speed dating
9.10 hrs Inspirational pitch: *a People Value Canvas* by **Sabine Wildevuur** of Waag Society (NL) and co-author of the book "Connected Design"
9.15 hrs Brainstorm by the People Value Canvas
9.40 hrs Summary

Table 2: What are the key issues we are trying to solve?
What are the most challenging horizontal topics which we are trying to solve during the process of innovation in different domains of independent living, integrated care and prevention?

Facilitator: **Edwin Mermans**, Province of Noord-Brabant and
Rapporteur: **Ilenia Gheno**, AGE Platform.

9.05 hrs Speed dating
9.10 hrs Presentation: *top 6 learning topics of ENGAGED and lessons learned so far* by **Mariëlle Swinkels**, content manager of ENGAGED, Province of Noord-Brabant, member of CORAL
9.20 hrs Ranking and discussion on horizontal topics
9.40 hrs Summary

Table 3: Tips and tricks for mutual Learning
How to capture the lessons learned and how to share these lessons with others? Which tips and tricks are there to share about strategy, methodology and systems for mutual learning?

Facilitator: **Diane Whitehouse**, EHTEL and
Rapporteur: **Ophelie Durand**, AGE platform.

9.05 hrs Speed dating
9.10 hrs Inspirational pitch: *How to capture lessons learned?* by
Dr. James R. Kass, independent consultant

9.20 hrs Sharing of tips and tricks for mutual learning
9.40 hrs Summary

9.50 hrs Round 2 of three thematic tables

10. 35 hrs Round 3 of three thematic tables

11.15 CONCLUSIONS

11.30 CLOSURE

Contact details

Daniel Fernandez Buckley (Daniel.FernandezBuckley@ehma.org or +32 (0)2 502 6525)

Mariëlle Swinkels (mswinkels@brabant.nl or +31 6 133 543 97)

Presentations

All the presentations that were used at the ENGAGED mid-term conference can be found on the public area of the ENGAGED project website. They can be downloaded from the project website address (see <http://www.engaged-innovation.eu>).

Keynote speaker

Keynote speaker, Rachelle Kaye focused her presentation on:

- Innovative and creative thinking for active and healthy ageing.
- Radical solutions.
- Technological innovation to support creative policy initiatives.

For this, she concentrated on integrated care:



Figure 2: Engaging the stakeholders

Dr Kaye showed a wide range of examples of technological solutions developed by the insurance organization, Maccabi, in Israel. She then

looked at the benefits as well as the challenges of developing such technological solutions.

In particular she saw the technologies as providing solutions for stakeholder engagement. The stakeholders she listed included:

- Patients and citizens.
- Healthcare professionals.
- Management and policy makers.

Dr Kaye's talk merged both a concern with end-users, especially patients and doctors, and the practicalities of developing innovation in an entrepreneurial, dynamic and pro-active way. This focus re-emerged later in the morning during the interactive discussions that took place in the workshop. See the figure below.



Figure 3: Keys to engagement

Interactive discussions

The participants at the ENGAGED mid-term workshop were split into groups. They were encouraged to interact with each other and with each of the table's facilitators. They were asked to rank ENGAGED's priority issues, debate the challenges related to these issues, and especially suggest solutions for moving innovation for active ageing forward.

Short reports of the debates originating from each round table are outlined in a set of annexes (see Appendices E-G). A summary table (below) showcases the highlights of the some of the conversations.

Some of the main ideas about impact, innovation and user involvement are highlighted in the table below:

Table 2: Some discussion highlights

Tables' focus	Discussion highlights on impact, innovation and user involvement
Impact	<ul style="list-style-type: none"> • Pragmatism is key. • Cooperation between the public and private sectors is crucial. • Belief and courage are always needed.
Innovation	<ul style="list-style-type: none"> • Innovation does not always need big money. • Innovation can require money that is not provided until evidence is there. • The role of intermediate organizations is key. • Being part of a network of stakeholders is essential.
User Involvement	<ul style="list-style-type: none"> • Involving users is a delicate and time-consuming effort, but it is key. • Users need to be considered holistically. • User involvement needs to be tailored. • Different levels of leadership need to be engaged. • Communication is essential: users need moreover to understand what it is in for them when they get involved.

4 Dissemination activities

This section describes briefly the background overview to this mid-term conference and its purpose, organization and content.

Overview

Prior to the event, several broadcast emails were sent to the entire ENGAGED community. All ENGAGED members were encouraged to disseminate these announcements. Originally, a save the date announcement was sent out. The communication campaign of the ALEC conference also needs to be emphasized in attracting additional participants to the event.

Posters and leaflets about the ENGAGED project were used to support the conference.

The dissemination activities carried out during and after the event include: use of Twitter during the event, Storify and a Yammer write-ups, a press release and an article in both the ENGAGED no.3 newsletter and the AER no. 15 newsletter after the event.

Photographic and video records of the event were kept. Dissemination included photographs of the conference that could be used in related supporting documents, and the creation of a video.

All of these activities are outlined in the following sub-sections.

Twitter during the event

Several of the participants tweeted about the conference during the morning session:

<https://twitter.com/ENGAGEDinEurope/status/431335887226404865/photo/1>

Write-up on Storify immediately after the event

Storify is a social network service that enables users to create stories by using social media such as Twitter, Facebook and Instagram. It has been open to the public since April 2011. See <https://storify.com/>

Katarzyna SZKUTA put together a Storify story on the conference immediately following the event:

<https://storify.com/katarzynasz/engaged-mid-term-conference-alec-2014>

Write-up on Yammer immediately after the event

Yammer is the most well-known social network/collaborative tool for enterprises and businesses. It is used by the EIP-AHA, which is what makes it so attractive also to ENGAGED.

An overview of the conference was immediately captured on Yammer:

"In a small, snowy town of 30,000, the atmosphere was lit up by a lively ENGAGED brainstorming session. This interactive Engaged workshop was attended by some 50 participants, who ranged from local Swedish politicians to older adults and people working with local non-for-profits. Working sessions on topics such as exploring a "People Value Canvas", ENGAGED's top lessons learned so far, and methods for capturing these lessons learned and working with them. ... This innovative and agile way of handling discussions might also lead to even more insights into innovation in active and healthy ageing in Europe."

Send-out of a press release immediately after the event

The Assembly of European Regions (AER) took care of the conference press release immediately following the event. See <http://www.aer.eu/>.

PRESS RELEASE

Efficiency starts with dialogue

Kiruna, Norrbotten (S), 6 February 2014

The fourth bi-annual Arctic-Light e-He@lth Conference, ALEC 2014 took place in Kiruna and gathered 200 participants on the theme of the co-creating patient on 4-6 February. Opened by President Ilves of Estonia, the conference featured an impressive panel of speakers, who sought to address both the technical and organizational aspects affecting the patient's experience .

Data ownership, interoperability, security, accessibility, communication, shifting perceptions are but a few of the themes that were discussed in ALEC 2014. Indeed to achieve patients' empowerment and better healthcare, infrastructure is essential but it should go hand in hand with true organizational change. In this context sharing good and bad practices, learning from each other's experiences is key to achieve faster and more efficient deployment of innovative solutions

Participants were therefore also invited to take part in the ENGAGED side event on "building a learning community for active and healthy ageing solutions".

"During these 3 days we heard about successful initiatives from Europe and beyond. E-health is possible, it does provide more comfort, safety and a better link with caregivers. Now we need regional decision-makers to keep this momentum and engage in dialogue both within their regions and at interregional and national level to roll out e-health" said **Agneta GRANSTRÖM**, the AER e-He@lth Network President and County Commissioner of Norrbotten.

"E-health is not about technology only, but about empowering the patients and generating more social and territorial cohesion, Regions have a pivotal role in initiating effective change impulses and the AER provides them with a tailor-made platform to scale up action" said AER President **Hande ÖSZAN BOZATLI**.

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*The **Assembly of European Regions (AER – aer.eu)** is the largest independent network of regions in wider Europe. Bringing together more than 250 regions from 35 countries and 16 interregional organizations, AER is the political voice of its members and a forum for interregional co-operation.*

Write-up of the event in the AER newsletter

Newsletter no 15 from the AER includes an article on the event:

<http://www.aer.eu/en/publications/newsletter/2014/aer-newsletter-n15-022014.html>

Engaged in Kiruna

For its mid-term event, the ENGAGED network organized a very interactive workshop in Kiruna (SE) on the occasion of the ALEC 2014 conference. This consortium was set up in the framework of the ICT Policy Support Programme (ICT-PSP) and aims to be an arena for mutual learning in the field of age-friendly environments. Gathering a very wide array of stakeholders in the field of health and social services both public and private, the industry, researchers, NGOs, public authorities and AER, ENGAGED is a large-scale lab for innovation.

This process-oriented network functions in an incremental way, with a series of mutual learning workshops and case studies, which will ultimately result in a roadmap for the deployment of ICT solutions in selected European regions. The next workshop will take place on 19-20 February in Brussels on the theme of interoperability.

Contact: [Johanna PACEVICIUS](#)

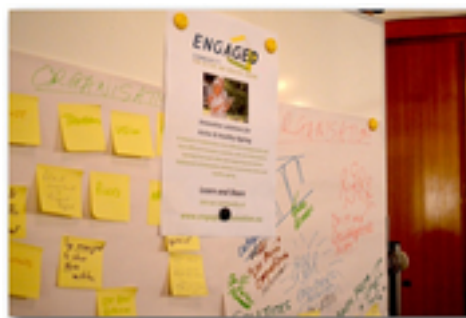


Figure 4: Working notes from the mid-term conference

Write-up of the event in the ENGAGED newsletter

ENGAGED newsletter no. 3 included a write-up of the event:

http://engaged-innovation.eu/sites/default/files/docs/ENGAGED_Newsletter_No.3.pdf

Shining Nordic lights: the ENGAGED mid-term workshop

In a small, snowy town of 30,000, on Thursday 6th February 2014, the atmosphere was lit up by a lively ENGAGED brainstorming session!

The ENGAGED Community for Active and Healthy Ageing held its mid-term event in Kiruna, Sweden. The event was a satellite session of the Arctic Light eHe@lth conference (<http://www.nll.se/alec>).

This interactive ENGAGED workshop was attended by some 50 participants. They ranged from local Swedish politicians to older adults and people working with local non-for-profit organizations. Working sessions concentrated on topics such as exploring a "People Value Canvas", ENGAGED's top lessons learned so far, and methods for capturing these lessons learned and working with them.

ENGAGED's dissemination group will now be working on: A special report devoted to the workshop; A collection of photos and images, and a video.

The workshop's innovative and agile way of handling discussions has led to even more insights into innovation in active and healthy ageing in Europe.

Collection of photographs

Photographs were taken throughout the mid-term conference, with the permission of the attendees. Below are some examples of the photos taken:



Figure 5: Keynote speaker, Rachelle KAYE



Figure 6: Discussions are launched in the room



Figure 7: Discussions on an Active & Healthy Ageing joining strategy



Figure 8: Further discussions on an Active & Healthy Ageing joining strategy



Figure 9: James R. Kass discusses tips and tricks for mutual learning

This photograph collection also includes a record of some of the tools and techniques and methods used during the event.

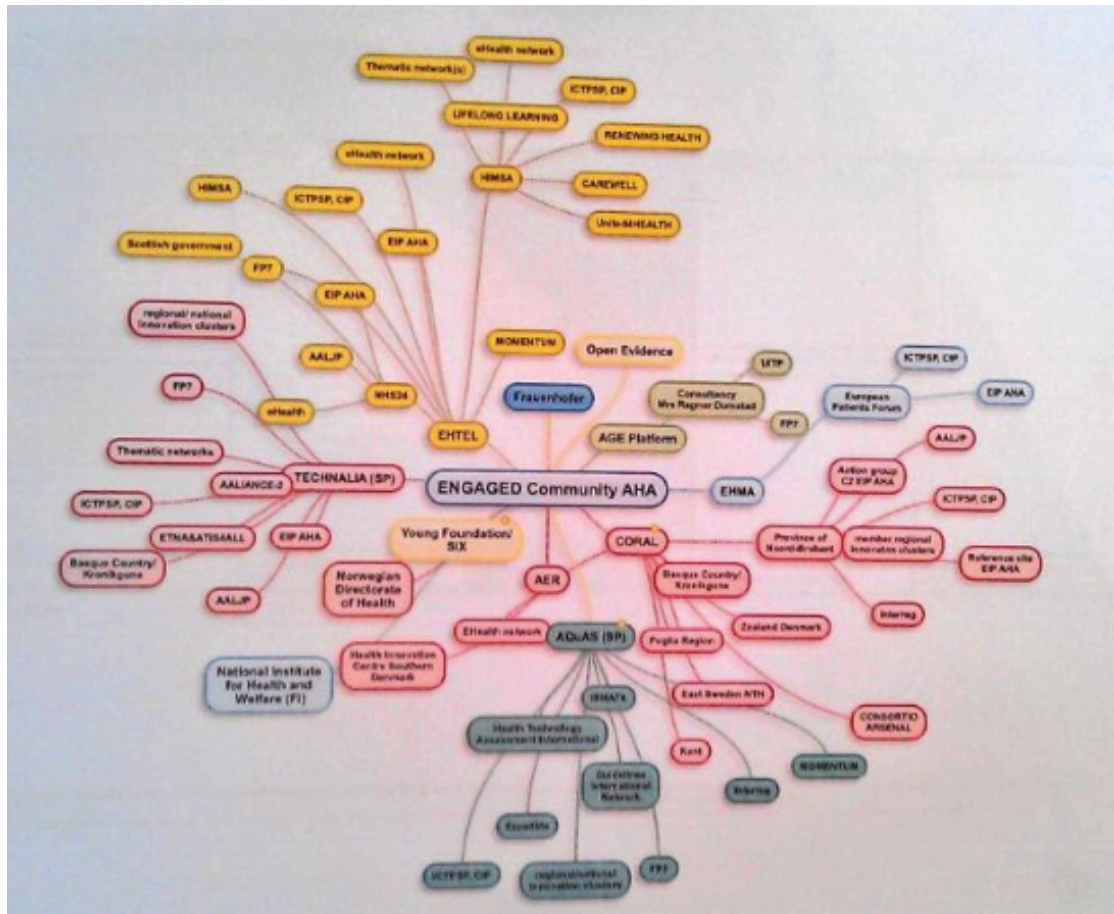


Figure 10: The ENGAGED community mind map



Figure 11: Materials used while developing a joining strategy

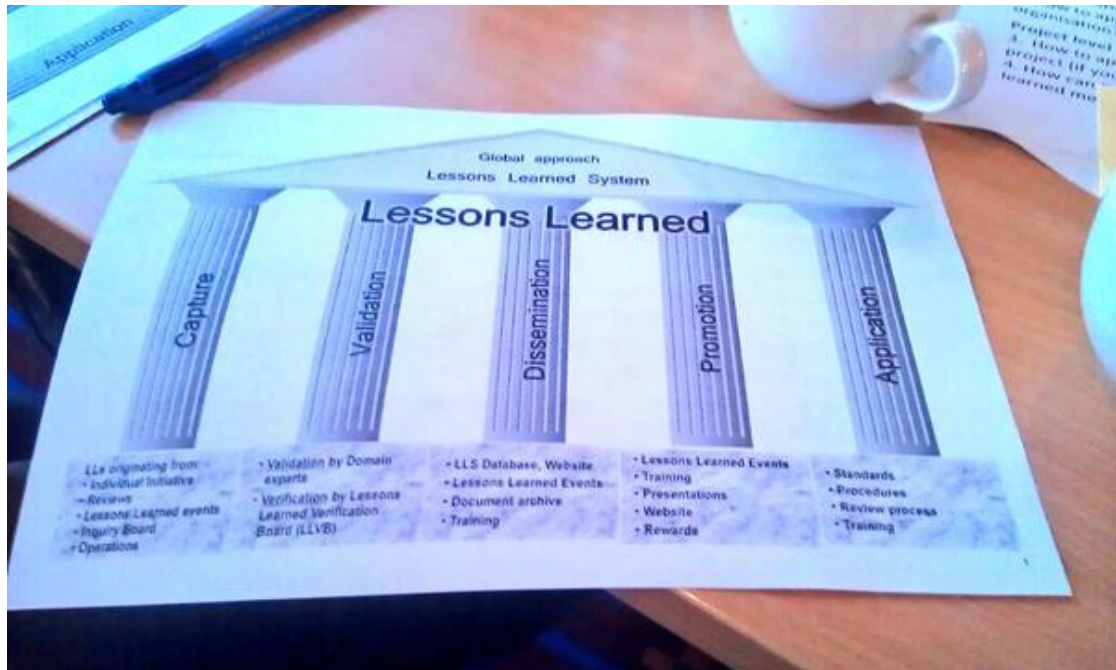


Figure 12: The European Space Agency's lessons learned method

Video

A professional video camera operator was present throughout the conference. He followed a script which outlined the timings for the set-up of the equipment, the presentations to film, the attendees' discussions at their tables, and the conclusions reached at the session end.

A video recording of the conference has been posted on the project's home page: <http://engaged-innovation.eu>. A slide show of the event is available on You Tube at: <https://www.youtube.com/watch?v=8AjvPHSo1CU>.

5 Appendix A - Attendee list

Building a learning community for active and healthy ageing solutions			
Full name	Name of organization	Region or city	Country
Jolanda Schneider	Province of Noord-Brabant	Noord-Brabant	Netherlands
Rachelle Kaye	Maccabi International Center for Research and Development		Israel
David Garwood	EHTEL	Bath	UK
Daniel Fernandez-Buckley	EHMA	Brussels	Belgium
Sabine Wildevuur	Waag Society		Netherlands
Andreas Braun	Fraunhofer IGD		Germany
Carmen Pastor	TECNALIA	Basque Country	Spain
Marielle Swinkels	Provincie Noord-Brabant	Noord-Brabant	Netherlands
Edwin Mermans	Province of Noord-Brabant	Noord-Brabant	Netherlands
Martin Eklund	Zealand Denmark EU Office	Zealand	Denmark
Ilenia Gheno	AGE	Brussels	Belgium
Diane Whitehouse	EHTEL	Brussels	Belgium
James Kass	James R Kass Space Consulting		Netherlands
Ophelie Durand	AGE	Brussels	Belgium
Dag Forsén	New Tools for Health	East Sweden	Sweden
Ragnar Domstad	Independent Senior Consultant	Göteborg	Sweden
Camille Bullo	EPF	Brussels	Belgium
Marc Lange	EHTEL	Brussels	Belgium
Rossana Alessandrello	AQuAS - Agency for Health Quality and Assessment of Catalonia	Catalonia	Spain
Anna Kotzeva	Catalan Agency for Healthcare Quality and Assessment	Catalonia - Barcelona	Spain
Toni Dedeu	Ministry of Health of Catalonia	Catalonia	Spain
Panos Stafylas	HIM SA	Thessaloniki	Greece
Gerda Roupe	Region Västra Götaland		Sweden
Kenneth Johansson	Landstnget i Värmland		Sweden
Robert Sinclair	Region Västra Götaland		Sweden
Helena Stålhammar	County Council of Jönköping		Sweden

D5.5.4 Mid-term conference

Egle Kaack	County Council of Jönköping		Sweden
Helene Richardsson	HR		Sweden
Per-Olof Egnell	Norrbotten County Council		Sweden
Agneta Granström	Norrbotten County Council		Sweden
Anders Olauson	EPF - Agrenska		Sweden
Claudio Saccavini	Consorzio Arsenal.IT		Italy
Kurt-Åke Hammarstedt	Norrbotten County Council		Sweden
Ragnar Domstad	Senior Consultant		Sweden
Stefän Mikaelsson	Sámi parliament		Sweden
Peter Portheine	Slimmer Leven 2020 UA	Noord-Brabant	Netherlands
Janette Hughes	NHS 24	Glasgow	Scotland
John Matheson	Scottish Government	Edinburgh	Scotland
Nicola Filizola	AAL Joint Programme	Brussels	Belgium
Janne Rasmussen	NHS 24		Scotland
Victoria Hunter	NHS 24		Scotland
Donna Henderson	NHS 24		Scotland
George Crooks	NHS 24		Scotland
Andrea Pavlickova	SCTT / NHS 24		Scotland
Kristine Kjaersig	Health Innovation Centre of Southern Denmark	Southern Denmark	Denmark
Johanna Pacevicius	AER	Strasbourg	France
Bianca De Rosario	AER	Strasbourg	France
Kristine Brevik	The Norwegian Directorate of Health		Norway
Nicole Denjoy	COCIR		Belgium
Hande Bozatli	AER		
Helena Fredriksson Ågren	County council Norrbotten		Sweden
Viveca Bergman	National Institute for Health and Welfare		Finland
Päivi Hämäläinen	National Institute for Health and Welfare		Finland
Silvia Mancin	Consorzio Arsenal		Italy
Christina Olander	Independent		Sweden
Lars Wikman	North Sweden European Office		Sweden
Hans Almvide	Vitalis		Sweden
Joana Mora		Basque Country	Spain
Kine Nordstokka	Young Foundation		UK
Katarzyna Szkuta	Open Evidence	Brussels	Belgium

6 Appendix B - Save the date!



Save the Date!

The ENGAGED Community's Mid-Term Event will be held on Thursday, 6 February 2014 in Kiruna, Sweden

The Engaged Community for Active and Healthy Ageing will be holding its mid-term event on **Thursday 6 February between 8:00 and 11:30am** in Kiruna, Sweden. The event will be a satellite session of the Arctic Light eHealth conference (ALEC). This interactive session will focus on developing stakeholder-led sustainable mechanisms for sharing innovative solutions for active and healthy ageing, and responding to serious social, societal and organizational challenges.

The programme for the event is under construction but will feature **Rachelle Kaye, Director of the Maccabi Institute of Health Service Research**, as keynote speaker. Then participants will enjoy the opportunity to contribute to discussions on the development of mechanisms for sharing innovative solutions and supporting active and healthy ageing. Activities will be centred around interactive discussion tables hosted by expert facilitators. People will have the opportunity to move around in a dynamic environment and to share their thoughts on a variety of diverse topics.

The event is **free of charge** and will be held in the **Hotel Scandic Ferrum in Kiruna** (<http://www.scandichotels.com/Hotels/Sweden/Kiruna/>).

For delegates attending the main ALEC 2014 event, the workshop organisers are providing additional accommodation for the night of 5 February 2014.¹ This can be booked through the main conference site <http://www.nll.se/alec>. For those people planning to attend the ENGAGED mid-term event only, accommodation can be booked directly with the main conference travel agency, Norrbottens Resebyrå, Contact: Marinette Lestander, Phone: +46 920 108 00. E-mail: marinette.lestander@nronline.se

For further details, also on travel possibilities, see the ALEC website <http://www.nll.se/alec>. **Full details of the programme** will soon be available on the ENGAGED community's website.

<http://www.engaged-innovation.eu>

¹ ENGAGED partners should also plan to attend the project's programme committee meeting on the afternoon of 6 February 2014, from 13:00 to 16:00.

7 Appendix C - Conference programme

Building a learning community for Active & Healthy Ageing solutions

ENGAGED Midterm Event

Thursday 6 February, 2014, Scandic Hotel Ferrum in Kiruna (Sweden)

8:00 REGISTRATION AND WELCOME BREAKFAST

8.30 PLENARY SESSION

- 8.30 hrs *Introduction to Engaged* by **Daniel Fernandez Buckley**, EHMA Project team of ENGAGED
- 8.40 hrs *Taking inspiration from field experience on innovation and engagement* by **Rachelle Kaye**, Director, Maccabi Institute for Health Services Research; Deputy Director, Department of Planning and Finance, Maccabi Healthcare Services (Israel)
- 9.00 hrs *Introduction to the interactive tables* by the moderator **Jolanda Schneider**, Province of Noord-Brabant (NL)

9.05 hrs THREE THEMATIC INTERACTIVE TABLES (3 rounds)

9.05 hrs Round 1

Table 1: A joining strategy for the community of Active & Healthy Ageing

Why should we join the learning community of Active & Healthy Ageing solutions? Who do we need to join this learning community? Facilitator: **Sabine Wildevuur**, Head Creative Care Lab, Waag Society and Rapporteurs: **Andreas Braun**, Fraunhofer and **Carmen Pastor** of Tecnia.

Speed dating with another participant from the group (5')

- Why are you doing these activities or projects?
- What are the drivers and expected impact from your initiatives?
- For which issues are you still looking for answers?
- With whom would you like to share this?

Inspirational pitch: *A People Value Canvas* by Sabine Wildevuur of the Waag Society and co author of the book "Connect Design for an Empathic Society " (5')

Brainstorming about a joining strategy by using the People Value Canvas (25')

1. Who are relevant stakeholders and experts with whom to share more on the issues that need to be solved during the innovation process?
2. How do you find the right experts or stakeholders to share with?
3. How can the ENGAGED community and the European Innovation Partnership on Active & Healthy Ageing help you?

Table 2: What are the key issues we are trying to solve?

What are the most challenging (horizontal) topics on which we all work to solve during the process of innovation in independent living, integrated care and prevention? Facilitator: **Edwin Mermans**, Province of Noord-Brabant and Rapporteurs: **Ilenia Gheno**, AGE Platform and **Martin Eklund** of Zealand region of Denmark.

Speed dating with another participant from the group (5')

- Why are you doing these activities or projects?
- What are the drivers and expected impact from your initiatives?
- For which issues are you still looking for answers?
- With whom would you like to share this?

Inspirational pitch: *The top six learning topics of ENGAGED and lessons learned so far* by Mariëlle Swinkels, Content Manager of ENGAGED, Province of Noord-Brabant, member of CORAL (10')

Ranking and discussion on horizontal topics (20')

- What are for you the most relevant topics to share with others?
- Why are these mutual learning topics?
- How can the ENGAGED community help you? What other opportunities do you know about?

Table 3: Tips and tricks for mutual learning

How to capture lessons learned and how to share these lessons with others? What tips and tricks are there to share about mutual learning (e.g., strategy, methodology and systems)? Facilitator: **Diane Whitehouse**, EHTEL and Rapporteurs: **Ophelie Durand**, AGE Platform and **Dag Forsén**, New Tools For Health of East Sweden.

Speed dating with another participant from the group (5')

- Why are you doing these activities or projects?
- What are the drivers and expected impact from your initiatives?
- For which issues are you still looking for answers?
- With whom would you like to share this?

Inspirational pitch: *How to capture lessons learned?* by James R. Kass, independent consultant (5')

Tips and tricks for mutual learning (25')

- How can your project /organization/ network share more on the issues to be solved during the innovation process in the ENGAGED community?
- What tips and tricks are there to share?
- How can the ENGAGED community help? What other opportunities do you know about?

9.50 hrs Round 2

10.35 hrs Round 3

11.15 CONCLUSIONS

11.30 CLOSURE

8 **Appendix D - Instructions for moderators, facilitators, pitchers and speakers**

Moderator: Jolanda Schneider

Introduction

- Gives an overview of the programme.
- Introduces the two speakers:
 - Olivia Dix of EHMA will be replaced by Daniel Fernandez-Buckley: he is the technical project manager of the ENGAGED project
 - Rachelle Kaye of Maccabi.
- Gives instructions for the interactive tables and introduces the pitchers, facilitators and rapporteurs.
- Photos will be taken of each session. Edwin and David will make pictures of each outcome of the tables and will put these into PowerPoint slides – without lots of comments, just as an impression – to be shown at the end of the conference.
- Ask two persons from the audience what they will take back home from this event.
- There is a Twitter account to be used by ENGAGED.
- There will be a conference report produced and sent to every attendee.
- There is no microphone for the audience! This will be sorted out by the time of the event.

Interactive session per table

- Each participant visits sequentially each thematic table after a session of 45 minutes. The numbers of the tables are behind the names in the attendee list in the information package, so that all the attendees know which tables they will visit one after the other.
- For each table, a 45 minute session will take place, starting with a speed date between each two participants of the group, followed by a inspirational pitch, and – after that – a brainstorming and sharing session. The session will end with a summary by the table rapporteur.

Pitchers

- The pitchers have to pitch to two tables at the same time. At each table, 10 participants will be listening: i.e., in total 20 participants. Participants are different kinds of stakeholders from: governments, businesses, patient-/consumer organizations, health care organizations, knowledge institutes, and innovation clusters.
- The pitcher will not use a PowerPoint slide but, if necessary, may maximum copy two slides to hand over physically to the participants.
- The pitch will have to give inspiration to the group for the discussion afterwards.
- The pitcher can give input during the discussion as well, but will have an equal role with the other participants.

- The pitcher can help the facilitator with the moderation of the process at the table(s), and will switch with the facilitator from the first table half way through the session.

Facilitators

Tables, posters and post-it notes

- The tables are numbered.
- Two tables per theme will be located closely together in the room.
- The facilitator will also have to deal with two tables at the same time. But the facilitator can share his or her task with the pitcher. They change tables half way during each session. Thus, the pitcher can give input to the discussion at both tables.
- At every round, the participants will participate in another group. The groups at each table change every round and will be mixed up again after each table moves on.
- The facilitators, rapporteurs and pitchers stay at the same thematic tables all the time.
- Each table has a paper table cloth on it (a poster), on which participants can write or stick post-its.

Speed dating

- Each round starts with a speed dating exercise between each two participants in the group. See the questions in Appendix B (in green)) in the programme.
- It is important that participants are aware of the limited time for discussions. They have to share those discussions that really matter: e.g., what and who are they looking for?
- The speed date is a warming up exercise, so that everybody becomes aware of the learning points and is ready to share during the discussion those lessons or questions that they are struggling with.
- Each round, the speed date offers the opportunity for everybody to meet one other individual person in the group with whom they can share ideas.

Group discussions

- A short introduction is needed: just people's names and organization is good to begin with. More info is available in the information package. This info is based on the Google docs form that every participant has already filled in. The info shows the person and the networks she or he is involved in and also the issues she or he is working on.
- The facilitator introduces the questions, as they are written in the programme in the information package.
- The facilitator takes care that everyone can speak during the brainstorming and discussions.
- The brainstorming will start by inviting every participant to write on post-it notes during 5 minutes only, using key words, the thoughts that are at the top of their minds in relation to the key questions to be discussed by their table.
- The post-its will be stuck on the paper table cloth (poster).

- The facilitator clusters the post-its which are related to each other on the poster, and identifies some main topics to share with the group.
- Do ask the participants to explain more about the content of their post-its and ask them questions so as to go more in depth about their points with the other people in the group.
- The facilitator ends the discussion with a conclusion/set of insights based on those comments that are written on the paper table cloth (poster). Focus on what are the main insights and which conclusions are important to hand over to the ENGAGED community.
- After each round, the facilitator changes the poster on the table.

Rapporteurs

- Each table has a rapporteur who will write down a summary of the conclusions and will share this summary with the group at the end of each session.
- The rapporteurs take care that a photo is taken of each poster at the end. David Garwood and Edwin Mermans are taking high-quality photos of the session. The facilitator or rapporteur will act as back up photographers.
- The rapporteurs will prepare input to the conference report after the event.

Last but not least: A video will be made during the events. Also six persons will be interviewed and filmed afterwards: Sabine Wildevuur, James Kass, Camille Bullot, George Crooks, Agneta Granström, and Rachelle Kaye.

David Garwood and Daniel Fernandez-Buckley are available during the morning for backup and in the background.

Contact details

Daniel Fernandez Buckley (Daniel.FernandezBuckley@ehma.org or +32 (0)2 502 6525)

Mariëlle Swinkels (mswinkels@brabant.nl or +31 6 133 543 97)

9 **Appendix E - Outcomes on the key issues to be resolved (version I)**

This appendix contains the details of discussions that took place on the key issues to be resolved. The main focus was on user involvement.

Two tables worked together to tackle six topics. Two further topics were added during the discussions: the innovation process and entrepreneurial involvement.

Rapporteur: The original notes were taken by Ilenia GHENO (AGE).

Round 1

- User Involvement
- Innovative procurement
- Interoperability
- Evidence of Impact
- Prevention and impact assessment
- Business model
- Innovation process
- Entrepreneurial involvement.

In Round 1 of the discussions, these eight topics were prioritized ("ranked") in the following order:

- | |
|---|
| <ul style="list-style-type: none"> • Evidence of impact (voted 5 points) • Prevention and impact assessment (voted 4 points) • Business model, interoperability (both voted 3 points). |
|---|

Innovation was said to help identify at what point in time evidence of impact is needed (it was argued that successful innovation is what can be scaled up; it generates new ideas). Entrepreneurial involvement is the private sector component of user involvement. It helps new products and services to be embraced by users.

Comments from participants concentrated especially on the importance of innovation and the entrepreneurial role. Opinions were focused and down-to-earth:

- *"Belief and courage will move things forward. They are needed to make all [of] the topics work together and be translated into practice."*
- *"The national level has a stronger role on impact and impact assessment; [it is] much stronger than the EU role."*
- *"Entrepreneurs are part of the innovation process."*
- *"Pragmatism is [...] key ('just do it')."*
- *"When you have no money, you become really innovative. Less money = more innovation: it [creates] a push to take risks."*
- *"Entrepreneurs are the risk takers: they should therefore be considered as key actors."*

Round 2

In Round 2, a seventh topic was added to the list first prepared by ENGAGED. It was education.

The ranking exercise resulted in the following priorities:

- User Involvement (voted 9 points)
- Interoperability (voted 6 points)
- Evidence of Impact (voted 5 points)
- Prevention and impact assessment (voted 4 points)
- Business model (voted 3 points)
- Education (voted 2 points)
- Innovative procurement (voted 1 point).

A representative of an information technology company highlighted how user involvement is very hard to establish in practice: he said that, although involvement is key for the development of his company's tools, it is hard to find users to get them to contribute to the innovation and research process.

Another participant suggested, in reply, that one should ask citizens and users what they really want instead of first developing solutions and then asking users to validate the process.

Moreover, it was stated that some major barriers emerge because members of the public do not want to cooperate with the private sector (and vice versa), thus causing interoperability problems.

A vicious circle exists: innovation and research need money, but money is only provided once the evidence is there to prove what works and what does not work.

There also seems to be a lack of clarity around the role of users and their relationships with various professionals (as if users are hierarchically-speaking less important than the professionals who invite them to come on board). For example, patients are often perceived to be in a weak (power relationship) position with respect to their doctors.

Beyond information technology, we should focus on psychological and anthropological approaches and tools in order to support such the change management needed.

It is, of course, important to make the intentions of any initiative clear before involving users. The role of the intermediate users (i.e., users' organizations) is essential in order to reach out and involve users. Moreover, it is important to be part of a network of stakeholders. Such an outcome is particularly relevant for the ENGAGED project and the ENGAGED community.

Round 3

The result of the ranking from Round 3 was as follows:

- User Involvement (voted 14 points)
- Evidence of Impact (voted 11 points)
- Prevention and impact assessment (voted 5 points)
- Business model (voted 8 points).

No points were attributed to other subjects, and no new topics were introduced at this stage.

The discussions around the question of "Who is the user?" underlined that a holistic perspective to users has to be prioritized for a variety of reasons. Users are very diverse in reality; therefore, a better understanding of users' needs is required; and their involvement needs to be tailored to their needs. (User involvement is often either not attractive for users or users do not know how it is possible to get engaged in an activity or initiative.)

There is also a mismatch between users and the political system; therefore the type of leadership needed is crucial. Leadership should be distributed in a participatory or democratic way, as some decisions are better taken at a local level while others are better at a more central level.

It is important to communicate with people; communication needs to be tailored; user involvement needs to be co-designed; and users need to understand what the benefits are for them. Colloquially expressed, "What is in it for the users?"

10 Appendix F - Outcomes on the key issues to be resolved (version II)

This appendix contains the details of discussions that took place on the key issues that ENGAGED is trying to solve. The discussion concentrated on: What are the most challenging horizontal topics that we are trying to solve when innovating in different domains related to independent living, integrated care and prevention?

Facilitator: Edwin MERMANS; Pitcher: Mariëlle SWINKELS.

Rapporteur: The original notes from this session were taken by Martin EKLUND, Zealand Denmark.

The essence of these discussions can be summed up in one sentence:

"Focus more on the process of change management, the 'just do it' attitude, and be more pragmatic about the requirements of scientific proof."

Round 1

Round 1 consisted of a set of a speed dating exercise and a pitch made by Mariëlle SWINKELS.

Speed dating:

- Patients are not adequately engaged – there is a lack of tools to get them engaged.
- Will engaging patients result in increased costs in the health care system? This issue remains to be looked at, as well as the implications it might have.
- Not all patients want to get engaged themselves. This lack of engagement could potentially lead to increased inequalities in health.
- Are we creating a better health status for all groups by focusing on engaging people?

Purpose of ENGAGED:

The ENGAGED thematic network:

- Tries to combine different networks.
- Focuses on horizontal topics such as user involvement, innovative procurement, interoperability. It does so via holding mutual learning workshops combined with regional activities/events (e.g. the Arctic Lights/ALEC conference).
- Engages various stakeholders, experts and policy makers in order to draw out broad perspectives on various problems and their solutions.

- Aims for results from workshops that emerge from small working groups focusing on various topics.
- Brings the knowledge extracted from its mutual learning workshops – including its road mapping– and brings this into the European Innovation Partnership on Active & Healthy Ageing.
- Shares problems, solutions and ideas.
- Emphasizes that trust is important.
- Inspires people.
- Is enthusiastic.

Topics and their ranking:

The topic chosen for discussion based on ranking was evidence on impact.

Evidence on impact.

- Implementing new innovative solutions has become too academic. There is too much focus on adequate evidence. Evidence should not be the only focus, although it is important for politicians.
- Instead, we need a “just do it” attitude. Being brave and having a “just do it” attitude is perhaps easier at the national level than it is at European level.
- Decision-makers need to believe in new processes and solutions, but they also need reassurance that the ventures that they initiate are not completely without the prospect of success.
- Risk sharing between the public and private sector would be beneficial.
- We need also to consider what the European Commission would think if adequate attention were not to be paid to evidence and impact.
- It is important to find the right balance between scientific evidence and belief – i.e., it could be called “pragmatic proof”!
- Interoperability is key to scaling up solutions.
- Finally, an example from Greece was offered: “When you don’t have the financial means, that’s when you start being truly innovative! ”

Additional points were added:

- Private sector entrepreneurial involvement is linked to innovative procurement.
- There are various stages to the innovation process.

Round 2

Round 2 consisted of a further set of a speed dating exercise and another pitch made by Mariëlle SWINKELS.

Speed dating:

- Who is responsible if mistakes happen as a result of the patient's own action(s)? Is there another side (a downside?) to being engaged?

Pitch: (same as round 1).

Topics and ranking:

The topic chosen for discussion based on ranking was user involvement.

User involvement

- It is hard for private sector small- and medium-sized enterprises to find end-users to work with – it is difficult to involve them in the development process.
- The Scottish approach (by its national health service called NHS24) of asking citizens what they want is a good idea.
- We need to promote a culture of involvement/engagement in health.
- Financial calculations are needed to prove the impact of innovative solutions. Yet impact and evidence are both needed to ensure funding is available in the first place.
- There is usually resistance from health professionals on giving up some of their status/role as this modification will bring about a change in power relationships.
- Professional change management is process-oriented. Moderators of change/change agents are needed.
- ICT training in health – it could be called “passenger training” – would be a good idea.
- There is a capacity gap that results from the burden of running top-down processes. This means that all people and levels involved in the change process need to be engaged and adequately informed.
- Support for learning activities on the part of end-users should be a given as it is not clear where end-users need to go to be involved in the change process.

Additional points:

- Education.

Round 3

Topics and ranking:

The topic chosen for discussion based on ranking was again user involvement.

User involvement

- The definition of “user” needs to be clear. Patients, citizens, organizations and other stakeholders could all be regarded as users.
- Understanding local eco-systems and political reality is key to involving users.
- There is a need for an easily accessible list (or repository) of applicable solutions.
- There is a need for more insight into the needs of various users.
- There is a need to involve fragile and less resourceful groups of people, who may be excluded from change processes.
- Decision-makers need to listen more to end-users like patients.
- There is a mismatch between decision-makers and users and their needs.
- New ways of assessing the needs and wishes of patients and vulnerable groups are needed, e.g. by tailoring information and marketing to a variety of stakeholder groups, including patients.

11 Appendix G - Outcomes on tips and tricks for mutual learning

The focus of this table was on: How to capture lessons learned and how to share these lessons with others? What tips and tricks are there to share about mutual learning (e.g., strategy, methodology and systems)?

Rapporteur(s): Dag FORSÉN, NTH and Ophelie DURAND, AGE Platform

Main takeaway from the session:

The main takeaway from this discussion was that it is equally important to learn both from success and failure.

Learning from failures is more important and brings more learning than from successes/best practices. By studying carefully what did not go well in a project, appropriate proactive measures can be taken in the future so as to avoid making the same mistakes again.

The fact that many projects contain the same generic steps (e.g., end-user involvement), could mean that the lessons learned from one project or initiative would be very beneficial to other similar or adjacent projects. There are two overall concerns: first, people generally do not want to hear about failure; second, the metrics for how projects are incentivized often hone in on success rather than the lack of success.

We need to build trust and create a culture with an open attitude towards striving for success. At the same time, do not stigmatize failure!

What preconditions are needed?

- Transparency: everyone must be willing to talk about failures/lessons learned (including the top management!).
- Generosity to share: everyone must be willing to share lessons learned.
- Objective analysis: everyone should be ready to analyze in an objective way the failures and lessons learned.

An environment of trust and its challenges

Creating an environment of trust means turning the group into a team, and also having a convivial time. People need time to think about lessons learned and also have a passion to ensure everyone's commitment to the initiative. Rewards and incentives can help people get involved in the process. We must set up standards to compare the failures/lessons learned and assess results. An appetite for risk and openness to change are also important if we want to innovate.

What are the challenges? Marketing must come first, as well as even after the project ends, to sell/promote the lessons learned. Then, a good

system is needed to capture and process the huge amount of raw data available to the organization or programme. Stability is also important to ensure progress, notably in the political context.

Practical organizational and communication challenges

Practical issues of importance were raised during the discussion on tips and tricks and lessons learned. They included: management styles, communications platforms; mutual learning; cross-disciplinary approaches; project management; and the importance of end-users.

Management styles: In order to make mutual learning happen, it was highlighted that top management support is absolutely essential. A top-down/bottom-up approach must be applied so that everybody involved can get an appropriate answer to the question of "What's in for me". A lot of emphasis must be placed on internal 'sales' processes both directly by the project management staff as well as by appointed "ambassadors".

Communication platforms and learning: A communication platform must be established for any project or initiative so that all the parties involved share the same story about the project (e.g., they know the answers to the questions "Why are we there?" "Who are we doing this for?"). If we could find and set up mutual learning tools (both intra-project and inter-projects), the learning process could be enhanced and accelerated. This learning process could be implemented using a combination of web and social network technologies. Marketing, promotion and dissemination are all key to establishing appropriate stakeholder perceptions.

Cross-disciplinary approaches: Successful projects require a cross-disciplinary approach: this implies they must have a team that consists of various types of people with different backgrounds, skills and personalities. In order to stimulate the mutual learning process, we need to understand that people are different. For instance, one way to approach these differences among stakeholders could be to offer various methods and formats for the gathering and dissemination of lessons learned.

Project management: The participants also discussed the importance of applying agile, modern, project management methods such as Scrum <https://www.scrumalliance.org/why-scrum>, in which learning is an integral part of a project from day one. The Scrum process includes all the major stakeholders such as producers, owners, customers and end-users.

End-users: The importance of involving end-users early on in an initiative cannot be emphasized enough. At the end of the day, no project can be truly successful without engaging people in the change process. The lessons learned by end-users are the most precious part of any formula for creating project success.