

# STAKEHOLDERS' OUTREACH APPROACH



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## Glossary of acronyms

eCAN	Strengthening eHealth Including Telemedicine and Remote Monitoring in Health and Care Systems for Cancer Prevention and Care
EU	European Union
JA	Joint Action
MS	Member States
WP	Work Package(s)

## Executive Summary

The Joint Action 'Strengthening eHealth Including Telemedicine and Remote Monitoring in Health and Care Systems for Cancer Prevention and Care' (eCAN JA) stakeholders' outreach approach **identifies six main group categories**: (1) policymakers, (2) scientific and research communities, (3) healthcare providers and industry actors, (4) civil society organisations, end-users and general public, (5) European Union (EU) networks and collaborations and (6) media outlets. These six categories are the result of the stakeholders' identification and analysis undergone in the JA by WP2 and WP8.

In order to build the stakeholder network of the project, several sources of information have been identified (e.g., the ecosystem building and stakeholders' analysis (WP8), the mapping of existing eHealth initiatives for cancer care (WP4), communication activities...), most of them emerging from specific eCAN activities. Resulting from these sources of information, we listed the main outputs in terms of stakeholders' identification. These include a database of contacts, stakeholders' country files, a stakeholders' engagement toolkit and report and a policy-mapping dashboard, among others.

By identifying and developing a stakeholders' network, the communication team (WP2) aims to enhance the impact of the eCAN JA, encourage the exchange of knowledge and establish potential synergies and collaborations with other EU initiatives.

The document describes the main mechanisms used by WP2 to reach out to each stakeholder group identified for communication, dissemination and visibility purposes. These tools include innovative strategies such as interviews with stakeholders or the use of emerging social networks such as TikTok, an uncharted approach used in an EU JA.

Overall, this document summarises the stakeholders' analysis performed by the communication team as task 2.2.1 of the eCAN JA and constitutes a means of verification for JA Milestone 2.2. The information is also partially included in the eCAN Dissemination and Communication Plan (Deliverable 2.2):

MILESTONE	DESCRIPTION
MS 2. 2	Develop and upkeep a stakeholder network, considering the stakeholders targeted by past / ongoing relevant Joint Actions related to cancer and digital transformation healthcare policies.

## **1. Introduction, background and objectives**

In the context of the eCAN JA, stakeholders are not only professional organisations and groups, but also individuals who could affect or be affected by the activities carried out in the project and might contribute to the uptake of the project's outcomes in their areas of influence. Ensuring a high visibility and impact for the project and its results to policy makers, competent authorities, experts and society, both at national and European level is one of the main tasks for the communication team of the project.

An essential communication goal for the JA is to set up a network of interested policy makers, professionals, patients' associations, citizens, and other stakeholders at different levels to ensure not only to widen the impact of the JA, but also reaching out to the right audiences.

Their identification and outreach strategy define the eCAN communication and dissemination content, such as news, policy briefs, brochures, newsletters that can be accessed through the website and other communication channels. The dissemination strategy of this JA focuses on three main activities:

- a) To communicate the objectives, structure and outcomes of the project to the stakeholders to inform, promote and engage relevant bodies on how to take advantage from the results of the JA.
- b) To communicate scientific knowledge and information to professionals and specialised audiences to inform them of the outcomes of the JA, enable them to take them up and guide on how to use them.
- c) To bring audiences together to interact (with organisation of events e.g., webinars) in order to disseminate the potential and the benefits of telemedicine in cancer care.

These main efforts of the dissemination strategy focus on tailor-made content based on the need of interacting with different stakeholder groups.

## 2. Stakeholders' analysis

Identifying what the relevant types of audiences are for this project is crucial to build effective communication channels and increase the project's impact. Due to diversity among target groups, mapping out all the potential stakeholders has facilitated conveying tailored key messages to identified target audiences adequately.

The stakeholders' analysis undergone in the JA by WP2 and WP8 resulted in the identification of six main group categories:



Figure 1. Categories of identified eCAN stakeholders

The description for each stakeholder group altogether with the outreach strategy for dissemination purposes is exposed as it follows.

### 2.1 Stakeholders' categories and outreach

#### Policymakers

Competent authorities at regional, national and European level with the potential to ensure the ongoing integration of eHealth into health policy, with the aim of developing digital services that respond to the needs of health systems and health objectives.

Relevant ministries, state authorities or policymakers have been targeted to empower the potential of introducing telemedicine in health care systems through policy dialogue for cancer. The JA aims to create a policy map about digital health in cancer care across Europe via country factsheets validated by health policy experts.

The elaboration of policy briefs is also considered as output of multistakeholder dialogues, specified as part of eCAN's monitoring and evaluation strategy (Table 1).

<b>eCAN's Specific Objective: Enable cross-border cooperation &amp; uptake of results</b>	
<b>Planned outputs and outcomes</b>	
Two policy briefs based on discussions from meetings with EU MS representatives and EU-level expert groups on cancer	
Coverage of all 27 EU MS in eCAN events	

Table 1: eCAN's Specific Objective 5: Enable cross-border cooperation & uptake of results.

Furthermore, the project will engage the T12 trio to ensure telemonitoring and teleconsultation for cancer care and prevention are included on the EU's agenda in 2023-2024, particularly considering that Spain, Belgium and Hungary, eCAN members, will act as EU's presidency during the JA's period.

In this sense, the Catalan Institute of Oncology (ICO), as WP2 leader and institution representing Spain in this JA, has frequent and fluid communication with the Spanish Ministry of Health to keep its representatives up to date with the progress, results and conclusions of the JA. At the same time, WP2 will explore collaborations to encourage the inclusion of cancer care and prevention policies in the EU political agenda.

Regarding other communication strategies, news on policymakers' statements or new policies about telemedicine and teleconsultation are susceptible to be displayed on the website and disseminated on social networks. This way, policymakers can be tagged in eCAN posts and directly addressed.

### **Scientific and Research Communities**

This group includes all healthcare bodies, professionals, institutions and scientific associations (universities & research). The main goal is to expand knowledge sharing through different strategies. For example, having interviews with the representatives of these institutions or professionals seems suitable for spreading knowledge on cancer research, telemedicine and eCAN's potential. At the same time, those actors are contacted through diverse ways (mainly via email and social media) to let them know about the project news, results, progress and outcomes.

On the other hand, universities and the research community are considered core targets; the main goal is to improve knowledge about the JA and to promote their engagement in disseminating its outcomes. In this regard, research cancer institutes will be contacted in order to spread information about eCAN and ask for their collaboration in the form of interviews or social networks support.

Involving these actors in the communication strategy will provide a bigger picture of the current cancer research scenario that will help to better understand and contextualize the eCAN project. At the same time, when appropriate, WP2 will participate in congresses and conferences to spread the word about the project and reaching PhD students and other researchers that may have interest in knowing the Joint Action.

## **Healthcare Providers and Industry actors**

A healthcare provider is a person or entity that provides medical care or treatment. The concept includes doctors, nurse practitioners, midwives, radiologists, labs, hospitals, urgent care clinics, medical supply companies, and other professionals, facilities, and businesses that provide such services.

Regarding healthcare-related industry, we refer particularly to companies specialised in eHealth. Both groups respond to similar outreach mechanisms and can be reached in scientific events, such as conferences, congresses, and according to their request. These actions will allow them to know more about eCAN development and outcomes in detail.

The gathering of these two groups, which might seem incompatible considering their opinions and interests, responds to the application of the same outreach mechanisms for both of them.

## **Civil Society Organizations, End-users & General Public**

This group gathers all cancer patients' associations at regional, national and European level, as well as disease-specific associations. The representatives of some of these patients' associations are an interesting target to interview given the importance of including the patient's perspective and experience into research project's processes.

Therefore, interviewing some patient's associations representatives will provide fruitful insights to the project and will diversify the topics addressed by this Joint Action. This target group will also be reached mainly through email or social media to spread eCAN's progress, updates and outcomes that may be of interest for these associations.

For addressing society, plain language is essential to drive engagement and raise awareness of the topics addressed by eCAN. Newsletters and multi-format content about the project are published following this idea so that users can easily understand the interest and purpose of this Joint Action.

On the other hand, social networks are channels that increase the possibilities of spreading the content of the website through different and wider means and formats. Key messages cover topics such as up-to-date reports on telemedicine and teleconsultation tools, policies or case studies and news on cancer research and digital transformation projects.

## EU networks and external collaborations

This JA is related to other ongoing and past EU initiatives that also work in cancer research, telemedicine and digital transformation. Identifying these JAs helps eCAN to develop and upkeep a stakeholder network.

Through eCAN social media accounts, WP2 will share reports and results from these projects, an activity that might help to create synergies among JAs while adding value to the continuity of care. At the same time, the website has a section ([EU Initiatives](#)) dedicated to gather relevant ongoing and past projects that are related to eCAN's areas. This space enables users to find related EU projects and amplify their vision on cancer research, telemedicine and digital transformation at the European Level.

## Other target groups

In addition to this, WP2 has identified **media outlets** as an additional and specific target group to be addressed for dissemination purposes. Digital and traditional media outlets are useful channels to disseminate eCAN-related content among the society.

Considering WPs' workflow and the opportunities of attracting media's attention, WP2 elaborates press releases for either regional, national and European distribution, as well as general and specialised media outlets. On the other hand, when relevant face-to-face events are held (e.g., the final conference), WP2 will contact the media to attend and report on them. The main objective is to increase the audience eCAN reaches while creating awareness among the population.

The following figure summarizes the main outreach mechanisms, either channels, pathways or tools, put into motion by WP2 to reach out to each stakeholder group identified for communication, dissemination and visibility purposes:



Figure 2. Summary of main outreach mechanisms for each stakeholder group

### **3. Sources of information**

Identifying eCAN stakeholders has resulted from seven main and diverse sources of information. Six of them either are specific tasks of the project with the direct involvement of different WPs or linked to the eCAN involved organisations. The last source of information is non-eCAN-related and more general, but also relevant to be highlighted:

1. Ecosystem building and stakeholders' analysis (WP8)
2. Mapping of existing eHealth initiatives for cancer care (WP4)
3. Communication activities and/or tools: website, social media & interviews (WP2)
4. Foresight and Roadmap development (WP4)
5. eCAN Consortium
6. eCAN-related Joint Actions
7. EU Project Platforms

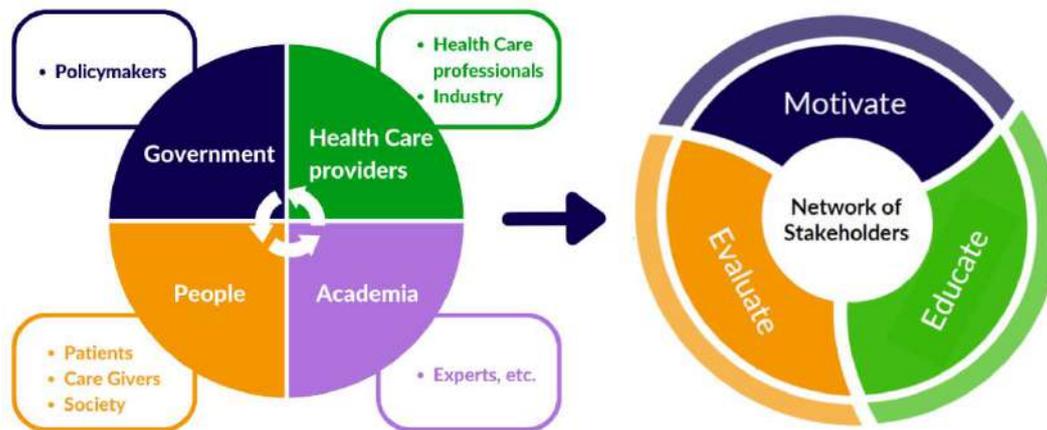
#### **3.1 eCAN-related specific sources of information**

##### **Stakeholders' engagement (WP8)**

The ecosystem building and stakeholder's engagement performed by WP8's task 8.1 has helped to nurture the directory of eCAN's stakeholders, since their main goals include:

- Mapping existing networks of stakeholders across EU countries
- Building a network of stakeholders by actively engaging representatives from the quadruple helix (science, policy, industry, and society) (figure 3)
- Defining a stakeholders' engagement framework

The survey sent to all eCAN participants is available in Annex 1 of this report, and the stakeholders identified by the eCAN consortium are available on the website.



### Quadruple Helix

Figure 3. Stakeholders' Quadruple Helix & engagement framework.

## Mapping of existing eHealth for cancer care initiatives (WP4)

A second source of data for stakeholders' identification comes from mapping the existing initiatives of governance models, policies, tools and technology. Resulting from the research done by WP4, four groups have been identified:

- Governance
- Strategies/Policies
- Legislation
- Cancer specific eHealth solutions

The list of indicators for each of these groups is available in Annex 2.

## Communication activities and tools (WP2)

The dissemination activities performed by the communication team, altogether with the different tools or channels designed and implemented have become sources of stakeholders' identification and engagement. In this sense, the project's website has been designed to be attractive, modern and pleasant to navigate within for the users. Similarly, social media accounts are regularly upkept to highlight the dissemination activities done for the project, displaying ongoing actions and latest news.

An attentive, approachable and creative attitude are basic features for the communication team to accomplish its objective of setting up a network of stakeholders at the EU level. Thanks to its holistic trait that includes expertise on project management & science journalism, among others, the eCAN communication team has implemented

innovative strategies to increase awareness and visibility on the project, including interviews with key figures within the EU public health scope.

The communication team decided to include direct dialogues, for communication purposes, with some key persons to adopt a straightforward and proactive collaborative approach and to reduce the existing gap on knowledge sharing among different initiatives, institutions and organisms devoted to either digital transformation or cancer care and prevention across the EU.

### **Foresight exercise & Roadmap Development (WP4)**

This constitutes eCAN's task 4.2 and it involves the development of a roadmap for scaling up eHealth including telemedicine and remote monitoring for healthcare systems for cancer prevention and care, recognising possibilities and framework conditions. The foresight exercise aims at providing support to decision makers in developing future-oriented policies and improving the overall flexibility of governance, by broadening and expanding the awareness of emerging issues and situations, particularly for public healthcare crises.

### **eCAN Consortium**

All the entities that conform the whole eCAN Consortium can be a strong source of information to identify new stakeholders and to increase the project's visibility, depending on their local or national specific experience, position, influence or institutional interests. Moreover, most eCAN organisations have already or are jointly involved in other projects of EU initiatives.

Thus, eCAN Consortium holds consolidated experience and becomes a powerful source of benchmarking and networking opportunities. For this reason, WP2 maintains a close contact with each participant through specific sessions to address communication issues and to build bidirectional networking.

### **eCAN-related Joint Actions**

eCAN is built on previous activities carried out on the field of eHealth and cancer prevention and care at a European level. All these projects have served of inspiration for the JA Among the past EU initiatives that have supported the deployment of eHealth in EU-MS, there is [eHAction](#), a Joint Action supporting the eHealth Network (eHN), which

ended in 2021. Furthermore, [Cancon](#) or [iPAAC](#) were JAs supporting cancer control policies and interventions. All these initiatives have served as inspiration for eCAN

These past initiatives altogether with some ongoing projects (such as EU4H-2021-JA-03: Direct grant to Member States' authorities: a network of Comprehensive Cancer Centres: Preparatory activities on creation of National Comprehensive Cancer Centres and EU Networking) that also work in cancer research, telemedicine and digital transformation are being identified to help eCAN develop and upkeep a stakeholder network.

## 3.2 Other sources of information

### EU Projects Platforms

There are diverse platforms that provide information on potential eCAN stakeholders and have been useful to achieve the aim of MS2.2.

- [The Health Programme database](#): this platform provides information on the nature and results of projects funded by European Union to improve public health, to prevent illness, and to eliminate threats to physical and mental health in European countries. It is managed by the European Commission's Consumers, Health, Agriculture and Food Executive Agency (Chafea).
- [CORDIS](#): it is the primary source of results from EU-funded projects since 1990
- [The EU Health Policy Platform](#): it is a collaborative online tool to facilitate communication among European Commission services, health-related interest groups and stakeholders. The platform is moderated by the European Commission Directorate for Health and Food Safety, which also provides input.
- [Europe's Beating Cancer Plan website](#): this is an official web of the EU where all ongoing EU4Health projects related to cancer are displayed. The projects, briefly described, are classified into four key action areas, according to the Europe's Beating Cancer Plan:
  - prevention
  - early detection
  - diagnosis and treatment
  - quality of life of cancer patients and survivors

To sum up, some sources of information have contributed to nurture specific target groups, while others have been useful to feed all the stakeholders' categories identified. The following figure displays the correlation between the sources of information with each stakeholders' group:

	 Policymakers	 Scientific and research communities	 Healthcare providers & Industry actors	 Civil society organizations, end-users & general public	 EU networks & collaborations	 Media outlets
Ecosystem building and stakeholders' analysis	✓	✓	✓	✓	✓	-
Mapping of existing eHealth for cancer care initiatives	✓	-	-	-	-	-
Communication activities and/or tools	✓	✓	✓	✓	✓	✓
Foresight and Roadmap development	✓	-	✓	✓	-	-
EU Project Platforms	-	-	-	-	✓	-
eCAN Consortium	✓	✓	✓	✓	✓	-

Figure 4. Correlation between each source of information and each group of stakeholders.

## 4. Main outputs

Resulting from the different tasks and mechanisms developed, eCAN has six main outputs regarding stakeholders. These have different dissemination levels and most of them are public and available at the eCAN website.

### 4.1 Public outputs

#### Stakeholders' network: country files

The list of eCAN stakeholders is the main output for the survey on stakeholders' mapping as for outreach and dissemination purposes and includes all the institutions identified as main stakeholders by each eCAN-participant organisation. The information has been compiled in country files that will be available at the website.

#### EU Initiatives section

Information about projects, especially Joint Actions and Horizon Europe, devoted to either cancer and/or eHealth is available at the website in the section [EU Initiatives](#). The projects listed in this section match the following criteria:

- Projects related to eCAN topics such as cancer and digital transformation healthcare policies.
- Projects in which the eCAN's entities have been or are currently involved, apart from this Joint Action.

#### Stakeholders' Engagement Toolkit and Report

The analysis of the survey is included in a report that describes in detail all the activities on stakeholder engagement. Such report, elaborated by WP8, constitutes eCAN's deliverable D8.1.

Additionally, WP8 has elaborated a stakeholders' engagement toolkit. It is a guide to provide essential insights into harnessing the possibilities of teleconsultation. The toolkit offers practical tips to optimize user experience, maximize patient engagement, and foster collaboration, networking, and knowledge sharing in the virtual healthcare sector.

#### Policy Mapping Dashboard

The dashboard includes the information about the existing eHealth initiatives for all EU-MS. It constitutes eCAN's deliverable 4.1.

## Roadmap Development and Scale-up Document

This document becomes eCAN's deliverable 4.2 and will be accessible at the website. The final suggested roadmap includes outcomes from the tasks undertaken by diverse WPs, particularly the EU initiatives identified by WP2.

### 4.2 Other outputs

#### eCAN Database

This is a confidential output, which contains sensitive data limited only to project participants and European Commission. It includes all the identified contacts, and it catalogues the data into four main groups:

- **eCAN partners:** contacts for all the eCAN consortium participants.
- **eCAN stakeholders:** data for all the institutions identified as main eCAN stakeholders. The list often includes the contact for the communication referent of the institutions.
- **EU initiatives:** data on the projects related to cancer and/or digital transformation in which the consortium partners are also involved into apart from eCAN. If known, it includes the contacts for the key actors for such initiatives.
- **Policy initiatives:** contacts for the experts who validate the country factsheets about digital health in cancer care. It includes at least two contacts for each eCAN country: one for digital health policy and another one for cancer care.

The database becomes essential for the eCAN communication team, who makes use of it exclusively for dissemination purposes. At this point, it is important to highlight the fact that, following the General Data Protection Regulation (GDPR), no one who did not provide consent was ever contacted and that this database is private and only accessible at eCAN SharePoint for all partners to feed it with updated data or additional relevant information, if necessary. Figure 5 summarises the outputs resulting out of the stakeholders' analysis for dissemination purposes performed by WP2.

**IMPORTANT:** The outputs regarding stakeholders are in continuous development throughout the project and, therefore, this is a 'living document' and will be updated with new information regularly. Latest update: Sept. 2023



*Figure 5. Main outputs out of eCAN stakeholders' analysis*

## 5. Conclusions

### 5.1 Summary

This document contains the main activities developed by eCAN in terms of stakeholders' identification and outreach aligned with JA's main goal of supporting cross-border health data, knowledge sharing and uptake of results to reduce cancer care inequalities across the EU. The following figure summarises the stakeholders' analysis performed:

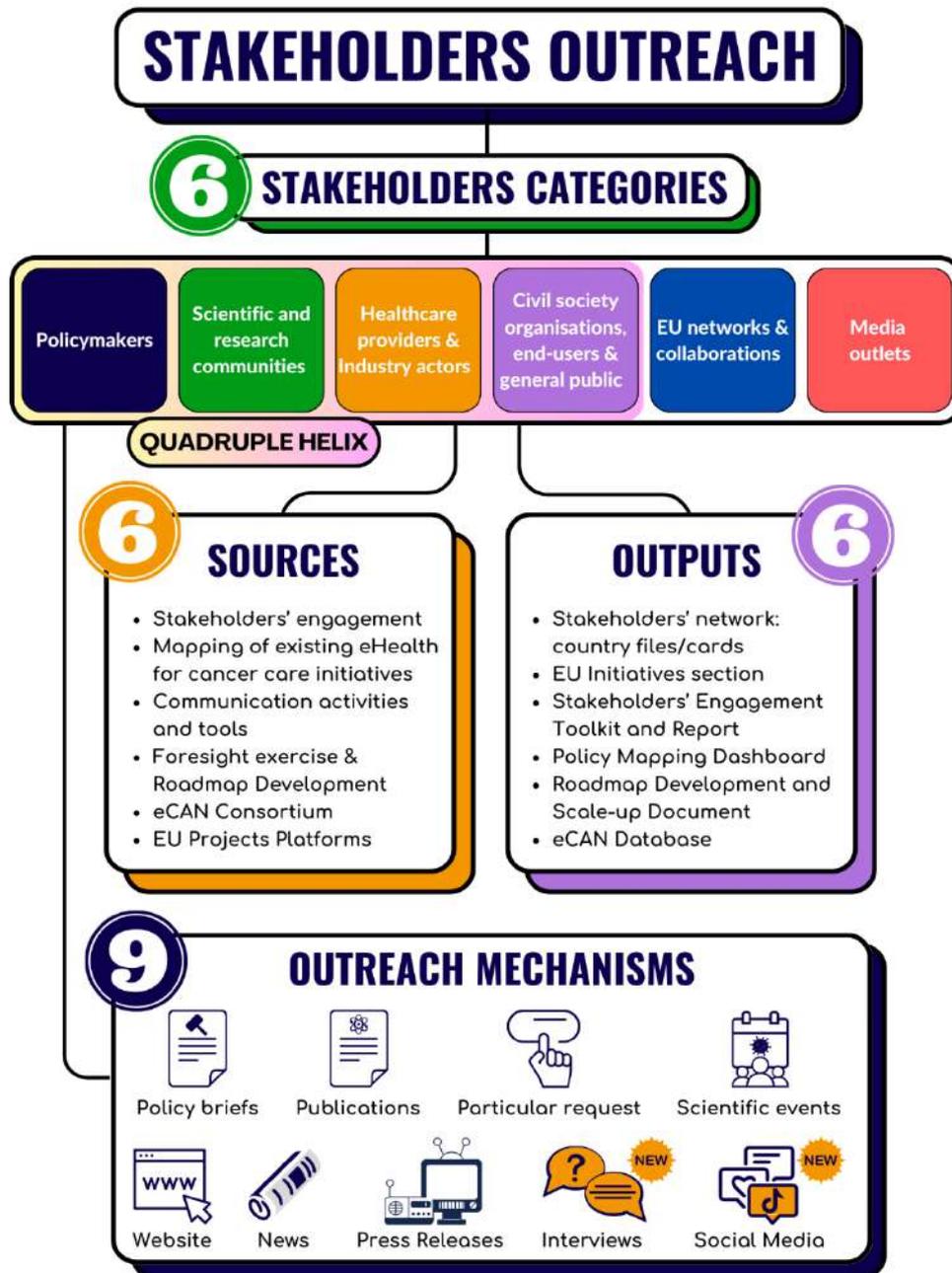


Figure 6. Summary of eCAN stakeholders' outreach approach

## 5.2 Significance of Results

The involvement of eCAN with other EU initiatives is not limited to the creation of this network. JA's participants work in similar ecosystems, providing expert support and assessment to one another and mutually enriching and strengthening the stakeholders' network.

Promoting the project and its results by providing targeted information to multiple audiences is necessary for eCAN JA. All messages are created with the goal to reach the specific target audiences by tailoring content and format to their health literacy level. To obtain greater impact, it is essential to set up a network of stakeholders, but also to develop a coherent and coordinated manner to connect and engage with such audiences.

## 6. Annexes

### 6.1 Stakeholder mapping survey

#### eCan - Stakeholder Mapping (WP2-WP8 Survey)

Fields marked with \* are mandatory. x

##### Disclaimer

The European Commission is not responsible for the content of questionnaires created using the EUSurvey service - it remains the sole responsibility of the form creator and manager. The use of EUSurvey service does not imply a recommendation or endorsement, by the European Commission, of the views expressed within them. x



#### General Information

\* Beneficiary /Affiliate partner name (i.e. Scienzano)

\* Contact Person (local Community Manager) - (each beneficiary or affiliate partner should assign one person responsible for the stakeholders' community)

\* Contact Person's e-mail address

#### Self-Positioning

In the following section, we have identified the main stakeholder group categories (on the principles of the Quadruple Helix approach) and we kindly ask you a) to assess the degree of collaboration/working with representatives of each stakeholder group, b) to indicate the level(s) of activities/collaboration you mostly implement with each group (a general overview), and c) indicative examples of stakeholders from your local ecosystem, specifying their position and field of work (i.e. For policymakers: Municipalities, Health Districts / For Academia: Universities, For citizens/civil society: Patients' Associations, e.g. Breast Cancer Association) etc.

**A. Considering the current situation regarding your collaboration with various actors in your local ecosystem, situate your organisation within the following five-point scales:**

\* 1. Policymakers (i.e. Health Districts, Ministries, Municipalities etc.)

- 1- The organization never involves policymaking actors in its activities
- 2- The organisation rarely involves policymaking actors in its activities
- 3- The organisation occasionally involves policymaking actors in its activities
- 4- The organisation often/usually involves policymaking actors in its activities
- 5- The organisation always involves policymaking actors in its activities

\* 2. Scientific and research communities (i.e. universities, research centres, research groups etc.)

- 1- The organization never involves scientific and research communities in its activities
- 2- The organisation rarely involves scientific and research communities in its activities
- 3- The organisation occasionally involves scientific and research communities in its activities
- 4- The organisation often/usually involves scientific and research communities in its activities
- 5- The organisation always involves scientific and research communities in its activities

\* **3. Healthcare Providers and industry actors (i.e. hospitals (public/private), rehabilitation centres, health service providers, teleconsultation/telemonitoring providers, companies etc.)**

- 1- The organization never involves healthcare providers and industry actors in its activities
- 2- The organisation rarely involves healthcare providers and industry actors in its activities
- 3- The organisation occasionally involves healthcare providers and industry actors in its activities
- 4- The organisation often/usually involves healthcare providers and industry actors in its activities
- 5- The organisation always involves healthcare providers and industry actors in its activities

\* **4. Civil society organizations, end-users & the general public (i.e. NGOs, patient associations, healthcare professional associations, family members, formal/informal caregivers etc.)**

- 1- The organization never involves civil society organizations, end-users & the general public in its activities
- 2- The organisation rarely involves civil society organizations, end-users & the general public in its activities
- 3- The organisation occasionally involves civil society organizations, end-users & the general public in its activities
- 4- The organisation often/usually involves civil society organizations, end-users & the general public in its activities
- 5- The organisation always involves civil society organizations, end-users & the general public in its activities

\* **5. EU networks & external collaborations in the field of cancer and/or in telemonitoring/teleconsultation (i.e. European/international initiatives, the EU4Health programme, HaDEA, DG SANTE, WHO, EIPonAHA, ESMO, SIOG, collaborations with other EU consortia etc.)**

- 1- The organization never involves EU networks & collaborations in its activities
- 2- The organisation rarely involves EU networks & collaborations in its activities
- 3- The organisation occasionally involves EU networks & collaborations in its activities
- 4- The organisation often/usually involves EU networks & collaborations in its activities
- 5- The organisation always involves EU networks & collaborations in its activities

**B. In which of the following type(s) of activities are your stakeholders most often involved:**

\* **1. Policymakers**

- agenda-setting
- solution co-design
- piloting & testing
- implementation
- evaluation
- policymaking
- dissemination
- other

If you selected "other", please specify:

\* **2. Scientific & research communities**

- agenda-setting
- solution co-design
- piloting & testing
- implementation
- evaluation
- policymaking
- dissemination
- other

If you selected "other", please specify:

\* **3. Healthcare Providers & industry actors**

- agenda-setting
- solution co-design
- piloting & testing
- implementation
- evaluation
- policymaking
- dissemination
- other

If you selected "other", please specify:

\* **4. Civil society organizations, end-users & the general public**

- agenda-setting
- solution co-design
- piloting & testing
- implementation
- evaluation
- policymaking
- dissemination
- other

If you selected "other", please specify:

\* 6. EU networks & external collaborations

- agenda-setting
- solution co-design
- piloting & testing
- implementation
- evaluation
- policymaking
- dissemination
- other

If you selected "other", please specify:

### Stakeholder Mapping

Please, provide examples of your collaboration networks, specifying their position and field of work (policymakers, experts, industrial partners, research partners, civic society etc). Please, provide up to 10 examples for each category (namely: i.e. Greek Ministry of Health, Hippokrateion General Hospital, Greek Women's Breast Cancer Association "Alma Zois" etc).

\* 1. Policymakers

\* 2. Scientific & research communities

\* 3. Healthcare Providers & industry actors

\* 4. Civil society organizations, end-users & the general public

\* 5. EU networks & external collaborations

Please, list any existing collaborations with organizations & entities with the non-participating countries of the eCan consortium (i.e Germany). Provide, as many as possible:

### Stakeholder Engagement

Does your organization engage relevant stakeholders in a structured manner (please, give some indicative examples)?

(e.g. public events, occasional/ "world café" meet-ups, focus groups, public awareness campaigns, in-person invitations, exhibitions, conferences, social media invitations, panel management tools etc.)

\* What are the biggest challenges/barriers your organization phases in terms of stakeholder engagement? (list the top 3)

Dissemination across the community

Does your organisation disseminate its projects' results, activities and contributions across the community using different media/communication channels?  
\*i.e. specialised / academic publications

Academic media: e.g. papers, conference proceedings, books' chapters, specialised reports popularised publications shared across mainstream  
traditional media: e.g. television, radio, and articles in print media, press releases, leaflets, newsletters; communications shared across new media: e.g. blog posts, websites, social media, MOOC.

Yes  
 No

If YES:  
Describe the content, as well as the media/communication channels, your organisation uses to disseminate knowledge/results to each of the following stakeholder groups:

1. Policymakers  
\_\_\_\_\_

2. Scientific & research communities  
\_\_\_\_\_

3. Healthcare Providers & industry actors  
\_\_\_\_\_

4. Civil society organizations, end-users & the general public  
\_\_\_\_\_

## 6.2 Policy Mapping – Country Factsheet Indicators

### 1 GOVERNANCE

Question	Categories	Indicator
Is there a Ministry or State Secretariat explicitly in charge of eHealth/dHealth? If so, which Ministry ?	<ul style="list-style-type: none"> <li>Dedicated eHealth/dHealth Ministry</li> <li>Ministry of Health responsible for eHealth/dHealth</li> <li>Other Ministry responsible for eHealth/dHealth</li> <li>No Ministry appointed for the topic</li> <li>No information available</li> </ul>	Ministry responsible for eHealth/dHealth
Does the Ministry who is in charge of health care also have a specific Department or Unit in charge of eHealth/dHealth		
Is there a national eHealth governance board?	<ul style="list-style-type: none"> <li>National eHealth governance board in place</li> <li>No national eHealth governance board in place</li> <li>No information available</li> </ul>	National eHealth governance board
Is there a public eHealth agency such as Elga GmbH in Austria or ANS in France? At which level (national, regional)? Which functions does this agency cover?	<ul style="list-style-type: none"> <li>National eHealth agency in place</li> <li>Regional eHealth agency/agencies in place</li> <li>No eHealth agency/agencies in place</li> <li>No information available</li> </ul>	Public eHealth agency
Are dHealth / eHealth tools in the outpatient sector publicly paid or covered in your benefits package (e.g. by sickness fund or national health service). If yes please describe how.	<ul style="list-style-type: none"> <li>eHealth/dHealth tools covered in benefits package</li> <li>eHealth/dHealth tools publicly financed other than via benefits packages</li> <li>eHealth/dHealth tools not covered publicly</li> <li>No information available</li> </ul>	Financing of outpatient sector eHealth/dHealth tools

<p>Are dHealth / eHealth tools in the inpatient sector automatically covered in your benefits package or do you need to pay extra (e.g. for telehealth consultations or telereha) compared to standard treatments?</p>	<ul style="list-style-type: none"> <li>• eHealth/dHealth tools covered in benefits package</li> <li>• eHealth/dHealth tools publicly financed other than via benefits packages</li> <li>• eHealth/dHealth tools not covered publicly</li> <li>• No information available</li> </ul>	<p>Financing of inpatient sector eHealth/dHealth tools</p>
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## 2 STRATEGIES/POLICIES

Question	Categories	Indicator
<p>Is there a national eHealth strategy?</p> <p>If yes, which stakeholder groups have been included in drafting the national eHealth strategy?</p> <p>If not, are there discussions ongoing to develop a national eHealth strategy?</p>	<ul style="list-style-type: none"> <li>• National eHealth strategy developed with stakeholders</li> <li>• National eHealth strategy developed by authorities</li> <li>• Development of national eHealth strategy in discussion</li> <li>• No national eHealth strategy in place</li> <li>• No information available</li> </ul>	<p>National eHealth strategy</p>
<p>Are there regional eHealth strategies? If so, can you indicate whether in all regions or only some? Can you provide some (exemplary) documents ?</p> <p>If yes, which stakeholder groups have been included in drafting such regional strategy/ies?</p>	<ul style="list-style-type: none"> <li>• Regional eHealth strategies developed for all regions</li> <li>• Regional eHealth strategies developed for some regions</li> <li>• No regional eHealth strategies in place</li> <li>• No information available</li> </ul>	<p>Regional eHealth strategies</p>
<p>Are there strategy/ies explicitly referring to / including eHealth cancer care?</p>	<ul style="list-style-type: none"> <li>• National strategy referring to eHealth cancer care</li> <li>• Regional strategy/strategies referring to eHealth cancer care</li> <li>• No strategy in place explicitly referring to eHealth cancer care</li> <li>• No information available</li> <li>• Not applicable (if no strategy in place)</li> </ul>	<p>eHealth strategies referring to eHealth cancer care</p>
<p>Is there a National Cancer Plan? And does it refer to eHealth?</p>	<ul style="list-style-type: none"> <li>• National Cancer Plan in place, reference to eHealth</li> <li>• National Cancer Plan in place, no reference to eHealth</li> <li>• No National Cancer Plan in place</li> <li>• No information available</li> </ul>	<p>National Cancer Plan</p>
<p>In the light of the EU „Beating Cancer Plan” – are there any recent plans to update or modify existing plans? If yes, what is the timeline?</p>	<ul style="list-style-type: none"> <li>• National Cancer Plan update planned</li> <li>• No update planned</li> <li>• No information available</li> </ul>	<p>Updating National Cancer Plans</p>
<p>Are there any indicators in eHealth policy or national programmes on cancer care measuring the progress of the use of eHealth in cancer care?</p>	<ul style="list-style-type: none"> <li>• Elaborate Progress Monitoring in place</li> <li>• Some Progress Indicators in place</li> <li>• No Progress Monitoring in place</li> <li>• No information available</li> </ul>	<p>Progress Monitoring eHealth implementation in cancer care</p>

Are there any other cancer care specific eHealth initiatives, f.e. by other stakeholders than policy makers / public authorities?	<ul style="list-style-type: none"> <li>Stakeholder driven eHealth cancer initiatives identified</li> <li>No Stakeholder driven eHealth cancer initiatives identified</li> </ul>	Stakeholder driven eHealth cancer initiatives
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### 3 LEGISLATION

Question	Categories	Indicator
Is there legislation on how to use telemedicine in general?	<ul style="list-style-type: none"> <li>Yes</li> <li>No</li> <li>Planned</li> <li>No information available</li> </ul>	Legislation on use of telemedicine in place
Is there legislation explicitly referring to cancer prevention?	<ul style="list-style-type: none"> <li>Yes</li> <li>No</li> <li>Planned (discussions ongoing)</li> <li>Planned (close to implementation)</li> <li>No information available</li> </ul>	Legislation explicitly referring to cancer prevention in place
Is there legislation explicitly referring to / including eHealth cancer care?	<ul style="list-style-type: none"> <li>Yes</li> <li>No</li> <li>Planned (discussions ongoing)</li> <li>Planned (close to implementation)</li> <li>No information available</li> </ul>	Legislation explicitly referring to / including eHealth cancer care

### 4 CANCER SPECIFIC EHEALTH SOLUTIONS

Can you provide an overview on the different types of cancer specific eHealth solutions used in your country within the following table?

Area of application/ type of solutions	Login Websites	Apps	Webinars	Multi-disciplinary teleconferences (HCP-HPC)	Teleconsultation (HCP-patient)	Telemonitoring via devices	Other, please specify
<b>Ecosystem</b>	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries
<b>Prevention of Cancer</b>	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries
<b>Treatment of Cancer</b>	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries
<b>'Living with cancer'</b>	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries
<b>Rehabilitation from Cancer</b>	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries
<b>Palliative Cancer Care</b>	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries	X/Y countries

# eCAN

Strengthening  
eHealth for Cancer  
Prevention & Care



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