



Evidence-based Guidelines on Health
Promotion for Older People:

Social determinants, Inequality and
Sustainability

First interim technical implementation report

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1. Introduction

The project "healthPRO-elderly" has as its overall aim to promote health promotion for elderly through producing evidence based Guidelines with recommendations for potential actors in this field (on EU, national and local level). Health promotion projects for older people which show evidence of sustainability are being identified. Furthermore there is a focus on different target groups of elderly and their specific needs, taking into consideration the vulnerability and the inequalities that the target groups are faced with.

Within the EU Member States, various projects that aim to promote health for the elderly already exist. Most of these projects are of local and national character and do not take the EU wide context into account. This project is gathering information from the partner countries and identifying good practices in the field of health promotion for elderly. There is a focus on those models that have a sustainable approach and which regard socio-economic, environmental and life-style related determinants. Strategically the project focuses on (I) models that have shown to be successful in the implementation, (II) model projects that are to be integrated in the long-term programming and (III) models that target vulnerable groups (taking into consideration socio-economic, environmental and lifestyle related determinants) and address.

The strategic objectives are:

- To focus on (I) models that have shown to be successful in the implementation, (II) model projects that are to be integrated in the long-term programming and (III) models that target vulnerable groups (taking into consideration socio-economic, environmental and lifestyle related determinants) and address inequality.
- To use an interdisciplinary approach between Public Health institutes, several universities and their faculties and institutes, NGO's, geriatric institutes and to establish a network between representatives of science and practice in order to ensure future developments of sustainable projects for the elderly.

The specific objectives of the "healthPRO-elderly" project will together contribute to achieve the overall aim of this project, which is to identify criteria and develop guidelines with recommendations for the sustainable implementation of health promotion projects for elderly people that are applicable in the EU countries. Specific objectives of significant importance for achieving the aim of the project are the creation of a Europe-wide network, enhancement of partnerships and the information awareness rising amongst the relevant stakeholders.

The specific objectives of the projects are:

- To summarise the findings of the literature review concerning the determinants of health for elderly people.
- To develop a common vocabulary and a glossary in order to create a terminology and understanding for health promotion projects.
- To develop a set of criteria for the selection of successful models of best practices. These criteria should take into consideration sustainability and social determinants, which have a serious impact on the health situation of elderly people.
- To identify models for health promotion and translate them into a standard scheme, easy understandable to everyone. These models will be available on a website, which will be accessible to the general public.
- To develop a strategic approach to communicate and disseminate the findings of the project and the identified models of best practice for health promotion.
- To inform and raise the awareness amongst experts and authorities throughout the EU about the issue of ageing and the impact of the demographic change on our society.
- To build a network with sustainable partnerships, consisting of Public Health institutes, several universities and their faculties and institutes, NGO's, geriatric institutes and the WHO, at EU and Member State level.
- To develop guidelines with recommendations based on the identified criteria. These guidelines will build around a matrix, which should be used by: health authorities, such as the EU, national and regional governments, institutions and organisations which provide health promotion programmes and projects, social and health professionals, and universities and research departments.

This first interim technical implementation report will report on the project work from April 2006 to March 2007. First there will be an account of the work achieved according to the objectives of the respective work packages. The structure that will be followed is that of the proposed work plan outlined in the Annex I of the Grant Agreement of the project. This will be followed by an overview of the future work plan. Finally, the conclusions of the report will include an explanation of the financial statement, reflection of the strengths and weaknesses of the project work until this stage and a short summary.

2 Report of the work in the first project year

2.1. Work package n°1: Coordination of the project

Objectives:

- The project management has been set up using the following tools:
 - project email-address (healthPRO@redcross.at)
 - project address list
 - project meetings
 - minutes of project meetings¹
 - detailed time planning sheets
 - checklists for partners' deliverables
 - excel-overview of financial information for the ARC's financial department
 - template for cost statements
- Information is regularly disseminated by emails, in project meetings, by telephone and in bi-lateral meetings (when deemed necessary)
- The website has been established (www.healthproelderly.com)
- Administrative support is provided to partners organizing meetings. As templates they receive registration forms and the participant list. The agenda is always provided by the European coordinator together with the organizing partner.
- Guidelines on tasks for each project phase and time planning are provided (see below)

Milestones

<i>Date</i>	<i>Milestone</i>
Month 2	1st Partner meeting - kick-off – (April 2006)
Month 12+2	1. Interim technical implementation report and financial statement

¹ Minutes of the meeting and other internal documents can be accessed through the website: www.healthproelderly.com; Username: hpep1, Password: test.

Description of work done

The International Coordinator of the project, Charlotte Strümpel took up her work with the Austrian Red Cross on the starting day of the project (April 1, 2006). The first task was to prepare the kick-off meeting which took place at the end of April in Vienna. The aims of the meeting were to:

- gain a joint understanding of the healthPROelderly project
- get to know each other
- create a good basis for working together throughout the project
- agree on what is to be done in the near future and throughout the project
- To address organisational, financial and administrative questions

After a quite elaborate introduction round, the project was introduced using a power point presentation, which was also made available to the partners for their own presentations of the project (see Annex 7). The whole project and the main deliverables were presented and detailed discussions were conducted and agreements made on the literature research.

The coordinator is continually assuring the flow of communication between the project partners. After the first project meeting a project email address was established (healthPRO@redcross.at) that includes the email addresses of all partners and is updated regularly. All project partners are encouraged to use this email address and to send worthwhile contributions and queries to all. Also, the coordinator is in regular email and telephone contact with all partners. The coordinator continuously provides all partners with relevant information on issues concerning the content of the project, as well as administrative and financial issues. Also, the coordinator is in close contact with the subcontractors who have established the project website (www.healthproelderly.com) and makes sure it is up-to-date.

From the point of view of the project partners (see Annex 6 Evaluation of project) following aspects are in place with respect to the European coordination:

- Providing targeted information and bringing about mutually shared agreements
- Facilitating constant and effective communication (regular e-mails)
- Creating a warm atmosphere and making mutual relations as colleagues possible
- Guiding clearly and promptly, even when the parameters change
- Listening and including the views of other project members
- Sending around examples and sharing drafts of completed work
- Catering for transparency

National Boards were set up in each country. In the first partner meeting it was agreed to try to include a wide variety of experts from different types of organisations. The aims of the National Boards are to ensure that the information on literature and models is comprehensive and to help with the dissemination of the project and networking in each country. Also, the national board members are asked to comment on the respective National Reports. The types of experts included vary from country to country. Partners have felt that presenting the project to their National Boards and the National Boards' feed-back have been very useful.

Challenges encountered and steps (to be) taken

For the coordinator, supporting the work package leaders in managing the work packages turned out to be more work than expected. This is due to the large number of partners, time constraints of work package leaders and language problems. Some confusion was reported by partners concerning decision making. For instance, it was not always clear to the partners whether the work package leader or the coordinator was to take decisions. The goal is for the project coordinator to take decisions together with the work package leader. However, this was not always possible due to time constraints and language problems.

In the course of the first phase it was agreed to create an "advisory group" to help the coordinator take decisions that have to be made quickly and that concern important pillars of the project. The advisory group consists of Monika Wild, Austrian Red Cross, Gert Lang, Viennese Red Cross – two project members who were instrumental in writing the project proposal and Jenny Billings, a strong project partner who does not lead a work package but has supported the coordination with additional tasks throughout the project until now. This advisory group met once between the second and third project meetings and can be contacted on short notice by the coordinator if any important decisions have to be taken. A next meeting is planned to take place during the fourth project meeting in Rom in June.

Another challenge that was encountered was the amount of time and energy that was spent for financial and administrative issues. Apart from taking time at project meetings, these issues were a main focus of bilateral communication between the project coordinator and partners.

There are differences between partners in the ability to meet deadlines that have been set for deliverables of all types. In this connection there has been some frustration with those who have put in a big effort in order to meet deadlines, that some colleagues have not done so. The coordinator will focus on making deadlines

even clearer in the course of the project and will keep on reminding partners of deadlines (before and after).

Concerning using English, most partners English is generally good. However, still misunderstandings took place and clarifications were necessary. Also, this makes in-depth discussions on theoretical and conceptual issues difficult at times. While many partners have their reports translated and the written English is generally good, there is still a necessity for English editing. The UK partner have taken over this task until now, however there has been no budget allocated to English editing and this issue still needs to be solved.

In two countries where there were two project partners, some communication and coordination problems have evolved. The coordinator has tried to help solve these by talking to both parties at project meetings and between and in encouraging them to coordinate their activities. This has partly worked.

Deliverables:

- Three project meetings have been carried out in Vienna, Prague and Maribor
- Two project meetings already have fixed dates: Rom, June, 14. and 15. 2007 and Berlin, 31. January and 1. February, Berlin.
- Guidelines have been established for each project phase and time planning sheets
- Partners have been encouraged to establish National Boards – each country has national boards
- Continuous liaising with evaluator. A first evaluation report has been produced by the evaluator after phase 1 as well three short reports after each project meeting.

2.2. Work package n°2: Dissemination of the result s

Objectives

- The aim of this WP is to inform and to promote the project and its content, findings and outcomes to all relevant stakeholders and decision makers.
- The project leaflet was printed in German, English and Polish and is also available in Greek and Italian.
- The website was launched.
- Partners have already presented the project on many occasions and some are in the process of writing articles on the project. A publication on the basis of the reports of the first phase is being planned.

Description of work

The European dissemination is mainly the responsibility of the European Coordinator. All partners are actively involved in the national dissemination and most partners have already also contributed to international dissemination. Partners are responsible for the dissemination of the project in their respective country.

The setting up of the website was sub-contracted and has already been achieved. During the first project meeting partners were asked to contribute their ideas to the website with respect to contents, structure and functions. After the subcontractors made a suggestion for the website, it was presented at the second partner meeting and partners could give their contributions with respect to improvements. The website will contain all relevant information of the project, such as national reports, and it will inform about phases/work packages etc. The finished national reports (see below) will be available for download on the website shortly. The database for work package 5 is currently being prepared by the subcontractors. As suggested by some of the partners, there is an internal area which is accessible only to project partners that includes all relevant internal documentation (grant agreement, presentation of project, minutes of meetings, presentations given during meetings, evaluation reports, etc.)².

The project leaflet was prepared and printed in English. In this case also drafts were sent around to be okayed by all partners. A pdf-format was made available to partners to use the leaflet design to translate it into their own language. The leaflet was translated into German, Polish, Italian and Greek and printed in German and Polish.

The national boards that were established in each country (see above) also proved to be a good basis for dissemination on a national level. All partners presented the project to their National Boards and distributed leaflets to them for further distribution. Apart from that, partners have been quite active in disseminating information about the project nationally and internationally.

Examples for this are on a European level (for a more detailed account see Annex 9):

² Minutes of the meeting and other internal documents can be accessed through the website: www.healthproelderly.com; Username: hpep1, Password: test.

- The European Coordinator has linked up with the “Healthy Ageing” project, has attended a meeting in Helsinki in October, 2006 and represented the healthPROelderly-project there. The Italian partner attended the Rom meeting of “Healthy Ageing” project and kept up the contact between the projects.
- The European Federation of Nurses Associations presented the project within the Council of Europe Health Grouping on 31.1.2007
- The Polish and Slovakian partners will represent and disseminate the project at the EUPHA-conference in October 2007 in Helsinki.
- The European Coordinator will present the project in October 2007 in Budapest at the Conference “The ageing population in the European Union – A challenge for the Red Cross and its partners”.
- The Slovenian team presented healthPROelderly in Budapest, 9/12/2006 at an international conference for teaching staff of University nursing schools (30 participants) and included information about the project into a further training program for nurse teachers in Styria (Austria).
- The project will also be presented at the European Interprofessional Education Network in Health and Social Care (learning together to work together) , which will be organized at the Jagiellonian University, Cracow 12-14 September 2007.

Examples for dissemination activities on the national level are:

- The Austrian team presented healthPROelderly at the GEFAS-Congress in Graz; 12/10/2006 and at the Austrian and German Geriatric Congress in Vienna, 11-13 May and published two articles in the Austrian Red Cross Journal. (see Annex 9)
- The Czech team presented the project at a University research conference (14/11/2006), 3rd Faculty of Medicine, Prague and during a course on “Promotion of Healthy Ageing - Age Mainstreaming and Community” at the Institute of Postgraduate Medical Education, Prague, 7-8/11/2006.
- The Slovak team presented the project (poster) at the Second national SAVEZ conference in Kosice,, 21/9/2006 (80 persons); information was also disseminated via the SAVEZ website (<http://www.savez.sk/>).
- The Italian team presented the project at the University of Rome “La Sapienza” during a study day on elderly (nursing and medical students).
- In Greece the project was presented in the Conference on Community Nursing 9-10 March, 2007 and in the Panhellenic Congress of the National Nurses Association on 7/5/2007.

Challenges encountered

Dissemination activities have been going very well for the beginning phase of a project where mostly the project structure and plan can be presented. Partners are being active in presenting the project and presenting the results of the literature review. The launch of the website went well.

No major challenges have been encountered with respect to dissemination. However, some partners have been more active with the dissemination of the project than others. This is mainly due to the fact, that in countries with much information on the area of health promotion for older people (e.g Netherlands, Germany, UK), the presentation of a project in an early phase of project does not make as much sense as in countries with less material on the subject. Partners in these countries are just starting their dissemination activities now using the results of the first phase of the project.

Milestones

<i>Date</i>	<i>Milestone</i>
Month 3	Launch of website – October 2006
Month 14	Launch of online database – is being prepared

Deliverables

The deliverables for this WP are:

- Website has been set-up (www.healthproelderly.com). Is being updated regularly
- Information leaflets are available in English, German, Greek, Italian and Polish
- Articles in national health related magazines and journals in the respective partner language (are in preparation with respect to results of Phase 1))
- Power point presentations and abstracts of lectures and workshops at conferences and fairs (see above and Annex for details)
- Further presentations in a wide variety of conferences and meetings planned

2.3. Work package n°3: Evaluation of the project

Objectives

The aim of this work package is to monitor and evaluate the results obtained by the project's single work packages, i.e. whether both the process and the objectives defined in the proposal have been implemented and realized. This means to address both the project partners and the other stakeholders of the project with a mix of evaluation methods.

Description of work

The evaluator took part in the kick-off meeting and introduced the evaluation using a power point presentation (see Annex 7). After all three project meetings partners were asked to fill in the evaluation form and a summary was provided by the evaluator within a month after each meeting. A comparison of all three meeting evaluations is found in the first report for monitoring work in progress and work packages. Rather than having a six-monthly evaluation report as originally planned, it was agreed that it would make more sense to have a report at the end of each project phase. The first report for monitoring work in progress and work packages was provided in February. The second one is being planned for the end of June, together with the yearly report of the output of work packages. Interviews and a group discussion will be conducted by the evaluator with partners in the fourth project meeting in Rom on June 14/15. 2007.

Challenges encountered

Concerning the evaluation no major challenges were encountered.

Main results of evaluation report

Summarizing the evaluation, the view of the project partners and of the evaluator is that the project is going well, the work process and main deliverables are roughly on time and there are many benefits connected to the project. There are some issues about meeting deadlines, having in depth discussions on certain themes and on decision-making which leaves room for improvements (see evaluation report in Annex 6). The results of the SWOT-analysis from the evaluation report are reported below in Chapter 4 of this report.

Milestones

<i>Date</i>	<i>Milestone</i>
February 2007	First report of work in progress

Deliverables

- First report of work in progress in relation to the development of the network, partnership (based on questionnaires, SWOT analysis)
- Questionnaire for project meetings and summaries of evaluation of three project meetings
- Planned: Second report of work in progress in relation to the development of the network, partnership and yearly report of output of work packages as against planned activities and results (based on one group session in Rom meeting, individual interviews, questionnaires, SWOT analysis)
- Evaluators participation in the first project meeting is completed and in the fourth project meeting is planned

2.4 Work package n° 4 (Phase 1): Literature review – “set of criteria”

Objectives

While originally the main focus of the literature analysis was to analyse health determinants, throughout the first partner meeting it became clear that the focus of the literature analysis needs to be expanded to be able to provide the basis for the further work in the next phases of the project.

The objectives of this phase as agreed on in the first project meeting were to:

- give an overview on the state of the art of health promotion for older people in the different countries
- give an overview of policy issues and research on health determinants with a focus on older people
- develop a common vocabulary and glossary in order to create a common terminology and understanding.
- develop a set of criteria for the selection and collection of models of best practice for work package 5 (Phase 2).

Description of work

The tasks carried out in this phase turned out to be more elaborate than originally planned. In the first meeting, it was planned to collect literature and to record the main results in a database and then to summarise the main trends. However, in the course of the work on the literature, it became evident, that it was also important to describe some of the results of the literature in more detail. This was necessary for two reasons: 1) to gain an overview of the issues that have been discussed with respect to health promotion of older people in each country and 2) to gather evidence on the criteria needed to choose the models of good practice in the second phase of the project.

While the main planned deliverables of the project in the project proposal were a summary of the main trends of the literature overview, a glossary and criteria for choosing best practice models, in the course of the project's work, some more deliverables were agreed on:

- An excel database with quantitative details on searched literature in each country
- An aggregated database of all countries
- National reports, summarising the main findings of literature in each country
- A European report summarising the main findings of the above mentioned deliverables, including a chapter on the analysis of the aggregated data
- Glossary
- Criteria for choosing the models of good practice in Phase 2

On the basis of group work done in the first project meeting, the work package leader, together with the European coordinator and the two Austrian partners compiled guidelines on how to go about the **literature search**. These were changed and augmented after the second project meeting, including outlines for national reports and the European report (see final guidelines in Annex 5). The literature review was carried out as outlined by the participating partners in their respective country and the reports and documents in the respective language of the country were used.

The review focussed mainly on scientific literature, but it was agreed that professional journals, grey literature as well as other types of literature would also be useful – especially in countries where there is little information on the health promotion of older people as yet. Countries where there is already a wealth of literature such as Germany and the Netherlands focussed only on scientific literature.

The literature overview consisted of reviewing literature on health promotion for older people in each partner country. Literature on health determinants and policy issues was also included. Some information on each piece of literature was recorded by

each partner in an excel database that was developed by the Research Institute of the Austrian Red Cross. Information included: authors, title, a short abstract, the discipline, the main themes addressed as well as some transversal issues that were defined as relevant for the project (see Excel Table on enclosed CD). Each partner consulted databases, libraries and their national boards for relevant literature. They then entered the required information in the excel database.

Finally, they reviewed the literature in detail and summarised the main findings in the national reports. Partners were asked to make notes on the main findings of the literature they found (a format for taking notes on each article was provided to the partners by the coordinator, but its use was not obligatory).

The structure and contents of the **national reports** were agreed on in the second project meeting and finalised in the third project meeting. A template with a detailed structure was provided to the partners. The detailed structure was seen to be especially important in order to facilitate a comparative analysis while preparing the European report. The agreed contents of the national reports included an overview of policy issues, an overview of results on health determinants in each country as well as descriptions of findings according to themes of areas of health promotion for older people and transversal issues. These themes and transversal issues were agreed on in the second project meeting, based on which literature and themes had already been found, and included:

Themes

Promoting mental health

- Addressing depression
- Addressing stress and burn-out
- Cognitive issues: memory training
- Self-respect / dignity
- Emotional support

Empowerment

Social participation – inclusion

- Life long learning / education of older people
- Social support / networks
- Self-help groups
- Volunteering

Lifestyle

- Nutrition
- Physical activity
- Sexual activity

- Smoking
- Alcohol
- Drugs
- Safety – e.g. prevention of falls, accidents and injuries
- Preventing abuse/violence against older people
- Prevention of disease

Transversal issues

- Research Methods
- Strategies of health promotion
- Settings
- Inequality/ Diversity
- Gender Issues
- Sustainability
- Cost-effectiveness
- Consumer involvement

The national reports are the basis for the European report that is now being written. Different chapters are being prepared by different partners.

The **glossary** (see Annex 3) was developed in the following way: In the first project meeting terms were collected, that were deemed relevant to the healthPROelderly project by the partners. Individual partners volunteered to collect definitions for individual terms. A format was compiled for partners to fill out for each term. Existing health promotion glossaries (public health, health ageing project etc.) were used as well as other, individual sources to fill in these terms. These terms were first reviewed by the designated glossary group (4 partners) and then reviewed by all partners and discussed in detail during the third project meeting. The Slovak Partner has been coordinating the collection of the glossary. The glossary is work in progress – and will be still augmented -, but it has already helped partners in different phases of the project, such as during the literature search and also in looking for models of good practice.

The **criteria** (see Annex 4) for choosing models of good practice are the link between the first phase (WP4) and the second phase of the project (WP5). Partners were asked to make notes on possible criteria while reviewing the literature. In the third project meeting three small groups of partners elicited criteria on the basis of the evidence identified during the literature review in their countries. The results of these three groups were then brought together in plenary during the project meeting and

then refined by the work package leader (University of Maribor) and the European coordinator and then circulated to the partners for feed-back. They are now the basis for choosing the models for the database and also form an integral part of the database itself.

Challenges encountered and steps (to be) taken

One of the main challenges encountered during this first phase of the project, was that it proved to be more work, than originally planned (more deliverables, see above). Also, the changes made during the first phase, from a more quantitative approach of collecting information on literature in a database to including more elaborate qualitative description and analysis, led to the fact that more time was needed to completed the tasks than originally planned.

Producing the national reports and the literature database in English was quite a challenge for some partners and many partners had to hire additional help to edit or translate their national reports into English.

Also, the work package leader had less time resources than originally planned. This challenge was solved in a very positive way by distributing tasks to different partners. The European coordinator together with the partner from the UK took over some parts of the European report. The glossary group is being led by the Slovakian partner. A group for the statistical analysis of the literature database is being led by the Work package leader and includes Polish (University of Cracow), Slovenian (University of Maribor) and Austrian (Viennese Red Cross) Polish and Slovenian. The work package leader of Phase 2 (WP5) – the University of Maribor – has been responsible for compiling the criteria for the models for the database. Involving several partners in pivotal tasks has enriched the project process as well as outputs.

Another challenge was that the group is very big and the time allocated to the project meetings is quite restricted. This led to the problem that in depth discussion on theoretical issues, definitions and terms and contents were not possible to as large an extent as it would have been wished for by partners. Some issues were dealt with by email (e.g. glossary and criteria). Apart from that two bi-lateral meetings were carried out between the UK-partner and the Austrian project coordinator for detailed work on the contents of the European report.

The information collected in different countries was quite varied. As mentioned above in some countries, there was a varied body of scientific literature on health promotion for older people that partners could report on. In other countries, there was very little information or mostly non-scientific literature available. Also, not all partners used the template with the detailed structure provided to them for their national report. This is a challenge for compiling the European report, as we are working with very different types of information.

Milestones

<i>Date</i>	<i>Milestone</i>
September 2006	2nd Partner meeting in Prag
February 2007	Glossary Criteria for choosing models for database
March 2007	Database with results of literature search
April 2007	Completed National reports of Phase 1
Planned June / July 2007	Completed European report

Deliverables

The deliverables are:

- Guideline for literature search (see Annex 5)
- Excel-database with collected data
- National Reports with the summary of the main finding of the literature review in each country (Annex 1)
- Glossary with common language terminology and definitions (Annex 3)
- Set of criteria for the selection of models of best practice (Annex 4)
- Draft of overview of literature search (Annex 2)
- European report with the summary of national reports and final version of overview of literature search (planned for June/July 2007)

2.5. Work package n° 5 (Phase 2): Collecting and compiling models of best practice

Objectives

This work package aims to collect and compile good practices from the different partner countries and translate them into a standard scheme, easy understandable for everyone. These models will be available in a database on the project website, available to the general public.

Description of work

The **criteria** for including models of good practice into the database agreed on in the third project meeting were further elaborated and formulated concretely by the work package leader, University of Maribor and again sent around to all partners. Feedback and discussion ensued by email.

Also, on the basis of agreements on the **format for the database entries** made in Maribor, a suggestion was sent around to all partners for comments. At a later stage the prototype for the on-line template (“standard scheme”) was sent around to all partners and feedback was sent to the web designers.

While the criteria, the database format and the on-line database were being developed, partners already started researching and compiling possible models for the database. This ensued on the basis of the literature search, with the help of national boards and other experts as well as with available databases in each country. The work package leader prepared an excel sheet for all partners as an aid for choosing which models to include in the database. Also, all partners received guidelines explaining the exclusion and inclusion criteria for the projects. Partners typed in the name of each model they found into the excel sheet and ranked it from 0 to 5 on each of the inclusion criteria. These were then weighted. Those which were related directly to the main aims of the healthPROelderly project were received twice as many weighting points as the others. The excel sheet is an aid to ensure that relevant models were chosen for the database. Partners were also reminded to ensure that a models with a mix of themes and a mix of inclusion criteria are included in the database.

The on-line template is being completed presently. Partners then will type in models in the on-line format. They will be asked to enter as many projects in the database as they can before the Rom-meeting. Each partner will present two projects that score very highly on the criteria elaborated and 1-2 projects where they were unsure whether they should be included in the database. This will be the basis for discussions and the examination of consistency between the partners. Based on the

results of the Rom meeting, partners will revise and finalise the database entries. The launch of the database is planned for July 2007.

Challenges encountered

Since there was not enough time at the project meeting in Maribor to make final decisions concerning the criteria to choose the models and the format of the database, a lot of time was still used to finalise these instruments over email. Also, the process of sending out suggestions (and the prototype) and receiving feed-back has taken longer than originally planned, which has resulted in the delayed availability of the on-line database so that partners have not been able to enter the models in the database until now.

A difficult step – next to defining the criteria precisely – proved to be how to evaluate the criteria and how to choose the models for the database. While some countries had difficulty finding any models at all that fulfilled some of the defined criteria, other countries found many models that fulfilled almost all the criteria. After detailed email discussions, it was decided to use a method, by which partners rank in how far the projects fulfil each criteria on a scale from 1 to 5. Also, there were discussions on how to weight the exclusion criteria.

Milestones

<i>Date</i>	<i>Milestone</i>
January 2007	3rd Partner meeting in Maribor
July 2007	Planned launch of the on-line database

Deliverables

- Revised inclusion and exclusion criteria with explanations (Annex 4)
- Excel checklist with criteria to help each partner choose models that will be put in database (see CD)
- Format for database (“back end” to type into; “front end” for users) (will be available June 1, 2007)
- Database with collected and compiled models presented online on the website (Launch July, 2007)

3. Further work plan

Work packages 4 and 5 (Phase 1 and Phase 2) will both be completed soon.

Tasks for Phase 1 (Work package 4) still include:

- Finishing the European report (July 2007)
- Final editing of national reports and putting them on the website to be downloaded (June 2007)
- Continually improving the glossary
- In the third partner meeting, it was agreed to initiate a book publication using the national reports as a basis. This includes looking for a publisher, (re)writing chapters and editing the individual chapters. This process is on-going.

Concerning Phase 2 (Work package 4) following tasks are still pending:

- Entering models into the database (June 2007)
- Discussing choice of models among partners (Rom-meeting 14/15 June 2007)
- Completing database (June/July 2007)
- Launch of database (July 2007)

The third phase of the project (work package 5) will be initiated during the Rom-meeting:

- How to choose 3 models per country for further evaluation will be agreed on
- Evaluation tools will be discussed and agreed on
- The work plan for Phase 3 will be presented

The evaluation phase (Phase 3) will be carried out between July 2007 and January 2008. The fifth project meeting will take place from 31 January to 1 of February in Berlin and will serve to present the results of Phase 3.

Further planning: The International Conference will take place on the 15 and 16 of May 2008 in Warsaw. Preliminary planning will take place at the fourth project meeting in Rom and more detailed planning at the fifth project meeting in Berlin.

The further planning of the project work is still in line with the plans stated in Annex 1 of the grant agreement. The only change that might be made at this stage concerns the last project meeting. It has been suggested to carry out the final project meeting in Brussels instead of Vienna as originally planned and include a half a day presentation and dissemination of the project, for example in the European Parliament. This has not been decided on as yet.

4. healthPROelderly Project - Conclusions

4.1. Comments on financial statement

For the first year of the project, somewhat over a third of the whole project duration (36%), approximately a third (34%) of the overall budget has been used. With respect to staff costs 35% have been incurred until now. Concerning the budget for travel and subsistence costs a little over a fourth (28%) has been used for three project meetings. Three more project meetings are still pending which will probably take up about a third of the travel budget and the travel and subsistence costs for the Warsaw meeting will probably use up another third of this budget. The subcontracting costs concern only the costs for the website and the database. The establishment of the database and costs for updating the website are still pending, but will most probably not exceed what was budgeted for this budget line. For the other costs approximately a fourth has been spent until now. Most of the other costs concern the International Conference as well as dissemination activities. All in all, it seems that the expenditures incurred until now are well in line with the planned budget.

Partners vary in the amount of **staff costs** they have already used up. Partners who have contributed more tasks to the project than originally planned also have also incurred more staff costs. These are the Jagiellonian University, Cracow, the University of Kent, UK, the University of Maribor, Slovenia and the Research Institute of the Viennese Red Cross (they have "only" incurred 31% of their staff budget, but they will still lead the work package 6 which will take up more staff costs than their tasks until now).

Those partners who will take up more tasks in the course of disseminating the project results, like the Red Cross Societies in Slovenia and Germany and the European Federation of Nurses Associations have incurred less than a third of their budgeted staff costs until now.

Some individual explanations of differing staff rates:

- The substantial change in the daily rate of Katharina Resch of the Research Institute of the Viennese Red Cross is due to the fact that she finished her studies at the University of Vienna in the field of sociology in the course of 2006 and received her degree of "Magistra" in March 2007. Due to these developments Ms. Resch was promoted from her post as research assistant to that of researcher in the field of sociology. Her role in the healthPROelderly project has remained roughly the same.
- The University of Kent calculates its staff costs using monthly rates, this is the reason why more than two daily rates (2006/2007) have been listed for its staff costs.

- The University of Maribor has higher rates than originally stated in the project proposal. The staff that work for the project are working for the project on a contractual basis and the rates are oriented at what professionals receive for this type of project work on a free-lance basis.
- The staff rates of the Spanish Red Cross differ from the rates in the project proposal, since other staff members have taken over the work for the healthPROelderly project.

Unresolved issues with respect to the budget are the costs for English editing, translation costs and the fact that some partners are doing more work than planned and some are doing less than planned.

4.2. Strengths and weaknesses of the healthPROelderly project

Strengths of the healthPROelderly project as seen by the evaluator and the project partners are :

- **Leadership:** Members of the project team are happy with the international project co-ordination. They receive clear instructions and detailed minutes from project meetings, perceive active involvement of most partners and see that prompt systems of communication have been set up (email addresses, web page and leaflet).
- **The international and multi-disciplinary partnership** is also seen to be one of the strengths of the project. It is perceived to be an “international and really European project”. Also, the interdisciplinary perspective is seen as leading to enrichment. The project partnership is perceived as being highly qualified and strong concerning theory and practice. Also, the friendly and good atmosphere of the group was acknowledged positively.
- **The products:** Project partners feel that the deliverables of the project until now, such as the literature database, the glossary and the national reports are very useful for them and for the development of the field of health promotion for older people in their countries and throughout Europe.

As in most international projects, one of the most evident inconvenience concerns language problems. Furthermore, some project management issues (timing, budgeting, role of work package leaders), lacking communication between partners but also conceptual and methodological difficulties with have been noted.

- **Language problems:** Partners see difficulties in using their national language for research and having to translate everything into English, in the light of the

fact that there was no budget for translation. Also, some difficulties in participating in the project meetings in English have been reported.

- **Difficulties with methods and concept:** Despite many discussions in the project meetings and per email as well as the glossary that has been compiled, there are still unclarities with respect to concepts and terms used and misunderstandings keep on emerging.
- **Project management issues:** Partners felt that the workload in this first period was higher than planned and felt stress in finalising the literature database and their national reports.

4.3. Summary of work until now

All in all one can say that the healthPROelderly project is on the right track. Most of the deliverables and milestones have been completed as planned. The first phase of the project (work package 4) is largely completed. The literature search is completed, results are collected in excel-database and all national reports are in place. A version of the glossary, which will be work in progress is completed as well as the criteria on how to choose models for the database. The European Overview is still being prepared. This lag in the time-plan is due to the fact that more work and deliverables were prepared than originally planned. Apart from that an additional step is being planned, a book publication of the national reports.

The second phase (work package 5) the compilation of the database is well under way. Partners have already searched for models and have entered them into the excel-sheet with the criteria. They will now be entered in the database on-line. After the Rom-meeting they will be finalised.

All partner meetings have been taking place as planned originally and also the date for the international conference is fixed as planned.

All in all, there is a very cooperative atmosphere in the project, a highly qualified project team and interesting outcomes to date.

Table of deliverables

<i>Deliverable No</i>	<i>Deliverable title</i>	<i>Status as of 15.5.2007</i>	<i>Nature</i>	<i>Confidentiality level</i>	<i>Dissemination</i>
D 1	Website of project	Completed	Website	Public	Link from all partner websites, link from official website, listings in search engines
D 2	Leaflet on the project	Completed	Other	Public	To associated and collaborating partners and members of national boards, conferences/fairs etc.
D 3a	European literature database (not originally planned)	Completed	Excel-database	Project partners	Available on internal area of website
D3b	10 National Reports of literature review in English (not originally planned)	Completed	Reports	Scientific community	Downloads on website and possibly book publication (not originally planned)
D 3c	Summary with the main findings of the literature review (including results of	Planned for July 2007	Report	Scientific community	To associated and collaborating partners and

<i>Deliverable No</i>	<i>Deliverable title</i>	<i>Status as of 15.5.2007</i>	<i>Nature</i>	<i>Confidentiality level</i>	<i>Dissemination</i>
	statistical analysis of lit. database)				members of national boards, scientific community etc.
D 4	Glossary with common terminology and definitions	Completed (will be augmented throughout project)	Report	Scientific community	To associated and collaborating partners and members of national boards, scientific community etc.
D 5	Compiled set of criteria for the selection of models of best practice	Completed	Report	Scientific community	To associated and collaborating partners and members of national boards, scientific community etc.
D 6	1st interim technical implementation report and consolidated financial statement	Completed	Report	Confidentiality	To the EC and all partners
D 7	Database with collected and compiled models presented online	In preparation Launch July	Database	Public	Available on the website

<i>Deliverable No</i>	<i>Deliverable title</i>	<i>Status as of 15.5.2007</i>	<i>Nature</i>	<i>Confidentiality level</i>	<i>Dissemination</i>
2007					
D 8	Set of methods for evaluation of health promotion projects for elderly	Planned July 2007	Guidelines	Restricted	To all partners
D 10	International Conference	Planned May 15/16, 2008	Conference	Public	Invitation/programme leaflet distributed to relevant stakeholders
D 11	2nd interim technical implementation report and consolidated financial statement	Planned May 31,2008	Report	Confidentiality	To the EC and all partners

