



AMHEN

Austria MyHealth@EU new Services

EU4Health

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DELIVERABLE REPORT

D2.1 Dissemination and Communication Plan

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Acronyms, Abbreviations and Explanations

Acronyms and Abbreviations

Term	Description
AT-eHDSI	Connecting Austria to the European eHealth Digital Service Infrastructure
BMSGPK	Austrian Federal Ministry of Social Affairs, Health, Care and Consumer Protection (abbreviated as BMSGPK for Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz)
CBeHIS	Cross-Border eHealth Information Services
Country A Country B	Country of Affiliation Country of Treatment
EEA	European Economic Area
eHDSI	eHealth Digital Service Infrastructure
eHMSEG	eHealth Member State Expert Group
ELGA	Elektronische Gesundheitsakte
EU	European Union
GDA	Gesundheitsdiensteanbieter
KPI	Key Performance Indicator
ÖÄK	Österreichische Ärztekammer – Austrian Medical Chamber
OeAD	Österreichischer Austauschdienst – Austrian Exchange Service
ÖGK	Österreichische Gesundheitskasse – Austrian Health Insurance Fund
ÖH	Österreichische Hochschülerinnen- und Hochschülerschaft – Austrian Students' Union
ÖKUSS	Österreichische Kompetenz- und Servicestelle für Selbsthilfe – Austrian Competence and Service Center for Self-Help
PIN	Patient Information Notice(s)
PoC	Point(s) of Care
TV	Television
WP	Work Package



Explanations

Term	Description
ELGA	ELGA is Austria's national electronic health record system.
Health professional	A doctor of medicine, a nurse responsible for general care, a dental practitioner, a midwife or a pharmacist within the meaning of Directive 2005/36/EC, or another professional exercising activities in the healthcare sector which are restricted to a regulated profession as defined in Article 3(1)(a) of Directive 2005/36/EC, or a person considered to be a health professional according to the legislation of the Member State of treatment.
Healthcare provider	Any natural or legal person or any other entity legally providing healthcare on the territory of a Member State.
MyHealth@EU	The cross-border infrastructure for primary use of electronic health data formed by the combination of national contact points for digital health and the central platform for digital health.
National contact point for digital health	An organisational and technical gateway for the provision of cross-border digital health information services for primary use of electronic health data, under the responsibility of the Member States.
PIN	Patient Information Notices outline how patients' data and information are accessed, processed and stored by a participating European country for healthcare purposes.



Executive Summary

This document presents the Dissemination and Communication Plan for the AMHEN project. It outlines a detailed operational plan for engaging both internal and external stakeholders, with a focus on raising awareness about the new MyHealth@EU Services among key target audiences. The plan is designed to guide and enhance the communication efforts of all project partners.

1 Introduction and Background

Building on the efforts of the project “AT-eHDSI” (Connecting Austria to the European eHealth Digital Service Infrastructure) for the implementation of the national contact point for digital health as infrastructure and the ePrescription/eDispensation as initial Cross-Border eHealth Information Service (CBeHIS), in “AMHEN” the Austrian eHealth infrastructure will be extended for the following new services of MyHealth@EU:

- Laboratory Results (Country A/Country B)
- Hospital Discharge Letters (Country B)
- Patient Summaries (Country B),

Since there is no standardized, cross-sectoral patient summary produced in Austria so far, the project also focuses on developing an implementation concept to foster the acceptance, availability and active usage of a standardised patient summary within the Austrian healthcare system.

The new Cross-Border eHealth Information Services will be implemented into the national eHealth infrastructure in close cooperation with the Austrian Federal Ministry of Health (BMSGPK). After extending the national contact point for digital health for the services listed above, further CBeHIS will be more likely and easily implemented, such as medical image reports.

The plan addresses the following main elements:

- Purpose (“why?”)
- Messages (“what?”)
- Target audiences (“who?”)
- Methods (“how?”)
- Time (“when?”)

1.1 Scope of WP2 Dissemination (“Why?” and “What?”)

The **main objective** of WP2 is to support the introduction of the new MyHealth@EU services in Austria by raising awareness and transferring knowledge to specific target groups (see description of target groups in chapter 3.1). WP2 will ensure that citizens and health professionals receive customized information via dedicated information pathways and are motivated to use the cross-border services.

The key objectives in WP2 Dissemination are to:

- Raise awareness for the new cross-border electronic health services and promote them among the target groups
- Motivate citizens to use the new services (Country A)
- Inform citizens and health professionals about patients’ data and information that are accessed, processed and stored (Country B)



- Deploy communication channels to ensure communication with the target groups
- engage with the stakeholders/target groups (online as well as through events)

Messages (“What”?)

During the first phase of the project, the main messages will be of a more general nature to create awareness of the new cross-border electronic health services and their aims, to inform citizens about the availability of the services provided and engage the relevant stakeholders. Once the services go into operation, the general messages will be accompanied by specific messages motivating citizens to use the new services (Country A), with the aim to increase the impact of the new cross-border electronic health services.

Although the main aims of WP2 Dissemination will remain throughout the project, the content of the messages and target audiences may change slightly as the project phases evolve.

Key components of the project’s dissemination strategy include the identification of target audiences and respective dissemination channels (see chapter 4), selection of appropriate communication channels and tools, development of key messages aligned with project goals, an operational dissemination plan including a timeline for its implementation (see chapter 7), and metrics for evaluating communication effectiveness (see chapter 8).

The plan can be seen as a dynamic framework since alignment with project progress needs to be ensured and emerging opportunities for engagement considered.

The Grant Agreement foresees the production of the following Deliverables and Milestones:

- D2.1 Dissemination and Communication Plan – at hand (M9)
- D2.2 Dissemination and Communication Manual (M21)
- D2.3 Dissemination report (M36)
- D2.4 Project Website (M12)
- MS4 Sub-website to national public health portal available (M12)
- MS5 Influencers/Multipliers workshop conducted (M18)
- MS6 Information campaign launched (M22)

Figure 1, Figure 2, and Figure 3 illustrate the timeline for WP2’s tasks, Deliverables and Milestones.



Timeplan WP2 Dissemination - Tasks, Deliverables & Milestones											
Year	2024										
Month No.	1	2	3	4	5	6	7	8	9	10	11
Month Name	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
WP 2 Dissemination											
T2.1 Dissemination Strategy and Plan											
D2.1 Dissemination and Communication Plan											
D2.2 Dissemination and Communication Manual											
D2.3 Dissemination report											
T2.2 Citizen and healthcare provider information and motivation											
M4 Sub-website to national public health portal available											
D2.4 Project Website											
M5 Influencers/Multipliers workshop conducted											
M6 Information campaign launched											
T2.3 Stakeholder engagement											

Figure 1: Official timeline WP2 Deliverables and Milestones year 2024 (GÖG illustration)

Timeplan WP2 Dissemination - Tasks, Deliverables & Milestones												
Year	2025											
Month No.	12	13	14	15	16	17	18	19	20	21	22	23
Month Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
WP 2 Dissemination												
T2.1 Dissemination Strategy and Plan												
D2.1 Dissemination and Communication Plan												
D2.2 Dissemination and Communication Manual												
D2.3 Dissemination report												
T2.2 Citizen and healthcare provider information and motivation												
M4 Sub-website to national public health portal available												
D2.4 Project Website												
M5 Influencers/Multipliers workshop conducted												
M6 Information campaign launched												
T2.3 Stakeholder engagement												

Figure 2: Official timeline WP2 Deliverables and Milestones year 2025 (GÖG illustration)



Timeplan WP2 Dissemination - Tasks, Deliverables & Milestones														
	2026													2027
Year	2026													2027
Month No.	24	25	26	27	28	29	30	31	32	33	34	35	36	
Month Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Okt	Nov	Dez	Jan	
WP 2 Dissemination														End
T2.1 Dissemination Strategy and Plan														
D2.1 Dissemination and Communication Plan														
D2.2 Dissemination and Communication Manual														
D2.3 Dissemination report														
T2.2 Citizen and healthcare provider information and motivation														
M4 Sub-website to national public health portal available														
D2.4 Project Website														
M5 Influencers/Multipliers workshop conducted														
M6 Information campaign launched														
T2.3 Stakeholder engagement														

Figure 3: Official timeline WP2 Deliverables and Milestones year 2026 and 2027 (GÖG illustration)



1.2 Limitation, Challenges and Risks

Targeted and clear communication and dissemination play a crucial role in the success and adoption of the MyHealth@EU services in Austria. However, the number of citizens and health professionals using these services is not representative and should not be seen as a measure of the success of the WP dissemination due to implementation choices related to the design and usability of the services (separate application for health professionals in a first phase followed by the interface for the doctor's software in a later stage, etc.). Additionally, the project depends on the political process to establish the legal framework necessary for implementing the new cross-border services. This poses a risk to the project and could result in delays, which may also impact the timeline for WP dissemination.

This Dissemination and Communication Plan aims to address these challenges; however, some activities, as billboard advertising, are out of the projects' scope due to the limited available resources. Consequently, dissemination efforts in the project will concentrate on very targeted, effective and efficient means, avoiding expensive campaigns such as TV spots. Instead, we will use alternative communication channels (e.g., possibly waiting room television in doctor's practices or in public transports).



2 European Initiative, Efforts in Creating a MyHealth@EU Brand

Austria’s participation in the “MyHealth@EU Communication Task Force” under the eHealth Member State Expert Group (eHMSEG) presents an additional opportunity to collaborate on a joint communication and marketing strategy, as well as on future actions at European level. Currently, the design of a new MyHealth@EU logo is under development. Several rounds of feedback with active contributions by the project team, including surveys, have been conducted to create a sustainable and harmonized logo that enjoys broad acceptance. At the time of creating this strategy, the process is expected to be completed in Q4/2024, though some delays might occur as the logo must be approved by all DGs involved. Centralized translations of the logo will also be provided.

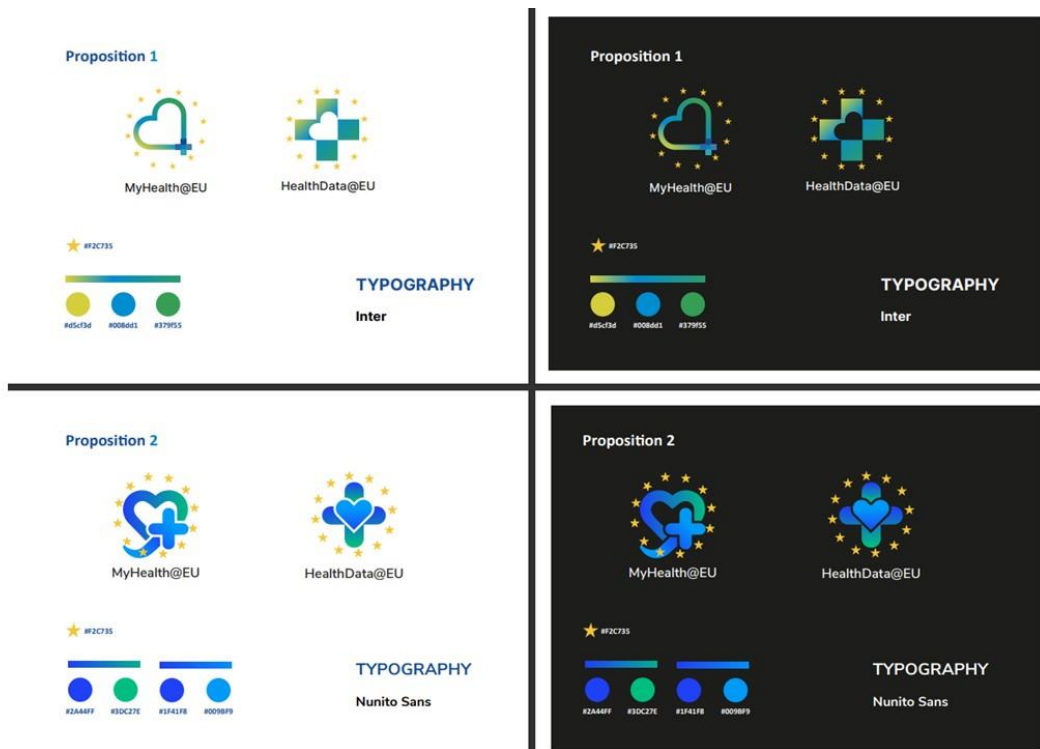


Figure 4: Logo propositions for MyHealth@EU and HealthData@EU from September 2024 (Source: European Commission)

Austria plans to adopt the European MyHealth@EU logo and potential dissemination toolkits developed at European level to promote MyHealth@EU Services domestically, aligning with the broader MyHealth@EU initiative and ensuring consistency in communication across borders in all participating MS. Moreover, using the European MyHealth@EU logo enhances recognition for citizens when traveling abroad.

The success of the dissemination work in AMHEN also depends on close cooperation within the eHDSI community between countries. Austria is ready to collaborate actively with all countries providing MyHealth@EU services, specifically with neighboring countries. Participation in conferences and events represents opportunities to interact with the eHDSI community, discuss approaches and promote services.



3 Target Audience (“Who?”)

To successfully disseminate cross-border health services it is important to understand the needs and requirements of the target audience and to develop a comprehensive marketing strategy that leverages a variety of channels and partnerships.

The key target groups are the following:

1. Citizens
2. Health professionals
3. Stakeholders

The Service Dissemination Plan at hand follows the *results staircase* model to achieve an impact on the target audiences (see chapter 2.3 „Necessary steps to achieve an impact on the target groups“) employing (countable) activities and offers in the course of dissemination (Bergmüller 2014).

3.1 Description of Target Groups

The service design distinguishes between the Country A and Country B use cases: In the Country A (Country of affiliation) use case, laboratory results created for Austrian citizens can be provided to health professionals in participating and connected MS. In the Country B (Country of treatment) use case, hospital discharge letters, laboratory results and patient summaries created in other participating EU/EEA Member States can be retrieved by health professionals (and citizens in case of hospital discharge letters) in Austria.

3.1.1 Citizens

An increased number of people work across borders, live in another country than the one in which they are insured, or are traveling. As potential users of the new MyHealth@EU Service Laboratory Results, Austrian citizens have to be *informed* about firstly, the existence of the service in general and secondly, the potential advantages and functionalities to motivate them to actively use the service. Citizens have to *accept* the new MyHealth@EU Services to use them.

Specific communication actions will be implemented to raise awareness amongst citizens about their rights concerning cross-border care services, as well as its accessibility and interoperability with national health systems. Citizens should be informed of their rights regarding cross-border healthcare, as well as the availability of eHealth services they can access while abroad. This includes guidance on steps to take before traveling (such as completing an opt-in process) and information on activated points of care in the countries they plan to visit. The focus will be laid especially on citizens who benefit most from the cross-border services: Longer stays (e.g., retired persons), Students (Erasmus), People with long-term medication (chronically ill), rare diseases.

Focus of communication towards *foreign patients* (Country B use case) will be laid on the provision of the PINs and a short information. The planned “GDA Anwendung” is supposed to be an application available to all Austrian healthcare providers to retrieve data from foreign patients. Therefore, a PoC map (similar to KPI1.9.2 from the “MyHealth@EU Monitoring Framework”:

https://experience.arcgis.com/experience/77f459be23e545b48f46a79cfaf19423/page/1_9_2/)¹ or a list of PoC sites on a website might not be of relevance. Establishing a core group of pilot facilities,

¹ Accessed on October 1st, 2024.



including both private practices and hospitals, could significantly contribute to further developing the services and facilitate the collection of valuable feedback.

The core group pilot sites could be identified through displaying a visible sign/label. This sign could be designed and distributed to the sites offering and promoting cross-border eHealth services.

3.1.2 Health professionals

Health professionals are professional users and facilitators, who are directly involved in the communication with citizens (patients). As a first step, it is crucial to *inform* health professionals about the existence of the services. As a second step, it is important for this target group to *accept* the new services. Finally, *training* should be provided to health professionals, especially doctors, so that they can achieve the skills to realize their foreseen role in the implementation and running of the services.

Healthcare providers within the project's scope include hospitals, laboratories and private practices. Health professionals have the roles of creating electronic laboratory results and retrieving discharge letters and patient summaries. Thus, they are important stakeholders in helping to achieve better interoperability. For doctors, the process of creating cross-border laboratory results does not differ from the national use case. In the initial implementation stage, health professionals will use the newly planned "GDA Anwendung" application for data retrieval of the cross-border services. In a subsequent stage, interfaces for healthcare provider software could be developed. Awareness raising for doctors will take place over dedicated means (see chapter 4).

3.1.3 Stakeholders

In addition to citizens and health professionals, stakeholders in the project context refer to groups or organizations that may be impacted by the project or its outcomes or have a vested interest in it.

Communication with stakeholders helps to attract interest, trust, and acceptance of the new MyHealth@EU Services. The MyHealth@EU services depend on the support at stakeholder's level to broaden the scope. The focus of stakeholder communication is to promote liaison with major health sector players, to promote knowledge sharing and exchange information on relevant experiences among relevant stakeholders on both national and EU-level. Effective stakeholder communication ensures that stakeholders receive relevant information, which they could link to their own attitudes, needs and values. Cooperation with institutions that have direct contact with citizens can have a high impact on the project's success. Stakeholders often play a key role in determining the success of a project. It is important to involve stakeholders in the early stages of the project.

3.1.3.1 EU-level

The Dissemination and Communication Plan seeks to promote the engagement of European institutional health actors such as national contact points for digital health in other participating MS, European Reference Networks a.s.o., and the eHDSI community overall.

3.1.3.2 National Level

National partnerships with *trusted organizations* can help to build trust and credibility and to expand the reach of the services - not only at European level, but especially at the national level, which will increase the range and impact of dissemination by means of attracting potential end-users and *supporting partners*.



Stakeholder communication activities within the project will deal mainly with informing and raising awareness about the new MyHealth@EU services through electronic and non-electronic means, as well as through interactive and non-interactive activities, like putting relevant information on public websites, writing articles in journals, holding presentations on events and in social media, conducting patient workshops a.s.o. (see chapter 5). The major player, the chamber of doctors, will be informed preliminarily.

Key stakeholders at national level in the AMHEN project are the Austrian Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Chamber of Doctors, Medical test facilities, representation of interests of medical software vendors, Patient Advocacy, and ELGA GmbH owners including social insurance. They will be actively involved in different stages of the dissemination, thus contributing to enhancing its development and outcome.

Additional possible partnerships:

- Embassies
- Travel agencies
- Erasmus (EU programme for education, training, youth, and sport),
- ÖH - Österreichische Hochschülerinnen- und Hochschülerschaft [engl: Austrian Students' Union]
- OeAD - Österreichischer Austauschdienst [engl. Austrian Exchange Service]
- ÖKUSS - Österreichische Kompetenz- und Servicestelle für Selbsthilfe [engl.: Austrian Competence and Service Center for Self-Help]

Furthermore, all project partners are invited to exploit their networks and support the project's mission, for example by organizing patient workshops aiming to raise awareness about the new MyHealth@EU services.

3.2 Necessary Steps to Achieve an Impact on the Target Groups

Figure 5 presents a results staircase², where each step builds on the other. This results staircase illustrates the effect and approach of the MyHealth@EU Services Dissemination Plan at hand.

According to Bergmüller (2014), to achieve an effect on the target groups through dissemination, activities must be carried out as planned (level 1), the target groups are reached with these activities (level 2) and the target groups finally accept the offers.

² Bergmüller (2014)



Figure 5: The results staircase. Source: Bergmüller (2014)

Output

In other words: There are three different output levels, which are presented in Figure 5 (levels 1 - 3):

- The outputs at level 1 are the (measurable) activities carried out as planned in the course of the Service Dissemination Plan
- Level 2 is reached when the target groups are reached through the activities
- The outputs at level 3 reflect whether the offers (ePrescription and eDispensation) meet the target groups' needs and how satisfied they are

Level 3 forms a central function in the project effect: Satisfaction with an offer decisively determines whether it also affects the target groups. The more enthusiastically target groups take advantage of an offer, the sooner it will lead to success. It is to be noted that the satisfaction of the target groups is a necessary but by no means sufficient condition for achieving effects.

Outcomes (Effects at the Level of the Target Group)

Outcomes are the effects at the level of the target groups. They illustrate the positive changes that the Service Dissemination Plan is working towards among project participants. The outcomes are divided into three stages, represented in levels 4 – 6 in the results staircase (see figure 4):

- Level 4 indicates a change in knowledge, skills, and attitudes
- The effects at level 5 of the results staircase build on outcome level 4 and describe the changes in behaviour and action
- The effects at level 6, in turn, build on the outcomes at level 5

The changed behaviour forms the basis for improving the life situation of the target groups.

Impacts at the Level of Society

While the outcomes relate to the project's target groups, the impacts at level 7 describe the desired changes at the level of society.



4 Communication Channels

A comprehensive dissemination strategy leverages a variety of methods to effectively reach and engage the target audiences. Thus, dissemination activities and materials will be distributed over various information pathways, ranging from:

- Digital platforms such as social media, websites, Infoscreens (in doctor's practices or inside public transport), and email campaigns (newsletters) providing rapid and wide-reaching dissemination
- Traditional media, including print publications (magazines, newspapers) and broadcast channels which offer credibility and accessibility to diverse demographics
- In-person events, like workshops, and conferences facilitate direct engagement and feedback
- Points of Care (e.g. laboratories for leaflets, flyers)

By using digital channels, traditional media, and face-to-face interactions, the strategy ensures broad and inclusive communication.

A significant emphasis will be put on tapping into the communication channels that all project partners already have, through their membership base, newsletters, social media reach, etc. All project partners are considered ambassadors of the project and are encouraged and expected to be involved to different degrees in communication and dissemination efforts (see chapter 7).

5 Dissemination Activities and Material (“How?”)

This chapter outlines the various dissemination activities to be carried out and the materials to be developed throughout the AMHEN project. By using a mix of activities and materials, dissemination efforts can effectively target the audience, ensuring the project's goals and results are well-communicated and widely understood.

5.1 Dissemination and Communication Manual

To support and encourage partners' and stakeholders' involvement in communication activities, AMHEN WP2 will develop a „Dissemination and Communication manual“. Partner's efforts on communication will be actively supported by WP2 Leaders provided that relevant information is communicated sufficiently in advance to ensure relevant preparations can be taken.

5.2 Sub-Website to National Public Health Portal

The Austrian health portal [Gesundheit.gv.at](https://www.gesundheit.gv.at) will be the core part of the dissemination of the AMHEN project. Aligned with the National Contact Point for Cross-Border Healthcare on the Austrian Health Portal ([Patient mobility contact point | Gesundheitsportal](#)) a subsite dedicated to the cross-border eHealth services under MyHealth@EU has already been created in the course of the AT-eHDSI project. The subpage will be progressively expanded to include information about the new services and may also contain details about the AMHEN project (objectives, partners and contact details). Links between partners' websites will drive traffic to the MyHealth@EU subsite on the Austrian Health Portal.



5.3 Influencers/Multipliers Workshop

An influencers/multipliers workshop will be organised by the WP2 team in order to:

- Increase awareness of the importance of the new cross-border electronic health services
- To increase awareness of their important role in acceptance of the new cross-border electronic health services
- To engage them in the emerging AT-eHDSI/AMHEN network.

5.4 Information Campaign

An information campaign targeted at the general public (through AMHEN communication team) will be organised to promote the project in conjunction with the project partners. The campaign will aim to reach a broad audience, exploiting various channels to maximize visibility and engagement. Key elements of the campaign may include an intensive social media presence for a number of days and a press release to attract media attention. The press release should outline the objectives and anticipated impact of the project and its services, making it accessible and appealing to journalists, bloggers, and media outlets.

5.5 Webinars for Different Target Groups

As an additional key dissemination strategy, webinars could be developed for various target groups (hospitals, laboratories, doctor practices). The webinars could inform the target groups about the new cross-border services and explain them how to use them and the benefits they offer. They should mainly address health professionals and therefore use German language with English subtitles in layman's language. They could be published on gesundheit.gv.at and distributed via social media.

5.6 Online Information

The MyHealth@EU website on the Austrian Health Portal gesundheit.gv.at is considered as the main online informational channel. In addition, the following websites are considered relevant for the publication of content regarding cross-border eHealth services at a national level:

- Website of the Austrian Federal Ministry Social Affairs, Health, Care and Consumer Protection ([Website BMSGPK](#))
- Website of the social insurance (www.sozialversicherung.at), websites of Austrian health insurance institutions (ÖGK, SVS, BVAEB), and the online portals for e-Services of the social insurance (MeineSV, MeineÖGK, MeineBVAEB, SVSgo)
- Austria's online platform with which citizens can carry out official channels independently of time and place oesterreich.gv.at;

At European Level:

- YourEurope ([YourEurope](#))
- MyHealth@EU website
- European Reference Networks



5.7 Social Media

Various social media channels can be leveraged for informing different target audiences regarding the new cross-border eHealth services and any related activities or applications (e.g. the GDA Anwendung). The main target groups include citizens, health providers, and health-related organisations.

Content should be tailored accordingly to the services: patient summary (B), discharge letters (B), and laboratory results (A/B).

The content will aim to 1) inform and motivate citizens and healthcare providers; ensure that all potential users and stakeholders will be reached during the lifecycle of the project. And on a second level, 2) use social media to disseminate content produced within T2.2 and T2.3 such as web content, videos, information related to health professional tools (software providers, apps) and patient apps.

It is important to plan the information campaign on social media as a continuing process. Moreover, a multi-channel approach would ensure broad dissemination of information especially in the weeks and months following the start of the cross-border eHealth services. Each platform comes with its own benefits for sharing content to target audiences. For example, currently LinkedIn is the largest business-oriented networking platform, aimed towards professionals (therefore especially helpful for reaching /informing health professionals). In the following, an overview of possible activities on different channels is presented.

Content should be coherent across channels and social media accounts (i.e., profiles). For example, the content for posts can be created in advance (message, visual element, links to be included, etc.) and then disseminated across all included and cooperating accounts/profiles (by cooperating organisations in terms of sharing content on their platforms).

The social media dissemination is planned to be achieved via the use of various social media platforms and accounts on two levels: The first level regards sharing content through GÖGs own accounts. The second level regards sharing content through the accounts of other relevant health related organisations or channels, which agree to cooperate with us in terms of content sharing (sharing posts or posting content prepared by GÖG).

First Level – GÖG Accounts

Currently, GÖG uses three social media platforms: LinkedIn, Twitter, and YouTube. In case a social media campaign is launched, GÖG will support the activities via our GÖG Twitter, GÖG LinkedIn, and GÖG YouTube accounts to reach a wider audience and spread the news as well as promote informational content/material regarding the new services. For instance, YouTube can be used to upload and share any informational videos that are produced.

Second Level - Cooperating Accounts/Profiles

Additionally, content could be shared regularly, especially in the first months after the service launch on platforms of relevant health-related organisations in Austria (for example: [ÖGK Instagram account](#), or the physician's association [Ärztchamber Instagram](#)) and possibly also by the BMSGPK accounts (Instagram: "[BM Soziale & Gesundheit](#)" which currently has over 23.500 followers, or the Ministry of Health [Facebook](#) page which currently has 132.000 followers).



To achieve this, an identification/mapping of possible cooperating accounts has been initiated in the AT-eHDSI project and will be continuously updated in the AMHEN project, which includes a list of possibly cooperating accounts, from “peers”/collaborators in the project, to other possible multipliers such as influencers in the field of digital health. Furthermore, once the launch of a respective service has started, early adopters of the service can be sought out/identified to showcase real life use cases/experiences with the respective service for online posts. These early adopters can then also act as multipliers by acting as “ambassadors”, posting their experience using the service on social media, which will then be re-shared by more prominent accounts to ensure visibility/ a wider reach (such as the BMSGPK one).

To enhance recognizability and cohesion throughout all the social media posts, a small folder made available to all social media cooperating accounts/partners, including a selection of text snippets (such as a slogan or sentences that can be used) and visuals (such as 2-3 pictures or icons, MyHealth@EU Logo and logos of the services if available) which cooperating accounts/profiles/partners will be encouraged to use in their posts could be created.

Furthermore, the folder could include some guidelines/information on steps that can be taken for a cohesive and wide-reaching dissemination of information.

- **Hashtags**

A Hashtag (#) should be established and used for all social media channels and in every post about the cross-border ehealth services, both for Country A and B information (Examples: #patient summary, #crossbordereHealthservices, #MyHealth@EU or #MeineGesundheit@EU). This will allow users to recognise and find relevant information more easily on different social media channels. Using hashtags can effectively categorise posts, strengthen “brand identity” and facilitate raising awareness with a desired audience.

- **Visuals**

To increase visibility, one visual (of existing material, such as logo, picture, leaflet, video etc.) could be included in every post. Visuals can help to enhance the brand identity and therefore recognizability of the new services.

- **Links to Website for further information**

Aligned with the online information section above, each Post should include a link to one of the websites, depending on content and relevance, and target audience.

Setting Targets

Targets should be set for GÖG posts as well as for each cooperating account in terms of how many posts should be published and in what timeframe. Furthermore, some targets could include more detailed information related to channel and type of post – for example a highlight featuring 4-5 informational posts on the cross-border health services at the national and at European level could be posted on the BMSGPK and ÖGK Instagram account in their highlights section Instagram Highlights are a selection of “stories” (a collection of pictures or reels) located at the top of the Instagram account, that can be featured on a profile permanently (whereas stories only last for 24 hours).



5.8 Events

Events can help to raise awareness for the MyHealth@EU services and provide opportunities to connect with potential users and partners. Possible events that might be of interest to attend by the AMHEN communication team are patient workshops and specific fairs (e.g. Österreichischer Ärztekongress, "Messe Gesundheit & Prävention").

5.9 Promotional Materials

Advertising media in the AMHEN project include flyers, videos, articles, press releases, and newsletters.

5.9.1 Flyer

Flyer explaining the services' objectives and how to use them will be created in accessible language and presented online on the Austrian health portal and possibly the project's partners' website as well as other relevant websites, such as The Austrian Primary Healthcare Plattform (primaerversorgung.gv.at) and distributed via e-mail to relevant stakeholders. It can be printed for distribution at relevant events. The flyer addresses both, citizens and health professionals (possibly also as separate files). In the long-term, development of flyers in different languages is foreseen to address different communities.

5.9.2 Articles and Press Releases

Basic information about the cross-border MyHealth@EU services will be disseminated via articles and press releases to raise awareness.

Possible contributions could be in:

- Austrian Medical Journals: Editorial contributions in ÖKZ, Ärztwoche, Allgemeine+
- Social insurance contract partners magazine,
- ÖGK, SVS, BVAEB magazines

We aim to publish a press release at the start of the service operation which could be accompanied by a launch event with e.g. policy makers officially launching the service in a selected point of care (e.g. hospital, medical test facility or doctor's practice).

5.9.3 Poster

Possibly also posters for practices, hospitals and medical test facilities (laboratories) could be designed, with information and e.g., a QR code which leads to the corresponding page on gesundheit.gv.at.

5.9.4 Newsletters / E-Mails

In the AMHEN project we aim to exploit already established distribution channels, e. g. with the Austrian Medical Chamber ÖÄK, social insurance, and from GÖG (e.g. GÖG newsletter) to disseminate information. Existing networks such as the Communication Task Force could be used for info related to country B.



6 Education and Training

Specific communication and educational sessions, also on the introduction of the new GDA Anwendung, will be organized in order to inform and train health professionals. WP2 will cooperate closely with ELGA GmbH regarding education and training activities of healthcare providers. The provision of user manuals and corresponding documentation as well as the technical training for participating health professionals will be performed directly by ELGA GmbH. Online Training tools could support the process. WP2 will rather organize information sessions to explain the services and its benefits to interested and potential partners and to engage with them.



7 Operational Dissemination Plan (“When?”)

Activity	Goal	Target audience	Content	Responsibility	Where/Location	Timeline	Evaluation
Public websites	Raise awareness for and promotion of MyHealth@EU services	EU citizens, health professionals	Provide information about the cross-border eHealth services offered, and how they are used and their availability	GÖG, project partners	Gesundheit.gv.at, österreich.gv.at, ELGA GmbH, BMSGPK, ÖGK, SVS, BVAEB, MeineSV, MeineÖGK, MeineBVAEB, SVSgo European Level: YourEurope, MyHealth@EU website, ERN	Gesundheit.gv.at subsite expanded to include information about the new services and potentially details about the AMHEN project available from January 2025	Gesundheit.gv.at: Number of website visitors (see chapter 8)
Articles		EU citizens with a focus on the Austrian population, healthcare provider		GÖG	Austrian Medical Journals (Editorial contributions in ÖKZ, Kammerinfo, Apothekerkrone, Ärztwoche, Allgemeine+), social insurance contract partners – magazine, ÖGK, SVS, BVAEB magazines	During the whole duration of the project lifetime	Number of articles/press releases (see chapter 8)



Activity	Goal	Target audience	Content	Responsibility	Where/Location	Timeline	Evaluation
Press Release(s)	Share official information with the public, inform about milestones like the start of the services operation	General public in Austria and at EU level	Inform about the availability of the services and how/where to use them	GÖG together with BMSGPK	Press agency, Gesundheit.gv.at, Websites of the project partners, social media	One press release at the Go-Live of services	Number of articles/press releases (see chapter 8)
Information events for health professionals	Raise awareness, demonstrate use, engage possible partners	Austrian health professionals	Information about the service and on how to use them	GÖG in cooperation with ELGA GmbH	ÖÄK	With the start of the service operations beginning with 2026	
Video	Promote MyHealth@EU Services and show how to use them	EU citizens with a focus on the Austrian population, health professionals		GÖG	Video will be published on gesundheit.gv.at, possibly Wartezimmer TV, public transportation	With the start of the service operations in 2026	Number of views



Activity	Goal	Target audience	Content	Responsibility	Where/Location	Timeline	Evaluation
Social media	Raise awareness, sharing information and promotion of MyHealth@EU services	General public in Austria and at EU level, healthcare providers, health professionals	Provide and share information about the cross-border eHealth services offered, and how they are used and their availability	GÖG, project partners	GÖG Twitter, LinkedIn, Youtube, and other platforms by cooperating organisations in terms of social media content sharing such as the BMSGPK social media accounts (Instagram, facebook etc.)	With or shortly before the start of service operations in 2026	<p>Number of posts on different platforms (by organisations that cooperate in terms of sharing content) – including their respective number of followers (to be evaluated regularly)</p> <p>Number of cooperating partners/profiles for social media postings (main ones such as project collaborators as well as other multipliers)</p>
Events	Raise awareness, Engage possible partners and potential users	EU Citizens with a focus on the Austrian population, health professionals	Information about the service and on how to use them	All project partners shall exploit their networks and support the project's mission	APOkongress, fairs, patient workshops	Regularly starting in year 2 (2025)	Number of events organized/participated (see chapter 8), number of participants



8 Monitoring and Evaluation

The impact of dissemination activities will be measured continuously in close cooperation with WP 3 Evaluation via the following KPIs and their defined target values for WP 2 Dissemination & Communication.

Information material/Dissemination Channel	Target values
Website	300 avg. visitors per month y1 400 avg. visitors per month y2 500 avg. visitors per month y3
Newsletter/Press Releases/Articles	5 articles and/or press releases (within the project's lifetime)
Events	2 events per year (starting year 2) - participation or organization
Education and Training	<ul style="list-style-type: none"> • 2 information workshops for health professionals held, e.g. with an info-session at the annual "Doctor' Association Meeting" • Patients rights – translated PINs provided and available • GDA Anwendung training material available – 1500 downloads over project period
Video	Video (over waiting room television in medical practices, health centers) displayed

Since the indicators and their target values are set at the very beginning of the project, adjusting the indicators – and subsequently also the dissemination strategy – might be necessary during the course of the project.



9 References

Bergmüller, C. (2014). Kursbuch Wirkung. Das Praxishandbuch für alle, die Gutes noch besser tun wollen/Evaluation und Optimierung kultureller Angebote/Emerging Practices in International Development Evaluation/The future of evaluation in society: A tribute to Michael Scriven. ZEP: Zeitschrift für Internationale Bildungsforschung und Entwicklungspädagogik, 37(4), 41.