



MOMENTUM

European Momentum for Mainstreaming Telemedicine Deployment in Daily Practice

(Grant Agreement No 297320)

D2.5c

Report on Workshop and Outreach (3 of 4)

Version 02

Work Package:	WP2
Version & Date:	02 /2 September 2014
Deliverable type:	Report
Distribution Status:	Public
Author:	Michael Strübin
Reviewed by:	Marc Lange, Diane Whitehouse
Approved by:	Marc Lange
Filename:	D2.5c_v02_Momentum_Workshop&OutreachReport_3of4

Abstract

This report consists of two parts. The first part provides a summary of the third Momentum workshop held on 15 June 2014 in Athens, Greece. The workshop featured outside speakers reporting on telemedicine deployment experiences in Italy, the Netherlands, Norway, and Scotland, and served to assess and validate the *18 Critical Success Factors for Telemedicine Deployment* document. The second part of the report gives an overview and assessment of the project's outreach activities between June 2013 and June 2014, including the marketing and dissemination push executed following the publication of Momentum's *18 Critical Success Factors*.

Key Word List

Blueprint, communication, dissemination, events, Momentum, outreach, special interest groups, social networks, template, website, workshop.

DISCLAIMER:

The information in this document is provided as is and no guarantee or warranty is given that the information is fit for any particular purpose. The user thereof uses the information at its sole risk and liability.

This publication only reflects the author's views. The European Union is not liable for any use that might be made of the information contained in this publication.

Change History

Version History:

- 01 29 August 2014
- 02 2 September 2014
- 03
- 04
- 05

Version Changes

- 01 Initial draft
- 02 Revision with comments from Marc Lange and Diane Whitehouse
- 03
- 04
- 05

Outstanding Issues

None.

Statement of originality

This deliverable contains original unpublished work except where clearly indicated otherwise. Acknowledgement of previously published material and of the work of others has been made through appropriate citation, quotation or both.

Table of Contents

ABBREVIATIONS	IV
EXECUTIVE SUMMARY	V
1. INTRODUCTION	1
1.1 The Momentum project	1
1.2 Purpose of this report	1
2. THIRD MOMENTUM WORKSHOP HELD ON 15 MAY 2014	2
2.1 Background	2
2.2 Location and host event	2
2.3 Participants	2
2.4 Agenda	3
2.5 Content	4
2.5.1 Welcome	4
2.5.2 Presentation of the critical success factors	4
2.5.3 Teledermatology	5
2.5.4 Telecardiology for Public Health Care of Cardiovascular Diseases	5
2.5.5 Implementing the Norwegian COPD pilot: lessons learned and success factors for future scale-up	5
2.5.6 Telemedicine deployments in Scotland	5
2.5.7 Wrap up, observations, suggestions	5
2.5.8 Next steps	6
2.6 Follow up	6
3. OUTREACH	7
3.1 Activities	7
3.1.1 Website	7
3.1.2 Media releases and newscast	8
3.1.3 Social networks	9
3.1.4 Dissemination events	11
3.1.5 Second communication push (May/June 2014)	12
3.1.6 Other communication activities	13
3.1.7 Network development	14
3.2 Assessment and outlook	14
APPENDIX 1: DISSEMINATION EVENTS AND ACTIVITIES JUNE 2013-JUNE 2014	15

Table of figures

Figure 1: Workshop agenda	4
Figure 2: Example of a Momentum newsletter issue.....	9
Figure 3: eHealth Forum newsletter on the dissemination event.....	11
Figure 4: Momentum website stats	13
Figure 5: Momentum flyer (front and back).....	13

Table of tables

Table 1: Workshop participants	3
--------------------------------------	---

Abbreviations

The following abbreviations have been used in this report:

AER	Assembly of European Regions
AIM	Association Internationale de la Mutualité
ALEC	Arctic Light eHealth Conference
CATEL	Club of Actors in TeLemecine
CCN	County Council of Norrbotten
CPME	Comité Permanent des Médecins Européens
DGG	Deutsche Gesellschaft für Gesundheitstelematik
EeHF	Estonian E-Health Foundation
EHTEL	European Health Telematics Association
EIP AHA	European Innovation Partnership on Active and Healthy Ageing
EXCO	Executive Committee of the Momentum project consisting of all work package leaders
HOPE	European Hospital and Healthcare Federation
IDF	International Diabetes Federation
NST	Norwegian Centre for Integrated Care and Telemedicine
OUH	Odense University Hospital
PTTM	Polish Telemedicine Society
RSD	Region Syddanmark (Region of Southern Denmark)
SCTT (NHS24)	Scottish Centre for Telehealth and Telecare
SIG	Special Interest Group
UEMS	European Union of Medical Specialists
ZTG	ZTG GmbH Zentrum für Telematik im Gesundheitswesen

Executive Summary

The first part of this report provides a summary of the third Momentum workshop held on 15 May 2014 in Athens, Greece, following the eHealth Forum. The workshop featured outside speakers who reported on various telemedicine deployment experiences in Italy, Netherlands, Norway, and Scotland, and served to assess and validate the *18 Critical Success Factors for Telemedicine Deployment* document released on the previous day, 14 May 2014.

The second part of the report gives an overview and assessment of the project's outreach activities between June 2013 (the date of the last report) and June 2014. This includes the marketing and dissemination push executed following the publication of the *18 Critical Success Factors* document. It is estimated that more than 1,000 people in the field have become aware of the Momentum project through both online and offline outreach. The critical success factors document has been downloaded more than 400 times since its publication.

1. Introduction

1.1 The Momentum project

Momentum is a European Commission funded thematic network where key players in telemedicine share and pool their knowledge and experience in deploying telemedicine services into routine care. The Momentum consortium is growing into a network of organisations that are representative of European health care systems and levels of telemedicine progress. Working together, these organisations are drafting, testing and finalising a *Blueprint for telemedicine deployment* that will offer guidance to any telemedicine doer who is seeking to move telemedicine from an idea or a pilot to daily practice. The project started in February 2012 and was originally scheduled to end in 2014. A project extension has been agreed. The project will now end in January 2015 after a total duration of 36 months.

1.2 Purpose of this report

The first part of this report (see section 2) documents the background, purpose, proceedings and results of the Momentum workshop held on 15 May 2014, the third workshop out of a total of four. The second part (see section 3) summarises the outreach activities and results of the project carried out between June 2013 and June 2014. It is the third of a total of four contractually agreed deliverables under the label of D2.5 “Report on Workshop and Outreach”.

2. Third Momentum workshop held on 15 May 2014

2.1 Background

The Momentum thematic network has as its key objective the development of a European Blueprint for telemedicine deployment. The steps taken to develop this blueprint are: (1) Knowledge gathering (through an online questionnaire); (2) analysis and initial blueprint draft development by telemedicine doers who work on different aspects of telemedicine deployment; (3) validation of sections of the blueprint with telemedicine stakeholders; and (4) consolidation of the blueprint and its testing in a real life setting.

The first workshop was held on 21 June 2012 in Luleå, Sweden (reported and discussed in deliverable D2.5a) and the second on 8 April 2013 in Berlin, Germany (see deliverable D2.5b). By April 2014, the project had completed an extensive collaborative effort, including a large number of telephone conferences and SIG and consortium face-to-face meetings, and finalised a preliminary version of the project findings.

This timing was auspicious, as it fell in line with the major European eHealth event, the eHealth Forum 2014. The dissemination event on 14 May 2014 at eHealth Forum 2014 (see below section 3.1.4) saw the public launch of the precursor document for the Momentum Blueprint: the list of *18 Critical Success Factors for Telemedicine Deployment*. The third Momentum workshop followed a day later, on 15 May 2014, also in Athens. The objective of the third workshop was to initiate engagement with doers from outside the consortium to validate *18 Critical Success Factors*.

To achieve this objective, Momentum invited speakers and participants specifically from the United4Health project and European Innovation Partnership Active and Healthy Ageing. They provided feedback from the perspective of their own telemedicine deployments and experiences, thus launching the validation phase of the blueprint. This section documents the activities undertaken in this workshop, while section 3 discusses the related dissemination efforts.

2.2 Location and host event

Momentum seeks to organise its workshops as side events to other events so as to maximise attendance and minimise travel costs to the project. For the third workshop, the consortium chose the eHealth Forum, the annual event of the EU presidency, which was hosted in 2014 by the Greek EU presidency and held in Athens from 12 to 14 May 2014.

2.3 Participants

The Momentum project cooperated with the work group AA7 of the Action Group B3 (“Integrated Care”) of the European Innovation Partnership for Active and Healthy Ageing (EIP AHA) to organise this workshop. This is due to AA7’s strong interest in the topic of telemedicine deployment. The cooperation helped to identify a number of outside speakers and to attract additional guests. It also strengthened the level of the discussions. Overall, it acted as the beginning of the Momentum validation exercise. Since the workshop was held in Athens, Greece it also attracted a number of Greek participants from a variety of organisations. See for the full list of participants Table 1.

The combined efforts of the Momentum project and the AA7 group of the EIP AHA drew 28 professionals and experts from inside and outside the Momentum consortium to attend the workshop. Of the consortium membership of 21 organisations, 15 were represented at the workshop.

Table 1: Workshop participants

Name	Organisation	Name	Organisation
Rachelle Kaye	AIM (Maccabi Healthcare Services, Gertner Institute)	Silvia Bottaro	HOPE
Claudio Lopriore	Cardio On Line Europe	Andrea Cervera^{EIP}	I2CAT Foundation
Giuseppe Di Giuseppe	Cardio On Line Europe	Leonard Witkamp	KSYOS TeleMedisch Centrum
Gerard Comyn	CATEL	Angelo Rossi Mori^{EIP}	National Research Council / Federsanita - ANCI
Rune Fensli^{U4H}	Centre for eHealth, University of Agder	Stuart Anderson	NHS24 (University of Edinburgh)
Michael Strübin	Continua	Andrea Pavlickova	NHS24/SCTT
Frank Gitt	Continua (Weinmann)	Ellen K. Christiansen	NST
Bernard Maillet	CPME	Eva Henriksen	NST
Stephan Schug	DGG and ZTG	Zdenek Gütter^{U4H}	Palacky University Olomouc/Unive. Hospital - NTMC
Marc Lange	EHTEL	Stavroula Petropoulou	Sismanoglio-Amalia Flemig GH Group
Myriam De Greef	EHTEL	Tino Marti	TicSalut
Peeter Ross	Estonian E-Health Foundation	Konstantinos Koumakis	UEMS/Panhellenic Medical Association
Christina Karaberi	e-Trikala S.A	Diane Whitehouse	Region of Southern Denmark
George Dafoulas^{U4H}	e-Trikala S.A		
Mariangela Contenti^{EIP}	Federsanita - ANCI		

“EIP” indicates guests from the AA7 group of the EIP. “U4H” indicates guests from the United4Health project.

2.4 Agenda

The workshop focus was on reviewing the *18 Critical Success Factors* from a doer perspective. To enable them to prepare for the workshop, the four presenters had received a copy of the *18 Critical Success Factors* one week before the event, with a request

to critique and validate the success factors in their presentation by analysing their relevance and applicability to their own telemedicine services.

3rd Momentum workshop	
jointly organized with WG AA7 of AGB3 of EIP on AHA	
Thursday, 15 May 2014, 9:00-15:00, Crowne Plaza Hotel, Athens, Greece	
Agenda	
8.30	Welcome coffee
9.00	Welcome, introductions, project update Marc Lange, EHTEL and Andrea Pavlickova, NHS24
9.30	Presentation of the Critical Success Factors Diane Whitehouse, EHTEL Discussion
10:15	Teledermatology Leonard Witkamp, KSYOS TeleMedisch Centrum, Netherlands Discussion for validating the relevant Critical Success Factors
11:00	Coffee break
11.20	Telecardiology for Public Health Care of Cardiovascular Diseases Claudio Lopriore, Giuseppe Di Giuseppe, Cardio On Line Europe, Puglia, Italy Discussion for validating the relevant Critical Success Factors
12:00	Implementing the Norwegian COPD pilot: lessons learned and success factors for future scale-up Rune Werner Fensli, Centre of eHealth and Health Care Technology, University of Agder, Norway Discussion for validating the relevant Critical Success Factors
12.40	Lunch break
13.30	Telemedicine deployments in Scotland Stuart Anderson, University of Edinburgh, Scotland Discussion for validating the relevant Critical Success Factors
14.10	Wrap up, observations, suggestions Momentum SIG leaders and Diane Whitehouse, EHTEL Next steps Marc Lange, EHTEL
15.00	End / good-bye coffee

Figure 1: Workshop agenda

2.5 Content

2.5.1 Welcome

(Presentation at <http://bit.ly/1ueTG8p>)

The workshop began with a welcome to attendees both from Marc Lange (project coordinator) and Dr Andrea Pavlickova (coordinator of the EIP AHA B3 AA7 action group). Andrea gave an introduction of the European policy environment and EIP Action Group B3 and its work group AA7. She stated the purpose of the meeting: to establish the beginning of the validation process of the telemedicine critical success factors and, by extension, the text to be prepared for the Momentum Blueprint.

2.5.2 Presentation of the critical success factors

(Presentation at <http://bit.ly/1r3JJu7>)

Diane Whitehouse gave an overview of the 18 critical success factors developed by the Momentum consortium. This “living document” covered the four Momentum fields of strategy and management, organisation and management, legal regulatory and security issues, and technology and vendor relations. Diane reported that each of the day's presenters had been presented ahead of the workshop with specific requests and questions that they were requested to answer. They had been asked to reflect on specific examples of telemedicine deployment and on barriers to telemedicine deployment.

2.5.3 Tele dermatology

(Presentation at <http://bit.ly/1mAyrGa>)

Leonard Witkamp, a Dutch dermatologist and entrepreneur from the Netherlands, presented the case of the KSYOS TeleMedisch Centrum that he founded in 2005. The service is now running as a successful, self-financed service that, as of May 2014, had provided more than 250,000 tele-consultations and counted more than 3,000 GPs as clients. Leonard discussed which of the factors were relevant at each phase of his service development. During summer 2014, the service description of KSYOS has been included on the Momentum website, and is being referred to in the deliverables D4.2-7.2, and D3.2.

2.5.4 Telecardiology for Public Health Care of Cardiovascular Diseases

(Presentation at <http://bit.ly/1oA2tif>)

Claudio Lopriore and Giuseppe Di Giuseppe presented the tele-cardiology service, Cardio On Line Europe. It can provide remote diagnosis of cardiac patients based on a standard ECG and provides diagnostic and therapeutic advice to emergency workers and other healthcare professionals. It has been active in Puglia, Italy, since 2004. The presenters also discussed each success factor in turn. During summer 2014, the service description of Cardio Online Europe has been included on the Momentum website, and is being referred to in the deliverables D4.2-7.2, and D3.2.

2.5.5 Implementing the Norwegian COPD pilot: lessons learned and success factors for future scale-up

(Presentation at <http://bit.ly/VdN5vJ>.)

Rune Werner Fensli from the Norwegian Centre of eHealth and Health Care Technology at the University of Agder presented the COPD pilot that his region was implementing in the framework of the United4Health programme. He provided a detailed discussion of the challenges and opportunities so far, and linked them to the critical success factors. (During summer 2014, it was decided to use this Norwegian site as a location to test the Momentum critical success factors and blueprint – cf. D3.3).

2.5.6 Telemedicine deployments in Scotland

(Presentation at <http://bit.ly/1sDhsXT>.)

Stuart Anderson from the University of Edinburgh made a presentation on telehealth in Scotland and gave some background on Scottish policy environment before discussing the "Living it Up" programme in detail. He offered a number of additional suggestions for success factors that the consortium will explore taking into account, including a consideration of failure criteria, the need for privacy by design, and the idea of a sustainability plan early on.

2.5.7 Wrap up, observations, suggestions

Diane Whitehouse moderated the wrap up. She invited each SIG leader to react to the implications of the day's work either for their own set of critical success factors or for the 18 Momentum critical success factors as a whole.

- SIG 1 picked up on a number of important issues expressed both on 14 and 15 May 2014, and expressed its keenness to adapt its work as a result. Rachele Kaye had made detailed notes on modifications to be made.

- SIG 2 also made a number of observations that related to organisational change, and saw numerous implications of the workshop outcomes for its work.
- SIG 3 suggested that the implications for its work were to acknowledge the diversity involved in telemedicine deployments, and therefore to discuss some legislative or regulatory-related details in a more generic manner. This SIG also showed interest in the notion of a maturity model, and the phasing/timing of changes to be made in telemedicine deployment.
- SIG 4 viewed the day's work as a good "stress test" for the critical success factor findings and saw the need for some small modifications. Overall the importance of assessing and distinguishing whether a case is a public sector case or an entrepreneurial/business case needs to be made. SIG 4 will need to pay attention to some technical issues. Commissioning/procurement could be added as a critical success factor to the factors implicit in technology/vendor relations.

All four SIGs agreed that the blueprint needs to better distinguish whether a case is a public sector case or an entrepreneurial/business case. There was also agreement that the critical success factors are not a static checklist but need to be considered within the *process* of deployment. Going forward, the SIGs will move towards a less silo'ed approach, with all SIG members working together in a more collaborative team. There was a commitment to convene a dedicated working session to be held during summer 2014, in which the consortium would work together to write/edit the overall blueprint (this EXCO workday was eventually held on 13 August 2014). Overall, the critical success factors need further validation through their being tested in such other projects and initiatives as e.g., United4Health and/or in the European Innovation Partnership for Active and Healthy Ageing.

2.5.8 Next steps

Marc Lange set out a timeline for the following steps which included a template for the writing of the next deliverable D3.2 until end August 2014, the preparation of the validation work and the test phase of Momentum during autumn 2014. A Momentum EXCO was to be held within the next two working weeks in order to make decisions on timing and actions.

2.6 Follow up

Following the workshop, all PowerPoint presentations were posted on the Momentum internal project management website.

3. Outreach

Momentum's outreach efforts have followed a plan that foresaw three concentrated marketing pushes that would be based on specific project milestones over the 2012-2014 timelines. The first marketing push happened in fall 2012 when the consortium solicited information about telemedicine deployments through the Momentum online questionnaire; the second was planned for the first public release of the blueprint; and the third in preparation of the final conference and release of the blueprint.

Because of adapted project timelines, the second marketing push was postponed to 2014. To compensate, the consortium developed additional website content not foreseen in the original plan: a series of telemedicine testimonials and a set of country and a set of service descriptions (based on its work in D3.1) describing individual successful telemedicine deployments and the policy environment. Both are discussed in sections 3.1.1.1 and 3.1.1.2 of this document.

The second Momentum marketing and communication push took place in May 2014, with the release of the *18 Critical Success Factors*. With this marketing push, the consortium was able to build on the solid ground work laid, and communicate to audiences that had been built up through its mailing list, social networking sites, and in person. This effort led to a sharp rise in interest and awareness about the project.

3.1 Activities

Below is a detailed description of efforts and results of activities and their impact. It focuses on eight areas of Momentum communication work: the website; media releases and newscasts; social networks; dissemination events; the project's second communication push; dissemination events; other communication activities; and network development.

3.1.1 Website

The Momentum website (www.telemedicine-momentum.eu) went online in June 2012 as the main public communication hub for the project. It has featured information (news, events, resources) for telemedicine doers, and has served as a gateway for the contributions to the online questionnaire to gather information about the deployment of telemedicine services.

While the website featured periodic updates about project activities and kept its news and events section reasonably current, there was a need of engaging technical content. The project therefore developed two additional strands of content that strengthen the case for telemedicine deployment: a set of telemedicine testimonials (<http://telemedicine-momentum.eu/?p=1174>), and the telemedicine country and service descriptions (<http://telemedicine-momentum.eu/?p=994>).

3.1.1.1 Telemedicine testimonials

In February and March 2014, the consortium and specifically WP2 finished work on the telemedicine testimonials, a series of almost 20 descriptions, anecdotes and patient testimonies of telehealth interventions that had made a positive difference in patient care. The descriptions were initially collected by the *Campaign for Telehealth in support of Integrated Care*, an initiative launched in 2011 to promote telehealth by a coalition of Brussels-based membership associations. This coalition was joined by AIM (the

International Association of Mutual Benefit Societies), EHMA (European Health Management Association), the European Patients' Forum (EPF), COCIR, the Continua Health Alliance, EHTEL, and the European Hospital and Healthcare Federation (HOPE).

After the initial collection effort, the initiative withered, leaving behind an unedited set of testimonials collected from all over Europe.

Momentum offered an opportunity to revive this effort, given that many of these organisations were either consortium members or later joined the Momentum network. At the same time the testimonials added vital technical content to the website and made it more attractive. The associations agreed that the Momentum website would be an appropriate vehicle to publicise the testimonials. Thanks to editorial support from Intel and a sustained effort by WP2 to edit and convert the website, the testimonials were put online in February and March 2014 at <http://telemedicine-momentum.eu/testimonials/>, with links and promotion on the Momentum website and social media.

3.1.1.2 Country and service descriptions

After the knowledge gathering exercise in 2012 and early 2013, Momentum delivered report D3.1 in April 2013. It summarised the responses to the online questionnaire and set out a plan for the Momentum special interest groups to analyse and further distil the findings from this questionnaire survey as support for the eventual blueprint.

In the analysis, the consortium determined that, while all services had been asked to discuss the overall conditions in their countries for telemedicine, the project should synthesise these country descriptions with the help of country "champions" drawn from within or outside the consortium. The result was a series of country descriptions that were developed over the course of 2013 and were submitted to Momentum in time for the interim review in September 2013. As a result of their perceived usefulness, it was decided to upload them to the Momentum website.

At the same time, the project also developed service descriptions of all telemedicine deployments that had responded to the questionnaire, primarily with the purpose to assist the SIGs in their analysis of the responses to the Momentum questionnaire. The consortium members found this overall service description material useful for their understanding of the overall telemedicine deployment findings. It was determined that a selection of these descriptions, too, merited their inclusion on the Momentum website. They were further edited and adapted for the website. This initiative was launched in April 2014, and has continued throughout summer 2014.

3.1.2 Media releases and newscast

To motivate users to come to the Momentum website and to drive web traffic, the website has been complemented by two forms of "push" media. The most important of these has been the periodic newscast sent to a recipient list, which consists of two lists:

- 1) The Momentum consortium and network (at a minimum one person per organisation but sometimes including four or more); and
- 2) The mailing list built through a signup facility to news, which has been on the home page since the website's inception. People interested in receiving updates from the Momentum project can leave their email address there.

By June 2013, the list included 56 email addresses. By the end of August 2014 this number had swelled to 240. Between May and August the number grew by 70 people.

So far, Momentum has sent four newscasts to a growing list of recipients:

1. 28 March 2013: “Momentum session at conhIT in Berlin on 9 April 2013” (101 recipients).
2. 25 April 2014: “Release of the critical success factors for telemedicine deployment in Athens next month” (165 recipients).
3. 14 May 2014: “Eighteen critical success factors for deploying telemedicine” (172 recipients).
4. 8 August 2014: “Important dates and events after the summer” (242 recipients).

Figure 2 features an example of a Momentum newscast from the Momentum newsletter.

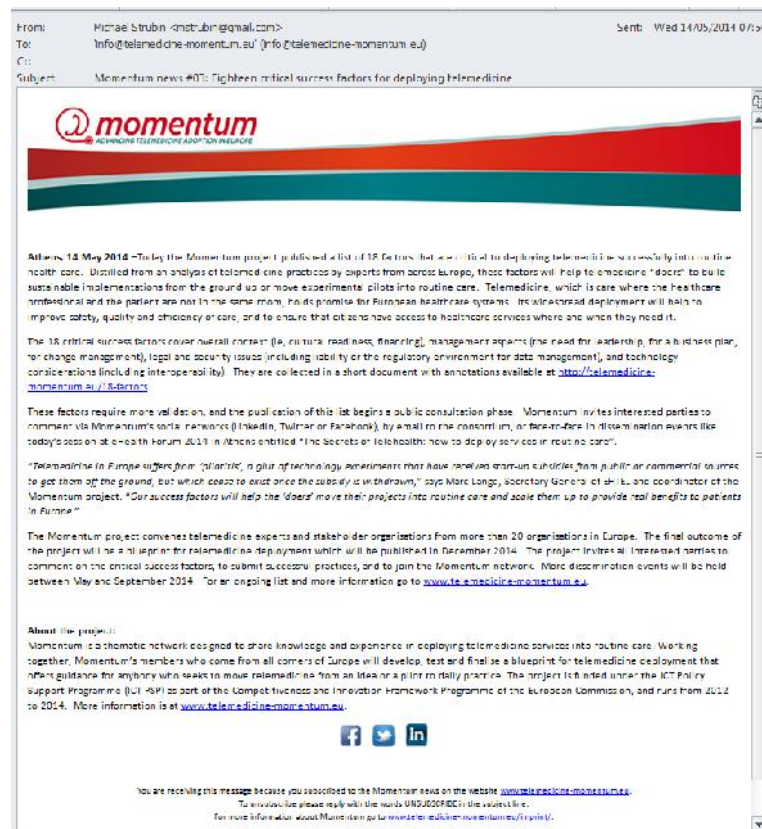


Figure 2: Example of a Momentum newsletter issue

The overall growth of the mailing list is indicative of the success of all efforts to drive traffic to the website, and the spurt after May 2014 is illustrative of the larger positive interest in the *18 Critical Success Factors*. The dissemination push was diminished in the summer of 2014, given the degree of absences on vacations of the consortium members and European people at large. The final months of the project will, however, see at least three more newscasts: for the release of a refined version of the success factors, for the final workshop/conference in November 2014, and for the final version of the Blueprint to be published in early 2015.

3.1.3 Social networks

The Momentum presence on social networks, linked to the Momentum website, have further developed and their reach has grown since June 2013. Momentum's presence on Facebook, LinkedIn and Twitter are described here.

3.1.3.1 Facebook

The Facebook page of the Momentum project has been active since August 2012 at <https://www.facebook.com/telemedicinemomentum>. The project has periodically posted messages and updates, both of social and topical nature. The metric for Facebook is how many “page likes” there are (users who “like” the Momentum page will see Momentum’s updates in their newsfeeds), and how many posts are “liked” or “shared” (meaning Momentum posts will then also be seen by their “friends”). As such, Facebook is more “passive” than LinkedIn, where users can join in discussions. At the same time, “liking” may be easier, and therefore be done more often, than joining a discussion.

Overall there has been growth and reach on Facebook: from an initial 10 “likes” in June 2013 there are now, as of late August 2014, 59 “likes”. Passing the critical milestone of 30 “likes” allowed access to Facebook’s “Insights” with aggregate user statistics for individual posts (without yielding personal information). This type of reach and the metrics may make Facebook a surprisingly effective tool for dissemination, at least in Facebook’s demographic group.

3.1.3.2 LinkedIn

Momentum’s open LinkedIn group “Telemedicine Momentum” went online in August 2012, at <http://www.linkedin.com/groups?home=&gid=4572526>. In June 2013 the group had 24 members, a number that grew to 69 in August 2014. The project posted periodic updates as discussion starters, although few posts sparked rejoinders from members who are not part of Momentum’s executive committee. No real topical discussions ensued. Instead, the key benefit of LinkedIn has become more like Facebook’s: the fact that a post shows up on the network’s newsfeed, and a “like” of a post can expand that reach exponentially by making it visible to users’ professional networks.

As a result, the initial intention to use LinkedIn as an open, “active” discussion forum for Momentum to complement its own internal project discussions has not been successful.

The usefulness of LinkedIn has been, like Facebook, to serve as a generator of visibility. Judged on these terms, LinkedIn may be less effective than Facebook as a visibility generator, given that Facebook’s “stickiness” (the rate and frequency at which people go to the website and consult their newsfeeds) is considerably greater than LinkedIn’s. At the same time, LinkedIn’s default settings usually generate an email alert when there are new group discussions, which may drive users to go back to the site. Anecdotal comments suggest that the audiences for the two social media are different. This indicates that both sites have their merits, thus justifying the use of both channels.

3.1.3.3 Twitter

The Momentum account on Twitter (http://twitter.com/TM_Momentum), a microblogging service with a growing following, complements the Momentum accounts on the two social networks, Facebook and LinkedIn. This Twitter account was also established in August 2012 and had 20 followers by June 2013. By the end of August 2014 Momentum had attracted a total of 63 followers, including a number of serious Twitter users and multipliers. Thanks to that “resonance chamber”, the 34 Momentum tweets led to about an equal number of mentions on Twitter. More than 25 times, a tweet was “favourite-d” (the Twitter equivalent of “liked”) or re-tweeted.

The Twitter account shows that content in dissemination matters. While Momentum twittered about events, sessions and other general telemedicine developments, it started

to matter in the “twitter sphere” when it published the *18 Critical Success Factors* on 14 May 2014: about two-thirds of all Momentum Twitter activity came after the release of the success factors.

3.1.4 Dissemination events

Momentum’s first two dissemination events were held during 2012 and early 2013: at ALEC/Luleå on 20 June 2012, and on 9 April 2013 at conhIT/Berlin.

The project’s third dissemination event was held at the European Telemedicine Conference on 29 October 2013 in Edinburgh. The session, entitled “State of Telemedicine Across Europe”, discussed the impasse in telemedicine deployment. It gave a preview of Momentum’s critical success factors as a guidance document for telemedicine doers. It also introduced for the first time the combination of the eventual blueprint with the self-assessment tool TREAT. Presenters included George Crooks (NHS 24/Scotland), Petra Wilson (Cisco) and Marc Lange (EHTEL/Momentum coordinator). Presentations are available on the Momentum website at <http://telemedicine-momentum.eu/?p=884>.

The fourth dissemination session came at the eHealth Forum in Athens on 14 May 2014. The session played a preparatory role for the third workshop of the 15th on the following day. At this session, titled “The Secrets of Telehealth: how to deploy services in routine care”, the *18 Critical Success Factors* were officially launched and introduced. All SIG leaders (Rachelle Kaye/AIM, Peeter Ross/eTervis, Ellen K. Christiansen/NST, and Tino Marti/TicSalut) presented their SIG work, after an introduction by Momentum coordinator Marc Lange. Prof. Steffen Sonntag from Deutsche Patientenhilfe offered a critique of the success factors from a practitioner perspective. The session was moderated by Andrea Pavlickova and attracted an audience of about 70 people; there was a lively question-and-answer session with input from patients’ associations and the Danish health authority, which informed the workshop on the following day. The event was also later reported in the eHealth Forum newsletter.

eHEALTH FORUM WEDNESDAY 14 MAY 2014 ISSUE 03

THE SECRETS OF TELEHEALTH HOW TO DEPLOY SERVICES IN ROUTINE CARE

For decades, telemedicine and telehealth projects have been receiving a lot of attention from innovative healthcare professionals. However, only a few projects have successfully shifted from lab to routine care. Ever fewer have gone from small- to large-scale deployment. Lack of clinical evidence, user adoption, reimbursement and business models have often been identified as the main explanations for this situation. An element that has been much less studied is the lack of deployment method. Unquestionably, this is also a pitfall. Several organisations and key players in telemedicine across Europe have decided to join forces. They have launched the Momentum project to work on how to deploy telemedicine. By analysing those initiatives which have been successfully deployed and identifying the reasons why they were successful, the project is funded under the ICT Policy Support Pro-

gramme (ICT PSP) as part of the Competitiveness and Innovation Framework Programme of the European Commission.

This session was the first opportunity to access the initial results of the project, a list of 18 critical success factors that cover overall context (i.e. cultural readiness and financing); management aspects (the need for leadership, for a business plan, for change management); legal and security issues (including liability or the regulatory environment for data management); and technology considerations (including interoperability). They are collected in a short document with annotations available at <http://telemedicine-momentum.eu/18-factors>.

These factors require further validation, and the publication of this list begins a public consultation phase. Indeed, according to the first of this session’s speakers, Marc Lange, Secretary General of EHTEL and coordinator of the

Momentum project, “Telemedicine in Europe suffers from ‘pilotitis’, a glut of technology experiments that have received start-up subsidies from public or commercial sources to get them off the ground, but which cease to exist once the subsidy is withdrawn. Our success factors will help the ‘doers’ move their projects into routine care and scale them up to provide real benefits to patients in Europe.”

Rachelle Kaye (AIM), Ivacabi Healthcare Services (Israel) and Peeter Ross, eTervis (Estonia) followed with presentations on the managing aspects of telemedicine deployment, while Ellen K. Christiansen, Norwegian Centre for Telemedicine (NST) analysed the legal, regulatory and security issues. Tino Marti, TicSalut (Spain) presented the ICT perspective. Finally, Dr. Steffen Sonntag, Gesellschaft für Patienten und Life DG² mbH, Munich, Germany presented the case of the “German society for patients assistance” (DUP).

Figure 3: Article on the dissemination event in the eHealth Forum newsletter

All presentations are available at <http://telemedicine-momentum.eu/?p=1310>.

3.1.5 Second communication push (May/June 2014)

The dissemination plan for Momentum foresaw three marketing pushes: the first was a call for questionnaire contributions in year 1; the second is for the initial blueprint version and a call for its validation; and the third for the final conference.

Momentum launched the second marketing push with the launch of the *18 Critical Success Factors*. The constituent elements of the marketing push were:

- The finalisation of **the document** *Momentum 18 Critical Success Factors for Telemedicine Deployment* in early May 2014.
- A **media release** developed and embargoed for 14 May 2014 but disseminated already a week ahead of the launch within the consortium and to key media outlets.
- A **public dissemination session** on 14 May 2014 at eHealth Forum in Athens, along with the use of available media channels (including a conference newsletter).
- **Promotion** of the document on the Momentum website, the mailing list (Momentum News #03), and all social network channels.
- A series of **presentations** of the *18 Critical Success Factors* at conferences and events in May and June 2014, including presentations at:
 - European Wound Management Annual Conference, Madrid, 16 May 2014 (around 70 participants).
 - ENGAGED workshop “Mutual Learning Strategies and Tools”, Canterbury, Kent, England, 3 June 2014 (around 100 participants)
 - Scottish Learning Event “Telehealth and Telecare Supporting transition, integration and innovation” at Perth, UK, 18 June 2014 (around 50 participants)
 - Digital Services World Congress, London, UK, 4 June 2014
 - EHMA Annual conference, Birmingham, UK, 24-26 June 2014 (around 30 participants)
- **Network communications** among Momentum’s consortium members, including:
 - Presentation at TSA Annual General Meeting (100 delegates) in Manchester, May 2014.
 - Presentation about Momentum success factors at an internal Continua European membership call (June 2014).
 - Momentum presentation at NST stakeholder workshop, June 2014 (100 participants).
- **Multiplication** of Momentum’s efforts through consortium websites, news channels and social networks, including:
 - CATel: Article “Momentum, un ‘réseau de réseaux nationaux’”, Portail Telesanté at <http://bit.ly/1pzzOUw>
 - CPME: Article in the June 2014 quarterly newsletter <http://bit.ly/1jCSXoE>
 - ZTG: Article “EU-Projekt Momentum identifiziert 18 Erfolgsfaktoren für die Telemedizin” in the June 2014 Newsletter.

A full list of communication initiatives in the second marketing push is included in the appendix 1.

What was the impact of this second communications push? An estimated more than 1,000 people heard about Momentum in May and June 2014 by attending an event where

Momentum presented. Many of those have then gone to the Momentum website to download Momentum document themselves. From the website statistics it is evident that May 2014 was a watershed moment for Momentum, with the number of visitors to the site jumping nearly threefold. The continuing dissemination activities, both online and offline, have meant that interest in the website stayed at a respectable level over the course of the summer (see Figure 4).

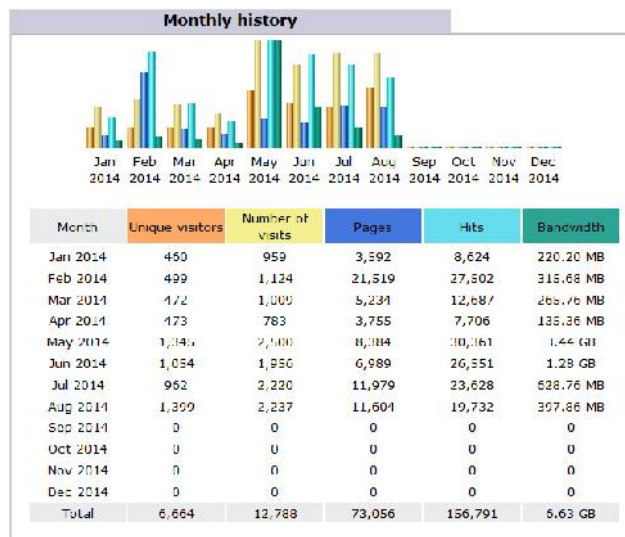


Figure 4: Momentum website stats

The compelling role of the critical success factors is also illustrated by another statistic: the pdf document was downloaded from the Momentum website 430 times; the nearest other pdf document, a presentation, was downloaded only 49 times.

Facebook’s Insights statistics offer another metric to gauge the impact: a Facebook post on 14 June 2014 related to the launch of the *18 Critical Success Factors* was liked or shared 11 times. As a result, the post was seen by 227 users consulting their newsfeeds or other Facebook content.

3.1.6 Other communication activities

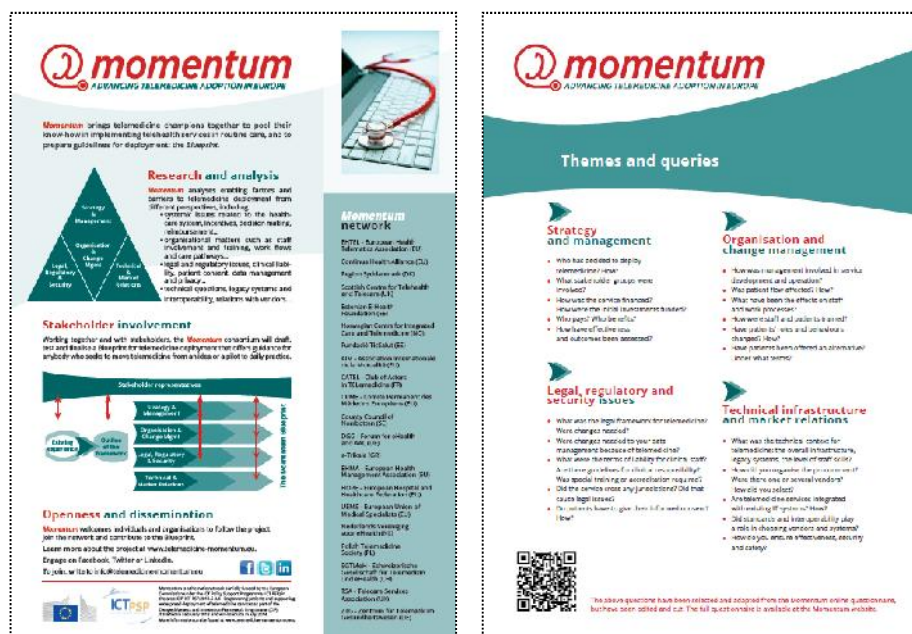


Figure 5: Momentum flyer (front and back)

It has been consistently handed out at all dissemination events and other opportunities. An embedded QR code allowed easy links to the Momentum website. The development of an update of the flyer with the 18 critical success factors was considered for the Athens workshop held in May 2014, but was decided against for time, cost and efficiency considerations: the success factors are being constantly refined and a production of new printed collateral would have been quickly outdated. The project will consider professionally producing a copy of the final blueprint or excerpts from it.

3.1.7 Network development

In late 2013 Momentum began to formally build and expand the Momentum network, a network of organisations that includes both Momentum consortium members and other organisations that wish to be part of the project and play a supporting role in the blueprint development and the project's communications. By the end of August 2014, in addition to the consortium members, this list of organisations included seven others:

- Agency for Health Quality and Assessment of Catalonia
- COCIR
- Czech National eHealth Center
- Institute of Hygiene and Tropical Medicine, Universidade Nova de Lisboa
- Mobile World Capital Barcelona
- SERGAS (Spain)
- University of Hull (UK).

The objective of this effort is to widen the project by the end of the project to increase not only the number of organisations but also to widen its geographical reach. Organisations in the network will serve as the primary audience for receiving and commenting on the "consolidated blueprint". The seven current additional organisations have locations that range from Brussels to the Czech Republic, Portugal, and Spain (three are based in Spanish autonomous regions).


3.2 Assessment and outlook





The publication of the *18 Critical Success Factors* has given the project enormous visibility and communication momentum. In its final months, the project will proceed at an accelerated pace, with publication of a new version of the success factors in October 2014, a final workshop planned for November 2014, and a final version of the blueprint expected in December 2014/January 2015. Communication and dissemination will ensure that project deliverables will be presented dynamically to the public, and that the project stays "in the news".


Appendix 1: Dissemination events and activities June 2013-June 2014

Date	Action (Media release, Presentation, Conference session, etc)	Place, audience	Responsible
28 June 2014	Article on Momentum	CATEL Newsletter (reaching all CATEL members, ~800 people)	Gérard Comyn (CATEL)
26 June 2014	Presentation on “Empowering Patients in Chronic Disease Management” with prominent featuring of Momentum	AIM workshop on chronic disease management in Bruges, Belgium	Rachelle Kaye, AIM
25 June 2014	Article “Momentum, un "réseau de réseaux nationaux"”	Portail Telesanté at http://bit.ly/1pzz0Uw	CATEL
25 June 2014	Conference presentation “Telemedicine in Europe: Are we addressing the right business models?”	EHMA Annual conference “Leadership in healthcare: from bedside to board”, Birmingham, UK, 24-26 June 2014	Luís Lapão, New University of Lisbon, EHMA
23 June 2014	Media release posted: Summary drafted on objectives and achievements on the Momentum project.	Issued on CATEL social media groups	Gérard Comyn, CATEL
19 June 2014	Momentum presentation	Norwegian stakeholder workshop (100 participants)	Wenche Tangene, University Hospital of Kristiansand

Date	Action (Media release, Presentation, Conference session, etc)	Place, audience	Responsible
18 June 2014	Momentum workshop	Scottish learning event "Telehealth and Telecare Supporting transition, integration and innovation" at Perth, UK	A. Pavlickova and D. Whitehouse, EHTEL
17 June 2014	Presentation at European INTERREG IVC project CASA local seminar	Brussels, Belgium	Marc Lange, EHTEL
14 June 2014	Article "Momentum Project: 18 Critical Factors for the Successful Deployment of Telemedicine into Routine Care"	CPME June 2014 quarterly newsletter going to > 1,000 members/subscribers, http://bit.ly/1jCSXoE	Constance Colin, CPME
6 June 2014	Momentum news item featured on project website	http://www.united4health.net/category/news	NHS24 (U4H coordinator)
4 June 2014	Presentation about Momentum success factors	Continua European membership call	Continua
4 June 2014	Presentation "Telehealth in Practice Across Europe"	Digital Services World Congress, London, UK	Marc Lange, EHTEL
3 June 2014	Momentum presentation	ENGAGED workshop "Mutual Learning Strategies and Tools", Canterbury, Kent, England	Marc Lange, EHTEL
3 June 2014	Momentum presentation	Engaged workshop "Innovation in shared care: lessons learnt" (80 participants), Kent, UK	Marc Lange, EHTEL
2 June 2014	News item "Momentum workshop: The secrets of telehealth - how to deploy services in routine care"	DG CNECT eHealth newsletter (link http://bit.ly/1nvysy1)	EC DG CNECT
1 June 2014	Article "EU-Projekt Momentum identifiziert 18 Erfolgsfaktoren für die Telemedizin" Notice about Momentum in the ZTG newsletter	ZTG June 2014 Newsletter, http://bit.ly/1pUBni1	ZTG GmbH

Date	Action (Media release, Presentation, Conference session, etc)	Place, audience	Responsible
27 May 2014	News item “18 factors to make telemedicine a success” 	DG CNECT eHealth newsletter <i>EU eHealth in Focus</i> (link http://bit.ly/1ji75Dd)	EC DG CNECT
22 May 2014	Presentation on Momentum	TSA Annual General Meeting (100 delegates) in Manchester	Trevor Single, TSA
21 May 2014	 Telemedicina Momentum: 18 pistas para evitar la pilotitis Tino Marti Health economist  Telemedicina: 18 pistas para evitar la pilotitis gestionclinicavarela.blogspot.com.es La versión actual, lejos de ser la definitiva, da una primera guía de los elementos a tener en cuenta cuando se pretende introducir un nuevo servicio de telemedicina y se quiere evitar que se quede en tan sólo un piloto, ya sea en el si de una...	LinkedIn post in Salud 2.0 group (>2,000 members)	Tino Martí, TicSalut
21 May 2014	Blog post “Telemedicina: 18 pistas para evitar la pilotitis”	Avances en Gestion Clinica (website) http://bit.ly/1kWovG4	Tino Martí, TicSalut
21 May 2014	Post of press release of the Momentum CSFs from Athens	Yammer Group of the EIP on AHA B3 Integrated Care, http://bit.ly/XyFvO9	Andrea Pavlickova, NHS24
20 May 2014	Article “Momentum – 3 rd workshop” [about Momentum 3 rd workshop in Athens and the publication of the success factors’ list]	HOPE e-newsletter (for HOPE members)	HOPE
19 May 2014	“La telecardiologia in Puglia salva la vita in pochi secondi” [full page article on telemedicine]	Sole24ore, Puglia	Via Cardio On Line Europe

Date	Action (Media release, Presentation, Conference session, etc)	Place, audience	Responsible
16 May 2014	<p>Momentum presentation</p> 	<p>European Wound Management Annual Conference, Madrid, Spain</p>	<p>Diane Whitehouse, EHTEL</p>
15 May 2014	<p>Session “Momentum workshop: The secrets of telehealth - how to deploy services in routine care”</p>  	<p>Newsletter at EHealth Forum, Athens</p>	<p>Marc Lange, EHTEL</p>
15 May 2014	<p>Tweet about the 3rd workshop in Athens, with link to the Press release “Eighteen critical success factors for deploying telemedicine”</p> 	<p>HOPE Twitter page @euhospitals</p>	<p>HOPE</p>

Date	Action (Media release, Presentation, Conference session, etc)	Place, audience	Responsible
14 May 2014	Article “The secrets of telehealth: how to deploy services in routine care”	eHealth Forum newsletter issue 03	eHealth Forum organisers
14 May 2014		Facebook post generating more than 200 page views	Continua
14 May 2014	Article “Eighteen critical success factors for deploying telemedicine”	On NST English website at http://bit.ly/XyMOW0	Eva Henriksen, NST
14 May 2014	Press release on http://www.ehealthnews.eu/	http://bit.ly/1hE2z6N	EHealth news
14 May 2014	Press release “Eighteen critical success factors for deploying telemedicine”	Posted on Momentum website and sent by email to 172 recipients http://telemedicine-momentum.eu/18-factors/	Continua
5 May 2014	Momentum news -by EHTEL: Release of the critical success factors for telemedicine deployment in Athens	Mailing list communication	Marc Lange, EHTEL
28 April 2014	Momentum presentation	Engaged workshop on healthcare innovation, Santiago de Compostela, Spain	Marc Lange, Diane Whitehouse

Date	Action (Media release, Presentation, Conference session, etc)	Place, audience	Responsible
28 April 2014	Presentation “Telehealth - From pilot to Routine care – CSF”	Galicia health Innovation International meeting - http://www.galiciahealthinnovation.com/?lang=en	Marc Lange, EHTEL
11 April 2014	Presentation “Telehealth - From pilot to Routine care – CSF” and contribution to proceedings	Med-e-tel – www.medetel.lu	Marc Lange, EHTEL
28 March 2014	Presentation “Recommandations pour la Commission Européenne au sein du projet européen MOMENTUM”	International Conference 'Telesanté 2014' (About 1500 attendees) http://bit.ly/1qO3LUO	Marc Lange, EHTEL
28 March 2014	Presentation “Telehealth - From pilot to Routine care – CSF”	Journée Télésanté – CATEL http://www.journee-telesante.com/	Marc Lange, EHTEL
27 March 2014	Presentation of latest Momentum developments	CATEL general assembly (attendance: between 50 and 80 people), Paris	Pierre Traineau, CATEL
1 February 2014	Article “Gathering momentum”	HORIZON2020PROJECTS:PORTAL Issue 1, Q1 2014	Marc Lange, Diane Whitehouse, EHTEL
18 December 2013	Momentum presentation	Meeting of the EHTEL Innovation Initiative	Marc Lange, EHTEL
23 October 2013	Presentation of latest Momentum developments	CATEL general assembly (attendance: between 50 and 80 people), Paris	Pierre Traineau, CATEL