



OASES

Promoting evidence-based reforms on medical deserts

D2.5

Report on Dissemination, Sustainability and Fostering Scalability and Uptake

29/02/2024





OASES

Promoting evidence-based reforms on medical deserts

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Executive summary

This deliverable is the final Report on Dissemination, Sustainability and Fostering Scalability and Uptake. It reflects on the challenges, opportunities and achievements during the dissemination and communication activities of the OASES project and formulates plans for sustainability and exploitation of the project outcomes.

Dissemination and communication work package (WP2) lead, Semmelweis University, carried out a comprehensive dissemination activity during the project lifetime. A number of communication channels were used in order to maximise project's visibility and share information about actual news, events and outcomes.

After the creation of the visual identity of OASES, the project [website](#) was set up, the main pillar of dissemination activities. Besides all important information about the project and the partners, it contains all public deliverables, event recordings, OASES Express newsletters and short videos about the implemented actions within the OASES project. Use of social media platforms highly supported the target group outreach and directed audience towards the website where more comprehensive information is available. X (formerly Twitter) was used as the most popular channel, and important information were posted on LinkedIn and Facebook platforms as well.

The main aims of the Dissemination strategy were:

- to have a complex, efficient dissemination activity reaching out to relevant networks in health workforce development through a number of channels;
- to map the stakeholders and to engage them into an active community facilitating knowledge transfer and exchange of experiences and evidence and
- to provide all relevant information to the network of stakeholders, and provide platforms for interaction.

With the communication and dissemination plans implemented, the aim has been reached. A successful stakeholder outreach was facilitated, and webinar participation shows that a wide audience for the OASES project was engaged, thereby achieving a real impact with OASES work in the health workforce field.

Purpose and scope of the document

The purpose of this deliverable is to summarize the dissemination activities of OASES in a detailed way and provide an insight on sustainability and ways of fostering uptake of the project results and outcomes.

WP2 was highly committed to ensuring the maximum visibility of the project and make sure to implement successful dissemination activities and reach the highest impact of the project outcomes. In the report, we aim to highlight the achievements of the work of WP2 together with the other work packages, who gave input to our activities.

In the first part of the document, we will report on the dissemination actions carried out during the project and we will describe the performance of each communication/dissemination channel that

were used for sharing information and outcomes of OASES: results, stakeholder outreach, analytics and index numbers.

In the second part of the report, we will highlight the sustainability plan and uptake of the project results. We will mainly focus on the sustainability of dissemination of project results, but we will also give an insight on the findings of WP5 in terms of sustainability analysis as well.

Dissemination activities during the project

When carrying out dissemination actions, our focus was to maximise the impact of the OASES project on the Member States' health workforce policies in relation to challenges in handling the medical deserts issues.

Throughout the project, we followed our dissemination plan, making adjustments when it was necessary. We carried out a mid-term evaluation of dissemination actions in M18. This survey showed us how our stakeholders evaluate our activities in certain communication channels.

In the last three years, we have faced some challenges. We noted that newsletter subscriptions did not increase the way we had originally planned. The mid-term evaluation showed, however, that the most popular channels for seeking information about the project are webinars and newsletters. The possible reason of not having a large number of subscriptions might be that all newsletter editions are available on the website, which allows users to read it without a subscription.

Furthermore, the communication and dissemination activity was challenged by the fact that, in this period, there were two other ongoing EU co-funded projects dealing with medical deserts ([AHEAD](#), [Route-HWF](#)). For this reason, the communication team deemed it necessary to approach the common target audience with more attention, not to overload them with information that is of a similar nature. We also adjusted our event plan accordingly.

We gladly noted, as a great achievement, that webinar participation increased very significantly. For our last OASES project webinar on 16 January 2024, we received over 100 registrations. In the last year of the action, conference presence also increased remarkably. This will be explained in detail in the document.

Website

The [OASES project website](#) provides a secure repository for storing and sharing project information, outcomes and deliverables.

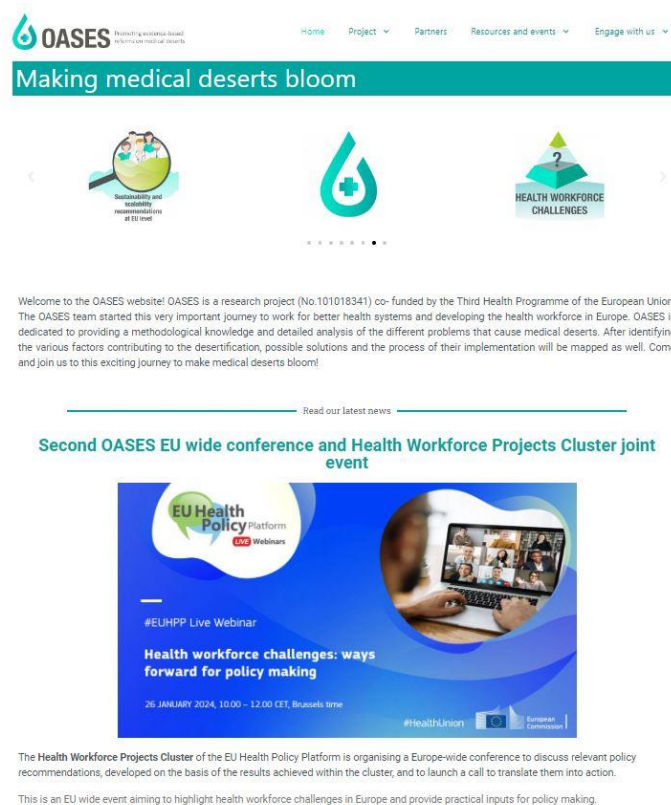


Figure 1 - Front page of the OASES website

As a central platform of the project, it plays the most important role in communication and dissemination activities. We designed the OASES website to be user friendly, easy to navigate and comprehensive to find all public information about the project.

It allows for measurements, and sharing links of items on the website is a way to reach a larger audience. For monitoring website traffic, we used the Google Analytics system.

The OASES [results](#) listed below are available on the website:

D2	OASES Initial leaflet
D3	Website
D4	Dissemination and communication strategy
D5	Mid-term dissemination report
D9	Interim evaluation report
D11	A potential spatial access measure tool package
D12	Report on a Scenario Building exercise based on data available in countries: Input parameters

D13	Output results analysis
D14	Framework for the data collection
D16	Report of the state of art of desertification in Europe and ways to mitigate desertification
D18	Framework for pilot studies
D19	Overview of the seven pilot sites as regards medical deserts

Figure 2 – OASES deliverables on the website

As indicated before, we have monitored the traffic and the performance of the website regularly throughout the project. In the figures below, we show the number of website users (the total number of people who visited the OASES website in the specified date range) and page views (a page view is recorded each time a user accesses a specific page, regardless of whether it is a new or a returning user).

In OASES we have a total number of users of 764, including both returning and new users. The total number of page views is 2.402.

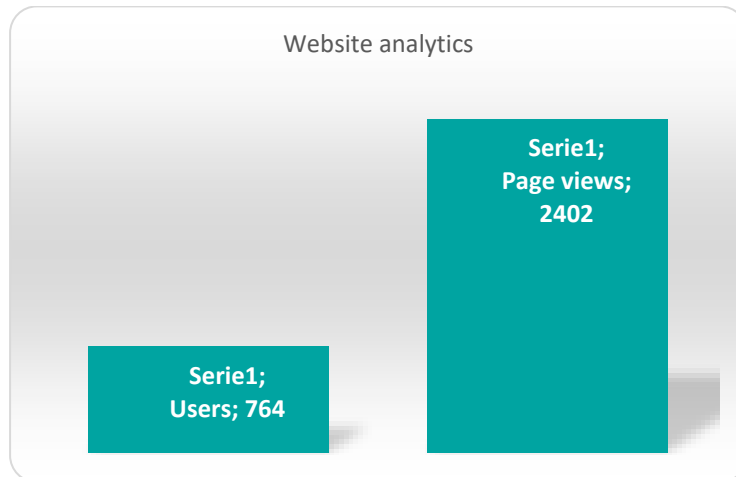


Figure 3 - Website users acquisition during the project

We have statistical figures about the demographic characteristics of our website visitors as well. These statistics include the location from where they visited the website, as well as information about their local language.

In the figure below, the top 10 countries from where website visitors came from are listed.

As it can be seen, the country of the coordinator, Italy, holds the first place. Belgium and Hungary follow with the same number of visitors (25). United States are in the top 10, at the 6th place, before France.

	Country	Users
1	Italy	84
2	Belgium	25
3	Hungary	25
4	Finland	20
5	Netherlands	19
6	United States	15
7	France	14
8	Norway	12
9	Spain	12
10	Cyprus	10

Figure 4 - Demographic details – last year of operation (top ten countries)

The OASES website will be maintained in the coming 5 years. The expectation is that, since as all results and event recordings will still be available, the number of website users will not drop drastically. The website supports the sustainability actions aiming to foster the uptake of the OASES results.

Newsletters and online events

Newsletters

When planning OASES events and newsletters, we had set a draft schedule at the start of the project. We were actively involved in communication with the other health workforce projects ([AHEAD](#), [METEOR](#), [Route-HWF](#), [TaSHI](#)) through the coordination meetings of the Health Workforce Projects cluster of the EU Health Policy Platform (EU HPP). After a couple of months of operation and consultations, we found that there was a need for rethinking the schedules. As there was an overlap of target audience with the sister projects, we wanted to avoid overburdening our followers with the information flow. In this manner, we aimed to coordinate and adjust event planning taking into account other projects' actions.

The Gantt chart (Figure 5) shows the originally planned newsletter campaigns and event schedule in green. Then the adjusted and realised plan is shown with dark grey colour.

We executed the planned 5 webinars with three own OASES webinars and participation of two EU HPP joint cluster events.

Year	2021												2022							
	Marcl	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Aug		
Tool	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	M13	M14	M15	M16	M17	M18		
Newsletters (6)							1				X									
Webinars (5)											X		1							
HWF Cluster webinars							1						2							
EU wide conferences										1										

Year	2023												2024					
	Sept	Oct	Nov	Dec	Jan	Febr	Marc	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Febr
OASES Project																		
Tool	M19	M20	M21	M22	M23	M24	M25	M26	M27	M28	M29	M30	M31	M32	M33	M34	M35	M36
Newsletters (6)																		
Webinars (5)	x		2				3		x		4			x			5	6
HWF Cluster webinars	x		2						x					x			3	x
EU wide conferences												x					2	

Figure 5- Planned and realised communication schedule

In our mid-term evaluation of OASES communication channels, we found that the newsletter is a strong communication channel, even though we do not have a really high number of subscribers as mentioned before (45). As we upload all issues to our website, it is likely that many of our followers read the newsletter from there without having a subscription. These people are not counted as subscribers and we cannot track their activities as users.

In OASES, we have published 6 campaigns of the “OASES Express” newsletter.



MAKING MEDICAL DESERTS BLOOM

OASES Express Newsletter
Fifth edition

Second OASES EU wide conference and EU HPP joint event, 26 January 2024



Good Practice Webinar: Enhancing access to health services in rural areas

At the end of 2023, **Giovanni Baglio** (scientific manager, AGENAS) presented about OASES project at the Good Practice Webinar, which aimed to provide a space for local actors to learn from peers about projects funded by those programmes and other initiatives and policies improving access to health services in rural areas.

Reflecting on the case of Italy he explained a broader interpretation of medical deserts, the dimensions of “effective coverage” and he emphasized the importance of the sustainability of results as well.

Perspectives



Figure 6 - OASES Express newsletter - excerpt

In the figure below, we can see the opening rate of each campaign. In the first campaign, we had a low opening rate as we kicked off with this channel. After that, we can see that the rate shows a sharp increase and most of the campaigns reached over 50% opening rates.

Edition	Date of campaign	Opening rate
1	24 September 2021	17,5%
2	7 November 2022	57,6%
3	6 March 2023	63,7%
4	13 July 2023	37,1%
5	5 January 2024	59%
6	February 2024	60%

Figure 7 - Opening rates of OASES Express editions

OASES online events

The preparation process for OASES events was precisely planned. Each post, news and email was carefully coordinated. We used the website, all social media channels, newsletters and email campaigns to promote the events. Before each event, partners were given a sample email invitation and were encouraged to send it to their network and share promotion posts in their social media accounts.

The first OASES EU wide conference, using the Commission’s Webex system, was held on the 10 December 2021. On the 1 March 2022, marking the first anniversary of the project, a webinar was organised using the Zoom webinar platform of Semmelweis University. This first event replaced the one that was originally planned in January.

The two first OASES events mentioned above were successful, with a total number of 121 participants. WP2 took care of the technical preparation of the events and participated in their conceptualisation as well.

Subsequently, two joint webinars followed, organised by the Health Workforce Projects Cluster: the first event was held on 20 September 2021, the second on 29 March 2022. In the two joint events, the number of participants were altogether 179. The joint events - where all five projects introduced their results and ongoing activities - also offered a great opportunity to discuss the project outcomes and to hear more about the progress of the sister projects.

On 15 November 2022, OASES organised its second own webinar, on the Zoom webinars platform, focusing on possible solutions to mitigate medical deserts, with a participation of 56 people. The last two events of OASES were held in January 2024. On 16 of January the third own OASES webinar introducing the preliminary results of the pilot projects was very successful, with 63 participants.

The second OASES EU wide conference was combined with the final EU HPP cluster joint event. This conference (titled “Health workforce challenges: ways forward for policy making”) was held on 26 January 2024, on the Webex platform of European Commission’s DG SANTE. These events always benefit from a comprehensive promotion campaign supported by DG SANTE, which results in a high number of registrations.

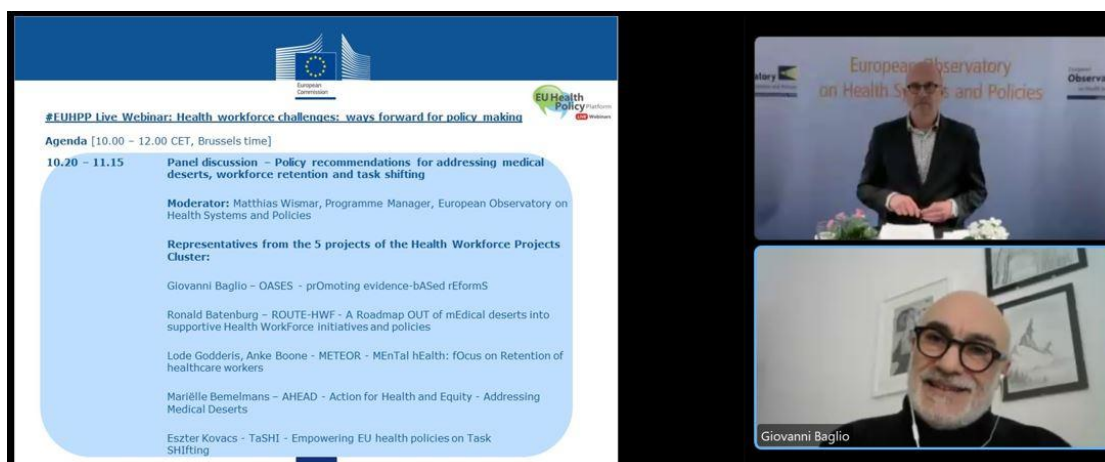


Figure 8 – Giovanni Baglio presenting at the second EU wide conference

With 424 registrations and 278 participation number this was a highly successful online event. The presentations and the recording of the event are uploaded to the OASES website.

EU Health Policy Platform



The Health workforce projects cluster network serves as an online hub and professional information sharing platform for all five health workforce-related projects ([AHEAD](#), [METEOR](#), [OASES](#), [Route-HWF](#), [TaSHI](#)). The cluster works with the moderation of the five health workforce projects in rotation. Originally, projects planned to have two months moderation rounds each, however, as time went by, this plan faded and access requests and posts also started to decrease. The activity in this platform was modest. Current number of network members is 64.

Social media

X (Twitter)

In the communication and dissemination activities, we used OASES [Twitter \(now X\)](#) the most frequently. With short messages and images, it offered a good opportunity to increase OASES visibility, engage more audience and build recognition for the OASES “brand”.

In former Twitter (now X), OASES project has 72 followers.



Figure 9 - Post with 672 tweet impressions

We carefully planned our “tweet” post, as this platform can be overwhelming, and we aimed to avoid information overload. We have posted own tweets and also used the platform for re-tweets, meaning that we shared those posts that we deemed to be more important and relevant to the project’s focus.

In the table below, we summarised our achievements in the Twitter (X) platform with OASES.

We had 66 own tweets and about the same number of reposts. Figure 10 shows the number of tweet impressions and profile visits that we have reached.

Metrics	Number	Explanation
Total number of original tweets	66	Number of tweets from the OASES Twitter account
Tweet impressions	17.932	Number of times the OASES tweets were viewed
Profile visits	8.554	Number of times users visited OASES profile page

Figure 10 - Twitter (X) original posts analytics

Facebook and LinkedIn

Facebook and LinkedIn platforms were also used in communication activities of OASES. Own project accounts in these platforms were not created. WP2 used the institutions’ accounts for sharing project information. Project partners were regularly informed about latest posts and invited to share project information on their own social media channels.

Semmelweis University Health Services Management Training ...
 572 followers
 1mo • 🌐

OASES project is organising a webinar focusing on the Introduction of the results of OASES pilot studies.

...see more



Figure 11 - OASES post on SU Health Services Management Training Centre account

In terms of users outreach, OASES achievements on the abovementioned two platforms are lower, as these were mainly used for sharing OASES event invitations and registration information. During the project, users outreach on Facebook was 2744, on LinkedIn 948.

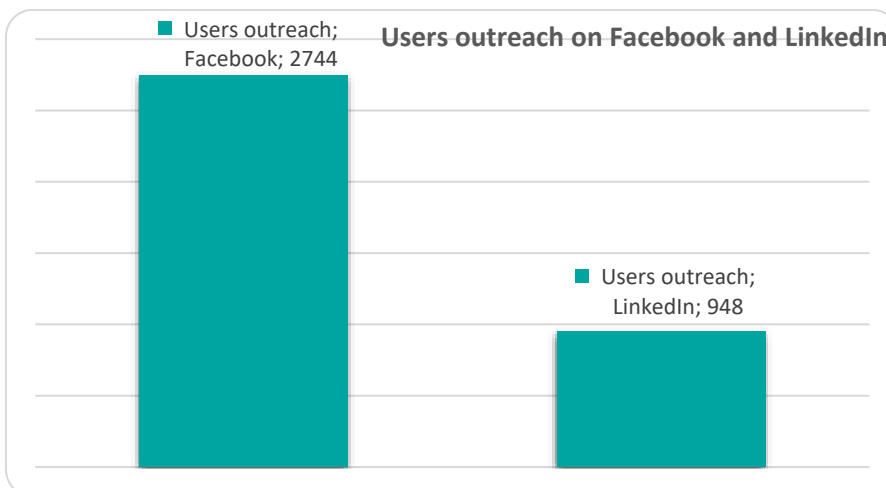


Figure 12 –Facebook and LinkedIn users outreach

Short videos – which are no longer than 5 minutes- are incredibly versatile tools for promotion of project activities. Short videos quickly grab viewers' interest and hold it longer than text or static images. These videos are easily accessible on different platforms – over a YouTube link - and strongly support showcasing the essence of project. WP2 created introductory and closing animated images for the short videos and recordings, as a brand mark of OASES. These intro and outro animations were used also in recordings of OASES webinars, thereby giving a frame and brand look for the videos that strengthen the image of the project itself.



Figure 13 - Intro of OASES videos

These short information videos encompass the core content related to vertical work packages. The first video involved WP1, namely [Paolo Michelutti](#) former project manager, who shared his vision about the OASES project. Secondly, WP4 leader [Véronique Lucas-Gabrielli](#) shared information about the challenges and measurement methodology of medical deserts. The third short video was recorded with [Moona Huhtakangas](#), WP5 leader, about the importance of primary care and organisational aspects of medical deserts. Finally, WP6 leader [Monica Georgiana Brinzac](#) explained the preliminary results of OASES pilot projects.

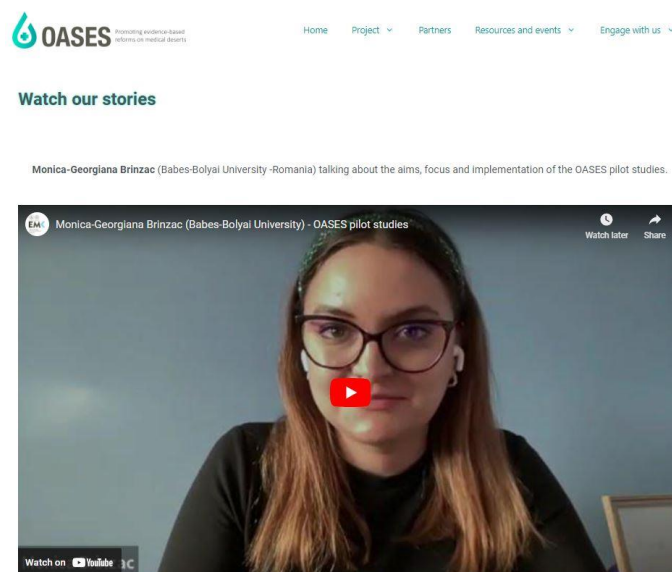


Figure 14 - Watch our stories page on OASES website

Conferences

OASES partners have actively participated in international on-site conferences in the second half of the project:

- On the 25 January 2023, OASES partners were present at the workshop of the **Health workforce Projects Cluster of the EU Health Policy Platform in Utrecht**. Members of the five projects discussed synergies, common goals and collaboration opportunities for the future.
- **Monica-Georgiana Brinzac**, OASES WP6 leader (Babes-Bolyai University), presented OASES at the 17th World Congress on Public Health, on 2-6 May 2023, in Rome.
- OASES WP4 partner, **Véronique Lucas-Gabrielli** (IRDES), presented about OASES in the annual EHMA conference 5-7 June 2023 in Rome, in the abstract session “Health systems’ policies and regulations”. The conference was a great opportunity to present the methods and indicators that we used to measure medical deserts within the OASES project.
- On 13-14 July 2023, **Federica Vitello** (AGENAS), former OASES project manager, presented the OASES project at the meeting of Chief Medical Officers, Chief Dental Officers and Chief Nursing Officers in Toledo, Spain.



Figure 15 –Federica Vitello’s presentation in Toledo

- On 30 November 2023, **Giovanni Baglio**, OASES scientific coordinator (AGENAS), presented about OASES project at the “Good Practice webinar - Enhancing access to health services in rural areas”. The focus of his presentation was: Mapping availability, quality, and accessibility of health services for evidence-based solutions.

- On 1-2 February 2024 at the [JA HEROES](#) “WP & task leaders meeting”, the OASES project was presented by **Marcello Cuomo (AGENAS)**, with the aim of channelling project outputs into the HEROES project, which started in 2023 and will be finalised in 2026.
- [H-PASS](#) project is also considering OASES for possible synergies.

Project leaflet

The OASES leaflet is the main publicity element of the project dissemination. The project leaflet is used to raise awareness about a project, to provide an overview of its goals and objectives, and to attract stakeholders. It is available online, but it can be printed out and distributed at events, as well as emailed and thus disseminated to potential stakeholders.

OASES Promoting evidence-based reforms on medical deserts
2021-2024

MAKING MEDICAL DESERTS BLOOM

A lack of general practitioners in a given territory. Difficulties in attracting nurses to a rural community. Challenging replacement of retiring medical doctors. Lengthy waiting times and long distances when accessing health primary care services. These issues can be condensed in two words: **medical deserts**.

A number of people in Europe, to varying extents, live these challenges and their consequences on a daily basis. There are territories in Europe where inhabitants lack proper access to healthcare.

While the expression “medical desert” may sound simple, it actually refers to a complex phenomenon, that is yet to be fully investigated and tackled in its scope and modes.

The OASES project, led by a consortium of European partners, has the ambition to bring research and policies in this field a step further. The mission of OASES is to represent a source of knowledge on European medical deserts and to support European health authorities in developing a methodology to identify and analyse factors related to the design and implementation of reforms on medical deserts.

The project will act to:

- enhance and share knowledge and local experiences on medical deserts;
- develop tools and methods useful to sustainable policies on medical deserts at EU level;
- organise dialogues and events to present lessons learnt from pilot studies;
- provide useful materials for healthcare authorities and providers engaged in health workforce planning and policy making.

The OASES project in numbers:

3 years (2021-2024)
7 partners and 1 affiliated entity
6 EU Member States; 1 non-EU State
7 pilot studies

HEALTH WORKFORCE CHALLENGES
SHORTAGES
MALDISTRIBUTION
ACCESSIBILITY BARRIERS

HWF POLICY REFORMS
SKILL MIX
DIGITAL SOLUTIONS
TASK SHIFTING

ANALYSIS OF THE DESERTIFICATION ANTECEDENTS

MEDICAL DESERT IDENTIFICATION IN LOCAL SITES

CONSENSUS AT LOCAL LEVEL ON SOLUTIONS AND MITIGATION ACTIONS

MEASUREMENT TOOLS

POLICY ACTIONS ANALYSIS

SUSTAINABILITY AND SCALABILITY RECOMMENDATIONS AT EU LEVEL

Coordinator:
Agenzia Nazionale per i Servizi Sanitari Regionali (IT)

For more information please visit us www.oasesproject.eu or send e-mail to oasesproject@agenas.it.

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Figure 16 –OASES project leaflet

End of project booklet

The End of project booklet for the public, will summarize and disseminate the main results and outcomes of the project in a laymen version, which serves wider outreach and engagement. The booklet serves as a record of the project's life, capturing its objectives, methods, key findings, achievements, and any challenges encountered. It is a valuable tool for future reference, and aims at showing project's achievements in a visual and easily readable way. At the same time, the booklet lays the basis for future projects or initiatives arising in the field of medical desert mitigation strategies. It presents recommendations and identifies areas for further exploration.

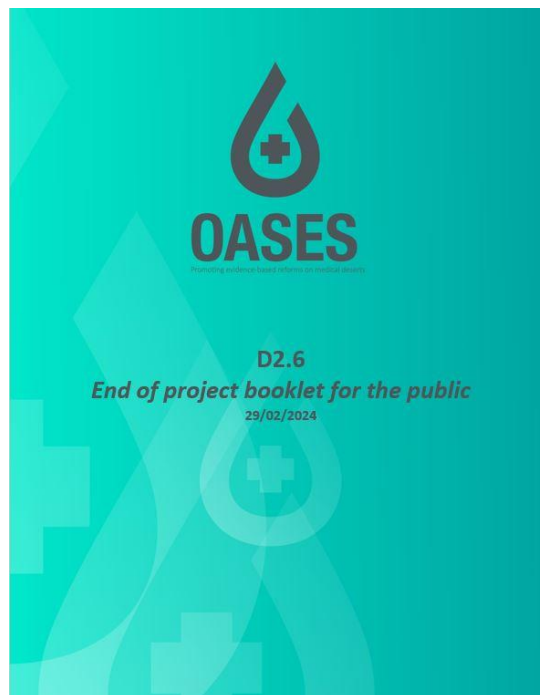


Figure 17 –End of project booklet for the public

Sustainability and uptake of project results

Planning sustainability

We shall differentiate between sustainability of policy actions in OASES countries and the sustainability in relation to dissemination.

Sustainability of dissemination refers to the long-term effectiveness and impact of disseminating knowledge, information, or innovations of the project. It encompasses the ability to continue sharing and promoting the desired outcomes of a project over time, ensuring that the intended benefits are sustained and the target audience is reached.

Sustainability in terms of results of the project aims to achieve positive and enduring changes in health workforce planning policies that extend beyond the project's lifespan, enabling project interventions to continue producing positive effects over time.

Our WP5 partner analysed sustainability from the policy point of view and found, among others, the following peculiarities:

“Sustainability of the OASES countries’ ways to mitigate medical deserts is generally in a good state. Most countries (Cyprus, Finland, France, Moldova, Romania) address the challenge of medical deserts from all aspects of sustainability. In principle, most countries are potentially able to address the many sides of the medical desert phenomenon. All OASES countries aim to increase public investment in health workforce and/or to optimize the use of public funds by introducing innovative policies to increase the health workforce’s availability, accessibility and/or productivity, and prioritizing investment in primary health care workforce. The countries often focus on planning policies related to human resources for health with an intersectoral approach by engaging key stakeholders, as all of them but Italy have measures targeting these factors. Also, all countries except Italy aim to recruit and retain more health workforce and, in many cases, direct special attention to rural and underserved areas, where medical deserts are often identified. Lastly, optimizing the performance of the health system by contributing in some ways to more efficient services is present theme in all but Moldova’s actions.”

In this report, we summarise those dissemination options that may support the positive policy environment with a final goal to turn policy into action.

There are different ways to keep project findings alive and make sure that those can serve as a basis of further thinking. One basis of dissemination is the [OASES website](#), which will be maintained in the coming 5 years. On the website, all public deliverables of the OASES project are available.

Policy dialogues

As one of the aims of OASES was to formulate recommendations that can help health authorities addressing medical deserts, national and international policy dialogue sessions or forums can be an important platform for sharing OASES findings and pursuing its purposes.

While implementing pilot projects, OASES partners reached out for different levels of stakeholders. Policy Board members were involved in the project and regularly informed about the progress of the project through Policy Board meetings. These connections can offer an opportunity to be part of future policy or stakeholder dialogues/discussions and share results, raise awareness and have an influence on decision-making processes.

Upcoming health workforce-related projects

As the improvement of the health and care workforce is a priority of the European health agenda, more calls for health workforce related projects are expected to be opened.

Objectives of EU4Health 2021-2027:

“Strengthen health systems

- Reinforcing health data, digital tools and services, digital transformation of healthcare
- Enhancing access to healthcare
- Developing and implementing EU health legislation and evidence-based decision making
- Integrated work among national health systems”

Health is a priority in the programme of the current **Belgian presidency of the Council of the EU** as well:

“Under the Belgian Presidency, health will revolve around three overarching themes: preparedness, care, and protection. The Presidency will emphasise the importance of strengthening the EU’s resilience to future health threats by reinforcing crisis management, supporting healthcare systems,

and improving the security of medicines supply. This way, the Belgian Presidency will put forward priorities for the next legislative term of the European Union.”¹

As partners are active in this field, they might be involved in future health workforce related projects. Our partners are strongly recommended to keep and share OASES knowledge in future actions.

Partners’ dissemination – in online/onsite events

With the aim to continue increasing visibility and maintain reputation building, we encourage OASES partners to continue the dissemination of OASES results in their network. In the pilot studies, important results were achieved that can be basis or input for other future health workforce-related projects.

As an initial sustainability action, OASES was presented in the currently running JA HEROES workshop in Rome 1-2 February 2024. Continuing to share OASES results in online and in person meetings and conferences is an important pillar of the exploitation process.

Continuing the elaboration of pilots, publications

Through the implementation of pilot studies, partners have laid the foundations for further mitigation of medical desertification from different points of view. Being involved in the OASES project gave the opportunity to further elaborate and/or develop medical desert studies. This can be a basis for publications, thus sharing OASES results to a wider audience.

Sustainability risks

When planning sustainability of project outcomes, we need to consider the risks as well.

We determined the following factors that might be considered as sustainability risks:

- Difficulties in achieving the most relevant stakeholders – e.g.: on the policy level;
- Since project outcomes are country specific, there might be difficulties for different health systems in understanding them;
- Stakeholders’ expectations might change over time;
- Regulatory changes might affect the circumstances.

Scalability

Scalability, from a dissemination point of view, is how successfully we have reached our target groups, how well could we share OASES results with them. To foster scalability, it is important to have a clear

¹https://belgian-presidency.consilium.europa.eu/media/3kajw1io/programme_en.pdf

understanding of project goals at the planning phase and to formulate specific indicators in order to achieve the best visibility.

During the implementation of the OASES project we had the following main indicators:

Process Indicator(s)	Target value	Realised
Number of EU Member States competent authorities (Ministry of Health) partner in OASES and represented in the EU online wide Conferences	6	6
Number of EU Member States competent authorities (Ministry of Health) not participating in OASES and represented in the EU online wide Conferences	15	15 (difficult to identify based on email addresses)
Number of DG SANTE and HaDEA representatives attending the EU online wide conferences	1	21
Number of participants for each OASES webinar (1-2-3)	20	44-56-63
Number of EU Member States represented in each OASES webinar (1-2-3)	8	12-8-20
Output Indicator(s)	Target value	
Number of EU online wide conferences organized	2	2
Number of webinars organized	5	5
A layman report on the OASES results	1	1
Estimated audience of OASES communication channels	1.000 people	3.000

Figure 18 –WP2 output indicators

Here we highlight again the importance of the OASES website as a repository of results and main conclusions of the project and as a mean to enable knowledge sharing and facilitate future scalability efforts.

After OASES project is finalised, former partners still can perform actions such as collaborating with strategic partners, providing access to resources, expertise and networks, which also can support scalability. Identifying partners who share similar goals and values can lead to mutually beneficial relationships and contribute to the project's scalability.

Conclusions

In conclusion, this report has detailed the process and results of sharing the OASES achievements with the target audience. It has highlighted the chosen methods of dissemination, the reach achieved, and the overall effectiveness of the communication strategy.

By means of carrying out OASES online events attracting an increasing number of participants, executing comprehensive stakeholder outreach, presenting OASES in conferences, reaching the target audience in online social media channels and creating short videos about OASES, the dissemination effort has been successfully fulfilled.



Mutually fruitful relationships with other EU co-funded projects in the field of health workforce challenges have been developed. We look forward to continue prosperous cooperation in the future.



OASES

Promoting evidence-based reforms on medical deserts

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