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DigiHealth-Asia

D4.1 – Quality Assurance and Monitoring Framework

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Table of Contents

Executive Summary 3

1. Introduction 4

2. Quality assurance team and its responsibilities 4

2.1 Quality assurance team 4

2.2 Responsibilities 4

2.2.1 Establishment of tools, procedures, and techniques 5

3. Dissemination and publication team and its responsibilities 9

3.1 Dissemination Process 10

3.2 DPT Responsibilities 11

4. Quality assurance and monitoring framework 12

4.1 The framework 12

4.1.1 Review of the deliverables 12

4.1.2 Meeting's evaluation 12

4.1.3 Workshops' Evaluation 13

4.2 KPIs 13

4.2.1 Deliverables' review process KPIs 13

4.2.2 Official meetings KPIs 13

4.2.3 Workshops KPIs 13

4.2.3 Continuous quality assurance beyond the project KPIs 13

4.2.4 Project wider and specific objectives KPIs 13

4.2.5 Management KPIs 15

4.3 Quality monitoring and the monitoring tool 15

5. Conclusion 16

Annex 17

Executive Summary

This deliverable “D3.1 Quality Assurance and Monitoring Framework“ is one of the important deliverables of “WP3 Quality plan”. It provides detailed information on the formation of Quality Assurance and Monitoring Framework (QAMF) which includes a) structure of the framework, b) key performance indicators related to the deliverables review process, official meetings, healthcare practitioner’s qualification, training effectiveness, etc., and c) interaction with the quality assurance team (QAT) and dissemination and publication team (DPT). The deliverable also describes the scope and responsibilities of the QAT and DPT. For ensuring the quality of project activities, the QAT is responsible for a) outlining a detailed procedure for the project deliverables review, b) evaluating the effectiveness of healthcare practitioners, medical students, ICT staff, ICT students, etc. training through Kirkpatrick model, and c) providing and suggesting remedies for issues during execution of the project activities. For increasing visibility of the project, the DPT is responsible for a) coordinating the production of dissemination material, b) forwarding the dissemination material to relevant DPT members, and c) disseminating the project material on various national and international forums.

1. Introduction

This deliverable describes the project's Quality Assurance and Monitoring Framework (QAMF) in terms of its framework and key performance indicators (KPIs). QAMF clearly defines the scope and responsibilities of the quality assurance team (QAT) and the dissemination and publication team (DPT). In addition, interaction with the QAT and DPT is also clearly outlined.

The main responsibilities of the QAT team includes a) defining procedures for review of the project deliverables before submission to the project officer (PO), b) evaluating the training of health care practitioners, medical students, nurses, ICT staff, ICT students, etc. through Kirkpatrick model, c) rectifying issues related to the project activities.

The main responsibilities of the DPT team includes a) coordinating the production of dissemination material, b) approval of dissemination material, c) forwarding the dissemination material to relevant DPT members, and d) dissemination of the material.

Finally, the deliverable describes the project's QAMF in terms of a) framework, b) KPIs, and c) interaction with QAT and DPT.

2. Quality assurance team and its responsibilities

In this section, we present the Quality Assurance Team (QAT) as well as its responsibilities to support the quality implementation of the project.

2.1 Quality assurance team

To ensure the attainment of undisputed quality, the consortium has decided to appoint a QAT team who will serve as the point of contact for the partners on all DigiHealth-Asia project's quality and dissemination matters. The QAT team is composed of members from program countries and partners' countries. This composition is the result of a collaborative process leaded by Gent University (UGent) during the kickoff meeting. Its composition is shown in Table 1.

Table 1: Composition of the QAT.

Partner	**Partner team coordinator**
European partners	
1. Ghent University (UGent) - Belgium	Adnan Shaid
2. University of Huddersfield (UoH) - UK	Qasim Ahmed
3. University Lumière Lyon2 (ULL) - France	Chantal Cherifi
Asian partners	
4. Capital University of Science and Technology (CUST) – Pakistan	Amir Qayyum
5. Chiang Mai University (CMU) - Thaïland	Pradorn Sureephong

The QAT Team is led by two coordinators, one from the European side, ULL, one from the Asian side, CUST.

2.2 Responsibilities

The overall responsibility of the QAT Team is to oversee the quality control under the quality management chapter. In cases of nonconformities, the QAT will propose the suitable corrective

actions, to the concerning manager and partner. Based on ISO 21502 – 2021, this oversight should be done through:

- The determination of whether the project's objectives, quality requirements, quality metrics and standards are being met;
- The identification of causes and ways to eliminate unsatisfactory performance.

To carry out its quality control, the QAT should consider progress data, deliverables, and the defined management approach for quality, as well as results in quality control measurements, verified deliverables and inspection reports. The Quality control should be applied to the project's deliverables and outputs, and includes such activities as:

- Verifying that the deliverables and outputs meet the quality requirements by detecting defects using the established tools, procedures and techniques;

Analyzing possible causes of defects;

- Determining the preventive actions and change requests;
- Communicating the corrective actions and change requests.

The QAT is in team is also responsible of conducting a set of specific actions linked to different stakeholders, namely HEI' partners, Project coordinator, Deliverables' leaders.

2.2.1 Establishment of tools, procedures, and techniques

Deliverable review

Deliverables' review process

The review process is represented in Figure 1. Before the review step, the deliverable must be screened to check its compliance with the deliverable template. The template is described in the Quality Plan (5.1.2.1), and it is available to the project members at the SharePoint. This task is performed by the members of the Quality Assurance Team. If the deliverable is not compliant, the designated Quality Assurance Team member must adjust it.

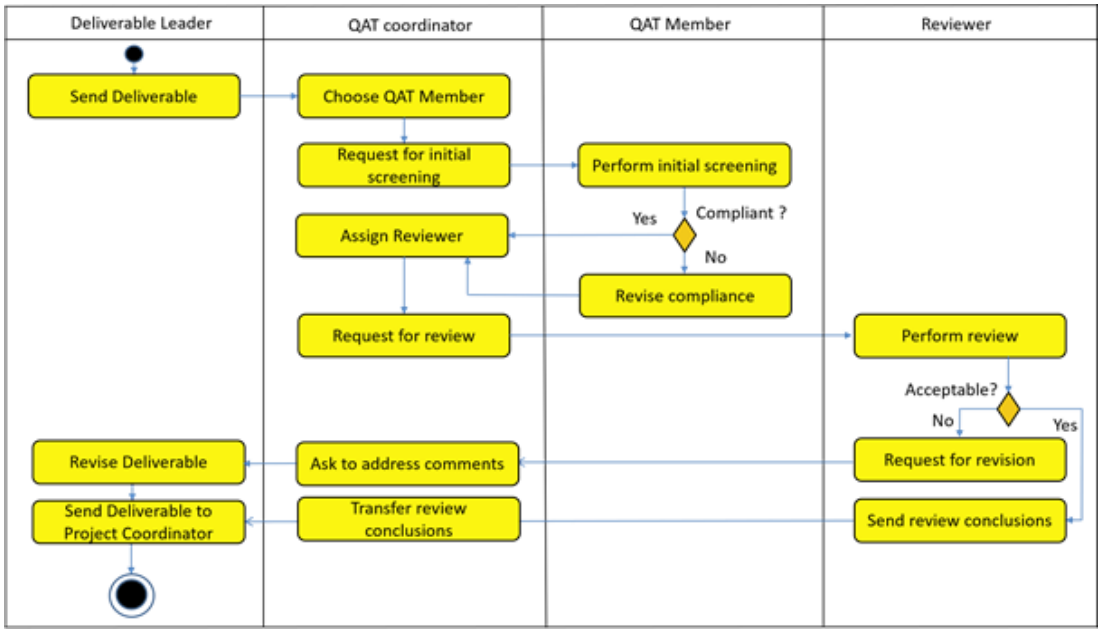

Figure 1: Deliverables' review process.

Deliverables' review process timeline

The review process lasts 7 working days in total. Deliverables must be ready for the review process at least 7 working days before the date of the official submission to the Project Officer. The timeline of the review process is as follows:

- **At least seven (7) working days** before the date of the official submission to the Project Officer, the leader of the deliverable must notify the QAT coordinator that the deliverable is ready for review.
- **Day 1. Six (6) working days** before the date of the submission to the Project Officer, the QAT coordinator gives notice to the QAT member who will proceed with the Initial Screening.
- **Within one (1) working day,** the QAT member proceed with the Initial Screening, and notifies the QAT coordinator as soon as the task is completed.
- **Day 2. Five (5) working days** before the date of the submission to the Project Officer, the QAT coordinator notifies the appropriate reviewer that the deliverable is ready for review, and that comments can be made through the Revision mode of the Word document, or by colored text within the document.
- **Within three (3) working days**, the reviewer performs the review, and notifies the QAT coordinator as soon as the task is completed.
- **Day 5. Two (2) days before** the date of the submission to the Project Officer, the QAT coordinator notifies the deliverable leader that the deliverable is ready for addressing the reviewer comments.
- **Within two (2) working days,** the deliverable leader in discussion with the authors, addresses the comments made by the reviewer. If needed, they can ask for some explanations to the reviewer. The deliverable leader notifies the QAT coordinator as soon as the task is completed.
- **Day 7. The date of the submission to the Project Officer**, the QAT coordinator notifies the Project Coordinator that the deliverable is ready to be sent to the Project Officer. The Project Coordinator send the deliverable to the Project Officer.

All along this process, the deliverable is accessible in the SharePoint. When communicating with the involved members, the QAT coordinator must recall the location of the file, as well as the schedule, the name of the QAT member for the initial screening, and the name of the reviewer. Figure 2 illustrates the process timeline.

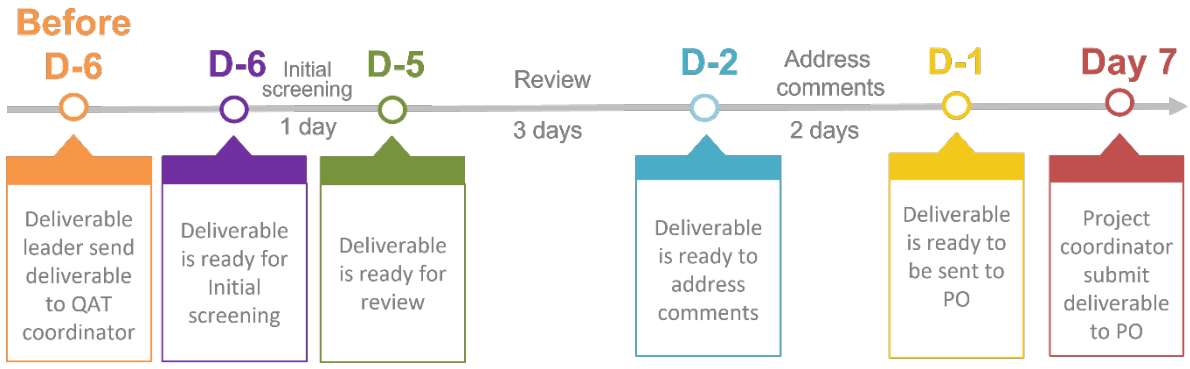

Figure 2: Deliverables' review process timeline.

Meetings' evaluation

Official plenary meetings are planned for the entire duration of the project. Those meetings are assessed through questionnaires of two types. The first type of questionnaire is related to quantitative aspects: date, duration. It concerns the project coordinator. Meetings are also assessed qualitatively

by the mean of another type of questionnaire. This questionnaire targets the participants. They have to provide their feedback on five thematics: General appreciation of the meeting, Project understanding, Project content, activities and outcomes, Communication and dissemination. Each thematic is represented by a series of questions. Among those questions, fifteen in total, seven are open questions to allow people to freely express ideas. The eight other questions are assessed by a satisfaction level from 1 to 5. Annex 1 “Official meetings questionnaire” presents this questionnaire with the thematics, the questions for each thematic, the scale which corresponds to the qualitative aspect of the evaluation, and the range allowing to grade quantitatively.

At the end of each official meeting:

- The coordinator is asked to provide the information related to date and duration
- A link to the questionnaire is sent to participant partners
- Coordinator and participants are asked to provide their feedback within one week

These tools and procedures are presented to the consortium during a follow-up meeting.

Workshops’ evaluation

Workshops that are organized during the project are of two types: (i) workshops organized at the beginning of the projects by Asian partner countries with potential healthcare practitioners to discuss and identify the skills gaps (ii) co-hosted workshops during international conferences. Both types of workshops are assessed by the mean of questionnaires. The first type of questionnaire intends to assess the workshops according to the following quantitative aspects: effective date, effective duration, number of participants, number of presentations. The second type of questionnaire is dedicated to qualitatively assess workshops of type (i). The questionnaire collects information from healthcare practitioners participating in the workshops, and others who are potentially interested in the project and specifically in the pilot developed in their country. The goal of this questionnaire is to identify the relevant persons in respective countries for assessing the suitability, and to target those who have a relevant background and can disseminate the project. The questionnaire has eight questions targeting the following topics : Their activity, Participation in the first workshop organized by the corresponding HEI, Benefit of the workshop in introducing the aims and objectives of the project, Usefulness of introducing new topics in the courses, Skills that are important for the next few years in digital health, Benefit of the developed pilot study for the relevant country, Benefit of the new courses for the pilot case, Scope of digital healthcare technologies in next 20 years. Questions are assessed by Yes or No, or by a rate from 1 to five, or provide their expert opinion. This questionnaire is available in the SharePoint of the project.

At the end of each workshop:

- The organizers are asked to provide information related to date, duration, number of participants, number of presentations
- For the first type of workshops (I) participants and others receive the second type of questionnaire
- Organizers to provide their feedback within one week
- Participants have to provide their feedback within two weeks

These tools and procedures are presented to the consortium during a follow-up meeting.

Quality assessment and monitoring cycle

The QAT will communicate with partner countries on a bi-monthly basis on any quality-related issues and to perform quality evaluations. Quality-related issues will be discussed, and appropriate decisions will be made with respect to the QAMF. This will be done during the project follow-up meetings that are scheduled for six months, and/or in the context of dedicated meetings if needed.

The main action linked to the project coordinator is to alert him/her in case of unexpected situations for quality assurance actions. In such a case, depending on the situation, we will decide and implement corrective actions with respect to this QAMF at the project level, and, if necessary, with the Project Agreement at the Europe level.

The review of deliverables is an important action conducted toward deliverables' leaders. The QAT has the responsibility to present the procedures designed to monitor the review process, to the deliverables' leaders. This will be done during the follow up meetings of the project. During the review process, the QAT will be in touch with the deliverables' leaders at each step of the process, either to notify him/her about the progress of the process, or to inform him/her on any delay issues. Delay issues will be managed according to the respect of the objectives defined for the Time KPI (see below for the description of the Time KPI).

The QAT will provide a quality audit report for each of the following tasks: Qualification of healthcare practitioners, Evaluation of the training effectiveness with Kirkpatrick model, Continuous quality assurance beyond the project. This report will detail the results of the quality assessment exercises the aforementioned tasks.

An overview of the quality assessment and monitoring cycle is represented on Figure 3.

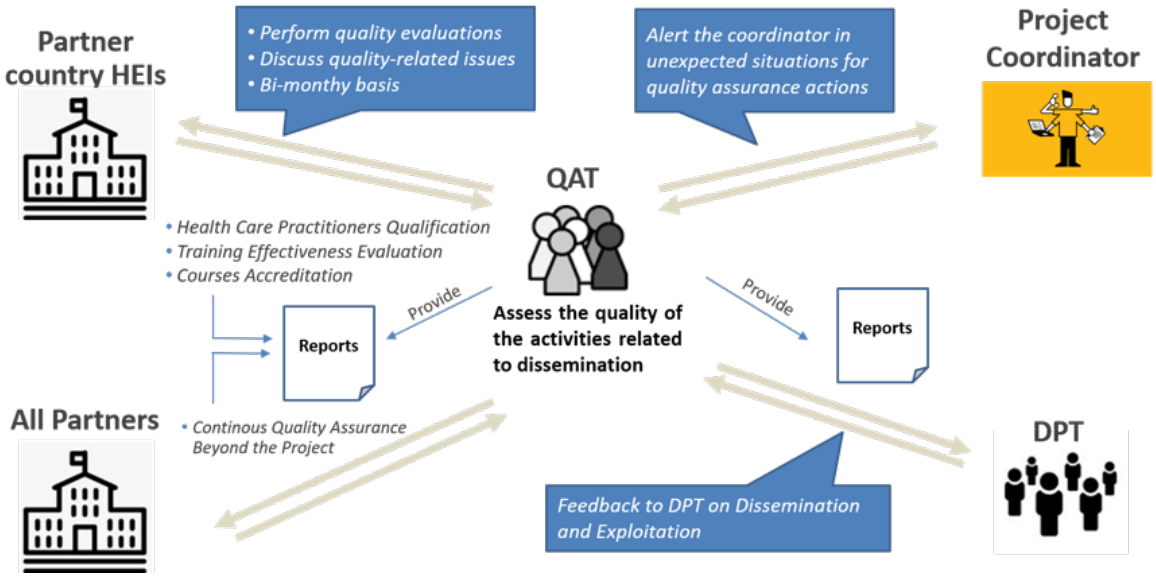

Figure 3: Quality assessment and monitoring cycle.

3. Dissemination and publication team and its responsibilities

The Dissemination and Publicity Team (DTP) aims at producing an efficient and organized dissemination plan for the project in order to reach the widest possible audience in partner countries as well as international potentially relevant parties. DPT is responsible for leading the Dissemination & Exploitation work package. The DPT consists of a representative from all partners to improve the outreach of the project, led by the Coordinator, UGent. Its team members from respective institutions can ensure a smooth communication for the project. Following are the members of DPT:

1. Adnan Shahid (UGent) (Lead Institution)
2. Nauman Aslam (UNN)
3. Maryam Hafeez (UoH)
4. Giacomo Kahn (ULL)
5. Punnarumol Temdee (MFU)
6. Hamza Bin Waheed (CUST)
7. Battur Gompil (NUM)
8. Ariuntuul Garidkhuu (MNUMS)
9. Umair Hashmi (NUST)
10. Nopasit Chakpitak (CMU)

Table 2 shows the main dissemination activities that will be carried out during the project.

Table 2: Dissemination activities.

Main Dissemination Activities	Key Performance indicator	Timeline		
		Before Project Start	During the Project	After Project Completion
Forming a dissemination and publication strategy	Outlining the key elements and later submitting a detailed dissemination and publication plan to the commission	✓	✓	
Consideration of target audience	Consideration of facts/figures and demographic metrics influencing the technological development	✓	✓	
Exploring dissemination channels	Discussions with project partners	✓	✓	
Getting in touch with media channels	Creating social media accounts and a website	✓	✓	
Regular sessions for training, information, dissemination, etc.	Number and frequency of these events	✓	✓	✓

Assessing the impact on target audience	Questionnaires, feedback forms, social media engagement statistics, etc.		✓	✓
Engagement with stakeholders	Number of events organised/attended to meet the stakeholders	✓	✓	✓
Engagement with end-users	Number of workshops and engagements with end-user participation	✓	✓	
Account of published/attained outcomes or technical results	Publication of results to scientific journals and conferences. Bi-annual report of technical publications submitted to the commission.		✓	✓
Sustainability of the project	Links with translational partners, maintaining the project website			✓
Visibility in European/International Networks	Press Releases/ articles on the project website		✓	✓

3.1 Dissemination Process

The DPT member from each partner HEI will work with the team members responsible for the completion of a particular task/deliverable to list and align possible dissemination activities related to the task. This includes considerations such as suitable dissemination actions, audience, timeline of activities and further exploitation. These will be documented in a Dissemination Activities Form (see Annex 3). A template of this form is available at the Sharepoint. Based on this exercise, the partner HEI team will produce the required dissemination material. The responsible DPT member from the HEI will then share this material with the QAT. QAT will assess the material and run the necessary quality checks and internal review. The QAT either will provide recommendations for improvement or will approve the draft for formal dissemination. A draft can iterate multiple such rounds before its final approval. Once approved, the DPT member will share the draft along with the completed Dissemination Activities Form with all members of the DPT via email or shared space on MS Teams and notify relevant DTP members for further action. All relevant DPT members will then disseminate the material via suitable channels that they manage. For example, UGent leads the dissemination via project website, hence, all material that needs to be published on the website is the responsibility of the DPT member from UGent. After the completion of the dissemination activity, the DPT will inform the coordinator and if required, produce a report for submission to the coordinator or to the project officer. Figure 4 explains the dissemination process.

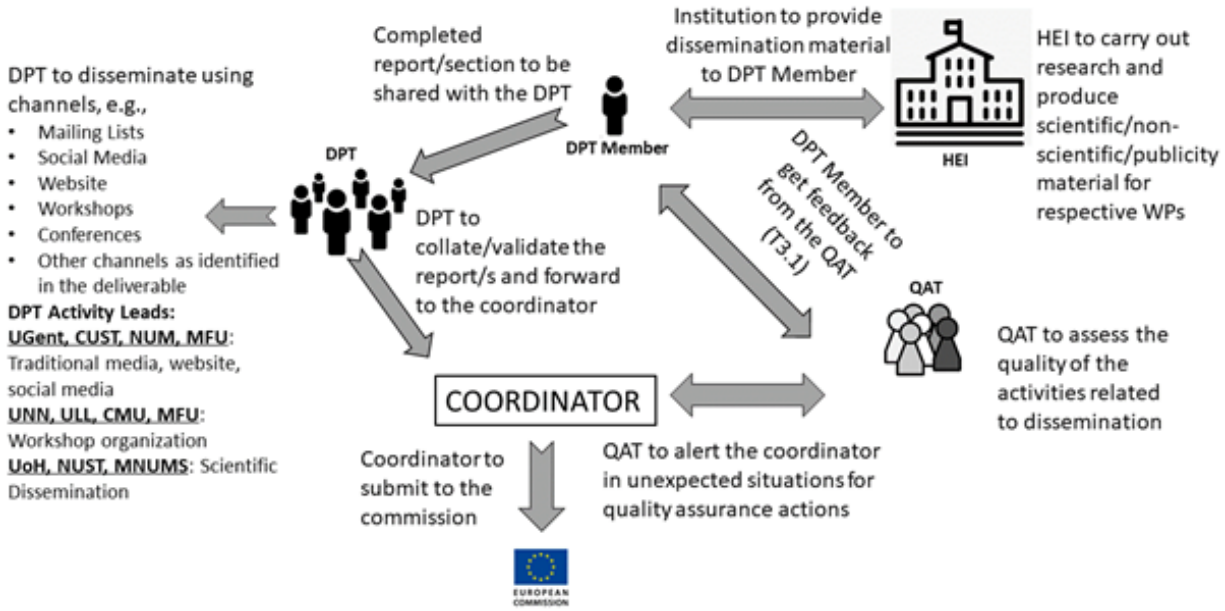

Figure 4: Dissemination Process.

3.2 DPT Responsibilities

Following are the main responsibilities of the DPT:

1. Coordinating the production of dissemination material:

The DPT will coordinate the assessment of all dissemination activities and production of material keeping in view the following:

- Description and type of dissemination actions;
- Target Audience;
- Date of Execution;
- Relevant quantitative indicators;
- Pathways to exploitation/sustainability.

DPT members will ensure that the dissemination material produced by the partner HEI team is appropriate in terms of the above-mentioned indicators. The DPT member of the relevant partner institution will complete Dissemination Activities Form in consultation with the partner institution/s.

2. QAT Approval of dissemination material:

DPT members will submit the dissemination material along with the Dissemination Activities Form to the QAT team for approval. If there are recommendations for improvement/changes from the QAT, the DPT member is responsible to coordinate the revision of the draft with the partner HEI team working on the task/deliverable.

3. Forwarding the material for dissemination to relevant DPT members:

The DPT member will share the dissemination material with the DPT and notify the relevant DTP members to disseminate the material via appropriate/identified channels in the dissemination Activities Form. This includes mailing lists, social Media, website, workshops, conferences and other channels as identified in the respective deliverables.

4. Disseminate the material

The DPT team will be responsible for disseminating the project activities and results to a larger audience. They will reach out external academic and industrial experts through the developed social media forums including Facebook, LinkedIn, YouTube, and Twitter.

4. Quality assurance and monitoring framework

4.1 The framework

4.1.1 Review of the deliverables

All project deliverables must go through a review process before being submitted to the European Commission. Each work package leader has the responsibility of checking if this process is undertaken for the deliverables of the work package that they lead.

The reviewers are chosen by the QAT among the project consortium members. They are selected according to the following criteria and conditions:

- Expertise on the topic of the deliverable
- Not being involved in the production of the deliverable
- Being involved in a deliverable that has the deliverable under review as input
- Role in the project
- Time range since the previous review

The QAT coordinators is responsible of triggering and monitoring the review process. They must notify the participants when it is their turn to intervene in the process, and they must ensure that each step respects the planned duration. The project coordinator has the responsibility of submitting the deliverable to the Project Officer, once the reviewer' comments have been addressed by the deliverable leader.

Figure 5 shows the review planning template which will be used for each deliverable. It contains the name of the QAT member for the initial screening, the name of the reviewer, the time periods, and the due dates. It will be prepared for every year and presented to the consortium during follow-up meetings. The planning is accessible to the consortium in the SharePoint “Documents > WP3 – Quality Plan” folder in the “Deliverable-review-planning.xlsx” file.

Deliverable	Deliverable Leader	Initial Screening	Init. Screen. Due Date	Review	Review Time Period	Address Comments Time Period	Submission to PO Due Date
YEAR X	COMPLETED - IN PROGRESS - COMING SOON - TO COME UP						
Dx.x (Deliverable nb) Deliverable Name	Deliverable Leader Univ. (Deliverable leader name)	QAT member Univ. (QAT member name)	Day Month	Reviewer Univ. (Reviewer name)	Day Month - Day Month	Day Month - Day Month	Due Date

Figure 5: Review planning template.

4.1.2 Meeting’s evaluation

Official meetings’ schedule is accessible to the consortium in the SharePoint “Documents > Meetings” folder in the “meetings_plan_2021-2024.xlsx” file. The coordinator provides his feedback on an Excel file, available on the SharePoint, which covers all the meetings of the project, and being available all along the duration of the project. Questionnaires are implemented on Google forms. Partners receive

an email notification from the QAT at the end of the meeting, with the deadline to fill the form. Results of the questionnaire are retrieved on an Excel file.

4.1.3 Workshops' Evaluation

For the workshops in partner countries, organizers fill an Excel file by indicating the effective date and effective duration, the number of participants, the number of presentations. The file is available on the SharePoint. It covers all the workshops of the project, and it is available all along the duration of the project. Qualitative questionnaires are implemented on Google forms, and results are retrieved on an Excel file. For co-hosted international workshops, organizers fill an Excel file by indicating the effective date and effective duration, the number of participants, the number of presentations. The file is available on the SharePoint. It covers all the workshops of the project, and is available all along the duration of the project.

4.1.4 Continuous Quality Assurance Beyond the Project

A set of actions and an action plan will be setup to ensure a continuous quality assurance beyond the project, and that the project will be continuously supported by the resources available. The partners in all countries will be in charge of maintaining this continuous quality assurance.

4.2 KPIs

4.2.1 Deliverables' review process KPIs

The deliverable review process indicator is based on time. It corresponds to the expected duration of the total process, which is of 7 working days. The objective to reach is a duration <= to 7 days. An achievement indicator allows to estimate the performance of the process at the project level. It computes the percentage of processes that have been achieved on time. The objective to reach is 90%.

4.2.2 Official meetings KPIs

The indicators are represented by the questions of the questionnaires (as explained in Section 2.2.1). The results of the grade give information on the level of the quality of the meeting.

4.2.3 Workshops KPIs

The indicators are represented by the questions of the questionnaire (as explained in Section 2.2.1). Quantitative and qualitative indicators provide information on the workshops.

4.2.3 Continuous quality assurance beyond the project KPIs

On the basis of the actions and action plan for the continuous quality assurance beyond the project, a set of indicators will be designed with the partners.

4.2.4 Project wider and specific objectives KPIs

For project wider and specific objectives, quality assurance indicators are described in the official project Logical Framework Matrix which can be find pages 21-24 of the proposal. For the purposes of quality assurance, the main indicators are detailed in a table of performance indicators.

Wider project objective

To harness the power of digital technologies for developing integrated and project-based solutions for healthcare professionals.

Indicators of progress:

- Local, national and international policy reforms to support and facilitate the adoption of digital technologies for healthcare

- Healthcare and ICT professionals' knowledge level and expertise in the use of latest digital technologies *(see the KPI 4 below)*
- Adoption of the remote monitoring and care system by healthcare professionals and patients *(see the KPI 3 and 4 below)*
- Number of direct and indirect beneficiaries of DigiHealth-Asia training program *(see the KPI 3 below)*
- Economic aspects of healthcare in the pilot use cases
- Three different data sets for remote care and monitoring systems. *(see the KPI 1 below)*
- White paper for digital health care & monitoring *(see the KPI 2 below)*

Specific objectives

Possible KPI's (objectives) below have to be discussed with the partners.

1. Amount of healthcare data available:
   - 1 Dataset for cardiovascular patient monitoring
   - 1 Dataset for mobility disorder patient monitoring
   - 1 Dataset for remote patient consultation
   - Number of patient data for cardiovascular patient monitoring (20)
   - Number of patient data for mobility disorder patient monitoring (20)
   - Number of patient data for remote patient consultation (20)
   - Number of hospitals involved for each partner country (1)
   - …
2. White paper for each pilot use case
   - 1 White paper on cardiovascular patient monitoring (M18)
   - 1 White paper on mobility disorder patient monitoring (M18)
   - 1 White paper on remote patient consultation (M18)
3. Number of healthcare and ICT practitioners trained
   - 4 Health care practitioners trained on cardiovascular patient monitoring
   - 4 Health care practitioners trained on mobility disorder patient monitoring
   - 4 Health care practitioners on remote patient consultation
4. Number of members of the network for the development of new viable technologies for patient care and remote monitoring
   - Number of health care practitioners involved in the network
     Thailand: [CMU] 5 + [MFU] 10 = 15
     Mongolia: [MNUMS] 5 + [NUM] 0 = 5
     Pakistan: [NUST] 2 + [CUST] 2 = 4
   - Number of ICT based researches involved in the network
     Thailand: [CMU] 5 + [MFU] 5 = 10
     Mongolia: [MNUMS] 2 + [NUM] 5 = 7
     Pakistan: [NUST] 4 + [CUST] 1 = 5
   - Number of academic teaching staff involved in the network
     Thailand: [CMU] 10 + [MFU] 20 = 30
     Mongolia: [MNUMS] 5 + [NUM] 5 = 10
     Pakistan: [NUST] 4 + [CUST] 4 = 8
   - Number of industry professionals involved in the network
     Thailand: [CMU] 20 + [MFU] 5 = 25
     Mongolia: [MNUMS] 2 + [NUM] 2 = 4
     Pakistan: [NUST] 1 + [CUST] 2 = 3

- Total number of members of the network
  Thailand: [CMU] 50 + [MFU] 40 = 90
  Mongolia: [MNUMS] 14 + [NUM] 12 = 26
  Pakistan: [NUST] 9 + [CUST] 9 = 18

5. Number of *papers* published in high ranked journals
   - Number of papers published in high ranked journal (3 per year)

For all the work packages, every task, activity and sub-activity will have quality assurance Indicators, which will be filled out by the tasks' leaders under the control of the WP Leaders. These indicators will be used to complete the EACEA report documents "Table of Achieved/Planned Results".

4.2.5 Management KPIs

The management of the project is also assessed by a series of indicators. They are listed in Table 3 below.

Table 3: INDICATORS FOR PROJECT MANAGEMENT.

WP5 – T5.1	- The assigned tasks start and finish on time - The project Handbook is defined and validated - The project meetings are scheduled - The minutes of the meetings are done and validated - The deliverables are finished and validated on time - The periodic reports are done on time - The final report is ready on time	**Quality Evaluation indicators**: 1. The number of virtual/physical meetings 2. The number of virtual meetings 3. The duration of each task is respected 4. Number of deliverables finished on time
WP5 – T5.3	- The Quality Assurance Plan is defined and validated - The Quality Assurance Procedures are defined - A work plan with clear division of tasks and responsibilities between partners and time table is produced - Conflicts are identified and resolved by the partners - Monitoring of the innovation being developed through the project	**Quality Evaluation system indicators**: 5. Number of quality assurance procedures defined 6. Number of PMB reports 7. Number of travel reports 8. Number of Timesheets produced (per month, per person, per category) 9. Number of conflicts solved 10. Number of publications in international conferences 11. Number of international journals submitted

4.3 Quality monitoring and the monitoring tool

The quality monitoring tool allows to automatically follow the project KPIs.

Annex 2 (1) shows the "Quality Monitoring tool dashboard" for the deliverables' review process, and ANNEX XX-2 (2) shows the planning of the review process timeline which is associated to the dashboard. Similar sheets are being developed for the other quality assurance aspects.

4.4 Interaction with QAT and DPT

The DPT's purpose is to ensure a smooth flow of information, across all partner countries. Its role is to use conventional media (e.g. print and press) and technology (social media, website) to reach international audiences. The DPT is articulated with the QAT through a clear workflow: when higher education institution produces material for dissemination, the local DPT member fills in the DPT form. The DPT, depending on the material, then shares it through its medias or to the coordinator. The QAT assesses the quality of the activities related to dissemination, and produces a feedback to the DPT. This quality assessment relies on some key performance indicators, to be chosen appropriately by the DPT with the help of the QAT.

5. Conclusion

This deliverable describes the project's QAMF in terms of a) structure of the framework and b) KPIs related to deliverables review process, project official meetings, healthcare practitioner's qualification, training effectiveness, etc. The document also describes the scope and responsibilities of the QAT and DPT. The QAT and DPT will work together for ensuring the quality of project activities and disseminating them to a wider audience. To streamline the process, several KPIs has been defined for quality monitoring and dissemination. The main goal of such KPIs is to execute the project activities as planned and disseminate them on various national and international forums so that the project impact and visibility can be maintained and achieved.

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Annex

Annex 1: Official meetings questionnaire.

Indicator	Measurement	Scale	Range
General appreciation of the meeting	1. The meeting was clear, efficient, and friendly enough (taking into account the online mode) 2. We were able to achieve some good activities to share and debate	Totally agree – Totally disagree Totally agree – Totally disagree	[1-5] [1-5]
	3. Here is what I appreciate the most during the meeting 4. Here is what could be improved for this meeting	Free text Free text	/ /
Project understanding	1. My role in the project is clear for me 2. I understand well the Project management tools and processes 3. The next steps are clear for me	Not at all – Perfectly Totally agree – Totally disagree Totally agree – Totally disagree	[1-5] [1-5] [1-5]
	4. Your comments about this point	Free text	/
Project content, activities, and outcomes	5. I have a good idea of the project schedule for the coming months	Not at all – Totally	[1-5]
	6. If not, precise what you are missing	Free text	/
	7. I fully understand the objectives of each deliverable and how it interacts the other deliverables	Not at all – Totally	[1-5]
	8. Here are the next five tasks that I will undertake for the project 9. For me, here are the three most difficult thinks that I will have to do the next year in the project	Free text Free text	/ /
Communication and dissemination	10. I have a clear idea about how I will contribute to further disseminate DigiHealth results in my environment	Not at all – Absolutely	[1-5]

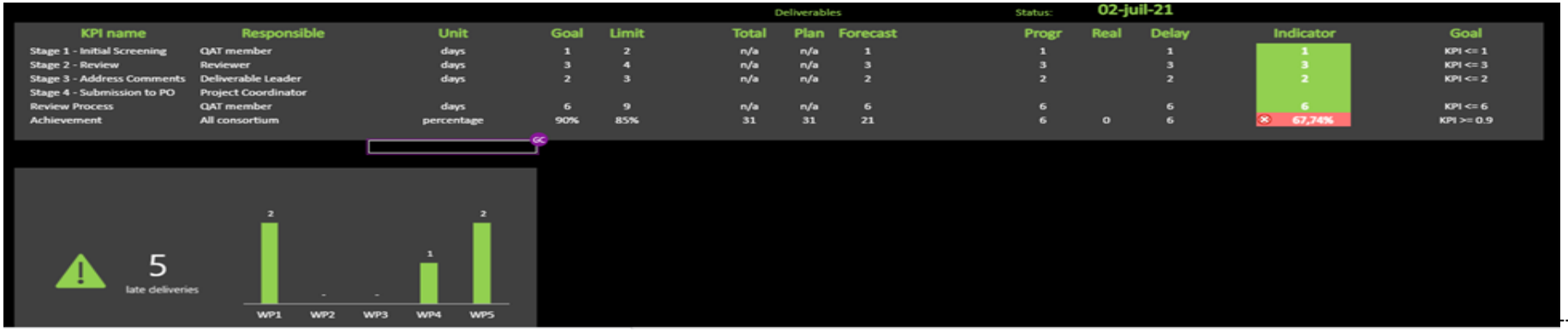
	11. Please give us the main elements you intend to achieve on this topic within the next year	Free text	/

Annex 2: "Quality Monitoring tool dashboard" and "Review process planning.

"

KPI	Goal (days)	float time (days)	= float time(da	Responsible
Stage 1 - Initial Screening	1	1	2	QAT member
Stage 2 - Review	3	1	4	Reviewer
Stage 3 - Address Comments	2	1	3	IO Leader
KPI Review Process	6	3	9	

N°	ID	Ios_Deliverable	IO / WP	PARTNER IO Leader	PARTNER Task leader	Representative name Task leader	Representative name Reviewer	Due Dates Start	Due Dates Stage 1	Due Dates Stage 2	Due Dates Stage 3	Due Dates Submission	consider reprogram	SUBMISSION DATE Original	SUBMISSION DATE reprogram?	SUBMISSION DATE New
	WP1	Development of learning material and requirement analysis for the design of the proposed digital health mo	WP1											01-déc-21	no	
1	01.1	Literature review on digital health care and monitoring technologies and its status/vision in EU and Asia	WP1					23-mars-21	24-mars-21	27-mars-21	29-mars-21	01-avr-21		01-avr-21	no	
2	01.2	Analysis of the skill requirement and priorities in Asian partners for implementation of digital health care an	WP1					23-mai-21	24-mai-21	27-mai-21	29-mai-21	01-juin-21		01-juin-21	no	
3	01.3	Learning material aimed at the skill requirement and training needs of ICT and health care practitioners	WP1					22-nov-21	23-nov-21	26-nov-21	28-nov-21	01-déc-21		01-déc-21	no	
4	01.4	A report describing the technical system requirement for digital health care monitoring prototype	WP1					23-juil-21	24-juil-21	27-juil-21	29-juil-21	01-août-21		01-août-21	no	
	WP2	Development of patient monitoring and implement of pilot use cases	WP2											01-févr-23	no	
5	02.1	System integration of digital health care and remote patient monitoring system	WP2					22-nov-21	23-nov-21	26-nov-21	28-nov-21	01-déc-21		01-déc-21	no	
6	02.2	Development of the communication system and protocols	WP2					23-mars-22	24-mars-22	27-mars-22	29-mars-22	01-avr-22		01-avr-22	no	
7	02.3	Server and visualisation system setup for digital health care and remote patient monitoring system	WP2					23-mai-22	24-mai-22	27-mai-22	29-mai-22	01-juin-22		01-juin-22	no	
8	02.4	Pilot use case: cardiovascular patient monitoring, implementation and training in Pakistan	WP2					23-janv-23	24-janv-23	27-janv-23	29-janv-23	01-févr-23		01-févr-23	no	
9	02.5	Pilot use case: mobility disorder patients monitoring, implementation and training in Thailand	WP2					23-janv-23	24-janv-23	27-janv-23	29-janv-23	01-févr-23		01-févr-23	no	
10	02.6	Pilot use case: remote patients' consultation, implementation and training in Mongolia	WP2					23-janv-23	24-janv-23	27-janv-23	29-janv-23	01-févr-23		01-févr-23	no	
	WP3	Quality Plan for training and certification of health care practitioners	WP3											01-déc-22	no	
11	03.1	Quality Assurance and Monitoring Framework	WP3					06-juil-21	07-juil-21	10-juil-21	12-juil-21	15-juil-21		01-mars-21	yes	15/07/2021
12	03.2	Quality Audit Report	WP3					22-nov-23	23-nov-23	26-nov-23	28-nov-23	01-déc-23		01-déc-23	no	
13	03.3	Continuous Quality Assurance Workshops	WP3					22-nov-23	23-nov-23	26-nov-23	28-nov-23	01-déc-23		01-déc-23	no	
14	03.4	Approval and accreditation of developed courses	WP3					23-mai-22	24-mai-22	27-mai-22	29-mai-22	01-juin-22		01-juin-22	no	
	WP4	Dissemination & Exploitation of DigiHealth-Asia project	WP4											01-déc-23	no	
15	04.1	A strategic plan for diffusion and dissemination	WP4					20-févr-21	21-févr-21	24-févr-21	26-févr-21	01-mars-21		01-mars-21	no	
16	04.2	Project Website with Project Logo	WP4					22-nov-23	23-nov-23	26-nov-23	28-nov-23	01-déc-23		01-déc-23	no	
17	04.3	Social Media Account Setup and Maintenance	WP4					22-nov-23	23-nov-23	26-nov-23	28-nov-23	01-déc-23		01-déc-23	no	
18	04.4	Report of publication in journals, conferences, workshops, book chapters or authored books	WP4					22-nov-23	23-nov-23	26-nov-23	28-nov-23	01-déc-23		01-déc-23	no	
	WP5	Management of DigiHealth-Asia Project	WP5											01-déc-23	no	
19	05.1	Annual Progress reports - Delivery 1	WP5					22-nov-21	23-nov-21	26-nov-21	28-nov-21	01-déc-21		01-déc-21	no	



Annex 3: Dissemination activities form.

Work Package Number/Name:

Task Number/Name:

Deliverable Number/Name:

Activity/ Material	**Dissemination Level/s**	**Target Audience**	**Dissemination Channel/s (Please provide details)**	**Relevant KPI e.g., no. of participants, number of views of social media post, citations, downloads etc.**	**Pathways to exploitation/sustainability**
	☐ Department / Faculty ☐Institution ☐ Local ☐ Regional ☐ National ☐International	☐Teaching staff ☐Students ☐Trainees ☐Administrative staff ☐Technical staff ☐Librarians ☐ Other (please specify)	☐Mailing List ☐Twitter ☐Facebook ☐LinkedIn ☐Press Release ☐ Project Website ☐Conference/Workshop ☐Training event ☐ Stakeholder Meeting ☐Others		