

## Minutes of the second partner meeting in Kiel from the 15<sup>th</sup> to the 17<sup>th</sup> of April 2008

### Participants

Henriette Hansen	SDEO	Britt-Louise Nilsson	Östsam
Kasper Dam Schultz	SDEO	Birgitta Larsson	Östergötland
Arne Gårn	RSD	Katie Kelsey	Niace
Ingvild Gundersen	RSD	Justine Womack	SWPHG
Benne Back	UC Vest	Eva Baldassari	Veneto Region
Anette Schultz	UC Vest	Massimo Mirandola	Veneto Region
Karsten Sørensen	UC Vest	Sara Carbone	Veneto Region
Mikael Sorknæs	BAW	Doris Lorenz	HBS
Gabriel Gulis	SDU	Birgitt Uhlen Blucha	HBS
Lulu Hjarnø	SDU	Bettina Steen	LVfG SH
Bo Jonø	Sdr.Jyske	Sabine Hoffmann-Steurnagel	LVfG SH
	Sygehuse	Marianne De Troyer	ULB
Eva Bellsund	Örebro	Elisabeth Taupinart	CRIOC

### Input from the Steering Committee Meeting

**(Henriette, Arne, Birgitt, Marianne, Britt-Louise, Simon (by e-mail input) and Eva, who didn't make it because of a delayed flight)**

We all agreed that the project has had difficulties in this first phase, which mainly are caused by two factors; 1) that we haven't had the dialogue forum to discuss openly among partners, and 2) different understandings of the approach in the project.

Ad 1) Fortunately the new dialogue forum is now open, which will give us a good possibility to communicate better between the partners. We decided that all regions should provide a small report every second month about what is going on, and as our Swedish partners have already made a small report, I propose to use their structure; which is the following:

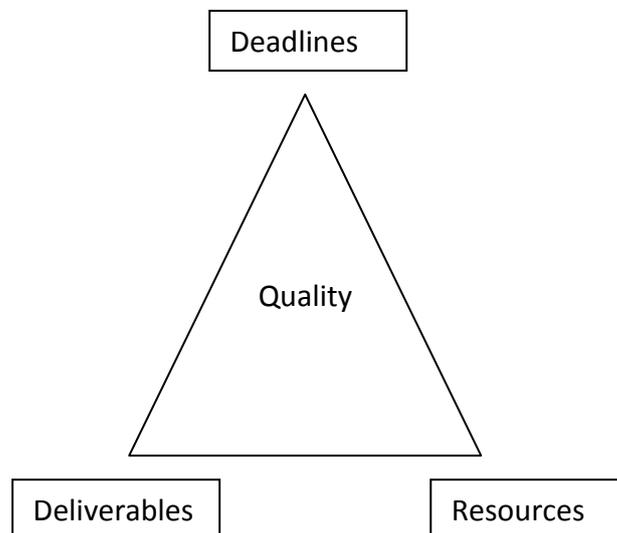
- 1) Network / Meetings / Implementation  
Questions like: Have you created any networks in your region? Have you organized meetings to discuss the implementation and practical use of the project with others, e.g. politicians, regional actors etc.? What kind of challenges have you met in your region in terms of the implementation; e.g. structural, political, practical?
- 2) Dissemination / Public Relation  
Questions like: What kind of dissemination activities have you organized in your region? Have you presented the project in external events on regional, national or international events?
- 3) Working together in the region  
Questions like: How do the regional partners co-operate? Have you created co-operation with the collaborating partners? Have any new relations been created?
- 4) Working together with the international partners  
Questions like: Have you co-operated with other partners in the project? Have you gained experiences from other partners in the project? How and what?
- 5) Results  
Questions like: What are the main benefits from the project in your region up till now?
- 6) How do we want to proceed

Some partners also expressed the need to have more “low level” information about the other regions in the partnership. By low level information we mean some facts and figures about the region in general and an organizational overview of the health actors in the region. You probably all of you have easy access to this kind of information, which I propose to upload on the dialogue forum. We propose from the steering group that a short executive summary is made in the form of “Storytelling”.

Preferably this information should be available on the dialogue forum in the course of the month of May. I will make sure that a archive for this is made on the forum.

The presentations from the kick-off meeting are also available in this archive.

Ad 2) The discussion about the different approaches to the work we have to do and understandings of the objectives in the partnership led us to discuss about QUALITY. We agreed that quality is not necessarily equal to scientific work, but that we need to have a common understanding of quality in relation to the deadlines, deliverables and resources given for the project.



As we all know, the resources are limited in the project, hence we are not expected to deliver outputs which are developed in a strictly scientific manner. As the project is highly process oriented and focuses on trying out activities on a strategic and a practical level, most resources should be put in the phases of the project where the partners work actively with e.g. policy makers and regional health actors. Hence, the main quality factor of the project is that we are able to create strategic processes, engaging as many relevant regional health actors as possible, and that we manage to reflect this strategic process and its results in a limited number of pilot projects, that will be implemented close to the citizens and together with the collaborating partners.

As the project is process oriented and pragmatic in it's approach it is important that each participating region chooses methods to implement the project, which takes their special situation into consideration. The reporting on the methods that each region has used to implement the project becomes a very important part of the project, as these descriptions will be used as input to the final concept, in the shape of guidelines and good practice examples.

End of steering committee meeting!

## Welcome to the partner meeting

Mr. Laurentzen, mayor from Flintbek, welcomed us to Kiel, and our new German partner; “Landesvereinigung für Gesundheitsförderung in Sleswig Holstein” presented themselves.

## Presentation and discussion of the tools.

We had a very long but good, fundamental and fruitful discussion about the project focus, partners / regions specific interests and needs, and the first draft of tools that has been presented in the project.

Conclusions that can be drawn from the discussion are the following:

- 1) We understand the word “competencies” in different ways;
  - a. In the Regional Key Competencies (RKC) project, which is the forerunning project, that led to the idea of the Healthy Regions project, we used the word as to describe a regions overall development potentials in terms of regional development.
  - b. Other partners understand the word more specifically in terms of local health actors’ competencies to work with health promotion.
  - c. As the project is developed as a succeeding project to the RKC project, the original intention was to look at competencies in the broad regional development perspective, but there is no problem in combining the two, and we will do so through the development of different tools. It is a very good result, as it will provide even more concrete results to the project than intended.
- 2) Some partners showed confusion on how to use the mapping tool, and a good discussion came out of this confusion. The main thing that came out of the discussion is that the mapping tool changes name into “Dialogue tool”, as the main objective of the tool is to kick-start a process, where we make sure that different opinions and regional actors are engaged.
  - a. The participating regions do not need to use the dialogue tool in the same way. Cultural, political and structural conditions will decide how each region use the dialogue tool. Some partners prefer to work on a broad regional level, others want to go deeper into the analysis.
  - b. The UK partners gave some good examples on how they have already tried to use the dialogue tool, and will combine it with the Verona Benchmark, as to detail the regional discussions and input to the strategic process. The Italian partners gave examples of a partnership tool that they will use to support the dialogue tool, and the Danish partners are in the course of developing a mapping tool as to look at health actors’ competencies to work with health promotion on a local level.
  - c. We will write a protocol showing different ways and methods to use the dialogue tool.
- 3) The regions are very different in relation to needs and structures, and as to consider as many needs and wishes as possible, we decided to construct the project and the final output of the project as we did in the RKC project. In the RKC project we designed the final website as a tool box with a number of drawers that characterize the different strategic phases a region can go through. In each drawer the user of the website can find different tools and links to relevant literature and practical experiences.
- 4) We discussed the traffic light matrix, which is the first draft of a tool to look at health as a business sector. The main discussion in the partnership was if we want to have that tool or not. We decided that we want to continue to work with the matrix because it is a good tool

to support the innovativeness in the project, namely not only to see health as a separate , professional and concrete activity in the regions, but also to look at health as a potential sector for growth, which can create new business and employment in the region.

- a. Our UK partners have established a strategic co-operation with the regional development agency and our Swedish partners have the regional development council in the partnership, which helps to promote the process of making health an important issue on the overall regional development agenda. As to make sure we try to work with this innovative approach in the project, it could be a good idea if each regional partnership tries to establish co-operation to the regional development agency or department.
- 5) As the project is highly process oriented, the overall approach will be pragmatic, meaning that we will try out different ideas – be it already existing scientific / academic knowledge or new models arising from the project - on a strategic and practical level in our regions, and on the basis of the practical experiences we get from this, we will describe the effects and results. These effects and results will be used as input to good practice examples and guidelines that other regions can be inspired from when they visit our homepage when it become official by the end of the project. When we report back from the implementation process it is therefore important to focus on e.g.
  - a. The challenges (structural, cultural, political, etc) that we met
  - b. The approaches that we chose
  - c. Why we chose exactly these approaches
  - d. The effects and results we obtained
- 6) The framework paper needs a reference list, and our UK partners will make sure to add this to the paper.
- 7) To exchange experiences and learn from each other the idea from the steering group meeting about writing small reports was accepted in the group, and we agreed to submit the first report by the end of May. This report will cover the first 6 months of the project.

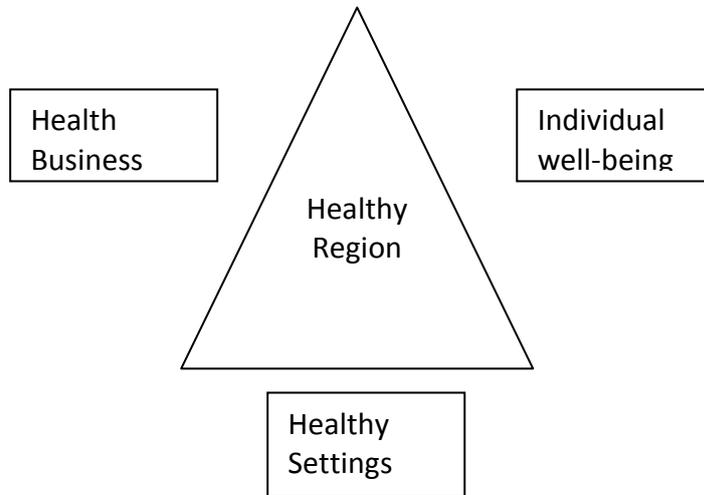
3 working groups were created who had the chance to work together during the partner meeting's second day. The working groups cover the following themes:

- 1) Improvement of the dialogue tool (co-ordinator is Arne)
- 2) Wrapping up of a protocol to provide directions on how to use the dialogue tool (co-ordinator is Massimo)
- 3) Improvement of the traffic light matrix (co-ordinator is Katie)

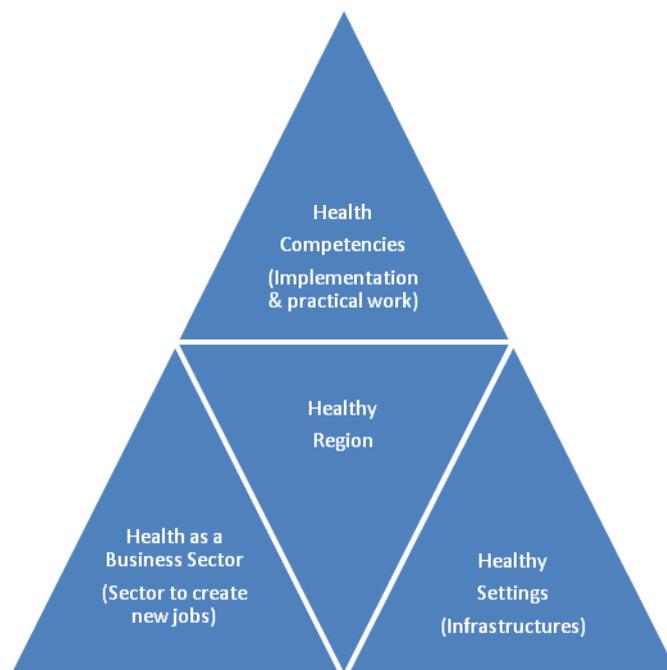
The themes have been created on the dialogue forum, where results from the work group and further discussion will take place.

The deadline for new versions is the 21<sup>st</sup> of May. If the notes from the working groups can appear on the dialogue forum in the course of next week (28/4 – 2/5) it would be perfect.....!!!

From the discussions in the steering group and during the partner meeting, the following first draft of a concept for healthy regions came up:



Since the meeting, I have worked a bit more on the model, and have come up with the following:



I think this basic model gives a good picture of the discussions that we have had in the group – the different wishes and needs - and it also gives a good frame for the tools we are developing and the implementation of the project. The frame is the following

Dialogue tool: Kick-starts the process to focus on how to become a “Healthy Region” and will focus on the broad understanding of competencies. Other available tools like the Verona Benchmark, Partnership tool etc. will be used as a supplement.

Mapping tool: Will be used to focus on the specific health competencies on local level

Traffic Light Matrix: will be used to focus on the health as a business sector, and will help us to remain the innovative aspect of the project, namely to combine health with regional development.

Pilot projects: Will be implemented in the “Healthy Settings” of the region.

I will make a discussion theme on the dialogue forum for the concept, where I will present the model better and you can give comments.

## **Reporting back from the regions**

### Sweden

The Swedish partners have created networks to try out the dialogue tool and have created a political steering committee. Their primary focus is to work on getting the project accepted within the region.

They have organized a number of local seminars and developed a very nice looking brochure that we can even use on an international level.

### UK

The UK partners have created a regional steering group with partners from e.g. Regional Development Agency, Healthy Schools initiative, Policy makers etc. and find that the Healthy Regions project is a very good frame for the strategic process in the region, where they try to involve both the economic sector, cultural sector, learning environments and service deliveries.

### Belgium

Originally the idea was to work with Brussels as a region, but our Belgian partners find it very difficult to work in these very complex structures, hence they have chosen to work with the project on a more local level. We discussed this in the project, and we do not see this as a problem as we believe that healthy municipalities make a healthy region. The Belgian partners can probably use the experiences from the Danish partners (see below)

### Italy

The Italian partners have since the very beginning of the project worked closely together with the collaborating partners and has used resources on doing literature reviews for the regional analysis and input to the tools.

The literature review will be presented on the dialogue forum under the theme “resources” so that all partners can benefit from it.

Many regional meetings have been organized and a nice one-page presentation has been produced.

### Germany

The Healthy Regions project has in Sleswig Holstein become a natural part of the national programme for “Active Regions”, where focus is three fold on 1) competitiveness, 2) cultural landscape and 3) Quality of life. The objective of this programme is to strengthen the regional economy, saving and creating working places and ensuring a certain standard of quality of life. Very much in line with the HR project.

The plan is to have round table discussions and use the dialogue tool – and other tools – in this setting.

During the partner meeting, the German partners had organized visits of several journalist, so before we left we saw articles and pictures ☺ from the local newspaper.

## Denmark

The situation in the Danish partnership is a little different than the other regional partnerships as there is a lot of partners involved. This is both good and bad. It can be a good thing if the partnership is seen as a place to learn and pool common resources, but here in the beginning it is a bit difficult because roles have to be specifically defined.

In Denmark the responsibility for health promotion lies within the municipalities and the region has “only” a responsibility to assist the municipalities in the strategic process. Therefore it is extremely relevant for the Danish partnership to work also on a local level, as to get most out of the project. The way this will be done is to develop a mapping tool, which looks at health competencies within municipalities on how to work practically with health promotion. This is already described earlier in the minutes.

The South Danish Region is a new region from January 2007, and within the Danish partnership a discussion is how to learn from e.g. the UK partners and establish a strategic dialogue between the health oriented department in the region and the regional development department. The partnership will work actively on this.

## **Next meeting**

3<sup>rd</sup> meeting will take place from the 30<sup>th</sup> of September to the 2<sup>nd</sup> of October 2008 in Brussels.

We will use the 3<sup>rd</sup> partner meeting to present our ideas and results to a limited number of external actors by arranging some workshops.

So until next meeting all partners should try to work actively with the tools (The dialogue tool, supported by other existing tools, The traffic light matrix, the mapping tool) and write a report on how the implementation process has been, focusing on (as described above)

- a. The challenges (structural, cultural, political, etc) that we met
- b. The approaches that we chose
- c. Why we chose exactly these approaches
- d. The effects and results we obtained

## **Presentation of dialogue forum**

Mikael Sorknæs from Business Academy West, presented the new dialogue forum, which can be accessed on: <http://forums.healthyregions.eu/>

The dialogue forum is much more flexible than the former one so you are free to create discussion themes etc. as you like.

The following discussion themes are now created on the forum:

- 1) Dialogue tool
- 2) Protocol
- 3) Traffic light matrix
- 4) Mapping tool (from SDU)
- 5) Healthy Regions concept

Please make sure that you activate “alert me” under the items where you want to participate in the discussions. In this way you will be told when something happens.

Miscellaneous will be changed into resources, where you are free to put links to all kind of papers you use in your work.

An archive will be created for the information about the regions and the process oriented reports that we have decided to make every 2<sup>nd</sup> month.

We will create an archive for dissemination material, where you can upload the different material you have produced so that we can exchange them and reuse good illustrations etc.

Mikael will update the list of people to be able to access the forum.

When we upload documents on the forum, I think it will be a good idea if we all use the same standard and form. Some of the documents will surely go on the final official and public website, so if all documents look the same from the beginning it will be easier to upload and harmonize our material and common design. **Hence, I propose that we all use the format and form like these minutes are written in, namely CALIBRI 11.**

When we have final documents which will be published on the website, we should transform them into pdf files, which make it easier for Mikael.

Mikael will try to make the letterhead less heavy as some partners have difficulties in downloading the documents.

### **To refresh your memory.....**

Please remember:

- A month after each partner meeting, the partners shall submit a financial report so that the project management has an overview of the global financial situation in the project. You have all received a template to use. Please send it both in paper, with all vouchers attached, and electronically, which will make it easier for us to transfer it into the global report.
- Make sure to keep original boarding passes.
- Timesheets shall be used as documentation for staff costs. Please use the template on the dialogue forum
- Please notice that a copy of a pay slip is requested for each staff member once a year. The first time for November 2007. This is to make sure that staff is engaged in the correct partner organization and that the level of salary is correct.
- You all received invoices from what has been paid for you during the kick off meeting in Denmark. Please use the daily subsistence allowance form when you make your financial report.

### **Thank you....**

First of all, I would like to thank our German partners for the practical organization and hosting of the meeting. Everything was very well organized and it was a pleasure to stay in Molfsee.

I would also like to thank all of you for your active, positive and constructive participation. When we started the meeting, the situation seemed a bit chaotic, but with common efforts we reached a

common understanding of the future work in the project and the efforts we shall put into it. Even though, that we had disagreements on the way, our discussion never became unfriendly, and this is extremely important for me. I knew it from the beginning – you are a good group to work with.....:-)

A special greeting to Simon from the whole partnership. We all know you because you are very present in all e-mail discussions and development, but only few of us have met you in person. Please send a photo to Mikael so that people can see how you look like, and then we hope to see you in Brussels for the next meeting.....☺

#### **Dates to remember:**

- **In the course of next week (28/4 – 2/5): summaries from the work group discussions**
- **In the course of May: low level information (facts and figures) about the regions and some storytelling like executive description about the regions on the dialogue forum.**
- **End of May: First implementation report from each region covering the first six months of the project**
- **21/5: Improved dialogue tool, protocol and traffic light matrix**
- **Late may: financial report and salary slips for nov 2007, for those of you who have not yet submitted these.**
- **Until next partner meeting: Practical work with tools in each region**
- **Next meeting in Brussels from the 30<sup>th</sup> September to the 2<sup>nd</sup> of October**

April 2008

Henriette Hansen  
Project Manager