

Quality Action CASE STUDY

1. Name and country of the organisation

(Please state the name and the country of the organisation that implemented this practical application of a QA/QI tool as part of Quality Action. We do not publish this information unless you agree. You can remain anonymous by adjusting the settings at the end of this form.)

Hellenic Center for Disease Control & Prevention, (HCDCP) Thessaloníki, Greece.

The Hellenic Center for Disease Control and Prevention (HCDCP-KEELPNO) is a private law entity, supervised and funded directly by the Ministry of Health and has been operating since 1992. The main purpose of HCDCP is to protect and promote public health.

2. Authors of the case study and contact details

(Please provide then name of the author(s) of this case study and any contact names, Email address or websites where readers can access more information about this practical application of a QA/QI tool.)

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3. External support (facilitators/partners/technical assistance)

(Please list the names of other organisations and/or people who were involved in this practical application of a QA/QI tool, e.g. project partners, technical assistance, external stakeholders etc.)

List of participants in the practical application of *Succeed*:

Mylona Evangelia, Project Manager and Facilitator

Project Partner: Kallergi Giota, Sociologist, Municipality of Pavlos Melas, Thessaloníki, Greece

External support: Konte Vasileia, MD Office of HIV Infection & STIs, Hellenic Center for Disease Control & Prevention, *Succeed* trainer.

4. Project/programme

(Please briefly describe the project/programme to which you applied the tool.)

Life skills and HIV education interventions when they are well planned, even if provided only for short periods, have been found to: increase knowledge, develop skills and positive attitudes required to change risk behaviours. The title of our project is: 'Informative interventions in high schools of the Municipality of Pavlos Melas in Thessaloníki about HIV/AIDS and STI's'.

Timetable: November 2015 - January 2016

Number of new school units to be approached: 12 student units

The main goals are:

1. Provide young people 15-18 years old with the knowledge on HIV/AIDS and STI's and the skills they need to make safer and healthier choices.
2. Promote a change of attitudes and the adoption of safe behaviours, including the systematic use of condoms.
3. Address the social and structural factors that facilitate the spread of HIV.
4. Promote awareness of the risks of alcohol and drug use and its contribution to increased risk for HIV/STI's.
5. Promote understanding and tolerance, and reduce stigma and discrimination towards people living with HIV.
6. Expand and sustain continued cooperation with the school units.

5. Goals/aims of applying the QA/QI tool

(Please list the goals you wanted to achieve with the practical application of the tool.)

The goals of applying the tool are described below:

1. Understand the strengths and weaknesses of the programme, assess what works well, what improvement actions need to be taken, by whom and in what time frame.
2. Understanding the need for health education programs.
3. Empowerment of and cooperation with stakeholders.
4. Implementation of the schedule.
5. Programming the next steps.

6. Tool and methodology used

(Please indicate which of the five tools you used (Succeed, QIP, PQD, PIQA, Schiff) and briefly sketch out the steps and measures of how you applied it.)

The tool used was *Succeed*.

Two meetings (2 hours each) took place between the project manager (who had been trained in the national training seminar organised by HCDCP) and the project partner. During these meeting, all the parts of *Succeed* were discussed.

Initially, the following goals were set up: think about aims, key population, intermediaries, approach, responsibilities and whether quality improvements were needed in these areas of the project. Then the schools were chosen and the communication with the school principals was implemented. The principals were informed about the planned activities for their schools and asked to contribute ideas and suggestions for improvements in the process.

7. Results and benefits of applying the QA/QI tool

(Please describe what resulted from applying the tool and if and how your project/programme benefitted.)

Results of the tool application:

The implementation of the tool has enabled us to clarify our goals. The methodology proved to be good and effective and the objectives were achieved. Some errors were fixed and the timetable was followed. Thus, quality time was saved and communication with the municipality was improved. Finally, the strengths and weaknesses of the activities were clarified and recorded.

Results of the program:

Twelve (12) school units were informed. During seventeen interventions (two hours each), 769 students were informed. Qualitative and quantitative data should be collected in order to assess the knowledge and the behaviour change in the student population (this requires lot of time along with specific permission from the ministry of education). Furthermore, the board of parents should be informed on health issues.

8. Recommendations

(Please describe the lessons learnt from positive and negative experiences during the process of using the tool itself and about the quality of projects/programmes like yours.)

Succeed offers good collaboration, a pleasant working climate and the opportunity to make changes when necessary. The tool also allows the application of qualitative and quantitative assessments in schools. In addition, the school managers became more aware of the programme activities.

Please indicate how you want this case study to be published:

- ☒ *I want this case study to be published mentioning the names of countries, organisations, people and contact details/websites in the text above.*
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Please send the filled in case study to carolin.vierneisel@dah.aidshilfe.de

Thank you!