

## **Practical Application Report**

## Enablers for and barriers to using Quality improvement tools in HIV prevention

## Work Package 6

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## **Executive Summary**

The report describes, from the perspective of Work Package 6 (Practical Application), activities, support and results of applying practical quality improvement tools to HIV prevention work as part of the Quality Action project.

The report depicts how a communication tree was used to support the more than 100 people trained in the five different tools offered by Quality Action in their practical tool applications and to enhance exchange on quality improvement within countries. Further means of support, such as the participation guide, the tool application workshops and the online forum, their benefits and shortcomings are also discussed.

As a result, work package 6 received 87 case studies covering 84 completed practical tool applications. Among these, *Succeed* (37 applications) and PQD (22) were the most frequently used tools. PIQA was applied nine times, QIP seven and *Shift* six times. Nineteen of these applications were implemented in projects focussing on gay and other men who have sex with men, twelve focus on people who inject drugs, nine on people living with HIV, eight on migrants and two on sex workers. By far the most applications took place in testing projects (20). Information/education projects were the subjects of fifteen and harm reduction initiatives of fourteen tool applications. Self-help/empowerment projects were involved eight and initiatives at the programme level seven times. More than half of all practical tool applications also involved stakeholders external to the organisation. These results indicate that the project managed to promote its main principles – self-refection and participation – by succeeding in supporting participants to reflect on their work using quality improvement tools and to include a range of relevant stakeholders in the process.

Analysing several data sources in terms of common enablers and barriers to using quality improvement tools in practice resulted in a comprehensive yet precise set of six key factors that influence successful practical tool applications:

*Tool Fit* captures tool-related factors that can be either supportive or challenging and that influence the application itself as well as people's strategies for responding flexibly, including making a range of adaptations.

*Planning and Preparation* applies both to the whole application process as well as to the actual meeting or workshop during which the tool is applied.

*Participation and Involvement* puts the focus on the importance of involving the right people and the strategies to achieve this.

*Facilitation* of the application process can pose challenges, e.g. keeping a discussion both focused and creative, and is seen as a main success factor.

*Available Resources* are those already existing within an organisational structure that people can draw on to implement a quality improvement process.

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Additional Support as a factor includes the obstacles created by a lack of that support (be it financial or personal) as well as strategies to organise the support needed for the practical application process.



Training workshops and continuing interactions during the practical applications helped to build a network that functions as a community of common practice. This network continues to develop a culture of continuous improvement in HIV prevention, increases multidisciplinary collaboration and exchanges knowledge, skills, and expertise across organisations and countries. The overall high uptake of quality improvement tools achieved by Quality Action shows that it is possible to communicate the benefits and integrate the practice of quality improvement into complex prevention settings, as long as barriers and constraints are met with a participatory, flexible and empowering response.

Finally, the report presents four country profiles to illustrate practical tool applications and quality improvement processes on a national level.

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## A. Application Process and Means of Support

According to the terms set in the Quality Action proposal, our tasks as Work Package 6 were to support and liaise with all participating HIV prevention programmes and projects to support at least 80 applications of the Quality Assurance/Quality improvement<sup>1</sup> (QA/QI) tools<sup>2</sup> and to collect data on the process and results. Our key activities included:

- Establish criteria and liaise with partners to support their application of the quality improvement tools;
- Facilitate multiple networking connections among participants;
- Conduct four Tool Application Planning Workshops<sup>3</sup> combined with the Work Package 5 Tool Training Workshops<sup>4</sup> Part 1;

Main Pa	rtners of Wo	rk Package 6	
	Country	Organization	Contact Person
Lead:	Germany	Deutsche AIDS-Hilfe	Carolin Vierneisel
Main Partners:	Austria	Aids Hilfe Wien	Sabine Lex
	Greece	Hellenic Centre for Disease Control and Prevention	Vasileia Konte
	Lithuania	Centre for Communicable Diseases and AIDS	Rima Krupenkaite
	Slovakia	Slovak Medical University	Danica Staneková
	Slovenia	Društvo ŠKUC	Miran Solinc
	Spain	Sida-studi	Eulàlia Castells

Table 1

- Coordinate and link participants with other Work Packages;
- Facilitate feedback from participants and capture/document their input on enablers for and barriers to improving quality;
- Document all practical applications reported by partners and include cross- comparison of results by type of intervention and by key population.

As main partners of Work Package 6 (WP 6), as settled in the drafting of the proposal, our six organisations joined forces: Deutsche AIDS-Hilfe (DAH, Lead), Aids Hilfe Wien (AHW), the Hellenic Centre for Disease Control and Prevention (KEELPNO), the Centre for Communicable Diseases and AIDS (CCDA), the Slovak Medical University (SMU), Društvo ŠKUC and Sida-studi (see Table 1).

## 1. Communication Tree

During our first meeting as Work Package 6, we discussed how to best support countries in their efforts to take part in the project and apply tools in practice. Support provided within the project aimed to be immediate, of high quality, culture-specific and to create sustainable networks within and beyond countries. This is why we decided to introduce a structure to effectively communicate between participating countries. The structure, called

<sup>&</sup>lt;sup>4</sup> In the proposal originally named "expert training"



<sup>&</sup>lt;sup>1</sup> Towards the end of the project, the Quality Action steering group decided to simplify the language and use the term quality improvement with the understanding that this includes the process of quality assurance. This term will be used in the remainder of this report.

<sup>&</sup>lt;sup>2</sup> These tools include: Succeed, Participatory Quality Development (PQD), PIQA, Quality in HIV-Prevention (QIP), Schiff.

<sup>&</sup>lt;sup>3</sup> In the proposal originally named "regional coordination/networking meetings"

*communication tree*, is shown in Figure 1. The structure expects that participating projects first seek support from country contacts/teams. Those country contacts/teams are representatives from Associated Partners of Quality Action. They try to help immediately or refer the request to a member of our Work Package 6. The communication tree also works the other way around when it comes to disseminating information from our Work Package 6 to participating projects. The communication structure was introduced to country contacts and projects/programmes and used throughout the project. Thus, throughout the project, we as WP 6 members remained a pivotal communication partner for country contacts and all participating projects and programmes that chose to apply a tool.

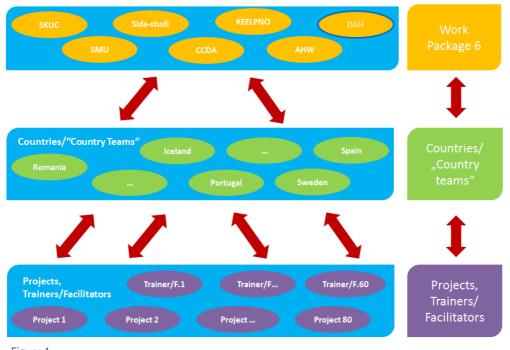


Figure 1

## 2. Online Forum

We decided to create an online exchange forum to ensure that those who – for various reasons – might not have access to support structures provided by the communication tree have somewhere to turn to for support (see Figure 2). The online forum was also meant to enable those who were interested in individual, 1:1 contact among participants/projects to do so. An existing network provider was chosen as host of the online forum (www.ning.com). We declined the idea to use facebook as a means of connection for reasons of data protection and anonymity. All participants of the European Training Workshops and everyone involved in a practical application as part of Quality Action was invited to join the online forum. The online forum is a closed online space requiring registration. The forum is divided into different discussion threads focusing on each of the tools. Individual messaging is also possible. Two WP 6 members (Centre for Communicable Diseases and AIDS and Deutsche AIDS-Hilfe) were assigned to facilitate the online forum and ensure timely

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## **Quality Action**

#### WELCOME TO THE QUALITY ACTION FORUM!

You are a trainer/facilitator or working for a project/program participating in Quality Action and looking for exchange with others? Then this is where you'll find what you are looking for!

This forum wants to support people during the time of practical applications of Quality Action. You can ask questions, leave comments, see what your colleagues are doing or share your own experiences.

Thus we hope to create a forum of exchange and support in Quality Action whenever and on whatever you might need it!

Have fun exploring the forum and getting in touch!

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Figure 2

responses to questions or referral to experts. Tool trainers agreed to answer tool-specific questions arising on the online forum. In total, 72 people registered and 33 posts or comments were added by users and facilitators (as at 15.09.2015).

## The <u>Country Profile of Slovakia</u> provides a comprehensive pictures of all the different actitities that can form a national QI process.

Danica Stanekova, National Reference Center at the Slovak Medical University

#### 1. How did you motivate people to get involved?

At the beginning of the Quality Action project, we sent out information about it to all NGOs and GOs working in HIV prevention in Slovakia. All organisations were asked whether they would like to participate in the project. We explained the benefits of taking part in the process: the opportunity to improve their programmes/projects, participation in regional and/or national training, having space to get into an exchange with colleagues on challenges and receiving certificates of attendance. Several NGOs signaled interest and decided to take part.



#### 2. What are the general results and conclusions from the (Quality Action) process in your country?

Four tools - Succeed, PIQA, QIP and PQD - have been translated into the Slovak language with the aim to include more organisations into the quality improvement process in Slovakia.

Four people from Slovakia were trained in Succeed and PIQA at the European-level training workshops. Back home they did not only share their experiences with colleagues in their organisations, but also with participants in national training organised in Slovakia. During this event, Quality Action was introduced to 16 participants working in HIV/AIDS prevention in Slovakia, as were the tools Succeed and PIQA. A second part of the training was organised to help people prepare their Succeed tool application in practice. At the end of the meeting, a short workshop facilitated by the psychologist was organised to improve the communication skills of participants.

The main effects of the involvement can be seen in the results of the tool applications: the applications helped organisations to take on a more systematic approach to reflection in their daily work. Participants were enabled to think about the project in more depth and complexity – also in regard to future perspectives. Team members sometimes only then realised that they were facing the same problems. On an individual level, participants reported a fruitful exchange with more experienced colleagues that furthered their own professional development.

#### 3. Can you identify some key elements that shaped the process in your country?

As the two main key elements we identified the coordination and support by the Slovak Ministry of Health and Slovak Medical University on the one side – and the enthusiasm and interest of staff involved from GOs and NGOs on the other.

## 3. Participation Guide

To offer a maximum level of support, we drafted a document addressing interested stakeholders and guiding them through the process of participation in Quality Action. The criteria for participation, whose development was one of the key Elements of the Memorandum of Understanding Transparency and Independence Data protection and Ownership Voluntariness and Freedom from Compulsion Motivation Commitment to Partnership

Table 1

activities, were included in this guidance. To draft a meaningful guidance document we sought cooperation with Work Packages 4 and 5, whose Tool Selection Criteria and Trainer/Facilitator selection criteria were consequently included in what was ultimately called the *Participation Guide*. The guide refers people to the established communication tree for their support needs. Furthermore, it contains a template for a *Memorandum of Understanding* – an optional agreement to be signed by cooperating partners in one country to settle the terms of their collaboration regarding transparency and independence, data protection and ownership, questions of voluntariness and freedom from compulsion, motivation and commitment to partnership. We distributed the Participation Guide via the communication tree. The guide is added as a separate document to this report. The evaluation results showed that 67% of respondents used supporting documents provided by the project. However, the evaluation does not differentiate to what extent the Participation Guide or the Memorandum of Understanding specifically were used by participants/facilitators or projects/programmes.

#### 4. Recruitment

The Participation Guide also included two forms to asking individual representatives from organisations and projects/programmes to register to be trained in a tool and to apply a tool in practice. Following the communication tree, we organised this registration process and got in touch with all Associated and Collaborating Partners of the project and other interested stakeholders. We succeeded in registering more than 100 individuals to take part in the tool training workshops organised by Work Package 5. Most of these participants also registered to apply a tool within a project/programme. No project/programme registered without having a representative taking part in the European-level tool training workshops. The information collected on the registration forms for the workshops is most informative in regard to the composition of the entire group of participants.

## 5. Tool Application Planning Workshop

Being responsible for organising the four 'regional coordination/networking meetings' listed in the project proposal, we developed and hosted *Tool Application Planning Workshops* (Figure 3). These took place on the third day of the first European-level tool training workshops at the four different sites (Dublin, Barcelona, Ljubljana and Tallinn). The goals of the Tool Application Planning Workshops were to have people leave the workshop

• with a clear and detailed picture in mind how they will proceed with the tool application after the training

- knowing where to turn to for support (WP 6 structure)
- realising the importance to include relevant stakeholders into the quality improvement process (participation)

To achieve this, we introduced participants/facilitators to the means of support provided by the project, e. g. the WP6 communication tree, the online forum, the elearning tool developed by WP 5, the website and publications such as the Participation Guide and the Facilitation Guide developed by WP 5. The main focus of the workshop was to help participants/facilitators to prepare their upcoming practical tool applications. Therefore we concentrated our efforts on critical issues such as time, resources, support, skills and stakeholder involvement. Additionally, a working sheet was provided to participants/facilitators that offered guidance by asking for the first ten steps of the upcoming task of applying a tool. The workshop agenda and the worksheets can be found in the annex.



Figure 3

The evaluation results of the training workshops show that 92% of respondents rated the Tool Application Planning Workshop either very or rather useful. 93% stated they felt confident or very confident that they would apply a tool in the future.

## 6. Documentation Table

We developed a documentation table to document developments and progress of the practical tool applications after the first part of the European-level tool training workshops (see annex). In this document, each of the members of WP 6 documented the status, barriers and enablers and means of support provided to each practical application. The documentation table aimed to both keep other WP 6 members up-to-date on developments in other countries and to document enabling and challenging developments in the tool applications for later analysis. The updated documentation tables were to be circulated every two months. In practice, it turned out to take a lot longer to collect the information requested in the documentation table from country contacts so that the tables were circulated less frequently. We used the final versions of the documentation tables to extract enabling and hindering factors for this report (see *11. Enablers and Barriers*).

## 7. Case Studies and Certification

We further developed a *Case Study* template to be filled out by projects/programmes to document their practical tool application (see annex). The template covers basic information on the project/programme and documents steps taken and lessons learned throughout the practical application process. Together with WP 1 and 5 we chose a submitted Case Study to be the indicator of a completed tool application and used it as a requirement for receiving a Quality Action certificate (see figure 4). Participants/facilitators were introduced to the case

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studies in the Participation Guide and during the Tool Application Planning Workshop to ensure a low threshold for using the Case Study and a high return rate of completed templates.

## 8. Evaluation

As set out in the project proposal DAH as the WP 6 lead facilitated the data collection component of the evaluation process for Quality Action. In the subtask of distributing codes to ensure anonymity, DAH was supported by WP 5 lead, the Sexual Health Centre in Cork, Ireland. The task

included the two training questionnaires (pre- and postquestionnaire for the 1<sup>st</sup> and 2<sup>nd</sup> part of the European-level

	HIV	
	Quality Action Certificat	te
	nproving HIV Prevention in Europe	
This is to certify that		
has participated in Quality	Action (2013-2016) training in	
attending a total of	day(s) of training in Quality Assurance/Quality Improvement	it.
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tool training workshops), the tool application process questionnaire, the tool application outcome questionnaire and the final questionnaire. DAH sent out requests to participants to fill out the questionnaires followed by two reminders for each. The aim was to send the first requests one week after the respective European-level tool training workshops (training questionnaires), two weeks after each practical tool application (process questionnaire) and six months after each practical tool application (outcome questionnaire).

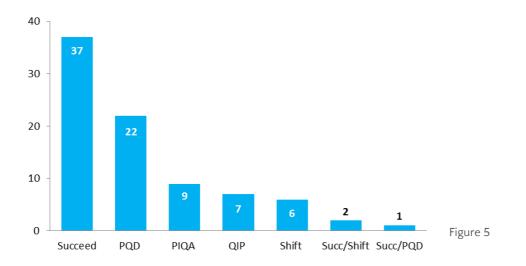
Participants/facilitators and projects/programmes were informed about the expectation to take part in the evaluation process in the Participation Guide. A more thorough introduction to the evaluation plan and the expectations of participants was part of the Tool Application Planning Workshops.

## **B. Results of the Practical Tool Applications**

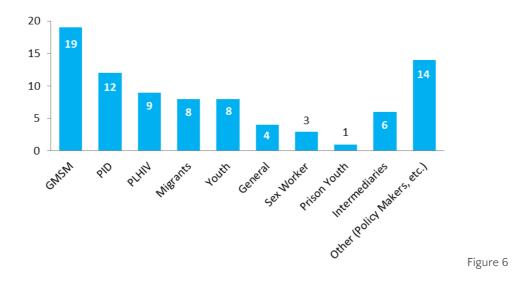
## 9. Information on Practical Tool Applications

87 case studies were returned to WP 6, including 84 completed and three partially completed practical tool applications (within the time frame of Quality Action as at 01/01/2016). Fifteen of these case studies were handed in by projects/programmes that worked with facilitators who were trained at National-level training workshops.

**Tools:** *Succeed* (37 tool applications) and PQD (22) were the most frequently used tools within those 84 case studies on completed applications. PIQA was applied nine times, QIP 7 and *Shift* 6 times. It is remarkable that *Succeed* was applied far more often than there were participants/facilitators trained in that tool at the European-level training workshops (see Figure 5, numbers in brackets indicate the number of participants trained in the respective tool).

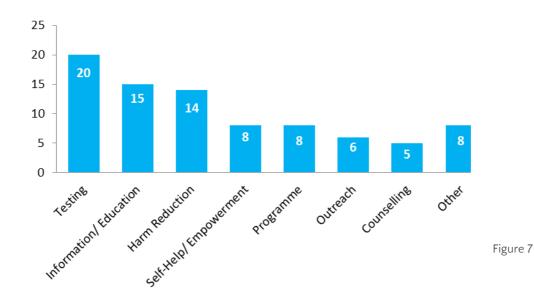


*Key populations:* Nineteen of these applications were implemented in projects addressing gay and other men who have sex with men, 12 address people who inject drugs, 9 address people living with HIV, 8 migrants and young people, 3 address sex workers, 1 address incarcerated youth and 6 address intermediaries. Thirteen tool applications were implemented in settings or programmes that address other key populations/beneficiaries or don't address a specific group at all (see Figure 6).





**Project Type:** By far the most applications took place in testing projects (20). Information/Education projects were subjects of tool applications 15 and Harm Reduction initiatives 14 times. Self-help/empowerment projects and initiatives at the programme level were involved eight times (see figure 7).



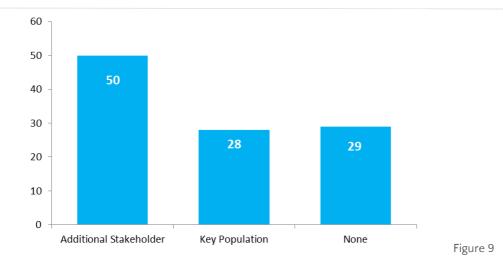
*European Region and type of organisation* (figure 8): By far the most applications took place in Western Europe (67) – corresponding to the fact that a majority of participants come from this region. While there were 13 practical tool applications in Central Europe, there were only two in Eastern Europe. The non-governmental sector carried out 58 practical applications, while governmental organisations were responsible for 22. In two cases, NGOs and GOs shared the responsibility for the practical application equally. Another two applications were implemented by other types of organisations, i.e. research or medical institutions.



Figure 8

**Participation of external stakeholders or representatives of key populations** (figure 9): In 50 of all practical applications, stakeholders external to the organisation were involved. In 28 cases, representatives of key populations took part in the practical tool application. All PQD and *Shift* applications were implemented with either external stakeholders or representatives of key populations. In more than half of the QIP and *Succeed* applications, external stakeholders or representatives of key populations were included. Only in one out of nine PIQA applications did external stakeholders or representatives of key populations take part.

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The following <u>Country Profile of Spain</u> illustrates vividly preconditions to create motivation amongst stakeholders to get involved into a QI project and to form a beneficial exchange within a network.

Eulalia Castells and David Paricio, Sida-studi

#### 1. How did you motivate people to get involved?

It's important, first, to provide tools with clear objectives so that people who have to implement the tools don't have to spend too much time doing that implementation. NGOs in Spain are very fragile and have few resources. In this sense, Quality Action offered tools and methodologies with clear outlines. We should analyse if the effort and the time spent in the training workshops was relevant or whether it could have been shortened. And we should also be able to specify more clearly the objectives of the different tools: are we are evaluating to better justify our work? Is it an assessment audit? Is it a process to gradually introduce elements of reflection, and improve our projects? etc.



Another element to motivate people is to state clearly the resources

needed to implement complex tools such as those proposed, in addition to the time people have to spend who are responsible for facilitating the implementations. We must also remember we are talking about tools that require a significant period of time, and, as happens in Spain where we work with national platforms, we have to consider the financial resources needed to move people around the country.

#### 2. What are the general results and conclusions from the (Quality Action) process in your country?

Waiting to be able to have a regional meeting (Spain and Portugal) to share the learning produced by this project, we think that the most relevant point is that we have been forced to stop, working like machines every day, to reflect on what we are doing and how we are doing it.

#### 3. Can you identify some key elements that shaped the process in your country?

We think one of the most significant features in the implementation of Quality Action in Spain regarding to the scope of the NGOs is that we have been working with three platform entities (2 throughout the nation and one at the level of Catalonia). This has allowed us to have participants in the pilot who were representatives of a large number of entities with regional representation, very important. We hope these people can simultaneously replicate the lessons learned in their respective organisations.

#### 10. Enablers and Barriers

We collected data on enablers and barriers in three different ways: by analysing the case studies (1), the documentation tables (2) and from an analysis provided by WP 3 of focus groups that took place during a Joint Work Package Meeting (3). We present the results separately in the following sections and offer a combined analysis of the available data in section C, Conclusions.

## (1) Analysis of the Case Studies

Case Studies were mainly handed in by people who had completed a tool application and had participated either in a European or national-level tool training workshop. To learn about enablers and barriers, we only analysed sections *7. Results and benefits of applying the quality improvement tool* and *8. Recommendations* of the 87 Case Studies received. We analysed data by using Qualitative Content Analysis (Mayring, 2010), i.e. we thematically coded and clustered data.

Six main *success factors* were identified:

- *Tool Fit* captures tool-related factors that can be supporting or challenging and that influence the application itself as well as people's strategies to respond adaptively to these factors. More specifically, tool fit refers to the appropriateness of the tool to the approach and scope of the project it is to be applied to, key population characteristics and to the resources available to the user that are identified as key for a successful application. A good tool fit is also achieved by users adapting the tool. (*78 citations*)
- Thorough Planning and Preparation refers both to the whole application process and the actual meeting during which the tool is applied. Planning and preparation were deemed essential, while a lack thereof, e.g. due to time restraints, was a main barrier. (39 citations)
- *Participation* puts the focus on the importance of involving the right people and strategies to achieve this involvement. A diverse group of relevant stakeholders increased the perceived benefit of the application but also resulted in an additional workload to organise it. (*29 citations*)
- *Facilitation* of the application process poses challenges, e.g. keeping a discussion both focused and creative, and is seen as a main success factor. The availability of a second facilitator and/or note-taker is described as extremely helpful. (*27 citations*)
- *Support* as a factor includes the obstacles created by a lack of that support (be it financial or personal) as well as strategies to organise support for the practical application process. Also, support in terms of commitment from co-workers, the management level and decision makers can make the application process easier or, if lacking, pose a serious challenge to it. (*16 citations*)
- *Technical Factors,* such as the availability of translations or online supporting materials are identified as making a difference. (6 citations)

The prominence of tool fit as a key factor in the case studies analysed is remarkable – but so is the proactive way users adapted tools and processes to their needs. The role of time and resources, organisational and management support as well as facilitation points to the importance of the working environment in enabling self-reflection and stakeholder participation.

## (2) Analysis of the Documentation Tables

Information gathered in the following refers to comments from WP 6 members found in the Documentation Tables that are referring to the two subsections *enablers* and *barriers*. They are derived from communication exchanges with country contacts regarding the practical tool applications underway within their countries. Comments were far more frequent in the *barriers* section than in the *enablers* section. The reason might be that country contacts regarded only information about barriers as especially noteworthy. The data stems from 118 planned applications, and includes both applications that have and have not been successfully completed. These applications relate to people who have participated either in a European or national-level tool training workshop.

The topic of *resources* is the one most often raised in the documentation tables by far (*28 times*). In terms of constraints, lack of time, limited availability of facilitators, lack of support from authorities and lack of financial resources are mentioned. The opportunity to plan and prepare the tool applications, to receive support within a team and financial assistance are cited as enabling factors for a practical tool application.

23 comments on *stakeholder involvement and participation of stakeholders* were found in the documentation tables. The majority referred to the challenge of involving relevant stakeholders in the practical application, due to a lack of time or motivation and other factors, such as geographical distance or concerns about confidentiality. Only once was the existing motivation of stakeholders to participate explicitly mentioned as enabling factor.

Other mainly challenging factors mentioned (*18 times*) were project-related (e.g. delays in the project), tool-related (e.g. technical language of the tool), organisation-related (e.g. change in responsibilities) and facilitation-related (e.g. limited skills of facilitators).

## (3) Analysis of Focus Groups at the Joint Meeting of Work Packages 4, 5 and 6

To validate information already gathered on enablers and barriers, we aimed to include additional perspectives by conducting focus groups. The questionnaire was developed in collaboration with WP 3. The focus groups were held during the Joint Work Package Meeting in Berlin in June 2015. A first focus

group involved people who had applied a tool and/or had supported an application on the country level. A second focus group was held among WP 6 members who had supported practical applications on the regional level. WP 3 agreed to facilitate the discussions and



analyse the data. Analysis of the two focus groups did not show significant differences in results.

Enablers and barriers identified are listed in Table 2.

Enablers	Barriers
Support	Wrong Tool Selection
Planning and Preparation	Barriers on the side of the implementers
Involvement and Participation	Barriers relating to resources
Enabling Environment and Networking	Barriers relating to the (organizational) environment

Table 2

Enabling factors connected to support were to have one person in charge of the Quality improvement process, to adapt the Quality improvement processes (e.g. tools and support mechanisms) to local needs, to have access to technical support (e.g. manuals) and organisational support. In regard to planning and preparation, resources such as time, finances and opportunities to become familiar with Quality improvement approaches were deemed important. Furthermore, the involvement of additional stakeholders and members of key populations in all stages of the process and showing appreciation for their involvement (e.g. by a certification process) was mentioned as another key enabling factor for a successful practical tool application. As a last enabling factor, an enabling environment, e.g. a positive and supportive atmosphere when planning and running a Quality improvement process were described as important.

Selecting a tool that didn't fit the intended purpose or chosen project was listed as one of the main barriers. On an individual level of implementers, a lack of motivation and a fear of complexity were raised as challenges. Lack of resources, general support and internal organisational backing were three more factors identified as barriers to a successful tool application.

The authors from WP 3 conclude that enablers and barriers mainly represent two sides of the same coin, supporting the concept of describing them as *key factors* for a successful tool application. The authors furthermore add that the analysis of the focus groups supports the key factors already identified in the case study analysis to a large extent. The report on the results including the questionnaire for the focus group are added as separate documents to this report.

Portugal's Country Profile highlights, among other things, the importance of support in the different phases of a QI process.

Daniel Simoes, Adriana Curado, Miguel Rocha, GAT

#### 1. How did you motivate people to get involved?

Regarding the tool applications, teams saw the opportunity to have an active voice in the improvement of the project they were working on, and embraced it. The applications gave teams a structured moment to voice concerns felt with the projects they worked in. The process was supported by facilitators preparing the meeting and compiling results so that people didn't feel burdened by the application process. Further enablers for the process were the agreement from the Board of the organization and the support of expenses. The idea of a national Succeed training was well received by organisations, as everyone understands that continuous pressure towards results diverts focus from quality improvement, and an easy way to involve the teams in such a process was very well regarded.



#### 2. What are the general results and conclusions from the (Quality Action) process in your country?

Quality Action has given appropriate training to people and generated an adequate network for the initial implementation of quality assessment tools in our organization, which we will extend to several organisations working in the field of HIV. There seems to be a clear recognition of the added value of quality improvement processes, and the will to try to implement them. Time and financial resources are still constraints though.

During our plans to apply the Shift tool we learned that despite the interest from all the stakeholders involved, administrative authorisations can make the process very slow (one year to schedule the application, more or less). Even when motivation and interest are present, active collaboration from upper management (GO/Ministries of Health for example) are desirable in order to facilitate involvement when attempting to run a programme-based approach. Despite the constraints, it became evident that quality improvement provides a very interesting agenda for several GO's, who after the authorisations have been actively trying to organise their complex agendas in order to make the process possible.

#### 3. Can you identify some key elements that shaped the process in your country?

- One member of each screening centre was trained and conducted the process in each of the teams.
   NGO management support in terms of time allocated for the processes, and financial support for the venue and two days out of work scenario.
- (3) Self-motivated teams regarding HIV quality agendas

## **C.** Conclusions

# 11. Enablers and Barriers – Key Factors for the Practical Application of Quality improvement Tools

The three sources of analysis of enablers and barriers provide a comprehensive but precise picture of factors relevant for successful practical tool applications. In the analysis of the case studies, we identified key factors from the perspective of people applying the tools. These factors mainly focused on the practical application process itself. This perspective was enriched by data from the documentation tables filled in WP 6 members who followed up on each practical application. The relevance of structural factors, especially resources such as time, finances and personnel is added to the picture the case study analysis outlines. The results of both these analyses are supported to a large extent by the focus group data. Six key factors for a successful practical tool application are derived from these three sources of analysis. They mainly correspond to the key factors derived from the case study analysis (B.10.1) but include the additional factor of *Available Resources* as described in the analysis of the documentation tables and the focus groups. In summary, these six key factors are:

**Tool Fit** captures tool-related factors that can be supportive or challenging and that influence the application itself as well as people's strategies for responding flexibly, including making a range of adaptations.

*Planning and Preparation* refers to the whole application process as well as the actual meeting or workshop during which the tool is applied.

*Participation and Involvement* puts the focus on the importance of involving the right people and the strategies to achieve it.

*Facilitation* of the application process poses challenges, e.g. keeping a discussion both focused and creative, and is seen as a main success factor.

*Available Resources* are those already existing within an organisational structure that people can draw on for the implementation of a quality improvement process.

**Additional Support** as a factor includes the obstacles created by a lack of that support (be it financial or personal) as well as strategies to organise support for the practical application process.

The 6 Key Factors	Exemplifying Citation		
Tool Fit	'The PQD was definitely the right tool to choose for a project targeted to migrants.'		
Planning and Preparation	'An important lesson we learned: Be over prepared if you ask people to invest time (that they really don't have).'		
Participation and Involvement	'Inviting stakeholders demands a bit of effort and motivation. A side effect, however, is that they feel much appreciated for their input and perspective.'		
Facilitation	'Using two facilitators and taking turns being the lead facilitator enables more on the spot reflections on the process. The role of the facilitator/moderator cannot be understated.'		
Available Resources	'Some financial resources has to be allocated for the successful application of the tool.'		
Additional Support	application of the tool.' 'Build support within your organization, especially with your management. You'll need them for feedback and investing resources.'		

The quotations listed in Table 3 illustrate the six key factors.

Table 3



The combination of process-specific and structural factors allows for a comprehensive explanation of practical tool application dynamics. Summed up, it is the multitude of these factors and their interactions that determine the success of applying a Quality improvement tool. To create supportive conditions for practical applications, means of capacity building have to be complemented by the provision of an enabling environment/structure for those interested in applying Quality improvement tools.

## 12. Challenges for Work Package 6 Support

In our role as WP 6 members we also faced challenges during our activities aiming to support projects/programmes in applying tools. These challenges relate to the communication with country contacts and projects/programmes, the online forum and facilitating data collection for the evaluation process of Quality Action.

Communication Structure: During the course of the project, it became apparent that
most of the communication between WP 6 members and country contacts and
projects/programmes was initiated by us for the purpose of collecting update or
disseminating information. Actual requests from country contacts and
projects/programmes reached us less often. In most of those cases, supportive action
meant providing people with the documents/questionnaires they required. Qualitative
evaluation data confirms that support from WP 6 contacts was not used by
projects/programmes to a large extent. This is not surprising considering the fact that
people were asked to seek help from their country contacts in the first instance. Most of
the trained participants said they knew whom they could contact in case they needed
help, as the following quote illustrates:

"I think that the leading group has been sending us a lot of information and emails saying 'we are here to support'. You can write and you can visit the website, and you can ask from the forum and you can use the e-learning, you can do this, you can call, you can write. So they offer, quite periodically I would say, ... a lot of support. I did not take advantage of this because it was easy enough and my project was small; I didn't have big questions to make. But I think they have been there, trying to be useful and they have promoted the possibility of supporting us a lot." (FGD 5)

Quantitative evaluation data shows that 40% of responding participants/facilitators used support offered by WP 6 or country contacts. During the process it proved to be difficult to keep up a communication flow between the three levels of projects/programmes, country contacts and us as WP 6 members. This was reflected e.g. in the extensive time it took us to update the Documentation Tables. By the time we had gathered information on all projects/programmes, some of it was already outdated again. One reason for this challenge might have been the communication structure chosen: the responsibility and additional work load for country contacts to facilitate the communication process might have been too demanding, considering that most of them didn't have the additional capacity to do so. Projects/Programmes and country contacts sometimes didn't know



each other, which also posed an additional obstacle for communication, as qualitative evaluation data shows. Alternative ways of communicating were discussed multiple times at our WP 6 meetings and also at the steering group meetings. However, there was agreement that there was no alternative that would also fulfil the important goal of building sustainable networks on the country level.

Greece's Country Profile highlights, among other things, the importance of good planning for national implementation, use of quality improvement tools, creating a team spirit, support during the different phases of a quality improvement process and a sustainability plan.

Vasileia Konte, Magdalini Pylli, Stamatis Poulis, Christos Chryssomallis, Ilias Liantis, Hellenic Centre for Disease Control and Prevention, KEELPNO

#### 1. How did you motivate people to get involved?

A roadshow was organised early, during the beginning phase of the project. It was targeted to the major HIV prevention project implementers in Greece as identified through the Dublin Declaration Reporting process. The aim of the roadshow was to inform about Quality Action, to register participants for national training, to register projects for tool application and to structure implementation in Greece, taking into account the views of stakeholders and their needs. The use of a quality improvement tool on the implementation of Quality Action itself also helped to make quality changes that improved national implementation.



#### 2. What are the general results and conclusions from the (Quality Action) process in your country?

- > 7 people were trained on the European level, 5 members of the Quality Action team at KEELPNO and 2 from NGOs.
- > Creating a Quality Action team at KEELPNO with trainers for all five tools.
- 1st cycle of national training in Succeed and PQD with 33 participants. The training was conducted with European experts and resulted in more than 16 practical applications of the tools.
- A 2<sup>nd</sup> cycle of national training in Succeed is now taking place with 25 people trained. This training was conducted by the Quality Action team at KEELPNO, demonstrating the success of the train-the-trainer approach.

#### 3. Can you identify some key elements that shaped the process in your country?

(1) Creating a local Quality Action team. Good methodology and planning, adjusted to local conditions, helped us build a team spirit among all stakeholders during the project period and also addressed the issue of sustainability.

(2) The use of quality improvement tools in the project itself, especially the implementation of national training and practical applications in Greece helped us develop a participatory way of working.

(3)The project itself created a team spirit among GOs and NGOs and a determination to keep using the tools.

(4) Working together as a team of two facilitators helped us go through the process of applying tools and complete the case studies.

(5) Increased national level support during practical application of the tools helped our participants to better understand the tools and overcome the difficulties they faced.

• Usage of Online Forum: Concerns that the uptake of the online users forum especially created for the project might be low were there from the very beginning of planning it. That is why we set our expectations rather low and installed it as a safety net only. Even though 72 users registered, there was very little traffic on the forum (33 posts in total as at 16/09/2015). In the beginning, DAH and CCDA tried to motivate users using monthly notices and referrals to the online forum. After the first tool training workshop, tool trainers were also asked to join the online forum in order to create an additional incentive for people to post questions or experiences. The announcement that trainers were available to users directly via the forum also didn't create any more traffic. As mentioned before, very few requests for support from country contacts or participants/facilitators reached WP 6 members. The same seems to be mirrored here. The evaluation report provides further insight on the question of why the forum was used so little: participants/facilitators mentioned the added effort to log into the online forum, the lack of attractiveness of the online forum and the uncomfortable feeling of being the first to

post questions. Still, people in the evaluation focus groups emphasised the potential role the online forum might play in the future when, once the project is over, face-to-face meetings may no longer take place and questions concerning tool applications may still arise.

In conclusion, the online forum served its purpose as a safety net. Its full potential as a networking tool was, however, not even nearly reached. Considering the rather small effort it took to create the online forum and maintain/facilitate it, it was worth the attempt. Still, for future projects it should be discussed thoroughly whether such a tool can be helpful and if so, what means need to be taken to support its success.

Facilitating Data Collection for Evaluation: A very practical challenge resulted partially from the already described problems in acquiring updated information on practical applications. We had the task of contacting projects/programmes with requests to provide data for evaluation through questionnaires and send two follow up reminders starting two weeks after the approximate completion of the tool application. Due to information inaccuracy and problems to define a clear end of an application, projects/programmes, we weren't always able to contact projects at this exact point in the process. As a consequence, people may not have filled in the questionnaire on time or at all. Some projects/programmes responded to the request with updated information on their adapted timeline and we adjusted the evaluation procedure accordingly. The combination of the expectation that requests and reminders would be sent according to individual, project-specific timelines for practical application, inaccurate information on the status of applications, and adjustments to timelines resulted in an unexpectedly high work load for the DAH as the facilitator of data collection for evaluation. Another obstacle was created by the system of distributing individual codes in order to compare the evaluation responses of individual participants over time. To keep confidentiality and anonymity, the distribution of codes was handled neither by WP 6 or WP 3, but a third neutral party, a staff member of WP 5. Effective communication was difficult to achieve with the three different stakeholders involved and a fourth party, the participants/facilitators and projects/programmes themselves, who needed assistance with questions regarding their codes. Over the course of the project, people reported a declining motivation to fill in questionnaires, compounded by reported difficulties with telling the different requests and reminders apart. One of the reasons may have been that most participants of the evaluation were approached with four different questionnaires and two reminders following each request to fill them in.

For future projects following a similar approach, we recommend to create fewer questionnaires per respondent group and approach them simultaneously at different time points in the overall process, not only to reduce work load but mainly to enhance data accuracy and the response rate. It should also be reconsidered whether a comparison of individual data and thus the distribution of individual codes are necessary.

## 13. Collaboration with WP 5 and other WPs

The successful collaboration between WP 1, 5 and us proved to be a key factor in recruiting, training and supporting participants/facilitators in their practical applications. Instead of implementing the respective work plans separately, we sought a close collaboration to help keep overall benefits and needs in mind and create as much synergy as possible. Especially during the preparation and implementation of the European-level tool training workshops, the collaboration gave space to all aspects relevant to ensuring their motivation of participants/facilitators for the upcoming phase of the practical tool application. This close collaboration was characterised by constant reflection and adaptation to improve the work. The integration and consideration of multiple perspectives in this process was essential. Result and symbol of this close collaboration was the development of the two Joint Work Package Meetings in Berlin in June 2015.

We also worked closely with other work packages, especially WP 3, on the topic of data protection and confidentiality within Quality improvement-related collaborations. These topics became priorities in order to respond to potential reservations of NGOs connected to a mainly governmentally-driven initiative in Quality improvement such as Quality Action in times of financial crisis. Discussions between work packages and within the steering group resulted in an evaluation procedure that took those concerns into consideration and created a Quality improvement project environment that NGOs were willing to engage in, as the very high practical application rates among NGOs prove.

## 14. A community of common practice

The successful tool training workshops and interactions during the practical applications helped to build a network that functions as a community of common practice:

'It is not just about the training but about the networks. Because the networks are how you do it. The interaction, sharing, meeting, face to face. The networking helps us to have high standards throughout Europe and that is the important thing'. [Quote from one of the European-level training workshops]

Especially NGO participants/facilitators took ownership of the process with more than half of the trainees and two thirds of the more than 80 tool applications coming from NGOs. As confirmed by evaluation results, the practical focus of the two-part tool training workshops boosted skills, confidence and networking. The organisers reflected on and adapted the training throughout, tailoring methods to the needs of participants. A community of common practice now exists across Europe with a network of trained Quality improvement practitioners. Quality Action learned to balance adhering to knowledge-based and validated Quality improvement tools while responding flexibly to the barriers and constraints faced by

participants. They in turn adapted the tools, shared problems and exchanged solutions within the emerging European network of individuals and organisations in 25 different countries, a community of common practice. This network continues to develop a culture of continuous improvement in HIV prevention, increases multidisciplinary collaboration and exchanges knowledge, skills, and expertise across organisations and countries. The overall high uptake of Quality improvement tools that Quality Action achieved shows that it is possible to communicate the benefits and integrate the practice of Quality improvement into complex prevention settings, as long as barriers and constraints are met with a participatory and empowering response.

## References

Mayring, P. (2010). Qualitative Inhaltsanalyse. In: Mey, G. & Mruck, K.: Handbuch Qualitative Forschung in der Psychologie, p.601–613. Wiesbaden: VS Verlag für Sozialwissenschaften.

## Annex

- 1. Country Contacts
- 2. Tool Application Planning Workshop Agenda
- 3. Tool Application Planning Workshop Worksheet– 10 steps to start using the Quality Action tools, example: PIQA
- 4. Tool Application Planning Workshop Worksheet Questions to think about before starting the practical application
- 5. Documentation Table
- 6. Case Study Template
- 7. List of Case Studies

Separate Documents:

- Participation Guide
- Final brief report on the Focus Groups



→ YOUR MAIN	→ YOUR MAIN CONTACTS/PARTNERS IN YOUR COUNTRY	DUNTRY	
			(HIV) Quality Action
Your Country	Your Main Contacts/Partners in Your Country	buntry	inproving nu Prevention in Europe
(as project/ programme or facilitator/ trainer)	Organisation	Main Contact	E-Mail
Austria	Aids Hilfe Wien	Sabine Lex	<u>lex@aids-hilfe-wien.at</u>
Belgium	Sensoa vzm	Sandra Van den Eynde	<u>Sandra.VandenEynde@sensoa.be</u>
Bulgaria	Bulgarian Ministry of Health	Bahtiyar Karaahmed	<u>BKaraahmed@hdp.bg</u>
Croatia	Croatian National Institute of Public Health	Jasmina Pavlic	<u>jasmina. pavlic@hzjz.hr</u>
Estonia	National Institute for Health Development	Aljona Kurbatova	<u>Aljona. kurbatova@tai.ee</u>
Finland	National Institute for Health and Welfare	Henrikki Brummer	<u>Henrikki. Brummer@thl.fi</u>
France	AIDES	Stephane Giganon	<u>sgiganon@aides.org</u>
Germany	Deutsche AIDS-Hilfe	Carolin Vierneisel	carolin.vierneisel@dah.aidshilfe.de
Greece	KEELPNO	Vasileia Konte	<u>konte@keelpno.gr</u>
Ireland	The Sexual Health Centre	Deirdre Seery	<u>dseery@sexualhealthcentre.com</u>
Italy	Lega Italiana per la Lotta contro l' Aids	Maria Luisa Cosmaro	<u>l.cosmaro@lilamilano.it</u>
Lithuania	Centre for Communicable Diseases and AIDS	Rima Krupenkaite	<u>rima@ulac.lt</u>
Luxembourg	HIV Berodung Croix-Rouge	Laurence Mortier	laurence.mortier@croix-rouge.lu
Netherlands	Aids Fonds -STOP AIDS NOW!	Cor Blom	<u>cblom@soaaids.nl</u>
Norway	Norwegian Directorate of Health	Karl Kristian Rådahl Kirchhoff	<u>Karl.Kristian.Radahl.Kirchhoff@helsedir.no</u>
Poland	Social AIDS Committee	Aleksandra Skonieczna	aleksandra.skonieczna@skaids.org
Portugal	GAT contactos	Daniel Simoes	<u>daniel.simoes@gatportugal.org</u>
Romania	National Institute for Infectious Diseases	Daniela Pitigoi	<u>danielapitigoi@yahoo.co.uk</u>
Slovenia	Drustvo SKUC	Miran Solinc	<u>Miran.solinc@amis.net</u>
Spain	Sida-studi	Eulalia Castells	<u>quality@sidastudi.org</u>
Slovakia	Slovak Medical University	Danica Stanekova	<u>danica.stanekova@szu.sk</u>
Sweden	The Public Health Agency of Sweden	Lennie Lindberg	lennie. lindberg@folkhalsomyndigheten. se
Switzerland	Federal Office of Public Health	Stefan Boller	<u>stefan. boller@bag.admin.ch</u>
United Kingdom	Public Health England	Anthony Nardone	Anthony. Nardone@phe.gov.uk

## 1. Country Contacts



2. Tool Application Planning Workshop – Agenda

# Tool Application Planning Workshop

## Agenda

- Part 1: Welcome, Purpose of the meeting, introduction 09:30 09:50 Part 2: Project Outlines - Timelines, Means of Support 10:45 Coffee Break 11:00 Part 3: Planning of the practical application Pt 1 (Focus on the planning) 12:15 Part 4: Exchange on the Planning Pt 1 Joint Lunch 12:30 13:30 Part 5: Planning of the Practical Application Pt 2 (Focus on the resources) 14:30 Coffee Break 14:45 Part 6: Discussing ideas/ challenges, Collecting Needs Part 7: Mapping Excercise 15:45
- 16:00 End

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3. Tool Application Planning Workshop Worksheet– 10 steps to start using the Quality Action tools, example: PIQA

## 10 Actions to start using the Quality Action Tools

Checklists for applying Succeed, QIP, PQD, PIQA and Schiff in practice

## Introduction

These checklists are designed to assist people working in HIV prevention in planning the practical application of the five quality assurance/quality improvement (QA/QI) tools used in Quality Action. They are meant to assist at a particular point in the process: after the decision to use a particular tool on a particular programme or project and after learning how the tool works, but before taking the first step in implementation.

For each tool, the checklists have spaces for 10 key actions that will start the process of applying it to an HIV prevention programme or project in the field. There is room for each user to note down their personal next step in relation to each action.

The checklists are there to help bridge the gap between learning about a tool in a workshop or online, and actually using it in a real-life situation. They do not replace the more detailed descriptions and instructions contained in the tools and training materials themselves. Rather, they are a quick-reference guide to make the all-important first step easier to take.

We have developed these 10-point checklists on the basis of the existing materials for each tool, the expertise of their authors and the experience of participants in the training workshops conducted as part of Quality Action. The checklists are living documents that users can change and adapt according to their priorities and experience with the tools.



# 10 key actions to start using PIQA

		s.a
	Action	My next step
1	Meet as the team/group that will use PIQA together.	
2	Set a completion date and develop a timeline by dividing the process into phases (preparation, application, follow-up).	
3	Decide if the tool needs to be translated.	
4	List the stakeholders you want to include.	
5	Decide whether you will use an independent facilitator.	
6	List all the background information you need on the programme/project.	
7	Divide up tasks among the team.	
8		
9		
10	Tell your Quality Action country contact about your plan and timeline.	



4. Tool Application Planning Workshop Worksheet – Questions to think about before starting the practical application

Try to broaden your perspective on your practical application and think about ...

## 1. In general

- Do you feel well-prepared to apply the tool? If not: What do you need to feel so?
- Have you chosen a programme/project for the practical application of a QA/QI tool? If not yet, what do you need to make that choice soon?
- Which goals do you aim to achieve with the practical application?
- What are possible obstacles and challenges on your way?

## 2. Time

- When will you apply the tool? Which month(s)?
- How many working hours can you dedicate to the practical application during this period?

## 3. Involvement of other stakeholders

- Who else needs to be involved from your organisation?
- Who else needs to be involved from other organisations?
- Do you need permissions/support of other people to run the practical application?
- When will you contact them?
- How can you convince them to support this activity?

## 4. Resources

• Will you need additional financial, in-kind or human resources? What are they and where will you get them from?

## 5. Challenges

• What kind of challenges do you expect and which ones you don't?

## 6. Support

- What kind of support will you need from your Quality Action country team? How do you want to collaborate with them?
- What other kinds of support will you need from Quality Action?

Quality Action Improving HIV Prevention in Europe	Monitoring table Report done by		Organisation:		Person:	
To be filled in once Name of the project	Organisation	Country	Target population	Tool(s)	Trainer	Timeframe
To be filled in after each contact						
Date	Status of the implementation	Obstacles/Challenges	Enablers	Means of support	Comments	Suitable as Case Study?

## 5. Documentation Table

v

HIV

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#### 6. Case Study Template

## Quality Action Case Study

#### 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.)

#### 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.)

Klicken Sie hier, um Text einzugeben.

#### 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..)

Klicken Sie hier, um Text einzugeben.

**Project/programme** Please briefly describe the project/programme to which you applied the tool.

Klicken Sie hier, um Text einzugeben.

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

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

Klicken Sie hier, um Text einzugeben.

#### 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.)

Klicken Sie hier, um Text einzugeben.

#### 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.)

Klicken Sie hier, um Text einzugeben.

#### 8. Recommendations

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

Klicken Sie hier, um Text einzugeben.

#### 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.

I want this case study to be published anonymously, meaning that names of countries, organisations, people and contact details/websites in the text above will be removed by the editors before publishing.

I want this case study to be published without mentioning people's names, meaning that names of people in the text above will be removed by the editors before publishing, but names of organisations and countries as well as website addresses will remain.



## 7. List of Case Studies

No.	Country	Organisation	Authors	Applied Tool	Addressed Key Population
1	Austria	Aids Hilfe Wien	Hassani	Succeed	People Living with HIV
2	Austria	Aids Hilfe Wien	Lex	PQD	Migrants
3	Austria	Aidshilfe Oberösterreich		Succeed	Gay and other Men who have Sex with Men
4	Austria	Aidshilfe Salzburg	Friedrich	Succeed	Youth
5	Austria	Aidshilfe Tirol	Recheis	Succeed	Gay and other Men who have Sex with Men
6	Austria	Aids Hilfe Wien	Schibler	PQD	Gay and other Men who have Sex with Men
7	Belgium	Sensoa	Van den Eynde, Borms & Sergeant	Succeed	Gay and other Men who have Sex with Men
8	Belgium	Sensoa	Borms	PQD	Other
9	Belgium	Sensoa	Van den Eynde & Borms	QIP	Gay and other Men who have Sex with Men
10	Bulgaria	Ministry of Health		QIP	Gay and other Men who have Sex with Men
11	Croatia	Croatian National Institute of Public Health	Nemeth Blažić, Pavlić, Kasumović & Glamočanin	Succeed	General
12	Croatia	Croatian National Institute of Public Health & Help	Puljiz, Mardešić, Nemeth Blažić & Pavlić	Succeed	People who inject drugs
13	EU	Quality Action	Nöstlinger & Vyulsteke	Succeed	Other
14	EU	Aids Action Europe		Succeed	Other
15	Finland	Pro-tukipiste	Häggman	Succeed	Gay and other Men who have Sex with Men
16	Germany	CASAblanca	Graefe & Fontaine	Succeed	Migrants
17	Germany	Deutsche AIDS-Hilfe	Gurinova & Vierneisel	PIQA	People who inject drugs
18	Germany	Deutsche AIDS-Hilfe	Pauly	PQD	People Living with HIV
19	Germany	Deutsche AIDS-Hilfe	Pauly	PQD	People Living with HIV
20	Germany	Deutsche AIDS-Hilfe	Vierneisel	PQD	People Living with HIV
21	Germany	Deutsche AIDS-Hilfe	Vierneisel & Bock	Succeed	Other
22	Germany	Deutsche AIDS-Hilfe	Vierneisel, Böthner, Klumb & Lemmen	Shift	Other
23	Germany	Cologne Health Authority	Kloos-Quiroga, Nitschke, Rannersberger & Wolff	QIP	Sex Worker
24	Germany	Aidshilfe Dortmund	Gretenkord	PIQA	People who inject drugs
25	Germany	Aidshilfe München		Succeed	People Living with HIV
26	Germany	Deutsche AIDS-Hilfe	Gronski, Moersch, Boettger & Vierneisel	Succeed	People Living with HIV

27	Greece	Keelpno	Poulis, Syllantavou, Giobazolia & Festa	Succeed	People Living with HIV
28	Greece	Keelpno	Chrysomallis & Liantis	PIQA	People who inject drugs
29	Greece	Positive Voice		QIP	Multiple
30	Greece	Positive Voice		Succeed	People Living with HIV
31	Greece	Keelpno	Konte & Pilli	Succeed	Other
32	Greece	Centre for Life	Koulientenou & Kavouri	Succeed	Youth
33	Greece	Centre for Life	Koulientenou & Stergiou	PQD	Youth
34	Greece	Keelpno	Nikolopoulou & Stamou	Succeed	Youth
35	Greece	Keelpno	Nikolopoulou & Stamou	PQD	Youth
36	Greece	Ath Checkpoint	Chanos	Succeed	Gay and other Men who have Sex with Men
37	Greece	Positive Voice, Checkpoint & Prometheus		PQD	Multiple
38	Greece	Keelpno	Chrysomallis	Succeed	People who inject drugs
39	Greece	Keelpno	Liantis & Issaris	Succeed	Youth
40	Greece	Keelpno	Gkoma & Chalkidou	PQD	Gay and other Men who have Sex with Men
41	Ireland	GOSHH	Billie	PQD	General
42	Ireland	GOSHH	Billie	PQD	Sex Worker
43	Ireland	HIV Ireland	Donlon	Succeed	Migrants
44	Ireland	GOSHH	Mason, Woulfe & Billie	Succeed	Youth
45	Ireland	Sexual Health Ireland	Cocoran	PQD	Gay and other Men who have Sex with Men
46	Ireland	Sexual Health Ireland	Kennedy, Seery & Corcoran	Succeed	Gay and other Men who have Sex with Men
47	Italy	Lila	Cosmaro	PQD	Migrants
48	Italy	IRCCS	Palummieri	QIP	Multiple
49	Lithuania	Kaunas City Municipality		QIP	Prison Youth
50	Luxembourg	HIVberodung	Mortier	PIQA	Multiple
51	Latvia	DIA+LOGS	Kaupe, Seja & Zena	PIQA	People who inject drugs
52	Netherlands	Soa Aids Nederland		Succeed/ PQD	Gay and other Men who have Sex with Men
53	Netherlands	Soa Aids Nederland	Tempert	Succeed	Migrants
54	Norway	Aksept	Herrestad	Succeed	People Living with HIV
55	Poland	Social Aids Committe	Małkuszewski & Fusiek	PQD	People who inject drugs
56		Marshall Office of the Wielkopolska Region	Cieszkiewicz	Succeed/ Shift	People who inject drugs
57	Poland	Social Aids Committee	Skonieczna	Shift	General

58	Portugal	GAT		Succeed	People who inject drugs
		0.17		c 1	Gay and other Men who
59	Portugal	GAT		Succeed	have Sex with Men
60	Romania	The National Institute for Infectious Diseases & ARAS	Niculescu, Bals & Dan	PIQA	People who inject drugs
61	Romania	ARAS	Dan	PQD	Gay and other Men who have Sex with Men
62	Slovakia	Storm		PIQA	People who inject drugs
63	Slovakia	Odyseus	Chovancova	PIQA	People who inject drugs
64	Slovakia	OZ Prima	Palinek	PIQA	People who inject drugs
65	Slovakia	Slovak Red Cross	Vyslocky	Succeed	Youth
66	Slovakia	Slovak Medical University	Stanekova, Habekova, Drobkova, Mojzesova & Krahulcova	Succeed	Multiple
67	Slovenia	ѕкис	Solinc	Succeed	Gay and other Men who have Sex with Men
68	Spain	Comitè Primer de Desembre	Burgos & Salas	Shift	Gay and other Men who have Sex with Men
69	Spain	Cesida	Delgado Miranda & Delgado Valor	Succeed	Multiple
70	Sweden	Knowledge Centre for Sexual Health	Phersson	Succeed/ Shift	Other
71	Sweden	WAD Network	Rahm	PQD	General
72	Switzerland	Federal Office of Public Health	Heuer & Gnädinger	Shift	Other
73	Switzerland	Swiss Aids Federation	Lehner	QIP	Gay and other Men who have Sex with Men
74	United Kingdom	BHA for Equality	Chwaula & Hirst	PQD	Migrants
75	Anonymous			PQD	Other
76	Anonymous			QIP	Migrants
77	Anonymous			Shift	Other
78	Anonymous			PQD	Trans Sex Worker
79	Anonymous			Succeed	Gay and other Men who have Sex with Men
80	Anonymous			Shift	Other
81	Anonymous			Shift	Other
82	Anonymous			Shift	Other
83	Anonymous			Succeed	Migrants
84	Anonymous			Succeed	Gay and other Men who have Sex with Men
85	Anonymous			PQD	Other
86	Anonymous			PQD	Other
87	Anonymous			Succeed	Gay and other Men who have Sex with Men