Catalan Clinical Audit
Network for Quality Improvement
in Radiotherapy

CAT·ClinART

Co-funded by
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Catalan Clinical Audit Network for Quality Improvement in Radiotheraphy

CAT-ClinART, 101161063

Dissemination and Communication Plan

D2.1

T 2.1 Dissemination and Exploitation Plan and Strategy

Maria Carmen Pujades, Angel Lorenzo, Cristina Vilella Mestres, Noe Ventosa, Marta Bonet, Elisabet Escudero Lopez, Jaime Perez Alija, Nuria Jornet, Victor Hernandez, David Garcia Relancio, Ferran Guedea, Gemma Sancho.

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SUMMARY SHEET

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1. Executive Summary

1.1. Context

This plan outlines the dissemination and exploitation activities to be carried out for the CAT-ClinART project. Dissemination involves the proactive sharing of project outcomes with key stakeholders and target audiences to raise awareness, foster engagement, and promote the adoption of project results. Through CAT-ClinART, an infrastructure for clinical audits in Radiotherapy will be established in Catalonia, with the ambition of evolving into a permanent service and a scalable model applicable to other regions across Spain and Europe. Achieving this vision requires meaningful interaction and collaboration with stakeholders, ensuring that the project's objectives align with their needs and expectations.

By fostering these connections, CAT-ClinART will amplify its impact, not only within the immediate project scope but also beyond its geographical and temporal boundaries. This plan also includes a comprehensive timeline detailing the dissemination activities and their scheduling. The success of this initiative relies heavily on the active participation of our partners and advisory board, who will leverage their expertise and networks to enhance outreach. Their involvement ensures that project outcomes are communicated effectively through diverse communication channels, maximizing the visibility and utility of CAT-ClinART's results.

1.2. Objectives

The CAT-clin ART project aims to establish an infrastructure, methodology, and a sustainable plan for a permanent clinical audit service in Catalonia. Our goal is to instigate a shift in the professional culture within radiotherapy (RT) departments, encouraging quality assessment and continuous improvement as an integral part of everyday work.

A cornerstone of this transformation is the active integration of clinical auditors as key members within RT departments. Unlike external, periodic audits that may feel detached or evaluative, embedded auditors ensure that the process is dynamic, collaborative, and directly aligned with the unique workflows and challenges of each department. Their consistent presence enhances the relevance of the audits, providing actionable insights that are immediately applicable and tailored to the specific clinical environment. Positioning clinical auditors within departments facilitates a shift from a reactive to a proactive quality culture.

In essence, positioning clinical auditors as active members within RT departments, is not just an operational strategy; it is a transformative measure that embeds quality assurance into the DNA of RT departments, ensuring sustainable, equitable, and high-quality care for all patients. This active role underscores the critical value of audits as tools for progress rather than mere evaluations, positioning the CAT-ClinART project as a pivotal initiative in the evolution of radiotherapy practices.

To maximize the societal and medical impact of CAT-ClinART, we have developed this Dissemination, Exploitation and Communication (DEC) plan, encompassing all transferable aspects of the project.

Key Objectives of this DEC plan include:

- Inform and educate RT professionals and stakeholders about the value and methodology of the clinical audits developed and implemented through CAT-ClinART.
- Raise awareness and increase the visibility of the project to promote its widespread adoption and achieve greater scalability in a shorter period of time.
- Engage, build and foster the collaboration of a community that supports sustainable quality improvement in RT and its implementation in healthcare practice.
- Create an impact narrative to convey evidence of the changes in local, national, regional or global conditions achieved through CAT-ClinART.

The Dissemination and Communication Plan for the CAT-ClinART project addresses a comprehensive range of critical activities aimed at ensuring the project's success. Specifically, it includes visual identity of the project, identification of the target groups and stakeholders, strategies for dissemination and communication, internal communication, risk management and mitigation, and the exploitation of results. Each of these sections is tailored to ensure the effective dissemination, collaboration, and utilization of project outcomes.

Dissemination and communication efforts (Section 4) focus on raising awareness and visibility among diverse audiences, while internal communication mechanisms (Section 5) ensure smooth collaboration among consortium members, leveraging structured meetings and digital platforms. The plan also considers potential risks (Section 7), offering clear mitigation strategies to address challenges proactively. Finally, the Results Exploitation Plan (Section 8) outlines a framework for maximizing the impact of project outcomes, ensuring their accessibility and sustained utility. Together, these components form a robust strategy to meet CAT-ClinART's objectives.

1.3. Outline

Chapter 1: Executive Summary

This chapter provides an overview of the Dissemination Plan, summarizing its objectives, scope, and significance for the CAT-ClinART project. It highlights how dissemination, internal communication, and exploitation activities will maximize the project's impact and ensure the sustainability of its outcomes.

Chapter 2: Visual Identity

This section establishes the visual identity of the CAT-clin ART project, which is essential for consistent and recognizable branding. It includes a detailed style guide that covers logo usage, colour schemes, typography, and design elements to ensure cohesive communication across all materials and platforms. A strong visual identity reinforces project recognition and facilitates a professional presentation across audiences.

Chapter 3: Target Groups & Stakeholders

This chapter identifies the key target groups, including RT professionals, healthcare administrators, policy-makers, medical educators, and patient advocacy groups. It details the specific approaches for involving each group, fostering active participation, and tailoring messages to resonate with their unique needs and interests. Engaging these target groups is critical for fostering a community invested in continuous quality improvement and equitable healthcare.

Chapter 4: Dissemination and Communication Activities

A pivotal chapter that highlights dissemination and communication strategies aimed at creating visibility and raising awareness about the importance of clinical audits in Radiotherapy (dissemination) as well on the advances of the project to the wider community (communication). This section details the dissemination efforts planned, such as scientific publications, conference presentations, workshops, and online campaigns. These activities aim to increase visibility, foster collaboration, and promote the adoption of CAT-ClinART's results.

This chapter communicates the broader value of the project: enhancing patient outcomes through quality improvement, fostering a culture of excellence among RT professionals, and promoting harmonized practices that lead to equitable treatments. The narrative positions CAT-clin ART as a catalyst for long-term improvements in healthcare quality and policy, making a compelling case for sustained investment and support

Chapter 5: Internal Communication

This chapter describes the mechanisms for effective collaboration among project partners, including regular meetings, document-sharing platforms, and structured communication protocols. These ensure transparency and alignment throughout the project's duration.

Chapter 6: Review Process for Communication, Dissemination, and Exploitation

This section establishes a review process to ensure that all materials and activities are aligned with the project's goals, maintain high quality, and respect confidentiality agreements. It ensures consistency and effectiveness across all dissemination and exploitation efforts.

Chapter 7: Risks and Mitigation

Potential risks to dissemination and communication efforts, such as delays, miscommunication, or lack of stakeholder engagement, are analysed here. Mitigation strategies are proposed to address these risks proactively and ensure successful project execution.

Chapter 8: Developing and impact narrative

This chapter focuses on how the project's findings and methodologies will be utilized and scaled beyond its completion. It outlines strategies to ensure the long-term impact and accessibility of CAT-ClinART's outcomes for clinical, academic, and policymaking audiences.

2. Visual identity

2.1. Introduction

A visual identity for the CAT-ClinART project was carefully designed during the first three months to establish a cohesive and recognizable brand. This visual identity promotes a unified representation of the project, ensuring consistency across all internal and external communications. It includes a distinctive logo, standardized fonts, and design templates for reports, presentations, and other materials, which together create a professional and polished appearance.

This visual identity is applied to all communication materials, including the project website, informational leaflets, social media content, and other dissemination tools. The CAT-ClinART logo prominently features in these materials, accompanied by the European Union logo and grant number (101161063), in accordance with funding acknowledgment requirements.

In contexts where materials are adapted for different audiences or platforms, the established style guide serves as a reference to maintain visual consistency. This guide provides clear instructions on using the project's branding elements appropriately, ensuring the CAT-ClinART identity is instantly recognizable and consistently represented across all forms of communication. By adhering to this visual identity, the project enhances its visibility, reinforces its professional image, and supports its dissemination and engagement efforts.

2.2. Style guide

This style guide establishes the visual and textual standards for all communication materials related to the CAT-ClinART project. Adhering to these guidelines ensures consistency, professionalism, and effective dissemination of the project's objectives and outcomes.

3.1.1 Logo Usage

- **Primary Logo**: Use the official CAT-ClinART logo in all project communications.
  - Placement: Top-left corner for presentations, reports, and posters.
  - Size: Maintain proportions; do not distort or stretch.
  - Background: Place only on neutral or branded colours to maintain visibility.
- **EU Logo**: Always accompany the CAT-ClinART logo with the EU emblem and include the co-funding acknowledgment.

3.1.2 Colour Scheme

- **Primary Colours**:
  - Blue: HEX #003366 (official CAT-ClinART colour).
  - White: HEX #FFFFFF (neutral background).
- **Secondary Colours** (for highlights and emphasis):
  - Light Gray: HEX #CCCCCC.
  - Green: HEX #66CC66.
- Use these colours for headers, graphs, and design elements to ensure visual coherence.

3.1.3 Typography

- **Font Style**:
  - **Titles and Headers**: Heading 1 Calibri light Bold, size 16pt ; Heading 2 Calibri light 13; Heading 4 Calibri light bold 12pt
  - **Body Text**: Calibri, size 11pt.
  - **Footnotes**: Calibri Italic, size 10pt.
- **Alignment**: Justified.
- **Spacing**: Use 1.15 line spacing with an 6 pt space before and after paragraphs.

3.1.4 Formatting

- **Documents**:
  - Use numbered headings (e.g., 1, 1.1, 1.2) for clarity.
  - Include the project's title and logo on the cover page.
- **Tables**:
  - Use a consistent style with alternating row colours (light grey for contrast).
  - Label tables and figures with descriptive captions.
  - Cite all data sources below the table/figure.
- **References**: Follow the Harvard referencing style. Include author(s), year, title, and source in a bibliography section.

3.1.5 Key Communication Tools

- **Primary Tools**:
  - **OneDrive**: Centralized storage for all documents with role-based access.
  - **Microsoft Teams/Zoom/Google Meat**: Real-time collaboration for meetings and webinars.
  - **Institutional Email**: Formal communications and document sharing outside shared platforms (catclinart@gmail.com).
- **Secondary Tools**:
  - **Social Media**: LinkedIn and X (formerly Twitter) for outreach.

3.1.6 Presentations (slides)

- Power point will be used for presentations. A template following the visual guideline will be created to ensure consistency.

3.1.7 Meeting Notes

- Use the WP2-provided template for all meeting notes.
- Include:
  - Attendees
  - Date
  - Topics discussed.
  - Topics resumes

    - Proposals and decisions.
    - Responsible parties for tasks.
    - Deadlines for actions.
- Store finalized notes in the designated OneDrive folder within 48 hours.

3.1.8 Conclusion

This style guide is an essential tool to maintain consistency across all communication materials. By following these guidelines, the CAT-ClinART project ensures a professional, cohesive presentation that reinforces its mission and maximizes its impact.

4 Target groups & stakeholders

4.1 Introduction

The CAT-ClinART project engages a broad and diverse range of stakeholders, each with a unique role in contributing to and benefiting from the project's development outcomes. These stakeholders have to be informed on the progress of the project through different communication channels. Effective dissemination involves not only reaching these audiences but also actively involving them through tailored activities that foster long-term engagement and integration of project results into practice. This section elaborates on the different stakeholders, their expectations, and how they will be strategically activated through targeted communication and dissemination activities.

This chapter will further detail how each group will be engaged, the specific benefits they can expect, and how their feedback will be integrated into ongoing and future activities to create a cohesive, impactful communication and dissemination plan. **The different groups will be identified as target for communication (C) or/and dissemination (D) strategies**.

4.2 Stakeholders

4.2.1 Primary Stakeholders

- **RT Professionals:** These are the core users of the clinical audit methodology, directly benefiting from improved practices and enhanced patient outcomes. They involvement as auditees and potential auditors is in the core of CAT-ClinART project. Engaging them through workshops, news, LinkedIn posts, training sessions, and feedback mechanisms will be essential to foster a culture of continuous quality assessment and improvement. Section 3.2.3. for further details. **(C&D)**
- **Healthcare Administrators**: Responsible for implementing and supporting clinical protocols, administrators play a pivotal role in adopting audit practices within healthcare facilities and facilitating protected time for the professionals to conduct clinical audits. Meetings and targeted briefings will be used to highlight the operational benefits and long-term sustainability of audit integration. **(C&D)**
- **Policy-makers**: Their role is crucial in embedding the clinical audit system into regional health policies. Regular consultations, policy briefs, and engagement at strategic health forums will ensure that project results inform decision-making and align with broader health policy objectives. Section 3.2.3 for further details. **(C)**
- **Patients and Patient Advocacy Groups**: While not directly involved in the technical aspects, patients and their advocates are vital in reinforcing the project's focus on equitable and high-quality care. Tailored informational sessions, adapted leaflets, updates on project impact, and inclusion in public discussions will build trust and transparency. A patient representative is also part of the EAB. **(C)**

4.2.2 Secondary Stakeholders

- **Broader Medical Community:** This group includes healthcare professionals beyond the RT field who can benefit from the knowledge shared and lessons learned. Conference presentations, publications, and digital content will extend the project's influence to a wider medical audience. **(C)**
- **Medical Education Institutions:** These entities are key for integrating clinical audit practices into educational curricula. Medicine and Physics Universities as well as Technical Schools for RTT would be within this group. Collaborative activities, such as joint workshops and the development of educational materials, will help establish a foundation for future RT professionals to embrace quality improvement from the start of their careers. **(C)**
- **Educational Staff:** Faculty and instructors who teach and mentor the next generation of healthcare professionals are instrumental in perpetuating a culture of quality improvement. Workshops and targeted educational materials will be designed to incorporate clinical audit concepts into teaching programs. **(C)**

4.2.3 Key National Stakeholders

The success of CAT-ClinART relies on the active engagement of key national stakeholders who contribute to the project's implementation, dissemination, and sustainability:

- **Sociedad Española de Física Médica (SEFM)**: SEFM plays a pivotal role in the professional development and quality assurance of medical physicists in Spain. Their participation in the External Advisory Board (EAB) ensures the integration of high standards in radiotherapy audits and the adoption of best practices in clinical physics. SEFM is considered within the RT professionals' group. **(C&D)**

- **Sociedad Española de Oncología Radioterápica (SEOR)**: As the leading society for radiation oncologists in Spain, SEOR facilitates collaboration among professionals, ensuring that audit outcomes translate into improved clinical workflows and patient care. Their participation in the External Advisory Board (EAB) ensures the integration of high standards in radiotherapy audits and the adoption of best practices in radiotherapy practice. SEOR is considered within the RT professionals' group. **(C&D)**

- **Instituto Nacional de Gestión Sanitaria (INGESA)**: INGESA is essential for aligning the project's objectives with national healthcare policies. Their involvement as CAT-ClinART beneficiaries and their active role in all project WPs supports the dissemination and scalability of the clinical audit methodology across Spain. INGESA is considered within the policy makers group. **(C)**

- Subdirección General de Calidad Asistencial, Dirección de Salud Pública y Equidad en Salud, Ministerio de Sanidad del Gobierno de España: This department within the Spanish Ministry of Health is essential for aligning the project's objectives with national health health policies. Their involvement supports the dissemination and scalability of

the clinical audit methodology across Spain. They are considered within the policy makers group. (**C**)

- Departament de Salut, Generalitat de Catalunya: Health competencies in Spain are devolved to the regional governments. Therefore, engaging the relevant departments within the Catalan Health System is crucial for ensuring the long-term sustainability of the project. Specifically, the Section for Accreditation of Centres and Health Services, the Pla Director d'Oncologia, and the Pla Director de Sistemes d'Informació del SISCAT have been identified as the most pertinent departments for the project. They are considered within the policy makers group. (**C**)

Representation from SEFM and SEOR on the EAB guarantees that the clinical audit framework aligns with professional standards and clinical needs. The Spanish Ministry of Health, Pla Director d'Oncologia and Pla Director de Sistemes d'Informació del SISCAT are also represented in EAB, ensuring that the clinical audit methodology adhere to the national regulatory frameworks and that the sustainability plan that will be developed during the project is realistic and feasible. They will be key to facilitate to scalate the clinical audit methodology to other Spanish regions. Finally, INGESA's as consortium member further ensures that the dosimetry audits adhere to national regulatory frameworks and can be scaled to other regions. The Section for Accreditation of Centres and Health Services is also a project consortium member.

4.2.4 Key European and International Stakeholders

CAT-ClinART benefits from the collaboration of influential European stakeholders, ensuring alignment with EU-wide policies and facilitating the project's broader impact:

- **HADEA (European Health and Digital Executive Agency):** HADEA will be engaged to ensure that dissemination aligns with EU-wide health strategies. Their engagement not only provides all the resources to keep CAT-ClinART alive and ensures a successful execution but also helps link CAT-ClinART with other EU-funded health projects, amplifying its reach and impact.
- **SAMIRA (Strategic Agenda for Medical Ionizing Radiation Applications):** As a significant EU initiative focusing on radiation quality and safety, SAMIRA's involvement will enhance project credibility and amplify its impact. Collaboration with SAMIRA will include joint presentations, shared resources, and policy alignment activities. Members of SAMIRA are part of the EAB of the project.
- **European Society for Radiotherapy and Oncology (ESTRO)**: ESTRO provides expertise and networking opportunities, enhancing the scientific and clinical relevance of the audits. Their presence on the EAB strengthens the link between the project and the European radiotherapy community.
- **International Atomic Energy Agency (IAEA)**: IAEA provides expertise and networking opportunities, enhancing the scientific and clinical relevance of the audits. Their

presence on the EAB strengthens the link between the project and the international radiotherapy community.

These stakeholders are vital in promoting the dissemination and adoption of CAT-ClinART's outcomes beyond Spain, ensuring that the project serves as a model for quality improvement in radiotherapy across Europe.

4.3 Approach to Stakeholder Engagement

All dissemination and communication activities will be customized to meet the specific needs and interests of these stakeholders. This includes choosing appropriate channels and adapted language models—such as conferences, targeted workshops, digital platforms, and publications—to activate and maintain their involvement throughout the project. Ensuring that stakeholders are consistently informed, engaged, and able to contribute to the project will be key to sustaining momentum and fostering widespread adoption of the clinical audit methodology.

The key stakeholders have already been identified, and their representation on the External Advisory Board (EAB) has been confirmed and formalised by an NDA. To ensure effective communication of the project's progress and widespread dissemination of its results, the Communication and Dissemination Group will undertake a mapping of partners and stakeholders. This will facilitate community building and involve both individuals and organizations crucial to the project's success.

4.4 Conclusion

This chapter has described which stakeholders are involved and in which way they will be informed. Table 1 below gives a summary of the stakeholders, the level of communication, frequency and which means will be used.

Table 1: Overview of target groups and level of stakeholder involvement

Stakeholder	Communication Actions	Frequency*	Communication Channels
RT Professionals	Inform about progress Share project results	Regularly	Workshops Webinars Website Social media posts Leaflet Training courses EU funding and tenders portal Scientific communications.

Healthcare administrators	Inform about project results Keep their interest in project progress	Occasionally	Webpage Social media posts Targeted meetings Leaflet
Policy makers	Inform about project results Regulatory consultations	Regularly	Webpage Social media posts Targeted meetings Clustering events AOB meetings
Educational Staff	Supplying material and resources developed in the project related to clinical audit training.	Occasionally	Providing training material Workshops
Medical Education Institutions	Consultation in order to align with Core Curricula of all RT disciplines. Maintain collaboration	Occasionally	Targeted meetings
Patient and Patient Advocacy groups	Inform about project results Specialised consultations Maintain collaboration	Regularly	Website Social media posts Leaflet Targeted meetings AOB meetings
Broader medical community	Inform about project results	Regularly	Clustering events Website Social media posts Leaflet

** For clarification, this value includes three levels: Frequently, Occasionally and Rarely*

5 Communication and Dissemination activities

Communication and dissemination about CAT-ClinART will take place through various channels. The goal of these outlets is amongst others to keep undated the different stakeholders on the project progress (communication) and to facilitate the dissemination of the project results, create visibility and spread information amongst an external audience (dissemination). This chapter will explain which communication and dissemination activities will be organized during the project duration. We have decided on purpose not to separate communication and dissemination as some of the channels and activities will be used for both purposes. Stakeholders are the same as the one identified before (please refer to chapter 3 for more information)

5.1 CAT-ClinART website

On this website, the consortium will produce an open and consolidated compilation of deliverables and main outputs, ensuring broad accessibility and fostering the dissemination of project results. This resource will include a set of downloadable and freely available documents that describe the key outcomes of the project, such as audit guidelines, audit tools, educational material on clinical audits and Quality Indicators, background articles, and detailed descriptions of project activities. By centralizing these resources in one accessible platform, the website will facilitate knowledge sharing, capacity building, and widespread engagement with the project's goals and methodologies.

The website will go beyond serving as a repository for project deliverables. It will add significant value for external stakeholders, including healthcare professionals, policymakers, educators, and researchers, rather than being limited to the participating partners. The CAT-ClinART website will be a vital tool in achieving the following purposes:

- **Juridical Purpose**:
  The website will serve as the official source of information about the project, including details on its objectives, consortium members, sources of financing, and compliance with European Union guidelines. This transparency ensures accountability and trustworthiness for all stakeholders.
- **Dissemination Purpose**:
  The platform will act as a hub for outreach efforts, enabling the dissemination of project results to a wide audience. It will include communication materials tailored to diverse stakeholders, ensuring the project's visibility and impact extend beyond the consortium.
- **Communication Purpose**:
  The website will serve as a dynamic space for sharing updates on activities, events, and milestones linked to the project. Regularly updated content will keep stakeholders informed and engaged with the progress and achievements of CAT-ClinART.

The website is scheduled to go live in **month 3 (December 2024)** of the project and will be an integrated part of the communication and dissemination strategy. It will include links to the websites of project partners and provide direct access to related social media accounts to maximize outreach. A contact form will also be incorporated, enabling stakeholders to get in touch with the consortium for inquiries, collaboration opportunities, or feedback.

In addition, the website will be updated on a regular basis, with a minimum frequency of once per quarter, to ensure its relevance and alignment with ongoing project developments. This maintenance will reinforce the website's role as a credible and current resource.

5.1.1 Responsibilities of Project Partners

CAT-ClinART will have its own dedicated domain, making it easily discoverable online for anyone searching for the project acronym. Additionally, it will also be featured on the coordinator's institutional project webpage. Each project partner is encouraged to actively promote the CAT-ClinART website through their own communication channels, such as newsletters, institutional websites, and professional networks. By leveraging their unique platforms and audiences, partners can amplify the project's reach and ensure the website becomes a widely recognized resource within the radiotherapy and clinical audit communities.

In summary, the CAT-ClinART website will serve as the central pillar of the project's communication and dissemination strategy, bridging the gap between project partners and external stakeholders while supporting the internal functioning of the consortium.

5.1.2 Review and publication process

All website posts will undergo a review process by the Communication Group (WP2 members), as well as the Project Coordinator and Scientific Coordinator, prior to publication. The review process must ensure a maximum turnaround time of one week from submission to publication.

For more information visit CAT-ClinART website.

5.2 Webpages on partner websites

Each project partner has their own institutional website. These partner websites, frequently visited by health professionals, patients, and the general public, will amplify the visibility of the project. Each project partner's website will include a dedicated section with links to the CAT-ClinART webpage. A standardized project text will be drafted and distributed to all partners to ensure consistency.

5.2.1 Review and publication process

All dedicated sections on partner websites will feature a standardized project text, prepared and managed by the communication team of each respective institution. The Communication Group (WP2 members) will be informed to ensure alignment and consistency across all partner websites. Updates and publication timelines should adhere to institutional procedures, with the aim of a maximum turnaround time of one week.

5.3 Communication departments of each of the partner institutions

Communication departments across partner institutions will play a pivotal role in communicating information on the project development. They will assist in spreading updates through news, social media, and other organizational communication tools.

5.3.1 Review and publication process

The communication departments of each partner institution will be responsible for disseminating information about the project's development through their own channels, such as news updates, social media, and other organisational tools. This responsibility will be managed by the institution's representative in the Communication Group (WP2 members), ensuring alignment with the project's overall communication strategy. The Communication Group will be kept informed to maintain consistency and provide support where needed.

5.4 Information leaflet

The CAT-ClinART project has developed an information leaflet designed to communicate the project's objectives, methodologies, and impact in an accessible and engaging manner. The leaflet provides general information about the initiative and serves as a call to action to engage stakeholders.

5.4.1 Content and Format

- **Overview**: The leaflet outlines the project's mission to improve radiotherapy practices in Catalonia through clinical audits, focusing on harmonization, quality improvement, and patient safety.
- **Objectives**: Includes concise descriptions of goals such as establishing a clinical audit framework, specialized training, pilot testing in radiotherapy departments, and disseminating best practices.
- **Target Audience**: This leaflet has different versions adapted for four different groups: Healthcare professionals, policy-makers, patients, and advocacy groups.
- **Distribution**: The leaflet will be distributed digitally through partner hospital communication channels and by email to the different stakeholders, ensuring wide visibility among the intended audience.
- **Languages**: Available in Catalan, Spanish, and English to cater to local and international stakeholders.
- **Design**: Incorporates the CAT-ClinART logo, EU logo, and grant information, adhering to the project's visual identity guidelines.

5.4.2 Distribution Plan

The leaflets will be distributed amongst the project consortium members so that they can use it to promote the project through their contacts. It will also be sent through email to the different partners as well as shared on the CAT-ClinART website and social media platforms.

The leaflet will be ready for distribution by **February 1, 2025**.

5.4.3 Review and publication process

The communication departments of each partner institution will be responsible for disseminating information about the project's development through their own channels, such as news updates, social media, and other organisational tools. This responsibility will be managed by the institution's representative in the Communication Group (WP2 members), ensuring alignment with the project's overall communication strategy. The Communication Group will be kept informed to maintain consistency and provide support where needed.

5.5 Social Media

Social media will play a pivotal role in the communication strategy by broadening the reach of the CAT-ClinART project and engaging with diverse audiences. The project will maintain an active presence on LinkedIn, and X (formerly Twitter). By leveraging the power of social media, CAT-ClinART aims to create a vibrant online community while ensuring that its scientific contributions and project outcomes reach a broader audience effectively.

5.5.1 Strategy

- **Platforms**: Dedicated CAT-ClinART accounts on major social media platforms will share updates, news, and event announcements. All accounts will be cross-linked to the project website.
- **Content Plan**:
    - updates showcasing project milestones, training sessions, pilot results, and success stories (at least one each 2 months).
    - Highlighting key insights and findings from high-performing scientific publications to extend their visibility and impact.
    - Informative posts explaining clinical audit concepts, their importance, and their benefits in radiotherapy.
    - A dedicated "Frequently Asked Questions" section addressing common queries from stakeholders, hosted on social media and linked to the project website.

5.5.2 Review and publication process

Ideas for posts or draft content can be proposed by any project partner or collaborator. The institution's representative in the Communication Group (WP2 members) will oversee the preparation, alignment, and submission of posts for review, ensuring consistency with the project's communication strategy. Once a post is published, all project partners will be informed promptly, encouraging them to amplify dissemination efforts by sharing or reposting through their own networks.

5.6 Scientific publications

Scientific publications are a key element of the CAT-ClinART project's dissemination plan, aiming to share the project's findings and methodologies with the broader scientific and clinical community. The following guidelines outline the process for scientific publications by project partners.

5.6.1 Review and publication process

Before initiating any publication, the proposing partner must notify the WP2 Communication and Dissemination Work Package, the Scientific Coordinator, and the Project Coordinator, providing a draft manuscript or detailed abstract, the proposed timeline, and target audience details, including the journal. WP2 will review the content for alignment with project goals, compliance with EU4Health requirements, and confidentiality standards, while the Scientific and Project Coordinators will assess scientific quality and relevance, as well as adherence to dissemination policies and branding. Feedback to the proposing partner should be provided within two weeks of the proposal submission. Authors must allow at least 30 days for the full paper review process by the scientific and project coordinators before submission to the journal to ensure thorough assessment and avoid delays.

5.6.2 Authorship and Acknowledgment

- Authorship should reflect significant contributions in line with the Vancouver Guidelines.
- All publications/presentations in scientific meetings must include the following acknowledgment:

  "This work was supported by the EU4Health Programme under Grant Agreement No. [101161063]. The content reflects the authors' views and not necessarily those of the European Commission."

5.6.3 Open Access and Visibility

- All publications resulting from the project are expected to comply with Open Access policies to maximize their impact and accessibility.
- Partners should ensure their publications and presentations in scientific meetings are shared through the CAT-ClinART project's dissemination channels, including:

  - The project website.
  - Social media platforms.
  - Relevant conferences and workshops.

By adhering to these guidelines, CAT-ClinART ensures that its scientific contributions effectively communicate the project's innovations while maintaining transparency and compliance with its objectives.

5.7 Scientific meetings

The project results will also be showcased through at least four events in national and international scientific meetings during project lifecycle, including:

- Two national conferences (SEFM and SEOR meetings)
- Two international conferences (ESTRO and EFOMP meetings)

5.7.1 Review and approval process

Any project partner proposing to present at these meetings must submit a detailed proposal, including an abstract, objectives, and relevance to the audience, to the Communication Group (WP2) at least six weeks prior to the abstract submission deadline established by the meeting's scientific programme committee. The Communication Group will review the proposal for alignment with the project's communication strategy, while the Executive Committee (ExCom) and Scientific Coordinator will validate the scientific content for accuracy, relevance, and compliance with EU4Health dissemination standards. Final approval will be granted by the ExCom, after which the Communication Group will promote the presentation details through the project's communication channels to maximise visibility and engagement. This process ensures that all presentations effectively represent the project's objectives and maintain high scientific standards.

5.8 Webinars

Webinars will play a crucial role in the CAT-ClinART communication and engagement strategy, serving as a platform to share knowledge, project updates, and scientific insights with a broad audience including but not limited RT professionals, health authorities, hospital managers and patients, fostering knowledge exchange and collaboration.

5.8.1 Review and approval process

These webinars can be proposed by different project members, working groups, or even external stakeholders. In all cases, the proposal will be communicated to the Communication Group (WP2 members) to ensure alignment with the project's strategy. The content and structure of the webinar will be reviewed and approved by the Executive Board in collaboration. Once scheduled, the webinar details will be shared with all project partners to promote dissemination through their respective networks and maximize attendance.

5.9 Workshops

The CAT-ClinART project will culminate in a single final workshop, designed to showcase the project's key findings, and best practices. This event will serve as a platform for knowledge exchange, engaging stakeholders, healthcare professionals, and project collaborators to maximise the impact of the project outcomes.

5.9.1 Review and approval process

The practical organization and dissemination of the final workshop will be coordinated by the Communication Group (WP2 members), ensuring effective promotion and visibility. However, the primary responsibility for planning the workshop's content, structure, and agenda will rest with the Executive Committee and the Project Office. Together, they will ensure the workshop aligns with the project's objectives and engages all relevant audiences effectively.

Project partners will be encouraged to support the dissemination of the workshop details through their networks, amplifying the reach and impact of this key event.

5.10 Targeted meetings

Targeted meetings are small, informal gatherings designed to facilitate focused discussions with specific audiences about the project's progress, future plans, and strategic initiatives. These meetings provide a valuable opportunity to share updates, gather feedback, and foster collaboration tailored to the needs and interests of key stakeholders.

For instance, during the project, targeted meetings with healthcare administrators in institutions with radiotherapy departments will be organised to update them on the project's development. These discussions will aim to ensure alignment and coordination with the medical and nursing leadership at these centres, particularly during the pilot audit cycle.

By adopting a personalised and interactive approach, these meetings encourage active engagement, build strong relationships, and support the effective implementation of the project's objectives. The informal format ensures open dialogue, making them a vital tool for addressing specific challenges and opportunities within the project.

5.10.1 Review and approval process

The organisation and practical arrangements for these meetings will be the responsibility of the Communication Group (WP2 members). However, all targeted meetings must first be proposed and approved by the Executive Committee and the Project Office to ensure alignment with the project\u2019s objectives and strategic priorities.

Once approved, the Communication Group will manage logistical details and dissemination, ensuring the meetings are well-organised and effectively communicated to relevant stakeholders. Project partners will be encouraged to share updates and outcomes from these meetings within their networks to maximise their impact.

5.11 Clustering Events

At least one clustering event will be organized to highlight CAT-ClinART’s potential and foster collaboration with CLAUDIT also funded under the same EU4Health call.

5.11.1 Review and approval process

The two project offices will work closely to coordinate and ensure seamless organisation of these events.

The programme and structure of the joint events will be decided at the Executive Committee level to ensure they meet strategic objectives and maximise value for all stakeholders. Promotion of the event will be managed by the Communication Group (WP2 members), ensuring broad visibility and effective dissemination to the target audiences.

5.12 Training courses

In the first year, we will organize a training course on clinical audits using the QUATRO methodology. This course will target participants from all consortium members across various disciplines, including Radiation Therapy Technologists (RTT), Radiation Oncologists (RO), and Medical Physics Experts (MPE). This initiative is designed to enhance the skills and knowledge of professionals involved in the project, ensuring a comprehensive understanding and effective implementation of clinical audit practices.

5.12.1 Review and approval process

WP5 will lead the design, development, and internal review of the course, collaborating with experts from the EAB to ensure quality and relevance. The finalised course and materials will be submitted to the Executive Committee (ExCom) for approval, ensuring alignment with the project strategic goals. Once approved, the Communication Group (WP2) will handle the promotion and dissemination of the course and materials through the various communication channels, ensuring maximum visibility and engagement.

5.13 European Commission communication Tools

The project will engage with EU communication tools, such as the EU Health Policy Platform, to ensure visibility at the European level. At least one submission will be made to the platform, and results will be shared with the project officer as they emerge.

5.13.1 Review and approval process

Content for the platform, such as project updates, outcomes, or key milestones, will be drafted collaboratively by the responsible Work Package (WP) teams and reviewed by the Communication Group (WP2) for consistency and alignment with EU dissemination standards. Final submissions will be approved by the Executive Committee (ExCom) and the Project Office to ensure they reflect the project's strategic goals.

5.14 Conclusion

This chapter outlined CAT-ClinART's communication and dissemination activities, including websites, newsletters, social media, and scientific engagements. These efforts aim to ensure widespread visibility and impact throughout the project's duration. A detailed summary of activities, responsible partners, deadlines, and target audiences is provided in the table below.

Table 2: Overview of dissemination and communication activities

Activity	Done by whom	Target audience	Purpose	Timeline
Website	Launching: Project office Management: communication group WP2	• RT professionals • Patients and patient advocacy groups • Broader Medical community	Communicate and disseminate project details; provide Knowledge-sharing and visibility	Launching: December, 2024 Updated regularly (each month)
Information Leaflet	Communication group: WP2	• RT professionals • Patients and patient advocacy groups • Broader Medical Community • Healthcare administrators	Create a project information document for communication	Single occurrence event: December, 2024
Social Media	All partners	• RT professionals • Patients and patient advocacy groups • Broader medical community	Communication non-technical information about project benefits and the project development	Ongoing: periodic posts and as needed. See *Table 4: Monitoring criteria for dissemination and communication activities* for KPIs.
Scientific Publications and presentations in scientific meetings	All partners	• RT professionals	Dissemination of audit methodology developed during the project	Throughout the project span. See *Table 4: Monitoring criteria for dissemination and*

				communication activities for KPIs.
Webinars	All partners	• RT professionals	Communicate the progress of the project through webinars organized through National Societies. Disseminate the materials developed	Throughout the project span. See *Table 4: Monitoring criteria for dissemination and communication activities* for KPIs.
Workshops	Executive board	• RT professionals	Disseminate the results of the project	Single event: 1 workshop at the end of the project
Targeted meetings	Executive Board	• Patients and patient advocacy groups • Broader Medical Community • Healthcare administrators • Educational staff • Policy makers	Communication non-technical information about project benefits and the project development	As needed through the project. See *Table 4: Monitoring criteria for dissemination and communication activities* for KPIs.
Clustering events	Project office	• RT professionals • Broader Medical Community • Policy makers	Dissemination of the project results	As needed through the project. See *Table 4: Monitoring criteria for dissemination and communication activities* for KPIs.

Training courses	WP5	• RT professionals	Dissemination clinical audit methodology	Single occurrence event (June 2025)
Publications in EU Health Policy Platform	Communication group WP2	• RT professionals • Broader Medical Community • Policy makers	Dissemination of the project results	As needed through the project. See *Table 4: Monitoring criteria for dissemination and communication activities* for KPIs.

6 Internal Communication

This chapter will detail the internal communication plan for the CAT-ClinART project. The internal communication plan is designed to:

- Ensure effective and timely communication among all project participants.
- Facilitate decision-making and conflict resolution.
- Maintain transparency and accountability in project activities.
- Support the efficient exchange of documents and data.

6.1 Meetings Schedule and Structure

Internal meetings will be organized to discuss progress and difficulties within the work packages. There will be special attention for upcoming project deliverables. There are several types of meetings to be distinguished: work packages (WP) meetings, executive board (EB) meetings, advisory board (AB) consultations, project office (PO) meetings, all-team or workshop meetings. All work package leaders are expected to schedule their own bi-monthly meetings with their project teams.

The following regular meetings are proposed for the duration of the three-year project.

- **Work Package (WP) Meetings**:
  - **Frequency**: Bi-monthly.
  - **Participants**: WP leaders and team members.
  - **Purpose**: Discuss progress, challenges, and deliverables of each WP.
  - **Minutes**: WP leaders to appoint a note-taker; notes are shared within 48 hours.
- **Executive Board Meetings**:
  - **Frequency**: Quarterly.
  - **Participants**: Executive Board members; Advisory Board members as needed.
  - **Purpose**: Strategic decisions, project alignment, and overall monitoring.
  - **Minutes**: Rotating responsibility for note-taking; notes shared within one week.
- **Advisory Board Consultations**:
  - **Frequency**: Twice a year or as required.
  - **Participants**: Selected Advisory Board members and Executive Board.
  - **Purpose**: Review project direction, provide expert advice, and validate key decisions.
  - **Minutes**: Executive Board member responsible for summarizing and distributing minutes.
- **Project Office Meetings**:
  - **Frequency**: When required.
  - **Participants**: Project manager and administrative team.
  - **Purpose**: Monitor administrative tasks, budgets, and risk management.
  - **Minutes**: Project manager appoints note-taker; notes shared with relevant stakeholders.
- **All-Team Annual Meeting**:
  - **Frequency**: Annually.

- **Participants**: All project participants.
- **Purpose**: Present progress, share outcomes, and foster collaboration.
- **Minutes:** Project manager organizes and archives notes for reference.

All the meetings will be held on-line, unless the executive board deems it appropriate to hold any of them in person. An overview of the aforementioned meetings can be found in the table 3 below:

Table 3: Overview of different meetings within the CAT-ClinART project

Type of meeting	Participants	Purpose	Frequency
Work Package meetings	WP leaders and team members	Discuss progress, challenges, and deliverables of each WP	Bi-monthly
Executive Board meetings	Executive Board members; Advisory Board members as needed	Strategic decisions, project alignment, and overall monitoring	Quarterly
Advisory Board meetings	Selected Advisory Board members and Executive Board	Review project direction, provide expert advice, and validate key decisions	Twice a year or as required
Project Office meetings	Project manager and administrative team	Monitor administrative tasks, budgets, and risk management	Monthly
All-Team Annual meetings	All project participants	Present progress, share outcomes, and foster collaboration	Annually

Project partners: All work package leaders are expected to schedule their own bi-monthly meetings with their project teams. The other meetings (Executive, Advisory, Project Office and All-Team) are scheduled by the project manager.

6.2 Communication Platform

To facilitate efficient collaboration across the consortium, the project will employ a suite of communication tools tailored to meet different needs. The primary platform, OneDrive, will serve as the central hub for file sharing and document collaboration, ensuring all consortium members have controlled access to shared resources. Supplementary tools, including Microsoft Teams for real-time meetings, email for formal communications, and Trello or Asana for task tracking, will enhance workflow efficiency and ensure seamless communication.

- **Primary Platform**: OneDrive for file sharing and document collaboration.
    - Access provided to all consortium members with role-based permissions.
- **Secondary Tools**:
    - **Microsoft Teams**: For real-time communication and virtual meetings.
    - **Email**: For formal communications and document sharing outside the platform.

6.3 Conflict Resolution

Effective conflict resolution is essential to maintaining collaboration and achieving project objectives. The process begins with discussions within the relevant WP team to address issues directly. If unresolved, the matter will escalate to the Executive Board for mediation. In cases where no agreement can be reached and the implementation of the project is at risk Project Office will be consulted for advice and future steps. All steps, resolutions, and decisions will be documented and archived to maintain transparency.

- **Step 1**: Discussion within the relevant WP team.
- **Step 2**: Escalation to the Executive board.
- **Step 3 (If necessary)**: Project Office will be consulted for advice.
- **Documentation**: All conflicts and resolutions are documented and archived.

6.4 Documentation and Notes

Accurate and timely documentation is critical for ensuring accountability and fostering clear communication. For every meeting, a designated individual will take minutes, capturing agenda items, key decisions, and actionable points with deadlines and responsibilities. These notes will be shared within the agreed timeline and stored in the shared OneDrive folder, ensuring easy access for all relevant stakeholders and creating a reliable reference for future activities.

- A designated individual is responsible for taking minutes in all meetings.
- WP2 Work Package 2 will provide a template to standardize all meeting notes and ensure a consistent structure.
- This “Meeting notes” template must include:
    - Agenda items discussed.
    - Key decisions made.
    - Action points with deadlines and responsibilities.
- Notes are distributed within the agreed timeline and stored on the shared OneDrive folder.

6.5 Monitoring and Evaluation

Feedback from consortium members will also be gathered through periodic surveys, enabling adaptive management strategies to address challenges and optimize outcomes.

6.6 Conclusion

This internal communication plan establishes a clear framework for efficient interaction and effective project management, ensuring all stakeholders remain aligned and engaged throughout the CAT-ClinART initiative. By leveraging structured communication channels, robust documentation practices, and conflict resolution mechanisms, the plan supports transparency, accountability, and collaboration. Regular monitoring and evaluation will further enable the consortium to address challenges proactively, fostering a cohesive and productive environment. Together, these measures are designed to optimize the project's execution and contribute to the successful achievement of its objectives.

7 Review Process for the Communication, Dissemination plan

This section outlines the review process for the Communication and Dissemination Plan, which is a critical component of our project's strategy to share and promote our findings and activities. Effective communication and dissemination are essential to ensure the success and impact of our efforts. Below, we detail the methods for data collection and monitoring that will support the ongoing evaluation and refinement of our dissemination and communication strategies. These processes are designed to track the progress and effectiveness of our outreach efforts and to adjust as necessary to meet our project goals.

7.1 Data Collection

All the dissemination and communication activities will be recorded in the dissemination and communication log. The dissemination log is split into four categories: dissemination activities, communication activities, and internal meetings. Example of entries to each of these categories in the dissemination log are given below.

- **Dissemination:** Dissemination activities involve actions to share the results of the project (audit guidelines, Quality Indicators, lessons learned from the clinical audit pilot) through Conferences, Education and training events, Meetings, Clustering Activities, Collaboration with EU-funded projects, Other scientific collaboration, Other scientific cooperation.
- **Communication:** Communication activities involve actions to share the project aims as well as project progress with the stakeholders through a(n): Media article, Newsletter, Other, Press Release, Print Materials (brochure/leaflet/posters/stickers/banners/etc.), social media, TV/Radio Campaign, Videos, Website. For the communication activities it is important to include a link to the documents on belonging to this activity.
- **Internal communication:** It focus on the communication between project partners. Biannual surveys will assess effectiveness of the internal communication channels.

7.2 Monitoring

To decide on the success and necessary adjustments of the dissemination and communication strategy, monitoring criteria have been developed. These criteria will be closely monitored every 6 months to decide whether the dissemination plan needs to be updated and different activities have to be undertaken, thus ensuring the process quality and efficiency.

Table 4: Monitoring criteria for dissemination and communication activities

Deliverable	Quantitative indicator	Qualitative indicator	Monitoring tool	Outcome
Presentations at scientific conferences	• Number of presentations at national and international conferences. • Number of conferences.	Scope of the meeting interest raised. Format of the presentation (oral communication, poster, etc.).	Abstract Presentation certificated issued by the scientific society organizing the meeting	At least 2 presentations at national conferences and 2 at international conferences
Scientific publications	• Number of publications and Impact Factor of the journal	Prestige and scope of the journal	Publication registered on journal websites and in public scientific databases such as Scopus and Web of Science	Minimum of 1 scientific paper accepted in a peer reviewed journal
Publications of audit templates and educational material in the EU Health Policy Platform	• Number of post/releases in the EU health Platform	Relevance and impact of the published materials to promote the deliverables among other organizations and policy makers	Verify public accessibility to the platform	At least 2 post/releases on the platform.

Workshops held to promote the CAT-ClinART project and to maximize the national and international dissemination of the outcomes of the project	• Number of Workshops organized • Number of participants.	Regional, national, and international coverage of the workshops. Satisfaction of the attendees.	Confirmation of the successful organization of the Workshops through participants list. Verification of the workshops' dissemination through the project website, as well as relevant scientific societies in the field of Radiation Oncology	Minimum of 1 workshop
Training courses	• Number of training courses organized • Number of participants	Satisfaction of the attendees	Confirmation of the successful organization of the training courses through participants list. Verification of dissemination through the project website, as well as from relevant scientific societies	At least 1 training course with the participation of stakeholders

Clustering events with other groups with experience in implementation of clinical audits	• Number of clustering events conducted • Number of participants.	Involvement of national and international experts. Satisfaction of the attendees and potential synergies and collaborations.	Confirmation of the successful organization of clustering events. Verification of dissemination through the project website, as well as from relevant scientific societies.	At least of 1 clustering events conducted.
Social media posts (non-scientific language)	Number of social media posts informing about the project aim and benefits.	Presentation of results and information about the aim of the project aiming to inform in a non-scientific language about the benefits of auditing radiotherapy practice.	Counting and collecting the publications and registering them in the communication and dissemination log with the corresponding links. Engagement rates, follower growth	Minimum of 4 posts per year 100 followers at year 2
Project information leaflets (non-scientific language)	Number of leaflets targeting different groups published in the website and social media.	Increase if the awareness of the project.	Keep track of the number of visits and downloads	At least 4 different leaflets targeting different groups

Mapping of CAT-ClinART partners and stakeholders for community building, including individuals and organizations.	List of identified partners and stake-holders relevant for this project. Annual register of the updated list. Mailing lists created and emails sent.	Importance and reach of the partners and stakeholders in the list.	Keep track of the number of partners in the list of partners and stakeholders and its updates, keeping a historical register.	At least 50 partners identified to send updates on the project by the end of Year 1.
Meetings with the EAB	Number of meetings held with the advisory committee.	Feedback from the advisory committee members.	Minutes of the meetings and registration at the communication and dissemination log.	At least 6 meetings with the advisory committee.
Targeted meetings with specialized stakeholders, health authorities, and hospital managers.	Number of targeted meetings organized by the CAT-ClinART consortium, targeting specialized stakeholders and health authorities and hospital managers. Number of participants in the events organized. Generation of a report on the outcomes of each event.	Increase of the awareness of the need to conduct clinical audits in radiotherapy and actions launched to promote them in the long term.	Publication of the targeted meetings on web page of the project and social media. Registration of the event in the communication and dissemination log.	At least 2 targeted meetings.

Submit/suggest the executive summary of the final report to the EC existing tools such as the EU health policy platform to promote coverage within the EU.	Submission of the executive summary to the EC.	Feedback from the project officer and from the EC. If the report is finally published, increase in the awareness and widespread dissemination of the project results.	of the final report to the EC existing tools such as the EU health policy platform. We will also inform our project officer when having results or communicatio n actions	At least 1 submission to the EU health policy platform.
CAT-ClinArt Website	1000 total visits Year 1: 100 Year 2: 300 Year 3: 500 Year 4: 1000	Website online and fully functional Satisfaction rate /Relevance of the website	Google Analytics Evaluation form	Website functional from December 2023 on
Surveys to consortium members to assess effectiveness of the internal communication channels	Evaluation of the survey responses		Survey	Every 6 months

8 Risks and mitigation

Recognizing and assessing risks that could threaten project development facilitates early detection of potential problems. It also enables the identification of communication opportunities that could boost project outcomes.

In project management, understanding the nuances between general and specific risks is crucial for effective risk mitigation and project success. General project risks encompass broad challenges that could impact overall project performance, such as stakeholder engagement issues, communication barriers, or delays in deliverables. These risks often arise due to external or systemic factors affecting the project as a whole. Conversely, specific project risks pertain to particular aspects or activities within the project, such as the accuracy of audit procedures, participant engagement in activities, or dissemination effectiveness. By differentiating between these risk categories, project teams can tailor their strategies to address both overarching vulnerabilities and targeted challenges, ensuring a comprehensive risk management approach.

The following risks have been identified, with tailored mitigation strategies and contingency plans to address them effectively.

Table 5: Risk assessment and mitigation and contingency plans

Risk	Probability	Impact	Mitigation Plan	Contingency Plan
R.1. Failure to engage key stakeholders	Medium	High	Identify and prioritise stakeholders early, ensuring clear communication of project objectives and benefits.	Reassess and expand stakeholder engagement efforts, adjust communication strategies, and utilise alternative outreach channels.
R.2. Ineffective communication of project outcomes	Low	High	Establish a dedicated group to review and validate communication materials for accuracy, clarity, and relevance.	Conduct stakeholder feedback sessions, revise content formats, and explore alternative communication methods based on feedback.
R.3. Insufficient dissemination of project results	Medium	High	Develop a structured dissemination plan, leveraging a variety of channels, including social	Intensify dissemination efforts through new platforms, increase frequency of updates, and

			media, scientific societies, and partner networks.	engage additional partners to broaden the reach.
R.4. Low engagement with project website	Low	Medium	Monitor website metrics regularly and promote the site through consortium and partner channels.	Enhance website content with interactive elements, promote via targeted campaigns, and prioritise high-traffic dissemination channels.
R.5. Inconsistent publication schedule	Low	Medium	Establish a baseline frequency for publications and ensure accountability within the communication team.	Expand dissemination channels, issue publication reminders, and diversify content formats to maintain audience interest.
R.6. Low participation in project activities	Medium	High	Promote activities through official and partner communication channels, ensuring early and widespread notification.	Intensify promotional efforts, broaden outreach to include more stakeholders, and adjust event formats to enhance accessibility and appeal.
R.7. Limited dissemination by consortium members	Medium	Medium	Require active participation in dissemination efforts, providing clear guidelines and monitoring contributions regularly.	Implement structured dissemination strategies with follow-ups, incentivise active participation, and highlight key contributions in reports and events.

This risk management approach ensures proactive identification and resolution of challenges, fostering the successful execution of CAT-ClinART's communication and dissemination activities.

The following risk matrix is a tool used to assess and prioritize the potential risks associated with the dissemination, communication, and exploitation activities of the project aforementioned. It evaluates risks based on their probability of occurrence and potential impact on the project's objectives. Each risk is plotted within the matrix to determine its level of severity, helping guide focus on the most critical issues. Risks positioned near the center of the matrix indicate moderate likelihood and impact and should be closely monitored throughout the project lifecycle. This matrix supports proactive decision-making and ensures that resources are directed toward the most significant risks.

		PROBABILITY				
		VERY HIGH	HIGH	MEDIUM	LOW	VERY LOW
IMPACT	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	HIGH	HIGH
	HIGH	VERY HIGH	HIGH	HIGH (R.1, R.6, R.2, R.3)	MEDIUM	MEDIUM
	MEDIUM	HIGH	HIGH	MEDIUM (R.7)	MEDIUM (R.4, R.5)	LOW
	LOW	HIGH	MEDIUM	MEDIUM	LOW	VERY LOW
	VERY LOW	MEDIUM	LOW	LOW	VERY LOW	VERY LOW

9 Developing an Impact Narrative

An effective impact narrative is crucial to articulate how the CAT-ClinART project contributes to advancing knowledge, enhancing healthcare practices, and benefitting stakeholders across multiple domains. This chapter outlines the strategy for crafting an impact narrative, focusing on providing evidence of changes facilitated by the project's outcomes.

9.1 Purpose of the Impact Narrative

The impact narrative will serve as a comprehensive statement demonstrating the influence of the CAT-ClinART project. It will capture:

- Contributions to knowledge in clinical audits and radiotherapy.
- Improvements in healthcare quality and safety.
- Benefits to stakeholders, including patients, healthcare professionals, and policymakers.
- Sustainability and scalability of the methodologies developed.

This narrative will underscore how the project has enabled adoption, adaptation, and broader application of its deliverables, aligning with EU health policy objectives.

9.2 Framework for the Narrative

The narrative will be structured around three core elements:

- **Background and Context**
  - Establish the problem addressed by the project, focusing on the need for systematic clinical audits in radiotherapy to improve quality assurance. Highlight the alignment with BSSD 2013/59 Article 58(e) and the project's relevance in fostering best practices.
- **Contributions and Innovations**
  - Development of audit methodologies and tools.
  - Implementation of sustainable clinical audit frameworks in Catalonia, with scalability across EU regions.
  - Integration of stakeholder insights to tailor the tools for practical use.
- **Outcomes and Impacts**

  Provide evidence of:
  - Improved quality and safety in radiotherapy practices.
  - Enhanced skills and awareness among radiotherapy professionals.
  - Policy advancements through engagement with health authorities.
  - Dissemination success via scientific publications, workshops, and

collaborations.

9.3 Evidence Collection

To substantiate the impact narrative, data will be collected from:

- **Project Deliverables**: Reports, guidelines, and audit tools.
- **Stakeholder Feedback**: Surveys, interviews, and workshop evaluations.
- **Dissemination Metrics**: Number of conferences, publications, and training sessions.
- **Clinical Outcomes**: Benchmarking of quality indicators (QIs) pre- and post-implementation.

9.4 Targeted Stakeholder Engagement

The narrative will highlight tailored benefits for different stakeholder groups:

- **Healthcare Professionals**: Improved workflows and confidence in quality assurance.
- **Patients**: Enhanced safety and equitable access to high-quality care.
- **Policymakers**: Data-driven recommendations for integrating audits into health systems.
- **Educational Institutions:** Materials and workshops fostering a culture of quality improvement.

9.5 Reporting Format

The narrative will maintain a concise and compelling structure, avoiding long lists of outputs. Key sections include:

- **Introduction:** Context and objectives.
- **Main Contributions:** Innovations and deliverables.
- **Impact Evidence:** Quantitative and qualitative indicators.
- **Stakeholder Testimonials:** Real-world applications and benefits.

9.6 Communication Channels

The impact narrative will be shared through:

- **Scientific Platforms:** Peer-reviewed journals and conferences.
- **Policy Forums:** EU Health Policy Platform and health authority briefings.
- **Public Outreach:** Accessible summaries and media engagements to inform non-technical audiences.

By synthesizing achievements and providing robust evidence, the CAT-ClinART impact narrative will demonstrate the project's contributions to the radiotherapy field, fostering further adoption and policy integration.