



WHOLE - Web-based Health Organisations Learning Environment

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## Final Report

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# Public Part

Grant-Agreement-Number: 134301-LLP-1\_2007-1-DE-ERASMUS\_EVC



Education and Culture DG

Lifelong Learning Programme

This project has been funded with support from the European Commission.  
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## Project information

Project acronym:	WHOLE
Project title:	Web-based Health Organisations Learning Environment
Project number:	134301-LLP-1_2007-1-DE-ERASMUS_EVC
Sub-program or KA:	LIFELONG LEARNING: Erasmus, Jean Monnet Multilateral Projects, Networks, Accompanying Measures, Studies and Comparative Research
Project website:	<a href="http://www.whole-academy.eu">www.whole-academy.eu</a>
Reporting period:	From 01-10-2007 To 31-12-2009
Report version:	1.0
Date of preparation:	22-01-2009
Beneficiary organisation:	ILI Institute for Innovation in Learning (FIM NewLearning)
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## Executive Summary

### Target Audience

This report is aimed at the European public with special reference to actors, employees, intermediaries and stakeholders in the field of public health, health promotion, nursing, medicine, physiotherapy, social work professionals and potential students in the healthcare sector.

### Project Objectives

Recent developments in the field of innovation in European public health systems, reflected in the initiatives of the European Union and the World Health Organisation, have pinpointed the necessity of fostering cooperation and exchanges across boundaries in the healthcare sector, so as to enhance the quality, access, openness and innovation of healthcare education. Information technologies have already unfolded their potential and have proven to be successful in achieving these objectives, e.g. through the spectacular development of e-health and communities of practices worldwide. It is fundamental to federate and further encourage these innovations by providing a virtual meeting point for the multiplication of their impact. The WHOLE web-based health organisations learning environment intends to address this need, in a sector in which multiplication of knowledge has a direct impact on societal and economic well-being of Europeans. The overall aim of the WHOLE project is therefore to develop and consolidate a 'European Virtual Academy of Innovation in Health', to analyse good practices and investigate transferability and scalability of innovation in public health, promote sustainable collaboration in public health training across boundaries, involve the primary target groups, i.e. students and healthcare professionals, in a European "Master degree for intercultural and societal healthcare studies", foster the use of ICT for learning, exchange, collaboration in the healthcare sector, multiply and consolidate dialogue arenas among policy makers, students, researchers, healthcare professionals and citizens. The virtual learning environment to be set up will include learning resource repositories, learners' management facilities, virtual communities and other social software facilities. The Master degree will be structured in modules, i.e.: health inequalities in Europe, the perspective of an "integrated healthcare", strengthening of citizens' rights in relation to healthcare institutions and professional caregivers, addressing also cross border healthcare in Europe, health promotion and chronic disease prevention, healthcare coordination and crisis management in catastrophes, migration, healthcare and social services. A scientific quality committee supports project partners in ensuring quality. The main expected results are: report on "Professional development goals and ICT in the transformation of the healthcare sector", the 'WHOLE-Academy', a European Virtual Academy and virtual learning environment, which involves in its pilot phase at least 50 students and healthcare professionals in the 'Master Degree for Intercultural and Societal Healthcare Studies', white paper "Towards a European framework for collaboration and innovation in public health".

## Partners involved

The WHOLE consortium involves high profile bodies from five European countries with special expertise in the field of higher education, e-learning, medical anthropology, sociology and public health systems studies:

**University of Erlangen-Nuremberg, ILI Institute for Innovation in Learning (FIM-NewLearning-DE)** is the promoter due to its expertise with regard to internationalisation of higher education, management of European projects, virtual universities development (ILI contributed to establish the Virtual University of Bavaria) and exchange of innovative practices.

Due to its broadly acknowledged expertise in training design, innovation in higher education, curriculum development for students and healthcare professionals, **University of Applied Sciences Magdeburg-Stendal (DE)** coordinates the activities of the Virtual Academy development.

Given its expertise in the field of research methodology and state of the art healthcare research, **Fondazione Angelo Celli (IT)** coordinates the development of the methodological framework.

The important role of the **Regional Agency for Healthcare of Emilia-Romagna (ASR - IT)** will mainly deal with the support to the participation of healthcare professionals to the project activities and the diffusion of the project results among the Emilia-Romagna Regional Health Service, the National Health service and the Regional Health Network of the World Health Organization.

Due to its state of the art approach to quality assurance and evaluation of European projects in the field of learning innovation, **National School of Public Health (NSPH) - GR** is a perfect partner to coordinate “quality and evaluation” in the project.

The consolidated experience in the coordination of European projects dealing with collaborative e-learning makes **SCIENTER (IT)** the ideal partner to coordinate the activities related to the Master Degree development.

Due its prestigious and multidisciplinary profile with regards to healthcare studies and its frequent interactions with regional, national and European policy makers, researchers, NGOs dealing with healthcare, as well as its capacity to develop the European integration process in the new member states, **University of Lubijiana (SI)** coordinates the dissemination, exploitation and sustainability building activities.

**The Department of Health (UK)**, aim to mobilise learning as a major element in health service reform. It is champion for learning in health and social care, especially focusing on reviewing and strengthening wider participation in learning in the National Healthcare System and other healthcare services and is therefore a perfect partner for the project.

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# 1. Project Objectives

The overall aim of the WHOLE project is to develop and consolidate a European health education academy. It is intended to be a virtual meeting point for public health, health promotion, nursing, medicine, physiotherapy, social work professionals and students in the healthcare field to:

- analyse good practices and investigate transferability and scalability of innovation in public health
- promote sustainable collaboration in public health training across boundaries through common learning, collaboration and exchange experiences.
- foster the use of ICT for learning, exchange, collaboration and services provision in the healthcare sector.
- multiply and consolidate dialogue arenas among policy makers, healthcare professionals and citizens
- design, implement and evaluate a European Master Degree in Intercultural and Societal Healthcare Studies.

The adoption of an e-learning solution/model for WHOLE, intended to address **users' needs** and characteristics through collaborative learning experiences, is consistent with the definition of e-learning provided by the European Commission as: "The use of new multimedia technologies and the Internet to improve the quality of learning by facilitating access to resources and services as well as remote exchanges and collaboration".

Moreover, the Master degree in intercultural and societal healthcare studies will address the following needs:

- Strategies to resolve growing health inequalities in Europe and to ensure equal opportunities of access to healthcare
- The perspective of an "integrated healthcare", valorising treatment and rehabilitation systems as well as health promoting activities with pluralistic and interprofessional approaches.
- Strengthening of citizens' rights and capacities in relation to healthcare institutions and professional caregivers, addressing also cross borders healthcare in Europe
- Public strategies of health promotion and chronic disease prevention (discussing the Ottawa Charta of Health Promotion formulated by the WHO).
- Healthcare coordination and crisis management in epidemics and environmental catastrophes
- Migration, healthcare and social services.

One of the core objectives of the project is the build-up of a '**European Master in Intercultural and Societal Healthcare Studies**', expected to involve students and healthcare professionals for one year of study. It is going to be a first level Master degree and it will deliver 60 credits, split in 6 modules (10 credits per module). Participants will study for 1500 hours and didactic activities will be conducted mainly online in the virtual learning environment to be set up. Vis á vis meetings with students are foreseen at national level. Participants will be able to interact online with their peers in different countries. Project partners will act as learning facilitators and teachers and will also assess the competence development of learners.

## 2. Project Approach

The overall aim of WHOLE project was described in short: 'to develop and consolidate a European Virtual Academy of Innovation in Health'. The following section is dedicated to how and in which way the partners achieved the outcomes and products of the project (October 2007- December 2009).

### Setting the Scene

The very first phase of the project was dedicated to desk research and intensive exchange between the partners to capture project tasks more detailed and profiling for partners competences to cover up additional tasks which appeared during this planning period: To start the process of common awareness building, to understand the actual state of European public health systems and to analyse examples of best practice as well as problems, the consortium decided to produce national reports about the public health systems of the partners countries. This first collection of information gave a short overview on the diversity of European public health systems. Based on this first common 'picture' delivered by the preparatory work, the partners developed a more detailed and structured template, to penetrate the subject more intensive. The results were synthesized and led to basic information for the Report on "Professional development goals and information technologies in the transformation of the healthcare sector" and helped identifying several points of high interest for the Virtual Academy. The phase of desk research led to a provisional 'item list' to define learning areas for the Virtual Academy. The item list was revised two times by the partners with help of national focus groups according to the information gathering process. It identifies fields of high interest and gives an overall thematic frame for the recruiting of learning materials of high quality. For the ongoing item list a similar approach was used as described above. Basic information led to a detailed and structured template and finally to main fields of occupation for academy contents. The identified fields are:

- Theme 1: Transformation of national healthcare sectors
- Theme 2: Problems of the health care sector (moving population)
- Theme 3: Towards an integrated medicine
- Theme 4: The European health monitoring and international policy strategies
- Theme 5: Information technology and health
- Theme 6: Social inequalities and health
- Theme 7: Mental Health
- Theme 8: Retirement and social capital

The list of thematic areas has been closed after the completion of the report on "Professional development goals and information technologies in the transformation of the healthcare sector" in November 2008.

Parallel the project consortium went on working on another part of the methodological framework related to the build up of the academy. The work was divided in a more general part, the 'meta-level' and the implementation of the meta-level results in an operational framework referring to the techniques and quality aspects of the Virtual Academy which includes an overview over the technical needs and pedagogical issues.

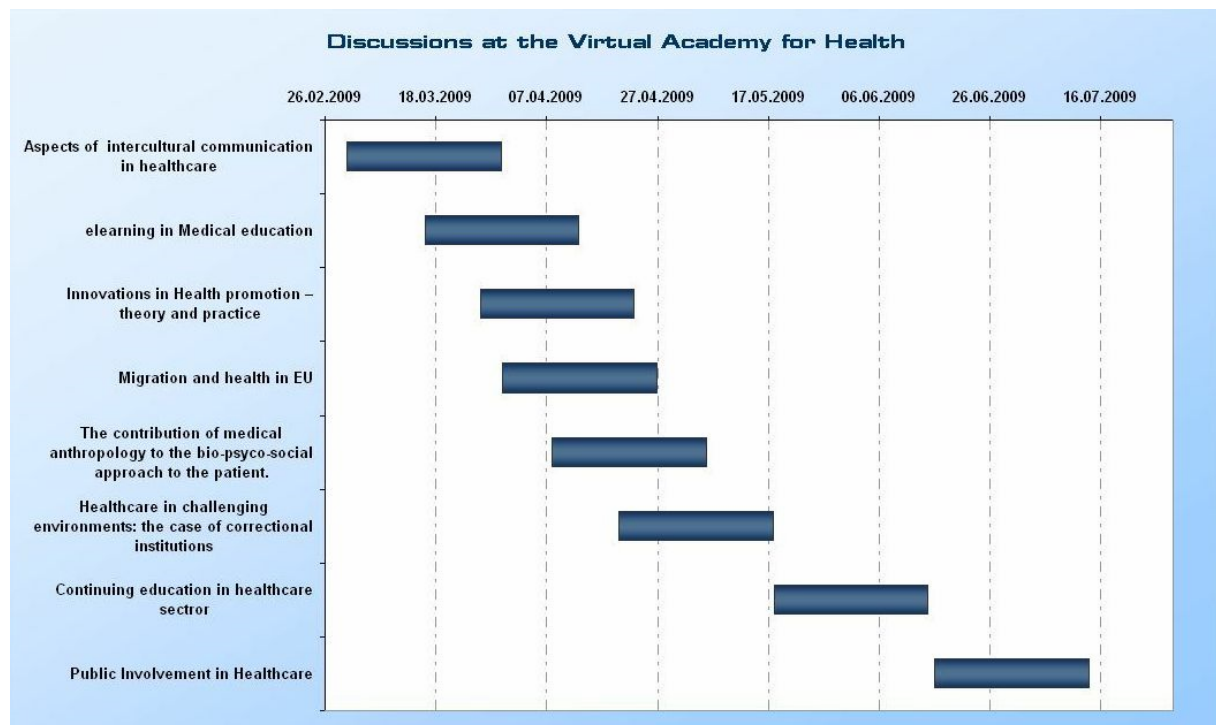
After consensus building about the methodological framework the specification for the technical and pedagogical design and development of the European health education academy could start: According to the methodological framework and the analysis of users needs, the University of Magdeburg-Stendal developed a draft for the technical structure of the Virtual Academy and the basic services. To meet the identified needs of users as well as tutors and to guarantee sustainability (in term of costs) the partners compared different platforms and decided for Moodle, an open source learning platform. Moodle was also chosen because it met best the requirements with regard to the heterogeneity of users (learners, teachers, visitors) of (nearly) all ages from several countries and from different learning cultures and traditions and with a different experience and affinity to web based learning and collaboration. The following criteria were crucial to the partners decision on the platform: sustainability, accessibility, multilingualism, strong focus on support of collaborative work, intuitive user guidance. Another criterion was the possible technical integration of project workspace for the partners, public website, public services and academy facilities for the Master program in one coherent electronic system. The access of all different user groups to the platform, e.g. project partners, visitors of the website, guests who join the public academy, Master students, quality committee, teachers and tutors) is carefully defined through roles and rights which is the mean to provide every user group its special offers and accessible areas.

Today this virtual environment does not only serve as learning environment for the users (public users as well as Master students) but still as 'working platform' and integrated website for current and future partners in all areas of the 'WHOLE-Academy - all of them integrated in one technical system. Details of the technical structure of the WHOLE-Academy and the approaches are defined in a substantial report.

### **Population and Animation for Collaboration**

Wholes' underlying pedagogical approach and methodology refers to the potential of collaborative and peer learning, supported by new technologies, to facilitate the development of a transnational and intercultural community of learners. Therefore WHOLE Virtual Academy includes learning resources repositories, as well as learner management facilities, but one of its core is the activation and animation of virtual thematic communities of healthcare professionals and students in the framework of the Master degree and beyond. The learning communities are intended to look at good examples as a basis for learning, exchange and collaboration experiences. The examples of good practices need to be understood in depth, discussed with the originators of good practice, differences and commonalities in contexts and approaches need to be identified and explained so as to explore transferability and scalability potential. In beginning of 2009 Whole partners have launched several time-limited expert moderated discussions at the Public Virtual Academy. To gain a range of experts and healthcare professionals, every partner provided an e-mail list as well as a list of relevant national and international multipliers, stakeholders and online-media. A centralized action followed for inviting to join the event. Some of these discussions were very successful in terms of participation and as well in terms of 'visitors' (tracked by the technical system). But it came out, that participants in some European countries are more used to express themselves in English language in a public environment than others. Especially in Italy results were poor until such time as there was a trial in Italian language, which had a partly better resonance. Nevertheless language competencies remain a problem (not for most academics but professionals) and there still rests a discrepancy between the desire to share knowledge and experience with all potential participants, and the strong focus on an all over European project overcoming national borders and limitations.





### Collaborative Learning in the WHOLE-Master program:

Because of the enormous impact of collaborative learning, exchange and sharing of information and experiences for the field of ‘innovation in health’, Whole Master courses were not organized as ‘classical’ e-Learning courses for self studies. The conception and organisation of learning must reflect the objective of the WHOLE-Academy as well and therefore have a focus on collaborative actions in learning. The Master courses done by higher education students are held as ‘virtual seminars’ with a well equipped bibliotheca of learning materials of high quality. A specialized academic lecturer and tutor will support the learning process according to contents and according to collaborative work. Learning at WHOLE-Academy will not be a silent act of many single learners but mainly relies on structured exchange and collaborative work. One of the important learning objectives is ‘group work’ with other European learners in different European countries. 3-4 learners in a peer-group will do a common workout according to the learning objects of their courses. The added value of the collaborative learning system is that students will not only gain theoretical knowledge about innovation in health. A closer collaboration between healthcare professionals and boundaries is identified as one motor of innovation in health care and WHOLE- students will practise collaborative learning from the very beginning: Exchange of experience, sharing of information, exchange with each other in discussion modules and common workouts by the means of electronic cooperation is an important and obligatory learning object while graduating the Master program. Therefore teachers and tutors must be trained in the special field of planning, organizing, supporting, measuring and grading of learner achievements in learning peer groups. Working in multicultural working groups in a multinational environment with support of teachers and tutors from different countries does perfectly support the described objectives of the project. The coordinating partner, ILI Institute for Innovation in Learning (FIM New Learning), has a wide range of experience in the training of online tutors and in tutoring web-based workgroups in higher education and provided guiding for the partners in this field.

While keeping information and building up the framework, the partners found, that there is a strong need to involve the named target groups for a better development of services and subjects related to users needs and to advance the analysis of users. The project partners decided for participation of potential users (healthcare professionals, experts, stakeholders,

potential students) from an early stage of the project on. This led to the implementation of 'focus groups' in every partner country. The partners installed focus groups in every country of the consortium, Germany, Italy, Slovenia, Greece and UK. The project and the Virtual Academy were presented to the focus groups and during a collective structured interview, information was gathered by the mean of qualitative analysis. At the same time the national focus groups were used as an adequate event for dissemination and to promote further participation as well as discussing the structure and the requirements for a successful Master program.

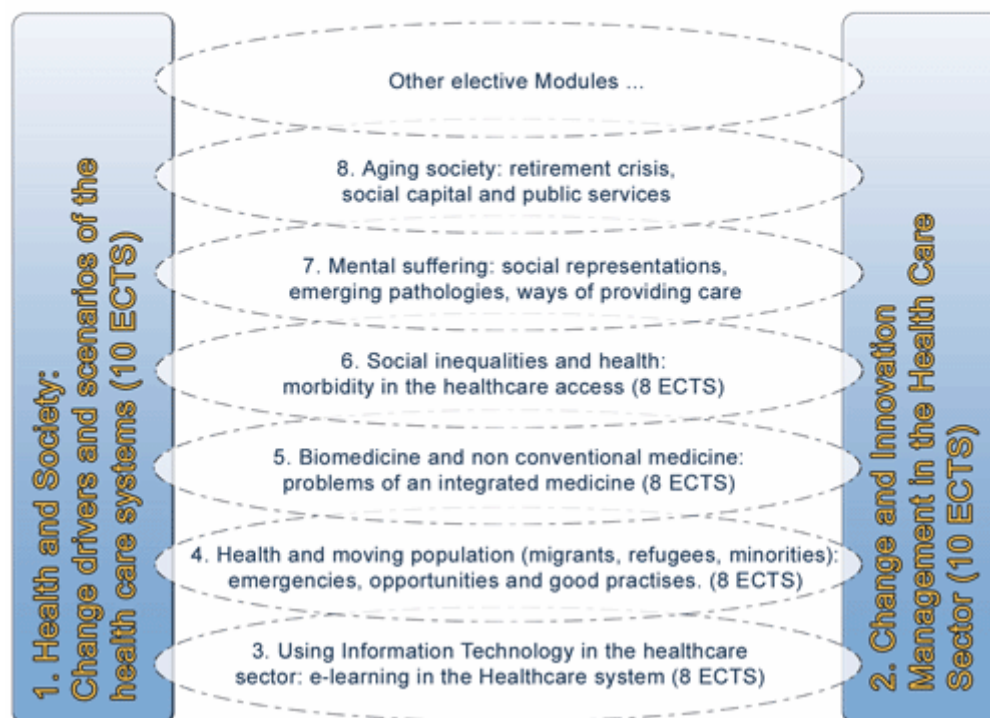
With the support of all national focus groups the following set of criteria for an innovative and consistent Master degree have been defined. The Master program:

- ∅ addresses both: in-service healthcare professionals as well as young students willing to acquire a specialisation before the their first job
- ∅ should not repeat pre-existing Master's program, but fill existing gaps.
- ∅ is international in:
  - a) development team
  - b) teaching team
  - c) learning groups
  - d) contents / international issues / intercultural approach
  - e) accreditation for the European Area of Higher Education
- ∅ explores ICT potentiality at full, not limiting itself to accessing pre-defined content, but containing a strong element of collaborative, experience-based knowledge development.
- ∅ uses functionalities and context of the Public Virtual Academy to enrich the learning experience of students.
- ∅ has a modular structure: core modules (which will not be changed) + specialised and competence based modules (that might be substituted according to context changes and demands).
- ∅ respects typical accreditation requirements of the healthcare sector and of course of the Bologna process.
- ∅ has a quality assurance system developed with a strong emphasis on experts and stakeholders involvement.
- ∅ embeds evolutionary elements through on going stakeholders' feedback.
- ∅ becomes self-sustainable and one possible source of income for the Virtual Academy.

Analysing the target group for the Master program, this group is frequented by students who look partly for an initial, but a lot of them for an in-service further training and a part-time study arrangement. These students are employees and look for training in a new field and for an academic degree. The Master degree therefore aims to combine academic and professional values.

Additionally a detailed market analysis on offerers side on European level was operated by the project coordinator to strengthen USP the of the WHOLE Master. Taking all results into account, the partners developed an own framework for the Master program. The program basically consists of 2 'pillar modules' and 5 'bridge modules'. The module themes are reflecting the needs identified but as well partners competences to be academic lecturer of these modules. Although there are module responsables, all partners contributed. The result is a study program built and tutored by 7 European institutions for students of all European countries.

## Modules of the European Masters Degree for Intercultural and Societal Healthcare Studies



### Peer reviewing and Students as Co-producers of the Master program

One of the basic ideas of Whole project is the principle of participation. This led to precious contributions by national stakeholders and focus groups in the first year. In the second phase of the project, partners started a extended and in some ways specific evaluation of the Master program. All modules were assigned twice: to the developer/s and also to the reviewers (mostly project partners, depending on the academic competence in themes and/or in e-learning). The module producers provided detailed descriptions of their modules and reviewers analyzed them, addressing the issues of i.e. relevance of subjects and e-learning implementation potential. After the review, partners produced substantial parts of the modules and invited pilot students to make use of it during a pilot phase of more than two months. Partners decided to implement this additional work package, not foreseen in the proposal, to gain substantial feedback of the target group of future students and developed a special evaluation methodology and then run the extended pilot evaluation. 57 Students from all partner countries took part in the evaluation process. The methodology of the evaluation was mainly dialogue oriented. Students were invited to take the perspective of the user and of a Co-producer and gave a lot of precious input via working on questionnaires and taking part in personal interviews at the beginning and at the end of the pilot phase. The engagement of the pilot students to evaluate the project and the Master program was overwhelming and led to precious information in man fields and furthermore to a lot of practical suggestions how to solve problems identified.

### Accreditation of the Master modules

One of the critical results by evaluation through experts and stakeholders and market analysis at an early stage of the project was, that the Master program '**Intercultural and Societal Health Care Studies**' in higher education should include an added value by a formal accreditation (beyond the normal certification) to be most attractive for participants. In connection with that, partners implemented an additional work package and founded a workgroup to

identify the best way of accreditation for the 'WHOLE Master program' without having extra means for that task. The workgroup analysed different conditions and requirements for accreditation in different European countries. The accreditation plan started with a new UK partner and a lot of optimism but failed because of unpredictable circumstances. As partners were not willing to desist from the idea of accreditation, a new successful plan was worked out and in December 2009 all works and formalities were done and the official accreditation of WHOLE Master modules could start at the University of Magdeburg. The 'green light' of the state recognized accreditation agency is expected in spring 2010. The accreditation will give the Master study program an important added value and a competitive advantage.

The following comments related to approaches and proceedings on quality and evaluation will close this section.

Quality and evaluation of the project and its achievements must be divided in two parts: one internal part related to the progress of the project itself (management procedures and working proceedings) to guarantee adequate quality assurance and an external part related to the input and critical impact of externals (participants who are not members of the project consortium, e.g. quality committee, experts, users).

The internal proceeding of evaluation for reaching the projects aims were mainly realised by an elaborated communication and cooperation system for the project partners, a continuous peer reviewing of all products in workgroups (2-3 partners for the consulting and revising of tasks in a work package), a regular sequence of 'task trackings' by publishing revised task lists publicly to the partner consortium, evaluation phases as regular part of every audio conference and project meeting and internal surveys about the satisfaction with project management and project achievements. The partnership agreed to apply the method of peer reviewing as a continuous method of quality management. Every document is first distributed as a 'draft' to the consortium to give partners a chance for critical comments and helpful ideas. For the internal support, reviewing and monitoring of achievements related to work packages, several temporary or permanent workgroups have been installed.

The 'external' evaluation of project achievements does affect different target groups: The external quality committee who comes along with all phases of the project, external experts and potential members of the Virtual Academy, gained by dissemination activities and through membership in the national focus groups and network-building activities by the partners.

### 3. Outcomes & Results

A lot of the outcomes and results were already named in Section 2. 'Project approach', which explains how and by which means the project partner produced outcomes and results.

The most visible result according to the project objectives at is the WHOLE-Academy, [www.whole-academy.eu](http://www.whole-academy.eu). It was launched in January 2009 and the design was revised at the end of 2009 to integrate partners already gained for the projects future. Now the website is in its final shape with services for all areas of the academy as well as project website and working space for the partners, and furthermore with new projects and partners within. For the documentation of the work several reports have been produced and the public is invited to contact the coordinating organisation or one of the partners to get more detailed information about these reports, share experience or cooperate with the WHOLE partner consortium.

#### **The WHOLE Master Program**

The work plan of the consortium schedules that from winter semester 2010 regular students are expected to study the Master modules (The accreditation of all study modules by an official accreditation agency will be finished in spring 2010). A Master handbook is available.

#### **The Whole Virtually Academy of Public Health**

After the first year of common work, the WHOLE partners have built-up the framework and the technical infrastructure for the Virtual Academy of Innovation in Health, as well as a network of external partners. The other main objective for the second year of the project was to populate and animate the Virtual Academy. Fortunately most of the partners organisations were already active in the field of health or e-learning or closely related fields and could use existing connections for the gain of external experts and partners and the build-up of networks with local, national and European experts and healthcare professionals. That was a great advantage for the second phase of the project with focus on the embedding of experts not only as consultants but as active participants of the Virtual Academy and for promoting the participation of other active members and participants.

According to the objective to populate and to animate the Virtual Academy, well progress was made as clearly demonstrated in the final dissemination report, but the consortium understood that it is indispensable to integrate other health projects and initiatives to attire and hold an amount of users, necessary for continuing vivid discussions and exchange. First new health projects and initiatives are already online, others will follow soon. This way the additional partners do not only contribute to the sustainability of the public academy use, additional partners also share the burden of financing it.

## Reports and documentations:

- Ø Methodological and Research Framework Report
- Ø Report: Transformation of National Healthcare Systems: Germany, Greece, Italy, Slovenia, UK
- Ø Report on Professional Development Goals and information Technologies in the Transformation of the Healthcare Sector
- Ø Final Report on Virtual Academy Development
- Ø User Guide Virtual Academy first Steps
- Ø Guidelines for associated Experts
- Ø Guidelines for Pilot Students
- Ø Master Handbook
- Ø Quality and Evaluation Plan
- Ø Report on Pilot Modules Evaluation – Methodology, Tools and Results
- Ø Final Evaluation Comments
- Ø Sustainable Mid-Term Development Plan
- Ø Final Report on Dissemination, Exploitation and Sustainability
- Ø 8 Newsletters (4 Public)
- Ø Project Leaflet
- Ø Green Paper: CHANGING LEARNING APPROACHES FOR A CHANGING PUBLIC HEALTH, November 2009, Ed. by C. Dondi (SCIENTER), Main contributions from: Demosthenes Agrafiotis, Bob Fryer, Vince Ion, Walter Kugemann, Daniela Proli, Jane Wills

## 4. Partnerships

### Partners of the WHOLE Project Consortium

The WHOLE-Consortium consists of eight partners from five different European countries and involves high profile bodies with special expertise in the field of higher education, e-learning, medical anthropology, sociology and public health systems studies:

**ILI Institute for Innovation in Learning (FIM-NewLearning), University of Erlangen-Nuremberg (DE)** is the project coordinator. Due to its expertise with regard to internationalisation of higher education, management of European projects, virtual universities development (ILI contributed to establish the virtual university of Bavaria) and exchange of innovative practices. ILI has taken the overall administrative responsibilities (e.g. contract with TAO, drafting of a partners' agreement, day-to-day management), and coordinates the consortium's activities. ILI cares about the building and running of a communication and cooperation infrastructure. Furthermore, ILI tries to integrate the drafts, deliveries and results and to support the partners in carrying out their Work packages, tasks and duties.

Due to its broadly acknowledged expertise in training design, innovation in higher education, curriculum development for students and healthcare professionals, **University of Applied Sciences Magdeburg-Stendal (DE)** coordinates the activities of Virtual Academy development and has taken the burden of the technical build up.

Given its expertise in the field of research methodology and state of the art healthcare research, **Fondazione Angelo Celli (IT)**, coordinates the development of the development of the methodological framework and signs responsible for it.

The important role of the **Regional Agency for Healthcare of Emilia-Romagna (ASR - IT)** will mainly deal with the support to the participation of healthcare professionals to the project activities and the diffusion of the project results among the Emilia-Romagna Regional Health Service, the National Health service and the Regional Health Network of the World Health Organization.

Due to its state of the art approach to quality assurance and evaluation of European projects in the field of learning innovation, **National School of Public Health Greece (NSPH) - GR** is a perfect partner to coordinate "quality and evaluation" in the project and takes over the responsibility for the internal and external project evaluation.

The consolidated experience in the coordination of European projects dealing with collaborative e-learning makes **SCIENTER (IT)** the ideal partner to coordinate the activities related to the Master Degree development. SCIENTER will support the Master Degree with regard to its official accreditation.

Due its prestigious and multidisciplinary profile with regards to healthcare studies and its frequent interactions with regional, national and European policy makers, researchers, NGOs dealing with healthcare, as well as its capacity to develop the European integration process in the new member states, **University of Lubijliana (SL)** coordinates the dissemination, exploitation and sustainability building activities.

**The Department of Health (UK)**, aims to mobilise learning as a major element in health service reform. It is champion for learning in health and social care, especially focusing on reviewing and strengthening wider participation in learning in the National Healthcare System and other healthcare services and is therefore a perfect partner for the project.

The international character of the partnership with members from five European countries is a not just an added value for the WHOLE-project but nearly indispensable. That refers to several causes. One of the most important reasons is the diversity of Public Health Systems in Europe. Due to the multi-national partnership, there is a pool of knowledge and resources, the consortium can revert to while building up the virtual campus. The exchange of good practise in learning related to the field of Public Health is a great chance.

## Partnerships out of the project consortium

In the following we present partnerships built, with active exchange and/or a perspective for active cooperation in the virtual academy of health. There are also partners who are already active part of the virtual academy of health in February 2010 or will be soon. These partners are active in the field of health with own initiatives or health projects on the WHOLE platform at whole-academy.eu. You will find this partners in the next chapter “Plans for the future’

Partnerships built with active exchange and/or a perspective for active cooperation in the academy of health:

- ∅ Germany: Society of Medical Education, Universities for Health, ENRICH - Regional Network for Health.
- ∅ United Kingdom: National Library for Health (NLH), London South Bank University, East Midlands Public Health Network, Royal college of Nursing, University College London, Sheffield Hallam University, Bournemouth University and Plymouth University. Within Public Health NHS Yorkshire and the Humber, NHS East Midlands and NHS North West, East Midlands Multi-disciplinary Deanery and NHS Yorkshire and the Humber; Networks: CHAIN and the Royal Society for Public Health. Public Health network in Scotland, Wales and Northern Ireland.
- ∅ Slovenia: Faculty of education, Biotechnical faculty, Faculty of Social Sciences at University of Ljubljana, Medical Universities in Ljubljana and Maribor, Faculty of Social Sciences and Faculty of Primorska (all in Slovenia).
- ∅ Netherlands: University of Amsterdam.
- ∅ Italy: Dipartimento di Salute Pubblica, Università di Firenze, Salute Globale ; IPASVI Federazione Nazionale Collegi Infermieri; Società cooperativa di medici di medicina generale; Società italiana di medicina integrata; Centro Sperimentale per l’Educazione Sanitaria, Università degli studi di Perugia; Struttura Complessa di Medicina Preventiva delle Migrazioni, del Turismo e di Dermatologia Tropicale dell’Ospedale San Gallicano (IRCCS) di Roma; Agenzia Sanitaria e Sociale della Regione Emilia Romagna; Dipartimento di Sanità Pubblica - Università di Torino; Servizio di Epidemiologia dell’ASL Città di Milano; ; Associazione italiana di epidemiologia (AIE); Facoltà di Medicina e Chirurgia Università di Bologna; Centro di Formazione dell’Agenzia Sanitaria e Sociale della RER; Agenzia Regionale Sanitaria della Regione Marche; Formazione Continua, Ministero della Salute; Agenzia Regionale Socio Sanitaria del Veneto; METID Politecnico Milano Alberto; Commissione nazionale per la formazione continua ECM.
- ∅ European: IAVANTE (Foundation for Technological Advancement and Professional Training dedicated to Knowledge Management in Health).
- ∅ University of Tashkent (Uzbekistan).



## 5. Plans for the Future

Everyone who has ever tried to populate a virtual learning space, whether it is a virtual academy or a web based international study program in higher Education, knows about the incredible efforts necessary to develop it, to animate it and make it vivid and sustainable. The WHOLE public virtual academy for health as well as the Master program have attracted a lot of attention during the two years of its' "start up" phase and partners are proud of the enormous response the project has gained. Requests were made from all over Europe, but as well from outside, i.e. from Canada to Uzbekistan (University of Tashkent) and Australia.

### The "WHOLE Partner-"KIT"

The most important aim for the WHOLE virtual academy is going on straight with the aims of expansion and integrating to be as attractive as possible for users as well as for potential partners up to the point where the whole virtual academy is "THE VIRTUAL ACADEMY" for Health in Europe and maybe beyond. WHOLE offers to potential partners the so called "WHOLE-KIT": Learning and communication spaces for other health projects and initiatives, institutions and study programs in HE and at other educational levels with all traditional functionalities of a learning platform but as well Web 2.0 applications. WHOLE offers meeting places and rooms for the exchange of ideas and permanent discussions in the field of public healthcare. WHOLE offers space for virtual conferences and time restricted moderated discussions on actual health themes.

Regarding the WHOLE Master area, an objective is the recruiting of additional virtual Master programs and Master modules for the enrichment of the Master area and synergies for the running of this area.

For the WHOLE master program, partners aim to host 200 permanent students in the program and within the Academy in a long term perspective (number of students calculated to finance the virtual space without any other sources of financing like the above and the below). But WHOLE modules also reach students 'outside' the WHOLE Academy. Two of the project partners will integrate single WHOLE modules in other frameworks of study, where high quality modules and a virtual classroom are desirable. Whole project is also open to connect to other selected high quality study programs and 'lend' modules in connection with excellent tutoring for an adequate remuneration or the exchange of modules who perfectly enlarge the WHOLE program.

Another important field of continuing efforts is to foster the exchange of public virtual academy and Master area and the exchange of academics and non-academics. The concept contains that students do parts of their exercises or 'field works' in connection with healthcare practitioners and healthcare professionals at the Public virtual Academy and the trials made in the 'start up' phase i.e. within the moderated discussions are promising.

Partners agreed that ILI, the former project coordinator, will continue playing this part for the overall coordination of partners future activities and to connect and inform partners regularly about general and local developments, new requests for partnerships and participation etc. to guarantee a continuous communication flow.

The following projects or initiatives could be gained for partnership and are vivid on the platform or will be soon:

### **AUS-EUphe - Australian-European Public Health Education**

AUS-EUphe is an innovative joint mobility program between 4 European and 4 Australian public health faculties. It contains a multilevel and intercultural approach to develop capacity and resources for a global public health workforce. Student and faculty exchange will contribute to cultural understanding in the international context. Through this international network, three core public health modules will be provided for the global public health discipline and practice.

### **TEP Health Promotion International - Trans Atlantic Exchange Partnership**

TEP is a collaborative higher-education and training initiative to build capacity between health promotion experts from Canada and Europe. With the overarching aim of advancing higher education and training in the field of global health promotion, the TEP program endeavours to connect students and academic staff from four higher education institutions in Canada and Europe: the University of Brighton (UK), the University of Magdeburg (Germany), the University of Toronto (Canada), and the University of Victoria (Canada).

### **Network Universities for Health Germany**

“Universities for Health” (Hochschulen für Gesundheit e.V.) is a network of 28 universities in Austria, Switzerland and Germany. The overall aim of the network is the common development of e-learning modules. The network intends to run their modules via the virtual academy for health.

### **University of Ljubljana**

The department of ethnology and cultural anthropology at the Faculty of Arts and medical students at the Faculty of Medicine will conduct research work through the use of Virtual Academy for Health learning environment.

### **University Athens, Greece**

Use of selected WHOLE modules as educational infrastructure in other courses i.e. on HIV/AIDS, the 3rd age, problems and new technologies and health.

### **University Athens/university Chicago on a partnership for a ‘Master of Science in Sustainability Strategies’, planned for 2011**

Beside health related projects and initiatives the WHOLE partner consortium also wants to promote knowledge related to the field of sustainability and connect it health projects and initiatives in the virtual academy. That is because it was discovered that a lot of the fantastic health initiatives and projects met in the last two years have a substantial need for strategies and knowledge in this area.

### **Sustainability network**

An international network has been established in order to promote graduate studies and advanced studies on “Sustainability” (Masters and PhD.) using different forms of education from the traditional (meeting every year for two weeks in Hydra island, Greece) to e-learning / web techniques. These studies are oriented towards professionals in different areas and from different countries. The network wants to make use of WHOLE project.

The Network is composed of The National Technical University (GR), the University of Illinois (USA), ELETAS (Greek Society of Technology Assessment and Evaluation (GR), the Department of Sociology, of the National School of Public Health (NSPH – GR).

**“You are welcome too. Please contact us.”**

The reactions and the feedback to Whole project from all over the world were impressive. Requests for participation reached the partners from institutions, professors, academic lecturers of several disciplines and also from future students. The same is true for healthcare professionals and practitioners and a wide range of initiatives and other projects. Due to the permanent and strong dissemination activities from the beginning the degree of awareness about the Whole-Virtual Academy was rising very quickly. If you read our Public Report and you feel that your health project or initiative or health course should be embedded in the framework of the ‘Virtual Academy of health’, please don’t hesitate to contact us for consultation.

## 6. Contribution to EU policies

The WHOLE project has an **European added value** for several reasons:

WHOLE developed a virtual campus, and there are many research, policy and practices evidences that demonstrate that e-learning can play a key role in the European Integration and Internationalisation agenda of higher education (also in relation to the Bologna process) . Exchange of good practices can multiply its impact if the transferability and scalability potential of existing practices is investigated at European level. The report “Professional development goals in the Healthcare sector” is addressed to the European research community. Its dissemination potential can be multiplied at European level. The transnational exchange will definitely enrich the learning experiences conducted. Some of the subjects of study in the Virtual Academy, such as the prevention of catastrophes, migration and healthcare, or healthcare across boundaries should be addressed at European or even worldwide level, in order to produce a real impact.

WHOLE project, due to its special profile, meets especially two targets of **Lisbon Education & Training Progress Indicators**. That is **Open Learning Environment**: WHOLE is not only addressing healthcare students in higher education, but also adult learners, and namely healthcare professionals. A significant share of the participants to the Master degree is expected to belong to this target group. This is how WHOLE will raise participation in education and training of the population aged 25-64. The second target is **Making Learning more Attractive**: WHOLE intends to provide learning opportunities across all boundaries for healthcare professionals and students. In this sense it is expected to fully unfold the potential of the “Lifelong learning for all” paradigm across cultures, professional and generational boundaries.

But WHOLE project also supports **Lisbon Key Competences**, meeting at least four targets: **Communication in foreign Languages**: Many participants involved in learning experiences will not be native English speakers; therefore they will interact in a foreign language, with the support of project partners acting as learning and language facilitators. In this way WHOLE students and healthcare professionals improve their written and oral communication skills in a foreign language

**Digital Competence**: Digital competences develop through interaction in the Virtual learning Environment, supported by project partners and technical helpdesk

**Learning to Learn**: Participants to the WHOLE Master degree will reflect about their learning experiences thanks to formative evaluation, which will not only refer to the results, but also to the learning process. In this way they will develop their “learning to learn” competences.

**Interpersonal, Intercultural and Social Competences and Civic Competences** The Master degree will comprise such modules as citizens and migrants’ rights as far as healthcare provisions are concerned. That way learners develop their intercultural and civic competence. Social competences will be developed through collaborative e-learning.

According to European Life Long Learning strategies Whole project contributes supporting the following horizontal policies:

**Cultural and Linguistic Diversity**: Cultural diversity was be adequately taken into consideration, since the WHOLE partnership and scientific quality committee are composed by eminent university professors and theoreticians in the field of cultural anthropology. Moreover the Master degree in intercultural and societal healthcare studies will devote a special attention to this issue. The language of studies will be English, but attention will be paid to conduct some project activities in other languages, especially among learners and learning facilitators

at national level. The Virtual Learning Environment will also include language diversification facilities

**Fight against Racism and Xenophobia:** Participants of the Virtual Learning Environment will automatically be in contact with different medical cultures and health traditions in other countries through related learning materials, collaborative learning experiences and teachers from different countries.

**Equal opportunities between Men and Women:** Gender balance, both horizontal and vertical, already exists in the WHOLE consortium. It is taken into account also when recruiting participants to Master degree and while addressing stakeholders.

**Sexual Discrimination, Orientation** All objectives, activities and expected results of WHOLE are oriented at building a European healthcare system more effective, more attentive to societal needs and open to all. Therefore no form of discrimination, be it sexual, geographic, cultural, racial or ethnic, will be tolerated by WHOLE project partners

**Racial or ethnic Origin** There are outstanding evidences of activities, publications, innovative practices, EU and national funded initiatives demonstrating that the WHOLE project partners have significantly contributed to the fight against racial or ethnic discrimination in Europe.