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# FINAL DRAFT

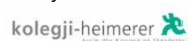
## PROJECT MANAGEMENT PLAN

STUDENT-RUN INTERDISCIPLINARY ALLIED HEALTH DIGITAL PRACTICE CENTER /  
SIAHDPC

Project number: **619098-EPP-1-2020-1-XK-EPPKA2-CBHE-JP**

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## Project Introduction

The student-run Interdisciplinary Allied Health Digital Practice Centre (SIAHDPC) project falls under the category of ERASMUS+ KA2 capacity building in higher education institutions. Heimerer College is the coordinator with a consortium of 10 partners. The partners of the consortium are actively involved in dealing with the relevant issues and act as promoters of reforms and innovation within the health sector in their countries/regions. They are involved in activities related to the delivery of qualitative research, education, and professional training. While doing so, they are introducing new philosophical and practical approaches to teaching and servicing such as co-generation, interdisciplinary and entrepreneurship with the client (patient) and problem focus.

The purpose of this project is to introduce for the first time in Kosovo a model of teaching and health digital service delivery, which would strengthen the linkages and interaction of the students with industry and researchers. Such a model is expected to steer innovation and entrepreneurship and strengthen the existing (create new) linkages between education and research with the industry and community needs.

The merits of the multidisciplinary approach stand on the fact that it allows a more effective

client/patient assessment, diagnosis, treatment and rehabilitation. That is the case since it enables the analysis of a particular problem from different perspectives and takes into account their unique specifications when deciding about the type of intervention needed for the problem or goal to be overcome and achieved, respectively.

As a relatively new country, which got out of a devastating war about 20 years ago, Kosovo continues to face significant economic and social challenges. The tight expenditure constraints, low incomes, and macro-economic conditions characterized by slow growth create an unpromising environment for significant short-term improvement of health care and social wellbeing in general.

Moreover, the health system in Kosovo is facing numerous challenges, resulting with relatively poor quality and limited quantity of respective services. The relatively poor performance of health institutions is also argued to be a product of very low levels of cooperation between relevant stakeholders at all levels.

While even basic health services are difficult to have access to, mainly due to limited resources as well as their mismanagement, innovation and entrepreneurship are considered as the remaining alternatives for addressing relevant issues. Hence, there is a great need for changing the way how the interaction between academicians, researchers, businesses and patients interact with each other. Both the teaching and providing health services sectors are in great

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need of a more inclusive and multidisciplinary collaboration. Simultaneously, there is a great need for a “supporting net” for innovative business and service delivery ideas to spur and effectively implement.

## Project Objectives

The goal of this Project is to steer reform, innovation, entrepreneurship and interdisciplinary collaboration and digitalisation within the health sector in congruence with the needs of the society.

The main objectives are:

1. Establish and operate a student-run interdisciplinary allied health digital practice centre, including its Virtual Clinic for simulated piloting;
2. To co-create a Teacher’s Digital Toolkit on modern pedagogical approaches based on digital technologies for virtual and mixed reality-based teaching competence of Kosovo HEIs teachers and clinical supervisors by implementing a top-up LLL (Life-Long-Learning) training;
3. Co-create a Roadmap (Guideline) for the designation and delivery of eHealth and e-Rehabilitation service;
4. Investigate and share best practice of Interdisciplinary collaboration, ICT & Digital Competence, Evidence-informed practice, Innovation and entrepreneurship, Evidence-informed practice, User-involvement and person-centeredness
5. Update 6 existing CPD (Continuous Professional Development) courses in Innovation and entrepreneurship, ICT & Digital, interdisciplinary collaboration, user-involvement and person-centeredness, and co-create 3 CPD courses on interdisciplinary collaboration, evidence-informed practice, and user-involvement and person-centeredness;
6. Advance the work of the recently established knowledge “triangles” (Advisory Industry Board and Joint Venture Group) in health sciences comprising of representative from industry, academia and government in Kosovo
7. To establish EU and Kosovo network for collaboration and mobility of staff for developing LLL in rehabilitation/health services supporting each other in developing and implementation of the LLL and CPD courses and provision of telehealth and virtual therapy services.

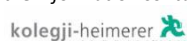
## Project Activities

The project activities that would enable the achievement of the goal and objectives mentioned above:

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1. Establishing a interdisciplinary student-run digital clinic
  - a. that would advance the interaction between students, professionals, academicians, entrepreneurs, patients, and policymakers
  - b. Providing necessary technology, finance and technical support for research and skills development
  - c. (Co)developing new work models and ways of service delivery
  - d. Designing e-health services
  - e. Providing co-finance, and consulting and networking services up to the first three years of new business with local and international partners
  - f. Empowering the person-involvement and the decision-making process
2. Re-designing and developing existing and new educational and training content, (curricula) respectively, with emphasis on the concepts mentioned above
3. Re-designing of new and existing curricula of health-related programs, emphasizing competences related to digitalization, innovation and entrepreneurship
4. Co-developing training modules on entrepreneurial skills, business opportunities and market trends within the health sector
5. Introducing creative and inter-professional solutions to relevant institutions and care providers, in terms of evidenced based
6. Providing life-long-learning opportunities within relevant areas
7. Acting as a coordinating unit for facilitating the collaboration of relevant non-governmental structures
8. Support the health care providers implement innovative models of work and service delivery
9. Providing monitoring and evaluation services regarding the level of effectiveness (degree patient's satisfaction) of innovative models of work and delivery of health services applied
  - a. Providing continuous (in)formal training (capacity building) service for the staff of relevant institutions and care providers

## Expected results and impacts

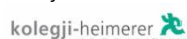
Consequently, the following results/benefits will be achieved:

- Establishment of a sustainable student-run interdisciplinary digital health center which would serve also as a hub for the development of new ideas, practices, businesses, policies and projects within the health sector

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- Generation the professional skills and know-how missing based on the EU standards and societal needs
- Development of new and sustainable solutions
- Development of new and successful small and medium size businesses
- Designation of new health professional profiles
- Generation of new jobs

The main impacts of this Project are expected to be:

- Improvement of the quality of educational and professional services regarding the health sector
- New models of work and service delivery implemented by the health care providers and relevant institutions
- Greater opportunities for professional and institutional development and networking
- Increase of capacities of the non-governmental sector for designing creative and feasible solutions and advocating them to the policy-makers
- Increase of the competitiveness of the health service providers
- Improvement of the health and social wellbeing
- Balancing the trade outcomes of health services between Kosovo and its trading partner countries

**Project duration: 15.01.2021 – 14.01.2024**

## **Project consortium**

1. Heimerer College- established in Kosovo\* (project coordinator)
2. University of Gjilan “Kadri Zeka”- established in Kosovo\*
3. RIT Kosovo- RIT- established in Kosovo\*
4. JAMK University, Finland– established in Finland
5. Metropolia University of Applied Sciences, Finland– established in Finland
6. Medical Faculty, Martin-Luther-University Halle-Wittenberg- established in Germany
7. Institute of Southeast Europe for Health and Social Policies ISEE-HSP- established in Kosovo\*
8. Klinika Digjitale- established in Kosovo\*
9. Ministry of Education, Science and Technology- MEST- established in Kosovo\* (Associate partner)
10. Milky Way Creative- established in Kosovo\*
11. Univations GmbH - established in Germany\*

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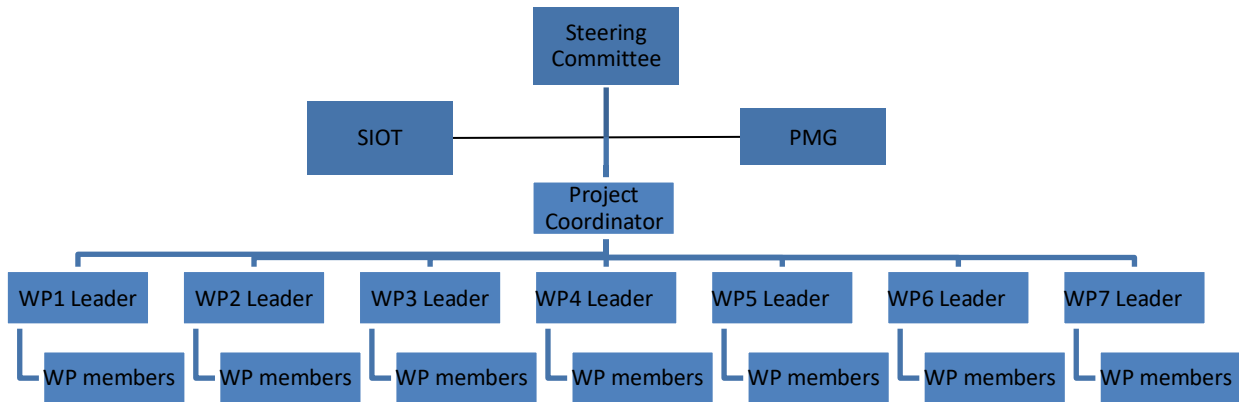




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## Organizational Structure



## Project Management Approach

SIAHDPC is established based on issues of quality assurance, formalized with a partnership agreement (See Partnership Agreement for more details) which ensures the credibility and interaction among members and sets the ground of a common methodology in managing the project and the division of tasks.

Based on this, the project will create the following bodies and structures:

- Steering Committee (SC)
- Project Management Group (PMG) and
- Student Interdisciplinary Operational Team (SIOT)

The project management team group consists of 6 members; project manager and administrative officer from HC, one representative from Metropolia, JAMK, MLU, RIT-K and UKZ. PMG will design the work plan based on the SMART principles, including clear activities with respective indicators. That plan will contain all the necessary inputs regarding monitoring as well as financial administration. The activities are planned in a logical and cost-efficient way. The project management groups hold regular monthly meetings. It has an essential role in terms of ensuring the effective and efficient operation. It prepares the progress report twice a year and publishes it on the online platform. The management group participates in the meetings of the steering group.

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The steering committee comprises of 8 participants, one representative from HC, MEST, Univations, ISEE-HSP, Klinika Digjitale, and Milky Way Creative, including project and administrative coordinator. Its main duty is to monitor the quality of management and relevance of the main outcomes to the needs of the society as well as partners. In total, it will meet six times, unless there is a need for additional ones.

The decision-making process is based on the democratic principle, where the majority “wins”. However, such an instrument is used only in cases when divergent standings are held between the grant applicant and the respective partner. Otherwise, the grant applicant will make minor adjustments regarding the budgets and timing of certain processes and outcomes.

The grant applicant will serve as a bridge between the consortium and the external evaluator, the ERASMUS+ Office and European Commission on every matter concerning the project. At the same time the grant applicant leads the regular meetings of the project management group.

Working Groups (WG), will have a specific role in managing technical Work Packages. The project has 7 Work Packages. Each of the WP has a delegated leader responsible for its overall coordination.

The assignment of tasks and responsibilities to each partner is based on their respective expertise, resulting with the out-most level of efficiency and efficiency.

#### **WP1, lead ISEE-HSP. Responsibilities:**

Task 1.1 ISEE-HSP;

Task 1.2 Heimerer College (digital platform);

Task 1.3 EU Partners with Heimerer College

All have a shared responsibility for effectively defining common key concepts, understanding and delivering WP1.

#### **WP2, lead Metropolia. Responsibilities:**

Task 2.1 Leads Metropolia with EU Partners will organise a study visit.

Task 2.2 Metropolia consists of designing Business Plan based on key concepts.

Tasks 2.3. Metropolia will establish the Digital Platform and Virtual Clinic.

Task 2.4 All partners.

Task 2.5 Heimerer College will deliver Simulated piloting.

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Task 2.6 EU Partners

Task 2.7 Metropolia & EU Partners will evaluate and deliver an online reflective workshop.

**WP3, lead MLU.** Responsibilities:

Task 3.1 MLU (Study Visit).

Task 3.2. MLU enhances teacher competences using digital technologies.

Task 3.3 EU Partners are responsible for training teachers.

Task 3.4 Univations will develop a guideline for eHealth and Rehabilitation services.

Task 3.5 Univations & MLU will provide the training on eHealth and eRehabilitation services.

Task 3.6 Univations & MLU

**WP4, lead JAMK.** Responsibilities:

Task 4.1 All Partners

Task 4.2 EU Partners will develop CPD and Online Learning materials.

Task 4.3 Kosovo HEIs & EU Partners will be piloting the CPD courses.

Task 4.4 JAMK & EU Partners will organise a study visit and will evaluate and adjust any reflected factors.

**WP5, lead RIT-K.** Responsibilities:

Task 5.1 RIT-K consists of establishing an internal evaluation team

Task 5.2 Univations are to construct the quality plan

Task 5.3. RIT-K

Task 5.4 RIT-K coordinates the visits of the external evaluator and disseminates it's reports

**WP6, lead UKZ.** Responsibilities:

Task 6.1 UKZ will continuously take part in national and international networking

Task 6.2 UKZ

Task 6.3 UKZ

**WP7: lead HC.** Responsibilities:

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Task 7.1 HC to launch the project

Task 7.2 HC

Task 7.3 HC to organise project management group meetings

Task 7.4 HC

The PMG consists of 6 projects HEIs (HC, Metropolia, JAMK, MLU, RIT-K and UKZ) and 2 professional projects partners (Klinika Digjitale and Univations), whereas those of SC are HC and all the professional Kosovo and EU partners, including Univations, ISEE-HSP, Klinika Digjitale, Milky Way Creative and MEST.

Besides the points that described above, other management activities include:

– Two evaluation reports (progress and final) which will be prepared by Heimerer College as the Lead Partner and then reviewed and approved by the SC, focusing on the quality of the work done and quality of project deliverables.

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## Milestone List

The below chart lists the major milestones for the project. This chart consists only of major project milestones such as completion of a project deliverables per Work Packages. If there are any scheduling delays which may impact a milestone or delivery date, the project manager must be notified immediately so proactive measures may be taken to mitigate slips in dates. Any approved changes to these milestones or dates will be communicated to the project team by the project manager.

| WP/Key activity | Project Task (expected deliverables in each WP)   | (tentative) Due Date |
|-----------------|---|----------------------|
| 1.1             | Kick-off meeting and reaching common understanding  | 28.02.2021           |
| 1.2             | Establishing and maintaining the project website  | 31.01.2024           |
| 1.3             | Co-defining common understanding of key concepts  | 31.06.2021           |
| 2.1             | Investigating and sharing good practices of existing digital learning centres   | 15.01.2022           |
| 2.2             | Designing the business plan of the SIAHDPC based on the key concepts,   | 15.02.2022           |
| 2.3             | Establishing the digital platform of the Virtual Clinic   | 15.02.2022           |
| 2.4             | Integrating the SIAHDPC with other centres of (non) project partners  | 15.12.2023           |
| 2.5             | Simulated Piloting  | 15.06.2022           |
| 2.6             | Online tutoring and online workshop   | 15.06.2022           |
| 2.7             | Evaluation and adjustment   | 15.09.2022           |
| 3.1             | Developing the teacher's Toolkit on learning pedagogical approaches based on digital technologies                       | 15.03.2022           |
| 3.2             | Developing teachers' competences to empower them for using digital technologies in teaching and research                | 15.11.2023           |
| 3.3             | Providing the teacher's training on pedagogical approaches based on digital technologies                                | 15.03.2022           |
| 3.4             | Developing the Roadmap (Guideline) for the development and delivery of virtual therapy, remote and tele-health services | 15.06.2022           |
| 3.5             | Providing the teacher's training on delivering virtual therapy and tele-health services                                 | 15.07.2022           |
| 3.6             | Evaluation and adjustment   | 15.11.2023           |

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|     |  |            |
|-----|--|------------|
| 4.1 | Investigating and co-working through best practices                          | 15.03.2022 |
| 4.2 | Developing CPD and on-line learning materials and utilising virtual learning | 15.09.2022 |
| 4.3 | Piloting of the CPD courses  | 15.05.2023 |
| 4.4 | Evaluation and adjustment  | 15.07.2023 |
| 5.1 | Establishment of internal evaluation team                                    | 15.02.2021 |
| 5.2 | Co-construction of the quality plan  | 15.04.2021 |
| 5.3 | Regular evaluations (every three months)                                     | 15.12.2023 |
| 5.4 | External evaluation  | 15.12.2023 |
| 6.1 | Continuous networking  | 15.01.2024 |
| 6.2 | Sustainability   | 15.01.2024 |
| 6.3 | Dissemination seminars (two in Pristina)                                     | 15.11.2023 |
| 7.1 | Launching of the project and managing  | 15.01.2024 |
| 7.2 | Student Interdisciplinary Operational Team                                   | 15.11.2023 |
| 7.3 | Project management group meetings  | 15.11.2023 |
| 7.4 | Steering group meetings  | 15.11.2023 |

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Types of changes include:

- **Scheduling Changes:** changes which will impact the approved project schedule. These changes may require fast tracking, crashing, or re-baselining the schedule depending on the significance of the impact..
- **Budget Changes:** changes which will impact the approved project budget. These changes may require reallocation of budget. May require changes to the cost baseline and a contract amendment. Under any circumstances, no additional overall project funding will be approved.
- **Effort Changes:** changes which will impact the effort allocated to specific tasks. Depending on the size of these changes, they may require contract amendment. For minor changes to the planned effort allocation partners with the involvement of WP leaders can address these issues between them while keeping the Project Coordinator informed.
- **Scope Changes:** changes which are necessary and impact the project's scope which may be the result of unforeseen requirements. These changes will be reported through the PMG and will require the approval of the same. The changes in the Scope of the project will require an amendment of the contract to be approved by the SC.
- **Quality Changes:** changes which will impact the quality of project deliverables. Depending on the extent of the impact on quality, these changes may require, in general, the amendment of the contract.
- **Project Meetings:** The project foresees management group meetings, steering committee meetings, quality team meetings, study circle meetings (for intellectual outputs) and student meetings.

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## Communications Management Plan

Necessary documentation related to project management and administration will be produced and shared regularly. The minutes of the meetings of internal quality group, management group, and steering group and all materials produced during the project are open for all partners on the digital platform. Effective communication between partners throughout the project keeps all the parties well informed and enables partners to take equal part in decision making.

The steering group will follow the progress of the project and it will give guidance and advice to the project management team.

The project is managed on the basis of continuous communication and monitoring of progress and outputs. Email, Google Meet, Microsoft Team and web conferencing will be used. Consortium will make decisions on major issues. These include planning of the quality control, dissemination and sustainability strategies and check-up -plans in close collaboration with all partners.

Minor decisions over changes involving budgets and planning will be taken by the grant applicant in consultation with the partner(s) concerned. In case divergent opinions within the consortium a vote will decide the outcome.

More relevant details can be found on the Dissemination Plan and Project Description/WP6 Dissemination and Exploitation.

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## Cost and Procurement Management Plan

This issue will be the main topic of the first joint meeting between the partners, facilitated by the Project manager. Partners will agree on tasks and their respective delivery times. A detailed agreement addressing issues related to management and monitoring procedures and processes for recording the Project's outputs and information on financial issues will be written and agreed upon.

The HC is responsible for continuous management of the Project, ensuring the achievement of the planned tasks within the respective timelines and budgetary limits. All of the activities pertaining to procurement of equipment and organizing meetings, quality control and dissemination are under the responsibility of the HC to be organised and over-sought in accordance with the respective rules and guidelines of the ERASMUS+ Programme. All equipment will be purchased by sending an invitation for tenders to ensure cost effectiveness.

The resources allocated for each partner will be transferred in the accounts of each partner. There will be a specific officer at each partner organisation that will deal with administrative and financial matters, including taking care of invoicing and reporting to the respective officer at the HC.

The Kick-off meeting will take place in Kosovo, in addition to the reflective seminars. In order to ensure the most economically efficient level of travel expenditures, one of the two workshops which is planned to take place in MLU-Halle and in University of JAMK, in Finland. Despite that one may consider that there look as relatively large amount of mobility, the applied method of work (co-configuration) is extensively based on the face-to-face interaction; besides, due to the fact that this is the first time when such a concept of a student-run interdisciplinary allied health digital practice center is implemented in Kosovo, it is of critical importance for the respective students, teachers and professionals to gain hands-on experience on managing and operating in a digital interdisciplinary health center.

In order to maximize the “value-for-money” spent in traveling, some activities have been combined to reduce the costs.

## Quality Management Plan

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The establishment of a Project Quality Management Plan and of the respective procedures is the very first accomplishment of WP5 – Quality Assurance led by RIT-K. There will be a team with quality officers from Univations, ISEE-HSP, HC, Metropolia and Klinika Digjitale who will control and monitor the quality of every activity, outcome and process of the project. Being established under the guidance of the Steering Committee, it will submit regular semi-annual monitoring reports to it; such reports will also be published on the online platform.

All the partners will be included from the initial phases of planning pre-conditions in order to ensure empowered evaluation takes place. Further, each partner will act as a peer-review of another partner' performance in terms of quality of deliverables in each work package. Evaluation of outcomes in relation and reflection to the Bologna process and EQF-levels is also included in the project activities.

We have set clear descriptions of intermediate products, processes, actors and deadlines for each outcome in order to make monitoring as effective as possible, even online! Such a mechanism will enable the capture of early signals of deviations from the plan, in which cases support from all the partners will be made available to tackle them. The method of collaboration adopted in this Project, will enable successful implementation of the CPD courses, as it utilizes the built network for practicing and sharing the results of the project through online platforms or seminars.

Further, specific checklists are planned jointly by all project partners for all project activities and outputs before the respective WP starts. To make sure that needed amendments are incorporated as early as possible, feedback from all project partners is collected systematically after the implementation of each workshop, reflective seminar, pilots and seminars in order.

Another instrument of ensuring the quality of this project is the external quality control, which will be provided by an external party, who has relevant qualification, experience and interest in the field that this Project contributes.

The project management group (PMG) which consists of the project manager and administrative officer from HC, one representative from Metropolia, JAMK, MLU, RIT-K and UKZ will cooperate with the Steering Committee (SC) for managing the project.

Every partner country partner will have access to key project documents and project guides in English and translated versions in their native languages.

The main objectives of the present Project Quality Management Plan are:

- Planning review procedures in order to monitor its progress and the achievement of its goals
- Put in place risk management and quality control mechanisms

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- Create clear procedures for delivery high quality results
- Provide consortium with guidance for project reporting
- Provide consortium with guidance on communication, exchange of data, publication and dissemination
- Provide consortium with templates for project outputs

Please refer to the quality plan adopted for this project. The Quality Plan involved the monitoring and evaluation processes of the project.

## Risk Management Plan

Managing risks on projects is a process that includes risk assessment and a mitigation strategy for those risks. The risk management process followed at HC, goes as in the following:

- Continuous risk identification
- Risk evaluation
- Risk mitigation and contingency measure definition
- Risk monitoring and control
- Risk identification efficiency measurement

*Risk assessment* (identification of potential risk and the evaluation of the potential impact of the risk)

- Risk sources
- Risk Category

*Risk Evaluation* (involves examining how project outcomes and objectives might change due to the impact of the risk event)

- Probability of occurrence
- Risk impact
- Risk exposure

*Mitigation-* eliminate or minimize the impact of the **risk events**—occurrences that have a negative impact on the project.

- Risk response plan
- Risk triggers
- Risk ownership

*Risk monitoring and control*

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- Identifying new risks and planning for them
- Keeping track of existing risks to check if:
- Reassessment of risks is necessary
- Any of risk conditions have been triggered
- Monitor any risks that could become more critical over time
- Tackle the remaining risks that require a longer-term, planned, and managed approach with risk action plans
- Risk reporting

#### *Risk efficiency measurement*

- Risk metrics
- Risk Audit

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