



"Towards evidence-based tailored implementation strategies for eHealth" GA no. 733025

Project handbook

Authors: Coordination team



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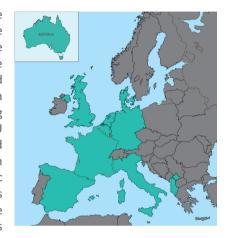


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1 EXECUTIVE SUMMARY

The ImpleMentAll project addresses the need for effective strategies to promote the uptake of evidence-based innovative clinical practices and interventions. The Project's goal is to develop, apply and evaluate tailored implementation strategies in the context of on-going eHealth operational initiatives in the EU and beyond. Based on Internet-based Cognitive Behavioural Therapy (iCBT), an psvcho therapeutic innovative intervention, currently spreading across Europe in a wide variety of settings, three specific objectives have been identified as follows:



- To develop a generic Integrated Theory-based Framework for Intervention Tailoring Strategies (the ItFits-toolkit) for data-driven tailored implementation of evidence-based eHealth services.
- To demonstrate the impact of the ItFits toolkit on the implementation of eHealth for common mental disorders (iCBT) in 9 European countries (2 of which are LMIC) and Australia.
- To disseminate the validated toolkit in various healthcare contexts across Europe.

The project builds upon a large international partnership formed by **18 organizations from 11 countries** in a true multidisciplinary international collaboration that brings together key experts in clinical practice, health innovation, clinical research and implementation science.



Why a Project Handbook?

It is easy to understand that such an ambitious project needs a well-organised management structure and effective communication channels among partners to favour collaborative work. The Handbook pretends to be one of the tools to facilitate it.

Having this in mind, the purpose of this Project Handbook is twofold:

First, to provide the Consortium with a brief document giving a short and clear picture of the work to be done in the ImpleMentAll project, such as objectives, timing and tasks, expected results and financial flow. Moreover, it can be used by the partners for dissemination purposes too, offering the reader a thorough description of what ImpleMentAll actually is and what it wants to achieve.

Second, it is intended to be a practical daily tool for management addressed to all partners, to provide them with a reference/guide for everyday work: operational procedures, methodology, core steps, deadlines and financial monitoring.



2 OVERVIEW OF THE PROJECT

2.1 About ImpleMentAll

2.1.1 Project identification

Project Name: Towards evidence-based tailored implementation

strategies for eHealth

Project Acronym: ImpleMentAll

Grant Agreement: 733025

Project Coordinator: Region of Southern Denmark (RSD)

Project start date: 1st January 2017

Project end date: 31stMarch 2021

Project duration: 51 months

Size of the project: 911,55 person/months

Budget: 7.071.638,75 € Funding: 5.999.170,00 €

2.1.2 Glossary

Beneficiary or Participant	A signatory to the Contract with full responsibility for the Project. See Contract for further details. Beneficiaries are identified in the Contract with the EC.
Consortium	The Beneficiaries carrying out the ImpleMentAll project.
Contract	The EC Grant Agreement, number 733025, and all its annexes.
CA	Consortium Agreement
FS	Financial Statement



D	Deliverable			
GA	Grant Agreement			
DoA	Description of the action (Annex I to the GA)			
GP	General Practitioner			
НСР	HealthCare Professional			
iCBT	Internet-based clinical intervention based on Cognitive Behaviour Therapy			
IMA ImpleMentAll abbreviated acronym				
IPR	Intellectual Property Rights			
ItFits	Integrated Theory-based Framework for Intervention Tailoring Strategies			
СТ	Coordination Team			
PM	Project Management/Manager			
PQP	Project Quality Plan			
PSC	Project Steering Committee			
PO	Project Officer			
SSC	Scientific Steering Committee			
WP Work Package				
Т	Task (WP is split in Tasks)			

2.2 The ImpleMentAll Consortium

The ImpleMentAll consortium consists of 18 partners and it is thoroughly composed to include the necessary knowledge, expertise and resources necessary to carry out the tasks needed for obtaining the ambitious goals of the project and achieve the expected impact.









































Below all the partners are listed, indicating for each of them full name, short name, and country.

Beneficiary number	Name		Country	
1	1 REGION SYDDNMARK		Denmark	
2	2 STICHTING VU		Netherlands	
3	THE AUSTRALIAN NATIONAL UNIVERSITY		Australia	
4	4 UNIVERSITY OF NEWCASTLE UPON TYNE		United Kingdom	
5	5 STICHTING GGZ INGEEST		Netherlands	
6 BADALONA SERVEIS ASSISTENCIALS SA		BSA	Spain	
7	FONDATION FONDAMENTAL	FONDAMENTAL	France	



8 (Terminated)	SCHOEN KLINIK BAD AROLSEN GMBH & CO.KG	SCHÖN	Germany
9	AZIENDA SANITARIA LOCALE TO3	ASL TO3	Italy
10	ACADMISCH ZIEKENHUIS GRONINGEN	UMCG	Netherlands
LONDON SCHOOL OF 11 HYGIENE AND TROPICA MEDICINE		LSHTM	United Kingdom
12	12 EUROPEAN ALLIANCE AGAINST DEPRESSION EV		Germany
13	ZYRA PER SHENDET MENDOR	MHCPriz	Kosovo * UN resolution
14	QNDRES SE SHENDTIT DHE MIREQENIES KOMUNITARE	CMHTir	Albania
15	GLOBAL ALLIANCE OF MENTAL ILLNESS ADVOCACY NETWORKS EUROPE AISBL	GAMIAN	Belgium
16	16 SYDDANSK UNIVERSITET		Denmark
17	REDMAX BV	Redmax	Netherlands
18	BLACK DOG INSTITUTE	BDI	Australia
19	GET.ON INSTITUT	GET.ON	Germany

Figure 1: List of Beneficiaries as in the DoA

The 18 partners are distributed to cover the four components key to the success of a project with this scope and ambition:

- strong research competences: the research team comprise world leading institutions and individuals in implementation science, clinical psychology, and eMental health
- implementation into real life healthcare settings: the implementation sites will provide the necessary test beds for the tailored implementation



strategies, and will take ambitious steps towards large-scale implementation and normalisation of iCBT into routine practice

- experienced project management and collaboration, as well as
 dissemination and communication. The team includes organisations and
 individuals with not only extensive experience, but also significantly
 successful track records of project management at a European level for
 several years, and long term relation, that can, also, ensure a high level of
 visibility, dissemination and scaling of results to communities and
 stakeholders outside of the consortium
- specialized in knowledge transfer between higher, middle, and lower income countries.

2.3 Project presentation

The ImpleMentAll project is a research and innovation action funded by the EC addressing the topic of "Implementation research for scaling up of evidence based innovations and good practice in Europe and low-and- middle-income countries" of the Health, demographic change and well-being call (H2020-SC1-2016).

The project aims at having impact on two research and innovation systems. One relates to the field of psychology and the provision of mental healthcare. The second relates to implementation science, i.e. the development of knowledge of and methods in promoting the uptake of research findings.

In ensuring the main aim, the project follows three major phases:

- 1. implementation intervention development
- 2. implementation intervention evaluation
- development of the integrated implementation framework consisting of the methodology and toolkit for tailoring implementation strategies and performing and evaluating the tailored implementation plans.

In summary, ImpleMentAll will develop, validate, and deliver a generic Integrated Theory-based Framework for Intervention Tailoring Strategies (ItFits-toolkit) to enable more efficient implementation of evidence-based clinical services in routine



healthcare, by providing the methods and contents for their development in local settings.

The tailored implementation strategies will be tested in on-going implementation and up-scaling initiatives throughout Europe. The ItFits-toolkit will be the tool for data-driven evaluation of the implementation actions in terms of key performance indicators for process, effectiveness, and efficiency outcomes. The pilots will run in 9 different countries.

Tapping into ongoing implementation of iCBT							
Germany the Netherlands Denmark							
Spain	Italy	Kosovo *					
France	Australia	Albania *					

^{*}New to iCBT implementation

The project will deliver a transferable tailoring toolbox (the ItFits-toolkit) to facilitate a more efficient implementation of evidence-based eHealth interventions. The research needed to develop and validate this toolbox will significantly advance our understanding of working mechanisms in implementation processes and contributing methods to study those processes. By addressing existing implementation work in eMental health, the project is bridging the gap between research and clinical practice.

2.4 The ImpleMentAll workplan

2.4.1 Phasing and activities

The project has been broken down into nine Work Packages that are listed in the following table.

WP	WP Description	Lead Beneficiary	Person- months	Start Month	End month
WP1	Integrated Implementation Framework	2 - VUA	113,25	1	51
WP2	Implementation Interventions (tailoring)	4- NCL	173	1	51



WP3	Evaluation of Implementation Interventions	5 - GiG	85,3	1	51
WP4	Utilisation platform: Implementation process engine	6 - BSA	45,2	6	51
WP5	Implementation management and knowledge transfer	19 - GET.ON	241	1	51
WP6	Stakeholder and expert participation	1 - RSD	50,5	1	51
WP7	Innovation and dissemination management	12 - EAAD	63,8	1	51
WP8	Project management and communication	1 - RSD	139,4	1	51
WP9	Ethics requirements (reporting to EU)	1 – RSD	N/A	1	51
	TOTAL		911,45		

Each WP is broken down in tasks. Each task is assigned to a leading institution

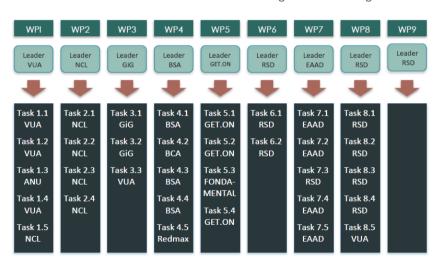


Figure 2. Allocation of responsibilities in WPs and tasks

A full description of the work packages and tasks comprising the project is set out in Description of Action, Annex I of the Grant Agreement. For each work package, the tasks and deliverables (the internal ones in Italic) are identified below.



WP1 - Integrated Implementation Framework - VUA

Tasks:

- T1.1 Repository
- T1.2 Evaluation framework
- T1.3 Work flow
- T1.4 Finalisation of the integrated implementation framework (i.e. the ItFits-toolkit)
- T1.5 Theoretical underpinning

Deliverables:

- D1.1 Repository of determinants of practice and implementation interventions (M15)
- D1.2 Mixed-methods evaluation framework based on MAST (M15)
- D1.3 Integrated Implementation Framework: the ItFits toolkit (M49)
- ID1.4 Utilisation materials that enable actual use of the ItFits-toolkit (M15)

WP2 - Implementation interventions (tailoring) -NCL

Tasks:

- T2.1 Understand determinants of practice in relation to scaling up iCBT
- T2.2 Develop methodology and tools for tailoring
- T2.3 Synthesise iCBT interventions, determinants of practice and scalability activities into Implementation Interventions
- T2.4 Coordinate and support implementation sites in developing tailored implementation

Deliverables:

- D2.1 Protocol for identification, contextualisation and prioritisation of determinants of practice (M15)
- D2.2 Protocol for identification and development of implementation activities (M15)
- D2.3 Final progress report on development of tailored strategies for each implementation site including all actual tailored implementation strategies (M47)
- ID2.4 Intermediate progress report on development of tailored strategies for each implementation site including the actual tailored implementation strategies developed (M27)



WP3 - Evaluation of Implementation Interventions - GiG

Tasks:

- T3.1 Data management plan
- T3.2 Trial coordination: randomisation and adherence to study targets, and trial evaluation protocols
- T3.3 Perform data analysis and issue trial reports

Deliverables:

- D3.1 Data management plan (M9)
- D3.2 Final trial report presenting the final results of the data analysis and accompanying interpretation towards the goals of the project (M49)
- ID3.3 Intermediate trial report (M30)

WP4 - Utilisation platform: Implementation process engine - BSA

Tasks:

- T4.1 Specifications and requirements
- T4.2 Technical infrastructure and UI/UX iterative co-design process and pilot test
- T4.3 ItFits-toolbox utilisation platform provision
- T4.4 Platform laboratory testing and training materials
- T4.5 Beyond ImpleMentAll: development of future deployment

Deliverables:

- D4.1 Report on specifications and requirements for optimal utilization of the ItFits-toolkit (M18)
- D4.2 Final version of the ItFits-toolkit utilization platform (M49)
- D4.3 Report on the investigation of potential plans for use and sustainability of the ltFits-toolkit (M49)
- ID4.4 ItFits-toolkit UI/UX Guidelines and Artefacts (M18)

WP5 - Implementation management and knowledge transfer - GET.ON

Tasks:

- T5.1 Implementation of the innovative health intervention in the local environment
- T5.2 Monitoring of recruitment
- T5.3 Knowledge exchange



T5.4 Guidelines for further deployment

Deliverables:

- D5.1 Implementation plans (M9)
- D5.2 Final implementation and knowledge exchange report (M49)
- D5.3 Guidelines for further deployment (M49)
- ID5.4 Knowledge exchange plan (M9)
- ID5.5 Intermediate implementation and knowledge exchange report (M36)

WP6 - Stakeholder and expert consultations RSD

Tasks:

- T6.1 Stakeholder analysis and creation of the Advisory Board
- T6.2 Management of the Advisory Board

Deliverables:

- D6.1 Stakeholder analysis and advisory board plan (M6)
- D6.2 Report on stakeholder advisory board activities (M51)

WP7 - Innovation and dissemination management - EAAD

Tasks:

- T7.1 Development of dissemination plan
- T7.2 Scientific exchange and dissemination
- T7.3 Liaison with relevant EU and non-EU initiatives
- T7.4 Innovation management
- T7.5 Final conference

Deliverables:

- D7.1 Dissemination plan (M9)
- D7.2 Implementation Practice Guidelines for iCBT (M49)
- D7.3 Report on liaison activities (M49)
- D7.4 Final report on dissemination activities (M51)

WP8 - Project management and communication - RSD

Tasks:

- T8.1 Financial and Administrative Co-ordination
- T8.2 Operational Co-ordination
- T8.3 Communication Management



- T8.4 Quality Assurance
- T8.5 Scientific Management

Deliverables:

- D8.1 Project handbook and Quality Plan (M4)
- D8.2 Communication Plan (M9)

WP9 - Ethics requirements - RSD/GiG

Deliverables:

- D9.1 H-Requirement No.1 (M15)
- D92. POPD-Requirement No.2 (M15)

2.4.2 Correlation among the work packages

The eight work packages (WPs) can be logically split into two categories of activities as shown in the picture below: Horizontal activities (WP6, WP7 and WP8, and WP5 that nurture the prior four) and the Integrated Implementation Framework that encompasses the implementation Interventions (tailoring) (WP2), Evaluation of Implementation Interventions (WP3) and Utilisation platform: implementation process engine (WP4)

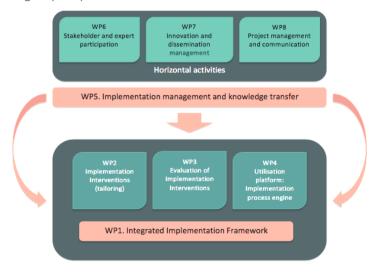


Figure 3. Categories of activities and correlations



WP1, WP2, WP3 & WP4 constitute the scientific core Work packages. WP5, WP6, WP7 and WP8 are related to implementation as usual, stakeholder involvement, knowledge sharing, dissemination and innovation management, communication and project management.

2.5 The ImpleMentAll timeline: phases and workpackages

The figure below illustrates the general timeline of the project. A total duration of 51 months has been envisaged for the project that has been divided in three phases: strategies tailoring, implementation and validation, and analysis and delivery.

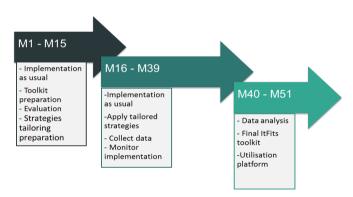


Figure 4. ImpleMentAll general timeline

- Phase 1 (15 months): implementation as usual + ItFits toolkit preparation
 + strategies tailoring + evaluation preparation. Iterative process.
 Implementation interventions
- Phase 2 (24 months): implementation as usual + apply tailored strategies
 + collect data + monitor implementation. Validation
- Phase 3 (12 months): analyse data + finalise ItFits toolkit + develop utilisation platform + report and disseminate. Integrated framework

The Gantt Charts below show the detailed timeline of the project per reporting period, including all the relevant deadlines for internal and official deliverables (the



complete tables of deliverables with corresponding responsible partner and deadline are included in Appendix A).

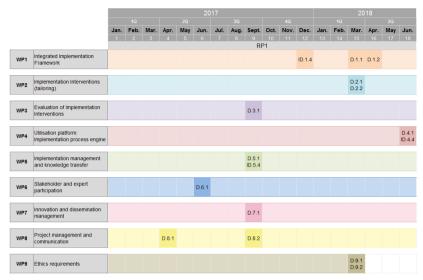


Figure 5. Project timeline (M1-M18)

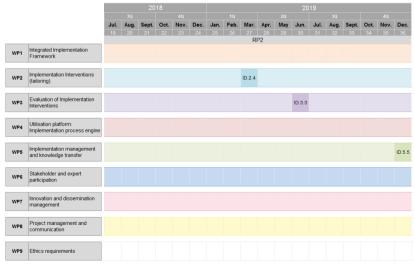


Figure 6. Project timeline (M19-M36)



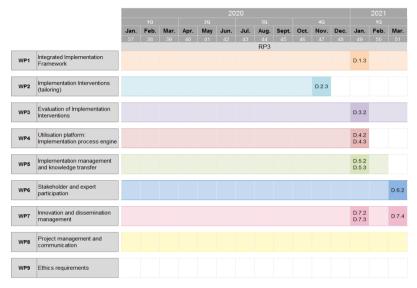


Figure 7. Project timeline (M37-M51)

2.6 Staff resources

The table below shows the summary of effort, in person-months by each Participant and by Workpackage. The Operational Coordinator will keep track of any changes to these figures.



Beneficiary	WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	Total
1 - RSD	4,50	7,00	2,00	3,00	22,00	20,00	12,00	74,00		144,50
2 - VUA	35,75	21,50	14,00	2,50	1,00	3,00	5,50	19,00		102,25
3 - ANU	17,00	12,00	1,50	0,00	30,00	1,00	3,50	3,00		68,00
4 - NCL	29,00	67,00	1,00	2,00	1,00	1,00	5,00	5,60		111,60
5 - GiG	2,00	6,00	47,00	0,00	9,00	1,00	1,00	4,00		70,00
6- BSA	2,00	6,00	1,50	25,80	9,00	1,00	1,00	2,50		48,80
7- FONDAMENTAL	1,50	6,00	1,50	0,00	13,00	1,00	1,00	3,50		27,50
8 - SCHÖN										
9 - ASLTO3	1,50	6,00	3,00	0,00	17,00	1,00	1,00	3,00		32,50
10 - UMCG	1,50	6,00	1,50	0,00	7,30	1,00	1,00	2,50		20,80
11 - LSHTM	1,50	2,00	4,80	0,00	6,00	1,00	1,00	2,50		18,80
12 - EAAD	1,50	1,00	1,00	1,00	1,00	6,00	19,30	5,00		35,80
*DF	0,00	5,00	0,50	0,00	3,00	0,00	0,00	0,00		8,50
13 - MHCPriz	1,50	6,00	1,50	0,00	21,10	1,00	1,00	2,50		34,60
14 - CMHTir	1,50	6,00	1,50	0,00	21,10	1,00	1,00	2,50		34,60
15 - GAMIAN	1,50	1,00	0,00	0,00	0,50	3,00	2,00	1,50		9,50
16 - SDU	7,50	0,50	0,00	0,00	0,00	3,50	1,00	0,50		13,00
17 - REDMAX	0,50	2,00	0,00	6,00	0,00	1,00	2,50	2,30		14,30
18 - BDI	1,50	6,00	1,50	5,00	43,00	1,00	4,00	2,50		64,50
19 - GET.ON	1,50	6,00	1,50	0,00	36,00	3,00	1,00	3,00		52,00
Total	113,25	173,0	85,30	45,30	241,0	50,50	63,80	139,4		911,55

^{*}DF (German Depression Federation): EAAD's linked third party



3 IMPLEMENTALL MANAGEMENT AND COORDINATION STRUCTURE

This chapter outlines the organisational structure, decision-making bodies and procedures of the project, as well as the overall project management approach as described in the DoA.

The organisational structure of the project is shown in the chart below:

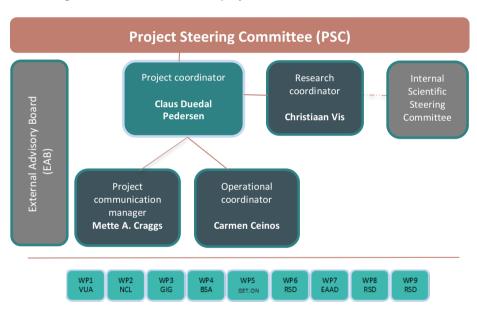


Figure 8: Project management structure

3.1 Project coordinator and Scientific coordinator

Due to the interdisciplinary nature and complexity of the project, the coordination roles and responsibilities are allocated to two different partners:

 RSD hosts the overall leadership, coordination and operational management of the project. RSD is highly experienced in hosting the coordination and management of large collaborative implementation projects.



VUA hosts the scientific leadership and coordination. The interdisciplinary
expertise available in the team and the extensive experience in leading
various collaborative research projects, rightly positions VUA to
coordinate the research aspects and to ensure high scientific quality of the
work, while ensuring that dissemination and stakeholder engagement
produce the expected
impacts.

Built on this shared responsibilities, the management structure and procedures in ImpleMentAll are designed to facilitate an accountable and efficient way to run the project through an efficient decision-making process and a financially and scientifically transparent structure.

3.2 Coordination Team (CT)

The Project Coordinator and the Research Coordinator together with the Project and Communication Manager and the Operational Coordinator constitute the Coordination Team (CT) holding three management key activities: quality, communication, and administration.

The Coordination Team is composed by the following five key persons:

 Project Coordinator
 Claus Duedal Pedersen (RSD)
 Email: cdp@rsyd.dk

 Research Coordinar
 Christiaan Vis (VUA)
 Email: p.d.c.vis@vu.nl

 Project and Comm. Manager
 Mette A. Crags (RSD)
 Email: mac@rsyd.dk

 Operational Coordinator
 Carmen Ceinos Kohn (RSD)
 Email: central@ecomit.net

The CT is responsible for:

- Manage and support the full consortium in the overall and daily operation of the project, including the communication activities
- Manage and support the full consortium from the scientific perspective
- Manage the full consortium financially and administratively,



 Liaise effectively with the European Commission on all matters of strategy, relevance, scientific quality, timescale, administration, reporting, and budget.

3.2.1 Internal Scientific Steering Committee (SSC)

The Research Coordinator will be supported by the internal Scientific Steering Committee (SSC), led by prof. dr. Heleen Riper. The SSC will supervise and hold the overall responsibility for the research carried out during the project and will ensure the high level of scientific quality needed to succeed with the goals of the project.

3.3 Work Package Leaders

Work Package Leaders (WPLs) are responsible for the detailed management of their work package. They can make decisions on the content and direction of their WP within the boundaries of the work plan, the budget and resources which are allocated to it. This will include:

- monitoring and control of the work package progress;
- Collect information on the progress of the tasks within the WP, to deliver to the CT
- coordinate, and organise the WP, including the timely production of deliverables and WP results
- Submission of the deliverables specified in the work package to the CT
- monitoring and control of quality within the standards defined in the Project Quality Plan and quality procedures
- coordination of WP meetings
- Inform the CT and propose possible fall-back scenarios in case of major deviations from the work plan that have an impact on the objective of the WP and/or the overall project



WP no.	WP title	Leader and Deputy names	Partner	email
1	Integrated Implementation Framework	Christiaan Vis	VUA	p.d.c.vis@vu.nl
2	Implementation Interventions (tailoring)	Tracy Finch	NCL	tracy.finch@newcastle.ac.uk
3	Evaluation of Implementation Interventions	Josien Schuurmans	GiG	J.Schuurmans@ggzingeest.nl
4	Utilisation platform: Implementation process engine	Jordi Piera	BSA	jpiera@bsa.cat
5	Implementation management and knowledge transfer	Anne Etzelmueller	GET.ON	anneetzelmueller@gmail.com
6	Stakeholder and expert participation	Mette Maria Skjoeth	RSD	Mette. Maria. Skjoeth@rsyd.dk
7	Innovation and dissemination management	Juliane Hug	EAAD	juliane.hug@medizin.uni-leipzig.de
	Project management	Claus D. Pedersen		Claus.Duedal.Pedersen@rsyd.dk
8	and communication	Mette A. Craggs	RSD	mac@rsyd.dk
		Carmen Ceinos		central@ecomit.net
9	Ethics requirements	Josien Schuurmans	RSD/GiG	J.Schuurmans@ggzingeest.nl
		Claus D. Pedersen (reporting to EU)		Claus.Duedal.Pedersen@rsyd.dk

3.4 Steering Committee (SC)

The SC will be the highest decision-making body in the ImpleMentAll project and will hold responsibility for the overall direction of the project. The SC comprises the Coordination Team, WP Leaders, and one representative from each project partner (without WP leadership).



3.5 Advisory Board (AB)

By means of the external Advisory Board (AB), ImpleMentAll will seek regular external advice on relevant issues. The AB will provide expert advice to ensure that the project will develop in accordance to the appropriate legal, ethical and social issues, general philosophy and direction of the project. It will also advise on corrective measures in the content of the work if necessary as well as on the dissemination and exploitation of the projects results. The AB has no formal decision power within the project.

3.6 Contact with the European Commission

All contact with the EC about any matter will be made through the Project Coordinator.



4 COMMUNICATION TOOLS AND PROCEDURES

4.1 ImpleMentAll online repository

All the documents and communications related to the ImpleMentAll project will be accessible through the Dropbox directory created ad hoc.

Dropbox link: https://www.dropbox.com/home/IMA%20repository 🕮 Prueba Dropbox Business 🔎 😃 c Dropbox > IMA Project 🕞 🛅 🔯 📋 Buscar (I) Recientes No compartido Archivos 98 Equipo Última modificación Miembros Paper Entres IMA Documentation IMA Working Area @ Enlaces Actividades Solicitar archivos Archivos eliminados

This space will be used as document repository and will be organised in two main areas:

An IMA Documentation folder that contains:

- Contracts;
- Final official deliverables submitted to the EC;
- Final internal deliverables:
- Meetings (agenda, presentations, minutes);
- Templates for the administrative and financial reporting;
- Templates for documents (deliverables, presentations);
- Contact lists.

All the documents included in this folder are to be downloaded only.



A (free) **working area** organized by WPs, where all the partners working in the project will be able to upload or download whatever they need, and exchange documents for daily work within their corresponding WP.

4.2 Email and distribution lists

Official communications from the Coordination team (e.g. information requests, setting deadlines for preparation of reports, convening meeting, agendas, minutes, etc.) will be sent by email to all participants.

Contact lists, as mentioned above, are available on Dropbox in the folder ImpleMentAll Final Documents \ Mailing lists. Any update must be communicated to the Operational Coordinator.

In addition, specific **mailing groups** for the project have been created using the "googlegroups" facility, to simplify communication among the members of a work package or a team in general, and reduce the number of recipients. The following mailing groups have been created, so far:

<u>IMA list@googlegroups.com</u>: all members of the project are included.

IMA_WPleaders@googlegroups.com: WP leaders

<u>IMA_Keycontact@googlegroups.com</u>: key contact person/s per organization for urgent matters

<u>IMA_communication@googlegroups.com</u>: person/s per organisation in charge of communication issues

<u>IMA admin@googlegroups.com</u>: person/s per organisation in charge of administrative/financial issues

Any other mailing list or group can be created and maintained on request.

4.3 ImpleMentAll website

The ImpleMentAll website will be a living window of the project and will be continuously updated with the latest news. The URL of the website is: http://www.implementall.eu/





Figure 9. ImpleMentAll website home page and partners page

4.4 Virtual Meetings (GoToMeeting)

For virtual meetings, GoToMeeting facilities will be used. Specific instructions will be provided by email to each Participant.

WP status meetings (CT + WP leaders or Deputies) will be held monthly on the

first Tuesday of each month at 15:00 CET. The discussion will be aimed to check the status of the work within each WP and schedule corrective actions and next steps, when necessary. Minutes will be prepared by the Operational Coordinator.

WP internal virtual meetings, coordinated by WP leaders, will be arranged according the needs and availability of the people contributing to each WP. Each WPL will be responsible to arrange this gathering in the most convenient form and establish its frequency and duration.



Figure 10. GoToMeeting virtual facility

4.5 ImpleMentAll meetings

ImpleMentAll meetings will be held, in principle, every six months. A tentative calendar for the first part of the Project is presented in the table below.

This calendar will be updated accordingly during the life of the project.



Meeting type	Hosted by	Date
2nd Project Consortium meeting (CM2)	NCL	5th-6th July 2017
3rd Project Consortium meeting (CM3)	EAAD (to be confirmed)	To be scheduled on the 4th week of November 2017 (from 20th to 24th)
4th Project Consortium meeting (and preparation for annual review?) (CM4)	RSD (to be confirmed)	To be scheduled on the 4th week of May 2018 (from 21th to 25th)
5th Project Consortium meeting (CM5) and Midterm Workshop	BSA (to be confirmed)	To be scheduled on the 4th week of November 2018 (from 19th to 23th)

The Coordination Team (CT) will give notice in writing of a meeting to each partner as soon as possible and at least 21 calendar days preceding an ordinary meeting and seven calendar days preceding an extraordinary meeting.

The CT will send each partner an agenda at least 14 calendar days preceding an ordinary meeting and seven calendar days preceding an extraordinary meeting.

Voting rules and veto rights are detailed in the Consortium Agreement that has been duly agreed and signed by all the partners. The agreement is available in the Dropbox repository.

The CT is responsible for producing written minutes of each Consortium meeting which will be the formal record of all decisions taken. The CT will send the draft minutes to all participants within 21 calendar days of the meeting.

Both, agendas and minutes, will be uploaded into the Dropbox repository together with the signed attendance lists and the shared costs. If requested, the Project Coordinator will provide authenticated duplicates to the partners.



5 QUALITY CONTROL AND ASSURANCE

ImpleMentAll Consortium is responsible to achieve, maintain and continually improve the quality of work and of the results of the project. The measures to ensure the quality of the project is described in the Quality Plan.

The Quality Plan is based on the following Quality Assurance principles:

- Supply methods, standards and procedures adapted to the specific project objectives:
 - Organization of the work,
 - Roles and responsibilities,
 - Time schedules and monitoring
 - Procedures for quality control
 - Risk assessment
- Assist and advise the Consortium in its effort of producing results of highest quality
- Identify and exercise controls enabling a continuous and critical overview on the project progress

5.1 Document templates

For each kind of document- namely deliverables, presentations and reports- the corresponding template can be found in the Dropbox IMA repository, "IMA final documents \Templates".

5.2 Naming conventions and versioning

Document naming and versioning will be uniformly managed to track the versions and history of changes for the various type of documents, such as:

- Deliverables
- Presentations
- Meeting agendas and minutes
- Reports
- Emails, etc.



Specifically, for **deliverables**, document history will be tracked in each deliverable in a separate table describing the different versions of the document and the reasons for changes/updates of it. Regarding file formats, all documents will be produced using Microsoft Office (Word, Excel, etc.) and will have the corresponding extension. Templates for the preparation of deliverables are provided in the Dropbox folder.

Document versioning will be tracked in the title of the file itself.

Below, the procedure for naming the files.

Final version	ImpleMentAll[Deliverable Code] vA [Deliverable Title]
Draft	IMA[Deliverable Code] vA.B_[Partner acronym] [Deliverable Title]

Where:

A: Major version of the deliverable (Submission to Commission)

B: Minor version of the deliverable for updates during the preparation phase

Partner acronym is used when updating a document with comments for the author.

Examples:

Final version: ImpleMentAll D8.1 v1 Project Handbook and Quality Plan

Draft version: IMA D8.1 v1.0 RSD Project Handbook and Quality Plan

In addition, all the *emails* that will be exchanged in relation to the project must include "IMA" at the beginning of the subject and the WP or Deliverable code it refers to, e.g.:

- IMA if the content of the email is of general interest for the consortium
- IMA@WP1if the content is specifically related for instance to WP1
- IMA@WP3 D3.1 request for inputs if the content is related to D3.1.

5.3 Production of deliverables

There are 24 official deliverables planned during ImpleMentAll project life.



Deliverables will be written in English based on provided templates.

All deliverables produced during ImpleMentAll project will be subject to quality control.

As standard practice, a deliverable should be submitted by the WP leader to the CT for quality check three weeks before the official delivery date; that is, the first week of the corresponding month.

5.4 Deliverable Review Process

To guarantee the compliance with quality standards for official deliverables, the quality check procedure will be managed in two steps: first, the Research coordinator will revise the quality of the content. Once approved, the linguistic quality manager will produce the final version.

This is the overall procedure that has been established:

3 weeks before the deliverable deadline: the CT receives the deliverable from the WP Leader. The Research coordinator will take the responsibility to review the document. If a deliverable fails to match the criteria, the Research coordinator sets out the steps to be taken to improve the deliverable's quality.

1 week before the deliverable deadline: The WP Leader submits the revised document to the CT for final approval.

At the deliverable deadline: The Project Coordinator submits it to the EC, via the Project Portal, and informs the Officer.

Internal deliverables will follow the same quality check procedure.



Figure 11. Deliverable Review process



5.5 Risk management

Risk management will be handled at WP level through a procedure encompassing the following steps:

- Risk detection at WP level
- Risk analysis at WP level
- Risk assessment at WP level
- Risk management and monitoring at CT level.

The identified risks will be reported to the CT, that will create a record in the IMA Risk Registry. The Registry includes the identified risk, its description and the strategy to be adopted to mitigate its impact.

The Risk Registry record will include the following information:

- Number
- Description
- Likelihood
- Impact
- Remedial actions/mitigation plan
- Status

The Risk Registry has been initially filled with the internal and external factors that may negatively influence the project, detailed in the Description of the Work. The Registry will be updated, monitored and addressed throughout the project until closed.



6 REPORTING

6.1 Reference documents

The official reference documents that state the rights and obligations of the Consortium are represented by:

The **Grant Agreement (GA)** signed between the EC, the Coordinator (RSD) and the partners. It defines EC grant amount, duration of the project and financing rules. It includes **Annex I: Description of the Action (DoA)** that contains the detailed description of the activities to be carried during the project.

The **Consortium Agreement (CA)** signed by all the partners. It rules internal distribution of funding, project governance, voting mechanisms and IPR management.

Both contracts are available in the Final Document Repository in DropBox.

6.2 Reporting periods to the EC

ImpleMentAll is divided into 3 reporting periods as depicted in the following picture:

- RP1 (M1-M18): from 01/01/2017 to 30/06/2018
- RP2 (M19-M36): from 01/07/2018 to 31/12/2019
- RP3 (M37-M51): from 01/01/2020 to 31/03/2021



6.3 Reports

Besides all the (official) deliverables scheduled in the DoW, the consortium has the contractual obligation to submit to the EC:



- Three Periodic Reports (one for each Reporting Period). Each periodic report includes:
 - A periodic technical report, including a publishable summary, containing information about the progress of work together with information on the resources employed.
 - A periodic financial statement (one for each Beneficiary) and a summary financial report.
- A Final Report (at the end of the project).
 - A final technical report. This comprises a final publishable summary covering results, conclusions and socio-economic impact of the project.
 - A final financial report which contains a final summary financial statement and, if applicable, certificates on the financial statements audit certificates for those beneficiaries requesting a total contribution of EUR 325,000 or more.

Reports must be submitted within 60 days following the end of each reporting period. These reports are linked to the payments from the Commission.

6.4 Information required from partners

For each partner, the CT keeps the name, email and phone details of the person/s on charge of the administrative and financial duties within their organisation.

Even though official reports are submitted to the EC every 18 months, partners should submit their labour reports and costs charged to the project on a six months basis.



In order to make easier the reporting of expenses and effort (hours) dedicated during the life of the project, ad hoc and personalised templates are provided by the CT to each Beneficiary.

In the Dropbox Repository (directory: IMA final documents \ Reporting Tools) each Beneficiary will find a directory containing its own **Reporting Tool**, i.e. excel worksheet where partners are asked to provide information on labour, activities





carried out, and other costs. Only the original reporting tools will be available in Dropbox. Once the reporting tools contain personal data, the exchange of information will be via email. The CT and each partner will keep track of the updated versions.

The objective of the Tool is twofold: on the one side, to facilitate to the partners the production of the official Periodic financial reports. On the other side, the Reporting tool is a managerial instrument to keep track and control of the activities of the consortium; identify deviations, and implement the corrective measures, if necessary.

Each reporting tool contains for each partner the following sheets:

Person 1,2,3,4 etc.: one sheet needs to be filled out for each person involved in the project indicating working hours worked in the month, under the corresponding task and hourly rate.

- Total effort \rightarrow Automatically calculated (except the number of hours corresponding to a man month): this sheets sums up all the hours recorded in the personnel 1,2,3,4 etc. sheets and provides a general picture of the effort reported during the project.
- **Personnel costs** → **Automatically calculated**: this sheet provides a picture of the costs claimed corresponding to the reported hours.
- **Subcontracting costs** → Any cost subcontracted to external suppliers has to be adequately justified, making reference to the DoA and reported in this table.
- Travel costs → this sheet has to be filled in with travel and subsistence expenses incurred by the partner during project meetings and other events.
- Other direct Costs → To be fill with consumables and any other costs that cannot be classified in the previous categories.
- Activity report → Each partner is asked to provide a brief description of the activities performed during the semester.
- Cost budget follow up table > Automatically calculated: it allows partners to monitor how much they are reporting in each period and the deviations from the budgeted amounts both in terms of costs and effort.

Continuous monitoring and reporting





Financial statement→ **Automatically calculated**: the data included in this document have to be uploaded to the Participant Portal.

For those beneficiaries with accounting established in a currency other than the euro, the official exchange rate to be used will be provided by the CT and added to their reporting tools at the end of each reporting period.

The table below shows the calendar of reporting activities.

Year	Month no.	Month	Activity
2017	7	July	Send the reporting tool by 21st July 2017
2018	13	13 January Send the reporting tool by 21st	
20	19	July	Send the reporting tool by 21st July 2018
2019	25	January	Send the reporting tool by 21st January 2019
20	31	July	Send the report tool within the 21st July 2019
2020	37	January	Send the reporting tool by 21st January 2020
20	60 43		Send the reporting tool by 21st July 2020
2021	51	April	Send the reporting tool by 21st April 2021

Important: Every six months each partner has to send to the CT the updated reporting tool by day 21st of the following month (January- June→21st July).

6.5 Recording of daily individual working hours

In the Dropbox repository, partners can also find a template called ImpleMentAll personal timesheet aimed to collect the number of working hours dedicated to the project by WP and task by each person. One timesheet has to be filled in by each person involved. The use of this form is optional, but timesheets should contain the minimum requirements (acronym, grant agreement number, name of the person, type of personnel, number of hours per month and WPs, date and signature of the worker and date and signature of the superior). Partners can use their own internal models (if any), and are not requested to submit them to the CT.



It is the responsibility of each Beneficiary to keep and file the hours worked on ImpleMentAll by collecting personal timesheets that MUST be signed by the worker and his/her supervisor. In case of an audit, personal timesheets are part of the supporting documents that the Beneficiary is obliged to keep for at least five years after the receipt of the last payment of the project. Failure to produce signed timesheets for an audit will result in the hours being disallowed.

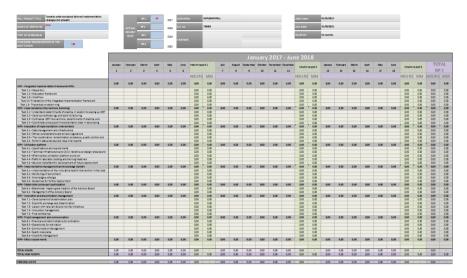


Figure 12. ImpleMentAll reporting tool: Person 1 sheet snapshot

Reporting	TRAVEL DESCRIPTION					
Period	Short description (meeting title, date, city)	Name of travellers/atendees	Associated WP	Foreseen in Annex I Yes/No	Explanations if not foreseen in Annex I	COSTS - €
RP 1	Ex. Kick-off meeting, 18/01/2017, Amsterdam					
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
RP 1						
						0,00
	EXPENSES SUMMARY PER REPORTING PERIOD					
Reporting Period	Total Costs					
RP 1	0,00 €					
RP 2	0,00 €					
RP 3	0,00 €					
TOTAL	0,00 €					

Figure 13. ImpleMentAll reporting tool: Travel costs sheet snapshot



	OTHER DIRECT COSTS									
Reporting Period	Short description	Category (equipment, other goods and services)	Associated WP	Foreseen in Annex I Yes/No	Explanations if not foreseen in Annex I	COSTS - €				
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
RP 1										
						0,00				
Reporting Period	Total Costs									
RP 1	0,00 €									
RP 2	0,00 €									
RP 3	0,00 €									
TOTAL	0,00 €									

Figure 14.ImpleMentAll reporting tool: Other direct costs sheet snapshot

COST AND EFFORT BUDGET FOLLOW TABLE

	TOTAL EC	REPORTED	DIFFERENCE		RF (01/01 ₎ 30/06	/2017 -	RF (01/07) 31/12	/2018 -		P 3 /2020 - /2021)	то	TAL
	BODGE!				EXPENSES	ACCEPTED EC Contribution	EXPENSES	ACCEPTED EC Contribution	EXPENSES	ACCEPTED EC Contribution	TOTAL EXPENSES	ACCEPTED EC Contribution
BUDGET	Euros	Euros	Euros		Euros	Euros	Euros	Euros	Euros	Euros	Euros	Euros
Personnel	10.000,00 €	0,00 €	10.000,00 €		0,00		0,00		0,00		0,00	
Subcontracting	1.000,00 €	0,00 €	1.000,00 €		0,00		0,00		0,00		0,00	
Travel	5.000,00 €	0,00 €	5.000,00 €		0,00		0,00		0,00		0,00	
Other Direct Costs	3.000,00 €	0,00 €	3.000,00 €		0,00		0,00	0.00	0,00	0.00	0,00	
Subtotal direct costs Indirect costs	4,500,00 €	0,00 0	4,500,00 €		0.00	0,00	0.00	0,00	0,00	0.00	0.00	
Adjustments	4.500,00 €	0,00 €	4.300,00 €		0,00	0,00	0,00	0,00	0,00	0,00	0.00	
Total	23.500,00 €	0,00 €	23.500,00 €		0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
	TOTAL EFFORT	REPORTED	DIFFERENCE		RF (01/01, 30/06, EFFORT R	/2017 - /2018)	(01/03) 29/02 EFFORT R	/2015 - /2016)	(01/03 28/02 EFFORT F	/2016 -	TO EFFORT F	
WP	MM %	MM	MM	WP	MM	% from total	MM	% from total	MM	% from total	MM	% from total
WP1	10,00 13%	1	10,00	WP1	0,00	0,0%	0,00	0,0%	0,00		0,00	
WP2	10,00 13%		10,00	WP2	0,00	0,0%	0,00	0,0%	0,00		0,00	
WP3	10,00 13%		10,00	WP3	0,00		0,00	0,0%	0,00		0,00	
WP4	10,00 13%		10,00	WP4	0,00		0,00	0,0%	0,00		0,00	
WP5	10,00 13%		10,00	WP5	0,00		0,00	0,0%	0,00		0,00	
WP6 WP7	10,00 13%	1	10,00	WP6 WP7	0,00		0,00	0,0%	0,00		0,00	
WP7 WP8	10,00 13%	1	10,00	WP8	0,00		0,00	0,0%	0,00		0,00	
WP9	10,00 13%		10,00	WP9	0,00	0,0%	0,00	0,0%	0,00	0,0%	0,00	0,0%
TOTAL	80,00 100%	0,00	80,00	TOTAL	0,00	0,0%	0,00	0,0%	0,00	0,0%	0,00	0,0%
Į	80,00	0,00	80,00	ļ	0,0	00	0,	00	0,	.00	0,	00

Figure 15. ImpleMentAll reporting tool: Budget-Cost follow up snapshot



6.6 Financial flow

The payment schedule is mainly linked to the reporting periods and can be summarised as follows:

- Pre-financing: 53,3% of the requested grant after signing the contract (5% retained by the Commission and transferred to the Guarantee Fund till the end of the project)
- 1st Financial Statement (after the approval of the costs related to the Period 1-RP1).
- 2nd Financial Statement (after the approval of the costs related to the Period 2-RP2).
- 3rd Financial Statement (after the approval of the costs related to the Period 3-RP3).

Amounts to be received will depend on the costs claimed by each partner (after approval by the EC)

Financial Statements are paid once the reports have been submitted and validated by the EC. Nevertheless, according to the rules set by the EC, the total amount composed of pre-financing and the first two payments corresponding to RP1 and RP2 will not exceed 90% of the total requested grant. The remaining 10% will be paid after submission and acceptance of the cost statement related to RP3.

After the signature of the Grant Agreement, each Beneficiary must provide full bank details of its organisation along with a form certifying the validity of the bank account that shall be signed by the representative of the corresponding bank branch.

At any time, the CT will be available to support beneficiaries in the reporting process step by step, providing assistance and advice.



APPENDIX A: Deliverables

A.1 Official Deliverables list

Delivery no.	Deliverable name	Lead beneficiary	Delivery Date
D8.1	Project handbook and Quality Plan	RSD	4
D6.1	Stakeholder analysis and advisory board plan	RSD	6
D3.1	Data management plan	GiG	9
D5.1	Implementation plan	GET.ON	9
D7.1	Dissemination plan	EAAD	9
D8.2	Communication Plan	RSD	9
D1.1	Repository of determinants of practice and implementation interventions	VUA	15
D1.2	Mixed-methods evaluation framework based on MAST	VUA	15
D2.1	Protocol for identification, contextualisation and prioritisation of determinants of practice	NCL	15
D2.2	Protocol for identification and development of implementation activities	NCL	15
D9.1	H-Requirement No. 1	RSD	15
D9.2	POPD-Requirement No. 2	RSD	15
D4.1	Report on specifications and requirements for optimal utilisation of the ItFits-toolkit	BSA	18





D2.3	Final progress report on development of tailored strategies for each implementation site including all actual tailored implementation strategies	NCL	47
D1.3	Integrated Implementation Framework: the ItFits-toolkit	VUA	49
D3.2	Final trial report presenting the final results of the data analysis and accompanying interpretation towards the goals of the project	VUA	49
D4.2	Final version of the ItFits-toolkit utilisation platform	BSA	49
D4.3	Report on the investigation of potential pans for use and sustainability of the ItFits-toolkit	Redmax	49
D5.2	Final implementation and knowledge Exchange report	GET.ON	49
D5.3	Guidelines for further deployment	GET.ON	49
D7.2	Implementation Practice Guidelines for iCBT	EAAD	49
D7.3	Report on liaison activities	RSD	49
D6.2	Report on stakeholder advisory board activities	RSD	51
D7.4	Final report on dissemination activities	EAAD	51



A.2 Official Deliverables list -1st reporting period (M1- M18)

Del. no.	Deliverable name	Lead beneficiary	Delivery Date
	1 st REPORTING PERIOD (01/01/2017	– 30/06/2018)	
D8.1	Project handbook and Quality Plan	RSD	4
D6.1	Stakeholder analysis and advisory board plan	RSD	6
D3.1	Data management plan	GiG	9
D5.1	Implementation plan	GET.ON	9
D7.1	Dissemination plan	EAAD	9
D8.2	Communication Plan	RSD	9
D1.1	Repository of determinants of practice and implementation interventions	VUA	15
D1.2	Mixed-methods evaluation framework based on MAST	VUA	15
D2.1	Protocol for identification, contextualisation and prioritisation of determinants of practice	NCL	15
D2.2	Protocol for identification and development of implementation activities		15
D9.1	H-Requirement No. 1	RSD	15
D9.2	POPD-Requirement No. 2	RSD	15
D4.1	Report on specifications and requirements for optimal utilisation of the ItFits-toolkit	BSA	18



A.3 Official Deliverables list – 2nd reporting period (M19-M36)

Del. no.	Deliverable name	Lead beneficiary	Delivery Date				
2nd REPORTING PERIOD (01/07/2018 – 31/12/2019)							

A.4 Official Deliverables list 3rd reporting period (M36-M51)

Delivery. no.	Deliverable name	Lead beneficiary	Delivery Date
	3 rd REPORTING PERIOD (01/01/2020 – 31/0	03/2021)	
D2.3	Final progress report on development of tailored strategies for each implementation site including all actual tailored implementation strategies	NCL	47
D1.3	Integrated Implementation Framework: the ItFits-toolkit	VUA	49
D3.2	Final trial report presenting the final results of the data analysis and accompanying interpretation towards the goals of the project	VUA	49
D4.2	Final version of the ItFits-toolkit utilisation platform	BSA	49
D4.3	Report on the investigation of potential pans for use and sustainability of the ItFits-toolkit	Redmax	49
D5.2	Final implementation and knowledge Exchange report	GET.ON	49
D5.3	Guidelines for further deployment	GET.ON	49
D7.2	Implementation Practice Guidelines for iCBT	EAAD	49
D7.3	Report on liaison activities	RSD	49
D6.2	Report on stakeholder advisory board activities	RSD	51
D7.4	Final report on dissemination activities	EAAD	51



A.5 Internal Deliverables

Delivery no.	Internal Deliverable name	Lead beneficiary	Delivery Date
ID5.4	Knowledge exchange plan	FONDAMENTAL	9
ID4.1	Utilisation materials that enable actual use of the ItFits-toolkit	ANU	15
ID4.4	ItFits-toolkit UI/UX Guidelines and Artefacts	BSA	18
ID2.4	Intermediate progress report on development of tailored strategies for each implementation site including the actual tailored implementation strategies developed so far	NCL	27
ID3.3	Intermediate trial report	VUA	30
ID5.5	Intermediate implementation and knowledge exchange report	GET.ON	36



APPENDIX B: Contact list of key persons for ImpleMentAll

N°	Country	Short Name	Name	Family name	email
1	DK	RSD	Claus D. Mette A.	Pedersen Craggs	Claus.Duedal.Pedersen@rsyd.dk mac@rsyd.dk
2	NL	VUA	Christiaan	Vis	p.d.c.vis@vu.nl
3	Australia	ANU	Philip	Batterham	philip.batterham@anu.edu.au
4	UK	NCL	Tracy Debra	Finch Mudditt	tracy.finch@newcastle.ac.uk Debra.Mudditt@newcastle.ac.uk
5	NL	GiG	Josien	Schuurmans	j.schuurmans@ggzingeest.nl
6	Spain	BSA	Valentina	Tageo	vtageo@bsa.cat
7	France	FondaMental	Marion	Leboyer	marion.leboyer@inserm.fr
8	Germany	SCHON		(T	erminated)
9	Italy	ASLTO3	Ylenia	Sacco	saccoyl@gmail.com ysacco@aslto3.piemonte.it
10	Netherlands	UMCG	Judith	Rosmalen	j.g.m.rosmalen@umcg.nl
11	UK	LSHTM	Arlinda	Cerga Pashoja	Arlinda.Cerga-ashoja@lshtm.ac.uk arlindacerga@gmail.com
12	Germany	EAAD	Juliane Elisabeth	Hug Kohls	juliane.hug@medizin.uni-leipzig.de Elisabeth.Kohls@medizin.uni- leipzig.de
13	Kosovo	MHCPriz	Naim	Fanaj	naimfanaj@gmail.com
14	Albania	CMHTir	Gentiana	Qirjako	gentaqirjako@gmail.com
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