



GENERAL ASSEMBLY MEETING REPORT

9 & 10 February 2021



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Dissemination level		
PU	Public	×
CO	Confidential, restricted under conditions set out in Model Grant Agreement	
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1 Introduction

On 9 and 10 February 2022, the IMMUNION Project ("Improving IMMunisation cooperation in the European UNION") held its first General Assembly, online. This report summarises the discussions. It is intended for circulation amongst the project partners, Scientific Advisory Board (SAB), and representatives from the European Commission and Health and Digital Executive Agency (HaDEA).

The slides from the meeting will be shared alongside this report. They are also available for project partners on the IMMUNION Microsoft Teams space (File: WP1, M1.1 Kick-off Meeting & two General Assemblies).

1.1 Meeting objectives

- To provide an overview of the state of play of the IMMUNION project at the mid-way point, reviewing project progress.
- To look ahead towards the second year of the IMMUNION project, gathering input on upcoming deliverables and milestones for each Work Package and determining future work.
- To discuss and gather feedback from all attendees about the project as a whole to ensure satisfactory and timely progress and resolve any problems if needed.

1.2 Meeting participants

- **Chair:** EuroHealthNet (Project Coordinator)
- Consortium partners
- IMMUNION Scientific Advisory Board (SAB)
- HaDEA project officers and DG SANTE policy officers

In total, 48 participants joined the General Assembly, including 11 SAB members. Participants are listed in full in the Annex.

The **abbreviations used for project partners** in this report are as follows:

- EuroHealthNet (EHNet)
- Standing Committee of European Doctors (CPME)
- Pharmaceutical Group of the European Union (PGEU)
- European Federation of Nursing Associations (EFN)
- University of Antwerp (UANTWERPEN)
- Europa Media (EM)
- EURACTIV Poland (EURACTIV Poland)
- Italian National Institute of Health (ISS)
- Romanian National Institute of Public Health (INSP)
- Latvian Centre for Disease Prevention and Control (CDPC)
- The Institute of Preventive Medicine, Environmental and Occupational Health (PROLEPSIS), Greece
- Vienna Vaccine Safety Initiative (ViVI)



1.3 Meeting agenda

9 February, 10:00 – 12:30

Timing	Item	Leads
10.00 – 10.30	Welcome and Project Overview	EuroHealthNet
10.30 – 10.50	The European Commission's work on vaccination	Martine Ingvorsen, Policy Officer, DG SANTE
10.50 – 11.25	WP2 (Communication & Dissemination)	Europa Media
11.25 – 11.30	BREAK	
11.30 – 12.00	WP5 (Training & Education)	University of Antwerp
12.00 – 12.25	WP3 (Evaluation)	Romanian National Institute of Public Health
12.25 – 12.30	Closing	EuroHealthNet

10 February, 10:00 – 12:30

Timing	Item	Leads
10.00 – 10.30	Welcome and overview of cross-project collaboration	EuroHealthNet
10.30 – 11.00	WP4 (Strengthening the Coalition for Vaccination)	CPME, EFN, PGEU
11.00 – 11.30	WP6 (National toolboxes to increase vaccine uptake)	ISS
11.30 – 11.40	BREAK	
11.40 – 12.20	WP1: Project reporting	EuroHealthNet
12.20 – 12.30	Closing	EuroHealthNet



2 Welcome and Project overview

Alison Maassen (EuroHealthNet) opened and chaired the meeting. She welcomed partners, and thanked them for their work over the course of the past year. Despite the fact that the consortium has never been able to meet face-to-face, we have managed to develop effective ways of working – we are looking forward to meeting in person next year though!

Caroline Costongs (EuroHealthNet) provided welcoming remarks, highlighting the continued **importance of and challenges related to vaccine uptake across the EU**, in particular related to accessibility and acceptability. She drew attention to the fact that at its heart, the IMMUNION project is about collaboration, and about bringing together stakeholders from different perspectives and with different areas of expertise, as well as across different countries. This collaboration is crucial to delivering on the objectives of the project as well as the European Commission's objective to increase vaccine uptake.

Alba Godfrey (EuroHealthNet) took the floor to provide an **overview of project activities**, looking back to what partners have achieved, as well as ahead at what is still to come. She highlighted that the first year of the project has been a foundation year, in which partners have focused on communication channels and outputs, and laying the groundwork in terms of the research and stakeholder consultation and collaboration. In the second year of the project, partners will build on this work to develop tools, trainings, resources, and further communication and advocacy material.

Alba provided an overview of the achievements and outlook of each WP, highlighting that **all project deliverables and milestones up to this point have been achieved**, and that work on many upcoming deliverables is already underway. She also set out how the project outcomes and activities tie in with the project indicators, which are the guides for how we concretely measure our success and our impact. Overall, IMMUNION is well on track to achieve or exceed the targets set by all project indicators. More detailed information can be found in the accompanying slides.

3 The European Commission's work on vaccination

Martine Ingvorsen (DG SANTE, European Commission) provided an overview of the European Commission's work on vaccination. She highlighted that despite the continued challenges of the COVID-19 pandemic, including the Omicron variant, we are fortunately not in the same situation as we were a year ago. Europe is now among the world leaders in terms of vaccination coverage, with 80% of the EU adult population fully vaccinated. Even in the context of variants, vaccination continues to play a hugely important role in our approach to the pandemic, and it is key that all efforts are made to increase vaccine uptake – nobody is safe until everyone is safe.

Martine highlighted that the Commission continues to work on COVID-19 vaccination, focusing in particular on:

- **Continuing to work with Member States to increase coverage rates**, in particular in countries with lower vaccine uptake. This includes working to address vaccine hesitancy,



and to fight against mis- and disinformation. The Commission is also investing in data visualisation as a powerful communication tool.

- **Continuing to work with health professionals**, given their role as trusted sources of information on vaccination – this is where collaboration with IMMUNION and the Coalition is important. The Coalition has recently helped the Commission work directly with health professionals in Member States with lower rates of vaccination. The Commission sees value in the Coalition, which is why they continue to invest in the initiative, including by means of the IMMUNION project, which was set up to strengthen the Coalition.

The Commission's work on vaccination is not restricted to COVID-19. Its activities on vaccination more generally, which aim to support Member States to achieve or maintain high vaccination rates through a life-course perspective, continue to be structured by the [Council Recommendation on strengthened cooperation against vaccine-preventable diseases \(2018\)](#). This is complemented by the work of the European Joint Action on Vaccination (EU-JAV), which will come to an end by spring 2022.

The [EU4Health](#) (2021-2027) programme will structure the Commission's activities for the coming years. It includes an [EU Immunisation initiative](#), which focuses on physical, practical and administrative obstacles to vaccination, supporting Member States in delivering national vaccination programmes and strengthening their decision-making on vaccination plans, and on myths and misinformation. The Commission has published the first [call for tenders](#) related to this activity, which focuses on identifying obstacles to vaccination and developing recommendations. The deadline to apply is 4 March 2022.

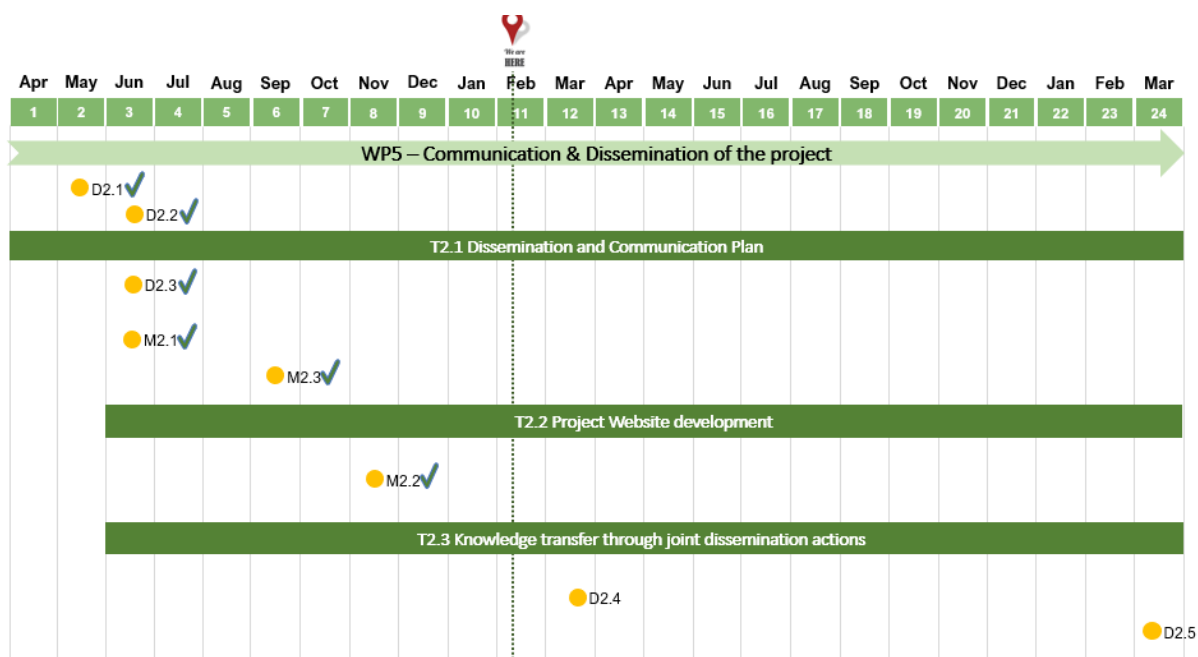
Vaccination is a pre-requisite for strong and resilient health systems. Going forwards, it is crucial that all initiatives complement each other, working towards the same goal of increasing vaccine uptake in the EU.

Discussion:

- Valentina Possenti (ISS) was pleased to note that the three elements of the tender (physical, practical and administrative obstacles to vaccination) align well with the hesitancy factors analysed under IMMUNION's WP6 (which are individual, contextual and vaccine-specific). Valentina also mentioned the continued importance of routine immunisation.

4 WP2 (Communication and Dissemination)

Carolina Pascaru & Gabriella Lovasz, Europa Media (EM), provided an overview of IMMUNION's communication and dissemination activities, which have been carried out in close collaboration with the Coalition for Vaccination co-chairs, as well as with EURACTIV Poland and EuroHealthNet. All deliverables and milestones that were due have been submitted and approved, and the work on the upcoming deliverable (D2.4, a video to promote the website) has begun.



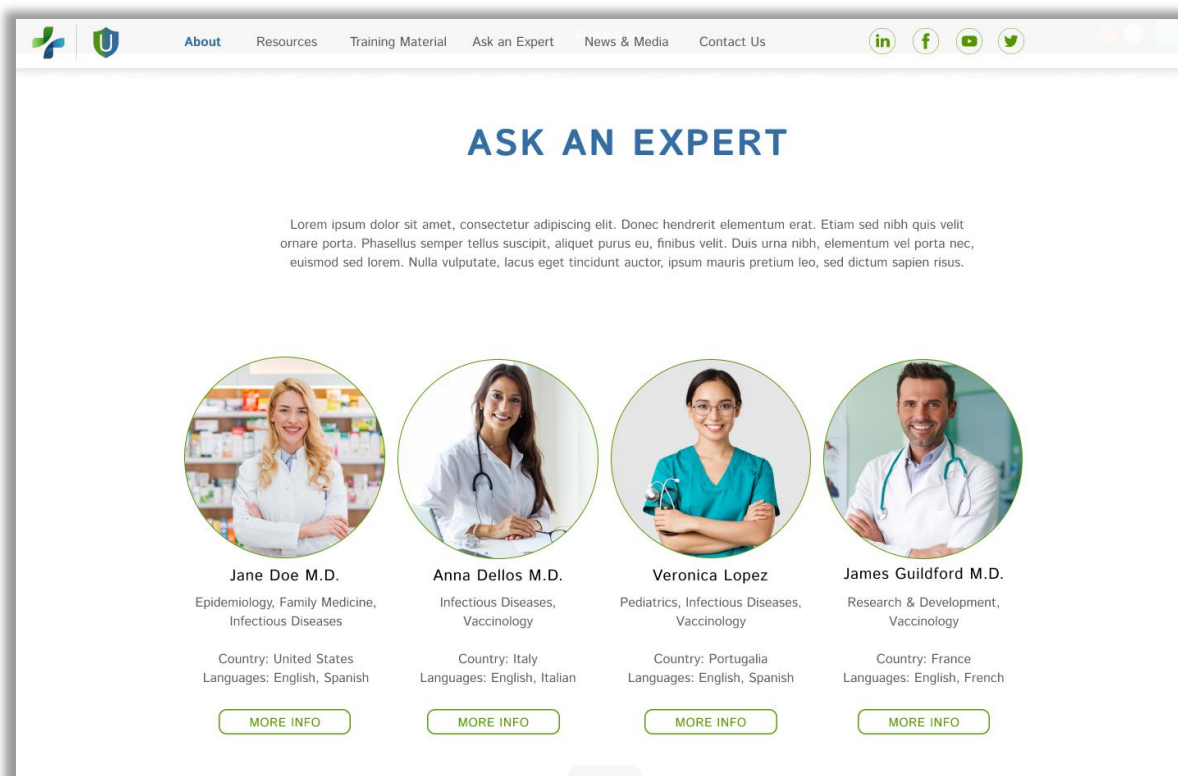
Carolina shared **highlights of the communication and dissemination activities**, which include a visual identity for IMMUNION and the Coalition for Vaccination, a project leaflet (translated into Romanian, and soon into Italian and Greek), a project website (<https://coalitionforvaccination.com/>), social media and newsletter. Europa Media welcomes articles from partners and the SAB to feature in the newsletter, and encouraged partners to get in touch. The next newsletter is planned for March 2022.

Carolina thanked project partners for sharing news about IMMUNION on their organisational websites, and reminded all partners and the Scientific Advisory Board (SAB) that communication is a joint responsibility. It would be great to reach a larger number of followers on our social media accounts in the coming year, and all partners are invited to share/follow/re-tweet:

- **Twitter:** @CoalitionForVax <https://twitter.com/coalitionforvax?lang=en>
- **LinkedIn:** Coalition for Vaccination
<https://www.linkedin.com/company/coalitionforvax/>
- **Facebook:** @CoalitionForVax <https://www.facebook.com/CoalitionForVax>

The priorities for WP2 going forward are:

- The two remaining deliverables: the video to promote the website and a final project booklet.
- Update of the Communication & Dissemination plan by M18 of the project.
- Continued website development, including of the **Ask An Expert page**. We have received 17 applications so far, and are currently reviewing them. Carolina shared a mock-up of what the page will look like (included below). All partners and SAB are invited to continue sharing the [Ask An Expert application form](#) to relevant colleagues and contacts.



Carolina invited all partners and the SAB to consider how to improve our social media outreach and engagement, and how to promote the Ask An Expert process.

Discussion:

Two key topics were discussed by partners: the development of the SEKI platform, and the need to take into account cultural contexts for IMMUNION work. More details on both are provided below.

- **SEKI page:**

- Jan de Belie (PGEU) enquired about the progress of the SEKI platform. This is very important for the Coalition for Vaccination, and one of the added values of IMMUNION.
- Barbara Rath (ViVI), who is leading the SEKI platform development, answered that they are continuing to work on the page, notably to plan the software and content management system. They will produce a short video to showcase the main elements of the SEKI platform, which can be shared on social media. More work is planned to build a database of approved training resources, and ViVI has begun to reach out to stakeholders such as the ECDC and others on this issue. Barbara mentioned it would be nice to cross-reference the SEKI platform on the websites of IMMUNION partners, as well as to cross-reference more on social media (including by linking with the ImmuHubs project, that ViVI is leading). They are also looking into innovative ways of developing training content, such as through podcasts and short videos, and analysing gaps in training that will need to be addressed by providing materials for health professionals.

- **Cultural contexts:**

- Harry-Sam Selikowitz (Council of European Dentists, SAB member) highlighted that Europe is made up very different cultural contexts, and asked whether this is being considered in IMMUNION outputs. For instance, he enquired whether

IMMUNION is analysing differences between and within countries concerning factors for vaccine hesitancy and uptake.

- Greet Hendrickx (UANTWERPEN) highlighted that the Ask An Expert feature would be a useful tool for this purpose, since the experts will come from across Europe, and they can answer questions in culturally and context sensitive ways. She also pointed to ECDC work in this field.
- Alba Godfrey (EuroHealthNet) answered that IMMUNION communication and dissemination as carried out by WP2 is generally aimed at an EU-wide audience. However, other activities within the project (such as the WP5 trainings and the WP6 research on vaccine hesitancy) do take cultural contexts into account, focusing on the four countries in which the project operates: Italy, Greece, Latvia and Romania.
- Paola De Castro (ISS) pointed out that adapting communications and materials to different cultural contexts isn't a simple matter of translation – what works in terms of content in one country won't work in another. Similarly, the issue of equity cannot be solved through one tool – both are complex matters that require complex solutions, and IMMUNION is making progress towards this by bringing together different pieces of the puzzle.

5 WP5 (Education & Training)

Greet Hendrickx (University of Antwerp) presented on the progress of WP5 activities. The first Milestone, the reviewed curriculum on vaccinology, was successfully submitted in M6. Based on this, UANTWERPEN is working towards its deliverables for 2022: the training-of-trainers sessions (one general and three country-specific), and the three workshops on vaccinology.

In terms of the **general session of the train-the-trainers**, Greet proposed the date of 21st June 2022 (13h-16h). The meeting will be held online, in English. It will be recorded and uploaded on the Coalition website/SEKI platform. All partners and SAB members are asked to let Greet know if this date is unsuitable for some reason (e.g., it conflicts with another meeting). The target audience are trainers of HCPs that are involved in teaching (future) HCPs about vaccination. The University of Antwerp will provide materials for all IMMUNION partners to disseminate the opportunity amongst their network, with a particular focus on partners from Latvia, Greece and Romania.

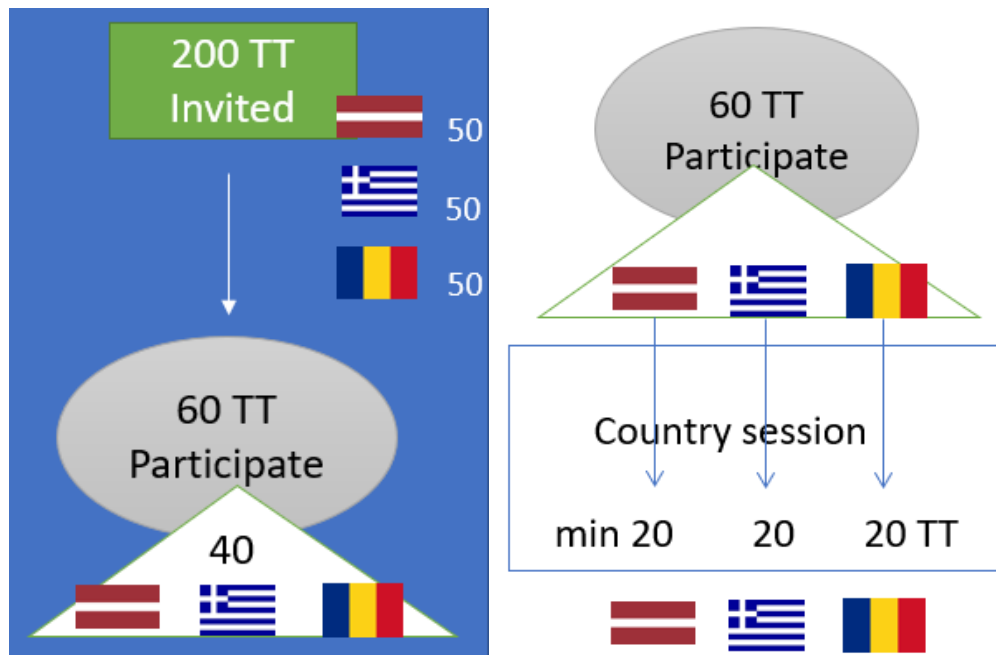
In terms of the **country-specific sessions**, they will be held in Greek, Latvian and Romanian, in the autumn of 2022. The target audience are also trainers of HCPs. The target audience differs in that regard that we are looking for a more local selection of trainers. The speakers for the tailored country session will be selected from the list of participants in the general session.

According to the grant agreement, the numbers and nationalities of participants for these sessions are summarised below:

- At least **200 professionals** (including **50 each in Greece, Latvia and Romania**) are contacted to take part in training-of-trainer activities
- At least **60 participants** take part in the General session of train-the trainers (including **40 from Greece, Latvia and Romania**)



- At least **20 participants take part per country** (Greece, Latvia and Romania) for country-specific sessions



Finally, in terms of the **vaccination communication sessions at international events**, the University of Antwerp and the co-chairs are working with three Coalition partners to organise these sessions:

- The Standing Committee of European Doctors (CPME) – session fixed on 25th March 2022
- The European Pharmaceutical Students' Association (EPSA) – timing tbc
- The Council of European Dentists (CED) – timing tbc

The target audience for the sessions are in-service or future healthcare providers that may have an interest in vaccination (any aspect thereof), and who would like to improve their communication skills and confidence in communicating about vaccines (all vaccines, not limited to COVID-19 vaccines). Details about the organisation of the event (e.g., the agenda, the timing, online/hybrid) will be discussed and co-created with the three organisations, so that the sessions are tailored-made for their needs.

Discussion:

Partners and SAB members raised important points during the discussion, related to the following:

- **Long-term sustainability:**
 - o Chloe Lebbos (European Pharmaceutical Students' Association, SAB member) wondered whether the University of Antwerp has contacted European associations of faculties (such as dental, nursing, doctors, pharmaceutical), in order for trainers to be able to create trainings based on Antwerp's curriculum within their universities. This could help to ensure a more stable framework in the long-term and more participants from the student perspective.
 - o Greet replied that they have not been in touch yet, but it would be appreciated if the student organisations on IMMUNION's SAB can put Antwerp in touch with

trainers – Antwerp will provide more information in order to allow the student organisations to share.

- **Feasibility of targets for trainers:** Dina Zota (PROLEPSIS) let Greet know that they will consider the target for trainers from Greece, and let Antwerp know whether they are feasible.
- **Links between WP5 and WP6:**
 - Paola de Castro (ISS) commented that there were many connections between WP5 and WP6 activities. Once the WP6 toolboxes are available online, WP5 can develop a critical appraisal of what is already available. Paola also mentioned that there is a lack of such training in medical schools in Italy, and that it would be good to link the recordings of the training sessions with distance learning courses.
 - Greet replied that the curriculum as a whole comprises 8 modules – the idea is that it would all be made publicly available, and that all trainers can develop their own training based on what suits their needs. Aurelie from the University of Antwerp's team has been invited to join WP6 discussions so that she can be a bridge between the WPs.
- **Disseminating training invitations:** Caroline Costongs (EuroHealthNet) mentioned that EuroHealthNet is happy to support the dissemination of the general training of trainers session to EuroHealthNet members, who are public health institutes. We could also share it with EU-JAV members, which will help us to target ministries of health.
- **Adapting the curriculum:**
 - Ruth Bell (University College London, SAB member) mentioned that the curriculum looks very comprehensive. She wondered whether there is a mechanism through which it would be possible to integrate feedback from participants into country tools and trainings.
 - Greet replied that this was a good idea, and that they will try to adapt the curriculum according to comments from countries. There will be an evaluation moment at the end of the WP, to see how we can develop the training.
 - Pierre Van Damme (University of Antwerp) added that they have a permanent evaluation system in courses they have done in the past, and that it is a good idea to use evaluate this training as well, taking input from those who have been trained to further improve and tailor the training, bearing in mind that communication is often region-specific and that there won't always be a solution that will fit all countries.

6 WP3 (Evaluation)

Camelia Claici (Romanian National Institute of Public Health, INSP) updated partners on the work carried out in IMMUNION's evaluation WP, which is progressing according to the work programme. The Evaluation Plan and the first internal evaluation report have both been submitted. In 2022 and 2023, INSP will lead WP leads through two further internal evaluations. INSP will also coordinate the process of two external evaluations (one carried out by the Scientific Advisory Board, and one by an external evaluator).



Camelia invited all participants of the General Assembly to fill in the **participant satisfaction questionnaire** (available [here](#), and also shared with participants after the meeting).

Discussion:

Several topics were raised during the discussion:

- **Process of the mid-term external evaluation:** INSP, EuroHealthNet and SAB members agreed that each SAB member would fill in the evaluation form previously shared by INSP. IMMUNION partners will then compile the feedback from all SAB members, providing the SAB the opportunity to review prior to submitting to the European Commission.
- **Evaluation process:**
 - Harry-Sam Selikowitz (Council of European Dentists, SAB member) highlighted the need to evaluate both the process and outcome of the project.
 - Caroline Costongs (EuroHealthNet) also stressed that it is important to evaluate the project impacts.
 - Alba Godfrey (EuroHealthNet) pointed out that the internal evaluations are focused more on our internal processes and achievements, but that the final external evaluation will look closely at project impacts.
 - Alison Maassen (EuroHealthNet) invited all SAB members to share any additional feedback, including about the project's impact, during the mid-term evaluation process.

7 Cross-project collaboration

Alison Maassen (Programme Manager, EuroHealthNet) opened the second day of the General Assembly by presenting on the links IMMUNION has established with other EU projects and initiatives on vaccines and vaccination. She highlighted that collaboration and cooperation is at the heart of the IMMUNION project's objectives and added value.

Since the beginning, IMMUNION reached out to other initiatives **to establish links and exchange on how to amplify each other's results and ensure not to duplicate work**. We have held both bilateral and group discussions with project coordinators and key partners. It is also noteworthy that many IMMUNION partners are involved in other projects, either as partners or coordinators. The key projects are highlighted below.

Amongst the key activities that this network of vaccination projects has carried out is an excel bringing together major outputs that are relevant to other projects.

EXISTING COLLABORATIONS

HORIZON 2020



HEALTH PROGRAMME



OTHERS



In terms of next steps, the projects decided to set up **working groups on different topics**, which will autonomously take forwards issues that are relevant to their aims. As a first step, each working group will meet and decide on a mission statement as well as a chair, and ways of working.

Participation in working groups is entirely optional – if IMMUNION partners think that joining a group would benefit their work, they are welcome to do so, but if they are unable to engage due to capacity constraints, that is also understandable. In any case, IMMUNION partners active in the various groups will share relevant information with the consortium.

A summary of the working groups and current project partners who have expressed interest in joining them is provided below.

SETTING UP WORKING GROUPS

Leadership

IMMUNION representative:
EuroHealthNet & ISS

Communication & engagement

IMMUNION representative:
EuroHealthNet, EURACTIV Poland & University of Antwerp

Training

IMMUNION representative:
University of Antwerp, EFN, EURACTIV Poland, ViVi

Policy

IMMUNION representative: EFN

Dissemination of research

IMMUNION representative: EFN

Project manager

IMMUNION representative:
EuroHealthNet

National pods

Process not yet defined



Discussion:

The discussion focused on two main points:

- **Sustainability of initiative:**
 - Greet Hendrickx (University of Antwerp) wondered how much the Commission/HaDEA is involved in this work, and whether the EC can take this network of projects into account in their advice to other/upcoming vaccine project (e.g., specifying that projects need to establish links with this network), or in new tenders. Greet highlighted that it would be nice if this network could be made into a robust structure that can be used in future tenders and projects, and that continues to be active even after IMMUNION ends.
 - Jurgita Kaminskaite (Project Officer, HaDEA) replied that EC-funded projects are always invited to connect with ongoing actions. Her unit and the unit responsible for tenders have a close collaboration. In addition, every project and Joint Action needs to consider how to ensure continuity after the project ends. As IMMUNION only has one year left, Jurgita invited partners to start thinking about this, and how to avoid being dependent on EU co-funding.
 - Alison Maassen (EuroHealthNet) added that the sustainability of IMMUNION is that it is linked to the Coalition for Vaccination. It would be great if this level of cooperation continues even after the end of the project.
- **Ways of working:**
 - Harry-Sam Selikowitz (Council of European Dentists, SAB member) asked whether it would be possible for the SAB to be involved in this initiative. Alison Maassen replied that SAB members are very welcome. EuroHealthNet will follow up with Harry-Sam on this point.
 - Alba Godfrey (EuroHealthNet) suggested that an efficient way to share information without overloading partners would be to set up a channel on our internal Teams in which the IMMUNION partners active in the different groups can post relevant information and minutes of meetings, for all partners to be aware of.
 - Paola de Castro (ISS) and Greet Hendrickx (Antwerp) both mentioned that depending on the evolution of the project and the working groups, they may want to join different groups – they and all partners who wish to do so are very welcome.

8 WP4 (Strengthening the Coalition for Vaccination)

Markus Kujawa (Standing Committee of European Doctors, CPME) presented on achieved and upcoming WP4 activities. Alongside a close collaboration with WP2 on all communication and dissemination materials, the main achievement for WP4 was the **survey of health professionals** regarding their training needs, which ran in June 2021 and received input from 3,300 healthcare professionals from across Europe, with a focus on Romania and Greece (IMMUNION country partners). Some of the key findings of the survey are that:

- There is a need for additional vaccination training for many healthcare professionals in Europe



- The majority of healthcare professionals are willing to follow extra courses on vaccination, preferably in an online format
- Healthcare professionals use various sources to look for information on vaccines, provided e.g., by healthcare professional organisations.

The results of this survey feed into IMMUNION activities and objectives. **Key learnings points** are that:

- The new Coalition for Vaccination website will provide invaluable support, as it will serve as a Coalition homepage and a gateway to training materials.
- The Coalition website/SEKI platform should provide educational materials such as explanatory videos, fact sheets, short articles, scientific publications, frequently asked questions (FAQ) pages, webinars, and recorded lectures.
- Materials should address questions related to vaccine safety, adverse events and the side effects of vaccines, as well as their effectiveness and working mechanisms.
- Materials should generally take a positive approach and highlight the benefits and effectiveness of vaccines.

Looking ahead, in 2022 and 2023 WP4 will focus on developing a video for the Coalition for Vaccination as well as a Coalition for Vaccination conference, in February 2023. It will continue to collaborate with WP2 on communication activities. Given that the co-chairs will manage the website after the project ends, it is important that they learn how to do so already. WP4 will also collaborate with WP5 regarding the vaccinology sessions at international events.

Discussion:

Jan de Belie (Pharmaceutical Group of the European Union, PGEU) led the discussion with participants and the SAB. He was keen to gather their input on possible topics for future communication activities, suggestions on how to achieve wide and effective dissemination of training materials to health professionals, and areas of improvement to strengthen the links between IMMUNION and the Coalition for Vaccination. The main areas of discussion are included below:

- **Strengthening links with EUPHA**
 - o Roberto Croci and Valentina Possenti (ISS) mentioned that EUPHA could help to amplify IMMUNION's results. Paola de Castro (ISS) suggested that IMMUNION partners could develop a workshop or present a poster at the November European Public Health Conference (organised by EUPHA) to maximise dissemination.
 - o Jan indicated that EUPHA was indeed already an associate member of the Coalition, and that it's key to include a wide range of organisations in outreach activities to reach a wide range of professionals. All associate members of the Coalition will be invited to the final conference in February 2023.
- **Survey results**
 - o Ruth Bell (University College London, SAB member) mentioned that the results of the survey were very interesting, and asked whether IMMUNION partners have analysed cross-country differences, as this might help to tailor trainings for these countries (e.g., in Greece and Romania).
 - o Jan replied that there was a high level of coherence in the responses between countries and professions, but that indeed analysing country differences would be valuable. For instance, professionals in some countries are willing to consider

training materials in English, whereas others prefer them in their national language.

- **Links with the Coalition for Vaccination**

- Alison Maassen (EuroHealthNet) wondered whether a Coalition meeting had been planned for this year yet, offering IMMUNION support for the meeting. Perhaps routine immunisation or immunisation across the life-course could be good topics for the meeting.
- Jurgita Kaminskaite (HaDEA) offered to forward this question to colleagues at DG SANTE.
- Jan mentioned that the co-chairs are planning to organise a spring meeting of the Coalition, and they will also consider a specific campaign around European Immunisation Week in April, in liaison with the WHO.
- Markus Kujawa (CPME) also highlighted that the Coalition is currently working with DG SANTE and ECDC to organise national-level webinars for health care professionals in countries with low-vaccine uptake. Alison indicated IMMUNION is happy to support this work as well as needed.

9 WP6 (National toolboxes to increase vaccine uptake)

Paola de Castro (Italian National Institute of Health) provided an overview of IMMUNION WP6 activities. All four national partners (ISS, INSP, CDPC and PROLEPSIS) have been very active in this WP. The first milestone, the **reference grid to investigate vaccine hesitancy factors** in each country, was finalised by the end of M6.

The grid focuses on three main factors: **contextual, individual and vaccine-specific influences**. It helps to understand the major determinants of vaccine hesitancy in each country, as well as which vaccines they apply to, and country-specific issues that need to be considered. Two of the main outcomes of the exercise are that there is a lack of validated scales to assess knowledge, attitudes and practices towards vaccines/vaccination, as well as a lack of objective methods to assess coverage. There is also a lack of validated or standardised instruments to assess vaccine hesitancy. The peer-reviewed articles displayed substantial heterogeneity in the results of the analysis, although the grey literature results were more homogeneous.

Based on the findings of the reference grid, each country is now developing **toolboxes of identified vaccination communication and community engagement tools**. Currently, the four partners are selecting national tools to include in the toolboxes. ISS is also analysing tools from international organisations. As a next step, the collected tools will be analysed and linked with the results of the grid, to understand if they meet existing needs, and to evaluate their appropriateness. A final selection will then be compiled and made available online. Already, national partners have collected 147 tools (across the four countries), and ISS has compiled 20 tools prepared by international organisations.

Once this deliverable is achieved, WP6 partners will discuss the tools in **national stakeholder roundtables**. Initial ideas of who to invite include health authorities and policymakers, health

professionals, scientific societies and academics, and citizens. The roundtables will notably co-select a tool to pilot.

Discussion:

The WP6 discussion focused on:

- **National roundtables:**
 - Pierre van Damme (UANTWERPEN) commented that over the years, we have seen that regional stakeholders are equally if not more important than the national ones in some countries, as they are very close to the public and the target groups and decisions are often taken in terms of immunization at sub-national level. How can we address this in the national stakeholder roundtables?
 - Paola replied that each country will know their own scenario and be able to best identify who to invite to the roundtable. The selection of stakeholders will be very important and quite complex. It will also be important to consider the sub-groups/minority groups that are present in each country, with specific attention to the more vulnerable groups.
- **Target for national toolboxes:**
 - Nikole Papaevgeniou (PROLEPSIS) wondered if there was a specific target concerning the number of tools to include in the toolboxes.
 - Paola replied that the main aim is to have good tools. It would be good to have minimum 20 if possible (according to project indicators, we need a minimum of 15 for each country).
- **Vulnerable groups:**
 - Harry-Sam Selikowitz (Council of European Dentists, SAB member) highlighted that we need to carefully consider who are the vulnerable groups – people who are socially disadvantaged are an important group to consider, alongside other groups such as refugees.
 - Paola highlighted the concept of proportionate universalism – we need to think of the most vulnerable, and maintain a proportion with those who are better off. Adopting an equitable approach is very important.

10 WP1 (Project Reporting)

Alba Godfrey (EuroHealthNet) provided an overview of the reporting process for IMMUNION, starting with the timeline. IMMUNION is structured by **two official reporting periods**, each running for 12 months. The technical and financial reports to the European Commission are due 60 days after the end of each reporting period (in May 2022 and May 2023). Our internal evaluations run along a similar timeline, and they contribute to developing the official technical report. An overview of the timeline is provided below.





Alba then updated partners regarding the **technical report**, which needs to include:

- (i) an **explanation of the work** carried out by the beneficiaries;
- (ii) an **overview of the progress** towards the objectives of the action, including milestones and deliverables;
- (iii) a **summary for publication** by the Agency;
- (iv) the **answers to the 'questionnaire'**: covering issues related to the action implementation and its impact

In terms of the process, EuroHealthNet will compile the explanation of work and overview of progress, using the information provided by each WP lead for the internal evaluations. Each WP lead will be asked to review and complete the technical report as necessary, and all partners will be given the opportunity for input and feedback. EuroHealthNet will draw on this main report to prepare the summary for publication, and will work with EM to provide answers to the questionnaire on impact.

All partners are kindly reminded to **regularly update our communication and dissemination tracker**, as this is critical to enable accurate impact on reporting. It is available on the internal Teams, [here](#).

David Hargitt (EuroHealthNet) then updated partners regarding the financial reporting, which will cover the following costs:

- **Personnel costs**
 - o All inclusive
 - o Per WP
- **Other direct costs**
 - o Travel (incl. Hotel & subsistence)
 - o Equipment
 - o Other goods and services
- **Subcontracting**

An example form is included below:

FINANCIAL STATEMENT FOR /BENEFICIARY [name]/AFFILIATED ENTITY [name] FOR REPORTING PERIOD [reporting period]

FINANCIAL STATEMENT FOR [beneficiary] [name]/AFFILIATED ENTITY [name] FOR REPORTING PERIOD [reporting period]											
Cost form ⁵	Eligible ¹ costs (per budget category)					Receipts			EU contribution		
	A. Direct personnel costs	B. Direct costs of subcontracting	C. Other direct costs	D. Indirect costs ²	Total costs	Income generated by the action	Financial contributions given by third parties to the beneficiaries	Total receipts	Reimbursement rate % ³	Maximum EU contribution ⁴	Requested EU contribution
	A.1 Employees (or equivalent)		C.1 Travel								
	A.2 Natural persons under direct contract and seconded persons		C.2 Equipment								
			C.3 Other goods and services								
	Actual	Actual	Actual	Flat-rate ⁶ 7%							
	a	b	c	d = 0,07 * (a + b + c)	e = a+ b + c + d	f	g	h= f + g	i	j	k

In terms of the process, the financial report will be prepared by each project partner directly on the EC portal. Once complete, each partner submits his financial report to the coordinator. The coordinator either rejects the report, in which case it is sent back to the partner for revision, or the coordinator accepts it for submission.

Once all financial reports from partners have been accepted by the coordinator, the interim report (including financial & technical) is submitted to the EC. The EC can then send the report back to the coordinator for clarifications or changes. If it accepts the report, payment by the EC then follows (to the coordinator, who then forwards relevant amounts to each partner).

Discussion:

HaDEA project and financial officers took the opportunity to highlight a few further considerations:

- Maren Hunds (HaDEA) flagged that partners should submit the March deliverables before working on the reporting.
- Katia Asperti (HaDEA) noted that sub-contracting issues need to be uploaded for the submission of invoices. She encouraged all partners to be as detailed as possible in their financial reporting, to enable HaDEA to understand clearly all processes without having to ask for further clarifications, and delay the acceptance of the report.

11 Closing

Alison Maassen (EuroHealthNet) closed the meeting by thanking partners and reminding them that there are many ways we can continue to support each other during the coming and final year of the project. The more we collaborate and stay in touch across WPs and activities, the better our final results will be. We're looking forward to working with all of you to make this project a success!

Annex: List of Participants

Name	Organisation
Agnese Freimane	Latvian Centre for Disease Prevention and Control
Alba Godfrey	EuroHealthNet
Alessia Suma	European Federation of Nursing Associations
Alison Maassen	EuroHealthNet
Aur�lie De Waele	University of Antwerp
Barbara Rath	Vienna Vaccine Safety Initiative
Camelia Claici	Romanian National Institute of Public Health
Carolina Pascaru	Europa Media
Caroline Costongs	EuroHealthNet
Catharina de Kat-Reynen	World Health Organisation Europe (SAB member)
Chiara Pegan	European Medical Students' Association (SAB member)
Chloe Lebbos	European Pharmaceutical Students' Association (SAB member)
David Hargitt	EuroHealthNet
Dina Zota	Institute of Preventive Medicine, Environmental and Occupational Health
Edel Marl�n Taraldsen	European Nursing Students Association (SAB member)
Emilie Karafillakis	Vaccine Confidence Project (SAB member)
Fatima Pereira	European Federation of Nursing Associations
Georgia Tsiaka	Institute of Preventive Medicine, Environmental and Occupational Health
Greet Hendrickx	University of Antwerp
Ilona Laganovska	Pharmaceutical Group of the European Union
Ilze Straume	Latvian Centre for Disease Prevention and Control
Jacques de Haller	Standing Committee of European Doctors
Jan De Belie	Pharmaceutical Group of the European Union
Jose Santos	European Council of Medical Orders (SAB member)
Jurgita Kaminskaite	European Health and Digital Executive Agency

Katia Asperti	European Health and Digital Executive Agency
Kinga Wysocka	EURACTIV Poland
Kristīne Ozoliņa	Latvian Centre for Disease Prevention and Control
Lina Papartyte	EuroHealthNet
Maija Kalpiša	Latvian Centre for Disease Prevention and Control
Maren Hunds	European Health and Digital Executive Agency
Markus Kujawa	Standing Committee of European Doctors
Martine Ingvorsen	DG SANTE, European Commission
Mervi Jokinen	European Midwives Association (SAB member)
Miguel Lopez-Andrade	Council of European Dentists (SAB member)
Monika Mojak	EURACTIV Poland
Nikole Papaevgeniou	Institute of Preventive Medicine, Environmental and Occupational Health
Paul de Raeve	European Federation of Nursing Associations
Petru Milos	Institute of Preventive Medicine, Environmental and Occupational Health
Pierre Van Damme	University of Antwerp
Paola De Castro	Italian National Institute of Health
Possenti Valentina	Italian National Institute of Health
Roberto Croci	Italian National Institute of Health
Ruth Bell	University College London (SAB member)
Harry-Sam Selikowitz	Council of European Dentists (SAB member)
Sara Valckx	University of Antwerp
Stefano Del Torso	European Academy of Paediatrics (SAB member)
Valeria Vislevska	Institute of Preventive Medicine, Environmental and Occupational Health