TAKE CARE FINAL EXTERNAL EVALUATION REPORT

Take Care Project: Healthcare Language Guide for Migrants, Lifelong Learning Programme; Project Number: 526736-LLP-1-2012-1-NL-GRUNDTVIG-GMP

11 Dec 2014 version
Dr Jukka Kallio
INDEPENDENT EXTERNAL EVALUATION completed on behalf of

Project Partnership: Take Care Project: Healthcare Language Guide for Migrants, Lifelong Learning Programme; Project Number: 526736- LLP-1-2012-1-NL-GRUNDTVIG-GMP

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1 INTRODUCTION

This report details the findings and conclusions of the final independent external evaluation of the Take Care project. The project is co-financed by the European Commission Lifelong Learning Programme, Grundtvig; Take Care Project: Healthcare Language Guide for Migrants, Lifelong Learning Programme; Project Number: 526736-LLP-1-2012-1-NL-GRUNDTVIG-GMP
The project duration was 24 months started on 01-11-2012 and ended on 31-10-2014. The consolidated budget of the project is € 398 295 and the EU grant € 298 719 (75% of the total budget).

The consortium consisted of 8 partners representing old EU member states NL, ES, DE, PT and new EU member states such as CY, BG, LT and RO. The project co-ordinator was Coöperatieve Vereniging Pressure Line U.A. from the Netherlands.


The Take Care project was progressed and managed by a transnational partnership. The partners are presented next.

I Partners

This section provides a snapshot of each of the project partners in turn and describes their respective roles within the framework of the project. The partners and their web site addresses are presented beneath (P1 = partner number 1 etc.):

The project partners, their countries and web sites are as follows:

<table>
<thead>
<tr>
<th>P</th>
<th>Partner</th>
<th>Country</th>
<th>Web site</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1</td>
<td>Pressure Line</td>
<td>The Netherlands</td>
<td><a href="http://www.pressureline.nl">www.pressureline.nl</a></td>
</tr>
<tr>
<td>P2</td>
<td>KuTu Ltd</td>
<td>Bulgaria</td>
<td><a href="http://www.kutu-bg.eu">www.kutu-bg.eu</a></td>
</tr>
<tr>
<td>P3</td>
<td>Dialoge</td>
<td>Germany</td>
<td><a href="http://www.dialoge.com">www.dialoge.com</a></td>
</tr>
<tr>
<td>P4</td>
<td>IFES</td>
<td>Spain</td>
<td><a href="http://www.ifes.es">www.ifes.es</a></td>
</tr>
<tr>
<td>P5</td>
<td>FLEP</td>
<td>Portugal</td>
<td><a href="http://www.flep.pt">www.flep.pt</a></td>
</tr>
<tr>
<td>P6</td>
<td>SYNTHESIS</td>
<td>Cyprus</td>
<td><a href="http://www.synthesis-center.com">www.synthesis-center.com</a></td>
</tr>
<tr>
<td>P7</td>
<td>Soros International House</td>
<td>Lithuania</td>
<td><a href="http://www.sih.lt">www.sih.lt</a></td>
</tr>
<tr>
<td>P8</td>
<td>UMF Gr t Popa</td>
<td>Romania</td>
<td><a href="http://www.umfias.ro">www.umfias.ro</a></td>
</tr>
</tbody>
</table>

Additionally, each partner was responsible to bring associated partners for the project. Associated partners represent organizations such as migrant communities, charity organizations, adult educational institutes, health care providers etc. In short, their roles in the project were to provide assistance in the needs and experiences analysis and select good practices, as well as to use innovative learning materials and methods to be produced by the project consortium. Later the associated partners were expected to exploit the project products when meeting, supporting and/or working with migrants. There were 53 associated partners, two or more ones from each partner countries. The associated partners are shown in the project's web site at http://www.takecareproject.eu/associated

P1 Pressure Line

Pressure Line is a full-service communication agency, established in 1997. In 2011, the company has been transformed into a cooperative association that strengthens its market position and enables
it to coordinate and conduct national and international projects in the fields of education, communication, design and promotion. Core competences are development of communication and dissemination strategies, research and marketing, creation of corporate identities, web design, multimedia projects and developing and designing of learning materials. Pressure Line works for governmental organisations, regional and local authorities, educational and cultural institutions.

Pressure Line had the responsibility for the overall project management and coordination of the work process. It signed the necessary contracts, was responsible for the reporting and the effective spending of the budget and ensured that the Commission’s rules and regulations were observed.

The role of Applicant Co-ordinator is fundamental to the successful delivery of an EU Lifelong Learning project. Within this project Pressure Line had overall responsibility for ensuring that the aims and objectives as set out in the project application and funding contract were achieved through an effective and productive partnership. Pressure Line carried responsibility for the procedures established for project delivery, especially the pursuit of deadlines, the financial management of the project and the fulfilment of the requisites agreed between the partners for the deliverables.

P2 KuTu Ltd

KU TU Ltd. is a private company specialised in the field of advertising services and PR. It provides full advertising services to its customers – planning, design and realisation. Important part of the company’s advertising activities is the planning and organisation of events like seminars, exhibitions, language campaigns.

KU TU contributed to the project objectives with its experience in successful promoting of learning opportunities as well as strong basis for dissemination and exploitation of results. KU TU had at its disposal specialists whose expertise covered all main aspects of the activities and tasks assigned to the organisation within the Take Care Project. Moreover their experience in participating and coordinating European cooperation projects added to the adequate and effective administrative and financial management of the project.

P3 Dialoge

The Sprachinstitut Dialoge is a private school which teaches German as a foreign language for students from all over the world. Since 2006, the school is a full member of IALC, the International Association of Language Centers. Since 1982, Dialoge offers courses for German as a foreign language for youth and adult learners from all over the world, who want to learn German for their educational, professional or personal life.

Dialoge contributed to the smooth implementation of the project by working with the coordinating institution and the other partners and involving of associated partners to perform the projects tasks and activities. Dialoge undertook the development of the learning methodology and supported the development of the envisaged language materials. During the project, Dialoge took active participation in the dissemination and exploitation of the results on different levels.

P4 IFES

The Institute of Training and Research Studies (IFES), is a foundation of the General Trade Union of Workers which, since 1986, has been offering solutions of various formative needs of companies and workers as vocational training and long life learning. IFES accomplishes a social purpose by
giving priority to human factor and offering skills and professional qualifications to workers.

IFES has a vast experience in European, National, Regional and Local projects related to training and education. IFES is a member of the European Network «EURORESO» (www.euroreso.eu).

IFES contributed to the smooth implementation of the project by working with the coordinating institution and the other partners and involving of associated partners to perform the projects tasks and activities. It focused on current situation analysis on migrant groups in Spain and comparative good practices research. IFES undertook the development of exploitation strategy for the whole partnership and participated actively in the dissemination and exploitation of the results on different levels.

P5 FLEP

FLEP – Formação, Língua e Estudos Portugueses Lda is a Language Institute and a Resource Centre, established in 1990. Its main aim and activity are related to promotion, training and organisation of Portuguese Language courses with adequate programs; foreign language courses with specific purposes, flexible training, translation and interpretation, organisation of conferences and other cultural events, up grading and selection of human resources. FLEP has been organising tailor-made training courses for adults and SMEs, and has a wide experience in organising language courses for students as well as for the technical staff of companies.

FLEP coordinated and organised the study on good practice and needs and experience analysis for the partnership. It contributed with its experience in providing high quality language education and developing innovative methodologies for language learning. Therefore, FLEP cooperated in the development of the Healthcare Language Guide for Migrants. FLEP collaborated in the development of the approaches for piloting the new materials in Portugal.

P6 SYNTHESIS

SYNTHESIS is a learning events provider and a center for the development of social entrepreneurship. Our learning events aim to inspire and empower learners. It gives special attention on to learning for personal growth and view life-long learning as a natural element of a person's life. The people who are at risk of social exclusion, including immigrants, people with disabilities, and women are our priority. In addition, SYNTHESIS is working in implementing a social enterprise that will provide an integrated model for employment and social integration to people who are at risk of social exclusion.

SYNTHESIS contributed to the smooth implementation of the project by working with the coordinating institution and the other partners and involving of associated partners to perform the projects tasks and activities. It focused on current situation analysis on migrant groups in Cyprus and comparative good practices research. SYNTHESIS performed tasks as an internal evaluator leading WP6, and participated in all partner meetings. It took active participation in the dissemination and exploitation of the results on different levels.

P7 Soros International House (SIH)

SIH started in March 1993 as an EL teaching center and soon became one of the largest and most highly rated language schools in Vilnius, at the moment teaching 13 languages. All courses of languages for adults and young learners are provided by the professionals implementing ICT
equipments and tools, using innovative language teaching methodologies and programmes in the teaching-learning process.

SIH contributed to the smooth implementation of the project by working with the coordinating institution and the other partners and involving of associated partners to perform the projects tasks and activities. As an expert in coordinating of successful projects on integration of migrants and adult education SIH undertook the coordination and development of teaching modules for training workshops and language courses and supported the development of the envisaged language materials. During the project SIH actively participated in the dissemination and exploitation of the project outcomes on different levels.

P8 UMF

University of Medicine and Pharmacy “Gr.T.Pop a” Iasi (UMF Iasi) is one of the largest state universities in Iasi, which in turn is one of the biggest university centres in Romania. According to the latest official rankings, UMF Iasi is placed in the top category corresponding to advanced education and research. The undergraduate programme in General Medicine is currently rated as the 2nd best and the one in Pharmacy is considered the best in Romania. One of the reasons why this is so, apart from the quality of teaching and research, is the active involvement of strong student organisations such as SSMI (www.ssmi.ro) in the vision and life of the university.

UMF Iasi contributed to several key areas: research into how the Romanian healthcare system may look through the eyes of foreign citizens and identification of needs, methodological input for the development of project outcomes, competent input of information and language, dissemination of project outcomes to beneficiaries both from within the medical system and foreign citizens in Iasi and throughout Romania, reflecting on and reporting on results academically/scientifically.

II Partner roles

The partners have primary responsibilities through the work packages. There are 8 work packages (WP) in the project.

<table>
<thead>
<tr>
<th>Partner</th>
<th>Country</th>
<th>WP= primary responsibility</th>
<th>Input into:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pressure Line</td>
<td>NL</td>
<td>WP 1 Management &amp; co-ordination</td>
<td>Overall management &amp; co-ordination, financial issues;</td>
</tr>
<tr>
<td>FLEP</td>
<td>PT</td>
<td>WP 2 Research</td>
<td>leads the performance - questionnaires, analyses, summary of surveys</td>
</tr>
<tr>
<td>Dialoge</td>
<td>D</td>
<td>WP3 Methodology</td>
<td>leads the development of the methodology</td>
</tr>
<tr>
<td>UMF Gr t Popa Medical University (UMF Iasi)</td>
<td>RO</td>
<td>WP3 Methodology</td>
<td>consults the work group (partners) with its expertise on medical terminology</td>
</tr>
<tr>
<td>Pressure Line</td>
<td>NL</td>
<td>WP 4 Development</td>
<td>c o - o r d i n a t e s t h e</td>
</tr>
</tbody>
</table>
process of content development of the products assisted by KU TU; Dialoge, FLEP, SIH and UMF work on a proposal for a selection of the scenarios for the phrase book and the glossary.

<table>
<thead>
<tr>
<th>Soros International House (SIH)</th>
<th>LT</th>
<th>WP 5 Training &amp; workshops</th>
<th>leads the development of the teaching modules and programmes for the workshops</th>
</tr>
</thead>
<tbody>
<tr>
<td>SYNTHESIS</td>
<td>CY</td>
<td>WP 6 Monitoring &amp; evaluation</td>
<td>leads the monitoring and evaluation strategy</td>
</tr>
<tr>
<td>KuTu Ltd</td>
<td>BG</td>
<td>WP 7 Dissemination</td>
<td>leads the dissemination activities and actively supports Pressure Line in the management and co-ordination of the work process</td>
</tr>
<tr>
<td>IFES</td>
<td>ES</td>
<td>WP 8 Exploitation</td>
<td>leads the developing of the exploitation strategy for the partnership</td>
</tr>
</tbody>
</table>

UMF Gr t Popa Medical University was a medical and healthcare expert in the project. UMF did not lead any WP, it had a consulting role especially in medical and healthcare issues.

As recorded in the Interim Evaluation, the project draws together eight organisations from the language teaching-learning sector, agency for social entrepreneurship, communication and advertising agencies, trade union VET training institute, education specialists, and university of medicine and pharmacy from eight EU project countries.

In the best practice of formatting Transnational Partnerships it is characterised by the diverse and complementary nature of its constituent organisations representing experienced organisations within immigration support activities, SMEs, medical experts and language training providers. This structure provides a robust combination of skills and resources. Most notably, the Take Care partnership has a long and wide experience in participating at the transnational projects as partners and co-ordinators.

The external evaluator concludes that the partnership was aptly balanced in representing countries facing immigration waves, either as origin or destination countries, or both. The expertise within the partnership was unquestionable with a wholly fitting blend of experience, knowledge, skills and expertise suited to the successful design and delivery of this particular project. It is impressive that many of the partners had collaborated with one or more other partners in previous EU funded projects and all have an interest in social aspects of immigrants.
Next in Chapter 2, the objectives of the project are presented. Then in Chapter 3, the external evaluation plan is shown. In Chapter 4 the tasks of the external evaluator are discussed. In the fifth chapter, the methodology of external evaluation is shown. Chapter 6 presents the performance overview of the project including transnational project meetings and project management. In Chapter 7, project materials development (brand, logo, website and other outcomes; Take Care Healthcare Guide Product Family) is evaluated. Chapter 8 shows and evaluates the dissemination activities. Finally, Chapter 9 summarises this report.

2 AIM AND OUTPUTS

The aims of Take Care Project are to:
- help migrants to improve their knowledge about health matters in host country language;
- make health care more accessible for migrants and improve their integration;
- create a European wide network of associated partners such as migrant communities, (volunteer) organisations supporting the integration and welfare of migrants, adult educational institutes, health care providers in order to facilitate them with innovative learning materials and methods and motivate them to exploit further the project products approaching migrants as final beneficiaries;
- contribute to intercultural communication.

The main product of the project will be a multifunctional Healthcare Language Guide that will provide:
- innovative methods for language learning based on the needs and experiences of the target group;
- language knowledge on medical matters in diverse forms: paper based widely illustrated phrase book, medical glossary to be used as learning tool in 17 languages, an interactive language learning book, website offering self-study tool, etc.;
- products produced according to latest technology developments;
- methodology for training based on existing good practices and incorporating non-traditional approach of teaching and involving people to learn through modern technology tools;
- necessary specific information on the national health care systems in the partners’ countries such as information on GP services, children’s vaccinations, dental care mental health care, prevention, health insurance, etc.
- information on migrants’ cultural backgrounds referring to health care.

Additionally, the consortium has several specific objectives for the project:

- analyse the needs and experiences of migrants on health matters;
- collect and compare good practices of existing organisations and projects providing migrants with medical information in the local language;
- share ideas and experiences between partners from old EU member states and partners from new EU member states;
- collect materials for developing of a Healthcare Language Guide for Migrants (HLGM);
- develop methodology for training based on the HLGM;
- organise training for representatives of organisations working for migrants and adult education teachers;
- carry out short language courses for migrants based on the methodology and the HLGM;
- collect materials to create and continuously update a website serving the needs of migrants concerning health matters;
provide tools for communication between on the one hand patients who do not speak the local language, and on the other hand healthcare providers who experience problems when helping migrants;
organise exploitation seminars to present the project products and results and further expand the dissemination channels. The seminars will be run for migrant communities, organisations working for migrants, adult educational institutions, healthcare providers and all other interested from own partner networks. The final products can be used by new target groups such as foreign students, business people, temporary workers and their family members working and living in the hosting country, etc.;
implement the project products to contribute to a better communication between migrants and healthcare providers and ensure quality and safety in health care services. By gaining language knowledge and information on healthcare providers migrants and all other interested groups will be helped in finding their way in the healthcare system of the country;
contribute to intercultural communication between migrants and healthcare providers.

3 EVALUATION IN THE PROJECT PLAN

The project plan (application) indicates internal and external evaluation as follows:

WP6 – Monitoring and Evaluation of the Project Activities that will be led by P6, a partner with expertise who will evaluate the process of work to assure constant feedback and implementation of necessary adjustments for achieving all envisaged results.

In order to ensure adequate control over the implementation of the separate project stages and activities, the coordinator and the internal evaluator will constantly evaluate (by questionnaires / feedback) and monitor the progress of the work process, timely detect any deviation and adopt measures for its correction. During partner meetings and through online communications all possible questions and problems arisen in the work process will be clearly identified and agreements for their solving will be timely made.

The travel and subsistence expenditures cover 6 partner meetings (including a final conference during the final meeting) that will be a channel for planning, analyses and evaluation of the project activities for further enhanced development as well as for dissemination of the project and its outcomes. Subcontracting and other costs are foreseen for productions of main project products, dissemination materials, external project evaluation and monitoring.

Both the training workshops and the short language courses will be evaluated using feedback forms. The evaluation will be taken in consideration when creating the final methodology. The partnership will develop feedback forms for:
- representatives of organisations that have participated in the training workshops
- migrants that have followed short language courses
The feedback forms will be used to evaluate the opinion of the participations in performed trainings and courses and get feedback on their experiences.

P1 will be responsible for the compiling of the Interim and Final Reports and will coordinate the Internal and External Evaluators.

All partners will meet at a final project meeting in Spain in order to summarise the results achieved, analyse the information gathered from the final partner evaluation and set the basis for the final
reporting of the project.

The sixth work package (WP6) is aimed at creating and implementing a strategy for monitoring, evaluation and quality assurance of the project and its compliance with the original goals and work plan. Under the lead of P6 the partners will develop a monitoring and evaluation strategy plan in order to ensure adequate control over the implementation of the separate project stages and activities, timely detect any deviation and adopt measures for its correction. The monitoring and evaluation activities will be performed on three complementary levels – internal partner evaluations, feedback from target group, external evaluations. The internal evaluations will follow the criteria developed jointly by the project consortium and focus on the operational and quantitative aspects of the project. The project target group will be involved in the implementation of the project activities at all stages - preparation of the products, testing, putting the developed products into practice. The received feedback will provide both the qualitative and the quantitative indicators for evaluation of the project progress. External monitoring and evaluation will be provided by an independent expert subcontracted for the project purposes.

WP6 includes subcontracting costs for an external evaluator to assure the quality of the implementation and effective use of the resources.

The external evaluator will focus on measuring the qualitative aspects of the project. The instruments for implementation of the monitoring and evaluation plan will include evaluation questionnaires, feedback forms, interviews, survey results, monitoring visits, study on financial reports, SWOT analyses etc.

WP6 will be performed under the lead of P6. The quality assurance of the project will be discussed at the organisational partner meetings within the other WPs and online.

Under the lead of P6 the partnership will develop an Internal evaluation strategy according to which all the internal evaluation activities will be performed. Questionnaires will be prepared for evaluating the regularity and effectiveness of the partner communication, the work flow, the number of people reached by the project activities, the impact on them and the received feedback, the compliance of the developed products with the project goals, the response on the dissemination activities, etc.

The external evaluation will focus on the aims and objectives of the project and their impact; assessing whether these have been met and how efficiently and effectively. Reports will be produced at two stages in the project – an interim report at the end of the first year and a final report at the end of the project. The focus will be on the work within the partnership, quality of the work programme, products and results, efficiency of the management and coordination, impact on the target group and its inclusion in the activities, sustainability potential, etc. The provided recommendations will outline the project's strengths and weakness and give directions for improvement of the work process.

An internal evaluator (P6) will be monitoring the work of the partnership. Under his lead a monitoring and evaluation strategy plan will be developed in order to ensure control over the performance of the project activities by all partners and implementation of the project management. Any deviations will be timely registered and adequate measures will be taken.

An external evaluator will evaluate the performance of the project activities and their impact,
assessing whether these have been met and how efficiently and effectively. An interim report will be provided at the end of the first year. The provided recommendations on the work within the partnership and the efficiency of the management and will be taken into consideration for improvement of the work process.

4 EXTERNAL EVALUATOR

The external evaluation has been carried out by a Finnish SME called Jukka Kallio EU projects and enterprise development. Its owner manager Dr. Jukka Kallio has been the responsible person of the external evaluation process and author of this report.

The agreement between Coöperatieve Vereniging Pressure Line U.A from Netherlands and Dr. Jukka Kallio, Jukka Kallio EU projects and enterprise development from Finland presents the tasks of the external evaluator as follows:

1. Carry out the external evaluation of the Project throughout the dates of the present Agreement
2. Develop the external evaluation plan
3. Establish the external evaluation concepts (standards, tools, processes, definitions, etc.)
4. Determine objectives and field of external evaluation
5. Establish objective criteria and success criteria for the external evaluations
6. Carry out at least two monitoring and evaluation visits throughout the dates of the present Agreement. The visits and itinerary will be approved by the Contractor.
7. Report the external evaluation results for the interim and final reports of the Project.
8. Co-operate for the information flow in the project throughout the completion of all tasks and conditions of the present Agreement.
9. Provide information regarding the external evaluation results for project’s publicity and for internal use throughout the completion of all tasks and conditions of the present Agreement.

The external evaluation plan is a separate document which has been delivered to the co-ordinator of this project, in February 2013. Thus, the external evaluation plan is not included in this report.

5 METHODOLOGY OF THE EXTERNAL EVALUATION

It can be argued that the principal goal of the external evaluation of any EU funded project is to examine the extent to which a project meets the objectives laid out in the application and work-plan agreed by the partners and the funding agency.

Accordingly, the main objective of the external evaluation process is to provide information on the process of the project in order to assure the project become a learning process for the project team/consortium. Additionally, the role of the external evaluator is to

- suggest additional tools, indicators and opportunities for evaluation
- receive evaluation results and assist with their analysis
use all this information to produce interim and final reports as required

In carrying out this role it was essential that the external evaluator used appropriate opportunities for critical analysis and assumptions made by the wider project team. It is also important that he took a detached standpoint from the project as a whole. This did not prevent him making practical suggestions from time to time.

Materials and tools in the external evaluation process were

- project application
- minutes of the meetings
- Internet survey; targeted for the partners of the project
- project management and performance research (paper-based questionnaire survey)
- website of the project and other dissemination materials;
- email correspondence/consultation with the Project Co-ordinator
- participation at two meetings (monitoring visits 10-11 October 2013, Larnaca, Cyprus & June 2014 in Sofia)
- materials development

As planned, the external evaluator made two monitoring visits. First, the evaluator participated at the fourth meeting 10-11 October 2013, Larnaca, Cyprus. This meeting was chosen since the planned project outcomes were partly visible and almost completed as to the main objective of the project. The main objective and outcome of the project is a Healthcare Language Guide for Migrants containing: a language learning phrase book (in Bulgarian, Dutch, English, German, Greek, Lithuanian, Portuguese, Romanian and Spanish) a glossary in 17 languages, necessary information on the national health care system in each partner country and a basic language emergency kit for healthcare providers.

Secondly, the evaluator participated at the fifth transnational partner meeting 2-3 June 2014, Sofia, Bulgaria. The Sofia meeting was chosen since there the partners reported their training workshops and language courses based on the Healthcare Language Guide for Migrants.

The final external evaluation of the Take Care project is targeted to be a comprehensive study on the key elements of the project. Accordingly, the focus was set on following tasks:

- working on the project; management, overall performance, partnership and co-operation
- materials development
- dissemination and exploitation.

6 PROJECT PERFORMANCE OVERVIEW

As outlined in the previous section II Partner roles, the partnership benefited from a broad and varied range of experience and expertise amongst the parties involved. This facilitated project progress and while the project faced some challenges within the partnership, all partners worked to achieve the project objectives while benefiting from the transnational learning experience across countries, languages, work methodologies and cultures.
I Transnational project meetings

The external evaluator made two monitoring visits to the project meetings, to the fourth meeting in Cyprus and to the fifth meeting in Sofia. Below is an overview as to main points of the international meetings which took place over the course of the project. The overview does not try to form a comprehensive picture of the activities and discussions took place during the meetings but shows the major decisions and activities completed or to be completed in order to meet the project aims and objectives.

KICK-OFF MEETING, 14-15 January 2013, Rotterdam, The Netherlands

There were 15 attendants representing all partners. Within ice-breaking activities, each partner presents its organisation. The project logo was presented by Pressure Line and approved by all partners. The identity elements have been chosen and developed in relation with the project topic.

Pressure Line presents the communication strategy of the project. It combines the following aspects: Internal communication, External communication (dissemination), Internal evaluation (SYNTHESIS), External evaluation (Jukka Kallio). Pressure Line proposed the use of Dropbox for sharing all documents, pictures, work materials, etc. to be developed under the project.

Pressure Line presents the project and its main activities and goes through the work packages: Each partner has to collect good practices on similar projects, products, etc. in its country. The focus should be on healthcare for migrants, integration of migrants. Minimum 3 good practices have to be selected per country. The good practices will be presented during the partner meeting in Portugal.

Questionnaires on needs analysis – each partner has to translate the questionnaires in its language and the questionnaire for migrants also in one migrant language and carry out a survey among the target groups on identifying their needs related to the project topics. Each partner has to interview minimum 20 migrants and 10 healthcare providers.

The partners discussed possibilities for the partner meetings by the end of the project and decided on the meeting itinerary.

The partners decided the languages in which the project products will be developed: materials are translated in 17 languages: in a partner country’s own language and in one migrant language e.g., in German German and Russian.

Ku Tu presents the main aspects on the dissemination activities which to be performed during the project. A general dissemination strategy has been developed and distributed to the partners. It includes: General dissemination plan, Project aspects for dissemination, Target groups for dissemination, Dissemination methods/activities and Timescales and responsibilities.

Each partner presented the contacts established with target groups representatives in its country and the plans for attracting associated partners.

Project evaluation: SYNTHESIS presents the internal evaluation mechanisms. SYNTHESIS also presents the questionnaire for evaluating the kick-off meeting, the questionnaire will be sent to the partners after the meeting.

Discussion on the website content: The project website will be accessible at www.takecareproject.eu. The partners discussed the basic concept of the website and went through
the buttons with information to be included.

The second meeting 4-5 April 2013, Lindau, Germany

Survey on needs and experiences: The partners presented their results of the survey as to needs and experiences of migrants and healthcare professionals in healthcare situations.

Setting up work groups for workshops: Pressure Line presented the ideas for developing the methodology for the Health Care Language Guide: phrase book, glossary (words fan), info graphic about national health care system, basic emergency kit, e-book for Ipad, website.

The partners formed 2 work groups: Work group Methodology: Dialoge, FLEP, SIH, Medical University, Pressure Line and Work group Dissemination: KU TU, IFES, Synthesis, Pressure Line

Pressure Line presented the structure of the website. The website will have two sections: a general section containing information on the project/partners/associated partners/events/visibility/contact and a language learning and information providing section for migrants and healthcare professionals.

The third meeting 10-11 June 2013, Lisbon, Portugal

Summary from associated partners: Each partner presented the feedback on need and experience survey collected from the associated partners. It showed that the project is on the right track and that the drafts developed so far are in coherence with the needs of the target groups.

Each partner presented good practices identified in its country. The good practices followed a common template developed and presented during the previous meeting in Lindau. The examples showed that in all countries there are relevant practices that can be linked to the project and enriched by the language healthcare materials that are in development.

Information on health care system in partner countries (poster): Pressure Line has developed and presented an info graphic about the health care system in The Netherlands. All partners agreed to keep to this template and prepare the information about their country, written in English and then translated in partner language.

Exploitation: IFES presented the exploitation targets and approach for the project. A table for reporting exploitation activities by each partner was presented and made available. Main exploitation events include the trainings and the exploitation seminars planned as of March 2014 by the end of the project.

The fourth meeting 10-11 October 2013, Larnaca, Cyprus

As with the previous transnational meetings all partners participated at the 4th meeting. Additionally, the external evaluator Dr. Jukka Kallio made his first monitoring visit at the 4th meeting.
Review of the results of the third internal evaluation: SYNTHESIS (internal evaluator) points out that most of the work and the activities have been highly estimated so far. The results show that all partners have stated as strongest elements of the project the great coordination, the strong partnership and the good progress so far.

Discussions on materials on Healthcare Language Guide: Pressure Line presents the visual and format of all products included in the language guide: Word fan (= Glossary) – each language has own colour; Idea for developing a package set which to unite everything together (A4 format); Phrase book + Glossary = A4 format; The Take Care family was developed as animated characters; the phrase book includes combinations of text and illustrations; Basic language emergency kit – to be available on the website and suitable for A4 print-out & Medical Route – A3 format.

Evaluation report by external evaluator: Dr Jukka Kallio makes a presentation on his findings about the first project year. The evaluation is extremely positive and no weak points could be detected. An Interim External Evaluation Report to be developed by Dr Jukka Kallio and send along with the official Progress Report of the project.

The fifth partner meeting 2-3 June 2014, Sofia, Bulgaria

The Sofia meeting was an extra meeting approved by the LLL programme funding organisation.

The partners presented the results of the training workshops and language courses held in all partner countries in March, April and May 2014.

Summarising feedback from the trainings and language courses / finalising methodology. For example, Ku Tu held the trainings and language courses as follows: 8 organisations involved, most widely represented were organisations working for Syrian refugees. 3 language courses held for Arabic and English speaking participants in good cooperation with ARABIS, State Agency for Refugees and the US Embassy in Sofia.

A draft of the Interactive Language learning book and online exercises/self learning material were presented for the website.

Pressure Line presented a Bulgarian version of the I-book developed by Delian Rashkov, partners responded very positively. The book will be developed in all partner languages and presented during the final conference in Valencia.

Discussions on the dissemination booklet and preparations for exploitation workshops in partner countries: Ku Tu presented the vision of the dissemination booklet and everyone agreed.

Raya presented the program for the exploitation seminar on the following day and partners discussed their participation. Agreements have been made how to hold the presentations.

The external evaluator pointed out that it might be necessary to make a difference between dissemination and exploitation (seminar). Partners discussed this issue. Pressure Line suggested that it would be taken into consideration and, thus during the seminar partners will motivate the participants to use the project products and show them mechanisms to exploit them.
IFES presented the plan for organising the final event in Valencia on 10th September 2014.

The second day of the Sofia meeting was reserved the exploitation seminar. Next, the report of the exploitation seminar is shortly displayed and discussed.

There were 32 participants in the seminar representing diverse back-grounds and professions: 3 attendants from Governmental institutions, 4 Healthcare providers, from Migrant organisations, 10 from Educational institutions, 3 from humanitarian organisations; civil organisations, private marketing companies. Their areas of expertise were situated in education, patient healthcare protection, cultural mediators of different migrant communities in Bulgaria, language education, integration of migrants, etc.

The seminar started on 3rd June at 9.30 and ended at 13.30. The attendants evaluated the seminar as follows: The evaluation of the event was extremely positive and there is already a follow-up interest in the project and its products. The seminar was rated 4,8 (highest score 5). Also, the participants of the seminar were asked to rate the Take Care Project. Again the score was high 4,8 (highest score 5)

The strengths of the project were presented by the seminar attendants as follows:

- Facilitating the communication between doctors and patients which is very important
- Addresses a real problem, good quality materials and design, effective plan of action, team spirit
- Adequate and very convenient content; multi-functionality – opportunity for transferability and change of vocabulary and for use for language teaching
- The materials are developed with precision and practical approach; the topics are well chosen
- The project is very well applicable for language education

The weaknesses:

- Need for additional adaptation for our specific needs.

Most notably, the seminar participants expressed that they would use all elements of the project product family i.e., the Healthcare Language Guide for Migrants with the language learning phrase book, the glossary, the basic language emergency kit for healthcare providers etc.

The sixth (final) project meeting 10-12 September 2014, Valencia, Spain

The meeting started with the final Take Care Final Conference on presenting the project results and exploitation of products. The conference was attended by 80 participants including policy-makers, migrants, associated partners, training centres, etc. 18 nationalities were present at the final conference.

Key speakers and migrant community representatives shared their experience with the project and spoke about future application of the outcomes with migrants for social and labour market inclusion. The general conclusion of the conference was that migrant conference attendants were very happy with the project products and they found it extremely important and useful for migrant integration and social inclusion.

Authentic comments made by Romanian and Cameroonian attendants: ... the project can’t end now because the products have great potential and are still to be exploited within the migrant communities.

Other issues from the sixth and final meeting:
The partners discussed again the issue of “Dissemination versus Exploitation” raised by the external evaluator during the meeting in Sofia.

- The exploitation seminars have to involve the target groups in demonstration activities
- Is it exploitation only of the products or also of experience with the project by beneficiaries, exploitation of dissemination channels, expansion of the network of associated partners, etc.?
- Describe the term “exploitation” and its specific role in the project while preparing the Final Report

Exploitation of dissemination channels. Making plans for the future:

Pressure Line sends an Intellectual Property Rights agreement to be signed between the partners. Pressure Line checks the copy rights for the drawings in the Phrase book. The website will stay active and updated for at least 3 more years (most likely it will be more)

The partners discussed possible commercialisation options: how to produce more copies of the products and especially of the Word Fan?

As in all previous partner meetings the tasks table concerning what to be completed with the time table was presented by the project co-ordinator. The following snapshot from the final meeting minutes shows this very important meeting issue:

<table>
<thead>
<tr>
<th>Task</th>
<th>Responsibility</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reports on Exploitation Seminars</td>
<td>All partners</td>
<td>End-September (except Syntheses)</td>
</tr>
<tr>
<td>Information and logos of new associated partners (for the website)</td>
<td>All partners</td>
<td>End-September</td>
</tr>
<tr>
<td>Update the exercises and send the content changes to be translated in the partner languages</td>
<td>FLEP</td>
<td>22nd Sept.</td>
</tr>
<tr>
<td>Part of the translation process</td>
<td>All partners</td>
<td>End-September</td>
</tr>
<tr>
<td>Third project newsletter</td>
<td>All partners</td>
<td>Mid-October</td>
</tr>
<tr>
<td>Releasing publications (at least 1 per partner)</td>
<td>All partners</td>
<td>End-October</td>
</tr>
<tr>
<td>Disseminate the Book</td>
<td>All partners</td>
<td>N/A limits to</td>
</tr>
<tr>
<td>Submit dissemination reports / Proof of dissemination activities and events</td>
<td>All partners</td>
<td>End-October</td>
</tr>
<tr>
<td>Provide form for collecting dissemination data and figures</td>
<td>KU TU Ltd.</td>
<td>Mid-October</td>
</tr>
<tr>
<td>Recordings in English</td>
<td>Med. University</td>
<td>End-September</td>
</tr>
<tr>
<td>Send concept for agreement on Intellectual Copy Rights</td>
<td>Pressure Line</td>
<td>22nd Sept.</td>
</tr>
<tr>
<td>Develop a commercialisation plan</td>
<td>Pressure Line</td>
<td>End-October</td>
</tr>
<tr>
<td>Update the project website</td>
<td>Pressure Line</td>
<td>End-October</td>
</tr>
<tr>
<td>Evaluation questionnaire</td>
<td>Synthesis</td>
<td>22nd Sept.</td>
</tr>
<tr>
<td>Final partner reports</td>
<td>All partners-FL</td>
<td>15th November</td>
</tr>
</tbody>
</table>
It can be argued that the partners were well satisfied to the way project has organized project meetings. This argument is strongly supported by the internal evaluation reports. The internal evaluator, P6 SYNTHESIS made online survey of each transnational partner meeting and wrote the reports based on the responses of the partners who participated at the meetings. These reports are published with the final project report completed by the co-ordinating organization P1 Pressure Line. Therefore they are not discussed further in this external evaluation report.

Accordingly, transnational team working got good feedback. The power of project meetings is significant; whether you can build up the spirit of the project or you can kill partners’ enthusiasm.

II Project management

One of the key element of the evaluation process was the Internet survey which was completed at May-June 2013. It was targeted to all TAKE CARE project partners in eight participating countries. Additionally, the project management and project performance was evaluated by the participants at the fourth project meeting in Cyprus, in October 2013. Next, the Internet survey summary are discussed and then, the project management evaluation summary is analysed.

The survey was completed as an Internet survey via the Survey Monkey programme. The survey can be divided into three separate themes:

- quality of the application process
- quality of the partnership
- quality of the project administration

The analysis on partners opinions on these themes can be deemed as being excellent.

The project management performance evaluation was also divided into three themes:

- Project Management's Rating
- Overall Project Performance
- SWOT analysis

As it was the case with the opinions in the Internet survey, the results of the project management's rating, thus, the overall project performance assessment is also excellent.

SWOT Analysis (also known as SWOT Matrix) is a simple but useful framework for analysing a project's strengths and weaknesses, as well as the opportunities and threats the project faces.

In short, the respondents considered that the project have a lot of strengths. The following SWOT Matrix presents the synopsis of the respondents' comments on what they considered as being strengths, weaknesses, as well as opportunities and threats.

---

1The survey questions i.e., Take Care Midterm External Evaluation Quality Assessment Form and survey report have been presented and discussed in the interim external evaluation report, published in November 2013. Thus, the survey summary only is displayed here. The same concerns the project management and project performance report.
STRENGTHS
-very good team
-good spirit and atmosphere
-good management
-high quality of material & products
-tolerance, respect, good work attitude
-communication & co-operation
-actual topic and project idea

WEAKNESSES
-some slight miscommunication between 2 partners
-long discussions sometimes useless
-clearer information on financial issues for some partners
-better time management for meetings so to save time
(avoid or limit irrelevant questions)

OPPORTUNITIES
-to commercialise products
-to apply the products with the target groups
and achieve sustainability
-improvement of migrant situation
-useful and innovative materials at the university
(with international students)

THREATS
-I cannot see any
-no threats

In terms of financial administration, this evaluator has found that the project has established and maintained a compliant and effective system to meet the requirements of both the co-ordinator and its audit responsibilities but also the exacting requirements of the Education, Audiovisual and Culture Executive Agency.

Partner contracts were issued at project outset and included total budget, breakdown of costs within each category and payment schedule i.e., payment dates and payments amounts for each partner.

The partners were required to submit their financial claims on a half-year basis. Each partner utilises a claim form and specially designed Take Care templates for pay roll list, staff cost time sheet, other costs, subcontracting costs, travel and subsistence costs and travel by car costs. These templates are available on the project's Drop-box area.

Based on the internet survey and project management performance research, the evaluator's review of the project documentation, two monitoring visits, discussions with the project partners and consultations with the co-ordinator Ms. Svetlana Rashkov, it is clear that project management performed its tasks extremely well.

7 PROJECT MATERIAL DEVELOPMENT

In this sector, the evaluation of the project materials such as the project brand and logo is presented. Second, the project web site is evaluated. Then, the project outcomes as they are available in the project website are discussed and evaluated.

I Project brand

The project brand and logo as well as other dissemination material includes design of visual identity, graphical materials and design and delivery of the web site. This work was led by the project co-ordinator Pressure Line. From the beginning of the project, it was clear that the visual identity design was very professional as the following quote from the kick-meeting minutes shows:
"The project logo was presented and approved by all partners. The identity elements have been chosen and developed in relation with the project topic and feature the following characteristics:

Medical element (in the logo)
Signing, routing, exit / a way out (in the logo)
Slogan "Be healthy"

Panton colours – the same colours have to be used by all partners in all countries when producing dissemination materials
Fonts: Helvetica; Pacifico
Squares – graphic element, could be used for creating various layouts
Use the new logo of the programme
Use the disclaimer (it's provided in all partner languages)
Pictures – the pictures used for the dissemination materials are copyright free"

Accordingly, the Take Care Family and powerpoint presentation templates were developed to support the project brand. Finally, a visual identity manual was created for the partners. Beneath is a screen-shot of this manual:

The project brand logo(s)
The external evaluator is very impressed with the brand design, it is engaging and commendably was used throughout the project as a consistent core identity.

II Project web site

Take Care project has a public website. It aims to serve people who want to find some basic data of the project, like Take Care project partners, stakeholders, target groups and objectives of the project. There are also some useful web links for those groups.

Next, the project website sections are presented and evaluated. Some sections include project outcomes and/or deliverables, which are accordingly evaluated here.

P1 Pressure Line was responsible for the realisation of a very attractive portal website, screenshot as follows:

Home
This opening page introduces what the Take Care project. It also invites a visitor to click buttons for further information on healthcare issues for immigrants in the Netherlands, Lithuania, Germany, Romania, Spain, Bulgaria, Portugal and Cyprus. For example, by clicking the button an interested visitor/migrant can get more information in German. Additionally, you are presented the contents of the Take Care Healthcare Language Guide for Migrants, in German. Most notably, a migrant can individually and interactively learn useful phrases and sayings related to his/her
healthcare. Finally, all of this is also available in seven other languages (Dutch, Lithuanian, Romanian, Spanish, Bulgarian, Portuguese and Greek).

**About the project**
This section indicates in English and in eight partner languages in a detailed way the rationale, aims and products & activities of the project.

**Partners**
Partners section presents the project partners (by name, logo, contact information and by their websites).

**Associated partners**
This section introduces the partners' associated partners.

**Events**
Events section displays what kind of dissemination and exploitation seminars/activities the partners have organised. Additionally, it shows pictures of those events and also information on the language workshops and courses the partners conducted for their target groups.

**Good practices**
The section shows good practices selected from the partner countries on the title level.

This section should have had an introduction concerning why there are good practices and why those practices were chosen and how the project has used them.

**Visibility**
Visibility section is also related to dissemination and exploitation activities on EU and national level. It also includes visual identity design issues of the project as well as dissemination brochure of the project in eight project languages.

Finally, there are Useful links and Contact sections including items from each partner country.

The website is of an high quality design standard, is aesthetically pleasing and offers superb navigation. My evaluation of the website is best presented across the following headings:

<table>
<thead>
<tr>
<th>Assessment headings</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interface</td>
<td>The style, font, and layout of the website are good. It is clearly presented without clutter or over complication.</td>
</tr>
<tr>
<td>Accessibility</td>
<td>The web site was checked by WAVE Web Accessibility Tool, which detected no errors.</td>
</tr>
<tr>
<td>Surfing</td>
<td>The site is well structured with a strong home page.</td>
</tr>
<tr>
<td>Content</td>
<td>Clear, pertinent information is presented in a well structured way.</td>
</tr>
<tr>
<td>Translations/Language versions</td>
<td>The web site's home section is presented in English. Eight other languages German, Dutch, Lithuanian, Romanian, Spanish, Bulgarian &amp; Portuguese are also available on the Home, About the Project, Visibility (there, please see TAKE CARE DISSEMINATION BROCHURE)</td>
</tr>
<tr>
<td>Interactivity</td>
<td>The web site includes interactive sectors available at the Home page. There you can find</td>
</tr>
</tbody>
</table>
The web site performance statistics (in sense of number of visitors etc.) and technical issues are not discussed in this report. Obviously, the partnership reports the performance and technical issues in its final report.

In all, it might be a common phenomenon for projects that project web sites are not updated regularly, even though they are one of the most important outcomes of projects. Fortunately, this was not the case in the Take Care project; the web site is regularly updated. Most notably, project websites are the main dissemination channels during and after the duration of a project.

III Project outcomes: The Take Care Product Family

Since the Take Care Healthcare Language Guide consists of four complementary products (Glossary, Basic Language Emergency Kit, Phrase Book & Medical Route), we can call it The Take Care Product Family. This product family is next evaluated.

Take Care Healthcare Language Guide is available in 17 partner languages and in English. The Glossary and the Basic Language Emergency Kit are also available in 8 migrant languages.

The external evaluator asked an experienced Finnish GP (works in a public health centre in the Western Finland) to monitor the project outcomes in the printed form. The Finnish GP is used to
work with migrant patients as well.

In short, the products elaborated by the project partnership include a massive amount of data (words, terms and phrases etc.) as to healthcare issues of migrants and professionals in the area. Most notably, the project nature is more linguistic than medical. Accordingly, the content and products available at the moment are quite comprehensive in this sense and may be used by migrants when they need to express themselves to experts or discuss health issues within healthcare services in the participating countries. Finally, the quality of the materials are high.

Glossary (Word Fan)

The glossary is divided in 14 sub-sections:

1. Insurance (incl. 20 terms or words of this area)
2. Healthy Lifestyle / Prevention (22 terms)
3. Accident / Emergency / Injury (30 terms)
4. Seeing a General Practitioner (30 terms)
5. At the hospital (30 terms)
6. (Chronic) Diseases (29 terms)
7. At the Dentist (30 terms)
8. Pregnancy and Child Health (24 terms)
9. Mental and Neurological Health (30 terms)
10. Geriatric Health (23 terms)
11. Physiotherapy (16 terms)
12. At The Pharmacy (30 terms)
13. Parts of the Body (48 terms)
14. Common symptoms
   14.1 Types of Pain (5 terms)
   14.2 General Symptoms (15 terms)
   14.3 Mainly Respiratory (7 terms)
   14.4 Mainly Cardiovascular (5 terms)
   14.5 Mainly Gastrointestinal (5 terms)
   14.6 Related To the Nervous System / Psychological (14 terms)
   14.7 Skin-related (13 terms)

The glossary is a good way to present the key words and terms in healthcare for target groups of the project. The photo of the Word Fan shows how it was designed and constructed:
Basic Language Emergency Kit

The Basic Language Emergency Kit is a guide which includes 43 different phrases to be used in emergency situation and/or when meeting the ambulance personnel. Part of the first page of The Basic Language Emergency Kit is screen-shot beneath:

The Take Care Family Phrase Book

The Phrase book introduces so called Take Care Family. The members of this family are Mother, Father, Daughter, Son and Grandmother. The book covers 14 important issues in the family healthcare:

1. Insurance
2. Healthy Lifestyle / Prevention
3. Accident/Emergency/Injury
4. Seeing a General Practitioner
5. At the Hospital
6. (Chronic) Diseases
7. At the Dentist
8. Pregnancy and Child Health
9. Mental and Neurological Health
10. Geriatric Health
11. Physiotherapy
12. At the Pharmacy
13. Parts of the Body
14. Common Symptoms

The Take Care Family members tells readers of the book what phrases one could or should use when e.g, visiting a pharmacy (At the Pharmacy). Additionally, a reader are guided by the double
page in questions to check the corresponding words from the Take Care Glossary (excluding Parts of the Body & Common Symptoms). The following picture shows the cover page of The Take Care Family Phrase Book. Also this book is available in eight partner country languages.

Medical Route

The Medical Route is an introduction to the basic issues of a partner countries medical and/or health care services. For example, from the medical route of Germany elderly migrants can find out what one can expect and/or buy in such organisations as pharmacies and drugstores do in Germany:

"Most medicines in Germany are only available in a pharmacy, many of them only with a prescription. There is a co-payment for adults, children and socially disadvantaged persons don’t have to pay for medicine. For minor illness a pharmacist can advise you, which medicine can help. Drugstores and supermarkets only sell “over the counter” medicines, such as homeopathic products, but no stronger medicines for such as painkillers. There is a pharmacy emergency service for night time and weekends, which you can find in your local newspaper." (Here in English, in the original document in German).

The Medical Route is printed in A3-form thus it can be used like a poster.

The project products are available in the home site of the project website under the headings of the partner countries as screen-shot beneath:
IV Training workshops and language courses

The Take Care Training Workshop

The Take Care training workshops are designed to enable professionals working for/with migrants to facilitate migrants’ learning of healthcare language and communication. Such awareness, knowledge and skills contribute to the successful integration of migrants’ in their host countries as a win-win outcome for all.

The main educational resource featured in the workshops is the Take Care Healthcare Language guide. Depending on the needs or interests of the enrolled participants the workshop trainers might bring in additional reference materials about adult education, language education and/or healthcare matters.

Partners agreed to the following 10 training module structure and content as follows:

1. Introduction to the Take Care Project and the Healthcare Language guide
2. The reality of immigration phenomena in the community in recent years
3. Overview of the national healthcare system and issues relevant to migrants
4. Working with multicultural groups
5. Description of methodology
6. Demonstrative session using the Healthcare Language Guide
7. Evaluation and feedback
8. Leadership and language teaching management
9. Teaching adults/Techniques for working with adults
10. Review (moderated discussion)

The workshops were conducted by each partner in the Spring and Summer of 2014. The participants of the training workshops were invited to fill in feedback forms with a few quantitative and open questions. They were asked to point out the strengths and weaknesses of the workshop experience, as well as to opportunities, planned actions and further needs related to using the Take Care resources in the future.

Take Care Short language courses
Take Care project partners offered short language courses for migrants. The aim was to improve migrants' skills in the language of their host country. The course programme followed the structure and contents of the Take Care Family Phrase Book. Respectively, the course modules were as follows:

0. Short presentation of the project and the website
1. Insurance
   - intended learning outcomes: By the end of this session the participants will be able to
     - greet someone in local language
     - ask for information about health insurance
     - understand the info on health insurance
     - read and sign the contract
2. Healthy lifestyle/prevention:
   - ask for and give advise about healthy living and prevention
3. Accident/emergency/injury:
   - understand and use properly the health care services, including emergency services
4. Seeing a general practitioner:
   - describe symptoms to health professionals
   - distinguish some medical specialities
5. At the hospital
   - ask and give information about one’s physical and psychological conditions
6. Chronic diseases
   - identify and express verbally symptoms
   - interact with professionals
7. At the Dentist
   - arrange and interact in a medical consultation
8. Pregnancy and Child Care
   - access useful information about pregnancy
   - ask questions and arrange consultations in the paediatrician
9. Mental and neurological health
   - describe one’s physical and psychological symptoms
   - understand the recommendations
10. Geriatric health
    - identify some common diseases in elderly people
    - follow recommendations
11. Physiotherapy
    - identify and express verbally the parts of the human body
12. At the Pharmacy
    - interact in the pharmacy

The intended target group of the short language courses were immigrants who experienced language difficulties when they are dealing with health problems. The level of the course was for A1/A2 according to The Common European Framework of Reference for Languages. The planned course duration was 20 hours.

The training content is appropriately engaging in simple, easy to understand language. The external evaluator is impressed with the level of detail in each module. Usability is enhanced as each module starts by highlighting the learning outcomes.
The workshops as well short language courses were reported. The project partnership developed a common language course report template loaded on the project's Dropbox free service area. Trainees were asked to fill in feedback questionnaires. In short, all workshops and language courses were evaluated as being useful and good for workshops and language course participants in each partner countries. As an evidence we quote here the evaluation of the language course organised in Bulgaria in May 2014:

<table>
<thead>
<tr>
<th>Clearness</th>
<th>4,6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Topics used in the language materials</td>
<td>5,0</td>
</tr>
<tr>
<td>Usefulness for language learning</td>
<td>4,8</td>
</tr>
<tr>
<td>Usefulness for integration</td>
<td>4,5</td>
</tr>
</tbody>
</table>

What did the participants gain from the courses?
- Healthcare vocabulary for practical use in real life situations
- Information on the healthcare system in Bulgaria
- Language learning materials for self-study purposes

What were the most useful resources used?
- Glossary / word fan
- Phrase book
- Basic language emergency kit

Quotes:
- “The language information is extremely useful and practical for healthcare matters.”
- “Now I feel more confident and prepared for dealing with healthcare matters, mainly when it comes to basic symptoms and parts of the human body.”
- “Very useful information about different diseases and medical specialists.”

The training workshops and language courses in each partner country are displayed in the project's web site under “Events”. There are good reasons to argue, that training workshops and language courses are excellent for dissemination and exploitation of the grass-roots level.

"For 20 years in Bulgaria I see summarised information about the healthcare system for the first time. Well done!"

"The developed materials will be of great help for working with migrants and increase their motivation for language learning"
When the project ended we asked the partners to rate the performance of each work package:

<table>
<thead>
<tr>
<th>WP</th>
<th>Management &amp; co-ordination</th>
<th>excellent</th>
<th>good</th>
<th>fair</th>
</tr>
</thead>
<tbody>
<tr>
<td>WP 2</td>
<td>Research</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WP 3</td>
<td>Methodology</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WP 4</td>
<td>Development</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WP 5</td>
<td>Training &amp; workshops</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WP 6</td>
<td>Monitoring &amp; evaluation</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WP 7</td>
<td>Dissemination</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WP 8</td>
<td>Exploitation</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8 DISSEMINATION AND EXPLOITATION ACTIVITIES

I Dissemination

Dissemination and exploitation are central to the success of the Take Care project and carried priority amongst partners from the outset. The aim of the dissemination and exploitation was to increase the value and impact of the project and its outcomes. To assist partner’s understanding of dissemination the dissemination issues were discussed and monitored in all project meetings and dissemination strategy has been developed.

The project dissemination strategy is a nine page in-depth documentary including general dissemination plan, project aspects for dissemination, target groups for dissemination, dissemination methods/activities and timescales and responsibilities.

The stated aim of the work package 7-dissemination- led by Ku Tu, Bulgaria was to increase the value and impact of the project and its learning outcomes in relation to mainstream practice and policy development. In addition, at the first partner meeting the lead dissemination partner gave a presentation to the consortium on what dissemination is.

The project developed a special dissemination leaflet and news letters (available in the web site under Visibility, in English and eight partner languages). Dissemination leaflet is screen-shot beneath:
In each partner countries, a great number of dissemination/exploitation actions have been completed during the project. Most of them are available on the project website under the headings “Events & Visibility”. The first project year was focused on one hand on an awareness-raising campaign of the project, its goals and planned activities, and on the other, on involving the target groups in the development of the project products. The dissemination goals for the second year of the project included a more focused dissemination of the already developed products, their successful application with the target groups and the direct beneficiaries as well as establishing channels for ensuring sustainability and continuous use of the products in the long run.

The most common means for dissemination included:

- Meetings with associated partners and target groups representatives – migrant organisations and communities, moderators, healthcare providers and professionals; collecting feedback, methodology testing, etc.
- Various events involving the target groups – training workshops, short language courses, exploitation seminars, final project conference, dissemination events at national level, etc.
- Emailings, newsletters
- Project website
- National and international conferences and events for introducing the project idea and establishing cooperation opportunities for the future project activities
- Partner meetings on EU level
- Printed dissemination materials
- Organisations’ websites
- Social media

The dissemination activities so far have resulted in the following:
Over 3,300 target groups representatives were directly involved in the project and reached by the developed products

A network of 53 associated partners was set up and many more contributed to the project development

People from a large variety of sectors were involved in the project development and application of the outcomes. They can be clustered to:

- Migrant organisations, migrant communities, migrants
- Healthcare providers, health professionals and practitioners
- Educational organisations (including language learning and adult educational providers)
- Teachers, trainers, researchers, students
- NGOs and organisations dealing with integration issues
- Public authorities for immigration and healthcare
- Policy makers, local authorities, governmental institutions
- Cultural centres and organisations
- Organizations involved in European cooperation projects

72 migrant organisations directly involved throughout the project

85 healthcare providers directly involved throughout the project

117 educational providers, teachers and trainers directly involved throughout the project

17 training workshops with more than 280 participants organized in the 8 partner countries

25 language courses with more than 300 participants organized in the 8 partner countries

The HLGM provided to the language departments of more than 70 migrant organisations and language providers and used within numerous language courses with over 1,000 migrants

12 exploitation seminars with 319 participants organized in the 8 partner countries

A final project conference with 80 project stakeholders organized in Spain

To conclude, it can be argued that thousands of people, of which over 3,300 people were directly involved, have been reached by a huge number of dissemination activities (events, training workshops and language courses, associated partners, web site, newsletters, publications, printed and online dissemination, events, etc.). These figures are available in the final dissemination report of the project conducted by P2 Ku Tu.

II Exploitation

As discussed in the section 6 Project performance review, the external evaluator raised a question
of what is dissemination and exploitation of a project and its outcomes. Accordingly, the project's exploitation plan begins with a discussion of what those concepts mean in the Take Care project:

...“They are closely related and mechanisms often overlap. Dissemination can take place from the beginning of a project and intensify as results are becoming available. Full exploitation can happen only when it becomes possible to transfer what has been learnt into new policies and improved practices. Furthermore, exploitation is a process that reaches beyond the life of the project so that its results are sustained. “

As with the work package 7 dissemination, the project partnership examined carefully the work package 8 exploitation and accordingly, created a detailed exploitation plan, displayed as follows:

**Aims of the project**
Help migrants to improve their knowledge about health matters in host country language;
Make health care more accessible for migrants and improve their integration;
Create a European wide network of associated partners;
Contribute to intercultural communication.

**Target Groups**
*Direct*
Migrants to EU member states with lack of knowledge skills
Migrant communities
Organisations supporting migrants integration and welfare
Adult educational institutions

*Indirect*
Healthcare providers
Policy makers, representatives. local/regional/national authorities
General public interested in the subject

**Take Care’ Project Exploitation Aims**
To disseminate, extend and sustain the European network at local/regional/national/European levels
To transfer and implement the training methodology
To implement, transfer and commercialise the Health Care Language Guide for Migrants
To disseminate and ensure sustainability of the web portal

**To ensure exploitation, partners will**
develop an exploitation plan focusing on identification of final beneficiaries at regional, national and EU level and identification of forums and/or events where final beneficiaries can be contacted;
organise an exploitation seminar in each partner country
for associated partners, migrant communities, organisations working for migrants, educational institutions and healthcare providers;
maintain the project website for a period of 3 years after the end of the project as a learning-oriented self-study product to be used by migrants and healthcare providers.

Exploitation seminars were held in partner countries during the Summer and Autumn. These activities are reported in the project web site (Events) screen-shot as follows:
As an example of the exploitation seminar reports we quote here the Spain Report developed by IFES:

SUMMARY OF THE FOUR EXPLOITATION SEMINARS HELD IN SPAIN

PROFILE OF THE PARTICIPANTS:
What kind of institution or organisation do you work for?
- □ Governmental institution
- □ Healthcare provider (15)
- □ Migrant organisation (16)
- □ Educational institution (13)
- □ Other (please specify):
  UNEMPLOYED (14)

Area of expertise:

ADULT EDUCATION / SOCIAL WORK / BUSINESS MANAGEMENT / COUNSELLING AND LABOUR INTEGRATION / PHARMACY / NURSING / HEALTH CARE

EVALUATION OF THE SEMINAR:
The organisation of the seminar was… Poor Excellent
The content of the seminar was… Not interesting Interesting
Was the seminar useful for you? Not useful Useful

EVALUATION OF THE TAKE CARE PROJECT:
The overall project concept and aims
The potential benefits for migrants
The quality of the project products
The applicability of the project products
The potential for sustainability of the project

COMMENTS:
What are the strengths and weaknesses of the Take Care Project?

THE PROJECT RESULTS ARE VERY USEFUL BUT THE PROBLEM IS TO FIND FINANCIAL RESOURCES TO PRODUCE THEM

How would you apply the Take Care products? Do you have any suggestions for future cooperation in the area of migrant integration?

THE TAKE CARE PRODUCTS SHOULD BE EXPLOITED BY HEALTH CARE PROVIDERS, MIGRANT ORGANISATIONS, TRAINING AND EDUCATIONAL INSTITUTIONS AND ABOVE ALL BY PUBLIC ADMINISTRATIONS

9 SUMMARY

Evaluation is a key aspect of the LLL programme. The external evaluator worked to a structured process by which the project's activities were assessed and understood. It involved analysing and interpreting data about the project in order to identify achievements and areas of weakness. The evaluation is an independent and objective view of the success of the Take Care project in relation to the extent to which the project met its objectives as laid out in the transnational work plan agreed by the partners in the application document. The evaluation findings are relevant to a wide audience, specifically:

The transnational partnership;
≥ Social partners;
≥ Local, regional and national organisations;
≥ Beneficiary groups;
≥ Other LLL projects, the LLL National Agencies and the European Commission;
≥ Policy- Makers

The project draws together eight organisations. The partners have a long experience in EU-funded transnational projects and some of the partners have acted as a co-ordinator of a transnational project funded by EU. Additionally, there were 53 associated partners in the project.

A very attractive project brand and portal website were advanced. The external evaluator found
that the website was a quality design, was aesthetically pleasing and offers good navigation and were impressed with the site interface in terms of style, font and layout.

The external evaluator is satisfied that the Take Care project has realised its potential to deliver a worthwhile and effective learning resource for to improve their knowledge.

Based on evaluator observations through a review of documentation, two monitoring visits, consultations with the co-ordinator Ms Svetlana Rashkov, and the feedback of the other partners it is clear that project management performed its tasks extremely well.

In terms of financial administration, this evaluator has found that the project has established and maintains a excellent system to meet the requirements of both the co-ordinator and its audit responsibilities but also the exacting requirements of the Education, Audiovisual and Culture Executive Agency.

When applicable the external evaluator was in consultation with the project co-ordinator and partner. Accordingly, we made some notes as to project issues and management from time to time.

It can be argued that the partners were well satisfied to the way project has organized project meetings (totally six project meetings). This argument is strongly supported by the internal evaluation reports. In conclusion, all meetings have offered a very sound platform for action planning and decision making, and the hospitality offered by all host partners was also widely praised. It is also clear that meetings were effectively managed by the chairperson Ms Svetlana Rashkov Pressure Line; clear objectives are set in advance; the meeting structure is adhered to, and overall, an open exchange of partner views is facilitated and encouraged. Meetings are carefully recorded, and the meeting minutes distributed to partners are both clear and concise, moreover these minutes have also been circulated within a very impressive timescale. Partners also reported that the meetings facilitated the establishment and development of working relationships between partners, whilst also providing an opportunity to establish new strategic linkages.

One of the key element of the evaluation process was the Internet survey. Additionally, the project management and project performance was evaluated by the participants at the fourth project meeting in October 2013. Based on the internet survey and project management performance research, the evaluator's review of the project documentation, two monitoring visits, discussions with the project partners and consultations with the co-ordinator Ms. Svetlana Rashkov, it is clear that project management performed its tasks extremely well.

The external evaluator is very impressed with the logo & brand design, it is engaging and commendably was used throughout the project as a consistent core identity. Additionally, the project's website is of an high quality design standard, is aesthetically pleasing and offers superb navigation.

The project's main product - the Take Care Healthcare Language Guide consists of four complementary products (Glossary, Basic Language Emergency Kit, Phrase Book & Medical Route), we can can call it The Take Care Product Family.

In short, the Take Care Product Family elaborated by the project partnership includes a massive amount of data (words, terms and phrases etc.) as to healthcare issues of migrants and professionals in the area. Most notably, the project nature is more linguistic than medical. Accordingly, the content and products comprehensive in this sense and will be used by migrants when they need to
express themselves to experts or discuss health issues within healthcare services in the participating countries. Finally, the quality of the Take Care Product Family is high.

The partners organised several Take Care training workshops, which were designed to enable professionals working for/with migrants to facilitate migrants’ learning of healthcare language and communication. The participants of the training workshops were invited to fill in feedback forms with a few quantitative and open questions. They were asked to point out the strengths and weaknesses of the workshop experience, as well as to opportunities, planned actions and further needs related to using the Take Care resources in the future.

Additionally, each project partner offered short language courses for migrants. The aim was to improve migrants' skills in the language of their host country. The course programme followed the structure and contents of the Take Care Family Phrase Book.

In short, all workshops and language courses were evaluated by the participants as being useful and good for workshops and language course participants in each partner countries. The training workshops and language courses in each partner country are displayed in the project's web site under “Events”. There are good reasons to argue, that training workshops and language courses are excellent for dissemination and exploitation of the grass-roots level.

Dissemination and exploitation are central to the success of the Take Care project and carried priority amongst partners from the outset. The project dissemination strategy is a nine page in-depth documentary. The project developed a special dissemination leaflet and news letters.

In each partner countries, a great number of dissemination/exploitation actions have been completed during the project's lifetime. Most of them are available on the project web site under the headings “Events & Visibility”.

As with the work package dissemination, the project partnership examined carefully the work package exploitation and accordingly, created a detailed exploitation plan. Exploitation seminars were held in partner countries during the Summer and Autumn.

There is evidence thousands of people, of which over 3,300 people were directly involved, have been reached by a huge number of dissemination activities (events, training workshops and language courses, associated partners, web site, newsletters, publications, printed and online dissemination, events, etc.). These figures are available in the final dissemination report of the project conducted by P2 Ku Tu.

In final conclusion, the external evaluator would like to compliment the Take Care project partnership on the delivery of a well executed learning and e-learning healthcare guide in the pertinent and often challenging theme of immigrant healthcare and language learning issues Europe. The next step could be a new network project where the outcomes could be developed and delivered/disseminated to wider audiences i.e, to other EU and associate member countries.