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The evaluation and quality plan of the ADVANTAGE JA describes the strategy and plan to secure high standards of quality of JA activities and deliverables. It establishes the process for monitoring activities and evaluation of the JA performance and deliverables.

It is composed by two complementary different parts.

**Part I Monitoring** explains in details the evaluation framework of the JA presenting an outline sketch of the information system and method for data collection that will be used by the ADVANTAGE JA to ascertain its results.

**Part II Annex Indicators Framework** describes the activities that should be performed in the JA in order to reach its objectives (description of WP and indicators). The development of the indicators framework is based on the description of each WP throughout the duration of the JA.

Both parts present the information system that WP3 “Evaluation of the JA” are going to use to conduct the evaluation of the JA, quality assurance and to drive the JA to its best success. It also includes the counteracting measures that will be put in place in case they are needed.



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## **D3.1 EVALUATION PLAN**

### **Part I Monitoring**

**Prepared by WP3 leaders**

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## Glossary terms

### Activity

The work of a group or organization to achieve an aim.

### Aim/Goal

A result that your plans or actions are intended to achieve.

### Committee

A small group of people chosen to represent a larger organization and either make decisions or collect information for it.

### Consortium

An organization of several businesses or banks joining together as a group for a shared purpose.

### Deliverable

Something that can be provided or achieved as a result of a process.

### Efficacy

The extent to which a specific intervention, procedure, regimen or service produces a beneficial result under ideal conditions.

### Evaluation

The process of judging something's quality, importance, or value, or a report that includes this information.

### Evaluation plan

A written document that describes how you will monitor and evaluate your program, so that you will be able to describe the “What”, the “How”, and the “Why It Matters” for your program and use evaluation results for program improvement and decision making. An evaluation plan is similar to a roadmap. It clarifies the steps needed to assess the processes and outcomes of a program. It is a dynamic tool (i.e., a “living document”) that should be updated on an ongoing basis to reflect program changes and priorities over time.

### Final evaluation report

A written document that describes how you monitored and evaluated your program. It presents the findings, conclusions, and recommendations from a particular evaluation, including recommendations for how evaluation results can be used to guide program improvement and decision making. While evaluation is an ongoing process, the term “final,” refers here to the last report of the funding period or the final report of the JA specific evaluation activity. The final report should describe the “What,” the “How,” and the “Why It Matters” questions about the JA.

### Interim reports

Interim or progress reports present the interim, preliminary, or initial evaluation findings. They are scheduled according to the specific needs of your evaluation users, often halfway through the execution of a project. The interim report is necessary to let a project's stakeholders know how an intervention is going. It provides information that will help the funders and other decision-makers determine whether to continue with the current direction, where to make adjustments if necessary, revise goals, add more resources or in the worst case scenario, to shut it down.

An interim report is similar to a final report, in that it includes a summary, a brief description of the progress, the evaluation thus far, and an overview of the financial situation. Any delays or deviations to the plan are included and explained, as well as any comparison between actual compared to expected results

### Leaflet

A small flat or folded sheet of printed matter, as an advertisement or notice, usually intended for free distribution containing advertising material or information about a political party, charity, etc.

### Meeting

A planned occasion when people come together to discuss something.

### Milestone

An important event in the development or history of the JA. A milestone is a scheduled event signifying an important decision making moment or the completion of a deliverable. Milestones are used as ADVANTAGE JA checkpoints to validate how the JA is progressing, thus allowing a proper monitoring of the implementation. They are a mandatory requisite by CHAFEA and WP1 must report on them against established deadlines.

### Monitoring

Continuous process of observing and checking. The supervision of activities in progress to ensure they are on course and on schedule in meeting the objectives and performance targets to high quality standards.

### Objective

Something that you plan to do or achieve.

### Outcome

This term has many meanings depending on its applicability. Simply an outcome is a change in a situation resulting from an action. More specifically, in relation to health, an outcome is the possible results that may stem from exposure to a causal factor; or the result of preventive, medical, surgical or therapeutic interventions or non-intervention. An outcome can also be viewed as the end result obtained from utilizing the structure and processes of health care delivery. Outcomes are often viewed as the bottom-line measure of the effectiveness of the health care delivery system.

## Press release

An official statement issued to newspapers/media giving information on a particular matter.

## Website

A website, also written as web site, or simply site, is a set of related web pages typically served from a single web domain.

## Introduction

### A) The ADVANTAGE JA

The Joint Action “Managing Frailty. A comprehensive approach to promote a disability-free advanced age in Europe: the ADVANTAGE initiative” is co-funded by the Third European Health Programme of the European Union 2014-2020. It has a budget of €3.5 million Euros and will run for 3 years from January 2017.

This Joint Action (JA) involves 22 Member States and over 40 organizations under the coordination of the Madrid Health Service-Getafe Hospital with the support of the Spanish Ministry of Health, Social Services and Equality.

The JA is structured around 8 Work Packages (WPs): WP1, WP2 and WP3 that are the horizontal work packages which focus on coordination, dissemination, monitoring and evaluation respectively and will direct the course of the work to ensure delivery of the expected outcomes; and five core work packages (WP4, WP5, WP6, WP7 and WP8) as detailed in Table 1.

**Table 1. Overview of Work packages**

WP Number	WP Title	Description
<b>WP1</b>	<i>Coordination of the JA</i>	Actions undertaken to manage the JA and to ensure it is implemented as planned.
<b>WP2</b>	<i>Communication, Awareness and Dissemination</i>	Actions undertaken to ensure that the aims, results and deliverables of the JA are tailored and accessible to the target groups and widely disseminated among stakeholders
<b>WP3</b>	<i>Evaluation of the JA</i>	Actions undertaken to monitor the effective progress of the JA against the established objectives and milestones.
<b>WP4</b>	<i>Knowing frailty at individual level</i>	Proposal on how to proceed after analysing the different components (screening, diagnosis) required to know who is frail or at risk of frailty, the instruments to measure it and the contribution of the individual to its management.
<b>WP5</b>	<i>Knowing frailty at population level</i>	Proposal on how to proceed after analysing the different components required to understand the incidence and prevalence of frailty-
<b>WP6</b>	<i>Managing frailty at individual level</i>	Proposal on how to proceed after analysing the different preventive and therapeutic approaches for frail people or at risk for developing frailty

<b>WP7</b>	<i>Models of Care to prevent or delay progression of frailty and enable people to live well with frailty</i>	Proposal on how to proceed after analysing different models of care, their components and their roles in providing a coordinated, continued and integrated care approach to address frailty.
<b>WP8</b>	<i>Extending and Expanding the knowledge on frailty to foster innovative policy on frailty</i>	Proposal on how to proceed after analysing the needs and approaches to establishing an evidence base for the management of frailty and to address the role of training and research to produce a well-prepared health workforce for older people with Frailty.

The general aim of this JA is to build a common understanding on frailty to be used in the Member States (MSs) by policy makers and other stakeholders involved in the management, both at individual and population level, of older people who are frail or at risk for developing frailty throughout the European Union (EU). The identification of the core components of frailty and its management should promote the required changes in the organization and implementation of care in the health and social systems in order to provide those models of care that will allow each MS to face this challenge using a common framework tailored to their own context and care system.

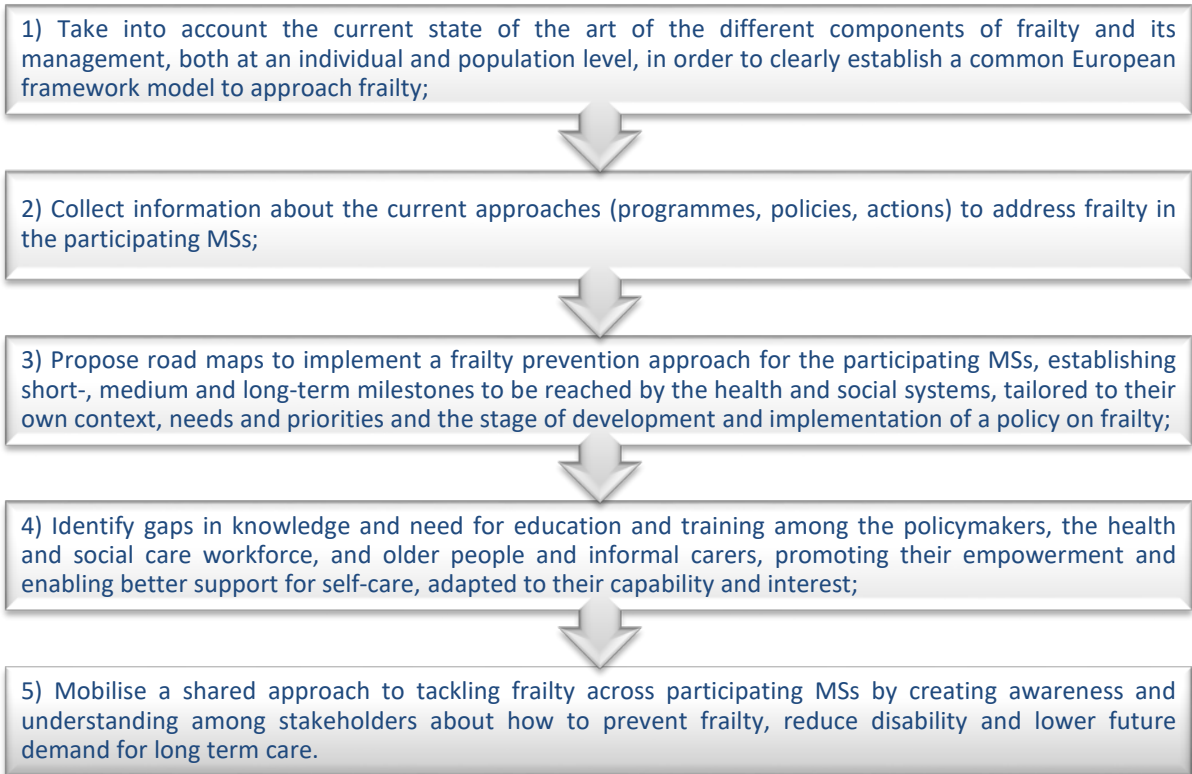
This JA will contribute to the reduction of disability and dependence and will prevent the growing healthcare demands from the increasing burden of chronic diseases. It will also lead to the development of improved strategies for diagnosis, care and education for frailty, disability and multimorbidity. It will contribute to a more effective response to the needs of older people in care delivery including gender sensitive aspects, through better care planning and coordination, innovative organizational approaches and better collaboration between professional and informal care, including support for self-management.

The JA will develop the concept of the 'Prevention of Frailty Approach' in health and social care services by encouraging consensus to build a common European framework on screening, early diagnosis, prevention, assessment and management of frailty, to be implemented by the MS.

To achieve this aim the JA will pursue the following objectives. See Figure 1. General Objectives of the JA.

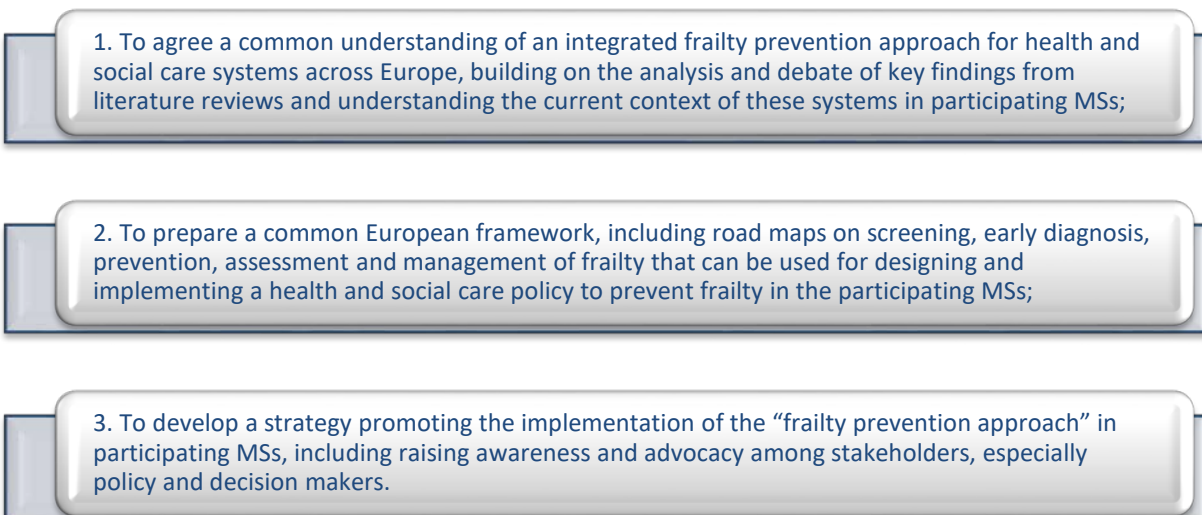


**Figure 1. General objectives of the Joint Action**



Accordingly, the JA aims to fulfil the following specific objectives. See Figure 2:

**Figure 2. Specific objectives of the Joint Action**



## B) The evaluation process

The evaluation is the systematic appraisal of the success of a project. It is a rigorous process that must be planned from the outset and conducted throughout the project lifetime.

Aims of the evaluation are to:

- Monitor the implementation process.
- Improve the work in progress.
- Increase the likelihood that the project will be successful.

The logic of evaluation is to indeed analyze, appraise and draw judgment on the success of a project, through systematic analysis of inputs, activities, outputs, outcomes and impacts of the intervention in relation to its objectives. In a Joint Action (JA) project this logic means to specify an evaluation plan that will build the foundation for the JA coordinator and JA team to monitor the JA's progress and evaluate the effects in relation to the quality of the implementation (*process evaluation*) and the success of the JA (*effect evaluation*).

*Process evaluation* aims to perform a longitudinal assessment and it is linked to the planning and organisation of the activities, focusing on whether the activities are implemented according to plan, how obstacles and difficulties will be identified during the implementation and dealt with, and how the quality of the JA implementation will be assured.

*Effect evaluation* aims to assess the JA at its end and it is linked to the specific objectives, and verify if the stated objectives have been achieved.

## C) Quality assurance

Qualitative and quantitative data obtained during the evaluation process will be interpreted and shared with JA members to provide meaningful, useful and accessible information for action and guide the best success of the JA. Since communication and reporting is a continuous process of sharing results with JA members, the following actions will be undertaken by WP3 Leader and Co-Leader to interactively discuss the main results of the evaluation:

- Monthly Email exchange with the coordination team.
- Email exchange with JA members in proximity of the two official evaluation period (January-February 2018 and January-February 2019).
- Working sessions during consortium meetings with partners involved in WP3.
- Monthly remote meetings with WPs Leader.
- Internal interim report for the coordination team every 6 months.
- Annual internal annual report for all JA members.
- Official Interim Evaluation Report (June 2018),
- Official Final Evaluation Period (December 2019).

The results of the evaluation process will be used to analyze the project progress and to set actions needed for the subsequent period.

### The evaluation plan of the JA

The deliverable D3.1 “Evaluation and Quality Plan” according to the Grant Agreement presents an outline sketch of the information system and method for data collection that will be used by the ADVANTAGE JA to ascertain its results. The document is assigned to Task 3.1 “Definition of the evaluation framework” within the Work Package 3, Evaluation of JA.

The design of the “Evaluation and Quality Plan”, from now on Evaluation plan design, is conducted jointly by the leader and co- leader of the WP3 (INRCA and DGS respectively). The development of quantitative or qualitative evaluation indicators was based on the different tasks in each WP.

The main purpose of this evaluation plan is to monitor the JA and to verify it is being implemented as planned and reaches the expected outputs. To this intend, the process evaluation will longitudinally assess the adherence to the work plan and monitoring the progress in all the WP in terms of JA activities in order to improve the work in progress and increase the likelihood of success.

On the other hand, the effect evaluation will assess the achievement of all planned objectives at the end of the JA. In order to properly evaluate the JA, the main focus is put on the milestones and deliverables since they relate to the main objectives and products.

In order to monitor the achievement of deliverables or milestones, the evaluation framework will set an early warning mechanism to be used as an alert system: it will send, to those responsible for the completion of the activity that is delayed, an alert in three different periods.

The information system described in this plan will be used to comprehensively assess the JA during its implementation giving the opportunity to the coordination team as well as to WPs leaders and co-leaders to correct any kind of drawbacks or deviations that might appear. In this sense, the evaluation framework will be easily adapted to the necessities and barriers encountered as well as to changes and priorities identified.

Throughout the JA, the primary beneficiary of the evaluation results will be the coordination team that will use it to monitor the progress and effects of the JA. Secondary beneficiaries will be WPs leaders and co-leaders that will be sustained in their scheduled activities to produce the most valuable outputs and outcomes, along with WP2 “Communication, Awareness and Dissemination”, for the dissemination of the final evaluation report.

The publication of the evaluation results (interim and final evaluation report) will facilitate the dissemination of good practise that is one of the core objectives of the JA. This dissemination will occur after the due month of the WP3 milestones and deliverables. The credibility of the process and its results will be granted by all WP leaders and co-leaders committed to follow an evaluation framework that facilitates data collection and analysis.

In particular, the interpretation of the interim and final results will be performed by WP1 “Coordination of the JA” and the WP3 “Evaluation of the JA”.

### Methodology for the ADVANTAGE JA evaluation

In the ADVANTAGE JA the work package which focuses on the evaluation process is WP3 “Evaluation of the JA”. Its aim is to evaluate the results of the actions undertaken by WP1 (Coordination) and WP2 (Dissemination) as well as those of the five core work packages (WP4 to WP8).

The overall objective is to monitor the JA and verify it is being implemented as planned and reaches the expected outputs.

More specifically, two important evaluation questions will lead the process:

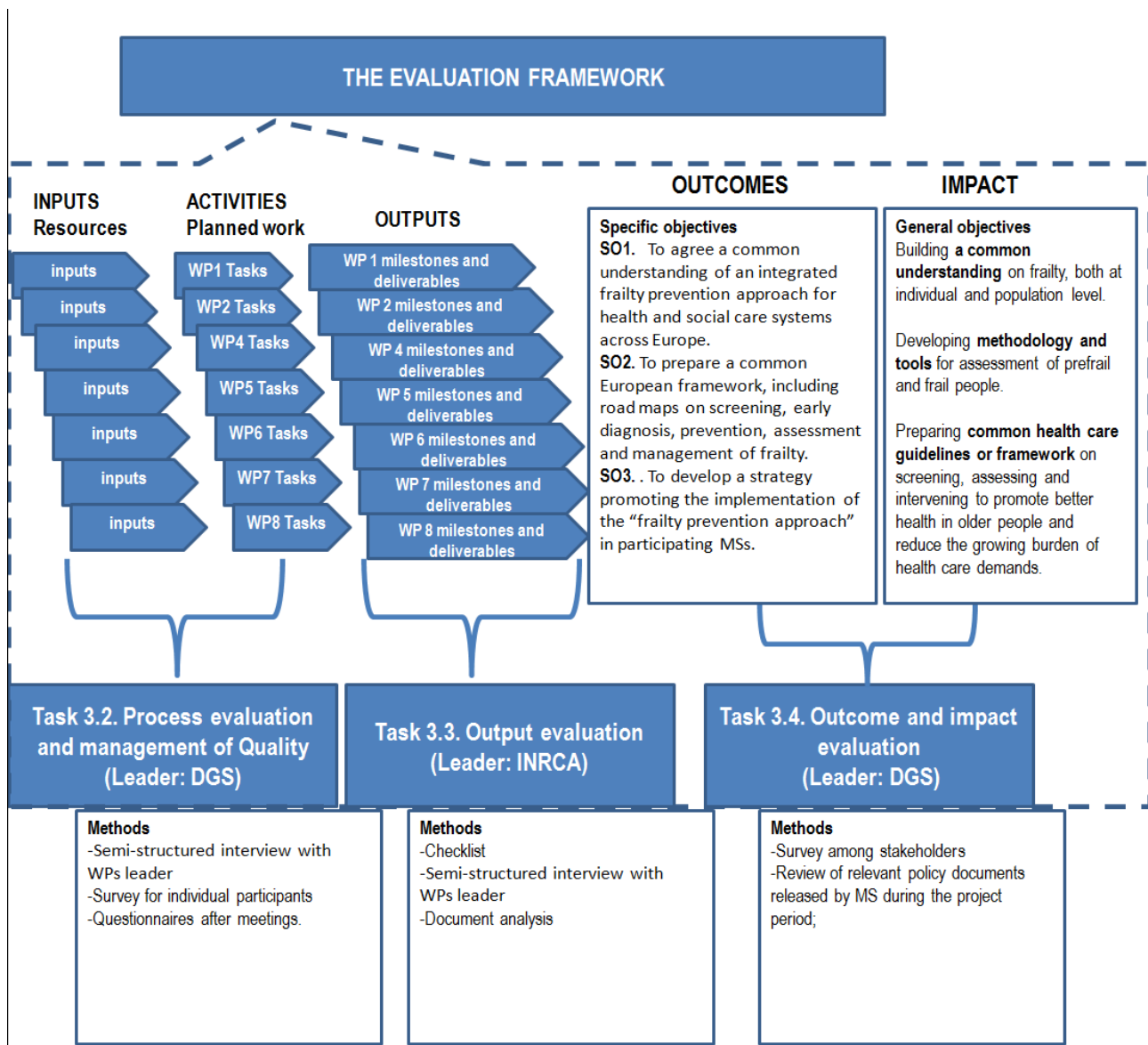
1. Is the JA meeting its process, outputs, outcomes and impact according to the Grant Agreement?
2. Are there any particular aspects of the ADVANTAGE JA implementation process (e.g. timing, networking, organization, communication, etc.) that needs to be improved or encouraged to increase the overall quality of the JA?

In order to answer these questions an evaluation framework is established and will be used at different stages:

- The process evaluation will assess the adherence to the work plan and monitor the progress in all the WP in terms of JA activities. This action will be carried out within the task 3.2 Process evaluation and management of quality.;
- The output evaluation will evaluate deliverables and milestones in terms of scheduling and time release. This work will be performed within the task 3.3 Output evaluation.
- Outcomes and Impact evaluation will appraise the intended, unintended and short-term effects of the JA. This action will be implemented through the task 3.4 Output and impact evaluation. The limited time-frame of the project does not allow for measuring long term impact.

Figure 3. The Evaluation framework, shows the connections between process, output, outcomes and impact and the related tasks as planned in the GA.

Figure 3. The evaluation framework



The evaluation process will be carried out using mixed-methods (both qualitative and quantitative) in order to comprehensively assess the JA during its implementation, to establish corrective measures in case of deviations and to boost the achievement of the most valuable outputs, outcomes and impact.

**Table 2. Mixed-methods design**

<b>Task</b>	<b>Method</b>	<b>Qualitative</b>	<b>Quantitative</b>
Task 3.2 Process evaluation and management of quality	Questionnaire after consortium meeting		X
	Semi-structured interview with WPs leader	X	
	Survey among ADVANTAGE JA individual participants		X
Task 3.3 Output evaluation	Checklist		X
	Semi-structured interview with WPs leader	X	
Task 3.4 Outcome and impact evaluation	Document analysis	X	
	Survey among stakeholders		X

## Process, Impact evaluation and Quality Management

This section aims to present the evaluation methodology that will be used by WP3, on the Process and Impact Evaluation in the ADVANTAGE JA.

The evaluation framework design is conducted jointly, by the leader and co- leader of the WP3 (INRCA and DGS respectively). In what concerns the evaluation indicators development it was formulated based on the different tasks in each WP, being the methodology quantitative or qualitative according to each indicator.

WP3 will evaluate the actions undertaken in all others WP's in order to monitor, not only, the JA progress, but also the adherence to the work plan and to verify that all is being implemented according to what was planned and agreed.

The proposed methodology will focus the evaluation in different objectives, actions and time frames.

As major areas:

- Process evaluation.
- Quality evaluation.
- Impact evaluation.

Through:

- Assessing the achievement of general aims of the JA.
- The achievement of individual work packages objectives and actions.
- The levels of satisfaction, participation and involvement.

In the following section process, quality and impact indicators are specified. Each indicator is defined in **Figure 4** . More detailed information about each specific indicator is defined in part II of this document.

### Process indicators

Process indicators will be the same in all JA WPs, allowing a standardization of the criteria and an evaluation of the general and specific aims/objectives of the JA, being the indicators the following:

- Collection of relevant scientific and grey literature.
- Identification and contact of at least 10 key stakeholders.
- Establishment of a structured process and development of questionnaires.
- Draft report on the state of the art in frailty prevention and management.
- Stakeholders identification.
- State of the art on frailty prevention and management.
- Draft report on the baseline status of frailty ("summary reports").
- Build consensus for a common framework for frailty between WP.
- Build consensus for a common framework for frailty between participating MSs.

- Presentation of the final draft of the frailty prevention approach framework.
- Release of document supporting the conceptual approach of the frailty prevention framework and roadmap.
- Participation of MSs in the organized meetings.
- Dissemination of the framework between policy makers and decision takers in the participating MS.
- Virtual and face-to-face meetings.
- Attendance to the Forum.
- Feedback from the participant on frailty framework document.
- Implementation of the action plan and awareness strategy.
  
- Number of meetings/teleconferences organized by WP (The number (N.) – considering the experience in former JA, at least 10 meeting per year. This is an indicator that could be interesting to define with WP Leaders.
- Attendance at the WP meetings (face to face or teleconferences) -  $(\text{Number of WPx partners attending each meeting} / \text{number of total WPx partners}) * 100 (\%)$ .
- Accomplishment of deadlines (%) -  $(\text{number of Deliverables and milestones completed on time} / \text{total number of deadlines}) * 100$ .

### Quality indicators

The criteria will be set as Goal, Tolerance and Critical Value for all indicators (**Figure 4**). Thus, it will be possible to measure quality through effectiveness and also through efficiency:

- % of all indicators that was higher than the goal established. We established these criteria in order to increase the number and quality of the JA products, even though they are not mentioned as a deliverable or milestone. Therefore we aim to value the complementary work.
- Satisfaction within WP members (Communication, organization, information received, feedback).
- Satisfaction within JA Coordination and Leaders/Co-Leaders of WPs (Communication, organization, information received, feedback of their work).

### Impact indicators

- Short-term effects of the JA (Number of changes or developments of products/procedures resulting from JA's work).
- Incorporation of JA result's into national documents and policies (Number of documents and policies produced resulting from JA's work).



**Figure 4. Indicator chart: Indicators Framework definition**

<b>Code</b>	First the Work Package number and then the task number E.G. :WP1_T1.1
<b>General Process Indicators</b>	The designation of the indicator
<b>Indicator Definition</b>	What's the indicator goal and what it should measure.
<b>Type of Indicator</b>	Output / Outcome
<b>Methodology</b>	Define if Quantitative or Qualitative
<b>Data Source</b>	Deliverables or Milestones
<b>Periodicity of data collection</b>	How often will the indicator be measured
<b>Goal</b>	The value to be considered "as achieved"
<b>Tolerance</b>	The predicted deviation from the goal
<b>Critical Value</b>	The Critical Value should correspond to benchmarking (the best result possible), and the value should be higher than the goal
<b>Result</b>	The value obtained at the moment of the evaluation
<b>Alert System</b>	According to the periodicity of data collection, an alarm is going to be sent to the responsible for the completion of the indicator in order to warn about its progress/execution. The first alert is sent for WP3 that monitors the progress of the task, if there's no progress made, the second alert is sent for the WP3 and WP1 (this WP will decide if the contingency plan should be activated).

Methodology for the evaluation indicators development and approval:

- WP3 builds and sends a draft proposal of evaluation indicators to JA coordination.
- WP1 revises and comments to WP3.
- WP3 introduces changes accordingly.
- WP3 sends to all WP leaders and co-leaders for their input (within the deadline period).
- WP3 finishes the document, and sends the final draft version to WP1.
- The Evaluation Plan is then approved by the SC.

## Alert System

According to the due months of the deliverables and milestones, we will have an alert system in order to monitor and alert for the need to achieve a deliverable or milestone.

The alert system will send, to those responsible for the completion, an alert in three different periods (Figure 5):

- 4 weeks before deadline (green).
- 2 weeks before deadline (yellow).
- 1 week before deadline (red).

In order to automatize and operationalize this system WP3e will work with WP2.

**Figure 5. The Alert System design**

WP1 - Coordination of the JA				Alert System									
Lead Beneficiary: SERMAS-HUG (Spain, leader), INCLIVA (Spain, Co-Leader)				4 Weeks before deadline	2 Weeks before deadline	1 Week before deadline							
Milestone Number	Milestone Title	Due Date (months)	Means of Verification										
MS1	Kick-off meeting	January 2017	Report of the KickOff										
MS2	Coordination meetings with WP leaders and co-leaders	February 2017	Minutes of meetings. M1,6,12,18,24,30,36										
MS3	Mid-term review	June 2018	Interim Report delivered										
MS4	Final conference	December 2019	Report, including conclusions on Final Conference										
MS5	Final review	December 2019	Successful fulfillment of all Project objectives										
MS38	Frailty prevention approach framework document (FFA)	December 2019	Frailty prevention approach framework document (FFA) released by coordinator										
MS39	Seminar discussion on FFA 1st draft	June 2018	Minutes and conclusions of the discussion with attendees										
Code	General Process Indicators	Indicator Definition	Type of Indicator	Methodology	Data Source	Periodicity of data collection	Goal	Tolerance	Critical Value	Result	Alert System		

## Output evaluation

The output evaluation will evaluate deliverables and milestones in terms of scheduling and time release. According to the GA, this work will be performed as task 3.3 Output evaluation.

The task leader (INRCA) will set up an internal committee, composed by 2 professionals with specific competency in project management, working at the National Institute of Health and Science on Aging (Ancona, Italy) and interested in the process of frailty prevention, which will review the following outputs See Table 3. Methods for the output evaluation.

- The timely and appropriate achievement of deliverables; all deliverables produced according to GA will be assessed in order to analyse whether they have been produced on time and with the expected quality. The alert system will be used to evaluate step by step the process.
- The timely and appropriate achievement of milestones; all milestones listed in the GA will be evaluated in order to analyse to what extent they have been achieved (on time and with the expected completeness). The alert system will be used to evaluate step by step the process.
- All scientific publications (articles, books, scientific papers, reports, conference papers) that will be produced by ADVANTAGE JA participants will be collected and categorized.
- The timely analysis of the JA website as dissemination and communication tool will be performed in order to collect the number of visits, the counting of downloaded documents, easiness to find information, links to others sites, up to date information.

**Table 3. Methods for the output evaluation**

Output	Method	Indicator	Feedback
<b>Deliverables</b>	Semi-structured interview with WPs leader and co-leader+Alert System	<ul style="list-style-type: none"> <li>•Completeness</li> <li>•Timely achievement</li> </ul>	Written feedback will be sent to WPs leader, co-leader and tasks leaders
<b>Milestones</b>	Semi-structured interview with WPs leader and co-leader+Alert System	<ul style="list-style-type: none"> <li>•Level of achievement</li> <li>•Timely achievement</li> </ul>	Written feedback will be sent to WPs leader and co-leader
<b>Scientific publications</b>	Document analysis	<ul style="list-style-type: none"> <li>•Time release</li> <li>•Amount of publications</li> </ul>	Written feedback will be sent to authors
<b>Dissemination and communication tools</b>	Document analysis	<ul style="list-style-type: none"> <li>•Number of visits</li> <li>•Number of downloaded documents</li> <li>•easiness to find information</li> <li>•link to other sites</li> <li>•up to date information</li> </ul>	Written feedback will be sent to WPs leader, co-leader and tasks leaders

Furthermore, according to the GA the following output indicators will be monitored.

Specific Objective Number	SO1	Method used to monitor the indicator
<b>Specific Objective name</b>	To agree a common understanding of a frailty prevention approach (FPA) for EU health and social care systems, building on the analysis and debate of key findings from the literature reviews and understanding the current context of these systems in participating MSs.	

<b>Output Indicator(s)</b>	<b>Target</b>	
A draft report on the state of the art in frailty prevention and management, based on scientific and grey literature documents will be released and circulated among partners by December 2017. (WP4,5, 6, 7,8)	The draft report on the state of the art in frailty prevention is released and 90% of the participating MSs have contributed to it.	Semi-structured interview with WPs leader and co-leader
The stakeholders identified in each participant MS will be contacted by Partners to present the JA, advocate for the frailty prevention approach and ask for their involvement by June 2017	50% of the stakeholders who were contacted respond positively to an active involvement in the JA implementation in their respective domain and country	Semi-structured interview with WP2 leader and co-leader
A draft report on the baseline status of frailty screening, prevention, assessment and management in participating MSs will be released and circulated amongst partners by June 2018. (WP4,5,6, 7, 8)	The draft report on each MSs baseline status of frailty screening, prevention, assessment and management will be released and 90% of the participating MSs will have contributed to it.	Semi-structured interview with WP1 leader and co-leader

<b>Specific Objective Number</b>	<b>SO2</b>	<b>Method used to monitor the indicator</b>
<b>Specific Objective name</b>	To prepare a common framework, including road maps on screening, early diagnosis, prevention, assessment and management of frailty that might be adopted for designing and implementing a health and social care policy to prevent frailty at an EU level.	
<b>Output Indicator(s)</b>	<b>Target</b>	
A set of documents supporting the conceptual approach of the frailty prevention framework and roadmap are released by June 2018 and October 2019	100% of policy briefs and final documents relating to the frailty prevention approach are released as scheduled and disseminated to the target groups within the JA	Document analysis

<b>Specific Objective Number</b>	<b>SO3</b>	<b>Method used to monitor the indicator</b>
<b>Specific Objective name</b>	To develop a strategy promoting the implementation of the frailty prevention approach in the participating MSs, including raising awareness and encouraging advocacy among	

	stakeholders, especially policy and decision makers.	
<b>Output Indicator(s)</b>	<b>Target</b>	
The audience in the forum actively participates in the debates and give pertinent feedback to tailor the contents and layout of the frailty framework document to make it more accessible and useful for the target groups.	75% of the participants give their feed-back on the frailty framework document	Participants rates

The results of this internal evaluation will be shared annually with all JA members and every 6 months to the coordination team. WP3 Leader and Co-leader will use internal interim report (for the coordination team) and internal annual report (for all JA members) to present the results obtained.



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## **D3.1 EVALUATION PLAN**

### **Part II: ANNEX INDICATORS FRAMEWORK**

Prepared by WP3 leaders

(Andreia Silva; Miguel Arriaga; Nicole Chaves; Rita Horgan)

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## 1. Executive Summary

In order to facilitate the evaluation process, the monitoring of the ADVANTAGE JA has to be organized and oriented towards the activities foreseen in the Grant Agreement and the verification whether its deliverables and milestones are appropriately achieved, and the satisfaction from different stakeholders.

The evaluation will be held at different levels: general aims of the Joint action (JA), individual work packages objectives and actions and important general events such as General Assembly and stakeholders meetings which are held all along the JA.

The monitoring and impact assessment framework for ADVANTAGE JA has been designed in two complementary parts, the Indicators Framework and the Evaluation Plan.

- The Indicators Framework regards the indicators for those activities that should be performed in the JA in order to reach its objectives (description of WP and indicators). The layout of the indicators framework is based on the description of each WP throughout the duration of the JA.
- The Evaluation Plan describes how to assess whether the original objectives of ADVANTAGE JA are reached.

## 2. General JA Indicators

### **Aim**

The general aim of this JA is to build a common understanding on frailty to be used in the Member States (MSs) by policy makers and other stakeholders involved in the management, both at individual and population level, of older people who are frail or at risk for developing frailty throughout the European Union (EU).

### **Objective**

1. To agree a common understanding of an integrated frailty prevention approach (FPA) for health and social care systems across Europe, building on the analysis and debate of key findings from literature reviews and understanding the current context of these systems in participating MSs;



## Process Indicators

<b>Code_Name</b>	0_1 Collection of relevant scientific and grey literature
<b>Indicator definition</b>	Number of partners that take part in the collection of relevant scientific and grey literature documents on frailty prevention and management activities (WP 4, 5, 6, 7, 8).
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP leaders and co leaders
<b>Periodicity of data collection</b>	June 2017
<b>Goal</b>	75% of the partners have collected information
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	0_2 Identification and contact of at least 10 key stakeholders
<b>Indicator definition</b>	Identification and contact of key stakeholders from the 3 target groups of the JA in participant MSs
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Partners
<b>Periodicity of data collection</b>	March 2017
<b>Goal</b>	75% of the participant MS identified key stakeholders
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	0_3 Establishment of a structured process and development questionnaires
<b>Indicator definition</b>	The coordination team, WP leaders and WP co-leaders as well as task leaders of the different WPs will establish a structured process and develop common questionnaires for collecting information in the participating MSs.
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Action plan and questionnaires completed
<b>Periodicity of data collection</b>	October 2017
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Output Indicators

<b>Code_Name</b>	0_4 Draft report on the state of the art in frailty prevention and management
<b>Indicator definition</b>	Draft report on the state of the art in frailty prevention and management, based on scientific and grey literature documents will be released and circulated among partners (WP 4, 5, 6, 7, 8)
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Release of the draft report on the state of the art in frailty prevention
<b>Periodicity of data collection</b>	August 2017
<b>Goal</b>	90% of MSs contribution
<b>Tolerance</b>	10%
<b>Critical value</b>	100%

<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code Name</b>	0_5 Stakeholders identification
<b>Indicator definition</b>	The stakeholders identified in each participant MS will be contacted by the partners of the JA, advocate for the frailty prevention approach and ask for their involvement (WP2)
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP2
<b>Periodicity of data collection</b>	March 2017
<b>Goal</b>	50%
<b>Tolerance</b>	50%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	0_6 Draft report on the baseline status of frailty
<b>Indicator definition</b>	Number of participating MSs that contributed to the Draft report on the baseline status survey on frailty screening, prevention, assessment and management in participating MSs will be released and circulated amongst partners (WP 4, WP5, WP6, WP7, WP8)
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP leaders and coleaders
<b>Periodicity of data collection</b>	April 2018
<b>Goal</b>	90% of MSs participation

<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Outcome/Impact Indicator(s)

<b>Code_Name</b>	0_7 state of the art on frailty management
<b>Indicator definition</b>	Information from the state of the art on frailty management and from the background situation in each participating MS will be collected in each WP and will be analyzed, discussed and used to rationalize and build consensus in the frailty prevention approach framework
<b>Type of indicator</b>	Outcome/Impact
<b>Methodology</b>	Quantitative
<b>Data Source</b>	FPA document
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	70% of recommendations included
<b>Tolerance</b>	30%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Objective

2. To prepare common European framework, including road maps on screening, early diagnosis, prevention, assessment and management of frailty that can be used for designing and implementing a health and social care policy to prevent frailty in the participating MSs;

## Process Indicators

<b>Code_Name</b>	0_8 Build consensus for a common framework for frailty between WP
<b>Indicator definition</b>	The information from the state of the art on frailty collected in the different WPs will be analyzed, discussed and used to rationalize and build consensus for a common framework for frailty prevention policy (WP 4, 5, 6, 7, 8)
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Information included in the frailty framework
<b>Periodicity of data collection</b>	March 2018
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	0_9 Build consensus for a common framework for frailty between participating MSs
<b>Indicator definition</b>	The information from the baseline status in participating MSs will be collected in the different WP and analyzed, discussed and used to rationalize and build consensus for a framework for frailty prevention policy
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Information included in the frailty framework
<b>Periodicity of data collection</b>	June 2018
<b>Goal</b>	100%
<b>Tolerance</b>	0

<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	0_10 Presentation of the final draft of the frailty prevention approach framework
<b>Indicator definition</b>	The final draft of the frailty prevention approach framework is presented to an audience of stakeholders from the participant MSs in a forum to receive critical feedback and fine tune the final document
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP2
<b>Periodicity of data collection</b>	September 2018
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Output Indicators

<b>Code_Name</b>	0_11 Release of document supporting the conceptual approach of the frailty prevention framework and roadmap
<b>Indicator definition</b>	A set of documents supporting the conceptual approach of the frailty prevention framework and roadmap are released on time
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP1

<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Outcome/Impact Indicator(s)

<b>Code_Name</b>	0_12 Participation of MSs in the meeting organized
<b>Indicator definition</b>	Active participation of MS in the meeting organized to present the frailty prevention approach
<b>Type of indicator</b>	Outcome/Impact
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP2
<b>Periodicity of data collection</b>	June 2019
<b>Goal</b>	75%
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	0_13 Dissemination of the framework between policy makers and decision takers in the participating MS
<b>Indicator definition</b>	Stakeholders in the participant MS (including older adults themselves) are better informed about frailty and more aware of its consequences both at an individual and societal level
<b>Type of indicator</b>	Outcome/Impact
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Survey on stakeholders about Dissemination of the framework

<b>Periodicity of data collection</b>	March 2018, June 2018, , June 2019, August 2019
<b>Goal</b>	50%
<b>Tolerance</b>	50%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Objective

3. To develop a strategy promoting the implementation of the “frailty prevention approach” in participating MSs, including raising awareness and advocacy among stakeholders, especially policy and decision makers.

### Process Indicators

<b>Code_Name</b>	0_15 Virtual and face-to-face meetings
<b>Indicator definition</b>	Attendance to Virtual and face-to-face meetings with key stakeholders in the participating MSs at the start of the JA to inform and create awareness
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Partners
<b>Periodicity of data collection</b>	June 2017
<b>Goal</b>	75%
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan



<b>Code_Name</b>	0_16 Attendance to the Forum
<b>Indicator definition</b>	Attendance to a forum to present the final draft of the frailty prevention approach framework documents to key stakeholders will be organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP2
<b>Periodicity of data collection</b>	December 2018
<b>Goal</b>	75%
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Output Indicators

<b>Code_Name</b>	0_17 Feedback from the participant on frailty framework document
<b>Indicator definition</b>	Percentage of stakeholders' that participated actively in tailoring the contents and layout of the frailty framework document to make it more accessible and useful for the target groups
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP2
<b>Periodicity of data collection</b>	December 2018
<b>Goal</b>	75%
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Outcome/Impact Indicator(s)

<b>Code_Name</b>	0_18 Implementation of the action plan and awareness strategy
<b>Indicator definition</b>	An initial advocacy and awareness strategy promoting the 'frailty prevention approach' in the participating MS is designed and final version fully implemented
<b>Type of indicator</b>	Outcome/Impact
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Partners
<b>Periodicity of data collection</b>	March 2017, December 2018
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### 3. WP1: Coordination of the JA

#### Aim

Overall management of the JA to ensure it is implemented as planned.

#### Objectives

- To effectively monitor the JA, in administrative and financial terms;
- To guarantee the adherence to the work plan, to the overall project aim, available resources and timing;
- To undertake quality assessment of JA progress, results and impact;
- To secure timely submission of interim progress reports and cost statements to the Commission;
- To ensure that "Description of Work" and "Consortium Agreement" are maintained and updated when necessary;
- Technical coordination and results integration;
- Administrative JA management ;
- Risks management.

## Milestones

**MS1.** Kick-off meeting – January 2017;

**MS2.** Coordination meetings with WP leaders and co-leaders – January 2017;

**MS3.** Mid-term review – June 2018;

Extra milestone Discussion with MS on the roadmaps for the FPA – February 2019

**MS4.** Final conference – December 2019;

**MS5.** Final review – December 2019;

**MS38.** Frailty prevention approach framework documents (FPA) – December 2019;

**MS39.** Seminar discussion on FPA 1<sup>st</sup> draft – September 2018

Extra milestone Discussion with MS on the roadmaps for the FPA – Date to be defined.

## Deliverables – something that can be provided or achieved as a result of a process

**D1.1:** Risk Management and contingency plan (March 2017) – Public Report

Identification of critical risk events/processes which could have an adverse impact on the action, likelihood of occurrence, impact and consequences and measures to avoid / minimize such risks.

**D1.2:** JA Frailty definition (December 2017) – Public Report

Report including definition on frailty (that will be used for the JA) and based on the outcomes from the work of WPs 4 and WP5.

## Process Indicators

<b>Code_Name</b>	WP1_1 Number of meetings/teleconferences organized by WP1
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP1_2 Attendance to the WP meetings/teleconferences
<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP1_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	90% of deliverables on schedule
<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## Quality

<b>Code_Name</b>	WP1_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP1 Tasks reports and deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP1_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## Task Indicators

<b>Code_Name</b>	WP1_T1.1 : Technical coordination and results integration
<b>Indicator definition</b>	<ul style="list-style-type: none"> <li>- Detailing all tasks to be performed (weight: 25%): Yes/no</li> <li>- Defining all documents to be drafted (weight: 15%): Yes/no</li> <li>- Establishing the information and communication flow and feed-back to the partners ensuring a smooth running of the J A (weight: 15%):Yes/no</li> <li>- Coordination and compilation of deliverables and analysis of information and integration of results (weight: 15%):Yes/no</li> <li>- Organizing the scheduled meetings (face to face or virtual) and any extraordinary meetings, with WP leaders (weight: 15%): Yes/no.</li> <li>- SERMAS-HUG will coordinate the relationship between the different consortium bodies, the SC and GA will be established (weight:15%): Yes/no.</li> </ul>
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Reporting Period Documents
<b>Periodicity of data collection</b>	December 2017, June 2018, December 2018, June 2019, October 2019
<b>Goal</b>	75%
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP1_T1.2 : Administrative JA Management
<b>Indicator definition</b>	<ul style="list-style-type: none"> <li>- Preparing, organizing and chairing meetings (weight: 15%): Yes/no</li> <li>- Preparing status reports (weight:25%): Yes/no</li> </ul>

	<ul style="list-style-type: none"> <li>- Revision and approval of deliverables (weight:15%):Yes/no</li> <li>- Monitoring progress against the milestones, the budget and compliance with contract (weight:15%):Yes/no</li> <li>- Set-up and maintenance of JA archive (weight:15%):Yes/no</li> <li>- Reporting to the EC (weight:15%):Yes/no</li> </ul>
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Status Report, Reporting period documents
<b>Periodicity of data collection</b>	December 2017, June 2018, December 2018, June 2019, October 2019
<b>Goal</b>	75%
<b>Tolerance</b>	25%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP1_T1.3 : Risk Management
<b>Indicator definition</b>	A risk management and contingency plan will be developed based on identified potential risk that could impede the execution of certain phases of the JA.
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D1.1
<b>Periodicity of data collection</b>	March 2017
<b>Goal</b>	D1.1 is delivered on time
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 4. WP2: Communication, Awareness and Dissemination

### Aim

- To disseminate information about the challenge of frailty and disability and raise awareness and advocate for frailty prevention and management to reduce the burden on the health care system to relevant policy makers and other stakeholders in the participant MSs and EU level.
- To disseminate the frailty prevention approach (FPA) framework and roadmap for future health care policies, as well as other outcomes and results of the JA, through various channels including (website; twitter; press release, e-newsletter) Cooperation will carry out actions aimed at achieving the maximum dissemination of the JA aims and results to the target groups.

### Objectives

Elaborate and implement a dissemination strategy with the following principles:

- dissemination plan;
- involving target groups;
- defining key messages;
- modes of communication;
- tailoring information to the audience;
- building good relationships with the media;
- maximizing the exposure of messages;
- targeting EU funded other relevant networks;
- Monitoring the dissemination activities;
- Development of the dissemination, awareness and communication plan;
- Communication and information material;
- Scientific publications, conferences/ workshops;
- Stakeholder meetings and Final Conference;
- Awareness.

### Milestones (MS)

**MS6.** Initial dissemination, awareness and communication plan completed – May 2017;

**MS7.** Feedback from task leaders WP leaders on data to be disseminated through communication tool received – June 2017;

**MS8.** Interim monitoring of the dissemination and communication plan – December 2017;



**MS9.** Country specific stakeholder meeting – December 2017;

**MS37.** Policy briefs – May 2018.

**Deliverables - something that can be provided or achieved as a result of a process**

**D2.1:** Website; Leaflet, Facebook page (May 2017) – Public Other

A Website a leaflet and a Facebook page to promote the JA will be produced at the beginning and updated regularly.

**D2.2:** Press Releases (January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, December 2019) – Public Other

Press Releases will be launched periodically.

**D2.3:** Layman version of the final JA report (December 2019) – Public Report

This is a short (e.g. 10 pages) version of the final JA report, targeted to the stakeholders.

**Process Indicators**

<b>Code_Name</b>	WP2_1 Number of meetings/teleconferences organized by WPx
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting reports
<b>Periodicity of data collection</b>	Kick off, May 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_2 Attendance to the WP meetings/teleconferences
<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process

<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting attendance
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	50% of deliverables on schedule
<b>Tolerance</b>	50%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Quality Indicators

<b>Code_Name</b>	WP2_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D 1.1., D 1.2, WP2 tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019

<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## Task Indicators

<b>Code_Name</b>	WP2_T2.1 : Development of the dissemination, awareness and communication plan
<b>Indicator definition</b>	<ul style="list-style-type: none"> <li>- Development of dissemination plan (40%);</li> <li>- Awareness and dissemination on the media (30%);</li> <li>- Effectiveness of communication activities by keeping track of objectives measures (30%),</li> </ul>
<b>Type of indicator</b>	Output

<b>Methodology</b>	Quantitative
<b>Data Source</b>	Dissemination Plan, D2.1, D2.2, D2.3
<b>Periodicity of data collection</b>	March 2017, June 2017, December 2017, March 2018, June 2018, December 2018, March 2019, June 2019, October 2019
<b>Goal</b>	80% of the development of the plan
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_T2.2 : Communication and information material
<b>Indicator definition</b>	Production of dissemination related material
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D2.1, MS6
<b>Periodicity of data collection</b>	March 2017, June 2017, December 2017, March 2018, June 2018, December 2018, March 2019, June 2019, October 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_T2.3 : Scientific publications, conferences/ workshops
<b>Indicator definition</b>	Presentations or production of scientific publications
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	MS8
<b>Periodicity of data collection</b>	December 2017, September 2018, June 2019

<b>Goal</b>	6 scientific publications
<b>Tolerance</b>	2
<b>Critical value</b>	8
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_T2.4 : Stakeholder meetings and Final Conference
<b>Indicator definition</b>	Meeting with relevant regional and national stakeholders (in each Member state)
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	MS9, D2.3
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	11
<b>Tolerance</b>	11
<b>Critical value</b>	22
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP2_T2.5 : Awareness
<b>Indicator definition</b>	Awareness activities (in each member state)
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D2.3, D2.2
<b>Periodicity of data collection</b>	January 2017, June 2017, December 2017, June 2018, December 2018, June 2019
<b>Goal</b>	11
<b>Tolerance</b>	11
<b>Critical value</b>	22

<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 5. WP3: Evaluation of the JA

**Aim:** to evaluate the actions undertaken by WP 1 and WP2 (coordination and dissemination) as well as the five core work packages (WP4 to WP8). The overall objective is to monitor the JA and verify it is being implemented as planned and reaches the expected outputs.

### Objectives

- Definition of the evaluation framework;
- Process evaluation and management of quality;
- Output evaluation;
- Output and impact evaluation.

### Milestones

**MS10.** Evaluation in progress: first feedback to partners – M10;

**MS11.** Evaluation of dissemination strategy and changes if any incorporated according to feedback – M15;

**MS12.** Evaluation in progress: second feedback to partners – M30.

### Deliverables - something that can be provided or achieved as a result of a process

**D3.1:** Evaluation Plan (April 2017) – Public Report

Evaluation Plan.

**D3.2:** Interim Evaluation Report (June 2018) – Public Report

Interim Evaluation Report

**D3.3:** Final Evaluation Report (December 2019) – Public Report

Final Evaluation Report

### Process Indicators

<b>Code_Name</b>	WP3_1 Number of meetings/teleconferences organized by WPx
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process

<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting reports
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP3_2 Attendance to the WP meetings/teleconferences
<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting attendance
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP3_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables

<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	90% of deliverables on schedule
<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Quality Indicators

<b>Code_Name</b>	WP3_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D 1.1., D 1.2, WP3 Tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP3_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members (all partners)
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires



<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Task Indicators

<b>Code_Name</b>	WP3_T3.1 : Definition of the evaluation framework
<b>Indicator definition</b>	Evaluation Framework production
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D3.1
<b>Periodicity of data collection</b>	April 2017
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP3_T3.2 : Process evaluation and management of quality
<b>Indicator definition</b>	Development of evaluation process and management of quality tools
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Mixed (Quantitative / Qualitative)
<b>Data Source</b>	D3.1
<b>Periodicity of data collection</b>	March 2017, December 2017, March 2018, December 2018, March 2019, October 2019

<b>Goal</b>	1
<b>Tolerance</b>	1
<b>Critical value</b>	3
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP3_T3.3 : Output evaluation
<b>Indicator definition</b>	% of evaluated deliverables
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D3.1, D3.2, D3.3
<b>Periodicity of data collection</b>	June 2018, September 2018, December 2018, June 2019, October 2019
<b>Goal</b>	80%
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP3_T3.4 : Output and impact evaluation
<b>Indicator definition</b>	Nr. of intended and unintended, short-term effects resulting from the JA work
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D3.2, D3.3
<b>Periodicity of data collection</b>	June 2018, September 2018, December 2018, June 2019, October 2019
<b>Goal</b>	2 products (report or guide)
<b>Tolerance</b>	2

<b>Critical value</b>	8
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 6. WP4: Knowing frailty at individual level

### Aim

Standardize the assessment of frailty at an individual level.

### Objective

- Standardize the assessment of frailty at an individual level by developing a common methodology to define, screen and diagnose, this condition.
- To identify clinical aspects of frailty (diseases, conditions and functional parameters), to assess patterns of multimorbidity and their interactions in the development and progression of frailty and to assess the impact of frailty in the outcome of chronic diseases and long term care conditions.

### Milestones

**MS13.** Draft report on the state of art on frailty at individual level completed– June 2017;

**MS14.** Experts panel complete the review of the draft report on frailty state of art (Includes agreed criteria for screening, assessment and diagnosis) – September 2017;

**MS15.** Collection of information from the participant MSs completed – March 2018;

**EXTRA MS.** Discussion with MSs on the roadmaps for the FPA – February 201

**MS16.** Contribution of this WP to the Frailty Prevention Approach conceptualization and final document completed – July 2019;

**EXTRA MS.** Contribution of WP4 to the final draft of the FPA document completed – August 2019

### Deliverables - something that can be provided or achieved as a result of a process

**D4.1:** JA Frailty definition (December 2017) – Public Report

A report with a formal and concise statement of the meaning of frailty agreed by the partners which will be used for the JA.

**D4.2:** Final Report on screening of frailty (October 2019) - Public Report

Final report (including the roadmaps and recommendations) on screening, diagnostic tools for frailty and relationship between chronic disease and frailty

### Process Indicators

<b>Code_Name</b>	WP4_1 Number of meetings/teleconferences organized by WP4
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or meeting reports
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP4_2 Attendance to the WP meetings/teleconferences
<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%

<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP4_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	90% of deliverables on schedule
<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## Quality Indicators

<b>Code_Name</b>	WP4_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D 1.1., D 1.2, WP4 tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP4_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Task Indicators

<b>Code_Name</b>	WP4_T4.1 : Definition
<b>Indicator definition</b>	Development of frailty definition (month)
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D4.1
<b>Periodicity of data collection</b>	December 2017
<b>Goal</b>	Definition finalized month 6
<b>Tolerance</b>	One month
<b>Critical value</b>	Month 8
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP4_T4.2 : Screening
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<b>Indicator definition</b>	review screening tools
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D4.2. Contribution to the FPA document (frailty screening, assessment and relationship with CD and LTC).
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP4_T4.3 : Diagnostic tools
<b>Indicator definition</b>	review diagnostic tools
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D4.2. Contribution to the FPA document (frailty screening, assessment and relationship with CD and LTC).
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP4_T4.4 : Relationship between chronic disease-frailty
<b>Indicator definition</b>	Access the association between chronic diseases, disability and frailty
<b>Type of indicator</b>	Outcome

<b>Methodology</b>	Qualitative the information and analysis on relationship between frailty and CD will come up on the state of art report
<b>Data Source</b>	D4.1,
<b>Periodicity of data collection</b>	December 2017. July 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 7. WP5: Knowing frailty at population level

### Aim

Identification of the current and projected prevalence of frailty at population level.

### Objectives

- To identify the current and projected prevalence of frailty at population level in the participating MSs.
- To identify current practice in relation to the screening, surveillance (ongoing, systematic process for the collection, analysis and interpretation of data) and monitoring (observing for changes in the health status of a population) of frailty at a population level, with a special focus on primary healthcare (i.e. community setting).
- To identify frailty trajectories or transition states (e.g.: pre-frail, frail, disability) particularly in older people attended by primary health care.

### Milestones

**MS17.** Draft report on the state of art of frailty at population level completed. – June 2017;

**MS18.** Experts panel complete the review of the draft report on the state of art of frailty at population level. – September 2017;

**MS19.** Collection of background information on frailty at population level from the participant MSs completed – March 2018;

**Extra MS** Discussion with MSs on the roadmaps for the FPA. February 2019;



**MS20.** Feed-back from participant MSs Stakeholders to the final draft of the Frailty Prevention Approach document completed –May2019;

**Extra MS** Contribution of WP5 to the Final draft of FPA document completed. August 2019;

**Deliverables - something that can be provided or achieved as a result of a process**

**D5.1:** Report on frailty at a population level including a specific section on primary health care (December 2017) – Public Report

Report on the current status of identifying “knowing” frailty (prevalence, screening, surveillance & monitoring and trajectories) at a population level including a specific section on primary health care.

**D5.2:** European Guide for knowing frailty at a population level including recommendations and roadmap (October 2019) – Public Report

Final report knowing frailty at a population level including recommendations and roadmap.

**Process Indicators**

<b>Code_Name</b>	WP5_1 Number of meetings/teleconferences organized by WP5
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes and meeting reports
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP5_2 Attendance to the WP meetings/teleconferences
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<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP5_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	90% of deliverables on schedule
<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Quality Indicators

<b>Code_Name</b>	WP5_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative

<b>Data Source</b>	D 1.1., D 1.2, WP5 tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP5_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Task Indicators

<b>Code_Name</b>	WP5_T5.1 : Determining frailty prevalence
<b>Indicator definition</b>	Number of MS with prevalence data revised in the state of the art report
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D5.1.

<b>Periodicity of data collection</b>	December 2017
<b>Goal</b>	11 MSs
<b>Tolerance</b>	5
<b>Critical value</b>	17
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP5_T5.2 : Screening, surveillance and monitoring of frailty at population level
<b>Indicator definition</b>	Report that examines current practice in participant MSs with regard to the 3 fundamental steps to determine frailty status at population level - Screening, surveillance and monitoring (recommendations for implementation)
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D5.2.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0
<b>Critical value</b>	0
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP5_T5.3 : Frailty trajectories
<b>Indicator definition</b>	Literature review on: <ul style="list-style-type: none"> <li>- Frailty trajectories</li> <li>- Risk factors and protective factors for frailty transitions</li> <li>- Identify important trajectory groups</li> </ul>

	- Strategies to identify and target these trajectories at a population level
<b>Type of indicator</b>	Output
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D5.1.
<b>Periodicity of data collection</b>	December 2017
<b>Goal</b>	100%
<b>Tolerance</b>	0%
<b>Critical value</b>	0%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP5_T5.4 : Frailty at primary healthcare settings
<b>Indicator definition</b>	Recommendations on implementation of early intervention on frailty as a priority in primary health care
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D5.2.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	100%
<b>Tolerance</b>	0%
<b>Critical value</b>	0%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 8. WP6: Managing frailty at individual level

### Aim

Reviewing and collecting existing literature on the topics on management of frailty at individual level.

### Objectives

- Identify and share examples of good practice on management of frailty (Prevention, Clinical management, Nutrition, Physical exercise, Drugs, ICTs);
- Collection of the data and evaluation to create best practice guidelines on prevention, clinical management, nutrition, use of drugs, physical exercise;
- Development of a Report on management of frailty at individual level;

### Milestones

**MS21.** Draft report on the state of art completed – June 2017;

**MS22.** Experts' panel review of the draft report completed. (Includes agreed criteria for good practices that have potential for adoption and scaling up in MS) – September 2017;

**Extra MS.** Collection of information from the participant MS completed –March 2018

**MS23.** Discussion with MS on the roadmaps for the FPA – February 2019;

**MS24.** Feed-back from MS stakeholders to the final draft of the FPA document completed – June 2019;

**Extra MS.** Contribution of WP6 to the final draft of FPA document completed –August 2019

### Deliverables - something that can be provided or achieved as a result of a process

**D6.1:** Report on management of frailty at individual level: Prevention, Clinical management, Nutrition, Physical exercise, Drugs, ICTs (March 2018) – Public Report

Report on management of frailty at individual level (frailty prevalence, methodology of data collection, short literature review, best practices, survey results on state of the art).

**D6.2:** European Guide for management of frailty at individual level including recommendations and roadmap (August 2019) – Public Report

Final report knowing frailty at an individual level including recommendations on tools for screening and assessment and roadmap for implementation.

## Process Indicators

<b>Code_Name</b>	WP6_1 Number of meetings/teleconferences organized by WP6
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting reports
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_2 Attendance to the WP meetings/teleconferences
<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	50% of deliverables on schedule
<b>Tolerance</b>	50%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Quality Indicators

<b>Code_Name</b>	WP6_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D 1.1., D 1.2, WP6 tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality



<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Task Indicators

<b>Code_Name</b>	WP6_T6.1 : Prevention
<b>Indicator definition</b>	Recommendations of frailty prevention on the state of art document FPA.
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D6.2. Frailty Prevention Approach document.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D6.2 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_T6.2 : Clinical management
<b>Indicator definition</b>	Survey of good practices by Member States on clinical management of an individual with frail syndrome
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative

<b>Data Source</b>	D6.2. Frailty Prevention Approach document.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D6.2 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_T6.3 : Nutrition
<b>Indicator definition</b>	Analysis of risk of inappropriate diet on chronic disease increasing risk of onset or worsening of frailty (literature review; desktop research ) - individual level
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D6.2. Frailty Prevention Approach document.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D6.2 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_T6.4 : Physical exercise
<b>Indicator definition</b>	Development of a guideline for policy and practice innovating the conceptual understanding of physical activities interventions in Europe
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D6.2. Frailty Prevention Approach document.

<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D6.2 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_T6.5 : Drugs
<b>Indicator definition</b>	Survey to identify current policies, programmes, guidelines and good practice
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D6.2. Frailty Prevention Approach document.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D6.2 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP6_T6.6 : ICTs
<b>Indicator definition</b>	Mapping and analysis of existing ICT's tools and Apps – gather good practices that describe success and effective stories.
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D6.2. Frailty Prevention Approach document.
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D6.2 delivered on time

<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 9. WP7: Models of care to prevent or delay progression of frailty and enable people to live well with frailty

### Aim

- Analyze models of care and draw conclusions on how to best prevent or delay progression of frailty or enable people to live well with frailty;
- Establish how to transfer information and knowledge to specific target groups building on work already done under the EIP AHA (A3 AG and Reference Site activities).

### Objectives

- To identify and share examples of good practice on models of person-centred care and support in different settings (primary health care, community care, social care and hospital care) to prevent or delay progression of frailty and to build capacity and resilience in local communities that will enable people to live well with frailty.
- To analyze the impact of good models of care at an individual level and on health and social care systems including their economic impact.
- To analyze the transferability and scaling-up of these models of care.
- To transfer information and knowledge from lessons learned from specific examples of models of excellence.

### Milestones

**MS25** Review of established models of chronic care and their contribution to the prevention and management of frailty completed. June 2017;

**MS26.** Experts' panel review of the Draft report completed. (Includes agreed criteria for good practices that have potential for adoption and scaling up and apply this criteria in surveys of the models of care in MSs). – September 2017;

**MS27.** Collection of information from participant MSs completed. March 2018;

**MS28.** Share with expert panel the analysis of costs and outcomes from the most comprehensive good practice models. September 2018;

- **Extra MS. Discussion with MSs on the roadmaps for the FPA. February 2019**

**MS29.** Feed-back from participant MSs Stakeholders to the final draft of the Frailty Prevention Approach document completed. July 2019.

- Extra MS Contribution of WP7 to the final draft of the FPA document completed. October 2019

**Deliverables - something that can be provided or achieved as a result of a process**

**D7.1:** Report on the current status of models of care (December 2017) – Public Report

**D7.2:** European Guide on models of care for frailty recommendations for primary care, community care, social care and hospitals and roadmap for implementation (December 2019) – Public Report

**Process Indicators**

<b>Code_Name</b>	WP7_1 Number of meetings/teleconferences organized by WP7
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting reports
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meeting year
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_2 Attendance to the WP meetings/teleconferences
<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process

<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	90% of deliverables on schedule
<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Quality Indicators

<b>Code_Name</b>	WP7_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative

<b>Data Source</b>	D 1.1., D 1.2, WP7 tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Task Indicators

<b>Code_Name</b>	WP7_T7.1 : Analysis of the impact on frailty of the established models of integrated care and support for long-term, chronic conditions.
<b>Indicator definition</b>	Analyze established models of integrated care and support for long-term, chronic conditions in terms of their impact on the prevention or management of frailty.
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative

<b>Data Source</b>	D7.1
<b>Periodicity of data collection</b>	December 2017
<b>Goal</b>	D 7.1 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_T7.2 :Person-centred coordinated care in primary care and frailty
<b>Indicator definition</b>	Describe examples of person-centred coordinated care and support to prevent and tackle frailty in primary care settings.
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D7.2
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D 7.1 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_T7.3 : Social care providers and frailty
<b>Indicator definition</b>	Describe how social care providers can implement enabling approaches at home or in care homes to delay progression of frailty and the quality of life and functional outcomes for older people and their caregivers obtained by them
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Qualitative



<b>Data Source</b>	D7.2
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D 7.1 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_T7.4: Knowledge transfer in hospitals and transitional care to prevent or delay progression of frailty and enable people to live well with frailty.
<b>Indicator definition</b>	Describe the experience and functional outcomes of comprehensive assessment and care in hospitals and at times of transition.
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D7.2
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D 7.1 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP7_T7.5 : Economic analysis of comprehensive care models and frailty
<b>Indicator definition</b>	Analyse case studies of comprehensive care models to assess outcomes, resource use and costs to inform the business case for investing in early interventions to prevent frailty and functional decline
<b>Type of indicator</b>	Outcome

<b>Methodology</b>	Qualitative
<b>Data Source</b>	D7.2
<b>Periodicity of data collection</b>	October 2019
<b>Goal</b>	D 7.1 delivered on time
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

## 10. WP8: Extending and expanding the knowledge on frailty to foster innovative policy on frailty

### Aim

WP8 will address the role of training and research to produce a well-prepared health workforce for older people with frailty and to expand the knowledge about the outstanding questions on frailty from an individual and population/public health perspective.

### Objectives

1. To promote knowledge, skills and attitudes to manage frailty, based on the results and recommendations of the frailty prevention approach (FPA) document of the JA.
2. To promote that workforce is enabled to support scaling-up of new models of care, specially focused to respond to the needs of frail patients.
3. To translate knowledge to policy decision makers and health care planners to ensure informed health and social care policy and planning decisions, with special focus on scaling up the FPA.
4. To transfer information to policy makers to inform plans which cover the gaps of knowledge on the provision and delivery of services for frail older people or people at risk for frailty.

### Milestones

**MS30.** Study protocol and questionnaire or formal education finalized – September 2017;

**MS31.** Collection of information on training needs and research gaps from participant MSs is completed – March 2018;

**MS32.** Recommendations for a competence base educational approach on frailty prevention completed – June 2018;

**MS33.** Stakeholders meeting (face to face or virtual) to debate and agree on gaps, evidence and recommendations –February 2019;

**MS34.** Feed-back from participant MSs Stakeholders to final draft of the Frailty Prevention Approach document completed – May 2019.

**Deliverables - something that can be provided or achieved as a result of a process**

**D8.1:** Report on the content, scope and gaps on frailty and frailty prevention in the curricula of the participant MSs Health related workforce (August 2018) – Public Report

**D8.2:** Report on a framework to design programmes which identify training and research gaps on frailty (August 2018) – Public Report

**Process Indicators**

<b>Code_Name</b>	WP8_1 Number of meetings/teleconferences organized by WP8
<b>Indicator definition</b>	Number of meetings/teleconferences organized
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting reports
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	10 meetings
<b>Tolerance</b>	0
<b>Critical value</b>	15
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP8_2 Attendance to the WP meetings/teleconferences
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<b>Indicator definition</b>	% attendance meetings/teleconferences
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	WP meeting minutes or report
<b>Periodicity of data collection</b>	Kick off, January 2017, June 2017, December 2017, June 2018, December 2018, June 2019, October 2019, Final conference, seminar discussion on FPA.
<b>Goal</b>	80% of attendance
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP8_3 Accomplishment of deadlines
<b>Indicator definition</b>	% Accomplishment of deadlines
<b>Type of indicator</b>	Process
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Deliverables
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	90% of deliverables on schedule
<b>Tolerance</b>	10%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Quality Indicators

<b>Code_Name</b>	WP8_4 indicators that were higher than the established goal
<b>Indicator definition</b>	% indicators that were higher than the established goal
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative

<b>Data Source</b>	D 1.1., D 1.2, WP8 tasks
<b>Periodicity of data collection</b>	December 2017, December 2018, October 2019
<b>Goal</b>	10% indicators that were higher than the established goal
<b>Tolerance</b>	5%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP8_5 satisfaction within WP members (Communication, organization, information received and feedback)
<b>Indicator definition</b>	% satisfied members
<b>Type of indicator</b>	Quality
<b>Methodology</b>	Quantitative
<b>Data Source</b>	Questionnaires
<b>Periodicity of data collection</b>	June 2018, October 2019
<b>Goal</b>	80% satisfied members
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

### Task Indicators

<b>Code_Name</b>	WP8_T8.1 : Building workforce capacity on frailty prevention
<b>Indicator definition</b>	Assessment of the content, scope and gaps on frailty and its prevention in the curricula of the participants MSs health workforce
<b>Type of indicator</b>	Output
<b>Methodology</b>	Qualitative
<b>Data Source</b>	D8.1, D8.2.

<b>Periodicity of data collection</b>	December 2017, August 2018
<b>Goal</b>	D8.1. and D8.2. delivered
<b>Tolerance</b>	
<b>Critical value</b>	
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan

<b>Code_Name</b>	WP8_T8.2 : Building the framework to design programs which identify and manage the knowledge gaps on frailty
<b>Indicator definition</b>	<ul style="list-style-type: none"> <li>- Literature review and source data search for pre-existing unsolved questions, to assess the main gaps of knowledge: Yes/no (33,3%);</li> <li>- Expert panel meeting with representatives from WP4, WP5, WP6 and WP7 to further elaborate on evidence gaps tailored to the conclusions and deliverables from this WP (33,3%)Yes/no</li> <li>- Recommendation for an agenda for training and research on frailty that will be part of the Frailty Prevention Approach document (FPA)(33,3%)Yes/no</li> </ul>
<b>Type of indicator</b>	Outcome
<b>Methodology</b>	Quantitative
<b>Data Source</b>	D8.2,
<b>Periodicity of data collection</b>	August 2018
<b>Goal</b>	80%
<b>Tolerance</b>	20%
<b>Critical value</b>	100%
<b>Result</b>	
<b>Alert System</b>	Presented in the Evaluation Plan



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