

PERCH | PROJECT

# Evaluation Plan



**PERCH**  
PartnERship to  
Contrast HPV



Co-funded by  
the European Union



## Work Package 3 – Evaluation

### Deliverable 3.1 Evaluation Plan

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## List of abbreviations and acronyms

DNA	Deoxyribonucleic Acid
C&D	Communication and Dissemination
GA	General Assembly
GAB	Governmental Advisory Board
HCW	Healthcare Workers
HPV	Human papillomavirus
JA	Joint Action
MS	Member State
PERCH	PartnERship to Contrast HPV
SAB	Scientific Advisory Board
SC	Steering Committee
UNICEF	United Nations Children's Fund
WHO	World health Organization
WP	Work Package



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## 1. PROJECT DESCRIPTION

### 1.1. Background of PERCH

Human papillomavirus (HPV) is a DNA virus that consists of more than 200 types, of which more than 40 are sexually transmitted and can infect anogenital and oropharyngeal mucosa. At least 14 types of HPV are classified as 'high risk' because they cause virtually all cervical cancer cases, as well as a fraction of other anogenital and head and neck cancers. Cancers caused by HPV are highly preventable. However, incidence and mortality rates of cervical cancer vary widely across Europe and across the world, and in 2020 cervical cancer continued to be the 4th most common cause of cancer among women worldwide.

Given the substantial global burden of cervical cancer and the effectiveness of its preventive procedures, in 2018, the WHO Director-General announced a global call to eliminate cervical cancer. A pivotal pillar of this strategy is the achievement of 90% vaccination coverage against HPV, a target still distant from current vaccination coverage rates in Europe. In 2019, according to the WHO/UNICEF Joint Reporting Form on Immunization, the WHO EURO Region reported an HPV vaccination programme coverage of 27% among girls and 5% among boys. Moreover, there were high differences in vaccination programme coverage among European countries (<5% in Bulgaria to >90% coverage in Norway).

### 1.2. Purpose of PERCH

PERCH (PartnERship to Contrast HPV) is a European Joint Action (JA) that aims at contributing to the European efforts to improve the coverage of HPV vaccination among girls and preferentially boys.

Its **General Objective** is to contribute to the implementation of Europe's Beating Cancer Plan, which aims to support Member States' (MS) efforts to extend the rollout of routine HPV vaccination to eliminate cervical cancer and reduce other cancers caused by HPV in the coming decade. In particular, the main purpose of this JA is to prepare MSs to launch or reinvigorate HPV vaccination campaigns.

The efforts of PERCH are structured around four **specific objectives**:

1. To improve capacities of MSs to plan and implement HPV vaccination campaigns by sharing knowledge and experience.
2. To improve data and monitoring system on HPV vaccination and HPV screening.
3. To improve knowledge and awareness on HPV-related disease and prevention in specific target groups (adolescent girls and boys).
4. To improve knowledge and abilities for healthcare professionals in HPV vaccine communication.

### 1.3. Organization of PERCH

PERCH, which has a duration of 30 Months, involves 34 organizations from 18 European countries (17 participating countries and Ireland as an associate partner).

It is organized in seven Work Packages (WPs). WP1 to WP4 are horizontal WPs that support the progress of the JA, and therefore the participation in these WPs is mandatory for all PERCH

participants. WP5 to WP7 are the thematic WPs that specifically address the PERCH objectives, and each participant decides which WPs to join.

*Table 1. Overview of PERCH WPs and their objectives.*

Work Package Name and Objective	
<b>WP1</b>	<b>Project Management and Coordination</b> To ensure a well-coordinated governance and management of the JA.
<b>WP2</b>	<b>Dissemination</b> To guarantee a well-coordinated communication and to maximise the dissemination of the JA's efforts and results.
<b>WP3</b>	<b>Evaluation</b> To monitor and evaluate the progress of the JA and to assure that the JA accomplishes its established objectives.
<b>WP4</b>	<b>Integration in National Policies and Sustainability</b> To frame the conditions to be fulfilled to reach or maintain high HPV vaccination coverage in all MS of the EU.
<b>WP5</b>	<b>Monitoring</b> To describe how HPV vaccination is currently monitored in the EU participating countries and to propose common data collection systems.
<b>WP6</b>	<b>Improving Knowledge and Awareness to Increase Vaccine Uptake in Target Communities</b> To support MSs to increase knowledge and awareness on HPV-related disease and prevention in adolescent girls and boys.
<b>WP7</b>	<b>Training and Support in Vaccine Communication</b> To provide support to healthcare professionals in terms of HPV vaccination communication training.

Beyond its WPs, PERCH follows the following Governance organization:

- **General Assembly (GA)** is the governing body of PERCH, composed of at least one representative from each participant institution.
- **Steering Committee (SC)** is the delegate body of the GA for day-to-day scientific and technical coordination, composed by the JA coordinator and all the WP-leaders.
- **Scientific Advisory Board (SAB)** is the consultative body responsible for overseeing the overall aims and outcomes of the JA for contributing to optimal police relevance.
- **Governmental Advisory Board (GAB)** consists of a representative from each participating country and provides feedback on key deliverables, as well as policy guidance. In addition, it contributes to the development of an integration and sustainability plan.

## 2. PROJECT EVALUATION

### 2.1. PERCH Evaluation

The evaluation of PERCH includes an internal evaluation designed and executed by WP3, led by the Catalan Institute of Oncology (ICO) in Spain, as well as an external evaluation to be conducted by an independent agent.



The internal evaluation of PERCH will be a longitudinal, rigorous process co-created with PERCH participants and linked to the planning and implementation of PERCH activities. It will document the progress of the JA, identify any potential constraining factors to act upon for optimization of the project implementation, and interpret the findings in relation to the achievement or potential forthcoming achievement of the project objectives and the specified targets.

This JA duration is expected to be of 2.5 years. Most of the JA actions will be implemented during the last year of the project and therefore, their impact in HPV vaccination coverage rates and improved data and monitoring systems in Europe is expected to occur in the mid-term, beyond this project lifetime. Because the project evaluation will end when the project ends, intermediate and long-term outcomes will not be quantitatively assessed but will be explored through the GAB members opinions (*action-specific tool*).

The present document, the project Evaluation Plan, describes the objectives underlying the internal evaluation of PERCH, the framework guiding the evaluation process, the targets and the methodology that will be used throughout the evaluation process.

## 2. 2. Aim and Research questions

The overall aim of WP3 is to monitor and evaluate the progress of the JA against its internal milestones and deliverables and to assure that the JA accomplishes its established objectives. WP3 also aims to assure that all outputs of the JA achieve high quality standards and have a significant impact in the countries.

Accordingly, the **specific objectives of WP3** are to:

- Monitor the progress of the JA in terms of tasks, milestones and deliverables being implemented as planned.
- Evaluate the JA activities in terms of process, output and outcome indicators as detailed in the tables below (Table 2, 3, 4 and 5).
- Summarize the evaluation results in a midterm and final evaluation reports.

**Table 2. Indicators of Specific Objective #1 - To improve capacities of MSs to plan and implement HPV vaccination campaigns by sharing knowledge and experience.**

	Process Indicator(s)	Target	Responsible WP	Indicator ID*
<b>Process</b>	Number of participating countries that complete an online survey on how each of them is organised in terms of HPV vaccination and screening.	At least 17 participating countries in PERCH complete the survey by month 4.	WP4	A4.1.3
	Number of stakeholders from different policy sectors identified at country level to facilitate dissemination and communication activities.	At least 3 stakeholders identified for each country by month 2.	WP2	A2.3.5
<b>Output</b>	Percentage of stakeholders identified to facilitate dissemination and communication activities that improve	At least 80% of the stakeholders identified improve their knowledge on	WP2	C2.3.1



	their knowledge on how to promote HPV vaccination.	how to promote HPV vaccination (pre-post test).		
	Number of representatives from the Ministry of Health of each participating country meet to share best practices on HPV vaccination.	At least one representative from the Ministry of Health of each participating country participate in a meeting where the Integration and Sustainability plan will be presented.	WP4	C4.5.2
<b>Outcome</b>	Number of countries developing a National HPV Communication Strategy.	100% of PERCH participating countries that do not launch or pilot a national HPV vaccination campaign will develop a National HPV Communication Strategy by the end of JA	WP2	B2.4.2
	Number of vaccination campaigns and pilots launched.	At least 5 launched or piloted vaccination campaigns in countries with vaccination coverage in girls is lower than 60% by the end of JA.	WP4	B4.6.2

\* The Indicator ID refers to the equivalent indicator as listed in the Annexes

**Table 3. Indicators of Specific Objective #2 - To improve data and monitoring system on HPV vaccination and screening.**

	Process Indicator(s)	Target	Responsible WP	Indicator ID
<b>Process</b>	Percentage of participating countries that identify data to be included in HPV vaccine administration register and linked with other registers (screening registry, cancer registry, patient files).	100% of the countries participating in WP5, contribute in the collection of information.	WP5	A5.2.2
	Number of countries further exploring the most common legal and administrative barriers that impede registration and linkage of HPV vaccination data with other registries and how to tackle them.	At least 4 participating countries in WP5 agree to participate in this further survey.	WP5	A5.2.3
<b>Output</b>	Report including data and monitoring system applicable at country level.	A final policy report of the main barriers/challenges and successes to implement a data and monitoring system shared with a representative of the Ministry of Health in each participating country in WP5.	WP5	C5.2.1
<b>Outcome</b>	Increased knowledge/awareness of the political authorities on how improving data and monitoring system on HPV vaccination and HPV screening.	At least 50% of the participating countries, in WP5, consider adopting of an action plan to improve	WP5	C5.2.3





		linkage between monitoring systems.		
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\* The Indicator ID refers to the equivalent indicator as listed in the Annexes

**Table 4. Indicators of Specific Objective #3 - To improve knowledge and awareness on HPV-related disease and prevention in the specific target groups (adolescent girls and boys).**

	Process Indicator(s)	Target	Responsible WP	Indicator ID
<b>Process</b>	Selection of the schools that will participate in the project.	At least 5 representative schools from each country participating in WP6 will be selected by month 4.	WP6	A6.1.2
	National roundtables with the key stakeholders, such as 1. representative of national institutions; 2 target group's representative (students, parents, and teachers); 3. media representative.	At least 5 roundtables per country participating in WP6 (starting from month 8 and until the end of project, at least months 15 and 30).	WP6	A6.1.4
<b>Output</b>	Build up national toolboxes (existing communication tools, social media and peer engagement).	1 national toolbox for each country participating in WP6 by month 15.	WP6	B6.3.2
<b>Outcome</b>	Piloted tools result in increased knowledge/awareness of the benefits on vaccination in target groups.	At least 80% of participants in the pilot study feel more confident in vaccine uptake (pre/post test).	WP6	C6.5.1

\* The Indicator ID refers to the equivalent indicator as listed in the Annexes

**Table 5. Indicators of Specific Objective #4 - To improve knowledge and abilities for healthcare professionals in vaccine communication.**

	Process Indicator(s)	Target	Responsible WP	Indicator ID
<b>Process</b>	Number of countries that participate in the core syllabus program including local information and specific needs and their local teaching staff.	All participating countries in WP7 identify their teaching staff and their specific contributions to the training program by month 8.	WP7	B7.3.1
	Number of healthcare professionals contacted to take part in training courses in each country.	At least 2000 healthcare professionals (the number depends on the capacity of the country) are contacted to take part in the training by month 12.	WP7	A7.4.1
<b>Output</b>	Number of training courses implemented.	All participating countries in WP7 implement at least one training course for each target group by month 18.	WP7	B7.4.1



<b>Outcome</b>	Improved knowledge of target groups on benefits and risks for primary and secondary prevention.	At least 90% of participants in the training courses improve their knowledge (pre/post test).	WP7	C7.4.1
	Improved ability of target groups to communicate with parents, adolescents, patients and health professionals.	At least 80% of participants in the training courses feel more secure in vaccine communication with parents, adolescents, patients and healthcare professionals reached (pre/post test).	WP7	C7.4.2

\* The Indicator ID refers to the equivalent indicator as listed in the Annexes

Therefore, based on the WP3 objectives, the **evaluation questions** that will guide the evaluation process are:

- Is PERCH progressing as expected, regarding its internal milestones and deliverables? What are the barriers and enablers affecting the progress of PERCH?
- To what extent has PERCH achieved its objectives and short-term outcomes? Which factors have supported or hampered their achievement?

The answer to these questions will help in the evaluation of PERCH and in extracting lessons and recommendations for future activities aiming to increase HPV vaccination coverage in girls and boys as well as future JAs in Europe.

The evaluation questions described above will drive the evaluation process whereas the principles and ethics of evaluation will frame the process.

### 3. EVALUATION METHODOLOGY

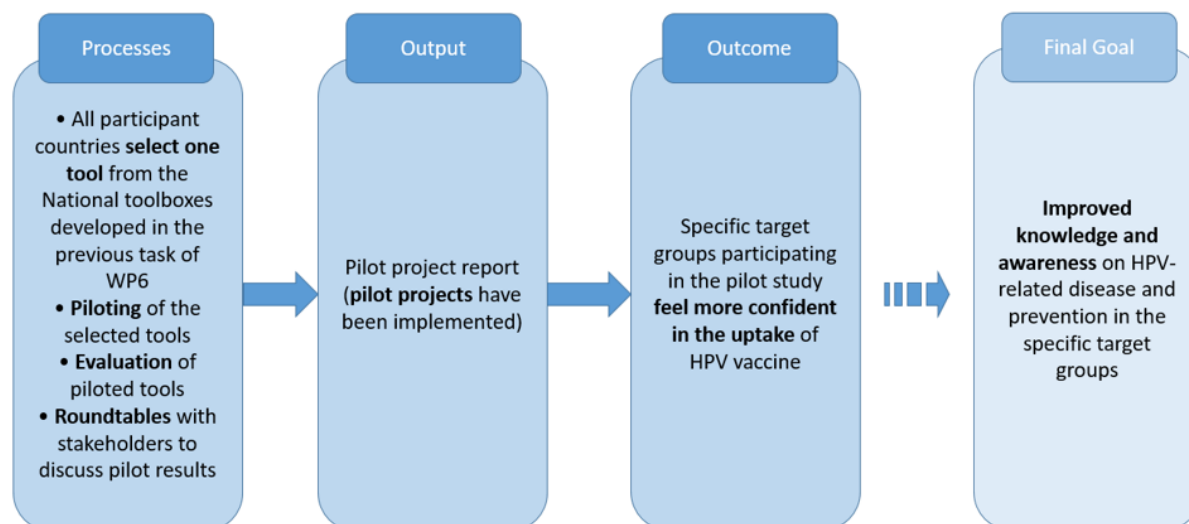
The evaluation of PERCH follows a Logical Framework approach, a methodology that reduces the project complexity into relatively simple, linear Logic Models of processes, outputs and outcomes. For monitoring and evaluation purposes, Logic Framework Matrices or *logframes* were built for each WP task through the identification and selection of quantitative and qualitative indicators guided also by the RE-AIM framework. This methodology focuses on the assessment of the five RE-AIM outcomes (*reach, effectiveness, adoption, implementation and maintenance*) which have been applied to the processes and outcome evaluation of the Logic Models. An example of a logic model and its indicators with targets can be found in Figure 1.

The development of these Logic Framework Matrices was the first step in the development of the Evaluation plan. This was performed in collaboration with the WP Leaders and PERCH coordinator, to ensure everyone’s engagement in the evaluation process.

Initially, the evaluation team developed an initial Logic Model for each WP, including the processes, milestones, deliverables and key objective indicators. These were built based on information gathered through the attendance to the Kick-off meeting and specific WP meetings, the revision of minutes and presentation slides produced for these meetings, correspondence between WP Leaders and PERCH

participants and already produced outputs. This initial Logic Models were shared with WP Leaders for revision and feedback and were subsequently modified accordingly by the WP3 team.

**Figure 1 Logic model and logic framework matrix of the Task 6.5 –“Selecting promising tools for piloting” as example**



	Indicators	Target	Methodology
Process	Selection of tool to be piloted by Month 24 in all WP6 participating countries	Achieved	Desk review
Process	Number of countries that start piloting their selected tools by Month 25	12	Desk review
Process	Evaluation of piloted tools in all countries done by Month 27	Achieved	Desk review
Output	Report on pilot project results by Month 27 [Deliverable 6.3]	1	Desk review
Outcome	Percent of participants in the pilot study that feel more confident in HPV vaccine uptake [Key Objective Indicator]	80%	Specific tool (pre/post test)

Based on the revised Logic Model and the feedback obtained from the face-to-face Steering Committee and WP-specific meeting in Rome, outputs and outcomes were identified. Subsequently, indicators and targets were identified and selected following the SMART (*Specific, Measurable, Achievable, Relevant, and Time-bound*) and RACER (*Relevant, Acceptable, Credible, Easy and Robust*) principles. Indicators included those established in the Grant Agreement to guide the project on milestones, deliverables and key objectives, additional ones to assess the progress and quality on processes, outputs and outcomes as well as to explore the RE-AIM outcomes.

A simplified version of the Logic Models and the Logical Framework Matrices including the proposed indicators and targets were again shared with WP Leaders, and one-on-one meetings between the WP3 team and WP Leaders were conducted to discuss and agree on the final versions (Annexes 1 to 7).

There are some actions of PERCH that have not yet been defined, such as the repository and vaccination guild (WP2), the pilot actions or campaigns in WP4, the piloting of existing or co-created tools to increase HPV vaccine awareness addressing specific target groups in WP6 or the modality of trainings in WP7. The indicators and targets to evaluate these actions will be defined using the methodology above.

### 3. 1. Data collection tools

WP3 will collect the necessary data to assess the indicators and targets included in Annexes 1 to 7 of this Evaluation Plan. However, additional data will also be collected to assess other aspects not covered by indicators, such as the enabling or hindering factors that project participants might encounter in the implementation of PERCH, the satisfaction with projects meetings or the opinions of GAB members on the potential achievement of mid-term outcomes of the project.

To maximize efficiency, reduce the burden of the evaluation process in participants, and avoid overlaps, the evaluation team will preferentially collect data through its participation in PERCH and WP specific meetings and the review of correspondence and secondary sources (desk research). The evaluation team will also follow the progress of PERCH by attending *WP specific meetings, General Assembly meetings, Scientific Advisory Board and Steering Committee meetings*, and by being involved in the WPs day-to-day activities to the extent possible. If clarifications are needed, the evaluation team will reach out to PERCH participants by correspondence or by organizing additional meetings. In cases where data is not readily available, questionnaires to WP Leaders and WP Participants will be performed and further communication via email or meetings will be done as needed. Furthermore, action-specific tools will be developed to assess the outcomes of PERCH activities on their targeted populations. Finally, key PERCH meetings will also be evaluated through questionnaires. An overview of the foreseen tools can be found in Table 6. below.

**Table 6. Tools for data collection**

Indicator type	Tools for data collection	Quality of Data	Type of Data
<b>Process</b>	Desk research WP Leader questionnaire WP participant questionnaire Meeting questionnaires	Primary and secondary data	Quantitative and qualitative
<b>Output</b>	Desk research WP Leader questionnaire WP participant questionnaire	Primary and secondary data	Quantitative and qualitative
<b>Outcome</b>	WP Leader questionnaire WP participant questionnaire Action-specific tools	Primary data	Quantitative and qualitative

#### A) Desk research

To the extent possible, necessary data for evaluation will be collected through the review of:

- Meeting minutes
- Correspondence
- Documents available in the PERCH Microsoft Teams platform
- European Commission SyGMA portal for reporting of Deliverables
- Activity reports from the WP leaders to the coordinator for reporting to HADEA
- Reports on activity in social media or other dissemination channels

#### B) WP Leader questionnaires

The *WP Leader questionnaire* will be developed together with the PERCH coordination to serve a double purpose:

On the one hand, questionnaires will enquire WP Leaders about targets for which data is not retrievable through the desk research. These questions will be based on the targets selected through the WP-specific logical frameworks and will include items such as “how many countries gave you feedback on your initial document?” (Annex 7, *Indicator A7.1.2*). On the other hand, questionnaires will also include a set of items useful to identify potential enabling or hindering factors that can affect the overall project or the WP progress. These will include items such as the efficiency of the communication among PERCH participants or the identification of external factors affecting the project implementation.

Questionnaires will be collected periodically (every four to eight months, approximately), and they will be tailored to each WP and to the timing of each batch. This way, only relevant questions will be included. The questionnaire will be digitally distributed.

### C) WP participant questionnaires

The *participant questionnaire* will be developed together with the PERCH coordination team and the WP Leaders to serve a double purpose:

On the one hand, issues concerning both the targets and the progress of PERCH will be included, but unlike the *WP Leader questionnaire*, the *WP participant questionnaire* will give us information of activities done at the country level, such as “Response rate of students that are contacted to fill the questionnaires in each country” (Annex 6, *Indicator A6.2.9*).

On the other hand, the questionnaire will help identify how PERCH can better support its participants and will provide a more accurate picture of the experience of participating in PERCH outside of leading a WP. Therefore, it might include items such as the identification of facilitators to successfully deliver on the project tasks or the gains in knowledge due to the participation in the project.

*WP participant questionnaires* will also be collected periodically (every four to eight months), and they will be tailored to each WP and to the timing of each batch. The questionnaire will be digitally distributed.

### D) Questionnaires to evaluate meetings

As part of the monitoring efforts, short questionnaires will be distributed after in-person meetings and other important events at PERCH. Questionnaires developed by the evaluation team will cover topics about the convenience of the meeting, the usefulness of different meeting sections, and potential improvements for future events.

Before the delivery of these questionnaires, the coordinator and the WP leaders will be consulted on potential issues that they would like to explore among meeting attenders.

Data collected through these questionnaires will provide insights on how to improve PERCH gatherings. Therefore, short reports will be produced with the main findings and circulated to the Steering Committee for action, if needed.

### E) Action-Specific Tools

Some of the activities within the project will target different specific populations with the aim to increase their knowledge on HPV vaccine and HPV-related diseases (short-term outcome) which are

assumed to induce changes in behaviour (short-term outcome) that could subsequently increase the HPV vaccination coverage in European countries (mid-term outcome).

To measure these short-term outcomes and therefore assess the achievement of the key objective indicators detailed above (Tables 2 to 5), specific tools for targeted populations of the project activities will be developed by the responsible WP leaders of such activities. WP3 will provide support to the WP leaders in these tasks.

Additionally, a short survey targeting the GAB members to obtain their opinion the effectiveness and sustainability of the project actions and therefore their potential success in increasing the HPV vaccine coverage in the mid-term will also be developed by WP3

**Table 7. Action-specific tools to be developed**

Targeted population	Purpose of the action-specific tool	Responsible WP leader for tool development and delivery
Repository and/or vaccination guild users	To assess changes in knowledge	WP2
Targeted population by tools in WP6	To assess changes in attitude	WP6
Healthcare professionals that will participate in WP7 trainings	To assess changes in knowledge and communication skills	WP7
Governmental Advisory Board members	To obtain their opinion on the effectiveness and sustainability of the project actions	WP3

To assess the improvements in knowledge, attitude and communication skills by the targeted populations from PERCH actions, it is necessary to set a baseline value. Efforts to describe baseline situations in relation to monitoring, targeted populations and vaccine communication among healthcare professionals are already underway by WP5, WP6 and WP7. To avoid overlaps and additional burden to project participants, the evaluation team will use these data collected through WP5, WP6 and WP7 to sketch a baseline landscape of PERCH. Yet, if necessary, missing information on baseline values will be obtained through specific tools.

## F) Further qualitative data

As PERCH progresses, unexpected topics of interest might arise, and the WP3 team together with the PERCH coordination team may decide to use further qualitative methods to explore these topics in depth. These qualitative methods could include interviews, case studies or focus groups.

## 3. 2. Data analysis

The targets of process, output and outcome indicators will serve as a base to evaluate the achievement of the objectives of PERCH and will be complemented by implementation data, mostly drawn from the questionnaires described in section 3.1. Results might vary depending on the baseline situation of each country and therefore, results will potentially be stratified according to HPV vaccination coverage or other variables such as European region.

Moreover, to make the most accurate and appropriate interpretation of the project results, the evaluation of findings will be discussed within the Steering Committee, ideally on a quarterly basis and before the development of the final version of the interim and the final reports. Thereafter, the results will be communicated to the project participants for comments before the submission of these reports to the participants portal (SyGMA).

When needed, internal reports or communications outside of the interim and final report will be produced and delivered to the PERCH coordination team throughout the JA to improve the progress of PERCH.

### A) Quantitative Data

Quantitative data extracted from questionnaire responses will be analysed through descriptive statistics and illustrated by graphs using Excel or Stata software. It is foreseen that quantitative data from questionnaires will be collected using Likert scales and nominal options responses.

Whenever possible, data differences will be statistically assessed using the appropriate tests.

### B) Qualitative Data

Open-ended questions in evaluation questionnaires will be analysed through thematic analysis. Depending on the volume and the length of responses, data will be coded using software such as Nvivo or ATLAS.ti.

If interviews, case studies and focus groups are finally deemed necessary, data will be coded and analysed following a thematic analysis approach. Depending on the findings, the generated categories might be used for quantitative data analysis such as occurrence analysis.

## 3.3. Timing of evaluation activities

The WP3 team has dedicated the first six months of PERCH to the development of the present Evaluation Plan, which includes the evaluation and monitoring strategy for PERCH.

During the next 3 months, until Month 9, the data collection tools will be developed for subsequent delivery throughout the duration of PERCH:

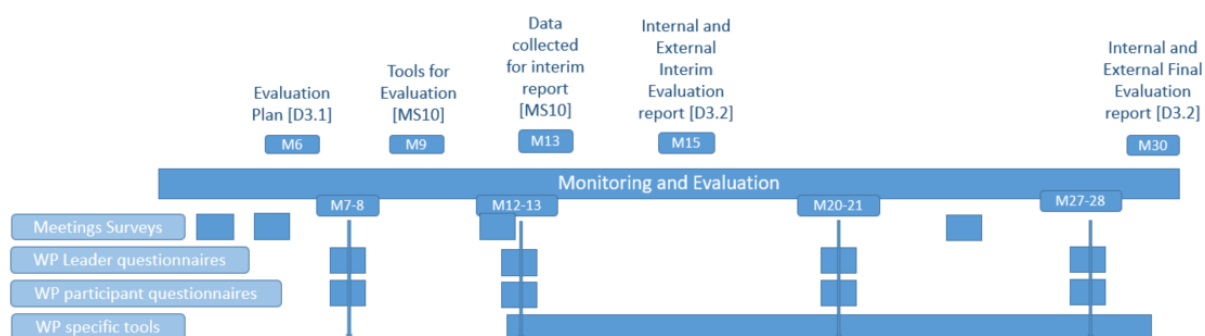
- Meeting questionnaires will be delivered after General Assembly and in-person WP specific meetings.
- WP Leader and WP participant questionnaires will be delivered every four to eight months, depending on the level of the JA activity. Whenever possible, timings for data collection will coincide with one and two months before the interim and final evaluation reports.
- Action-specific tools will be delivered after the implementation of the project actions and activities.

Data analysis will also be done throughout the project duration. However, analysis of the data will be conducted at a greater extent in preparation for the interim report for Month 15, and the final report for Month 30.

An overview of the timing of the evaluation activities can be found in Figure 2.



**Figure 2. Tentative timing of WP3 evaluation activities.**



*Of note: Timelines might be slightly adjusted as PERCH progresses.*

### 3. 4. Principles and ethics of evaluation

The evaluation of PERCH will maintain the confidentiality and anonymity of its sources. Reported data will be presented in an aggregated manner, preventing the identification of personal data. In cases where quotes or other data might risk the anonymity of the informants, consent of respondents will be asked.

Whenever possible, the WP3 team will use or build on existing data collection activities. Additional information will only be collected if considered necessary, ensured by always keeping in mind why and who is the data collected relevant for.

Consortium participants should be engaged in the evaluation design and its implementation. Therefore, an effort will be made to incorporate perspectives of all PERCH participants in the evaluation, irrespective of their role in the PERCH organization. Finally, an appropriate dissemination of the evaluation and its findings will be done to ensure that lessons learnt are passed on to interested actors.

### 3. 5. Subcontracting

An external entity with expertise in evaluations at the European level of research / implementation projects will be subcontracted.

The subcontractor is expected to provide an external and independent point of view. This external evaluation will be focused on the mid-term and long-term potential impact of the project actions as well as in their integration and sustainability.





## 4. ANNEXES

- 4. 1. ANNEX 1 – Evaluation of WP1: Project Management and Coordination
- 4. 2. ANNEX 2 – Evaluation of WP2: Dissemination
- 4. 3. ANNEX 3 – Evaluation of WP3: Evaluation
- 4. 4. ANNEX 4 – Evaluation of WP4: Integration and Sustainability
- 4. 5. ANNEX 5 – Evaluation of WP5: Monitoring
- 4. 6. ANNEX 6 – Evaluation of WP6: Improving Knowledge and Awareness to Increase Vaccine Uptake in Target Communities
- 4. 6. ANNEX 7 – Evaluation of WP7: Training and Support in Vaccine Communication

## 4. 1. ANNEX 1 – Evaluation of WP1: Project Management and Coordination

WP1 is related to the four Specific Project Objectives (Tables 2 to 5) from an overall management perspective, both at the technical and financial level.

### WP specific objectives:

- To manage the entire consortium, ensuring systematic communication with partners and WP-leaders to assure the implementation of the JA activities according to the work plan.
- To ensure a quality check and timely completion of JA deliverables and milestones.
- To manage the financial and administrative aspects of the project.

### WP participants:

All consortium partners (Belgium, Croatia, Czech Republic, Estonia, France, Germany, Greece, Hungary, Italy, Lithuania, Norway, Poland, Romania, Slovak republic, Slovenia, Spain, Sweden).

## TASK 1.1 – MANAGE THE ENTIRE CONSORTIUM

### Task-related activities or processes

Detailed task	Responsible participant
Definition and circulation of a project management plan	ISS
Definition, circulation and agreement with participating countries on a Consortium Agreement	ISS
Set-up and coordination of the scientific advisory board (SAB)	ISS
Invitation of the SAB members to participate in the GA meetings	ISS
Organization of the General Assembly meetings	ISS
Organization of the Steering Committee meetings	ISS

	Process Indicators	Target	Methodology
A1.1.1	Kick-off meeting done on Month 1 [ <i>Milestone 1</i> ]	Achieved	Desk research
A1.1.2	Number of countries that participate in the kick-off meeting	17	Desk research
A1.1.3	Establishment of SAB by Month 3 [ <i>Milestone 4</i> ]	Achieved	Desk research
A1.1.4	Number of members in the SAB with expertise in HPV vaccination or HPV-related diseases	5	Desk research
A1.1.5	Number of countries that participate in each GA meeting	17	Desk research
A1.1.6	A GA meeting by Month 12 [ <i>Milestone 5</i> ]	Achieved	Desk research
A1.1.7	A GA meeting by Month 24 [ <i>Milestone 5</i> ]	Achieved	Desk research
A1.1.8	A GA final meeting by Month 30 [ <i>Milestone 5</i> ]	Achieved	Desk research
A1.1.9	Number of face-to-face SC meetings	4	Desk research
A1.1.10	Number of virtual SC meetings	24	Desk research
A1.1.11	Number of WP represented in SC meetings	7	Desk research

### Task-related outputs

- Project Management plan
- Consortium agreement

Output Indicators		Target	Methodology
B1.1.1	Project Management plan by Month 2 [ <i>Milestone 3</i> ]	Achieved	Desk research
B1.1.2	Consortium Agreement by Month 2 [ <i>Milestone 2</i> ]	Achieved	Desk research

### Task-related outcomes

- The JA partners are clear on their role and responsibilities in the joint action.
- The JA partners are satisfied with the general coordination of the project.
- The JA partners are satisfied with the progress of the project.

Outcome Indicators		Target	Methodology
C1.1.1	Number of partners that are clear on their role and responsibilities in the joint action	34	WP1 questionnaire

## TASK 1.2 – LIAISON WITH HADEA

### Task-related activities or processes

Detailed task	Responsible participant
Regular interactions with the Executive Agency	ISS
Timely reporting on deliverables and milestones	ISS
Periodic technical reporting	ISS with the collaboration of WP leaders

Process Indicators		Target	Methodology
A1.2.1	Proportion of deliverables submitted to the portal on time	100%	Desk research
A1.2.2	Number of WP summary updates for the periodic technical reporting received by Month 14	7	WP1 questionnaire
A1.2.3	Number of WP summary updates for the periodic technical reporting received by Month 29	7	WP1 questionnaire

### Task-related outputs

- Interim technical report
- Final technical report

Output Indicators		Target	Methodology
B1.2.1	Production of an interim technical report by Month 15 (two additional months are allowed).	Achieved	Desk research
B1.2.2	Production of a final technical report by Month 30 (two additional months are allowed).	Achieved	Desk research

### Task-related outcomes

- HADEA is satisfied with the project progress and results.

	Outcome Indicators	Target	Methodology
C1.2.1	Interim technical report approved by HADEA	Achieved	Desk research
C1.2.2	Final technical report approved by HADEA	Achieved	Desk research

## TASK 1.3 - MANAGE FINANCIAL AND ADMINISTRATIVE ASPECTS OF THE PROJECT

### Task-related activities or processes

Detailed task	Responsible participant
Administration of the financial resources of the JA – payments to other beneficiaries on time	ISS
Production of periodic financial statements	Each consortium partner

	Process Indicators	Target	Methodology
A1.3.1	Number of partners that provide their interim financial statement by Month 15 (two additional months are allowed)	31	Desk research
A1.3.2	Number of partners that provide their final financial statement by Month 30 (two additional months are allowed)	31	Desk research

### Task-related outputs

- Interim financial statement
- Final financial statement

	Output Indicators	Target	Methodology
B1.3.1	Production of an interim financial statement by Month 15 (two additional months are allowed).	Achieved	Desk research
B1.3.1	Production of a final financial statement by Month 30 (two additional months are allowed).	Achieved	Desk research

### Task-related outcomes

- HADEA is satisfied with the reporting of the financial statements

	Outcome Indicators	Target	Methodology
C1.3.1	Interim financial report approved by HADEA	Achieved	Desk research
C1.3.1	Final financial report approved by HADEA	Achieved	Desk research



## TASK 1.4 – PERCH END-OF-PROJECT BOOKLET

### Task-related activities or processes

Detailed task	Responsible participant
Production of a final report summarizing the actions and results of the project based on the final technical report	ISS in collaboration with Slovenia
Share the booklet with the Governmental advisory board (GAB)	ISS

	Process Indicators	Target	Methodology
A1.4.1	Conduct a GAB meeting in which the booklet is presented by Month 30	Achieved	Desk research

### Task-related outputs

- PERCH end-of-project booklet

	Output Indicators	Target	Methodology
B1.4.1	PERCH end-of-project booklet by Month 30 [ <i>Deliverable 1.1</i> ]	Achieved	Desk research

### Task-related outcomes

- Increased knowledge on the project activities and achievements by the governmental authorities in each participating country

	Outcome Indicators	Target	Methodology
C1.4.1	Proportion of countries in the GAB that attend a meeting where the activities and achievements of the project are presented	75%	Desk research

## 4. 2. ANNEX 2 – Evaluation of WP2: Dissemination

WP2 is related to the four Specific Project Objectives (Tables 2 to 5) from a dissemination and communication perspective. In addition, WP2 is directly responsible for indicators included in the Specific Objective #1 - To improve capacities of MSs to plan and implement HPV vaccination campaigns by sharing knowledge and experience.

### WP specific objectives:

- To develop a detailed project communication and dissemination strategy.
- To communicate the JA objectives, progress and results to the relevant target audiences.
- To share international and national evidence, best practices and tools (collected in the other WPs) in the field of HPV vaccination among the consortium members and beyond.
- To support sustainable networking of international community of HPV vaccination stakeholders and facilitate dissemination from experienced to less experienced countries/regions.

### WP participants:

All consortium partners (Belgium, Croatia, Czech Republic, Estonia, France, Germany, Greece, Hungary, Italy, Lithuania, Norway, Poland, Romania, Slovak republic, Slovenia, Spain, Sweden).

### TASK 2.1 - DEVELOPMENT OF THE PERCH VISUAL IDENTITY

#### Task-related activities or processes

Detailed task	Responsible partner
Production of different logo concepts for project partners to select	OI Ljubljana with the collaboration of all consortium partners
Development of guidelines for brand use	OI Ljubljana
Production of a roll-up banner to be used in meetings and project-related events	OI Ljubljana
Production of identification badges	OI Ljubljana
Production of a power-point template for project-related presentations within or outside the consortium	OI Ljubljana
Production of word reporting templates for deliverables and reports	OI Ljubljana
Production of a PERCH leaflet: <ul style="list-style-type: none"> <li>• Development of a short and long version in English</li> <li>• Translation of one version of the PERCH leaflet to national languages</li> </ul>	OI Ljubljana All consortium partners

Process Indicators		Target	Methodology
A2.1.1	Number of potential logo concepts done in order to decide upon the final project logo	3	Desk research
A2.1.2	Number of individuals from partner organisations that provide feedback on the logo selection	30	Desk research



A2.1.3	Number of leaflets translated into each country's main language by the end of the project	17	Desk research
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### Task-related outputs

- Project logo
- Guidelines for brand use
- Roll-out banner
- Identification badges
- Power-point template
- Word Reporting template
- Project leaflet in English and local languages

	Output Indicators	Target	Methodology
B2.1.1	Project leaflet in English available by Month 2 [ <i>Deliverable 2.1</i> ]	Achieved	Desk research
B2.1.2	Project logo developed by Month 2	Achieved	Desk research
B2.1.3	Guidelines for brand use developed by Month 2	Achieved	Desk research
B2.1.4	Roll-out banner developed by Month 2	Achieved	Desk research
B2.1.5	Identification badges developed by Month 2	Achieved	Desk research
B2.1.6	PowerPoint template developed by Month 2	Achieved	Desk research
B2.1.7	Reporting template developed by Month 2	Achieved	Desk research

### Task-related outcomes

- Recognizable identity of the project by the use of the developed materials by the project partners

	Outcome Indicators	Target	Methodology
C2.1.1	The project logo is used in all the project outputs (when feasible) after its development in Month 2	Achieved	Desk research
C2.1.2	Proportion of deliverables and reports that use the reporting template after its development in Month 2	100%	Desk research
C2.1.3	Proportion of presentations in General Assembly meetings that use the PowerPoint template after its development in Month 2	100%	Desk research

## TASK 2.2 - DEVELOPMENT OF JA WEBSITE AND OTHER COMMUNICATION CHANNELS

### Task-related activities or processes

Detailed task	Responsible partner
Development of JA website	ISS in collaboration with OI Ljubljana
Development of a repository of best practices and tools within the website	OI Ljubljana



<p><i>* This task needs to be further refined. On the website, the project outputs will be uploaded and available, but a potential large repository will be created in collaboration with the PROTECT-Europe action grant project. The evaluation of this task and its outputs and outcomes will be further defined in the future</i></p>	
<p>Setting up a Twitter account for PERCH</p>	<p>OI Ljubljana</p>
<p>Establishment of an HPV vaccination guild to support sustainable networking of international HPV vaccination stakeholders. <i>* This task needs to be further defined. At the moment, it is understood as a series of webinars / online roundtables for WP2 working group and other interested stakeholders. The evaluation of this task and its outputs and outcomes will be further defined in the future</i></p>	<p>OI Ljubljana</p>

Process Indicators	Target	Methodology
<p><i>Further repository and guild related indicators will be decided after the task is fully defined</i></p>		

### Task-related outputs

- JA website
- Twitter account
- Repository of best practices and tools
- HPV vaccination guild

Output Indicators		Target	Methodology
B2.2.1	JA website by Month 4 <i>[Deliverable 2.3]</i>	Achieved	Desk research
B2.2.2	Twitter account by Month 2	Achieved	Desk research
B2.2.3	Development of a repository of best practices and tools within the project website by Month 6 <i>[Milestone 8]</i>	Achieved	Desk research
B2.2.4	Update of repository of best practices and tools by Month 18 <i>[Milestone 8]</i>	Achieved	Desk research
B2.2.5	Update of repository of best practices and tools by Month 30 <i>[Milestone 8]</i>	Achieved	Desk research
B2.2.6	HPV vaccination guild by Month 12 <i>[Milestone 9]</i>	Achieved	Desk research
B2.2.7	HPV vaccination guild by Month 30 <i>[Milestone 9]</i>	Achieved	Desk research

### Task-related outcomes

- Increased availability of materials to increase HPV vaccine awareness.
- Strengthened national and international stakeholder networks.
- Strengthened awareness among MSs on the added value of developing a cooperative approach between countries.





	Outcome Indicators	Target	Methodology
C2.2.1	PERCH participants satisfied with the communication channels used during the JA	Achieved	WP2 participant questionnaire
C2.2.2	Increasing number of materials shared in the repository as the project progresses	Achieved	Desk research

### TASK 2.3 – DEVELOPMENT, IMPLEMENTATION AND EVALUATION OF THE PERCH COMMUNICATION AND DISSEMINATION (C&D) PLAN

#### Task-related activities or processes

	Detailed task	Responsible partner	
DEVELOPMENT	Establishment of the WP2 working group (1 expert in HPV and 1 expert in communication, or both)	OI Ljubljana	
	Stakeholder mapping and analysis <ul style="list-style-type: none"> <li>• Develop an initial online survey tool (1ka) with guidelines on how to list stakeholders and to identify communication strategies</li> <li>• Piloting the online survey tool (1ka) for the stakeholder mapping and analysis.</li> <li>• Discussion and adjustment of the survey tool.</li> <li>• Mapping of national stakeholders through the 1ka survey tool by all partners.</li> <li>• Categorisation and quantification to contribute to the most uniform understanding of the stakeholders requirements.</li> <li>• External Twitter analysis for stakeholders on EU level</li> <li>• Identification of preferred communication and dissemination channels and messengers</li> </ul>	OI Ljubljana All consortium partners OI Ljubljana All consortium partners OI Ljubljana OI Ljubljana All consortium partners	
	Definition of the key messages for different stakeholder groups	OI Ljubljana	
	Development of a social media strategy / campaign	OI Ljubljana	
	Development of the communication and dissemination strategy	OI Ljubljana	
	IMPLEMENTATION	Periodic update of the JA website	ISS
		Regular engagement of key stakeholders via periodic newsletter and other communication channels by WP2 coordination team	OI Ljubljana
Regular engagement of key stakeholders via periodic newsletter and other communication channels by national partners		All consortium partners	
EVALUATION	Development of a tool for reporting of communication and dissemination activities <ul style="list-style-type: none"> <li>- Development of a draft tool to report communication and dissemination activities by partners.</li> <li>- Piloting of the tool by participating countries: reporting communication and dissemination activities conducted in their respective countries.</li> <li>- Discussion and adjustments of the C&amp;D reporting tool.</li> </ul>	OI Ljubljana	
	Periodic reporting by partners using the reporting tool.	All consortium partners	



Selection and definition of the key performance indicators.	OI Ljubljana and ICO
Evaluation of the predefined key performance indicators.	OI Ljubljana and ICO
Update of the Communication and Dissemination Plan (channels and tools) periodically.	OI Ljubljana

	Process Indicators	Target	Methodology
A2.3.1	WP2 working group established by Month 3	Achieved	WP2 questionnaire
A2.3.2	Number of countries with at least two persons in the WP2 working group	18	WP2 questionnaire
A2.3.3	Number of countries that provide feedback on the survey tool for stakeholder mapping	6	WP2 questionnaire
A2.3.4	Number of countries that have conducted a stakeholder mapping by Month 4	17	Desk research
A2.3.5	Number of stakeholders from different policy sectors identified in the stakeholder mapping in each country by Month 2 [ <i>Key Objective Indicator</i> ]	3	Desk research
A2.3.6	Report on twitter profiles for communication about the project PERCH (external media analysis) done by Month 3	Achieved	WP2 questionnaire
A2.3.7	Social media strategy / campaign defined by Month 15	Achieved	WP2 questionnaire
A2.3.8	Number of partners that provide feedback to the C&D plan	6	WP2 questionnaire
A2.3.9	Number of countries that provide the reporting tool completed with activities performed in the last 6 months by Month 6	17	Desk research
A2.3.10	Number of countries that provide the reporting tool completed with activities performed in the last 6 months by Month 12	17	Desk research
A2.3.11	Number of countries that provide the reporting tool completed with activities performed in the last 6 months by Month 18	17	Desk research
A2.3.12	Number of countries that provide the reporting tool completed with activities performed in the last 6 months by Month 24	17	Desk research
A2.3.13	Number of countries that provide the reporting tool completed with activities performed in the last 6 months by Month 30	17	Desk research
A2.3.14	Definition of the evaluation plan / key performance indicators (KPI) for the dissemination strategy by Month 9	Achieved	Desk research
A2.3.15	Data collection to evaluate the KPI by Month 14	Achieved	WP2 questionnaire
A2.3.16	Data collection to evaluate the KPI by Month 29	Achieved	WP2 questionnaire

### Task-related outputs

- Stakeholder mapping analysis
- Communication and Dissemination plan
- Project newsletters



- Reporting template for dissemination and communication activities
- Updated communication and dissemination plan
- Evaluation of the communication and dissemination plan

Output Indicators		Target	Methodology
B2.3.1	Stakeholder mapping analysis by Month 2 [ <i>Milestone 6</i> ]	Achieved	Desk research
B2.3.2	Communication and Dissemination plan by Month 4 [ <i>Deliverable 2.2</i> ]	Achieved	Desk research
B2.3.3	Results from the KPI evaluation available by Month 15	Achieved	Desk research
B2.3.4	Updated Communication and dissemination plan by Month 15 [ <i>Milestone 7</i> ]	Achieved	Desk research
B2.3.5	Results from the KPI evaluation available by Month 30	Achieved	Desk research
B2.3.6	Updated Communication and dissemination plan by Month 30 [ <i>Milestone 7</i> ]	Achieved	Desk research

### Task-related outcomes

- PERCH key messages, objectives, efforts, progress and results are effectively communicated and disseminated among the HPV vaccination stakeholders at the national and European level.
- Key national and European stakeholders engage in activities that can contribute to increase HPV vaccination coverage.
- PERCH partners and other European countries share their good practices and lessons learned among the consortium members for inspiration and learning purposes.
- PERCH partners and other European countries build or increase capacity for effective communication aimed at engaging stakeholders and increasing HPV vaccine uptake; to support sustainable, multidisciplinary networking of HPV vaccination supporters on a national and international level.
- HADEA is satisfied with the reporting of communication and dissemination activities.

Outcome Indicators		Target	Methodology
<i>Key performance indicators and their targets to assess if the outcomes above have been reached will be fully defined by Month 9</i>			
C2.3.1	Proportion of stakeholders that improve their knowledge on how to promote HPV vaccination [ <i>Key objective indicator</i> ]	80%	WP2 Specific tool (pre/post test)
C2.3.2	Interim technical report including the C&D activities approved by HADEA	Achieved	Desk research
C2.3.3	Final technical report including the C&D activities approved by HADEA	Achieved	Desk research

### TASK 2.4 - DEVELOPMENT OF NATIONAL HPV COMMUNICATION STRATEGIES [T2.4]

#### Task-related activities or processes

Detailed task	Responsible partner
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Establish a national HPV communication strategy working group to facilitate the sharing of knowledge and practices between countries	A few WP2 working group members to be defined
Conduct a situation analysis about existing communication strategies and assessment needs in participating countries	OI Ljubljana in collaboration with the WP2 working group
Develop guidelines for the National HPV Communication Strategies	OI Ljubljana in collaboration with the national HPV communication strategy working group
Conduct e-workshops to share good practices between countries within the guild	OI Ljubljana in collaboration with the WP2 working group
Development of each country's national communication strategy	WP2 participants

	Process Indicators	Target	Methodology
A2.4.1	Number of situation analysis conducted by Month 12	17	Desk research
A2.4.2	Guidelines for the National HPV Communication plan developed by Month 23	Achieved	Desk research

### Task-related outputs

- National HPV communication strategies

	Output Indicators	Target	Methodology
B2.4.1	National HPV communication strategies by Month 28 <i>[Deliverable 2.4]</i>	Achieved	Desk research
B2.4.2	Proportion of countries that develop a national HPV communication Strategy by Month 30 among those that do not launch or pilot a National HPV vaccination campaign <i>[Key Objective Indicator]</i>	100%	Desk research

### Task-related outcomes

- PERCH participating countries have a clearer idea on how to tackle HPV communication in their country

	Outcome Indicators	Target	Methodology
C2.4.1	Proportion of participating countries that have a clearer idea on how to tackle HPV communication in their country	75%	WP2 questionnaire

### 4.3. ANNEX 3 – Evaluation of WP3: Evaluation

WP2 is related to the four Specific Project Objectives (Tables 2 to 5) from an evaluation perspective.

#### WP specific objectives:

- To monitor the progress of the JA in terms of tasks, milestones and deliverables being implemented as planned.
- To evaluate the JA activities in terms of process adherence, output, outcome and impact based on an evaluation plan to be developed.

#### WP participants:

All consortium partners (Belgium, Croatia, Czech Republic, Estonia, France, Germany, Greece, Hungary, Italy, Lithuania, Norway, Poland, Romania, Slovak republic, Slovenia, Spain, Sweden).

### TASK 3.1 - DEFINITION OF THE EVALUATION PLAN

#### Task-related activities or processes

Detailed task	Responsible participant
Development of a tentative evaluation methodology of PERCH	ICO
Design an initial Logic Model detailing processes, milestones and deliverables for each WP	ICO
Collect feedback by WP Leaders on these models to be modified accordingly	ICO and WP3 participants
Extend the initial models to include the outputs and outcomes as well as some potential indicators and targets as well as the data collection tools to be used (Development of Logical Framework Matrices)	ICO
Schedule one-to-one meetings with WP Leaders to discuss and agree on the indicators, targets and potential data collection tools	ICO and WP3 participants
Selection of tools to conduct the evaluation	ICO

	Process Indicators	Target	Methodology
A3.1.1	Number of WP leaders that provide feedback on the initial Logic Models	6	Desk research
A3.1.2	Number of meetings with WP leaders to discuss indicators and evaluation methodology of their WP	6	Desk research

#### Task-related outputs

- Logical Framework Matrices for each WP including its indicators and targets
- Evaluation plan



Output Indicators		Target	Methodology
B3.1.1	Number of Logical Framework Matrices	7	Desk research
B3.1.2	Evaluation plan by Month 6 [ <i>Deliverable 3.1</i> ]	Achieved	Desk research

### TASK 3.2 - DESIGN AND DEVELOPMENT OF TOOLS FOR DATA COLLECTION ON EVALUATION

#### Task-related activities or processes

Detailed task	Responsible participant
Development of meeting questionnaires	ICO in collaboration with WP leaders
Development of WP Leaders questionnaire	ICO in collaboration with WP leaders
Development of WP Participants questionnaire	ICO in collaboration with WP leaders
Co-creation of surveys for repository and/or vaccination guild users	IO Ljubljana in collaboration with ICO
Co-creation of surveys to GAB members	ICO and Steering Committee
Co-creation of surveys to parents, students and teachers involved in WP6 activities and to the targeted population by WP6 tools	ISS / 1 <sup>st</sup> YPE in collaboration with ICO
Co-creation of surveys to healthcare professionals	BZgA in collaboration with ICO
Additional necessary tools that might be needed although not yet identified	ICO

#### Task-related outputs

- Development of data collection tools (*WP Leaders questionnaire, WP Participants questionnaire, Survey to GAB members, Surveys for repository and/or vaccination guild users, Surveys to parents, students and teachers involved in WP6 activities, Survey for healthcare professionals involved in WP7 trainings*)

Output Indicators		Target	Methodology
B3.2.1	Development of WP3 data collection tools by Month 9 [ <i>Milestone 10</i> ]	Achieved	Desk research

#### Task-related outcomes

- All data required for evaluation purposes can be collected

Outcome Indicators		Target	Methodology
B3.2.1	Number of indicators that cannot be measured due to lack of data	None	Desk research

### TASK 3.3 - MONITORING THE PROGRESS OF THE JA

#### Task-related activities or processes

Detailed task	Responsible participant
Delivery of questionnaire, data collection and analysis of in-person meetings	ICO in collaboration with all consortium participants
Delivery, data collection and analysis of WP leaders questionnaire every four to eight months	ICO in collaboration with WP leaders
Delivery, data collection and analysis of WP Participants questionnaire every four to eight months	ICO in collaboration with WP3 participants
Conduct desk research to collect throughout PERCH	ICO
Participate in General Assembly, Steering Committee and WP specific meetings	ICO
Periodically share monitoring findings with the Steering Committee	ICO

Process Indicators		Target	Methodology
A3.3.1	Proportion of in-person meetings for which feedback is collected and analysed	100%	Desk research
A3.3.2	Number of WP Leader questionnaire batches sent throughout PERCH	3	Desk research
A3.3.3	Number of WP Participant questionnaire batches sent throughout PERCH	3	Desk research
A3.3.4	Number of exchanges on monitoring findings between WP3 and WP1 throughout PERCH	4	Desk research

#### Task-related outputs

- Reports on meetings feedback

Output Indicators		Target	Methodology
B3.3.1	Proportion of PERCH in-person meetings with a feedback report	100%	Desk research

#### Task-related outcomes

- Timely identification of potential issues that might require of corrective measures

Outcome Indicators		Target	Methodology
C3.3.1	Satisfaction of PERCH participants with the progress of the overall project	>65%	WP3 questionnaire

### TASK 3.4 - INTERNAL INTERIM AND FINAL EVALUATION

#### Task-related activities or processes



**Detailed task** **Responsible participant**

Production of an interim evaluation draft report	ICO
Production of a final evaluation draft report	ICO
Send draft reports to PERCH participants for feedback	ICO

Process Indicators		Target	Methodology
A3.4.1	Evaluation data collected for the interim evaluation report by Month 13 [ <i>Milestone 11</i> ]	Achieved	Desk research

**Task-related outputs**

- Internal interim evaluation report
- Internal final evaluation reports

Output Indicators		Target	Methodology
B3.4.1	Interim internal evaluation report by Month 15 [ <i>Deliverable 3.2</i> ]	Achieved	Desk research
B3.4.2	Final internal evaluation report by Month 30 [ <i>Deliverable 3.3</i> ]	Achieved	Desk research

**Task-related outcomes**

- HADEA is satisfied with the internal evaluations of the project

Outcome Indicators		Target	Methodology
C3.4.1	Internal interim evaluation reports approved by HADEA	Achieved	Desk research
C3.4.2	Internal final evaluation reports approved by HADEA	Achieved	Desk research

**TASK 3.5 - EXTERNAL INTERIM AND FINAL EVALUATION**

**Task-related activities or processes**

**Detailed task** **Responsible participant**

Production of a Terms of Reference for external evaluation Team	ICO and ISS
Tendering process based on the Terms of Reference	ICO and ISS
Appointment of an external evaluation team	ICO and ISS

**Task-related outputs**

- External interim evaluation report
- External final evaluation report

Output Indicators		Target	Methodology
B3.5.1	External interim evaluation report by Month 15 [ <i>Deliverable 3.2</i> ]	Achieved	Desk research
B3.5.2	External final evaluation report by Month 30 [ <i>Deliverable 3.3</i> ]	Achieved	Desk research





### Task-related outcomes

- HADEA is satisfied with the external evaluations of the project

	Outcome Indicators	Target	Methodology
C3.5.1	External interim evaluation reports approved by HADEA	Achieved	Desk research
C3.5.2	External final evaluation reports approved by HADEA	Achieved	Desk research

#### 4. 4. ANNEX 4 – Evaluation of WP4: Integration and Sustainability

WP4 is related to the four Specific Project Objectives (Tables 2 to 5). In addition, WP4 is directly responsible for indicators of the Specific Objective #1 - To improve capacities of MSs to plan and implement HPV vaccination campaigns by sharing knowledge and experience.

##### WP specific objectives:

- To survey how HPV vaccination currently is implemented in EU countries, including identification of barriers, facilitators and influencing factors of successful implementation of HPV vaccination policies.
- To promote the integration of HPV vaccination activities in the national routine vaccination schedule in participating MSs where this is not yet the case.
- To update knowledge on efficacy and safety of HPV vaccines, in particular on effectiveness of one-dose HPV vaccination schedules.
- To identify strategies for the purchase of HPV vaccines at lowest possible cost.
- To formulate an integration and sustainability plan for HPV vaccination implementation in the EU, including development of roadmaps for implementation of HPV vaccination adjusted to local needs and recommendations for best practices for implementation, monitoring, education and dissemination defined throughout the JA.
- To launch /pilot HPV vaccination campaigns in strategically selected countries.

##### WP participants:

All consortium partners (Belgium, Croatia, Czech Republic, Estonia, France, Germany, Greece, Hungary, Italy, Lithuania, Norway, Poland, Romania, Slovak republic, Slovenia, Spain, Sweden).

#### TASK 4.1 - DESCRIBE HOW HPV VACCINATION IS CURRENTLY IMPLEMENTED IN EU COUNTRIES (SITUATION ANALYSIS)

##### Task-related activities or processes

Detailed task	Responsible partner
Generate a list of contact points for each country to be contacted for survey completion and interviews	Sciensano
Design of a draft questionnaire addressed to national contact points, including questions on current HPV vaccination organisation, data collection, barriers, as well as suggestions to increase coverage	Sciensano
Testing of the questionnaire for comprehension and feasibility	Selected WP4 countries
Design of a checklist of items to be covered in in-depth interviews	Sciensano
Data collection via questionnaires	All consortium partners
Conduct and record interviews with contact points	Sciensano
Literature review on policies / situations identified via interviews with contact points	Sciensano
Analysis of data collected via questionnaire, interviews and policy review and production of a Status Report.	Sciensano



	Process Indicators	Target	Methodology
A4.1.1	A contact point from all PERCH participating countries identified by Month 3	Achieved	WP4 questionnaire
A4.1.2	Number of countries that test the survey before it is being sent for completion by Month 4	4	WP4 questionnaire
A4.1.3	Number of countries that provide information on how each of them is organised in terms of HPV vaccination and screening by Month 4 [ <i>Key Objective Indicator</i> ]	17	WP4 questionnaire
A4.1.4	In-depth interviews conducted by Month 15	Achieved	WP4 questionnaire

### Task-related outputs

- Questionnaire on HPV vaccination administration and monitoring.
- Checklist of items to be covered in in-depth interviews.
- Synthesis of recorded interviews.
- Status Report on implementation of HPV vaccination services.

	Output Indicators	Target	Methodology
B4.1.1	Questionnaire on HPV vaccination administration and monitoring by Month 4 [ <i>Milestone 13</i> ]	Achieved	Desk research
B4.1.2	Checklist of items to be covered in in-depth interviews, by Month 4 [ <i>Milestone 13</i> ]	Achieved	Desk research
B4.1.3	Status Report on implementation of HPV vaccination services by Month 10 [ <i>Deliverable 4.1</i> ]	Achieved	Desk research
B4.1.4	Synthesis of recorded interviews by Month 16 [ <i>Milestone 17</i> ]	Achieved	Desk research

### Task-related outcomes

- Improve information on how HPV vaccination is implemented in all participating and preferentially also other EU countries.

	Outcome Indicators	Target	Methodology
C4.1.1	Proportion of countries in the GAB that attend a meeting to present the report on implementation of HPV vaccination services	75%	Desk research

## TASK 4.2 - IMPROVE MS' CAPACITY TO INTEGRATE HPV VACCINATION ACTIVITIES AT NATIONAL LEVEL

### Task-related activities or processes

Detailed task	Responsible partner
Identification of countries that have successfully integrated HPV vaccination in the national routine vaccination schedule and those who have not	Sciensano



Issue country-specific or general recommendations to countries without vaccination services not integrated based on the results of task 4.1	Sciensano in collaboration with consortium partners
Facilitate exchange between countries that have integrated vaccination services with those that have not (Poland, Slovakia)	Sciensano in collaboration with consortium partners

Process Indicators		Target	Methodology
A4.2.1	Proportion of countries without integrated HPV vaccination services (national contact points) that receive recommendations	100%	WP4 questionnaire
A4.2.2	Proportion of countries without integrated HPV vaccination services that participate in exchanges between countries	100%	WP4 questionnaire

### Task-related outputs

- List of countries that have successfully integrated HPV vaccination services and those who have not.
- Recommendations to integrate HPV vaccination in the national routine vaccination schedule.

Output Indicators		Target	Methodology
B4.2.1	List of countries that have successfully integrated HPV vaccination services and those who have not by Month 4 [ <i>Milestone 14</i> ]	Achieved	Desk research
B4.2.2	Recommendations to integrate HPV vaccination in the national routine vaccination schedule by Month 30	Achieved	Desk research

### Task-related outcomes

- Countries without HPV vaccination services integrated at the national level at the start of PERCH increase their capacity to do so.

Outcome Indicators		Target	Methodology
C4.2.1	Proportion of WP4 participants from countries without HPV vaccination integrated at the national level at the start of PERCH, that feel more confident on how to do it	50%	WP4 questionnaire

## TASK 4.5 - DEVELOPMENT AND DISSEMINATION OF THE INTEGRATION AND SUSTAINABILITY PLAN

### Task-related activities or processes

Detailed task	Responsible partner
Establishment of the Governmental Advisory Board (GAB)	Sciensano
Review and summary of WP4 results from each task	Sciensano
Review and summary of WP5-WP7 results	Sciensano



Development of an Integration and Sustainability Plan based on the revision of WP4-WP7 findings	Sciensano
Dissemination of the Integration and Sustainability Plan	Sciensano in collaboration with WP2

	Process Indicators	Target	Methodology
A4.5.1	Establishment of the Governmental Advisory Board by Month 4 [ <i>Milestone 12</i> ]	Achieved	Desk research
A4.5.2	Number of PERCH participating countries that are part of the Governmental Advisory Board	18	Desk research
A4.5.3	Collection of available results from WP4 to WP7 to be included in the integration and sustainability plan by Month 25	Achieved	WP4 questionnaire

### Task-related outputs

- Integration and Sustainability Plan

	Output Indicators	Target	Methodology
B4.5.1	Integration and Sustainability Plan by Month 27 [ <i>Deliverable 4.2</i> ]	Achieved	Desk research

### Task-related outcomes

- Improved knowledge of GAB members of PERCH participating countries on recommended measures to integrate and sustain HPV vaccination services and other actions to increase HPV vaccination coverage.

	Outcome Indicators	Target	Methodology
C4.5.1	A meeting to disseminate the Integration and Sustainability plan to Ministry of Health representatives done by Month 30	Achieved	Desk research
C4.5.2	Number of countries in the GAB that attend a meeting to present the Integration and Sustainability Plan [ <i>Key Objective Indicator</i> ]	17	Desk research

## TASK 4.6 - LAUNCHING/PILOTING HPV VACCINATION PILOT ACTION / CAMPAIGNS IN SELECTED COUNTRIES

### Task-related activities or processes

Detailed task	Responsible partner
Design and development of an HPV vaccination pilot action / campaign*	Estonia, Greece, Italy, Hungary, Poland, Slovakia and Slovenia.



Launching or piloting HPV vaccination pilot action / campaigns	<i>Other countries without specific budget might be included</i>
	Estonia, Greece, Italy, Hungary, Poland, Slovakia and Slovenia. <i>Other countries without specific budget might be included</i>

*\* The definition of HPV vaccination campaign has yet to be defined. It could be actions to increase HPV vaccination and awareness in vaccine eligible population but also training for healthcare professionals or actions taken to improve data registration.*

Process Indicators		Target	Methodology
A4.6.1	HPV vaccination campaigns to be developed in each participating country defined by Month 28	Achieved	Desk research

### Task-related outputs

- National HPV vaccination campaigns

Output Indicators		Target	Methodology
B4.6.1	A report containing the list of National HPV vaccination pilot actions/campaigns set-up or started delivered by Month 30 [ <i>Deliverable 4.3</i> ]	Achieved	Desk research
B4.6.2	Number of HPV vaccination campaigns launched or piloted in countries with girls HPV vaccination coverage lower than 60% by Month 30 [ <i>Key Objective Indicator</i> ]	5	Desk research

## TASK 4.3 - UPDATE OF STATE OF THE ART ON EFFECTIVENESS AND SAFETY OF HPV VACCINES IN GENERAL AND EFFICACY OF A SINGLE-DOSE HPV VACCINE

### Task-related activities or processes

Detailed task	Responsible partner
Complete / update existing reviews on efficacy and effectiveness of a single dose HPV vaccination schedule.	Sciensano
Update the existing Cochrane systematic review on HPV vaccine efficacy and safety	Sciensano
Identify existing reviews on HPV vaccine efficacy and safety data in males and conduct a systematic review or meta-analyses if applicable.	Sciensano

Process Indicators		Target	Methodology
A4.3.1	Identify existing reviews on efficacy and effectiveness of a single dose HPV vaccination schedule by Month 7	Achieved	WP4 questionnaire



A4.3.2	Identify existing reviews on HPV vaccine efficacy and safety data in males by Month 7	Achieved	WP4 questionnaire
A4.3.3	Protocol on the efficacy and safety in males published on Prospero	Achieved	Desk research

### Task-related outputs

- Protocol to update the Cochrane review on HPV vaccine and efficacy.
- Protocol for HPV vaccine efficacy and effectiveness of one dose.
- Protocol for prophylactic vaccination against HPV infection and associated ano-genital diseases in males.
- Obtention of accurate estimates of efficacy and safety of HPV vaccines.

	Output Indicators	Target	Methodology
B4.3.1	Protocol to update the Cochrane review on HPV vaccine and efficacy available by Month 8 [ <i>Milestone 15</i> ]	Achieved	Desk research
B4.3.2	Protocol for efficacy and effectiveness of one dose by Month 8 [ <i>Milestone 15</i> ]	Achieved	Desk research
B4.3.3	Protocol for prophylactic vaccination against HPV infection and associated ano-genital diseases in males by Month 8 [ <i>Milestone 15</i> ]	Achieved	Desk research

### Task-related outcomes

- Share knowledge on HPV vaccine efficacy and safety.

	Outcome Indicators	Target	Methodology
C4.3.1	Proportion of countries in the GAB that attend a meeting to present the updated HPV vaccine efficacy and safety estimates	75%	Desk research

## TASK 4.4 - ASSESSING PRICING AND PURCHASING OF HPV VACCINE

### Task-related activities or processes

Detailed task	Responsible partner
Subcontracting process, including a tender process if needed	Sciensano
Delivery of report updating the cost-analysis on HPV vaccines	External subcontractor

### Task-related outputs

- Report on the cost-analysis of HPV vaccines.



Output Indicators		Target	Methodology
B4.4.1	Cost-analysis of HPV vaccines delivered by Month 16 <i>[Milestone 16]</i>	Achieved	Desk research

#### Task-related outcomes

- Share experience and knowledge on HPV vaccine purchasing.
- Empowered countries to obtain vaccines at the cheapest possible price.

Outcome Indicators		Target	Methodology
C4.4.1	Proportion of countries in the GAB that attend a meeting to discuss the cost analysis of HPV vaccines	75%	Desk research
C4.4.1	Proportion of GAB members that feel more empowered to obtain vaccines at the cheapest possible price after attending a GAB meeting to discuss the cost analysis of HPV vaccines	75%	WP3 Specific tool



## 4.5. ANNEX 5 – Evaluation of WP5: Monitoring

WP5 is directly responsible for the indicators of the Specific Objective # 2 – To improve data and monitoring system on HPV vaccination and screening.

### WP specific objectives:

- To monitor HPV vaccination coverage, using available data collection systems
- To support participating countries to improve future data collection regarding HPV vaccination allowing international reporting, supporting networking with cancer screening services and evaluation of process and impact
- To present precise data on HPV vaccination in all MSs using improved data collection forms

### WP participants:

Croatia, Germany, Estonia, France, Greece, Italy, Lithuania, Poland, Romania, Slovak Republic, Slovenia and Sweden.

## TASK 5.1 - TO MONITOR HPV VACCINATION COVERAGE THROUGH CURRENT DATA COLLECTION SYSTEMS

### Task-related activities or processes

Detailed task	Responsible participants
Development of a template to collect data regarding HPV vaccination coverage	ICO
Review of the template by selected countries	ICO with the collaboration of Spain, Belgium, Slovenia and Greece
Incorporate feedback and modifications on the template when applicable	ICO
Data collection from WP5 participants using the template (incorporate further modifications if needed)	WP5 participants
Data check with other data sources	ICO
Collection of data on HPV vaccination barriers and facilitators from PERCH task 4.1	Sciensano and ICO
Initial data analysis and production of a first report draft	ICO
Data collection by non-participating countries in WP5 and other countries within WHO Euro region	ICO and Sciensano and countries not participating in WP5
Final data analysis	ICO
Production of report	ICO and Sciensano

	Process Indicators	Target	Methodology
A5.1.1	Number of countries that review the template for feedback	3	WP5 questionnaire



A5.1.2	Meeting to present and provide instructions to WP5 participating countries for template completion by Month 6	Achieved	Desk research
A5.1.3	Data on HPV vaccination from all WP5 participating countries (n=12) collected by Month 12 [ <i>Milestone 19</i> ]	Achieved	WP5 questionnaire
A5.1.4	First data analysis by Month 15	Achieved	WP5 questionnaire

### Task-related outputs

- Templates to collect data on HPV vaccination coverage
- Report on HPV vaccination coverage

Output Indicators		Target	Methodology
B5.1.1	Tables to collect data on HPV vaccination coverage by Month 3 [ <i>Milestone 18</i> ]	Achieved	Desk research
B5.1.2	Report on HPV vaccination coverage by Month 24 [ <i>Deliverable 5.1</i> ]	Achieved	Desk research

### Task-related outcomes

- Improve information on how HPV vaccination is monitored in all participating and preferentially also other EU countries
- Facilitate standardised / homogeneous data reporting on HPV vaccination coverage

Outcome Indicators		Target	Methodology
C5.1.1	Proportion of WP5 participating countries that consider that this template is useful for reporting purposes	80%	WP5 questionnaire

## TASK 5.2 - TO IMPROVE PARTICIPATING COUNTRIES DATA COLLECTION SYSTEM

### Task-related activities or processes

Detailed task	Responsible participants
Desk search on how data collection forms to estimate HPV vaccination coverage are structured and used to collect and centralise data in different organizations	Sciensano and ICO
Investigate how countries link data with screening and cancer registries and its potential exploitation using survey and interviews from Task 5.1 and WP4	Sciensano and ICO
Investigate in a few representative countries the legal and administrative barriers that impede straightforward registration and linkage of HPV vaccination data via: <ul style="list-style-type: none"> <li>- Survey on legal and administrative barriers to selected countries</li> <li>- Interview on legal and administrative barriers to selected countries</li> </ul>	Sciensano with the collaboration of selected countries



Propose solutions to mitigate these legal barriers with the assistance of a legal advisor	Sciensano
Production of a report on monitoring systems for HPV vaccination	Sciensano and ICO
Identify countries that develop capacity to collect individual HPV vaccination records and will be able to link them to other registries	Sciensano

Process Indicators		Target	Methodology
A5.2.1	Number of countries with information available on how vaccination data is collected and linkage of data across registries is done by Month 16	12	Desk research
A5.2.2	Proportion of WP5 participating countries that identify data to be included in HPV vaccine administration register and linked with other registries by Month 24 [ <i>Key Objective Indicator</i> ]	100%	WP participant questionnaire
A5.2.3	Number of WP5 participating countries that agree to participate in the additional survey on legal and administrative barriers by Month 24 [ <i>Key Objective Indicator</i> ]	4	WP leader questionnaire

### Task-related outputs

- Report on monitoring systems for HPV vaccination

Output Indicators		Target	Methodology
B5.2.1	Report on monitoring systems for HPV vaccination by Month 24 [ <i>Deliverable 5.2</i> ]	Achieved	Desk research

### Task-related outcomes

- Improved information on how HPV vaccination is monitored in all participating and preferentially also other EU countries and how HPV vaccination articulates with cervical cancer screening.
- Strengthen the awareness of political authorities on the main gaps on planning and monitoring HPV vaccination and screening.

Outcome Indicators		Target	Methodology
C5.2.1	A final policy report on the main barriers/challenges and successes to implement a data and monitoring system (part of the Integration and Sustainability Plan) is shared with a representative of the ministry of health of WP5 participating countries [ <i>Key Objective Indicator</i> ]	Achieved	Desk research
C5.2.2	List of countries that develop capacity to collect individual HPV vaccination records, and will be able to link them to other registries by Month 16 [ <i>Milestone 20</i> ]	Achieved	Desk research
C5.2.3	Proportion of WP5 participant countries that consider adopting an action plan to improve linkage between monitoring systems [ <i>Key Objective Indicator</i> ]	50%	WP5 questionnaire
C5.2.4	The EU council recommendations on HPV and ha vaccination, currently under development, incorporate	Achieved	Desk research



	the need to address legal barriers as an action point to increase vaccination uptake		
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### TASK 5.3 - INVESTIGATE THE IMPACT OF COVID-19

#### Task-related activities or processes

Detailed task	Responsible participants
Conduct a literature review on published data on COVID19 and HPV vaccination to identify gaps in knowledge	Sciensano
Develop a survey to collect data on: <ul style="list-style-type: none"> <li>- HPV vaccine activity changes due to COVID19</li> <li>- Strategies used to reach the population group resistant to COVID vaccine and methods used to tackle anti-vaccine stories</li> </ul>	WP5 participants
Data analysis	Sciensano

	Process indicators	Target	Methodology
A5.3.1	Literature review on COVID-19 and vaccination finalised by Month 29	Achieved	WP5 questionnaire
A5.3.2	Survey sent to all WP5 participating countries by Month 24	Achieved	WP5 questionnaire
A5.3.3	Number of countries that complete the survey about COVID-19 impact	70%	Desk research

#### Task-related outputs

- Report on COVID-19 pandemic impact on HPV vaccination

	Output indicators	Target	Methodology
B5.3.1	Report on COVID-19 pandemic impact on HPV vaccination by Month 30 [ <i>Deliverable 5.3</i> ]	Achieved	Desk research

#### Task-related outcomes

- Increased knowledge of the impact of COVID-19 on HPV vaccination activities
- Identification of potential strategies / lessons learnt from COVID-19 vaccination that could be applied to HPV vaccination

	Outcome indicators	Target	Methodology
C5.3.1	Level of knowledge among WP5 participants on the impact of COVID-19 on administration of HPV vaccines by the end of the project	High	WP5 questionnaire
C5.3.2	Number of lessons learnt from COVID-19 vaccination that could be applied to HPV vaccine hesitancy	1	Desk research



## TASK 5.4 - PRODUCTION OF COUNTRY PAPERS

### Task-related activities or processes

Detailed task	Responsible partner
Explore the possibility of a journal special issue with country-specific papers and a general one on HPV vaccination (history/status) and the plans and achievements of the project	Sciensano and WP5 participants
Preparation of PERCH country-specific manuscripts in collaboration with WP2	Sciensano

Process indicators		Target	Methodology
A5.4.1	List of participating countries and content outline of country papers by Month 20 [ <i>Milestone 21</i> ]	Achieved	Desk research
A5.4.2	Number of country-specific manuscripts to be done by Month 30	3	Desk research

### Task-related outputs

- Country-specific manuscripts on HPV vaccination

Output indicators		Target	Methodology
B5.4.1	Draft of PERCH country-specific manuscripts on HPV vaccination available by Month 30 [ <i>Milestone 22</i> ]	Achieved	Desk research

## 4. 6. ANNEX 6 – Evaluation of WP6: Improving Knowledge and Awareness to Increase Vaccine Uptake in Target Communities

WP6 is directly responsible for the indicators of the Specific Objective #3 – To improve knowledge and awareness on HPV-related disease and prevention in the specific target groups (adolescent girls and boys).

### WP specific objectives:

- To understand the dynamic preventing access to HPV vaccine
- To improve access and use of reliable information/communication about HPV vaccination to increase confidence

### WP participants:

Croatia, Estonia, France, Germany, Greece, Italy, Lithuania, Poland, Romania, Slovak Republic, Slovenia, Sweden

### TASK 6.1 – INVOLVEMENT OF KEY STAKEHOLDERS IN PROJECT ACTIVITIES

#### Task-related activities or processes

Detailed task	Responsible participant
Identification and selection of representatives of national institutions in collaboration with WP2 (stakeholder mapping)	WP6 participants
Selection of representative schools as a source of parents, students and teachers as stakeholders	WP6 participants
Participation of the stakeholders in the subsequent WP tasks (roundtables)	WP6 participants

	Process indicators	Target	Methodology
A6.1.1	Number of countries that involve at least one representative of a national institution in the stakeholders working group	12	WP6 questionnaire
A6.1.2	Selection of 5 schools per country to participate in the project by Month 4 [ <i>Key Objective indicator</i> ]	Achieved	WP6 questionnaire
A6.1.3	Number of schools per country that will participate in the project identified by Month 8	5	WP6 questionnaire
A6.1.4	Number of national roundtables with the selected key stakeholders between Month 8 and Month 30 per country [ <i>Key Objective indicator</i> ] [ <i>Milestone 24</i> ]	5	Desk search
A6.1.5	Number of key stakeholder sectors represented in all the project roundtables	3	WP6 questionnaire

#### Task-related outputs

- Establishment of national stakeholders working groups



Output indicators		Target	Methodology
B6.1.1	List of key stakeholders per country by Month 4 [ <i>Milestone 23</i> ]	Achieved	Desk research

## TASK 6.2 – INVESTIGATE NATIONAL SCENARIOS RELATED TO DETERMINANTS OF HPV VACCINE HESITANCY

### Task-related activities or processes

Detailed task	Responsible participant
General literature review on determinants of HPV vaccine hesitancy	1st YPE
National literature review on determinants of HPV vaccine hesitancy	WP6 participants
Develop a core structure for the joint report for discussion and agreement between participants	ISS with the collaboration of WP6 participants
Potential consultation with national experts on each country	WP6 participants
Development of a draft questionnaire to deliver to families of targeted girls/boys to be reviewed and agreed between participants	ISS with the collaboration of WP6 participants except for France and Germany*
Survey translation into national (and other local, if needed) language	WP6 participants except for France and Germany*
Questionnaire delivered to target group (parents in classes of previously selected schools) and data collected via link to an online questionnaire	WP6 participants except for France and Germany*
Alternative questionnaire for families designed and delivered	France and Germany
Questionnaire designed and delivered to students	Croatia, Slovak Republic and Sweden*
Questionnaire designed and delivered to teachers	Croatia, Slovak Republic and Sweden*
Questionnaire designed and delivered to medical school personnel	Lithuania And Slovak Republic*
Questionnaires data analysis	WP6 participants delivering a questionnaire
Development of an agreed list of topics to be covered in the focus groups for all the targeted groups	Italy, Greece, Lithuania, Romania, Slovenia and Estonia*
Conduction of focus groups with students in selected schools	Italy, Greece, Lithuania, Romania, Slovenia and Estonia
Conduction of focus groups with teachers in selected schools	Italy, Greece, Lithuania, Romania, Slovenia and Estonia
Focus groups qualitative data analysis	WP6 participants conducting focus groups
Delivery of national reports to Italy and Greece for comparison and summary purposes into a joint report	WP6 participants



Publication of project results either as national manuscripts or a joint publication in collaboration with WP2	To be decided
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*\* At the moment of developing this evaluation plan, the methodology to be followed by Poland has not yet been decided*

	Process indicators	Target	Methodology
A6.2.1	General literature review done	Achieved	WP6 questionnaire
A6.2.2	Number of country-specific literature reviews done	12	WP6 questionnaire
A6.2.3	Number of data sources used in each country to conduct their own country-specific literature reviews	2	WP6 questionnaire
A6.2.4	Core structure of report sent by Month 3	Achieved	WP6 questionnaire
A6.2.5	Draft questionnaire for parents sent for discussion to WP6 participants by Month 2	Achieved	WP6 questionnaire
A6.2.6	In countries delivering the project questionnaires to parents: Proportion of countries that translate the questionnaire into national or local languages by Month 4	100%	WP6 questionnaire
A6.2.7	In countries delivering questionnaires to parents: Response rate of parents that are contacted to fill the questionnaires in each country	70%	WP6 questionnaire
A6.2.8	In countries delivering questionnaires to students: questionnaire designed in all countries by Month 5	Achieved	WP6 questionnaire
A6.2.9	In countries delivering questionnaires to students: response rate of students that are contacted to fill the questionnaires in each country	70%	WP6 questionnaire
A6.2.10	In countries delivering questionnaires to teachers: questionnaire designed in all countries by Month 5	Achieved	WP6 questionnaire
A6.2.11	In countries delivering questionnaires to teachers: Response rate of teachers that are contacted to fill the questionnaires in each country	50%	WP6 questionnaire
A6.2.12	Conduction of focus groups with students/teachers in selected schools by Month 6	Achieved	WP6 questionnaire
A6.2.13	Number of countries that deliver their national report summaries to WP6 leaders by Month 6	12	WP6 questionnaire

### Task-related outputs

- Questionnaire on HPV vaccine determinants of HPV vaccine hesitancy for parents
- Questionnaire on HPV vaccine determinants of HPV vaccine hesitancy for students
- Questionnaire on HPV vaccine determinants of HPV vaccine hesitancy for teachers
- Report on main determinants of HPV vaccine hesitancy

	Output indicators	Target	Methodology
B6.2.1	Questionnaire on HPV vaccine determinants of HPV vaccine hesitancy for parents by Month 5	Achieved	Desk research
B6.2.2	Questionnaire on HPV vaccine determinants of HPV vaccine hesitancy for students by Month 5	Achieved	Desk research





B6.2.3	Questionnaire on HPV vaccine determinants of HPV vaccine hesitancy for teachers by Month 5	Achieved	Desk research
B6.2.4	Report on main determinants of HPV vaccine hesitancy at national level by Month 6 [ <i>Deliverable 6.1</i> ]	Achieved	Desk research

### Task-related outcomes

- Improved understanding of national determinants of HPV vaccine hesitancy by WP6 participants
- Increased knowledge on the determinants of HPV vaccine hesitancy by targeted stakeholders in the dissemination activities

	Outcome indicators	Target	Methodology
C6.2.1	Improved understanding of national determinants of HPV vaccine hesitancy by WP6 participating organisations	Achieved	WP6 questionnaire
<i>Indicators on dissemination to be defined after a clearer definition of the task</i>			

## TASK 6.3 AND 6.4 – BUILD UP NATIONAL TOOLBOXES AND CO-CREATE / CO-SELECT TOOLS

### Task-related activities or processes

Detailed task	Responsible participant
Identification of existing materials (information/communication tools/methods/channels) by literature review, roundtables and consultation to national experts	WP6 participants and external stakeholders
Assessment of existing tools to see if they address the needs emerging from the previous report in terms of effectiveness	WP6 participants and external stakeholders
Co-creating materials (where there is evidence of a lack) with the participation of task 6.1 stakeholders to increase HPV vaccine knowledge and awareness addressing the specific target groups.	WP6 participants and external stakeholders
Roundtables with task 6.1 stakeholders to assess existing tools, co-create new ones if needed and select one to be piloted	WP6 participants and external stakeholders
Building of national toolboxes based on existing tools and created ones	WP6 participants

	Process indicators	Target	Methodology
A6.3.1	Number of existing materials identified by each country	1	Desk research
A6.3.2	Number of methods / sources used to identify existing materials in each country	2	WP6 questionnaire
A6.3.3	Number of roundtables done to assess existing tools per country	1	WP6 questionnaire
A6.3.4	In countries where existing tools do not address the needs identified in the previous report: number of co-created tools in each country	1	WP6 questionnaire
A6.3.5	In countries where existing tools do not address the needs identified in the previous report:	2	WP6 questionnaire



	number of roundtables done to co-create new tools in each country		
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### Task-related outputs

- National toolboxes (existing communication/information tools/methods/channels) to address vaccine hesitancy
- New tools to address HPV vaccine hesitancy co-created by end-users

	Output indicators	Target	Methodology
B6.3.1	A report on national toolboxes by Month 15 [ <i>Deliverable 6.2</i> ]	Achieved	Desk research
B6.3.2	Number of national toolboxes developed per WP6 participant by Month 15 [ <i>Key Objective Indicator</i> ]	1	Desk research
B6.3.3	A list of new tools created / selected by Month 18 [ <i>Milestone 25</i> ]	Achieved	Desk research

## TASK 6.5 – SELECTING PROMISING TOOLS FOR PILOTING

### Task-related activities or processes

Detailed task	Responsible participant
Selection of at least one instrument from the toolbox for piloting with target groups in each participating country based on known effectiveness or potential effectiveness	WP6 participants
Piloting of the selected tools	WP6 participants
Evaluation of the selected tools in collaboration with WP3	WP6 participants and ICO
Carrying out roundtables with task 6.1 stakeholders to discuss the pilot results	WP6 participants

	Process indicators	Target	Methodology
A6.5.1	Selection of a tool to be piloted by Month 24 in all WP6 participating countries	Achieved	Desk research
A6.5.2	Number of countries that start piloting their selected tools by Month 25	12	Desk research
A6.5.3	Evaluation of piloted tools in all countries done by Month 27	Achieved	Desk research

### Task-related outputs

- Report on pilot project results

	Output indicators	Target	Methodology
B6.5.1	Report on pilot project results by Month 27 [ <i>Deliverable 6.3</i> ]	1	Desk research



### Task-related outcomes

- Increased awareness of the benefits on HPV vaccination in target groups

	Outcome indicators	Target	Methodology
C6.5.1	Proportion of participants in the pilot study that feel more confident in HPV vaccine uptake <i>[Key Objective Indicator]</i>	80%	WP6 Specific tool (pre/post test)

## 4. 7. ANNEX 7 - Evaluation of WP7: Training and Support in Vaccine Communication

WP6 is directly responsible for the indicators of the Specific Objective # 4 – To improve knowledge and abilities for healthcare professionals in HPV vaccine communication.

### WP specific objectives:

- To understand the country-level situation and training needs.
- To improve awareness among healthcare professionals of the principle of cervical cancer control and provide adequately training.

### WP participants:

Croatia, Estonia, France, Germany, Greece, Hungary, Italy, Poland, Romania, Slovenia, Spain, Slovak Republic.

## TASK 7.1 – UNDERSTAND THE CONTRY-LEVEL SITUATION AND TRAINING NEEDS

### Task-related activities or processes

Detailed task	Responsible participant
Development of a country-specific report structure including a template for country self-assessment.	BZgA
Discussion of the provided structure and template in a WP Meeting	WP7 participants
Amend agreed changes to the template and report structure	BZgA
Collection of country-specific information on HPV policy, HPV vaccination settings and healthcare providers as well as country-specific data on HPV vaccination existing trainings and training needs by any of the options below: <ul style="list-style-type: none"> <li>- Literature review, including grey literature</li> <li>- (Online) survey to healthcare providers (German survey will be provided in English for potential use as example by those countries that want to)</li> <li>- Expert interviews</li> <li>- Focus groups to healthcare providers (If a country wishes to have a guide, WP7 will provide it (bilateral))</li> <li>- Own assessment by the PERCH national team</li> </ul>	WP7 participants
Exchange and discussion of collected data within WP4 survey and WP7 self-Assessment template concerning the country structures of vaccination services.	BZgA, Sciensano and WP7 participants
Development of country National Assessment	WP7 participants
Joint discussion in a face-to-face meeting of the joint and national reports	WP7 participants
Development of a report	BZgA in collaboration with WP7 participants
Identification and sharing existing national training materials	WP7 participants



Identification and sharing overarching training materials (by WHO, for example)	BZgA
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	Process indicators	Target	Methodology
A7.1.1	Report structure template done	Achieved	Desk research
A7.1.2	Number of partners that provide feedback to the report structure template	6	WP7 questionnaire
A7.1.3	Changes to the structure template and the country-specific assessment template done	Achieved	WP7 questionnaire
A7.1.4	Number of countries that pursue more than one methodology to assess their country needs	12	WP7 questionnaire
A7.1.5	In countries that conduct a literature review – Number of data sources used	2	WP7 questionnaire
A7.1.6	In countries that conduct a survey for healthcare professionals – Number of respondents	100	WP7 questionnaire
A7.1.7	In countries that conduct focus groups with healthcare professionals – Proportion of countries that reach saturation	100%	WP7 questionnaire
A7.1.8	In countries that conduct focus groups with healthcare professionals – Proportion of countries that coding is done by 2 persons	100%	WP7 questionnaire
A7.1.9	Number of national reports delivered to WP7 lead by Month 8	12	WP7 questionnaire
A7.1.10	Meeting to discuss the country-specific report done	Achieved	Desk research
A7.1.11	Number of participating countries in the country-specific report discussion meeting	12	Desk research
A7.1.12	Usefulness / satisfaction of the meeting	High	WP7 questionnaire

**Task-related outputs**

- Joint report on country-level situation and training needs
- Internal platform or repository containing existing training materials / resources

	Output indicators	Target	Methodology
B7.1.1	Report on country-level situation and training needs available by Month 10 [ <i>Deliverable 7.1</i> ]	Achieved	Desk research
B7.1.2	Platform with shared resources available by Month 2	Achieved	Desk research
B7.1.3	Number of overarching training resources identified and shared by Month 10	2	Desk research
B7.1.4	Number of national training resources identified and shared by Month 10	4	Desk research

**Task-related outcomes**



- Improved knowledge of country-specific training needs of healthcare workers by WP7 participating countries
- Improved knowledge on existing training materials

	Outcome indicators	Target	Methodology
C7.1.1	WP participants have a clearer idea of the training needs in their country / usefulness or satisfaction with the report	100% of those with an initial low level of knowledge	WP7 questionnaire
C7.1.2	Proportion of countries that need to develop their own training that have used the materials (usefulness of the shared training materials)	50%	WP7 questionnaire

## TASK 7.2 – DEVELOPMENT OF A TRAINING CURRICULUM (TABLE OF CONTENTS + CONTENT) FOR HEALTHCARE PROFESSIONALS

### Task-related activities or processes

Detailed task	Responsible participant
Definition of a core shared curriculum of training for healthcare professionals (key messages to be included)	BZgA in collaboration with WP7 participants
Use of the previous self-assessment report needs versus the core curriculum to decide on the table of content for the national training course	WP7 participants
Selection of the most appropriate national training modality	WP7 participants
Development of specific training material	WP7 participants

	Process indicators	Target	Methodology
A7.2.1	Core curriculum training developed by Month 13	Achieved	WP7 questionnaire
A7.2.2	Number of meetings done to discuss the core curriculum	1	Desk research
A7.2.3	Number of countries that adapt the core training curriculum based on their training needs report	12	WP7 questionnaire

### Task-related outputs

- Definition of a core training curriculum for healthcare professionals
- Definition of country-specific trainings
- Training materials / resources developed in each country

	Output indicators	Target	Methodology
B7.2.1	Core training curriculum defined by Month 13 [ <i>Deliverable 7.2</i> ]	1	Desk research
B7.2.2	Number of training curriculums defined in participating countries by Month 14	12	Desk research
B7.2.3	Number of countries that have developed their own training material by Month 18	12	Desk research

## TASK 7.3 – RECRUITMENT OF TRAINING STAFF

### Task-related activities or processes

Detailed task	Responsible participant
Identification and recruitment of training staff through collaboration with (medical) associations and additional internet search.	WP7 participants

	Process indicators	Target	Methodology
A7.3.1	Number of healthcare professional associations contacted in total in all countries	6	WP7 questionnaire

### Task-related outputs

- Local training staff (experts on HPV) identified

	Output indicators	Target	Methodology
B7.3.1	Number of participating countries in WP7 that identify their teaching staff profile and their specific contribution to the training program by Month 8 [ <i>Key Objective Indicator</i> ]	12	Country report/WP7 questionnaire

## TASK 7.4 – IMPLEMENTATION OF TRAINING COURSES

### Task-related activities or processes

Detailed task	Responsible participant
Announcement / dissemination of training available	WP7 participants
Delivery of the planned training	WP7 participants

	Process indicators*	Target	Methodology
A7.4.1	Estimated number of healthcare professionals contacted to take part in the training by Month 12 [ <i>Key Objective Indicator</i> ]	2000	WP7 questionnaire
A7.4.2	Number of channels used to reach healthcare professionals in each country	2	WP7 questionnaire
A7.4.3	Number of countries that have initiated delivery by Month 18 [ <i>Milestone 27</i> ]	12	WP7 questionnaire

\* These indicators will be further tuned once the modalities of trainings have been decided and in agreement with the specific evaluation plan to be defined in task 7.5

### Task-related outputs

- National training of healthcare professionals in HPV-related diseases and its prevention available



	Output indicators*	Target	Methodology
B7.4.1	Number of training courses delivered by each WP7 participating country by Month 18 [ <i>Key Objective Indicator</i> ]	1	WP7 questionnaire
B7.4.2	In countries with online training modality: Number of students/health care professionals enrolled	100	WP7 questionnaire
B7.4.3	In countries with online training modality: Number of students/health care professionals that complete the training	50	WP7 questionnaire
B7.4.4	In countries with face-to-face or interactive live webinar training modality: Number of students/health care professionals enrolled	25	WP7 questionnaire
B7.4.5	In countries with face-to-face or interactive live webinar training modality: Number of students/health care professionals that complete the training	20	WP7 questionnaire

\* These indicators will be further tuned once the modalities of trainings have been decided and in agreement with the specific evaluation plan to be defined in task 7.5

#### Task-related outcomes

- Healthcare professionals improve their knowledge on HPV-related diseases and its prevention
- Healthcare professionals feel confident on topics that previously were not

	Outcome indicators*	Target	Methodology
C7.4.1	Proportion of training students/health care professionals that improve their knowledge on benefits and risks for primary and secondary prevention [ <i>Key Objective Indicator</i> ]	90%	WP7 Specific tool
C7.4.2	Proportion of training students/health care professionals that improve their ability to communicate with parents, adolescents, patients and health professionals [ <i>Key Objective Indicator</i> ]	80%	WP7 Specific tool

\* These indicators will be further tuned once the modalities of trainings have been decided and in agreement with the specific evaluation plan to be defined in task 7.5

## TASK 7.5 - EVALUATION OF TRAINING COURSES

#### Task-related activities or processes

Detailed task	Responsible participant
Definition of an evaluation plan (methods and indicators) of training programmes	BZgA in collaboration with WP3
Design of evaluation tools (probably pre/post-test)	BZgA in collaboration with WP7 participants and WP3
Use of developed tools for data collection	All WP7 participants
Data analysis	BZgA in collaboration with WP3





Write the report	BZgA in collaboration with WP7 participants and WP3
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Process indicators		Target	Methodology
A7.5.1	Number of developed tools to evaluate the courses	1	Desk research
A7.5.2	Number of WP7 participating countries that use the tools	12	WP7 questionnaire
A7.5.3	Proportion of training students/health care professionals that use the tools to evaluate the trainings in each country	30%	Desk research

### Task-related outputs

- Evaluation concept of training programmes (evaluation plan)
- Training evaluation report

Output indicators		Target	Methodology
B7.5.1	Evaluation concept of training programmes (evaluation plan) available by Month 15 [ <i>Milestone 26</i> ]	1	Desk research
B7.5.2	Training evaluation report available by Month 30 [ <i>Deliverable 7.3</i> ]	1	Desk research

### Task-related outcomes

- Improved understanding on the usefulness of the delivered trainings
- Identification of recommendations in the implementation of future trainings

Outcome indicators*	Target
To be defined	

*\* These indicators will be further defined once the modalities of trainings have been decided and in agreement with the specific evaluation plan to be defined in task 7.5*