

Denmark Case Study – Inspiring Example

HEADLINE TITLE

How Cost-efficiency and Improved Resource Allocation Are Interlinked with Proper Planning and Follow-up

OVERVIEW

The future Sygehus Sønderjylland will expand across multiple Danish municipalities to include an emergency hospital in Aabenraa, a specialist hospital in Sønderborg and a same-day hospital in Tønder. As part of a decision to strengthen the use of technology and increase the effectiveness of multidisciplinary collaboration within the entire Southern Denmark region, the implementation of a video solution was necessary to plan patients' discharge more seamlessly. Fortunately, with the support of the three DISH tools, the regional hospital was able to identify optimal locations for digital skill training; promote eHealth technologies where health care professionals from different wards and the four regional municipalities had cross-sectorial training; ensure ongoing learning to increase the likelihood of uptake in clinical settings. Using the DISH tools guaranteed that implementation of this solution could occur within an immediate time frame.

AT A GLANCE

140 - kilometres saved by health & care professionals in driving distance

98 - the percentage of discharge visitation nurses who participated at the training

86 - the total number of health & care professionals trained

[Resource Allocation]

Planning and Implementation Tool Helps Clarify Needs and Resources to Carry Out eHealth Solutions

The technology was already an integrated system at the hospital; however, it was not in use. The collaboration and dialogue held within the planning meetings thanks to the planning and implementation tool allowed for shared decision-making processes to occur. This would prove important, because it would encourage all stakeholders to consider and accept implementation challenges, needed skills and necessary goals. At the same time, we would say that the flexibility of the tool would allow us to handpick questions from the tool to gain better insights and constitute the basis for planning the training with the right resources.

[Collaboration]

The On-The-Job Training Tool Creates A Secure Space for Fruitful Interdisciplinary Dialogues and Interactions

"I really think I've got a lot to take home. It was really good to get a hands-on experience instead of all that "ass-to-bench" teaching. It was a long time since I sat on the school bench. So, I learn best by getting it [training] in my hands". – Doris, a nurse

Overall, 86 participants from the hospital and municipality underwent training sessions focused on hands-on training. The intensive and well-structured planning of on-the-job training helped these professionals to learn skills related to setting up and holding video meetings, as well as troubleshooting, e.g., no sound or picture available. The participants appreciated the hands-on training in the simulation facilities, because it was a safe space. In other words, although mistakes were possible, there were no direct or immediate repercussion. The training provided the possibility to learn and improve weak areas, so that in the long term, professionals would be able to feel confident using their skills with the technology. In addition, this experience was compounded by the fact that participants could enjoy cross-sectorial conversations and spontaneously-arranged online meetings to practice digital skills. The fostered comraderie was conducive to interactions, as it would lay the groundwork for these individuals to make arrangements for further collaboration.

[ACCOUNTABILITY]

The Assessment and Recognition Tool Identifies The Need for Follow-up Meetings to Ensure Effective Implementation After Training

"Yes, it is a question of resources for us....! But if you take the citizens' perspective, which I think is just as important, then it is also a huge advantage that they feel that they get the support they need. It can be in terms of treatment or even coping mechanisms for everyday life. There is a close connection, such as that between a region and municipality, as they work in the same direction for the citizen"! – Helle, Management Director

In general, it is a difficult task to carry out an eHealth solution and apply the technology. We experienced that even though the participants found the technology easy to use at the simulation facilities, it was more complicated to continue implementation afterwards. Therefore, the Assessment and Recognition process tool played a key role in such scenarios. We were able to hold follow-up sessions with the same stakeholders from the meetings related to DISH tool usage. The systematic continuity of follow-up meeting allowed us to steer the implementation process, helping guarantee that expectations and outcomes were in alignment. Similarly, if needed, we could provide further on-site assistance to increase the likelihood of successful technology use.

Only with DISH

Cost-efficiency

The health system is currently undergoing a large-scale reorganisation to address upcoming demographic challenges. Treatments have become more centralised, being concentrated in fewer, more extensive and increasingly specialised hospitals. The Danish Digital Health Strategy aims to

provide cross-sectorial health & care to jointly ensure better coherence in treatment and reduce time and resources by using eHealth solutions.

The DISH tools help take specific considerations into account when training must be planned and performed. The identification and execution of follow-up meetings have shown to be indispensably valuable, given that it anticipates the potential pitfalls of implementation when responsibility falls back into the hands of each individual department. Indeed, because of how these tools have been designed, teams and institutions can stand to benefit. Implementation of any eHealth solution could experience a reduction in new financially conditioned initiatives and consumption of staff resources.

RESULTS

- **More available time** for for other tasks related to health & care due to a lack of need to drive to physical planning discharge meetings
- **Less driving reduces costs** and can have a positive impact for the enviroment
- **2 hours saved** when driving from the municipality to the hospital

Germany Case Study #2 – Inspiring Example

Headline Title

All Together for One Aim - Cross-Professional Planning of the Implementation Process of a Digital Solution

Overview

As part of the German national resolution for patient safety, regarding the early detection and treatment of sepsis, the University Medical Centre Schleswig-Holstein (UKSH) implemented a digitally supported sepsis screening tool for all wards and emergency departments.

Using the DISH framework, the digital screening tool could be introduced effectively and sustainably without increasing the workload of the users. The holistic approach of the 3-phase model of the Digital & Innovation Skills Helix approach – the DISH concept- enabled the identification of all relevant professional groups and stakeholders in the project and laid the foundation for an interprofessional implementation.

At A Glance

- 100% of the participants of the surgical pilot ward stated that the training met their expectations and needs.
- 85 % of these participants rated positively in the evaluation questionnaire, that the training has helped them to work more effectively with the digital tool in practice and to recognise possibilities for the innovation of digital work processes.
- Within 5 months after the training and implementation, the tool was applied over 2200 times at the pilot ward alone.

[Joint Decisions]

Prep Tool for Innovation & Digital Skill Supports

Adoption Of Multidisciplinary Consensus

The Prep Tool for Innovation & Digital Skill Adoption provided the framework for us to reflect on who is actually affected by this application and who is needed to make the implementation a lasting success. Management, technical, IT and pedagogical skills, ideas, experiences, desired goals, limits and potential barriers as well as the needs and expectations of the end users - all these aspects were given equal consideration in the implementation and training process. This way we could create permeability and openness as well as the greatest possible acceptance of the new digital application.

[Adaptability]

On-The-Job Training Based On Staff Needs

“For the first time I have had the experience that the introduction of a new technical solution was oriented towards our needs in terms of ease of use, incorporating already recorded vital signs and all without double reporting. This makes the handling and acceptance in practice so much easier”. (Lisa, nurse)

The phase of the On- the- Job Training, based on the decisions made under cross-professional aspects, considered the preferences and needs of healthcare staff, which can be quite different. We piloted the training of the digital application thematically, by means of a content and performance in an interactive e-learning unit in which a free division of learning time and place is possible and creates a pleasant learning situation. Further we offer a training in practice, using a concrete case example on ward, where we get immediate feedback from the employees

Only with DISH

Sustainability

The 3 phases of the DISH concept offer a framework which helped us, in our setting of a large company, to get to get all persons needed around the table from the start and to consider all the steps needed in the implementation process, bearing in mind feasibility and possibilities of execution.

Various perspectives, which are so different in nature, can be effectively and satisfactorily combined with the multi-professional approach represented by DISH:

“Putting digital solutions into practice, especially with such different attitudes and skills among caregivers, is often a real problem. Training in theory and practice is not always

appropriate developed for the target group. The DISH concepts offer a proven opportunity to jointly meet the present and future challenges of introducing digital solutions in healthcare".
(Dietmar, nursing management trainee)

Results

- 92 nurses trained in the test site gave feedback of less hesitation and increased confidence in the practical handling and interaction of the digital solution in nursing practice.
- The performance of the score is presented quarterly per ward and is integrated into our quality management.
- With this evaluated training concept, we can sustainably provide the training units and secure the step towards more patient safety in the hospital.

Germany Case Study – Inspiring Example

How Digital Health Solutions Can Become Scalable Through a Holistic Approach

Overview

A university medical centre in Northern Germany aimed at integrating a patient-nurse communications solution called “Helpchat” despite the unfolding of a major health crisis. To move forward with its steadfast commitment to innovation progress, the institution enlisted the support of German start-up Medventi GmbH to pave the way.

Using the three leading Digital & Innovation Skills Helix tools—otherwise known as “DISH”—we were able to facilitate enthusiastic adoption of the digital solution via the identification of “super users”; simplify training for a convenient, on-the-go format; and lay the groundwork for future digital skill learning assessments. Indeed, through DISH, we could provide a direct, real-time and scalable communication link between patients and nurses in the university medical centre and five other clinics. Patients could experience an improvement in the quality of care, and health & care professionals maximise time and resource allocation.

At A Glance

6 the number of clinics employing the digital patient-nurse communication system

3 the number of clinics that leveraged the super-user model to result in a smooth and fast roll-out of the platform and a high adoption rate

30 the number of minutes to install the system and begin on-the-job training

[Teamwork]

Planning and Implementation Tool Identifies Super Users to Spread Knowledge and Enthusiasm about Digital Skill Learning

The planning and implementation tool provides a series of questions to consider various aspects that would, otherwise, be overlooked. These questions proved essential for the German partners, because we were able to identify “super users”. These individuals would be those open to using digital tools, possess good or high digital literacy, and have a strong standing within the team. The benefits of leveraging these super users would enable team learning instead of focusing solely on

building the skills of any one individual. Furthermore, their role as technology ambassadors with influence would facilitate on-the-job training and be key to helping make the adoption of the eHealth solution possible.

[Digitalisation]

The On-The-Job Training Process Tool Shows How Learning Could Be Modern and On-the-go

“The DISH tools were great in supporting the development of an implementation plan that involves all necessary stakeholders in the clinical setting and scale the digital solution across 6 clinics. Being a physician at the University Medical Centre in Rostock, I know the clinical workflow and challenges of the care personnel by heart. However, the introduction of digital tools into the clinical setting is also new to me. The DISH tools came right in time to manage the roll-out of our solution”.

-Fabian Nokodian, CEO and Founder of Medventi GmbH

Being user-friendly and intuitive the app is ideally suited for immediate application on the ward. Nevertheless, attitude and reluctance to change must be overcome in parts of the staff that still likes to work in the “old style”.

[Measurable Success]

The implementation of the patient nurse communication system “Helpchat” was accompanied by a study aimed at measuring the impact. The study yielded that:

- Help chat is well accepted and allows very precise communication of patients' concerns.
- Help chat reduces the walking distances of the nursing staff.
- Help chat increases work motivation and reduces the burden on nursing staff caused by the old audio-visual communication system.

Only with DISH

An Integrated Approach to Scalability

The DISH concepts provide extensive checklists and tasks covering all areas and stakeholders involved in the implementation process. In this use-case it gives a start-up company the opportunity to view and organise the implementation process from the perspective of a healthcare provider. DISH concepts enabled the start-up to develop a holistic, transferable rollout concept.

Results

6 clinics in Northern Germany integrated a digital solution for patient-nurse communication.

Norway Case Study – Inspiring Example

Headline Title

How Moments of Crisis Can Become Opportunities to Develop Effective and Creative Ideas

Overview

The Vaksdal municipality (Norway) aims to deliver safe support to patients in need of immediate health and social care. For staff members to access individuals' homes, however, they must use standard keys stored elsewhere at an office location.

The municipality, therefore, decided to implement the instalment of electronic door locks (e-locks) and execute a widespread training programme on how to use such e-locks correctly. With e-locks, care workers could enter homes efficiently and ensure that patients receive the necessary help.

Using the three leading Digital & Innovation Skills Helix concepts—otherwise known as “DISH”—the municipality was able to successfully carry out the initiative despite the COVID-19 pandemic. The flexibility and practicality of the concepts allowed the municipality to identify relevant stakeholders for targeted messaging; re-design training for costs savings and creative ideas; and monitor actual understanding of e-lock use for additional follow-up support when needed.

Through DISH, the Vaksdal municipality is improving the quality of care for local residents whilst minimising costs for training development.

At A Glance

- 98 – the number of e-locks installed on patients' doors
- 96 – the percentage of care staff capable of using e-locks successfully within a month
- 7 – the number of hours approximately saved per week amongst care staff after e-lock implementation

[COMMUNICATIONS]

Planning and Implementation Tool Helps Clarify Values and Benefits of New Technology for Varying Stakeholder Groups

Implementing any type of technological solution is difficult, especially if it is not clear exactly how it will prove helpful. However, the DISH tool for Planning and Implementation laid the groundwork for us. With its inherent compilation of questions and domains, we were able to identify 10 stakeholder groups and define their potential needs and wants.

As we had a clearer understanding of who these beneficiaries would comprise, we could create a communications plan that included clear targeted messaging, activities, and timelines to reach those stakeholder groups optimally. This line of approach would also serve as an opportunity to connect better and quickly with audiences after lockdowns imposed by the pandemic.

[FLEXIBILITY]

On-The-Job Training Goes Online Due to Health Crisis Yet Creativity Proves Resilient

“We can train on the exercise door whenever there’s a moment to spare during a busy day. In my case, I practised twice a week for three weeks before I knew how to use the e-locks seamlessly. And, since then, I have never gone back to using the old door locks ” - Martha Lise, a nurse

The on-the-job training went online to minimise the risk of transmission amongst staff workers. However, project managers planning the training saw this as an opportunity to streamline both costs and instruction. Project managers, therefore, condensed course training into smaller modules for facilitated learning. Although it was not necessary, they also maintained the training programme online to reduce both travelling costs and thereby, the possibility of attrition.

Finally, to compensate for the lack of in-person training, project managers thought of the idea to install an e-lock on a door at the office for care staff. This “exercise door” would let workers put into practice what they learned during free time between home visits to patients.

[ACCOUNTABILITY]

Assessment Promotes Follow-up Training Support To Those Most In Need

The actual use of e-locks could be challenging to learn at first. To ensure that all care staff members were executing the e-Health solution effectively, we took advantage of the assessment concept found within DISH. We looked for those individuals who continued encountering issues with the technology and provided follow-up training. This round of training aimed to resolve those specific lingering problems and inspire confidence in the care staff's ability to perform the tasks at hand.

“We identified 3 care staff members who faced trouble using the e-locks. However, after providing additional follow-up training, they were all able to handle the technology correctly within two weeks!” – Maria, a manager

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Adaptability to Unforeseen Scenarios

The COVID-19 pandemic posed major issues in terms of e-health solution training and implementation. Firstly, care staff members had to respect and uphold social distancing measures and minimise contact whenever possible. Secondly, stakeholders' needs and wants underwent some measurable changes given that their personal and even professional circumstances were no longer the same. Yet, because the DISH concepts are extensive in their consideration of various areas and potential pitfalls/barriers, progress can continue. This can be in the form of a well-defined communications plan with targeted messaging or even an innovation training alternative (the electronic door). The possibilities are endless.

Results

- 48 out of 50 home care staff members use the e-locks on a daily basis a year since the initial training
- 25 new staff members have used the e-lock within a week of training, especially with the support of the “exercise door”

- 5,000 euros were estimated to have been avoided in implementation costs

Spain Case Study – Inspiring Example

HEADLINE TITLE

How to improve health care provision and digital skills in the health staff through a certified course

OVERVIEW

Nowadays, the use of digital/e-health solutions and telemedicine has become necessary (and unavoidable in some cases), and this apply to the management of Type 2 Diabetes Mellitus (T2DM).

The need for training the healthcare staff in the use of a dashboard for monitoring T2DM patients as well as in the prescription of digital resources for this disease is crucial in order to increase their digital knowledge and skills and to reduce follow-up visits making more efficient and effective the healthcare system while reducing costs.

Thus, with the aim of covering an need amongst health care workforce (and patients), and also for taking advantage of e-solutions not fully exploited, an training course with national recognition was planned and satisfactorily implemented thanks to the support of the three DISH concepts.

The usage of DISH resulted in increasing digital knowledge and skills, more confident in using e-health solutions, less overwork and less resistance to organizational changes in the health professionals. And this will impact in reducing T2DM patient monitoring visits due to the remote control and the increase of prescription of digital resources.

AT A GLANCE

- 96 - the number of health and care professionals who underwent training to use the digital tool and aimed at improving remote care.
- 96 - the number of official certificates awarded to health and care professionals in recognition of their educational background and daily work.

QUOTE

“After the course, I updated my knowledge about Type 2 Diabetes Mellitus (T2DM), including screening criteria, diagnostic criteria, treatment, education and patient follow-up, reducing possible uncertainties. And, specially, my learning has been officially

recognized. In addition, I feel more confident monitoring T2DM patients, checking the indicators of their disease, the tests that have been carried out and their results through the dashboard". S.G., nurse.

[IMPROVEMENT AND DIGITALIZATION OF CARE PROVISION]

Involving the key actors to meet the needs

By using the DISH concepts, the real end-users' needs (health managers, healthcare staff and patients) can be identified and met. With the goal of improving the digital skills of health professionals and enhancing the quality of the care service for chronic patients with T2DM, the following crucial actors were identified and involved: head of planning of La Fe Hospital, the nurses of the clinical simulation area, a nurse from the home hospitalization unit, the IT systems staff and the experts in the different technologies. All of them were crucial in the planning and designing phases of the training.

[CONSOLIDATION]

DISH help to design and implement a tailored training

In order to consolidate knowledge and competences related to the management of the T2DM patients, and also for improving the digitalization of these patients' care, an online training course focused on: 1) the use of a dashboard for T2DM, 2) the use of an online training platform (Moodle), 3) prescription of digital resources was designed and implemented among physicians and nurses.

Thanks to DISH, these professionals get a hands-on training adapted to their needs improving their knowledge and skills and their daily practice which have an impact in the quality of care.

[CERTIFICATION]

DISH allows to deliver certified training for health professionals

Once the training course was designed, it was requested for validation to the Valencian School of Health Studies (EVES), which evaluated it in terms of contents, methodology and assessment tools obtaining 5.8 ECTS for the health professionals completing it. This mean that they have the opportunity of improving their competences and their curriculum vitae as well, which also have a positive impact in the quality of the health care system.

Only with DISH

Official recognition nationwide

Health care professionals completing the training planned, designed and implemented based on DISH concepts get an official certification which is valuable for its professional future (they gain 5.8 ECTS). They invest in improving their competences which also it is beneficial for the health system.

RESULTS

- 96 healthcare staff were trained and officially recognized with 5.8 ECTS improving their professional career and their daily practice.
- > 92% showed strong satisfaction with the course.
- > 92% consider that the course has provided them with new knowledge.
- > 94% informed the course was interesting to their professional activity.
- Reduction of follow-up visits, saving time for patients and lightening/decreasing the overload and costs of the health system.
- Increase of digital competences to get e-learning trainings
- Deployment of e-health solutions not fully exploited.
- Scalability of some training modules to other hospitals.

UK Case Study – Inspiring Example

HEADLINE TITLE

Tailoring On-the-Job Training (OTJT) Delivery to the Needs of the Primary Care Workforce

OVERVIEW

We ensured that the delivery method of the On The Job Training (OTJT) concept was suited to the needs of the target audience – clinicians working in a Primary Care environment.

Primary Care is a busy and challenging environment in which to work, and it was acknowledged that it would be difficult to take trainees out of the Primary Care working environment to attend a structured face to face learning session.

We considered taking the training to the learners in their own environment rather than asking them to attend a classroom session, but this also posed some challenges as this was not an efficient way to manage limited training resources.

It was agreed that the best way to train this cohort of staff would be to provide online self-lead training that was accessible 24 hours a day, 7 days a week and available on a platform that was accessible at work or at home.

AT A GLANCE

Benefits of this approach included:

- Reduced time away from the work setting
- Flexibility to learn at work, or at home, any time of the day or week
- No need to travel to access training
- Opportunity to revisit training materials at any time

- Makes best use of limited training resources

QUOTES

‘The flexibility of the DISH concepts allowed us to make the most of the training offer, ensuring benefit for clinicians accessing the training as well as optimising the limited training resources that we have access to’

Catherine Stukley, Senior Digital Transformation Lead, Liverpool CCG

‘The ability to access the training materials at any time, and in any place is helpful as I can complete the training in a way that suits me with limited disruption to my clinical commitments’

Dr Fiona Ogden-Forde, GP, Liverpool CCG

Engage with Stakeholders

The Learning Innovation Unit Concept can be used to engage stakeholders to find the best training delivery method taking into consideration the digital innovation in question, the training audience, and the training resources that you have access to.

Be Flexible in your Approach

On The Job Training can be flexed to meet the needs of the target audience and the resources that you have access too.

ONLY WITH DISH

Checklists

LIU checklists provide a welcomed prompt to ensure that all stakeholders are involved.

Using this method allows a wide range of different methods of training to be considered – prompts a challenge to the delivery method.

Poland Case Study – Inspiring Example

How Strong Identification of Needs and Barriers Can Boost Cybersecurity at Health & Care Facilities

OVERVIEW

John Paul II Podhalański Specialist Hospital in Nowy Targ and Adult Learning Centre aimed at improving the health & care system in terms of efficiency and electronic circulation documentation. This included speeding up the retrieval of patient records from the database and streaming report and analysis creation, for stronger data protection and an increased cybersecurity level amongst health & care professionals.

Using the Digital & Innovation Skills Helix concepts—otherwise known as “DISH”—medical professionals met the challenges that would prevent them from achieving the aforementioned objectives. In particular, the main issue was the lack of IT competencies amongst the staff and a shortage of e-Skills in managing the electronic data exchange environment. In addition, distrust in technical innovations and the need for continuous education, which had stemmed from a lack of previously implemented on-the-job training, compounded the problem. There was no proper procedure in place that would resolve these concerns and ultimately lead to desired outcome and effects.

Therefore, the institution worked on carrying out a pro-development training programme that would raise awareness of risks resulting from unsecured medical data. At the same time, a programme of this kind would undertake the endeavour to expand upon professionals' ability to detect potential pitfalls and respond to foreseen threats in a timely and effective manner. The DISH concepts allowed us to fill in the gaps and provide direction; standardise actions to address barriers in cybersecurity organisational practices; and strengthen weak links in processes. As a consequence, the institution could further fortify its level of cybersecurity, minimise costs for training development, and enjoy a period no cybersecurity incidents that would arise due to a human factor amongst professionals.

AT A GLANCE:

62 – the number of staff trained including **22** doctors, **20** medical caregivers, **7** administrative employees and **13** nurses

50% - the percentage observed in reduced waiting time for issuing medical record copies

80% - the percentage of participants who reported feeling confident that they would use the knowledge acquired in dealing with patient data to preserve cybersecurity

[Need Identification]

Planning and Implementation Tool Helps Address Barriers to Effective Cybersecurity Growth by Facilitating Evaluations of Competency Gaps

“DISH has proven to be very flexible in addressing adversities (low level of e-health competencies and the lacking idea on how to approach the problem and solve it) that have so far prevented cybersecurity level growth.” - Trainer

Before introducing the training programme, we performed an in-depth diagnosis using the Planning and Implementation process tool to obtain interesting findings on missing competencies. Thanks to the tool, we

were able to enumerate all the adversities that had so far blocked or prevented the introduction of a reasonable practice that would fortify cybersecurity competencies and personal data protection. The observation we made was that participants had a low level of knowledge on the existence of a proactive approach regarding cybersecurity and patient record management. Interviews with health & care professionals also provided some insight into participants' expectations and needs in the context of the training. At the same time, these professionals were not aware of the potential risks associated with digital solutions related to electronic circulation and used in routine work.

This all said, the DISH process tool was very adaptable when working on the needs and lack of certain knowledge. It helped resolve the potential obstacles that would prevent the growth of a cybersecurity level. Structuring a feasible training programme, in which we could show practical tips and leave some openness for discussion, paved a way to provide a strong response to the issue of existing barriers and doubts.

[Standardisation]

On-The-Job Training Unifies The Competency Assessment Framework

"I believe a project like DISH is necessary and perhaps even crucial for the efficient functioning of the healthcare system. It is important to have some standardisation in terms of training to improve the competencies of health & care professionals". – Bartosz Kosiński, Trainer

Introducing the second DISH tool increased the effectiveness of training through standardisation by systematising the approach to on-the-job training planning. The implemented activities introduced a coherent and streamlined method to maximise training efforts. The lack of a pre-existing standard regarding on-the-job training had been associated with an absence of desire and confidence in developing digital skills in health. It was necessary to define the training objectives to show participants the added value whilst simultaneously increasing the awareness of the problem via interactions between technology and human behaviour.

Participants required real-life and practical examples that were presented in the form of case studies and best practices. This made it possible to adapt the learning process for the training audience based on the issues and gaps that had been already identified and eliminate erroneous medical record management habits. The On-The-Job Training process tool showed that effective strengthening of competencies happens when we eliminate barriers. Standardising training materials and methods allowed for improved training effectiveness because of an individualised focus on medical professionals who need to succeed in specialised areas.

[Efficiency]

The Assessment and Recognition Tool Identifies Weak Links that Would Otherwise Slow Management Execution

Planned on-the-job training integrated active methods like moderated discussions and risk factor analyses in cybersecurity via case studies. However, despite these approaches, some participants still face some difficulties in learning and acquiring the relevant digital skills and knowledge. Thankfully, because of the Assessment and Recognition tool, we were able to check the durability of the transferred knowledge and, if necessary, provide follow-up and more personalised training. This would result in strengthening areas that would contribute to carrying out management responsibilities more efficiently.

Only with DISH

Establishing a Pro-learning Culture

The DISH tools impact the attitude of participants by introducing standardised yet well-prepared training and promoting engagement. This is possible because it explores real concerns and barriers amongst participants that had inhibited the growth of interest in cybersecurity in health & care. The positive result can become even more evident during individualised approaches, because it fosters self-awareness of digital competencies and furthers exploration of existing gaps. Indeed, the tools lay the groundwork for a pro-learning and pro-development culture, strengthening the pillars of health & care and supporting digital hygiene in an ever-changing cybersecurity setting.

RESULTS

- **95%** of participants reported learning competencies during a post-training assessment process
- **100%** training efficiency described by participants during the post-training evaluation in relation to an increased cybersecurity level in the facility and a lack of cybersecurity incidents caused by the human factor
- **65%** of participants needed additional steps to develop digital competencies, underpinning the need to address the level of distrust in relation to introducing digital competencies