



# D9.1 Management and Quality Plan – v1.0

White Research (WR)

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## Executive Summary

The present document constitutes the Management and Quality Plan (MQP) of the EQUICARES project, funded by the European Union's Horizon Europe Research and Innovation programme. EQUICARES aims to enhance access to innovative and sustainable mental health services for vulnerable populations by integrating research, co-creation, and policy solutions. The project employs advanced methodologies to evaluate and improve mental healthcare accessibility, offering data-driven insights and tools for policymakers.

The Management and Quality Plan – referred to henceforth as the MQP – falls under Work Package 9 (WP9) – Task 9.1 and is scheduled for submission by Month 2 (M2) of the project timeline.

In this context, the current MQP describes the project management processes and includes the quality assurance provisions for safeguarding high-quality project outcomes. More specifically it includes:

- the quality review process before the submission of each deliverable;
- partners' responsibilities with emphasis on the work breakdown and management;
- evaluation of the impact on the project's progress from potential risks or delays and change management;
- the process for progress monitoring (meetings, reporting, financial management and payment processes).

Proper quality assurance and risk mitigation measures are put in place for EQUICARES to ensure that project outcomes (e.g., deliverable reports, methodologies, big datasets, etc.) are of high quality and offer value to the various project stakeholders. The underlying management and quality assurance mechanisms, as described in this document, are obligatory for all EQUICARES partners, and aim to complement (not replace) the Grant Agreement and the Consortium Agreement of the project.

### **Disclaimer:**

The methodology for the Management and Quality Plan (MQP) of the EQUICARES project (Grant Agreement number: 101156500) draws upon established expertise, tools, and templates developed internally by White Research SRL, while also considering European Commission guidelines and best practices found in relevant literature. Elements of this methodology have been refined through previous Horizon projects where White Research was involved as project coordinator, such as INSPIRE (GA No. 101136592), MOBI-TWIN (GA No. 101094402) and BECoop (GA No. 952930). This approach ensures efficient resource utilisation and alignment with project specifications. Customised adjustments were made to accommodate EQUICARES' unique requirements, EU recommendations and Grant Agreement conditions. This report outlines the adapted methodology as it was further developed and implemented within EQUICARES.

## Table of Contents

1.1 OVERVIEW AND OBJECTIVES .....	7
1.2 STRUCTURE.....	9
1.3 CONTROL.....	10
2.1 PROJECT MANAGEMENT STRUCTURE .....	10
2.2 PROJECT MANAGEMENT ROLES .....	11
3.1 RECORDS .....	13
3.2 QUALITY CONTROL AND DELIVERABLES .....	14
4.1 INTERNAL COMMUNICATION .....	18
4.2 EXTERNAL COMMUNICATION .....	18
4.2.1 <i>Communication with the Commission</i> .....	18
4.2.2 <i>Communication with third parties and stakeholders</i> .....	19
4.2.3 <i>Complaints – Disputes</i> .....	19
6.1 WORK-PLANNING.....	21
6.2 PROJECT MEETINGS .....	22
6.3 PROGRESS MONITORING (INTERNAL REPORTS).....	22
6.4 REPORTS TO THE COMMISSION (EXTERNAL REPORTS).....	23
6.5 RISK MANAGEMENT .....	23
6.5.1 <i>Main risks and contingency plans</i> .....	23
6.5.2 <i>Risk process and roles</i> .....	24
6.5.3 <i>Risk assessment</i> .....	24
6.5.4 <i>Corrective actions – Contingency plans</i> .....	24
7.1 LIST OF FILES RELATED TO THE MANAGEMENT AND QUALITY PLAN .....	27
7.2 EQUICARES GANTT.....	28
7.3 EQUICARES WORK BREAKDOWN BY WPS, TASKS, DELIVERABLES AND MILESTONES .....	30
7.4 TASK INTERDEPENDENCIES.....	35
7.5 LIST OF DELIVERABLES’ QUALITY REVIEWERS .....	36

## List of Figures

Figure 1. MQP's different versions and submission timeline.....	10
Figure 2. Project Management structure .....	11
Figure 3. Internal process for controlling the quality of deliverables .....	17
Figure 4. WP's interdependencies.....	35

## List of Tables

Table 1. Terms and Definitions.....	6
Table 2. EQUICARES partners .....	8
Table 3. Partners responsible for hosting project meetings across reporting periods .....	22
Table 4. Reporting schedule.....	23
Table 5. Two main factors for risk assessment .....	24
Table 6. Risk assessment .....	24
Table 7. List of files related to the Management and Quality Plan.....	27
Table 8. EQUICARES work breakdown by WPs and Tasks .....	30
Table 9. EQUICARES List of Deliverables .....	32
Table 10. EQUICARES List of Milestones.....	34
Table 11. List of Deliverables and their corresponding Quality Reviewers .....	36

## List of Terms and Definitions

Table 1. Terms and Definitions

Abbreviation	Definition
<b>AI</b>	Artificial Intelligence
<b>CA</b>	Consortium Agreement
<b>DM</b>	Dissemination Manager
<b>DoA</b>	Description of the Action
<b>EA</b>	External Ethics Advisor
<b>EAB / AB</b>	Ethics Advisory Board / Advisory Board
<b>EM</b>	Exploitation Manager
<b>EU</b>	European Union
<b>GA</b>	Grant Agreement
<b>MQP</b>	Management and Quality Plan
<b>PC</b>	Project Coordinator
<b>PO</b>	Project Officer
<b>QM</b>	Quality Manager
<b>SC</b>	Steering Committee
<b>TL</b>	Task Leader
<b>WP</b>	Work Package
<b>WPL</b>	Work Package Leader

# 1. Introduction

## 1.1 Overview and objectives

EQUICARES supports access to innovative and sustainable mental health and care services by people in vulnerable situations through a blend of research, co-creation and policy solutions. The project uses innovative methodologies, such as an advanced application of Levesque framework for evaluation of mental health services; the deployment of Computational Social Sciences to increase access for hard-to-reach populations in vulnerable situations and collect accurate quantitative and qualitative data on inequalities in mental healthcare services; and the combination of complementary cost-analysis techniques. To unlock the design of innovative solutions, the project maps, through digital ethnography, existing innovative solutions, analyses for accessible mental health services and links them with different parts of the mental health system. Such informative insights are visualised and offered to policymakers through a dedicated Atlas.

EQUICARES pilots innovative solutions in 8 areas from 7 countries, which represent diverse socioeconomic settings and cover all major categories of vulnerable groups, while informing various strategic frameworks of the EU. Through “Smart Health Labs”, the project engages vulnerable groups at the community level to codesign, implement and assess innovative solutions based on the principles of social economy and user innovation. At the individual level, the project provides awareness-raising and capacity-building and pilots a novel AI-based Assistant, making advancements in the landscape of AI-generated mental health ecosystem, and fostering mental health and digital literacy of users. EQUICARES tests the value of its innovative solutions and applies novel cost analysis techniques to provide solid evidence of the negative impact of not taking measures. Finally, the project replicates its outcomes in 4 additional cases and develops the Inclusive Mental Health and Care Policy Dashboard towards the sustainability and policy uptake of its results.

In this context, the main objectives of the EQUICARES project are to:

- O1: Identify and analyse health inequalities and access barriers to mental health services of people in vulnerable situations across the healthcare system (prevention, primary, secondary, tertiary, integrated, long-term) by collecting reliable and granular data at macro-, meso-, and micro-level.
- O2: Identify innovative solutions that promote access to mental health services, evaluate their outcomes, effectiveness, costs, ability to address factors of inequality, and limitations in enhancing service access, and make them available to policymakers and care workers through the Atlas.
- O3: Put the people in vulnerable situations at the centre of innovation activities by engaging them in local “Smart Health Labs” and empowering them through a health promotion programme and an AI Assistant that enhance their health and digital literacy, while also supporting and engaging the supply side actors.
- O4: Co-design and pilot innovative solutions in the 8 pilot sites to improve accessibility to mental health services by boosting the abilities of people in vulnerable situations to access care services and the capacity of healthcare systems to provide accessible, cost efficient and quality services.

- O5: Monitor and evaluate the multi-level impact of pilot interventions (e.g., higher equity, monetary savings, social cohesion) as well as the costs of not taking measures through complementary cost analysis techniques.
- O6: Ensure that policy and decision makers have enhanced access to quality data, helping them to identify barriers to service access, the unmet needs of people in vulnerable situations, as well as relevant innovations, and produce evidence-based recommendations towards the scale-up, and replication of our results.
- O7: Ensure that the project's results are properly disseminated to and exploited by core stakeholder groups (e.g., policy makers, mental health care workers, service providers, representatives of disadvantaged groups), with a view to ensuring the sustainability of the EQUICARES portfolio of innovative solutions.

To achieve the objectives above, a multidisciplinary and well-balanced consortium has been assembled, bringing together experts from science and research, health experts, citizen's associations and public organisations, innovative companies, networks of end users and providers of healthcare services and organisations of people in vulnerable situations and the social economy, allowing wide access to relevant groups, such as people in vulnerable situations and mental health stakeholders. The consortium of EQUICARES consists of 18 partners, coming from 9 different European countries, as summarised in Table 2.

Table 2. EQUICARES partners

#	Role	Partner Name	Short Name	Country
1	Coordinator	WHITE RESEARCH SRL	WR	Belgium
2	Beneficiary	RIJKSUNIVERSITEIT GRONINGEN	RUG	The Netherlands
3	Beneficiary	ERASMUS UNIVERSITEIT ROTTERDAM	EUR	The Netherlands
4	Beneficiary	KOC UNIVERSITY	KOC	Türkiye
5	Beneficiary	KENTRO EREVNON NOTIOANATOLIKIS EVROPIS ASTIKI MI KERDOSKOPIKI ETAIREIA	SEERC	Greece
6	Beneficiary	GIVMED SHARE MEDICINE SHARE LIFE	GIVMED	Greece
7	Beneficiary	TSENTAR ZA MEZHDUETNICHESKI DIALOG I TOLERANTNOST AMALIPE	AMALIPE	Bulgaria
8	Beneficiary	L'ADAPT	L'ADAPT	France
9	Beneficiary	LGBT SUPPORT AND ADVOCACY NETWORK IRELAND COMPANY LIMITED BY GUARANTEE	LGBTI	Ireland
10	Beneficiary	FUNDACION PARA LA GESTION DE LA INVESTIGACION EN SALUD DE SEVILLA	FISEVI	Spain
11	Beneficiary	ZENTRALINSTITUT FUER SEELISCHE GESUNDHEIT	ZI	Germany
12	Beneficiary	Q-PLAN INTERNATIONAL ADVISORS	Q-PLAN	Greece
13	Beneficiary	NATIONAL CENTRE FOR YOUTH MENTAL HEALTH CLG	JIGSAW	Ireland
14	Beneficiary	EUROPEAN HEALTH TELEMATICS ASSOCIATION	EHTEL	Belgium

15	Beneficiary	DIESIS NETWORK	DIESIS	Belgium
16	Beneficiary	STICHTING EUROPEAN COMMUNITY MENTAL HEALTH SERVICE PROVIDERS NETWORK	EUCOMS	The Netherlands
17	Beneficiary	EUROPEAN ASSOCIATION OF SERVICE PROVIDERS FOR PERSONS WITH DISABILITIES	EASPD	Belgium
18	Beneficiary	SQUAREDEV	SQUAR	Belgium

Within the framework of EQUICARES, **the main objectives of the MQP** are to:

- ✓ Ensure the smooth implementation and on-time completion of the diverse activities foreseen by the project.
- ✓ Safeguard the quality of the activities and deliverables of the project, in line with the contractual obligations that the consortium has undertaken with the European Commission (hereafter referred to as the Commission or EC).

The MQP provides an overview of the management structure, as well as the roles and responsibilities of the partners, and defines the procedures for progress monitoring, quality assurance and project management.

**Important remarks:**

- i. Compliance with the MQP is obligatory for all partners of the EQUICARES project.
- ii. The MQP complements and does not replace the Grant Agreement (GA) signed with the Commission, including its Annexes, as well as the Consortium Agreement (CA) of the project.

## 1.2 Structure

The MQP is divided into six (6) main chapters:

- **Chapter 1** introduces EQUICARES and the objectives and structure of the MQP.
- **Chapter 2** presents the management structure of the project and describes the roles and responsibilities of the partners in this respect, as well as of external parties.
- **Chapter 3** analyses the control processes (e.g. quality control, monitoring of changes, management of records / files, etc.) of the project documents (deliverables, reports, etc.).
- **Chapter 4** addresses project communication aspects, both “internal” (among project partners) and “external” (formal communication with the Commission, communication with project coordinator / contractors of other relevant projects or initiatives, external stakeholders, etc.).

- **Chapter 5** outlines the payment processes of pre-financing, interim and final payment of the project.
- **Chapter 6** describes the way in which the project planning and monitoring are performed (work packages, tasks, checks, etc.).

Finally, the **Annex of the MQP** includes a list of files that are directly related to the MQP (administrative and financial management documents, templates, etc.).

## 1.3 Control

The MQP is prepared by the Project Coordinator (PC) and has been reviewed and approved by all partners. The PC is responsible for updating or modifying the MQP, if necessary. The PC is also responsible for reviewing periodically the MQP and recommending relevant changes.



Figure 1. MQP's different versions and submission timeline

In the case of ambiguities or disagreements regarding the content of the MQP, the Steering Committee (SC) of EQUICARES is responsible for making the final decision (following the procedures foreseen in the CA). In any case, changes are marked appropriately (briefly on the History of Changes table and/or highlighted within the document). After each major change, a new version of the MQP will be published and distributed to all project partners. If no major changes are applied in the MQP during the lifetime of the project, then the final version of the MQP will report any minor changes or updates of the document.

## 2. Project Management Structure and Roles

### 2.1 Project Management Structure

The management structure of EQUICARES is depicted in Figure 2 (as also described in the project's GA – Section 3.2.1 – “Consortium overview and complementarity”).

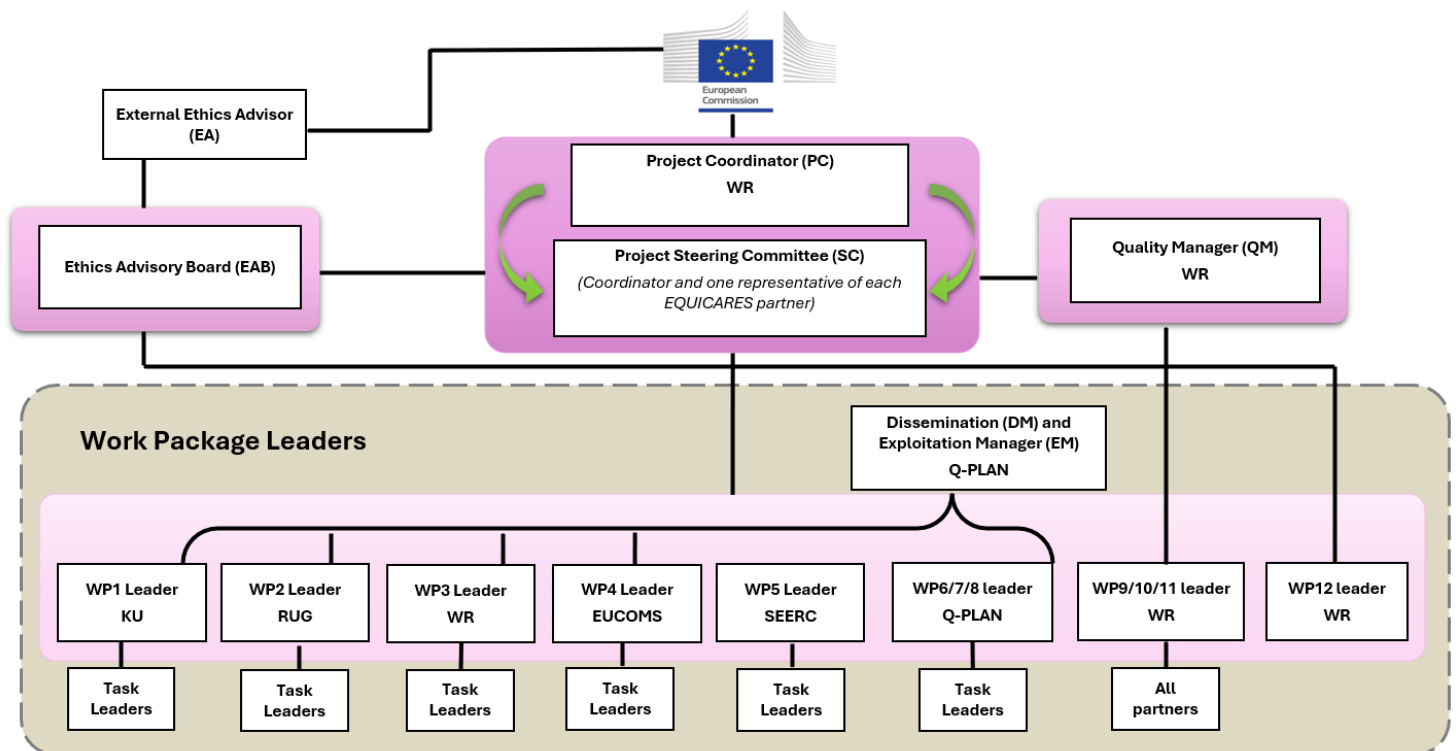


Figure 2. Project Management structure

## 2.2 Project Management Roles

Management roles and responsibilities are described below:

- The **Project Steering Committee (SC)** is the main decision-making body of the project which deals with all key strategic project decisions. It consists of **one representative per partner**. The Project Coordinator (PC) is the chair of the Steering Committee and is responsible for aspects affecting the contractual terms with the Commission. Individually, each Member shall be deemed to be duly authorised to deliberate, negotiate and decide on all matters listed in Section 6.3.7 of the Consortium Agreement (CA). Furthermore, each SC “Member” is responsible for the on-time delivery of results on behalf of the partner they represent, the quality assurance of the work executed, budgetary and technical results monitoring, and gathering input for internal and external reporting and documentation. The exact authorities, responsibilities and operational procedures of the SC are documented in detail within the CA of the project (see Articles 6.1, 6.2 and 6.3).
- The **Project Coordinator (PC)** (WR) shall be the intermediary between the Parties and the Granting Authority. As mentioned above, the PC serves as the chair of the Steering Committee and is also responsible for the coordination of the project’s activities. The PC coordinates and manages the items that affect the contractual terms with the EC, as well as the technical and scientific activities of the consortium. Moreover, the PC provides supporting material and administrative support for monthly meetings (agenda, minutes, presentations folder etc.). The mandate of the PC is described in detail by Article 6.4 “Coordinator” of the project’s CA.
- The **Quality Manager (QM)** (WR) is tasked with assisting the SC with project implementation and is responsible for drafting, reviewing and monitoring the implementation of the project’s

MQP. In addition, the QM assists in internal and external reporting, the financial aspects of the project, and the execution of the project's activities.

- The **Ethics Advisory Board (EAB)** has been established (M1) from a dedicated group of partners to oversee the application of the Ethics Handbook throughout the project's duration. It is composed of (at least) three (3) ethics experts, which are representatives of selected partners of EQUICARES (KU, SEERC, JIGSAW). The Members of the EAB were carefully selected to include experts in research ethics ideally relevant to healthcare and artificial intelligence. The EAB will gather annually and as needed in ad hoc instances to address emerging ethical challenges and ensure continuous compliance with ethical standards. Participation in the EAB will be on a pro-bono basis. The mandate of the EAB is described in detail by Article 6.6 “Ethics Advisory Board (EAB)” of the project’s CA and Article 4.3.4 Project Execution of the GA.
- The **External Ethics Advisor (EA)** is an external, independent appointed expert specializing in **data protection law, research ethics, technology and AI law**. The EA will be consulted at least on the following issues:
  - The research ethics aspects of inclusion of vulnerable groups, incidental findings policy and possibility for debrief or referral.
  - The data protection aspects with a specific focus on the qualitative research and the AI Assistant.
  - Legal and ethical aspects of the development and testing of the mental health AI Assistant (hereunder whether compliance with the EU Medical Device Regulation 2017/745 should also be sought).

Regular reports by the Ethics Advisor must be submitted to the granting authority at the end of every reporting period, starting in month 18, to describe how the ethics issues of the project are handled by the consortium, with particular regard to those identified in this report.

- The **Exploitation Manager (EM) (Q-PLAN)** is responsible for the coordination of innovation activities and the exploitation of the project’s results. The Exploitation Manager defines the project’s **Exploitation and IPR Management Strategy in D6.3 “Exploitation & sustainability plan” (M6) as well as its updates in D7.1 (M24) and D8.2 (M48)**, and ensures that innovative ideas which arise during the project are thoroughly examined and assessed for potential exploitation, while at the same time, all background and foreground knowledge of the project is managed. The Exploitation Manager will be in close communication with the PC and SC to ensure continuous feedback from escalating operational project activities to the dissemination and exploitation management work package (WP6-WP8).
- The **Dissemination Manager (DM) (Q-PLAN)** is responsible for the design and implementation of a well-targeted communication strategy. A dedicated **Dissemination and Communication Plan** will be elaborated in D6.1 “Dissemination & Communication Plan” (M3) to facilitate the implementation and monitoring of the strategy, as well as its updates in D6.3 (M18) and D8.1 (M48). The main goal of the DM is to raise awareness of the scope and activities of the project, achieve the widest diffusion of the project’s outcomes and share ideas with external stakeholders.
- The **Work Package Leaders (WPL)** are responsible for the coordination of the partners collaborating under their respective work packages to ensure the quality of the executed work. The WPL are also responsible for:

- resolving day-to-day administrative, technical and resource problems within their work package,
- disseminating information relating to all aspects of the work to the other WPL ensuring smooth coordination of work package activities, and
- reporting to the upper levels of project management (i.e. the PC and SC).
- The **Task leaders (TL)** are responsible for the on-time delivery of results and deliverables of their respective task(s). They work under the direct supervision of the respective WPLs and report directly to them.

All partners should take all the necessary measures and provide all necessary resources for the on-time and smooth delivery of their tasks and responsibilities.

**Note:** The roles and responsibilities of each partner are described in detail within Annex 1 of the Grant Agreement (GA), namely the Description of the Action (DoA) and more specifically, within Part A, Section “List of Work Packages” as well as within Part B, Section 3.2 “Capacity of participants and consortium as a whole”. The roles and responsibilities of the SC, as well as the PC, are also described in detail in the CA of the project.

The synthesis of the SC, as well as the names of the WPL, are available within **MQP-EQUICARES-F6: “List of Names (GAs and WPL)”**. All partners should respect the decisions of the SC.

## 3. Records and Quality Control of Deliverables

### 3.1 Records

Throughout the project’s duration, the PC, as well as all partners, maintain records in electronic and/or paper form. The PC has the responsibility of maintaining the central records and supporting documents of the project. These records include:

- Contractual documents and correspondence with the Commission.
- Correspondence with project partners.
- Deliverables submitted to the Commission.
- The Management and Quality Plan (all versions).
- Meeting minutes and progress reports (internal and external).
- Other important documents.

#### Important remarks:

- i. Each partner should maintain records of all documents that concern them or for which they are responsible during the project life, for 5 years after final payment as specified in p.12 of the Grant Agreement of the Project Terms and Conditions.
- ii. Both the PC as well as all partners are responsible for storing and maintaining documents in a way that they are protected against damage, deterioration, or loss.
- iii. With respect to electronic records (digital files), all partners should regularly perform back-ups.

All the official project documents and the latest deliverables are stored in the Participant Portal.

The WPLs are responsible for providing the deliverables of the tasks of each WP to the PC. The **PC is the only partner responsible for releasing a deliverable** (publicly and/or to the EC).

When a deliverable is released, version 1 is assigned to it. The version changes only after important corrections/remarks from the EC (e.g., after a reporting period) or when a deliverable is updated, according to the work plan described in the DoA annexed to the GA. **The PC is the only one responsible for changing the versions of a deliverable.**

With respect to electronic records (digital files), the following guidelines should be followed in terms of the name of the file:

- File name should contain the version number, e.g., v0.1.
- Minor version numbering, e.g., v0.1, v0.2 etc., should be used for the documents before they are officially released, e.g., before deliverables are released to the EC by the PC.
- Major version numbering, e.g., v1.0, v2.0, etc., should be used only for the official releases of a document.

An example demonstrating the rules which apply to the naming of electronic files is provided below:

- **D9.1\_Management & Quality Plan\_v0.1.docx** – Deliverable 9.1 (full title: Management and Quality Plan), draft version of the document, shared within the consortium for collection of input and/or feedback.
- **D9.1\_Management & QualityPlan\_v1.0.docx** - Deliverable 9.1 (full title: Management and Quality Plan), 1st version of the document as it was released by the PC.
- **D9.1\_Management & QualityPlan\_v2.0.docx** - The second version of deliverable 9.1 as it was released by the PC (after corrections/updates).

The latest versions of all deliverables and other documents relevant to the MQP can be found in **MQP-EQUICARES-F7: “List of QM documents”**, updated and maintained by the QM.

## 3.2 Quality Control and Deliverables

All deliverables produced in the context of EQUICARES will undergo a dedicated quality control process prior to their internal approval and ultimate release. The internal approval of the deliverables will be considered complete only after the successful completion of the respective quality control process. In this framework, each deliverable will be examined with respect to its:

- ✓ **Content:** to what extent the content of the deliverable is relevant and meets its objectives as set out in the DoA, as well as the degree to which it includes all the required information.
- ✓ **Quality:** whether the quality of the deliverable is at an acceptable level that meets the specifications / standards that have been set (where relevant) and based on the judgement of the reviewer.
- ✓ **Structure, format, and appearance:** where necessary, and especially with respect to the deliverable’s model template defined for the project (by the DM).
- ✓ **Data and information:** a cross-check (where necessary and if applicable) to ensure that no contradictions or overlaps between different deliverables exist.
- ✓ **Accordance with the timetable:** a check of the delivery date, which must be in line with the one agreed.

- ✓ **Attached documents:** a check to ensure that all necessary accompanying documents are attached.

With that in mind, the 3-step quality control process to be followed before the submission of each deliverable is thoroughly described below:

## 1<sup>st</sup> Quality check – Responsible partner

The 1<sup>st</sup> quality check is implemented by the partner responsible for the preparation of the deliverable. After its 1<sup>st</sup> quality check, the deliverable is submitted for the 2<sup>nd</sup> quality check (see below) to the WPL of the WP under which the deliverable is being elaborated and to one more partner (with the PC in copy), both of which will serve as quality reviewers for the respective deliverable. In case the WPL is responsible for the preparation of the deliverable, its quality control shall be performed by two other partners with relevant expertise.

## 2<sup>nd</sup> Quality check – Quality reviewers

The quality reviewers are responsible for the 2<sup>nd</sup> quality check of the deliverable, examining if there are any remarks/deficiencies and providing their comments directly on the document. The quality reviewers shall perform the quality check and respond to the partner responsible for the preparation of the deliverable within **5 working days upon receiving the deliverable**, by providing the commented version. In this context, the partner that acts as quality reviewer of a deliverable should complete and provide a single commented deliverable (i.e. with track changes, comments, etc.) to the responsible partner, including all the comments of the reviewing partner organisation. The appropriate **adaptations are considered and addressed within 5 working days by the responsible partner**. If necessary, the responsible partner may contact the quality reviewers in order to receive further clarifications regarding the comments of the quality review.

The rule of 2 reviewers per deliverable will not be applied to specific deliverables that describe project management processes and strategies that are binding for the whole consortium, such as the Management and Quality Plan (MQP), the Data Management Plan (DMP), the Dissemination and Communication Plan (DCP), the Exploitation and Sustainability Plan, etc. This kind of deliverables will be **reviewed and accepted by all partners** within the consortium before submission so that all partners are well-aware of and reach a consensus on important administrative processes and strategies put in place for EQUICARES.

The entire internal preparation and quality control procedure of deliverables is monitored by the PC. The partners responsible for the deliverables of EQUICARES along with the quality reviewers assigned to each deliverable are listed in the respective spreadsheet used for this purpose, i.e., **MQP-EQUICARES-F8: “Deliverable Quality Reviewers”**, as well as in **Annex 7.5 “List of Deliverables’ Quality Reviewers”** of the present document. The list of quality reviewers per deliverable is confirmed by all partners. The PC will be responsible for applying any change to the list, if such a need occurs throughout the project, after an agreement among the partners.

## 3<sup>rd</sup> Quality check – Coordinator

The final version of the deliverable is submitted by the deliverable responsible partner to the PC for a final quality check and submission to EC. The PC shall perform the final quality check and respond to the partner responsible for the preparation of the deliverable within **2 working days upon**

**receiving the deliverable.** In the unlikely case that the PC provides comments, the responsible partners should **address the comments within 2 working days**. Figure 3 presents an illustration of the integrated quality check process, as well as the relevant number of working days for each quality check step.

**Important remarks:**

- i. To ensure that there is enough time for all the steps of the quality control process, the initial version of the deliverable must be sent to Quality reviewers at least 2 weeks before submission date.
- ii. To ensure that there is enough time for the quality control of each deliverable, respective deadlines should be set well before the contractual deadline.
- iii. Every partner is responsible for the quality of its deliverables. In this context, a partner may decide to address or not any comment provided by the reviewers, assuming full responsibility for the outcomes of this decision.
- iv. To the extent possible, all deliverables are prepared in a standard format based on the template defined by the project's Dissemination Manager.

**General recommendation:**

It is advisable (even if not obligatory) for the responsible partner to share a table of contents to the reviewing partners roughly 1.5 months before the submission deadline.

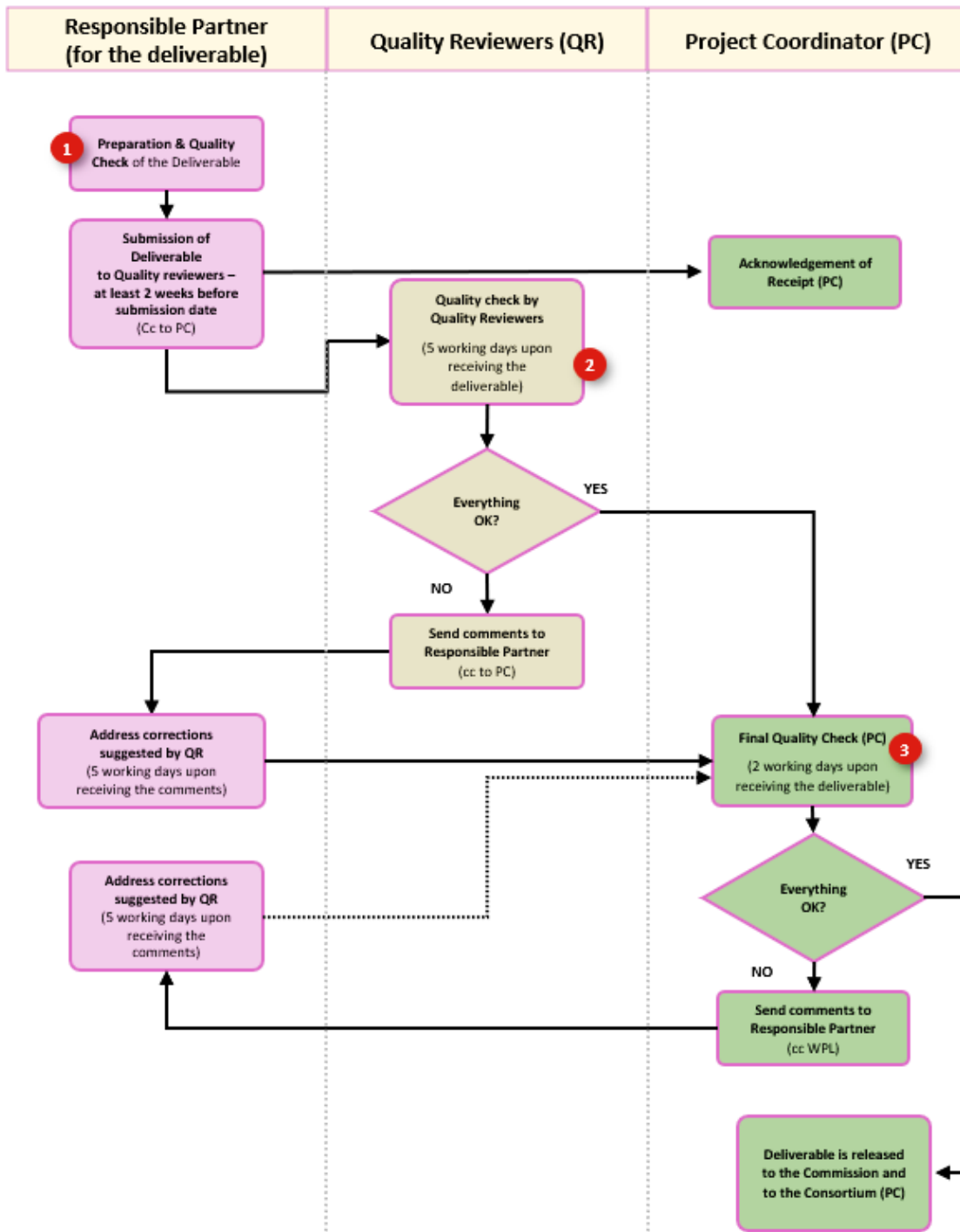


Figure 3. Internal process for controlling the quality of deliverables

## 4. Project Coordination

### 4.1 Internal Communication

Throughout the project, internal communication between PC, WPLs, TLs and project partners takes place via any available convenient way (e.g., e-mail, Microsoft Teams, Skype, phone, etc.). Internal communication may be distinguished into formal and informal:

- ❖ **Formal Communication:** Formal communication includes sending deliverables, planning meetings, project meetings, etc. This kind of communication should be documented (e.g., maintain mails, meeting minutes).
- ❖ **Informal Communication:** Informal communication includes all every-day interactions between project's partners (via informal e-mail, phone, etc.) and it is not necessary to be documented.

The PC and the WPL are expected to communicate regularly with the project partners to closely follow the project and work packages' progress with a view to identifying and rectifying potential deviations in time. Close collaboration and communication between project partners are essential, especially in cases when they must cooperate to perform specific tasks of the project. The PC has the main responsibility of ensuring smooth and effective internal communication.

The **contact details of EQUICARES partners** are kept in a separate file (see **MQP-EQUICARES-F1 "EQUICARES mailing list"**). In the event of any change in the contact details or in the project team, partners must notify the PC, who will then inform the rest of the partners (and if necessary, the EC).

#### Important remarks:

**A dedicated EQUICARES file repository has been created on Google Drive by White Research (WR)**, enabling project's participants to save, upload, access and share project files within the consortium. Google Drive is a file storage and synchronisation service developed by Google. It works seamlessly with Microsoft Office files. Aiming to establish a GDPR-compliant cloud-based storage system, the PC's (White Research) professional account (G Suite for Business) will be used to set up a new project container under which all stored files are, by default, stored and synced in EU servers. Access will be granted to all project partners.

### 4.2 External Communication

#### 4.2.1 Communication with the Commission

**The PC is the sole partner responsible for the communication with the responsible Project Officer (PO)** of the EC with respect to the project. The PC is the one who submits to the Commission all the reports and deliverables and provides any additional information requested by the PO. **The PC keeps all consortium partners informed about any important communication with the PO.** Project partners should not contact the PO. Only in exceptional cases, after consulting and getting the agreement by the PC in advance, may a project partner directly contact the PO. In such a case, the PC is kept fully informed (in writing) about the content of the communication.

## 4.2.2 Communication with third parties and stakeholders

Project partners may and should communicate with third parties and project stakeholders (e.g., researchers, civil society organisations, public authorities, innovation intermediaries, National Contact Points, other EU-funded projects) within the context of the project. In all relevant external communications, a reference to the project should be made, ensuring we use the project identifiers correctly (e.g., project acronym, EU programme, GA Number, etc.).

The overall communication strategy with project stakeholders, as well as related stakeholder engagement aspects, is presented in the Dissemination and Communication Plan of the project. **The primary contact point is the Dissemination Manager (DM) of the project**, but the PC supports external communication regarding quality-related issues (e.g., transparency of project results through Zenodo, formal acknowledgement of EU funding programme). The DM and PC collaborate and support each other when it comes to communicating project results to the external interested parties, with the aim of ensuring high quality of the project.

## 4.2.3 Complaints – Disputes

The members of the Steering Committee, as well as the WPL, will notify immediately the PC for any events or circumstances that may significantly affect the performance of the work executed in the frame of the work package which they are leading (e.g. suggestions for considerable improvements and modifications/changes in the methodology, timetable and task allocation, potential delays, disputes between partners, etc.).

The PC -also serving as the QM- will be responsible for addressing and resolving the issues mentioned above, by consulting the WPL and any other partner directly involved in the respective work package. The PC will try to achieve a compromise between the conflicting parties, based on consensus and considering the conformance to the objectives and work plan of the project.

If the mediation of the PC does not turn out to be successful, then the PC will forward the conflict to the SC for taking the final decision. The SC will try to respond to changes or settle conflicts by achieving consensus among the parties involved. If consensus cannot be achieved and/or conflicts remain unresolved, the SC will decide on the matter via voting. Further details with respect to decision-making, conflict resolution and the management of internal administrative-financial issues are incorporated into the project's CA. In any case, the final decision on the mediation process remains with the PC and the SC. When necessary, the PC informs the Commission requesting feedback.

In cases where ethical concerns are involved, the Ethics Advisory Board (EAB) and the External Ethics Advisor (EA) play a critical role in ensuring compliance with ethical and legal standards. The EAB, composed of experts in research ethics, monitors the project's ethical integrity and, if it identifies any concerns, will promptly inform the Project Coordinator (PC) for further action. Similarly, the EA, providing independent expertise on data protection, AI, and healthcare compliance, will report any ethical or legal risks to the PC. Upon receiving such notifications, the PC will assess the issue, consult relevant stakeholders, and take necessary steps to address it. If required, the PC will also inform the Commission and request feedback. The final decision on the mediation process remains with the PC and SC.

## 5. Payment process

Payments to partners are the exclusive task of the PC.

The transfer of the initial pre-financing, the additional pre-financings (if any) and interim payments to partners will be handled in accordance with Article 22.1. and Article 7 of the Grant Agreement along with the clarifications made in Article 7.2 of the Consortium Agreement for the payment process, following this payment schedule:

1. **Pre-financing payment in 3 instalments** (upon signature of the GA).
2. **Two Interim payments** at the end of each reporting period (M18 and M36).
3. A **final payment** of the balance at the end of the project.

### Pre-financing payment:

EQUICARES includes three (3) reporting periods, and the pre-financing is approximately 53.33% of the total lump sum.

The pre-financing will be calculated as 53.33% of the total lump sum, minus 5% which will be retained as contribution to the Mutual Insurance Mechanism (48.33% of EC Maximum Grant).

The pre-financing payment is distributed in 3 instalments (more information on the detailed payment plan in Article 7.2.2. of the CA):

- 60% of the pre-financing will be forwarded to Parties not later than thirty (30) calendar days after receipt of the pre-financing from the Granting Authority;
- 20% of the pre-financing, without prejudice to sections 7.1.3 and 7.1.5, will be paid to the Parties not later than thirty (30) calendar days after the submission of the second internal report (according to the reporting templates of the Management and Quality Plan of the Project) of month 12 to the Project Coordinator.
- 20% of the pre-financing, without prejudice to sections 7.1.3 and 7.1.5, will be paid to the Parties not later than thirty (30) calendar days after the submission of the first official periodic reporting of Month 18 to the granting authority.

### Interim payment

EQUICARES includes **two (2) Interim payments following the first and second reporting periods (months 18 and 36)**. Following the lump sum approach, payments will only be made for the Work Packages (WP) that are completed within the respective official period.

Funding of the Lump Sum Contributions accepted by the Granting Authority will be transferred to the Party concerned by the Coordinator after receipt of payments from the Granting Authority without undue delay and in conformity with the provisions of the Grant Agreement. The steps involved in the payment and distribution process are the following:

1. All scheduled reports and deliverables for the period must have been submitted .
2. The Commission confirms that targets have been achieved through a successful official review meeting.

3. The Granting Authority pays the PC based on the periodic reports and the activities carried out, only for the Work Packages completed in the corresponding period.
4. The PC calculates the distribution plan for the entire amount received. All partners are informed accordingly.
5. All partners, through their SC representatives, agree with the distribution plan suggested by the PC and confirm / update their bank accounts.
6. The PC conducts the payment of the respective amounts.

The assessment of the completion of a WP will be carried out during the reporting periods through the validation of deliverables, milestones, KPIs and the technical report. Nevertheless, a WP that is not fully finalised or rejected over a reporting period may be re-reported, validated, and paid in the context of a subsequent reporting period.

Only during the final reporting will it be possible to indicate that a WP has been partially completed: in this case, the EC will finance this WP proportionally and according to a declared and validated rate of achievement (The decision on the partial amount is taken on a case-by-case basis, taking into account comments and observations.)

### Final payment

The final payment of the balance pays the remaining lump sum shares for the implementation of the action. This includes the 5% Guarantee Fund retained as contribution to the Mutual Insurance Mechanism and any potential payments for WPs which were finalised during the last reporting period.).

Payments for partially completed Work Packages are possible only at the end of the project, as part of the payment of the balance. In this case, the lump sum share is paid partially, in line with the accepted degree of completion. This means that the amount reimbursed will correspond to the accepted part of the Work Package, which may be less than the part declared completed.

## 6. Work planning, monitoring and control

### 6.1 Work-planning

The work plan is divided into 12 work packages (WP) and each WP into respective tasks. The overall work-planning of the project is presented in **MQP-EQUICARES-F2 “Work-Planning”** and includes:

- The WP and the respective tasks, including partners responsible in each case.
- The duration, start and end dates for each task and WP as a whole, including the GANTT Chart of the project.
- The respective deliverables, both external (as mentioned in the DoA of the GA) and internal.
- The milestones of the project.

Any modification/change in the work planning, which does not affect the overall course of the project, should be approved by the PC. Any significant change should be in line with the contractual obligations and the rules of the Commission.

#### Important remarks:

In case the consortium fails to submit a deliverable to the Commission on time, the PC should inform the Commission before the deadline, justify the delay, and suggest a new deadline. For this reason, **all partners should give early warnings about delays to the respective WPL and the WPL to the PC** (see also Section 6.5 Risk Management of the current document).

## 6.2 Project meetings

A total of 9 meetings are anticipated in the framework of the EQUICARES project.

- 1<sup>st</sup> Kick-off Meeting organised by WR in Brussels (M1): detailed and comprehensive project planning.
- 2<sup>nd</sup> – 8<sup>th</sup> Meeting (every semester: M6, M12, M18, M24, M30, M36, M42): planning for the next semester’s actions and progress review for the previous semester;
- 9<sup>th</sup> Final meeting (end of the project, M48): Project review and preparation for the final review meeting.

The partners responsible for hosting the meetings during each reporting period are outlined in Table 3 below. The order of the partners hosting the meetings will be determined during the EQUICARES monthly meetings and formally documented in the meeting minutes.

Table 3. Partners responsible for hosting project meetings across reporting periods

Reporting period	Partners
1 <sup>st</sup> (M1-M18)	WR (KoM), KU, GIVMED, AMALIPE
2 <sup>nd</sup> (M19-M36)	LGBTI, FISEVI, L’ADAPT
3 <sup>rd</sup> (M37-M48)	ZI, WR (final project meeting)

The PC is responsible for keeping minutes for all project meetings. The meeting minutes are circulated to all partners for approval.

## 6.3 Progress monitoring (internal reports)

Every six months, a short progress report will be prepared by each project partner and WPL, following collection of information from the corresponding task leaders and the other partners involved in each WP, to summarise the work progress, including progress against targets (see model template in **MQP-EQUICARES-F3: “Semester Activity Report Model Template (per partner)”**). Based on the individual semester progress reports, the PC will elaborate on the respective “Internal Semester Report” for the whole project. All individual semester progress reports should be delivered to the PC no later than 15 days after the end of the respective reporting period. The PC should provide comments within 15 days from the date of delivery. If no comments are provided within this period,

the delivered report is considered accepted. The Internal Semester Reports will provide input to the major external Periodic Reports to the Commission.

#### Important remarks:

Given the fact that the project is based on the lump sum approach, financial reporting to the Managing Authority is not required. **Emphasis will be placed on the Work Packages (WP) due to be completed in the first reporting period, to ensure that all corresponding tasks are concluded on time by the end of the first reporting period.** Otherwise, the payment will be jeopardised for all partners and for a whole WP in which even one task is delayed.

## 6.4 Reports to the Commission (external reports)

The PC is the overall partner responsible for the preparation and timely submission of the project reports to the Commission (“Periodic Reports”). All partners provide the necessary input for the preparation of the reports. Three such reports are required in the framework of EQUICARES, one 60 days after the end of the three respective reporting periods (M1-M18, M19-M36, M37-M48). The exact content of the reports is specified in the GA (Article 21) and the below table presents each period’s reporting schedule.

Table 4. Reporting schedule

Reporting period No	Month from	Month to	Type	Deadline
1	1	18	Periodic report	60 days after end of reporting period
2	19	36	Periodic report	60 days after end of reporting period
3	37	48	Periodic report	60 days after end of reporting period

## 6.5 Risk management

Risks that may considerably affect the progress and quality of the project have been identified and relevant contingency plans have been elaborated. The list of risks will be updated on an ad-hoc basis or once every six months.

### 6.5.1 Main risks and contingency plans

Two types of risks have been identified:

- **Internal** risks linked with the operation of the project team, which is characterised by a large number of experts, different backgrounds and geographical dispersion (e.g., partner / consortium / project as a whole), delays, changes in the project team, etc.
- **External** risks induced by the project targeted groups and stakeholders, though they may still be caused by inappropriate project approach or inadequate performance.

Risks are assessed separately and reported in the reports to the Commission. Each WPL is responsible for identifying additional risks that may arise during the implementation of the project and to constantly assess those that have been identified. Contingency planning may be adapted accordingly.

### 6.5.2 Risk process and roles

Risks are handled by the SC, PC and WPL:

- The SC has the decisive role on which countermeasures should be applied, by whom and when.
- The PC has the role of informing the SC about the identified risks, monitoring the implementation of the countermeasures, and assessing the results / outcomes.
- WPLs submit a Risk Report to the PC on the date a new risk is identified (ad hoc) or every six months (along with the internal reports) for the already identified risks, in which they provide detailed info about the risks, propose countermeasures and report on the implementation of those measures, based on the model template in **MQP-EQUICARES-F5: “Risk Report”**. The same document is also used by the PC to inform the SC about the identified risk and to communicate the SC decisions back to the responsible WPL.

### 6.5.3 Risk assessment

Risk assessment concerns two main factors; the Impact and Probability of occurrence.

Table 5. Two main factors for risk assessment

Assessment Factors	Estimation		
Severity	1-Low	2-Medium	3-High
Probability	1-Low (P<35%)	2-Medium (35%<P<75%)	3-High (P>75%)

A risk management section is included in the internal semester reports, referring to the WPs that will be affected by each risk. A risk management section will also be included in the reports to the EC, describing the major risks and the countermeasures taken by the consortium.

### 6.5.4 Corrective actions – Contingency plans

In case a risk is identified and/or project’s effort does not conform to the project’s work-planning and/or objectives, the PC may apply corrective actions (based on SC decisions). In the case of non-conformities, the PC may also activate contingency plans. With that in mind, the following table summarises the main internal and external risks identified at this stage of the project, as well as respective contingency plans.

Table 6. Risk assessment

No	Risk Description	Linked WP	Proposed risk-mitigation measures
1	Low response rate to research activities,	WP1	The network partners (EHTEL, EUCOMS, EASPD) mitigate this risk by involving key members from their

	<p>such as surveys and interviews</p> <p><b>Probability: Low</b> <b>Severity: High</b></p>		<p>networks and leveraging the connections of pilot partners with key stakeholders. Additionally, data from existing sources such as the European Social Survey and European Company Surveys for EX data could be utilized to address representativeness issues in primary data collection.</p>
2	<p>Difficulty to engage vulnerable groups in our research and intervention activities</p> <p><b>Probability: Medium</b> <b>Severity: High</b></p>	All WPs	<p>The consortium consists of experts and representative organisations for vulnerable groups (AMALIPE, LGBTI, EASPD, JIGSAW, L'ADAPT). We will employ diverse data collection methods, validate findings with network partners' representatives and develop culturally sensitive engagement plans with pilot partners' support. This ensures accessibility and relevance to diverse backgrounds and needs in our actions.</p>
3	<p>People in vulnerable situations may not be able to give consent for participation</p> <p><b>Probability: Medium</b> <b>Severity: Medium</b></p>	WP1, WP2, WP3, WP4	<p>The consortium is composed of experienced experts in integrating people who have difficulties in making decisions autonomously and consciously. Our experts will develop clear protocols, with mitigation mechanisms, for involving individuals in decision-making challenges in research or engagement activities. Strategies may involve family member authorisation, sign language experts, or local translators. The Ethics Handbook, EA and EAB are also available to assist and support /advise this process.</p>
4	<p>Bias in interpreting sensitive data</p> <p><b>Probability: Medium</b> <b>Severity: Medium</b></p>	WP3, WP4 WP1, WP2,	<p>The consortium includes organisations which are experts in qualitative data collection (SEERC, KU, RUG, EUR, WR, Q-PLAN), blending into diverse social contexts. Rigorous scientific principles and ethical guidelines will mitigate risks. Findings will be shared with network partners' representatives for critical review and interpretation.</p>
5	<p>Certain people face barriers to physically access our Labs (medium, high)</p> <p><b>Probability: Medium</b> <b>Severity: High</b></p>	WP3, WP4	<p>When designing the labs, the element of universal design will be applied to ensure that all societal groups are able to access our pilot spaces. The combination of physical and virtual spaces of the labs – set in central and easily accessible points – will ensure that barriers related to distance, time or digital illiteracy will be reduced.</p>
6	<p>Difficulty to establish, support and sustain the Smart Health Labs</p> <p><b>Probability: Low</b> <b>Severity: High</b></p>	WP3, WP4	<p>The work plan includes several tasks to ensure the effective engagement of a wide range of stakeholders in the Smart Health Labs. We will draw on successful cases to overcome any challenges that may arise during the process. Representatives from these cases will present responses to challenges faced by their initiatives.</p>
7	<p>Conflicts impeding the common endorsement of solutions to be piloted</p> <p><b>Probability: Low</b> <b>Severity: Medium</b></p>	WP4	<p>The consultation process in T4.1 will be run by experienced moderators of the consortium who will employ suitable mediation techniques to resolve potential conflicts that may arise, while striking a balance between the representative and participatory character of the process, arriving at a consensus amongst participants.</p>

8	<p>Pilot data collection is ineffective hindering economic evaluation</p> <p><b>Probability:</b> Low <b>Severity:</b> Medium</p>	WP4, WP5	<p>We have developed a comprehensive economic evaluation and data collection system to gather feedback from all participants, regardless of their digital familiarity or access. Our inclusive stakeholder engagement processes will boost participation in pilots and ensure valid feedback. Our feedback mechanisms will undergo testing with a small group of participants for effectiveness before full implementation.</p>
9	<p>Delay in securing ethical approval for the research activities</p> <p><b>Probability:</b> Medium <b>Severity:</b> High</p>	WP1, WP2, WP3, WP4	<p>To ensure the timely obtainment of ethical approval, we have foreseen the following mitigation measures: (i) the clinical study involves 6 months dedicated to the obtainment of the ethical approval (the study protocol will have been finalised 2 months ahead), (ii) our team includes experienced partners with a strong track record in similar studies, ensuring high standards of execution, (iii) the project's Ethics Handbook will be delivered on M4 to guide and inform all ethical approval processes required for each research task.</p>
10	<p>Difficulty proving that participants in the project's research and engagement activities belong to communities in a vulnerable situation</p> <p><b>Probability:</b> Medium <b>Severity:</b> High</p>	WP1, WP2, WP3, WP4	<p>To address the difficulty of proving participants belong to vulnerable communities, we will: (i) define clear criteria ensuring that participant selection is justified and ethically sound, (ii) ensure ethical and GDPR-compliant data collection (support by EA, EAB and cultural mediators), (iii) recruiting challenges will be mitigated by making sure engagement takes place in familiar and inclusive locations, (iv) collaborate with partner organisations representing vulnerable groups (AMALIPE, LGBTI, EASPD, JIGSAW, L'ADAPT) and use self-identification methods or carers' confirmations (anonymised data through ethically compliant processes).</p>

## 7. Annex

This section provides the list of MQP-related files. It also includes the project's GANTT chart, a Work breakdown, indicating schedule per task, responsible partner related subtasks, related deliverables, tasks' interdependencies, and the list of deliverables' quality reviewers (also: MQP-EQUICARES-F8). All internal forms and templates are located in the shared partners' repository of the project.

### 7.1 List of files related to the Management and Quality Plan

Table 7. List of files related to the Management and Quality Plan

Official Documents			
EQUICARES Grant Agreement (with the Commission)			
EQUICARES Consortium Agreement (between project partners)			
Internal Forms/Templates			
Title	Description	Code	Document type
EQUICARES mailing list	Spreadsheet which contains contact information (e-mails) of partners involved in the project.	<b>MQP-EQUICARES-F1</b>	Spreadsheet
Work-Planning	Spreadsheet which contains all information regarding the work plan of the project (Gantt chart, list of deliverables, milestones).	<b>MQP-EQUICARES-F2</b>	Spreadsheet
Semester Activity Report Model Template (per partner)	Template (.docx) for provision of input regarding the semester activity of each partner (internal reporting).	<b>MQP-EQUICARES-F3</b>	Document
Deliverable Template	Template (.docx) for project documents and deliverables.	<b>MQP-EQUICARES-F4</b>	Document
Risk Report Template	Template (.docx) for reporting any identified risk.	<b>MQP-EQUICARES-F5</b>	Document
List of Names (SC and WPL)	Spreadsheet which contains the contacts	<b>MQP-EQUICARES-F6</b>	Spreadsheet

	of the SC and WPL representatives.		
List of QM documents	Spreadsheet containing the latest versions of the project's official documents, templates, and deliverables.	<b>MQP-EQUICARES-F7</b>	Spreadsheet
Deliverable Quality Reviewers	Spreadsheet listing the quality reviewers of each deliverable.	<b>MQP-EQUICARES-F8</b>	Spreadsheet



## 7.3 EQUICARES work breakdown by WPs, Tasks, Deliverables and Milestones

Table 8. EQUICARES work breakdown by WPs and Tasks

#	Title	Leader	Start	End
<b>WP1</b>	<b>Setting the assessment framework for the accessibility of mental health and care services and offering data on accessibility barriers at macro-, meso-, and micro-level by people in vulnerable situation</b>	<b>KU</b>	<b>M1</b>	<b>M18</b>
T1.1	Review of prevalent mental health conditions and related health and care services' access barriers and enablers across Europe	ZI	M1	M10
T1.2	Development of a comprehensive accessibility assessment tool and metrics of mental health and care services accessibility	KU	M1	M18
T1.3	Barriers to accessible mental health and care services: macro-level mega-trends	Q-PLAN	M3	M15
T1.4	Barriers to accessible mental health and care services: meso-level of healthcare systems	EUR	M2	M16
T1.5	Barriers to accessible mental health and care services: contextual conditions at micro-level	JIGSAW	M2	M16
<b>WP2</b>	<b>Identification and assessment of innovative solutions that promote and improve access to mental health and care services</b>	<b>RUG</b>	<b>M4</b>	<b>M18</b>
T2.1	Researching and benchmarking mental health services for people in vulnerable situation in Europe	EUCOMS	M4	M12
T2.2	Bottom-up mapping of innovative solutions for accessible mental health services in pilot areas through digital ethnography	RUG	M4	M16
T2.3	"Reciprocal innovation" in accessible mental health services: lessons from LMICs	KU	M6	M16
T2.4	Multi-dimensional analysis and evaluation of existing innovative solutions for enhancing access of mental health and care services	EUR	M6	M18
T2.5	The Atlas on Mental Health and Care Innovative Solutions	RUG	M6	M18
<b>WP3</b>	<b>Creation of Smart Health Labs: empowering people in vulnerable situation</b>	<b>WR</b>	<b>M12</b>	<b>M48</b>
T3.1	Profiling of pilot cases: in-depth analysis of health ecosystems and inequalities and design of engagement strategies for local vulnerable groups	WR	M12	M18
T3.2	Multi-actor engagement in Smart Health Labs and deployment of awareness raising campaigns	WR	M12	M48
T3.3	Capacity building to enhance health and digital literacy of people in vulnerable situations, service providers, mental care workers and decision makers through MOOCs and workshops	GIVMED	M14	M36

T3.4	Capacity building through community-centric approaches	SEERC	M14	M36
T3.5	Development and operation of AI-based Assistant for personalised mental health support	SQUAR	M14	M48
<b>WP4</b>	<b>Co-design and piloting of innovative solutions for improving access to mental health and care services</b>	<b>EUCOMS</b>	<b>M18</b>	<b>M36</b>
T4.1	Co-creation of deployment roadmaps towards accessible mental health and care services and innovative solutions prototyping	DIESIS	M18	M22
T4.2	Feasibility study and pilot programme design	EUCOMS	M20	M24
T4.3	Piloting of innovative solutions	EUCOMS	M20	M36
T4.4	Evaluation framework, monitoring and data collection	RUG	M18	M36
<b>WP5</b>	<b>Evaluation, cost analysis, and policy support</b>	<b>SEERC</b>	<b>M24</b>	<b>M48</b>
T5.1	Evaluation and multi-level cost analysis of pilot innovative activities	RUG	M24	M48
T5.2	Development of the EQUICARES Policy Dashboard	SEERC	M24	M48
T5.3	Sustainability of Labs and scale-up action plans for integration of solutions in the national health service systems	EUCOMS	M30	M48
T5.4	Large-scale replication campaign	EHTEL	M36	M48
T5.5	Policy recommendations	SEERC	M36	M48
<b>WP6</b>	<b>Dissemination, exploitation, and sustainability – 1st period</b>	<b>Q-PLAN</b>	<b>M1</b>	<b>M18</b>
T6.1	Dissemination and communication – 1st period	Q-PLAN	M1	M18
T6.2	EQUICARES Network of Interest – 1st period	EASPD	M1	M18
T6.3	Exploitation and IPR management – 1st period	Q-PLAN	M1	M18
<b>WP7</b>	<b>Dissemination, exploitation, and sustainability – 2nd period</b>	<b>Q-PLAN</b>	<b>M19</b>	<b>M36</b>
T7.1	Dissemination and communication – 2nd period	Q-PLAN	M19	M36
T7.2	EQUICARES Network of Interest – 2nd period	EASPD	M19	M36
T7.3	Exploitation and IPR management – 2nd period	Q-PLAN	M19	M36
<b>WP8</b>	<b>Dissemination, exploitation, and sustainability – 3rd period</b>	<b>Q-PLAN</b>	<b>M37</b>	<b>M48</b>
T8.1	Dissemination and communication – 3rd period	Q-PLAN	M37	M48
T8.2	EQUICARES Network of Interest – 3rd period	EASPD	M37	M48
T8.3	Exploitation and IPR management – 3rd period	Q-PLAN	M37	M48
<b>WP9</b>	<b>Project management and coordination – 1st period</b>	<b>WR</b>	<b>M1</b>	<b>M18</b>
T9.1	Coordination and quality management – 1st period	WR	M1	M18
T9.2	Data management – 1st period	WR	M1	M18

T9.3	Regulatory, societal, and ethical issues – 1st period	WR	M1	M18
T9.4	Project meetings – 1st period	WR	M1	M18
T9.5	Reporting – 1st period	WR	M1	M18
<b>WP10</b>	<b>Project management and coordination – 2nd period</b>	<b>WR</b>	<b>M19</b>	<b>M36</b>
T10.1	Coordination and quality management – 2nd period	WR	M19	M36
T10.2	Data management – 2nd period	WR	M19	M36
T10.3	Regulatory, societal, and ethical issues – 2nd period	WR	M19	M36
T10.4	Project meetings – 2nd period	WR	M19	M36
T10.5	Reporting – Second	WR	M19	M36
<b>WP11</b>	<b>Project management and coordination – 3rd period</b>	<b>WR</b>	<b>M37</b>	<b>M48</b>
T11.1	Coordination and quality management – 3rd period	WR	M37	M48
T11.2	Data management – 3rd period	WR	M37	M48
T11.3	Regulatory, societal, and ethical issues – 3rd period	WR	M37	M48
T11.4	Project meetings – 3rd period	WR	M37	M48
T11.5	Reporting – 3rd period	WR	M37	M48
<b>WP12</b>	<b>Ethics requirements</b>	<b>WR</b>	<b>M1</b>	<b>M48</b>

Table 9. EQUICARES List of Deliverables

#	Deliverable Title	WP	Lead beneficiary	Due Date (months)
D1.1	Definition of mental health conditions and their drivers in the 21st century	WP1	ZI	M10
D1.2	The EQUICARES service assessment framework	WP1	KU	M18
D1.3	Mega-trends that have negatively affected equal access to mental health services	WP1	Q-PLAN	M15
D1.4	Barriers to mental health and care services in national healthcare system	WP1	EUR	M16
D1.5	Barriers of end-users to accessible mental health and care services	WP1	JIGSAW	M16
D2.1	Innovative solutions in mental health services for people in vulnerable situation in Europe	WP2	EUCOMS	M12
D2.2	Mapping of undocumented community level solutions for accessible mental health services	WP2	RUG	M14
D2.3	Innovative solutions in Low- and Middle- Income Countries	WP2	KU	M16
D2.4	Multi-dimensional evaluation of innovative mental health services	WP2	EUR	M18

D2.5	The Atlas on Mental Health and Care Innovative Solutions	WP2	RUG	M18
D3.1	Report on mental health ecosystem profiles of pilot sites	WP3	WR	M18
D3.2	Smart Health Labs governance frameworks and operating models	WP3	WR	M22
D3.3	Capacity-building programme and Citizen Science projects results	WP3	GIVMED	M36
D3.4	AI-based Assistant – v1	WP3	SQUAR	M22
D3.5	AI-based Assistant – v2	WP3	SQUAR	M36
D3.6	Pilot level awareness raising campaigns	WP3	WR	M48
D3.7	Clinical study evidence report	WP3	SQUAR	M22
D4.1	Deployment roadmaps for innovative solutions on equal mental health services	WP4	DIESIS	M22
D4.2	Pilot program design	WP4	EUCOMS	M24
D4.3	Pilot demonstration report	WP4	EUCOMS	M36
D4.4	EQUICARES Cost Analysis Framework	WP4	RUG	M26
D4.5	Complete cost analysis dataset	WP4	RUG	M36
D5.1	Evaluation and cost analysis of innovative solutions	WP5	RUG	M48
D5.2	EQUICARES Policy Dashboard	WP5	SEERC	M48
D5.3	Scale-up and integration action plans	WP5	EUCOMS	M48
D5.4	The EQUICARES Replication Handbook	WP5	EHTEL	M48
D5.5	EQUICARES policy recommendations	WP5	SEERC	M48
D6.1	Dissemination & Communication Plan - v1	WP6	Q-PLAN	M3
D6.2	EQUICARES Network of Interest terms of reference and composition	WP6	EASPD (DIESIS <sup>1</sup> )	M12
D6.3	Dissemination & Communication Plan - v2	WP6	Q-PLAN	M18
D6.4	Exploitation & sustainability plan - v1	WP6	Q-PLAN	M6
D6.5	Website development and launch	WP6	Q-PLAN	M3
D7.1	Exploitation & sustainability plan - v2	WP7	Q-PLAN	M24
D8.1	Dissemination and communication results	WP8	Q-PLAN	M48
D8.2	Exploitation & sustainability plan - v3	WP8	Q-PLAN	M48
D9.1	Management and quality plan - v1	WP9	WR	M2
D9.2	Data management plan - v1	WP9	WR	M3
D9.3	Regulatory, societal, ethical and gender issues plan - v1	WP9	WR	M4

<sup>1</sup> EASPD is the Task Leader of T6.2 and the responsible partner for the delivery of D6.2. The insertion of DIESIS in this column in the GA was a typo.

D10.1	Management and quality plan - v2	WP10	WR	M24
D10.2	Data management plan - v2	WP10	WR	M24
D10.3	Regulatory, societal, ethical and gender issues plan - v2	WP10	WR	M24
D11.1	Management and quality plan - v3	WP11	WR	M48
D11.2	Data management plan - v3	WP11	WR	M48
D12.1	OEI - Requirement No. 1	WP12	WR	M1
D12.2	H - AI - POPD - Requirement No. 2	WP12	WR	M1
D12.3	POPD - H - AI - NEC - Requirement No. 3	WP12	WR	M18
D12.4	AI - NEC - POPD - H - Requirement No. 4	WP12	WR	M36
D12.5	H - POPD - NEC - AI - Requirement No. 5	WP12	WR	M48

Table 10. EQUICARES List of Milestones

#	Milestone title	WP	Lead beneficiary	Due Date (in months)
M1	Primary research activities are successfully concluded	WP1	KU	M16
M2	Development of EQUICARES assessment tool/framework	WP1	KU	M18
M3	Mapping of innovative solutions for access to mental healthcare	WP2	RUG	M16
M4	Atlas on Mental Health and Care Innovative Solutions	WP2	RUG	M18
M5	Creation of “Smart Health Labs”	WP3	WR	M22
M6	Finalisation of capacity-building activities	WP3	GIVMED <sup>2</sup> (EHTEL)	M36
M7	Delivering the AI-based Assistant (final version)	WP3	SQUAR	M36
M8	Development of SE-based innovative services roadmaps	WP4	DIESIS	M22
M9	Successful roll-out of pilot solutions	WP4	EUCOMS	M36
M10	Successful cost analysis of services	WP5	RUG	M48
M11	Delivering the EQUICARES Policy Dashboard	WP5	SEERC	M48
M12	Dissemination and communication plan	WP6	Q-PLAN	M3
M13	Creation of the Network of Interest	WP6	DIESIS	M12
M14	Successful reviews and reporting acceptance: Phase 1	WP9	WR	M18
M15	Successful reviews and reporting acceptance: Phase 2	WP10	WR	M36

<sup>2</sup> GIVMED is responsible for MS6, as GIVMED is TL of T3.3 and responsible for D3.3. EHTEL is a GA typo.

M16	Successful reviews and reporting acceptance: Phase 3	WP11	WR	M48
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## 7.4 Task Interdependencies

A graphical presentation of the project's components showing tasks' interdependencies is presented in Figure 4.

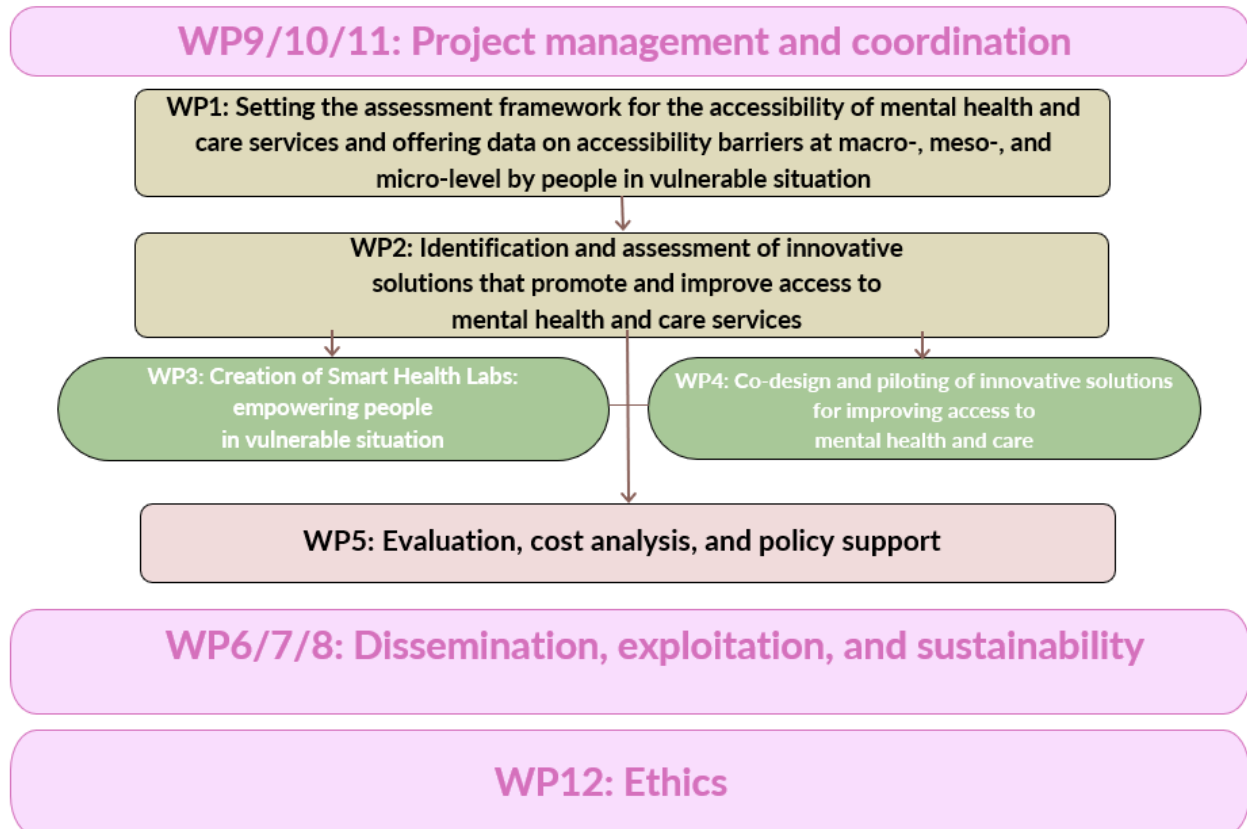


Figure 4. WP's interdependencies

## 7.5 List of Deliverables' Quality Reviewers

Table 11. List of Deliverables and their corresponding Quality Reviewers

#	Deliverable Title	Delivery date	Lead beneficiary	Quality reviewer No1	Quality reviewer No2
D1.1	Definition of mental health conditions and their drivers in the 21st century	M10	ZI	KU	Q-PLAN
D1.2	The EQUICARES service assessment framework	M18	KU	EUR	JIGSAW
D1.3	Mega-trends that have negatively affected equal access to mental health services	M15	Q-PLAN	KU	EUR
D1.4	Barriers to mental health and care services in national healthcare system	M16	EUR	KU	Q-PLAN
D1.5	Barriers of end-users to accessible mental health and care services	M16	JIGSAW	KU	ZI
D2.1	Innovative solutions in mental health services for people in vulnerable situation in Europe	M12	EUCOMS	RUG	SEERC
D2.2	Mapping of undocumented community-level solutions for accessible mental health services	M14	RUG	GIVMED	FISEVI
D2.3	Innovative solutions in Low- and Middle- Income Countries	M16	KU	RUG	EHTEL
D2.4	Multi-dimensional evaluation of innovative mental health services	M18	EUR	RUG	LGBTI
D2.5	The Atlas on Mental Health and Care Innovative Solutions.	M18	RUG	SQUAR	EASPD
D3.1	Report on mental health ecosystem profiles of pilot sites	M18	WR	SEERC	GIVMED
D3.2	Smart Health Labs governance frameworks and operating models	M22	WR	AMALIPE	FISEVI
D3.3	Capacity-building programme and Citizen Science projects results	M36	GIVMED	WR	LADAPT
D3.4	AI-based Assistant – v1	M22	SQUAR	WR	RUG
D3.5	AI-based Assistant – v2	M36	SQUAR	WR	RUG

D3.6	Pilot level awareness raising campaigns	M48	WR	LADAPT	EUCOMS
D3.7	Clinical study evidence report	M22	SQUAR	WR	SEERC
D4.1	Deployment roadmaps for innovative solutions on equal mental health services	M22	DIESIS	EUCOMS	JIGSAW
D4.2	Pilot program design	M24	EUCOMS	AMALIPE	LADAPT
D4.3	Pilot demonstration report	M36	EUCOMS	ZI	FISEVI
D4.4.	EQUICARES Cost Analysis Framework	M26	RUG	EUCOMS	KU
D4.5	Complete cost analysis dataset	M36	RUG	EUCOMS	DIESIS
D5.1	Evaluation and cost analysis of innovative solutions	M48	RUG	SEERC	EUR
D5.2	EQUICARES Policy Dashboard	M48	SEERC	SQUAR	EASPD
D5.3	Scale-up and integration action plans	M48	EUCOMS	Q-PLAN	EHTEL
D5.4	The EQUICARES Replication Handbook	M48	EHTEL	SEERC	DIESIS
D5.5	EQUICARES policy recommendations	M48	SEERC	EHTEL	LGBTI
D6.1	Dissemination & Communication Plan - v1	M3	Q-PLAN	All partners	
D6.2	EQUICARES Network of Interest terms of reference and composition	M12	EASPD (DIESIS) <sup>3</sup>	All partners	
D6.3	Dissemination & Communication Plan - v2	M18	Q-PLAN	All partners	
D6.4	Exploitation & sustainability plan - v1	M6	Q-PLAN	All partners	
D6.5	Website development and launch	M3	Q-PLAN	All partners	
D7.1	Exploitation & sustainability plan - v2	M24	Q-PLAN	All partners	
D8.1	Dissemination and communication results	M48	Q-PLAN	All partners	
D8.2	Exploitation & sustainability plan - v3	M48	Q-PLAN	All partners	
D9.1	Management and quality plan - v1	M2	WR	All partners	

<sup>3</sup> EASPD is the Task Leader of T6.2 and the responsible partner for the delivery of D6.2. The insertion of DIESIS in this column in the GA was a typo.

D9.2	Data management plan - v1	M3	WR	All partners
D9.3	Regulatory, societal, ethical and gender issues plan - v1	M4	WR	All partners
D10.1	Management and quality plan - v2	M24	WR	All partners
D10.2	Data management plan - v2	M24	WR	All partners
D10.3	Regulatory, societal, ethical and gender issues plan - v2	M24	WR	All partners
D11.1	Management and quality plan - v3	M48	WR	All partners
D11.2	Data management plan - v3	M48	WR	All partners
D12.1	OEI - Requirement No. 1	M1	WR	All partners
D12.2	H - AI - POPD - Requirement No. 2	M1	WR	All partners
D12.3	POPD - H - AI - NEC - Requirement No. 3	M18	WR	All partners
D12.4	AI - NEC - POPD - H - Requirement No. 4	M36	WR	All partners
D12.5	H - POPD - NEC - AI - Requirement No. 5	M48	WR	All partners



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