

## Table Of Content

<b>Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE)</b>	<b>4</b>
<b>Summary</b>	<b>5</b>
<b>Work Package</b>	<b>9</b>
Coordination	9
Dissemination	9
Monitoring and Evaluation	9
Policy development and sustainability	9
Integrating testing and linkage to care of HIV, viral hepatitis, TB and STIs	9
Monitoring and evaluation of HIV, viral hepatitis and STIs testing and linkage to care	9
Improving the use of ICT tools and Partner Notification in combination prevention for HIV, viral hepatitis, TB and STIs	9
Capacity building	9
<b>Coordinator, Leader contact and partners</b>	<b>11</b>
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS	11
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS	11
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS	11
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS	11
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS	11
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS	11
TERVISE ARENGU INSTITUUT	11
TERVISE ARENGU INSTITUUT	11
INSTITUT CATALA D'ONCOLOGIA	11
INSTITUT CATALA D'ONCOLOGIA	11
INSTITUT CATALA D'ONCOLOGIA	11
INSTITUT CATALA D'ONCOLOGIA	11
INSTITUT CATALA D'ONCOLOGIA	11
INSTITUT CATALA D'ONCOLOGIA	11
NACIONALNI INSTITUT ZA JAVNO ZDRAVJE	11
NACIONALNI INSTITUT ZA JAVNO ZDRAVJE	11
NACIONALNI INSTITUT ZA JAVNO ZDRAVJE	11
UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF IRELAND, DUBLIN	11
UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF IRELAND, DUBLIN	11
UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF IRELAND, DUBLIN	11
UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF IRELAND, DUBLIN	11
UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF IRELAND, DUBLIN	11
FONDAZIONE LEGA ITALIANA PER LA LOTTA CONTRO L'AIDS - LILA MILANO ONLUS	11
FONDAZIONE VILLA MARAINI ONLUS	11
KRAJOWE CENTRUM D/S AIDS	11
Department of Health	11
Department of Health	11
Department of Health	11
Department of Health	11
HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO	11
HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO	11

UDRUGA ZA UNAPREDENJE KVALITETE ZIVLJENJA "LET" .....	11
CONSORCI INSTITUT D'INVESTIGACIONS BIOMEDIQUES AUGUST PI I SUNYER .....	11
CONSORCI INSTITUT D'INVESTIGACIONS BIOMEDIQUES AUGUST PI I SUNYER .....	11
ARCIGAY .....	11
ASSOCIAZIONE DELLA CROCE ROSSA ITALIANA .....	11
KENTRO ELENCHOU & PROLIPSIS NOSIMATON .....	11
KENTRO ELENCHOU & PROLIPSIS NOSIMATON .....	11
VIESOJI ISTAIGA VILNIAUS UNIVERSITETO LIGONINE SANTAROS KLINIKOS .....	11
VIESOJI ISTAIGA VILNIAUS UNIVERSITETO LIGONINE SANTAROS KLINIKOS .....	11
VIESOJI ISTAIGA VILNIAUS UNIVERSITETO LIGONINE SANTAROS KLINIKOS .....	11
NACIONALINE VISUOMENES SVEIKATOS PRIEZIUROS LABORATORIJA .....	11
VILNIAUS PRIKLAUSOMYBES LIGU CENTRAS .....	11
VILNIAUS PRIKLAUSOMYBES LIGU CENTRAS .....	11
UZKRECIAMUJU LIGU IR AIDS CENTRAS .....	11
SPITALUL CLINIC DE BOLI INFECTIOASE SI PNEUMOFTIZIOLOGIE VICTOR BABES CRAIOVA .....	11
SPITALUL CLINIC DE BOLI INFECTIOASE SI PNEUMOFTIZIOLOGIE VICTOR BABES CRAIOVA .....	11
INSTITUT ZA JAVNO ZDRAVLJE SRBIJE 'MILAN JOVANOVIC - BATUT' .....	11
SLOVENSKA ZDRAVOTNICKA UNIVERZITA V BRATISLAVE .....	11
ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y LABORAL DE NAVARRA .....	11
ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y LABORAL DE NAVARRA .....	11
ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y LABORAL DE NAVARRA .....	11
ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y LABORAL DE NAVARRA .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
SEMMELWEIS EGYETEM .....	11
INSTITUTUL DE PNEUMOFTIZIOLOGIE MARIUS NASTA .....	11
HRVATSKA UDRUGA ZA BORBU PROTIV HIV-A I VIRUSNOG HEPATITISA .....	11
HRVATSKA UDRUGA ZA BORBU PROTIV HIV-A I VIRUSNOG HEPATITISA .....	11
ISKORAK .....	11
Ministry for Health - Government of Malta .....	11
Ministry for Health - Government of Malta .....	11
Ministry for Health - Government of Malta .....	11
Ministry for Health - Government of Malta .....	11
Ministry for Health - Government of Malta .....	11
<b>Outputs</b> .....	<b>24</b>
Newsletters .....	24
Layman version of final report .....	24
Interim report year 1 .....	24
Interim report year 2 .....	24
Final report .....	24
JA Leaflet .....	24

Website .....	24
Dissemination Plan .....	24
Evaluation Plan .....	24
Interim internal evaluation report year 1 .....	24
Interim internal evaluation report year 2 .....	24
Midterm external evaluation .....	24
Final external evaluation report .....	24
Sustainability plan .....	24
Report/Roadmap on results of pilot activities .....	24
Patient experience toolkit .....	24
Website and knowledge component updates .....	24
Innovative and integrated approaches for testing information package .....	24
Toolkit to increase testing and linkage to care in health care settings .....	24
HIV home sampling and home-testing and linkage to care toolkit .....	24
Consensus set of indicators to assess the impact of the ETW on testing .....	24
Consensus recommendations for collection and integration of CBVCT testing and linkage to care data on national surveillance systems for HIV, viral hepatitis and STIs ...	24
Review of existing ICT based prevention programs and their effectiveness report .....	24
Partner Notification usefulness Technical Report .....	24
INTEGRATE online learning courses .....	24
INTEGRATE Regional workshops for capacity building .....	24

# Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE)

JA2015 - GPSD [705038]

START DATE: 01/09/2017

END DATE: 31/08/2020

DURATION: 36 month(s)

CURRENT STATUS: Ongoing

PROGRAMME TITLE: 3rd Health Programme (2014-2020)

PROGRAMME PRIORITY: -

CALL: Joint Actions 2016

TOPIC: Quality of HIV/AIDS/STI, viral Hepatitis and tuberculosis prevention and linkage to care

EC CONTRIBUTION: 1999877.08 EUR

KEYWORDS: Hiv, Linkage To Care, Personalised Testing, Prevention, Prevention, Stis, Tuberculosis, Tuberculosis, Viral Hepatitis

## Project abstract

The “Joint Action on integrating prevention, testing and link to care strategies across HIV, Viral Hepatitis, TB & STIs in Europe” (INTEGRATE) has the overall objective to increase Integrated early diagnosis and linkage to prevention and care of HIV, viral hepatitis, TB and STIs in EU Member States by 2020.

A number of tools have been developed to reduce transmission, optimize early diagnosis and linkage to care for one or more of these four diseases.

INTEGRATE will map relevant existing tools for cross-linking. A peer-review process will identify which of these tools are complimentary or redundant for other disease(s), and which could be adapted or require further innovation.

HIV, viral hepatitis, TB and STIs are cross-border public health threats of concern to Europe that affect vulnerable populations disproportionately and require personalised interventions. As multiple dimensional approaches are required to reduce the public health burden, the most optimal profile of approaches that provide additive effects (and that are reasonably cost-effective) should be identified and implemented broadly.

INTEGRATE provides a platform to disseminate and exchange best practice among Member States and facilitate discussions on innovations and emerging issues within the four diseases. In this respect, INTEGRATE is a shared European effort that extends beyond the partners and can create important synergies across European stakeholders, projects and initiatives.

INTEGRATE supports the implementation of the Commission Communication on ‘Combating HIV/AIDS in the European Union and neighboring countries’ and the ‘Action Plan on HIV/AIDS in the EU and neighboring countries’ by ensuring better preparedness across the EU and by identifying innovative evidence-based testing and prevention tools to reduce new cases of HIV, viral hepatitis, TB and STIs in priority groups.

## Summary of context, overall objectives, strategic, relevance and contribution of the action

### Summary of context:

HIV, viral hepatitis B and C, sexually transmitted infections (STIs) and active and latent tuberculosis (TB) infection are major public health concerns in Europe. Despite progress in prevention methods and uptake of treatment, there are continued challenges in terms of controlling and preventing further transmission of these diseases and in ensuring that people who are infected are diagnosed early and enter the care system. Further, there is a high prevalence of co-infection due to overlaps in key populations and/or common modes of transmission which underlines the need to combine efforts throughout the continuum of care.

### Disease areas of interest:

INTEGRATE will mainly focus on HIV, viral hepatitis and STIs, which share modes of transmission and to a lesser extent address TB which is a different disease in terms of risk of acquisition.

HIV is still highly prevalent in Europe with a cumulative number of 810.000 people diagnosed with HIV in the EU/EEA in 2015 and a substantial number of people living with HIV who remain undiagnosed (estimated at 15% of people living with HIV in 2015). In 2015, 29.747 new HIV infections were diagnosed and the rate of new infections has not declined significantly over the last decade despite important advances in biomedical and behavioural HIV prevention strategies. Furthermore, almost half (47%) of all people newly diagnosed are presenting at a late stage of infection. These data indicate that despite important progress in both prevention (including treatment as prevention) and testing, there is still a need to strengthen efforts across Europe to reduce transmission and ensure timely diagnosis. A set of fast-track actions and regional targets to reverse the HIV epidemic in Europe and end the epidemic as a public health threat by 2030 has been established and require renewed political commitment to urgently put in place innovative responses to HIV.

An estimated 4.7 million and 5.6 million are living with chronic hepatitis B (HBV) and hepatitis C (HCV), respectively in the EU/EEA. Among those already diagnosed, many are not linked to healthcare services that can provide comprehensive care. Consequently, a large proportion of the chronically infected enter care only after they have developed liver-disease-related clinical symptoms. Effective and well tolerated treatments for both HBV and HCV infection have greatly improved the possibility of successful treatment and (in the case of HCV) cure, especially if diagnosed early in the course of infection. In most European countries however, it remains unknown to what extent testing policies and strategies succeed in identifying the undiagnosed population over the course of their disease. Also, the extent to which diagnosed patients are linked to and retained in care is unknown.

Among the five sexually transmitted infections (STIs) under EU surveillance , chlamydia is the most common in EU/EEA with 384.555 cases reported in 2013. The majority are reported among young people (between 15 and 24 years of age) and among women. Gonorrhoea rates have been increasing, with 52.995 cases reported in 2013. It is three times more prevalent among men than women. A total of 22.237 syphilis cases were reported in 2013 and five times more often in men than in women, with increasing trends reported by most countries between 2008 and 2013. In 2013, 64 cases of congenital syphilis were reported in nine countries; thirteen countries reported zero cases. Over the last decade several countries in the EU/EEA region, have seen an increase in the incidence of sexually transmitted infections including gonorrhoea, syphilis and chlamydia among specific groups such as MSM . ECDC concludes that, there is evidence that services to prevent, diagnose and treat infections are not being delivered at the appropriate scale to impact on transmission patterns.

Active and latent tuberculosis infection (TB), although a treatable and

## Methods and means

### Step 1: Review process

In the first phase, INTEGRATE's activities will take point of departure in already available tools focusing on implementation of testing and linkage to care for HIV, hepatitis, TB and STIs. An important first step will therefore be a mapping of existing implementation tools, partly drawing on data sources and work already conducted by ECDC and EMCDDA, other EU agencies and EU networks to build upon the results obtained by the 'Quality Action' initiative and ensure synergies with previous and ongoing initiatives. The review process will be supervised by the coordinator and WP leads to ensure synergies between the areas overlapping different WPs. The mapping process has the following elements.

Mapping of existing platforms and analysis of the type of content, audience and use. The analysis will be based on a matrix developed by WP2 lead and with inputs from all lead partners and has two main outcomes:

Identification of thematic materials to complement specific reviews

Decision on use/linkage with existing platforms

Mapping of material/tools for implementation/introduction of testing and linkage to care (WP2 and 5):

Focus on introducing testing in health care settings (WP4 and 5)

Good practices of data collection of testing and linkage to care activities (done for HEPCARE EUROPE, HIV in HiE, HIV-COBATEST and Euro HIVEdat projects. HA-REACT, E-DETECT, HEPCARE and ESTICOM outcomes will be taken into account) (WP6)

Specific training materials of health care and community staff in testing and linkage to care (WP8)

Review of home/self-testing/sampling evidence and measures for linkage to care (WP5)

Mapping of prevention tools/activities will focus on

Mapping of good practices in partner notification and linkage to care

New technologies used for combination prevention

Mapping of policies in support of implementation of above and barriers

Indicator condition guided HIV testing and improving testing for viral hepatitis in health care settings

Supporting adequate linkage to care of self-testers

Integration of monitoring of testing and linkage to care data into national M&E and surveillance systems, including data from CBVCT, GPs and home/self-testing

Novel secondary prevention strategies including partner notification

A peer review based assessment will be conducted of the strengths and

weaknesses of the identified materials with regards to their potential for adaptation/innovation and transferability to cover other diseases areas and/or priority groups.

JA partners will examine the existing tools relating to HIV, hepatitis, TB and STI testing and linkage to care in addition to any combination effort.

INTEGRATE will systemically review the materials and identify strengths and successes from each. In addition, all current materials will be examined to detect the feasibility for any of the tools to be adapted to other disease areas or a combination of diseases, as well as the aspects of replication and transferability to other countries to ensure the EU dimension of the tools. Not all tools or guidelines will be applicable to other diseases, but the aim is to employ the most effective components to the tools developed by the INTEGRATE Joint Action. Then follows a development process where a number of tools are adapted to other disease areas.

## Step 2: Implementation and piloting

The next phase of the project will be the development and implementation of activities under each WP theme and piloting of tools developed to support increased and improved linkage to care activities.

A number of countries participating as partners in the Joint Action have been thoroughly chosen for the activities and pilots taking into consideration geographical distribution, partner profile and country needs and resources. Based on information from ECDC and EMCDDA completed with input from INTEGRATE partners and overview of country, epidemics and challenges were listed and analysed. Criteria for s



# Work package

## Work Package 1: Coordination

Start month: 1

End month: 36

Work Package Leader: REGIONH

Actions undertaken to manage the Joint Action and to make sure that it is implemented as planned

## Work Package 2: Dissemination

Start month: 1

End month: 36

Work Package Leader: CERTH

Actions undertaken to ensure that the results and deliverables of the Joint Action will be made available to the target Groups and stakeholders

## Work Package 3: Monitoring and Evaluation

Start month: 1

End month: 36

Work Package Leader: IPMN

Actions undertaken to verify that the Joint Action is being implemented as planned and reaches the objectives

## Work Package 4: Policy development and sustainability

Start month: 1

End month: 36

Work Package Leader: ARCIGAY

Actions undertaken to secure the sustainability of the JA activities and explore the potential for integration of results/deliverables into policies (at national, regional or local levels) and to support countries to create their own system for monitoring patient experiences of testing and linkage to care

## Work Package 5: Integrating testing and linkage to care

## of HIV, viral hepatitis, TB and STIs

Start month: 1

End month: 36

Work Package Leader: REGIONH

Actions undertaken to support the integration of testing activities targeting HIV, viral hepatitis, TB and STIs in the European testing Week, to expand the use of tools to increase testing and linkage to care in health care facilities and to facilitate the expansion of HIV home/self-testing and home sampling programmes

## Work Package 6: Monitoring and evaluation of HIV, viral hepatitis and STIs testing and linkage to care

Start month: 1

End month: 36

Work Package Leader: ICO

Actions undertaken to identify indicators and procedures to capture data on HIV, hepatitis and STI testing, and to strengthen integration of testing data into M&E and surveillance systems

## Work Package 7: Improving the use of ICT tools and Partner Notification in combination prevention for HIV, viral hepatitis, TB and STIs

Start month: 1

End month: 36

Work Package Leader: UCD

Actions undertaken to assess, modify and improve use of ICT tools to improve combination prevention for HIV, HCV, TB and STIs and to assess current best practices of partner notification cross Europe

## Work Package 8: Capacity building

Start month: 1

End month: 36

Work Package Leader: FVM

Actions undertaken to identify training needs and conduct training workshops for health care professionals, civil society organisations and public health institutions across the Member States and for JA partners as training of trainers

## COORDINATOR



### REGION HOVEDSTADEN (REGIONH)

Ole Maaloes Vej  
2200 Kobenhavn

Denmark

WEBSITE: <http://www.regionh.dk>

Project leader contact  
Name: RAAHAUGE Anne  
Email: [anne.raahauge@regionh.dk](mailto:anne.raahauge@regionh.dk)  
Phone:

## PARTNERS



### ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS

Street: CHARILAOU THERMI ROAD 6th Km

City: 57001 THERMI THESSALONIKI

60 361

Country: Greece

Website: <http://www.regionh.dk>



### ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS

Street: CHARILAOU THERMI ROAD 6th Km

City: 57001 THERMI THESSALONIKI

60 361

Country: Greece

Website: <http://www.regionh.dk>



### ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS

Street: CHARILAOU THERMI ROAD 6th Km

City: 57001 THERMI THESSALONIKI

60 361

Country: Greece

Website: <http://www.regionh.dk>



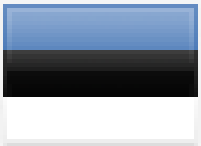
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS  
Street: CHARILAOU THERMI ROAD 6th Km  
City: 57001 THERMI THESSALONIKI  
60 361  
Country: Greece  
Website: <http://www.regionh.dk>



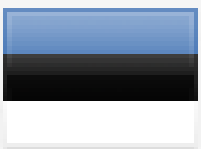
ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS  
Street: CHARILAOU THERMI ROAD 6th Km  
City: 57001 THERMI THESSALONIKI  
60 361  
Country: Greece  
Website: <http://www.regionh.dk>



ETHNIKO KENTRO EREVNAS KAI TECHNOLOGIKIS ANAPTYXIS  
Street: CHARILAOU THERMI ROAD 6th Km  
City: 57001 THERMI THESSALONIKI  
60 361  
Country: Greece  
Website: <http://www.regionh.dk>



TERVISE ARENGU INSTITUUT  
Street: Hiiu 42  
City: 11619 TALLINN  
Country: Estonia  
Website: <http://www.regionh.dk>



TERVISE ARENGU INSTITUUT  
Street: Hiiu 42  
City: 11619 TALLINN  
Country: Estonia  
Website: <http://www.regionh.dk>



INSTITUT CATALA D'ONCOLOGIA  
Street: GRAN VIA DE L'HOSPITALET  
City: 08908 L'HOSPITALET DEL LLOBREGAT  
Country: Spain  
Website: <http://www.regionh.dk>



INSTITUT CATALA D'ONCOLOGIA  
Street: GRAN VIA DE L'HOSPITALET  
City: 08908 L'HOSPITALET DEL LLOBREGAT

Country: Spain  
Website: <http://www.regionh.dk>



INSTITUT CATALA D'ONCOLOGIA  
Street: GRAN VIA DE L'HOSPITALET  
City: 08908 L'HOSPITALET DEL LLOBREGAT

Country: Spain  
Website: <http://www.regionh.dk>



INSTITUT CATALA D'ONCOLOGIA  
Street: GRAN VIA DE L'HOSPITALET  
City: 08908 L'HOSPITALET DEL LLOBREGAT

Country: Spain  
Website: <http://www.regionh.dk>



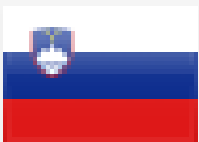
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Country: Spain  
Website: <http://www.regionh.dk>



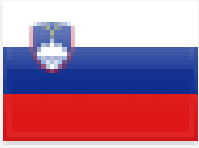
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Street: GRAN VIA DE L'HOSPITALET  
City: 08908 L'HOSPITALET DEL LLOBREGAT

Country: Spain  
Website: <http://www.regionh.dk>



NACIONALNI INSTITUT ZA JAVNO ZDRAVJE  
Street: TRUBARJEVA  
City: 1000 LJUBLJANA

Country: Slovenia  
Website: <http://www.regionh.dk>



NACIONALNI INSTITUT ZA JAVNO ZDRAVJE  
Street: TRUBARJEVA  
City: 1000 LJUBLJANA

Country: Slovenia  
Website: <http://www.regionh.dk>



NACIONALNI INSTITUT ZA JAVNO ZDRAVJE  
Street: TRUBARJEVA  
City: 1000 LJUBLJANA

Country: Slovenia  
Website: <http://www.regionh.dk>



UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF  
IRELAND, DUBLIN  
Street: Belfield Campus  
City: 4 DUBLIN

Country: Ireland  
Website: <http://www.regionh.dk>



UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF  
IRELAND, DUBLIN  
Street: Belfield Campus  
City: 4 DUBLIN

Country: Ireland  
Website: <http://www.regionh.dk>



UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF  
IRELAND, DUBLIN  
Street: Belfield Campus  
City: 4 DUBLIN

Country: Ireland  
Website: <http://www.regionh.dk>

UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF  
IRELAND, DUBLIN  
Street: Belfield Campus  
City: 4 DUBLIN



Country: Ireland  
Website: <http://www.regionh.dk>



UNIVERSITY COLLEGE DUBLIN, NATIONAL UNIVERSITY OF IRELAND, DUBLIN  
Street: Belfield Campus  
City: 4 DUBLIN

Country: Ireland  
Website: <http://www.regionh.dk>



FONDAZIONE LEGA ITALIANA PER LA LOTTA CONTRO L'AIDS - LILA MILANO ONLUS  
Street: via Carlo Maderno, 4  
City: 20136 Milano

Country: Italy  
Website: <http://www.regionh.dk>



FONDAZIONE VILLA MARAINI ONLUS  
Street: Via Bernardino Ramazzini 31  
City: 00151 Roma

Country: Italy  
Website: <http://www.regionh.dk>



KRAJOWE CENTRUM D/S AIDS  
Street: the National AIDS Centre; Samsonowska street  
City: 02-829 Warsaw

Country: Poland  
Website: <http://www.regionh.dk>



Department of Health  
Street: Waterloo Rd  
City: SE1 8UG London

Country: United Kingdom  
Website: <http://www.regionh.dk>



Department of Health  
Street: Waterloo Rd  
City: SE1 8UG London

Country: United Kingdom  
Website: <http://www.regionh.dk>



Department of Health  
Street: Waterloo Rd  
City: SE1 8UG London

Country: United Kingdom  
Website: <http://www.regionh.dk>



Department of Health  
Street: Waterloo Rd  
City: SE1 8UG London

Country: United Kingdom  
Website: <http://www.regionh.dk>



HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO  
Street: ROCKEFELLER STR. 7  
City: 10000 ZAGREB

Country: Croatia  
Website: <http://www.regionh.dk>



HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO  
Street: ROCKEFELLER STR. 7  
City: 10000 ZAGREB

Country: Croatia  
Website: <http://www.regionh.dk>



UDRUGA ZA UNAPREDENJE KVALITETE ZIVLJENJA "LET"  
Street: Sokolgradska 86  
City: 10000 Zagreb

Country: Croatia  
Website: <http://www.regionh.dk>





CONSORCI INSTITUT D'INVESTIGACIONS BIOMEDIQUES AUGUST  
PI I SUNYER  
Street: ROSELLO 149-153  
City: 08036 BARCELONA

Country: Spain  
Website: <http://www.regionh.dk>



CONSORCI INSTITUT D'INVESTIGACIONS BIOMEDIQUES AUGUST  
PI I SUNYER  
Street: ROSELLO 149-153  
City: 08036 BARCELONA

Country: Spain  
Website: <http://www.regionh.dk>



ARCIGAY  
Street: VIA TIARINI  
City: 40129 BOLOGNA

Country: Italy  
Website: <http://www.regionh.dk>



ASSOCIAZIONE DELLA CROCE ROSSA ITALIANA  
Street: VIA TOSCANA 12  
City: 00187 ROMA

Country: Italy  
Website: <http://www.regionh.dk>



KENTRO ELENCHOU & PROLIPSIS NOSIMATON  
Street: AGRAFON 3-5  
City: 151 23 MAROUSI

Country: Greece  
Website: <http://www.regionh.dk>

KENTRO ELENCHOU & PROLIPSIS NOSIMATON  
Street: AGRAFON 3-5  
City: 151 23 MAROUSI



Country: Greece  
Website: <http://www.regionh.dk>



VIESOJI ISTAIGA VILNIAUS UNIVERSITETO LIGONINE SANTAROS  
KLINIKOS

Street: SANTARISKIU G 2  
City: 08661 VILNIUS

Country: Lithuania  
Website: <http://www.regionh.dk>



VIESOJI ISTAIGA VILNIAUS UNIVERSITETO LIGONINE SANTAROS  
KLINIKOS

Street: SANTARISKIU G 2  
City: 08661 VILNIUS

Country: Lithuania  
Website: <http://www.regionh.dk>



VIESOJI ISTAIGA VILNIAUS UNIVERSITETO LIGONINE SANTAROS  
KLINIKOS

Street: SANTARISKIU G 2  
City: 08661 VILNIUS

Country: Lithuania  
Website: <http://www.regionh.dk>



NACIONALINE VISUOMENES SVEIKATOS PRIEZIUROS  
LABORATORIJA

Street: Zolyno str. 36  
City: 10210 Vilnius

Country: Lithuania  
Website: <http://www.regionh.dk>

VILNIAUS PRIKLAUSOMYBES LIGU CENTRAS

Street: Gerosios Vilties 3  
City: LT 03147 Vilnius

Country: Lithuania



Website: <http://www.regionh.dk>



VILNIAUS PRIKLAUSOMYBES LIGU CENTRAS

Street: Gerosios Vilties 3

City: LT 03147 Vilnius

Country: Lithuania

Website: <http://www.regionh.dk>



UZKRECIAMUJU LIGU IR AIDS CENTRAS

Street: Nugaletuju St. 14D

City: 10105 Vilnius

Country: Lithuania

Website: <http://www.regionh.dk>



SPITALUL CLINIC DE BOLI INFECTIOASE SI PNEUMOPTIZIOLOGIE

VICTOR BABES CRAIOVA

Street: CALEA BUCURESTI NR 126

City: 200515 CRAIOVA

Country: Romania

Website: <http://www.regionh.dk>



SPITALUL CLINIC DE BOLI INFECTIOASE SI PNEUMOPTIZIOLOGIE

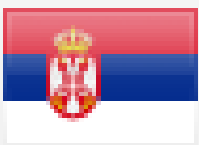
VICTOR BABES CRAIOVA

Street: CALEA BUCURESTI NR 126

City: 200515 CRAIOVA

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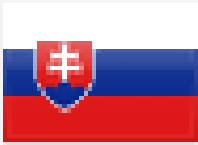
INSTITUT ZA JAVNO ZDRAVLJE SRBIJE 'MILAN JOVANOVIC -  
BATUT'

Street: Dr Subotica 5

City: 11000 Belgrade

Country: Serbia

Website: <http://www.regionh.dk>



SLOVENSKA ZDRAVOTNICKA UNIVERZITA V BRATISLAVE  
Street: Slovak Medical University, Limbova 12  
City: 83303 Bratislava

Country: Slovakia  
Website: <http://www.regionh.dk>



ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y  
LABORAL DE NAVARRA  
Street: Fundaci n Miguel Servet, Irunlarrea 3  
City: 31008 Pamplona

Country: Spain  
Website: <http://www.regionh.dk>



ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y  
LABORAL DE NAVARRA  
Street: Fundaci n Miguel Servet, Irunlarrea 3  
City: 31008 Pamplona

Country: Spain  
Website: <http://www.regionh.dk>



ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y  
LABORAL DE NAVARRA  
Street: Fundaci n Miguel Servet, Irunlarrea 3  
City: 31008 Pamplona

Country: Spain  
Website: <http://www.regionh.dk>



ORGANISMO AUTONOMO INSTITUTO DE SALUD PUBLICA Y  
LABORAL DE NAVARRA  
Street: Fundaci n Miguel Servet, Irunlarrea 3  
City: 31008 Pamplona

Country: Spain  
Website: <http://www.regionh.dk>

SEMMELWEIS EGYETEM  
Street: ULLOI UT 26.



City: 1085 BUDAPEST  
1428 Budapest, Pf.2.  
Country: Hungary  
Website: <http://www.regionh.dk>



SEMMELEWEIS EGYETEM  
Street: ULLOI UT 26.  
City: 1085 BUDAPEST  
1428 Budapest, Pf.2.  
Country: Hungary  
Website: <http://www.regionh.dk>



SEMMELEWEIS EGYETEM  
Street: ULLOI UT 26.  
City: 1085 BUDAPEST  
1428 Budapest, Pf.2.  
Country: Hungary  
Website: <http://www.regionh.dk>



SEMMELEWEIS EGYETEM  
Street: ULLOI UT 26.  
City: 1085 BUDAPEST  
1428 Budapest, Pf.2.  
Country: Hungary  
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City: 1085 BUDAPEST  
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Country: Hungary  
Website: <http://www.regionh.dk>



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City: 1085 BUDAPEST  
1428 Budapest, Pf.2.  
Country: Hungary  
Website: <http://www.regionh.dk>



SEMMEIWEIS EGYETEM  
Street: ULLOI UT 26.  
City: 1085 BUDAPEST  
1428 Budapest, Pf.2.  
Country: Hungary  
Website: <http://www.regionh.dk>



INSTITUTUL DE PNEUMOFIZIOLOGIE MARIUS NASTA  
Street: Sos. Viilor. Nr. 90 - Sector 5  
City: 050159 Bucuresti  
Country: Romania  
Website: <http://www.regionh.dk>



HRVATSKA UDRUGA ZA BORBU PROTIV HIV-A I VIRUSNOG  
HEPATITISA  
Street: Ivica Drmici 16  
City: 10000 Zagreb  
Country: Croatia  
Website: <http://www.regionh.dk>



HRVATSKA UDRUGA ZA BORBU PROTIV HIV-A I VIRUSNOG  
HEPATITISA  
Street: Ivica Drmici 16  
City: 10000 Zagreb  
Country: Croatia  
Website: <http://www.regionh.dk>



ISKORAK  
Street: Petrinjska 27  
City: 1000 zagreb  
Country: Serbia  
Website: <http://www.regionh.dk>



Ministry for Health - Government of Malta  
Street: Palazzo Castellania, 15 Merchants Street  
City: VLT 1171 Valletta

Country: Malta  
Website: <http://www.regionh.dk>



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Street: Palazzo Castellania, 15 Merchants Street  
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## Newsletters

CERTH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2020

INTEGRATE Newsletters with communication on the activities and results in the JA and relevant update and news from JA partners. To be sent out approximately every 4-6 months

## Layman version of final report

CERTH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2020

Short version of the final report, written for the interested public as a target group

## Interim report year 1

REGIONH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2018

Reports describing the activities carried out in INTEGRATE, milestones and results achieved in the first half of the action

## Interim report year 2

REGIONH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2019

Report describing the activities carried out in INTEGRATE, milestones and results achieved in the first half of the action.

## Final report

REGIONH



Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2020

Report describes the action implementation and the results achieved. The deliverables are annexed.

## JA Leaflet

CERTH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/12/2017

Leaflet to promote the JA

## Website

CERTH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/12/2017

JA website

## Dissemination Plan

CERTH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/01/2018

The report describes the dissemination plan, stakeholder analysis and JA dissemination material. To be updated M12, M24 and M34

## Evaluation Plan

IPMN

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/01/2018

Report describing the evaluation plan in details

## Interim internal evaluation report year 1

IPMN

Joint Action on integrating prevention, testing and linkage to care strategies

across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2018

An evaluation plan including the JA process, output and outcome/impact indicators for monitoring and reporting on the progress of implementation of the JA as per the JA agreement.

## Interim internal evaluation report year 2

IPMN

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2019

An evaluation plan including the JA process, output and outcome/impact indicators for monitoring and reporting on the progress of implementation of the JA as per the JA agreement.

## Midterm external evaluation

IPMN

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/03/2019

Evaluation report on action implementation and progress.

## Final external evaluation report

IPMN

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2020

Evaluation report on action implementation and completion.

## Sustainability plan

ARCIGAY

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/09/2018

Development of a sustainability plan for the Joint Action, including description of the deliverables and a plan for facilitation of their integration into national policies.

## Report/Roadmap on results of pilot activities

ARCIGAY

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/09/2019

Development of, based on the sustainability plan, a roadmap on how to integrate deliverables and results of the Joint Action into national policies and action plans and support the review of the national medical specialty guidelines in the selected pilot countries. M12, M18, M24

## Patient experience toolkit

DH-PHE

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/05/2020

Toolkit for countries on how to capture patient experiences, including a checklist, list of key indicators, table of validated indicators, process diagram, and examples of best practice.

## Website and knowledge component updates

CERTH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/09/2020

Regular updates of the project website and knowledge sharing component (hosting and/or linking of/to best practices, tools and relevant material)

Updates are planned to happen annually (M12, M24, M36)

## Innovative and integrated approaches for testing information package

REGIONH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/09/2019

Information package on innovative testing activities and integrated approaches to testing and linkage to care for European testing week participants and other organisations involved in testing of key populations

## Toolkit to increase testing and linkage to care in health care settings

REGIONH

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/03/2020

Country specific tool kit to increase testing and linkage to care in health care settings including GPs in selected countries (IC guided testing)

## HIV home sampling and home-testing and linkage to care toolkit

DH-PHE

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/07/2020

Toolkit which includes recommendations for HIV home/self-sampling and home/self-testing expansion, monitoring and ensuring linkage to care

## Consensus set of indicators to assess the impact of the ETW on testing

NIJZ

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/11/2019

Consensus set of core indicators for CBVCT services and health care settings to assess the impact of ETW activities

## Consensus recommendations for collection and integration of CBVCT testing and linkage to care data on national surveillance systems for HIV, viral hepatitis and STIs

ICO

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/02/2020

Consensus recommendations for collection and integration of CBVCTs' and health care settings' testing and linkage to care data for HIV, STIs and viral

hepatitis into national surveillance and M&E systems

## Review of existing ICT based prevention programs and their effectiveness report

LILA Milano

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/09/2018

Report on existing ICT-based prevention programs and their effectiveness

## Partner Notification usefulness Technical Report

UCD

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/07/2020

Technical report on improved use of Partner Notification. It will take point of departure in the recommendations made by ECDC (2013) on implementation of partner notification in Europe, and recommendations on policy changes will be addressed as part of WP 4 pilot interventions. TB is different in terms of risk of acquisition from the other diseases. However some vulnerable populations at risk for TB are also at risk for HIV, Hepatitis and STIs. Thus this Work Package will look at best-practice across the four diseases, and ways to combine, Partner Notification and contact tracing experiences and best-practice.

## INTEGRATE online learning courses

FVM

Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)

Expected on: 01/09/2019

Online learning on INTEGRATE outcomes. Develop training material and workshops based on the new tools developed under the other WPs.

## INTEGRATE Regional workshops for capacity building

NAC

Joint Action on integrating prevention, testing and linkage to care strategies

across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE) (INTEGRATE)  
Expected on: 01/07/2020

Plan, conduct and evaluate 3 regional workshops, in year 2 and 3, to implement capacity building of national stakeholders (CSOs, health care professionals, public health care agencies and invited relevant experts) and training of trainers activities for JA partners.