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Environmentally sustainable and climate neutral health and care systems

NetZeroAICT

Digital Contrast for Computerised Tomography

-Towards Climate Neutral and Sustainable Health Systems-

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Annual report on bi-monthly PAG and meetings V1

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Executive Summary

This report, submitted as Deliverable 7.8 *Annual report on bi-monthly PAG and meetings (v1)* and part of Task 7.3 *Stakeholder engagement, involvement and ecosystem building*, provides an overview of the NetZero AICT Public Advisory Group (PAG), and the key activities and contributions of the group members during the first 11 months of the project. The PAG, a diverse group of 15 members, was formed to ensure patient and public input into the project’s goals of developing green AI solutions for healthcare. Through structured meetings, workshops, and targeted training, the PAG has influenced ethical frameworks, green computing decisions, and governance structures.

In the coming years (years 2-4), NetZero AICT will continue its commitment to inclusive, sustainable healthcare innovation through regular bi-monthly meetings, regionally-focused public engagement activities, and specialised workshops. These engagements are designed to ensure diverse public and patient perspectives guide critical project decisions and support project accessibility. Planned workshops will provide the **Public Advisory Group (PAG)** with insights into sustainable computing, clinical validation, AI training, and intellectual property - enabling informed contributions to the project's ethical and technical frameworks. This strategic engagement approach strengthens the project’s foundation, fostering solutions that are ethically sound, climate-conscious, and tailored to the needs of diverse communities.

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1. Introduction

1.1 Introduction

The NetZero AICT project, under the Horizon Europe program, is focused on developing sustainable AI solutions for healthcare. To ensure these solutions are trustworthy and benefit from patient and public input, the project established a Public Advisory Group (PAG) of 15 members from five European countries. This group brings diverse perspectives that inform the project's ethical guidelines, green computing strategies, and governance structures.

This interim report summarises the PAG's first-year activities, including recruitment, training, and key meetings. The group's diverse backgrounds reduce the risk of groupthink, enhance communication with a broad audience, and help shape project decisions that address various regional and demographic needs.

Looking ahead, Years 2–4 will build on this foundation with regular meetings, targeted regional engagements, and workshops to deepen the PAG's impact on the project's ethical, sustainable, and inclusive goals.

2. Progress Made and Activities to Date

2.1 Establishment of the Public Advisory Group (PAG)

The PAG was formally established with 15 members from 5 countries (England, France, Italy, Northern Ireland and Scotland), representing a diverse range of professional backgrounds and personal experiences¹. This structure reflects an adaptable, tiered involvement model similar to those used in UK health data projects, such as OpenSAFELY. Two PAG members now serve on the Project Steering Committee (PSC), which meets monthly to ensure patient and public representation at decision-making levels.

2.1.1. PAG Equality and Monitoring Report Summary

1. Experience with CT Scans:

- Respondents had varying experiences with CT scans, including both those with and without contrast injections.
- A minority indicated uncertainty about receiving CT scans

2. Occupational and Educational Background:

- Respondents' diverse occupational backgrounds include roles in healthcare, education, legal professions, and unemployment.
- Educational qualifications ranged from secondary school education to vocational and bachelor's degrees, indicating a broad educational spectrum among respondents.

3. Gender and Age Demographics:

- Gender distribution showed a mix of male and female respondents, with a slight majority being female.
- The age groups covered varied widely, with respondents ranging from "25-34" to "65 or older," suggesting inclusive age representation in the data.

4. Ethnicity:

- Ethnic backgrounds represented include White British, White European, Black African, Pakistani, and British Caribbean, reflecting a relatively diverse participant pool.

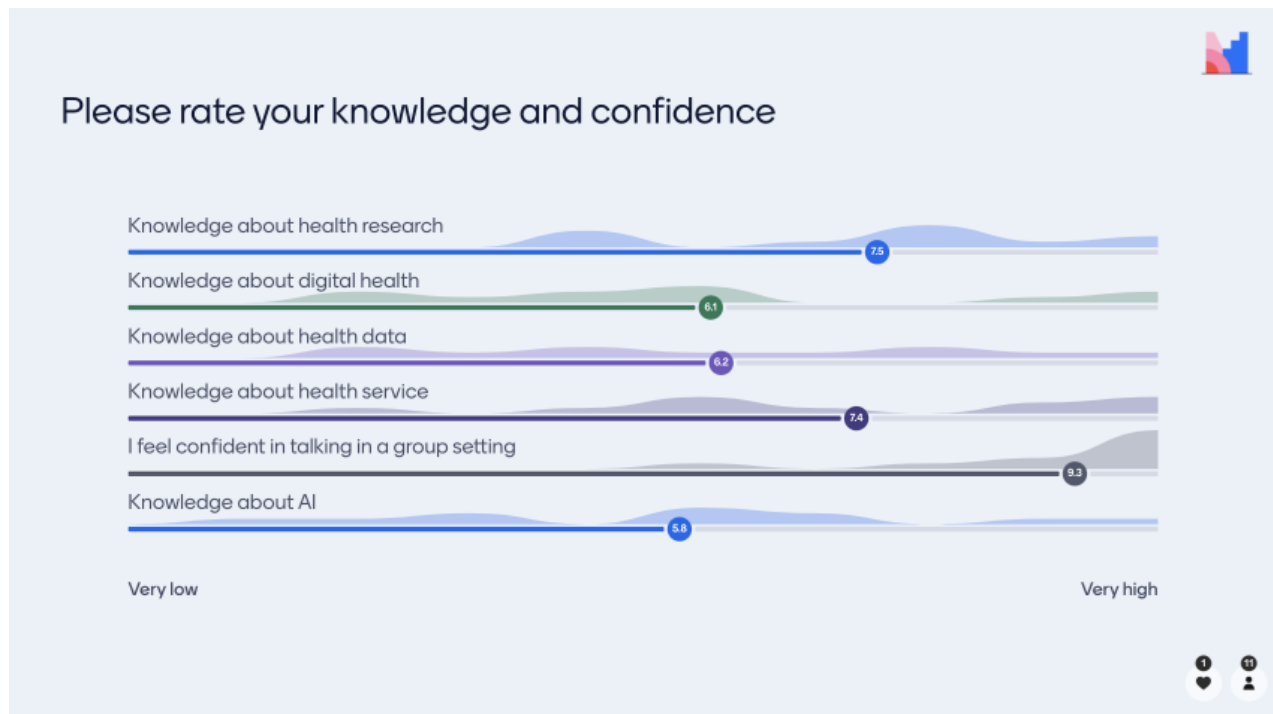
¹ Selection process detailed in Public engagement mechanisms plan V1 and V2.

5. Disability Status:

- Several respondents reported a physical or mental disability, including specific mentions of learning disabilities.

Topical Knowledge and confidence of group members

During the recruitment sessions, participants were asked to indicate their level of knowledge about AI. During the training, a multi-axis set of 6 questions was presented to the group, with 10 participants completing the short questionnaire. Data and brief analysis below:



The analysis of participants' self-rated knowledge and confidence across various topics reveals several insights:

1. **Knowledge about Health Research:** This area scored highly, with almost all participants rating their knowledge in the mid to high level - suggesting a strong, shared understanding of health research across the group.
2. **Knowledge about Digital Health:** Participants' knowledge in this area is mixed, with scores spread across a broader range. This variation indicates differing familiarity levels with digital health, pointing to it as an area where some may feel confident while others are less certain.
3. **Knowledge about Health Data:** Similar to digital health, responses for health data knowledge show a noticeable spread. This diversity reflects varying degrees of understanding within the group, suggesting a mix of familiarity and gaps in knowledge about health data.
4. **Knowledge about Health Services:** Participants generally rated their knowledge of health services highly, with the majority of responses concentrated around similar scores; however, one participant rated their knowledge in this area at the lower end of the scale.
5. **Confidence in Group Communication:** Confidence in group communication is high overall, with most participants rating themselves very positively. There is minor variation, with nearly all

participants expressing comfort in group settings, indicating this is a well-developed skill across the group.

6. **Knowledge about AI:** The most diverse responses were observed in the area of AI knowledge. Scores are spread widely, with some participants feeling relatively informed while others rated themselves lower. This dimension exhibits the greatest variation, highlighting AI as an area where the group has the most varied understanding.

The diversity highlighted in the Equality and Monitoring findings strengthens the project by reducing the risk of groupthink and ensuring that PAG input reflects a wide range of perspectives. By having members with varied backgrounds, experiences, and knowledge levels, the PAG can challenge assumptions, bringing fresh viewpoints that lead to more robust decision-making. This diversity helps us develop project materials and explanations that are accessible and relevant to a broad audience, ensuring that complex topics—like AI in healthcare—can be communicated clearly and effectively.

Additionally, understanding the demographic and knowledge diversity within the group has allowed us to design training and engagement activities that address specific needs and knowledge gaps. This tailored approach not only supports individual members but also enriches the overall project by integrating insights from different life experiences and professional backgrounds. In this way, the PAG's diversity becomes a key asset, enhancing the project's inclusivity, relevance, and public impact.

2.2. Recruitment and Initial Engagement

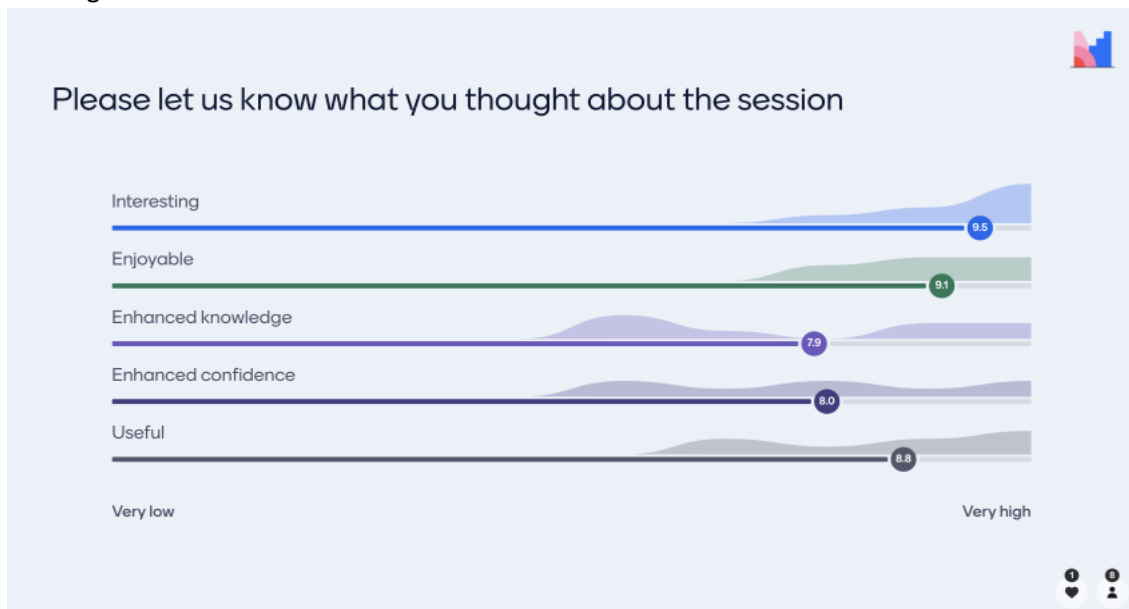
During the recruitment phase, **six meetings were held (May-July)** with potential PAG members to both facilitate selection and gather initial feedback on the project's goals. These meetings served as deliberative discussions that shaped early priorities for the PAG. Following its formal establishment, the PAG participated in six workshops and **three specialised training sessions (Aug-Oct)**²:

- **Training Session 1**
Date: Aug 13th, 2024
Objective: Orientation on the NetZero AICT project, covering the basics of health data and AI.
- **Training Session 2**
Date: Sept 20th, 2024
Objective: Introduction to ethics-by-design and governance frameworks and critical thinking in health research.
- **Training Session 3**
Date: Oct 1st, 2024
Objective: In-depth exploration of NetZero AICT principles, including project goals, technical details, and public impact.

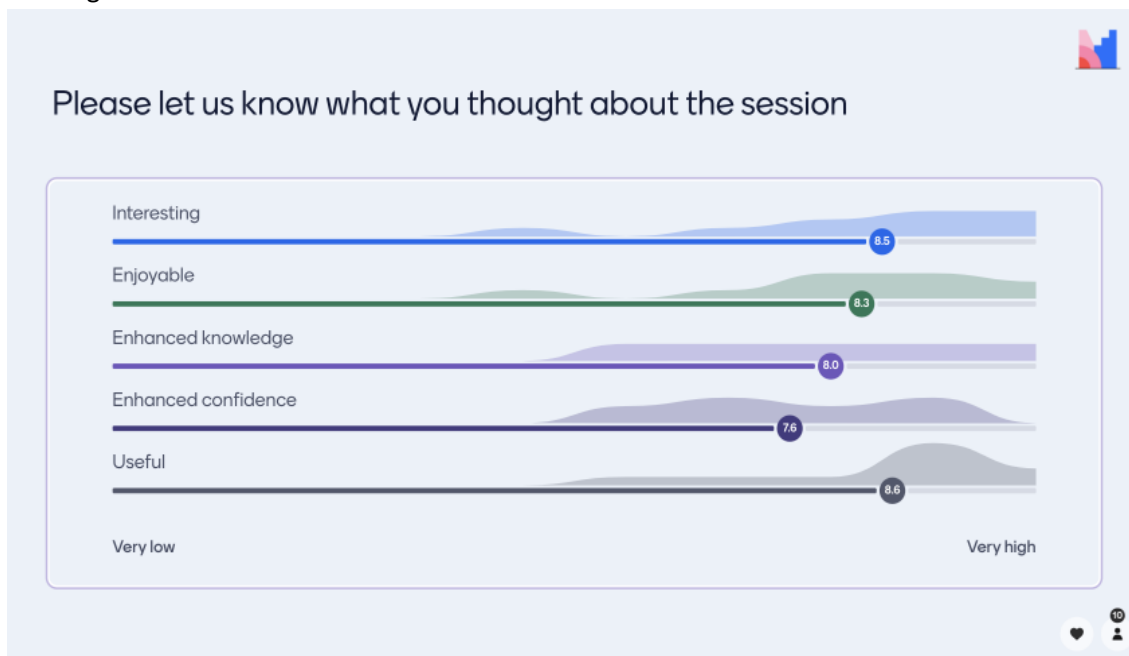
Impact and Outcomes: Feedback on these sessions, gathered via Mentimeter and written responses, was positive, indicating strong engagement, improved understanding, and readiness to actively contribute to project objectives.

² Slides are available in the project repository

- Training session 1



- Training session 3



(* no evaluation from session 2 was sought due to time constraints in the session)

2.3. Key Engagement Meetings and Their Impact

The PAG has participated in several meetings with the broader project team. Key meetings include:

1. **Green Computing Solution Meeting**

Date: October 17, 2024, 11:00 am - 12:30 pm (UK time)

Objective: Discuss options for selecting a sustainable computing provider following the removal of Escher Cloud.

Impact and Outcome: PAG members provided feedback on green computing priorities, which CMRAD (a consortium partner) used to draft selection criteria for a new provider.

2. **Ethics Framework Development Meeting**

Date: October 18, 2024, 10:00 am - 11:00 am (UK time)

Objective: Provide the PAG with information about the details and ambition for integrating the Fundamental Rights Impact Assessment and the AI Act in an ethics-by-design tool in preparation for co-design input in future sessions.

Impact and Outcome: PAG members indicated they understood the basics of the FRIA and EU AI Act and the ambition for an integrated tool. The PAG indicated they were willing to participate, so they will be involved through the next phases of iterative co-design.

3. **Qualitative Research Planning Meeting**

Date: October 21, 2024, 2:30 pm - 4:00 pm (UK time)

Objective: Explore the potential of a qualitative substudy component to the project - seeking meta-research perspectives from the research team and others.

4. **Impact and Outcome:** PAG members said that the model presented was too complex (grounded theory, participative action research (PAR) and critical realist evaluation). Input led to a reworking of a simplified plan focusing on PAR. Group members indicated they were happy to be involved on an ongoing basis.

Additionally, one PAG representative attended the Month 6 meeting in Prague, actively participating in all workshops, including the Innovation Management Plan meeting. Two self-nominating PAG members also attended the Month 11 Project Steering Committee³ (PSC) meeting, further cementing PAG's influence in project governance.

Furthermore, public facing project deliverables are developed with PAG member input. The second version of the Patient and Public Engagement Mechanisms document (D1.6), key components of the Project Communications Kit (D7.3) and this document (D7.8) have benefited from patient and public contributor input and review.

Compensation: All PAG members are compensated at £25 per hour⁴, reflecting the project's commitment to fair and equitable public involvement.

3. Future Engagement Plans and Geographically Targeted Activities (Years 2-4)

3.1. Bi-Monthly Meetings and Targeted Regional Engagements

A regular cadence of bi-monthly PAG meetings is now in place to sustain continuous engagement and provide regular project updates. Ad-hoc meetings will also be held. Starting in Year 2, the project will conduct at least one regionally/demographic-focused engagement activity per year, focusing on specific geographical populations highlighted as underrepresented by the PAG. These annual activities will enable the project to address diverse perspectives and ensure that culturally relevant concerns shape the project's

³ The PSC is a monthly meeting for project leadership team to discuss the NetZERO AICT project.

⁴ In line with the NIHR guidance: <https://www.nihr.ac.uk/payment-guidance-researchers-and-professionals>

approach to developing AI. The specific form and scheduling of these sessions are yet to happen, but planning is underway, with co-design input from the PAG.

3.2. Near future workshops (M12-18)

To further enhance the PAG's ability to contribute meaningfully, four specialised workshops are scheduled for M12-M18. These sessions will deepen PAG members' knowledge of core project areas and ensure they can offer informed input on key technical and ethical issues:

1. **Green Computing Architecture and Sustainability**

Date: Q4 2024

Objective: Follow-up session engaging the PAG members in discussions on sustainable computing practices and decision-making processes for environmentally responsible technology solutions.

2. **Understanding and refining the approach to Clinical Validation of AI Models**

Date: Q1 2025

Objective: Introduce the process of validating AI models for clinical application, focusing on safety and accuracy in real-world healthcare settings.

3. **AI Training methodology deep-dive**

Date: Q1/2 2025

Objective: Cover AI training principles, including data collection, labelling, and bias mitigation techniques.

4. **Intellectual Property (IP) and Innovation Management Plan**

Date: Q1 2025

Objective: Educate on IP and data rights in healthcare AI, focusing on public interests and ethical data use.

3.3. Additional plans (M12)

4. **Glossary development:** Finalising a working Glossary of key terms, acronyms, and abbreviations is in development and will be shared on the website and with the project team by the end of M12 - to harmonise language across the project and support meaningful involvement. The glossary will be a 'living document' and subject to continuous development and addition.

5. **Ongoing documentation review:** Ongoing PAG input into project documentation, including but not limited to the Public Deliverables and iterations of communications materials.

4. Conclusions

This document represents the Deliverable 7.8 *Annual report on bi-monthly PAG and meetings (v1)* as part of Task 7.3 *Stakeholder engagement, involvement and ecosystem building*.

The first year of PAG activities has established a strong foundation for patient and public involvement in the NetZero AICT project. Co-design input into the stakeholder engagement plan, green compute selection framework and other aspects of the project has been successfully facilitated.

The commitment to bi-monthly meetings, geographically/demographically targeted engagements and representation on project exec groups in Years 2-4 will strengthen the PAG's role, allowing the project to

address needs and build public trust. This approach, combined with the planned workshops, ensures the PAG remains well-equipped to support the project's ethical, sustainable, and inclusive goals. The Year 1 achievements exemplify the impact of a robust patient and public involvement model in large-scale, international health data initiatives, positioning the NetZero AICT project as a leader in patient and public-centred AI and healthcare innovation.

5. Degree of progress

The deliverable is 100% fulfilled. Key goals from the task were achieved.

6. Dissemination level

Public