EUROPEAN INNOVATION PARTNERSHIP on Active and Healthy Ageing (EIP on AHA)

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European Commission
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Ageing and care challenges

Ageing society

Chronic conditions

Health workforce shortage

Financial unsustainability

HLY vs LE

Health inequalities
Health in Europe 2020

Europe 2020 flagships for smart, sustainable and inclusive growth

- Digital Agenda
- Youth on the Move
- Innovation Union
- New Industrial Policy
- New Skills and New Jobs
- Platform against Poverty
- Resource Efficiency

Innovation Union

- innovation for tackling societal challenges, e.g. ageing and health
- innovation for addressing the weaknesses & removing obstacles in the European innovation system

European Innovation Partnership on Active and Healthy Ageing
Active & Healthy Ageing: A European Innovation Partnership
EIP on Active & Healthy Ageing

objectives, targets, scope & focus

+2 HLY by 2020

Triple win for Europe

Action Areas/Groups

- Improving prescriptions and adherence to treatment
- Better management of health: preventing falls
- Preventing functional decline and frailty
- Integrated care for chronic conditions, inc. telecare
- ICT solutions for independent living & active ageing
- Age-friendly cities and environments
Innovative Collaboration

The **EIP on AHA** does not lead to new legislative changes, but instead focuses on:

- **Joining up resources & expertise**
  Input to policy making, collection of experience, evidence
- **Bridging gaps & connecting**
  Direct collaboration with regions and local communities
  Speed up the innovation process
- **Facilitating scaling up & multiplying**
  Bottom up process based on evidence & real-life tested ideas
  Focus on feasibility & scalability of innovative solutions
- **Fostering synergies**
  Coordinating efforts towards a common objective
  EC as facilitator and guarantor of delivery of main objectives
Participation in the EIP

- Research/academia: 36%
- Advocacy organisations: 11%
- Health provider: 5%
- Care provider: 9%
- Industry - SME: 9%
- Industry - large: 17%
- Other: 13%
Ways of involvement

**Action Groups**
Stakeholders invited to submit a commitment to work together towards one of the 6 Specific Actions of the Partnership – 2012 and 2013

**Reference Sites**
Regions, health providers working across priorities – repository of good practices

**Marketplace for Innovative Ideas**
Online collaboration – open for everybody
ACTION GROUPS
Increase of commitments in 2013

Stakeholder commitments

- D4 Age Friendly Environments: 34 (2013) vs. 35 (2012)
- B3 Integrated Care: 68 (2013) vs. 68 (2012)
- A1 Adherence to treatment: 37 (2013) vs. 32 (2012)
Examples of commitment/action

**Prescription & adherence to medical plans**

**Improve prescribing tools**
to ensure drug safety and maximal efficacy in the population

**Commitments**
- Create **IT system for monitoring elderly patients’ medicaments intake**
- Validate tools to assess appropriateness of the prescribed medicine & assist the assessment of adherence: adherence control
- Facilitate the prescription until the next visit – this will require **linkage with the community pharmacist**
- Facilitate **communication with other health professionals**: nurses, other doctors, pharmacists – also between primary and secondary care

**Committed partners**
- Electronic prescriptions: Andalusia, Basque Country, NHS Scotland
- Monitoring prescriptions in the health care system: NHS-Scotland: Polypharmacy Guidance
- NHS-Scotland: iSPARRA risk prediction to identify non-adherence
- Medical University of Warsaw: Control adherence
- C3D Solution: Monitoring system of patients adherence, as well as to supervise the course of therapy
Examples of commitment/action

Replicating and tutoring integrated care models

Implementing risk stratification methodologies

Example of commitment: Basque chronicity strategy

- Stratification of the entire population (2.2mio)
- 100% of health professionals know what care approach the patient needs in relation to their risks
- 11,000 hospital stay reduction & saving of €8.9mio

Toolkit for Risk Stratification
Coverage: diagnostic activities; success stories; tools /practical tips to help to identify patient clusters, embed targeted care plans, define a panel of indicators and quality improvement models

Examples of committed partners: Catalonia health ministry, Regional Healthcare Agency of Puglia, Région Languedoc Roussillon, CORAL Network
REFERENCE SITES
Reference Sites – concept, objectives, scope

Objectives of the EIP Reference Sites

- excellent examples of cost-effective and efficient good practice & impact on the ground
- scalability, transferability and replicability across Europe - when there is clear need for care systems modernisation
- dissemination of good practices – e.g. the coaching and training of other regions/care systems
32 RSs => 12 MSs
selected for self-assessment and peer-review
(innovation, scalability, outcomes)

71 good practices of innovation-based integrated care models with sound impact on the ground

1 July 2013 – Star Ceremony
announcement of best RSs with stars, ready for replication and coaching

⭐⭐⭐⭐ 13 Reference Sites
⭐⭐⭐ 12 Reference Sites
⭐ 7 Reference Sites
Marketplace for Innovative Ideas

- online collaborative platform
- open for everybody
- sharing of ideas, good practices,
- learning from each other
- meeting and networking
- accessing robust data and evidence, etc.
Potential funding opportunities for Active & Healthy Ageing

**TODAY**

- **7th Framework Programme (FP7):** More than €4 billion available in the last calls (July 2012) potentially relevant for societal challenge such as ageing and/or EIP priorities.
- **Competitiveness and Innovation Framework Programme (CIP):** ICT part of CIP allocated €24 Million in the Work Programme 2012 for actions directly relevant for the EIP. €39 Million in 2013.
- **Second Health Programmes:** In 2012 call, €4 million for the EIP on AHA. In 2013 €6 Million and a Joint Action on Chronic Diseases and promoting Healthy Ageing (€5 Million).

**STRUCTURAL FUNDS (2007-2013)**
- e.g. PROGRESS (DG EMPL) €743 million

**EUROPEAN INVESTMENT BANK**
- Risk-sharing Finance-Facility (RSFF) €2 billion 2007-2013

**FUTURE**

- **EUROPEAN UNION Cohesion Policy (2014-2020):** €9 billion (original proposal) for Health, Demographic Change and Well Being
- **HORIZON 2020 Programme for Research and Innovation (2014-2020):** e.g. European Programme for Social Innovation €98 Million
Today’s EIP scale and critical mass

- 1 billion euro mobilised
- 1000 regions & municipalities
- 3000 partners
- Marketplace >30000 visits >650 registered users
- 30 mio citizens, >2 mio patients
- 300 leading organisations
- > 500 commitments
Monitoring of progress

• **Process**
  The EIP on AHA process will monitor different aspects: the involvement of stakeholders, the creation of synergies and the added value for the participating organisations.

  First results are already available.

• **Outcome**
  Monitor activities and outcomes of the action groups at action group level and from commitments

  2013: Monitoring framework
  First results 2014: Most commitments have just started or are starting now
What has been the process?

- Input from experts + input from action group members about their monitoring process

- Based on input from action group members and experts, a draft monitoring framework was developed

- The experts and the action group members were asked to give feedback on the draft framework

- Updated monitoring framework based on the received feedback
**EIP on AHA Process**

**Added value of the EIP on AHA**

<table>
<thead>
<tr>
<th>Activity</th>
<th>% Respondent Satisfaction</th>
</tr>
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<tbody>
<tr>
<td>Networking to form partnerships</td>
<td>85</td>
</tr>
<tr>
<td>Exchange of good practice</td>
<td>75</td>
</tr>
<tr>
<td>Visibility</td>
<td>70</td>
</tr>
<tr>
<td>Influence local/regional/national policies</td>
<td>63</td>
</tr>
<tr>
<td>Networking to align processes with others</td>
<td>58</td>
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<tr>
<td>Creating awareness for healthy ageing</td>
<td>53</td>
</tr>
<tr>
<td>Overcoming barriers</td>
<td>47</td>
</tr>
<tr>
<td>Networking - other benefits</td>
<td>28</td>
</tr>
<tr>
<td>Growth and employment</td>
<td>21</td>
</tr>
<tr>
<td>None</td>
<td>1</td>
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</tbody>
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Based on results of the Survey on process indicators, prepared by the EC, with input of 107 respondents out of 261 asked
EIP on AHA Process

Added value of the EIP on AHA: Overcoming barriers

Based on results of the Survey on process indicators, prepared by the EC, with input of 107 respondents out of 261 asked
EIP on AHA Outcome

- **Process indicators e.g.:**
  - The population covered
  - The number of SME's involved
  - The amount of money invested

- **Outcome indicators e.g.:**
  - Less social isolation
  - Decline in hospital bed days
  - Increase in employment rate

- **HLY At birth**
  +2 Healthy Life Years

- **Triple Win**
  - Quality of Life
  - Sustainability of Care
  - Innovation-based Competitiveness

- **Individual actions**

- **Establish the link**

**Individual Actions**
Thank you for your attention!

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EIP on AHA Website – the MARKETPLACE

http://ec.europa.eu/active-healthy-ageing

DG SANCO Website

http://ec.europa.eu/health