Introduction to EIP AHA
Achieve +2 Healthy Life Years by 2020 by

Seeking Triple Win

- Grow and expand EU industry
- Foster sustainable and efficient healthcare systems
- Improve EU citizens' health and quality of life

through innovating in

1. Prevention & Early Diagnosis
2. Care & Cure
3. Active and Independent Living
### Innovation: a broad paradigm shift of health and care services supported by novel technologies

<table>
<thead>
<tr>
<th>Fragmented, disease oriented care</th>
<th>Integrated, patient-centred health services</th>
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<tbody>
<tr>
<td>Reactive, episodic care</td>
<td>Prevention, health management</td>
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<tr>
<td>Hospital, emergency setting</td>
<td>Community setting</td>
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<tr>
<td>Passive patients</td>
<td>Informed, empowered patients</td>
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<tr>
<td>Ageing: increasing welfare costs</td>
<td>Ageing: driver of the silver market</td>
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</table>
Activities: Action Groups

- Prescriptions & treatment adherence
- Preventing falls
- Functional decline and frailty
- Integrated care
- ICT for independent living
- Age-friendly environments

> 500 commitments (measurable and concrete projects/initiatives)

> 300 good practices

Collaboratively-built benchmarks, frameworks and understanding around complex issues

Stronger networks of research and practice, science and society
Mutual learning

- We may not be very strong in everything
  - but we are in some

- Where we have a gap
  - others are experts

- Collectively
  - we know a lot & we have a rich range of good practices

Learn by others' success...and mistakes

Avoid duplications time and resources-consuming

Shorten the learning curve to adapt a good practice
What to scale up:
1. Proven Good Practices (GPs)
2. Viability of GPs
3. Classification of GPs

How to scale up:
4. Facilitating partnerships
5. Implementation – key success factors and lessons learnt
<table>
<thead>
<tr>
<th>Organisation</th>
<th>Initiative Name</th>
<th>Action Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>INSTITUTO DE SALUD CARLOS III</td>
<td>Platform for Innovation on Telehealth and e-Health Services</td>
<td>B3</td>
</tr>
<tr>
<td>EUROHEALTHNET</td>
<td>Creating an age-friendly European Union by 2020</td>
<td>D4</td>
</tr>
<tr>
<td>EUROPEAN HEALTH MANAGEMENT ASSOCIATION LIMITED</td>
<td>ENGAGED</td>
<td>B3</td>
</tr>
<tr>
<td>INSTITUTO ARAGÓNÉS DE CIENCIAS DE LA SALUD</td>
<td>Part of Commitment</td>
<td>B3</td>
</tr>
<tr>
<td>AGENZIA ITALIANA DEL FARMACO</td>
<td>Improving Adherence and Concordance to long-term therapies in older patients at regional level</td>
<td>A1</td>
</tr>
<tr>
<td>TECHNISCHE UNIVERSITÄT DRESDEN</td>
<td>Architecture under Demographic Change</td>
<td>D4</td>
</tr>
<tr>
<td>HEALTH SERVICE EXECUTIVE</td>
<td>Activating Falls &amp; Fracture Prevention in Ireland Together</td>
<td>A2</td>
</tr>
<tr>
<td>DIRECÇÃO - GERAL DA SAÚDE</td>
<td>Portuguese National Programme for Respiratory Diseases</td>
<td>B3</td>
</tr>
<tr>
<td>EUROPEAN PATIENTS FORUM</td>
<td>Improving adherence and concordance in long-term therapies in older patients at regional level</td>
<td>A1</td>
</tr>
<tr>
<td>EUROPEAN REGIONAL AND LOCAL HEALTH AUTHORITIES</td>
<td>Part of Commitment</td>
<td>B3</td>
</tr>
<tr>
<td>CONSEJERÍA DE SALUD Y BIENESTAR SOCIAL DE LA JUNTA DE ANDALUCIA</td>
<td>Reference Site</td>
<td>B3 &amp; D4</td>
</tr>
<tr>
<td>FUNDACIÓN PROGRESO Y SALUD</td>
<td>Organization which belongs to the Andalusian Regional Ministry of Health, which is a partner</td>
<td>B3</td>
</tr>
<tr>
<td>FUNDACIÓN VASCA DE INNOVACIÓN E INVESTIGACIÓN SANITARIAS</td>
<td>Yes, through the International Foundation for Integrated Care commitment</td>
<td>B3</td>
</tr>
<tr>
<td>SERVIZO GALEGO DE SAÚDE</td>
<td>B3 Commitment</td>
<td>B3</td>
</tr>
<tr>
<td>UNIVERSIDAD DE ZARAGOZA</td>
<td>Part of B3 Commitment</td>
<td>B3</td>
</tr>
<tr>
<td>CHRODIS - CPs</td>
<td>Initiative name</td>
<td>Final action Group</td>
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<td>ORGANIZATION</td>
<td>Initiative name</td>
<td>Final action Group</td>
</tr>
<tr>
<td>UNIVERSITY OF COIMBRA</td>
<td>Ageing@Coimbra</td>
<td>A1, A2, A3, B3, D4</td>
</tr>
<tr>
<td>UNIVERSITY OF MONTPELLIER</td>
<td>Integrated care pathways for asthma and rhinitis co-morbidity</td>
<td>B3</td>
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<tr>
<td></td>
<td>MACVIA-LR falls prevention programme</td>
<td>A2</td>
</tr>
<tr>
<td></td>
<td>Fighting chronic diseases to promote healthy and active ageing</td>
<td>B3</td>
</tr>
<tr>
<td>CONSEJERÍA DE SANIDAD Y SERVICIOS SOCIALES, COMUNIDAD AUTÓNOMA DE CANTABRIA</td>
<td>Strategy for the deployment of integrated Care for Chronic Diseases in the Region of Cantabria</td>
<td>B3</td>
</tr>
<tr>
<td>DIRECCIÓN GENERAL DE ASISTENCIA SANITARIA, AGENCIA VALENCIANA DE SALUD. COMUNIDAD VALENCIANA</td>
<td>VALCRONIC</td>
<td>B3</td>
</tr>
<tr>
<td>EUROPEAN WOUND MANAGEMENT ASSOCIATION (EWMA)</td>
<td>Working multidisciplinary to combat wounds in elderly people</td>
<td>B3</td>
</tr>
<tr>
<td>WHO REGIONAL OFFICE FOR EUROPE</td>
<td>Age-friendly environments in Europe</td>
<td>D4</td>
</tr>
<tr>
<td>UNIVERSITÁ DI NAPOLI</td>
<td>Healthy ageing with innovative functional foods/leads for degenerative metabolic diseases</td>
<td>A3</td>
</tr>
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<td>campania nel cuore</td>
<td>B3</td>
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<td></td>
<td>An integrated Adherence Monitoring System regarding patients with chronic conditions.</td>
<td>A1</td>
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<tr>
<td>THE NHS CONFEDERATION</td>
<td>Yorkshire and the Humber Digital Health Community</td>
<td>C2</td>
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<td></td>
<td>Transforming Pharmaceutical Care in the Community for Long Term Conditions</td>
<td>A1</td>
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<tr>
<td></td>
<td>Up and About Plus – taking a National Falls Prevention Programme to scale</td>
<td>A2</td>
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<tr>
<td></td>
<td>An Acute Focus on Frailty</td>
<td>A3</td>
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<td></td>
<td>Integrated health and social care in Scotland, enabled by ICT</td>
<td>B3</td>
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<td></td>
<td>Living it Up - a thriving community of opportunities; supporting wider economic benefits in the UK</td>
<td>C2</td>
</tr>
<tr>
<td>PORTUGUESE DIABETES ASSOCIATION (APDP-ERC)</td>
<td>Integrated Solutions for Diabetes and Chronic Care Management Empowerment in Aging</td>
<td>B3</td>
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</table>
Action Groups
Adherence to Treatment

**Multimorbidity**, the co-occurrence of multiple diseases, affects more than half of the elderly population.

**Polypharmacy**, the simultaneous use of multiple drugs by a single patient, for one or more conditions, is common in older people:

- 40% of people aged 65 and over consume between five and nine medicines per week
- 18% of people aged 65 and over consume over 10 medicines per week

Interventions aiming at overcoming barriers to adherence must become a priority to achieve population health goals.
Adherence Action Group

**Patient forgets to take his pills**

**INTERVENTION:** Monitoring ICT device and alerting system

**Patient receives an alert to take pills**

**Patient has adverse drug reaction**

**INTERVENTION:** Medication review to detect inappropriate prescription

**HCP reviews treatment and adapts it for patient**

**Patient does not understand disease and importance of treatment**

**INTERVENTION:** IT platform on disease information

**Patient understands importance of intervention to improve quality of life**

**Complex regime due to polypharmacy**

**INTERVENTION:** Personal dosage system

**Simplification of complex regime**
Integrated Care Good Practices

- Organisational models
  - Risk Stratification
  - Care Pathway Implementation

- Change Management
  - ICT/ Teleservices/electronic health records

- Workforce Development, Education and Training
- Patient/ User Empowerment
- Finance/ Funding
Health systems

Better coordination among health care organizations help reduce hospitalization and allocate more efficiently resources for care and cure.

Organization of health care

Clinical information systems

Delivery system design

Decision support

Share of:
1) educational/ disease specific information between stakeholders
2) patient specific information and records
3) health management methods & clinical parameters

Risks stratification tools predict health risks of individuals so that prevention and care services are tailored to their needs.

Skane Region (Sweden)
* implemented an action plan to encourage, strengthen and intensify cooperation among home care primary care and hospitals
* regional improvement leaders have been appointed to support the process
* ICT tools enable coordination and performance based funding ensure quality
* has been now implemented in other 21 countries in Sweden

Dossier Parmaceutique (Languedoc Roussillon, France)
* electronic file on pharmaceutical records was added to the electronic personal medical file of over 30 million patients.
* helps to avoid medical interaction and prescription duplication.

The TELBIL project (Basque Country, Spain)
* provides a set of in-home intensive support services to complement clinical palliative care
* significantly reduces hospital admissions during the last months of life (reduced by 33%).

Regional and thematic maturity mapping and change management supports regions to move towards integrated care systems.
**Germany:** Techniker Krankenkasse offer integrated care models to improve the treatment of back pain. **3,000 patients**, in 32 locations, in 15 federal states.

**Spain:** The Region of **Valencia** deploys a programme to improve the management of chronic patients through the use of new technologies and integrated care practices. Target population: **12,000 chronic patients**

**The Netherlands:** A preventive integrated care model for the frail elderly, the Walcheren Integrated Care Model (WICM) is available to **22,000 elderly**.
Radboud University Nijmegen Medical Centre, ParkinsonNet, Improving Parkinson care through regional networks of primary and secondary care around hospitals, physiotherapists working according to evidence-based guidelines.  
• An improvement in the quality of care for those patients  
• Prevention of disease complications (including a 50% reduction in hip fractures)  
• A reduction in hospitalization  
• A substantial cost reduction (€20 million annually in NL)

South Denmark: SAM:BO a regional agreement of coherent care pathways for citizens and patients as well as an integrated system backed by an infrastructure and ICT services. Demonstrates potential savings of e-referral on national level:  
• At current levels of use it saves 1 million € each year over paper based systems.  
• If all referrals were sent electronically this could rise to 3.5 million € per year.
**Puglia, Italy**: Telecardiology programme to support patients affected by cardiovascular diseases both in case of acute events and management of chronic conditions.
- Over 550,000 ECG performed,
- significant reduction of avoidable death,
- 60% underwent appropriate treatment and no hospitalization unless urgent (only 11%)

**Basque country**: Chronicity strategy

Risk stratification of patients
- the entire population (2.2mio) included
- 100% of health professionals know what care approach the patient need in relation to their risks
- 11,000 hospital stay reduction & saving of €8.9mio (entire strategy)
Scotland

Over 163,000 people receive a telecare service, at least 4,000 people with dementia diagnosis

All 32 local partnerships have a telecare service in place

Gross cost benefits of £20m TDP funding estimated to be £78.6m

Continuing positive feedback from service users and carers
'Integrated Medicines Management
150,000 people currently receive the service with over 97,500 being 65 or over

Reduced length of stay (2 days - 20% decrease)
Return on Investment £5 for every £1 invested
Pharmaceutical Clinical Investing Programme Savings £140 million (25% of prescribing Budget)
Improved medicines appropriateness index (17.48 to 5.69)
Reduced medication errors at admission (4.2)
Reduced errors at discharge (20% - <1%)
Action Group D4
Age friendly buildings, cities and environments

Synergy AGs -
Patient/User Empowerment

Multimorbidity
Monitoring the European Innovation Partnership on Active and Healthy Ageing
1) Monitoring the EIP on AHA Process

- Involvement of stakeholders
- Creation of synergies
- Knowledge transfer & absorption of innovation by health systems
- Added-value for the participating organisations
- Funding

2) Monitoring the EIP on AHA Outcome

- Outcome(s) of interventions and activities of Action Groups
- Estimating the impact of the interventions on the overall target of the EIP on AHA, namely
  
a) two additional Healthy Life Years (HLY) by 2020 and
b) Triple Win (QoL, Sustainability of Health Systems, Innovation & Growth).

The framework is not about the evaluation and/or comparison of the individual interventions and/or commitments.
In the digital age, I...
Outcome
Monitoring framework

Headline target
+2 HLYs

Triple Win
QoL  Sustainability  I&G

Outcome
Indicators on intervention / commitment level
Main criteria used for the selection of indicators:

- **Legitimacy**: Indicators used by commitments
  - Input from experts and Action Group members
  - Information from Reference Sites Good Practices
  - Information from Action Groups Good Practices
  - Information from a survey on outcome indicators

- **Credibility**: Validity and reliability of indicators
  - Literature review by JRC/IPTS

- **Salience**: Potential of outcome indicators to be linked up to the EIP on AHA objectives
Next steps

2014-2015: Development of tool (e.g. Excel-based) to estimate outcomes of the EIP on AHA on health as well as the sustainability of health and care systems

Distribution of the tool to the EIP on AHA partners for their own use planned for the future
Communication & Dissemination
Connected networks and synergies

EIP on AHA already works with many networks such as EUREGHA and ERRIN.

Online platform lets anyone post AHA events, resources, news, and connect to others in the field.

Action Group and Reference Site documents to learn from and be inspired.

Searchable database of good practices online soon.
EUPHA Programme

Event: Integrated care as a vehicle for innovation in health care delivery

Wednesday, 19 November.

7th European Public Health Conference with the theme 'Mind the gap: Reducing inequalities in health and health care' from 19-22 November 2014 in Glasgow, Scotland

- experiences from the EIP AHA network and beyond
- integrated care models, large-scale deployment of evidence-based solutions, with special focus on the hard (financial, infrastructural) and soft (leadership, ecosystems, change management) components of scaling up integrated services.

Registration and more information: http://ephconference.eu/programme/dynamic_programme.php
Conference of the Partners 2014

1st December 2014, in the Centre Albert Borschette in Brussels. Focus: internal.

- Presentation of the Action Groups' main achievements
- Tools for continuing in 2015
  Scale-up strategy ~ Monitoring Framework ~ Repository of Good Practices
  Support to EIP AHA
- Sessions on
  Data for the Monitoring Framework ~ Scaling up Good Practices
  Age-friendly housing ~ Action Group deliverables

Email EC Action Group leader (Eibhilin / Horst) by 31st October to indicate interest.
Political Event:
**European Summit on Innovation for Active and Healthy Ageing**

~16/17\textsuperscript{th} March 2015

*Focus: political.* Direction of EIP on AHA and European-level policy on AHA.

*Further information to come.*
Coordination and Support Action

For the whole EIP-AHA, supporting the existing governance structures

Objectives:

- help to deliver Action Plans
- upscale impact at systemic level with appropriate framework conditions
- Action Plans and roadmapping for research and innovation

Responsible for repository of good practices

Grant Preparation ongoing
First coordination meeting: 2 December, Brussels
Funding: Current H2020 Calls

Societal Challenges:
PHC-21 – Advancing active and healthy ageing with ICT: Early risk detection and intervention

PHC-25 – Advanced ICT systems and services for Integrated Care
PPI (public procurement of innovative solutions)

EC supported procurement initiatives related to health

Public Procurement in H2020:

PHC 27: Selfmanagement of health and disease and patient empowerment supported by ICT (€ 15M, 2015) (PCP)

PHC 29: eHealth services (€ 10M, 2015) (PPI)
Publications and Videos

- A new leaflet on the EIPonAHA
- Overview of the 32 Reference Sites (Guide n°1)
- “How to guide” for scaling up - RS (Guide n°2)
- Compilation of Good Practices from Action Groups
- Video for the Reference Sites award ceremony, July 2013
- Video from the Conference of Partners 2013
- Video on longer and healthier lives 2014
Thank you for your attention!

EIP on AHA Website – the MARKETPLACE
http://ec.europa.eu/active-healthy-ageing

DG SANCO Website
http://ec.europa.eu/health