A healthy and Active ageing agenda in Europe
Outcomes of the EIP on AHA and future opportunities

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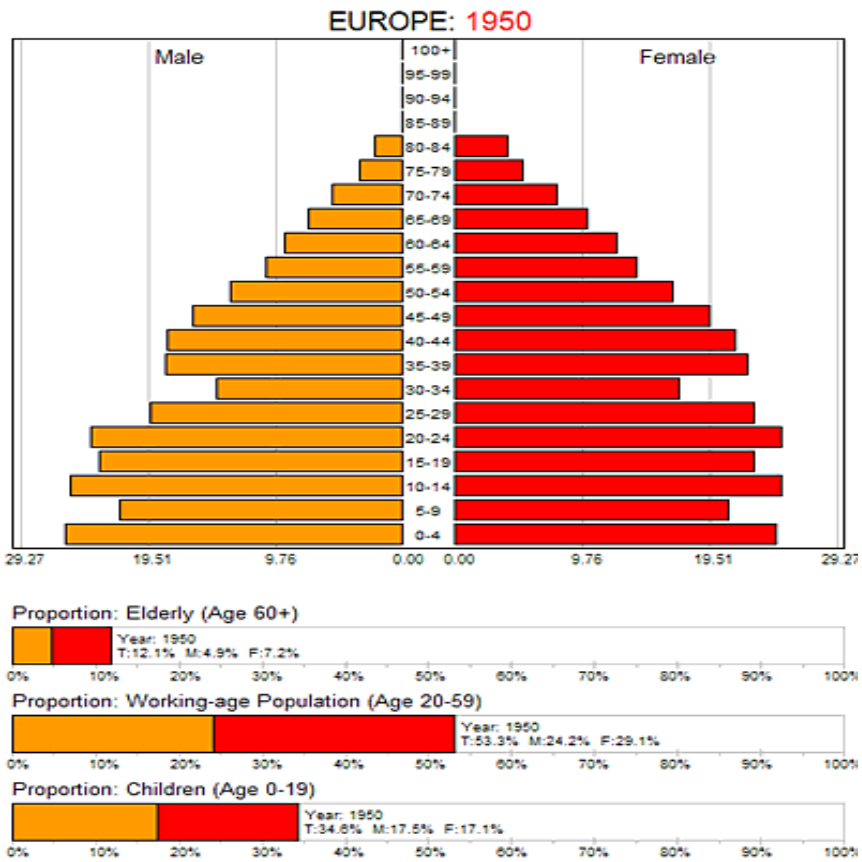
European City Committed to innovation in healthy living and active ageing
VLC-Health ecosystem,
Valencia 15th October 2015

The Challenge of an Ageing society



- ↑ Long term care conditions
- Healthy Life Years vs Life Expectancy
- ↑ Health Inequalities
- ↓ Financial sustainability
- adjustment of Health Professionals

New paradigm of ageing

FROM	*TO*
societal challenge	**major opportunity**
burden	**asset**
passive care	**pro-active care**
curing diseases	**improved functioning**

Dependency Ratio

- From 1:4 to 1:2
- 80+ doubles by 2025

Empowerment

- Active Ageing

Cost of Care

- Up by 4-8 % of GDP by 2025

New Care Models

- Integrated care
- Large efficiency gains

Human Resources

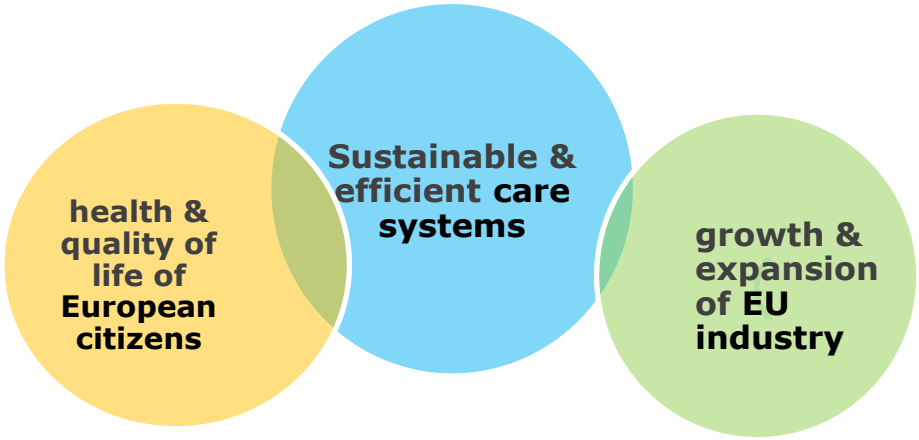
- Shrinking work force
- Lacking 20 mio carers by 2020

Growth and Markets

- 3000 B€ Wealth
- 85 Million Consumers

The EIP on Active & Healthy Ageing approach

+2 Healthy Life Years by 2020
Triple win for Europe

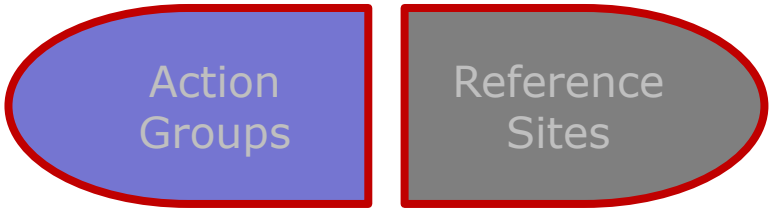


SIX AREAS OF INTERVENTION

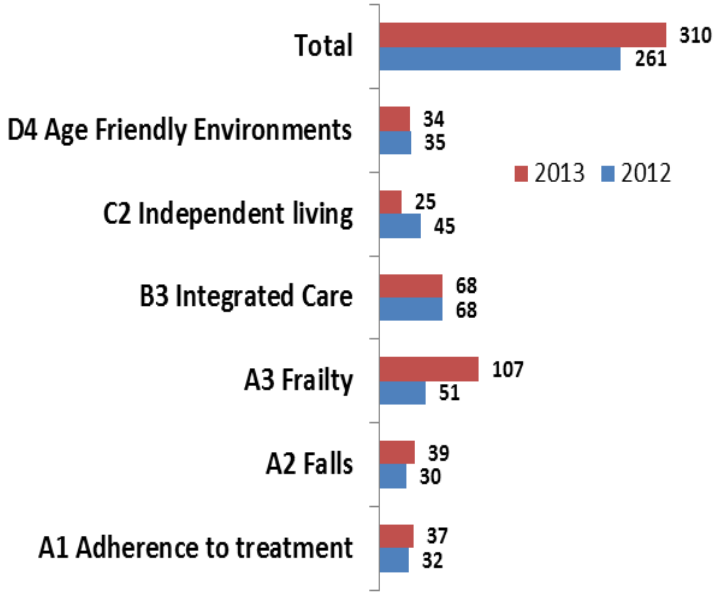
- A1. Adherence to treatment
- A2. Preventing falls
- A3. Frailty & cognitive decline
- B3. Integrated care
- C2. Independent Living
- D4. Age-friendly environments

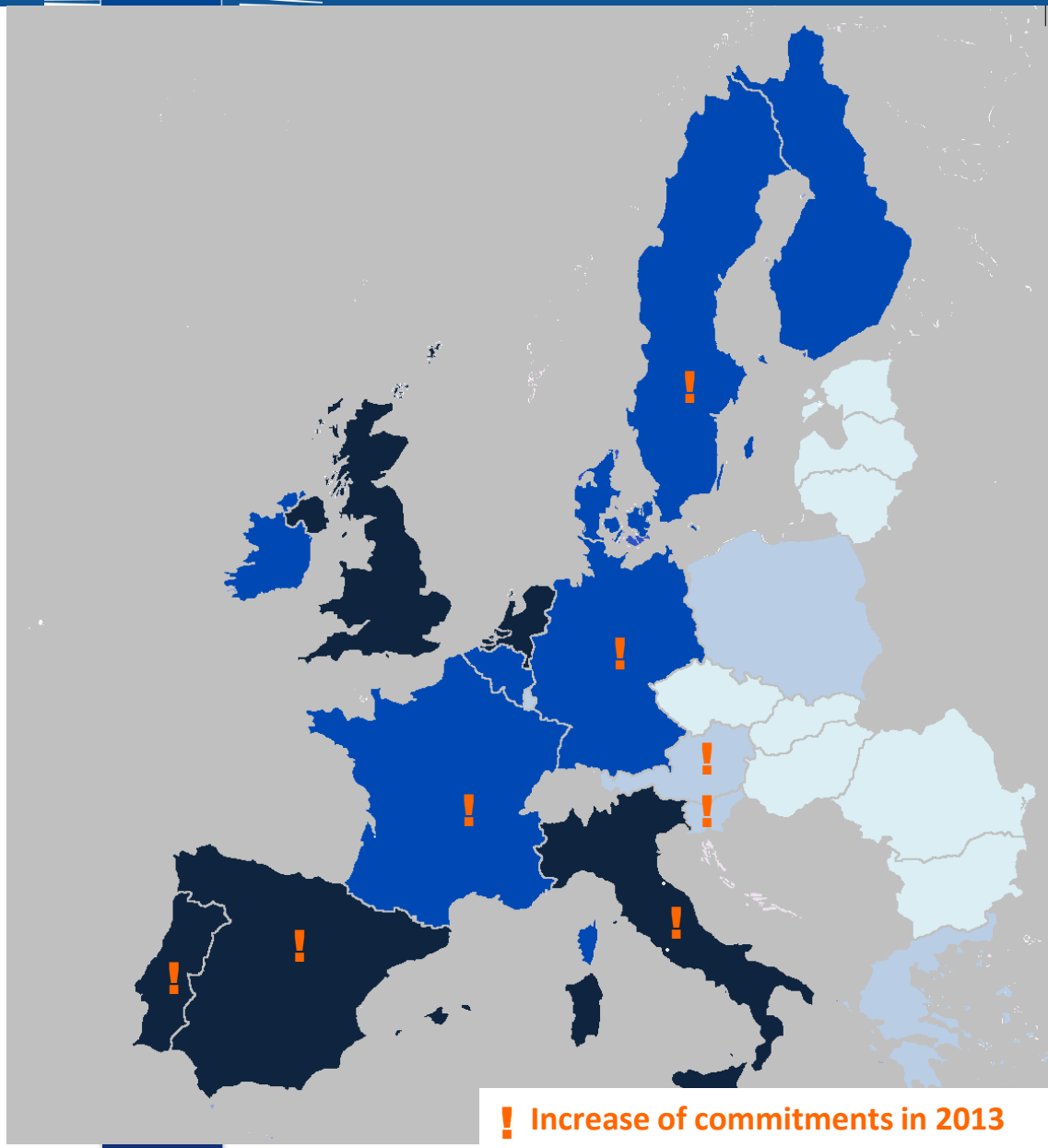
- Not a funding instrument but a stakeholder-led, cross sectorial, collaboration instrument for research, innovation & intervention.
- Launched 2012 as part of Europe 2020 Strategy.
- Reach a critical mass for action by pooling EU resources/ expertise & recognising innovation/ excellence.

TWO STREAMS FOR ACTION



Stakeholder commitments





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Action Group A1: Adherence to medical plans

WHY ARE WE WORKING ON ADHERENCE...

ONLY 50% of patients typically take their medications as prescribed

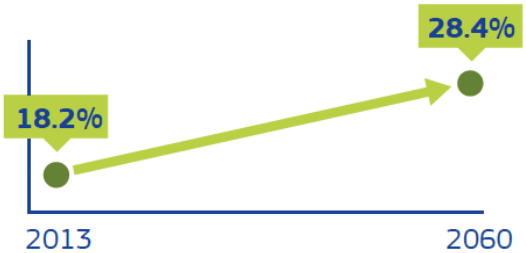
NEARLY 200,000 premature deaths per year among Europeans are related to non-adherence

WHO report on adherence to long-term therapies
Costing statement: Medicines adherence, NICE

"Increasing the effectiveness of adherence interventions may have a far greater impact on the health of the population than any improvement in specific medical treatments"

... IN AN AGEING POPULATION?

Share of population **over 65** is increasing in OECD countries:



Eurostat

- **Multimorbidity**, the co-occurrence of multiple diseases, affects **more than half of the elderly population**
- **Polypharmacy**, the simultaneous use of multiple medicines 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

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Action Group A3: Frailty and functional decline prevention

WHAT IS FRAILTY?

- Frailty is a syndrome related to the ageing process that describes the state of "**limited functional reserve**" or "**failure to integrate responses in the face of stress**"
- Frailty is a **social care** and **healthcare challenge** across the EU
- Frailty is associated **with increased risk of**:

PHYSICAL DECLINE
Limitation of physical functions such as staying upright, maintaining balance and walking, leading to disability

FUNCTIONAL DECLINE
Inability to engage in activities necessary or desirable in daily life, leading to dependency

COGNITIVE DECLINE
Worsening of cerebral abilities, leading to delirium, loss of memory and problems with language thinking and judgment

The more vulnerable an individual is, the higher the risk of falls, immobility or disability, institutionalisation and death

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Action Group B3: Integrated care

WHY DO WE NEED INTEGRATED CARE?

FOR PATIENTS

2 out of 3 people in retirement age have at least **two chronic conditions**

FOR HEALTH SYSTEMS

70% of **healthcare costs** are spent on chronic diseases

9% **of GDP**: Public spending on health

41% of healthcare costs are dedicated to **hospital care**

+1.5% **of GDP**: Projected increase by 2060

It is necessary to offer **alternative care models** to improve quality of life, health care and reduce avoidable hospitalisations / costs

→ **Integrated care model**

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Action Group C2: Interoperable living solutions

INFORMATION AND COMMUNICATIONS TECHNOLOGY (ICT) SOLUTIONS CAN HELP HEALTHY AGEING

ICT solutions can **prolong independent living of older people** and extend the time they remain active and safe in their preferred environment

with smart homes (lights, fall detection, safety, etc.)

they also have a huge potential to enhance **social inclusion** and **participation** of older people

through video conferencing and social media for contact with relatives

ICT solutions **enhance quality of work for carers** and make overall care provisions **economically sustainable**

by avoiding and reducing hospital stays through remote monitoring, safety monitoring

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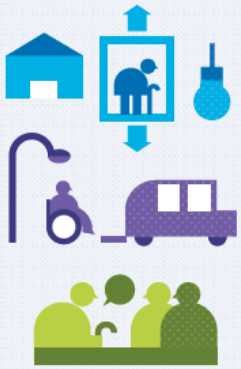
Action Group D4: Age-friendly cities, buildings and environments

WHY WORK ON AGE-FRIENDLY BUILDINGS, CITIES, COMMUNITIES AND ENVIRONMENTS?



✔ **Physical and social environments highly impact older people's health status and independence:**

- The **personal physical environment** can prevent or ease autonomy (e.g. presence of elevator, appropriate lighting system)
- The **surrounding environment** can prevent or ease physical mobility (e.g. street lighting or adequate pavements) and social integration (e.g. access to shops, appropriate transport services)
- The **social environment** impacts on the feeling of being part of a community or to be lonely (e.g. voice of older people heard in the urban planning policies, leisure activities tailored to older people needs and interests)

✔ **Adequate public policies can remove barriers:**

- Enable older people to age in better physical and mental health
- Promote their social inclusion and active civic participation
- Help them maintain a good quality of life

Reference Sites

32 RSs =>12 MSs
selected for self-assessment and peer-review
(innovation, scalability, outcomes)

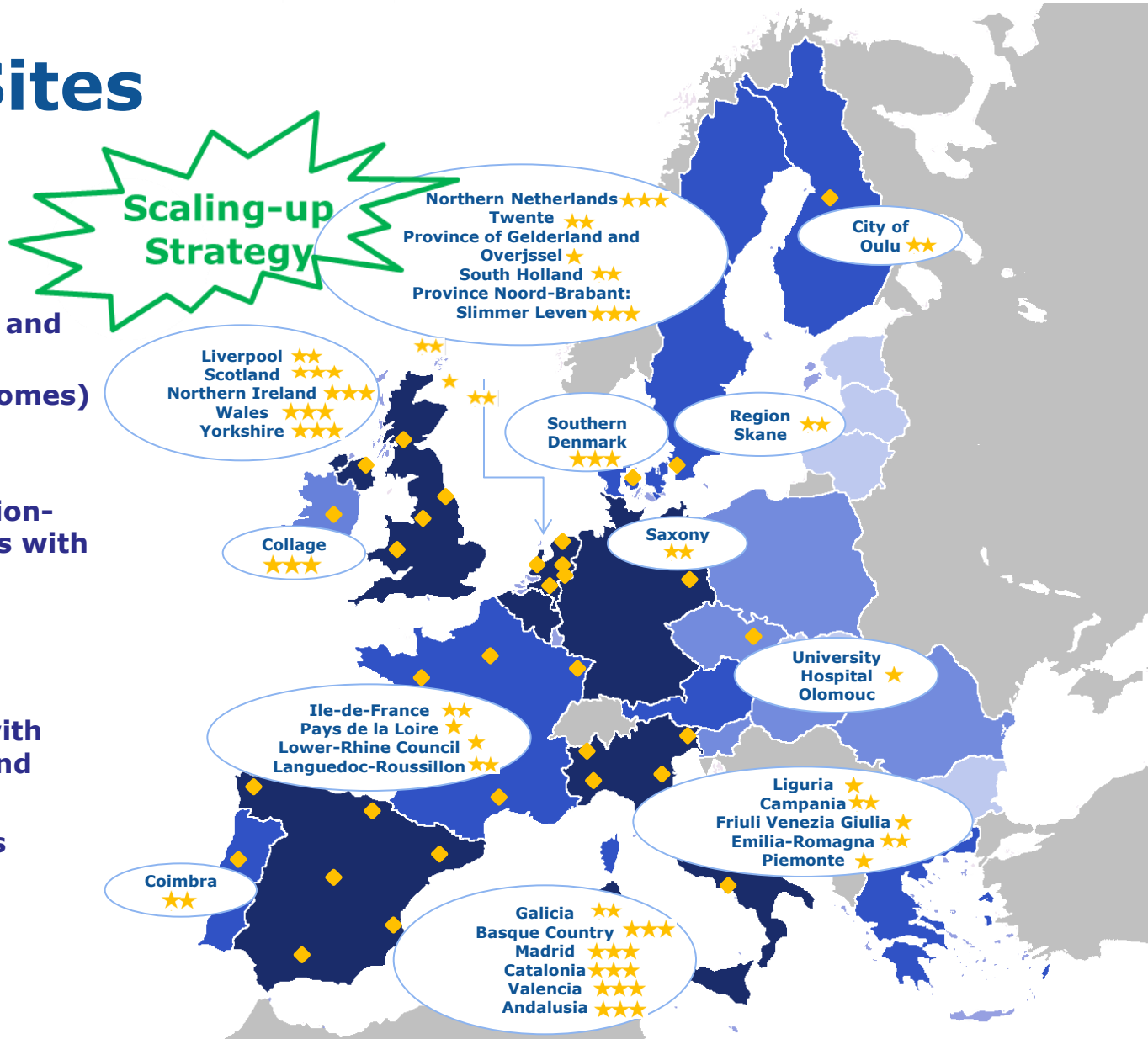
71 good practices of innovation-based integrated care models with sound impact on the ground

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



European Scaling-up Strategy in Active & healthy Ageing

A **roadmap** has been set up for the **next 12 months (2015)** to engage the relevant actors (EC, MS, regions) into concrete actions towards the implementation of innovations in practice, be it increase in coverage in the same location or replicability in other locations.

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Main successes of the Action Groups

- Collection of **Good Practices** which provides evidence and insights of recent experiences already implemented in different European countries and creation of repositories of information, practice & evidence

- **Collaborative work** on identified interventions & relevant issues:
  - **Adherence:** Specific indicators to assess polypharmacy & adherence; Medication review for polymedicated patients; Better use of pharmacy services and patient empowerment
  - **Falls prevention:** Awareness raising campaigns & technology tool box
  - **Frailty:** Work on Physical Activity, Nutrition, Frailty & Physical Decline, Cognitive Decline, Dependency and Caregivers including Guidelines on instruments for screening and diagnosis of frailty/functional decline

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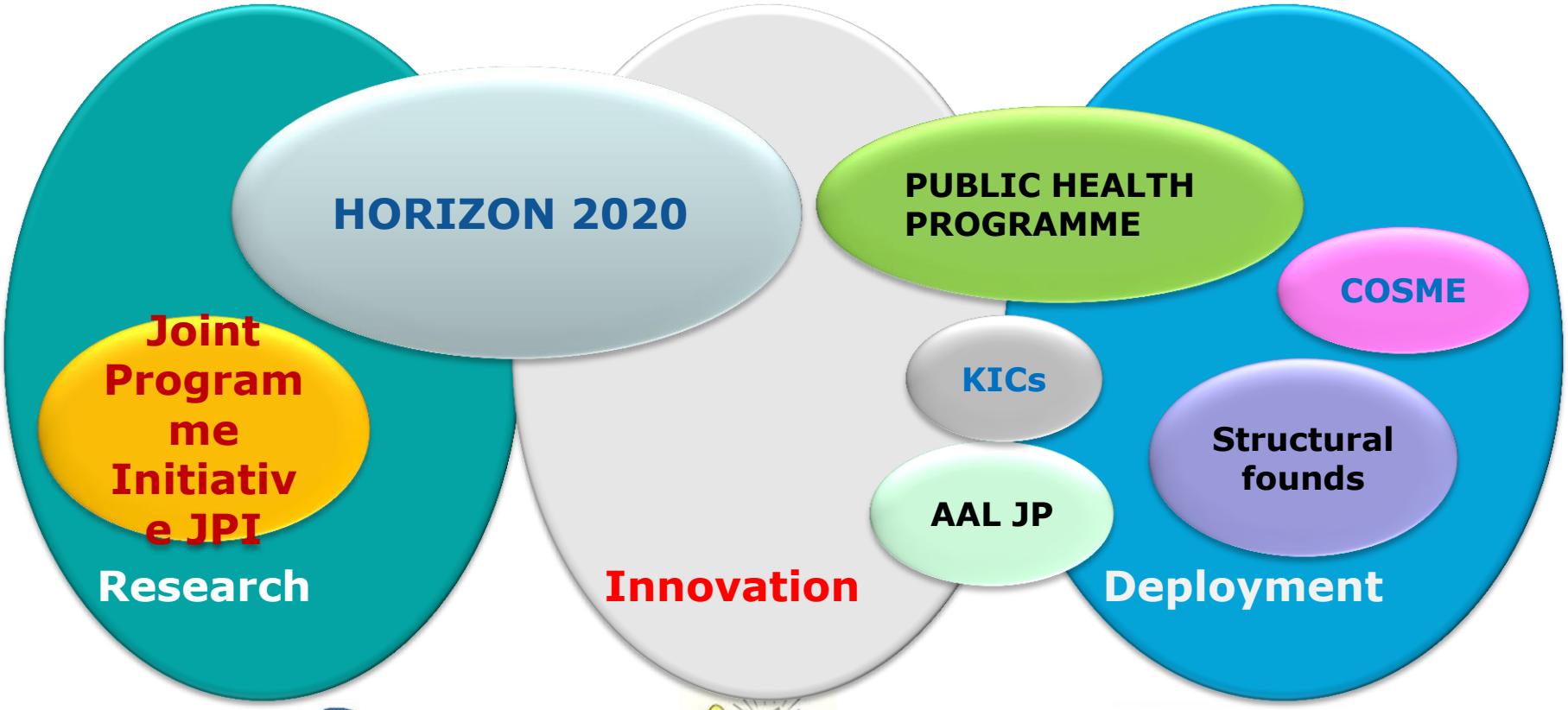
Main successes of the Action Groups

- **Integrated care:** Maturity models (organisational models, change management and ICT/Teleservices); Integrated care pathway for respiratory diseases; Risk Stratification mapping and Patient Empowerment framework
- **Independent living solutions:** Framework for impact assessment of independent living solutions (dementia, informal care and self-management) and standards and technical interoperability guidelines for social alarms
- **Age-friendly environments:** Focus on the involvement of older people at the heart of service creation; set up of new working groups on dementia supportive environments / Tourism & AHA and Architecture / housing and urban design on age-friendly environments; work towards an EU covenant on demographic change (7th Dec 2015); collaboration with WHO for an updated guide on age-friendly environments in Europe (Dec 2015).

EIP AHA - Founding opportunities



3rd Health Programme 2014-2020: scope and objectives

1) Promoting health, preventing diseases and fostering supportive environments for healthy lifestyles

2) Protecting citizens from serious cross-border health threats

3) Contributing to innovative, efficient and sustainable health systems

4) Facilitating access to better and safer healthcare for Union citizens

Budget for 2014-2020: €449.4 million

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Healthy Ageing in the Health Programmes

2012

- €4 million to the support EIP on AHA on care delivery, partnering for change, supporting older people's health

2013

- €7.3 million to support the EIP on AHA on multimorbidity, integrated care pathways, adherence to treatment and prevention of falls and frailty
- €4.7 million on a Joint Action on Chronic Diseases & Healthy Ageing: JA CHRODIS incl. workpackages on multimorbidity and health promotion and primary prevention

2014

- €5.7 million to support the EIP on AHA on integrated care, frailty & adherence

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WP 2015 – Health Programme 2015

- Call for projects (€2.5 million EU co-funding)

  To support the implementation & scaling up of good practices in integrated care, frailty prevention, adherence to medical plans and age-friendly communities.
  http://ec.europa.eu/chafea/health/projects.html

  Deadline: 15 September 2015

- Joint Action on Frailty

  Prevention of Frailty (€3.5 million EU co-funding)

  http://ec.europa.eu/chafea/health/actions.html

Framework conditions

Introduction of improvements into the regulatory & standards framework to overcome existing barriers to the spread of innovation:

- **Better interoperability of ICT services and systems**

  Promotion of common standards for open interoperable ICT solutions: differents ICT products/solutions are able to interact between them and jointly deliver integrated services to different contexts, users, providers

- **Public procurement of Innovation**

  Enable public authorities to launch tenders for innovative goods and services which might not yet be largely available on the market

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From the EIP on AHA to new health policies

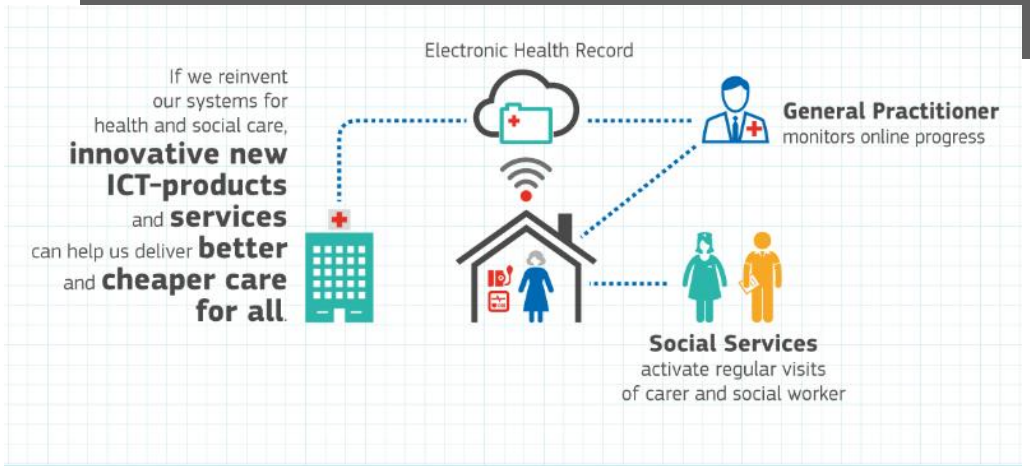
Silver economy

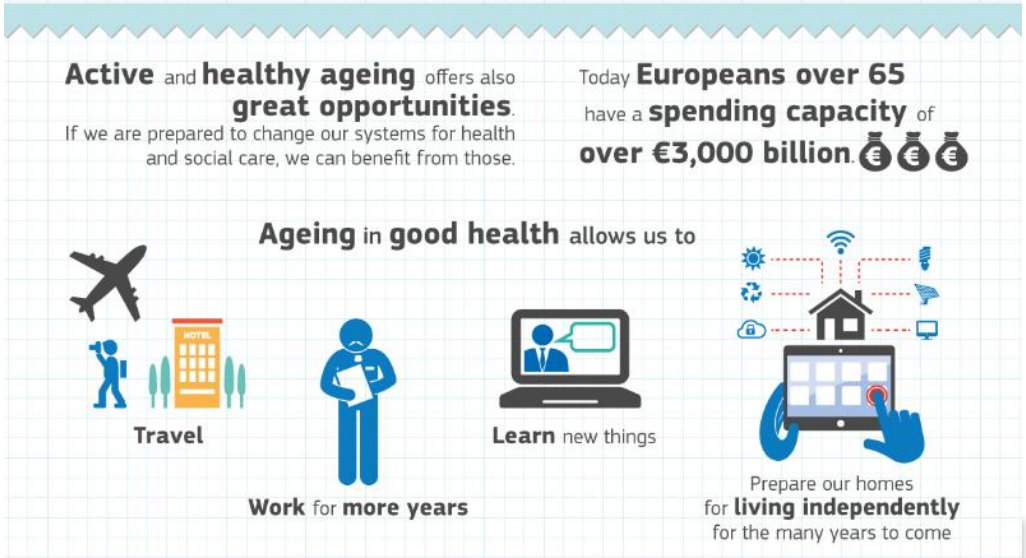
- National or regional plans in the MS
- EC priority

New EU health policies

- Prevention of frailty
- Addressing multimorbidity

Silver Economy:
Economic potential linked to ageing





- Opportunity to **reform health and care systems** to achieve more performing and less expensive services
  - e.g. use of ICT for telemonitoring, exchange of data between care professionals
- The ageing **"Babyboomers" consume goods and services** to maintain an active, autonomous and healthy lifestyle
  - e.g. tourism, entertainment, health & well-being, lifelong learning, smart age-friendly homes

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New EU health policies

- Actions on **frailty**, e.g. understanding and prevention of frailty, methodologies and tools for assessing the cost-effectiveness of measures to prevent & treat functional disability and dependency
  - **Joint Action on Frailty launched in 2015.**

- **Multi-morbidity** identified as a priority area to focus on
  - The European Commission will hold the **1st Conference on Multimorbidity on October 27th** to assess how Europe could address this challenge

To make an impact on new paradigm at EU level we need to…

32 Reference Sites

6 Action Groups

Strategic vision
Political support
New knowledge for innovative interventions & inform policies

Alignment of EC funding

Advocacy & visibility

Learn from experience

Operate in real world

Support research

identify & scale-up best solutions

Influence policy at EU level

Adapt Regulatory Framework conditions

Allocate resources efficiently

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Pubblicazioni, video, materiale promozionale

Leaflet on the EIP on AHA

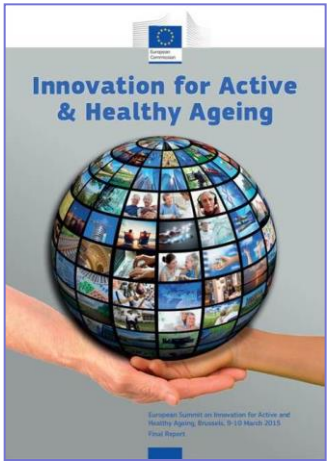
Overview of the 32 Reference Sites

"How to guide" for scaling up - RS

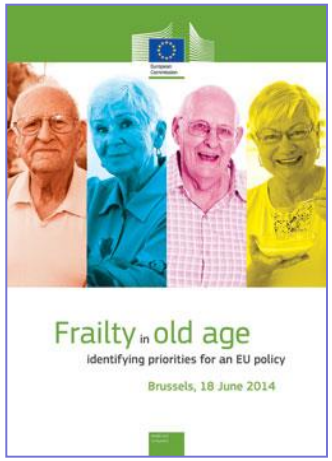
Compilation of Good Practices from Action Groups

Marketplace

Video on longer and healthier lives 2014



The European Summit for Active and Healthy Ageing March 2015



Frailty in old age Conferences, 2013 & 2014

EIP Marketplace:
https://webgate.ec.europa.eu/eipaha

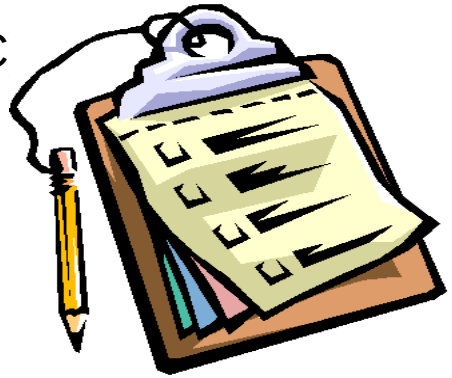
Future events…

Multimorbidity and polypharmacy: how to build a better evidence base

Brussels, 27th October 2015

Joint Action on Frailty Prevention, end November (TBC)

Conference of Partners, 9th & 10th December 2015 (TBC



Thank you for your attention!

Active and Healthy Ageing Partnership
http://ec.europa.eu/active-healthy-ageing

DG SANCO Website

http://ec.europa.eu/health

Infographics on Active and Healthy ageing

https://webgate.ec.europa.eu/eipaha/news/index/show/id/697