European Innovation Partnership on Active and Healthy Ageing

Marianne van den Berg

DG SANCO, European Commission
EIP on Active and Healthy Ageing

APPROACH:
- Ownership of key stakeholders
- High-level political commitment
- Very large-scale deployment & innovation
- Awareness and best-practice sharing across Europe
- Combining demand and supply sides of innovation
- Building on existing instruments and new ones

+2 Healthy Life Years by 2020

*Triple win for Europe*

- Health & quality of life of European citizens
- Sustainable & efficient healthcare systems
- Growth & expansion of EU industry

Priorities

- Innovation in Care & Cure
- Innovation in Prevention and Early Diagnosis
- Innovation in Active and Independent Living

Framework Conditions and Evidence
**EIP on Active & Healthy Ageing**

**specific actions**

- 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
Stakeholders and countries involved
(Source: First and Second Invitation (517 commitments))
The monitoring of the EIP on AHA is divided into two steps.

**EIP on AHA Process**
The process monitoring addresses different aspects: the involvement of stakeholders, the creation of synergies, knowledge transfers and the absorption of innovation by the health systems, the added value for the participating organisations and funding.

**EIP on AHA Outcome**
The outcome monitoring concerns the outcome of the individual interventions and the activities of the Action Groups in relation to the overall target of the EIP on AHA, namely, two additional Healthy Life Years (HLY) by 2020 and the Triple Win (Quality of Life, sustainability, innovation).

It should be emphasised that this framework is not about the evaluation of the individual interventions and/or commitments.
Integrated care models

Improved QoL and HLY

50% slower \(\downarrow\) in cognitive function
5.1% \(\uparrow\) of physical condition
70% slower \(\downarrow\) in depression
no of medications \(\downarrow\)

Process indicators
Geographical coverage of the model:
northern Italy + 15 replicated regions

Target group:
100 patients \(\times\) 15 = \(\geq\) 1500

Outcomes for model group (100 patients)
facility/hospital admissions & cost of health services

Outcome indicators

Market growth
Telehealth
Telemonitoring
EMRS

Innovation-based competitiveness
Sustainability of care systems
facility/hospital admissions & cost of health services

+ Healthy Life Years

HLY
At birth

Triple Win
Quality of Life
physical and cognitive function

Establish the link (theory & modelling JRC)
# Outcome Monitoring framework November 2013

<table>
<thead>
<tr>
<th>QoL</th>
<th>Sustainability</th>
<th>Innovation and growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>Management of health services (cost/business model, training/education, patient satisfaction, appropriateness of prescription, adverse drug effects, drug use)</td>
<td>Innovation</td>
</tr>
<tr>
<td>Physical activity</td>
<td>Hospitalisation ((re)admissions, length of stay, hospital visits, …)</td>
<td></td>
</tr>
<tr>
<td>Prevention and identification of risks (blood pressure, cholesterol level, glucose level, BMI, adherence level)</td>
<td>Care at home and institutionalisation (avoid institutionalisation, care home bed days)</td>
<td>Economic Growth (number of new SME’s)</td>
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<tr>
<td>Health Status (QoL, frailty, cognitive decline, functional status, mental well-being)</td>
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<td>Employment (employment rate, number of created jobs)</td>
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<tr>
<td>Participation in society</td>
<td></td>
<td></td>
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<tr>
<td>Mortality and fall incidents</td>
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</tbody>
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**Criteria selection indicator blocks:**

- **Legitimacy**
  Indicators used by commitments

- **Credibility**
  Validity and reliability of indicators (literature review)

- **Salience:**
  Linkage 2HLYs and Triple Win possible?
Outcome Quality of Life

Headline target

HLYs

Quantifying the EIP on AHA objective for QoL

QALYs

Outcome Indicators on commitment level

HrQoL

Mortality

Risk factors

Physical Activity

Primary outcome indicators

Common secondary indicators

Specific secondary indicators

Adherence

Frailty

Cognitive decline

Functional status

Falls

Nutrition

Mental health
Outcome
Sustainability

Price per unit in EURO's

- Hospital (re) admissions: 51%
- Length of hospital stay: 40%
- Hospital visits: 43%
- Institution alisation: 40%
- Other care resource: 49%
Outcome
Innovation and growth

Number of implemented technologies
Number of users of new technologies
Number of created jobs
Number of new SME's
EIP on AHA versus AAI

EIP on AHA

- Commitment level
- Quality of Life
- Sustainability
- Innovation and growth
- 2 Healthy Life Years

Active Ageing Index

- Household level
- Employment
- Participation in society
- Independent, Healthy and Secure Living
- Capacity and Enabling Environment for Active Ageing
EIP on AHA versus AAI

EIP on AHA
- Commitment in a specific region
- Quality of Life
- Sustainability
- Innovation and Growth
- 2 Healthy Life Years

Active Ageing Index
- Country level
  Independent, Healthy and Secure living
  - Physical exercise
  - Independent living
  Capacity and Enabling Environment for Active Ageing
  - Share of healthy life expectancy at age 55
  - Mental well-being
  - Use of ICT