

EUROPEAN INNOVATION PARTNERSHIP ON ACTIVE AND HEALTHY AGEING (EIP ON AHA) – THE OPPORTUNITIES FOR POLISH SCIENTISTS AND INSTITUTIONS

Europejskie Partnerstwo Innowacji
na rzecz Aktywnego i Zdrowego Starzenia się (EIP on AHA)
– możliwości dla polskich naukowców i instytucji

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SUMMARY

Europe is facing great social and economic challenges now, being a result of the ageing process progressing faster than ever. This, however, might be perceived also as an opportunity for innovation, as well as an additional impulse for the so-called "Silver Economy". To address these new needs and opportunities, the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA) was initiated by the European Commission in 2012. After three years of its activity, it has proved to be a strong movement of European stakeholders committed to innovation, with its overarching target to increase the average healthy lifespan by two years by 2020. The 'Triple Win' strategy for Europe is based on the concepts

of enabling the EU citizens to lead healthy, active and independent lives while ageing, improving the sustainability and efficiency of social and health care systems, and boosting and improving the competitiveness of markets for innovative products and services.

Now, the EIP on AHA opens new calls that enable new stakeholders to become partners of this collaboration. This provides a unique opportunity to Polish institutions, as well as scientists. In order to help them use this opportunity effectively, the history, aims, structure and achievements of the EIP on AHA are shortly described in this paper.

Keywords: EIP on AHA, ageing, Europe, Silver Economy, innovation

STRESZCZENIE

W wyniku nasilonego – bardziej niż kiedykolwiek dotychczas – procesu starzenia się, Europa mierzy się obecnie z ogromnymi wyzwaniami społecznymi i ekonomicznymi. Sytuacja ta może być jednak postrzegana jako szansa dla wyzwolenia innowacyjności oraz impuls dla tak zwanej srebrnej gospodarki. W celu sprostania tym nowym wyzwaniom i potrzebom, Komisja Europejska zainicjowała w 2012 roku powstanie Europejskiego Partnerstwa Innowacji na rzecz Aktywnego i Zdrowego Starzenia się (European Innovation Partnership on Active and Healthy Ageing – EIP on AHA). W ciągu trzech pierwszych lat swojej działalności Partnerstwo potwierdziło, że jest silnym ruchem europejskich interesariuszy, zainteresowanych wprowadzaniem w życie innowacji, aby osiągnąć przyswiewcający EIP on AHA nadrzędny cel, jakim jest wydłu-

żenie przeciętnego trwania życia w zdrowiu o 2 lata przed rokiem 2020. Strategia „Potrójnej wygranej” zakłada umożliwienie mieszkańcom Europy prowadzenia zdrowego, aktywnego i niezależnego życia pomimo starzenia się, poprawę odporności człowieka i efektywności systemów opieki socjalnej oraz zdrowotnej, a jednocześnie rozwój i wzrost konkurencyjności rynków medycznych dzięki wprowadzeniu innowacyjnych produktów i usług.

Obecnie Partnerstwo otwiera się na nowe wezwania, co pozwala nowym interesariuszom zostać członkami tego ruchu. Stwarza to unikalne szanse polskim instytucjom i naukowcom. Aby ułatwić skorzystanie z tych możliwości, w niniejszym artykule dokonano krótkiego przeglądu historii, celów, struktur oraz dokonań EIP on AHA.

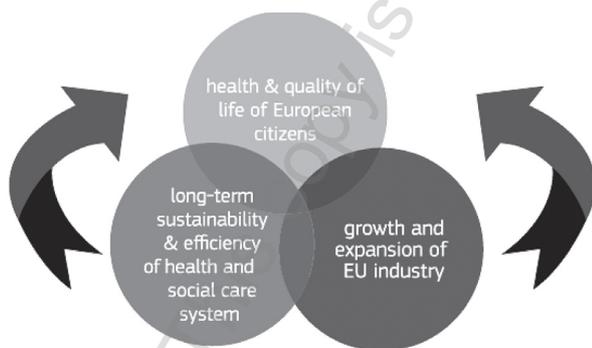
Słowa kluczowe: EIP on AHA, starzenie się, Europa, srebrna gospodarka, innowacje

(PU-HSP 2016; 10, 1: 19–23)

Background

Over the last century, Europe has experienced a considerable economic development, improved living conditions and great advances in medical sciences, which has resulted in more effective healthcare systems. These factors have contributed to the emergence of a new situation at the beginning of the third millennium: Europe is facing a completely new demographic challenge. The increased percentage of older people in Member States may be perceived both as an opportunity for the boost of Silver Economy, as well as a source of continuous rise in healthcare and social security costs. Regardless of which of these two perspectives is adopted, the consequences of this demographic challenge for individual national healthcare systems are acute. Older people represent a large proportion of the population affected by chronic diseases or multiple chronic diseases. Therefore, in order to adapt and get ready to respond to the needs of these new patients, the design of the European healthcare systems has to be revised and redefined.

This is one of the numerous reasons for which ageing has become a major concern for European researchers, and policymakers. This was also reflected by the actions taken by the European Commission which has identified active and healthy ageing as a major societal challenge common to all European countries, and an area which presents a considerable potential for Europe to lead the world in providing innovative responses to this challenge.

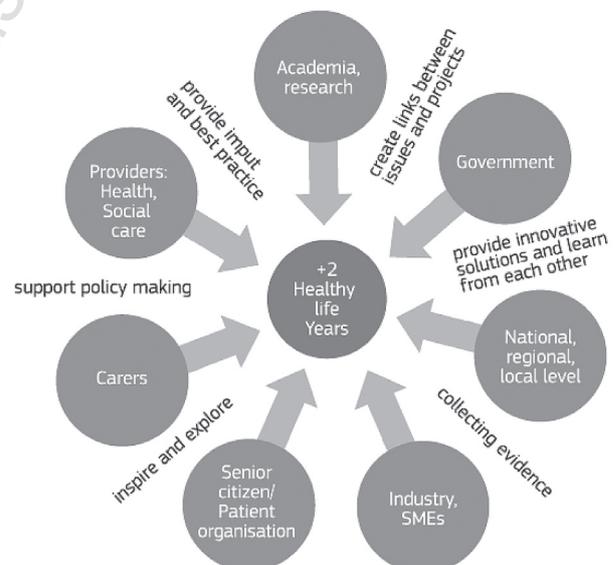


Source: [1].

Figure 1. Triple win strategy for Europe

In response to these challenges, the European Innovation Partnership on Active and Healthy Ageing (EIP on AHA) [1] was initiated by the European Commission with the following objectives, which altogether stand for the ‘Triple Win’ strategy for Europe (Figure 1):

- To enable the EU citizens to lead healthy, active and independent lives while ageing;
- To improve the sustainability and efficiency of social and health care systems;
- To boost and improve the competitiveness of the markets for innovative products and services, responding to the ageing challenge at both the EU and global level, thus creating new opportunities for businesses.



Source: [1].

Figure 2. The overarching target of the EIP on AHA is to increase the average healthy lifespan by two years by 2020, with a number of cohesive approaches

This is realised in the three areas of prevention and health promotion, care and cure, and active and independent living of the elderly. The overarching target of this partnership is to increase the average healthy lifespan by two years by 2020, using a multiphase and multidimensional approach (Figure 2).

Table 1. The EIP on AHA Action Groups

Action Group A1: Better prescription and adherence to medical plans for older patients
Action Group A2: Personalized health management, starting with a Falls Prevention Initiative
Action Group A3: Prevention and early diagnosis of frailty and functional decline, both physical and cognitive, in older people
Action Group B3: Replicating and tutoring integrated care for chronic diseases, including remote monitoring at the regional level
Action Group C2: Development of interoperable independent living solutions, including guidelines for business models
Action Group D4: Innovation for age friendly buildings, cities and environments

Several layers of collaboration have been created within the EIP on AHA. At first, there are 'Action Groups' – which are assemblies of stakeholders committing to work on a number of actions related to ageing. So far, 6 Action Groups have been created (Table 1), covering diverse drivers of active and healthy ageing. Individual stakeholders, or a group of stakeholders could go for 'commitment' – a piece of work with an identifiable outcome. In the latter case, the 'collaborative work' was in place. Finally, several 'Reference sites' have been identified, these being the coalitions of regions, cities, health providers and care organisations that were able to give evidence of their impact on citizens and systems in terms of a comprehensive and innovative-based approach to active and healthy ageing.

After three years of intensive work (the first period of the EIP on AHA activity covered the years 2013–2015), the European Innovation Partnership on Active and Healthy Ageing has become the largest European community of stakeholders engaged in the develop-

ment and deployment of innovation for Europe's ageing society and an important part of the European social and healthcare landscape. Originally set up by the European Commission, it has become a vivid collaboration of diverse European stakeholders, sharing the vision of prosperous economies and happy societies due to the broad introduction of the concept of Active and Healthy Ageing into daily life. Today, the partnership brings together leading industrial players, research institutes, a vibrant ecosystem of innovators, start-ups, SMEs, end-user organisations, regional and national authorities, which have invested in the scaling up of innovative solutions for the ageing society. Together they develop the tools, ideas and innovative socio-economic models that can support the development, deployment and impact measurement of some of the most innovative solutions for active and healthy ageing. Achievements of the EIP on AHA Action Groups are summarised in the 'State of Play' publications available online [2].

Second period of the EIP on AHA activity: Renovated Action Plans

Within the first period of its activity, the EIP on AHA proved to be a mature collaboration of European stakeholders able to initiate a cross-European movement towards active and healthy ageing. Over this period, several lessons were learnt, according to which the Action Groups prioritised new areas for their activities. This process was supported by the European Commission, which provided clear guidelines to renovate the existing Action Plans in the EIP on AHA Strategic Implementation Plan [3] and Operational Plan [4].

Now, the new perspective of the EIP on AHA collaboration for the period 2016–2018 is open. For this period, each Action Group has agreed on the Renovated Action Plan, which sets both basic, as well as operational objectives for the period. These documents are available online at the EIP on AHA portal [2].

Table 2. Synergies as accepted by the Task Force in December, 2016

Ref.	Title	General Objectives	Interested AGs
SYN_01	Information technology and adherence in ageing population with chronic diseases and polypharmacy	To increase the adherence to treatment of elderly adults with chronic diseases and polypharmacy (i) assessing the role of ICT-based solutions, such as advanced processing of data, decision support applications and remote monitoring and consultation systems, and (ii) implementing tailored ICT-based interventions; it is expected that the knowledge that will be created will support stakeholders to take action towards improving the life quality of the population of the elderly.	A1, A2, A3, B3, C2
SYN_02	'Masters of AHA' – educating seniors, health and social carers and entrepreneurs	To contribute to the development of the dynamic and sustainable care systems of tomorrow through a distinctive Masters in Gerontology and Geriatrics that will encompass education, stakeholder empowerment and inter-disciplinary, inter-professional research, according to different backgrounds and competences	A1, A2, A3, B3, C2, D4

Table 2 contd.

Ref.	Title	General Objectives	Interested AGs
SYN_03	Patient and citizen Empowerment across the EIP Action	To develop a consensus view of what patient empowerment is, sharing progress plans regarding the evolution of the respective patient/user empowerment objectives within the different Action Groups. On the basis of a common understanding of both the content of the topic and what the different groups are doing, to look across the EIP as to how this more holistic perspective can contribute to scaling up of good and effective practices via transverse, as well as vertical processes and can support the overall objectives of the EIP.	A1, A2, A3 B3 C2 D4
SYN_04	Maturity Model for Scaling-up Innovative Solutions in Europe	To share learning and expertise through the development of the B3 Maturity Model for Integrated Care and by developing other specific challenges and a self-assessment tool; To test and validate the Maturity Model(s) as a tool supporting the scaling-up and replication of innovative solutions in Europe and as a tool facilitating knowledge transfer and the exchange of good practices in Europe.	A1, A2, A3 B3 C2
SYN_05	Active and Healthy Ageing in the framework of Responsible Research and Innovation	To create an ecosystem around RRI for AHA by identifying the current state of the actions and initiatives, fostering policy dialogue amongst the relevant stakeholders in the AHA, proposing a new roadmap trying to involve as many local and regional stakeholders as possible and providing and monitoring the progress indicators.	A1, A2, A3 B3 C2 D4
SYN_06	Falls and fall injuries – A Grand Societal Challenge involving prevention and healthy ageing of seniors	To enable macro-, meso- and micro-level analysis including, on the one hand, governance and policy-making based screening, prevention, rehabilitation and monitoring. On the other hand, it will include an integration with the Silver Economy and will be related to WHO's consultation on the Global Strategy and Action Plan on Ageing and Health; To support regional and municipal levels to act and become deeply engaged in fall prevention campaigns, thereby enabling and promoting early frailty and fall risk assessment, and identifying frail and faller profiles; To raise awareness and promote behavioural changes amongst citizens in prevention of frailty and fall injuries.	A1, A2, A3 B3 C2 D4
SYN_07	Impact of a Community-based Programme on Frailty Prevention and frailty Mitigation (ICP – FPM)	To set up a public health approach to manage frailty in community dwelling older adults, to be validated in different EU member states (at least six) through integration within the community, primary care and the assessment of good practices and impact, including an ICT tool.	A1, A2, A3 B3 C2
SYN_08	Multi-morbidity of chronic respiratory diseases in old age adults: an under-recognised societal problem	Chronic respiratory diseases (CRD) are major chronic diseases intertwined with ageing. CRDs negatively impact AHA. Prevention and control of CRD in the ageing population is a priority. A stepwise action plan is proposed including scientific societies and patient organisations.	A1, A3 B3

With the beginning of March 2016, the new call for Reference sites was open, and a new EIP on AHA Portal has been launched. However, probably the most important news is that also a new call for commitments has been opened. This is an opportunity for the established members of the EIP on AHA collaboration, as well as for the newcomers to come forward with projects and initiatives that they will implement in the coming 3 years. By submitting their commitment, they will become a partner of the EIP on AHA, sharing all the member benefits. The commitments should be

submitted online via the portal and should be in line with the renovated Action Plans 2016–2018. Along with commitment, stakeholders may get involved in the synergies, which are to reinforce the collaboration of the Action Groups on specific matters of common interests. Synergies are referenced as thematic working groups, whose interests are cross-cutting to one or several Action Groups under the EIP on AHA. For the time being, as many as 8 diverse synergies have been accepted (Table 2).

Is the EIP on AHA an opportunity for Polish stakeholders?

Very few Polish stakeholders participated in the EIP on AHA collaboration within the first period of its activity. Now, with the new calls open, Polish stakeholders are invited to join the collaboration on the equal conditions as their West European counterparts. However, when assessing the opportunities that the EIP on AHA brings to Polish scientists, and Polish stakeholders, one has to understand its role well. Despite some expectations, the EIP on AHA is not a funding line. Therefore, all those expecting it to be a direct source on financial support for either scientific research, or social innovations might be disappointed. On the other hand, several calls for proposals, including Horizon 2020 calls, are dedicated for the EIP on AHA partners. Several funding opportunities are available, as well. Their details are available on the EIP on AHA portal [5].

What other sort of benefits may the participation in the Partnership bring? Undoubtedly, an opportunity to learn the best practices, proven to work in other regions, is an unquestionable asset here. The same is true of sharing experiences and ideas on the European forum. This might be the first step in the search for private and public investors, ready to invest in the scaling up process. In such a case, being a part of the Active and Healthy Ageing movement may be a sort of 'quality mark' that distinguishes a stakeholder among the others.

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The conflict of interests

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