The first Conference of Partners of the European Innovation Partnership on Active and Healthy Ageing took place in Brussels yesterday. The Conference was headlined by European Commission Vice President Neelie Kroes, Commissioner Maire Geoghegan Quinn, Kathleen Lynch, the Irish Minister of State from the Department of Health and Department of Justice, and the Spanish Secretary General of Health and Consumers, Ministry of Health, Social Services and Equality, María Pilar Farjas Abadía.

High level representatives and Ministers from European regions and innovative projects discussed how to implement and scale up innovations for active ageing and what contribution they can make to regions. They were joined by leading figures in the field of active and healthy ageing from across Europe, from universities and research groups, public authorities, health providers, industry and non-governmental organisations.

Six Action Groups presented Action Plans which tackle a specific challenge in this field from falls, which account for almost one third of fatal injuries amongst older people to tele-monitoring which enable chronically ill patients to live longer at home. The Action Groups are made up of many stakeholders: from national government and regions to hospitals, municipalities, health care professional organisations, insurers and others.

The European Innovation Partnership is about scale and impact. It is not a funding instrument for projects, but a partnership among stakeholders, facilitated by the Commission, to change how health and social care for older people are delivered across Europe. The key element is pooling resources, projects and initiatives that are scattered around Europe, and/or are too small to overcome the barriers of divided markets and rigid practices and regulations. This implies coordinating and scaling-up actions, sharing best practice and developing standards and guidelines at European level. This way, the critical mass that turns the ageing challenge into an opportunity can be achieved.

The Action Groups include 261 commitments, by over 3000 stakeholders from all Member States, and the Action Plans aim to improve the quality of life of four million European senior citizens between now and 2015.
The six Action Plans address the following areas:

• Prescription adherence. Ensuring that patients follow their prescriptions: new approaches to prescription adherence for various chronic diseases in at least 30 EU regions. Today, only 25% of older people with chronic conditions (heart or lung conditions for example, or combinations – multi-morbidity) take their medication correctly at the right times. An effective adherence approach could improve their condition drastically or prevent decline.

• Fall prevention. Launching and scaling-up programmes for fall prevention and early diagnosis in at least 10 European countries by 2015. Older people sooner or later become prone to falling. Tele-monitoring can help to quickly detect or even prevent falls. By following training programmes and keeping active, older people can prevent falling or recover quicker if it happens.

• Frailty and malnutrition. A program for the prevention of functional decline and frailty among the elderly that will reach at least 1000 care providers by 2015. By supporting people in following a healthy and active regime (diet and exercise), they can live independently in their own homes for longer.

• Integrated care. Deploying, in more than 20 regions, programmes for chronic disease management and integrated care that meet the needs of older persons and enhance system efficiency. With tele-monitoring people with chronic conditions and multi-morbidity (but also their carers) do not have to travel back and forth between doctors, hospitals and care institutions and can monitor and self-manage their own condition and health care choices.

• Independent living. Improving the uptake of interoperable solutions for independent living that enable people to live independently for longer by providing for social contacts, alarm functionalities, and various household services. Older people can use many ICT applications to prevent loneliness, social isolation or premature admission to a nursing home, provided these are interoperable, well integrated and senior-friendly.

• Age-friendly environments. Implementing innovative age-friendly practices at regional and local level, and fostering physical /environmental innovation and practice, including the use of ICT, whilst also promoting a campaign for a covenant of major cities, regions, and municipalities. Cities, villages and public areas have to change to adapt to the needs of older people: more places to rest, easier access to buildings and safer public spaces. A systematic approach is needed to prevent older people from becoming confined to their own home.

The European Innovation Partnership on Active and Healthy Ageing will start implementing these 6 Action Plans. The European Commission with the Joint Research Centre is developing a monitoring framework to be able to report on the progress and impact of the Action Plans on European people, society and economy.

This year, 54 Regions and municipalities applied to be candidate Reference Sites, to exchange good practice and share their experiences with innovative approaches to active and healthy ageing. Reference site representatives are discussing their intentions and expectations at the conference today.

For more information, please visit: https://webgate.ec.europa.eu/eipaha/

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