SUSTAINABLE PLACES 2020

Sustainable Housing supporting Health and Well-being

October 30th , 2020

Chaired by

tecnalia Inspiring Business

Homes4Life

TeNDER

pharaon

Interreg 2 Seas Mers Zeeën AGE'IN

SMART HEALTHY AGE-FRIENDLY ENVIRONMENTS
STAKEHOLDERS NETWORK SHAFE

Hands-on SHAFE

smartwork

NET4 age-friendly

cost EUROPEAN COOPERATION IN SCIENCE & TECHNOLOGY CA19136

Horizon 2020
European Union funding
for Research & Innovation

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SMART HEALTHY AGE-FRIENDLY ENVIRONMENTS
STAKEHOLDERS NETWORK
SHAFE

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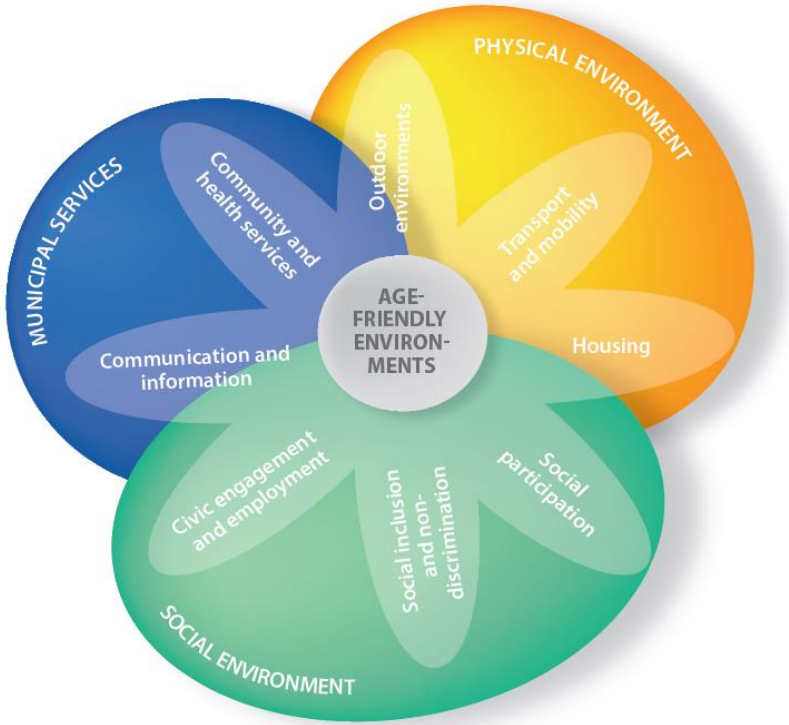

Hands-on
SHAFE

smartwork

NET4
age-friendly

Homes4Life

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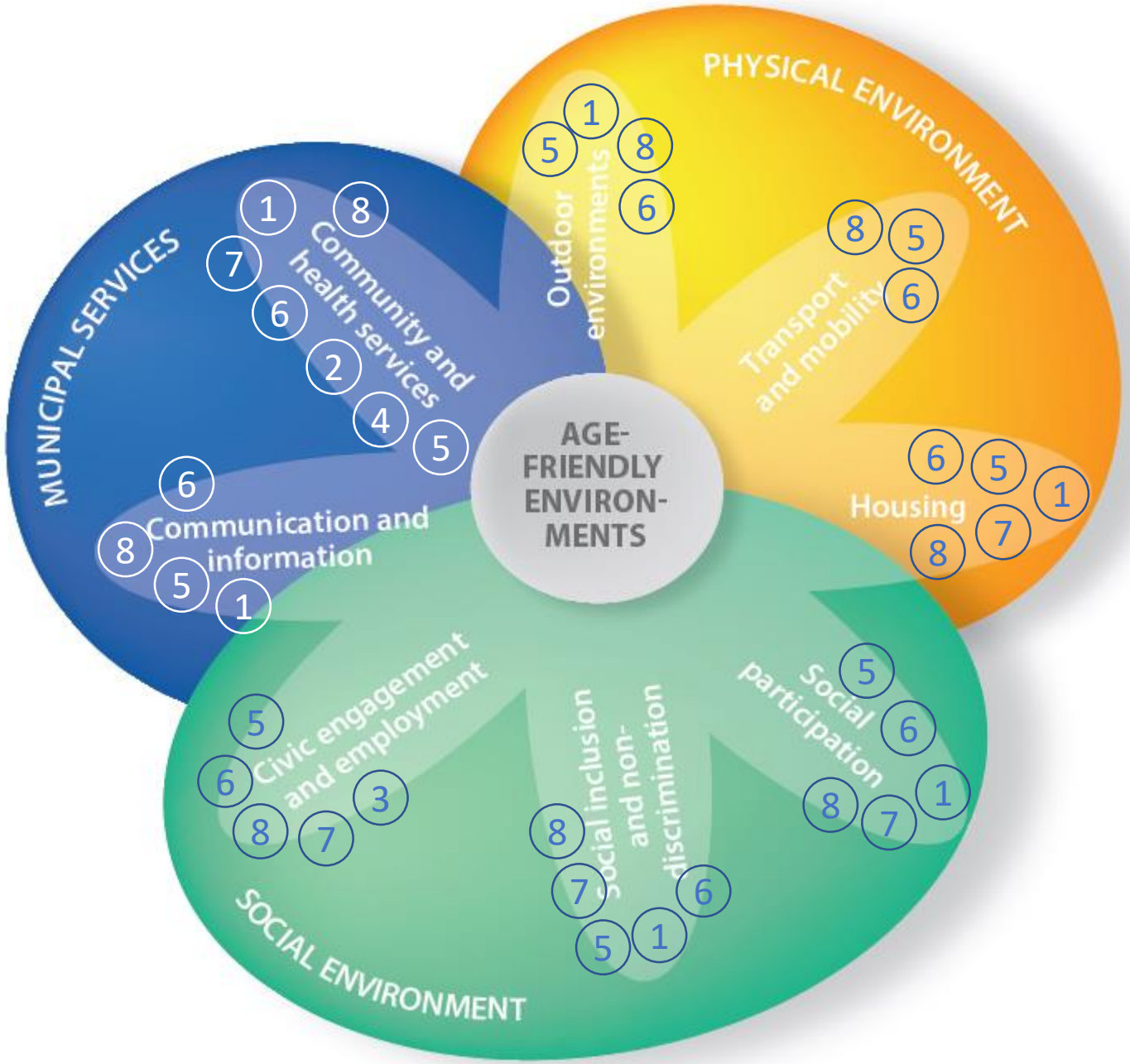

SUSTAINABLE PLACES 2020

AGENDA

9:00-9:05	Welcome statement	Irina Kalderon Libal, Policy Officer, EC
9:05-9:10	Workshop overview	Silvia Urra, TECNALIA

Housing enabler & Market analysis

9:10-9:25	AGE'IN	Aline Ollevier, VIVES University of Applied Sciences
9:25-9:35	Q&A	Olatz Nicolas, Tecnalia

Innovative solutions for housing supporting health and well-being

9:35–9:50	TeNDER	Annelore Hermann, GATV, Universidad Politécnica de Madrid.
9:50–10:05	SMARTWORK	Charalampos Vassiliou, BYTE
10:05–10:20	PHARAON	Filippo Cavallo- University of Florence
10:20–10:40	Q&A	Olatz Nicolas, TECNALIA
10:40–10:50	Break	

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AGENDA

Supporting investment into and implementation of age-friendly housing

10:50–11:05 Homes4Life ..... Silvia Urra, TECNALIA

Get involved: age-friendly housing networking and clustering

11:05–11:30 Smart Healthy Age-Friendly Environments – policy and implementation ..... Carina Dantas, Cáritas Diocesana de Coimbra

11:30–11:50 Q&A ..... Olatz Nicolas, TECNALIA

11:50–12:20 Discussion, wrap-up and next steps ..... Silvia Urra, TECNALIA

12:20–12:30 Conclusion ..... Irina Kalderon Libal, Policy Officer, EC

12:30 –End of the session

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AGE IN' Project (Age Independently)

Aline Ollevier

30/10/2020 – Sustainable places

SUSTAINABLE
PLACES

Main objective

Keeping the ageing population independent for longer at their own home, combining house adaptation and local ecosystem for ageing population.

Improving their quality of life and quality of their surrounding environment (services, public space…).

Promote actions in order to develop **social links.**

Partnership

Lead Partner: Boulogne sur mer Développement Côte d'Opale

Municipalities

The town of Boulogne sur mer and the city of Bruges

Community centres/ social centres :

- Boulogne sur mer, Saint Martin and Wimereux community centres
- OCMW/ MINTUS in Bruges

Housing sector partners :

- Habitat du littoral (social housing organisation)
- WAC Zeuws Vlaanderen (NGO in charge of housing adaptation for seniors (NL)

Universities :

VIVES University (B)

University of Plymouth (UK)

Other

Eurasanté (network of companies dealing with health issues)

Age UK

Main outputs

Adapt housing and public space

-Understand 55+ current and future needs (diagnostic/ **screening of housings and districts).**
-empower 55+ to adapt their housing to remain independant at home for longer (**awareness raising of seniors/ site visits).**

-Pilot actions to improve the offer of adapted houses and public spaces (**social housing awareness raising**…)

-Pilot network to promote **adapted houses and urban spaces for elderly.**

-Tests in living labs to improve current technologies and products.

Main outputs

Strenghten social links and reduce social isolation

-Strategy to **detect isolated seniors** and identify their weakness and specific needs

-Pilot actions to **build social networks** around socially isolated people

-Pilot actions in order to animate a community of inhabitants
-Demonstration actions to increase digital literacy

Pilotes

- **Flats with various range of house adaptations** et adaptation for seniors (Bruges and Boulogne sur mer)

- **Home automation labs** (universities in B and UK) : offer new tools more adapted to seniors needs and awareness raising of poeple who will visit the pilots.

- **« smart kitchen » adapted to senior needs** will be used for workshops with elderly (Social Centre in Boulogne sur mer)

- **Public space improvement (**Boulogne sur mer and Bruges)
Groups of Seniors taking part to the diagnostic.

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What about our housing?

The housing enabler

Based on the Enabler Concept (Steinfeld et al, 1979)

Captures objective aspects of housing:

- Housing standard Environmental barriers
- Magnitude of accessibility problems
- In addition: Functional profile (profile of functional limitations)
- Type profiles
- Number of functional limitations - A set of variables for use in research

Complete Instrument – 3-step procedure Individual level, e.g. housing adaptations, relocation councelling

Group and population levels, by means of data collected with individuals or the use of type profiles

Screenings in West Flanders

Type of housing

Country			Frequency	Percent	Valid Percent
Belgium	Valid	House	62	56,4	57,4
		Multi dwelling house	34	30,9	31,5
		Bungalow	12	10,9	11,1
		Total	108	98,2	100,0
	Missing	System	2	1,8	
	Total		110	100,0	

Screenings in West Flanders

Location

- City 31,5%
- Suburb 54,6%
- Rural 13,9%

Construction date

- Mean 1960

Birth year resident

- Mean 1946

Profile	Description
Profile 1	only limitations in mobility (reduced function of the lower limbs and spine, balance, endurance and coordination)
Profile 2	limitations in mobility and upper limb
Profile 3	limitations in mobility, upper limb and dependence on mobility aids (walking aid and wheelchair)
Profile 4	limitations in mobility, upper limb, dependence on mobility aids and loss of vision

Accessibility problem score

The higher this score, the higher the accessibility problems for a specific profile.

Profile 1							
	Accessibility problem score Mean			Kruskal-Wallis one way analysis of variance			
				Mean rank			P-waarde
	House	Appart-ment	bungalow	House	Appart-ment	bungalow	
Exterior	46,21	49,76	41,58	53,19	60,59	44,04	0.255
Entrance	28,98	78,68	25,00	40.95	85,07	37,88	0,000
Indoor	121,00	84,74	71,76	72,87	32,82	21	0,000
Total	196,19	213,18	138,25	55,19	76,79	13,25	0.000

EXTERIOR

PROFILE 1 only limitations in mobility (reduced function of the lower limbs and spine, balance, endurance and coordination)	PROFILE 2 limitations in mobility and upper limb
high kerbs, more than 4cm **n=64; 9,76cm**	no resting surfaces
irregular/uneven surface	
letterbox only reachable by steps or other differences in level(>15mm) and difficult to reach in height (0,8-1m)	
refuse room/refuse bin only reachable by steps or other differences in level and difficult to reach (0,8-1m)	
unsafe surface in car park	

ENTRANCES

PROFILE 1 only limitations in mobility (reduced function of the lower limbs and spine, balance, endurance and coordination)	PROFILE 2 limitations in mobility	PROFILE 3 limitations in mobility, upper limb and dependence on mobility aids (walking	PROFILE 4 limitations in mobility, upper limb, dependence on mobility
n=97; 11,44cm high tresholds or steps at entrance (>15mm)		**n=55;74cm** narrow door opening, less than 84cm	sitting-out place/balcony too narrow (less than 1,5m)
n=98; 11,36cm sitting out place/balconny have level difference		wide gaps in the floor (more than 5mm)	
heavy doors, not automatically, do not stay and cannot be fastened in open position or close to quickly		insufficient manoevring space at doors	
stairs: high, low and/or irregular heights of risers, no handrails/only one side, no alternative for stairs, narrow or irregular depth of stair treads			
lift: doors do not stay in open position, close to quickly and cannot be fastened, no seat in lift, controls placed to high or to low, doesnt stop at the same level as building floor, no handrail			

GENERAL INDOOR

PROFILE 1 only limitations in mobility (reduced function of the lower limbs and spine, balance, endurance and	PROFILE 2 limitations in mobility and upper limb	PROFILE 3 limitations in mobility, upper limb and dependence on	PROFILE 4 limitations in mobility, upper limb, dependence on mobility
Stairs: treads with narrow/irregular depth, neccassary stairs for dwelling functions(upstairs, basement, laudryroom, storage areas), high/low/irregular height of risers, no handrails or only at one side, handrails to short	Manipulation of controls: requires hands, turning motion of wrist, requires fingers, very small	narrow passages in relation to fixed infrastructure	no tactile cues to stairway in circulation path
insufficient manoeuvring spaces in relation to movable furnishings		narrow doors (less than 76cm)	
Fine motor control required		stairs: projecting nosing or open-risers	
Controls placed to high(>1,1m) (switches, sockets, handles, drawers) and high force to activate			

n=68; 67,23cm

stair treads lower depth than 26 cm (n=52; 20,82cm); risers higther than 17cm (n=52; 18,59cm)

KITCHEN

PROFILE 1 only limitations in mobility (reduced function of the lower limbs and spine, balance, endurance and	PROFILE 2 limitations in mobility and upper limb	PROFILE 3 limitations in mobility,	PROFILE 4 limitations in mobility, upper limb, dependence on mobility
wall-mounted cupboard and shelves placed to high (>1.4m above floor) and shelves too deep (more than 30cm) **shelves: n=77; 48,38cm**	controls to high (>1,1m) andvery small controls		ceramic hobs
insufficient manoeuvring spaces around storage units (less than 1,2m in front)	hobs with ordinary rings		
no working surfaces with leg room			
no surface at height suitable for sitting while working, 84cm or lower required **n=92; 90,63cm**			
fine motor skills required			

BATHROOM

PROFILE 1 only limitations in mobility (reduced function of the lower limbs and spine, balance, endurance and	PROFILE 2 limitations in mobility and upper limb	PROFILE 3 limitations in mobility,	PROFILE 4 limitations in mobility, upper limb,
no grab bar at shower, bath and/or toilet	Hands: use requires hands, turning motion of wrist required, use of fingers required	grab bar in high position (>90cm)	illogical controls
wash basin: insufficient leg room underneath, can only be used for standing (>81cm)			
storage cupboards, towel hooks, placed to high or to low (0,9-1,2m)			
toilet to low, 47cm or lower **n=87, 41,85cm**			
shower stall with kerb/ level difference			


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What about technology ?

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TECHNOLOGY FOR AGEING IN PLACE

A systematic review of the literature

Search strategy: 4 databases, 3180 original articles.

KEY CONCLUSIONS

1. More evidence is needed among the effectiveness of home heaith technology in healthy older adults

2. The identified technologies that support ageing in place focus on accessible communication, emergency assistance, physical well-being and mental well-being. When studying their effectiveness, we see that the use of a neurofeedback headband and EEG system, an accessible computer system, a wristband with pedometer, a biofeedback device and an online video platform can bring added value to ageing in place.

3. Patient-centredness is crucial when developing, evaluating and integrating technology at home. Introduce home health technology with guidance, training and follow-up

Market research
Off-the-shelf technology for ageing in place

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Europees Fonds voor Regionale Ontwikkeling

HEALTH MONITORING	PHYSICAL WELLBEING	MENTAL WELLBEING	FOOD AND DRINKS	SLEEP
MEDICATION	LIGHTING	SAFETY AND SECURITY	PERSONAL SAFETY	SOCIAL CONTACT
DAY PLANNING	COMMUNICATION PLATFORM	ROBOTICS	VENTILATION	NEW TECHNOLOGY

Usersfeedback

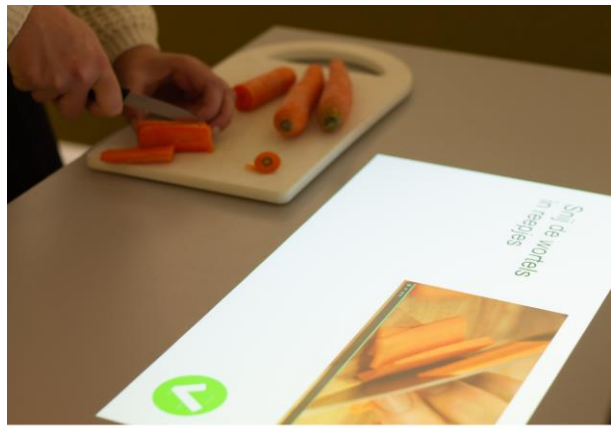
&

Tailored interactive demonstration material

360° video & audio and feedback

How to spread information?

How to raise awareness in the ageing population?



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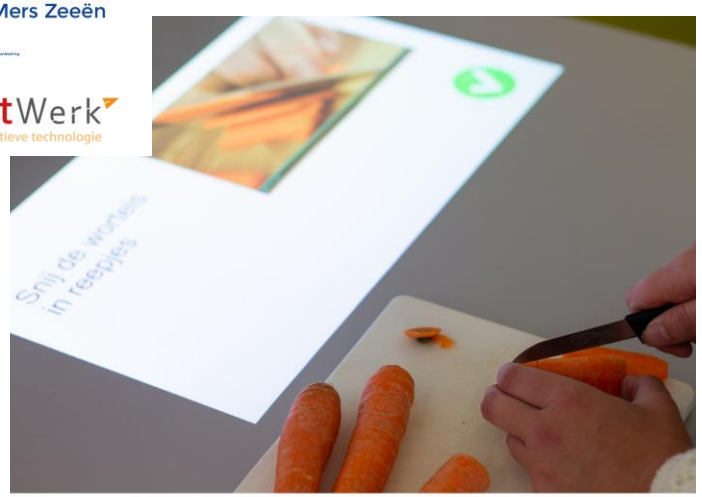
HOME COACH
maatwerk + totaalprojecten + meubilair

LichtWerk
slimme assistieve technologie



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HOME COACH
maatwerk + totaalprojecten + meubilair

LichtWerk
slimme assistieve technologie

www.vives.be/nl/onderzoek/project/agein

www.ageindependently.eu/

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WAC ZEEUWS VLAANDEREN

Cornwall & The Isles of Scilly
age UK

UNIVERSITY OF PLYMOUTH

boulogne sur mer

BOULOGNE-SUR-MER
Développement
Côte d'Opale

HL
HABITAT DU LITTORAL

CLUBSTER NSL
Nutrition Santé Longévité

eurasanté
Entreprendre et Réussir

Centre Social Eclaté
Saint-Martin-Boulogne

Centre Audrey Barbier
Wimereux

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SUSTAINABLE PLACES

Annelore Hermann ~ Universidad Politécnica de Madrid ~ 30/10/20

MAIN INFOS:

- **Topic:** SC1-DTH-11-2019 Large Scale pilots of personalised & outcome based integrated care
- **Funding Scheme:** IA - Innovation action
- **Grant Agreement ID:** 875325
- **Coordinator:** Federico Álvarez, UPM
- **Email:** contact@tender-health.eu

FACTS & FIGURES

Start date	End date
1 November 2019	31 October 2022

13	7	1.500	5
PARTNERS	COUNTRIES	PATIENTS	RESEARCH PILOTS


POLITÉCNICA


GRUPPO
Maggioli


Datawizard


ubiwhere


elgoline


CERTH
CENTRE FOR
RESEARCH & TECHNOLOGY
HELLAS


VUB
VRIJE
UNIVERSITEIT
BRUSSEL


hope


SaludMadrid


SCHÖN
KLINIK


Università di Roma
Tor Vergata


Spominčica
ALZHEIMER SLOVENIJA


Asociación
Parkinson
Madrid

WHO ARE WE?


WHERE ARE WE?

WHY TeNDER?

Today

There are **10 million** people living with Alzheimer's disease and other forms of dementia in Europe

Source: World Health Organization/Europe

This number set to **double** by 2030

Source: World Health Organization/Europe

Chronic **comorbidities** are common

Around **1.2 million** people are affected by Parkinson's Disease in Europe

Source: European Brain Council

It is estimated that by 2040, there will be **13 million** people living with Parkinson's worldwide

Source: The Global Burden of Disease Study (2015)

TeNDER is a project funded by the European Union, which helps patients safely extend their autonomy in different living environments: at home, in day-care centres, rehabilitation centres, and in hospital. TeNDER's assistive and communication tools will help monitor patients' physical and mental health, and further link patients to their social and health support system to ensure integrated care.

Our 9 objectives at a glance:

1: Detect patients activity recognition, health and emotional status and alert

2: Ensure the secure and efficient sharing and processing of patients' data

3: Improve the quality of life for the patients and his/her family and caregivers as well as the working conditions of health and social care providers and health professionals

4: Build the TeNDER Platform as an open, service-oriented architecture

5: Creation of an information-driven TeNDER ecosystem

6: Follow participatory design process

7: Organisational and Collaboration Models

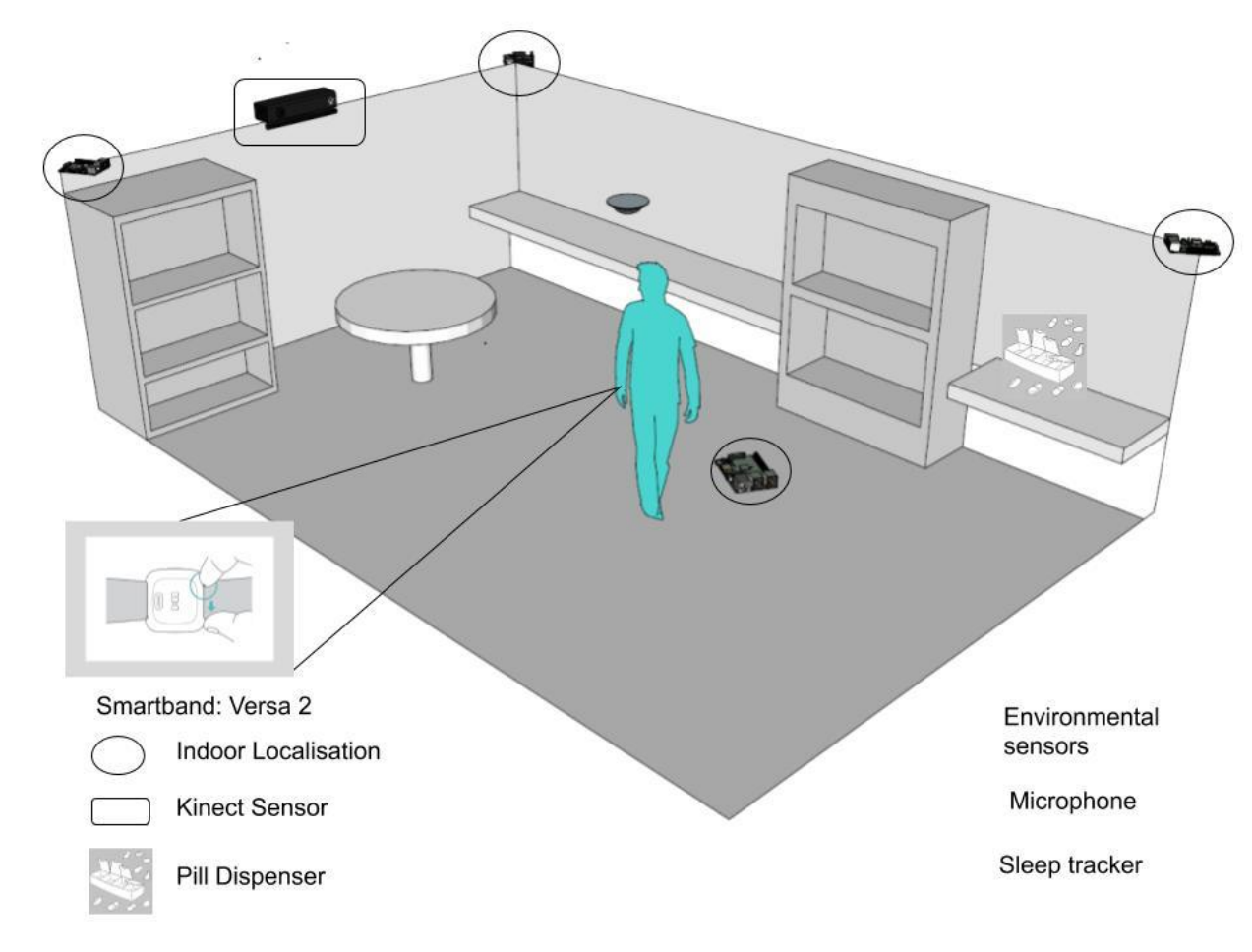
8: Generate impact & create business and job creation opportunities

9: Conduct large scale pilots

HOW WILL TeNDER WORK?

- combining user-friendly technologies and substantial research experience: improve the quality of life of patients and those who surround them
- affect-based micro-tools that will recognise a person's mood, movements and basic vitals, then adapt the system's probes to his or her needs and match them with clinical and clerical patient information
- ease communication between different health and care providers
- TeNDER's technical, legal and ethical experts will ensure that all personal data is GDPR-compliant

A BRIEF TECHNICAL OVERVIEW



modular structure to provide 7 services:

1) Active Sensorial Continuous Monitoring, Warning and Reporting

2) Social Services Matching

3) Data Analysis and Personalized Recommendations

4) Pathway Tracking: the patient's non-clinical activity

5) Virtual Assistant

6) Communication via the social platform

7) GDPR & Quality of Life Assessment

THE PILOTS (in 3 waves) will start in January 2021:

- **Spain: Madrid**
- **Italy: Rome**
- **Slovenia: Ljubljana**
- **Germany: Bavaria**

THE IMPACT WE WANT TO CREATE:

- ensure users' trust
- empower citizens
- maximize the potential of digital tools

THANK YOU!

My e-mail: ath@gatv.ssr.upm.es

FOLLOW US:

WWW.TENDER-HEALTH.EU

eu_tender

tender-eu-project

Annelore Hermann ~ Universidad Politécnica de Madrid ~ 30/10/20

smartwork

CHARALAMPOS VASSILIOU

smartwork

SMARTWORK Our Story

Project Overview

SUSTAINABLE PLACES 2020
October 27-30, 2020
Digital Event

SP20 - Sustainable Housing supporting Health and Well-being

Charalampos Vassiliou

What is SmartWork?

The SmartWork project builds a Worker-Centric AI System for work ability sustainability, which integrates unobtrusive sensing and modelling of the worker state, with a suite of novel services for context and worker-aware adaptive work support.

SmartWork aims to design and create age-friendly living and working spaces.

The Challenge

For workers aged 55-65 to maintain an active professional life and independent living, despite the ageing process and the potential functional limitations, health conditions and/or care needs that this process frequently entails.

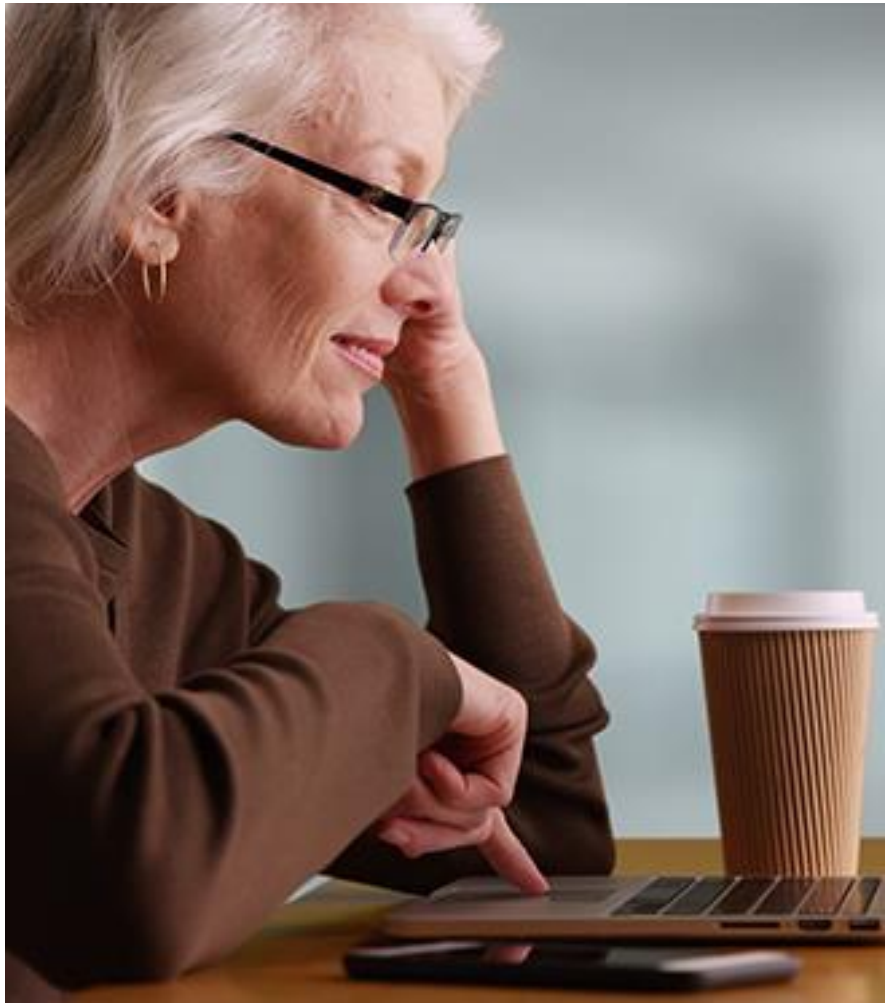
Objectives

1. To create a Worker-centric Artifical Intelligence (AI) system for work ability sustainability
2. To achieve unobtrusive sensing and modelling of the worker state
3. To implement a novel SmartWork services suite for the context and worker-aware adaptive work support
4. To co-create and evaluate the SmartWork system, by organizing two pilots, with the active engagement of the end users in real world settings, with special attention to ethics, privacy and security

Target Groups

SmartWork will deliver benefits for:

- **Office workers aged 55-65** - by providing continuous monitoring and risk assessment of their health status and functional and cognitive capacity, as well as the provision of adaptive work support.
- **Employers -** by empowering them to improve the efficiency and productivity of office worker teams with AI decision support tools and optimal contextual knowledge management.
- **Carers** - by monitoring the overall health status of the people they care for, thus providing full support to informal caring tasks.



SmartWork Services

Key features of SmartWork:

- Offers a suite of smart services, using AI, to support active and healthy ageing for office workers aged 55-65
- Monitors workers' health, behaviour, cognitive and emotional status, and responds to their needs
- Supports workers staying longer and happier in their job by tackling the consequences of ageing, sedentarism and physical and mental health problems
- Delivers benefits for older workers, their employers and carers and has a wider positive impact on society and community wellbeing
- Engages end users in real-world settings at pilot sites in Coimbra (Portugal) and Aarhus (Denmark) to co-create and evaluate the SmartWork system.

SmartWork Services

Office Worker Services

healthyMe

Delivers precise monitoring of physiological and behavioural parameters, key for efficient self-management of chronic health conditions.

myWorkAbility

Measures the psycho-physical capacity of the office worker, suggesting flexible working practices and supporting decisions to improve their wellbeing.

ubiWork

Helps employees maintain a work/life balance and help employers improve the productivity and efficiency of their business.

workCoach

Provides on-demand training support personalised to the older worker's profile.

Employer Services

digiTeam

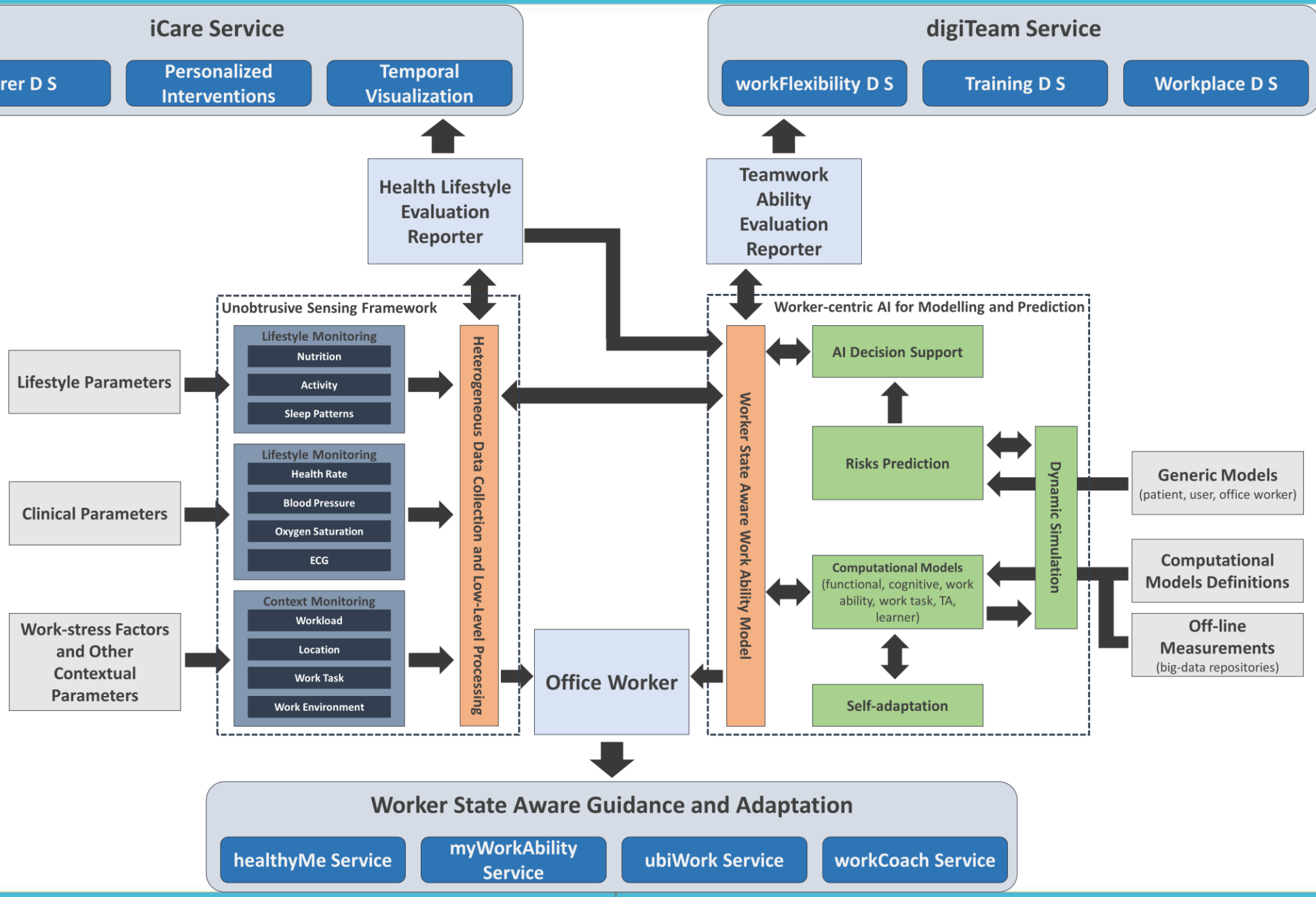
Enables flexible management of the workforce to increase efficiency and productivity and to optimize training and knowledge management activities.

Carer Services

iCare

An adaptable and accurate service for health monitoring allowing carers for older workers to select and personalize parameters depending on the specific disease or condition.

From a high-level



Foreseen Impact

1

Older Office Workers

- Intended Living
- Better QoL
- Socio-economic Benefits
- Enhanced Workability
- Increased Self-esteem
- Enhanced Health & Safety at Work

2

Employers

- Improved HRM
- Increased Productivity
- Improved Safety at Work

3

Carers

- Continuous Monitoring of Older Workers
- Better Risk Assessment

4

Healthcare Systems

- Reduced Expenses for Medication and Rehabilitation Services

5

Scientific Community

- Innovative ICT tools

6

Society

- Enhanced Innovation Capacity
- Improved Safety at Work
- Better Living Standards
- Increased Workforce
- Increased Economic Independence

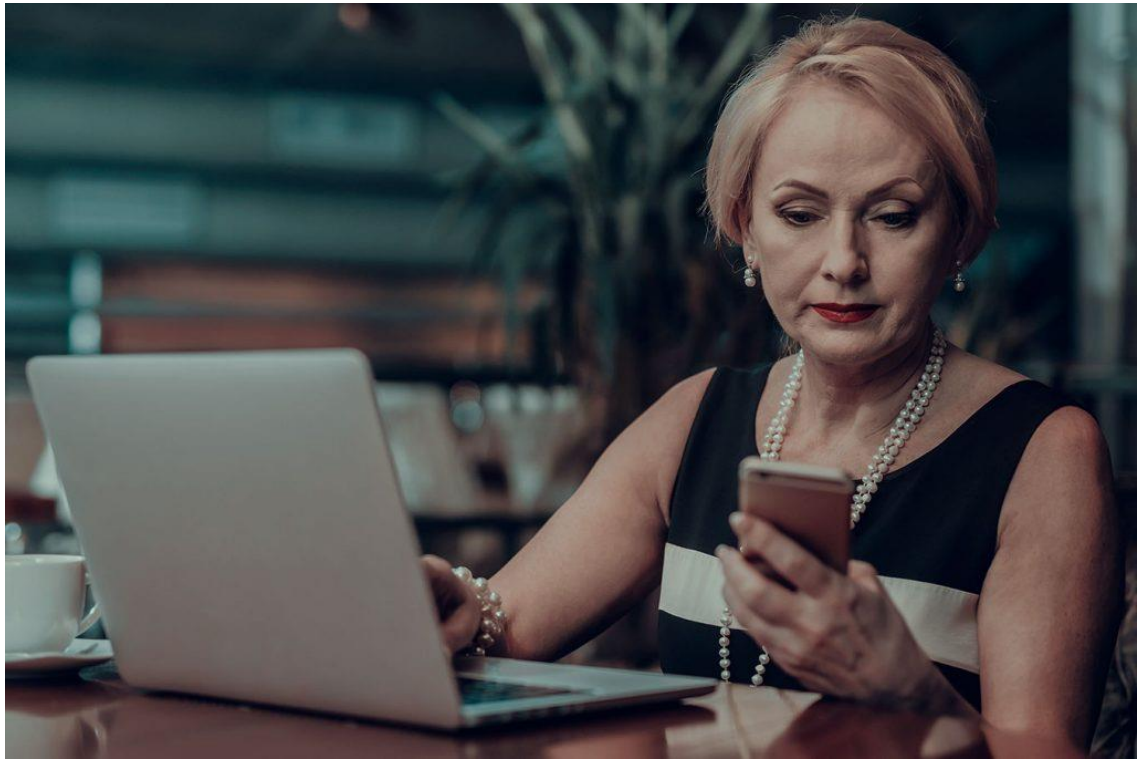
SmartWork Pilots

SmartWork will engage with end users in real-world settings at pilot sites in Coimbra (Portugal) and Aarhus (Denmark) to co-create and evaluate the SmartWork system.

Phase 1: User Needs & Requirements Analysis

Consultation with end users via:

- **Online Questionnaire** – for office workers aged 55+
- **Interviews & focus groups** - with office workers 55+, employers and carers



This phase will also include a preliminary evaluation of ethical and safety issues.

This will inform the development of the SmartWork prototype.

Phase 2: Trial operation in semi-controlled environments

Pilot test of the first SmartWork prototype

Location: pilot site in Coimbra, Portugal.

Duration: 2 months

Participants: 12 older office workers, 2 managers, 2 carers

Aim: to test the ease of use of the SmartWork system and Services Suite and identify any practical difficulties the end users may experience.

The data collected will be used to improve technical aspects such as robustness, interfaces, resources, usage etc.

The pilot will be monitored in all environments (work, home, on-the-move).

Phase 3: Field Trials with end-users

Pilot test of updated SmartWork prototype in real-life settings

Location: pilot sites in Coimbra, Portugal and Aarhus, Denmark.

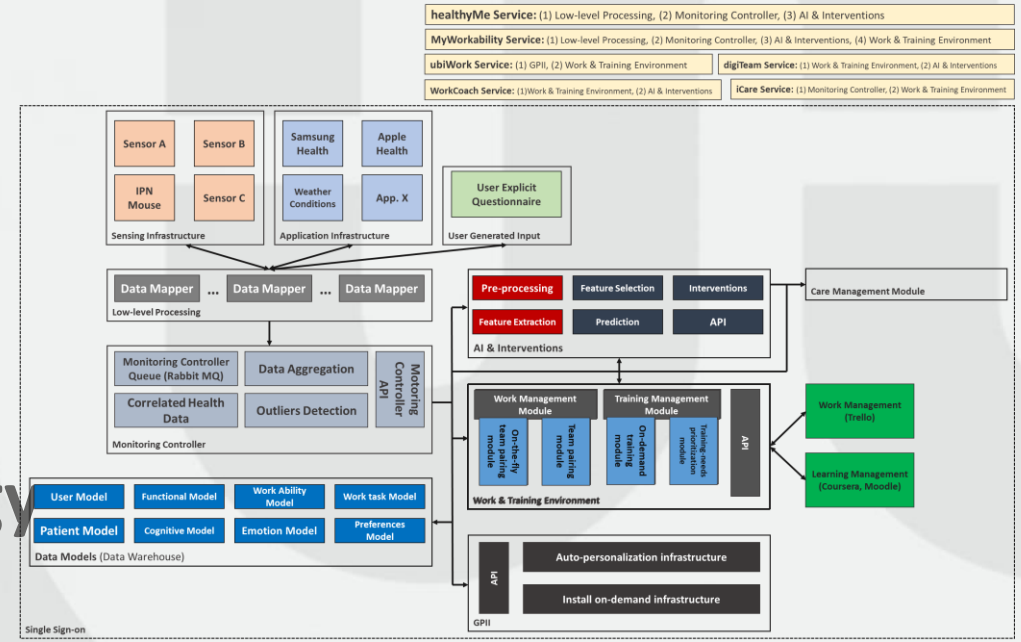
Duration: 6 months

Participants: 60 office workers age 55-65

Aim: to obtain preliminary evidence of effectiveness of the SmartWork system and Services Suite in maintaining/ increasing the work ability of older office workers.

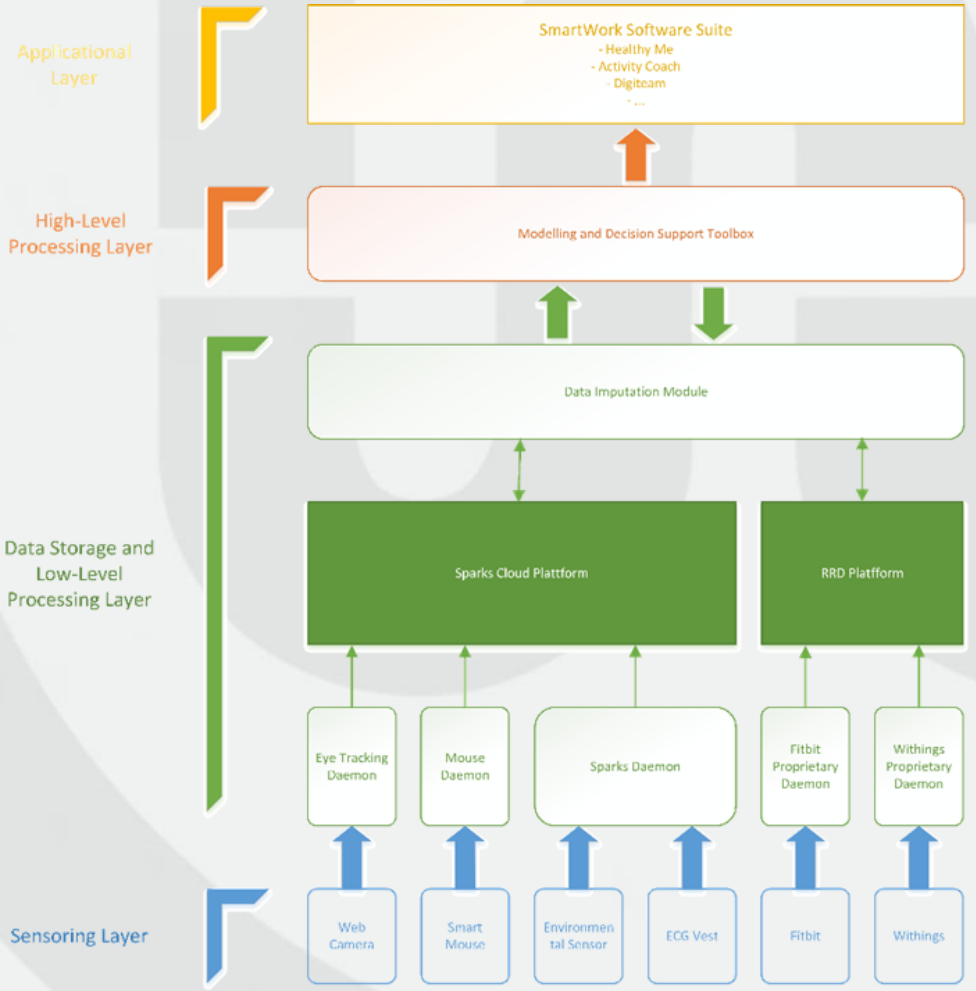
Major highlights (i)

- Performance of SOTA and gap analysis
- Analysis of user needs
  - Co-creative approach
  - User requirements and scenarios of use
- Data collection and intervention strategy
- System Architecture
  - System requirements



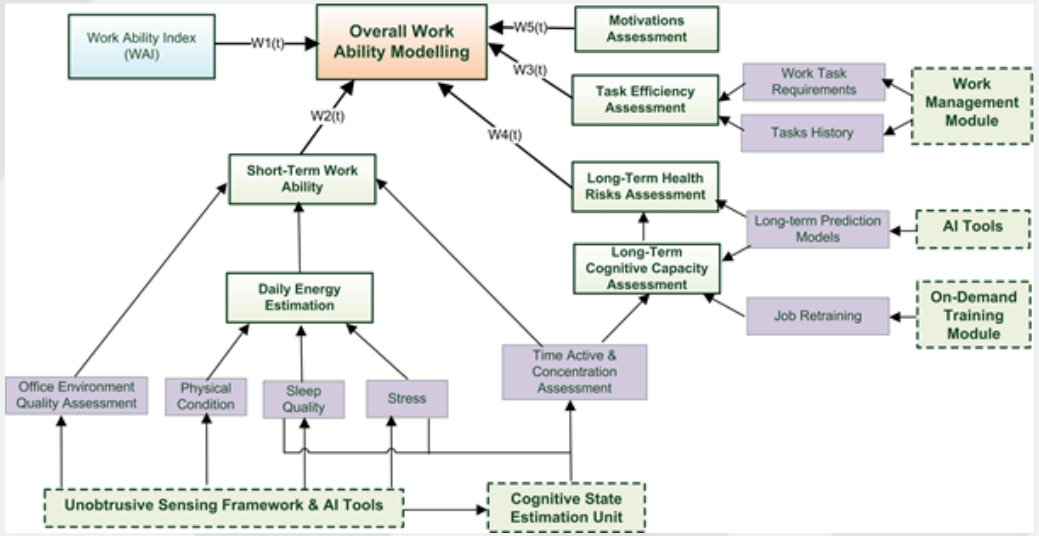
Major highlights (ii)

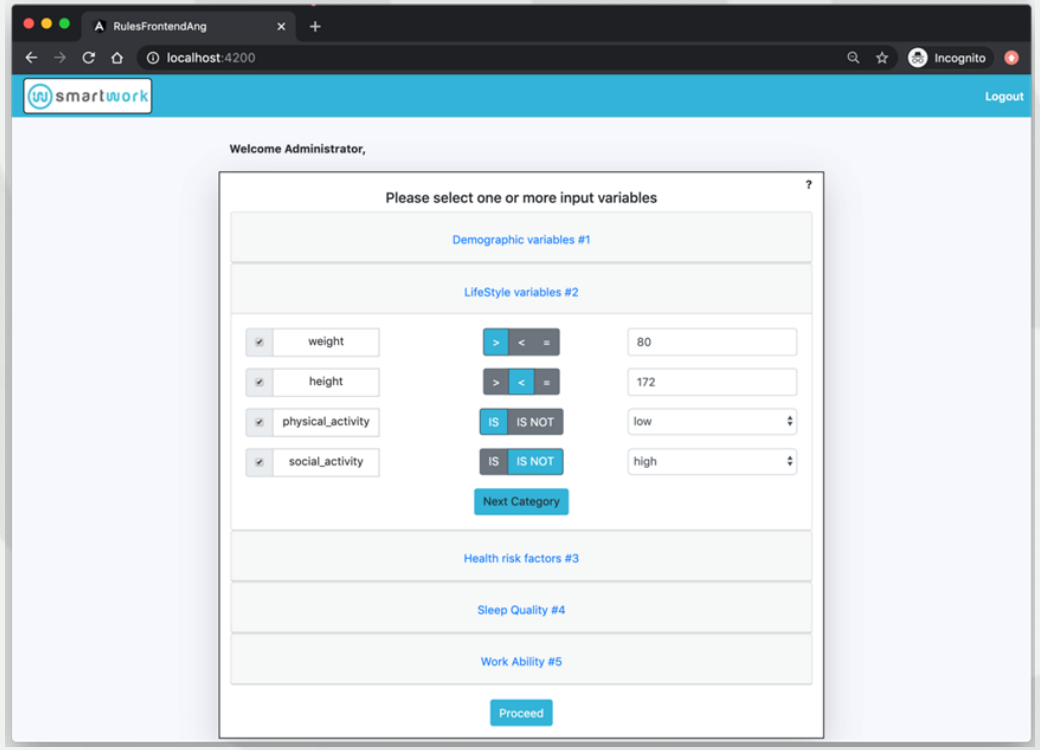
- Deployment of SmartWork initial sensing infrastructure
  - Intelligent mouse
  - Sleep and activity trackers
  - Weight scale
  - Environment sensing
  - ECG
- Implementation of low-level processing features
- Development of data security and privacy



Major highlights (iii)

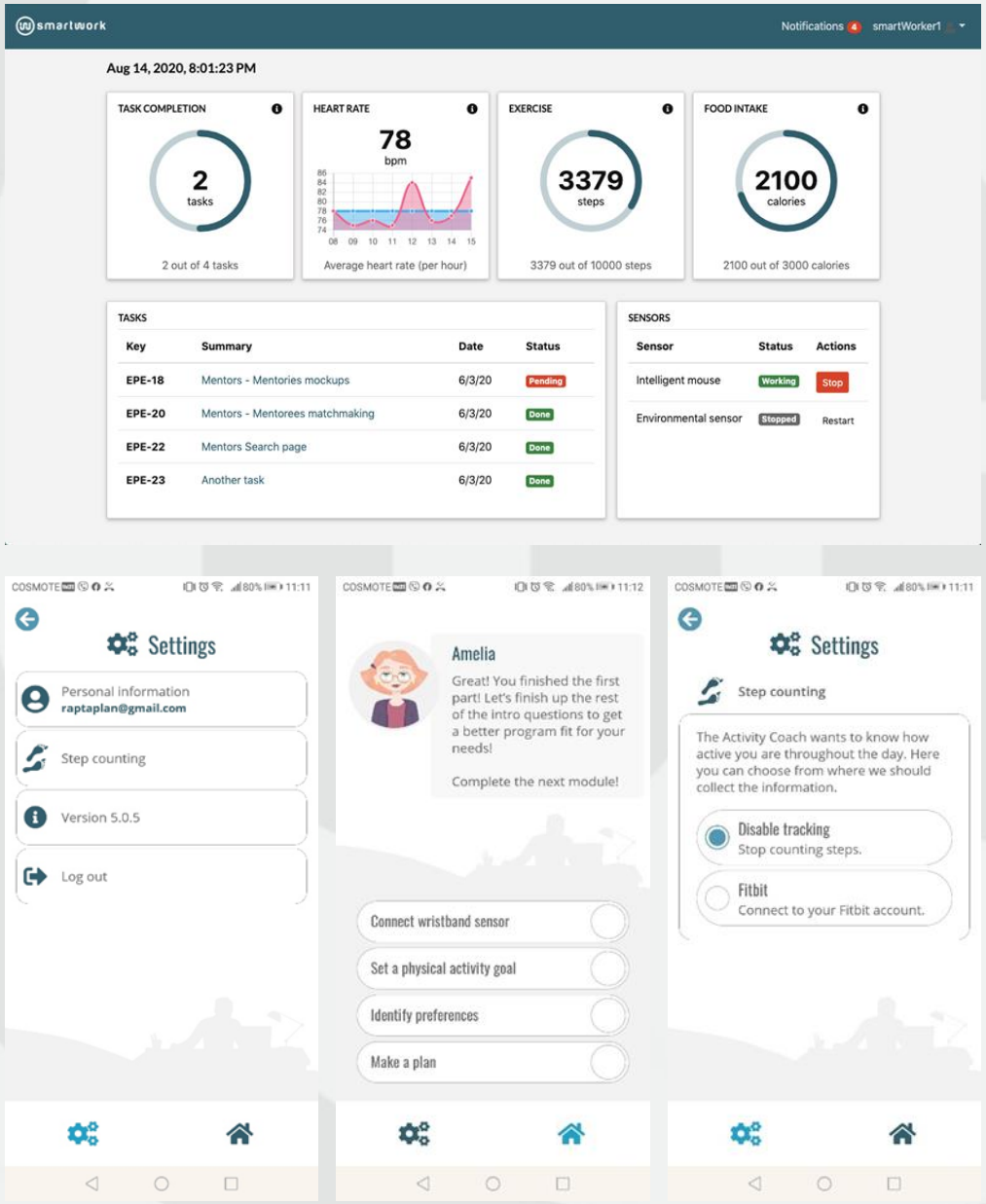
- Data ontology
- Cognitive modelling algorithm
- Definition of work ability framework
- Work on personalized and predictive models





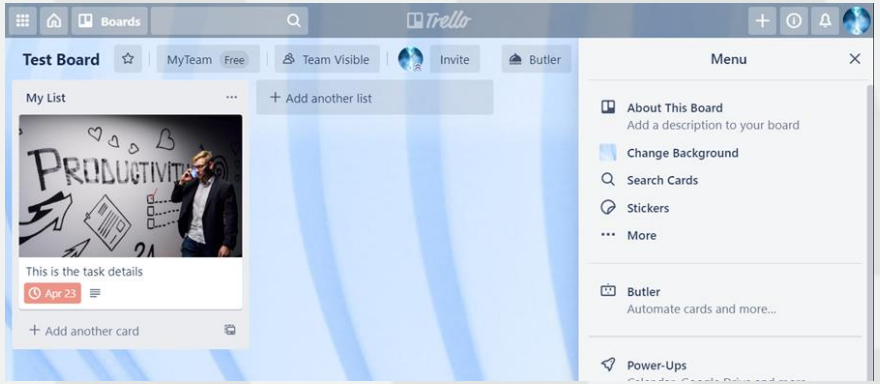
Major highlights (iv)

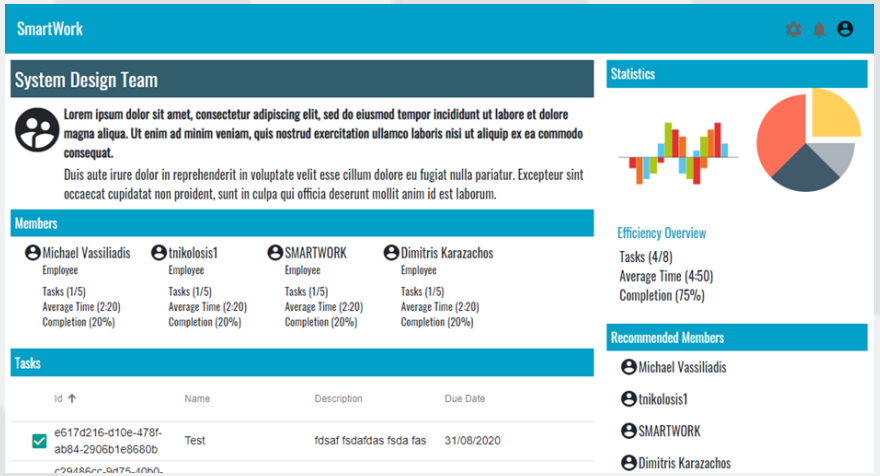
- Development of UIs in co-creative iterative manner
  - 2-round interaction with the users
  - Wireframes
- First version of the auto-personalization infrastructure
  - Morphic
- First version of the AnyWhere Delivery features
- Actual Interfaces
  - CSS
  - Smartphone
  - Web



Major highlights (v)

- Development of a Trello power-up module
- Implementation of team management features
- Implementations of training prioritizing module



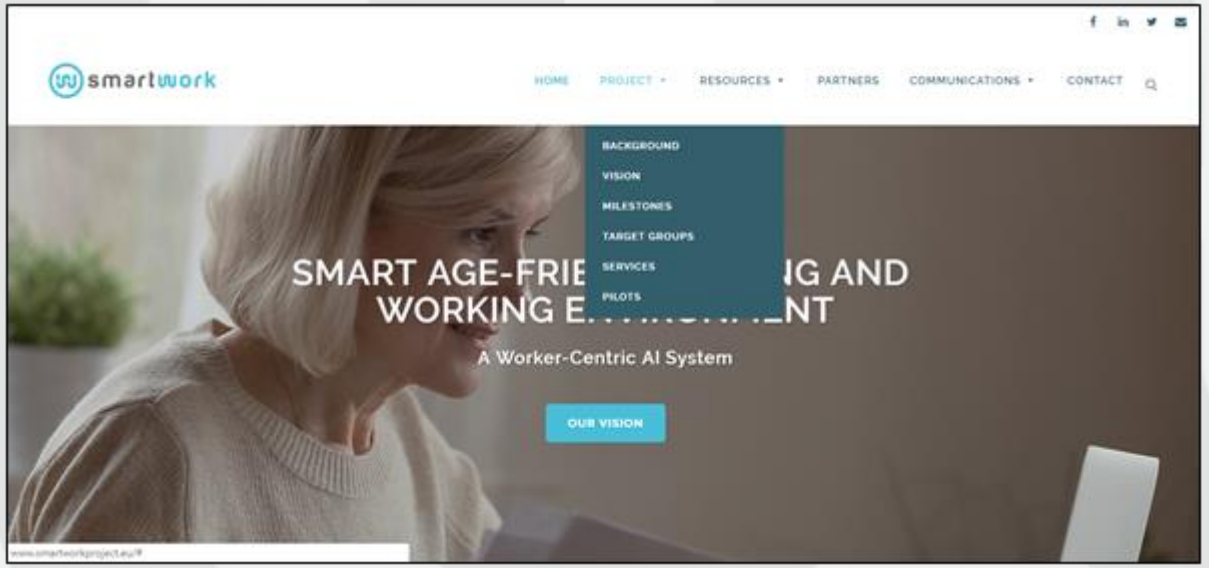


Major highlights (vi)

- **Integration activities**
  - Towards the first integrated prototype
- **Acquisition of ethical approvals**
  - Ethics and safety report
  - Preparations of the pre- and pilot phase

Major highlights (vii)

- **Several dissemination activities**
  - Web-site and social media
  - Blog articles and interviews
  - 3 newsletters
  - Participation in events
  - Scientific and non-scientific articles
  - Leading clustering initiative
  - COVID-19
- **Exploitation highlights**
  - IPR and innovation assessment framework
  - Exploitation workforce
  - Commercialization possibilities and market analysis



Challenges

- **User engagement in the co-creation process**
  - Well-known approaches used
- **Adoption of AI-based solutions**
  - Focus on understandability. Enhance trust.
- **COVID-19 changed our way of work**
  - Creating also new opportunities

What follows…

- Completion of developments
- Integration of activities
  - Release of two prototypes (M24, M32)
- Pilot phases
  - Pre-pilot (M22)
- Sustainable exploitation
- Intensify our dissemination
  - COVID era

SmartWork Partners

SmartWork is a truly pan-European project and brings together a highly skilled and complementary consortium of ten expert organisations from across 8 countries. The consortium is well-balanced in terms of involvement from ICT industry, academia and research as well as public and non-profit organisations.

Byte
solutions.unlimited

UNIVERSITY OF PATRAS
ΠΑΝΕΠΙΣΤΗΜΙΟ ΠΑΤΡΩΝ

Roessingh
Research and Development

Cáritas Diocesana
de COIMBRA

spark works

LINKÖPING UNIVERSITY

Raising the Floor
ONE-SIZE-FITS-ONE DIGITAL INCLUSION

IPN
INSTITUTO PEDRO NUNES

ECHAlliance

CENTER FOR ASSISTED LIVING TECHNOLOGY

Key contacts

Project Co-ordinator

Charalampos Vassiliou
cvassiliou@byte.gr

Dissemination Co-ordinator

Karolina Mackiewicz
karolina@echalliance.com

Questions?

Follow SmartWork

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smartwork@echalliance.com

smartwork

Thank You

Funded by Horizon 2020 Framework Programme of the European Union under Grant Agreement No. 826343

CONTACT INFORMATION
Project Coordinator: BYTE S.A.
Charalampos Vassiliou

Email
cvassiliou@byte.gr

Website
www.smartworkproject.eu

pharaon

FILIPPO CAVALLO

TeNDER

Annelore Hermann

pharaon

Filippo Cavallo

smartwork

Charalampos Vassiliou

Homes4Life

SILVIA URRA

Homes4Life

Sustainable Housing supporting Health and Well-being_ October 30th, 2020

This project has received funding from the Horizon 2020 Programme under Grant Agreement n°826295

HOMES4LIFE

SUSTAINABLE PLACES 2020

Certification for Ageing in Place

ABOUT US

Project started in December 2018 – 24 months

9 partners from 5 EU countries

- TECNALIA | Spain (coordinator)
- TNO, Utrecht University | Netherlands
- Universita Politecnica Delle Marche | Italy
- Certivéa and its subsidiary Cerway, R2M Solution | France
- ECTP, AGE Platform Europe, EUROCARERS | Belgium

VISION 2040

HOMES4LIFE VISION 2040

Imagine a society where your house is truly your home. A supportive, enabling environment that helps you realize your full personal and social potential. Imagine a society where such houses are within reach for Europeans of all ages, regardless of income, gender, race or ethnic background, sexual orientation, health status, or disability. This is the vision Homes4Life supports for 2040.

A KEY PUBLIC POLICY BASED ON THREE ELEMENTS:

- All relevant stakeholders (construction sector, public authorities, ICT and care service providers, financial sector, owners) must be aware of the benefits related to Age Friendly Housing (AFH) and ready to implement an AFH strategy
- Appropriate tools and policy frameworks should be in place: regulatory/legal frameworks, housing stock structure and ownership (strong and non marginalized rental sector), housing governance (to meet future demand)
- All stakeholders need incentives appropriate to their needs and concerns: grants and tax credit/reduction for retrofitting and new age-friendly houses

FACTORS INFLUENCING THE DEVELOPMENT OF AGE-FRIENDLY HOUSING

Enabling – facilitators

- **Regulatory framework**: legal provisions for accessibility, home adaptation and home care services;
- **Existing know-how**: official guidance (e.g. handbooks, accessibility standards, etc.) and supportive organisations;
- **Financial incentives**: grants and tax credit/reduction for retrofitting and new age-friendly constructions;
- **Housing stock**: strong and non-marginalized rental sector (facilitating access to smaller dwelling i.e. flat);
- **Clear responsibilities:** analysis of housing market and planning to meet future demand; specific institutions designated to deliver.

Disabling – obstacles

- **No clear regulatory framework**
- **Existing know-how**: absence or very limited know-how, or absence of knowledge transfer;
- **Little or no financial incentives** for property owners and/or individuals to adapt dwellings;
- **Housing stock**: weak and marginalized rental sector (emphasis on home-ownership → responsibility to individuals);
- **No clear responsibilities**: leads to competing priorities in housing.

Growing need for age-friendly housing in all EU28 yet to different extent depending on:
- the structure of the housing market
- projected housing shortage
- urgency levels for adaptation

Various maturity levels of age-friendly housing
as defined in the Homes4Life vision:
- awareness of the issue
- range of good practices to “age in place”
- range of resilient housing options
- structural operational readiness for change
- financial capacity to make the shift

A tailored approach is needed!

HOMES4LIFE CERTIFICATION SCHEME

H4L CS: PRINCIPLES > 2 BUILDING TYPES

Homes4Life Certification Scheme (CS) assesses residential buildings, be they individual or collective, and their immediate environment, including common spaces.

***Individual house**: single or semi-detached house containing only one dwelling unit.*

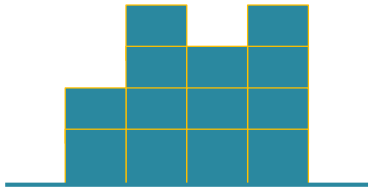
***Collective building**: multi-storey building with multiple flats*

H4L CS: PRINCIPLES > PERIMETERS ASSESSED

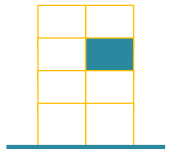
4 types of perimeter should be encountered

A single house

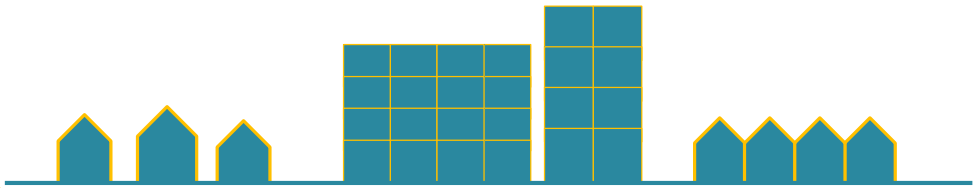
A single collective building



A single flat *in a collective building*



A residential complex: *housing development, private estate, with one or several kinds of building types*



H4L CS: PRINCIPLES > 2 BUILDING SITUATIONS

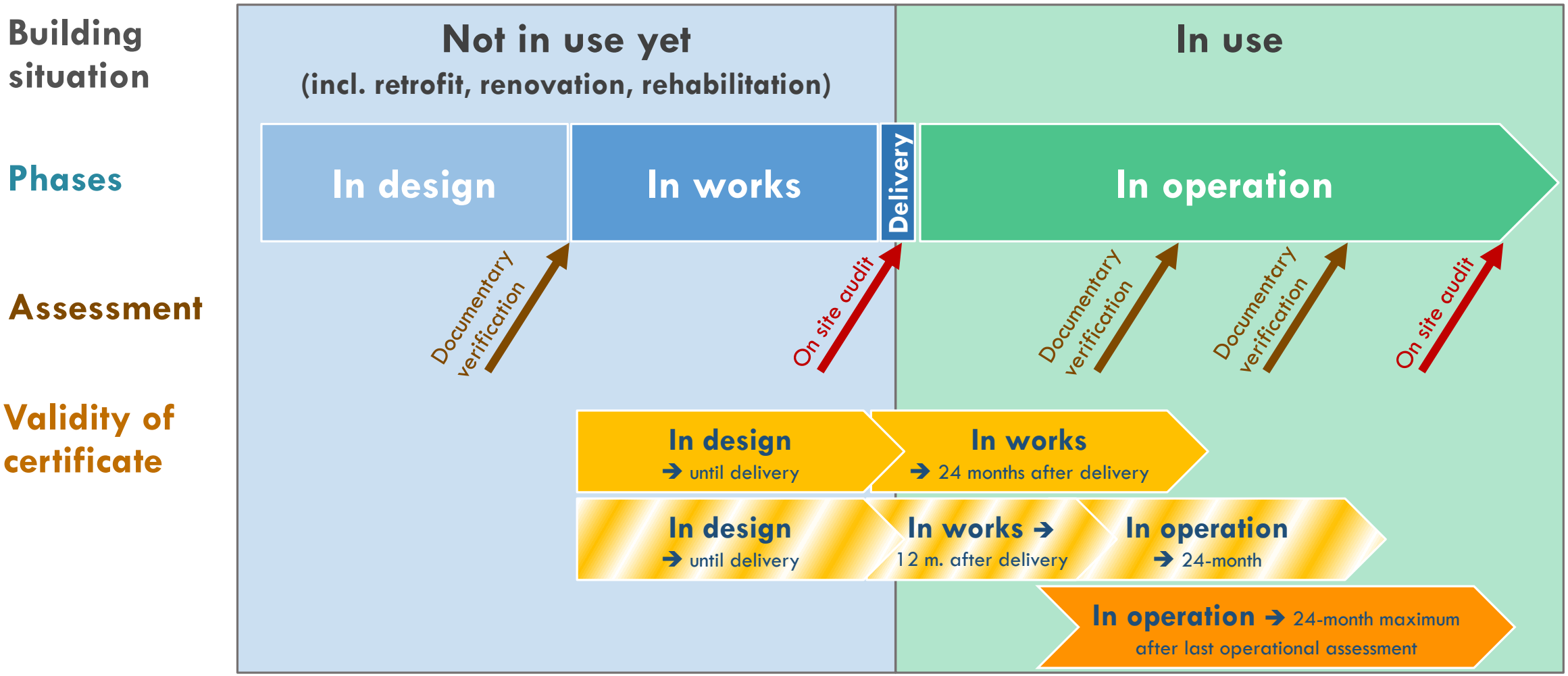
Not in use yet

The building is in design phase, under construction or delivered, but not in use yet. This includes design and realisation of retrofitting, renovation or rehabilitation works.

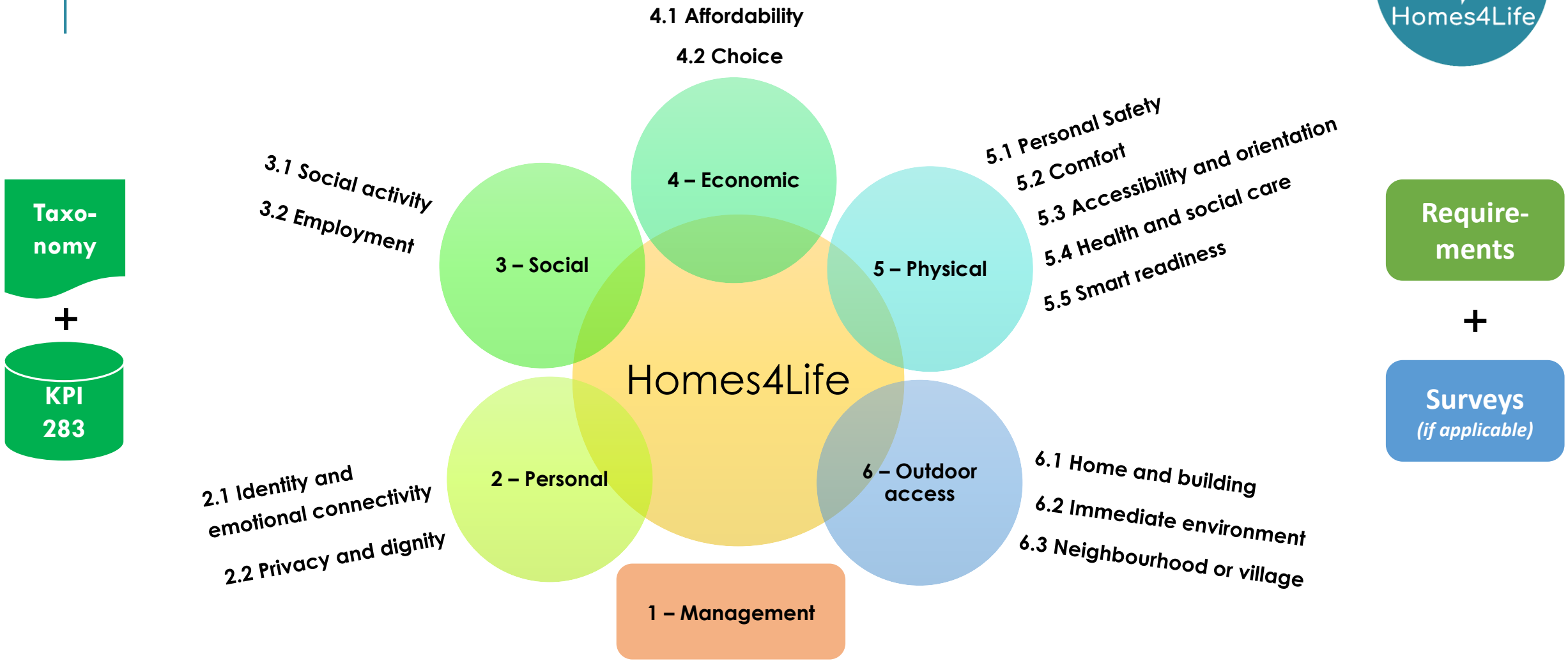
In use

The building exists, has been officially authorized to be occupied and is occupied.

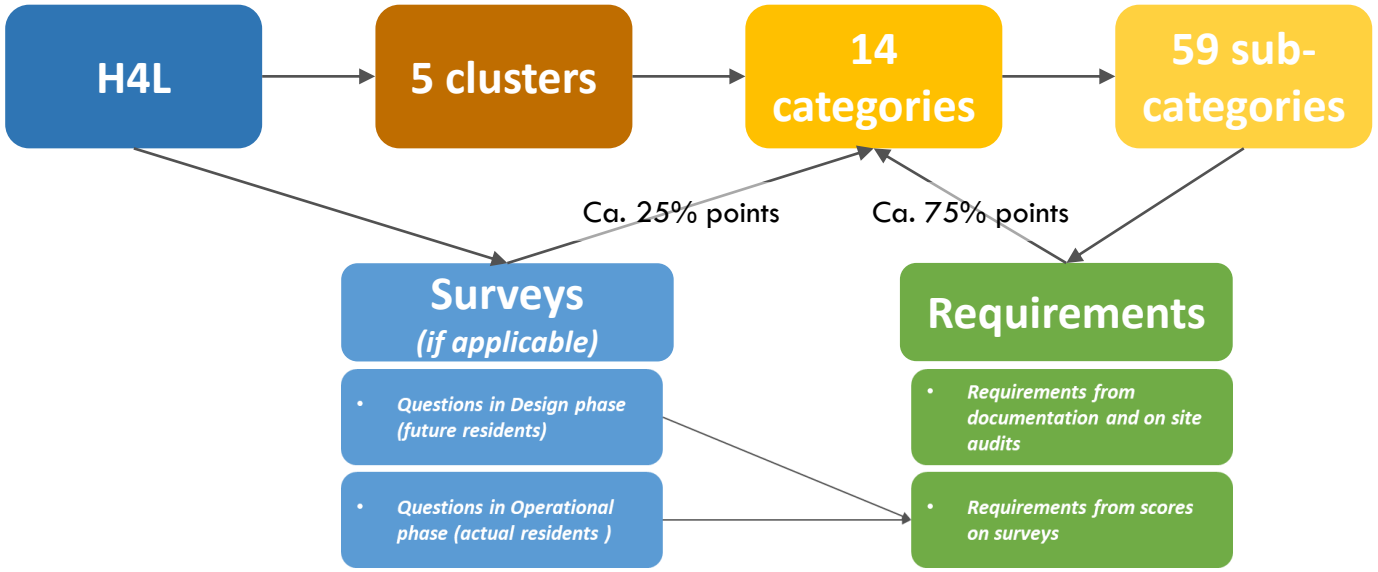
H4L CS: CERTIFICATION PROCESS



H4L CS: STRUCTURE

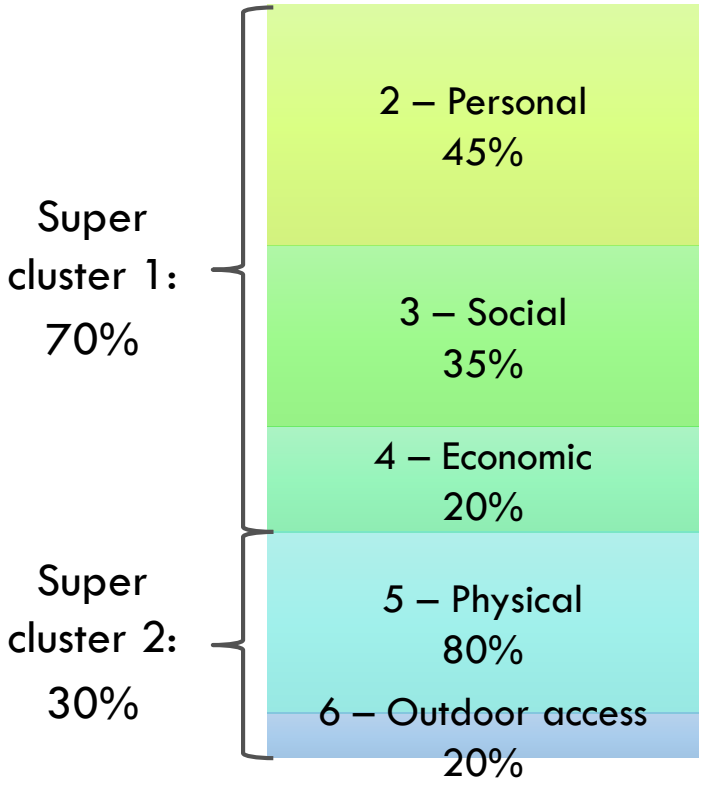


H4L CS: SCORING SYSTEM



- Platinum: 90%
- Gold: 80%
- Silver: 60%
- Bronze: 40%

Share of score per cluster



H4L CS: WHERE IS IT VALIDATED?

Pilot sites

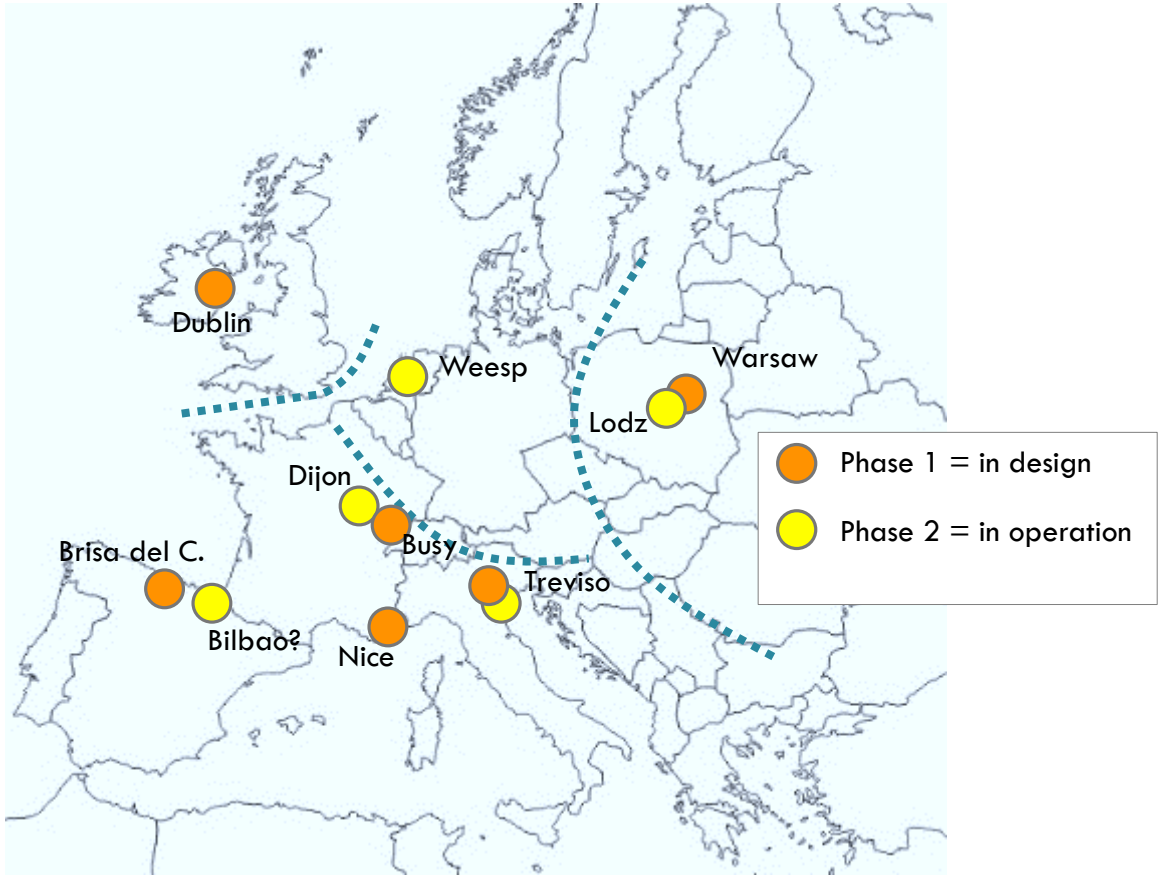
- 10/11 pilots in 4 European areas
- All building types
- Public or private organisations
- In design and in operation

Test phases

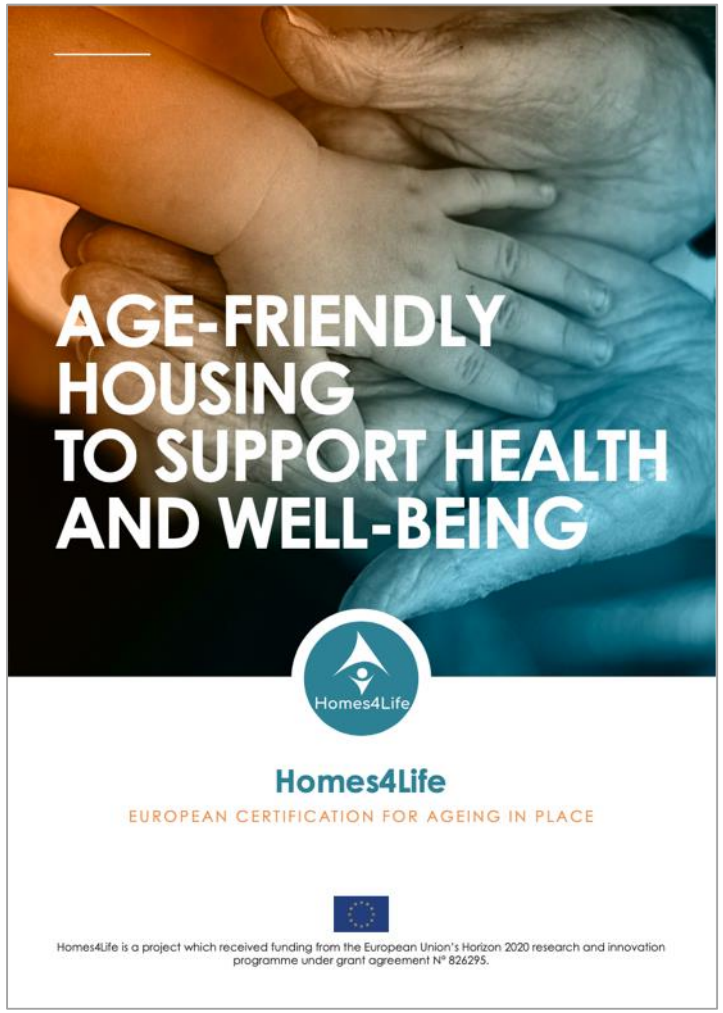
- Phase 1: Spring 2020
- Phase 2: Autumn 2020

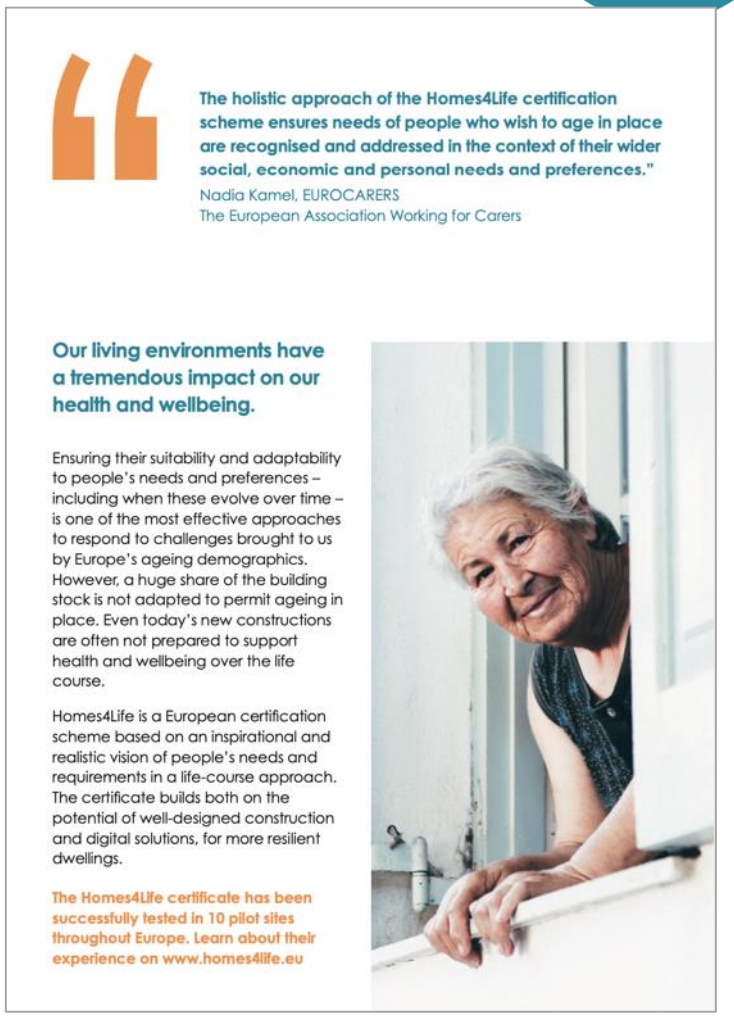
Call for comments

- At the end of each phase: improvements to the CS
- Call for comments



HOMES4LIFE BROCHURE (1/3)





HOMES4LIFE BROCHURE (2/3)

THE BENEFITS OF AGE-FRIENDLY HOUSING

Our homes should be a place that

- supports our independence and autonomy;
- allows us to remain active and healthy;
- promotes our social inclusion and engagement within our communities;
- respects our lifestyle choices and evolving needs as the years go by.

A Homes4Life-certified dwelling encompasses all these dimensions.

Age-friendly housing is relevant for all citizens as it impacts on our health and wellbeing, our social interactions and capacity to participate in community life.

Homes4Life supports the vision of a society where people have the opportunity to pick the place they want to live in and grow older. A society where age-friendly housing is available, accessible and affordable to all.

"Homes4Life will enable rethinking the construction sector practices towards a built environment that is resilient against social and demographic changes, thanks to its Certification Scheme leveraging on digital technologies to empower Europe's built assets with new service-based functionalities."

Alain Zarli, Secretary-General of the European Construction Technology Platform (ECTP)

Interfaces with other building certifications

Homes4Life works hand in hand with the HQE certification, the Accessibility label, and Ready2Services delivered by Cerway, to demonstrate the overall performance of your building assets.

A COMPREHENSIVE EVALUATION FRAMEWORK DESIGNED AROUND 6 STRATEGIC CLUSTERS

The 6 clusters cover an in-depth and holistic analysis of what a home and its components need to fulfil to create and maintain an age-friendly environment that is enabling, fit for purpose, flexible and resilient.

PHYSICAL
Personal safety - Comfort - Accessibility and orientation - Health and social care - Smart readiness

ECONOMIC
Affordable housing - Affordability for informal carers - Long-term security on cost of housing - Choice: availability of housing programmes and resources, etc.

PERSONAL
Identity and emotional connectivity – Privacy and dignity

SOCIAL
Social activity: ability to have social contact in home, proximity to activities and facilities, online connectivity; Employment: suitability of the home as a place to work, connection to a place of employment, etc.

OUTDOOR ACCESS
Home and building - Immediate environment - Neighbourhood or village

MANAGEMENT
Commitment - Analysis of the site - Involvement of stakeholders - Surveys

HOMES4LIFE CAN BE APPLIED BOTH AT DESIGN, CONSTRUCTION, AND IN-USE PHASES

DESIGN & CONSTRUCTION
Make sure your future building is designed according to Homes4Life requirements

IN-USE
Evaluate your current age-friendliness level and get recommendations on how to make it even better

THE BENEFITS OF HOMES4LIFE CERTIFICATION

WHO IS CONCERNED ?
Are you interested in developing age-friendly housing? In refurbishing homes so that they better support health and well-being over the life course? Whether you are a residential property developer, a public authority, a social housing organisation or a committed citizen, Homes4Life is designed for you.

WHICH HOMES ARE ELIGIBLE?
The certification scheme is inclusive in its design and can be applied to both new and existing buildings (be it detached houses, multi- residential buildings, or individual flats) and regardless of the tenureship model.

HIGHLIGHT YOUR COMMITMENT AND INVESTMENTS INTO AGE-FRIENDLY HOMES THROUGH A CERTIFICATION PROCESS THAT ENSURES A TRANSPARENT, EXTERNAL EVALUATION AND RECOGNITION.

PROPERTY DEVELOPERS

- Meet the growing demand for age-friendly homes due to European demographic projections
- Increase the market value of your properties
- Add new housing models to your portfolio aligned with current social trends

HEALTH AND SOCIAL CARE PROVIDERS

Improved quality of houses is reflected in a better work environment for home-care workers, contributing to increase their job satisfaction, physical health and propensity to stay with the organisation, while minimizing stress levels

HOMEOWNERS

- Increased inhabitants' quality of life and wellbeing
- Improved sense of comfort and safety at home
- Increased value of your property; additional argument for renting

HOMES4LIFE BROCHURE (3/3)

HOMES4LIFE SERVICES: ADEQUATE SOLUTIONS FOR EACH PHASE OF YOUR PROJECT

Homes4Life is a collaborative, scalable and open approach. Join the Homes4Life community to keep up to date with the latest best practices, and communicate with other stakeholders engaged into the development of age-friendly housing.

EVALUATION

HOMES4LIFE EVALUATION

Explore the Homes4Life evaluation framework in its entirety. Evaluate your age-friendly performance with our ISIA online platform on all evaluation criteria from the 6 strategic clusters. Determine your strength, areas for improvement, and prepare your certification request.

CERTIFICATION

HOMES4LIFE CERTIFICATION

Demonstrate your commitment to the development of age-friendly housing, through an external and independent certification. Promote your actions addressing the health, demographic change and well-being societal challenge.

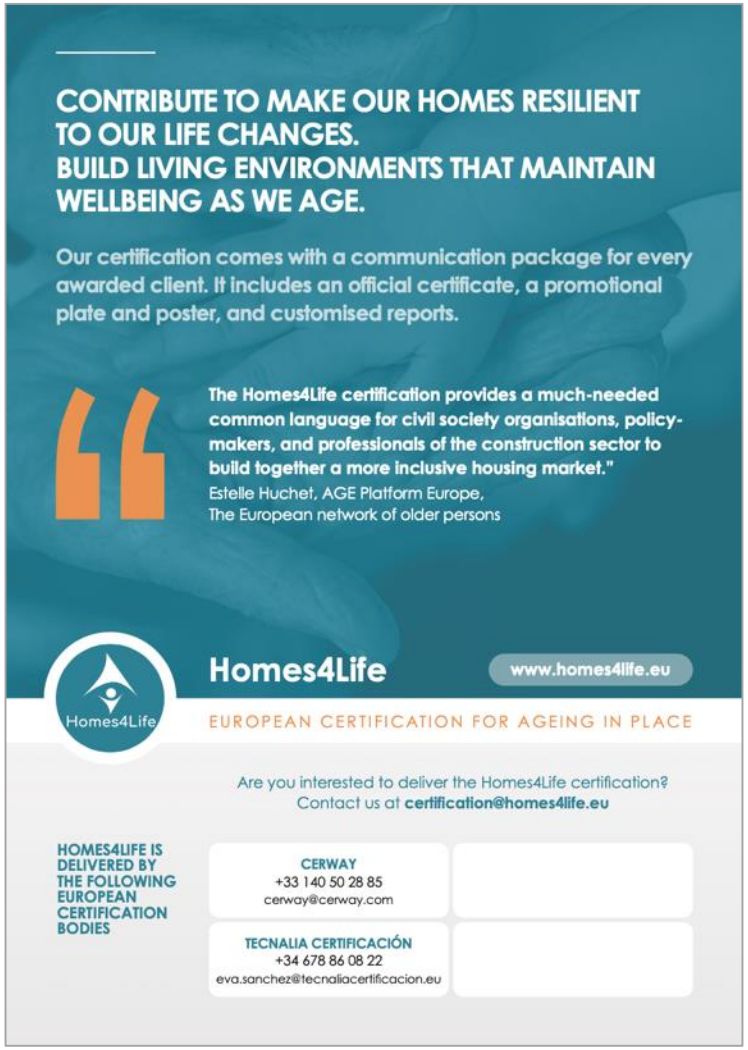
- Formalise your certification request
- Conduct your self-evaluation on the ISIA online platform
- Provide required elements to demonstrate your performance
- Benefit from external advice and guidance during the on-site audit of your building
- Communicate your achievements when your certification is awarded

TRAINING

HOMES4LIFE TRAINING

Get trained in the holistic Homes4Life approach and methodology, in order to progress and further develop age-friendly housing that support health and well-being.

You can expect benefits for everyone !



CONTRIBUTE TO MAKE OUR HOMES RESILIENT TO OUR LIFE CHANGES. BUILD LIVING ENVIRONMENTS THAT MAINTAIN WELLBEING AS WE AGE.

Our certification comes with a communication package for every awarded client. It includes an official certificate, a promotional plate and poster, and customised reports.

The Homes4Life certification provides a much-needed common language for civil society organisations, policy-makers, and professionals of the construction sector to build together a more inclusive housing market."

Estelle Huchet, AGE Platform Europe,
The European network of older persons

Homes4Life www.homes4life.eu

EUROPEAN CERTIFICATION FOR AGEING IN PLACE

Are you interested to deliver the Homes4Life certification?
Contact us at **certification@homes4life.eu**

HOMES4LIFE IS DELIVERED BY THE FOLLOWING EUROPEAN CERTIFICATION BODIES

CERWAY
+33 1 40 50 28 85
cerway@cerway.com

TECNALIA CERTIFICACIÓN
+34 678 86 08 22
eva.sanchez@tecnaliacertificacion.eu

HOMES4LIFE COMMUNITY OF INTEREST

Join the Homes4Life Community of Interest to keep in touch with us:

- Receive updates about our project progress (recently released public reports, etc.)
- Be invited to workshops or events organised by our partners
- Receive opportunities to contribute the Homes4Life certification scheme development (call for comments, pilot testing phase, etc.)

Photo credit : Unsplash

Homes4Life Community of Interest

This audience has **139** contacts. **137** of them are subscribers.

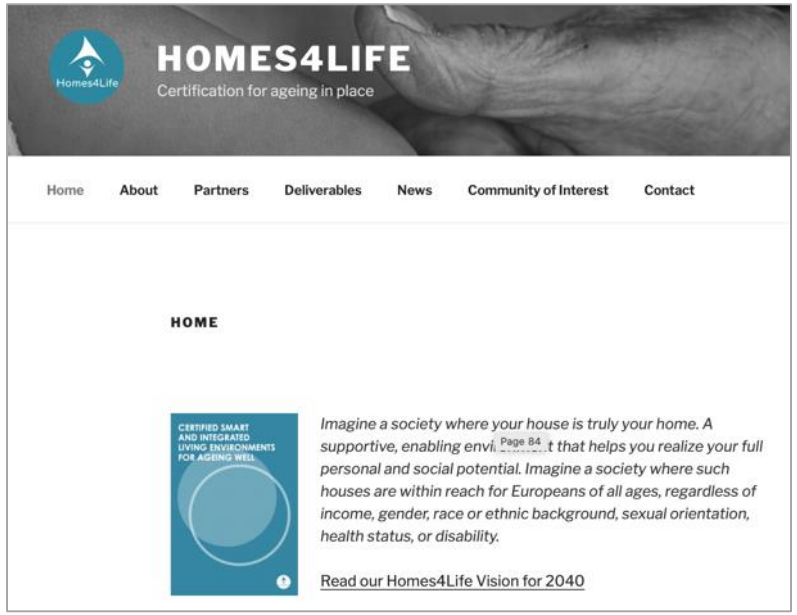
My expectations · Edit

Checkboxes · Delete

- **Be informed about the project progress and achievements** · Edit
  128 contacts
- **Contribute to the certification scheme development** · Edit
  72 contacts
- **Test the future certification scheme** · Edit
  59 contacts

http://www.homes4life.eu/community-of-interest/

STAY IN TOUCH & COOPERATION



Website : www.homes4life.eu

To discuss dissemination, communication &/or exploitation opportunities:

regis.decorme@r2msolution.com

Deliverables available on http://www.homes4life.eu/deliverables/

Silvia.urra@tecnalia.com

THANK YOU FOR YOUR ATTENTION!

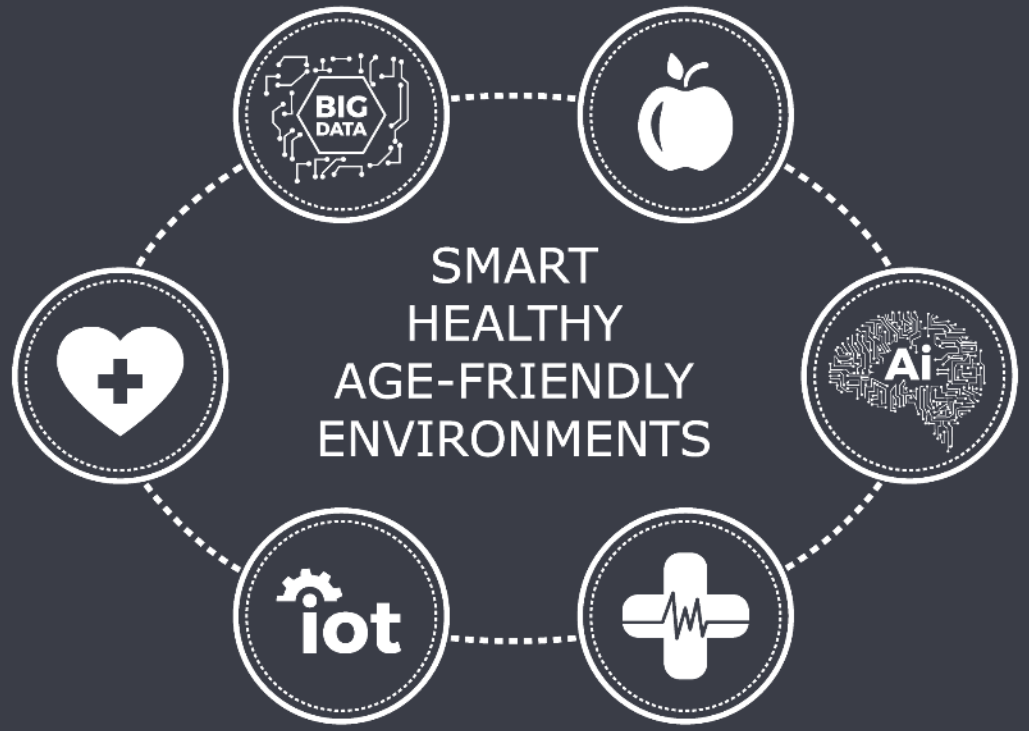
SMART HEALTHY AGE-FRIENDLY ENVIRONMENTS

STAKEHOLDERS NETWORK SHAFE

Hands-on SHAFE

NET4 age-friendly

CARINA DANTAS



STAKEHOLDERS NETWORK

SHAFE

A new concept was created since 2017, based on the desire to implement **Smart Healthy Age-Friendly Environments (SHAFE)** across Europe, fostering happier and healthier people in all communities.

This idea took shape and became a solid movement. That is how SHAFE was born and further launched in 2018, by Cáritas Diocesana de Coimbra and AFEdemy, in close cooperation with several European organisations.

COORDINATORS

Cáritas Diocesana de COIMBRA

AFEdemy age-friendly environments academy

MAIN PARTNERS

European Innovation Partnership on Active and Healthy Ageing

ECHAlliance

EURO CITIES

Towards an Age-Friendly Europe

EIP ON AHA RSCN

EHTEL

ECTP INNOVATIVE BUILT ENVIRONMENT

EIP-SCC

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH

SHAFE began as a Thematic Network, approved by the European Commission, with the ambition to draw policy makers, organisations and citizens' attention to the need of better alignment between health, social care, built environments and ICT, both in policy and funding.

The conclusions of this extensive work in 2018, gathering over 160 organisations as partners, was delivered to the European Commission and Member States in a Joint Statement and a Framing Paper in December 2018.

After this, SHAFE evolved to a European **Stakeholders Network**, which is currently working to achieve better COOPERATION and IMPLEMENTATION, as the major challenges for this next period.

ASSOCIATED PARTNERS

~170 ORGANISATIONS

JOINT STATEMENT ON SMART HEALTHY AGE-FRIENDLY ENVIRONMENTS

A SHARED VISION

NEEDS

COOPERATION
COMMUNICATION

RESEARCH FOR
PREDICTION / PREVENTION

FUNDING / CONDITIONS
FOR IMPLEMENTATION

CITIZEN
EMPOWERMENT

RECOMMENDATIONS TO CITIZENS

WE EXPECT YOU TO
PARTICIPATE

+ ACTIVE CITIZENSHIP

+ HEALTH LITERACY

+ ADAPTED ENVIRONMENTS

+ PHYSICAL EXERCISE

CITIZEN
EMPOWERMENT

COOPERATION

IMPLEMENTATION

TASK FORCE SHAFE?

POSITION PAPER 2020

THE CHALLENGE

SHARED RESPONSABILITY ON COMMON GOOD

To live and participate in society as inhabitant, worker or volunteer, it is necessary that working and living environments are usable, accessible and reachable. No matter if someone walks, drives, uses a walker or wheelchair, or is having hearing or vision problems.

With the ongoing digitization of society, new opportunities arise to foster these living and working environments. Also, digital solutions could assist to better prevent from non-communicable diseases, and to promote independent living, work till older age, favoring more health and wellbeing.

However, single digital solutions are not the panacea to all issues:

CITIZENS need to improve:

- digital skills
- health literacy
- engagement and democratic participation
- Less inequalities on access

ENVIRONMENTS have as major challenges:

- house retrofitting
- digital infrastructures
- public spaces and transport
- climate neutral solutions (in the area of environments)

and, finally, HEALTH AND CARE need:

- reliable and accessible big data
- integrated and person-centered solutions (new pathways)
- implementation guidelines and long-term funding solutions/business models

We acknowledge that all these challenges are interconnected and that a global approach is needed!

This was already the path used to conceive and deliver the

JOINT STATEMENT ON SHAFE

SMART HEALTHY AGE-FRIENDLY ENVIRONMENTS, in 2018.

MAIN GOALS

By 2022, the Stakeholders Network on SHAFE aims to achieve mainly **COORDINATION** and **IMPLEMENTATION**, specifically the following higher-level goals:

- Promote **training of formal and informal caregivers** (communities) on SHAFE, creating a toolkit and implementing training actions in multiple countries;
- Raise awareness on the need to coordinate Health and social care, building infrastructure and environment conditions in order to move aging and wellbeing towards home care and prevention – to a **Health and Wellbeing value-based approach**;
- Jointly develop **sustainable business cases** with governments, insurance companies and investors to foster future investments on smart healthy environments;

MAIN GOALS

- **Modernise education** of urban planners, architects and ICT-developers in general to focus on PEOPLE and PLACES and focus research on lifelong learning, evidence-based design, smart healthy environments and empowerment;

- **Support public authorities and health and social care providers on implementing SHAFE**, especially regarding building or restructuring the built environment to include ICT solutions with integrated health and care provision.

THE SOLUTION

How to scale-up and implement SHAFE?

7 POLITICAL MEASURES TO IMPLEMENT IN REGIONS / MS

Policy makers
What financial incentives can you approve to foster the implementation of SHAFE?

Insurance companies
What measures can be included in insurance packages that foster SHAFE?

Citizens
What commitment is fair to ask on taking the lead on healthy habits and digital&health literacy?

Financers
What measures do you need to invest or develop SHAFE?

Health & care providers
What measures are lacking to implement SHAFE and what can you contribute?

Researchers/Academia
what can you bring on lifelong learning/digital skills and research for prevention?

Building industry
What can you bring and what you need to integrate smart built environments?

PROJECTS/NETWORKS BASED ON SHAFE

SHAFE being IMPLEMENTED

REDE PORTUGUESA AMBIENTES

SAUDÁVEIS, INTELIGENTES E AMIGÁVEIS

Cáritas Diocesana de COIMBRA

Escola Superior de Enfermagem de Coimbra

Ageing@Coimbra

PORTO 4AGEING

EIP on AHA

INOVA+

GPPQ

UAlg UNIVERSIDADE DO ALGARVE

REPLICAR

ccdrc

International Interdisciplinary Network on Smart Healthy Age-friendly Environments

NET4 age-friendly

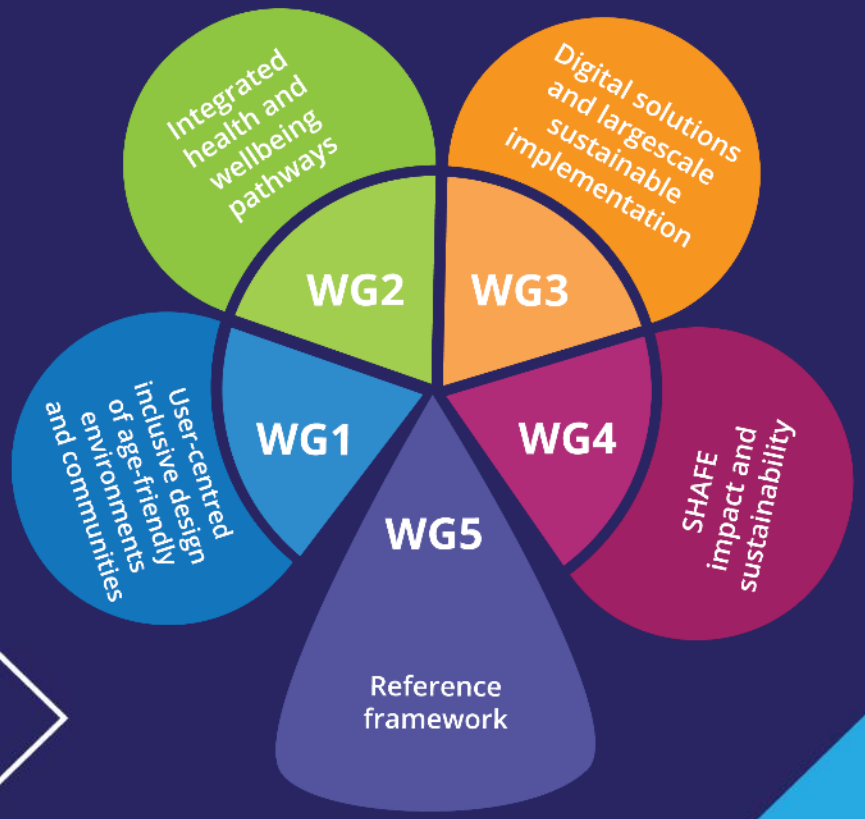
cost
EUROPEAN COOPERATION IN SCIENCE & TECHNOLOGY

Establishment of local or regional ecosystems to work on

health & wellbeing in an age-friendly digital world.

With citizens, public authorities, businesses, NGOs and researchers.

They will be supported by 5 **Working Groups**.



cost EUROPEAN COOPERATION IN SCIENCE & TECHNOLOGY

NET4 age-friendly

MANAGEMENT COMMITTEE

68 MEMBERS

FULL NETWORK

213 researchers

cost EUROPEAN COOPERATION IN SCIENCE & TECHNOLOGY

NET4 age-friendly

Hands-on SHAFE

COORDINATOR:

AFEdemy
age-friendly environments academy

PARTNERS:

Cáritas Diocesana de COIMBRA
DUBLIN
Warsaw University of Technology
ISS
airelle

Co-funded by the Erasmus+ Programme of the European Union

ABOUT THE PROJECT

Hands-on SHAFE aims to deliver informal learning experiences and hands-on tools to implement SMART and HEALTHY BUILT environments or to develop BUSINESS in this area.

It especially targets to:

- improve people's skills - especially with low qualifications and / or vulnerabilities
- create online training programs for informal learning and practical tools
- create community facilitators that foster healthy and friendly environments in their own homes and neighborhoods.

EU_SHAFE

Interreg Europe

COORDINATOR:

Bizkaia
foru aldundia
diputación foral

PARTNERS:

Cáritas Diocesana de COIMBRA

Hamburg | Behörde für Gesundheit und Verbraucherschutz

CENTER FOR ASSISTED LIVING TECHNOLOGY

Deusto
Universidad de Deusto
Deustuko Unibertsitatea
University of Deusto

DUBLIN

ECHAlliance

REGIONE CAMPANIA

RAZVOJNI CENTER SRCA SLOVENIJE

European Union
European Regional
Development Fund

ABOUT THE PROJECT

EU_SHAFE
Interreg Europe

The EU_SHAFE project will improve policies and practices in **7 European regions** by developing a comprehensive approach to **Smart Healthy Age-Friendly Environments** (SHAFE).

Through a 'learning by sharing' methodology, this robust multidisciplinary and intersectoral consortium will build a **quadruple-helix European community** to exchange experiences and practices to improve **multilevel policy instruments**.

pharaon

SMART CITIES

and the

Ageing Challenges

Dialogue between different knowledge areas, contexts and actors

- 2 NGOs | CDC, SCMA
- 2 Universities | UC, UBI
- 1 Business | Glintt

"In smart cities the citizens activities are not limited to their homes; they live their lives in an entangled society".

pharaon

4 AREAS → 3 LAYERS → 8 ACTIONS

Horizon 2020 European Union Funding for Research & Innovation

The pre-validation pilot is already ongoing in Coimbra, with

Office workers 55+

Employers

Caregivers

In real environments, in order to co-create and evaluate the SmartWork system.

Funded by Horizon 2020 Framework Programme of the European Union under Grant Agreement No. 826343

ValueCare

Value-based methodology for integrated care supported by ICT

Aims to deliver personalised integrated (health and social) care services, better outcomes for older people and improved care experience.

It also aims to improve staff satisfaction and greater efficiency in the use of resources and coordination of care.

Enhance the experience of older people through innovative digital solutions

Improve the satisfaction of multidisciplinary care teams

Use resources more efficiently through improved coordination

Improve care outcomes and maintain quality of life for older people with frailties

CONS©ELHOS REPÓRTERES 55+

Cons©elhos Repórteres 55+ promotes the active participation of older and isolated people in local community transformation, in order to create better conditions for active aging.

In a snowball methodology, the project trains mentors at the local level, who then create their groups of 55+ reporters in different communities to survey the conditions that need to be improved for their quality of life, such as accessibility, transportation, access to health services, cultural activities, etc.

In the end, it will help these groups of reporters to summarize their needs and proposals for improvement and present them to the competent authorities and / or mobilize possible solutions, in a true exercise of citizenship.

PRÉMIOS BPI "la Caixa" | 2019
RURAL

ACTIVAS Built Environments for an Active, Safe and Healthy Life

This multidisciplinary project promotes a disruptive response to the ageing challenges, in terms of environment, cities, and buildings, creating new opportunities for economic agents from various sectors.

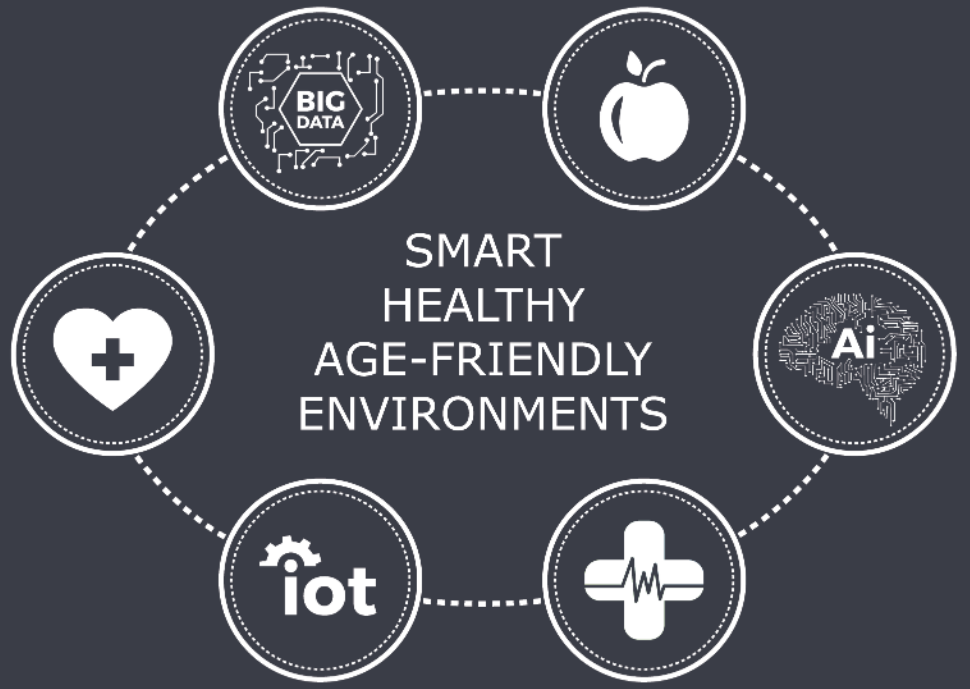
In short, the main goal is to achieve and validate an assisted environment “Active, safe and healthy life” based on a pilot that will integrate solutions developed for new environments and spaces – personalized lifelong health, including:

- Building materials
- Robots
- Furniture
- Domotics
- Sensors
- Platforms

COMPETE 2020
PORTUGAL 2020
UNIÃO EUROPEIA
Fundo Europeu de Desenvolvimento Regional

THANK YOU!

Carina Dantas



Cáritas Diocesana de COIMBRA

AFEdemy
age-friendly environments academy

Silvia Urra

Carina Dantas

European Commission

IRINA KALDERON-LIBAL

Active and Healthy Ageing in smart living environments: EC perspective

Sustainable Places Conference

Irina Kalderon Libal

Policy Officer

DG CNECT H.3

'eHealth, Wellbeing and Ageing'

30/10/2020

Digital Health and Care

TRANSFORMATION OF HEALTH AND CARE IN THE DIGITAL SINGLE MARKET - Harnessing the potential of data to empower citizens and build a healthier society

European health challenges

- Ageing population and chronic diseases putting pressure on health budgets
- Unequal quality and access to healthcare services
- Shortage of health professionals

Potential of digital applications and data to improve health

- Efficient and integrated healthcare systems
- Personalised health research, diagnosis and treatment
- Prevention and citizen-centred health services

What EU citizens expect...

90% agree To access their own health data (requiring interoperable and quality health data)

80% agree To share their health data (if privacy and security are ensured)

80% agree To provide feedback on quality of treatments

Support European Commission:

European Commission

1 Secure access and exchange of health data

Ambition:

Citizens can securely access and share (e.g. with doctors or pharmacies) their health data anywhere in the EU.

Actions:

- eHealth Digital Service Infrastructure will deliver initial cross-border services (patient summaries and ePrescriptions) and cooperation between participating countries will be strengthened.
- Proposals to extend scope of eHealth cross-border services to additional cases, e.g. full electronic health records.
- Recommended exchange format for interoperability of existing electronic health records in Europe.

2 Health data pooled for research and personalised medicine

Ambition:

Shared health resources (data, infrastructure, expertise...) allowing targeted and faster research, diagnosis and treatment.

Actions:

- Voluntary collaboration mechanisms for health research and clinical practice (starting with "one million genomes by 2022" target).
- Specifications for secure access and exchange of health data.
- Pilot actions on rare diseases, infectious diseases and impact data.

3 Digital tools and data for citizen empowerment and person-centred healthcare

Ambition:

Citizens can monitor their health, adapt their lifestyle and interact with their doctors and carers (receiving and providing feedback).

Actions:

- Facilitate supply of innovative digital-based solutions for health, also by SMEs, with common principles and certification.
- Support demand uptake of innovative digital-based solutions for health, notably by healthcare authorities and providers, with exchange of practices and technical assistance.
- Mobilise more efficiently public funding for innovative digital-based solutions for health, including EU funding.

#DigitalSingleMarket #DigitalHealth @eHealth_EU @EU_Health

Updated 07/09/2018

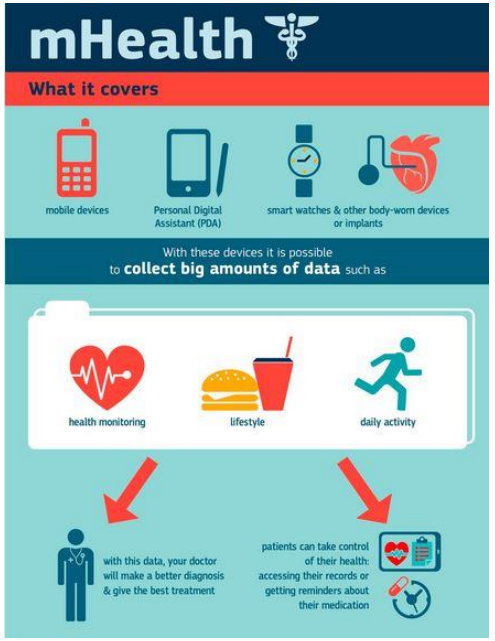
Ambition:

Citizens can monitor their health, adapt their lifestyle and interact with their doctors and carers (receiving and providing feedback).

Horizon 2020

DG CNECT has funded more than 180 R&I projects through Horizon 2020 under Societal Challenge 1 'Health, demographic change and wellbeing'.

3 Digital tools and data for citizen empowerment and person-centred healthcare



H2020 Calls: Societal Challenge 1 – Health, Demographic change and Wellbeing

- SC1-DTH-04-2020: International cooperation in smart living environments for ageing people
- SC1-HCC-08-2020: Scaling up innovation for active and healthy ageing
- DT-TDS-01-2019: Smart and healthy living at home
- SC1-DTH-03-2018: Adaptive smart working and living environments supporting active and healthy ageing
- SC1-HCC-01-2018: Supporting investment in smart living environments for ageing well through certification

AAL PROGRAMME

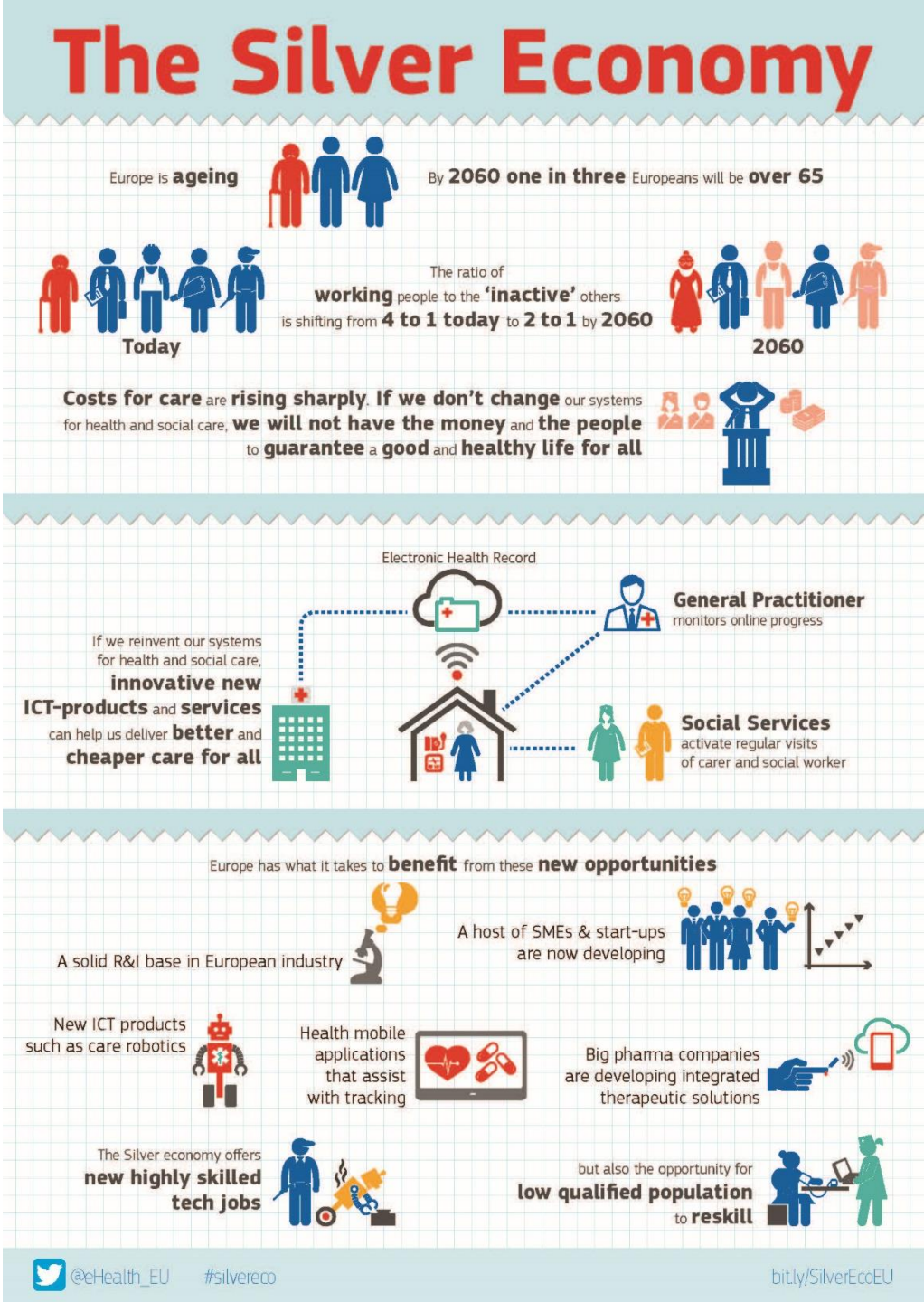
WHO

A unique public-public partnership of 26 public funding agencies:

- From currently 20 countries around Europe plus Canada
- R&D, innovation, health & regional support focus

WHY:

1. Enhancing older adults' quality of life through innovative digital technology-based solutions
2. Support long-term sustainability of health & care systems
3. Strengthening the emerging industrial base in Europe



European Innovation Partnership on Active and Healthy Ageing

- *Launched to increase the average healthy lifespan by two years by 2020 and to pursue a a Triple win for European citizens*
- *103 Reference Sites to scale up innovation for active and healthy ageing*
- *Twinning Schemes*

European Innovation Partnership on Active and Healthy Ageing

140

Report on the Impact of Demographic Change in Europe

1

In 2018, life expectancy at birth increased to **78.2 YEARS** for men and **83.7** for women.

This growth is projected to continue: men born in 2070 are expected to live **86 YEARS**, and women **90**

2

In 2018, the average number of childbirths per woman was **1.55** and their median age at childbirth **31.3**.

3

By 2070...

the share of people **65 years or older** is projected to be

30.3% (compared to 20.3% in 2019)

the share of people **80 years or older** is projected to be **13.2%** (compared to 5.8% in 2019)

Report on the Impact of Demographic Change in Europe

4 In the EU as a whole, the composition of our households is changing – households composed of two parents with children are being joined by households consisting of people living alone, single parents or couples without children.

5 Some of us opt to move around or live abroad, but the size of these flows is volatile and can change quickly.

The Commission's Demography Report presents the main drivers of demographic change and the impact they are having across Europe. It launches a process that will help identify concrete actions and solutions, mindful of lessons learned from COVID 19, to support people, regions and communities that are most affected and to enable them to adapt to changing realities.

6 The share of Europe's population in the world is shrinking and by 2070 it will account for just about **4%** of the world's population.

NEXT STEPS

- **Council Conclusions on** Human rights, participation and well-being of older persons in the era of digitalization (09 October 2020, German Presidency)
- **Green Paper on Active Ageing** (January 2020)
- **Vision on Rural areas** (April 2020)
- **New MFF**

NEXT Multi-annual Financial Framework

- Structural funds (ESIF/ERDF) - supports the deployment of digitally enabled health and care solutions beyond pilot/proof of concept stage. A mapping of the investments in Health and eHealth for 2014-2020 is available here.
- Horizon Europe partnership: “Transforming health and care systems”
- EU4Health
- Renovation Wave Strategy – Smart, green and sustainable housing
- Recovery and Resilience Plan – 750 Billion EUR
- Digital Europe Programme – AI, Cybersecurity, Interoperability, HPC,

Thank you!

@eHealth_EU

@DSMeu

Irina.Kalderon-Libal1@ec.europa.eu

- eHealth: https://ec.europa.eu/digital-single-market/en/policies/ehealth
- R&D&I: http://ec.europa.eu/horizon-europe
- Digital Programme: http://europa.eu/rapid/press-release_IP-18-4043_en.htm