European Innovation Partnership

Active and Healthy Ageing

Andalusia:
a 3-star Reference Site

Ana M. Carriazo, MD PhD
Regional Ministry of Health of Andalusia
10.02.2016

- **Becoming involved in the first call**
- **Initial process**
- **Description of Good Practices**
- **Reasons to participate**
- **Benefits and challenges**
- **Recommendations**

Invitation for expression of intent to be a candidate Reference Site

- "**Reference Sites**" :
  - regions, cities or integrated hospitals/care organisations
  - established in a geographical location in Europe
  - provide a comprehensive innovation based approach to active and healthy ageing
  - provide concrete example of existing and successful integrated solutions, based on evidence of their impact in practice
  - expected to contribute significantly to building the synergies between the different Partnership Actions

- Interested parties can submit their Expressions of intent via an online tool
- **Deadline: 31 May 2012**
- All submitted Expressions of Intent to be a candidate Reference Site will be made **publicly available**

Conditions for a candidate Reference Site

Candidate Reference Sites need to:

- Be national/regional/local authorities or public/private care institutions (e.g. integrated hospitals/care organisations) in Europe
- Build a coalition of partners involving relevant actors (e.g. professionals, patients, carers and families, industry and service providers, public authorities etc.)
- Be willing to implement a **substantial** part of the actions of the SIP in an integrated way → Specific Actions spanning **across the 3 pillars**
- Be ready to demonstrate coverage of a significant proportion of the target population (**at least 10%**), by the services of the Specific Actions
- Present a list of results/outcomes to be delivered in the 2013-2015 timeframe
- Be ready to exchange good practice, share information and make publicly available data on outcomes/impact
- Be ready to cooperate with other relevant initiatives across Europe
- Be ready to perform an assessment, and be assessed by peers, on the outcomes and impacts according to a commonly agreed methodology
- **Assessment of Candidate Reference Sites foreseen for mid-2013**

Andalusia:

-Decision to participate: merging of Ministries of Health and of Social Welfare

-Being aware of the lack of direct funding

-Political decision

-Initial submission for becoming a candidate for RS

Andalusia

JUNTA DE ANDALUCIA

Main features

- **8,492,635** inhabitants
- **>22 M** tourists
- Political Autonomy since **1981**
- Full responsibility at regional level on Public Health and Healthcare services since 1984
- Regulatory framework for Social services

Public Healthcare System

1500 Primary care centres
47 Hospitals (93% h beds)
100,000 healthcare workers

3800 Pharmacies (private)
PHC is the gatekeeper

Public Social care System

3500 Social care centres (child care, drug addiction, people with disabilities, elderly people and community social services) Coordination with local authorities, and close collaboration with the third sector.

1978 centres devoted to the elderly (day-care centres, active participation centres and others).

Andalusia (Spain), one of the largest regions in Europe has a population of 8.4 million inhabitants . Around 1.3 million are 65 or +. The region is responsible for public health, health policy and healthcare provision as well as social welfare policies and social care. In fact, since May 2012 there is a Regional Ministry of Health and Social Welfare in Andalusia, providing the financial and human resources needed. The Andalusian Health Plan and the Andalusian White Paper on Active Ageing state the overarching goals of the Andalusian Public Health and Social Care System. Specific Action A1: The corporate electronic prescription system in Andalusia, (Receta XXI, -Prescription XXI-), is widely used throughout the health system. It is included in the electronic health management and information system in Andalusia, Diraya, as well as the electronic health record for all citizens in the region. All pharmacies (private offices) are connected to this system, thanks to an agreement with the regional official Colleges of Pharmacists. Adherence to treatments will be studied. Specific Action B3: Andalusia has a Comprehensive Plan for patients with chronic diseases. For this action we will include the Andalusian pilot within the PALANTE project (CIP GA 297260), which plans to include 10% of people with diabetes. This pilot will provide patients' access to their personal health record, allowing them to manage their disease in a better way. It also includes personalised self-management educational programmes, diet counselling and daily activities recommendations. Specific Action D4: A million steps programme is a health promotion activity developed in collaboration with citizens' associations, local governments, different institutions to promote walking as a tool to improve health and wellbeing. This programme is being implemented in the region.

Andalusia (Spain), one of the largest regions in Europe has a population of 8.4 million inhabitants . Around 1.3 million are 65 or +. The region is responsible for public health, health policy and healthcare provision as well as social welfare policies and social care. In fact, since May 2012 there is a Regional Ministry of Health and Social Welfare in Andalusia, providing the financial and human resources needed. The Andalusian Health Plan and the Andalusian White Paper on Active Ageing state the overarching goals of the Andalusian Public Health and Social care System. Specific Action A1: The corporate electronic prescription system in Andalusia, (Receta XXI, -Prescription XXI-), is widely used throughout the health system. It is included in the electronic health management and information system in Andalusia, Diraya, as well as the electronic health record for all citizens in the region. All pharmacies (private offices) are connected to this system, thanks to an agreement with the regional official Colleges of Pharmacists. Adherence to treatments will be studied. Specific Action B3: Andalusia has a Comprehensive Plan for patients with chronic diseases. For this action we will include the Andalusian pilot within the PALANTE project (CIP GA 297260), which plans to include 10% of people with diabetes. This pilot will provide patients' access to their personal health record, allowing them to manage their disease in a better way. It also includes personalised self-management educational programmes, diet counselling and daily activities recommendations. Specific Action D4: A million steps programme is a health promotion activity developed in collaboration with citizens' associations, local governments, different institutions to promote walking as a tool to improve health and wellbeing. This programme is being implemented in the region.

EIP on Active and Healthy Ageing
Working Meeting on
Assessment Methodology of Reference Sites
Wednesday 7th November 2012
09.30 – 12.30 CET

Self-assessment methodology
10-12-2012

Scores and Stars
Peer-review system

A table with criteria for self-assessment of candidate Reference Sites

Criteria	Sub-criterion *[1 point per each]*	Good Practice 1	Good Practice 2	Good Practice 3
innovation	**relevance** ***[link to the 3 pillars of the EIP: prevention and early diagnosis, care and cure, and independent living and active ageing]***			
	added value ***[innovative elements and their relative advantages and benefits over existing models]***			
	integrated approach across 3 pillars ***[integration of 3 pillars - either how it is already achieved or the strategy to achieve it), strategic planning, financing and purchasing schemes, integration of services & coordination across care providers/services]***			

scaling up & replicability	**scaling-up strategy** ***[strategic planning, means of communication, dissemination, facilities for transfer of knowledge to other regions, promotion]***			
	involvement of relevant partners ***[local coalition of stakeholders, collaboration/partnerships with other actors outside your region]***			
	mobilisation ***[expanding coverage of the innovative solution in your local population, identification and commitment of partners, education and training efforts, funding sources, political advocacy/lead]***			

outcomes	**for citizens** ***[demonstration, based on indicators, of impacts on health status and quality of life of your local population]***			
	for care systems ***[demonstration, based on indicators, of impacts on the sustainability and efficiency of your health and social care systems]***			
	for growth and markets ***[demonstration, based on indicators, of impacts on at least one of the following: competitiveness of EU industry, expansion of new markets and growth, employment & job creation]***			
	coverage ***[demonstration that more than 10% of the local target population receives the innovative service]***			
	transferability ***[demonstration that your innovative service has been adopted, tailored and validated experience in at least 2 other regions]***			

Andalusia: initial process

-Identification of Good Practices:

- Andalusian Strategy on Active Ageing
- Andalusian eHealth Strategy

-<u>Team</u> for selecting data and contributions

-Internal leadership

Andalusia as Reference Site Dates

Feb 2012: EIP on AHA Communication

6 Nov 2012: Launch of the EIP on AHA and 1st Conference of Partners

26 Feb – 19 Apr 2013: Preparation and submission of the candidacy of Andalusia as RS with 2 GGPP:

(1) Andalusian Strategy on Active Ageing;

(2) Andalusian eHealth Strategy.

May – June 2013: Peer Review process.

1 July 2013: Reference Sites Star Ceremony in Bruselas. Andalusia is awarded as 3 star Reference Site for both GGPP presented.

Star Ceremony (Reference Sites recognition)
Brussels, 1 July 2013

DOCUMENTS

Catalogue of the 32 Reference Sites

'How to' Guide

32 Reference Sites were awarded

3 STAR: 13 RS (ANDALUSIA)

2 STAR: 12 RS

1 STAR: 7 RS

European Commission

European Innovation Partnership on Active and Healthy Ageing

Reference Sites

Excellent Innovation for ageing
A European Guide

Site: Regional Ministry of Health and Social Welfare of Andalusia

★★★

The Regional Ministry of Health and Social Welfare is in charge of health and social welfare policies and leads the Andalusian Public Healthcare Service (APHS) and the Andalusian Social Services Agency

The **Andalusian e-Health Strategy** (AeHS) enhances the quality of life of citizens and the coordination of health and social carers through electronic integration of health information. It is available to all 8.5 million inhabitants and all pharmacies and public healthcare professionals participate. Some of the innovative services provided to the population include: the electronic health record unifying the health information on each patient, *electronic prescription, telemedicine services and mobile health applications.*

Several Andalusian and Andalusia-based companies participated in EU-funded projects like Commwealth, Palante and Independent.

The Andalusian Strategy on Active Ageing (ASAA) applies to all 1.280.000 65+ citizens. It integrates policies around the pillars health, participation, security and training and comprises initiatives such as programmes to promote physical activity, the Andalusia Junta 65 card (for *discounts and benefits in transport, cultural, sport, and leisure activities*), the *University Programme for the Elderly*; and an elderly *annual check-up.*

JUNTA DE ANDALUCIA
CONSEJERÍA DE SALUD Y BIENESTAR SOCIAL

Examples of impact:
Increase of usage and user satisfaction of AeHS:

- 139 million e-prescriptions in 2012;
- 100% coverage of mobile intensive care units for training in mobile health applications;
- 7,532 queries to access the EHealth Record in 2012;
- 12,470 subscriptions to SMS alerts;
- over 4000 downloads of the health apps in over 30 countries.

The economic impact of the AeHS:

- ePrescription: saving of € 3,1 million (elimination of printing costs) and € 3.2 (data management);
- decrease of hospital admissions (from an average stay of 7,5 days in 2008 to 7,16 in 2012)
- decrease of consultations in family medicine (-16,11% from 2007 to 2012).

ASAA services have a wide outreach:

- about 1 million elderly are Junta-card holders;
- 50.000 participants in the University Programme for Elderly;
- 138.891 patients used Physiotherapy and rehabilitation services
- 3.699 patients used Mobile Units;
- Health check-up for people over 65 reached 63% of the target.

ASAA results in terms of economic investment and return:

- Junta card has brought savings of €200 million;
- €1 million investment in supporting care material for people with special needs;
- 829 companies have registered and 2.672 jobs are estimated to have been created in the entrepreneurship programme SENIOR.

For further information:
http://www.juntadeandalucia.es/salud/sites/csalud/portal/index.jsp

2ª Conference of Partners of the EIP on AHA
Brussels, 25 nov 2013

Participation of the Regional Minister of Equality, Health and Social Policies:

Pannel “Social and Economic Grow and Jobs”

BROAD DISSEMINATION OF THE REGIONAL STRATEGIES PRESENTED AS GGPP

Reasons to participate:

-Political dimension

-Opportunities for exchange of good practices

-Share the experiences

-Synergies with Action Groups

-Active participation leads to active engagement in projects and initiatives (funding opportunities)

-Collaboration with wide range of stakeholders

Integrating health and social care

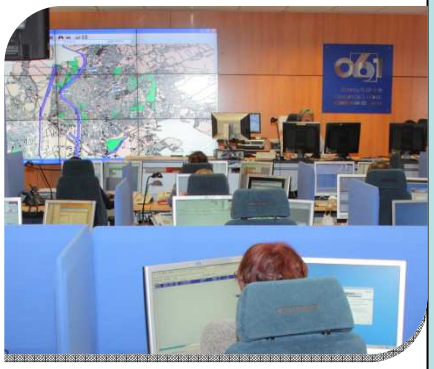
CommonWell
Common Platform Services for Ageing Well in Europe

SERVICIO ANDALUZ TELEASISTENCIA

061 Emergencias Sanitarias Andalucía

independent COORDINATED eCARE

SaludResponde 902 505 060



E-MAIL
SMS
APP

- Cita Previa
- Salud “24 horas”
- Libre elección hospital
- Segunda opinión médica
- Servicio SMS
- Seguimiento de pacientes
- Enfermera gestora de casos
- Voluntad vital anticipada
- Servicio teletraducción

EEA

EET

ECA

DCCU

TSC

SVB

Servicio Andaluz de Salud
CONSEJERÍA DE IGUALDAD, SALUD Y POLÍTICAS SOCIALES
JUNTA DE ANDALUCIA

Health Report

Agencia de S.S. y Dependencia de Andalucía
JUNTA DE ANDALUCIA

Assessment centre

Diraya

Challenges and recommendations:

-Different languages and health and social care models and systems

-Important to participate actively, but there are limitations to do so.

-Engage people regionally to contribute to the broader discusions

-Innovation