

In collaboration with:



Thematic Workshop

Implementing a comprehensive approach to integrated care

Reference Site Campania

Jointly with

EIP on AHA RSCN and A3 Action Group on Lifespan Health Promotion & Prevention of age related frailty and disease

3-4 December 2019 – Sala Benedetto XIII,
Via San Gallicano 25a – Rome

December 3

The 2019 Conference of Partners of the EIP on AHA, held in Aarhus jointly with AAL community, highlighted the need to strengthen the ties between Reference Sites and Action Groups.

This is why A3 winter meeting has been jointly organized by the RSCN and A3 Action Group, with the objective of sharing a common approach to the scale-up of validated good practices in digital health.

The update of the Blueprint for the Digital Transformation of Health and Care provided a methodology to develop persona types, representing citizens needs in a matrix developed along lifecourse and complexity.

Persona types share some unmet needs, related to dependency and caregivers stress, adherence to more or less complex treatment regimens, including healthy lifestyles, often safety and accessibility concerns and diverse degrees of social isolation.

The implementation of an innovative response to unmet health needs requires the implementation of a number of actions at individuals well as population level, with a paradigmatic shift in the way our services are organized, demanding political leadership and stronger commitment of authorities in managing the digital transformation. Hence the need to strengthen communication between technical and policy/decision makers levels, to increase the awareness about the specific actions needed in order to make the ecosystem move coherently. The dialogue between Action Groups and Reference Sites is an example of how we can start to address such challenge.

Aim of the meeting is to identify the personas that RS prioritise, and challenge the Action Groups in addressing jointly their unmet needs, based on the validated good practices they have been developing and with a strong engagement of endusers. This collaborative approach will facilitate the identification of organizational, digital and sociocultural elements requiring customization to ensure adoption at a specific locoregional level.

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Programme

- 10.00 Welcome and introduction. Giuseppe Liotta and Maddalena Illario
- 10.10 Maximising the benefits of EIP on AHA for Reference Sites and Action Groups. John Farrell
- 10.20 The Blueprint personas: an overview. Lutz Kubitschke
- 10.30 Round table: The challenges addressing social and health needs by innovative and integrated approaches.

Chair: Regina Roller

Participants: RS and AGs

Lucia Di Furia, Marche RS

Paola Obbia, Piemonte RS / AG B3

Maddalena Illario, Campania RS

Manuela De Sario, Lazio RS

Edwig Goossens, Delta RS

Theodore Vonteskianos, Athens RS

11.30 – 13.00 Breakdown sessions

The session will simulate the implementation of an integrated approach to address social and health needs of a specific Blueprint persona, prioritized by RS, in the effort of combining the solutions that are available and validated in AGs/RS. Older adults representatives will be present in each group. The work will be developed using the Blueprint personas template.

Moderator: Giuseppe Liotta

1. Generally well: pre-frail older adults
Facilitator: Chariklia Tziraki
Rapporteur: Marcello Maggio
2. Chronic conditions: frail older adults
Facilitator: Regina Roller
Rapporteur: Francesco Cacciatore

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3. Complex needs: very frail, long term home care

Facilitator: Guido Iaccarino

Rapporteur: Veronica Zavagli

13.00 – 13.30 Results and discussion of break-up sessions

13.30-15.00 Light Lunch

Afternoon session

The focus of this session will be on the impact of innovative interventions in social and health domains that are grounded on the evaluation of outcomes in persons at risk of (or affected by) frailty/chronic diseases. Europe has been looking for the last 20 years the model of Long Term Care (LTC) best suited to respond to the ongoing welfare transition, that is the increase in care demand due to the increasing prevalence of chronic diseases, particularly among the older adults. The differences between the various European countries in terms of LTC require not so much a single model but flexible solutions that can be “customized” to the characteristics of each country. Indeed, it is possible to identify elements common to all the countries that constitute a shareable denominator from which to start to improve LTC. Frailty is one of these elements, a synthetic indicator of welfare demand, associated with the consumption of socio-health resources and also mortality. Starting from the assessment of frailty, as a multidimensional quantity that combines elements of psycho-physical health, functional capacity and socio-economic resources, it is possible to design and monitor integrated social and health care interventions that positively affect survival and quality of the life of senior citizens. However, the awareness of the potential effectiveness of the care approach based on the assessment of frailty is not yet sufficiently supported by scientific evidence, so as to limit its diffusion. The meeting aims to focus on all the elements available in this field, to encourage an exchange of experiences based on the assessment of frailty and on the measurement of the impact of these experiences on the life of citizens and on LTC models.

15.00 Round table: Professional key roles for older adults based upon the results of the breakdown sessions.

Facilitators: Federico Schena

- The clinician. Ernesto Palummeri
- The nurse: Paola Obbia
- The social worker. Laura Russo
- The IT expert. Marcello Melgara
- The Pharmacist. Simona Creazzola

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16.00 Face up to frailty – Campaign for health literacy by A3 Action Group on Lifespan Health Promotion & Prevention of age-related frailty and disease – European Innovation Partnership on Active and Healthy Ageing

Moderator: M. Illario

16.00 Frailty in older adults: an overview. Francesco Cacciatore

16.07 Impact of perceived wellbeing on health outcomes. Donatella Tramontano.

16.14 The primary gastrological approach to address food-related health needs. Bart Geurden, University of Antwerp.

16.21 Innovative approaches to food service provision. Geertrui, Group Leader Food quality and Product innovation at Flanders Research Institute for Agriculture, Fisheries and Food, ILVO

Experimental lab with Older adults

Facilitators: Giuseppe Liotta/Regina Roller

16.30 – 18.00

- Tastesteering of common food in the prevention of age related frailty and disease.

Practical taste session supported by Three Rivers Delta Reference Site with Chefs Gastro-engineering i.o.:

Martijn van Gemst Zorgwaard

Alex van den Doel Ijsselland ziekenhuis

Lobke Van den Wijngaert Karel de Grote University College

coordinated by Edwig Goossens

- Administration and self-administration of validated questionnaires: for the identification of frailty; for mild cognitive impairment, for malnutrition, for psychological well-being and resilience coordinated by Giuseppe Liotta, Donatella Tramontano and Sara Diamare

- Individual conversation with experts for older adults: Adapted Physical Activity; Polypharmacy. Coordinated by Guido Iaccarino, Federico Schena, Mauro Cataldi.

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Parallel session

16.00- 17.30 Health Tourism, coordinated by ProMIS

In general, the term "health tourism" refers to the set of activities required to organize the traveling and accommodation, needed to obtain specific health services in a foreign country, that have been previously identified by a health professional.

Health sector provides an opportunities to diversify tourist offer and develop new market segments, for example in the framework of accessible tourism and of the silver economy. Digital solutions can support the integration of the tourist offer, facilitating the customization of the offer on the different territory strengths.

A coordinated and targeted action is needed to facilitate innovative approaches at the "system" level. There is a need to define a normative regulation, which supports the development of health tourism, in synergy with the other sectors that are directly or indirectly involved in the effort of strengthening the attractiveness of the entire national territory.

Objective of the session is fostering the conversation between the stakeholders of tourism and health sectors, to identify twinning opportunities for pilot implementation.

Moderator. Ernesto Palummeri, Regione Liguria, Regina Roller, Graz University

Emerging synergies to develop health tourism directories: opportunities for twinnings.

16.00 Opportunities and bottlenecks to develop health tourism. Staff ProMIS

16.10 Conjugating health promotion to tourism offer: tailored diversification using IT. Diego Conforti, PA di Trento.

16.20 Accessible tourism in Veneto experience. Simone Griggio, Ulss 4 Veneto Orientale

16.30 Round table. Exploring tourism opportunities: added value services for the silver generation.

Giovanni Daourakis, Leopoldo Comisso, Stefania Capaldo, Theodore Vontetsianos, Marina Guzzonato and Aurelio Crudeli

17.10 - Discussion

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4 December

Impact of integrated health and social care services grounded on the assessment of frailty

The change of care demand associated to the increasing prevalence of chronic diseases is faced differently the various European countries: the need is for flexible solutions that can be “customized” to the characteristics of each country. Indeed, it is possible to identify elements common to all the countries that constitute a shareable denominator from which to start to improve LTC. Frailty is one of these elements, a synthetic indicator of welfare demand, associated with the consumption of socio-health resources and also mortality. The assessment of frailty, as a multidimensional quantity that combines elements of psycho-physical health, functional capacity and socio-economic resources, makes possible to design and monitor integrated social and health care interventions that positively affect survival and quality of the life of senior citizens. However, the awareness of the potential effectiveness of the care approach based on the assessment of frailty is not yet sufficiently supported by scientific evidence, so as to limit its diffusion. The meeting aims to focus on all the elements available in this field, to encourage an exchange of experiences based on the assessment of frailty and on the measurement of the impact of these experiences on the life of citizens and on LTC models.

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Programma

Impatto degli interventi socio-sanitari basati sulla valutazione della fragilità Impact of integrated health and social care services grounded on the assessment of frailty

08.30 Iscrizioni/Registration

Introduzione/Introduction

- 09:15 L. Palombi – Presidente della *Siti Lazio*
- 09:20 G Liotta - Programma “Viva gli Anziani” *Comunità di Sant’Egidio*
- 09:25 A. Iervolino, Direttore Generale, AOU Federico II
- 09:30 P. Ciani - Vice Presidente, Commissione Sanità, Politiche Sociali, Integrazione Socio-Sanitaria e Welfare della Regione Lazio
- 09:35 P. Sileri – Vice Ministro, Ministero della Salute

Dalla ricerca al territorio: trasferire le conoscenze

The relevance of research: from bench to houses and communities

10:00 – 11:30 Moderatore: G Iaccarino Università degli Studi di Napoli “Federico II”

- 10.00 Impatto di un intervento socio-sanitario integrato a livello territoriale.
G Liotta, Programma Viva gli Anziani!, Rome, Italy
- 10.10 La casa è un posto migliore per invecchiare
P Obbia, Regione Piemonte, Italy
- 10.20 La prossimità come contrasto alle disuguaglianze di salute: Un modello di “microarea” nel Quartiere San Donato/San Vitale
I Camplone, AUSL Bologna, Italy
- 10.30 Intelligent frailty pathways for the Portuguese elderly population and impact analysis of the telecare service SNS24 Proximidade Sénior
RD Sousa, CHRC, Lisbon, Portugal,
- 10.40 The Impact of Socioeconomic Factors and Cognitive Decline on Frailty in Older Adults receiving Home Care in Crete”
C Kleisaris, Hellenic Mediterranean University, Crete, Greece
- 10.50 Application of the Sunfrail Checklist for the early identification of frailty in elderly people.
Y Longobucco, University of Parma, Italy
- 11.00 Strategy for deployment of integrated health regions based upon an evidence based regional ecosystem – The “Styria Model”
M Bormann, University of Applied Sciences, Graz, Austria
- 11.10 La salute nel movimento
F Schena, Università di Verona, Italy
- 11.20 Study of food intake by elderly in a home care setting
R van Gompel, Flanders Research Institute for Agriculture, Fisheries and Food, Belgium

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11.30 - 11.45 Discussione/Discussion

11:45– 12.00 Interruzione/break

Presentazioni dei casi di studio sulle cure integrate e discussione

Blueprint Case study presentation and discussion

12.00 – 13:00

Moderatori: G Liotta, Comunità di S.Egidio; C Cotrone Regione Campania

- Pre-fragile/Generally well: meet Theresa, M Maggio, Università di Parma
- Fragile/Chronic conditions: meet Maria, F Cacciatore, Università di Napoli Federico II
- Molto fragile/Complex needs: meet Diego, V Zavagli, ANT

Discussant

- **A. Pulimeno, Presidente, OPI – Lazio**
- **P. Favali, Presidente, CROAS Lazio**
- **E. Costa, Presidente, AUSER**

Discussione plenaria e conclusioni

Plenary discussion and conclusion

13:00 L Palombi Presidente della SItI Lazio,
M Illario, Regione Campania, Co-president of RSCN