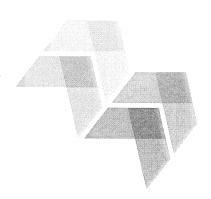


Sharing solutions for better regional policies



Action Plan



Translation, Innovation and Technology Transfer in Ageing Network

Partner:

Lower Silesian Voivodeship Marshal Office (LSVMO)



September, 2018



Part I - General information

Project: TITTAN, Translation, Innovation and Technology Transfer in Ageing Network

Partner organisation: Lower Silesian Voivodeship Marshal Office (LSVMO)

Other partner organisations involved (if relevant):

- Falkiewicz Specialist Hospital in Wroclaw
- Innovative Medicine Cluster
- Wrocław Medical University

Country Poland

NUTS2 region: Dolnoślaskie (PL51)

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Part II - Policy context

The Action Plan aims to impact:

Investment for Growth and Jobs programme

European Territorial Cooperation programme

X Other regional development policy instrument

The policy instrument addressed is a Lower Silesian Development Strategy 2020

Effective implementation of the 2020 Development Strategy for the Lower Silesia Voivodship may contribute to a significant acceleration of the region's development, and thus to a faster elimination of the development gap between the voivodship and the more prosperous European regions. The strategy also strengthens the economic position of the Lower Silesian Voivodship against the background of the country. The main projects for health strategies were based on "fast internet for everyone" - continuation of works on the development of the Lower Silesian Skeleton Network, public services on the Internet (a project to build Lower Silesian Internet platforms: e-administration, e-health) and a standard system for patients registration in healthcare facilities in the Lower Silesia Voivodship. The strategy is to create a mechanism that would guarantee chronicly sick people (including those aged 50+), who do not require treatment in hospital, the possibility to change the



place of employment or adapt their workplace and living place to the recognized chronic diseases. In parallel to these health actions, the strategy states that the following tasks should be carried out.- Promotion of a healthy lifestyle, not focused on raising awareness about prevention of health, but above all, the promotion of active rest through extension of cycling paths, running, healthy forms of nutrition. - Striving for further improvement of environmental conditions (water, air, food) and sanitation. - Facilitating access to medical services in means of information and communication technology (ICT - remote registration, simplification of formalities, etc.). - Distribution of always insufficient funds for treatment according to the principle of maximizing

- Expansion of the care services infrastructure, in particular for old and disabled people (use of unnecessary hospital resources for this purpose). - Activation of climatic towns distant from industrial centers through the development of commercial care services (also offered to clients from outside the region).

Due to the aging society, the strategy assumes creation of five geriatric centers in the region. The first Geriatric Competence Center has been created in the A. Falkiewicz Specialist Hospital in Wrocław,

The main source of inspiration for the such Center have been based on monitoring good practices (C3-SAXONY, É-Saúde Platform, CCS TELEHEALTH OSTSACHSEN, Living it Up, Scottish Health Innovations Ltd, Open Innovation Platform), as well as, those who are based on training activities (GeriNeTrainer, EQUIMETRIX). According the our local good practice based on realized by Innovative Medicine Cluster project called "Alma House in Poland". To develop this idea the separate ativities are planed within additional action - Creation of Living Lab – being a typical flat for elderly focused on educational activities and trainings. Such activities promote healthy life style and influencing the policy instruments in the current programming period 2014-2020 of Lower Silesian Voivodeship Strategy 2020 realization.

Additionaly the action plan can potentially feed into the next programming period.

It has been impacting the Strategy 2021-2030 updated features. Among others, there are the following elements:

- 1) there will be an effective response to the challenges faced by the region in the range of innovations and technologies Open Innovation Platform,
- 2) the actions will be a tool to overcome development disparities and strengthen the spatial cohesion of the region in geriatrics telecare system,
- it will set measurables, specific goals to be achieved for elderly people including their education.
- 4) it will indicate the tools to achieve the goals set Living Lab.

Part III - Details of the actions envisaged

ACTION 1 Development of Geriatric Competence Center

1. **The background** (please describe the lessons learnt from the project that constitute the basis for the development of the present Action Plan)

It assumes that, based on the knowledge and experience of other foreign centers (including the TITTAN project partners), further functioning of the Geriatric Competence Center is possible by using the experience gained within other national and traditional research and implementation projects. In addition the experience gained will constitute support for the local administration in sharing regional social and health policy and strategy development. Demography's challenges for whole Europe are universal. All countries face the same dramatic problem. This is why Action and its activity for elderly fully support the idea of Geriatric Competence Center which has been developing at A. Falkiewicz Specialist Hospital in Wroclaw. There are several good



practices planed to implement:

Action 1.1. - Learning from scaling up experience - based on sharing the scaling up experience

• There might be necessary to keep the elderlies active at their homes as long as possible using telemedicine, telerehabilitation, telemonitoring (the most important is using the Scaling Up experience of Living it Up).

Action 1.2. - Training trainers

• Traning will start on implementation Saxony good practice GeriNet Trainers. There is a plan to train volunteers to support the activity of Geriatric Competence Center

Action 1.3. - Development of new Good Practices

- Developing Good practice on monitoring of vital parameters of patients and especially the scale-up of 50 patients in the CareWell pilot site to 1000 patients in next stage require experiences of Scotish Living -it-Up and Saxony C3. And Saxonian GP (C3). There is a need to exchange/share of experiences.
- Innovations has to be spreaded/exchanged within whole Europe to support professionals there
 might be lack (not enough) of professionals for both medical and social services to cover population
 needs (such activities are supported within Open Innovation Platform).
 We face the problem both for towns agglomerations and the rural areas, which makes it only more
 complicated.

Created Geriatric Competence Center (GCC) activities will cover the major needs of elderly by::

Implementation of the Good Practices by exchange/share of experiences within interregional cooperation

- 1. Scaling Up of telecare solutions (collaboration with Living-it-up) is influencing strengthen of cooperation within the network of healthcare and social care stakeholders, academics, national healthcare services payers and local government
- 2. Education of Healthcare professionals, patients and volunteers implementation of GeriNet Trainers
- 3. It will be realized by implementation and development of innovations using platforms like Lombardy Open Innovation Platform

The platform offers a set of tools to route information effectively:

- Highly customizable taxonomies (trees of tags) to describe the interest of participants and the content topic
- Groups with different access options (open, restricted, closed)

When a new content is produced, a "distribution rule" is attached, that takes into consideration both tags and intended destination domains. For example, a notification that a new project proposal has been published is sent all participants to a community or to all participants that are interested in a topic, or a mix of both

There are collaboration tools:

PROJECT MANAGEMENT - Project management support tools for the definition and monitoring of the activities, the timing and the budget. Tools to support document management, end-user involvement, dissemination and promotion of the results, the monitoring

DOCUMENTS - A document management tool: each element can be addressed by interest and expertise and have a correct version indication

ACTIVITIES: list, Gantt chart, and dependencies - Each project is divided into activities, each activity is composed of tasks, which can be viewed in table form and on a Gantt chart.

Each task can be related to others through the concept of dependency, and each task can be assigned a cost to keep track of times and budgets

The project community - Each project creates a community, providing all the tools needed for its management and collaboration among its participants



Exchange information and testing on innovative products supporting daily life as a part of Living Lab activities

2. **Players involved** (please indicate the organisations in the region who are involved in the development and implementation of the action and explain their role)

The conditions for effective implementation of innovation is the involvement of other partners in the region. In this regard, LSVMO - a partner of the TITTAN project will coordinate all activities. Geriatric Competence Center being created in Falkiewicz Specialist Hospital with a support of Innovative Medicine Cluster (NGO) and Wroclaw Medical University. This is why Hosipital will be responsible for implementation The Hospital will implement and coordinate the implementation of good practices supporting the elderly. It will play a key role in this action. The Hospital will be responsible for supervision of the center's activities. *It* will initiate social activity and interregional cooperation. The Cluster will conduct operational activity of the Center and will organize and coordinate training activities

Wroclaw Medical University is one of the biggest medical universities in Poland. It is the largest centre for education and clinical and scientific research in the south-west of Poland. 6000 people are studying at the Wroclaw Medical University in 5 faculties: Medicine, Dentistry, Pharmacy, Public Health and Postgraduate Education. The WMU actively participates in all projects for the advancement of science, entrepreneurship, technological innovation, both with public authorities, local governments, and enterprises.

3. Timeframe

There will be two year action evaluation period to determine the effectiveness of the implemented Good Practices. Following basic measures of effectiveness are expected:

Number of trained trainers and users involved in good practice (GeriNet Trainers)

Number of end users /involved in implementation and exploitation (in scaling up process)

	Semester 1 Start month 10/2018 End month: 03/2019	Semester 2 Start month 04/2019 End month: 09/2019	Semester 3 Start month 10/2019 End month: 03/2020	Semester 4 Start month 04/2020 End month: 09/2020
Action 1.1. Learning from scaling up experience				
Action 1.2. Implementation of scaled up monitoring system				
Action 1.2. Training of trainers				
Action 1.3. Development of new Good Practices				
Action 1.4. Evaluation				



4. Costs (if relevant)

Training of trainers in GeriNet Leipzig - 10 000 EUR for 10 trainers

Training Facilities Projector, Monitor, Laptop. Printer / Scanner (color) - 8 000 EUR

Open Innovation Platform (server) - 5 000 EUR

5. Funding sources (if relevant):

Due to the large scale of the project, both the period of adaptation and daily operation of the center must be diversified. The adaptation period should be financed under the obtaining resources from the processors as well as from the **superior unit (LSVMO**) and **Ministry of Health**. The second phase of exploitation should be financed through projects and public grants.

ACTION 2 Creation of Living Lab

1. **The background** (please describe the lessons learnt from the project that constitute the basis for the development of the present Action Plan)

Basing on the experience gained in the first phase of the project thanks to study visits, the applicant has established good relations related to the exchange of technological innovations in various countries supporting the senior in his daily life.

By the creating a net of cooperating Living Labs there will be established possibility to transfer some elements learned /experiences from good practices. In case of developing of Lower Silesian telemonitoring/telecare system, there can be transfered lessons learned/experiences from Living it Up of Scotland, C3 of Saxony and some Dutch Almere good practices. There is also a need to develop some new ideas based on international cooperation using Open Innovation Platform from Lombardy

Operating such solutions, provide practical knowledge and invaluable experience. Regardless of the region or the degree of affluence of societies, demographic problems remain the same. This creates excellent opportunities for permanent collaboration and exchange of experiences.

One of the key elements associated with modern technology is its implementation in a wide range, to create an opportunity for seniors to live in their own apartment for as long as possible without having to move to hospitals or permanent residency centers. It implies, in turn, the necessity to overcome the barrier of distrust and uncertainty in relation to modern technologies, which to some extent are to be replaced in the process of human care. Their correct, failure-free operation can therefore determine the issue of senior security and even life. The second important effect is the systematic reduction of the cost of care for a single patient, which in the macro scale will translate into measurable budget savings.

The supranational experiences referred to above confirm that the living lab formula as a model flat, where the target user in the formula ask-touch, try can get professional advice related to the choice of technology, is the best way to implement technology in private homes and apartments.

It should not be left without significance the fact, that "Tittan" Project is to finish some stage. All partners and stakeholders, managed to create good value chains of cooperation on the role of exchanging ideas about assistive technology solutions for the elderlies. However, the problem concerning the "Tittan" program results in good practices where participants are showing them to each other. It might be after year or two out of date without any update. The problem concerns especially to IT solutions, big data, and all related technical solutions. Basing on Project TITTAN partners experiences there is knowledge that, creating net of cooperating Living Labs, gives particular opportunity to establish and maintain constant, long - term cooperation. Therefore "Tittan goals" may evaluate in many more transnational programs



2. Action (please list and describe the actions to be implemented)

Living Lab is created in cooperation with various stakeholders and will be located in the "model senior flat / apartment" connected with training room for professionals and students. The entity established will provide information and the possibility of testing innovative products in the field of health, focusing on the development of assistive technology, through the PPI process and co-financed within the framework of ERDF funds. All activity will be also connected with cooperation and other project partners — with special participation of the TITTAN project partners.

One of task to be solved is how to convince the society to start using assistive technology. Living labs idea where visitors may come and get proper advice, get known in formula "ask - touch and try" which solution suits most their or their relative's needs, is the best way to optimize the problem. In addition, an institutional formula, gives the final consumer proper and reliable recommendation basing on Lab activity results.

Consortium of two key project stakeholders – Wroclaw Falkiewicz Hospital and Innovation Medicine Cluster is developing project of Wroclaw Living Lab. It is the next step of the good practice presented in TITTAN project as a process started in 2016 by the Innovative Medicine Cluster, that run project called "Alma House in Poland" in partnership with the city of Oslo.

All involved partners - the hospital, the cluster and the Marshal's office - are convinced that creating a Living Lab opened to hospital patients, their families and the local community is the most optimal method for disseminating technological innovations for the elderly and the disabled. This investment will significantly improve the knowledge and awareness of end users. The same time, it is a platform for the implementation of many future projects.

3. **Players involved** (please indicate the organisations in the region who are involved in the development and implementation of the action and explain their role)

The main role in the implementation of the project will be played by two partners who are to implement and develop the Living Lab institution with the planned functionalities. Speech about the public Falkiewicz hospital in Wroclaw and NGO Innovative Medicine cluster. They constitute the operational core of the project.

In addition, the condition for effective implementation of innovation is the involvement of other partners in the region. They declared at earlier stages the willingness to cooperate in creating and developing the center. These are from the substantive side of the support universities: Wroclaw Medical University, Academy of Physical Education, Wrocław University of Technology, Wrocław University of Environmental and Life Sciences and the Academy of Fine Arts. In the process of popularizing the center and testing the bonds, patient and seniors' organizations and social welfare homes. In the area of testing and implementation, the administration of municipalities and technology parks. Private business: developers, technology start-ups, equipment manufacturers and culture animators.

Works:

Falkiewicz's hospital

- supervision over the adaptation process as well as construction and finishing works in the planned location,
- substantive supervision over the activities of the center.
- · coordination of the center's cooperation with the hospital staff,
- trainers' trainings.

Cluster of Innovative Medicine:

- · operational activity of the center,
- organization and coordination of training, education and research and implementation activities,
- initiating the social activity of the center to include external partners in the work,
- publishing activities and social campaigns,

4. Timeframe

	Semester 1 Start month 10/2018 End month: 03/2019	Semester 2 Start month 04/2019 End month: 09/2019	Semester 3 Start month 10/2019 End month: 03/2020	Semester 4 Start month 04/2020 End month: 09/2020
Action 2.1: Living				
Lab Strategic Plan				
Action 2.2: Living				
Lab Cooperation Plan				
Action 2.3. Training Plan				
Action 2.4. Evaluation of the project		The second secon		

The partners set up a two-year project evaluation period to determine the effectiveness of the implemented innovation. Three basic measures of effectiveness are expected:

Living Lab Strategic Plan • number of end-user visitors understood as seniors, patients, family members, social care-givers, social, legal or actual carers who are to benefit from the presented technology on a daily basis.

Living Lab Cooperation Plan • number of trained students understood as students of medical faculties related to care for seniors / disabled, as well as technical ones related to construction, architecture, IT systems and other related themes,

Training Plan • the number of trainers trained in the "train the trainers" system, who will conduct further educational activities in the field.

The evaluation of the project will take place in fourth semester. After the end of the two-year period, a summary and evaluation of the effectiveness of the methods used will take place. This will be the basis for defining the strategy and directions for the further development of the institution in subsequent periods.

Based on the knowledge and experience of other foreign centers, including the TITTAN project partners, the applicant assumes further functioning of the center, with the possibility of using the experience gained in other national and transnational research and implementation projects. In addition, the experience gained will constitute support for the applicant as a local administration in shaping regional social and health policy.

5.	Costs	(if re	levant)
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Expected project costs:



A. Construction stage

- The cost of developing a detailed architectural design along with the cost estimate of construction and finishing works, including IT networks, safety and fire communication, and other "smart building"
- · The cost of construction and finishing works,
- · Costs of model furnishings for a senior apartment and an educational room
- B. Stage of operation
- Network maintenance costs, utilities (electricity, gas, water, sewage, heating)
- · Costs related to administration, accounting, legal services and management,
- Personnel costs
- · Material and adaptation costs
- · Costs of research and implementation work
- · Costs of educational activities, publications, conferences and marketing

6. Funding sources (if relevant):

Due to the scale of the project, both during the period of adaptation and daily operation of the center, the applicant assumes financing through public grants/projects. Obtaining, funding sources" for the exploitation, phase should be funded from sponsors, participant in research and implementation projects, domestic and European, sources as well as the operating activity of the center in the not-for-profit system to cover costs actions. for further development .actions there will be funded from other relevant local, regional (Marshal Office) or national sources (Ministry of Health).

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