

ICT PSP – Health, Ageing and Inclusion Programme



Health monitoring and sOcial integration environMEnt for Supporting WidE ExTension of independent life at HOME

(Grant Agreement N° 250449)

Deliverable D2.5 Midterm workshop Version 1.1

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Abstract

This documents the DREAMING Project Midterm Workshop, where c. 50 sector players attended a presentation of the project at the midterm of trials.

Key Word List

Executive Summary

The deliverable collects the information concerning the HOME SWEET HOME Project Midterm Workshop, held in Barcelona (Spain), on 17th January 2013.

The HOME SWEET HOME Project Midterm Workshop was organised by the Spanish partners of HOME SWEET HOME Project. The workshop brought together over 50 sector players. It was attended by the project team and senior representatives from the project partners, as well as by a qualified group of health authorities and other significant players on the eHealth arena.

The workshop presented the context of the project, and the issues affecting adoption by social and health care providers; the objective was to show that the project results are applicable to a variety of situations and cultures that exist throughout the European Union. The participation of international experts and opinion leaders from outside the Consortium was also achieved, significantly enhancing the workshop.

With all above, the HOME SWEET HOME Project Midterm Workshop was a great opportunity for the project team to share the initial results of the validation, and to gather the opinion of leading experts on the lessons drawn so far.

Change History

Version History:

0.1	17 th January 2013	Initial draft
0.2	27 th March 2013	
0.3	9 th April 2013	
1.0	9 th April 2013	Version for release
1.1	24 th June 2013	version for re-release

Version Changes

0.1	Initial draft
0.2	List of attendees added
0.3	Minor corrections
1.0	Issue
1.1	Section 1.1 updated

Outstanding Issues

None

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1. Introduction

1.1 Purpose of this document

This document collects together the information concerning the deliverable D2.5 Midterm Workshop of HOME SWEET HOME Project, held in Barcelona on 17th January 2013. The Workshop was organised by the Spanish partners of HOME SWEET HOME.

The Midterm Workshop was conceived as primarily a dissemination tool, to announce project results to-date (mainly lessons learned). To attract a wider audience, external speakers were invited. The Panel discussion (see section 3) addressed some of the wider issues related to deployment of telemedicine services. Thus the Workshop was not a forum intended to arrive at any conclusions, and in fact did not do so. Hence none are presented here.

1.2 Structure of document

The document is organised as follows:

- Section 2: This section gives the administrative information (agenda and attendees) of the HOME SWEET HOME Project Midterm Workshop, as well as the website address of the presentations made during the Workshop.
- Section 3: This sums up the main points raised in the panel presentations and discussions.
- Appendix A: the full list of attendees.

1.3 Glossary

EHTEL	European Health Telematics Association
MAST	Model for Assessment of Telemedicine

2. Workshop details

This section gives the administrative information (agenda and attendees) for the HOME SWEET HOME Project Midterm Workshop, as well as the website address of the presentations done during the Workshop.

2.1 Agenda

The Midterm Workshop was held on 17th January 2013 at the premises of the Agència d'Informació, Avaluació i Qualitat en Salut at 81-95 Roc Boronat, Barcelona, Spain. The agenda is shown in Table 1 below.

Table 1: Midterm Workshop agenda

17th January 2013, 10:00 - 13:15 HOME SWEET HOME Midterm Workshop AGEING WELL: INTEGRATING HEALTHY AGING AND CHRONICITY	
9:30	Arrival of the participants, coffee
10:00	Welcome to participants <i>Joan Cornet, TicSalut</i>
10:05	The objectives of the Workshop. Presentation of HOME SWEET HOME, in the context of the market of services for the older. Objectives, achievements so far, lessons learnt. <i>Dimitri de Rooze, HSH Project coordinator. Zorgbedrijf ,Antwerpen</i>
10:25	Key note speaker. Sustainable business cases for ICT based services for elderly care. <i>Mariafrancesca Miele, Ernst & Young.</i>
10:45	Panel discussion: Public policies supporting the deployment of services for the elderly. The road ahead for sustainability. Three regions: Catalonia and the Chronic Programme; NHS 24; Ireland. <ul style="list-style-type: none"> • Claus Duedal, OUH Odense Universitets Hospital, moderator • Carles Bley, Catalan Department of Health • Rodd Bond, Netwell Centre Dundalk IT • George Crooks, NHS24, Scottish Centre for Telehealth & Telecare.
11:45	Questions and answers
12:00	Coffee break

12:20	The voice of the end users of HSH. Elderly and careers share views about the HSH platform. The benefits, difficulties and further improvements. <i>Representatives from the BSA pilot</i>
12:35	Service models for ageing society as a core for future economical clusters. <i>Jordi Ibáñez , Badalona Serveis Assistencials</i>
12:50	The experience of the Home Sweet Home Advisory Board: Qualifying the project interim outcomes and their potential for further deployment <i>Fausto Felli, Equity in Health Institute</i>
13:05	Conclusions and closing of the event <i>Marco d'Angelantonio, HIMsa</i>
13:15	Aperitif

2.2 Attendees

Over 50 people attended the HOME SWEET HOME Project Midterm Workshop, from a wide range of healthcare authorities, industrial companies working in the healthcare sector, academia, and organisations representing actors in the healthcare arena. A full list is given in Appendix A.

2.3 Presentations

All the presentations that were given at the HOME SWEET HOME Project Midterm Workshop can be found on the public area of the HOME SWEET HOME Project Website. They can be downloaded from the following website address:

- <http://www.homesweethome-project.be/documents>.

The presentations on the website, and speakers, are as follows:

- Objectives of the Workshop. Presentation of HOME SWEET HOME (Dimitri De Rooz).
- Sustainable business cases for ICT based services for elderly care ().
- Panel discussion – see section 3 below.
- Ageing well integrating healthy aging and chronicity (Ignasi Saez). (This replaced “The voice of the end users of HSH”, as the user was not able to attend the workshop).
- Service models for ageing society as a core for future economical clusters (Jordi Ibáñez).
- The experience of the Home Sweet Home Advisory Board (Fausto Felli).

Conclusions: MdA:

- Not a question of whether technology will figure, but how.
- One size does not fit all.
- We knew in HOME SWEET HOME that too much technology was installed. But what is the maximum that we can install?
- Open systems are important, to utilise kit already present with older people.

3. Panel discussion

The HOME SWEET HOME Project Midterm Workshop included a panel discussion on:

- Public policies supporting the deployment of services for the elderly;
- The road ahead for sustainability;

from three regions: Catalonia and the Chronic Programme; NHS 24; Ireland.

3.1 Participants

The participants in the panel discussions are shown below.

Moderator:

- Claus Duedal Pederson (CDP), OUH Odense Universitets Hospital, moderator.

Panel members:

- Carles Blay (CB), Catalan Department of Health.
- Rodd Bond (RB), Netwell Centre, Dundalk IT.
- George Crooks (GC), NHS 24, Scottish Centre for Telehealth & Telecare.

3.2 Introductory presentations

CDP invited the panel members to give their credentials and everybody introduced her/himself.

Each member of the panel gave a short presentations / introduction:

- Rodd Bond gave a short presentation on the national strategy in Ireland and implications for supporting the elderly.
- Carles Bley gave a short overview of the Catalan model for chronicity (managing patients with chronic conditions).
- George Crooks: if you expect governments to make any decisions to move things forward, wait for ever. Professionals are bad at designing new systems & pathways. Must use analytics. Quality strategy is key – must be safe; integrated care is present in Scotland, about to integrate health & social care. Scotland has three year telehealth delivery plan. NHS has educated politicians. Electronic delivery will use multiple channels – digital TV, smart phones & tablets. Technology in Scotland now has to allow citizen to manage acute situations, has to support carers, has to be inclusive.

3.3 Questions and answers

Some questions & answers followed the presentations on each region. The panels' answers are outlined below.

Question 1: MdA: Scottish government has made decision despite what GC said

GC: But NHS made a big investment in education.

Question 2: CDP: prevention appears to be key, talking with GP is not effective, taxation is!

RB: lifestyle is important, but this needs education of children, education policy, street safety policies etc makes a significant contribution to healthy lifestyles.

Question: CB: GC talks about national delivery plan. What are the key elements?

GC: concentrate on low hanging fruit. Credibility is a key issue, so avoid failure. Stop RCT trials, use telemedicine for strokes, national teleconferencing is in place. Paediatrician shortage, so teleconferencing supported this, also COPD. Start small, start successfully to establish credibility.

Question: MdA: how do we solve problem of prevention. Doctors are not paid for this.

GC: National GP contract moving to outcome measures, not fee for service. Next year some payments for tele-health use. Cannot afford to alienate any part of clinical community.

RB: Must join up segments of healthcare community (hospitals, GPs etc). Prevention nurse led.

CB: Need to place focus on most effective measures, usually through GPs. How to integrate secondary and primary care on these activities is important.

APPENDIX A – List of Attendees

Name	Organisation
Ane Fullaondo	Kronikgune (ES)
Angelo Rossi Mori	AGENAS (IT)
Anna Grazia Laura	DARCO Servizi (IT)
Anna Kotzeva	AIAQS (ES)
Anna Stachowicz	Jean Paul II Hospital - Krakow (PL)
Astrid Herman	SFZ (BE)
Bridget Moorman	Continua Health Alliance (BE)
Carmen Ceinos	Ecomit Consulting (ES)
Christine McClusky	NHS24 (UK)
Cirila Pušnik	General Hospital Slovenj Gradec (SL)
Claus Duedal Pedersen	Region Syddanmark (DK)
Claus Nielsen	Delta (AGE Europe) (DK)
David Kula	Palacky University, Olomouc (CZ)
Di Gennaro Massimo	ARSAN (IT)
Dimitri De Rooze	Zorgbedrijf (BE)
Eduard Gracia-Freixedes	FOCAGG (ES)
Emiliano Deferrari	DARCO Servizi (IT)
Eva Fabiánová	Palacky University, Olomouc
Fausto Felli	Think Tank Integrate (AGE Europe) (IT)
George Crooks	HIM SA (BE)
Graziella d'Angelantonio	HIM SA (BE)
Heidren Mollenkopt	BAGSO (AGE Europe) (BE)
Ignasi Garcia Mila	TiCSalut (ES)
Ignasi Saez Aguayo	BSA (ES)
Janne Rasmussen	NHS 24 (UK)
Jeroen Ruysen	SFZ (BE)
Joanne Finnegan (JFi)	DkIT (IE)
John Oates	HIM SA (UK)
Laviola Francesco	ASP Cosenza (IT)
Leo Lewis	Hywel Dda Health Board (UK)

Name	Organisation
Lieven Van Gestel	Digipolis (BE)
Linda Huybrechts	De Voorzorg (BE)
Lutgart Messens	Digipolis (BE)
Malgorzata Rusin	Jean Paul II Hospital - Krakow (PL)
Marco d'Angelantonio	HIM SA (BE)
María J Ciudad	BSA (ES)
Maria Francesca Miele	PwC (BE)
Merce Mas	ICS (ES)
Mette A. Craggs	Region Syddanmark (DK)
Natascha Bue	EWMA (DK)
Nena Georgantzi	AGE Europe (BE)
Ophelie Durand	AGE Europe (BE)
Panagiotis Stafylas	HIM SA (BE)
Perri Antonio	ASP di Cosenza (IT)
Philippe Swenen	AIM (BE)
Rachelle Kaye	AIM (BE)
Raniero Chelli	HIM SA (IT)
Rodd Bond	DkIT (IE)
Spinosa Tiziana	ARSAN (IT)
Stanko pušnik	Healthcare Centre Ravne (SL)
Stephan Schug	EHTEL (BE)
Stuart Quinn	DkIT (IE)
Tom Lenie	Mutas (BE)
William Walsh	Louth CC (IE)
Zdeněk Gütter	Palacky University, Olomouc (CZ)