



Action Plan



Translation, Innovation and Technology Transfer in Ageing Network

Partner:

City of Almere

Gemeente Almere



September, 2018

Part I – General information

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

Partner organisation: City of Almere

Other partner organisations involved : N/A

Country: The Netherlands

NUTS2 region: NL23 Flevoland

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Part II – Policy context

The Action Plan aims to impact:	X	Investment for Growth and Jobs programme
		European Territorial Cooperation programme
	X	Other regional development policy instrument

Name of the policy instrument addressed:

2014-2020 ERDF Operational Programme (OP) of West Nederland (Kansen voor West II)

The City of Almere stepped in the TITTAN project when the City of Amsterdam decided to no longer participate. Both cities are part of the Amsterdam Metropolitan Area (AMA) and Amsterdam suggested to Almere to take its place. Almere gladly joined TITTAN because it recognized the opportunity to gain valuable input for its local policy development on eHealth.

The City of Almere is the “odd one out” compared to the other regions participating in the TITTAN project (Basque Country, Galicia, Lombardy, Saxony, Lower Silesia and Scotland) because it is no region in itself, but rather a member city of a regional collaboration of cities (AMA). Having said that, in the Netherlands health and social policies are not a matter of the region but of cities (social care policy) and/ or of the nation as a whole (healthcare policy). Lessons learned by Almere are being shared with the other municipalities (30) within the AMA and with the body that governs the 2014-2020 ERDF Operational Programme (OP) of the West Nederland (Kansen voor West II), which is the City of Amsterdam.

Almere did contribute its share to the creation of the 2014-2020 ERDF Operational Programme (OP) of West Nederland (Kansen voor West II), relating to its regional (health) challenges and (IT) strengths. The OP Kansen voor West II was built by 4 Provinces and 4 cities in Western Netherlands, with the aim of achieving the EU2020 objectives. Its emphasis is on innovation & investment in R&D. In particular, the cities involved (among them Almere and Amsterdam located in the Amsterdam Metropolitan Area) face specific challenges, as sections of these cities seem to 'miss their connection' to current economic developments because of ageing, which is felt more strongly in densely populated areas. In some parts, ageing appears to give rise to an economic and social divide.

The TITTAN project has a synergy with two of the priority axis of the OP:

- a) Axis "Innovation": focus is on providing innovative solutions to societal challenges and needs that are of a composite nature, for instance combinations of Food and Health or Work and Health. Solutions to these needs will increasingly have to be developed by connecting new technologies to the sectors. Life Sciences and Health, and especially healthy ageing/vitality is one of the main sectors mentioned (p. 6 of the OP). Focus will be on accelerating the implementation of new technologies in health, thereby supporting thematic objective 2 (TO2) and 3 (TO3) of the TITTAN project.
- b) Axis "Promoting social inclusion and combatting poverty": Investment priority 9b is coherent with TO3 of TITTAN, which aims to raise awareness among citizens about the importance of using new technologies for improving quality of life and lifespan.

At the start of the project we envisaged several ways in which The TITTAN project could improve the spending of the ERDF funds:.

The TITTAN project has three specific objectives, of which TO2 is 'InsideOut Technological Innovation': reduce the gap between research and market, by enhancing the transfer of transnational research results to companies, in order to develop new products and services. This is exactly the focus of the 2014-2020 ERDF OP Axis "Innovation".

TITTAN can mobilize new efforts and capacities (in Amsterdam, AMA, the Province of Flevoland or Province of North-Holland) for innovative valorisation projects in the field of health and life sciences, which can be funded by the ERDF programme.

To do this well, co-design and co-creation principles taking into account the end-users can be applied, as foreseen in TITTAN's thematic objective 3: Active citizen for healthy ageing. It is expected that it will enhance the project flow in the field of health by faster take up and implementation of new methodologies.

Hence, the project support will be twofold: firstly by bridging the gap between research and market (which is very specific in The Netherlands) and secondly by raising awareness among citizens and institutions about the importance of using new technologies, thereby accelerating their take up.

Through the TITTAN project, the City of Almere aimed to find inspiration from good practices and experiences in other European regions to develop (import) an integrated vision and plan on eHealth that supported its ambition to collaborate, innovate and grow in the area of health, demographic change and wellbeing.

A region's Research and Innovation Strategy for Smart Specialisation (RIS3) defines the priorities for public R&D&I policies and the actions that will be supported by the ERDF's OP. One of the major objectives of the Western Netherlands RIS3 is that of providing innovative solutions to societal challenges and needs, such as ageing. Needs that are of an increasingly composite nature. This requires companies to look and work beyond the boundaries of their own sector. Encouraging knowledge valorisation and leveraging crossover opportunities (Life sciences, Health, ICT, Creative Industries) are key to this strategy, comparable to TITTAN's objective.

Part III – Details of the actions envisaged

The background

The TITTAN project has taught us about eHealth from three perspectives (3 Thematic Areas): The uptake of innovative eHealth products/ services (Financing and procurement practices), Establishing and enhancing an eHealth innovation eco-system and Involving the end user and raising citizen awareness on eHealth to improve quality of life.

We have to see these perspectives in relation to the Dutch health and care situation. In contrast to many other European health care systems, the Dutch government is responsible for the accessibility and quality of the healthcare system in the Netherlands, but not in charge of its management. As a result collaboration between the City of Almere, healthcare providers and health insurers plays an important role in the design, uptake and use of innovative, technology based products and solutions for chronically ill and older citizens. At this moment in time there many activities and initiatives ongoing to support active and healthy ageing, e.g. in relation to the transition to have older citizens live independently in their own home as long as possible. However, these activities are often dispersed.

As the healthcare system is extremely complex and in flux, various parties, also within the City of Almere (such as Dept. of Social Affairs, Dept. of Living, Public Health Service Almere (GGD)) realise the need and potential for better collaboration. Through the TITTAN project, the City of Almere is now developing an integrated vision and plan on eHealth that supports the EU, national, and City's ambition to innovate in the area of health, demographic change and wellbeing.

Almere TITTAN project will thus impact the city's Social Care Policy framework. This local policy document will be delivered and implemented over 2019 and 2020. The introduction of policy lessons learned from TITTAN (most importantly the introduction of the 3 thematic area's and their elaboration as an framing principle) will help shape the future of health and social care in Almere over the next decade. Several meetings have been taking place with stakeholders inside and outside the municipal organization and have been reported upon in several progress reports.

Despite the fact that policy changes will be implemented over 2019 and 2020, their impact will reach far beyond that period. Directions that are decided upon by the city Board and Council, will steer policy past 2020. Mind you, the implementation will be done within the lifetime of the TITTAN project. The new eHealth policy will be supportive to and facilitating for the wider Social Care Policy and spin off policy program for senior Citizens in Almere named Goud in Almere (Gold in Almere). It will enable knowledge institutions, Business and end users to innovate care and prevention in our city (see action 1 below).

As for the regional level, the City of Almere has no formal implementation power of local policy in other municipalities. The success can be monitored by the number of municipalities that will actively take up similar developments like the policy in Almere within the AMA. Given the fact that an integral policy development like the one taking place in Almere now has not been endeavored yet in the region, the impact might prove to be bigger than so far envisaged! A congress in June 2019 is being organized to disseminate and share the TITTAN framework with the 30 member municipalities of the AMA.

We have seen many good practices from around Europe. We have recognized that the healthcare systems differ strongly throughout Europe. In many regions health is strongly centralized by regional governments

whereas in the Netherlands it is the National Government, the health insurers and the local governments that govern Health and (Social) Care.

Despite those differences we feel that the TITTAN approach and focus provides us with a worthwhile framework for our policy development: Finances, Eco-system, End user. Our policy document will be modelled along those three lines and measures from our European partner regions will be used as inspiration and reference and will sometimes be implemented.

In the area of procurement (PPI (Public Procurement of Innovation) and PCP (Pre-Commercial Procurement)) we have seen how our partner regions differ very much in their approaches. Some of the partner organisations have total control of policy instruments and of budgets for innovations or implementing innovative practices. Especially in Galicia, Lower Silesia, Lombardy and Scotland there is a strong central direction for policy and funding. In Saxony and the Basque Country, this central grip seems less firm and the project partners representing those regions are much less in control of funding and policy instruments. In Almere this centralized power is even less. The city has hardly any control on the national health policy (for it is organized nationally in the Netherlands rather than regionally).

The city of Almere can make its own health policy at the level of the city only, including eHealth, aimed at care and prevention rather than at curative aspects. Having learned about the existence and opportunities of PCP and PPI we are now far better aware of mechanisms to promote the uptake of eHealth applications and inspired to look at local opportunities in innovative ways. Such as the City of Amsterdam's Start-up in Residence accelerator programme that connects start-up's and scale-up's to local challenges by investing and/or becoming a launching customer or partner. In the meantime The Netherlands is busy with a nationwide plan (through MedMij guidelines) to support a personal health environment for every citizen to be in charge of its own health (data).

In the area of establishment of an innovation ecosystem for health, Almere on the other hand has proven by example of the GezondheidFabriek (good practice 'HealthFactory' and Amsterdam Economic Board/ AmsterdamHealth) that a close connection between local government and an eHealth promoting innovation organisation is very useful. This innovation ecosystem has a clear function on local and regional (AMA) level in supporting, initiating and facilitating innovations and projects aimed at a better quality of life, an improved healthcare system and economic growth. TITTAN made it clear that for larger organisations and regional bodies it can be very hard to develop and maintain such an ecosystem, by cause of the relatively greater distance between the government and the organisations involved in innovation. Larger numbers of stakeholders with a very diverse range of interests make this a more complicated endeavour. Also we believe that an ecosystem like ours thrives on personal relationships between actors. If the distance between actors is too large, ecosystems don't thrive.

This argument also applies to the theme of involving end users: regions don't "know" their end users (other than through statistics) as well as municipalities do. On a local level there is direct contact between end users and policymakers. These short lines secure a realistic input and stronger influence by end users on the eHealth policy and on the development of "customized" innovations that are needed in this specific city or even neighbourhood. Our good practice Senior-Live (primary end user organisation) and the connection between Senior-Live, GezondheidFabriek and the city officials proves this point.

We are very interested in a follow up project aimed at modelling and comparing various Living Lab environments within our partner regions. We feel we have a strong model for that here in Almere (with Senior-Live and GezondheidFabriek) and some of our (TITTAN) partners and local stakeholders have shown a keen interest in that.

As envisaged and mentioned above the TITTAN project could be instrumental in two ways related to the ERDF policy instrument Kansen voor West II: firstly by bridging the gap between research and market and secondly by raising awareness among citizens and institutions about the importance of using new technologies, thereby accelerating their take up. We are pleased to state that we have started various new innovation projects (e.g. ERDF, Interreg and AAL) based on inspiration and lessons learned from TITTAN. In Action II below we discuss the ERDF project 'The eHealth User Guild, boosting the Silver Economy'

ACTION 1: Local eHealth Policy development

Boosted by our activities in TITTAN, in Almere we are in the process of developing a local eHealth Policy aimed at enabling our (elder) citizens to live more active and healthier. This policy document will be shared within our AMA region.

The Almere eHealth policy will be developed in 2019 and put to decision making by the City Board and Council in 2020. It is worthwhile to mention that Almere is unique in this respect as there are very few cities in the Netherlands that have so far created some kind of eHealth policy instrument. The examples of other municipalities in the Netherlands are quite limited in scope and projected impact. In practice this policy will be closely interlinked to the policy documents that are currently being co-created with and for the elderly to support active and healthy ageing and living in Almere.

Local policy making is a process that involves all local stakeholders. Input is needed from actors in the industry, NGO's, knowledge institutes and citizens (end users). All stakeholders will be consulted within a framework provided by the city officials. The framework that is being applied in the case of eHealth policy will be the one provided to us by TITTAN. It consists of the three areas: 1) Procurement of innovative services, 2) Developing and maintaining an innovative eco-system and 3) Involving end users and creating awareness. The policy will be aimed at creating the best circumstances for reaching these three "objectives" in our city's eHealth practice.

The policy making process has started in 2018. It was halted in March of that year due through municipal elections. After the new city board and city council had been instated, later in 2018 the policy making process has been picked up again. In 2018, the framework for the eHealth policy was devised and now stakeholders are being consulted on what they think the policy should entail. Later in 2019 a concept policy paper will be devised and shared with the stakeholders for reviewing before it is being finalized and put up for formal decision making by board and council.

The goal of the action plan is to establish local policy development on eHealth. This policy development is directly influenced by four factors:

- 1) TITTAN framework of three thematic area's and lessons learned; Most notably the Almere policy development will be influenced by the Scottish Government Innovation in Health Program, Living it up, Age-Friendly Basque Country and the É-Saúde Platform. However the most important lesson learned was the TITTAN framework itself. The Almere policy will be organized along the lines of the three Thematic Area's: Outside in innovation, Inside out innovation and innovative procurement of products and services.
- 2) Input from local stakeholders. Notably the Gezondheidsfabriek and Senior-Live will be providing important input to the eHealth policy of the city of Almere. Beyond those stakeholders, important stakeholders are the Public health service (GGD), The main health insurance companies (Zilveren kruis and Menzis), Care providing organizations like the Zorggroep Almere (Care Group Almere) and end-user representatives and organizations like the Advisory Council for the Social Domain and the Unions for the elderly.
- 3) Technological standard for exchange of data on medical and social health on a national level (MedMij); This is a development outside of the municipal sphere of influence but it will affect very much any eHealth solution to be developed over the next years. All products and services will have to comply with these 'newly' developed standards to be able to digitally exchange data and information on health.
- 4) Development of a Common Ground movement, headed by the national Association of Municipalities; Similar to the third point the Dutch Municipalities are developing a common service platform for municipal services and data exchange. This will enable far reaching collaboration between service providers in the social (and other municipal) domains.

This action is relevant to the TITTAN project in the sense that it will feed back to the project partners in what way the lessons learned in the project can be shaped in to the implementation of policy.

Players involved

- City of Almere – Local government, municipal board and counsel are responsible for policy decision making and funding certain aspects of health care.
- GezondheidFabriek (HealthFactory) formerly named as Health and Wellbeing Innovation Center Almere (GWIA) initiates and facilitates innovation projects in health and wellbeing, involving citizens, knowledge, industry and government. GWIA is a public private foundation. – Knowledge, networking and project development and support partner
- HierTV Foundation (Senior-Live) – End user organisation, Living lab development
- Ben Sajat Center, knowledge partner connecting science and practice to improve the quality of care of older people as well as quality of work for care givers. It is a partnership of health care provider Cordaan with Academic Medical Centre Amsterdam, VU University Medical Centre, Amsterdam University of Applied Sciences, Amsterdam Health and Technology Institute, City of Amsterdam.
- Amsterdam Economic Board builds on the Amsterdam Metropolitan Area's uniqueness and strengths to improve regional competitiveness. It accelerates innovation and growth related to four societal challenges (health, mobility, connectivity and circular economy) by exploiting synergy between commercial, academic and public partners.
- Social Domain Council – Advisory council of end users
- Zorg Groep Almere – Principal provider of healthcare and social care in Almere
- City of Amsterdam (Age Friendly City Amsterdam) – Main local government in the region
- Zilveren Kruis – Main healthcare insurance company in the region

Timeframe

- Work on the policy development started early in 2018 and will continue into 2019 along the phases below:
 - Creating Contours
 - Consultation Phase
 - Elaboration and Feed back
 - Decision making
 - Implementation
 - Dissemination
- In June of 2019 an congress on eHealth will be held in Almere for the 30 partner municipalities in the AMA (Amsterdam Metropolitan Area)
- We expect a draft version to be ready by Q4 of 2019.
- The decision making process will then take place early in 2020. Implementation of the policy will then happen in Q2 and Q3 of 2020

Deliverable

- City of Almere eHealth Policy document ready
- City of Almere eHealth Policy approved by city board and city council
- City of Almere Social Care Policy influenced by the eHealth Policy (which will hopefully be embedded in it)
- TITTAN Framework (3 thematic area's) Disseminated to the 30 partner municipalities in the AMA

Costs

Not relevant for policy development: policy making is going concern for a Municipal organisation.

The regional (AMA) eHealth congress will cost an estimated € 10.000,-

Funding sources

The policy making process and the congress are funded from the Municipal budget.

ACTION 2: The eHealth User Guild, boosting the Silver Economy

GezondheidFabriek (HealthFactory) is the lead partner of a substantial EFRO (ERDF)-project 'The eHealth Users Guild' aimed at boosting the Silver Economy by actively facilitating the adoption, integration and scale up of eHealth solutions by both elderly and their formal and informal carers (related to product-, service- and systems innovations as discussed in the TITTAN project). For this project lessons from several participating regions have been applied, most of them with regards to the introduction and adoption of new services and products by elderly. These learnings were very diverse: Lower Silesia, Scotland and Basque Country with regards to involving elderly, Lombardy with regards to organizing innovative power through their innovation platform, Scotland with regards to improving adoption of innovation by end users. Parts of all these examples will be involved in this project.

Project summary

The elderly population is growing worldwide. In the Netherlands in 2040 an estimated 26 percent of the population will be older than 65 and 9 percent older than 80. The economic impact of this trend, also called 'Silver Economy', is estimated to be up to \$15 trillion worldwide in 2020.

Within the 'Silver Economy' expectations are high in relation to eHealth products and services, which support the independence and well-being of older people. eHealth is the use of new information and communication technologies, particularly internet technology, to support or improve health and health care. With strong public private clusters in health, ICT and creative industries in the Amsterdam metropolitan area can play a significant role in the emerging market of 'elderly'.

However, not all that glitters is (g)old. When we look around us, we see in practice how difficult it is for elderly and also their informal and formal caregivers to adopt modern technology. Unfamiliarity, suspicion and inability hinders the use of eHealth products and services. This so-called "implementation infarct" hampers the successful commercialization of eHealth. Innovative SME are therefore looking for support with the acceptance and integration of eHealth in the complex Dutch health care ecosystem. The eHealth User Guild organizes the necessary environment and project partners with the objective to structurally strengthen the potential of the Silver Economy for SME's by successfully implementing eHealth services and products in support of end-users, professionals and informal care givers.

In the project at different care institutions "Field Labs" will be realized: a short-term stay environment where elderly people (in crisis) with healthcare professionals and stakeholders can experience a range of eHealth innovations. The offer, 17 innovations of seven regional eHealth providers (starters, entrepreneurs, College), ranges from sensor technology for hip rehabilitation at home, a 'coach' to monitor the daily effort, to a smart 'Neighborhood Watch' and Adaptive brain training.

After successful adoption in the short-term stay, the eHealth implementation project is continued towards integration in the home environment and wider scale-up in the network.

The participating SME's get access to customers and markets in these Field Labs and can, in conjunction with key stakeholders and technological solutions, develop a impactful business case.

The HealthFactory, Secretary of the project, will disseminate the knowledge gained in the project and execute the operation of the FieldLab also after the project has ended. For expertise in the field of co-creation, technology acceptance models, innovative business models as well as knowledge of care, the project can build on knowledge partners HvA/Ben Sajet Centre, Waag and Big Data Value Center.

After three years the project the eHealth User Guild will have strengthened the ' Silver Economy ' with:

- Up to 17 international eHealth innovations ready for market with an average profit projection of ca. € 780 k 5 years after the project;
- The regional, innovative SME's have access to ' The Guild ' eHealth Users (or FieldLab), a validated, open eHealth deployment environment (for acceptance, integration and scale-up) for the purpose of strengthening and acceleration of eHealth innovations, also after the project period (projection 5-10 new implementation projects per year);
- 225-1500 eHealth applications, have been, socially and technologically, integrated by elderly and those involved in 225-375 homes in the Amsterdam metropolitan area;
- There is a broad coalition formed of at least 900 eHealth conscious elderly, 30 eHealth expert (at home), healthcare professionals and 60 organizations involved;
- Health care providers make their organizations ' future proof ' by integration of eHealth in the services offered, even after the project period.

This concerns a three year project over 2019 and 2021. Elderly people, (in)formal caregivers and entrepreneurs will co-create and implement innovative eHealth solutions in short stay/ recovery facilities. The aim of that is to make them aware and acquainted to the new services and products, and to lower the threshold to adopt these services in their private homes after they return home.

An extensive project plan exists for this project and it can be provided if necessary. Results from this project concerning TITTAN, will be shared with the partners.

- <https://www.gezondheidfabriek.nl/ehealth>

Relevance to the TITTAN project

Learnings from the TITTAN projects were specifically drawn from these three Good Practices:

1. **Age friendly cities Basque country:** The In Situ Visit to **Matia** taught about customized facilitating of care professionals and elderly. Elements of this are being used to help shape several the eHealth User Guild products. Enabling elderly to more easily adopt new technologies faster. In a broader sense, the User Guild project will provide an important accelerator to the Age Friendliness of our city and region.
2. From Scotland (**CivTech** accelerator), taught us about how our SME's can implement and develop their innovations faster through valorization and business support activities. Like in Scotland, the eHealth User guild project **LLabs** creates an ecosystems that will stay in place after the ending of the project to validate innovations and to enable them to comply with the wider silver economy ecosystem.
3. Also from Scotland **Living it up** with regards to co-creation lessons. In the Guild we try out new technologies by means of co-creation of new technologies with elderly and professionals. As mentioned at #2 The guild project **LLabs** creates ecosystems that develop innovations in co-creation with elderly and professionals continuously also after the project is finished.
4. Scottish **WG13** has elements of the Field Labs we are setting up in Almere and Amsterdam. The in situ visit to WG13 has given us ideas about how to teach end-users to use eHealth services and products

The relevance to the TITTAN-project lies in the fact that. The User Guild project will feed back to the TITTAN partners relevant information and practice. The project is an EFRO project and therefor directly influencing the relevant Policy instrument.

Players involved

- GezondheidFabriek
- HierTV Foundation (Senior-Live)
- Their regional partners:
- *Businesses* : Dezzel, Cinnovate, Brevidius, Medicine Men, Vahlkamp, ZorgBel
- *Knowledge institutes* : Waag, Amsterdam University of Applied Sciences, Ben Sajet Centrum
- *Care providers* : Woonzorg Flevoland, Zorgresidentie Reedewaard, LZorg

Timeframe

- ERDF project 2018-2021

Costs

Each of these projects already have their budgets and co-financing secured.

The budget of the ERDF project is €2,2M (overall 15 regional partners investing 60% of the project costs).

The budget of the two AAL projects is ca. €250k each. Not all AAL partners are from the NL/ Almere area.

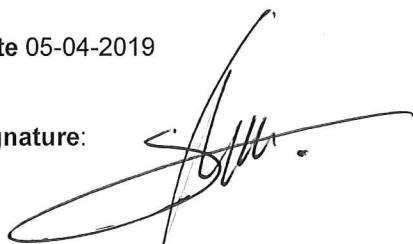
The budget for Life-ID cannot be disclosed since it is an SME that owns the service.

Funding sources

EFRO Kansen voor West II (ERDF) programme, European AAL programme, private funds (businesses)

Date 05-04-2019

Signature:



Stamp of the organisation (if available):

**Gemeente
Amsterdam**