



CPME/AD/EC/20012011/009_Final/EN

On 20 January 2011, the CPME Executive Committee adopted the “CPME response to Commission Consultation on European Innovation Partnership for Healthy Ageing” (CPME 2011/009 Final EN)

Please find below the CPME response to the consultation.

Consultation on the pilot European Innovation Partnership on Active and Healthy Ageing

Respondent information

I am replying: for my employer (other than a public authority)

Please indicate the sector: Organisation for older people / patients' organisation / other charity or NGO

Please provide the name of the organisation you work for, the department (if any), the country where the organisation is based and its email address:

Standing Committee of European Doctors (CPME) Belgium secretariat@cpme.eu

Barriers to innovation

What are the 3 main barriers to innovation? Other
 Lack of training for end-users
 Lack of funding

You have ticked 'Lack of training for end-users'. Please specify what end user training is required.

Many people still do not acknowledge, or plan for the likely burdens of ageing, such as loneliness, lack of activity, social exclusion etc. Improving knowledge and stimulating active participation would enable people to stay healthy and enjoy older age.

You have ticked 'Other'. Please specify what other barrier.

- Deployment Issues - Funding issues for research, its translation and adaptation and finally deployment - Fragmentation of funding priorities in Europe - End-users' (patients, older people, care professionals) insufficient involvement in development and deployment of new innovative solutions, in close association with patient and healthcare professional involvement

How do you think a European Innovation Partnership could help overcome the innovation barriers identified? Please explain briefly.

The Active dissemination of policies, programmes, local initiatives, ideas and good practices must be stimulated. Member States must assess the present situation in their countries and find out whether improvement is possible. Prioritization of possible improvements can lead to a step by step approach in building a new future of adequate and good quality mental health care for the elderly. "Mainstreaming" these activities in both healthcare planning and in MS involvement in EU-level eHealth initiatives is essential.

Thinking about the main barrier/s you identified above, please explain how removing a barrier would benefit a specific innovation for active and healthy ageing (please provide a concrete example of a product or service and how it helps active and healthy ageing).

The four (4) main elements of a healthy ageing programme are 1) continued active participation in society, 2) prolonged independent living in a caring environment, 3) combating social exclusion and 4) good working conditions adapted to an elder workforce. Active dissemination of programmes and good practices will enable more people to age in a healthy fashion.

Existing initiatives

Have you been involved in programmes, initiatives or projects relating to innovation for active and healthy ageing (e.g. research, technology transfer, capacity building, training, financing, deployment, validation/testing of new solutions, standardisation) at trans-national, national, regional or local level? Yes

Please describe *one* such programme, initiative or project and explain how you were involved.

Name of programme, initiative or project

CPME has adopted a series of policies addressing various dimensions of healthy ageing, i.a. in the context of mental health and the elderly, and the benefits of Vitamin D supplements for the elderly population.

Target group (You can tick more than one target group).

Patients
Health and social care professionals
Health and social care providers
Other

You have ticked 'other'. Please specify what other target group.

Policy-makers

Aim of the programme, initiative and/or action

n/a

Partners

n/a

Outcome

- CPME Statement on Mental Health in older people (document uploaded) - Care and Consent in Elderly Patients (document uploaded) - The Future of Healthcare for the Elderly (document uploaded) - Vitamin D Nutritional Policy in Europe (document uploaded) - Involvement in the eHealth Governance Initiative, epSOS, CALLIOPE and CALlepSO

Web link

n/a

What barriers did you encounter in this process?

n/a

Future initiatives

How do you think you could contribute to achieving the European Innovation Partnership's strategic objectives (e.g. financing, expertise and know-how, implementation, new business models)?

CPME would be able to contribute to the EIP's objectives by participating in policy making and dissemination of know-how to National Medical Associations, through its communication network, and also through its involvement in EU-level collaborative IT projects.

Do you already have ideas for starting a project or programme in connection with the European Innovation Partnership?

Yes

Aim of the proposed programme or project and main deliverables:

CPME recommends the development of a programme in which through a clear message (including business case elements) is delivered and in which member states are requested to prioritize healthy ageing in their national strategies. In line with the health-related elements of the "Digital Agenda", it should focus on initiatives in which independence is improved through access to new technology.

Evidence base of the proposed programme or project, demonstrating the need for action

A firm knowledge-base on what really improves old age mental health should be created and continuously developed. Evidence for the effectiveness of programmes, policies and legislation affecting the mental health of people are increasingly recognised as important across Member States but its development in the specific area of mental health in old age has been scarce until now. Incorporating basic evaluation designs in the planning and budgets of actions to be implemented has been seen to be an efficient way forward, for example in the health promotion area. National policies to prioritise the implementation of evidence-based programmes can be put in place which will greatly favour the national growth of the knowledge-base.

Approximate budget (in euros) of the proposed programme or project (optional question)

If you are thinking of starting a project or programme, which key partners would you need for it to be successful?

Key partners would be the European Commission together with all active NGOs (addressing healthy ageing) in working together in achieving the dissemination of ideas.

No

Do you have another specific programme or project to propose?

How do *you* think a European Innovation Partnership could support active and healthy ageing through innovation?

The EIP could bring progress to this field by taking a strong position in declaring the importance of this subject and by sharing views and experience between partners.

Do you have any other comments? Please fill in box below. You can also upload a file or send it to the following e-mail address: mailto:SANCO-AHAIP-CONSULTATION@ec.europa.eu?subject=Consultation_AHAIP

All partners should be aware of the fact that healthy ageing goes with a necessary change in attitude: Since doctors and other health professionals (including social workers) will play an important role in the prevention and care of mental disorders in the elderly, all initiatives should lead to an active attitude and position of all partners in stimulating awareness and being active in supporting good practice initiatives. A positive approach stimulating good Mental Health and Well-being in stead of merely reducing mental health problems, although important in itself, will contribute to a necessary shift in attitude. The role of the doctor will change and a multidisciplinary approach will be paramount. There will be an important role for the GP who very well can play a key role in the network of care very well. PS: For more information and important elements see also CPME paper on healthy ageing.

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