



EIT Health

Call for proposals for the 2019 Business Plan



EIT Health is supported by the EIT,
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Background

- The call for proposals for inclusion in the 2019 Business Plan was published on 5th December 2017.
- The call document is 76 pages long and covers
 - the original three Pillars – Education, Innovation and Acceleration –
 - Societal Challenges,
 - Themes and
 - the new, Focus Areas
- There is a useful summary of the different parts of the programme on page 5 of the call document
- The deadline for proposals is 9th April 2018

Themes and Focus Areas

- There are four strategic Themes
 - Prevention and management of chronic diseases
 - Empowering citizens to manage their health
 - Improving healthcare systems
 - Leveraging new technology and data
- There are two new Focus Areas identified by a call for expressions of interest
 - Bringing care home (page 8)
 - Value from data in clinical and sub-clinical settings (page9)
- Projects will be required to demonstrate that they address one or more Themes and/or Focus Areas



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4. Focus Areas (FAs)

Introduction

Focus Areas fall within the scope of the themes defined in our strategic agenda. A Focus Area “zooms in” on a particular aspect and also covers related challenges as well as desired impact. In addition, Focus Areas include activities from Business Creation, Education and Innovation in order to deliver impact. In 2018, we are initiating two key Focus Areas on which to build activities for the 2019 Business Plan.





FOCUS AREA 1: Bringing Care Home

Background

As Europe's demographics shift towards an increasingly elderly population, there is a growing focus on moving healthcare delivery from hospitals to primary care and home care settings. This can be achieved by reducing the necessity for patients to enter hospital and other residential care units, and by shortening stays for those patients where hospital or residential care is the only option. Shifting healthcare delivery in this way not only saves costs and releases pressure on stretched hospital services, it also has the potential to deliver higher quality and more personalised care, and in addition it is generally preferred by patients. However, in order to move care closer to patients' homes a number of challenges need to be solved. For example, supporting patients in their homes means the necessary monitoring and social care infrastructure must be in place. Wrapped around this, general practitioners and primary care organisations need tools to support patients and their carers, and to provide a critical link to specialised hospital-based clinics and clinicians.



FOCUS AREA 1: Bringing Care Home

The Focus Area

In this Focus Area, EIT Health is looking to support activities (innovation projects, education programmes and business creation activities) that shift healthcare delivery from hospitals to primary care and home care settings. A major impact target will be to reduce overnight stays in hospitals by 10%. This reduction should be over and above any decreases that result from ongoing trends and initiatives. This target has been chosen because overnight stays are a major cost driver and have a significant health and social impact on patients, relatives and care providers. In addition, overnight stays provide a measurable “surrogate marker” KPI for a number of other key effects parameters. It should be noted that activities should not just seek to “move” the patient from one location to another, but activities addressing this Focus Area need to show that they will lead to significant cost savings. Additional targets in this Focus Area can be selected by project teams, provided that they can demonstrate that an equivalent – and quantifiable – cost saving can be achieved.



FOCUS AREA 1: Bringing Care Home

Examples

Conceivably, this Focus Area could be approached in a number of different and complimentary ways, for example:

- Development and implementation of innovations that **enable remote monitoring**.
- Innovations that **integrate social care** to provide patients with a “soft-landing” when moving from hospital care to convalescence at home.
- Preventative solutions that avoid the need for hospitalisation.
- **Minimal invasive** solutions and **organisational/operational improvements**.
- Bootcamp(s) with a focus on ageing society, where entrepreneurs develop products or services that include bringing care home, for example **using machine learning** for specialised sensor analysis and data integration.
- Education Programmes that target **value-based healthcare**. These programmes should give importance to improving the quality and affordability of care and contributing to reducing cost burdens on healthcare systems overall.



FOCUS AREA 2: Value from Data in Clinical and Sub-Clinical Settings

Background

Driven by the legal requirements for record-keeping, and the use of quality register systems, healthcare providers and companies have access to large amounts of clinically relevant data. In a relatively short period of time, this data has gone from “analogue” pen-and-paper records of basic data to large digital sets, including proteomic and genomic data. More recently, widespread use of mobile devices has enabled the collection of data on a range of health parameters, such as physical expenditure. The large amount of data from different sources provides significant opportunities to predict and thereby prevent disease “events”, and to stratify patients’ diagnosis and care. This potential is largely untapped at present.



FOCUS AREA 2: Value from Data in Clinical and Sub-Clinical Settings

The Focus Area

This Focus Area will support activities that bridge the gap between large data sets and medical outcomes in chronic diseases. Given that this is a field that has received significant attention and investment in recent years, a key aspect will be to identify areas where the EIT Health partnership can be leveraged in order to succeed where other initiatives have not led to widespread uptake. A major impact target will be to reduce acute hospital admissions due to pre-existing conditions by 10% in the short-medium term. This is seen as a “generalised” target, and it is recognised that individual project or disease areas will need to achieve a larger reduction in order to deliver meaningful impact. Additional targets in this Focus Area can be selected by project teams, provided they can demonstrate that an equivalent, meaningful and quantifiable effect can be achieved.

Please note that proposals focusing on the design and implementation of clinical decision support systems will **NOT** be financed as part of this Focus Area.



FOCUS AREA 2: Value from Data in Clinical and Sub-Clinical Settings

Example Activities

There are a number of ways in which this Focus Area can be addressed. For example:

- Innovations that improve **patients' understanding of – and use of – their own data** to manage their chronic disease/multi-morbidities.
- **Utilisation of genomic, proteomic and patient history data** to stratify diagnosis and care.
- Innovations that support the **coordination of chronic disease care through the use of data**, enabling both prevention of acute incidents and improved self-management.
- GoGlobal Programme(s) for better access to other geographical regions, so that use of a greater body of data can **improve market access for SMEs**. This could include gaining an understanding of local data regulation requirements.
- Bootcamp programme(s) focusing on the use of clinical and non-clinical data to develop **new diagnostic methodologies**.
- Innovative Educational programmes that refer to **digital transformation**, e.g. through the involvement of novel technology in health.
- **Education programmes for executives and professionals** that provide the learners with knowledge in digital technology and data processing and the use of big data.

Contacto

- Si estás interesado en presentar una propuesta y te pones pronto en contacto con el Instituto Imas12, podemos proporcionar soporte:

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