EUROPEAN NETWORK FOR FALL PREVENTION, INTERVENTION & SECURITY

GOOD PRACTICE - PROJECT

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Contents

Introduction to the Good Practice:

The main goal of E-NO FALLS thematic network was to integrate and bring together knowledge, experiences and best practices acquired at European and international level in the area of fall prevention, intervention and safety. So, it is stated a forum for all stakeholders within the value chain (such as industry, users organizations, informal and formal care providers, public authorities, investors, housing and insurance companies and service providers across Europe) to share knowledge, expertise, resources, best practice experiences and to build consensus to highlight the obstacles to be overcome and to provide guidance for ICT-enabled solutions and their roll-out.

Problem:

1. Falls account for 40% of all injury deaths and are the sixth cause of death among elderly. ICT technologies have experimentally demonstrated their potential to enhance the autonomy and quality of life of elderly people, through improving prevention/intervention of falls. From a technological perspective a variety of ICT solutions for fall prevention, detection and intervention have been introduced spanning the areas of assistive training devices, biofeedback solutions, fall detectors, fall risk assessment systems and more.
2. It was needed an effort to make these ICT based systems available for wide deployment in real cases.

Solution:

- E-NO FALLS acts as a HUB concentrating conclusions, references and links to all what is being/has been done in all issues (research results, policy recommendations, market uptake...) related to fall prevention, detection, intervention and safety. Furthermore the project provides in its website a “repository” of already available ICT technologies for both falls prevention and detection.

Impact:

- The Emergence of national / regional programmes on innovative approaches to fall prevention across Europe.
- Creation of a sustainable stakeholder platform for promoting the take-up of innovative and ICT based solutions for fall prevention and intervention across Europe and strengthening partnerships across the active and healthy ageing value chain (from innovators, industry players, users, public authorities).
- Contribution to the creation of an EU wide market for ICT-enabled Ageing Well solutions
- Contribution to European industry establishing a world leading position in this field.

1. Relevancy of the GP project

The “Relevancy of the GP project” section provides quick check and definition of its relevancy in regards to HoCare project objectives.

Good practice of quadruple-helix cooperation in R&I?	Yes, this GP project includes good practice of quadruple-helix cooperation in R&I
Good practice of delivery of Home Care R&I?	Yes, this GP project includes good practice of delivery of Home Care R&I.
If not in Home Care R&I, description and proof of its potential for transferability to delivery of Home Care R&I	Direct address to health care and home care.
Generation of innovation in home care through answering unmet needs identified by formal or informal healthcare providers?	Yes, this GP project includes good practices of innovation through answering unmet needs.
Generation of innovation in home care through public driven innovation?	No, this GP project does not include good practices of public driven innovation.
Generation of innovation in home care via quadruple-helix cooperation for quicker delivery to the market?	Yes, this GP project includes good practice of innovation via cooperation for quicker delivery to the market

2. Quick overview of the GP project

The "Quick overview of the GP project" section provides initial overview of the good practice project (GP project) and enables readers to see if this GP project idea is relevant for possible transfer to their organization potential innovation activities.

Name of the GP project	European Network for FALL Prevention, Intervention & Security
Region of origin of GP project	European
5 keywords that best describe the content of the GP project	Fall prevention, intervention and safety Elderly ICT-enabled solutions Policy recommendations Guidelines and toolkits
Relevant **Operational Programme name through which the GP project has been funded** (+ also in local language in brackets)	Competitiveness and Innovation Framework Programme (CIP) 2007-2013
Relevant **support programme / intervention area name** of the GP project **through which it was funded** (+ also in local language in brackets)	The Information Communication Technologies Policy Support Programme (ICT-PSP) It aimed at stimulating a wider uptake of innovative ICT based services and the exploitation of digital content across Europe by citizens, governments and businesses, in particular SMEs.
Single or multiple recipients of the GP project?	Multiple recipients

Type of lead recipient (SME, LME, research centre, innovation centre, network/association, university/school, municipality, other public body, other (specify)	SMEs, research centers, citizens of all ages, health care and home care, policy makers
Types of participating partners (list all participating partner types. E.g.: hospital, social house, senior house, patient association, networks, SMEs, LMEs, research actors, business supporting organizations, public institutions/regulators, other (specify)	SME (Industry & Consultancy), Research organizations, Academic Public institutions
Summary of the good practice	Representatives of all 4 helixes were involved in the E-NO FALLS project consortium and also the quadruple helix is considered when consider the target users in the domain of health care of elderly. E-NO FALLS provides in the website a "repository" of available ICT innovative solution for both falls prevention and detection. This features: -Reviews. The reviews of technical systems are given in this website and are guided according to a certain list of items that are provided by the web portal. -User-related experience. Anyone who has some experience with the device can provide the personal comments. -Questions. Anyone interested in the device who wants to know more about specific aspects of it may arise questions. -The information is provided by any registered user. -Moderation of the information is necessary to have relevant and consistent information in the forum. E-NO FALLS is responsible for providing this moderation.

3. Transferability

The "Transferability" section provides more detailed review of strengths and weaknesses of this GP project including description of necessary basic conditions for region and leading organization to potentially transfer it. At the end of the section, the key threats in the successful transfer open up possibility to focus on specific relevant issues important for the successful transfer.

Strengths and weaknesses of the project

What are the GP project strengths? Why it was funded? (max. 500 characters)	Benefits for all representatives of the quadruple helix in both postures as provider and potential users or facilitators for users. Interactivity with registered users of the repository of ICT innovative solutions A direct support for considering the innovative solution for market
What are the **key weaknesses of the GP project**? (max. 500 characters)	The project was finalized in 2016 and the extension of ICT solutions repository and the moderation involves further financing and further updates.

Basic conditions for successful transfer

Why is this GP project transferable? (max. 1000	This GP is transferable from the point of vies of the way in which the innovative solutions are made available to each representative of the quadruple helix.

characters) – innovation, impact, financial, legal, and timeframe aspects – see HoCare Glossary of terms	This approach could be used for national repository for the health care of vulnerable elderly to falls.
What are the **basic conditions the region needs to have** to be successful in transferring this good practice? (max. 500 characters)	The basics conditions for transferability at regional level is a clear identification of representatives of the quadruple helix and a clear identification of innovative solutions for fall preventions in case it is maintained the topics or any other health aspects in the home care of elderly that is selected to consideration.
What are the **basic conditions the leading recipient from the region needs to have** to be successful in transferring this good practice? (max. 500 characters)	The Basis conditions for the leading recipient from the regions are the openness for building the regional quadruple helix and the acceptance of the repository approach in making available the innovative solutions to be further used or adapted or further inovated.

Key threats in GP project transfer

What are the **key potential threats for the GP project transfer?** (max. 2000 characters)	Local peculiarities. Technological limits due to the systems updates and redesigning the solutions interfaces.

4. Description of the GP project

The "Description of the GP project" section provides more detailed information on the Good Practice project (GP project) and enables readers to get further detailed inspiration and easy ready-to-use information for possible innovation transfer to other project applications. This includes: tackled problem, time length of the GP project, objectives, phases, activities and deliverables of the GP project, its main innovation and target group.

Description of the tackled problem

What was the **problem / challenge tackled** by the project? (max. 2000 characters)	Falls account for 40% of all injury deaths and are the sixth cause of death among elderly. About 1/3 community dwelling people aged 65 or over fall each year; fall rates increase with age and are higher in long term residential care and hospitals. In 2015 in EU28 it is estimated there were some 46 million falls amongst community dwelling older people. Some 30-50% falls result in minor injury, 5% in fractures, (1% hip fracture), 5-6% in other major injury. Fear of falling is common and can result in older people becoming socially isolated. Falls are a major predictor of loss of independence and admission to care. Falls cost about 1-1.5% of national health care expenditure. However, the good news is that falls prevention is effective. ICT technologies have experimentally demonstrated their potential to enhance the autonomy and quality of life of elderly people, through improving prevention/intervention of falls. From a technological perspective a variety of ICT solutions for fall prevention, detection and intervention have been introduced spanning the areas of assistive training devices, biofeedback solutions, fall detectors, fall risk assessment systems and more. It was needed an effort to make these ICT based systems available for wide deployment in real cases. The EC Blueprint on Digital Health and Care Innovation for Europe's Ageing Society argues the need for models of self- and citizen empowerment for social transformation facilitated by digital and technological innovation
What were the **reasons for the problem?** (max. 2000	The need of a portal for links to other networks, projects and initiatives addressing falls which make easier to all stakeholders to have a view and gather

characters)	information about trends and future initiatives and the opportunity in the field of falls within elderly communities.

Time length of the GP project

What was the **time length** of the GP project in months?	36 months

Objectives of the GP project

Describe the **overall and specific objectives** of the GP project (max. 2000 characters)	- Maximize the social and economic potential of ICT-based solutions, while promoting and accelerating wider deployments for improving quality of life and sustainability of care for the ageing population. - Coordinate efforts dedicated by all the involved actors to identify future potential areas where to research, develop, pilot, evaluate and deploy ICT solutions regarding fall prevention, intervention and security. - A permanent effect on the products and the services, setting new standards and eliminating most of the unacceptably poor and untrustworthy applications.

Phases, activities and deliverables

List all **main phases** of the GP project including their time length	- Gathering information - Stakeholders and partnership activation - Creation of an EU wide market
List and describe all **main activities** that were implemented by the GP project (max. 2000 characters)	- Information and awareness best practices. Enhancing partnership (inventory of best practices in communication and awareness; analysis and assessment of methods; recommendation for enhancing partnerships and information /awareness raising) - Socioeconomic and clinical impact assessment methods(inventory of socioeconomic and clinical impact assessment methods; development of assessment criteria and comparison of socio-economic and clinical impact assessment methods; catalogue of methods for fall prevention, intervention and security) - Pre-commercial public/private procurement (inventory of methods-best practices; potential cases, roadmap for the pre-commercial procurement of ICT based solution) - Towards market uptake(defining the framework for sustainable business models; fostering standards and interoperability; enabling market development; business plan) - Management and dissemination plan (management of resources; planning and monitoring of work and deliverable; coordination with EC; dissemination plan; website launch & update rising)
List all **main deliverables** of the GP project	- Analysis and assessment of methods - Inventory of good practices in a White Paper - E-NO FALLS handbook and Quality and Risk Management Plan - Project website and dissemination material - Inventory of best practices in communication and awareness - Inventory of socio-economic and clinical impact assessment methods - Catalogue of socio-economic and clinical impact assessment methods - Roadmap for the pre-commercial procurement of ICT-based fall prevention and effective - Recommendations for enhancing partnerships and awareness raising - Comparison of socio-economic and clinical assessment methods - Success Factors to be applied in public/private Procurement for ICT based fall - Inventory-Best practices in sustainable business models

	- Standardization and inter-operability analysis - Market development roadmap. Preliminary - Preliminary E-NOFALLS Business Plan - Recommendations for standardization and interoperability - Market development Roadmap - Design of the E-NO FALLS Network Business model

Main innovation of the GP project

What was the **main innovation** of the GP project? (max. 2000 characters)	The main innovation of the project is the creation and operation of repository of ICT based solutions for homecare of elderly exposed to falls.

Target group of the project

Who was the main **target group** of the GP project? (SME, LME, research organization, university, public institution, healthcare provider, business supporting organization, other (specify)	Ministries of Health, General Directorates for public health Health care providers Elderly houses SMEs Research centers Health care foundations
Describe the main target group (max. 2000 characters)	The target group is represented by the quadruple helix actors in the field of health care ad fall prevention , intervention and safety . However it is considered that it is mainly dedicated to SMEs interested in bringing ICT based solutions quicker to the market so that efficient and innovative solutions be supportive the elderly problems caused by falls.

5. Impact

The “Impact” section provides more detailed information on the effect of the GP project implementation and dissemination of major outputs.

Impact

What was the level of **geographical impact** of the GP project? (village, city, county, country, international, other (specify)	European, International, National
What were the final **impact indicators including their quantification**? (max. 2000 characters)	An increased level knowledge of ICT based solution for elderly community with the possibility of direct implementation
Describe the **changes resulted from the project** activities (max. 2000 characters)	The SMEs from the field, the public and private organizations concerned on health and home care solutions have an easier work for their patients health maintaining based on the solutions proposed under EU programmes targeting the citizen’s health when the fall vulnerability is imminent.

Dissemination of outputs

Describe **dissemination activities** of the project	Project website and social networking Project documentation

outputs carried out during the GP project (max. 2000 characters)	Publications at European and cross border level Project workshops International Annual workshops EC Dissemination mechanism Liaisons establishment with other projects and activities EU Concentration meetings Clustering and other dissemination activities

6. Risks

The "Risks" section provides more detailed review of potential risks of this GP project implementation including their defined mitigation strategies to eliminate them.

Describe **risks involved** in implementing this GP project including their **mitigation strategies** (max. 2000 characters)	This GP is considered as a support in implementing the results obtained by a selection of EU funded projects from several programmes dealing with elderly risks to falls. The risk in implementing these solutions lies on the incompatibility of ICT system versions and the mitigation is based on redesigning the interface of the solution in the framework of the new version of the computer system.

7. Budget

The "Budget" section provides more detailed review of costs regarding the project implementation as well as operational sustainability after its end. In addition, if relevant, public tenders within the project and additional generated incomes by the project are showed and explained.

Budget

What was the **overall budget** of the project **in EUR**?	€ 1,000,000
List relevant **budget lines of the project including their % share** from total budget	Staff costs – 40% Administration – 5%% Travel and accommodation – 22% Meetings and events – 31% Promotion costs – 1% Other – 1%

Additional income generated by the project

Did the project create any **additional income**?	This GP project did not generate additional income to be made public.
If yes, specify **which type of income and what amount in EUR?**	

Public tender

Did the project include any **public tender**?	Yes, CIP programme competition
If yes, specify **what kind of contract** (specific contract, general contract, other)	General contract
If yes, specify in **what amount** in EUR	€ 1,000,000

Describe the **public tender subject** (max 2000 characters)	CIP-ICT-PSP 2012 Call 6 Ref 325137

Financial sustainability after GP project end

Was there an **operational financial sustainability plan** in the project **after its end**?	No.
If yes, specify **where the operational funds** after project end **came from?**	N/A
If yes, specify the **amount of operational funds** in EUR	N/A

8. Other information

In this section, specific additional information about the GP project could be revealed.

Please describe **any other relevant information about this GP project** (if relevant)	http://www.e-nofalls.eu/project http://www.e-nofalls.eu/related-projects http://www.e-nofalls.eu/ictrepository/

9. Information gathered by …

The information about this good practise (GP) project has been gathered for the purpose of the HoCare project (Interreg Europe Programme) by the following organization:

Region	Romania
Organization name(s) (+ in local language in brackets)	National Institute for Research and Development in Informatics (Institutul National de Cercetare Dezvoltare in Informatica)
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