



Health & Care Cluster of Large Scale Pilots

PARTICIPATING PROJECTS



HEALTH AND CARE CLUSTER

FACILITATED BY



RADICAL HEALTH FESTIVAL Helsinki
12 June 2023

Creating an open ecosystem to bring digital health services at scale to support Active and Healthy Living policies



Direct Digital interactions with older people: what are the conditions for upscaling in a rural area?

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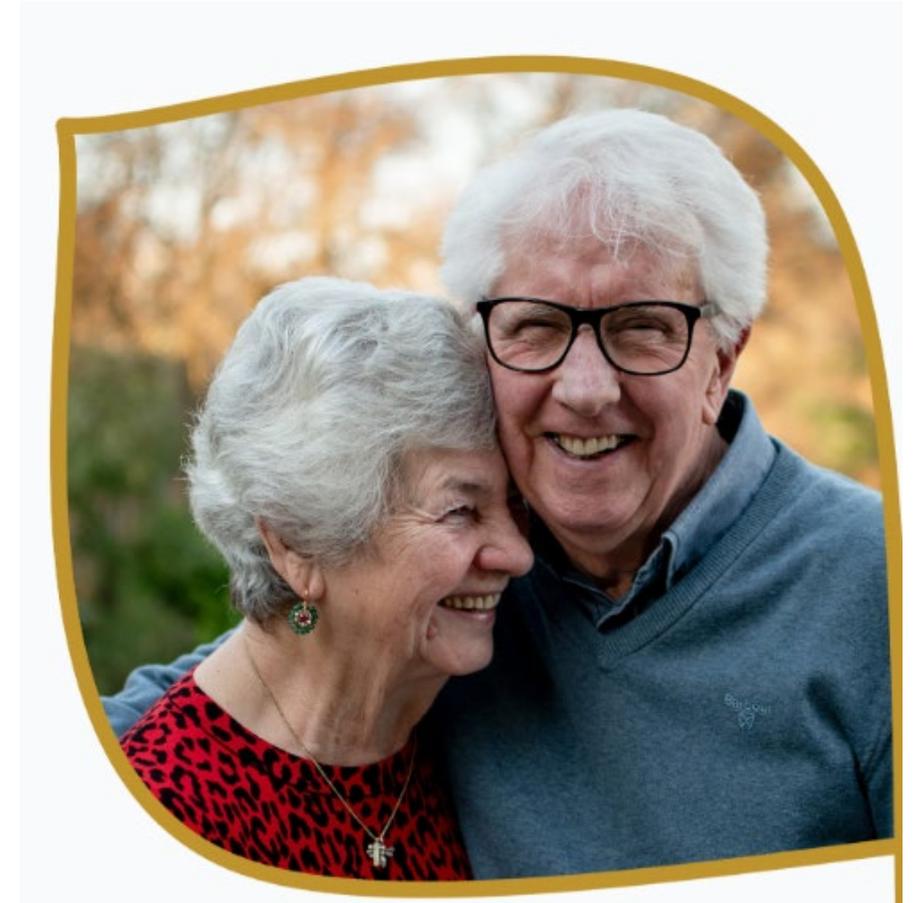
gewi-Institute for healthcare studies (Cologne, Germany)



SHAPES Project

SHAPES aims at creating uniform minimum standards in the care of older people

- General objectives
 - Development of a European „**SHAPES Platform**“
 - Collection of digital solutions to be deployed in a **Pan-European Pilot Campaign**
- Individual level
 - Facilitate **active and healthy aging**
 - Maintain a **high-quality standard of life**





- 83 Million inhabitants with a large proportion of **aging population** (21,2% of people 65+ in 2023)
- **Increasing health and care costs** and willingness/pressure to reduce health expenses
- **Weak digital infrastructure** especially in rural areas
- **Data protection and data privacy** are of great importance to the population (data sharing skepticism)
- **Interoperability and integration issues** within national systems (electronic patient record is not widely distributed)



Pilot Site:

Oberbergischer Kreis (OBK)

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- Rural area
- 270,000 inhabitants, approx.
170,000 over 65 year older people
- Very low medical density
(141.5 doctors per 100,000
inhabitants in 2019)



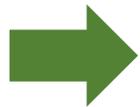
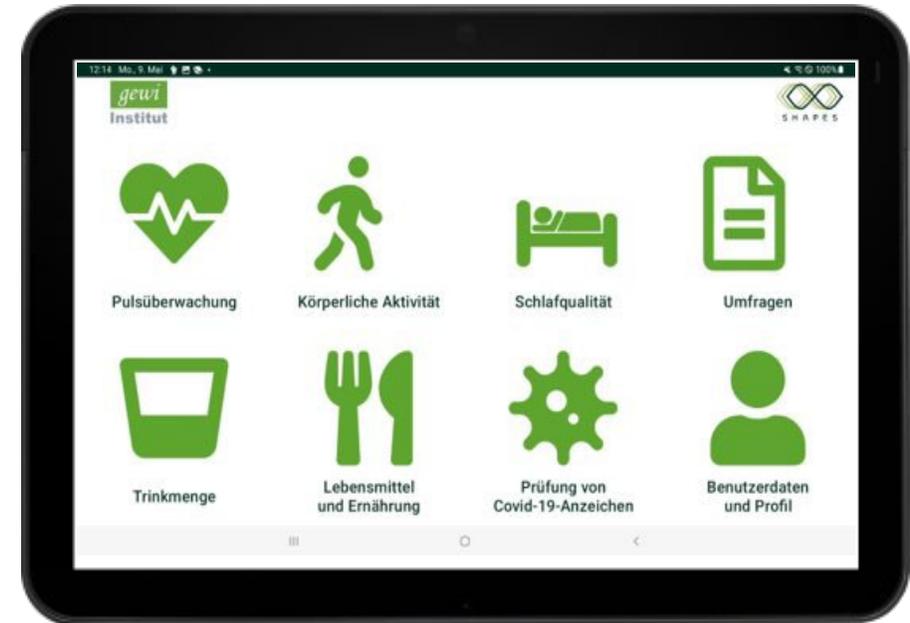
European Innovation
Partnership on Active
and Healthy Ageing
REFERENCE SITE





Who is it for?

- Older people (65+ years) were asked to monitor their health and wellbeing parameters in order to receive personalised recommendations concerning:
 - Heart rate
 - Physical activity
 - Sleep
 - Liquid and food intake
 - COVID-symptoms



- Raise awareness about the importance of physical activity, balanced nutrition, enough hydration and good sleeping habits
- Facilitate healthy ageing by enabling older people to manage their health

Scalability by design: Stage 1 of the Pilot Campaign



PHASE 1

PLAN, DESIGN & KPIS

Scenarios to validate initial concepts and approaches and adapt it to the specific regions

PHASE 2

MOCKUP OR PROTOTYPE VALIDATION

Validation to assess user experience and acceptance

PHASE 3

HANDS ON EXPERIMENTS

Validate functional elements and gather user feedback



Scalability by design: Stage 2 of the Pilot Campaign

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PHASE 4

DEPLOYMENT IN CONTROLLED ENVIRONMENT

Experimenting with a single SHAPES DS up to demonstrating (part of) the platform in a controlled environment.

PHASE 5

DEPLOYMENT IN REAL LIFE USE CASES

Demonstrations in real-life conditions involving targeted groups



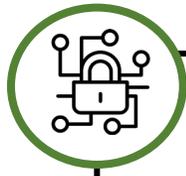
sociological evaluation of needs and setting (phase 1)



iterative testing, feedback and adjustment loops by involving end-users



aspired technological readiness level (TLR) 5-7



application of the GDPR



high TLR (8-9)

- technical stabilisation of functioning (data transfer, sufficient database for ML, automation of data analysis and recommendations)



cloud computing to meet the increased system requirements

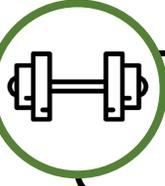


- Legal obligation for **health insurance companies** to provide preventive services
- **Digitalisation strategy** of the Federal Ministry of Health to improve the quality and efficiency of medical and nursing care (DiGAs)
- **Research and Innovation Funds** as central health policy instrument for promoting new forms of health care and health services research in Germany



Network of support

Human support and training: **project level**



Provision of an introduction training and a manual



Regular contact with participants (once a week) by phone



Technical support via phone, home visit or remotely accessing the device



Optional exchange with other participants would have been beneficial for the participants to exchange their experiences



Network of support

Human support and training: **real setting**

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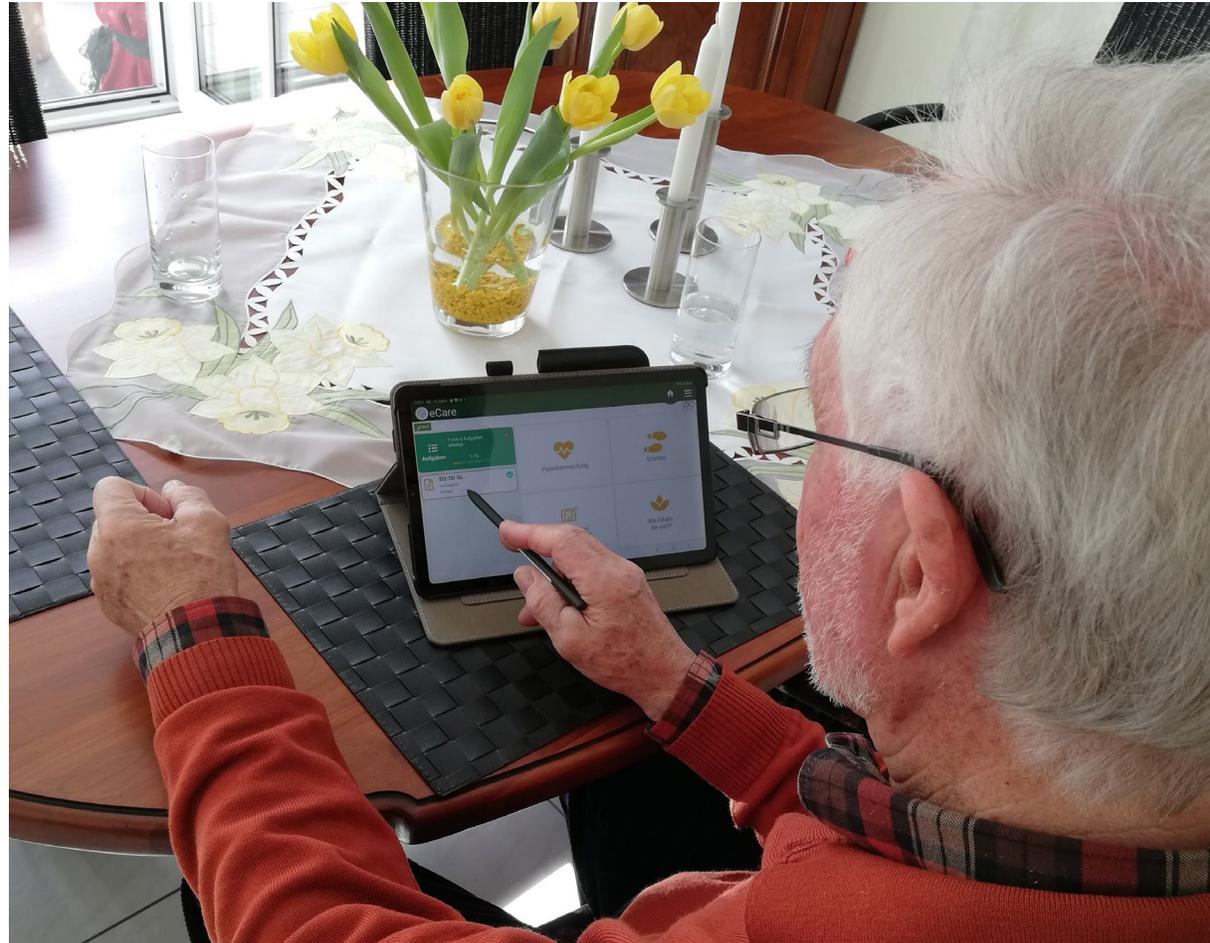


- Doctors or pharmacies could recommend the DS to their patients
- Financed by **end-users** and / or **insurance company** (DiGA)
- Purchased via the **marketplace** (device and app)
- **Human services:**
 - Introduction training (digitally or physically) in home
 - Technical support: to integrate the DS in existing systems and offer remote support

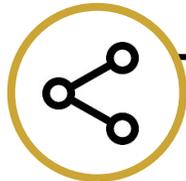


User acceptance: project level

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User acceptance: **real setting**



DS would need to be connectable to the user's initial system
(android and apple)



the fitness tracker would need to collect additional activity data
other than steps

Impact: project level



User saw a high potential in the DS



Most participants had already been using a fitness tracker and were aware of their health and wellbeing parameters



Self-care was perceived as satisfying



Using the app on a daily base affected the perceived importance of health and motivated them to keep healthy lifestyles up.



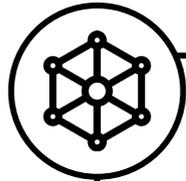
- **Quality of life**
- Reduction of **intake of over the counter drugs** (sleeping aids, nutrition supplements, reflux)
- **Patient-Empowerment**
- Improvement of **information flow**, fewer calls to GP
- **Fewer doctor visits:** cost reduction at insurer level



Elements which require adaptation



Reimbursement



Interoperability with local/national EHR



**Thank you for
your attention!**

**Come and visit
us at the booth!**

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