



Sustainable Continuum of Care to Support Active Living in Europe (SCALE)

Exploratory meeting held at the Institute of Digital Healthcare, University of Warwick

Wednesday 21st October 2015



Professor Sudhesh Kumar

Dean of Warwick Medical School

Director of the Institute of Digital Healthcare



Mr Tony Davis

Commercial Director WMAHSN
UKI CLC Interim Director for Innovation and
Business Creation



Sustainable Continuum of Care to Support Active Living in Europe

Aim: To create and test connected care solutions to keep people with chronic disease at an optimum level of health and capability. At the same time we intend to move care from more expensive and labour intensive settings to the home.

Activities and the leveraging of resources and knowledge: With the *active participation of patients, care providers, regions and communities* InnoLife will set-up unique test beds for innovation for:

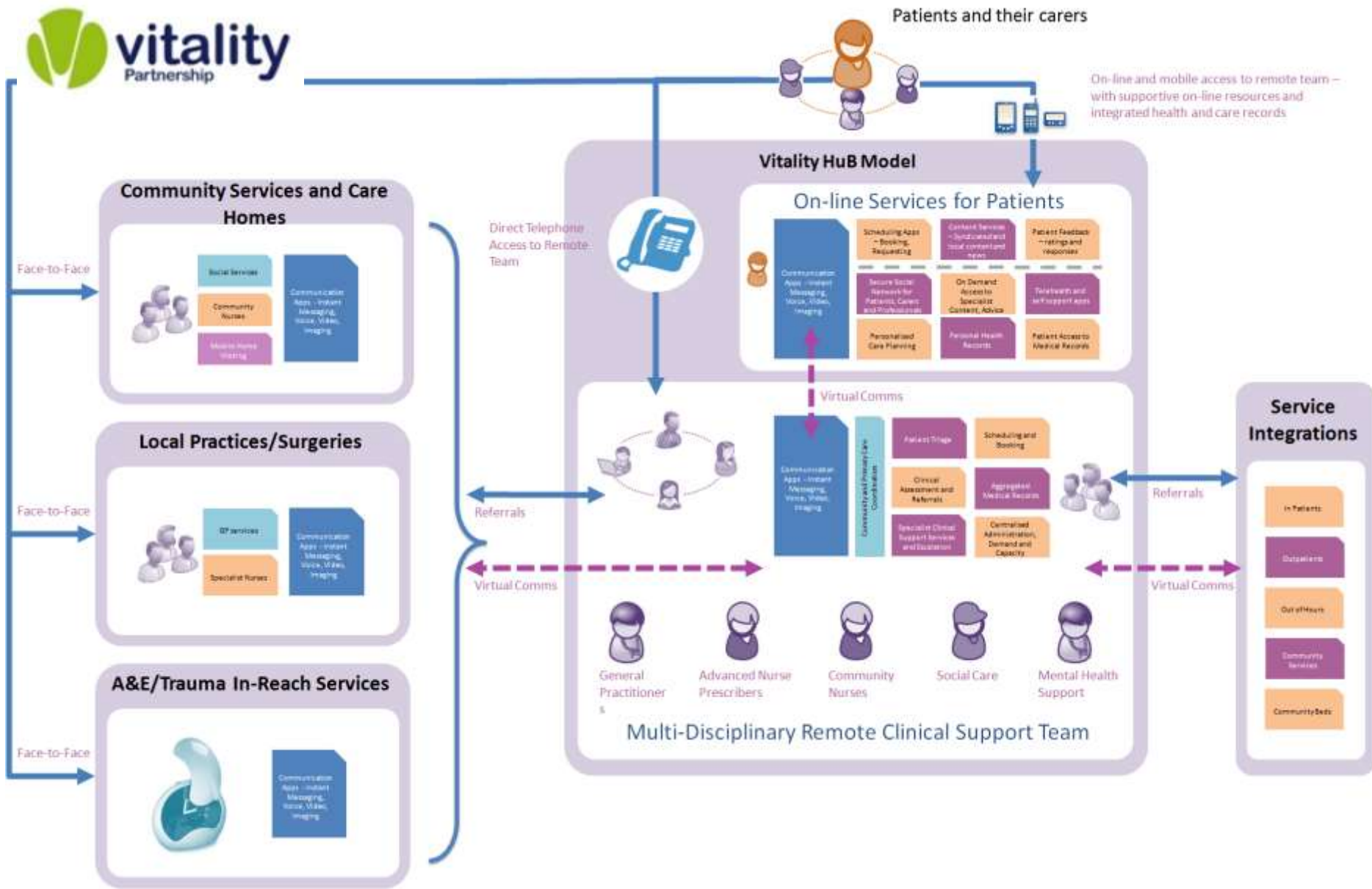
- *Tele-health solutions and services* for connected care across all care settings, supported by information exchange and enabling care provision at home tailored to the condition and needs of the user
- Empowerment of people and communities to *manage their own health at home* through intelligent devices, solutions and services that connect health and social care resources, systems and data
- Making such *data* available to citizens and health/social care providers, so that personalised holistic solutions can be offered to the user

Origins of SCALE

- VITALITY + Paddie.....
- A paragraph about a possible Example Project for the proposal
- + BT
- + Air Liquide, Axa, BD, Bull, Essilor, GE Healthcare, SEB, Intel, Linkcare, Medtronic, Novo Nordisk, Nuffield Health, Phillips, Profil PKA, Roche, Sanofi, Siemens, Sorin, Stockholm Stad, Telefonica, Visea



BIRMINGHAM



Ambitions for this meeting

1. Identify any partners who are interested in working together to deliver SCALE

If yes,

2. Re-define the scope of SCALE
3. Develop a roadmap that will culminate in the inclusion of SCALE in the EIT Health Business Plan for 2017
4. Make a start on outlining a programme of work



Professor Theodoros N. Arvanitis

Chair in e-Health Innovation and Head of Research
Institute of Digital Healthcare, WMG & Warwick Medical School,
University of Warwick

Digital Theme co-Director, West Midlands AHSN

The Context

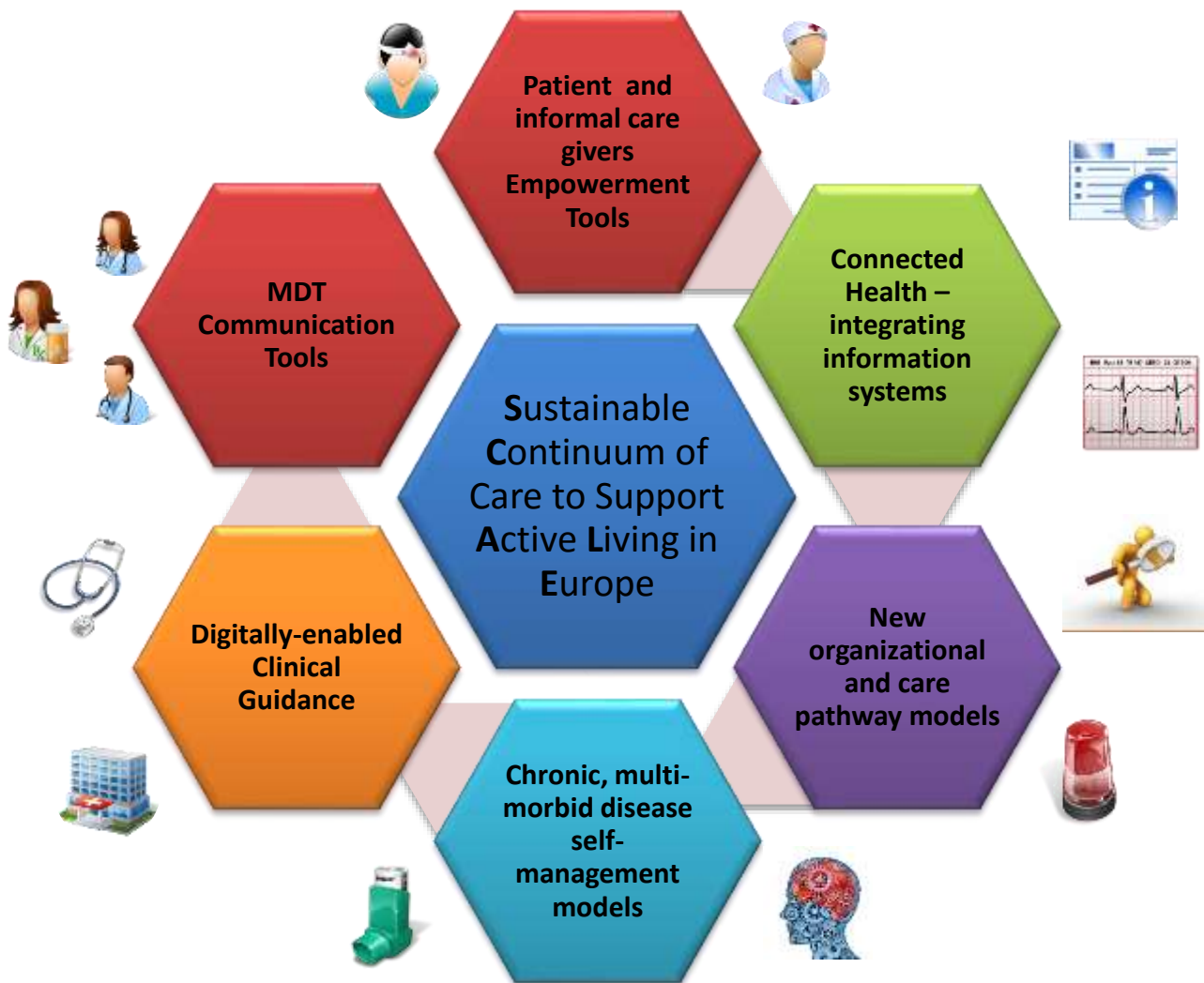
- Chronic diseases are the main reason for **poor health and restricted activity**, affecting over one third of Europe's population and accounting for 70% of healthcare expenditure in Europe.
- Ageing is associated increased accumulation of multiple chronic conditions known as ***multi-morbidity***, including a growing number of functional and cognitive impairments.
 - More than half of all older people have at least three chronic conditions, and a significant proportion has five or more

The Challenge

- The clinical management of patients with multi-morbid chronic conditions is much more complex and time-consuming for the **healthcare system**.
- Further burden on **social care services** to enable such patients perform everyday activities, supported by informal carer or home / community care services.
- Long-term care needs experience shortcomings, especially **within and between** health and social care delivery organisations.

What does good look like?

A proposal towards the ideal SCALE



Thank you

