AAL Call 2020

HEALTHY AGEING WITH THE SUPPORT OF DIGITAL SOLUTIONS

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The AAL Call 2020 is promoting a **life course approach** to health and wellbeing. In addition to a focus on older adults, proposals could consider the **applicability** of the proposed solutions **to other population groups where appropriate**, for example the transition phase from a working life to retirement.

Proposed solutions should **meet the needs of end-users**, be **integrated into service delivery models** or in the end-user’s **local/regional network** and support and strengthen existing and emerging **ecosystems** supporting healthy ageing.

Quality of life concepts such as ‘**positive health**’ or ‘**healthy ageing**’ should be used as guiding principles in the development of the solutions.
# TAALXONOMY

## TAALXONOMY: AAL PRODUCT AND SERVICE CATEGORIES

### Health & Care
- Health & Care comprises products and services which collect and manage medical data, which support therapy and care activities, as well as those assisting in nutrition and personal hygiene.

### Mobility & Transport
- Mobility & Transport consists of products and services that on the one hand serve as transportation measures for persons and goods, and on the other hand offers travel information, navigation and orientation solutions.

### Living & Building
- The category Living & Building covers products and services for water and energy supply, light management, room climate as well as measures for design barrier-free rooms. Additionally, maintenance and access control are in this category.

### Work & Training
- Participation in the working life is covered by the category Work & Training. It contains work supporting measures and products and services for job specific learning and training.

### Leisure & Culture
- The category Leisure & Culture consists of products and services which enrich or enable recreational activities in leisure time, and cultural activities. Sports, media and games are covered, as well as culture, religion and travelling.

### Safety & Security
- Safety & Security includes products and services which prevent damages and burglary or which support the user in cases of falls. Furthermore, localisation and emergency management is part of this category.

### Vitality & Abilities
- The category Vitality & Abilities includes products and services that support, train or enable basic physical, mental and social abilities that are essential requirements for independent living.

### Information & Communication
- Information & Communication contains products and services which on the one hand present knowledge and other advisory functions, and on the other hand support and enable interpersonal communication and organisation of daily living.

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**Source:** TAALXONOMY (Synyo, University of Innsbruck, Eurac)
Different markets require different approaches.
Call 2020 looks for solutions aiming at “PRIVATE CONSUMER MARKETS” with aspects such as sustained well-being, maintaining one’s lifestyle, staying independent (e.g. at home), continued employment.

**Buyers:** mainly older adults, families, social networks.
Call 2020 looks for solutions aiming at “INSTITUTIONAL MARKETS” such as health and care, social care, and housing.

**Buyers:** mainly secondary / tertiary end-user groups (care organisations, municipalities, ...)

- Solutions are provided as **part** of a more complex **service offer**
- Requirement for **proven evidence** about the effects and (cost)effectiveness of ICT-based solutions before adopting them fully.
- Solutions have to fit into the **vision and strategy** of the involved organisations.
What kind of projects can be funded?
In Call 2020 two types of projects can be funded:

- **SMALL collaborative projects (SCP)**
- **Collaborative projects (CP)**
SMALL COLLABORATIVE PROJECTS (1)

• Intended to be quicker
• More agile regarding submission process, grant signature and reporting
• Duration of minimum 6 months and maximum 9 months
• Maximum funding of € 300,000

They can result in well-substantiated ideas or proposals for AAL solutions to be submitted in a later AAL Call (or elsewhere) – not mandatory
SMALL COLLABORATIVE PROJECTS (2)

• Aim at **exploring** new ideas, concepts and approaches
• Propose **proofs of concept** for further development of innovative ICT solutions
• Rapidly **evaluate the business potential** of available/new AAL products and services
SMALL COLLABORATIVE PROJECTS (3)

Intense collaboration with end-users at an early stage:

- Thoroughly *investigate wishes and needs* for appealing solutions
- *Explore* novel /improved *approaches* for involving all types of end users
- *Validate benefits* for end-users and for end-user organisations, enhancing the latter’s own processes
- *Explore* ways for *opening up the market* for ICT based solutions for older adults
- *Assess* the project concept in relation to *market potential*
COLLABORATIVE PROJECTS (1)

- User-driven through co-creation
- Address a specified challenge
- Route to market needs to be clearly described and aligned with the business strategies of the partners responsible for commercialisation
- Short time-to-market introduction ≤ max. 2 years after project end
- Technology readiness levels 5-8

- Duration of 12 to 30 months
- Maximum funding of €2,500,000.
COLLABORATIVE PROJECTS (2)

• Aim is to **develop, test, validate, scale up** and integrate into service delivery models, ICT solutions for ageing well and to

• Contribute to the **creation/strengthening/connection of ecosystems with specific tasks** dedicated to this aim. Activities such as (but not limited to) **outreach, networking and engagement** with key stakeholders (regional/national authorities), sharing of **best practices** among ecosystems, **connection** of players, etc. should be foreseen
• **Strong involvement of end users** - especially secondary and tertiary – and relevant **stakeholders** in shaping solutions and creating markets

• Requirement analyses: **building on knowledge that is already available.** If further requirement analyses are needed, this has to be duly justified.

• **Strong business and market orientation** (validate, sell, launch) & involvement of business partners (≥50%)
Depending on the type of market the proposed solutions need to respond to different requirements.

- Solutions targeting the PRIVATE CONSUMER MARKET(S)
- Solutions targeting the INSTITUTIONAL MARKETS
PRIVATE CONSUMER MARKETS

• ICT-based solutions to support older adults by addressing issues such as wellbeing, lifestyle, comfort or digital and health literacy aspects

• **Clearly described route to market** and an **identified leader for commercialization** (SMEs, large industry, or end-users’ organisations, acting as business partner)

• **Evidence**: iterative testing and evaluation of added value and among others, willingness to pay by consumers
INSTITUTIONAL MARKETS

• ICT-based solutions that can be integrated in the strategies of user organisations, service providers and business partners

• The ecosystem in which the solution will be implemented has to be properly described and at least one signed declaration of intent from relevant stakeholders must be provided at submission level

• Evidence about the effects and cost-effectiveness: iterative testing and substantial evaluations in min. 2 countries with significant # of users

• Secondary end-user organisations: able to integrate the solutions in their policies, service offers, work processes, reimbursement systems etc.
EXPECTED IMPACT (CP’s)

By funding the development of AAL solutions, the AAL Programme aims to create evidence of:

• improved **quality of life**
• **added value** for end-users
• **usefulness and effectiveness** of the solutions
• **reliability and security** of solutions
• **financial viability**, with positive business cases for potential payers.
EXPECTED IMPACT (CP) / QUALITY OF LIFE

OLDER ADULTS

• Living a **healthy, active and meaningful** life.
• Living **independently and safely** for longer **at home** (keeping decision/control of their daily activities) **with support** from their **carers** and **community**.
• Living in **dignity** and be **socially included**.

INFORMAL and/or PROFESSIONAL CARERS (if relevant)

• Reduce **stress and care burden**;
• Build **resilience**;
• Improve the **quality, efficiency and effectiveness** of the **care** they provide.
EXPECTED IMPACT (CPs) / MARKET

• A greater exploitation of ICT based solutions for supporting older adults throughout the ageing process. This includes measures to support their care networks.

• A growing public/regulated and private consumer market of interoperable and scalable AAL systems to support active, healthy, and independent living.

• More European/international collaboration, including end-users, industry and other stakeholders in the value chain.

• Better use of all resources for the social/care system as older adults are supported in living independently in their homes for longer, thus lowering the need for homecare and delaying the move to institutionalized/community care.
PARTICIPATING COUNTRIES/AGENCIES

- Austria
- Belgium
  - Brussels’ region – Innoviris
  - Flanders’ region – VLAIO
- Canada
- Cyprus
- Denmark
- Hungary
- Italy
  - Ministry of Health (MoH)
  - Ministry of Education, Universities and Research (MIUR)
  - Friuli Venezia Giulia Region
- Luxembourg
  - FNR
  - LUXINNOVATION
- Norway
- Poland
- Portugal
- Romania
- Slovenia
- Spain
  - ISCIII
- Switzerland
- Taiwan
- The Netherlands
THE AAL CALL - DATES

• 30 January  Central Info Day
• 3 February  Publication of the Call
• 7 February  Submission platform open
• 22 May 17h00 CET  Deadline for submission – Call closed
SUBMISSION

IMPORTANT!

• Submission is done via the AAL EMS platform
• Read carefully the Call text, Guide for Applicants and National Eligibility Criteria Documents
• Relevant National Contact Persons should be contacted for potential submission at national level before the deadline
• Do not wait until the last minute to submit your proposal!

For more information, contact us at:
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Thank you for your attention!

Our Website: www.aal-europe.eu

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