

AAL Call 2021

ADVANCING INCLUSIVE HEALTH & CARE SOLUTIONS FOR AGEING WELL IN THE NEW DECADE

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AAL CALL 2021

While keeping an open call approach (i.e open to all 8 AAL application areas), call 2021 stresses three elements, namely an **inclusive health & care approach** (health prevention, preservation of physical & mental health, social participation), the stimulation and upscaling of innovation in active & healthy ageing through **health & care eco-systems** and the **accessibility of digital solutions** to end users, e.g through education for greater e-literacy.



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.

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.

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.

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.

SAFETY & SECURITY

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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.

INFORMATION & COMMUNICATION

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

Source: TAALXONOMY (Synyo, University of Innsbruck, Eurac)

END-USERS DEFINITION

Primary end-users

Secondary end-users

Tertiary end-users

Older adults who are actually using AAL products and services. This group directly benefits from AAL solutions through an increased quality of life and autonomy. Primary end user organisations are organisations that represent older adults (e.g. senior organisations/cooperatives etc.).

Persons or organisations directly in contact with primary end-users, such as formal and informal caregivers, family members, friends, neighbours, care organisations and their representatives. This group benefits from AAL directly when using AAL products and services (at a primary end-user's home or remotely) and indirectly when the care needs of primary endusers are reduced.

Institutions and private or public organisations that are not directly in contact with AAL products and services, but who somehow contribute in organising, paying or enabling them. This group includes the **public sector and local government organisations**, **social security systems**, **insurance companies**, **housing corporations** etc. Common to these organisations is that benefits from AAL come from increased efficiency and effectiveness which result in cost savings or by not having to increase expenses in the medium and long term.

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Different markets require different approaches

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Call 2021 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 2021 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 2021 two types of projects can be funded:

- SMALL collaborative projects (SCP)
- Collaborative projects (CP)

SMALL COLLABORATIVE PROJECTS (1)

- Intended to be quicker (shorter implementation)
- 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
- Due to the nature of Small collaborative Projects (meant to be lean, agile, exploratory and short in time) clinical studies and lengthy/intensive trials are not to be considered for this type of instrument.

SMALL COLLABORATIVE PROJECTS (3)

Intense collaboration with end-users at an early stage:

- Thoroughly investigate wishes and needs for appealing solutions
- Explore novel and improved approaches for involving all types of endusers and stakeholders in the development of AAL solutions;
- Provide evidence in relation to expected benefits for end-users and for end-user organisations, enhancing the latter's own processes (including for the improvement of service delivery);
- Explore ways for opening up the market for ICT-based solutions for older adults

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)

They aim at

- **Developing, testing, validating, scaling up** and **integrating** into service delivery models ICT solutions for ageing well;
- **Developing** innovative ICT solutions to support holistic approaches to healthy ageing;
- **Contributing** to the creation/strengthening/connection of ecosystems, limited to a task in the dissemination-related activities of the proposal.



- 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%)

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.

CENTRAL ELIGIBILITY CRITERIA

- Submission of complete proposal through the AAL electronic submission system before the deadline
- **English** as the sole language of the proposal.
- At least 3 independent eligible organisations (legal entities), from at least 3 different AAL Partner States participating in the Call for Proposals.
- Participation of at least one business partner ("Role" in the project).
- Participation of at least one eligible SME partner ("Type", in the project) which can be the business partner.
- Participation of at least one eligible end-user organisation

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Evaluation Criteria (1)

FOR COLLABORATIVE PROJECTS

Criterion	Threshold	Weight
1. Relevance and scope	3	1
2. Quality of proposed solution and workplan	3	1
3. Quality of the consortium and project management	3	1
4. Potential impact – quality of life	3	1
5. Potential impact – market development	3	1

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See chapter 6 of Guide for Applicants for detailed explanation of evaluation criteria



Evaluation Criteria (2)

FOR SMALL COLLABORATIVE PROJECTS



See chapter 6 of Guide for Applicants for detailed explanation of evaluation criteria

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PARTICIPATING COUNTRIES/AGENCIES

- Austria
- Belgium
 - Flanders' region VLAIO
- Denmark
- Italy
 - Ministry of Health (MoH)
 - Ministry of Education,
 - Universities and Research (MIUR)
 - Friuli Venezia Giulia Region

Luxembourg

- FNR

- Netherlands
- Norway
- Poland
- Portugal
- Romania
- Slovenia
- Switzerland
- Taiwan

Expected total funding commitment: 21.408.900 €

(Pending EC final approval)

THE AAL CALL - DATES

- 15 December 2020 Call 2021 Publication
- 27 January Central Info Day call presentation
- 28 January Central Info Day pitching day

• 21 May 17h00 CET Deadline for submission – Call closed

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SUPPORT FOR APPPLICANTS

- Partner search tool <u>https://aal-europe.force.com/s/</u>
- AAL2Business open webinars <u>https://www.aal2business.com/</u>
- Public Deliverables <u>http://www.aal-europe.eu/public-deliverables/</u>
- AAL Guidelines for Ethics, Data Privacy and Security <u>http://www.aal-</u> <u>europe.eu/wp-content/uploads/2020/08/AAL-guidelines-for-ethics-final-V2.pdf</u>
- Tools for the involvement of end-users <u>http://www.aal-europe.eu/support-to-projects/end-users/</u>
- AAL Impact Assessment <u>http://www.aal-europe.eu/aal-impact-assesment-available-now/</u>

SUBMISSION

IMPORTANT!

- Submission is done via the AAL EMS platform
- Lol Letter of Intent needed for CPs not for SCPs (to be submitted along with the Part B)
- **NEW !** DoH Declaration of honor mandatory for every consortium member (to be submitted along with the Part B)
- Read carefully the Call text, Guide for Applicants and National Eligibility Criteria Documents

SUBMISSION

IMPORTANT!

- 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: <u>call@aal-Europe.eu</u> or visit our website <u>www.aal-europe.eu</u>







Thank you for your attention!

Our Website: www.aal-europe.eu

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