

SOCIAL INNOVATIONS PROMOTING ACTIVE AND HEALTHY AGEING

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innovAge

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AND HEALTHY AGEING

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SOCIAL INNOVATIONS PROMOTING ACTIVE AND HEALTHY AGEING

Agenda

- The INNOVAGE Project
- Social Innovations for Healthy Life Expectancy, (HLE)

A NEW AMBITION FOR AGEING RESEARCH

“Innovation contributes to tackling the most critical societal challenges we are facing. Europe’s expertise and resources must be mobilized in a coherent manner and synergies between the EU and the Member States must be fostered in order to ensure that innovations with a societal benefit get to the market quicker. The launch of the pilot Innovation Partnership on active and healthy ageing is an important step in that context.”

European Council, 4 Feb 2011

INNOVAGE

The mission of INNOVAGE is to concentrate the highest possible quality of scientific expertise, together with stakeholders from all relevant fields and the active participation of older people, to produce and identify major innovative approaches to better quality of life and well-being as people age.

INNOVAGE

Objectives

- To develop, implement and evaluate four potentially cost-effective social innovations focussed on well-being, quality of life and HLE
- To create a social innovation web-based platform
- To address the critical barriers to the implementation of social innovations
- To emphasis knowledge exchanges and implementation in the NMS

KEY FEATURES OF INNOVAGE

- Creation and evaluation of four specific social innovations
- New Healthy and Active Ageing Life Expectancy web portal
- Stakeholders as co-producers of the project
- Key role of older people
- Holistic approach to well-being (physical and mental)
- Sensitivity to unequal ageing and heterogeneity
- Explicit focus on NMS
- Emphasis on knowledge exchange
- High quality scientific and coordination teams

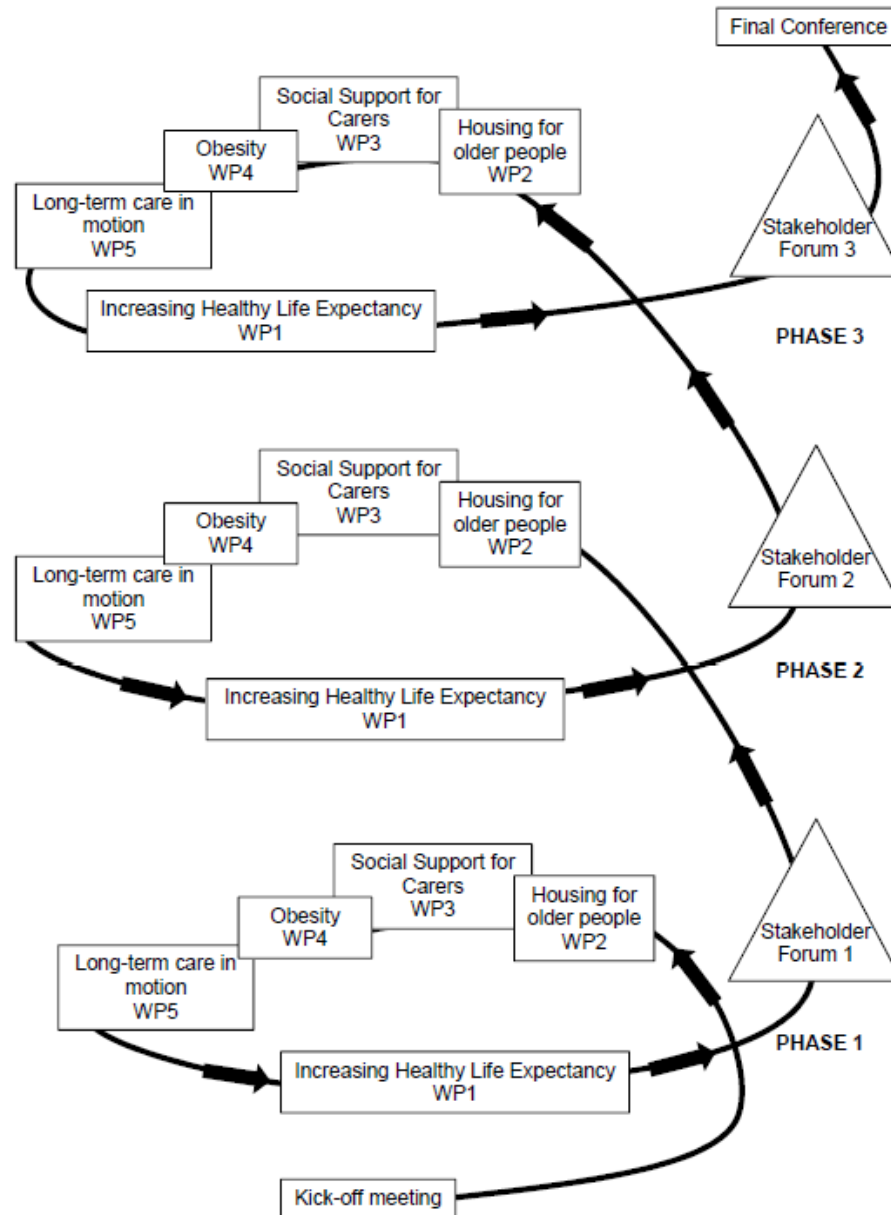
INNOVAGE

Partners

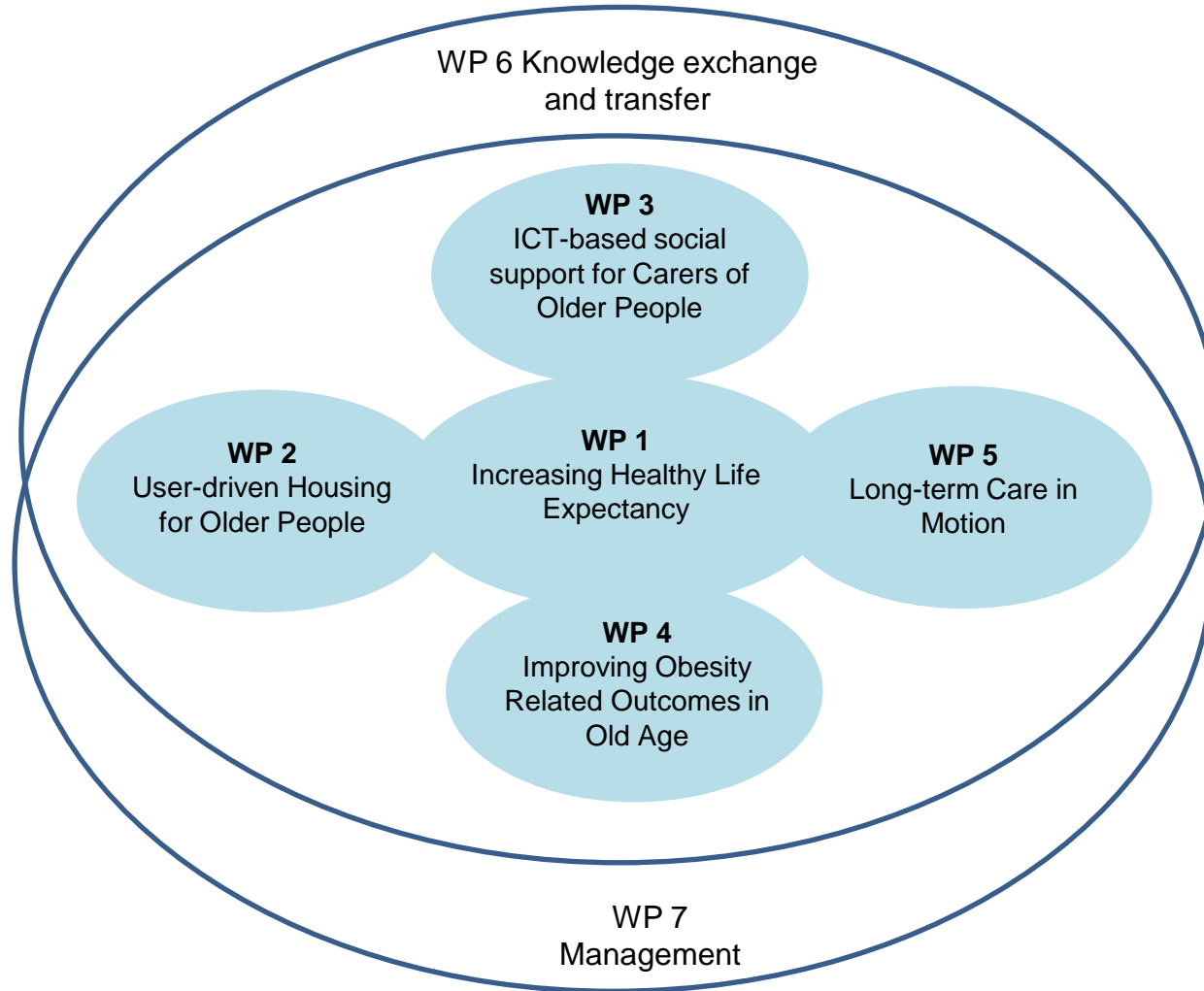
- Age Platform Europe, EU
- Eurocarers, EU
- Heidelberg University, Germany
- INRCA, Italy
- Latvian Council of Science, Latvia
- Lund University, Sweden
- Newcastle University, UK
- Sheffield Hallam University, UK
- University of Sheffield, UK
- Young Foundation, UK

Advisors to the project: Ministry of Health, Romania

PROJECT ARCHITECTURE



INNOVAGE WORK PACKAGES



EXPECTED OUTCOMES

- Four social innovations (SIs), tried and tested
- Standardised assessment criteria for SIs
- Web portal with up to 150 examples of SIs
- A new paradigm of active ageing
- New smartphone app and other interactive applications
- Improvement in the quality and comparability of the European data on the impact of SIs on HLE
- Progress on SIs in the NMS
- Good practice guidelines on overcoming barriers to SIs

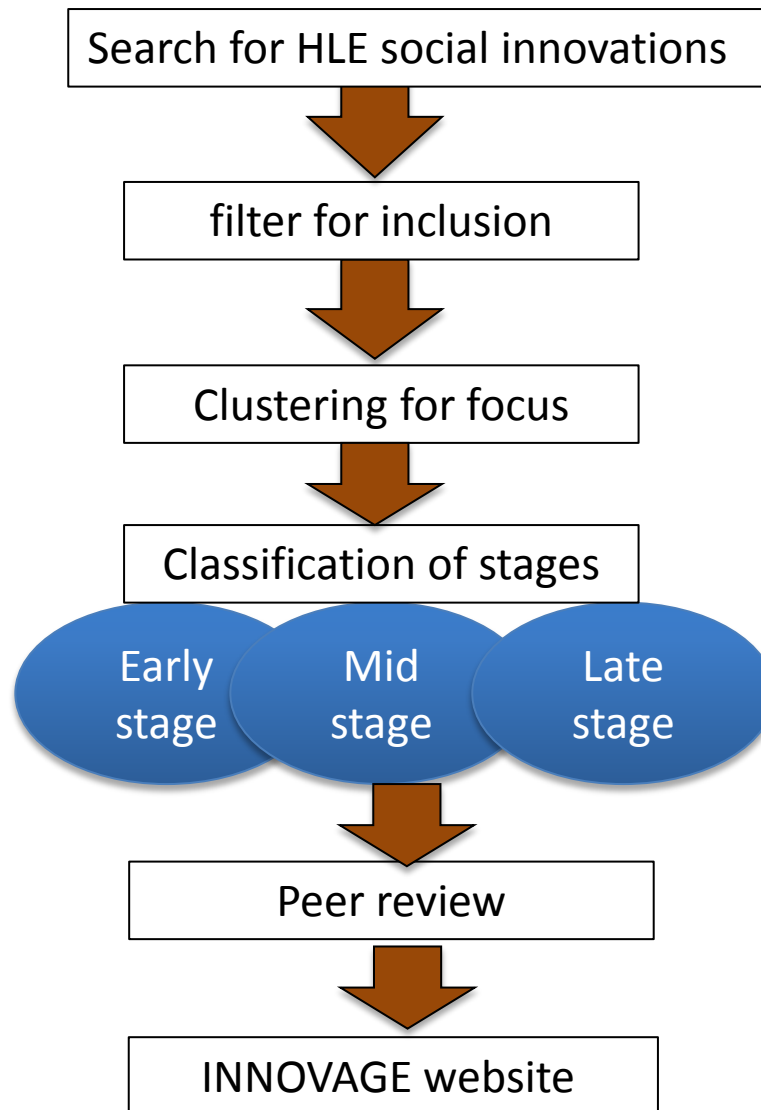
A firm foundation for the development of SIs promoting active and healthy ageing

SOCIAL INNOVATIONS FOR ACTIVE AND HEALTHY AGEING

G R I P P: GRading InnovAge Projects Process

This process is intended to sift and grade social innovations with the potential to increase healthy life expectancy (HLE) with a view to their presentation on the INNOVAGE web portal.

GRIPP STAGES



SIMPLIFYING THE INNOVATION PROCESS

Social Innovation Stages	Simplification
1. Prompts, problems	early
2. Proposals, solutions	early
3. Testing, proof of concept	middle
4. Sustaining	middle
5. adoption and diffusion	Late /maturing
6. Systemic change	Late/matured

INITIAL SURVEY

INCLUSION/EXCLUSION CRITERIA

- Relevance to increasing HLE
- Indicators of real innovation rather than standard services
- Suggestions of robust basis and potential
- Clear evidence in any of the four balanced scorecard criteria
- Stakeholder support

THE BALANCED SCORECARD

Social & Economic Impact

- Healthy life expectancy
- System costs

Sustainability

- In current location: costs , personnel
- Scalability in current location

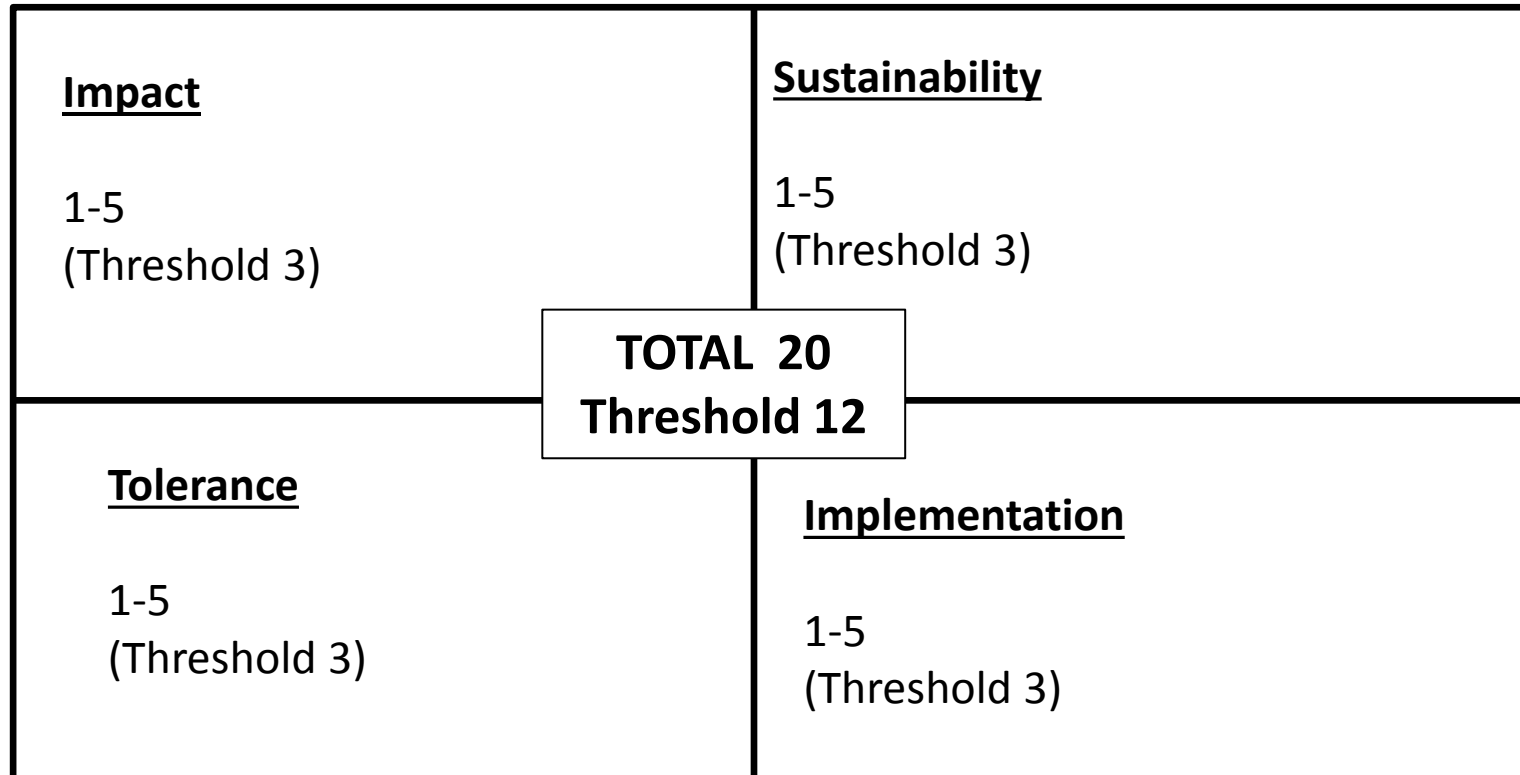
Tolerance

- Acceptability
- User-friendliness

Implementation

- Ease of implementation: skill levels, resources required
- Transferability to other locations

SCORING SYSTEM



EXAMPLES OF METRICS

Stage	Impact	Sustainability	Tolerance	Implementation
Stage 1	exclude	exclude	exclude	exclude
Stage 2	exclude	exclude	exclude	exclude
Stage 3 Prototyping and testing	Evidenced safety and effectiveness Finance for high risk Demonstrated ROI & SROI	Clear scope for growth	Effective demand Strong user testing	Good team skills Access to specialist design skills
Stage 4 Sustaining	Good business plan with clear metrics	Leadership about replacing old services	Skills in marketing Relative benefit	Access to specialist delivery skills
Stage 5 Scaling	Access to growth capital	Incentives and rewards for growth or replication	Effective demand in new local sites/settings Ease of implementation	Access to specialist scaling skills Networks
Stage 6 Systematic	Incentives and rewards for success	Leadership with political courage for change	User involvement in acceptance of new definition of problems	Access to appropriate procurement processes

PROMISING SOCIAL INNOVATIONS

Passion för livet

Passion for Life: Trained facilitators run Life Cafes for older people to talk, plan and act on their needs

- Social interaction & support for carers
- Volunteers

Sweden



Weavers: Providing peer-to-peer support for carers from 'Weavers'

- Empowerment
- Social participation & interaction
- Self-Care

Australia



Hogeweyk: Model village for older people with dementia

- Improved model of residential care
- Volunteers

Netherlands

Wellogram

Wellogram, UK : People with/at risk of long-term condition linked to 'Guide' to provide social health

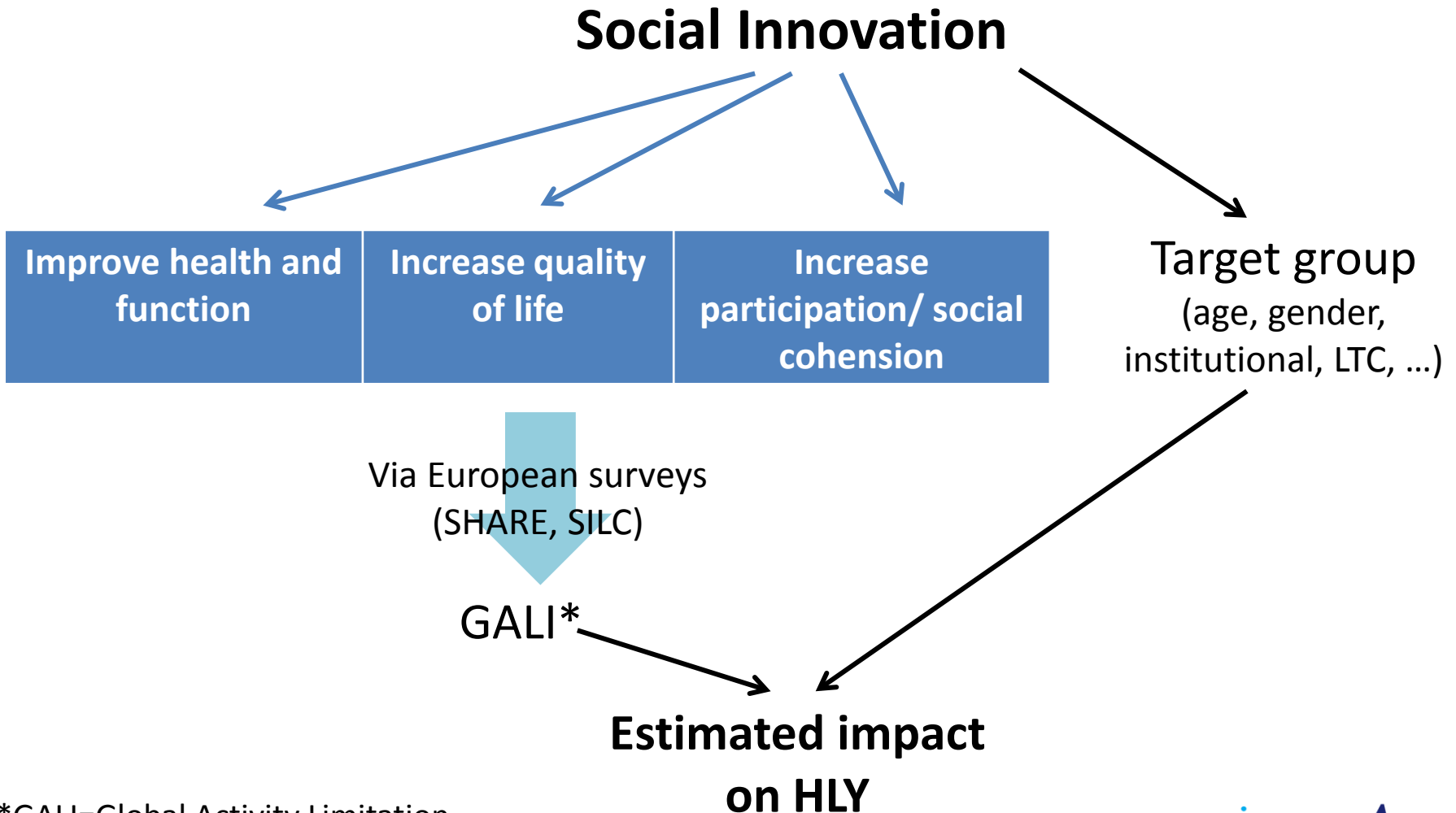
- Social support
- Health behaviour change for people with LTCs

UK

TYPOLOGY OF OUTCOMES

Improve health and function	Increase quality of life	Increase participation/ social cohesion
<p>Reduce unhealthy lifestyles (Improve poor diet, malnutrition, reduce obesity, smoking and drinking)</p>	<p>Increase happiness and well being (Increase independence, reduce stressors)</p>	<p>Increase neighbourhood support (Increase social inclusion, build community capacity and competences, improve attitudes to cognitive /physical impairment)</p>
<p>Increase healthy behaviours (Keep minds and bodies active, increase mobility, improve adherence and reduce poly-pharmacy, increase selfcare and self management, compensate for physical/sensory/cognitive loss)</p>	<p>Increase choice Help people stay at home for as long as possible</p>	<p>Value older peoples' contributions (Improve person to person communications)</p>
<p>Improve services (Reduce variations in care, develop anticipatory approaches/prevent adverse events, increase access (rurality), increase personalisation and integration of care)</p>	<p>Support informal carers and families (Enable people to share and keep their memories)</p>	<p>Provide advocacy for those who need it</p>
<p>Increase professional skills (Improve professional to person comms, improve use of skilled staff)</p>	<p>Help people die with dignity</p>	<p>Empower people to do more for themselves and others</p>

IMPACT ON HEALTHY LIFE YEARS



*GALI=Global Activity Limitation Indicator=basis for HLY

EUROPEAN SCIENCE FOUNDATION EXPLORATORY WORKSHOP



Exploratory Workshop Scheme

- Scientific Review Group for the Bio-Medical Sciences
- Scientific Review Group for Life, Earth and Environmental Sciences
- Scientific Review Group for Physical and Engineering Sciences
- Scientific Review Group for the Humanities
- Scientific Review Group for the Social Sciences

ESF Exploratory Workshop on
AGEING AND SOCIAL INNOVATION

Lund (Sweden), 23-24 September 2013

Convened by:
Alan Walker and Susanne Iwarsson

SCIENTIFIC REPORT

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www.innovage.group.shef.ac.uk