Examples of Activities within the European Innovation Partnership on Active and Healthy Ageing (2012-2015)

Creating an age friendly Europe by 2020 – focus on Alzheimer, Alzheimer Europe

This initiative where Alzheimer Europe is a partner aims to promote age-friendly environments (AFE) as one of the most effective approaches to respond to demographic ageing and increase the healthy life year indicators. They highlight that AFE must empower people with dementia to remain autonomous in their familiar environment for as long as possible and enjoy a good quality of life, promote their social inclusion and active participation in society. AFE must enable informal carers of people with dementia to remain at work for longer, lower the pressure on traditional care and assistance and boost the economy through demand for innovative solutions. The potential of ICT and social innovation in support to age- and dementia-friendly environments, and the mobilisation of local and regional actors who can pick up innovative solutions and deploy them across the EU will support age- and dementia-friendly environments and boost EU competitiveness.

Dementia Friendly Environments, Cumbria County Council, UK

The programme of work aligned to the EU strategy, and implementing the UK National Dementia Strategy and the initiative ‘Working together to Improve Life with Dementia in Cumbria,’ has introduced significant improvements across health and social care in Cumbria, encompassing local authorities and healthcare providers. They work from a common platform of understanding about dementia support to deliver evidence-based interventions designed to deliver better integrated outcomes for people living with dementia. The focus is on dementia patients and their caregivers, primarily inhabitants and staff of residential care homes and is seeking to expand to hospitals/day care centres.

Ageing Well in Wales, UK

Wales have set up a national thematic network on dementia supportive communities in 2013. This network will facilitate local, regional and national work, and provide specialist action learning support and maintain a repository of notable practice. Priorities include: working with businesses to promote dementia awareness; a national programme to recruit people who can act as dementia champions and friends to raise awareness; dementia supportive tourist and holiday destinations; dementia supportive locations – for example, a high street, local shops, councils and GP practices; innovative links with academia and the arts; using language, design and cultural media and intergenerational projects to engage old and young.
Joint Improvement Team, Learning Lessons from Dementia Supportive Environments’ Scotland, UK

There are up to 86,000 people in Scotland with dementia. Scotland’s National Dementia Strategy outlines key priorities for improving the delivery of care to individuals with dementia and their families and carers. One of the initiatives taken forward has been to develop guidance on improving the design of housing for people with dementia. They have also established three Dementia Demonstrator sites, which were involved in developing the guidance. A Partnership was developed between health and care organisations, the national professional institute and an academic institution for the development of this guidance on design of housing for people with dementia.

Architecture under demographic change (AiDW), Technische Universität Dresden, Saxony, Germany

The design of the physical environment in various settings, such as public spaces, housing facilities and hospitals needs to meet with the demand of ageing societies to allow people to stay in their homes for as long as possible. A barrier-free and dementia-friendly environment greatly influences an individual’s independence and self-sufficiency. Therefore, identifying ways to prevent nursing home admissions of people with dementia through dementia-friendly environments is the focus of the work on ‘Architecture under demographic change’.

K-CoRD, Kinsale Community Response to Dementia, Cork, Ireland

The K-CoRD initiative aims to support people with dementia to remain at home, active in their communities. The programme which started in September 2012 aims to deliver a range of individualised support and services to people with dementia, their families and carers. The objectives are to make Kinsale and its environs a dementia friendly community; to create educational opportunities for both community members and health care professionals involved in supporting people with dementia; to work with assistive technology experts, locally and nationally, to develop bespoke assistive technology solutions for people living with dementia.

Job Creation by promoting age-friendly environments, Polibenestar, Valencia, Spain

The main objective of the project is the construction of age-friendly environments through different actions improving the labour opportunities of unemployed people, training people in risk of social and labour exclusion. An action addressed to people with Alzheimer’s disease consisted of a specialised training course in Alzheimer’s disease addressed to potential formal caregivers with the aim of: keeping and reconstructing the social ties of people with Alzheimer’s disease though intergenerational activities and musical reminiscence; preventing social breakdown of people with Alzheimer’s disease and their informal caregivers; increasing the labour opportunities in the social and health care sector of people in labour exclusion risk through supplying those skills to provide appropriate care to people with Alzheimer’s disease.
REHACOP- Brain Friendly ICT’s, University of Deusto, Bilbao, Spain

The aim of this initiative is to provide people in early phases of cognitive decline with an intervention which is friendly, easy and with non-secondary effects, to cope with this deterioration. Secondly, the intervention enhances general health and functionality and prevents dependency. Thirdly, it increases the social relationship in this generation promoting wellbeing. The project is focusing on 50 people in four nursing homes, with a view to scaling up to potentially all nursing homes in Bilbao.

Smart Aging Serious Games Software Platform for pre-symptomatic and early-symptomatic assessment of cognitive impairment, Consorzio di Bioingegneria e Informatica Medica (CBIM), Italy

Smart Aging has been planned as a 3D virtual reality based Serious Game for early assessment and training of cognitive impairments, implementing scientifically validated commonly used neuropsychological tests. The navigation in a 3D environment (loft) that simulates in a reduced space the basic elements of interaction of home living, associated with the game approach results in a powerful screening tool, more friendly and motivating with respect to the traditional ‘paper and pencil’ tests. The Smart Aging Serious Game asks people to perform tasks related to daily activities, closer to real life than traditional ‘paper and pencil’ tests, and in doing so, it is able to evaluate different cognitive functions: executive functions (reasoning and planning), attention (selected and divided), memory (short and long term, perspective), orientation (visuo-spatial).

Healthy ageing with innovative functional foods/leads for degenerative diseases (INOVAFUNAGEING), Faculdade de Ciências, Universidade de Lisboa, Portugal

Development of functional foods or active ingredients delaying or preventing amyloid disorders in neurodegenerative diseases or diabetes, gives an important contribution to achieve this goal. The following objectives can be underlined in this project: i) to introduce in the market multi-target nutraceuticals to control neurodegenerative diseases (e.g. Alzheimer’s disease) and or diabetes; ii) to search for their active principles and evaluate their efficacy as potential multi-target drugs with new mechanisms of action; iii) to disseminate the scientific knowledge through e-learning platforms that focus the relevance of glycosciences to prevent functional and cognitive decline; iv) to promote the public understanding of the innovative findings through an appealing and interactive website, that also demonstrates the importance of changing food habits to a rationalised consumption of adequate foods for their health condition.

European Dementia Prevention Initiative, Academic Medical Centre, Netherlands

The European Dementia Prevention Initiative (EDPI, www.edpi.org) was launched in 2011. In EDPI expertise from the departments of neurology, geriatrics, general practice, epidemiology and public health, from several European regions is pooled to work together
towards dementia prevention. It currently covers four large, on-going, investigator-initiated randomised controlled trials. These ongoing dementia prevention studies are compared and pooled analyses can lead to more insight into prevention strategies. Improving cardiovascular risk management, the main instrument in these on-going dementia prevention studies, is expected to have an effect on the other main focus areas of the Action Group on frailty and physical functional decline within the European Innovation Partnership on Active and Healthy Ageing.

**Biomarkers in Alzheimer’s disease and Parkinson’s disease, Trinity College Dublin, EngAGE Centre for Research on Ageing - Irish Network for Biomarkers in Neurodegeneration (INBIND), Ireland**

This study is being conducted as part of a large European Commission-funded project called BIOMARKAPD involving 48 research sites worldwide with the objective of developing evidence-based guidelines for the measurement and the use of biochemical biomarkers for Alzheimer’s disease and Parkinson’s disease in clinical practice. The purpose of the study is to explore whether measuring biomarkers of neurodegeneration, including protein fragments and other constituents in spinal fluid and in blood of patients with cognitive impairment, is helpful in elucidating the underlying cause of their cognitive deficits and for those diagnosed with mild cognitive impairment in predicting who will progress to dementia.

**A European multicentre trial of Nilvadipine in Alzheimer’s disease, Trinity College Dublin, EngAGE Centre for Research on Ageing, St James’s Hospital, Ireland**

The aim of this study, NILVAD, is to investigate the effectiveness and safety of the drug nilvadipine in Alzheimer’s disease. Nilvadipine is a licensed blood pressure medication with a proven safety record in people with high blood pressure and more recently has been shown to be well tolerated and safe in older people with Alzheimer’s disease. There is preliminary evidence for clinical benefit in individuals with cognitive impairment and strong scientific evidence based on animal model studies of Alzheimer’s disease. The NILVAD project started in Jan 2012 and will run for 60 months until December 2016.

**MYLIFE, Karde As, Tellu AS, Forget-me-not AS, Sidse Bjorneby Sole Proprietorship, Housing 21, Trent Dementia Services and Development Centre, and Berlin Institute for Social Research, EU**

The primary end-users of the Mylife service are older persons with reduced cognitive abilities, and the secondary end-users are formal or informal caregivers. The service-model in the targeted areas of the Mylife project is based on the concept of software as a service, i.e. software that is freely available over the internet and is deployed to run on a smartphone with touch-screen (http://www.mylife-project.org/).
MyGuardian project will provide the following technologies: easy-to-use and rich communication between the mobile senior person and the caregivers in order to reassure both thanks to: the enrichment of communication messages with contextual data on the senior’s psychological state; remote tracking and assistance that will enable monitoring of the senior’s physiological state and behaviour in order to detect risk situations and appropriate, personalised intervention, escalating depending on the assessed criticality of the situation; and coordination between the caregivers that will improve awareness within the group of caregivers and enable the smooth distribution and delegation of care tasks. End-user organisations in three countries (Spain, France and the Netherlands) will be involved which will ensure access to approximately 30-50 seniors with mild cognitive impairments together with their voluntary caregivers and possibly also professional caregivers (e.g. their social nurses).