

AGENDA

4th Regional Multi-stakeholder meeting organised in the framework of the HOCARE Interreg Europe Programme “Delivery of Innovative solutions for Home Care by strengthening quadruple-helix cooperation in regional innovation chains”.

Date: 20th March 2018 14:00-16:30

Venue: NHSC (ÁEEK) conference room address: 1125 Budapest Diós árok 3

Programme:

- 14:00- 14:15 Registration
- 14:15- 14:30 Greetings and overview of achieved project results by István Csizmadia István (NHSC)
- 14:30- 15:30 discussion on identified GP-s in the project, with special highlight on transferable good practices in Hungary
- 15:30- 16:00 Review and evaluation of the draft Action Plan; introduction of potential scenarios for Hungary; discussion on final policy recommendations- an interactive debate
- 16:00- 16:30 summarising observations of the RMG



Hocare project is carried out under the Interreg Europe programme, financed by the European Regional Development Fund, co-funded by the EU and the Hungarian State,

List of Participants

JELLENLÉTI ÍV

HoCare INNOVATÍV OTTHONÁPOLÁSI MEGOLDÁSOK A QUADRUPLE-HELIX MODELLLEN ALAPULÓ REGIONÁLIS INNOVÁCIÓS HÁLÓZATOK MEGERŐSÍTÉSE RÉVÉN

4. Regionális Multistakeholder Csoport Ülés (Regional Multistakeholder Group Meeting)

Időpont: 2018. március 20.

Helyszín: ÁEEK konferenciaterem cím: 1125 Budapest Diós árok 3

SZERVEZET	NÉV	ALÁÍRÁS
EMMI Egészségügyi Fejlesztéspolitikai Főosztály	Pál Gabriella	
Közép-dunántúli Regionális Innovációs Ügyménsterv	Fekete György	
Debreceni Egyetem ESSITY HMS	Dr. Markovics Gyula	
ÁEEK PI	Csizmadia István	
ÁEEK PI	Weigl Ferenc	
ÁEEK PI	Dr. Mutsik Béla	
ÁEEK PI	Grayné Kárpáti Éva	
ÁEEK PI	Nagy Éva	
ÁEEK	Babarczy Balázs	
ÁEEK EFOP-2.2.1-16-	Dr. Vékony Péter	
HEIM PÁL EFOP 2.2.1	Dr. Kassai Tamás	
HEIM PÁL EFOP 2.2.1	Dr. Bognár Zsolt	
ÁEEK	Dr. Margitai Barnabás	
ÁEEK	Leleszi András	
EFOP-2.2.0-16-2016-00002 „Gyermekes ifjúságpszichológiai, addiktológia- és mentálhigiénés ellátárendszerek infrastrukturális feltételének fejlesztése”	Kócs Tamás	
	Bezzegh Péter	
EFOP-1.10.1-VEKOP-16-2016-00001 „Ápolótanulók részére pályaválasztást támogató ösztönös program”	Rauh Edit	

A HoCare projekt az Interreg Europe Programból, az Európai Regionális Fejlesztési Alap támogatásával, az Európai Unió és Magyar Állam tárcfinanszírozásával valósul meg.

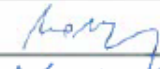


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Magyar Fejlesztési Bank	Fazekas Gábor	
Magyar Kórházszövetség	Dr. Szabó Géza	
BME- Egészségipari Tudásközpont	Hanák Péter	
Magyar Tudományos- Technológiai és Ismereti Parkok Szövetsége MATTIP	Hantos Zoltán	
NGM Gazdaságfejlesztésért és Szabályozásért Felelős Államtitkárság	Dr. Felkai Beáta Olga	
NGM Gazdaságfejlesztésért és Szabályozásért Felelős Államtitkárság	Éder Beáta	
NGM Gazdaságfejlesztési Programok Végrehajtásáért Felelős Helyettes Államtitkárság	Szilágyi Katalin	
EMMI Szociális és Gyermekvédelmi Főigazgatóság	Gulyásné dr. Kovács Erzsébet	
Pécsi Tudományegyetem, Egészségtudományi kar	Dr. Lampert Kinga	
	Dr. Szőke Henrik	
Szegedi Egyetem Telemedicina Központ	Székhelyhídi Judit	
NKFIH	Horváth Klára	
Orvostechnikai Szövetség	Tibély Krisztin	
Magyar Máltai Szeretetszolgálat	Vági Zsolt	
Mozgássérült Emberek Rehabilitációs Központja (MEREK)	Fóris Johanna	
Mozgássérült Emberek Rehabilitációs Központja (MEREK)	Berty Pál	
Magyarországi Otthonápolási és Hospice Egyesület (MOHE)	Majerné Horváth Anita	
Magyar Hospice Palliatív Egyesület	Dr. Benyó Gábor	

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SZERVEZET	NÉV	ALÁÍRÁS
EFOP-2.2.0-16-2016-00008 „Pszichiátriai és addiktológiai gondozóhálózat fejlesztése”	Dr. Vandlik Erika	
MESZK	Babonits Tamásné	
ÁEEK	Vajna Péter	
HEOSZ	Horváth Zoltán	
LIGARIA KFT	HEVŐS ZOLTÁN	
Ligaria Kft	TÖRÖK ÁRON	
-/1-	Bálint Orsolya	

The aim of the meeting was to discuss details of the draft Action Plans elaborated for the Hungarian Economic Development and Innovation Operational Programme (EDIOP).

In order to establish synergies between the Hocare and Helium Interreg projects NHSC (being project partner in both projects) invited not only HoCare, but HELIUM stakeholders as well. The very same day HoCare stakeholders attended HELIUM stakeholder meeting too, where they could receive information on the outcomes of the various staff exchange visits, recently organized in the framework of the Helium project and learnt about selected GP-s from UK, Portugal, and Belgium, as well as had the opportunity to get acquainted with the different possible scenarios of GP transfer, offered by the Action Plan prepared for the HELIUM project.

In the end of the HoCare RMG meeting stakeholders of both projects participated in a moderated debate on how a local living lab model – in case of healthcare & social care actors having a cross-border cooperation- could enforce the uptake of timely, and rapid implementation, and correct diagnostics for infectious diseases into integrated healthcare.

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Stakeholders were informed by NHSC (ÁEEK) about the results of the 3 Joint Thematic Studies delivered by HoCare project.

The findings and recommendations of the studies were developed and turned into suggestions for improvements concerning regional innovation ecosystem and selected policy instrument. These suggestions were devised in 3 Thematic Policy Transfer Reports the following topics:

1. Targeting unmet needs
2. Public driven innovation
3. Faster market uptake of innovations

A special attention was paid to the importance of key challenges identified and recommendations proposed by the Studies, such as the suggestions proposed in the Reports, in order to enable RMG members to discuss current regional situation concerning utilization of quadruple helix cooperation approach in home care innovation.

RMG members assessed and confirmed the selection of good practices (GPs) for preparing a regional action plan to improve the innovation ecosystem in home care value chain and develop efficiency of the policy instrument.

Stakeholders agreed that the 3 Thematic Reports should recommend a set of total 10 transferable GPs to be used and replicated in the regional Action Plan.

RMG members also took part in SWOT analyses and confirmed the 6 transferring scenarios proposed in the draft reports.

Stakeholders agreed in having 2 scenarios per thematic report, and finalized the following 3 policy transfer matrixes:

POLICY TRANSFER MATRIX – 1 (UNMET NEEDS):

- **Scenario 1.1 – Transferring combined elements of “InTraMed-C2C (CZ)” and “Digital inclusion and active ageing (SI)”**

Gathering and transferring innovation ideas from all helixes to satisfy unmet needs via quadruple helix infrastructure for applied RDI is one of the fields that is recommended to be further developed in Hungary. Successful scouting, creating, valorising and uptake of ideas and solutions need open innovation, workshops, pilot projects and medical innovation database. Effective use of ESIF needs focused actions that foster and assist progress in deinstitutionalization contributing to make health and social systems and insurance cover more sustainable and patient friendly.

- **Scenario 1.2 – Transferring combined elements of “Tele-Rehabilitation (CY)” and “RehabNet (PT)”**

Learnings, validated solutions and ready-to-replicate results of good practices for engaging user/citizen helix actors to public initiated and lead projects in

telemedicine (as one of the main R&I field in home care) may help to seize the opportunities provided by the implementation of system-innovating health projects in the Human Resources Development Operational Programme 2014-2020. Research initiated and lead technological projects can be assisted by experiences in user-centred design to help define real patient and care provider's needs. Robotics and automatization (as possible main RDI fields in healthcare, incl. home care) are essential to help create specific content of the service.

POLICY TRANSFER MATRIX – 2 (PUBLIC DRIVEN INNOVATION):

- **Scenario 2.1 - Transferring combined elements of “Growth of the quality of medical services in rural areas using a telemedicine informatics system (PT)” and “Codification of projects’ evaluation targeting societal challenges including Health, Demographic changes and Well-being (LT)”**

Effective use of ESIF in RDI schemes under the EDIOP (GINOP) and CCHOP (VEKOP) needs focused actions that foster and assist progress in deinstitutionalization contributing to make health and social systems and insurance cover more sustainable and patient friendly in order to utilize opportunities offered by strategical projects in the development of national e-health system and improvement of quality of medical services supported directly by Ministry of Human Capacities via Human Resources Development Operational Programme 2014-2020. Learnings, validated solutions and ready-to-replicate results of good practices in management of Operational Programme that gives direct support in evaluation procedure to projects targeting health related challenges may deliver additional value to project selection in RDI action.

- **Scenario 2.2 - Transferring combined elements of “Tele-hippocrates (CY)” and “Check Point Cardio (BG)”**

Fostering and assisting big public hospitals to initiate identifying unmet needs and lead scouting, creating, valorising and uptake of ideas and solutions require good practices of involving large cooperation of various actors in open innovation. Elements of good practices can be utilized in programmes aiming to accelerate the shift from hospital care to integrated outpatient and home care in order to foster telecare, remote care and telemedicine monitoring projects (consisting of harmonized service and technology innovation elements) initiated by a public a hospital involving other organizations.

POLICY TRANSFER MATRIX – 3 (FASTER TO MARKET):

- **Scenario 1 - EkoSMART (SLO)**

Solutions and experiences in allocating effort to detect all possible barriers and to overcome them are important success factors of effective innovation. Involvement of key stakeholder groups to identify real needs, interests, resistances and obstacles is necessary to be able to develop products and services that can be brought to market quickly. Strong collaboration among all four helixes enables innovators of home care sector to develop integrated services and products sustainable nationwide. A strong focus on intensive testing of innovated products and services adds such a value to the innovation that is acknowledged in successful bring to national or international markets.

- **Scenario 2 - Psiprof (PT)**

Development of psychiatric and addictological care network (for child, youth, adult and elderly care system) aims to increase accessibility, prevention, network development and deinstitutionalization in Hungary. National e-health system development (implemented in the same time) would provide new possibilities for innovators to deliver new, renewed or integrated solutions and products that could connect to and serve psychiatric and addictological care and the central e-health system. Learnings, validated solutions and ready-to-market or replicate results of the good practice may help satisfying special needs of patients, families and psychologists or addictologists.

In the end of the meeting NHSC (ÁEEK) informed participants about the focal points of the Regional Action Plan. RMG members had already discussed these ideas at their previous (2nd) meeting in December 2017. At the present case stakeholders were involved in the preparation of the Plan in order to help discovering and confirm potential correlations and synergies between ongoing ESIF projects innovating health system in Hungary and possible directions of improving selected policy instrument (Economic Development and Innovation Operational Programme - EDIOP/GINOP).

The RMG agreed with the general conclusions, specific comments, overall recommendations and action- or call-level proposals regarding the selected policy instrument.