



Interreg Europe HoCare PROJECT - PGI01388

“Delivery of Innovative solutions for Home Care by strengthening quadruple-helix cooperation in regional innovation chains”

ACTION PLAN

Partner project 3
Business Agency Association (BAA)
BULGARIA



March 2018



INTRODUCTION

Interreg Europe HoCare project (PGI01388, <https://www.interregeurope.eu/hocare/>) tackles the challenge of ageing population and the related opportunity for new potential innovations in home care. It's overall objective is to boost generation of innovative Home Care solutions in regional innovation chains by strengthening of cooperation of actors in regional innovation ecosystems using Quadruple-helix approach.

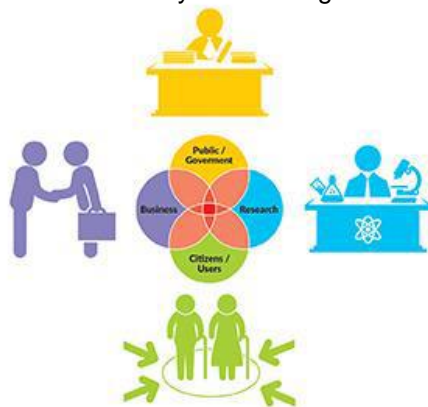









Figure 1 - Quadruple-helix cooperation model involving 4 helixes:
Business, Research, Public/Government, and Citizens/Users

Quadruple-helix is an innovation cooperation model in which users (citizens), businesses (industry), research actors (academia) and public authorities (government) cooperate in order to produce innovations. They work together to co-create the future and drive structural changes far beyond the scope of what any one organization or person could do alone. "Compared to triple-helix model, this model "encompasses also user-oriented innovation models to take full advantage of ideas' cross-fertilisation leading to experimentation and prototyping in real world setting", - European Commission, Digital Single Market, Open Innovation 2.0: <https://ec.europa.eu/digital-single-market/en/policies/open-innovation>

HoCare project has run extensive international exchange of experience process to reach various levels of improvements - both strategical level improvements (by governance improvement of relevant Operational Programmes supporting R&I – their strategic focus and management practices) as well as practical level improvements (by support of transfer of high quality projects financed through these Operational Programmes) supporting high quality projects, instruments' efficiency and partially also wider usage of available instruments in partner countries.

One Action Plan has been prepared by every partner of HoCare project. The objective of the Action Plans is to provide details on how the lessons learnt from the project's cooperation will be implemented in order to improve the Policy Instrument identified by each HoCare project partner in the Application Form. This document specifies the nature of the actions to be implemented, their time frame, the players involved, the costs and funding sources per region.

Project Partners

1	Nicosia Development Agency (ANEL)	 CY
2	Development Centre of the Heart of Slovenia	 SI
3	Business Agency Association	 BG
4	National Institute for Research and Development in Informatics	 RO
5	Lithuanian Innovation Centre	 LT
6	National Healthcare Service Center	 HU
7	IDERAM Business Development Institute of the Autonomous Region of Madeira	 PT
8	DEX Innovation Centre	 CZ

Part I – General information

Project: PGI01388 - HoCare: Delivery of Innovative solutions for Home Care by strengthening quadruple-helix cooperation in regional innovation chains

Partner organisation: Business Agency Association – PP3

Other partner organisations involved (if relevant): N/A

Country: BULGARIA

NUTS2 region: СЕВЕРОИЗТОЧЕН (SEVEROIZTOCHEN)

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Part II – Policy context

The Action Plan aims to impact:

- Investment for Growth and Jobs programme
- European Territorial Cooperation programme
- Other regional development policy instrument

Name of the policy instrument addressed: **Operational programme Innovation and competitiveness 2014-2020 (Оперативна програма “Иновации и конкурентоспособност” 2014-2020)**

Part III – Details of the actions envisaged

ACTION 1

Bonification of projects´ evaluation targeting societal challenges under Priority Axis 1 of OPIK 2014 - 2020

1. The background:

The Action 1 aims at boosting the development of quadruple-helix initiated common innovative projects in home care/long term care within the planned procedure “Stimulating the introduction of innovation in enterprises” (Acquisition of fixed assets, acquisition of intangible assets, consultancy and support services in support of innovation - 55 MLN EURO) and “Development of innovation clusters” (Support for the creation and development of innovation clusters - 15,3 MLN EURO) under the Priority Axis 1: “Technological development and Innovation”, planned for 2018.

In Bulgaria the quadruple-helix approach is a concept that has been just recently introduced. As a next level of enlarging the more popular concept of the triple-helix concept, it is now being spread mostly by innovation projects like HOCARE project. Most of the actors from the citizens’ / users’ helix are not clearly aware of this method of cooperation, however, when dealing or discussing matters in regard to R&I production or cooperation, they seek cooperation with actors from all other helices for different reasons:

- in terms of funding; therefore, they mostly contact the public or the business sector,
- in relation to the need for specialized know-how or knowledge within specific area; they mostly seek cooperation with academia or research actors.

There are almost no cases in which they put forward a plan or cooperation with all helices at the same time or for the same objective.

Business Agency Association partnered with 7 other European organizations in the Interreg Europe 2014-2020 HoCare project to boost delivery of homecare innovative solutions. HoCare aims at optimising Structural Funds investment to strengthen regional innovation system in the field of home care services.

The engagement of the local stakeholders through the regional multi-stakeholders group (RMSG) series of meetings organized in Bulgaria and the intensive dialogue with them contributed the drawing of the local situation in R&D cooperation in home care, as well as it produced the following suggestions with the objective to improve the selected Policy Instrument and more specifically the planned procedures to be open further under Priority Axe 1:

- a) To establishing additional methods for evaluation that could foster the facilitation of the quadruple helix method of cooperation (e.g. adding specific evaluation criteria for adding extra marks on projects that are being promoted through the quadruple helix approach for dealing with societal challenges and/or home care services)
- b) To enlarge the lists of eligible activities, expenditures and evaluation criteria under the procedures of Priority Axe 1 with a focus on home care specific and quadruple helix specific projects

- c) To improve the conditions for initiating new projects for implementing innovations in the field of home applying Quadruple-Helix approach

The Actions will influence positively the tackled policy within all of the HoCare project's sub-sectors - "addressing unmet needs", "public driven innovation" and "faster delivery of innovations processes" in the field of home care.

The selected policy instrument, as one of the funding instruments relevant to the further improvement of home care and the more intensive penetration of innovation in home care, is closely linked with and is dependable on the RIS3 thematic areas, their pre-formulated priority directions and a list of economic sectors and activities, pre-selected in the "National Strategy for the Promotion of Small and Medium Enterprises" of Bulgaria.

The action will offer, based on Portugal example taken from the interregional learning process through Hocare project – "**Bonification of projects' evaluation targeting societal challenges**", specific solutions related to improving the policy instrument that are applicable without contradicting the pre-formulated restrictions (that are not subject to change). It proposes an (already tested) approach that will lead to the generation of a mix of contributions for improvement, related to the evaluation criteria for the selected priority and for the other priority. The GP has been applied at Programme level in Portugal which ensures a strong recommendation for the Bulgarian Managing Authority.

The Action 1 will help the selected policy instrument managing authority to elaborate specific details to be added to the planned actions for ensuring that the interventions will be aligned with some of the best practices in the field of Home Care innovations across HoCare regions.

The GP answers the need for adjustments of the planned interventions with the stakeholders' necessities and requirements, related to the intensification of the public interest driven innovation process and the support of innovative solutions in the home care sector in Bulgaria. The Portuguese good practice fulfils the need formulated by the managing authority during consultations and workshops to support the programme improvement through the possible inclusion of new specific evaluation criteria (incl. bonus points) as part of the technical evaluation process in grant schemes supporting both directly and indirectly home care projects – for example the ones that measure the non-economic impact that include specific definitions.

It explains how to plan and measure the projects' contribution to societal challenges and to add and adapt a scoring to the existent evaluation scheme since the societal challenges are directly related to the improvement of home care services economic sectors.

The following SWOT analysis was produced by the RMSG during its meetings concerning the proposed Action 1:

Strengths:

- An already implemented and tested improvement of a policy instrument at strategic level
- Similar orientation of the policy instrument of the country of origin
- Involvement of different stakeholders outside the managing authority for ensuring representativeness

Weaknesses:

- Different economic situation in both countries

Opportunities:

- The GP could enhance the process of boosting the public interest driven innovations towards innovative

solutions in home care sector as project initiators will seek for adding value to their projects related to societal challenges (directly linked with home care)

- The scheme for adding/measuring specific bonuses related to societal challenges may be applied throughout the whole policy instrument not only for the selected priority

Threats:

- The bonus system might be not approved as too complicated for objective and independent measuring

1. Action

I. Implementation Phase 1 – Evaluation criteria suggestion to OPIK 2014-2020 MA

1. 1 review of the interlinkages and cross-cutting issues between OPIK 2014-2020 and the seven priority challenges in research and innovation that can have a real impact for the benefit of citizens – the Societal challenges, as specified in the relevant EU documents and based on Portuguese GP approach.
2. 1 online survey with clusters' managers regarding the societal challenges bonification approach
3. 1 round of interviews with clusters' managers regarding the societal challenges bonification approach
4. 1 workshop with home-care stakeholders to test the bonification list suggestion for OP managing authority
5. 1 bonification list suggestion for OP managing authority submitted

II. Implementation Phase 2 – increase of projects related to home care services

6. Dissemination Activities
7. Monitoring of the impact of the realised action over the selected policy instrument

2. Players involved

1. Business agency association – responsible for implementing the selected action
2. ICT cluster
3. Technical University of Varna – the Applied Health Centre
4. Chamber of commerce – Varna

3. Timeframe:

- The decision for approval of the additional criteria related to societal challenges by the Monitoring Committee is expected not later than the end of 2018.
- The procedures affected by the action will last at least two years, from April of 2018 until March 2020 (which is the same period for the HoCare project's 2nd Phase implementation entitled, "the Monitoring Phase"). The project is divided into Working Packages as follows:

P	Activity	Duration	Indicative Time-plan
	Project Management	24 months	April 2018 - March 2020
	Implementation Phase 1 – Evaluation criteria suggestion	9 months (from 1st to 6th month)	April 2018 - December 2019
	Implementation Phase 2 – increase of projects related to home care services	15 months (from 7th to 24th month)	October 2019 - March 2020
	Dissemination Activities	24 months	April 2018 - March 2020

4. Costs:

The budget is allocated to the above mentioned WPs as follows:

P	Activity	Budget
	Project Management	€1.000
	Implementation Phase 1	€1.000
	Implementation Phase 2	€0
	Dissemination Activities	1.000
	TOTAL	€3.000

5. Funding sources:

The project will be financed by BAA and partners' own funding.

ACTION 2

Supporting joint technological innovation of Innovation Clusters under Priority Axis 1 of OPIK 2014 - 2020

1. The background

The Action 2 aims at boosting the development of quadruple-helix initiated common innovative projects in home care/long term care within the planned procedure “Stimulating the introduction of innovation in enterprises” (Acquisition of fixed assets, acquisition of intangible assets, consultancy and support services in support of innovation - 55 MLN EURO) and “Development of innovation clusters” (Support for the creation and development of innovation clusters - 15,3 MLN EURO) under the Priority Axis 1: “Technological development and Innovation”, planned for 2018.

The Hungarian practice “**Supporting joint technological innovation of Innovation Clusters**” is directly contributing to the identified options to improve the tackled policy instrument – OPIC 2014-2020 Priority Axe 1 – offering a full package of specific practices for supporting innovations in homecare to help programming the next intervention schemes – the innovation clusters’ support procedure.

The GP offers specific knowledge related to a whole call for proposals supporting joint technological innovation of Accredited Innovation Clusters (AIC). The tackled policy instrument – OPIC 2014-2020 – has planned a similar procedure to be open under the selected priority and thus the GP might be used as a tested scheme with ready solutions for evaluation, selection and implementation. It will help elaborating specific details to be added to the planned actions for ensuring the interventions will be aligned with some of the best practices in the field of Home Care innovations across HoCare regions. The GP is in line with many issues and outputs that have arisen during the consultations with the stakeholders.

The GP may be further analysed to help foster R+D+I cooperation and strengthen technology transfer among quadruple-helix stakeholders, using the opportunity the cluster structure offers. The members could not only be SME’s and other enterprises and research entities (the primary beneficiaries of the tackled policy instrument) but also NGOs as cluster members. NGOs are not eligible beneficiaries under most procedures within OPIC 2014-2020 but they could act as indirect beneficiaries taking part in innovation clusters. This is an important issue for improving the home care services through OPIC 2014-2020 as in Bulgaria most home care services deliverers are registered as NGOs.

The GP is very useful for transfer as the project selection is organized in a different way than usually – it was based on requiring a business case built on real and unmet needs and key challenges and problems that the common R+D+I activities tackled.

The GP is fully transferrable as it has been planned for enterprises operating in the area of science and technology or on bio- and medical markets which is in line with the strategic documents regulation the tackled policy instrument in Bulgaria.

The following SWOT analysis was produced by the RMSG during its meetings concerning the proposed actions:

Strengths

- A ready and tested procedure with defined selection criteria and administrative requirements that have been rated as reasonable and affordable based on the high demand from applicants

- A clear scope on innovation areas that coincide with Bulgarian strategic documents regulating the tackled policy instrument
- A tested and approved approach for pre-selection of applicants through applying an accreditation system

Weaknesses

- The accreditation is very useful for regulating the market but is very time-consuming and could limit the access for new entries
- The care services providers were eligible applicants if they were AIC member enterprises which gives no floor for NGOs.

Opportunities

- The GP might be adjusted to specific local conditions and applied
- The GP will boost the cooperation between different helices representatives if they have the opportunity to get their ideas financed only if they apply together as an accredited cluster
- The GP elements – cluster accreditation system, eligible activities, specific requirements – could be applied in other OPIC funding procedures.
- The system of Accredited Innovation Clusters (AIC) - developed and subsidized by central Hungarian government – might be borrowed and support the application of the “innovation ecosystem buy-in” approach, which fosters identifying key stakeholders and paves the way to satisfy their unmet needs. Offering grants to AICs can be an efficient (public) driver of innovation and be applied in other OPIC procedures

Threats

- A very short timeframe for clusters to be enlarged with more members and to get accredited.
- A complex and too rigorous and exacting system for accreditation will limit the access to public funds for newly created innovation clusters
- There are many associations of providers of home care services that are not included in innovative clusters neither cooperate actively with innovative clusters
- Evaluation and selection criteria included in the GP might not be fully adequate to Bulgarian legislation

2. Action

- I. *Implementation Phase 1 – Eligible activities, expenditures and evaluation criteria suggestion*
 1. 1 review of the interlinkages and cross-cutting issues between OPIK 2014-2020 and the Hungarian OP in research and innovation aspects that can have a real impact for the benefit of the home-care sector.
 2. 1 online survey with clusters’ managers regarding the Hungarian procedure approach
 3. 1 round of interviews with clusters’ managers regarding the Hungarian procedure approach
 4. 1 workshop with home-care stakeholders to test the suggestion for OP managing authority
 5. 1 bonification list suggestion for OP managing authority submitted
- II. *Implementation Phase 2 – Increase of projects related to home care services*
 6. Monitoring of the impact of the realised action 5 over the selected policy instrument

3. Players involved

1. Business agency association
2. ICT clusters

4. Timeframe

The decision for approval of the additional details related to improvement of the affected procedures under the selected policy instrument by the Monitoring Committee is expected not later than the end of 2018.

The procedures affected by the action will last at least two years, from April of 2018 until March 2020 (which is the same period for the HoCare project's 2nd Phase implementation entitled, "the Monitoring Phase"). The project is divided into Working Packages as follows:

P	Activity	Duration	Indicative Time-plan
	Project Management	24 months	April 2018 - March 2020
	Implementation Phase 1 – Eligible activities, expenditures and evaluation criteria suggestion	9 months (from 1st to 6th month)	April 2018 - December 2019
	Implementation Phase 2 – Increase of projects related to home care services	15 months (from 7th to 24th month)	October 2019 - March 2020
	Dissemination Activities	24 months	April 2018 - March 2020

5. Costs

P	Activity	Budget
	Project Management	€1.000
	Implementation Phase 1	€1.000
	Implementation Phase 2	€0
	Dissemination Activities	1.000
	TOTAL	€3.000

6. Funding sources:

The project will be financed by BAA and partners' own funding.

ACTION 3

Improving the conditions for boosting common innovative projects in home care/long term care

within the procedures under Priority Axis 1 of OPIK 2014 - 2020

1. The background

The Action 3 aims at boosting the development of quadruple-helix initiated common innovative projects in home care/long term care within the planned procedure “Stimulating the introduction of innovation in enterprises” (Acquisition of fixed assets, acquisition of intangible assets, consultancy and support services in support of innovation - 55 MLN EURO) and “Development of innovation clusters” (Support for the creation and development of innovation clusters - 15,3 MLN EURO) under the Priority Axis 1: “Technological development and Innovation”, planned for 2018.

Bulgaria is the other „modest innovator“ in EU from this category of only two countries, ranking second to the last in the annual comparative analysis of innovations in EU for 2016. Bulgarian innovative projects are mainly in the field of marketing and organisational development and there are almost none in home care. Another problem is the lack of a structured dialogue and cooperation between the formal and informal providers and innovative businesses and research actors – a problem that finds a working solution in the implementation of HOCARE project. Home care is not supported directly in any of these programmes. However, many of the aspects of the activities within the home care sector lay within the scope of the 3 (out of 4) RIS3 thematic areas - Informatics and ICT, Mechatronics and Clean Technologies, Health life and Bio-technology industries and this gives the opportunity to finance also specific home care solutions fitting into the right category. There is a need to set up projects specifically in the home care segment, using cooperation within the 4 helices - together with informal care providers, their associations and hospitals.

The policy instrument selected for improvement has very few procedures that could be affected – the one is oriented towards the support of innovations in the enterprises (including hospitals) and the second – towards the support of innovation clusters. Both operations will benefit from the activities planned in relation to the transfer of a selected good practice – the Czech” **IntraMed C2C**”.

The IntraMed C2C project answers for a better alignment with the unmet needs of stakeholders and especially the ones related to innovations in the home care sector that could be implemented through the involvement of the quadruple helix partnership. The ideas taken from the GP will be used for suggesting activities at the programming stage of the procedures under the OPIC Priority 1, selected for improvement, oriented towards the innovation clusters, but also could be used as a guide and model for activities initiated and implemented by stakeholders for a better cooperation and cross-fertilization for boosting innovations in home care for the second procedure. Its core logic and activities will be used to enhance the cooperation among formal healthcare providers (clinics) identifying various medical needs and SMEs where these needs could be transferred to in order to create new innovative solutions together with the home care providers and the users.

The Action includes mainly activities aimed at generating new solutions in the field of home care through public driven initiatives.

2. Action

1. Implementation Phase 1 – Eligible activities, expenditures and evaluation criteria suggestion

1. An analysis of key players from all 4 helices in Varna region, relevant for the action will be made – as an example for the whole country
2. An evaluation of local clinics and social care service deliverers concerning their potential and motivation for inventions and innovations will be made (based on an assessment tool)
3. 1 Regional innovation workshop for setting up the **regional home-care innovation hub** with (A) healthcare providers, B) SMEs, C) R&D, D) municipalities and healthcare insurance companies E) Home care providers, informal caregivers, NGO's will be held. A Roadmap will be approved for a platform, membership, action plan.

4. 1 hackathon will be organised for pilot generation of new products, processes and services by cooperation of clinics, home care providers and SMEs
5. 1 example co-creation workshop will be held for demonstrating the process of matching the needs with clinical innovations with SMEs and boosting PPI as a driver for innovation in home care
6. 1 workshop with OPIK programming experts together with existing innovation clusters for presenting the practice and the Deployment strategy of the Innovation transfer from clinics to companies (an output from IntraMed C2C) as a model to be transferred in the programming/implementation of the relevant OPIK procedure

II. Implementation Phase 2 – Increase of projects related to home care services

7. Monitoring of the impact of the realised action 1 over the selected policy instrument

The results of the actions implemented will serve to prepare an additional list with details for the programming documents of the procedures of OPIK 2014-2020 but also will boost the efforts of stakeholders towards generating new solutions for home care through public driven initiatives and bringing innovative home care solutions quicker to the market by using quadruple-helix approach. They will also help focus the applicants for the selected funding schemes at the home care services sector.

3. Players involved

1. Business agency association
2. Technical University of Varna – the Applied Health Centre
3. Newmark Ltd and Chamber of commerce – Varna
4. Medical University of Varna
5. ICT clusters

4. Timeframe

The decision for approval of the additional details related to improvement of the affected procedures under the selected policy instrument by the Monitoring Committee is expected not later until end of 2018.

The procedures affected by the action will last at least two years, from April of 2018 until March 2020 (which is the same period for the HoCare project's 2nd Phase implementation entitled, "the Monitoring Phase"). The project is divided into Working Packages as follows:

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	Implementation Phase 2 – Increase of projects related to home care services	15 months (from 7th to 24th month)	October 2019 - March 2020
	Dissemination Activities	24 months	April 2018 - March 2020

5. Costs

P	Activity	Budget
	Project Management	€1.000
	Implementation Phase 1	€1.000
	Implementation Phase 2	€0
	Dissemination Activities	1.000
	TOTAL	€3.000

6. Funding sources

The project will be financed by BAA and partners' own funding.

Date: _____

Signature: _____

Stamp of the organisation _____