French activities in ICT for e-health and autonomy

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Outline of the presentation

1. Why ehealth and home care are important for the DGCIS?
2. What are the activities of the DGCIS do in this field?
3. What will be the National Reference Center for healthcare and autonomy at home?
4. Other actions, example of one of the FUI’s projects: SIGAAL
1. The interest of the theme for DGCIS: Why developing ICT based solutions for healthcare and autonomy?
About the DGCIS

• The DGCIS = General Directorate for Competitiveness, Industry and Services

• The DGCIS aims at developing the competitiveness of industries and businesses. It is a directorate within the Ministry for the Economy, Industry and Employment.
Healthcare systems face major challenges: 

- rising demand for health and social services, due to an ageing population and higher 
- the increasing expectations of citizens who want the best care available,
Why using ICT solutions?

• To maintain people longer at home, in their preferred environment by increasing their autonomy, self-confidence and mobility,
• to support maintaining health and functional capability of the elderly individuals,
• to promote a better and healthier lifestyle for individuals at risk,
• to promote personal healthcare
• to organize healthcare at home, particularly for chronic diseases
• to enhance the security, to prevent social isolation and to support maintaining the multifunctional network around the individual,
France's strengths in the field

- A growing awareness of the potential technologies for autonomy and e-health
- Development of many regional initiatives
- Research and industry calls for proposals in the ICT for healthcare and autonomy have structured collaborations between laboratories and companies
- The big potential of innovative SMEs
- Interests of large groups of services (banking and insurance) as technology integrator
- Involvement of large industrial groups on these topics
French areas where to act

- Increase experiments visibility
- To solve problems in economic model construction
- Clarifying legal responsibilities
- Strengthening interdisciplinary research and education
- Increase technology transfers
- Promote collaborative projects for innovative products, systems or services addressing identified wishes and needs of the end-users
- French industry must increase his presence in Europeans projects
2. The DGCIS plans
The DGCIS action plan

- The Single Inter-ministerial Fund (FUI), is the one-stop funding counter set up by the government, and is reserved for projects approved by the Competitiveness Centers (poles de compétitivité). Some projects regarding e-autonomy and e-healthcare have been selected in 2008 and 2009.

- 1st Call for proposals for creating a national reference center for « solutions for healthcare and autonomy at home » (12-2008)
- 2nd Call for Proposals with the topic “ICT based solutions for healthcare at home”. (12-2009)
- Conference : ICT Industry for healthcare and autonomy (11-2009)
- 3rd Call for Proposals (2010)
3. The National Reference Center for home healthcare and autonomy
Context

• Societal context
  • Growing demand from patients: on 10 French, 9 are potentially interested in a home help
  • Ability to support new diseases at home
  • Fewer doctors
  • Increased chronic diseases
  • Aging population: 15.9 millions of French citizens (25.5% of the population) will be aged 65 and over in 2010, 29 millions (41.8%) in 2050

• Economical background
  • Government’s effort to reduce health care costs, including hospital
  • Home Health market is estimated at over 4 billion euros, in which 2 to 3 billion are for technical and medical services
  • 40,000 employment in 2006 and an estimated growth of 20 to 30% within 5 years
### Objectives – Quality of life

<table>
<thead>
<tr>
<th>Quality of life</th>
<th>Birth</th>
<th>Childhood</th>
<th>Adolescence</th>
<th>Adult</th>
<th>Transition Pre aging</th>
<th>Aging</th>
<th>Death</th>
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<tbody>
<tr>
<td><strong>Age</strong></td>
<td>0</td>
<td>20</td>
<td>60</td>
<td>75</td>
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<td><strong>Endogenous</strong></td>
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<td>Respiration diseases</td>
<td>Allergy</td>
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<td><strong>Exogenous</strong></td>
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<td>Housing Environment</td>
<td>Diabetes</td>
<td>Cardiovascular diseases</td>
<td>Stress</td>
<td>Lifestyle</td>
<td>Obsolescence Adaptation</td>
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<td><strong>Prédisposing Triggering</strong></td>
<td>Disability – Life occurrence</td>
<td>Loneliness</td>
<td>Poorness</td>
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**Pre-disposing Triggering**

**Disability – Life occurrence**
Objectives – Structure

- Create an autonomous and independent structure founded by all partners identified in the bid
- Open this structure to other key partners at national and international level with which points of convergence have emerged
- Develop a coherent project, vector of industry and home health autonomy’s economic development and proponent of quality of life’s improvement
- Servicing and assume general interest missions
Implementation

Value creation in 3 steps ⇒ First step: Animate & Structuring

- **2010-2012: Giving power to the network**
  
  Demand and supply weak, undefined and unstructured

  Center’s target: structure of offer and demand at a national level to ensure health at home and autonomy’s development

  - **Center’s missions**
    - Strategic management
    - National skills development
    - Collaborative projects management
    - Collective action
    - Feedback management
    - Relationship with authorities
    - International action
Implementation

Value creation in 3 steps ⇒ 2nd step: Consolidate and Enhance the economic development model

- **2012-2014: Standardize and promote good practices**
  Capitalization on structuring efforts made and actions to further develop and promote all facets of the Health at Home and Autonomy

- **Center’s missions**
  - Develop Standards
    - In terms of supply and demand
  - Dissemination of good practices
    - Economic Model
    - Technology
    - Uses
  - Collaboration with key players:
    - Ministries
    - Standardization
    - Learned Societies
  - Actions at international level
  - Relationship with Guardianship

![Diagram showing the implementation process with timelines from 2010 to 2014, indicating offer's status and demand status with reference center highlighted.](image-url)
Value creation in 3 steps ➔ 3rd step: Ensuring Quality and Performance of Solutions

• From 2014: Assessing and Labeling
Supply and demand significant and organized, mature market
Target Center: being a regulatory agency

• Center’s missions
  • Promoting a label
  • Develop related services
  • Accompany Export Development
Missions & service

1. Coordinate competitive intelligence activities
2. Develop joint initiatives and skills transfer
3. Standardize and participate in the standardization
4. Disseminate good practice
5. Create and develop benchmarks for evaluating
6. Manage resources and services
7. Labelling development
8. Organize training’s offer
9. Implement marketing plan and communicate
10. Deploy technology showcases and demonstration areas

Collective actions

Competitive intelligence

Cell: Innovation

Tips Expertises

Cell: Integration

Means & Services Tests & Trials

National Reference Center

Collaboratives projects

Completing general interest’s missions in close collaboration with partner and develop commercial activities in valuing network’s expertise

Offers

CIU Santé

Gérontech Alpes-Méd

e-santé

Autonom’ Lab

Users

Formation

Cell: Evaluation

Cell: Promotion
Develop both innovative and collaborative projects based on technological resources available among various partners.
Forces involved (1/2)

Ongoing contacts

Contacts to confirm
Global structure

- **Head Office (Nice)**
  - Coordination, communication, management

- **Experts’ Centers** (Nice, Grenoble – Toulouse – Limoges)
  - Specialized support on key areas (gerontechnology, e-health, home automation)
  - Development and dissemination of solutions for home health and autonomy
  - Associated technical platform

- **Relay centers (Paris, Besançon…)**
  - Local entertainment skills (home automation, sensors ...)
4. One of the FUI’s projects: SIGAAL
SIGAAL: Innovation for the Elderly

• The goal of the SIGAAL project is to alleviate the loneliness of elderly people by enabling them to continue to live at home, be involved in local social activities, and provide advance warning of certain frailties and diseases. SIGAAL is integrated into the home and on the network, and provides a wide range of services. The 36-month project is being managed by Icade, a real estate market leader in France.

• Icade, Telecom Bretagne, Iwedia, CSTB, CHU de Nice, Nexcom, Dixid, GTS Teleassistance, Agevillage, ARS

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Thank you for your attention