



European Innovation  
Partnership on Active  
and Healthy Ageing

## Call for EIP on AHA Twinning 2020

NOTE: this form is meant to support organisations in writing their application. The submission of the twinning applications should take place through the [online form](#).

### Joint request for twinning scheme application form

#### Adopter

Enter the details for the organisation adopting the innovative practice (adopter organisation):

Contact person	
Email	
Address	
Organisation name	
2019 Reference Site name	

#### Originator

Enter the details for the organisation transferring the innovative practice (originator organisation):

Contact person	
Email	
Address	
Organisation name	
2019 Reference Site name	
Commitment(s) name (if any)	

## Innovative practice

Describe the digitally-enabled innovative practice to be transferred.

A maximum of 1,000 characters is allowed per field

Practice description	
<a href="#">Link to the EIP on AHA Repository of innovative practices</a>	

Please specify the type of ICT enabled innovative solution for AHA.

- Regional/national EHR systems and summaries
- Care provider EHR systems integration (joined-up/shared records)
- Regional ePrescription system
- Integrated medicines management
- ICT tools supporting adherence to care plans
- Technology for falls prevention
- ICT-supported integration of health and social care services
- Homecare, tele monitoring and mobile health systems
- Multi-disciplinary team support, workflow, care planning and co-ordination
- Health and care needs assessment toolkit
- Tele-mentoring and virtual consultations
- Telecare service / call centre
- Online health portals
- Age-friendly buildings
- Risk stratification and population health management

Which EIP on AHA Action Group does the innovative practice belong to?

- A1. Prescription and adherence action at regional level
- A2. Personalised health management, starting with a Falls Prevention Initiative
- A3. Action for prevention of functional decline and frailty
- B3. Replicating and tutoring integrated care for chronic diseases, including remote monitoring at regional level
- C2. Development of interoperable independent living solutions, including guidelines for business models
- D4. Age-friendly cities, buildings and environments

## Joint agreement

Outline the joint agreement to initiating implementation of the innovative practice in 2020.

*A maximum of 1,000 characters is allowed per field.*

<b>Adopter:</b> estimated budget for investment in the procurement/implementation of innovative solutions 2018-2020	
<b>Adopter:</b> describe the problem you aim to address and/or the identified need that your planned investments in new solutions should meet	
<b>Adopter:</b> timeframe for procurement / implementation during 2020	

## Twinning framework

Outline the framework of the twinning to take place.

*A maximum of 1,000 characters is allowed per field.*

Objectives of the twinning	<i>Include up to 5 bullet points briefly summarising the objectives, be clear and short.</i>
Action plan description	<i>Describe the different key tasks to carry out, who will be the responsible and timing for each task</i>
How will the viability of the twinning be ensured?	<i>Describe the actions to be carried out to ensure the viability of the twinning between the two organisations. E.g. online meetings; prior needs analysis; detailed definitions of knowledge exchange process etc.</i>
Expected outcome of the twinning activities	<i>Summarise the main outcome/s of the twinning (a plan, a document, a buying process, a service improvement) be concrete and only refer to the scope of the activity carried out during the twinning.</i>
Expected impact of the twinning in terms of knowledge and know-how transferred	<i>Put some examples of concrete impact regarding information and knowledge generated and transferred during the twinning</i>
Value of this involvement	

How will the sustainability of the twinning be ensured?	<i>Describe the actions to be carried out to ensure the sustainability of the twinning between the two organisations. E.g. follow-up meetings; participation at conferences; collaborative projects etc.</i>
The twinning will involve/not involve an SME or a start-up at a national / regional level which already developed innovative digitally-driven health and care solutions (product or service) and have the ambitions to scale-up them in a cross-border context. If yes, please provide details of the organisation and explain the added value of this involvement	

Please confirm the following

	Adopter	Originator
Is the adopter or originator benefiting from the EU Structural Funds in the field of active and healthy ageing?	<input type="checkbox"/>	<input type="checkbox"/>
Is the adopter or originator involved in research and innovation projects or policy initiatives with strong connection to EIP on AHA objectives?	<input type="checkbox"/>	<input type="checkbox"/>
Is the adopter or originator willing to document progress and report twinning outcomes to the WE4AHA project?	<input type="checkbox"/>	<input type="checkbox"/>
Is the adopter financially committed to procuring or implementing the innovative practice until 2020?	<input type="checkbox"/>	<input type="checkbox"/>

## Submission information

Contact person

Email

Contact Person	
Email	

- I agree with Privacy Policy that is detailed on the EIP on AHA portal [https://ec.europa.eu/eip/ageing/privacy-policy\\_en](https://ec.europa.eu/eip/ageing/privacy-policy_en)
- I confirm that the content of this joint application has been agreed between the adopter and the originator applicants. I further provide my contact details (name, email) in case of any questions relating to the application.

For any questions related to the twinning support scheme 2020, please contact: [we4aha@funka.com](mailto:we4aha@funka.com)