

Il Reference Site Collaborative Network:

opportunità collaborative per un invecchiamento sano ed attivo che duri tutta la vita



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Genova, 10 Maggio 2023
14.00-18.00

Ecosistema Salute

Il panorama attuale

Invecchiamento della popolazione

Fragilità e disabilità non sono una conseguenza inevitabile dell'invecchiamento



Diseguaglianze di salute

Radicata spesso nelle diseguaglianze sociali



Carenza di personale sanitario

Mobilità, condizioni di lavoro, tempi formativi



Trasformazioni gemelle: verde e digitale



PNRR

Grandi progetti nazionali



Collaborazioni multilivello

Scambio di buone pratiche innovative e validate

PNRR: Sinergie multilivello

- Transizione verde
- Trasformazione digitale
- Crescita intelligente, sostenibile e inclusiva
- Coesione sociale e territoriale
- Salute e resilienza economica, sociale e istituzionale
- Politiche per le nuove generazioni, l'infanzia e i giovani

**Digitalizzazione ed
innovazione**

Transizione ecologica

Inclusione sociale

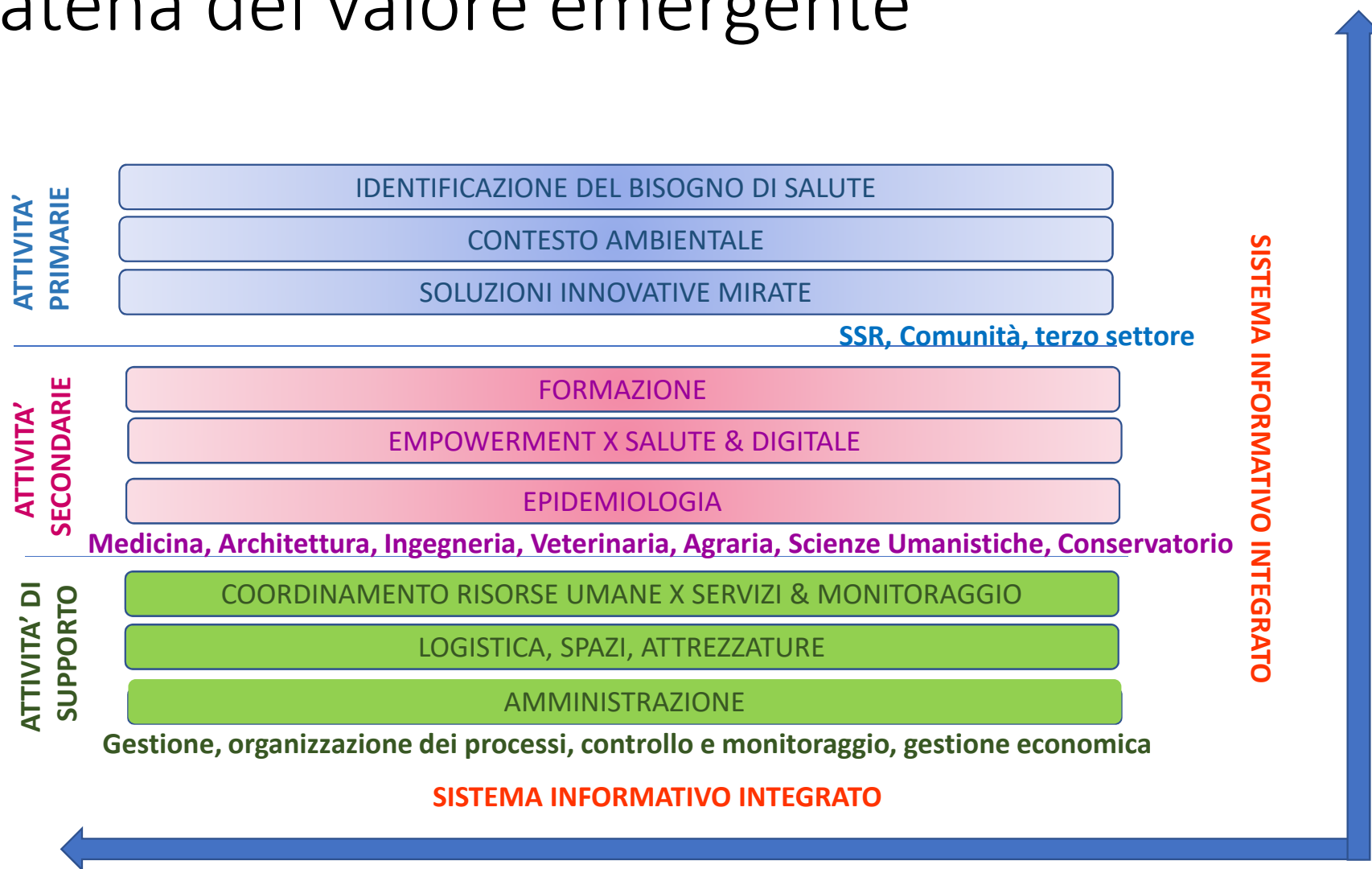
Il fabbisogno di approcci innovativi

Passaggio da un concetto di servizi basati sull'approccio reattivo alla malattia

verso un approccio alla salute incentrato sulla persona: si esce dall'ospedale!

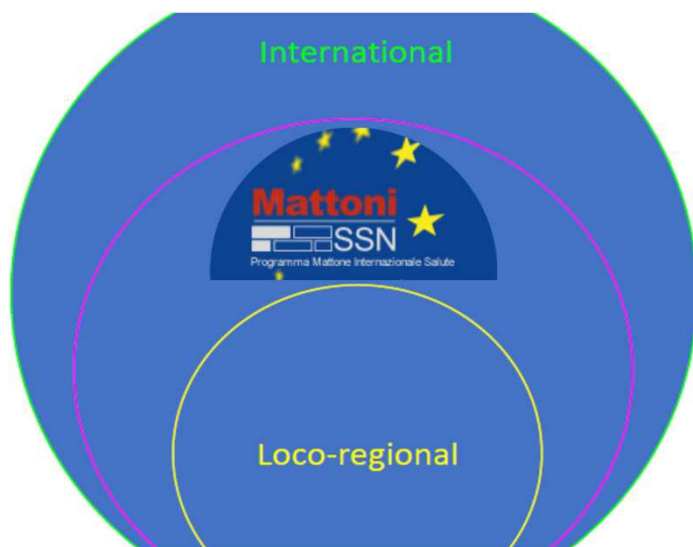


La catena del valore emergente

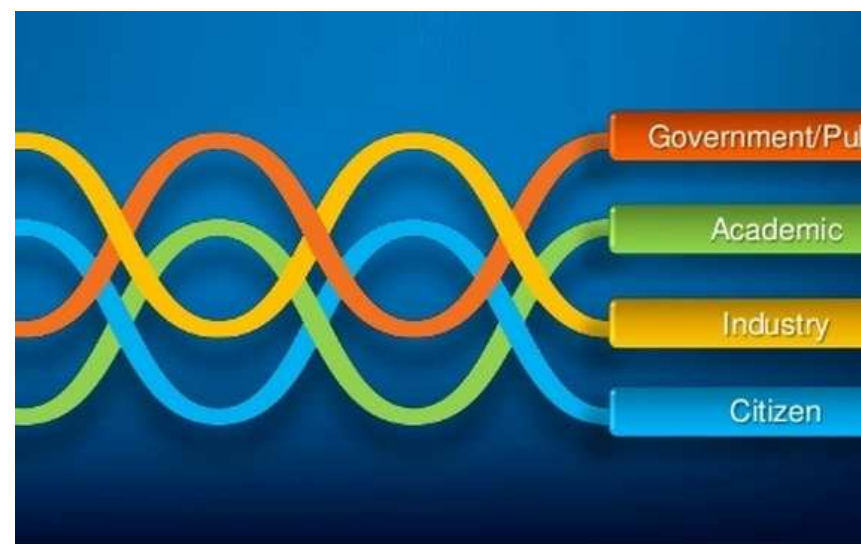


Le opportunità collaborative a livello internazionale e nazionale

Livelli connessi & sinergici



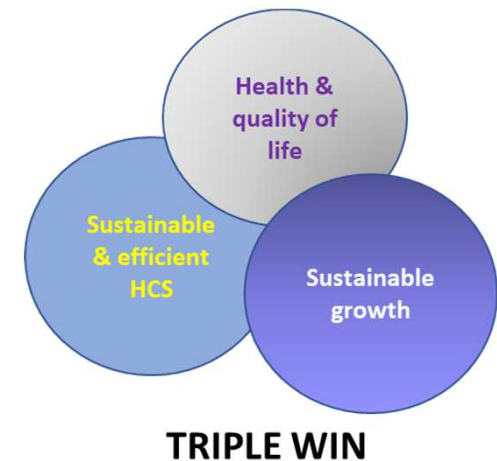
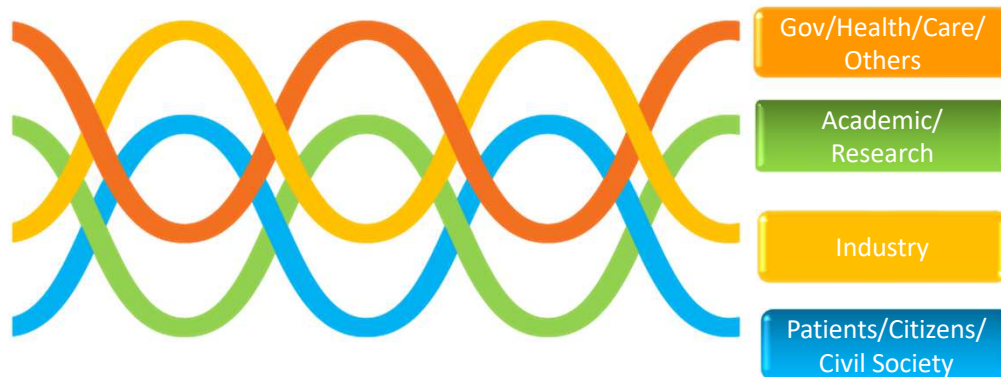
La quadruplice elica degli ecosistemi innovativi PER LA SALUTE



La Liguria è tra le regioni promotrici della nascita di RSCN

Achievements to to foster Innovation for lifecourse active and healthy ageing

- Stakeholder-driven, dynamic initiative:
 - to foster innovation in local ecosystem
 - valorize the work done in each territory



RSCN Mission and Vision

- **Mission:**
- The RSCN aims to support Reference Sites in Europe, and beyond, to:
 - Promote all actions within a **life-course approach** to active and healthy ageing
 - Accelerate the deployment of major innovations which will improve health, wellbeing, and care outcomes,
 - Increase the sustainability of health and care systems,
 - Create opportunities for economic growth and jobs.
- **Vision**
- To help our members accelerate the development, deployment, and adoption of innovative solutions and digital technologies that facilitate proven service delivery models addressing life-course approaches to active and healthy ageing which provide real impact for patients and citizens, contribute towards the sustainability of services, and promote economic opportunities.



Call for Reference Sites 2023: an overview

- Effort to improve quality of the achievements
- High quality of the RS
- Commitment of the **65 regions** to collaborate & generate impact
- Support of the EC

4th Call for AHA Reference Sites

EIP ON AHA
RSCN

The 4° Call for AHA Reference Sites is Now OPEN!
More info at:
rscn.eu

pixels.com

Our approach to innovation



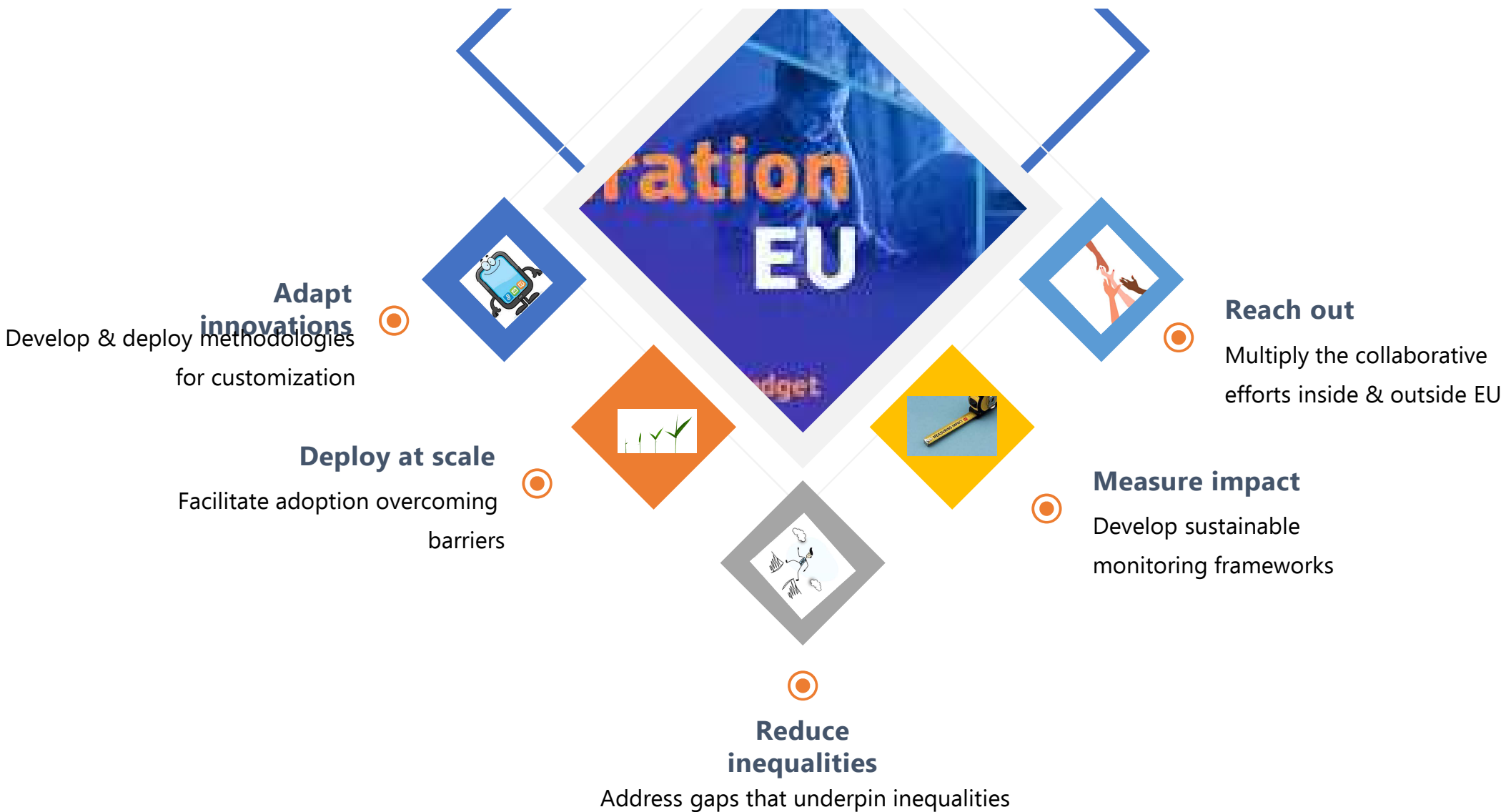
Health need

Environmental
context

Digital
Infrastructure

MULTIDIMENSIONAL INTERVENTIONS FOR LIFE-COURSE HEALTH AND WELLBEING

ENGAGEMENT OF STAKEHOLDERS AT LOCAL, NATIONAL AND INTERNATIONAL LEVELS



Building capacity through collaborations

Twinning opportunities: bridging the gap for scaling up innovations



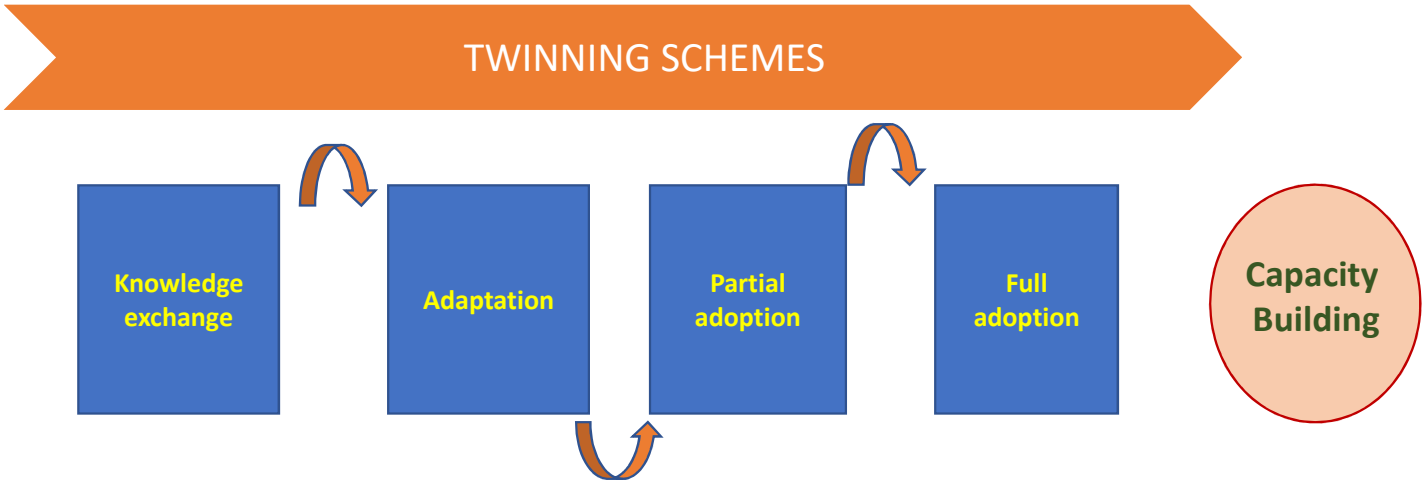
PROEIPAAH



WE4AHA



IN4AHA



RSCN Outreach



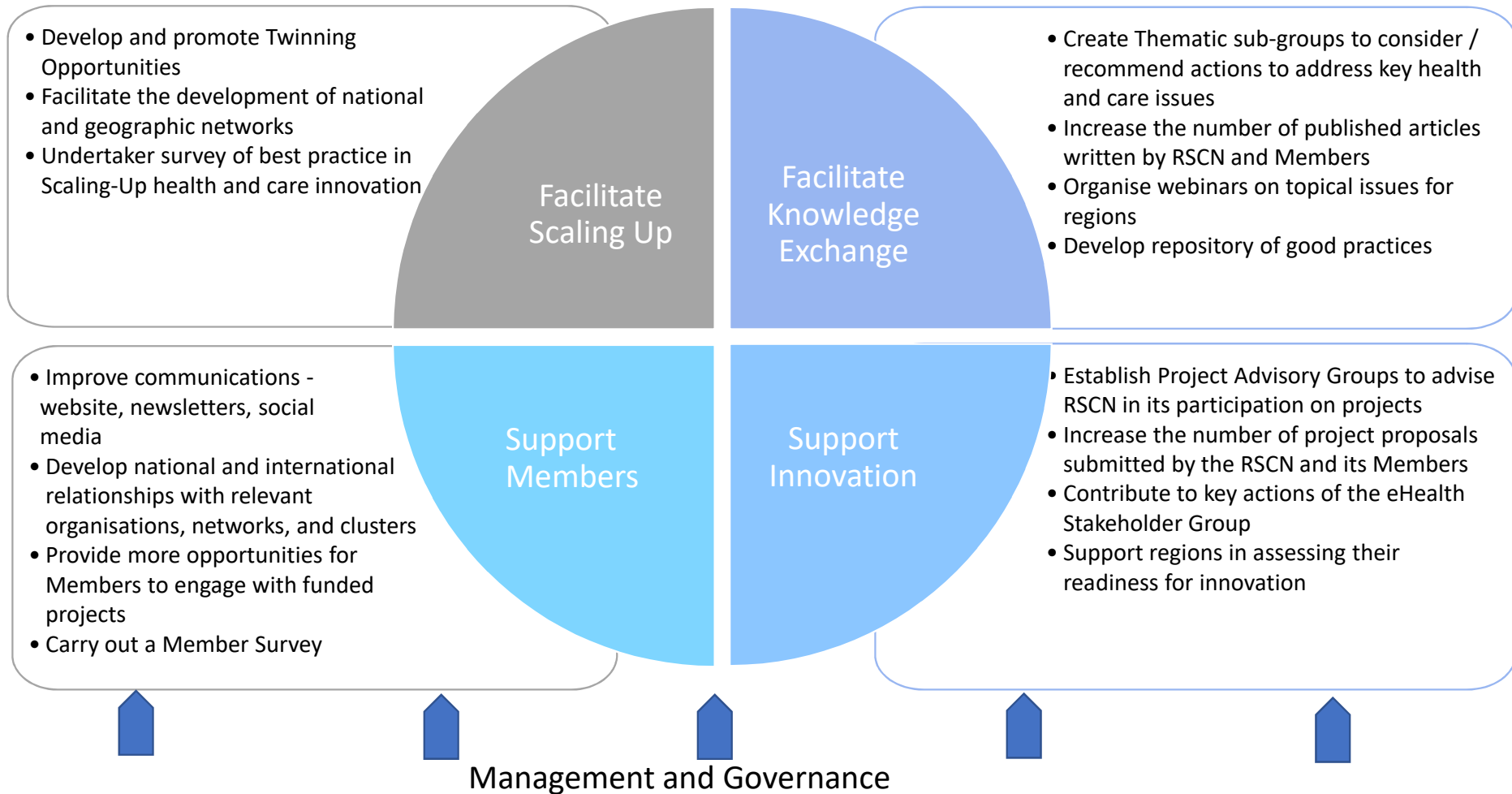
CARRIBEAN
Barbados



RSCN
European AHA
REFERENCE SITES



Strategic Objectives 2020 - 2023





**GET
INVOLVED!**



Thematic Working Groups

Webinars
Workshops
Twinings
Documents & Papers



Expert Panel

Supporting expert group & Ex Board



Executive Board

Drive forward strategies, planning & implementation



Prospective observational cohort study for identification of frailty risk factors in community-dwelling older adults – SUNFRAIL+



7 Centres in 7 Regional Health Systems

Multidimensional Frailty Screening

QUESTIONNAIRE NUMBER		ID
Date and Place		
PROFESSIONALS		
Professional	<input type="checkbox"/> Nurse <input type="checkbox"/> GPs <input type="checkbox"/> Other professionals <input type="checkbox"/> Social workers <input type="checkbox"/> Community actors <input type="checkbox"/> Caregiver	
BENEFICIARIES		
Gender	Age	Level of education
<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 65-74 <input type="checkbox"/> 75-85	<input type="checkbox"/> Low (without studies, Primary school) <input type="checkbox"/> Medium (Secondary school or vocational degree) <input type="checkbox"/> High (University, Master or PhD degree)
QUESTIONS		
1. Do you regularly take 5 or more medication per day?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have you recently lost weight such that your clothing has become looser?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Your physical state made you walking less during the last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Have you been evaluated by your GP during the last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Have you fallen 1 or more times during the last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Have you experienced memory decline during the last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Do you feel lonely most of the time?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. In case of need, can you count on someone close to you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Have you had any financial difficulties in facing dental care and health care cost during the last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No



Biopsychosocial dimensions assessment

Prescription Adherence: Medication Adherence Report Scale (MARS)

Nutrition: Assessment of adherence to the Mediterranean diet (PREDIMED) and Mini Nutritional Assessment (MNA)

Physical activity: Short Physical Performance Battery (SPPB)

Adherence to Medical visits: Checklist

Fall risk: Age-friendly environment assessment tool (AFEAT) and Time Up and Go test

Cognitive decline: Quick Mild Cognitive Impairment (QMCI) and General Practitioner assessment of Cognition (GPCOG)

Loneliness: Geriatric Depression Scale (GDS)

Support network: Social Provisions Scale (SPS)

Socio-economic conditions: Self-assessment questionnaire (MUSE)

Thank you

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Alberto Pilotto*

