





Opening the door to health for all

The Programme is co-funded by the European Union and the National Funds of the Participating Countries













Aristotle University of Thessaloniki Department of Medicine www1.med.auth.gr/depts/lomi/



National Confederation of Disabled People Branch of Northern Greece www.esamea.gr



Municipality of Neapoli-Sykies www.dimosneapolis-sykeon.gr





University of St. Kliment Ohridski - Bitola Faculty of ICT www.fikt.uklo.edu.mk

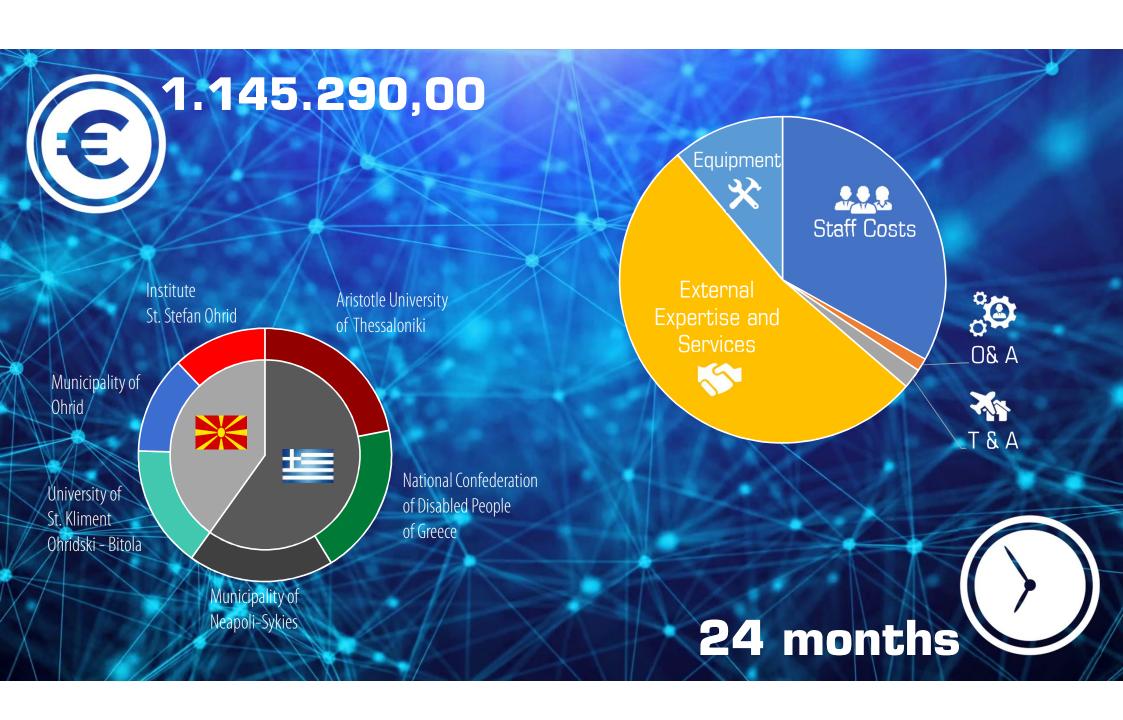


Municipality of Ohrid www.ohrid.gov.mk



Institute for prevention, treatment & rehabilitation of cardiovascular diseases St. Stefan Ohrid www.bcentermaritza.weebly.com





A few words about the Programme

- A cross-border cooperation Programme co-financed by the European Union under the Instrument for **Pre-Accession Assistance (IPA II)**
- Approved by the European Commission on 06/08/2015 by Decision C (2015) 5655
- Total budget \approx **45.470.066,00** (85% ERDF funding and 15% national contribution)
- 2 Priority Axes (Development and Support of Local Economy, Protection of Environment -Transportation)

Goal Expected results

"to enhance territorial cohesion by improving living standards and employment opportunities holding respect to the environment and by using the natural resources for upgrading of the tourism product"





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Goal Expected results

- Improved health and social services for the population living in the cross-border region
- Further jobs created in the tourism sector
- Improved access to local transport infrastructures, faster connections to main corridors,
 efficient border crossing services, transport services using innovative technologies
- Improved waste management or recycling systems
- Improved measures addressing natural risks (floods, forest fires) and environment protection





A few words about the Programme



People living in 5 border regions in Greece and 4 regions in the former Yugoslav Republic of Macedonia are benefiting from the Programme





A few words about the Programme: Identified needs

- ► To **fight against social exclusion** of the "new" poor, people who lost their jobs and jobless families, people with debts, etc.
- Provision of care to vulnerable groups
- ▶ To create new mechanisms focused on the **conditions of poverty**, services of comfort and counselling
- ► To tackle **health Inequalities** It is important to reduce inequalities in health and improve access to health services for people living in rural areas.
- ▶ To help women who offer care services to children and the elderly etc.





1st Call for proposals

| Call for proposals | 1 st CALL FOR PROJECT PROPOSALS | | | | | | |
|--------------------|---|--|--|--|--|--|--|
| Priority axis | 1. Development and Support of Local Economy | | | | | | |
| Thematic | a. Promoting employment, labour mobility and social and | | | | | | |
| Priority | cultural inclusion across borders | | | | | | |
| Specific | 1.2. Improvement of preventive health care and social | | | | | | |
| Objective | services of children and elderly population | | | | | | |
| Duration | max. 24 months | | | | | | |
| Budget | max.1.500.000 euro | | | | | | |
| Number of | max.6 | | | | | | |
| partners | | | | | | | |
| Indicators | Results: Population having access to health services | | | | | | |
| | Results: Population having access to social services | | | | | | |
| | a. Promoting employment, labour mobility and social and cultural inclusion across borders 1.2. Improvement of preventive health care and social services of children and elderly population max. 24 months max. 1.500.000 euro max.6 Results: Population having access to health services Results: Population having access to social services Output: Population covered by improved health service (target value 2023 = 1500) | | | | | | |
| | (target value 2023 = 1500) | | | | | | |
| | Output: Population covered by improved social services (target value 2023 = 500) | | | | | | |





1st Call for proposals: Indicative actions for SO1.2

- Mobile and other health services and social care for children and elderly habitants of remote areas
- ▶ Elaboration of ICT, telemedicine and smart applications related to health and social care
- Communities development initiatives to support social and family care
- Cross-border initiatives for promotion of health and well-being of children
- Promotion of people's participation in social care
- Preventive health Programmes
- Supply of equipment for health care and social care (e.g., oxygen production by hospitals etc.)





Project Funding

| Project Beneficiary No | Country | Union support (1) | % | National Counterpart (2)=(a) + (b) | % | National Coun National Public Funding (a) | terpart Type National Private Funding (b) | Total (3)=(1)+(2) |
|---------------------------|--|----------------------|----|--|----|---|--|-------------------|
| LB (P1) | Greece | 213.350,00€ | 85 | 37.650,00€ | 15 | 37.650,00€ | 0,00€ | 251.000,00€ |
| PB2 | the former Yugoslav Republic of Macedonia | 152.235,00€ | 85 | 26.865,00€ | | 26.865,00€ | 0,00€ | 179.100,00€ |
| PB3 | Greece | 188.173,00€ | 85 | 33.207,00€ | 15 | 33.207,00€ | 0,00€ | 221.380,00€ |
| PB4 | the former Yugoslav Republic of Macedonia | 121.388,50€ | 85 | 21.421,50€ | 15 | 21.421,50€ | 0,00€ | 142.810,00 € |
| PB5 | Greece | 181.050,00€ | 85 | 31.950,00€ | 15 | 31.950,00€ | 0,00€ | 213.000,00€ |
| PB6 | the former Yugoslav Republic of Macedonia | 117.300,00€ | | 20.700,00€ | | 20.700,00€ | ' | 138.000,00€ |
| TOTALS | | 973.496,50 € | 85 | 171.793,50 € | 15 | 171.793,50 € | 0,00 € | 1.145.290,00 € |

Per partner

| Country | Co-financing source | Union support (1) | National Counterpart (2)=(a)+(b) | Breakdown of counte National Public Funding (a) | | Total (3)=(1)+(2) |
|---|---------------------|-------------------|--|--|--------|-------------------|
| Greece | | | | | | |
| | IPA II | 582.573,00 € | 102.807,00 € | 102.807,00 € | 0,00 € | 685.380,00 € |
| the former Yugoslav Republic of Macedonia | | | | | | |
| | IPA II | 390.923,50 € | 68.986,50 € | 68.986,50 € | 0,00 € | 459.910,00 € |
| Total | | 973.496,50 € | 171.793,50 € | 171.793,50 € | 0,00 € | 1.145.290,00 € |

Per country





A few words about the project concept

Today, due to a number of reasons, significant parts of the population living in the CB area, especially poor people, persons with disabilities and chronic conditions, **suffer from low access to health and social services**

In particular, the Programme area is characterized by:

- poor living conditions, low education level, and above all, a long-lasting poverty that affects also the health situation of the majority of the poor and of the vulnerable groups
- people living in rural areas with limited access to infrastructures and services
- limited availability of eHealth services, and citizens with low digital health literacy skills
- limited availability of inclusive services (i.e., services designed for all) and of specialized services for such groups
- the emerging phenomenon of CB medical tourism putting often in risk the lives of many individuals





Project main goal & expected result

To establish inclusive health and social services, free of accessibility barriers, with particular focus on improving the management and CB use of the health and medical data of disadvantaged and high-risk citizens

Thereby, increasing significantly the number of people that access high quality health and social services in the CB, thus promoting safe ageing, early prevention, and independent living for all





Project objectives

- ▶ to foster health literacy and digital health literacy and promote self-management
- ▶ to design innovative practices for improving access to health for vulnerable groups and for tackling health inequalities
- ▶ to improve the capacity of health professionals and infrastructure to accommodate efficiently the needs of the target group
- ▶ to establish new mechanisms focused on the conditions of poverty, services of comfort and counselling at home, including in rural and isolated areas
- ▶ to mobilize inactive individuals and unblock their potential in offering care services to those most in need
- ▶ to promote joint strategies for developing integrated healthcare and social care sans frontiers





Then main concept

In particular, the project will establish a **prototype cloud platform** for improving the access of citizens with chronic conditions and persons with disabilities to specialised healthcare and social care services across the CB area

The envisioned platform shall:

- ➤ act as one stop information point, where all CB citizens and medical tourists will be able to receive information about where to find specialised, accessible health and social services across the CB area (a study to collect such information from all over the CB will be conducted by NCDP)
- ▶ implement positive changes to make public health information that is targeted to these citizens accurate, accessible, and actionable
- include innovative tools and support services to facilitate better management and use (across all the CB area) of personal health and medical data of citizens
- offer means to citizens for improving their health literacy and the digital health literacy
- offer e-prescription and e-referral tools for primary health service providers (e.g., Municipalities)
- ▶ offer interfaces and tools for preventive tele-monitoring of remote individuals





Then main concept (cont.)

The project will further design and implement two pilot cases on the Municipality of Ohrid and the Municipality of Neapolis-Sykies

In the context of these pilots, these two Municipalities will work together on:

- ▶ improving and extending their healthcare and social care services in order to better address the special needs of the target groups, through improved primary healthcare and social care services (preventive health services, diagnostic pre–assessment, guidance, prescription services, etc.) that will be friendly and fully accessible to citizens with chronic conditions and citizens with disabilities
- offering support services to help citizens generate and maintain online accurate personal health records
- ▶ maintaining a help desk for citizens and medical tourists
- establishing multidisciplinary and specially equipped mobile units for reaching isolated individuals and running specialized programmes (a) of preventive health checks at home and (b) of short period tele-monitoring of individuals, including at remote areas





Project main outputs

- ▶ a joint **study of gaps and inequalities** across the CB area
- ▶ Action Plans for addressing the needs of vulnerable and special groups
- ▶ information on accessible health and social services available in the CB area, as a result of systematic inspections and data collection across the region
- ▶ a **guide for citizens** on special, accessible health and social services available in the CB (printed and also made also available in alternative formats for various types of disabilities)
- ▶ 3 Pilot Health and Social Care Centers for all, incl. 3 mobile units
 - ▶ Multidisciplinary teams of experts, trained appropriately and equipped with innovative mobile kits (sets of wireless sensors and smart devices) in order to be able to deliver a large part of their services (preventive health services, diagnostic pre-assessment, guidance, prescription services, etc.) at the homes of people with disability and/or reduced mobility.





Project main outputs (cont.)

- ▶ an open, multilingual and fully accessible **cloud-based CB Portal**, which will offer access to citizens to various eServices, including
 - ▶ an Electronic personal health record mechanism for CB use (for creating and maintaining online personal health records, alone or with the help of the staff of the Centers or the Mobile Units)
 - ▶ an e-learning environment on health and digital health literacy,
 - e-Prescription and e-Referral services
- ▶ mobile and portable tools for health pros, citizens and visitors
- ▶ a full scale **pilot programme** (joint Help desk, Pilot services, Mobile Units, etc.)
- workshops and seminars (a) for staff of the units, (b) for other healthcare and social care professionals in the cross border area, and (c) for improving selfmanagement skills of citizens



Most important envisioned results

- ▶ The main result of the project is that, though the establishment of the **Special Centers and of the Mobile Units**, and through their pilot operation (6 months), a significant part of the CB population (over 600 individuals) that is traditionally excluded, will receive access the available health and social services
- ► Furthermore, through the training activities (seminars) and the eLearning resources of the project, the levels of health literacy and digital health literacy among the citizens will gradually improve (300 workshop participants), and people will be in better position to better self-manage their health issues, and exploit outcomes of the Project
- ▶ On the other hand, following the capacity building activities of the project, which focus on health and social care professionals of the area, these professionals (320 individuals trained in seminars) will be in better position to accommodate efficiently the needs of the target group
- ▶ The two Municipalities will act as **prototype local centres of reference** for the rest of the Municipalities that wish to tackle health Inequalities and improve access to health and social services for people with chronic conditions and disabilities, including the very poor and those living in rural and remote areas





Overview of the Project work packages

1 common vision • 6 interrelated work packages • 26 joint sub-activities

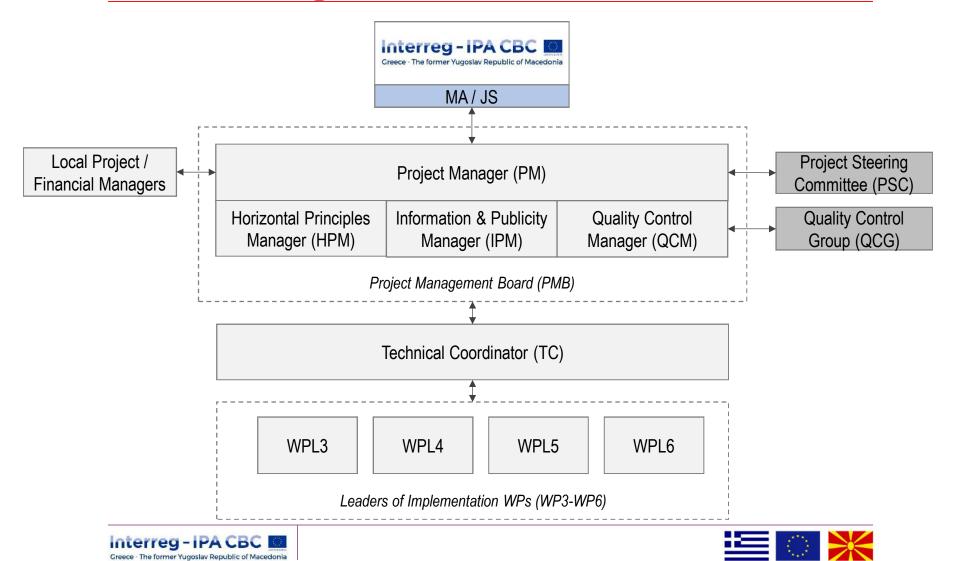
| WP no | WP Title | Start | End | Cost |
|-------|------------------------------------|------------|------------|---------------|
| WP 1 | Project Management & Coordination | 02/04/2018 | 01/04/2020 | 121.318,80€ |
| WP 2 | Communication & Dissemination | 02/04/2018 | 01/04/2020 | 41.936,60€ |
| WP 3 | Needs analysis & Capacity building | 02/05/2018 | 01/04/2020 | 224.326,70€ |
| WP 4 | Joint cloud platform and services | 02/04/2018 | 01/04/2020 | 274.513,60€ |
| WP 5 | Mobile tools and application | 02/05/2018 | 01/04/2020 | 224.052,80€ |
| WP 6 | Pilot Programmes & Capitalization | 02/05/2018 | 01/04/2020 | 259.141,50€ |
| Total | | 02/04/2018 | 01/04/2020 | 1.145.290,00€ |





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|-----------|---|--|--|---|----|----|---|--|---|--|--|---|----|---|--|---|---|
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| P1 | Project Management & Coordination | | | | | | | | | | | | | | | | |
| .2 | Project management (coordination, reporting, and tools) | | | | | | | | | | | | | | | | |
| .3 | Project Meetings | | | | | | | | | | | | | | | | |
| 1.4 | External technical support | | | | | | | | | | | | | | | | |
| 1.5 | Audits | | | | | | | | | | | | | | | | |
| P2 | Communication & Dissemination | | | | | | | | | | | | | | | | |
| 2.1 | Dissemination strategy & monitoring | | | | | | | | | | | | | | | | |
| 2.2 | Communication material & tools | | | | | | | | | | | | | | | | |
| 2.3 | Public Project events | | | | | | | | | | | | | | | | |
| .4 | Accessible project website (WCAG 2.0, AA) | | | | | | | | | | | | | | | | |
| P3 | Needs analysis & Capacity building | | | | | | | | | | | | | | | | |
| 3.1 | Joint study of needs and gaps | | | | | | | | | | | | | | | | |
| 3.2 | Inspections and data collection | | | | | | | | | | | | | | | | |
| 3.3 | Common strategy, action plan & guide | | | | | | | | | | | | | | | | |
| .4 | Workshops (health & social care professionals) | | | | | | | | | | | | | | | | |
| .5 | Awareness and activation raising campaign | | | | | | | | | | | | | | | | |
| P4 | Joint cloud platform & services | | | | | | | | | | | | | | | | ľ |
| .1 | Cross-border Portal for accessible health services | | | | | | | | | | | | | | | | |
| .2 | PHR for CB use | | | | | | | | | | | | | | | | |
| .3 | E-learning (health & digital health literacy) | | | | | | | | | | | | | | | | |
| .4 | e-Prescription and e-Referral | | | | | | | | | | | | | | | | |
| .5 | Help desk & Public Information Points | | | | | | | | | | | | | | | | |
| P5 | Mobile tools & applications | | | | | | | | | | | | | | | | ľ |
| 5.1 | Mobile sets for preventive health checks | | | | | | | | | | | | | | | | |
| .2 | Tele-monitoring kits for remote citizens | | | | | | | | | | | | | | | | |
| 5.3 | Mobile app for citizens & medical tourists | | | | | | | | | | | | | | | | |
| P6 | Pilot Programmes & Capitilization | | | | | | | | | | | | | | | | |
| 5.1 | Pilot programme with Municipalities | | | | | | | | | | | | | | | | |
| 5.2 | Pilot Mobile Units programme | | | | | | | | | | | | | | | | |
| 6.3 | Lessons learned & Impact assessment | | | | | | | | | | | | | | | | |
| 6.4 | Sustainability & Transferability plans | | | | | | | | | | | | | | | | |
| 6.5 | International study visits for exchange of good practices | | | | | | | | | | | | | | | | ì |

Project Management



Information and Publicity Strategy

The **guiding principles** for shaping the project's **information and publicity strategy** are:

- ✓ the production of advertising material in formats <u>accessible for all</u>
- ✓ <u>diffusion</u> throughout the border region and to achieve communication with the direct and indirect beneficiaries within and outside the CB area
- ✓ information and promoting the <u>active participation</u> of the public and target groups in project activities through publicity events and sensitization / activation as also through the use of digital channels and tools
- ✓ <u>cooperation</u> and use of local / regional media, adjusted to local conditions, to ensure further penetration in local communities and markets





