

Active and Assisted Living Programme

Challenge-Led Call for Proposals AAL 2018

SMART SOLUTIONS FOR AGEING WELL

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¹ Pending approval by the European Commission – the financial contribution of the European Commission in the AAL 2018 call is conditional to the internal approval and adoption of the financing decision by the Commission.

Please always check for the last official version on the web-site. *This updated version of the call text reports the confirmed committed budget for Belgium (VLAIO) and Italy (MIUR)*

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1. The AAL Programme

The AAL Programme is a common funding activity of partner states of the AAL Association, with the financial support of the European Commission, based on Article 185 of the Treaty on the Functioning of the European Union (TFEU).

The aim of the AAL Programme is to provide innovative Information and Communication Technologies (ICT) based solutions including products, systems or services. These solutions aim to enhance older adults' quality of life, to improve the long-term sustainability of the health and long-term care systems and to strengthen the industrial base in Europe and internationally. The main goal is to improve the autonomy, participation in social life, skills, and employability of older adults².

Solutions funded under the AAL Programme address the wishes and needs identified by the end-users, are transnational, collaborative and cost-shared between private and public funding.

Since 2008, the AAL Programme has funded over 200 thematic projects in 10 calls³.

The “challenge-led” AAL calls for proposals provide a targeted funding mechanism for the development of ICT-based solutions in response to the individual and societal challenges as drivers of innovation and economic growth.

The AAL Programme calls are complementary to the [Horizon 2020 calls related to Active and Healthy Ageing under Societal Challenge 1 \(SC1\)](#), as well as to the [Horizon 2020 2018-2020 Work Programme on Information and Communication Technologies](#).

² See the sections entitled “Framework for ‘End-user Involvement’ under the AAL Programme” and “Guideline for Ethical Considerations in AAL Projects” in the Guide for Applicants.

³The applicants are strongly encouraged to check the list of funded projects in <http://www.aal-europe.eu/our-projects/>.

2. Call rationale

General

It is generally recognized that ICT-based solutions can contribute to enhancing the quality of life of older adults in different dimensions and improve long-term sustainability of the health and long-term care systems. A recently developed categorization system illustrates the variety of application areas for AAL (see [TAALXONOMY](#) – AAL Product and service categories).



Source: TAALXONOMY (Synyo, University of Innsbruck, Eurac)

Furthermore, quality of life concepts such as ‘Positive Health’, which describes health as the ability to adapt and self-manage, in light of the physical, emotional and social challenges of life⁴, can provide guidance in the development of solutions supporting older adults.

AAL MARKETS

Since the inception of the AAL Programme, the 10 implemented calls have not only delivered many useful solutions for older adults, they have also provided a more differentiated view about the different market segments available for AAL solutions:

- There are solutions aiming at “**private consumer markets**” with aspects such as wellbeing, lifestyle, independence, work, fun and comfort. Buyers would mainly be the older adults themselves or their families and social networks.

⁴ See more at: <http://www.louisbolck.org/health-nutrition/integrative-medicine-3/new-concept-of-health>

- On the other hand, there are solutions aiming at “**regulated markets**” such as health and care, social care, and housing. In these markets, the buyers are mainly secondary or tertiary end-user groups (such as care organisations or municipalities) who provide the solutions as part of a more complex service offer. These market segments usually have a mandatory requirement for evidence about the effects and cost-effectiveness of ICT-based solutions before adopting them fully. In addition, solutions have to fit into the vision and strategy of the organisations involved.

Both of these markets require different approaches.

FLEXIBILITY

Over the years end-user⁵ groups and other partners in consortia reported that it is difficult to fully explore new approaches or target new business sectors or stakeholder groups within the close framework and time schedule of a fixed multi-annual project. There is a need for more flexible and short-term possibilities for substantial cooperation.

The 2018 call will respond by offering flexible frameworks for developing ICT-based solutions for ageing societies.

3. Call challenge

The AAL Call 2018 has the following key features which differ in terms of scope and flexibility from previous AAL calls.

1. The AAL Call 2018 is open to developing ICT-based solutions targeting any application area(s) within the AAL domain. The solutions need to be embedded into the strategies of the participating end-user organisations, service providers and business partners. The wishes and aspirations of older adults in combination with the demands from the other stakeholders involved – e.g. providers and payers - will have a critical role in shaping useful and attractive AAL solutions with a high market potential.
2. The AAL Call 2018 allows for more flexibility regarding the scope, size and duration of the proposed projects.

Two types of projects can be funded:

⁵ Definition of end-users in the AAL Programme:

Primary end-users are older adults who are actually using AAL products and services. This group directly benefits from AAL solutions through increased quality of life. Primary end user organizations are organizations that represent older adults (e.g. senior organisations/cooperatives etc.)

Secondary end-users are persons or organisations directly in contact with primary end-users, such as formal and informal caregivers, family members, friends, neighbours, care organisations and their representatives. This group benefits from AAL directly when using AAL products and services (at a primary end-user’s home or remotely) and indirectly when the care needs of primary end-users are reduced.

Tertiary end-users are such institutions and private or public organisations that are not directly in contact with AAL products and services, but who somehow contribute in organizing, paying or enabling them. This group includes the public sector service organizers, municipalities, social security systems, insurance companies, housing corporations etc. Common to these is that their benefit from AAL comes from increased efficiency and effectiveness which result in saving expenses or by not having to increase expenses in the mid and long term.

3.1. Small collaborative projects

Small collaborative projects are intended to be quicker and more agile regarding submission process, grant signature and reporting; they have a maximum duration of 6 months with maximum funding of €300.000. They can result in well-substantiated ideas or proposals for AAL solutions to be submitted in a later AAL call (or elsewhere).

Small collaborative projects aim at exploring new ideas, concepts and approaches for ICT-based solutions for older adults. They should reach out to new stakeholders for inclusion in (future) development of AAL solutions, build strong collaborations with end user organisations, support community building with new customers and create shared agendas.

Partners in submitted proposals are expected to intensively collaborate with end users at an early stage in order to:

- Thoroughly investigate wishes and needs for appealing solutions;
- Explore novel and improved approaches for involving all types of end users;
- Validate benefits for end-user organisations, enhancing their own processes;
- Explore ways for opening up the market for ICT based solutions for older adults;
- Assess the project concept in relation to market potential.

Small collaborative projects should comply with the following requirements:

- Proposals must be precise, creative and ambitious and go beyond the state-of-the-art of solutions presently available or emerging on the market and include aspects of social and business innovation;
- Proposals must present a work plan specifying deliverables and milestones;
- Proposals must describe how they deal with ethical aspects, taking in consideration the relevant legal frameworks⁶ of the countries involved, stakeholders and the EU/UN (if applicable);
- Proposals must have a European/international dimension.

3.2. Collaborative projects

Proposals are expected to be user-driven through co-creation and address a specified challenge. Furthermore, the route to market needs to be clearly described and aligned with the business strategies of the partners responsible for commercialisation.

A collaborative project has a duration of 18 to 36 months with maximum funding of €2.500.000. The AAL solutions developed need to have a short time-to-market introduction within a maximum of two years after the end of the project.

Collaborative projects funded under Challenge 2018 will be operating in technology readiness levels 5-8⁷.

The AAL call 2018 stresses a strong involvement of end users – especially secondary and tertiary – and other relevant stakeholders in the shaping of solutions and in creating respective

⁶ For more information see Guide for Applicants

⁷ Technology readiness levels (TRL)

- TRL 5 – technology validated in relevant environment
- TRL 6 – technology demonstrated in relevant environment
- TRL 7 – system prototype demonstration in operational environment
- TRL 8 – system complete and qualified

markets. Since a lot of requirement analyses with older adults and informal carers have already been carried out in previous projects, it is expected that project consortia will build on knowledge that is already available. If further requirement analyses are needed, this has to be duly justified in the proposal.

A strong business and market orientation is crucial in the projects in order to:

- validate ideas for solutions for specified market segments/customer groups
- sell products and services on the consumer market
- launch solutions on the chosen segments of the regulated market in collaboration with user organisations and service providers within two years after the project is completed.

Depending on the type of market, the proposed solutions need to respond to different requirements:

✓ *Solutions targeting the private consumer markets*

Submitted proposals are expected to develop ICT-based solutions for supporting older adults by addressing issues such as wellbeing, lifestyle or comfort aspects. These projects have a shortened time-to-market (max. 2 years), **a clearly described route to market and an identified leader for commercialization. These projects must be led by an enterprise partner or an end-user organisation partner**⁸.

✓ *Solutions targeting the regulated markets*

Submitted proposals are expected to develop ICT-based solutions for supporting older adults that can be integrated in the strategies of user organisations, service providers and business partners. These projects have a shortened time-to-market (max. 2 years), a clearly described route to market and an identified leader for commercialization.

Within these regulated markets there is an urgent need for evidence about the effects and cost-effectiveness of AAL solutions. This implies a prominent role for iterative testing and substantial evaluations in at least two countries that includes significant numbers of users and relevant providers and payers of the proposed solution. Specifically, secondary end-user organisations are expected to be able to integrate the solutions in their policies, service offers to older adults and their networks, work processes, reimbursement systems etc.

4. Eligibility criteria

4.1. Consortium-level eligibility criteria

- Submission of a complete proposal through the AAL electronic submission system before the deadline, as specified in the Guide for Applicants.
- English as the language of the proposal.
- Consortium composition of at least 3 independent eligible organizations (legal entities), from at least 3 different AAL Partner States participating in the Call for Proposals (*IMPORTANT - applicants for Small Collaborative projects should check in the*

⁸ An end users organization is eligible as coordinator if their role will be launching customer or business partner offering the solution to their clients.

list of countries reported below whether their respective funding agency will fund this type of project)

- Consortia must include at least one eligible for-profit business partner
- Consortia must include at least one eligible for-profit SME partner which can be the business partner.
- Consortia must include at least one eligible end-user organisation.
- Indicative size of the consortium:
 - Small collaborative projects: the partners should be from 3 different participating countries; the number of partners should be proportionate to the scope of the project
 - Collaborative projects: 3 to 10 partner from 3 different participating countries
- Duration of the project:
 - Small collaborative projects: max. 6 months
 - Collaborative projects: between 18 and 36 months
- Adherence to the specifications for structure and technical details (e.g. page count) of the proposal submission template for small collaborative projects.

4.2. National eligibility criteria

- Only organisations that are explicitly described in the national eligibility criteria are eligible for funding. The national eligibility criteria are published together with the Call text.
- It is highly recommended to contact the AAL National Contact Persons (NCPs) prior to submission of a proposal (list of NCPs and contact data can be found on the AAL Programme website www.aal-europe.eu/contacts/national-contact-persons/).
- In some countries, establishing contact with the NCP prior to the submission of the proposal is a **requirement** for being eligible for funding.
- In addition, the project may include organizations not requesting funding or organizations that are not eligible for funding according to national eligibility rules or organizations not residing in any AAL Partner State⁹. Such organisations may be associated with the project without funding from the AAL Programme, but they cannot be crucial for the project's implementation. They will not be taken into consideration when assessing the project proposal against the eligibility criteria and project characteristics stated above.

5. Expected impact

By funding the development of AAL solutions, the AAL Programme aims to create evidence of improved quality of life, added value for end-users, usefulness and effectiveness of the solutions, as well as evidence of their reliability, security, and financial viability, with positive business cases for potential payers.

⁹ The participation of organisations residing outside an AAL Partner State is restricted to organisations residing in a Member State of the European Union that currently does not participate in the AAL Programme, i.e. Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Ireland, Latvia, Lithuania, Malta, Slovakia, Sweden and United Kingdom.

5.1. Expected impact on quality of life

ICT-based solutions in this call challenge are expected to contribute to sustain or improve the quality of life of older adults in different dimensions and throughout the ageing process for:

- Living a healthy, active and meaningful life.
- Living independently and safely for longer at home (keeping the decision and control of their daily activities) with support from their carers and community.
- Living in dignity and satisfaction.

In case the proposed ICT-based solution includes informal and/or professional carers, it should support them to:

- Reduce stress and care burden;
- Build resilience;
- Improve the quality, efficiency and effectiveness of the care they provide.

With regard to organisations and companies that support the quality of life of older adults and their social/support networks it is important that those proposed ICT-based solutions can be (easily) integrated into their organisational environment.

5.2. Expected impact on the market

ICT-based solutions in this call challenge are expected to contribute to:

- A large exploitation of ICT based solutions for supporting older adults throughout the ageing process. This includes facilitating their supporting environment.
- A growing public/regulated and private consumer market of interoperable and scalable AAL systems to support active, healthy and independent living.
- More European/international collaboration, including end-users, industry and other stakeholders in the value chain.
- Savings for the social/care system as older adults are supported in living independently in their homes for longer, thus lowering the need for homecare and delaying the move to institutionalized/community care.

Applicants must outline the key performance indicators¹⁰ used to measure the impact of the ICT-based solutions in terms of the targeted objective, as well as the methodology used to collect data; applicants should, in the application form, describe the potential impact of their project.

6. General requirements for 'Collaborative Projects'

Collaborative projects need to

- Present a realistic business plan with time-to-market perspective of maximum 2 years after end of the project.

¹⁰ See footnote 10.

- Significant involvement of industry and other business partners, particularly SMEs, are encouraged. The effort of industry and other business partners¹¹ in each project must be 50% or more (in person months).
- Indicative project total budget: 5 M€.
- Maximum funding from the AAL Programme per project: 2,5M€.

The following points outline the general requirements for the main parts of the proposal:

1. END-USERS

- A significant and meaningful number of all relevant types of end-users must be involved from the beginning of the project to its end. Their participation must be made clear in both the development process and in determining the effective use of the solutions (co-creation approach).
- Projects must adopt a holistic, inclusive and user-centred approach, in their aims as well as their set-up and expertise. The focus must be on personal aspirations, satisfaction, self-esteem and not only illness, impairments and limitations.

2. SOLUTIONS

- Solutions' interfaces must be simple, intuitive, personalised and adaptable to changing end-users' abilities and requirements.
- Solutions must be reliable and safe, and ensure security and privacy by design.
- Solutions should be based on existing standards and open platforms in order to improve interoperability. If solutions are not based on existing standards, it must be appropriately justified.

3. MARKET

- The innovation concept of the AAL Programme is based on creating markets by developing solutions which meet the aspirations, wishes and challenges of end-users. Therefore, it must be convincingly demonstrated that the proposed solutions have high potential for scale-up and commercialisation.
- A clear competitive analysis of the proposed solution must be provided together with a business plan including a viable business model¹², a description of the potential market, a roll-out plan and an estimation of the resources (personnel, financial) required to reach the market. In addition, there must also be a clear indication as to which partner(s) (consortium) will bring the solution to the market.

4. THE PROPOSAL

- Proposals must be precise, creative and ambitious and go beyond the state-of-the-art of solutions presently available or emerging on the market and include aspects of social and business innovation.

¹¹ Defined as partners who are aiming at commercialisation.

¹²For more information see Guide for Applicants

- Proposals must present a work plan specifying the process, deliverables and milestones to develop and test the solution with a relevant number of end-users.
- Proposals must include a user-centred approach throughout the project.
- Proposals must consider the national ethical-legal frameworks¹³ of relevant countries, stakeholders and EU/UN.
- Proposals must describe how they deal with ethical aspects.
- Proposals must have a European/international dimension (i.e. the proposed project cannot be accomplished on an individual national level and should take in account differences in regions, cultures and in national health and care systems).

7. Evaluation procedure and funding allocation

All eligible proposals will be evaluated and scored by a panel of independent experts (business, end-users, ICT) to establish a ranking list. Only proposals scoring above the required threshold will be considered in the allocation of co-funding from the AAL Programme. Funding contracts for individual project partners will be concluded with the relevant national funding authority. More details on the evaluation criteria for the two types of collaborative projects and the selection process can be found in the Guide for Applicants.

8. Basic information on AAL Call 2018

The AAL Call 2018 is open to *Small collaborative projects* as well as to *Collaborative projects* with different objectives, characteristics, requirements, templates and evaluation criteria. However, the call will have one closing date.

N.B. Please note that some of the funding agencies participating in the call may not fund small collaborative projects! Please refer to the Guide for applicants.

- Date of publication: 5th February 2018.
- Closure date: 28th May 2018 at 17h00 Central European Time (CET).
- Indicative total funding: 28,495,728 million €¹⁴.

This amount includes a contribution of up to 13,163,102 € by the European Commission.

The Consortia must submit one common project proposal with one partner acting as coordinator.

Evaluation scores will sum up to the same maximum score for both types of projects, which will lead to one combined list of selected proposals. Approval of the list of selected proposals by the AAL General Assembly is expected for the beginning of October 2018.

9. Guide for Applicants

Please always consult the latest version of the Guide for Applicants for detailed information on:

¹³ For more information see Guide for Applicants

¹⁴ See the last chapter for an overview of the AAL Partner States participation.

- How to submit a proposal.
- Application prerequisites.
- Evaluation criteria.
- Selection processes.
- Consortium level and national eligibility criteria.
- Guidelines for integrating end users.
- Guidelines for defining business cases.
- Ethical guidelines.
- Details on where to obtain further information.

Note: Applicants are encouraged to register on the AAL proposal submission website (<https://ems.aal-europe.eu>) before the end of April 2018.

10. AAL Partner States Participation

AAL Partner State	Commitments for Call 2018	Funding collaborative projects	Funding small collaborative projects
Austria	2,000,000 €	yes	yes
Belgium – Innoviris	500,000 €	yes	yes
Belgium – Flanders Innov. & Entrepr. Agency	2,000,000 €	yes	yes
Cyprus	400,000 €	yes	no
Denmark *	500,000 €	no	Yes (only)
Hungary	500,000 €	yes	no
Italy (MIUR)	495,000 €	yes	no
Italy (MoH)	1,000,000 €	yes	yes*****
Italy (Friuli Venezia Giulia)	200,000 €	yes	no
Luxembourg FNR	325,000 €	yes	no
Luxembourg Luxinnovation	325,000 €	yes	no
Netherlands	1,350,000 €	yes	yes
Norway	600,000 €	yes	no
Poland	500,000 €	yes	no
Portugal	500,000 €	yes	yes*****
Romania	1,000,000 €	yes	yes
Slovenia	200,000 €	yes	no
Spain (ISCIII)	650,000 €	yes	yes*****
Spain (Biscay province)	300,000 €	yes	yes*****
Switzerland	1,800,000 €	yes	no
Total eligible for EC Contribution	15,145,000 €		
Canada**	235,868 €	yes	no
Total commitment by AAL Partner States	15,380,868 €		
Expected EC contribution for AAL Call 2017***	13,236,300 €		
Expected total funding commitment	28,617,168 €		

** Awaiting official confirmation of informal commitment in January 2018*

*** Indicative amount (CAD \$353,000), not subject to EC co-funding (Euro Foreign Exchange Reference Rate 5/12/2017 – 1€ = 1.4966CA\$ (ECB))*

**** Pending EC final approval subject to final member commitments*

****** Applicants for a SCP from this country should be aware that their respective national funding authority cannot provide a time to grant shorter than the ordinary one used for the collaborative projects*

Please note: EC co-funding is granted to AAL Partner States (or member organisations), except for Canada, on top of the indicated commitment. The final allocation depends on the call outcome.