

Grant Call on Cognition

National Innovation Challenge on Active and Confident Ageing

Public Briefing
11 November 2015

Programme

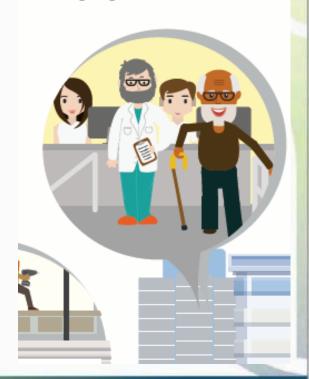
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National Innovation Challenge on Active and Confident Ageing

- The National Innovation Challenge (NIC) on Active and Confident Ageing was announced by Minister for Health and Chairman of the Ministerial Committee on Ageing as part of the Action Plan for Successful Ageing on 26 August 2015
- This NIC seeks to catalyse innovative ideas and research in Singapore that can transform the experience of ageing in Singapore, tomorrow.

More research into ageing issues:

 Up to \$200 million set aside for a National Innovation Challenge to catalyse research related to ageing.



Grant Call on Cognition

- This is our second grant call under the NIC thrust on "Lengthening health span"
- We want to catalyse translational research and innovations in cognition.
- Two objectives for Grant Call on Cognition
 - Improve cognitive functioning and delay the onset of dementia in older adults
 - Provide quality and cost effective care for seniors with dementia in the community

Challenge Statement A

The first challenge is targeted at delaying the onset of dementia or cognitive decline in the population.

Projects should look into formulating a scaleable preventive intervention programme that can be used safely to improve cognitive functioning or delay the onset of cognitive decline in seniors.

Challenge Statement B

The second challenge is targeted at caring for seniors who have been diagnosed with dementia or cognitive impairment.

Projects should look into innovating a new model of care in caring for seniors with high cognitive impairment or dementia effectively in the community as an alternative to institutionalization in a nursing home.

Examples of Projects

Challenge Statement A

- A community-based brain stimulation activity using end-user mobile information-technology devices that enhance cognitive functioning in seniors
- A set of physical and social activities as well as accompanying nutrition plan to be implemented in senior care centres to help seniors delay the onset of dementia

Challenge Statement B

- A new model of home and community based care that can achieve more comprehensive and more enabling care for persons with dementia, without a reduction in cost effectiveness
- Use of tele-health technologies to enable senior care centres to better care for seniors with dementia in the community and reduce the need for physical visits to a specialist.

Eligibility

- Participants forming Project Teams can submit more than one Grant
 Proposals in response to any of the challenge statements but only one
 Project from a particular Project Team will be awarded with the Grant.
- Open to all public and private healthcare providers, research institutes and institutes of higher learning (IHLs).
- Healthcare providers or IHLs can partner commercial entities in the project teams, but these must be Singapore-registered companies.
- Project teams are to identify a 'Host Organisation' for the administration of the project

Project Team Composition

- Required to partner an implementation partner and form a Project Team comprising:
 - Members from multi-disciplinary (e.g. pairing medical and technology, engineering) background and/or involving more than one institution; and
 - An implementation partner such as a service provider (eg. healthcare provider, senior care centre, senior activity centre) or a community organisation (eg. a self-help group, voluntary welfare organisations, grassroots organisations). Potential service providers can be found on the website, https://www.silverpages.sg/.
- No restriction on the number of Participants in each Project Team
- Participants are expected to form their own partnerships

Project Funding

- Awardees may qualify for up to 80% funding of approved qualifying costs to develop and implement their Project for a period of up to 3 years, with the possibility of extension for another 1 year.
- Qualifying costs include both developmental and operating costs
- Project Teams are expected to co-fund the remaining 20% of qualifying costs
- Support for indirect costs, on top of supportable qualifying costs, is capped at 20% of the supportable qualifying direct costs
- Funding will be provided in phases and subjected to the successful attainment of milestones and Key Performance Indicators (KPIs) tied to each phase

Explanation of Costs

- In general, qualifying costs are direct costs that are required to execute or implement the Project, and are held accountable to the performance of the particular Project. These include,
 - Expenditure on manpower (EOM);
 - Expenditure on new equipment; and
 - Other operating expenses (OOE)
- Indirect costs are are those that are incurred for common or joint
 objectives and therefore cannot be identified readily and specifically with a
 particular Project, but contribute to the ability of the Host Organisation to
 support Projects. Examples include,
 - General administration and general expenses (eg. providing of research space)
 - Operation, maintenance and departmental administration expenses
 - Library expenses, departmental administration expenses

Project Phases

Project teams will have the **flexibility to decide the time allocated** to the phases as follows,

Design phase (Proof-of-concept). Project teams are to articulate the concept of the programme / service / prototype and the process by which to achieve stated outcomes. Project teams should also provide studies and analyses that support the concept's viability for further development.

Development phase (Proof-of-value). Project teams are to develop and validate the programme / service / prototype so that it takes on a clearer form to achieve the intended outcomes.

Implementation phase (Test-bedding) - At least one year. In this phase, project teams are to test and validate the programme / service / prototype in the field (a relevant environment). This phase may also include initial production or roll out.

Application Process

Proposals will be evaluated through a two-stage process

Project Abstract

- First, submit a short 6-page Proposal Abstract of the Project, including a comprehensive literature review that show the reasons for choosing a particular solution
- Project Teams are to use the "Project Abstract Submission Template" that can be downloaded from NMRC webpage
- Two hard copies of the Project Abstract and any supporting documents should reach MOH no later than 8 January 2016 at 1700hrs.
- Project Teams shall email soft copies to <u>NIC Ageing@moh.gov.sg</u> by the deadline

Project Proposal

Shortlisted proposals will then be invited to submit a detailed Project
 Proposal. This will be evaluated by an evaluation panel.

Project Abstract

- Objective(s) of the Project;
- Literature review and the evidence/basis for the Project;
- Key components and innovations of the Project;
- How the Project could address the challenge statement
- Summary of the implementation plan, timelines and milestones of the Project; and
- Summary of the evaluation framework and KPIs to track for the Project.

Additional Guidance

Roles and Responsibilities

The roles and responsibilities of every Member of the Project Team must be clearly specified.

Preventive Intervention Programme or Care Model

- To articulate in detail their preventive intervention programme or care model and approach towards care planning and service delivery.
- Project Teams will be expected to test-bed the proposed solution at the implementation phase if awarded the Grant.
- Expected to ensure the safety and well-being of clients involved in any activity conducted in relation to the NIC is not compromised in any manner whatsoever.

Implementation Plan.

Project Teams are required to describe all implementation activities, stages,
 Milestones and targets.

Key Performance Indicators

Key Area	KPI (to state current and target by Phases)
Challenge Statement A	Project Teams are to demonstrate <u>improvement in cognitive functioning or a</u> <u>reduction in the risk of cognitive decline</u> .
Improvement in Cognitive Functioning	
Challenge Statement B	Project Teams are to demonstrate <u>better care for dementia patients in the community without increase in costs</u> .
Care in the Community	
For both challenge statements	Project Teams are to propose <u>at least three clinical/client KPIs</u> to track. Possible clinical / client KPIs can include:
Quality	 Customer satisfaction Level of caregiver stress / burden Improvement in functional, physiological, emotional, behavioural and/or cognitive wellbeing as measured by appropriate tools Number and frequency of hospital (re)admissions of enrolled clients Number of nursing home admissions
For both challenge statements	The <u>preventive intervention programme</u> must show that it is <u>cost-effective</u> .
Cost-effectiveness	The <u>new model of care</u> in the community should also demonstrate that it can be delivered at a <u>lower cost as compared to institutionalisation</u> in a nursing home <u>without any compromise to quality</u> .

Broad Evaluation Criteria

Component	Evaluation Criteria
Grant Requirements	Proposal Submission
	Locally-Based Project & Team Lead
	Team Composition
	Address Challenge Statement
General	Background of Team Lead
	Track record
Business	Scalability of proposed solution
	Sustainability of proposed solution
	 Innovativeness of proposed solution
Performance	 Proposed Programme/Care model (including scientific
	excellence)
	Proposed outcomes
Implementation	Project feasibility in the local context
	 Clear implementation plans with demonstrable
	outcomes in field pilot stage
	Reasonableness of funding request and charges

Timeline

Activity	Date
Call for Grant Proposals	9 November 2 <mark>015 (Mon)</mark>
Public Briefing	11 November 2015 (Wed)
Deadline for Proposal Abstract Submission	8 January 2016 (Fri)
Deadline for Submission of Project Proposal	29 February 2016 (Mon)
Announcement of Results	By June 2016

Questions?

For enquiries, please email NIC Ageing@moh.gov.sg