



RaDAR InfoDay

This presentation is an indication of a potential future procurement activity and is subject to change until the publication of the RfT

All the information regarding RaDAR project will be published on the following website:

<https://radar-ppi.com/>



Antimicrobial Resistance Problem



The Problem

In 2019:

- **4.95 million** people died from illnesses in which bacterial AMR played a part.
- **1.27 million** as direct result of AMR.

More deaths than cancer by **2050**

High economic burden: **1.5 billion** euros annually in healthcare costs and productivity losses in EU

The manner we treat infections now will endanger our health in the future

The Need

To respond Joint Action on Antimicrobial Resistance (EU-JAMRAI) and EU Action plan (2017-2020):

- Improve **early detection systems** to ensure **quality care process**
- **Screen drug-resistance and virulence** to improve **treatment effectiveness**
- **Reduce** both healthcare and governmental **costs**
- Reporting and **rapid communication** to **increase system resilience***

***Covid-19 pandemic** has showed the importance of effective infection detection and control systems in controlling the rapid spread of infections



Co-funded by the COSME programme of the European Union



Consortium

Buyers

1. RESAH (Lead Procurer) - France
2. Basque Health Service - Spain
3. Catalan Institute of Oncology - Spain
4. University of Naples Federico II - Public Health Department – Italy

Supporting Entities

5. AQuAS (Coordination) – Spain
6. INSERM – France
7. INSME – Italy
8. JERA- UK
9. BG-HRI- Spain





RaDAR Buyers Group

Osakidetza

Basque Health Service

16 hospitals
160 Primary Care Centers
2.71 million population



Catalan Institute of Oncology (ICO)

Reference Oncology Center in Catalonia

4 oncology centers
VINCat: 73 hospitals; 370 Primary Care Centers;
92 socio-health centers
7.57 million population



Central Purchasing Body in France

Preparatory phase at the University Hospital of Limoges

130 regional hospitals
67.75 million population



Resah

Department of Public Health – University of Naples Federico II

Federico II University Hospital - 1500 medical staff members.

Provides specialized services for: Local health agencies, hospitals, public and private organizations.

5.87 million population



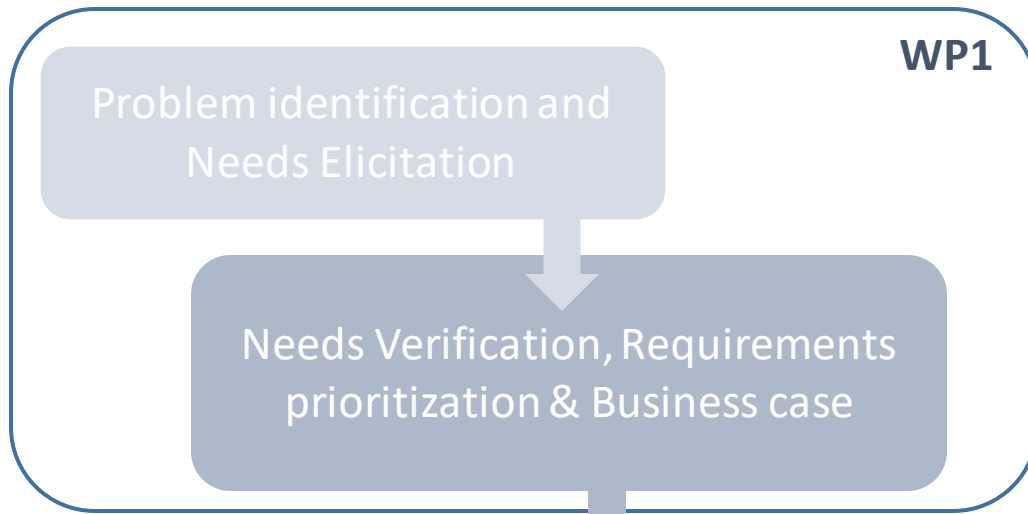
UNINA -Campania



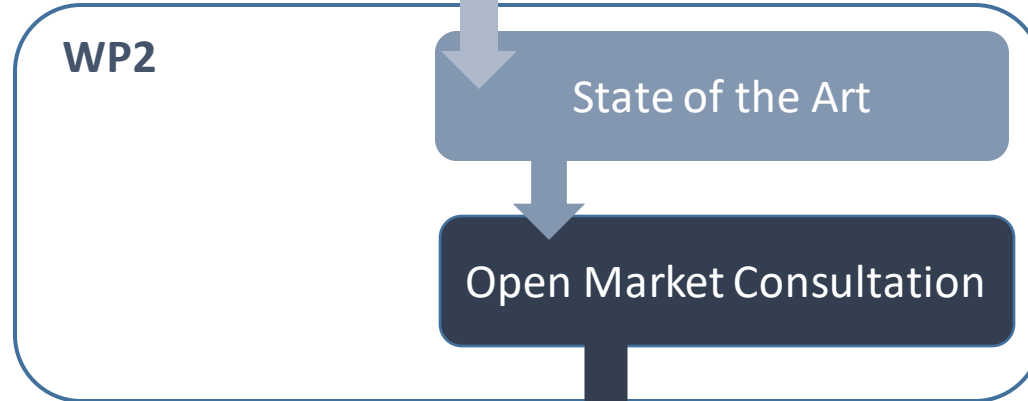
From needs to CfT definition methodology

Methodological framework for PCP/PPI © 2023 by Innovation and Prospective Unit at Agència de Qualitat i Avaluació Sanitàries de Catalunya is licensed under [CC BY-NC-SA 4.0](https://creativecommons.org/licenses/by-nc-sa/4.0/)

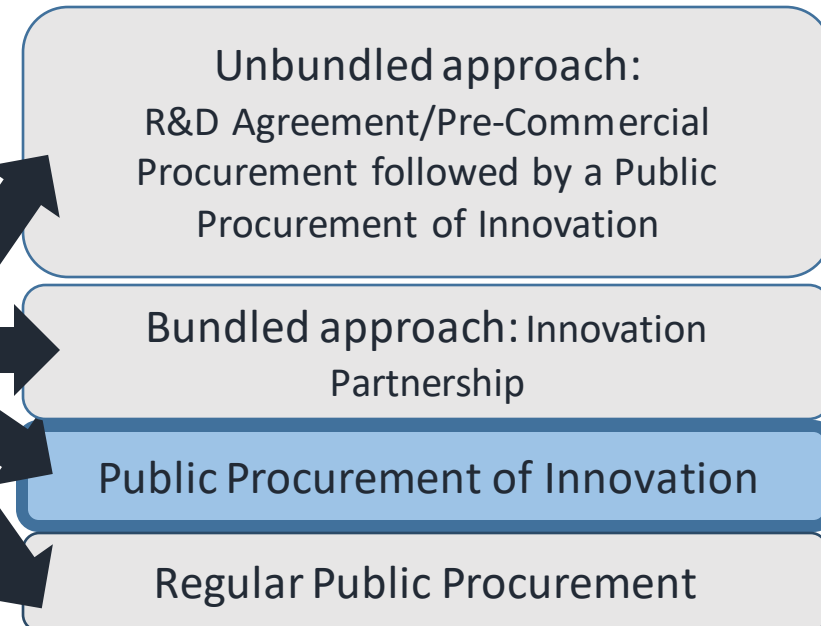
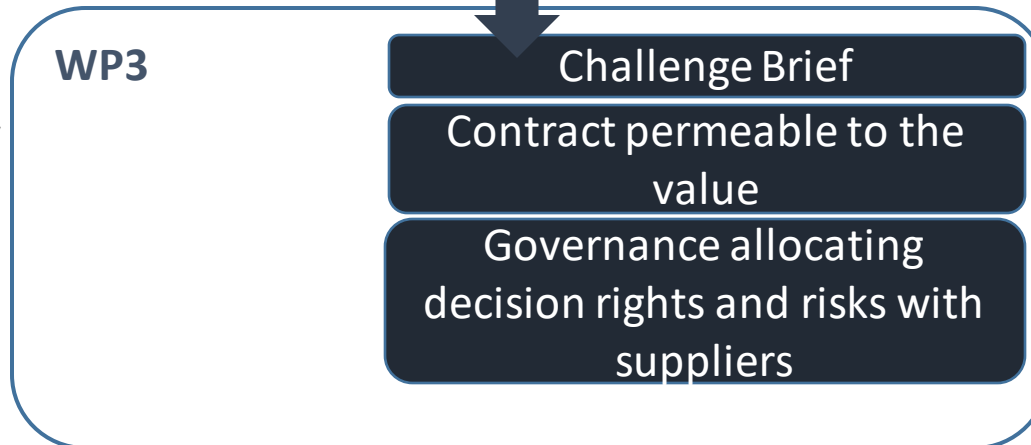
Demand/Needs
Desirability
Assessment



Market Maturity
and Feasibility
Assessment



Demand Feasibility
and Viability
Assessment



Current workflow



- ✓ Lack of screening
- ✓ Difficulties for key data visualization

- ✓ Complex sample extraction
- ✓ Lab-based slow diagnostic test
- ✓ Specialized personnel for testing and data interpretation
- ✓ Not appropriate use of broad spectrum antimicrobial (empiric treatment)
- ✓ Difficulties for communication between important stakeholders
- ✓ Difficulties for key patient data visualization before decision making
- ✓ Difficulties for stewardship data visualization (local & regional)

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RaDAR Market Readiness Assessment



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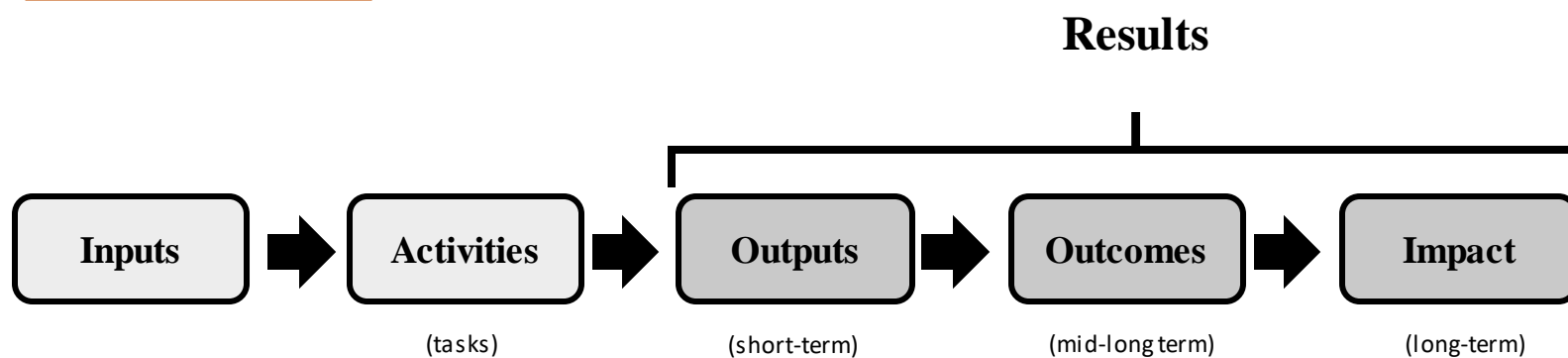


Market engagement	Numbers
PINs	5
Market Consultation Events	5
Responses to the market sounding	67
Total (market) participants in market consultation events	164
Market contacts informed of market sounding launch	263
Bi-lateral (buyer - suppliers) meetings*	48
Countries represented in bi-lateral meetings	12



RaDAR Evaluation Framework: Value-based permeability methodology






Theory of Change



Theory of Change presented in a result chain per stakeholder



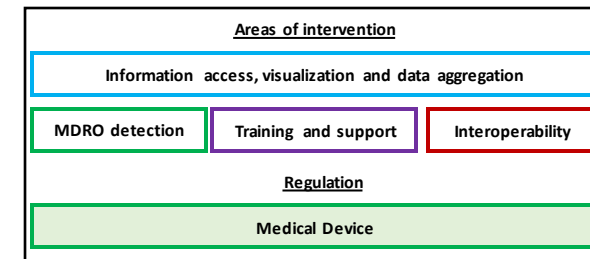
Challenge-agnostic results for a PCP/PPI

- 1 Patient-level results**
 - a) PROM
 - b) PREM
 - c) Determinants of health
 - d) Long-term treatment improvement
- 2 HC-Professionals-level results**
 - a) Benefits healthcare providers
 - b) Workplace environment / culture
- 3 HC-Provider results**
 - a) Organizational aspects
 - b) Costs
 - c) Process
 - d) Technological aspects
- 4 Health System-level results**
 - a) Economic sustainability
 - b) Safety and sustainability
 - c) Long-term treatment improvement
- 5 Socio-economic-level results**
 - a) Social determinants
 - b) Economic evaluation and HTA



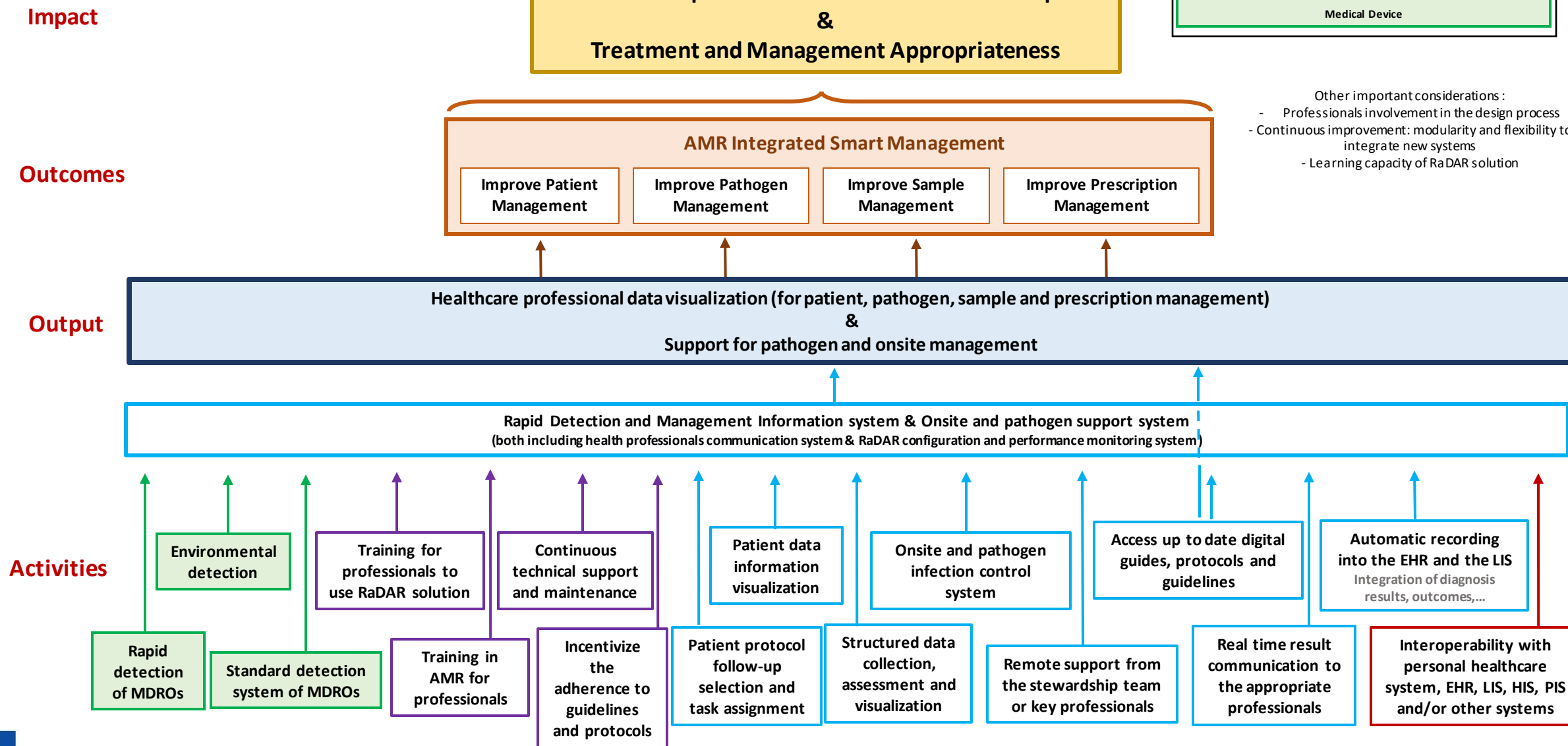
Theory of change: RaDAR PPI results

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- Other important considerations:
- Professionals involvement in the design process
 - Continuous improvement: modularity and flexibility to integrate new systems
 - Learning capacity of RaDAR solution

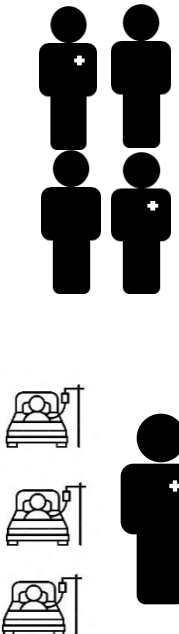
Theory of change



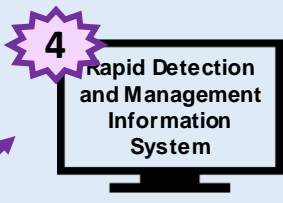
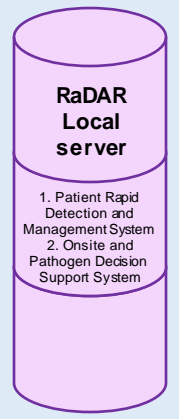
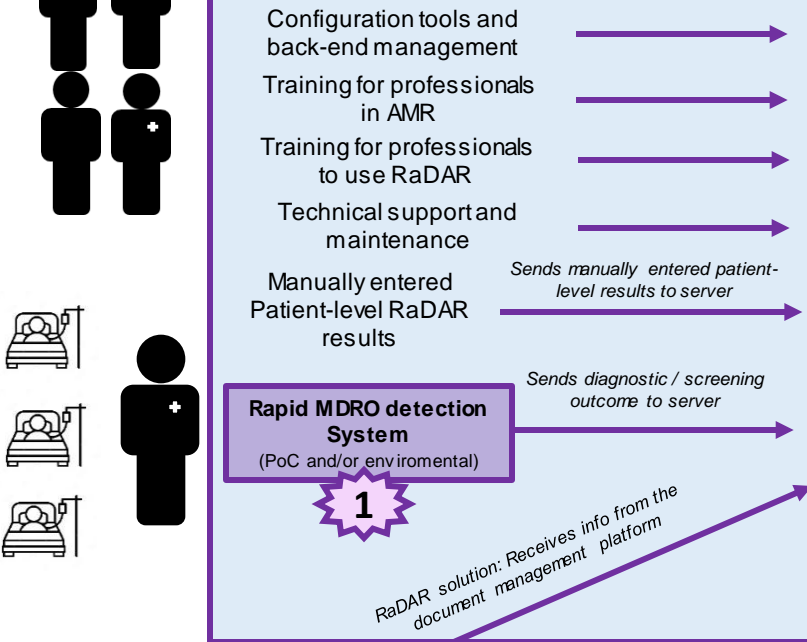
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RaDAR solution

collect, retrieve by interoperating (His), store, process and visualize



Digital guidelines and protocols **2**



- Patient data information visualization
 - Real time result communication
- Patient protocol follow-up selection and task assignment
- Incentivize the adherence to guidelines and protocols
 - Structured data collection and visualization

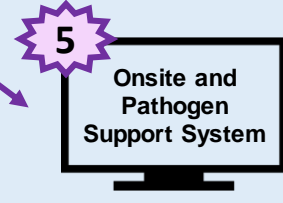
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Users with access:

- Near to patient healthcare professionals
- Microbiology team professionals
- Pharmacy team professionals
- Stewardship team- Onsite management
- Financial management team

6

- Both systems should include:**
- Assessment of RaDAR user access, support and maintenance and training
 - RaDAR configuration and performance monitoring system
 - Remote support from the stewardship team and/or other key stakeholders (Health professionals communication system)



- Onsite and pathogen infection control system
 - Real time result communication
- Incentivize the adherence to guidelines and protocols
- Structured data collection, assessment and visualization

Interoperable engine

Interoperable engine

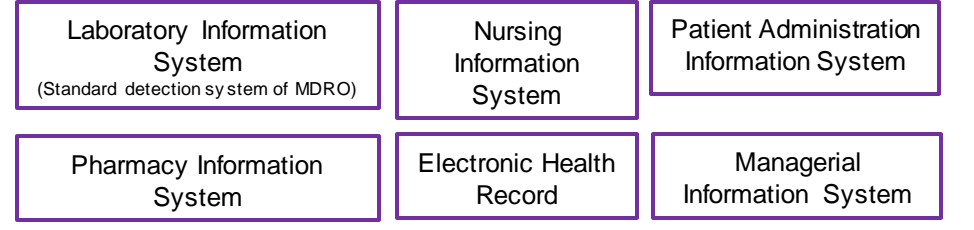
RaDAR solution: Receives info from the document management platform

RaDAR solution: Receives info from the HIS

RaDAR solution: Push XML, CSV, PDF for visualization + push relevant data

3

Hospital Information System



Object of the Contract

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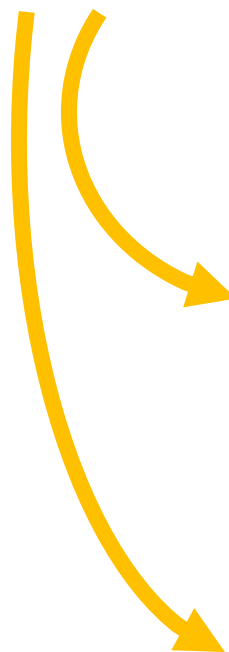


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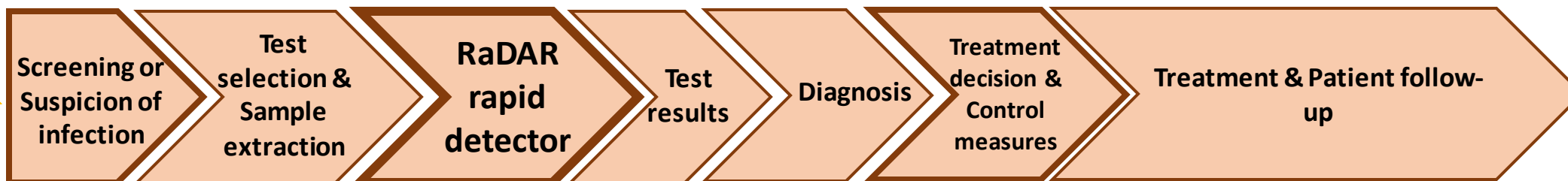




Workflow after RaDAR implementation



Rapid Detection and Management Information System



Onsite and Pathogen Support System

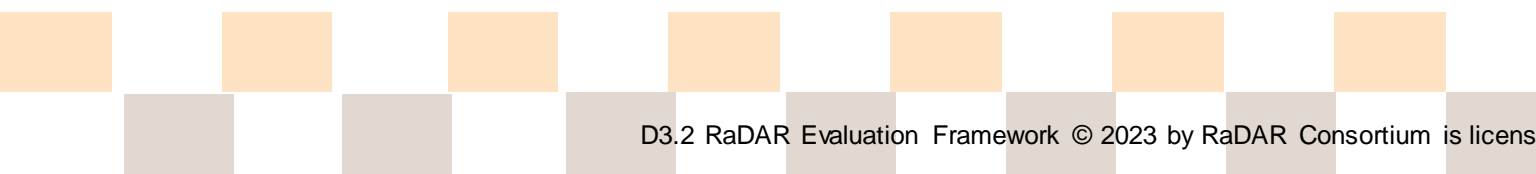
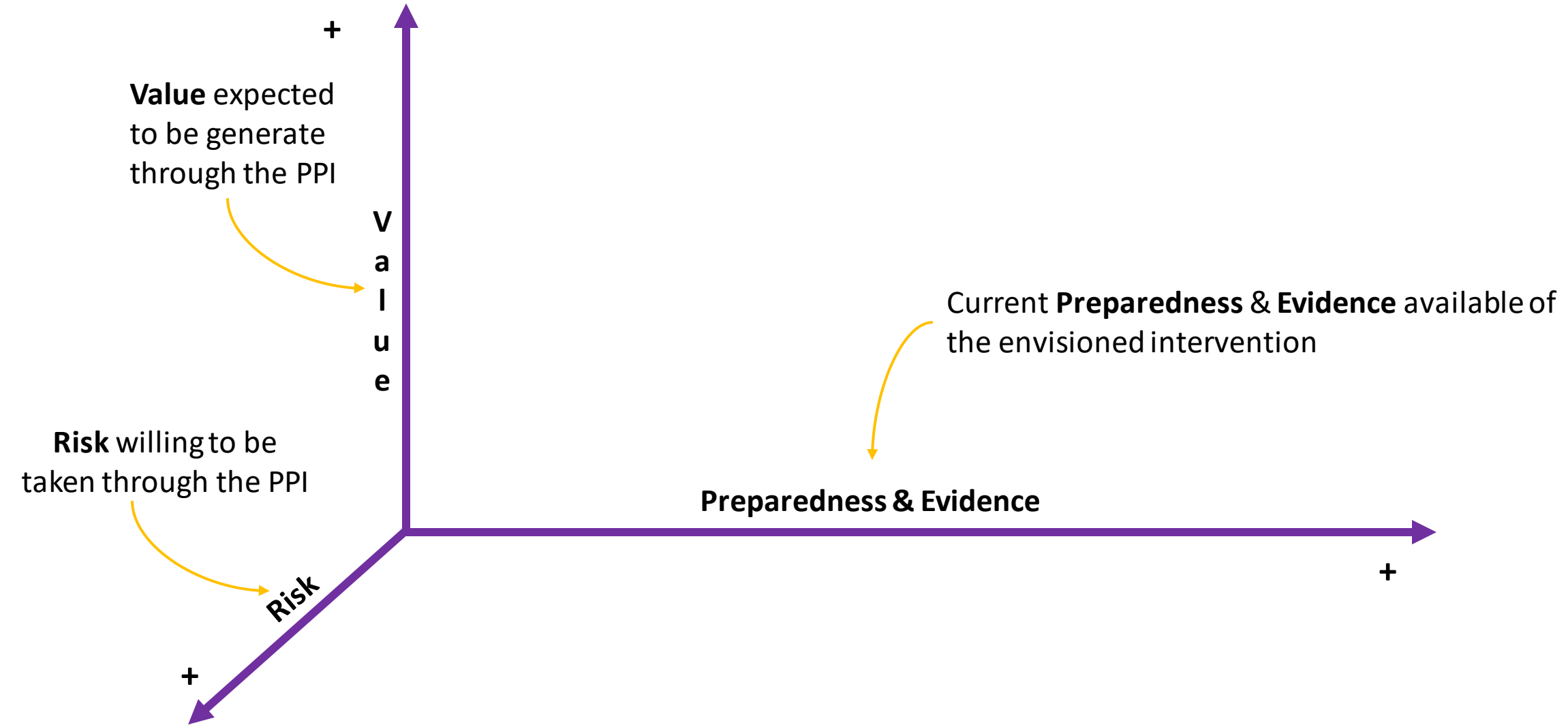
RaDAR configuration and performance monitoring system

Health professionals communication system

Training & Continuous support and maintenance



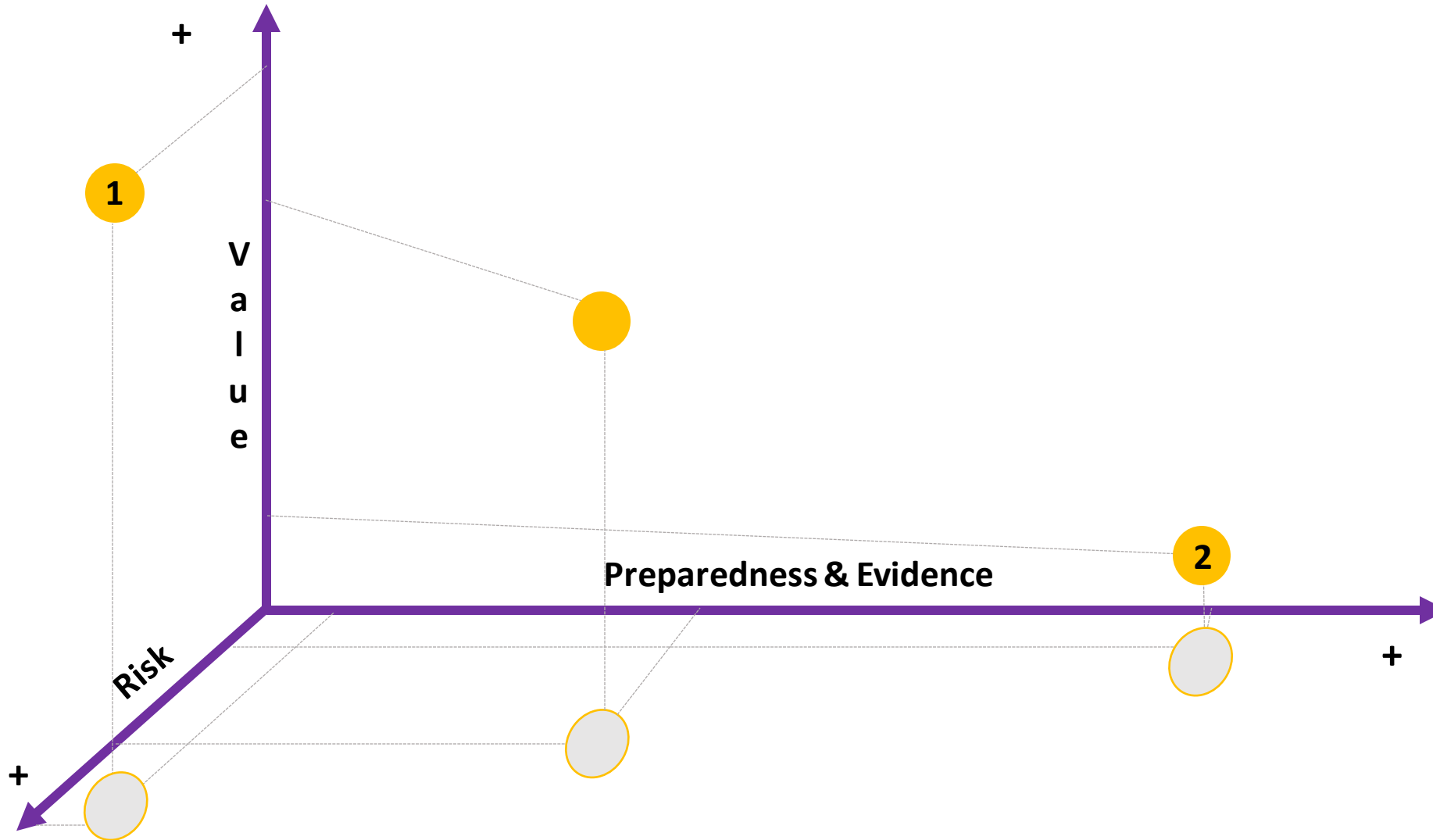
Levels of value, risk, preparedness and evidence



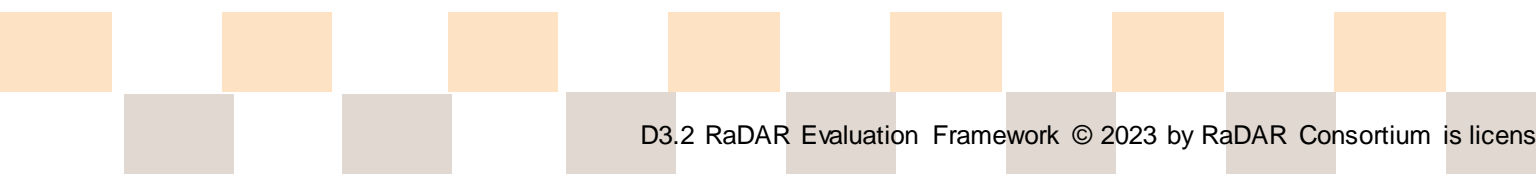
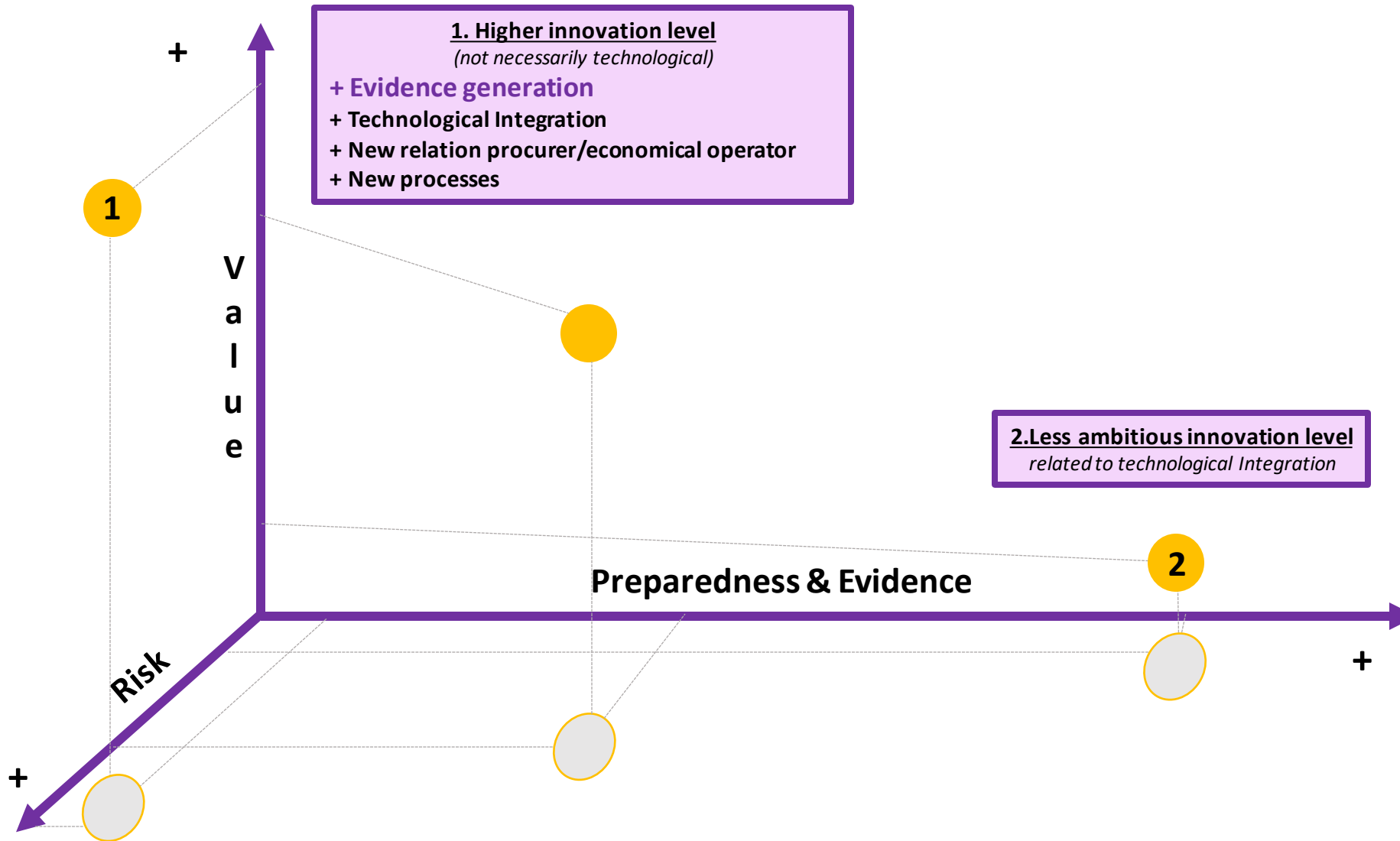
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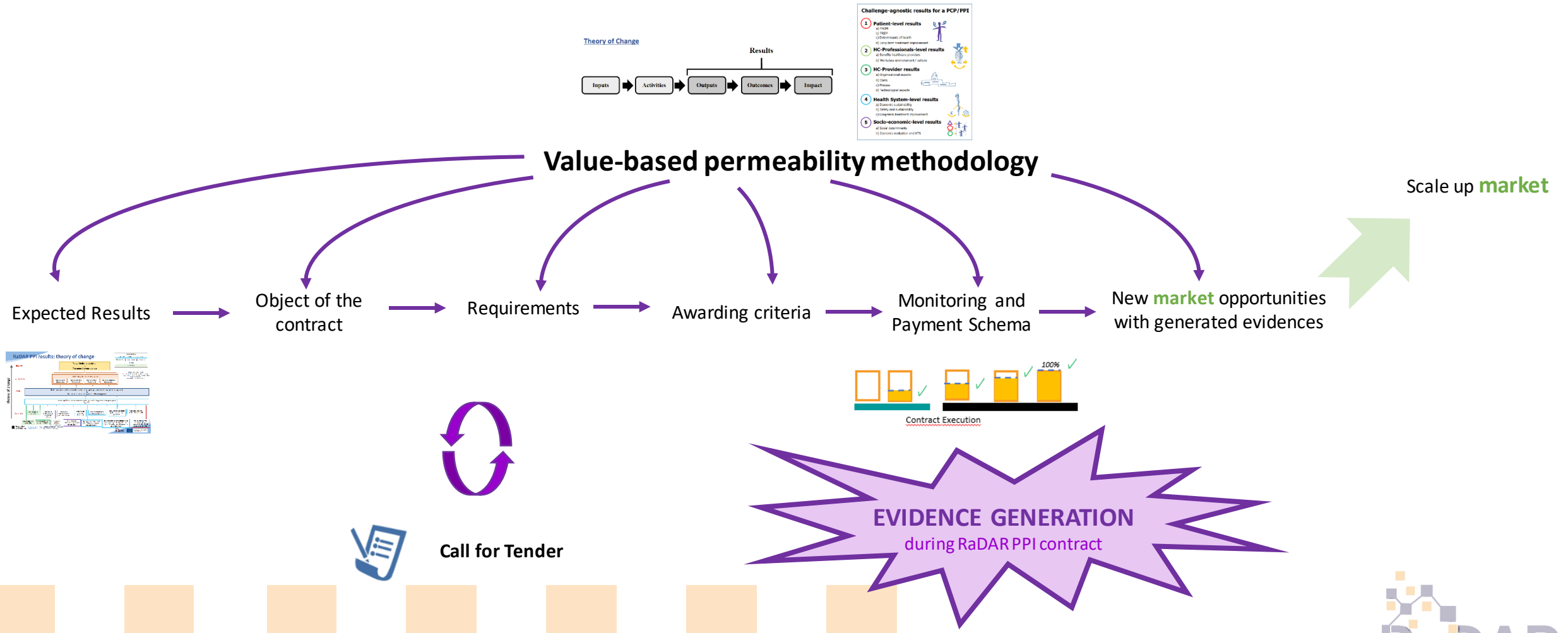
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Levels of value, risk, preparedness and evidence



Value-based permeability methodology applied to RaDAR to elaborate the Evaluation Framework



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Thank you!

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