conference. Acting to address these problems whatever they are, is not only do for but first and foremost do with and let it done. To succeed we must:

– purpose to support a person throughout life irrespective of his age;
– proceed to this necessary change by changing practices, the use of innovations, changes in professional cultures. . . .

Many of our systems are built on an organization where supply dictates demand. Now, the user is the common point of all economic issues. His participation should not be limited to the listening of the needs alone. It is essential to involve the person from design to experiments in a living situation and provide an economic and medico-social assessment. This doesn't mean to be inside but take his place in order to adapt the environment to the elderly, sick and/or disabled person. For this purpose, we are one of autonomic lab partners. There is a condition for this success: Make these networks work in complementary skills including different trades care, guidance, and research from the University, the public health and the industry, public authorities, elected officials. Co build increases the chances of success and distribution of solutions and devices proposed in this process. The heart of this new industry is; to highlight the person, to prioritize and simplify the care pathway, to highlight the desired route: from the choice of the necessary complementarities between human assistance and technical aids, to not confuse resource and compensation, gateways between trades of CARE and take CARE to make a real life course, to legitimate their respective competences. Finally, the desire to improve life expectancy in good health and living together.

Keywords Supply; Userl; Complementarity; Co-construction

Disclosure of interest The author has not supplied his/her declaration of conflict of interest.

http://dx.doi.org/10.1016/j.rehab.2015.07.132

CO16-001-e

MACVIA-LR: Against chronic diseases for active ageing

J. Bousquet (Prof)
CHU de Montpellier, Montpellier, France
E-mail address: jean.bousquet@orange.fr

MACVIA-LR® (Against Chronic Diseases for Active Ageing in Languedoc-Roussillon) is a European Partnership Reference site of Innovation for Active Ageing and Good Health. He answered all of the Action Plan EIP on AHA (Health–European Innovation Partnership on Active and Healthy Ageing; EIP on AHA, A1, A2, A3, B3, C2, D4) by 12 vertical projects which were grouped into transversal activities as Living Labs MACVIA-LR® interactive and networked:

– Living Labs “Medicine and Health” grouped into 4 main areas:
  – Set active aging and healthy by i) the promotion of active and healthy ageing during life; (ii) Ageing well with a rare genetic disease (cystic fibrosis); (iii) Ageing well with cancer; (iv) Preventing and treating fragility.
  – The falls with the specific problems of balance and stroke,
  – Chronic Diseases in general but also the chronic infectious diseases and hepatitis, dental health, emergency care in chronic diseases, telemedicine in medical deserts of Languedoc Roussillon,
  – Handicap,
  – Living Labs “health and autonomy”: L’Etape, CCAS Lattes, I2ML, Spa Balaruc .;
  – Living Lab “Health and Research” with Kyomed.

The presentation will aim to recall the history of the MACVIA-LR action plan in a regional dynamic creation of Living-Labs and its prospective in terms of innovation for the patient.

Keywords Living labs; Chronic disease; Ageing