Network on family support in elderly care policies

INTRODUCTION
AND BACKGROUND

The project proposal related to a social sector business about sustainable elderly care started off during an NTT+Transnational meeting where some European countries discovered that the culture between northern and southern Europe in the area of elderly care is very different but at the same time they had a common problem such as the progressive getting older of European citizens. Working on this idea some Municipalities of Finland, Italy, Spain and Sweden decided to present the project entitled. "NETwork on family support in ELderly CAre" – ELCANET. The Municipalities involved in this project, comparing their own local situation, realized that in the northern model the emphasis is on living by themselves and in public services (including private services providers, NGOs and associations); the southern model emphasizes the role of families as care providers. Still in both cases the families need to be supported. In the sphere of elderly care both families and local authorities are key actors. Municipalities won't be able to respond to the increasing need of social and health care services for elderly within the existing models and solutions. In order to create a network dealing effectively with the above mentioned problems the actions of the project aimed to increase the knowledge of the managers of welfare policies and best practices at European level; to improve practical skills and deeper knowledge of how to support families or alone living elderly people; to implement new practices in studying and training programmes; to increase interaction between service providers and educational institutions; to increase knowledge and dissemination of ITC based solutions coming from the other partners. Therefore the project faced to problems of common interest for the partners involved and focused on family support which means also facing to different sectors: Policies, Services, Education, Prevention and ITC solutions, and Service provider related issues that is relations between public and other service providers. The project consisted of 9 events that took place in the different municipalities of the member partners of the project, along two years 2011-2012.

The first activity was the coordination meeting during which the partnership focused on a common methodology to be adopted in the following

events in order to get the results expected and definition of the working groups.
Therefore it was decided to create 4 working groups and for each
of them it was defined a transnational coordinator
Each local group selected a contact person who dealt with a
transnational coordinator of the specific issue

The 4 THEMATIC working groups:
1. **ICT possibilities** in elderly care (transnational coordinator ITALY)
2. **Education and Training** (transnational coordinator FINLAND)
3. **Home Services** (transnational coordinator SWEDEN)
4. **Activation and Prevention** (transnational coordinator ITALY)

It was also established to organize a seminar meeting entitled:
"Equal opportunities in family support". This issue will not become object
for a working group, but for a seminar meeting in Cambre.
Each working group will be lead by a transnational coordinator (from the coordination Country)

Definition of other important aspects for a good development of the project itself:

Economical and financial planning
EVENTS AND DATES
Coordination of events:
Working groups and working methods
Communications between the events
Guided visits linked to the project
Logistics, food and accommodation
Web, CD, and PUBLICATION

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LOGOTYPE
Evaluation
Events
local actions
interactions local actions / partner

FORMAT
Part one (general)
Policies for Elders
Demographics (Municipality or
Union of Municipalities)
Population
Males – females
Age groups (in particular =/> 65 and =/>75)
Life expectancy
Average income pro capita (>65)
Geographic distribution related to >65
(mountain, plain, rural area, city)
Living alone or with the family? Number
Living at home or in a Structure? Number
How many Elders in Residential Structures?
How many Elders in protected apartments?
How many Elders in semi-residential Structures?
How many Elders get Home assistance?
How many Elders get private Home
assistance (Helpers or else)?
Ratio between demand and offer

Laws
National, regional, local

A short description focusing the principal
aspects of the laws, the political strategies of
the country and the competences required
Services
Institutions dealing with Elderly care policies
Competences and charges (public
/ private/ fees on the Elders)
How Services work
Professionals (competences)

Part two (thematic areas)

Each thematic area: focus on

Current situation
Best experiences
Hardships / problems

After the kick off meeting the partnership
organised the following 8 events which unfolded
during 24 months in order to develop the four
thematic issues (4 meetings 2 each year):
◉   Opening Conference in Pori (Finland);

- ◉ Seminar on "Equal opportunities in family support" in Cambre (Spain);
- ◉ First thematic working groups on: "Home services"; "Education and training" in Jyväskylä;
- ◉ Second thematic working groups on: "Activation and Prevention";
  "ITC possibilities in elderly care" in Borgo Val di Taro (Italy);
- ◉ Half way evaluation meeting in Salsomaggiore (Italy)
- ◉ Report of the results of the first 2 thematic working groups:
  "Home services"; "Education and training" in Ravenna (Italy);
- ◉ Report and results of the second thematic working groups on:
  "Activation and Prevention"; "ITC possibilities in elderly care" in Pori (Finland);
- ◉ Final Conference in Ravenna (Italy)

It must be underlined that each Municipality could feel free to choose which working group
participate according to their peculiar local interest about the issue treated. This choice took place
after all partners presentations of their own local situation at the end of the opening conference.
Consequently to this some working groups involved all partners and other only 2 or 3 partners.
The sixth activity that is "Half way evaluation" was particularly important for two reasons:
examination of the different goals achieved by the different working groups throughout
a comparison of the best practices carried out in their own countries; secondly, the
evaluation of the methods, tools and decisions adopted by the coordination group in
order to get the basic goals of the project outline provided in the application.

The final event indicated the expected results of the project and
dissemination of the results of different thematic groups.
Some partners showed great interest in continuing the work started with this project and some
declared to be available to find new project proposals especially supporting ICT solutions involving
Universities and Small Medium Enterprises and developing Activation and Prevention issues.

Equal opportunities for family support

Work with the elderly people and not only for

PARTNERSHIP

Lead partner Municipality of Ravenna (Italy) and the partnership of:

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The elderly have the same rights to health care and assisted living

Combined legislation for health and social services

DETAILED PLANNING OF EVENTS

■ OPENING CONFERENCE

The event that took place in Finland (Pori) involving about 50 people was the first important occasion to meet all countries partners, representatives of the Municipalities and experts of elderly care. According to what established during the coordination meeting, through an agreed common format, sent previously to all coordinators of the project, each partner presented the elderly care services and policies of its own Municipality such as: presentation of the legislation (institutional systems), organization of services related to elderly care at local and regional level; presentation of services aimed to support families. After all presentations the activities of the conference continued according to 4 theme-based workshop in groups:

a)   Activation and prevention;
b)   Home services;
c)   Education and training;
d)   ICT possibilities

The groups worked separately examining some aspects of elderly policies such as: the role of service providers in each country; content of the education/training for operators in the elderly care sector and ICT. The people involved in the different thematic groups agreed on finding common terms in English corresponding to the various operators working in elderly sector, a sort of glossary to better understand each other when talking about some specific issues. A plenary assembly followed and it was particularly interesting to discover that Italy and Spain have similar experiences while the Northern countries (Finland and Sweden) have similar experiences as well. Some visits to structures for elder people in Pori completed the delegations' knowledge.

■ SEMINAR on: "EQUAL OPPORTUNITIES IN THE SUPPORT OF FAMILIES WHO CARE FOR ELDERLY PEOPLE"

The event took place in Spain (Cambre) involving about 60 people, not only experts and operators of the sector but also local people who take care of elderly inside the family.

The Seminar was divided into two different parts and, based on that, work was carried out in two big blocks; on one hand, networking with the partners, which included being their hosts at the Municipality of Cambre and cultural trips. On the other hand, the technical seminar, strictly speaking, and the meeting to coordinate the project, which included monitoring the project and setting the guidelines for the next event, among other points in the agenda.

▸ Presentation of the SWOT analysis for each equal opportunity system of the participating partners Working in group. Summary and debate on the presentations;
▸ Best practices presentation
▸ Best practices conclusion

Seminar's conclusions

The technical seminar was a turning a point in the project as it helped make the gender perspective more visible and include it in the global project ELCANET, along with the equal opportunities concept in the service access – the key issues in the event held in Cambre but treated very differently in the rest of events.

In addition to these two issues, the presentations in the morning session and the work shops in the afternoon put forward a number of factors shared by most of the partners in the project, which we should take into account, highlighting some of them:

◗ Geographical dispersion
◗ Unequal purchasing power
◗ Complex burocracy procedures
◗ Delay in the application of the services with the exception of a proven emergency
◗ Population aging, increase in the number of people over 65 years old

Another shared thought was that there is a need to include new innovation projects and search for alternative and creative solutions in the current economic climate, when it is more necessary than ever to optimise the resources available in this world crisis.

■ THEMATIC WORKING GROUPS MEETING: "HOMECARE SERVICES" and "EDUCATION AND TRAINING" IN ELDERLY CARE

The event took place in Finland (Jyväskylä) and
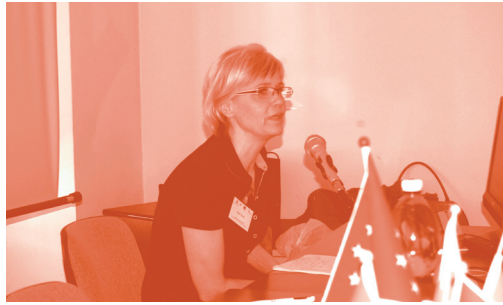
involved about 50 people that is: operators and professionals working in Homecare services.

Thematic Group: "Home services in elderly care" (Borgo val di Taro, Cambre, Jyväskylä, Myolby, Ravenna are the participant partners)

The working group has focused attention on the different approaches and experiences of different cities. Have been illustrated and described the different realities, with particular reference to the actions and interventions that have been planned. In particular, we have examined care services time, comparing the different practices. It was highlighted the need to share a general glossary. Starting from the question "What characteristics should the ideal service have?", we have identified the best practices illustrated by the different situations, and one objective was to design "the perfect service." Development perspectives: each Municipality, examining its standard model of reference, begins to align with those best practices that, in reference to their peculiarities and specificities, seem more sustainable.

Thematic Group: "Educational Issues" (Jyväskylä, Pori and Ravenna are the participant partners)

The working group has dealt with the connections existing between training, education and case management, and worked primarily to identify and develop a "ideal" case management model. Each reality has to take stock of its experiences related to case management, in order to identify, through a proper comparison, the most effective path (let's say the best practices). Later, each reality identifies, according to its peculiarities, which can be the most sustainable path. In our next thematic group meeting we'll face the educational and training qualification of all those people dealing with social issues. It also includes the acquisition point of view of students, in particular as regards the model of case management.

The thematic group "Educational issues" prepared and shared a common glossary as well in order to define objectively and uniformly the various professionals involved in the processes being compared, in terms of roles and responsibilities.

■ THEMATIC WORKING GROUPS MEETING: "ACTIVATION AND PREVENTION" and "ICT POSSIBILITIES" IN ELDERLY CARE

The event took place in Italy (Borgo Val di Taro) and involved about 50 people that is: operators and professionals working in Local Healthcare Service and University Departments.

Thematic Group: "Activation and Prevention" (Borgo Val di Taro, Cambre, Jyväskylä, Mjolby e Ravenna are the participant partners)

The work of this group starts by inviting all participants to reflect on the words "Activation" and "Prevention" and thus to indicate points of divergence and similarities among the different countries involved in the project. The question is, can be found and shared common features?
The concept of "Activation" is clear to everyone thanks to all the illustrations done during the first part of the meeting.

With regard to Finnish and Spanish Municipalities it is an activity aimed at a pre-identified population because in Spain it is intended not only to a selected population, but to the entire elderly population;
In Pori (Finland) for example it is a health department and an assessment model for evaluating health care system in the elderly over the age of 75.
A questionnaire is used, a specific list to which to refer to switch activities.
Regarding Cambre "activation" means to activate the policy and not only reach people in need; so we mean activation in order to make the elderly live an active life.
Obviously the way to do this affects the risk situations of frailty and independence.
It is also said that the thematic group must overcome their different definitions of "activation" and possibly find a common one and do not forget that the title of the project is "Support to families." A first aim therefore is to support the families, extended to the elderly to improve their lives; therefore we should broaden the meaning of the term activation even towards the family and secondly, activation towards the elderly to improve their lives.

Then turning to the concept of "Prevention" it is asked the audience which they consider the fundamental differences between the definitions provided by the different partners. Always bearing in mind the basic theme that is "support the family": what is meant by prevention towards family members? The answer is: "support to patients and support to the families of patients. In this sense, one must remember the vital role played by institutions. And this is the innovative aspect of the self-management that is in reference to future developments and to understand better what is meant by "family" term. In the Northern countries the concept of culture is different because the children aged 18 years go away and elderly people are left alone and abandoned.
We need to find innovative strategies which means to find new families or extended families; it is therefore necessary to combine our and your experiences.
Then implementing "prevention" in the elderly means to implement an educational process towards those who look after the fragile person, whether they are volunteers, professionals, family, etc.

For Spanish partner, prevention means taking action before something happens, before these people (elderly) remain alone and so give the elder the same education and training.
It is also underlined that it a very interesting the idea is that people who deal with older people should try to maximize their ability to limit the assistance from the top and have a bottom-up approach; in short: what can these people do from themselves, starting from their personal resources? It's obvious that this theory is not applicable to very sick people; for them, you can do nothing but provide services that cost a lot. Therefore to face this problem we need to work at the base of the pyramid, namely on prevention that is on the segment of the elderly who are in utmost need.

Elements tested in each local situation.
Issues emerged:
 a) the need to work with the patient and not only for the patient and to understand the sustainability of this operation;
 b) activation and prevention actions aimed at those who support the elderly and at those who take care of them;
 c) the concept of family not only for those who have a family relationship but

also to those who take care of them;
d) the importance of the role of voluntary and if the volunteer is trained can also carry out actions of professional value;
e) interception, even for reasons of fairness, of those who are unable to express their needs or do not require any services;
f) persons who have to be intercepted can be contacted through two modes: scientific and social.

Thematic Group: ICT possibilities (Borgo Val di Taro, Jyväskylä, Pori, Ravenna, Unione Terre Verdiane are the participants partners)

After the presentation, a discussion ensued on the type of questionnaire that should be used to focus on this issue. More specifically it was decided that the questionnaire should be directed at operators and final users (the patients and/or their families), and that elderly people and people with disabilities should be considered as two separate groups as there are some specific issues that should be dealt with separately. The questionnaire should find out if the target group has ever thought of ICT solutions for their problems, if they have ever heard of them and if they know how to use them. It is important to stress that ICT cannot replace the

human element but simply assist and integrate it. It is also important to understand people's expectations. If for example an elderly person says that he/she prefers a nurse /carer because they can build a relationship and that he/she is interested in other people's company, then it is of little use to imagine technological solutions.

In the end ICT group defined the activities for the near future and found 4 main points to focus on such as:

1 Mapping of all ICT experiences developed in different municipalities, especially on home assistance for the elderly and disabled. We have a form to complete with a maximum of 20 projects to map per municipality. The form has a series of detailed fields which reflect the issues that have emerged since the first meeting in Pori. Costs (project, implementation and maintenance), real benefits and problems that emerged (referring to real life, documentable situations), problems related to technological awareness for the patients and operators. Opportunities, practical problems, promotional and marketing activities, ergonomics, application customisation for the final user. privacy and legal aspects (this

issue has 2 faces: the legal one which means complying with rather strict national laws, and the perception of technological invasiveness.

2 Creation of a questionnaire to hand out to patients, their families, operators and administrators in the health care sector. All partners will work together to define a common questionnaire. The questionnaire will be handed out and the data will then be analysed. Deadline: Sept 2012

3 Define a project involving the partners that could apply for EU funds. Money is needed to implement and maintain home-care services, so a common project could be identified to obtain funds.

4 Research EU tenders which not only provide funds to pay for the work and transferral of people, but also for the purchase of appliances and the implementation of the services.

HALF WAY EVALUATION MEETING

The event took place in Italy (Salsomaggiore) and involved about 30 people: all national and transnational coordinators of 4 thematic groups and some experts of evaluation systems. In particular the coordinators of the partners involved in the project recognized that all the thematic groups worked quite well even if it must be taken into account that the issue was very complex and different in the various countries; according to this it was also difficult to enter completely in the organization and management of healthcare systems of Spain, Sweden, Finland and Italy. Even the use of correct terms to identify the sector operators and their activities was an interesting aspect of monitoring. In the end the coordination group underlined some project aspects suitable for potential improvement and defined the following elements:

① The communications between one event and the following must be promoted by updating the other partners on what is going on also in the other groups. It is fundamental for the possible next projects to schedule a 4 working days program, even for the Coordination and Evaluation meetings, taking into account the possible problems related to the needs of those delegates coming from abroad.

② It is important that every organization hosting an event promotes the communication among the partners by providing a

service of simultaneous translation, even if only in the plenary sessions.

③ Before any event, the presentations and the contents from each delegation must be forwarded to all partners to permit translation, so every delegate can be more involved and prepared.

④ Dissemination: each delegation must send to the Coordinator of the project the broadcasted contents (local press, magazines, specialized press, Municipality house organs, etc.) after duly scanning and converting into PDF documents in order to be published on the website and keep it as archival material for the mandatory report to provide at the end of the project.

At the same time the coordination group agreed on the positive and shared tecniques adopted along this half path of project management: shared format to compare all partners activities referred to elderly care; use of a glossary regarding helthcare services; evaluation questionnaries at the end of each event.

REPORT OF THE RESULTS OF THE THEMATIC WORKING GROUPS: "HOME SERVICES"; "EDUCATION AND TRAINING"

The event took place in Ravenna (Italy) and involved about 60 people that is: operators and professionals working in Homecare services. After one year during which both working groups had the opportunity of sharing ideas and strategic methodologies, the event gave the operators some practical tools in order to compare what each country partner elaborated and put into practice in their local services. In particular the thematic group "Homecare services" discussed a lot and on different subjects. Among other things was, how to get access to service and see the needs the elderly have. It is also necessary to evaluate the performer. There are also problems in finding and providing activities for the elderly. The members of the group talked about volunteers' role and what they can do. In Spain, performs volunteer never "work" without such follow with the doctor or stores. Volunteers can do things that are not in the individual plan. Italy solves some home care with

"adoption", a person at a very low salary can shop or do the cleaning.
Moreover it was discussed whether we have any common tools and Finland and Sweden have a similar IT system to plan work in home care. The individual plan is something that all countries have and that is an important tool that the elderly receive the necessary assistance. In Spain it is the social workers who do the individual plan and the family do the work. For Italy and Spain are issues to educate the family important, to see what skills the family can, and if necessary provide training.

As far as regards the thematic group "Education and training issue" the group focused on the needs of updating education and the best practices of case management (model and education). In particular it was examined the "Case Manager" and given a generic definition of case management that is a model of care provision that integrates the satisfaction of citizens and organizations, and at the same time, method for the general and individual management of health problems.
Tasks of case manager are:
- Contact person, who can represent outside the service he/she belongs to;
- A key coordinator of the activities and services provided

Role of case manager (home care)
- Contact person between user and caregiver
- Multiprofessional coordinator
- Responsible for individual healthcare projects (planning)
- Responsible for monitoring and evaluating
- Financial accountability
- Define objectives (with the equipe)
- Responsabile for checking the quality of the service

Education required
- High school diploma and Professional courses
- Bachelor's degree in social services or health care
- Specific education is provided within organizations
- A specific bachelor's degree in case management is still missing

Lifelong education
- Improvement of networking
- Fundraising (new channels)
- Multiprofessional competences
- Team management
- Analizing the potential financial resources

of the territory (funds
and voluntary services)
- Facing new challanges in integration
 and diversification of the needs
- Prevention
- Marketing

Future perspective

Given the diversity of needs, and the complexity
of organizations, the case manager's networking
skills are always more strategical and fundamental.
For the future a specific training course
on network management is necessary.

◼ REPORT OF THE RESULTS OF THE THEMATIC WORKING GROUPS: "ACTIVATION AND PREVENTION" and "ICT POSSIBILITIES" IN ELDERLY CARE

The event took place in Pori (Finland)
and involved about 70 people.
The meeting was particularly interesting
because it was integrated by some experts'
presentations: one about "Smart floor" that is a
new geronto-technological product for enabling
preventive and reactive elderly care. It is based
on sensor technology installed under floor
and a personalized real-time alarms to nursing

staff from six different events. Falling, getting
up from a bed, entering the toilet or staying
there too long, exiting or entering the room.
The other on "Telehealth" that is an on-line
solution for following chronic illnesses of
the elderly by remote device. The equipment
installed into the patient's home, will enable
to follow the health status; "Care computer"
that is a sort of touch screen and web camera
installed into patients home. With this
solution the virtual home care personnel has
a possibility to contact the patient if needed.
All participants of both thematic groups
attended the different welfare technology
presented for divided groups and it was a great
experience especially for keeping real contact
with high technologies for elderly people.
As regarding the work of the groups it continued
separately. For "Activation and Prevention" group
it was established to discuss firstly on the actual
experiences in different countries, secondly to plan
work that had to be done before the final event.
All country partners gave great importance to
Volunteering because elderly people playing the
role of volunteers are very important resources and
it is also a way to give meaning to their own time.
Therefore each country partner informed about
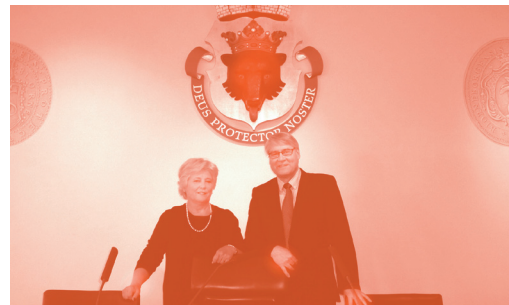
one's own volunteering system put into practice during these last 2 years in their territory. As regarding "ITC" working group, all participants discussed not only on the results of their questionnaires, but also on the future development of ELCANET project. It was agreed that before deciding any evolution of it will be necessary that each partner define its role and take action to identify the channels of European funding consistent with their own institutional situation, economic possibilities and thematic interests. The transnational coordinator underlined that some partners were already planning an European project dedicated to ITC for elderly care at home.

FINAL EVENT

The event took place in Ravenna (Italy) and involved around 100 people: such as politicians, healthcare operators, experts and researchers. This final event was a great opportunity for all partners to meet all together once again. Everybody realized and agreed that the northern European model of care is more open to the working of private entities, while the southern European one is mainly driven by public action. This mechanism acts as a sort of break on

innovation of services and testing new models of care based upon the aid of technological tools and information systems. In addition, currently, the effects of the economic crisis, especially in Italy, severely limit the investment opportunities of Local Authorities that, even in the long run, would obtain economic benefits from the reorganization of services and use of new technologies. One of the most positive aspects of the project ELCANET was sharing experiences and the most innovative methods related to the theme of supporting home care services for the elderly. Regardless of the current implementation possibilities, a new culture is emerging from this sharing project experience, that is a new European vision of a problem which should be read on a continental scale. Sooner or later, from this culture will emerge new scenarios and new paradigms of healthcare that will support at least the elders of tomorrow if not the elderly people of today.

In particular we can confirm that the added value of this project has to be found in the opportunity for the participants to introduce locally the best available solutions come from the discussion and the exchange of best practices developed inside the project activities. This chance to

implement new policy models can be seen as the transfer of transnational knowledge in local working models which can provide long lasting effects in the municipalities' actions. Another important feature of this project is the strong element of intergeneration solidarity which represents an important element for achieving the project's objectives, which are:

* to improve the decision makers' knowledge about the general and specific issues of the network
* to improve the policies makers' knowledge about the organization strategies and the best European practice
* to define and test concrete actions in support of elderly persons living alone and/or families caring for elders
* to improve and strengthen the families' information about the service provided locally
* to show information and examples of new models of business related to the support to the families and the elderly persons
* to strengthen the relations between private and public service providers

* to improve the knowledge of cost-effective solutions
* to improve the knowledge about ONGs and Volunteering as an added value for the society in terms of service for elders
* to create new study practices and new training programs
* to improve the interaction between service providers and training institutions
* to foster the knowledge and the dissemination about ICT- based solutions coming from partner countries
* to broadcast the best practice and experiences during the implementation of services

A research to identify the most advantageous design possibilities Europe in the field of ICTs for elderly care, was made. EU offers wide opportunities but these "Calls" are mostly dedicated to financing companies and industrial projects. From this point of view, the group of partners of ICT Working Group have not the possibility for participate in these initiatives. However, from this task, four interesting proposals have been realized, any of which is, in itself, a good proposal idea, but is almost impossible to

find an useful the intersection between these.

Ravenna

For the future, it is considered important to invest in ITC as applied to public mobility because, as experience demonstrates, cities, particularly those located in Italy, are not suitable for everyone. The priority remains therefore to invest in complex mobility by adopting all available technologies, in the guise of permitting dependent individuals to move freely through different contexts while fully enjoying that which their city has to offer. Equally important and necessary is the accessibility of the pedestrian, enabled by the elimination of certain barriers, subsequently realized by the adjustment of traffic light installations for the blind/partially sighted people as well as at stops transport on public transport for other disabled people.

Borgo Val di Taro

Through the use of a computer "facilitated", with touch screen, the user can type the phone number directly on the screen by launching the call to: family, friends, service centers, volunteer operations center of social telephony, etc... . Possibility of simple phone call or video. The PC could be set up with a beep or a friendly voice to remind therapy. The PC throughout the day could "talk" with the user to remind him of the special activities of daily living (it's time for breakfast, lunch, snack, dinner, bedtime, watering flowers, medical etc. ....) giving suggestions. With the PC could make a shopping list in the various shops in the area with home delivery (food, pharmacy, why not a pizza) Using a PC you can keep informed by reading newspapers or the "friendly voice" could read a book.

Pori

In the future there will be less working individuals than those who need special support or even nursing in daily life. Furthermore, all the more important will be to have care taking and nursing services of high quality. The standards are already high, but the nature of working life is to have all the more higher qualification with expertise in specialized subjects. As gerontological skills are already one of the most needed skills in care taking and nursing, a special interest should be shown into this field. Also welfare technology, as one of the fastest growing part of both technology and care taking sector, needs a continuous development
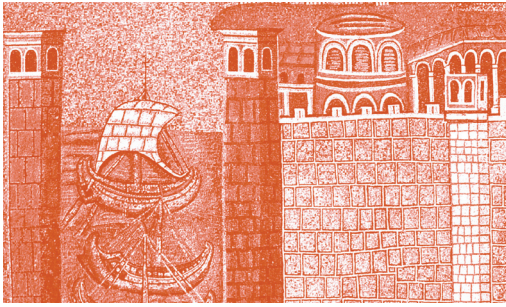
and thus continuous re-education.
The personnel already in the care taking / nursing sector, as well as brand new employees with a basic education, might need support in developing gerontological and welfare technology skills. Modern technology needs using-competence of the personnel, but also their training-competence, as they are often the ones to inform the final users (the elderly and their family members & friends etc.) about how to use the equipment. Different levels of education are needed, as the basics of the subjects might be various. Thus the education programs can be headed for different target groups.

Jyväskylä

In new social alarm center, nurse has access to patient records software to get background information, or like check medicines during they are in phone with the customer. Call center will also keep record about callers, so in case of increased calls, home care case manager can do new care and service plan, if needed. (prevention) At Nigh time, we have 5 teams cruising in different areas of city . Call center is closed but, the special software is still running. Software will detect from what part of city to call is made, and automatically forwards the call in right team cellular phone. Caller and security team nurse can speak directly. After Call, the software will send SMS containing caller name, and address. During daytime, when call arrives, caller's home address is shown at map. Also his/ her information is shown automatically to operator. Call center is also for workers, with less experienced nurse can call for assistance in all matters. Call center is also equipped with our work flow management system. Call center has overview picture, where our home staff is located, if necessary for assistance or re-signing staff to customer.

The key is this call center software, it has many other features. We can remote program all social alarm units at home. Also software will make daily checks that line/ connections are ok.

CONCLUSION

Today, is a widespread awareness throughout Europe: ensure to elderly people, in the next future, assistive services in line with what has been done so far, is the challenge of the coming years.

Voluntary workers wanted !

Human dignity it's the basic of home care

EVALUATION,DISSEMINATION AND FOLLOW-UP

Evaluation

All along this project, at the end of each event the coordinators of the various country partners decided to adopt the evaluation tool through a qestionnaire. It represented a fundamental activity for the project partnership because it enabled participants to keep the project on the right track, in line with originnal expectations and objectives. Sharing the same model of questionnaire it was quite easy, at the end of each event, identify some fundamental elements of the evaluation such as: number of participants, number of case studies presented, increased knowledge, and meetings' organization.
I can be said that the results were very positive even if not all participants of the events fullfilled the questionnaire proposed; in particular we found a common problem that is the language: as far as regard a very complex field as helthcare services, sometimes it was difficult to understand each other because of different knowledge of the specialized terms.

Dissemination

First of all the partners of the project shared a logo to identify the project itself and use it adequately in each event; leaflets were produced, a project website was created and its updating till the last final conference, link of the project on each local homepage partner municipality; involving external experts during the main important meetings; communication on social media for each local event; final project publication and CD production.

Follow-up

Thanks to the very positive relationship created among the partners and the shared idea that throughout Europe the number elderly people is arising and we must ensure them, in the next future, assistive services in line with what has been done so far but also involving much more voluntary associations and developing day centres. The role of Europe in supporting families with elder is becoming more amd more important as well as to support private and public bodies to find economic resources to provide ICTs experimentations and operators educated and trained to face this strong and demographic changes. The project helped some partners to be much more connected in order to create the basis for future cooperation.

Economic opportunity for equal rights regardless of what country the elderly living in

Valorize the resources of the individuals