



IO2 – A4: Digi-Ageing

Network Guide

by CDPZ Final version in English



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1 Introduction

Objectives:

Based on the findings of IO1 this IO2 serves partners to create "Loneliness Networks" in their countries and to deliver a final guide based on practical examples on how to create such a network most efficiently in different countries. Thus, it documents and provides recommendations on how to build a Network of relevant stakeholders – private and public parties, depending on how social measures for the final end users are organized in each country. The guide provides information on how to involve the networks in the country, how to receive feedback for quality control and how to provide them guidance in the implementation and motivate them for multiplying and sustainable use of the outcomes of the project.

Needs Analysis:

Social Networks can be seen as most effective tool in preventing loneliness. In many cases, these are generated automatically through family members, neighbours and friends. In case they are lacking or are not as strong as needed, a professional support is required. How to organize this, how to connect volunteers, neighbours and even social care system is a crucial competence, which is needed in various situations. By connecting relevant stakeholders at local and regional level we will set up good practice in supporting individual elderly people. The policy recommendation will outline the needed framework for successful strategies for relevant stakeholder at organizational, local and regional level on how to best prevent loneliness.

Target groups:

Decision makers in health care organizations, participants of regional/national key players and decision makers in health and care services (depending on the national structure of these sectors)

Elements of innovation:

This IO starts with the first multiplier event (online), which aims at involving national/regional key players (government, municipalities, organizations providing health and care services). First events (online sessions) served to identify interested parties in participating actively in these national/regional networks.



2 How to build up a network?

2.1 Theoretical Approach

Complex systems are characterized by a high degree of self-organization and composed from an elevated number of parts that interact between they in way non-linear, giving rise to emerging (global) behaviours not easily explained and predictable in light of a single physical law.

Social networks are a complex system and their functioning can be better understood if one looks at them from the perspective of complexity. Complexity unhinges the reductionist approach of modernity, by embracing the concepts of multiplicity integration, context and uncertainty.¹

The main obstacle one faces when being part of a Network is precisely the difficulty of accepting the inherent uncertainty and unpredictability.

And there is little point in pursuing difficult certainties with well-defined projects, to try to control the dynamism of the Net. Precisely for these reasons, it is important to immediately adopt a methodology capable of following the lifecycle of the Network, with sensitivity to weak signals and the capacity of adaptation and modification. Very often, in fact, the cause of the failure of good Networks has been precisely the difficulty in modifying some factors in progress.

The Network is characterized by having an internal organization of horizontal type and not hierarchical, that foresees processes of guide and decision-making processes widely participated among its members. Within the Network, very different realities can cohabit very different from each other, however, united by the same objectives. Once the objective has been achieved, the Network may decide to cease its activities or decide to set and achieve other objectives. The horizontality of relationships favours the construction of trust and the spread of a sense of responsibility towards the community.

2.2 What are the main characteristics of a network?

- Horizontal organization;
- Participatory leadership and decision-making processes;
- Shared objectives.

The horizontal organization is opposed to the vertical one (typical of associations, enterprises, parties, trade unions, etc...) that has organizational mechanisms that are confused and reluctant to any proposals for change (organizational innovation).



¹ https://www.socialnews.it/blog/2010/09/03/le-reti-sociali/

As far as the processes of guidance and decision-making are concerned, the Network, through **mechanisms of participation**, is opposed to vertical structures characterized by restricted management and elected with votes that make it possible to define majorities and minorities.

Pyramidal structures tend to exclude and disrespect minorities within them, while the participation processes typical of the Network allow the autonomy of adhering groups to be safeguarded adherent groups.

The horizontal and participatory structure of the horizontal and participatory structure of the to operate in a creative and responsible in the innovation process. To make this possible, it is important that the organization of the Network is inspired by the principles of:

- innovative community;
- convivial cooperation;
- widespread communication;
- shared knowledge.

The innovative community provides a social structure organized in a network of direct relationships between individuals, who in an effort to change their way of life end up changing that of others (change and induce change). Convivial cooperation implies working together in a creative, responsible and self-regulated way, generating and assuming continuous learning. The care of trust and reciprocity in relationships is essential in convivial cooperation.

This allows people to feel good with others and to decide together the "what", the "why", the "when", the "where" and the "how", with common goals and with a shared vision. "where" and "how", with common goals and with shared practices and rules.

Widespread communication concept of space, this provides the possibility for people to communicate simultaneously in both global and local contexts, in the same or different contexts, in real time or delayed, in person or via the Internet.

Shared knowledge involves the sharing, promoting and governing, among all members of the process, of a wide variety and formats of knowledge. It is activated by people with a visible flow of sharing and exchange between them and the organization. The shared knowledge includes all kinds of knowledge, both belonging to people and distributed on databases and texts, coming to become a true attribute of the community.



WHAT ARE THE MAIN TASKS OF THE NETWORK?

- Choose shared objectives,
- Make action strategies homogeneous,
- Broaden membership,
- Carry out training activities.

2.3 Types of networks

The very light network

It is constituted by single territorial groups not yet organized in Nodes, and based on an ideal bond between people who believe they are inspired by the same values and want to pursue common goals.

This type of network can encounter difficulties in the realization of common goals if individual groups put their own interests ahead of those of the wider network. This type of network can encounter difficulties in achieving common goals if individual groups put their own interests ahead of the broader interests of the network.

The network based on powers of initiative decentralized

In this type of Network, the Nodes are fundamental and completely disengaged from it at the local level. However, they are responsible for autonomously organizing the initiatives they propose.

With this idea of the Network, therefore, it is the individual Nodes that take the initiative, assuming most of the organizational burdens and asking the other places in the Network to make the maximum contribution to support them.

This vision of the Network, while on the one hand allowing for effective work to achieve short-term goals, on the other hand could entail the risk of losing those nodes that are less organized or have been recently established.

The network as a political subject or protagonist

Rejecting the current modalities of political action, the Network wants to assume an exquisitely political role, placing itself as a valid alternative to parties and unions. Its purpose is to take a position in the face of in front of the major issues of current interest (work, immigration, economic policies) exploiting the systems of communication of mass.



The action-oriented network and achievement of concrete objectives

This type of Network tries to channel actions and experiences of many groups, that because of their size and isolation, would not otherwise be able to exert sufficiently effective.

In this way it is Instead, it is possible to carry out activities difficult to ignore, developing a significant presence on the territory both in response to local conflicts and in relation to international mobilizations.

The main difficulties that this type of network could face are organizational, it is in fact difficult to the work times of the Nodes, generally slower, coincide with the slower, with those of the Network, in order to reach national and international objectives.



3 The role of networks in the Digi-Ageing project

Social Networks can be seen as most effective tool in preventing loneliness. In many cases, these are generated automatically through family members, neighbours and friends. In case they are lacking or are not as strong as needed, a professional support is needed. How to organize this, how to connect volunteers, neighbours and even social care system is a crucial competence, which is needed in various situations.

By connecting relevant stakeholders at local and regional level we will set up good practice in supporting individual elderly people. The policy recommendation will outline the needed framework for successful strategies for relevant stakeholder at organizational, local and regional level on how to best prevent loneliness.

3.1 Digi-Ageing on Facebook²

There is a Facebook project page, where each partner can publish posts, links, news and share with its network all the project activities.

At the beginning, coordinator and partners posted above all the project main contents (goal, activities, target groups, etc.). Nowadays, Facebook page got more information about the project progress (i.e.: all the IO1 reports and materials have been promoted; each ME has been published, also in term of post event information; some first inputs that come from IO3 and IO4 have been launched, etc.).

Of course, due to different project languages, each partner published on Facebook, mainly, news and posts in the local one.

<u>Note</u>: you can find all the details, and all the activities done till the end of the project (July 2023), in the single sheets inside the dissemination Excel lists (numbers of reached people, targets, actions done at local, regional, national and trans-national level, etc.).

3.2 Digi-Ageing on LinkedIn³

As everybody knows, LinkedIn is a more professional social media. So, also for our project, this channel reaches a different target than Facebook pages. In practice, people that are for the moment



² www.facebook.com/digiageing

³ www.linkedin.com/company/digi-ageing

linked are: consultants, trainers, professional caregivers, institutions (like universities). So, also the messages are more focused on technical contents, like surveys and researches done about elderly people isolation or loneliness. In that sense, partners also linked to the project page some videos, posts or news that are coming from other sources.

<u>Note</u>: you can find all the details, and all the activities done till the end of the project, in the single sheets inside the dissemination Excel lists (numbers of reached people, targets, actions done at local, regional, national and trans-national level, etc.).

3.3 Digi-Ageing on Erasmus+ project database⁴

The ERP Tool will be filled at the end of the project. Each partner is already promoting this link, in several communication channels: email, direct contact, website, Facebook and LinkedIn pages.

This European wide dissemination could be also useful for a potential second step of the project.

3.4 Digi-Ageing on EPALE - Electronic Platform for Adult Learning ⁵

Hafelekar has already registered with EPALE. We filled in this online platform in the last months. Here we described the results of the C1 training in Cyprus, publish the feedback on our multiplier events, present the screening and prevention tool, etc. The aim is to inform a broad public about the progress of the project and to invite people to join us.

4 How to involve existing networks in each country?

The IO2 activity began with the identification of the various bodies and experts who, for various reasons, support the creation of the network (online and in the real life).

All these institutions are playing a key role for IO2 development, in term of:

 First of all, strongly support the creation of networks for elderly people, against loneliness and isolation;



⁴ <u>https://ec.europa.eu/programmes/erasmus-plus/projects/eplus-project-details/#project/2020-</u> <u>1-AT01-KA202-078084</u>

⁵ <u>https://epale.ec.europa.eu/en</u>

- Promote and disseminate the project interim (and final) outputs and results;
- Awareness rising in institutions about the project topic.
- Support the testing phases of project tools (IO3 and IO4 in particular).

Their involvement in the project has different ways, approaches and intensity:

- Some partners have chosen institutional (public) bodies; some other countries are more focused on service providers;
- Some networks, at the first step, are more focused at regional and local level. Hopefully, at the end of the project, networks should be enlarged at national level too;
- Some networks (like the Italian one) are more focused on "in presence" involvement, because this framework is more coherent with the reality and cultural approach.

For all the details, you can find in attachment the different lists for each country, with a short description.

<u>Note 1:</u> These institutions, associations, bodies and experts are up-dated till July 2023. Each partner is improving and enlarging the national and regional network, above all in term of stakeholders. This happens for two main reasons: 1) step by step, and thanks also to the dissemination activities, each partner is contacting further institutions; 2) the project improvements, in term of achieved results (through IOs progresses), is suggesting some adaptations also in term of stakeholders typologies (at the beginning we focused more on institutions, academia and scientific bodies; nowadays, we need also i.e. elderly care centres for implementing the project tools).

<u>Note 2</u>: In the following paragraph we are going to present, and comment, the networks established in each country, in term of "key players" and "stakeholders"; while the Advice Panels are described in the chapter 5.

4.1 Network partners identified in Austria

Concerning the "key players" the partner already involved nr. 3 bodies (but it is able to increase this number in the next future). One institution represents managers in the nursing and executive areas, in facilities with different structures and in different districts of Tyrol. Honorary representatives of the Tyrolean residential and nursing homes. Another one is an Institute with the aim of implementing integrated care programs (outpatient stroke care, HerzMobil Tirol, hospice and palliative care, dementia, CareManagement Tirol). So, these bodies are very specialized and in line with the main project goals.

In term of stakeholders, Austrian partner involved (for the moment) nr. 8 institutions; but they are also already working on an extension. For the moment, there are an institution about relevant scientific activities and events of the network partners, and it offers a comprehensive project database and provides



information about European programs and initiatives relevant to the topic (as a national service point, the Network Aging); or "Quality of life and equal opportunities for older people" initiative; or (like the Italian partner) the "Educational centre of the Jesuits and Caritas", among other things, a seminar on loneliness in old age is offered.

But the most interesting (and maybe powerful) stakeholder is "The Austrian Senior Citizens' Council"; it is responsible for the legal representation of the interests of more than 2.3 million senior citizens in Austria.

4.2 Network partners identified in Cyprus

Concerning the "key players" the partner already involved nr. 5 bodies (but it is able to increase this number in the next future). These organizations are different: for example, a registered NGO advocating for the rights of older adults in Cyprus; or Community Day Care Centre or a senior association; plus, a voluntary organization. This well mix should support the project activities, also for the testing and implementing phases.

In term of stakeholders, Cypriot partner involved (for the moment) nr. 10 institutions; but they are already working on an extension. Basically, there are some universities and research centres, that could check and review in particular the diagnostic tools (IO3); and guarantee suitable final products also in term of scientific contents. In the same time, Materia is able to involve some other stakeholders, more linked with i.e., elderly care services, nurses and mobility care.

4.3 Network partners identified in Italy

Concerning the "key players" (at least 5 members) the partner already involved nr. 7 bodies. They are quite different in term of policies and services offer. In fact, there are: a research centre (that studies also elderly people issue); two senior associations from craftsmen (they could act as "awareness facilitators"); one local volunteers association; but also 3 very big national associations, that represents thousands of people (including elderly) in our Region. This "well balanced mix" for sure could help the network creation at national and regional level, too.

In term of stakeholders, Italian partner involved (for the moment) over 30 institutions; but the idea is to increase this number till the end of the project. As stakeholders, there are different kind of bodies (of course, including several elderly care centres, that could test the tools in the second project phase; but also, foundations, associations and cooperatives (non-profit organizations) that are dealing with elderly people, and that are able to involve a large amount of volunteers, too. There is a trade union (for elderly) and a catholic body (because when we are speaking about isolation and loneliness, "spiritual" dimension is also important).



4.4 Network partners identified in Spain

Concerning the "key players" the partner was able to involve several bodies, very qualified and specialized. In fact, one is a psychological centre that offer therapy and support to people with an Autistic Spectrum Disorder (they also work on the social integration of people with this disorder); the second one is the public social services system of Vélez-Málaga (where the Spanish partner is located) and it has, as their main goal, the promotion and development of all people and groups within society to be able to reach a better social wellbeing and quality of life, preventing and eliminating the causes of exclusion and social marginalization.

The other institutions are: Malaga Provincial Council's Senior Citizens' Area (largest provider of care for the elderly in the province of Málaga, with more than 1,500 professionals); Fundación TAS (a regional, non-profit organisation that provides new resources in rural areas and offers care services to groups at risk of social exclusion); Fundación Harena (non-profit foundation which focuses on accompanying the elderly in the province of Malaga, with a network of thousands of volunteers) and AFA Málaga (association of relatives of people with Alzheimer's disease, providing training and support)

In term of stakeholders, Spanish partner involved (for the moment) nr. 12 institutions. Most of them are elderly care centres (private or public); but all these bodies offer different services, like a body that creates a network of qualifies professionals that can give support to elderly people; or a centre that has as its main goal to provide attention to people with mental health problems; or a company with different elderly homes in several parts of Spain.

4.5 Network partners identified in Lithuania

Concerning the "key players" (at least 5 members) the partner preferred to increase this number. In fact, they involved nr. 13 persons, from different bodies (in particular a "Social Services Centre" that provides social assistance to the residents of Druskininkai municipality (their families) who, due to age, disability, social problems, have not acquired, lost or do not have the abilities or opportunities to take care of their personal (family) life independently by creating conditions for them to develop and strengthen their abilities and opportunities for solving their own social problems independently, to maintain social relations with the society, and to help them overcome the social exclusion.

In term of stakeholders, Lithuanian partner already involved (for the moment) nr. 21 institutions. Most of them are elderly care centres (private or public); but all these bodies offer different services (mobility care, long term care and a wide range of services).

Also, at geographical point of view, the stakeholders cover different areas, districts or regions in Lithuania. This fact will be important, in particular, for the policy recommendations, that should be extended also at national level.



4.6 Comparison of the different local models

We can list the following most important differences between project countries:

- All partners have different approaches for different local needs (for example, Cypriot are more focused on university/research centres; while Italian network takes more care on volunteers and local services for elderly, including some associations);
- The (current) networks have also some quantitative and qualitative differences. For example, some countries (like Italy) already reached the minimum number of Key Players and Stakeholders; some other partners are increasing not only the numbers, but also the roles and contribution of these bodies;
- As usual, there are also some specific country needs that the single network should take into account (for example, the Italian partner is for the moment focused above all at regional level addressing over 5 million inhabitants).

4.7 Good networking practices identified

The terms "care managed" and "case management" are often used as synonyms together with other expressions such as care coordinator. In reality, they express two different types of approach: - The subject of interest of care managed is the care system and its functioning - The subject of interest of case management is the care recipient and his/her care pathway.⁶

Care managed is a system composed of structures and methodologies for the functioning of the organisation with the institutional aim of delivering healthcare services in an efficient (cost containment) and effective (quality of healthcare and service delivered) manner. A healthcare system approach developed in response to the need to contain healthcare costs, to recompose the fragmentation of service delivery and to respond to citizens' health needs with quality services.

Case management is a managed care methodology (but also an autonomous mechanism for improving the effectiveness and efficiency of health care), based on the logic of coordinating the resources to be used for the specific pathology of a patient, across the different structures and organisations of the health care system. The case management approach is to consider patients as entities that are going through a disease pathway, moving away from the concept of seeing them through care that is planned and delivered in a fragmented and episodic manner.

In Italy, a shift from 'care' to 'case' managers is taking place at the socio-medical level. The Care Manager takes charge of the management and care of the patient throughout the entire care pathway: from hospital take-over to recovery, from prevention to rehabilitation, to post-disease follow-ups. It is a figure based on listening, dialogue and planning, putting the person at the centre and taking care of all the extra-



⁶ https://aemmedi.it/wp-content/uploads/2016/09/05_FALASCA.pdf

medical aspects of the illness: from bureaucratic paperwork to the psycho-social dimension. The Care Manager has a set of skills and characteristics that make him or her a unique and indispensable figure. He is a nurse, a counsellor, an assistant, a coordinator, a holistic support figure who is proving to be crucial for patients. These professional figures are part of a path of change in the health professions, increasingly specialized and patient-oriented, both in the hospital and in the territory. Especially for the most important pathologies and for the most fragile categories the presence of a 'guardian angel' to support the medical and health care pathways is becoming increasingly essential. Moreover, given also the numerous difficulties in public health, territorial coordination between structures is beginning to become indispensable, especially for those chronic pathologies that require treatment, rehabilitation, and checks over several areas and over the long term.⁷ The core of these new health professions is attention to the person, no longer seen only as a patient but as a whole.



⁷ https://terzomillennio.uil.it/blog/care-manager-chi-e-e-cosa-fa/

5 How to receive feedback for quality control?

The Advice Panel (3 members for country) has been set up for a clear role: support the IO2 development and, step by step, check and control what each partner is doing in term of network creation. In other words, it is a matter of quality control (for example: how the process is going on; how the stakeholders are concretely involved; how the network works in the single country, etc.). But, in the same time, Advice Panel (or advisory board) should also suggest the strategy, and give to partners feedbacks, comments and contributions.

The Advice Panel should also bring together experts and academia (scientific approaches) to provide concrete contributions to supporting bodies (associations, volunteers, caregivers, etc.). The Panel should provide advice and support all these actors, and implement effective impact evaluations that will help us understand whether programmes and policies are really delivering desired outcomes.

The Panel, working together with the single partners, offer advice and support on all kinds of impact evaluation methods and approaches. A particular role concerns policy recommendations: in that case, Advice Panel could not only check and review some actions, but also support them in the concrete implementation (for example through a positive dialogue with regional and national authorities that are planning supporting measures for elderly people).

Each project country set up their own Advice Panels (3 members):

- 1) Austria: 1) "Federal institute of integrative care", with the regional care coordination centre to ensure collaboration between inpatient and mobile home care providers; 2) "Tiroler Seniorenbund", with a manager of the service organization (they offer Tyrolean seniors advice and assistance and support them in all situations of life); 3) "ARGE Tiroler Altenheime", with a manager in the nursing and executive areas, in facilities with different structures and in different districts of Tyrol (they participate in planning meetings, as well as organization- or care-specific projects, and provide expert advice to their members and system partners). Note: the Austrian Panel is very qualified and focused on care services for elderly people. As public or "semi-public" bodies they can, concretely, impact the policies at national and regional level.
- 2) Italy: 1) "Fondazione Zerbato" (It is an elderly care centre, with around 350 seniors) with the general manager; it represents end users (elderly people) but also caregivers (formal and informal). It could also check how the local network (municipality, associations and cooperatives) will help the project development; 2) "Senior Veneto" (regional association, with other 3,000 active members) with the President; it represents a wide regional network that supports elderly people. He is also managing several projects (at regional and national level) that are dealing with elderly people issues; 3) "Associazione Volontari Assistenza Anziani, Vicenza" (a local volunteers association, with over 250 members), with the vice-President; it represents a wide number of volunteers (basically relatives of elderly people). It can support the project for understanding the



real senior issues. <u>Note</u>: the Italian Panel is more focused on elderly care institutions (like care centres or associations that represent volunteers); so, the Panel could bring into the network the real issues that elderlies are facing off (including isolation and loneliness). Moreover, the Panel is focused at regional level (Veneto; which is one of the regions of Europe with the oldest population).

- 3) **Spain:** 1) "The English Nurse", with a nurse; it is a care team that provides different services, like domestic assistance, companionship and palliative care, among others, to elderly people in Andalucía. The English Nurse has workers and patients in different parts of Spain and are in direct contact with different companies, associations and individual people from the target group in different parts of the country. She can also give advice and examples of good practices on the issue of loneliness and isolation from a health/medical point of view; 2) "Lux Mundi" with the director; it is an ecumenical centre present in Fuengirola and Torre del Mar that delivers social support, leisure and religious activities to over 500 people. Lux Mundi has information and direct contact with networks of elderly people along the Costa del Sol and with their main caretakers and the companies they work for. As a centre whose main purpose is the building of local networks of elderly people, it knows the needs of the target group and issues related to loneliness very well; 3) "Centro de Salud Portada Alta", with a nurse; it is a health centre in Málaga that offers medical attention on a basic level. It represents an example of regular health centres throughout Spain, whose professionals deal with regular day to day health issues, including issues of elderly people. As it isn't a private centre or a day centre, it can provide a good idea of what are the regular health concerns of elderly population in Spain. Note: the Spanish Panel is well focused on care centres for elderly people, with a concrete presence (and wide experiences) about elderly people issues, including the key role of local networks. At a geographical point of view, it is quite focused on local/regional level (more or less like the Italian Panel).
- 4) Cyprus: 1) "Noesis Cognitive Centre & Tech Solutions Ltd" with the coordinator. Neuroscience/Assistive tech company providing services and products to older adults and their families. It represents neuroscientists and other health care professionals who are registered in the Cyprus NHS, as well as private companies commercialising service/product solutions to social problems; 2) "Thalpori Elderly Housing" with the head of the Psychosocial Department. It is a nursing home group providing both in-patient, out-patient and community services; and it represents organised care units providing 24hour support to elders in the units, as well as in their homes; 3) "Cyprus Third Age Observatory" with the Director; it is an NGO advocating for the rights of older adults and providing community services. And it represents the end users and their advocates and loneliness/isolation were one of their main concerns since the beginning of Covid19. Note: the Cypriot Panel is represented by scientific and academic bodies (and professional nurses and neuroscientists), plus an elderly home too. Moreover, with the third member also the end users (elderly) are well represented. So, they also checked and reviewed some technical recommendations that partners are going to set up.



5) Lithuania: 1) "Anykščiai Social Care Home" with the director. It is an elderly care centre, with around 40 seniors, so it represents elderly people and formal caregivers. It could also check how the local network (municipality, associations and cooperatives) will help the project development; 2) "Lithuanian Association of Adult Education (LAAE) with the Chairman. The LAAE mission is to unite individuals in various organizations for common activities, to advocate in the society the idea of lifelong learning and to develop the learning opportunities; it represents a very wide regional network that supports elderly people; 3) "Fabijoniškės Social Services House" with the director; it is also an elderly care centre, with around 55 seniors. It represents elderly people and formal caregivers. She could also check how the local network (municipality, associations and cooperatives) will help the project development. Note: the Lithuanian Panel is similar to the Italian one; so, there are two elderly care centres that, concretely, checked and reviewed project tools (made thanks to IO3 and IO4 in particular). But, thanks to LAAE, a wide dissemination and exchange also about the policy recommendations could be done in the next future.



6 The policy recommendation

A policy recommendation is a set of ideas, or a plan prepared for some group or person that has the authority to make or to influence policy decisions. Policy recommendations serve to inform people who are faced with policy choices on particular issues about how research and evidence can help to make the best decisions. Getting a recommendation accepted by policymakers depends on many factors but a recommendation which is based on strong evidence, is cost effective to implement and takes account of international best practice has a better chance of being accepted and influencing policy debates.⁸

Recommendations are non-binding instruments that define directives to guide national policies and activities. Like conventions, recommendations are intended to exert a concrete influence on working conditions.

Thanks to the first MEs organized in the single project countries, from October 2021 till March 2022, we are able to list some policy recommendations.

These first concrete inputs can be summarised as follows:

- Continual improvement is ongoing with further activities.
- Discussion with stakeholders (at national, regional and local level) started actively and is a process which has been intensified in the second half of the project.
- Adaptations to the national situation (also at a legal point of view) are necessary, but also taking into consideration how the Covid19 situation and further restrictions will change in 2022 and 2023.

List of first concrete policy recommendations:

- Prioritize older people within the health service as the most vulnerable. <u>Note</u>: in all the project countries the welfare state, and health care services, are well organized. But Covid19 emergency created big gaps for elderly people (especially for those who live in situations of social and economic hardship). And this situation is increasing the level of loneliness and isolation for vulnerable elderly;
- 2) Ensure continuity of care for all other medical conditions/diseases. Where services are suspended, provide alternative forms of delivery (e.g., telemedicine). <u>Note</u>: technology is supporting also elderly people. But, again, there are not enough attention for specific

⁸urly.it/3tfn8



needs, and not appropriate training for caregivers. More specific actions, at local level, should be planned, also for prevention;

- 3) In the case of elderly people who live alone in their own homes, anticipate situations that may constitute an emergency (e.g., falls, sudden deterioration of health conditions), and report them immediately. <u>Note</u>: in all the project countries there are, already, alarm systems and emergency telephone numbers. But, more attention to prevention and education is needed (above all for relatives and caregivers);
- 4) Ensure food supply, including through community involvement and outreach services. <u>Note</u>: elderly that are living at home are, in general, suffering a problematic diet, due to several reasons (sometimes, not enough incomes; not appropriate training and knowledge of caregivers, specific food needs, etc.). More education and a better local network are needed, also for this topic;
- 5) Ensure the provision of social welfare measures. <u>Note</u>: all the project countries offer welfare services for elderly people. But the high number of elderlies, their single situation, their different and complex needs are not well covered by current social measures. Moreover, Covid19 situation creates strong differences between richer citizens and people that needs more social aids (like in general elderly);
- 6) Establish help lines, with particular reference to situations of mistreatment and "abuse" and more generally with the aim of support from a medical, social and legal point of view. <u>Note</u>: above all for elderly that are living alone, with a non-professional caregiver, the level of assistance is not enough appropriate. Why? Because caregivers are not enough trained also about the social isolation issues;
- 7) Foster digital literacy and virtual communication. <u>Note</u>: one of the most important project goals is to reinforce the digital process benefits to elderly people. But more specific interventions are needed; for the moment, most of the digital training course, for elderly, are too much generic (they do not take care on practical issues and obstacles);
- Discuss care protocols with the person being cared for. <u>Note</u>: more involvement of the relatives and caregivers could reinforce the care effectiveness; and reduce the intervention timetable;
- 9) Pay attention to the risk of cognitive impairment, especially in older people with neurodegenerative problems, due to deprivation of environmental stimuli and the spatial confinement dictated by the pandemic. <u>Note</u>: cognitive issues are becoming a key factor for preventing loneliness and isolation. Suggest to create simple prevention services in each municipality, with a strong information and communication, via social and in the real life;



- 10) Preside over long-term care services, so as to ensure physical distancing between residents without generating situations of social isolation. <u>Note</u>: more attention to long term assistance, creating simple "information packs" for elderly and their caregivers (relatives or professionals). Take care above all on prevention activities (physical and social);
- 11) Convey simple measures, which can be taken in the elderly person's home, through information and health education campaigns on multimedia platforms. <u>Note</u>: when an elderly lives alone (or with the partner) at home, he/she needs simple information and support from the territorial institution (like mobility care, basic information about the local service, information through local platforms for transports, drug delivery, social and recreational centres, etc.);
- 12) Take into account the inherent diversity of aging, which means that the elderly population cannot be considered as a homogeneous group of subjects. Therefore promotion, prevention, and treatment strategies be differentiated and adapted according to the specific needs of the elderly. <u>Note</u>: are there, in each country / region a continuous need analysis for specific group of elderly? (Who is living alone, who is self-sufficient, who is living in an elderly care centre, etc.). For each group of elderly there will be specific actions. Connect this structure with IO1 main country results; and adapt the strategy to the single country situation.
- 13) Involve the elderly in health policy decisions as stakeholders. <u>Note</u>: for example, Vicenza municipality (Italy) has already set up the "Elderly people committee", composed by 25 local associations, non-profit organizations and cooperatives. That committee gives some concrete guidelines for supporting elderly people. Question: are there similar bodies in each country? If not, we could suggest it.
- 14) Implement care managers in the care services, in order to take care of the elderly in a comprehensive manner and to promote their well-being. In fact, one of the key aspects, when we are speaking about loneliness and isolation, is the local system that could support this process.
- 15) Ensuring inclusive means of transport, including through community involvement and public services, that enable safe and independent travel for the elderly to reduce social withdrawal. In fact, social isolation is also based on mobility issues, above all when the elderly person lost his/her driving license.
- 16) Raise awareness among the general public of the importance of the issue and the risks of loneliness. In each country, a better consideration on loneliness topic is still needed (in general, not enough public policies - and funds – have been implemented in the last years, including the Covid19 period too).
- 17) It is necessary to facilitate caregivers' access to all information (including information on how to carry out the care activities), through the creation of dedicated digital platforms or



the development of already existing ones also for training/information of caregivers on the management of the elderly people.



7 The impact matrixes and sustainability actions

In the last project months, each partner also created a sort of "impact matrix and sustainability actions" because, as written in the previous paragraphs, a local network (online and in the real life) needs a strong effort in term of relationships with partners, associations and stakeholders.

As you will see in the following matrix, here we can summarize the situation:

- We shared the impact, also in term of local network, in different areas: systemic, organizations, learners/users, staff (project partners);
- Each partner (or country, like Austria and Cyprus) identified at least a good practice that was created thanks to the project activities and the networks involvement. These examples are also useful in term of policy recommendations in each country, and sometimes they could be reply in different areas;
- The overall situation seems to be good: all partners created a strong impact in term of sustainability and a wide involvement of stakeholders, institutions, professional bodies and learners (like educators, social workers, nurses and volunteers or caregivers);
- In term of indicators, all partners identified clear numbers and/or concrete actions that are going to support the local networks;
- Also the data sources are clear, and they include i.e. case studies, letters of intent or agreements and several actions in term of dissemination too;
- The timescales (short, medium and long term) cover all the areas and are well balanced.
 Hopefully, this time planning could guarantee a ling term project sustainability also after the end (July 2023);
- In summary: several initiatives have been also done in term of impact and sustainability, and a good number of "project spin-off" are already planned, thanks to the local networks that have been created within the overall partnership.



AREA OF IMPACT				TIMESCALE			
/ SUSTAINABILITY	IMPACTS / OUTCOMES	INDICATORS	DATA SOURCES	SHORT TERM	MEDIUM TERM	LONG TERM	
	Hafelekar / UMIT Tirol: Improve the availability of resources/tools on the project topics and train formal and informal caregivers	An indicator of sustainability is the implementation of the Digi-Ageing tools in practice and positive feedback on training	Case reports of the training participants after implementation in practice and completed evaluation forms	x	x		
SYSTEMIC (at regional and/or national level)	University of Cyprus / Materia Group: Increase awareness on loneliness and availability of digital tools on screening loneliness in regional level and potentially on national level	An indicator of sustainability is the submission of an application to the Human Resource Development Authority of Cyprus (HRDA) to certify the Digi-Ageing training and reach more healthcare professionals in the long term.	Screenshots of proof of the submission are available By July, we will have an answer from the authorities whether we are approved			x	
	Caminos: Improve the availability of resources/tools on the project topics and train formal and informal caregivers	Implementation of the Digi-Ageing tools in practice and positive feedback on training	Case reports of the training participants after implementation in practice and completed evaluation forms	x	x		
	MRU: to enrich and develop the curriculum of social work study program at university and college	New topics and methods in study subject in Social Gerontology, Education of Adults and Social Work with Family courses	Course description			x	



	CDPZ: Increase the availability of resources/tools on the project topics	At least nr. 3 organisations that agree to continue the pilot also after the project ending	Letters of intent that we will sign with participating organisations.	x	x	
	Hafelekar / UMIT Tirol: Implementation of a university course	Implementation of a university course	Business plan for the set-up of a university course		x	x
	University of Cyprus / Materia Group: Trained healthcare professionals to use the Digi-Ageing digital tools for more efficient work in their workplace, the stakeholders.	Healthcare professionals from at least 5 organisations have been trained to use the Digi-Ageing tool and mentioned that they would like to continue using it	Case studies of participants and attendance sheet demonstrating the organisations that have already staff trained on the Digi- Ageing tool		x	x
RGANISATIONS (Stakeholders, supporting partners, etc.)	 Caminos: Be identified as local (co)leaders in educational tools and materials against loneliness and isolation for elderly people. Access to new networks and local stakeholders that will have a growing impact on elderly people aids. 	At least 3 organisations directly engaging with project pilot phases	Dissemination logs, sign-in sheets and evaluations from stakeholder meetings and multiplier events	x	x	
	MRU: Developed network with partners and stakeholders	3 organisations engaged in pilot phases and results of project	Pictures, dissemination notes.	x		x
	 CDPZ: Be identified as local (co)leaders in educational tools and materials against loneliness and isolation for elderly people. 	At least nr. 5 organisations directly engaging with project pilot phases,. as a result of Digi-Ageing.	Dissemination logs, sign-in sheets and evaluations from stakeholder meetings and multiplier events.	x	x	



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	 Access to new networks and local stakeholders that will have a growing impact on elderly people aids. 					
	Hafelekar / UMIT Tirol: Acquisition of caregivers for further training	Target groups register to participate in the university course "Loneliness - mental health for older people"	Advertising on all platforms and media, registration forms, registration numbers		x	x
	University of Cyprus / Materia Group: Acquisition of students and healthcare professionals from different backgrounds, encourage the dissemination of the Digi- Ageing tools among their peers	Backgrounds of students trained in Digi-Ageing tools: medical doctors, nurses, social workers, occupational students, psychologists, neuropsychologist, art therapist, music therapist, physiotherapists	Attendance sheet Dissemination logs Questionnaires	x	x	
LEARNERS / USERS	Caminos: Acquisition of caregivers for further training	The association has a permanent training offer as well as a virtual classroom. We will be able to continue training carers and stakeholders with the Digi-Ageing training programme and tools	Advertising on all platforms and media, registration forms, questionnaires, training reports		x	x
	MRU: Improved professional competences of learners	28 caregivers and 13 educators	Questionnaires Pilot meetings documentation		x	
	 CDPZ: Access to state-of-art resources on the project topics for helping elderly people, educators and caregivers. Understanding how to utilise training materials (and online 	At least 20 further elderly people involved in the development of IO3 implementation. And at least 10 further educators and/or caregivers that could be involved in extra training paths, also at the end of the project (or also after Summer 2023).	Questionnaires E-mails Pilot meetings documentation	х	x	



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	platform) to teach a in non-formal learning environments.Opportunity to participate in training paths locally.					
	Hafelekar / UMIT Tirol: Coaching/Training	Further training on the topic of loneliness and on the tools developed	Number of participants for the university course, which is offered once a year in autumn		x	x
	University of Cyprus / Materia Group: increase number of staff that are aware of loneliness impact and consequences	MAT has a multidisciplinary team to provide care to its clients. Staff of MAT are trained to become coaches to other healthcare professionals and discuss topic of loneliness with caregivers.	Info and training days for staff	x	x	x
STAFF (of the partner organizations)	 Caminos: Enhanced content knowledge - this applies where staff are impacted by the development of IO2 and IO3 which could potentially be a new training model. Work within a transnational partnership and learning from the experience and knowledge of partners. Greater appreciation and understanding of overcoming loneliness across Europe. 	1 staff with the required experience who will be able to train more staff of the association so that they can participate in the future permanent training offer of the entity.	Number of participants enrolled in the permanent training offer and the virtual classroom		x	x
Co-funded by	MRU: Improved professional competences on loneliness and teaching methodologies for adults, as well as international cooperation	4 persons involved in developing the content, teaching and other project activities	New agreements with partners, group work order			x



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	 CDPZ: Enhanced content knowledge - this applies where staff are impacted by the development of IO2 and IO3 which could potentially be a new training model. Work within a transnational partnership and learning from the experience and knowledge of partners. Greater appreciation and understanding of overcoming loneliness across Europe. 	At least nr. 2 staff involved in developing the content for the IO2 Network Guide contents	Staff timesheets		x	
GOOD PRACTICE EXAMPLE*:	Countries:	Short description:				
	Hafelekar / UMIT Tirol:	An example of "good practice" on the part of the partner UMIT TIROL is that a university course has been planned on the basis of the developed curriculum and training programme and their piloting, which will very likely be offered annually from autumn 2023.				
	University of Cyprus / Materia Group:	Materia group is accredited training center (Training Center: K000557, Training Infrastructure:D000761), and already applied for ANAD's accreditation of the Digi-agieng training and receive official certification in order to give the opportunity to more healthcare professionals to learn and use Digi-				



DIGI-AGEING - overcoming loneliness	Grant Agreement No. 2020-1-AT01-KA202-078084 Ageing tools as part of their continuation of their education.	
Caminos:	Agreement with the Diputación de Málaga, the largest provider of care for the elderly in the province of Málaga, with more than 1,500 professionals. We obtained the commitment that information about the project would be provided through its internal channels, thus reaching every corner of the province. Interest from a lecturer at the Faculty of Nursing at the University of Malaga to include Digi-Ageing training in a module of a Master's degree. Commitment to use the Digi-Ageing platform by the Harena Foundation, which focuses on accompanying the elderly in the province of Malaga, with a network of thousands of	
	volunteers. Three care home staff have tested and applied the tools in practice, and	
MRU:	mentioned that some of them will apply it regularly.	
CDPZ:	During the pilot phase we also involved the most important trade union (called "CISL") and its "retired and volunteers people" department (called "FNP – Federazione Nazionale Pensionati"). These people are still active at local/regional level, and they are able to aware further participants	



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	(i.e. single non professional caregivers, but also further
	associations and cooperatives).
	Thanks to that, we already had nr. 4 "spin off" and pilots continuation.



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9 Attachments

- 9.1 Sustainability Plan for Austria
- 9.2 Sustainability Plan for Cyprus
- 9.3 Sustainability Plan for Spain
- 9.4 Sustainability Plan for Italy
- 9.5 Sustainability Plan for Lithuania



Find out more on the project and let's stay in touch!

Become part of the network and help us avoid loneliness in old age.

Website:	http://Digi-Ageing.eu/
Training online:	http://Digi-Ageing.eu/welcome-to-course/
YouTube:	https://www.youtube.com/@digiageing
Facebook:	https://www.facebook.com/digiageing
LinkedIn:	https://www.linkedin.com/company/Digi-Ageing
EPRP link:	https://ec.europa.eu/programmes/erasmus-plus/projects/eplus- project-details/#project/2020-1-AT01-KA202-078084



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Sustainability Plan for Austria

Context

Since October 2020, the international Digi-Ageing consortium has been working on a comprehensive concept that develops appropriate measures to counteract the phenomenon of "loneliness in old age". One of the main goals is to increase competences in the use of digital tools in elderly care and to create a strong network to develop common solutions.

A qualitative study with more than 175 caregivers and experts from the inpatient and mobile care sector in Tyrol (Schulc & Messina, 2023) showed that the lack of compliance of clients in need of care is often accompanied by psychosocial behavioural changes. In addition to the subjective feeling of loneliness, causes are often found in depressive moods, anxiety states, social isolation, loss of independence and removal from the home environment/ placement in an institution as well as in medical factors such as multiple comorbidities and polypharmacy. This multidimensional occurrence explains why care and support, which are primarily somatic in nature, are becoming increasingly complex.

The topic of loneliness in old age is seen as particularly important by care professionals, whereby there is a need for specific knowledge and skills development in the context of further training offers, since on the one hand background knowledge on the phenomenon of loneliness in old age is largely lacking and on the other hand a clear gap is perceived with regard to the use of valid tools for identification as well as solutions for the prevention and management of loneliness in older people (Digi-Ageing Consortium, 2021; available online: http://digi-ageing.eu/de/ergebnisse/).

UMIT University Course "Loneliness - Mental Health for Older People

UMIT Tyrol, as implementing partner in Austria in the Digi-Ageing project, is therefore very concerned to offer a targeted further education course from autumn 2023. Against the background described above, the university course "Loneliness - Mental Health for Older People" aims to address the social challenge of "Ioneliness in old age". The conceptual design of the curriculum for the university course was provided by the international Erasmus+ project "Digi-Ageing - Overcoming Loneliness", in which project staff from the Division for Integrated Care of the Institute of Nursing Science at UMIT TIROL were primarily responsible.



The overall aim of this university course is to promote competences in early detection, prevention of loneliness, and in the creation of flexible, lifelong learning opportunities for caregivers needed for standardised and modern quality of care. These are intended to improve the digital competences of today's caregivers and consequently ensure the security of care for clients. According to research, the authors of the concept are not aware of any comparable further education or training programme in Austria.

Network partners in Austria

UMIT TIROL and HAFELEKAR have a broad network that has been continuously informed about the project results. In the "Digi-Ageing Advice Panel" we are supported by the Federal Institute of Integrative Care, the Tyrolean Seniors' Association and the Consortium Tyrolean Homes for the Elderly.

The most important cooperation partners include Innsbruck Social Services (ISD), ArGe Tiroler Altenheime and Tirol Kliniken GmbH, which will also actively support UMIT Tirol in publicising the university course. In addition, there is a letter of intent from the Austrian Health and Nursing Association (ÖGKV).

At the national level, HAFELEKAR was able to win the Health Fund Austria and the Network Ageing as interested partners. Further cooperations are being worked on.

In summary, it remains to be said that the topic of "loneliness in old age" has aroused great interest and we have already been able to reach many people who are concerned about this phenomenon (see dissemination). In order to enable the sustainable implementation of the Digi-Ageing results, we will continue to present the project results at conferences and in professional journals and constantly expand the Digi-Ageing network.

It is great news that on the basis of the Digi-Ageing results, work can be done on significant extensions of the topic in the follow-up project "EDU-MENT: Education in Mental Health for Nurses in Home and Residential Care", which is coordinated by UMIT Tyrol, from 1 October 2023.

In the table below we explain the individual activities in more detail.



CONCRETE MEASURES:

No.	Partner / Stakeholder	Short description	Expected impacts and outcomes
1	UMIT Tyrol	The university course ""Loneliness - Mental Health for Older People" is based on the results of the Digi-Ageing project and will be offered at UMIT Tyrol from autumn 2023. The course content corresponds to the curriculum developed in the Digi-Ageing project, coordinated by HAFELEKAR. (Letter of Intent to HAFELEKAR is available)	As the pilot trainings have met with great interest, we expect numerous registrations. The university course creates an additional offer that does not yet exist in this form in Austria. As the participants learn how to use the Digi-Ageing tools in practice, they can bring this knowledge into their own organisations and offer internal training themselves. This is expected to lead to a rapid dissemination of the method/tools.
		The course is aimed at health care providers and members of various health care professions, primarily health care professionals, as well as providers of initial and continuing vocational training in the field of health care, care for the elderly, care centres for the elderly, vocational trainers in these centres, social workers and also those who provide informal care for older people (e.g. family carers). In addition, parts of the Digi-Ageing Curriculum will be presented on the part of UMIT as part of the already existing specialisation course "Psychiatric Health Care and Nursing" (90 ECTS points).	Furthermore, the announcement of this course offers the opportunity to promote the results of the Digi-Ageing project and to find additional network partners. The announcement of the university course will be made through specific channels of UMIT TIROL and HAFELEKAR: website, LinkedIn, newsletter, Facebook, and will also be supported by ArGe Tiroler Altenheime: email distributions to Tyrolean long-term care facilities, mobile services, etc. A long-term goal is to establish the topic of "loneliness in old age" in regular training courses in the health and care sector and to make a broad public aware of the importance of preventive measures.

2	ARGE Tiroler Altenheime (Consortium Tyrolean Homes for the Elderly)	Members of the ARGE are managers in the care and management sector, from facilities with different structures and from different districts of Tyrol. They participate in planning meetings as well as in organisational or care- related projects and provide professional advice to their colleagues and system partners. At present, ARGE is in charge of 94 old people's homes in Tyrol.	ARGE actively supports the application of the UMIT university course. This means that the Digi-Ageing method and tools will be presented in 94 old people's homes in Tyrol. This is an important contribution to the regional dissemination of the project results. Further cooperation is desirable.
3	LIV - Landesinstitut für Integrierte Versorgung (Federal Institute of Integrative Care)	The LIV is a regional coordination centre and comprises 6 care programmes throughout Tyrol to ensure cooperation between inpatient and outpatient care services.	This cooperation enables us to further regional dissemination, which is also aimed at outpatient care services.
4	Tiroler Seniorenbund (Tyrolean Seniors' Association)	As a service organisation, the Seniors' Association offers Tyrolean seniors advice and assistance and supports them in all situations in life. There is a wide range of counselling services. In addition, many learning and leisure activities are offered. The Seniors' Association has a very broad network.	Through the Seniors' Association, we are able to bring the project results close to the target group of older people themselves.
5	Innsbrucker Soziale Dienste (ISD) (Social Services Innsbruck)	The services offered by Innsbrucker Soziale Dienste GmbH include comprehensive and area-wide social services in the area of the city of Innsbruck. With currently eight residential and nursing homes for the elderly, the ITS is by far the largest home operator in western Austria. The	ISD also actively supports the application of the UMIT university course. In addition, ISD is important in developing further cooperation partners at regional level.



		inpatient offer includes permanent, short-term and day care. In addition to the inpatient and day-care services, the ITS offers a variety of mobile care options.	
6	Land Tirol - Mobile Dienste (Province of Tyrol - Mobile Services)	The Department of Mobile Services at the Office of the Tyrolean Provincial Government is a kind of umbrella organisation for a total of 69 health and social care districts in Tyrol, which provides, among other things, mobile care for older people.	This cooperation gives us the opportunity to present the results of the Digi-Ageing project to political decision-makers and to work in the long term to raise awareness of the issue of loneliness in old age among the general public.
7	ÖGKV - Österreichischer Gesundheits- und Krankenpflegeverband (Austrian Health and Nursing Association)	The Austrian Health and Nursing Association is a professional representation of nurses as an association with voluntary membership. The ÖGKV offers numerous quality-assured further training courses for nurses and has a broad network of cooperation partners.	UMIT has received a declaration of support from the ÖGKV. In addition to the announcement of the university course, we expect further cooperation on a national level.
8	Fonds Gesundes Österreich (Health Fund Austria)	The FGÖ promotes the exchange between practice, science and politics in the field of health promotion and assumes the following tasks: - Networking organisation that acts internally and externally and promotes intersectoral cooperation. - Publicity for health promotion - Maintain an overview of the health promotion landscape and maintain contacts with stakeholders	 HAFELEKAR is in exchange with the FGÖ, which supports in making the project results known on a national level. We are also holding talks on further cooperation and possible future funding projects. Through the exchange with the FGÖ, we also expect to be able to make Digi-Ageing training better known and offer it in the eastern parts of Austria.



		 Bridging the gap between practice, science and politics Of particular interest for the Digi-Ageing project is the initiative "Quality of Life and Equal Opportunities for Older People". 	
9	Netzwerk Altern (Network Ageing)	The Ageing Network informs about relevant scientific activities and events of the network partners, offers a comprehensive project database and provides information about European programmes and initiatives relevant to the topic. As a national service point, the Network-Altern can be contacted for advice and further information. The Network-Altern provides a platform for its partners' projects. They are specialists in building networks.	HAFELEKAR is currently in talks about a possible cooperation. This interesting path will be pursued further and offers the possibility to expand the Digi-Ageing network.
10	Nachfolgeprojekt "EDU- MENT: Education in Mental Health for Nurses in Home and Residential Care"	The EDU-MENT project (KA220-VET- 2FD42AAD) will start in October 2023 and will be coordinated by UMIT Tyrol. Based on the results of the Digi-Ageing project, there will be significant extensions in terms of content in order to create additional further training opportunities in the care sector.	In this follow-up project, the content of the topic will be expanded, the screening tools will be further developed and additional cooperation partners will be involved at the international level.
11	Teilnahme am "Kongress & Dialogtag gegen Einsamkeit"	Presentation of the Digi-Ageing results by Leonie Cammerlander (HAFELEKAR): On 30 November 2023, Social City Wien invites to the first participatory congress & dialogue day	Promote the Digi-Ageing method and tools at national level. Search for further networking opportunities with the long- term goal of presenting prevention measures for the



	Organisiert von der Plattform gegen Einsamkeit	against loneliness and social isolation in Austria. See: <u>https:</u> //plattform-gegen- einsamkeit.at/save-the-date-erster- partizipativer-kongress-dialogtag-gegen- einsamkeit-in-oesterreich/	phenomenon of "loneliness in old age" to a broad public and expanding these with additional cooperation partners.
12	Participation of UMIT and HAFELEKAR in the CALL FOR RESEARCH COMMITTEES - coordinated by UCY	The International Conference on Behavioural and Social Computing (BESC) is a major international forum that brings together academic researchers and practitioners from the fields of artificial intelligence, computational social sciences, natural language processing, business and marketing, and behavioural sciences and psychology to present current research and advances on fundamental and emerging interdisciplinary BESC topics, exchange new ideas, and identify future research directions.	Presentation of the Digi-Ageing method and tools at international level. We expect to be able to convince more international network and cooperation partners of the Digi-Ageing method.
13	Participation of UMIT and HAFELEKAR in the abstract for the conference of the Alzheimer Society / via Materia (project partner Cyprus)	Title: "Impact of country of residence on older adults in relation to loneliness, and their psychocognitive health". This is the first of 5 planned conferences in which the project partnership, represented by Materia, will present the results of the Digi- Ageing project.	Presentation of the Digi-Ageing method and tools at international level. Further international conferences are planned and both UMIT and HAFELEKAR will continue to actively participate.
14	Sustainable availability of the website <u>www.digi-ageing.eu</u>	UCY (partner from Cyprus) confirms that the website will be available and maintained for at least 3 years from the end of the project.	This agreement with UCY ensures that the results of the Digi- Ageing project as well as the online training can still be used.



		Future cooperation partners will also have the opportunity to register online and access all functions.
15	Further activities are currently being planned: UMIT Tyrol and HAFELEKA cooperations and make the results of the Digi-Ageing project accessible to new start for implementation activities at national level.	,





Sustainability Plan for Cyprus

Context

From the beginning of the project until now, MAT (Cyprus) has been able to create a strong local and regional network, in physical and online presence via social media accounts promotion.

From the initial national desktop research, local and regional data showed how much important, and complex, is the issue of loneliness and isolation for the older people. Most of them are living alone, with few local services and supports, above at social level (while the health dimension is quite well managed by the public system and, sometimes, by the private providers).

In the same time, most of the educators, healthcare professionals and caregivers are not aware about the available tools and local activities and organisations that could support older adults. A stronger network was needed in Cyprus, in term of information, awareness and above all digital tools, to be shared and developed.

This happened thanks to several actions that have been done:

- An improvement of the overall number of stakeholders, that has been able to enlarge the network, promote the digital tools and aware the elderly people against the loneliness;
- During the pilots, a variety of bodies, institutions and non-profit organizations have been involved for testing the diagnostic and digital tools;
- Applied for an official certification from Human Resource Development Authority of Cyprus (HRDA) to train the Digi-ageing tools to healthcare professionals.
- Digi-Ageing, along with other e-tools tested by Materia Group, has been nominated for an award in Health & Technology in Cyprus Responsible Business Awards 2023 (results pending)

MAT is promoting further sustainability actions which aim to reach more healthcare professionals in the long term. One of the most important actions was the application submission and approval received from the Human Resource Development Authority of Cyprus (HRDA) to certify the Digiageing training to healthcare professionals as this will have a big impact to the validity of the training and promotion of the training.



Nr.	Partner / stakeholder	Short description	Expected impacts and results	
1	Noesis Cognitive Centre & Tech Solutions Ltd	Neuroscience/Assistive tech company providing services and products to older adults and their families	At least 5 cognitive and clinical neuropsychologist will be trained to use the digital Digi-ageing screening tools.	
2	Thalpori Elderly Housing	Nursing home group providing both in-patient, out- patient and community services	, out- We expect about 10-15 nurses and formal caregivers working in this nursing home to be trained during training days through ANAD accreditation.	
3	Cyprus Third Age Observatory	NGO located in Limassol is advocating for the rights of older adults and providing community services	Staff from the Cyprus Third Age Observatory participated in the ME and were interested to use the Digi-ageing tools once the training was approved from ANAD.	
4	Polydynamo Kentro Strovolou	Community Day Care Center for older adults	Staff and volunteers working in the Polydynamo Kentro Strovolou were interested to learn on how to use the Digi-ageing tools after being approved from ANAD.	
5	Gerolakkos Community council	A voluntary organisation that is run by local residents of the Gerolakkos village	Members of the Gerolakkos Community have been informed about the Digi-ageing tools and they can use them in the role of caregivers for the people they care for.	
6			A variety of students from UNIC participated in the pilots, contributing to the next generation of healthcare professionals being aware of the consequences of loneliness and the available Digi-ageing tools.	
7	Cyprus Art Therapy Association (CARTA)	CARTA offers an alternative form of psychotherapy that offers the opportunity for seniors to engage in the creative process to facilitate communication, manage emotions and engage in a process of life review.	Already some of the art therapists representing CARTA has participated in the pilots and they ensured us that they will continue using it in their daily work with older adults as well as promoting the Digi-ageing tools to their colleagues.	



8	ITHAKI Charity	NGO supporting people with dementia and	Healthcare professionals working and volunteering at
	Organisation	alzheimer's in Nicosia and Limassol. ITHAKI was	ITHAKI will be able to integrate the Digi-ageing tool in
		created to offer the patient and his/her family	their daily work with the older adults.
		comforting support at all stages of the disease. The	
		offer of care by specialised individuals and centres,	
		the socialisation of patients and the psychosocial	
		and financial contribution to the patient's family	
		are just some of the objectives that have been set.	
9	Association of Elderly	The Association of Elderly Rights and Mental Health	Key members of ERMH have participated in the pilots
	Rights and Mental Health	(ERMH) is a non-governmental organisation which	and confirm the real need of these digital tools to their
	(ERMH), Cyprus	defends the rights of the elderly people and the	daily work with older adults. They are interested to use it
		rights of the people with mental illnesses in the	if one of the next steps is to provide Digi-ageing tools in
		north part of Cyprus. Founded in November 2018,	Turkish language.
		many citizens from various professional groups have	
		become members of the association and contribute	
		to the activities of the association on a voluntary	
		basis. The members of the Association grew from 20	
		in 2018 to 166 in 2022. Currently it is the only	
		association that exists in the northern part of Cyprus	
		that aims to protect the rights of elderly and	
		mentally ill individuals.	
10	Yasemin	Yasemin comprises a collective of youthful artists	Yasemin group organises a lot of activities and
		located in Cyprus. Their aim is to emancipate Art	workshops for older adults. It is expected Digi-ageing
		from customary and established concepts, creating	tools to be useful in the screening and prevention of
		opportunities for individuals who are typically	loneliness by the artists during this activities.
		excluded and would otherwise not have access to	
		Art. The group members collaborate continuously,	
		organise workshops, reach vulnerable groups,	
		exchanging knowledge and nurturing the fusion of	
		diverse art forms, driven by their deep longing for	
		substantial societal transformation.	



Sustainability Plan for Spain

Context

Asociación Caminos (Spain) has focused on creating a particularly strong network at provincial level, but also draws on organisations working at local and regional level. The aim is to try to ensure the sustainability of Digi-Ageing, i.e., that the objectives and positive impacts of the project will last long after its completion. It is essential for the partner organisation to ensure that the benefits derived from Digi-Ageing can be multiplied through the use of the tools created in the framework of the project by other organisations involved in the education and elderly care sector.

Different social studies carried out in Spain recently indicate that the majority of the population considers unwanted loneliness to be a major social problem in the country. Moreover, it is a risk factor like smoking or pollution, so the problem is not only an individual one, but also a public health problem. With this in mind, given the importance and complexity of the issue, loneliness and isolation have become major problems in Spanish society, especially since the pandemic. Given that the local level is the closest to the citizen and where people go first if they need something, it is vital to start tackling the issue from the municipal level. Then move up to the provincial, regional, and finally national level. This journey must culminate in a national strategy to combat loneliness and involuntary isolation.

In line with the Spanish reality, which has a strong welfare state in which education, health and public social services play a major role, the public sector, be it political institutions, health and care centres, homes for the elderly and schools, must be involved in the first place. Then, since the public sector does not reach everything, we must also include non-profit and voluntary organisations that fulfil similar functions and provide support where the state fails. Finally, we must also include privately run organisations and residences dedicated to the care sector, as well as private educational and training centres. Hence the work of creating a heterogeneous network.

During the implementation of the project, the lack of attention to the loneliness and isolation of elderly people in Spanish society has become evident, as well as the practical lack of tools available to address this reality. Thanks to the piloting, it was possible to identify the different needs in order to find solutions to them, as well as raising awareness, providing information and promoting the use of the tools developed in the course of the project. Therefore, the following measures have been taken:



- > The total number of stakeholders has been increased, thus expanding the network, promoting the digital tools, and raising awareness of loneliness among older people;
- Encouraging the participation of a large number of agencies, institutions and organisations in pilots to test the digital tools for diagnosis and prevention;
- > Transferring the results to stakeholders and decision-makers to ensure sustainability;
- Different bodies have been informed and involved in the project's actions, and commitments have been obtained from them.

All this added together makes the sustainability of the project possible in the future, once the funding period is over.

Helping to ensure the continued visibility, accessibility, and use of the results after the end of the project in order to promote maximum impact and sustainability, as well as exploring opportunities that could lead to the project results being transferred and exploited in other settings have been the priority for Asociación Caminos throughout the project, and will continue to be so in the future. Therefore, this does not end here, but a new phase has just started, in which the network becomes especially important and blended learning becomes a fixed training offer in our programme as an organisation.



Nr.	Partner / stakeholder	Short description	Expected impacts and results	
1	Asociación Caminos	The association has a permanent training offer as well as a virtual classroom. It will be able to train all its staff so that they, in turn, can continue to train carers, educators and other interested persons in the Digi-Ageing programme and the Digi-Ageing tools	7 trainers from the organisation will be able to provide training to the different target groups addressed by the project throughout the Andalusian region, the second larges in Spain and the largest in terms of population. Moreover, be adapting the training to the online format, they will be able to reach every corner of the country	
2	Community Social Services of Vélez-Málaga	The main goal of the public social services system of Vélez-Málaga is he promotion and development of all people and groups within society to be able to reach a better social wellbeing and quality of life, preventing and eliminating the causes of exclusion and social marginalization	The Social Services of Vélez-Málaga are in contact with the main agents, associations and residences working with the elderly in the city. They are also in charge of the home assistance and telecare service in the municipality of Vélez- Málaga, which has a population of more than 80.000 inhabitants.	
3	Lux Mundi	Ecumenical center which is present in Fuengirola and Torre del Mar and delivers social support, leisure, and religious activities to +500 people	them active and safeguard their social network. Lux Mundi is well known in the Costa del Sol and is in contact with other associations such as Cáritas. Through the training of its	
4	MimoCare	Mimocare aims to create a network of qualified professionals that can give their support to elderly people. Through their online platform, they are able to put elderly people (or their families) in contact with professionals who offer home care	Apart from their experience, they can support the project by	



5	Fundación Harena	Non-profit foundation which focuses on accompanying the elderly in the province of Malaga	It has a network of hundreds of volunteers. They are familiar with Digi-Ageing's digital tools and are willing to let their coordinating staff use them and then put the users in contact with the volunteer staff, once their situation has been assessed	
6	Faculty of Health Science UMA	Public university where Bachelor's Degrees in Nursing, Physiotherapy, Podiatry and Occupational Therapy, specific Master's Degrees in Health Sciences and Doctorate Programme are taught		
7	Malaga Provincial Council's Senior Citizens' Area	The largest provider of care for the elderly in the province of Málaga in municipalities with less than 20,000 inhabitants	It has more than 1,500 elderly care professionals spread over 87 of the 103 municipalities in the Málaga province, as well as being a major channel for information and dissemination throughout the territory	
8	Fundación TAS	A regional, non-profit organisation that provides new resources in rural areas and offers care services to groups at risk of social exclusion	They train caregivers from all over the area, and after having participated in the pilot training they have the capacity to raise awareness and promote the use of the project tools	
9	COPESA	Professional Association of Educators of Andalusia	It offers workshops and training for educators throughout the region of Andalusia, and after taking part in the pilot training they will be able to introduce the methodology to other professionals	





Sustainability Plan for Italy

Context

CDPZ (Italy), above all during the second part of the project, has been able to create a strong local - at least regional - network, both in real life and via social media (online).

Local and regional data shows how much important, and complex, is the issue of loneliness and isolation for the elderly people. Most of them are living alone, with few local services and supports, above at social level (while the health dimension is quite well managed by the public system and, sometimes, by the private providers).

In the same time, educators, caregivers and volunteers are not enough aware about the tools and concrete solutions that could support elderly people. A stronger network was needed, in term of information, awareness and above all tools, methodologies and experiences.

This happened thanks to several actions that have been done:

- An improvement of the overall number of stakeholders, that has been able to enlarge the network, promote the digital tools and aware the elderly people against the loneliness;
- During the pilots, a large number of bodies, institutions and non profit organizations have been involved for testing the diagnostic and digital tools;
- Last but not least, all these bodies have been continuously informed and involved in the project actions. This approach is permitting an appreciable sustainability of the project activities, also after the EU funding period.

CDPZ is promoting further sustainability actions (some of them realized within the project ending) some other before the end of year 2023. All these actions have a clear goal: maintain active and alive the Italian network against the loneliness, not only in term of promotional activities and dissemination, but also for using the project digital tools and the blended training course.



Nr.	Partner / stakeholder	Short description	Expected impacts and results	
1	Caritas Vicenza	Thanks to a bank foundation grant, Caritas is going to realize a new project focused on elderly people (based on a wide information, training paths and local services). The project will adapt, basically, Digi-Ageing "philosophy", including the tools, methodologies and training path already tested at local level		
2	Pro Senectute Vicenza	Pro Senectute is promoting a wide information and awareness also in the field of elderly people. They proposed to some local psychologists to adapt the project digital tools	nr. 6 local psychologists will be trained	
3	Senior Veneto	Senior Veneto is running several daily centres, at regional level, for elderly people and their relatives. They are launching a new project, supported by regional funds, about reminiscences (using new technologies like visors)	At least 100 elderly people will test, and than adapt, the reminiscences contents (based on Digi-Ageing materials) for the active ageing. Than, further groups of elderly could adapt these contents. Moreover, some educators will be trained for their daily work with elderly	
4	nr. 11 elderly care centres in Verona area	These centres already took part into the Digi- Ageing pilot phases (from December 2022 to February 2023). Nowadays, other participants (educators, nurses and social workers) will adopt the project tools	We expected further 25 participants, that are able to involve at least 2 or 3 elderly each one. As final results, these elderly care centres should incorporate the project tools in their daily work, in a permanent way	



5	CSV – Centro Servizi per il Volontariato Vicenza	CSV is the most important center for over 750 volunteer associations. Part of them are dealing with elderly people issues. They already strongly promoted the project results. Nowadays they are enlarging the number of users	We expect at least 15/20 further volunteer associations that are able to adopt the project tools, and disseminate the final results
6	CISL – FNP Vicenza	CISL is the most important Italian Trade Union. And the department for retired people (FNP) is very active about active ageing. They already took part into the pilot phase. Nowadays they are promoting the project results and they are involving further participants (volunteers and relatives as caregivers)	They expected further participants for the pilots and trainings. And a higher number of associations will be involved also in term of awareness and dissemination
7	ULSS8 Berica	Each year, in September / October, the health district in Vicenza area (over 400,000 inhabitants) promotes the "health train". It is an initiative to raise awareness about preventive health issues for elderly people (cronic deseases and and healthy behavior in particular)	Thanks to this initiative, we will promote the project in general, and the tools (diagnostic and training) to a wide range of users. We will also meet further partners and stakeholders that are dealing with elderly people issues
8	Veneto Lavoro	Veneto Lavoro is the regional job agency. It also runs the "repository for professional standards" where each job profile or profession is clearly describe, in term of competences, skills and knowledge. We are going to propose the blended training course contents as new profile for overcoming the loneliness of elderly people	Thanks to this new professional or job profile/standard, several training providers could use and implement our training materials and digital tools. These new professional profiles will also facilitate the participation into ESF – European Social Fund – training projects





Sustainability Plan for Lithuania

Context

Different data shows that loneliness in older age is a significant issue not only in Lithuania but also in many other countries around the world. A significant part of older adults face challenges in maintaining social connections due to physical limitations, mobility issues, and limited access to transportation. These factors restrict their ability to engage in social activities, meet new people, and maintain existing relationships. Raising public awareness about the issue of loneliness among older adults can help reduce the stigma associated with it and encourage individuals, families, and communities to take action and provide support.

Mykolas Romeris University (Lithuania) researchers are concerned about the situation of older adults in Lithuania. Participation in the project provided with new experience in dealing with loneliness issues in older age. Created tools open new possibilities for caregivers to recognize and act effectively in solving loneliness problems. MRU team plans to provide training for caregivers (formal/informal) as well as to enrich Social work study programmes with new knowledge and tools how to improve the situation of lonely older adults.

Mykolas Romeris university has two platforms for learners:

Mokymų LAB (Training LAB, <u>https://www.mruni.eu/mokslas/mokymai/</u>) is University's training and commissioned research portal, which provides detailed information about training courses, seminars or any other learning activities organised by the University. Training courses and seminars are delivered by lecturers with high international academic standing and practical experience. Individuals and organisations can book and register for a big range of various topics. Training courses can be designed or adjusted to the needs of applicants. The training can take place at Mykolas Romeris University auditoriums or at the premises of the client. Catering and other services required for the training can be ordered, as well as rooms can be rented for events. MRU Digi-Ageing team is planning to submit the



course description to the portal and to suggest the course for a wide audience. Such course would end with a certificate which would clearly define the topics of the training and learning hours.

MRU Platform for micro-credentials (<u>https://edu.mruni.eu/?lang=lt/en</u>). A micro-credential is a digital certificate of a learner's learning outcomes, obtained after a small amount of training. MRU has micro-credentials catalogue and open for all registration to any course.
 MRU Digi-Ageing team is planning to design the course as micro-credential training.

Nr.	Partner / stakeholder	Short description	Expected impacts and results
1	Students of MRU	Incorporation of the interactive Screening Tool in the study course "Social Work with Families" (Bachelor's study programme in Social Work and Law)	Each year around 20 students will gain knowledge and skills to use the tool
2	Students of MRU	Incorporation of the interactive Reminiscence Tool in the study course "Social Gerontology and Adult Education" (Bachelor's study programme in Social Work and Law)	Each year around 20 students will gain knowledge and skills to use the tool
3	Social workers, caregivers	Provision of professional development training for social workers and caregivers "Digital tools for memory activation of older people"	Around 50 professionals will gain knowledge and skills to use the tool
4	Social workers, caregivers	Provision of professional development training for social workers and caregivers "Applying the Loneliness Screening Tool in Social Care Institutions"	Around 50 professionals will gain knowledge and skills to use the tool
5	Everyone is interested in raising competences	Provision of refresher training for anyone interested "How to recognise loneliness in older people's families"	Around 100 formal and informal care givers, nurses etc will gain knowledge

