



Good practices guide





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1 INTRODUCTION

Part of the Employment and Social Innovation (EaSI) programme, the general aim of the EU Progress initiative is to encourage new ways of collaborating through alliances between public and private players in the labour market to address the lack of qualifications and persistent imbalances, thus helping to narrow the gap between the supply and demand for jobs in the EU. One of the actions planned is the promotion of new jobs in the personal care and domestic service sectors, in particular, through projects promoting quality of services and jobs (qualification needs, working conditions, the development of quality standards and other ways of guaranteeing greater professionalization of workforces in personal care and domestic services).

BES-PAT (Best European Policies, Analysis and Transference in PHS) is a Progress project whose aim is to identify and exchange Good Practices all over Europe regarding the policies and actions in the sector of Personal and Household Services as a way to define a Policies and Actions Proposal to encourage the quality and the efficiency of these services and to contribute through the creation of new jobs to the objectives of European 2020 Strategy. The results of the research and analysis will be gathered in the publication PHS Research and Proposals Guide. The project enjoys a very committed partnership composed by representatives of the Social Economy, networks of Local Authorities, Associations of Local Authorities, Regional authorities and non-governmental organizations and Universities: CONFESAL (Confederación Empresarial de Sociedades Laborales de España), DIESIS (European Research and Development Service for the Social Economy), ALDA (Association of Local Democracy Agencies), Scuola Nazionale Servizi, REVES (Réseau Européen de Villes et Régions de l'Economie Sociale).

These good practices must contribute to an improvement in the efficiency in providing these services so as to contribute to the creation of new jobs in accordance with the European Union's 2020 strategy.

The term personal care and domestic services refers to services provided in and for homes, such as:

- Cleaning;
- Repairs;
- Gardening;
- Catering.

Personal services are taken to mean activities as such looking after children, elderly, and people with disabilities or long-term illnesses, with a particular focus on services rendered with the incorporation of new technologies.

2 HOW TO IDENTIFY AND SELECT GOOD PRACTICES

The aim of this document is to present and describe the good practices in the PHS sector identified by the BESPAT Partnership.

Good practices may be defined as experiences that:

- > solves a problem or responds to a social demand;
- > use innovative methods or mechanisms;
- > see participation and empowerment of the different players;
- > achieve demonstrable results superior to those of other experiences;
- > last over time;
- > capable of being replicated by other organizations.

Good practices can be carried out by public entities at a national, regional or local level, or else by other players and sector stakeholders: suppliers, business associations, non-governmental organizations, etc.



BESPAT Spanish first workshop Madrid

The process of identification followed by the BESPAT partnership is based on qualitative criteria and focused on facts and figures enabling identification of whether the practices produce positive results, whether they can be sustained over time and whether they show a trend towards continuous improvement.

In particular, the analysis has been based on the following criteria:

- Foundation: Does the practice respond to the aims of the project? Does it contribute to the identification, creation and professionalization of employment in the personal care and home services sector?
- Relevance: Does it integrate the characteristics and needs of the people acting in the sector?
- Consistency: Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

- ✓ **Maturity:** Has it had enough time to evolve so as to stabilize the processes involved and the results obtained?
- ✓ **Empowerment of players:** Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take on board the good practice's know-how, methods and tools so that it can be implemented autonomously? Has it been developed through alliances and collaborations between different public and/or private stakeholders?
- ✓ **Evaluation and monitoring:** Are monitoring mechanisms in place? Are its results regularly evaluated?
- ✓ **Transferability:** Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?
- ✓ **Sustainability:** Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?
- ✓ **Innovation:** Has it created or adopted a novel approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?
- ✓ **Impact on gender equality:** Analyse the visible outcomes of the good practice in terms of transforming gender roles and the improvement in the balance between professional, family and personal aspects. In the case of public administrations, analyse the correction of deficits and risks in the public policies, services and resources for employment.

Those qualitative criteria are enriched by two quantitative elements that will be also helpful in the analysis, in particular:

- ✓ **Resources Assigned:** Assessment of the public and/or private resources used in the development of the good practice. These include both economic and financial resources as well as other resources, for example technological resources, for which a description is given. Indicators for the resources assigned are: time, human resources and real costs.
- ✓ **Impacts:** Has the practice produced demonstrable impacts? Does it help to solve the problem? Does it show outcomes with a positive trend? Does it contribute to achieving the goals?

The practices that follow have been selected by the BESPAT partners on the basis of their importance and following the abovementioned criteria.



BESPAT Belgian Workshop Brussels

3 BESPAT PRACTICES

During the project implementation, BESPAT partners detected several practices operating in the PHS sector and among them each partner identified 4 good practices relevant for the project activities.

The process of identification focused on the Countries involved in the project and in those where the network of the partnership extends. Therefore, it covered Spain, Italy, Belgium, France, UK, Poland, Slovenia, Sweden and The Nederland.

Here a short description of the practices identified.

SPAIN

SUPERCIUDADORES:

Super Cuidadores is a sustainable social company that provides information, training, online assistance-consultation services, a product recommender, services and interesting mobile apps, searches for professional carers and other services for families and for people with disabilities, dependent individuals and elderly people, thus improving family, personal and work-life balance, thereby improving absenteeism rates, employee productivity and the profitability of firms, in addition to training the people who work in the sector from a business perspective or on a private basis.

This practice, introduced in 2013 and operating at National level, refers to the professionalisation of the role of the caregiver for dependent people through ICT, as a means to cope with the existing employment needs and improve the quality of life of caregivers themselves (both family carers and professional carers), and of dependent individuals, whether due to their age (elderly people, minors) or because they have some type of disability and/or illness. Its specific objective is to train carers by using ICT, thus optimising both implementation (through the Internet) and the cost of training, so that they can look after the larger number of dependent people that we are going to have, mainly due to age, given the ageing population.

This practice is relevant as the sector needs training and the Spanish government has made it

compulsory to demand professional competence certificates for the social-health care field, both for the people who wish to work in social-health care with dependent people in social institutions and for the people who care for dependent individuals at home. The professional competence certificates for the social-health care field, as they are official, aim to develop to the utmost the abilities and skills that these workers require to look after dependent people, thus improving their quality of life. The training courses and master classes at SUPER Cuidadores are given by professionals, and so they are specialized in order to achieve the same objectives.

SERDOMAS:

Sedormas System S.L.L. is a Spanish company that developed an innovative management software (Aydara) to support extensive databases of both users and domestic workers: when a request for a service is received, the software enables the management company to simultaneously select the most suitable domestic worker fitting the required profile to provide the service. The software supports extensive databases of both users and domestic workers that contain all the essential information (personal details, availability, training, professional experience, etc.) so that when a request for a new personal assistance service is entered, the system simultaneously crosschecks the requirements against the details of its care workers by using the necessary filters: suitability, availability and proximity to the home. This enables the person with the well-suited profile to be selected to provide the service. The objective is to provide assistance for people and homes by selecting the most suitable candidates, based on requirements, through proprietary management software. Domestic workers are registered through the software, including information on availability, training, professional experience and the location where they can work. The practice was introduced in 2004 and has a local dimension operating in the Autonomous region of Madrid (Spain). This system makes it possible for worker professionalism to

be improved by enabling workers to obtain skills and allocating appropriate personnel to each user of the service. In particular it incorporates unemployed workers as associate workers, as well as training and incorporation of new employees, who are registered under the special general regime for domestic workers if they are providing assistance services for people as domestic workers and under the general regime in the case of home-based care assistants.

MOLINA DE SEGURA:

Ayuda a Domicilio de Molina de Segura S.L.L. is a company that, since 1989, provides home assistance services to elderly people, care services for dependent individuals, people who are ill and people with disabilities, and support for families in the city of Molina de Segura. The management of the personal and household services is awarded in a public tender process and with a two-year agreement, which can be extended for a further two years. When users request the service, the request reaches the company either through the public Social Services system or from the user on a private basis. The request and the conditions and particular situation of the user are looked at in order to assign the right personnel to provide the service. The company has qualified staff members who are experts in home assistance due both to their training and to their experience in the sector. Furthermore, to optimise the development of the home help service, all our staff, numbering around 50 individuals, receive specific, ongoing training, to recycle and increase their knowledge and thus training these workers to provide a professional, quality service tailored to the individual needs of each user

HABISBEN:

Habisben Services S.L.L. is a private company that, since 2007, provides home maintenance and garden maintenance service for pensioners and elderly people in the Costa del Sol area. The company foresees a prior training and qualification procedure as regards the duties of the company that meet the basic

needs of certain groups (the elderly). This practice is relevant as this company both meets the individual needs of these groups and makes it possible to offer services with the same purpose to local authorities.

ITALY

ASIM Fund:

ASIM is a Fund for the supplementary health assistance dedicated to employees of Cleaning, Integrated Services/Multi-services enterprises. The fund has been created in 2011 and operates at National level. The services are addressed to workers, employed through the National Collective Bargain for Cleaning Services and enterprises registered to the ASIM Fund. The objective of the fund is to enlarge the set of health services that workers can obtain through the National Collective Bargain. The ASIM fund intends to ensure to workers (employed through the National Collective Bargain for Cleaning Services and integrated services/multi-services) supplementary health care treatments, personal and household services included, in addition to the ones delivered by the National Health Service. ASIM Fund contributes to the creation of a network of professionals, facilities, associations and other actors that represent the demand side of the personal and household services. Leading the supply side, the Fund led to: - a progressive improvement of the offered services - a real benefit to become an accredited structure.

AsSaP PROJETC:

The AsSaP (Azione di Sistema per lo sviluppo di sistemi integrati di Servizi alla Persona project) project aimed at implementing active policies for employment as well as vocational training in the field of cleaning and personal care services notably for dependent people. This in a context where the national law framework entitles workers to being hired under the so-called "colf-badanti" contract and enables users to

deduct from their income tax up to a maximum of €2000 per year of their expenses related to household cleaners and family assistants. The project specific objectives were

- create an efficient regional network of intermediation services of labour demand and supply for household cleaners and family assistants, as well as to promote the reduction of undeclared work, particularly for third countries nationals;

- promote, through national and local intermediation agencies and Labour market services the professional qualification of PHS workers, and introduce a certified recognition process of informal skills:

- facilitate families' access to PHS services, thanks to intermediation agencies' services. In addition, some Regions decide to grant money transfers to families hiring workers who have participated in the AsSAP project and have completed their training courses.

The project covered 4 Italian regions (Campania, Apulia, Calabria and Sicily) in the period 2007-2013. The AsSaP project is defined as a pilot action, a 'start-up' of Systemic Actions related to PH services in the four involved Italian Regions. As a result, the SWOT analysis carried out after the project end showed that the mixed approach (i.e. public/private stakeholders; on-line/on-site tools; connection among end users/workers, intermediary organisations and employers) lying down the project has successfully contributed to achieve the expected results.

COMUNITA' ATTIVA:

Comunità Attiva is the first Umbrian community interest cooperative, an innovative model of cooperative through which citizens can engage in projects and delivering services in order to serve the common interests of the community. The "community interest cooperative" model allows citizens to be both partners- consumer users of the delivered services, and working members, as their expertise will be

functional to the services that the cooperative provides. Among other services, Comunità Attiva delivers:

- Health services (mainly for elderly, long-term patients, disabled);

- Social services (such as baby-sitting, educational support, pet care, repairs, gardening but also clown-therapy and running of a web TV dedicated to the represented community);

- Environmental protection services (promotion of the recycling culture through different services, set up and running of renewable energies community facilities, integrated energy services, consulting)

The Cooperative was set in 2014 and its activity is limited to the Umbria Region. The general goal of Comunità Attiva is to produce benefits for the whole territory through an innovative entrepreneurial cooperative model.

SANICOOP:

Sanicoop is a federation of cooperatives representing doctors and health workers and covers the entire Italian territory. Set up in 2012, it counts more than 50 cooperatives representing 15 Italian Regions. Sanicoop aims to reorganize the medical services (included PH services) supply that were traditionally purchased by Public sector. The general scope of Sanicoop is to enhance the subsidiary role of cooperation in relation to the National Health Service (NHS) as part of welfare reform, needed due to the reduction of public dedicated funds and to the increased needs of citizens. The Sanicoop's characteristic is the capability to aggregate the actors playing in the PHS' supply, thus increasing the number and kind of available medical services. Sanicoop:

- integrates the characteristics and needs of the doctors, health workers and operators directly involved in the delivering of the services;

- offers a complete set of services to be delivered integrating the needs of the final users

- Represents an incubator for new mechanisms and processes, thus contributing to improve the know-how of the member cooperatives.

BADAMI Project:

The project "Badami", managed by the Cooperative Libra, started in 2009 (in agreement with the Municipality of Ravenna and the Consortium of Social Services, which later became the ASP) to provide support to families and elder people no longer self sufficient who choose to keep the elders at their home, ensuring integration with the network of services. The activity involves the Municipalities of Ravenna, Cervia together with the towns of Faenza and Massa Lombarda (thanks to a pre-determined time range funding from May 2013 to December 2014). The project "Badami" aims to test an integrated model of "reorganisation and strengthening of services in support of home care" in the direction to qualify private care-work. The scope is to develop a "place" to bring together and catalyse efforts to bring the work of care towards a more accessible, qualified and protected system. The target groups are the frail elderly, their families and caregivers. The project has the following general and specific objectives.

General objectives:

- 1 Enhance and qualify the care work of family assistants, supporting their entry and stay in the workforce, and promoting the growth of a regular labor market.

- 2 Facilitate the matching supply / demand work through careful selection processes of assistants in relation to the family who need care services and thanks to the network organization to be able to provide concrete answers to the needs of users (caregivers and families).

Specific objectives:

- 1 reducing the rate of irregularities in the work of private care;
- 2 creating easier access to the regulated market of private home care;
- 3 facilitation meeting demand / supply;
- 4 Development of an integrated network of services that collaborate with the territorial service;
- 5 establishment of a Register of caregivers to improve the quality of care provided to the elderly and to their families;
- 6 professional development of care-operators registered into the database through specific training.

The project Badami is a support to ensure the protection of workers' rights, the quality, adequacy and continuity of care for the elderly, representing an effective support for families in need of assistance, but also to caregivers offering work.

BOTTEGA DEI SERVIZI:

Bottega dei Servizi is a Consortium established in 2012 in the Ravenna Province that brings together 12 cooperatives operating in different areas - mainly in social and health services, but also in service areas such as (social) housing, cleaning, catering or repair.

Its Objective are:

- sense of this term) through a unique one-stop shop;
- to respond, through cooperation between service providers in different service areas, to the complexity of needs a family might have;
- to make families themselves become the protagonists and give them the opportunity to co-conceive the service offer that would respond to their specific needs;

- to promote a commercial brand that reflects the values and the offer of the participating cooperatives and that valorizes the inter-sectoral approach of the cooperative movement;

- to provide a system able to guarantee the legality (acting against the black market!) and quality of the services, their (financial) accessibility and sustainability

- to facilitate and promote the creation of new and innovative services.

Among the services offered figure mainly:

- Care Services: homecare for elderly, people with a handicap, babysitter etc.), night assistance at home or at the hospital, food delivery, psychological assistance for families etc.;

- Domestic Services: Cleaning, moves/relocation, gardening, repair services, maintenance of electrical installations.

The "Bottega dei Servizi" operates through two "shops" (situated in Ravenna and Faenza) and through a website. Here the Consortium plays a double role: Next to the services provided for families it also acts as an 'Observatory' for cooperatives: It helps them to better define the (changing) needs of the families and, based on this, to review and further develop their offer in cooperation with other cooperatives.

BELGIUM

TITRE SERVICE:

The Service Voucher (Titre Service) system is a wage subsidy for labour-intensive, low-skilled domestic work introduced in Belgium in 2004 with the aim of promoting the development of services and proximity employment and combating the black market. Vouchers are sold to people who

require house-hold services. Each person residing in Belgium with an ID card and SIS card is entitled to a quota of 500 service vouchers a year, with the first 400 service vouchers sold at a rate of 9 EUR each, and remaining 100 service vouchers sold at a rate of 10 EUR. In addition, each household has a quota of maximum 1000 service vouchers, with exceptions given to single parents and people with disabilities, who may be entitled to 2000 service vouchers, depending on the circumstances. Mothers who have just given birth, are also entitled to 105 extra service vouchers for a certain period of time. This subsidy scheme allows for domestic workers to be declared and benefit from a legal salary, health insurance, paid holidays, and a pension; benefits that were not all possible when working on the black market. For each service voucher, a domestic servant receives a salary of 22.05 EUR, paid by both the customer and the state. In addition, tax breaks are also given to each service voucher, creating another incentive to purchase these services. The list of activities covered by the voucher services system is strictly defined by the federal law and includes:

- Cleaning
- Laundry
- Ironing
- Small sewing works;
- Cooking
- Grocery shopping;
- Transportation of people with restricted mobility

The system is financed by: the issuing company, users, employers, workers and the Federal Unemployment Benefit Agency. The unit cost of a titres-services voucher is 9€. The system has also fiscal advantages for the users as the cost of the voucher is partially tax-deductible: the service voucher scheme entitles its users to deduct 30% of their spending on vouchers from their taxable

earnings. The Belgian voucher system was introduced to create new job opportunities while providing incentives to move from undeclared work to a regular job in a new economic sectors. In this sense it provided a new approach to tackle undeclared work and provide qualification to workers. The system needs financial support from the federal government. In particular, while the cost of each voucher is 9 euros, the workers are paid €22.04 for each service voucher. The difference between this amount and the worker's earnings (€13.04 or €12.04 per voucher) is paid by the Federal Unemployment Benefit Agency to the issuing agency.

FRANCE

DOMIPHONE APPLICATION:

The Domiphone telemanagement solution has been developed in 2000 on request of several French public authorities to complement Edenred's solution Ticket CESU®. The latter has been launched in the context of the French Borloo plan to intensify job creation in the personal and household services sector. Domiphone is a tool explicitly dedicated to public authorities and services providers to ease their management of PHS. This IT system helps them to better follow the activities provided, to collect data and to avoid administrative burden (for instance by suppressing the need for presence sheets and by generating planning alerts directly addressed to their employees). Domiphone is notably used by public authorities to increase transparency in the management of public funds dedicated to personal and household services (in particular long-term care to elderly and disabled people) and to simplify administrative task and follow-up on care provision.

Domiphone is composed of:

- An Interactive Voice Response (IVR), to register hours provided by social and domestic workers
- A database, in which all these hours are stored
- Several websites, to provide access to these data and to generate invoices to services providers.

On the one hand, it constitutes a tool easing the work of the domestic worker through different features such as an interactive planning, a clear list of activities to be done and achieved, a geo-localisation and assistance to join the beneficiary of its services and a simple access to different means of communication to contact him. It is also a tool to connect domestic workers, who are often isolated and working alone in a private place (the house of the beneficiary). The application therefore proposes for example a feature to trigger an alarm in case of work accident.

On the other hand, the mobile application is synchronized with an internet platform allowing both relatives of the beneficiary and the funding entity to follow the domestic services provided (number of hours, exact timing of the provision, type of activities provided, etc.). It therefore ensures a transparent treatment of such services.

This tool becomes really useful to provide a clear view of what have been done by colleagues, not to repeat the same activities, becoming an instrument to maximise coordination between workers. It optimizes the continuity of the provision of services and also the organization of workers rounds. It helps services providers to simplify tours and agenda of workers.

It is also a way to implement a person-centred service, with a specific and adapted care.

TREMLIN SOLIDARITES:

Since 2005, the programme "Tremplin Solidarités" of the region Franche-Comté seeks to enhance quality employment within not-for-profit organisations providing home care services specifically for elderly persons or persons with disabilities. The objectives of the initiative are multi-fold, as it aims to professionalize at the same time persons (working for service providers), the structure of the service provider and the sector (not-for-profit organisations providing home care services). The main goals are: professionalisation and structuration of the employment of non-qualified (non-certified) assistants in the field of domestic services provided to elderly or other persons dependent on assistance/care (leave the vicious circles of precarious employment including low salaries, high working hours and lack of time for training); professionalisation of service provider organisations and of the sector in general; improvement of working conditions of employees in the field of home care and therewith promoting a more positive image of the profession of a caregiver.

A Eligible are not-for-profit enterprises that: provide domestic services/home care services to elderly and other persons dependent on assistance/care;

B are a member of one of the recognised national federations of domestic service/home care providers (ADESSA, UNA, ADMR) and therewith of the "Collectif Franc-Comtois d'Aide à Domicile" (composed of these three unions) and respect all relevant collective agreements in the sector.

Persons whose employment and professionalisation is supported have to be employed by the above mentioned structures and have to find themselves in at least one of the following groups:

- under 26 years old;
- worker with disabilities;
- 50 years +;

- single parents;
- persons living in a rural zone that is undergoing a process of revitalization or in a disadvantaged neighbourhood;
- long-term unemployed;
- beneficiaries of the RSA (Revenu de Solidarité Active).

The agreement with each beneficiary association is based on a specific "Plan for Professionalisation", which takes account of the specific socio-economic situation and strategy of the association.

Since 2005, the budget foreseen for the initiative doubled (from approx. 800 000 EUR to nearly 2 million EUR). The Franche-Comté region seems to clearly consider the initiative as a success. Since 2013, the Franche-Comté region also formalised its partnership with the Collectif Franc-Comtois d'aide à domicile in order to support cooperation and mutualisation between not-for-profit structures working in the field of personal care and domestic services. Associations receiving financial support in the framework of Tremplin Solidarité have to use training instruments that are recognised by this platform. Therefore, the Franche-Comté Region examines each "Plan for Professionalisation" together with the Collectif Franc-Comtois d'aide à domicile.

CAISSE NATIONALE DE SOLIDARITE POUR L'AUTONOMIE (CNSA):

La Caisse nationale de solidarité pour l'autonomie (CNSA) is a public institution created by the law of the 30th of May of 2004. La CNSA is, at the same time, a fund in charge of allocating financial resources and an agency for technical support. CNSA is responsible for financing aid for elderly and disabled people, ensuring equal treatment throughout the territory.

CNSA provides financial support and funding for services to persons who have lost their independence. These services, in addition to daily needs, provide specific solutions to different people:

- children: the provision of education and/or professional training;
- Adults: assistance with professional and/or social integration (centres for professional re-education, social and medical support, care homes, etc.);
- The elderly: by providing care and health services.

Those services can be delivered at home or in specialized residences.

The CNSA, created in France in 2004 following the events linked to the 2003 heat wave and in connection with the 2005 disability bill has three major goals in leading social-care policies:

- funding services and residences for people with autonomy loss (19.2 billions euros) and contribute to local authorities' expenses for special allowances (2.35 billions euros) ;
- equal treatment for everybody in the whole territory : the CNSA distributes its funds to reduce disparities between regions ;
- a role of expertise and information towards its partners: in particular, the CNSA has a role of expertise towards MDPH network.

UNITED KINGDOM

MOBILE LEARNING SOLUTIONS: The Northern Ireland Social Care Council has developed (in partnership with an e-learning solutions company called Learning Pool, the Department of Health and social Services, two universities, training colleges and key employers in the statutory and independent sector), a suite of mobile apps that have a particular relevance to the Social Care workforce. The apps include a Child Development series, 0-6, 7-12, 13-18 years; an app for child minders (who care for children in their own home) and an app on good practice for Domiciliary Care Workers and home workers (who provide care mostly for older people).

The apps are free of charge, easy to access and are designed to support workforce learning and development. The apps have been developed to help careworkers' learning in practice by providing succinct, bite size information at their fingertips, as and when they need it. The apps also provide links and gateways to more detailed theoretical information to allow for greater reflection and learning towards accredited training and qualifications.

The goal of the apps is to provide free, easy access to information on good practice that would aid on the job learning. It is a practical approach to practice development that can be used, both as a real time tool and a reflective tool, by the individual in supervision with managers, in peer group sessions with work colleagues and as part of a training programme.

The apps integrate the characteristics and needs of the people acting in the sector in that it is designed to be a mobile learning tool that can be useful to the individual to look at real time, specific, information. It can also be used by a peer group to reflect on practice and to learn from one another as well as in a traditional classroom setting. As this group of workers tend to be mobile, it allows them to work on their own and have

support for formal training with a tool that is designed to respond to their particular needs. It is available at their fingertips, to them as an individual. It is also written in an accessible language and designed to capture key concepts and deliver quick, practical advice. A good deal of time and discussion in the design phase was spent on ensuring the apps would be usable and accessible for the specific needs of the mobile workforce with potentially limited formal training in their area of care.

CASA (CARE AND SHARE ASSOCIATES):

Care and Share Associates (CASA) is a UK's leading employee-owned home care social enterprise. CASA is a social enterprise which develops franchise companies in which the workforces are the owners. Employees are able to participate in the decisions that affect their working lives.

CASA supports people to live in their own homes, in the way they choose, with as much independence as possible. In particular, their services are directed to older persons considering getting help with care and support and disabled persons who need additional care and support.

CASA provides 24/7 support for disabled adults who wish to live in their own homes. Its Franchise Companies can offer people assistance with personal care, including:

- Washing, bathing and showering
- Getting up and going to bed
- Changing bed linen
- Using the toilet and maintenance of continence
- Assistance with moving and transfers
- Help during the night
- Support to carers
- Enabling

- Assistance with the prompting of prescribed medicines
- CASA also provide support with domestic tasks, such as:
- Preparing meals and washing up
- Shopping and running errands
- Domestic and household tasks
- Sitting service

CASA is a social enterprise whose purpose is not to maximise profit but to provide high quality care and support. Its main commitment is to the communities we serve. This means creating better jobs, supporting employees' professional development and offering a high quality, flexible service to those individuals who rely on us for their care needs. CASA's approach to workforce planning is therefore about more than recruiting and training staff, it also means defining a positive workplace culture. Social care providers are now required to offer a range of support options beyond the traditional boundaries of residential, day and home care. CASA longer term strategic vision is to continue to expand and make a real difference in the social care sector.

CASA's mission is to democratise home-care in the UK, greatly enhancing the 'social enterprise take' of the UK's Health and Social Care market through robust competition with the private sector, and close collaboration with the public sector. This will be achieved through the replication of successful social enterprise models working within the health and social care sector.

Care and Share Associates Ltd (CASA) is led by an experienced Board and backed by Bridges Ventures, a private investment company, which aims to achieve dedicated social and/or environmental goals through its support. CASA holds up to 26% of shares in all its Franchise Companies. The remainder of the Franchise Companies' shares are held in Employee Benefit Trusts (EBTs), which allocate shares to employees in accordance with the rules laid out in the Share Incentive Plan (SIP).

SWEDEN

GIL COOPERATIVE GOTHENBURG:

GIL cooperative in Stockholm emerged out of the Independent Living Movement and its definition of "personal assistance" following which the end user of the service decides "who is to work, with which tasks, at which times, where and how".

The cooperative was set up as a project in 1989 by several persons with a handicap. It now operates based on a model of personal assistance which was made possible through a national law adopted in 1994 - a law making direct payment for personal assistance to persons with a high degree of disability possible: Based on a biannual assessment of the assistance needs (in hours) of each beneficiary, the latter receives directly a certain amount of money. With this budget he/she is entitled to contract one or several assistants directly, or to use the services of public or private organisations providing assistance. In the case of the GIL cooperative of which only assistance users can be a member (and board members), the monthly benefits paid by the authorities (either the municipality or the National Social Insurance Agency) to the person are transferred to the cooperative and the subaccount of the respective member. Each member of the cooperative is accountable for his/her budget which is used to cover the salary costs of the personal assistant, administrative costs and some extraordinary expenses (e.g. travel of the assistant when accompanying the beneficiary etc.).

GIL signs the employment contract and acts thus formally as the employer of the personal assistants which are, however, recruited, trained and supervised by the members of the cooperatives individually following their specific needs.

The services delivered by the cooperative include advice; administration and accountancy; training of beneficiaries and assistants; legal counselling

(representation of individual members in legal disputes etc.) and communication (disseminating information on the movement etc.). Moreover, GIL also acts as an advocacy organisation aiming to change the public perception of people with disabilities and to make society for the latter as accessible as it is for any other part of the population.

Before entering GIL cooperative as a member and starting to recruit their personal assistant, potential members have to take part in training sessions aiming to convey the necessary skills and knowledge on recruitment, supervision, training of assistants etc. Moreover, peer support sessions are organized on a regular basis to provide cooperators with the opportunity to exchange information and experiences on relevant topics.

Each beneficiary of personal assistance benefits has to diligently report on and prove the use of the budget he/she received.

THE NEDERLANDS

ONE FAMILY - ONE PLAN SCHEME:

As part of the devolution process taking place at the local level, the City of Heusden (the Netherlands) is trying to restructure social services and improve the way care is delivered. The idea is to work on more integrated solutions (holistic approach) to support households. Previously, problems faced by service users tended to be solved on an individual basis without taking into consideration the broader picture. This new way of supporting people leads also to more efficient and sustainable solutions.

Responsibilities:

- Commissioning social service and health care to private providers,
- Organising the informal care sector.
- Actions:
- Setting up a monitoring system,
- Setting up of team responsible to grant access to formal care,
- Setting up of an Advisory Board,
- Assessing the needs of the population,
- Signing agreements with service providers (over 55 organisations),

Personal and household services can be organised in three different ways:

- Households are granted a specific amount of time per week (most common option). Service providers deal directly with the municipality of Heusden for the price. The municipality has an agreement with six service providers for housecleaning (average amount of time: 2 hours/week, price: €21/hour).
- Personal budget: service users need to commission their own services in exchange of receiving a specific budget (€29/week for housecleaning). A national organisation records the bills and proceed to the allocation of personal budgets.
- Vouchers: poorly-developed for now. Service users use a voucher to pay a part of the service and the municipality covers the rest.

In practice, one professional carries a need assessment during a “kitchen-table interview” at home using the “quick-scan” method and sets up a personal plan taking into consideration various criteria: family situation, housing conditions, financial situation, health (physical, mental), daily activities and possible

involvement of family, friends, neighbours etc.

The type of services and support delivered are: social care and support, guidance and counselling for unemployed people, care planning, medical care.

SLOVENIA

ELDERLY FOR HIGHER QUALITY OF LIVING AT HOME:

Elderly for higher quality of life at home is a programme carried out since 2004 on the basis of tender Ministry for work, family, social affairs and equal opportunities. It is included in the multi-annual program. Coordinator of the program is the Association of Pensioners of Slovenia, contractor is the Pensioners' Association of the entire Slovenian area. The program is intended for persons older than 69 years who live at home and need various forms of assistance and services. Each year new entrants, those who completed the age of 69, join the program, younger people only if they are ill or disabled.

The program is currently being implemented in 302 of the 503 associations of pensioners in the territory of SLO with 3450 volunteers who visit the elderly, irrespective of membership in DU living at home.

In accordance with the adopted methodology, they conduct personal interview on the basis of a questionnaire, through which they determine the quality of their lives and their need for assistance and services. The interview is carried out with the consent of the user. They participate and connect with other NGOs - the Red Cross, Caritas and public services and local community.

The program runs from 2004- and by the end of 2014, it included 152,082 senior citizens or 64% of all target groups, 82.4% of the target group in the areas of

societies that are included in the program... There were 524,774 visits carried out and 119,468 different forms of organized services.

The programme general objectives are:

- get to know the needs of older people living at home;
- to seek those who cannot or are unable to seek help;
- start the continuous contact with existing public services and NGOs;
- organize and implement voluntary help;

Its specific objectives include:

- to allow the elderly to live independently in their home environment for as long as possible;
- to inform local and state community about the quality of life and the needs of the elderly with the help of the organization;
- to contribute to a realistic assessment of the needs for assistance and services with quality data;
- provide support with legislation.

POLAND

GDYNIA'S DIALOGUE ON QUALITY OF CARE SERVICES; "GDYNIA CHARTER OF QUALITY OF CARE SERVICES"; "GDYNIA'S STANDARD FOR RESIDENTIAL CARE SERVICES":

Gdynia is a city in Eastern Pomerania (Poland) where care services in Gdynia are provided by NGOs (non-for profit actors), social enterprises or other small enterprises.

From 2008 to 2010 the Municipal Welfare Centre of Gdynia participated in a European project, led by the European Network of Cities and Regions for the Social Economy (REVES aisbl). The aim of this project was to develop a methodology to define "Territorial Quality Standards for Social Services of General Interest".

After the project end the local authority decided to carry out, in 2011 and 2012, "Gdynia's dialogue on quality of care services" – a participatory process involving around 1000 persons, among them final users of care services, service purchasers and service providers, front line staff, voluntary workers and others. The dialogue led, first of all, to the identification of a catalogue of quality criteria: efficiency, good management, positive approach to cooperation, information flow, mutual respect, availability, responsibility, adaptability and solidarity. Among the final results of the process figure the drafting and publication of two documents:

- 1 the "Charter of Quality of Care Services" which lays down main principles and quality standards for the design, organization and provision of care services, and
- 2 "Gdynia's standard for residential care services" focuses specifically on domestic services and contains:
 - the definition of the objectives of care services and expected results (as defined during the aforementioned participatory process);
 - a catalogue of the whole range of (domestic) care services provided in the city of Gdynia;
 - duties and rights of organizers and providers of care services as well as care givers (this part also include requirements for professional qualifications of care givers).

The care standard has now also been integrated into public procurement procedures. With concrete requirements regarding the employment of care givers (minimum salary, existence of a proper contract, but also existence of a training fund or contribution to a local training fund by the employers) the local authorities aim, for instance, to improve the image of the care giver profession and the level of education of care givers. However, the above mentioned participatory process also led to clear changes and innovation in service design, service organization and provision. An important example in this sense is the introduction of a system linking telecare with traditional care services. A bracelet or phone device with buttons of different colour enables the user (i.e. the elderly person):

- A** to contact an Alarm Centre (available 7d/7 and 24h/24) which will either get in touch with a care giver knowing the elderly person, with family members or other close persons who could rapidly visit the person; or send an ambulance (red button);
- B** to use assistance services providing information/orientation/consultation (including psychologists etc.) (green button);
- C** to get to know and use extra services (e.g. rehabilitation, repairs, cleaning...) (blue button).

The system has been established and is run in cooperation with private enterprises. It is free of charge for certain groups (those already entitled to receive certain social benefits) and available at a reasonable price (7 EUR/month) for other residents of Gdynia. The local authority co-finances the service.

The Gdynia initiative is based on a broad participatory process that involved directly also service users and service staff (carers) in the definition of principles and standards regarding service design, organisation and delivery.

With regard to these two groups of stakeholders the process had a clear impact:

- A on quality of services - enhanced also through the integration of the developed standards and principles into public procurement procedures;
- B on service innovation (still in the sense also of quality enhancement);
- C on the improvement of qualification and work conditions of service staff (which is part of the principles/standards and thus also of considerations included in public procurement procedures).

However, dialogue and resulting standards also incorporated viewpoints of other stakeholders such as service providers (employers) or civil society in general.

4 METHODOLOGICAL ANALYSIS

Here the good practices are examined in general terms (collectively) on the base of the qualitative criteria adopted for their identification. A deeper and more detailed analysis will follow in the PHS Research and Proposals Guide.

- > Foundation: Do the identified practices respond to the aims of the project? Do they contribute to the identification, creation and professionalization of employment in the personal care and home services sector?

The identified good practices match the aims of the BESPAT project. Every practice fully hits the aims providing interesting information related to new solutions for the identification, creation and professionalization of employment in the personal care and home services sector. The good practices, in general, give an elevate contribution to the development of all aspects covered by the project.
- > Relevance: Do they integrate the characteristics and needs of the people acting in the sector?

- > Consistency: Do they have a methodological approach relating the processes and instruments connected to the aims and outcomes of the action?

The methodology is clear and in several cases is well-defined. In other cases, even if it is not fully clear, they allow to respond in an efficient way to the aims of the projects and to the needs of people. This identifies them as very good tools for the fulfilment of the project activities thanks to the ability of embracing the requests of the several figures of the sector.

- > Maturity: Have they had enough time to evolve so as to stabilize the processes involved and the results obtained?

Most of the identified practices they have several years of experience that let them to have, on the average, a good stability. However, part of them are quite recent without a stable experience and modifications are still possible according to the response of the users.

- > Empowerment of players: Have they strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take on board the good practice's know-how, methods and tools so that it can be implemented autonomously? Have they been developed through alliances and collaborations between different public and/or private stakeholders?

As for the involvement of different players, such as stakeholders acting in the sector, the good practices identified are able to drive methods, tools and know-how to players interested in. Only a few cases presented a moderate empowerment of players due to their characteristics.

- > Evaluation and monitoring: Are monitoring mechanisms in place? Are its results regularly evaluated?

All the identified practices have evaluation

systems in place that allow the monitoring of the action and the fulfilment of the targets. Most of them has a system based on annual controls. In some cases there are deeper grade of control in place consisting in monthly or daily checks, or in deeper degree of monitoring. In certain cases however the evaluation system is less strict ore based on checks every 2 years. In certain cases the evaluation was in place but the practice wasn't mature enough to be evaluated.

- > Transferability: Are the practices transferable to other areas or replicable with positive results by other organizations?

In general we can say that the identified practices are transferable to other reality that share the same values and wants to provide support for people in need of cares. They present mechanisms and tools that make it possible for them to be replicated in different areas or context. The high degree of transferability is usually due to presence of stable tools for divulgation and support. However, in certain cases the degree of transferability is lower because of the need of a clear political support in order to extend the action.

- > Sustainability: Have the practices the political, technical, human and financial conditions to ensure its continuity over time?

A positive factor that characterised most of the good practices identified is the sustainability, namely the political, human and financial conditions to support the action. Half good practices have a stable financial and political support and strong technical conditions. The other half depends on public authority choices and/or is subjected to the presence human resources, except two cases which have few possibilities to be sustained.

- > Innovation: Have the practices created or adopted novel approaches to the problems?

The identified practices are in new and innovative

ways able to face the problems of the sector because of the considerable presence of totally creative tools. There are also many new tools combined with traditional systems and the use of classical methods and approaches is limited.

----> Impact on gender equality

As for the gender equality level, it can be noticed that the sector tends to be unbalanced in favour of women. In general, the majority of the workers in the personal care and home services sector is represented by women. However, among the practices identified by the BESPAT partnership there are different examples of good balance men/women, strengthened role and professionalization of women and tools for the involvement of men.

5 CONCLUSIONS

According to the EC definition, "Personal and household services" (PHS) cover a broad range of activities that contribute to well-being at home of families and individuals: child care (CC), long term care (LTC) for the elderly and for persons with disabilities, cleaning, remedial classes, home repairs, gardening, ICT support, etc."

PHS Sector has a great potential in terms of creation of job opportunities and improvement of the quality of care. For these reasons, it represents a fruitful sector for the implementation of the objectives of European 2020 Strategy through the improvement of the quality of the services and jobs.

Thanks to its commitment, the BESPAT partnership was able to identify and describe 20 good practices in the PHS Sector from 9 Member States. These experiences have been selected on the basis of qualitative criteria (foundation, relevance, consistency, maturity, empowerment of players, evaluation and monitoring, transferability, sustainability, innovation and impact on gender equality) and quantitative criteria (resources assigned and impact).

This has permitted a careful identification of the practices relevant for the project and the selection of the best solutions taking into consideration the context, the action and the results. These good practices are new and innovative solutions able to face the problems of the sector and to embrace the needs of people acting as care giver or user. They prove to be excellent contributions to the improvement in the efficiency of the PH Services and to the creation of new job opportunities. In general, the identified experiences fully hit the targets fixed by the project by means of a greater professionalization of workers, development of the quality of the service and enhancement of working conditions.

Moreover, their analysis shows that the sector is growing, as well as the demand for such services. In this

context Social Economy seems to play a leading role in narrowing the gap between the supply and demand for jobs in the EU. In particular, the identified good practices certainly represent a key element in the implementation of the objectives of the Employment and Social Innovation (EaSI) programme.

REFERENCES OF THE ORGANISATIONS INVOLVED IN THE COLLECTION OF GOOD PRACTICES

super
cuidadores

SUPER Cuidadores
<http://cuidadores.unir.net/>

 **Serdomas**
Ayuda a Domicilio

Sedormas System S.L.L.
<http://www.serdomas.es/>


AYUDA A DOMICILIO
DE MOLINA DE SEGURA, S.L.L.
Ayuda a Domicilio
de Molina de Segura S.L.L.
<http://www.ayuda-domicilio-molina.es>

AsSaP

AsSaP
<http://www.italialavoro.it/wps/portal/assap>

Habisben Service S.L.L.
www.habisben.com


Fondo ASIM
Fondo Assistenza Sanitaria
Integrativa Multiservizi

Fondo ASIM
<http://www.fondoasim.it/>


Comunità Attiva
Comunità Attiva
<http://www.comunita-attiva.com/>


LIBRA
LIBRA Coop. Sociale
di Interventi e Ricerca

Badami Cooperativa Libra managing the project:
<http://www.cooplibra.it>



Bottega dei Servizi
<http://www.bottegadeiservizi.it/>



Titre Service
<http://www.titres-services-onem.be>



Domiphone Application
<http://www.edenred.fr/besoin/gestion-des-programmes-sociaux-publics/produit/domiphone/>



Tremplin Solidarités (Franche-Comité region)
<http://www.bourgognefranchecomte.fr/>



Caisse nationale de solidarité pour l'autonomie
<http://www.cnsa.fr/>



Mobile Learning Solutions
<http://www.niscc.info/index.php/14-employers/236-mobile-apps-all-niscc-apps>



<https://www.casaltd.com/>



GIL Cooperative Gothenburg
<http://gil.se/>

One Family-One Plan Scheme (Heusden Municipality)
<https://www.heusden.nl/>



Elderly For Higher Quality Of Living At Home
<http://www.zdus-zveza.si/project-elder-ly-for-elderly>



Gdynia's Dialogue On Quality Of CareServices
<http://www.gdynia.pl>



Federazione tra Cooperative di medici e di operatori sanitari
<http://www.federazione-sanicoop.coop/>

PARTNERS



Réseau Européen des Villes & Regions de l'Économie Sociale



European Association for Local Democracy
Association européenne pour la démocratie locale



6 ANNEX

DIESIS

GOOD PRACTICES TEMPLATE

IDENTIFICATION	
Name	CASA Care and Share Associates
Country and area (Region, City...)of implementation	UK
Territorial scope (does it operate to the entire territory or only in part of it?)	Knowsley, Leeds, Halifax, North Tyneside, Newcastle and Manchester
Period of execution	2004 - NOW

CONTENT

- Description of the good practice

Care and Share Associates (CASA) is a UK's leading employee-owned home care social enterprise. CASA is a social enterprise which develops franchise companies in which the workforce are the owners. Employees are able to participate in the decisions that affect their working lives.

With its founder organisation Sunderland Home Care Associates (SHCA), was awarded

Social Enterprise of the year in 2006. With four CASA units in operation, and providing over 7000 hours of care per week, CASA is viewed by the Department of Health and others as a trail-blazer in health/home care social enterprise franchising replication.

The CASA Group supports people to live in their own homes, in the way they choose, with as much independence as possible. In particular, their services are CASA services are directed to older persons considering getting help with care and support and disabled persons who need additional care and support.

CASA provides 24/7 support for disabled adults who wish to live in their own homes. Its Franchise Companies can offer people assistance with personal care, including:

- Washing, bathing and showering
- Getting up and going to bed
- Changing bed linen
- Using the toilet and maintenance of continence
- Assistance with moving and transfers
- Help during the night
- Support to carers
- Enabling
- Assistance with the prompting of prescribed medicines

CASA also provide support with domestic tasks, such as:

- Preparing meals and washing up
- Shopping and running errands
- Domestic and household tasks
- Sitting service

- General and specific goals

CASA is a social enterprise whose purpose is not to maximise profit but to provide high quality care and support. Its main commitment is to the communities we serve. This means creating better jobs, supporting employees' professional development and offering a high quality, flexible service to those individuals who rely on us for their care needs.

CASA's approach to workforce planning is therefore about more than recruiting and training staff, it also means defining a positive workplace culture. Social care providers are now required to offer a range of support options beyond the traditional boundaries of residential, day and home care. CASA longer term strategic vision is to continue to expand and make a real difference in the social care sector.

CASA's mission is to democratise home-care in the UK, greatly enhancing the 'social enterprise take' of the UK's Health and Social Care market through robust competition with the private sector, and close collaboration with the public sector. This will be achieved through the replication of successful social enterprise models working within the health and social care sector.

- Targeted groups
- Older people considering getting help with care and support for themselves;
- Family members, carers or people having Power of Attorney of somebody needing care;
- Disabled people who need additional care and support;
- Parent of an adult son or daughter who is disabled.

FOUNDATION

Does the practice respond to the aims of the project? Does it contribute to the identification, creation and professionalization of employment in the personal care and home services sector?

CASA has succeeded in forging a model of ownership and management that rewards the loyalty and professionalism of the whole staff team. For them, employee ownership means a commitment both to the service and to the people receiving care.

RELEVANCE

Does the practice integrate the characteristics and needs of the people acting in the sector?

CASA has established a 'panel' whereby all units get the chance to share experiences, get involved in training and professional development. The panel also has the function of electing two of its own members to represent the units on CASA's board of directors. The panel is the way in which the CASA's Group really articulates its voice to policy-makers and the outside world- to become the democratising force of the home-care sector.

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

MATURITY

Has it had enough time to evolve so as to stabilize the processes involved and the results obtained?

CASA was set up in 2004, but the way they work is based on the pioneering and award winning social enterprise, Sunderland Home Care Associates, which has been providing care and support since 1993.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take on board the good practice's know-how, methods and tools so that it can be implemented autonomously? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

Care and Share Associates Ltd (CASA) is led by an experienced Board and backed by Bridges Ventures, a private investment company, which aims to achieve dedicated social and/or environmental goals through its support.

CASA maintains close relationships with all of its franchise companies and owns a minority stake in each. Each franchise company has at least one CASA Board member on its Board.

CASA holds up to 26% of shares in all its Franchise Companies. The remainder of the Franchise Companies' shares are held in Employee Benefit Trusts (EBTs), which allocate shares to employees in accordance with the rules laid out in the Share Incentive Plan (SIP).

CASA franchise companies support each other in many different ways, including sharing resources, learning from each other and offering moral support when things are difficult. They are

actively growing and developing new employee owned social enterprises, not just so that as many areas as possible can benefit from the model and way of working, but also because we know that together we're stronger.

EVALUATION AND MONITORING

Are monitoring mechanisms in place? Are its results regularly evaluated?

Their Quality Management System consists of a robust and comprehensive set of policies that meet the statutory requirements for running and delivering a domiciliary care service including, all aspects of managing and staffing the service, the care of our Service Users, health and safety legislation etc. All CASA policies are reviewed regularly to ensure they are current and continue to meet all statutory, regulatory and legislative requirements.

The CASA Group employs a full-time Quality Manager, who has overall responsibility for the implementation of our Quality Management System.

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

CASA offers a range of consultancy services to Local Authority and NHS clients, as well as social enterprises and voluntary sector organisations.

This service includes:

- Service design and improvement
- Workforce planning and remodelling
- Assistance with preparation of pre qualification questionnaires

- Assistance with tender preparation and submission
- Supply of systems compliant with the Care Quality Commission
- Business planning service
- Mentoring
- Introducing employee ownership and share schemes
- Mutualisation
- Support in assisting disabled people and those that support them explore self employment and small business opportunities through Red CIC

The structure and the range of services offered can be replicated by other organisations.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

Core funding for CASA in its early stages has been provided by the European EQUAL-funded project IN SPIRE, while each new business requires an initial investment of around £ 90000 from local funders and a commitment from the local authority to purchase a specified number of hours once the company is established. In addition CASA has an ongoing relationship with Co-operative and Community Finance, a social finance provider, who have made loan agreements to each new unit to contribute towards working capital.

CASA is also about providing value for money. It has always worked in close partnership with Local Authorities, PCTs and other commissioning organisations to help them make better use of finite resources. Employees of CASA franchise companies are trained and encouraged to help

reduce people's dependency on more expensive and intrusive services, which not only contributes to their quality of life but also saves money. Partnership working also means being transparent about our structures, finances and policies.

INNOVATION

Has it created or adopted a novel approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?

CASA Group approach is to support people to live in their own homes, in the way they choose, with as much independence as possible. In this sense CASA's approach is innovative compared to the classic residential care system.

In developing innovative services CASA recognises that social care providers are now required to offer a range of support options beyond the traditional boundaries of residential, day and home care. As levels of demand for care and support continue to increase, CASA is determined to look ahead to new models of provision which will achieve cost savings whilst ensuring choice, control and dignity for individuals who use services. They have recently invested in additional capacity in quality management so that they can ensure a consistent approach to quality and outcomes across the whole group.

GENDER IMPACT

Please point out the visible outcomes of the good practice in terms of transforming gender roles and the improvement in the balance between professional, family and personal aspects. In the case of public administrations, please point out the correction of deficits and risks in the public policies, services and resources for employment.

RESOURCES

- human
- economic (public/ private)
- technological

IMPACTS

Has the practice produced demonstrable impacts? Does it help to solve the problem? Does it show outcomes with a positive trend? Does it contribute to achieving the goals?

The activities carried out by CASA Group show that this practice produces positive impact that contribute support people in need of support services.

References:

Web links and bibliography

<http://www.casaltd.com/>

<http://www.casaltd.com/uploads/CASA%20Case%20Study%20pdf.pdf>

Photos/Youtube videos, etc.

GOOD PRACTICES TEMPLATE

IDENTIFICATION	
Name	Caisse nationale de solidarité pour l'autonomie (CNSA)
Country and area (Region, City...)of implementation	France
Territorial scope (does it operate to the entire territory or only in part of it?)	National
Period of execution	June 2004 - Still running

CONTENT

- Description of the good practice

La Chaises nationale de solidarité pour l'autonomie (CNSA) is a public institution created by the law of the 30th of May of 2004. La CNSA is, at the same time, a « fund » in charge of allocating financial resources and an « agency » for technical support. CNSA is responsible for financing aid for elderly and disabled people, ensuring equal treatment throughout the territory.

CNSA provides financial support and funding for services to persons who have lost their independence. These services, in addition to daily needs, provide specific solutions to different people:

- children: the provision of education and/or professional training;

- Adults: assistance with professional and/or social integration (centres for professional re-education, social and medical support, care homes, etc.);
- The elderly: by providing care and health services.

Those services can be delivered at home or in specialized residences.

General and specific goals

CSNA main goals are

financing the assistance for older people in loss of autonomy and people with disabilities,

guaranteeing the equality of treatments on all the territory and for every disable person,

- Ensuring the information and animation of the network, covering a role of expertise,
- Researching on the issues linked to the access to autonomy, no matter the age and the origin of the person with disability.

Targeted groups

- Elderly people and people with disabilities ;
- Different actors in the sector (training organisations, departments, home care services providers or employers)

FOUNDATION

Does the practice respond to the aims of the project? Does it contribute to the identification, creation and professionalization of employment in the personal care and home services sector?

The CNSA is responsible for providing financial support and funding of support services to persons who have lost their independence.

Through its local agencies, CNSA provides credit for social care structure that provide assistance to elderly and disabled people.

RELEVANCE

Does the practice integrate the characteristics and needs of the people acting in the sector?

CNSA provides financial support for services for people that have lost their independence. In this sense it offer a service of support that integrate the characteristics and needs of the sector;

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

CNSA action is based on equal treatment, so its resources are organised accordingly.

MATURITY

Has it had enough time to evolve so as to stabilize the processes involved and the results obtained?

The CNSA was created in France in 2004 following the events linked to the 2003 heat wave and in connection with the new disability bill, voted in 2005.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take on board the good practice's know-how, methods and tools so that it can be

implemented autonomously? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

The CNSA has three major goals in leading social-care policies:

- funding services and residences for people with autonomy loss (19.2 billions euros) and contribute to local authorities' expenses for special allowances (2.35 billions euros) ;
- equal treatment for everybody in the whole territory : the CNSA distributes its funds to reduce disparities between regions ;
- a role of expertise and information towards its partners : in particular, the CNSA has a role of expertise towards MDPH network.

EVALUATION AND MONITORING

Are monitoring mechanisms in place?
Are its results regularly evaluated?

The activities of the CNSA are annually reported in the annual report. This document shows the state of activity of the Caisse and its services during the year in its financial functions, network entertainment, center of technical expertise, research and guarantee the responsible agency equal treatment throughout the territory.

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

This practice has public origins and can be replicated by all the Countries that share the same values and principles and want to support services for people that have lost their independence.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

Yes, but as it is based on the national legislation it can be modified by a political majority that intends to change its destination or suppress it. It doesn't seem the case though.

INNOVATION

Has it created or adopted a novel approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?

GENDER IMPACT

Please point out the visible outcomes of the good practice in terms of transforming gender roles and the improvement in the balance between professional, family and personal aspects. In the case of public administrations, please point out the correction of deficits and risks in the public policies, services and resources for employment.

The 2003 heat-wave highlighted the need for the elderly and disabled people for modern social and medical residential facilities and support services which require increased funding. CNSA was set up to provide such funding.

RESOURCES

Human
In 2014 CNSA employed 114 people, 66% of whom were women.

Economic (public/ private)

The total CNSA budget in 2014 was 21.6 billion euros.

The funds come principally from employer social contributions but also from taxes and reached 17.5 billion euros in 2014. 0.058% of the "General Solidarity Contribution": a tax similar to social contributions (= 725 million euros of the CNSA budget).

The "Solidarity & Autonomy Contribution": this tax aims to contribute to the financing and modernisation of services and benefits for the elderly and disabled. It corresponds to 0.3% of a company's total revenue (all employees in french companies donate a day's wage "by working for free"), which represented 2,4 billion euros in 2014.

Another tax was created in 2013, the "Additional Solidarity & Autonomy Contribution": this tax represents 684 million euros in 2014.

Technological

IMPACTS

Has the practice produced demonstrable impacts? Does it help to solve the problem? Does it show outcomes with a positive trend? Does it contribute to achieving the goals?

The impact of the CNSA activity is demonstrable and it contributes to respond to the need of resources to provide services to elderly people and disable people.

References:

Web links and bibliography

<http://www.cnsa.fr/>

Photos/Youtube videos, etc.

GOOD PRACTICES TEMPLATE

IDENTIFICATION	
Name	One family-one plan scheme
Country and area (Region, City...)of implementation	Municipality of Heusden, The Nederland
Territorial scope (does it operate to the entire territory or only in part of it?)	Municipality of Heusden
Period of execution	From January 2015

CONTENT

Description of the good practice

As part of the devolution process taking place at the local level, the City of Heusden is trying to restructure social services and improve the way care is delivered. The idea is to work on more integrated solutions (holistic approach) to support households. Previously, problems faced by service users tended to be solved on an individual basis without taking into consideration the broader picture. This new way of supporting people leads also to more efficient and sustainable solutions.

Responsibilities:

- Commissioning social service and health care to private providers,
- Organising the informal care sector.

Actions:

- Setting up a monitoring system,
- Setting up of team responsible to grant access to formal care,
- Setting up of an Advisory Board,
- Assessing the needs of the population,
- Signing agreements with service providers (over 55 organisations),

Personal and household services can be organised in three different ways:

- Households are granted a specific amount of time per week (most common option). Service providers deal directly with the municipality of Heusden for the price. The municipality has an agreement with six service providers for housecleaning (average amount of time: 2 hours/week, price: €21/hour).
- Personal budget: service users need to commission their own services in exchange of receiving a specific budget (€29/week for housecleaning). A national organisation records the bills and proceed to the allocation of personal budgets.
- Vouchers: poorly-developed for now. Service users use a voucher to pay a part of the service and the municipality covers the rest. In practice, one professional carries a need assessment during a “kitchen-table interview” at home using the “quick-scan” method and sets up a personal plan taking into consideration various criteria: family situation, housing conditions, financial situation, health (physical, mental), daily activities and possible involvement of family, friends, neighbours etc.

Type of services and support delivered: social care and support, guidance and counselling for unemployed people, care planning, medical care.

General and specific goals

Deliver more coordinated and integrated care services for one family

Improving the quality of care delivered while reducing the cost

Targeted groups

FOUNDATION

Does the practice respond to the aims of the project? Does it contribute to the identification, creation and professionalization of employment in the personal care and home services sector?

Yes

As part of the devolution process taking place at the local level, the City of Heusden is trying to restructure social services and improve the way care is delivered.

RELEVANCE

Does the practice integrate the characteristics and needs of the people acting in the sector?

YES

The idea is to work on more integrated solutions (holistic approach) to support households.

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

MATURITY

Has it had enough time to evolve so as to stabilize the processes involved and the results obtained?

No, the practice is a consequence of recent reforms. In particular, it responds to the devolution process which has given local authorities more responsibility for delivering care and support, city councils set up new policy frameworks spelling out budget, long-term actions and objectives to achieve.

As from 1st January 2015 new versions of the Social Support Act (WMO - Wet Maatschappelijke Ondersteuning), the Act on Youthcare (Jeugdwet) and the Participation Act (Participatiewet) that regulate healthcare, youth policy, unemployment services, education entered into force devolving more competences to local authorities in social policy.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take on board the good practice's know-how, methods and tools so that it can be implemented autonomously? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

The practice has a public support from the municipality of Heusden but foresees the cooperation between several actors, in particular:

The Municipality of Heusden (leading organisation)

- For-profit and non-profit service providers
- Volunteer organisations,
- Employment Centres,

- Medical care
- Nursing homes

EVALUATION AND MONITORING

Are monitoring mechanisms in place?
Are its results regularly evaluated?

No evaluation method has been implemented yet but one will be carrying out in 2016 on the previous year.

However, systems of control are already in practice to ensure the quality of the services:

- Random phone calls to ask service users feedback,
- Random visits at home,
- Annual survey to service users

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

Yes, the practice is transferable to other reality that share the same values and wants to provide support for people in need of cares.

Across the Netherlands, this scheme has been widely implemented by local authorities to different extents.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

Yes

INNOVATION

Has it created or adopted a novel approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?

Yes, previously, problems faced by service users tended to be solved on an individual basis without taking into consideration the broader picture. This new way of supporting people leads also to more efficient and sustainable solutions.

GENDER IMPACT

Please point out the visible outcomes of the good practice in terms of transforming gender roles and the improvement in the balance between professional, family and personal aspects. In the case of public administrations, please point out the correction of deficits and risks in the public policies, services and resources for employment.

RESOURCES

Human

Economic (public/ private)

The annual budget for social policy in the Municipality of Heusden is of € 35.000.000 divided as followed:

Unemployment benefits and care (€15 million),

Youth policy and childcare (€8 million),

Social support and care (€12 million).

Technological

IMPACTS

Has the practice produced demonstrable impacts? Does it help to solve the problem? Does it show outcomes with a positive trend? Does it contribute to achieving the goals?

The practice is quite recent to be evaluated in terms of impact. It can already be said however that it is a positive and proactive contribution to social services and improve the way care is delivered, by delivering more coordinated and integrated care services for one family and improving the quality of care delivered while reducing the costs.

References:

Web links and bibliography
Photos/Youtube videos, etc.

GOOD PRACTICES TEMPLATE

IDENTIFICATION	
Name	Titre Service
Country and area (Region, City...)of implementation	Belgium
Territorial scope (does it operate to the entire territory or only in part of it?)	Yes
Period of execution	Since 2014

CONTENT

Description of the good practice

The Service Voucher system is a wage subsidy for labour-intensive, low-skilled domestic work introduced in Belgium in 2004 with the aim of promoting the development of services and proximity employment and combating the black market.

Vouchers are sold to people who require house-hold services. Each person residing in Belgium with an ID card and SIS card is entitled to a quota of 500 service vouchers a year, with the first 400 service vouchers sold at a rate of 9 EUR each, and remaining 100 service vouchers sold at a rate of 10 EUR. In addition, each household has a quota of maximum 1000 service vouchers, with exceptions given to single parents and people with disabilities, who may be entitled to 2000 service vouchers, depending on the circumstances. Mothers who have just given birth, are also entitled

to 105 extra service vouchers for a certain period of time.

This subsidy scheme allows for domestic workers to be declared and benefit from a legal salary, health insurance, paid holidays, and a pension; benefits that were not all possible when working on the black market. For each service voucher, a domestic servant receives a salary of 22.05 EUR, paid by both the customer and the state. In addition, tax breaks are also given to each service voucher, creating another incentive to purchase these services.

The list of activities covered by the voucher services system is strictly defined by the federal law and includes:

- Cleaning
- Laundry
- Ironing
- Small sewing works;
- Cooking
- Grocery shopping;
- Transportation of people with restricted mobility.

The system is financed by: the issuing company, users, employers, workers and the Federal Unemployment Benefit Agency. The unit cost of a titres-services voucher is 9€.

The system has also fiscal advantages for the users as the cost of the voucher is partially tax-deductible: the service voucher scheme entitles its users to deduct 30% of their spending on vouchers from their taxable earnings.

General and specific goals

- Create new jobs, particularly for low-skilled workers.

- Create a market combating the black market: provide an incentive to move from undeclared work to a regular job in economic sectors where undeclared work is common;
- offer certain categories of unemployed persons who perform service jobs for the local employment agency (ALE/PWA workers) the opportunity to move towards a regular employee status;
- Development of services: improve the work-life balance of service users by making it easier to outsource domestic work.

Targeted groups

- Unemployed
- People providing such services but operating in the black market
- Persons looking for household services

FOUNDATION

Does the practice respond to the aims of the project? Does it contribute to the identification, creation and professionalization of employment in the personal care and home services sector?

This practice fully corresponds to the aim of the project as the Belgian voucher system aims at supporting and regulating labour-intensive, low-skilled domestic work.

It is possible to say that it contributes to the identification, creation and professionalisation of employment in the home service. However, surveys and studies pointed out that only a small percentage of the workers receive training before or during their service employment.

RELEVANCE

Does the practice integrate the characteristics and needs of the people acting in the sector?

Yes

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

MATURITY

Has it had enough time to evolve so as to stabilize the processes involved and the results obtained?

Yes. The voucher system has been introduced in 2004 as a development the “Local employment agencies”, the first attempt to transfer some household services into the labour market. The system has been monitored through the years and modifications have been made.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take on board the good practice’s know-how, methods and tools so that it can be implemented autonomously? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

The Belgian voucher system has been set up by law and is monitored at national level.

The system sees different players acting together: The services are performed by workers engaged in enterprises specifically authorized

under the service voucher system and that get an accreditation by the federal state. Accreditation requests should be addressed to the specific Commission for approval of service vouchers.

These enterprises can be commercial enterprises, temporary work agencies as ASBL, FTAs, mutual societies, CPAS, social purpose companies.

The vouchers, that can be also electronic, are provided by Sodexo.

From the Federal Government, the authority in charge is the ONEM (Office Nationale de l’Emploi), the national agency for employment.

EVALUATION AND MONITORING

Are monitoring mechanisms in place? Are its results regularly evaluated?

According to the Law 20 JUILLET 2001 - Loi visant à favoriser le développement de services et d’emplois de proximité, the voucher system is evaluated every year by the Ministry of the Employment (the report is then transmitted to the Speaker of the House of Representatives and the Council of Ministers) in order to assess:

- The effects on employment of the system;
- Gross and net total cost of the measure with special attention for returning effects especially in terms of unemployment benefits;
- Wage and working conditions applicable.

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

The voucher system implemented in Belgium

can be replicated in every Country that share the same values and principles. The system was mentioned and received attention in the Mutual Learning Programme under the 2007 European Employment Strategy.

The adoption of this system requires an active participation of the Government as it needs important public investment. The Economic crises that hit many EU countries went against its transfer in other Member State.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

The service voucher system was introduced in 2004 and so far has been proved to be a good tool to combat black market creating a new market. The system enjoys political support and users welcome it. From the financial point of view the system needs financial support from the federal government. In particular, while the cost of each voucher is 9 euros, the workers are paid €22.04 for each service voucher. The difference between this amount and the worker's earnings (€13.04 or €12.04 per voucher) is paid by the Federal Unemployment Benefit Agency to the issuing agency.

INNOVATION

Has it created or adopted a novel approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?

The Belgian voucher system was introduced to create new job opportunities while providing incentives to move from undeclared work to a regular job in a new economic sectors. In this sense it provided a new approach to tackle undeclared work and provide qualification to workers.

GENDER IMPACT

Please point out the visible outcomes of the good practice in terms of transforming gender roles and the improvement in the balance between professional, family and personal aspects. In the case of public administrations, please point out the correction of deficits and risks in the public policies, services and resources for employment.

In 2013 (last report available), the voucher system market counted 149.782 workers, 97,4% were women. In the previous years the percentage of was similar, confirming that the majority of service voucher workers are women

RESOURCES

Human

In 2013 the workers employed in the sector were 149.782 and in 2012 151.137.

The following chart (taken from the 2013

Nombre de travailleurs au courant de l'année	
2006	61.759
2007	87.152
2008	103.437
2009	120.324
2010	136.915
2011	149.827
2012	151.137
2013	149.782

According to the European Monitoring Centre on Change, even though the number of workers employed in the sector is considerable, it appears that the majority of the service voucher companies complain about an insufficient supply of adequate candidate workers. The Centre pointed out that according to the service voucher companies, the possible causes for the labour shortage are a lack of work motivation among potential workers, the limited mobility of candidate workers (and a lack of required skills).

Economic (public/ private)

The system is financed by: the issuing company, users, employers, workers and the Federal Unemployment Benefit Agency. The unit cost of a titres-services voucher is 9€ and the workers are paid €22.04 for each service voucher. The difference between this amount and the worker's earnings (€13.04 or €12.04 per voucher) is paid by the Federal Unemployment Benefit Agency to the issuing agency. The system has also fiscal advantages for the users as the cost of the voucher is partially tax-deductible: the service voucher scheme entitles its users to deduct 30% of their spending on vouchers from their taxable earnings.

IMPACTS

Has the practice produced demonstrable impacts? Does it help to solve the problem? Does it show outcomes with a positive trend? Does it contribute to achieving the goals?

Yes, the results produced by the practice are empirical and analysed every year by the Ministry of the Employment.

The practice can be considered and effective reply to the problem it aims to tackle.

References:

Web links and bibliography

- Law 20 JUILLET 2001 - Loi visant à développement de services et d'emplois de proximité.

http://www.ejustice.just.fgov.be/cgi_loi/change_lg.pl?language=fr&la=F&table_name=loi&cn=2001072037

- Rapport d'évaluation du système des titres-services – année 2013 :

<http://www.emploi.belgique.be/defaultNews.aspx?id=43110>

- Service Publique Fédérale Emploi Concertation Sociale, Système titre-services

http://www.emploi.belgique.be/detailA_Z.aspx?id=1040#

- European Monitoring Centre Report: Service Vouchers, Belgium

<https://www.eurofound.europa.eu/observatories/emcc/case-studies/tackling-undeclared-work-in-europe/service-vouchers-belgium>

Photos/YouTube videos, etc.

CONFESAL

GOOD PRACTICES OF THE COMPANY AYUDA A DOMICILIO DE MOLINA DE SEGURA SLL

IDENTIFICATION

Name of the Good Practice	AYUDA A DOMICILIO DE MOLINA DE SEGURA, S.L.L This company has provided home assistance services to elderly people, care services for dependent individuals, people who are ill and people with disabilities, and support for families since 1989.
Country and Area (Region, City) where implemented	Spain, in the region of Murcia
Territorial scope (is it implemented throughout the territory or in just one part of it?)	The town of Molina de Segura.
Period of execution	The home help service (Servicio de Ayuda a Domicilio) has been provided since 1989 and is managed by the social services department of Molina de Segura town council.

CONTENTS

When users request the service, the request reaches the company either through the public Social Services system or directly from the user on a private basis. The request and the conditions and particular situation of the user are looked at in order to assign the right personnel to provide the service.

The company has qualified staff members who are experts in home assistance due both to their training and to their experience in the sector.

General and specific objectives:

To cover the demand for the home help service which is generated through the social services area of the department in charge of social wellbeing in Molina de Segura Town Council (awarded in a public tender process and with a two-year agreement which can be extended for a further two years). This is in addition to users who directly request our assistance, on a private basis.

The company has the appropriate infrastructure and personnel to perform these duties, which range from the simplest domestic assistance tasks such as cleaning the residence, looking after the laundry, making meals and shopping for and providing food, to more complicated tasks such as organizing the home, in a wider sense. In cases with certain types of users, such as people with mental disabilities or children, the duties can include teaching how to complete domestic tasks and social skills.

Personal assistance tasks could include washing clients and helping them to wash themselves, personal care, feeding or helping with eating, accompanying clients when they go to medical appointments, shopping and other matters.

Target groups

Given that the aim of the service is to provide the necessary assistance to enable them to receive in their own surroundings a specialised service, both as regards assistance and in terms of prevention and education. This specialised assistance is essentially geared towards people who are elderly, ill, dependent and/or disabled and families, and also the family and carers of the people being assisted.

BASE

Does the practice achieve the project's objectives? Does it contribute to the identification, creation and professionalization of employment in the personal assistance and home services sector?

In order to optimize the development of the home help service, all our staff, numbering around 50 individuals, receive specific, ongoing training, to recycle and increase their knowledge and thus training these workers to provide a professional, quality service tailored to the individual needs of each user.

RELEVANCE (APPROPRIATENESS)

Does the practice integrate the characteristics and needs of the people acting in the sector?

As the activity develops, it makes it possible, from the first point of contact, for the service to be constantly adapted to meet the needs of the individuals involved, because as this is a case of providing assistance to people, it is necessary to monitor closely how their condition is progressing in order to always carry out the work in accordance with users' present needs.

For the workers of the home help service, where 98% of the workforce are women, this job means they are able to pursue an occupation in a

stable manner over an extended time, with a working week that ranges between 20 and 40 hours per week and enables them to balance work and family life.

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

Having an external person become involved in the domestic sphere allows carers and family members to alleviate some of the harmful aspects generated by caring for people who are ill and/or disabled, supporting disability situations and supporting families, and which have a negative impact on their development, on a social and emotional level and from an employment perspective. It makes it possible for the aforementioned family units to achieve normality to a greater extent.

At the same time, it strengthens the role of the professional carer as a more efficient answer in comparison to the traditional role of the non-professional carer whose performance of the carer role could be accompanied by negative aspects such as feelings of frustration, stress, the inability to go out to work and the loss and/or reduction of their social relationships, among others.

MATURITY

Has it had enough time to evolve in order for the results obtained to be stable?

Over 25 years of experience in the sector attest to professionalism and maturity in carrying out this activity, while enabling stable results to be obtained based on quality of service.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take into account the good practice's know-how, methods and tools so that it can be automatically implemented? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

Performing this activity continuously for so long has caused a social network system which optimizes resources and the assistance provided to users to become established, as it can be obtained from various areas in a relational fashion.

For example, the Molina de Segura Town Council has a training centre which has been collaborating with the service for years and relies on the company to provide the work experience sessions for students who are studying subjects related to the home help service. The same is true for the Fundación Radio ECCA, which is devoted to training adults.

Another case is the Murcia Region Social Economy Business Association (La Asociación de Empresas de Economía Social de la Región de Murcia, AMUSAL) of which Ayuda a Domicilio de Molina de Segura is a member.

Furthermore, regarding groups with particular difficulties, we collaborate with the Fundación Murciana para la Tutela, several healthcare centres, and various associations and NGOs in the Murcia region.

EVALUATION AND MONITORING

Are monitoring mechanisms in place? Are results regularly evaluated?

The home help service uses different formulas to evaluate its results on a regular basis:

Based on the implementation of the UNEEN ISO 9001-2000 quality assurance system, users are visited on a monthly basis and are polled as to the different aspects of the service, while the work performed by the home help operative is supervised. In addition, every three months a report is drawn up on the service's activities.

The social services area of the department in charge of social wellbeing at the Molina de Segura Town Council carries out periodic monitoring of the cases, as well as assessing the intervention.

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

The professional experience and the work system acquired would make it possible to extrapolate the service provided to other geographical areas, as it would cover the same type of demand.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

Many different studies indicate that in the next few years, the population will increasingly age. This fact, together with the need to strike a work-life balance, will in all likelihood lead to the growth and development of companies devoted to caring for people.

This development will trigger greater professionalization of the work, with the incorporation of much more technology supported basically by ICTs and interconnectivity.

INNOVATION

Has it created or adopted a new approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?

The development of telecommunications speeds up the discovery, in real time, of any situation that could arise with regard to users, while making it possible for relations with the various social players to be smoother, which makes it easier to monitor and control both users' condition and the work that is performed.

Obtaining certificates of professional competence, recycling the knowledge gained through experience and incorporating new knowledge through ongoing training of the home help operatives is increasingly accessible thanks to the agreements with AMUSAL, due both to the broad range of study options available in a single educational centre and to its geographical proximity.

GENDER IMPACT

Please state the visible outcomes of the good practice in terms of transforming gender roles and improving the balance between professional and family life and personal aspects. In the case of public authorities, please state any deficiencies or risks in public policies, services and resources for employment that have been corrected.

Despite the professionalization currently occurring in jobs involving caring for people, it is true that it is today an overwhelmingly female profession. However, given the increase in demand and the specialization of the job positions, it is expected that men will gradually join the profession until it balances out, as is already the case, for example, in the healthcare sector.

RESOURCES

Ayuda a Domicilio de Molina, S.L.L has a workforce made up of 50 people, the majority of whom have over 15 years' experience in the sector.

In addition, all personnel have the appropriate attitudes, such as empathy, cooperation, responsibility and dedication to service.

In 2014, a significant allocation of technical assistance equipment was acquired; this was intended to meet the needs of users who due to an emergency or lack of financial resources did not have the equipment.

Therefore, the company has:

- CPR and life support kit: 70 units
- Smoke detector: 20 units
- Gas-flood detectors: 20 units
- Flood detector: 20 units
- Safety handgrip for the bath: 20 units
- Walking frame: 5 units
- Fold-up wheelchair: 4 units
- Pillbox 24hr/week: 30 units
- Inflatable hair wash basin: 6 units
- Electric articulated bed base: 3 units
- Healthcare-specific mattress: 3 units
- Pressure sore prevention mattress: 5 units
- Personal Protection Equipment: 500 units
- Emergency psychology service.
- Psychology service: 156 hr/year.
- Community education officer service: 260 hr/year.
- Podiatry service: 260 hr/year.

- Posture change and muscle stimulation service: 1560 hr/year.
- Physiotherapy service: 104 hours/year.
- Nutritionist service: 52 hr/year.

IMPACT

Has the practice had a demonstrable impact? Does it help to solve the problem? Do the results obtained indicate outcomes with a positive trend? Does it contribute to achieving the goals?

The 25 years plus experience in the sector, together with quality management, have managed to determine at a social level both the service being offered as a real alternative to the role of the non-professional carer and the guarantee of protecting users' independence, maintaining them in their own surroundings as opposed to placing them as inpatients in residential centres. At the same time, it facilitates work-family life balance in many cases, which is so important in current society.

Furthermore, the opportunity to work in a job that is socially recognised is also an incentive for home support assistants.

One example of this could be the awarding of the diploma for distinguished service to the community to the chair of Ayuda a Domicilio de Molina de Segura SLL, by the Molina de Segura Town Council in plenary session and with the three political groups present on the council acting unanimously.

References:

Web links. Bibliography
Photos/YouTube, videos.

GOOD PRACTICES. TEMPLATE COMPANY Habisben Services S.L.L.

IDENTIFICATION

Name of the Good Practice	Home maintenance and garden maintenance service. Meeting the needs of pensioners and elderly people in the Costa del Sol.
Country and Area (Region, City) where implemented	Costa del Sol. Malaga. Spain
Territorial scope (is it implemented throughout the territory or in just one part of it?)	The western area of the Costa del Sol (Marbella, San Pedro de Alcántara, etc.)
Period of execution	Since June 2007.

CONTENTS

Description of the Good Practice

The main objective of the business model of this nature is to be able to include at an employment level workers, both male and female, who find it difficult to access the job market due to their age or limited qualifications. It also includes a prior training and qualification procedure as regards the duties of the company that meet the basic needs of certain groups (the elderly). Companies of this social economy type represent a good practice as

they both meet the individual needs of these groups and make it possible to offer services with the same purpose to local authorities.

General and specific objectives

To demonstrate the usefulness of a social economy company as an answer to the needs of a community, in a way that can be replicated.

Target groups

Assistance in the home (home and garden maintenance) for people with very limited mobility.

Offering services to local entities or other types of companies which need these services in the environment.

BASE

Does the practice achieve the project's objectives? Does it contribute to the identification, creation and professionalization of employment in the personal assistance and home services sector?

- 1 First of all, a new company within the social economy has been created and registered.
- 2 It incorporates unemployed workers as worker-owners, as well as training and including new employees under the general regime. All billing for the services rendered generates the corresponding VAT, as well as income tax withholdings for the workers.
- 3 The corresponding tax return will be generated.
- 4 It professionalizes the sector, through the attainment of the required certificates of professional competence, for its positioning in its professional group and/or category.

- 5 It creates a model of a business service and enables it to be applied in other geographical areas.

RELEVANCE (APPROPRIATENESS)

Does the practice integrate the characteristics and needs of the people acting in the sector?

It makes it possible to train the workers joining the company in the specialist professional areas where the company provides services (gardening, maintenance, electrical jobs).

It also enables women to join the labour market as it is possible for them to work part-time and thus reconcile their professional and family lives, through having all their household needs met.

CONSISTENCY

Does it have a methodological approach, relating the processes and instruments it uses to the aims and outcomes of the action?

The professional management of the services being offered by the company is based on meeting users' daily needs; therefore, it is a service (maintenance of homes and their surroundings) which will be in constant demand by users. In addition, as the population in the area ages and the number of elderly people from other countries also increases, demand will keep on growing.

MATURITY

Has it had enough time to evolve in order for the results obtained to be stable?

Since 28 June 2007, the date of the launch of the home and garden maintenance services, we have provided assistance to more than 800 users

through our various maintenance services. We have done our work with an unwavering vocation of service and provided CLARITY, FLEXIBILITY AND PEACE OF MIND for our users. This triple principle, the cornerstone of our work, ensures not only that our users are satisfied but also that we exceed their expectations.

In the eight years that we have been providing services, these have amounted to more than 3 million hours.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take into account the good practice's know-how, methods and tools so that it can be automatically implemented? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

There is currently a collaboration endeavour with pensioners' associations, NGOs and local authorities which is broadening the range of services that cover all the needs that could arise in any home.

EVALUATION AND MONITORING

Are monitoring mechanisms in place? Are results regularly evaluated?

The company has an internal quality and after-sales monitoring system concerning the services rendered to clients.

TRANSFERABILITY

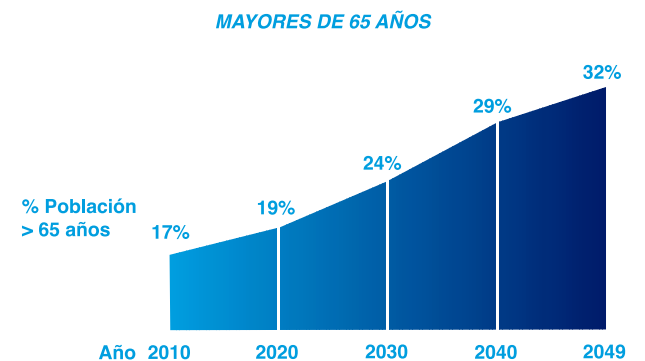
Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

This model of a company specializing in services for this population group (due to the increase in the elderly population which was stated earlier) will be in high demand and will be capable of being replicated in other areas as it is a model which can be implemented in many other places where the population structure is experiencing the same trend.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

The company has demonstrated that its model is sustainable and can be replicated, and that the trend is that there will be increasing demand for this type of service. As can be seen in the graph below (the study by Mapfre), the projection shows the Spanish aging population is clearly growing. To this must be added the effect, which is particularly strong in coastal areas, of EU citizens aged over 55 retiring to Spain on a permanent or temporary basis, attracted by the better climate, lower costs and good social benefits. The number of foreign residents from the EU rose from 86,000 in 1996 to 436,000 in 2011.



INNOVATION

Has it created or adopted a new approach to the problem? ? Has it generated different alternatives to the traditional options for managing the problem?

When providing this service, workers can rely on the most innovative tools that enable them to carry out all the maintenance tasks they offer successfully.

GENDER IMPACT

Please state the visible outcomes of the good practice in terms of transforming gender roles and improving the balance between professional and family life and personal aspects. In the case of public authorities, please state any deficiencies or risks in public policies, services and resources for employment that have been corrected.

The company values the importance of training, especially in electricity, installation and maintenance, and conveys this to workers. The gender impact is, however, limited and the number of women joining the team is becoming more balanced.

RESOURCES

Human Resources

The company is made up of five owner-partners (40% women), all of whom are worker-owners, with experience of between 15 and 25 years. It also has seven workers with permanent contracts and five employees with temporary contracts.

Financial resources (Public/Private)

The company has share capital of EUR 3,007. It has no debts, no loans and no financial problems, which places it in a very favourable situation as regards possible investments, because it has adopted a policy of self-financing and of independence from financial institutions.

Technological resources

The company has the appropriate resources and tools to manage the services it provides properly.

IMPACT

Has the practice had a demonstrable impact? Does it help to solve the problem? Do the results obtained indicate outcomes with a positive trend? Does it contribute to achieving the goals?

It has been demonstrated that the services provided make the lives of pensioners and elderly people easier, both for local people and for foreigners. In addition, it is a model that can clearly be replicated and that encourages the employability of workers who have difficulty accessing the job market due to their age or limited qualifications.

References:

- Population projection for the Spanish population prepared by Mapfre.
- Foreign population from the EU, according to Funcas (Fundación de las Cajas de Ahorros).

GOOD PRACTICES. TEMPLATE

IDENTIFICATION

Name of the Good Practice	<p>Servicio de Ayuda a Domicilio Serdomas Sistemas, home care and personal care, through the expansion of a network of franchises throughout Spain.</p> <p>We have innovative management software, which can support extensive databases of both users and domestic workers; when we receive a request for a service, the software enables us to simultaneously select the most suitable domestic worker fitting the required profile to provide the service.</p>
Country and Area (Region, City) where implemented	<p>Autonomous region of Madrid (Spain)</p> <p>Expanding throughout Spain through all the autonomous regions.</p>
Territorial scope (is it implemented throughout the territory or in just one part of it?)	<p>Currently in the autonomous region of Madrid.</p>
Period of execution	<p>Since November 2004.</p> <p>There is a two-month development period from the signing of a franchise agreement until the franchise is up and running.</p>

CONTENTS

Description of the Good Practice

Serdomas Sistemas, S.L.L., uses completely innovative proprietary management software called Aydara, which it holds the copyright to. This is encrypted; it has also been registered with the Spanish Data Protection Agency, as is obligatory. The software supports extensive databases of both users and domestic workers which contain all the essential information (personal details, availability, training, professional experience, etc.) so that when a request for a new personal assistance service is entered, the system simultaneously crosschecks the requirements against the details of its care workers by using the necessary filters: suitability, availability and proximity to the home. This enables the person with the most well-suited profile to be selected to provide the service.

This system makes it possible for worker professionalism to be improved by enabling workers to obtain skills and allocating appropriate personnel to each user of the service.

General and specific objectives

Providing assistance for people and homes by selecting the most suitable candidates, based on requirements, through proprietary management software. Domestic workers are registered through the software, including information on availability, training, professional experience and the location where they can work.

Since Serdomas Sistemas began operating in November 2004 and to date, we have provided care for a joint total of over 2,313 users who have used our assistance services, whether for domestic help or for personal assistance services.

- Domestic service.
- Cooking service
- Washing and ironing service

- Service providing care for the elderly
- Childcare service, etc.

Target groups

Our services are aimed at providing assistance for people and their families in their own homes, while this is possible and advisable, by participating at a preventive, educational and assistance level and attempting to reestablish the physical, emotional and social wellbeing of the individuals being assisted. This being so, to assist our 2,313 users, we have selected more than 667 professionals from the sector in their various occupational categories (household cleaning, cooking, ironing, care of the elderly, childcare, gardening, chauffeuring) and provided them with the most appropriate training so as to provide quality service.

At the current time, Serdomas Sistemas is providing services (through Spain's special regime for domestic workers) in more than 120 homes on a permanent basis (this accounts for 78% of our activities). The corresponding personnel have a working week of 27-36 hours per week, which equates to approximately three-quarters time. The collective bargaining agreement that regulates this sector stipulates a working week of 37 hours per week.

Workforce: At the present date (July 2015), Serdomas Sistemas, S.L.L., has an in-house workforce of over 31 employees in the various professional categories necessary to engage in our ordinary business activities. It also manages an external workforce of 90 domestic workers.

It aims for workers to get a full-time working week, with a triple objective: 1) To foster quality of service by attempting to reduce the effect of excessive turnover; 2) To turn them into true home help professionals; 3) To achieve a certain degree of loyalty towards the firm/hiring company.

In addition, it provides occasional or one-off services, such as domestic tasks and services

where a companion is required (which amount to 15% of its activities) and childcare (7%).

BASE

Does the practice achieve the project's objectives? Does it contribute to the identification, creation and professionalization of employment in the personal assistance and home services sector?

- 1 First of all, a new company within the social economy has been created and registered.
- 2 It incorporates unemployed workers as associate workers, as well as training and incorporation of new employees, who will evidently be registered under the special general regime for domestic workers if they are providing assistance services for people as domestic workers and under the general regime in the case of home-based care assistants. Therefore, irrespective of providing better services due to proximity, the billing issued due to provision of these services will generate the corresponding VAT, as well as the personal income tax withholding for the workers.
- 3 The corresponding tax return will be generated.
- 4 It professionalizes the sector, through the attainment of the required certificates of professional competence, for its positioning in its professional group and/or category.
- 5 It creates a model of a business service and makes it possible for it to be applied in other geographical areas.

RELEVANCE (APPROPRIATENESS)

Does the practice integrate the characteristics and needs of the people acting in the sector?

On the one hand, it enables non-professional carers to be trained.

On the other hand, it enables women to join the labour market as it is possible for them to hire home care services and thus reconcile their professional and family lives, through having all their household needs met.

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action?

Our management software is able to cover all the needs of a home nowadays as well as helping people who need somebody due to their physical or temporary health conditions. Each of the aforementioned services have schedule flexibility, where the user can choose between:

Live-in staff: Domestic workers who sleep at the client's home whose employer is the client themselves in accordance with the domestic worker regime.

Continual external services: A domestic worker who carries out their work in a specified time distributed over various hours on a regular and continued basis.

Occasional external services: Occasional services lasting three hours or more.

When a user requires assistance, the management software provides us with the timetable and frequency for the service, automatically subtracting it from total availability, to be able to complete the hours requested by the domestic worker.

MATURITY

Has it had enough time to evolve in order for the results obtained to be stable?

Since 28 November 2004, the date of the launch of the home assistance services of Serdomas Sistemas, we have provided assistance to more than **2,313 users**, through our various care assistance services, performing our work with an unwavering vocation of service and providing CLARITY, FLEXIBILITY AND SAFETY/ASSURANCE/STABILITY/PEACE OF MIND for our users. This triple principle, the cornerstone of our work, ensures not only that our users are satisfied but also that we exceed their expectations.

In the 10 years we have been providing services, these have amounted to more than 12 million hours.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take into account the the good practice's know-how, methods and tools so that it can be automatically implemented? Has it been developed through alliances and collaborations between different public and/or private stakeholders?

There is currently a public-private collaboration through the social services network. Many different alliances are being entered into to improve comprehensive care for families by increasing the range of services covering all the needs that can arise in any home.

We actively collaborate with the following, in this order:

- The "Social Policies" Family and Social Affairs Department of the region of Madrid.

- The municipal boards (Juntas Municipales) for services to citizens
- The Madrid agency for the guardianship of adult persons (Agencia Madrileña para la Tutela de Adultos, AMTA)
- Institute of Social Services and the Elderly (Instituto de Mayores y Servicios Sociales, IMSERSO)
- Healthcare centres
- Chemists
- Pensioners' associations
- Foundations
- NGOs, etc.

In addition, to reduce costs and provide better quality services to families, agreements have been entered into with various partners, to have the most extensive range of services in order to provide comprehensive services:

- Prosegur (Profinder system for locating people with Alzheimer's)
- Vitalcare (remote care and location system)
- Securibath (specialising in changing from baths to showers)
- Ucalisa (service offering home-delivery of meals)
- Almuplaza (insecticide operations and disinfecting of homes), etc.

EVALUATION AND MONITORING

Are monitoring mechanisms in place? Are results regularly evaluated?

We have been audited on our provision of services on an annual basis through the Family and Social Affairs Department for some time.

We also provide our users with the corresponding complaint forms.

The franchise central office has a monthly and annual monitoring system to oversee both indicators of the services rendered, carrying out on-site visits, and economic and profitability indicators.

Independently, a permanent evaluation is carried out on a monthly basis with users concerning performance, improvements, weaknesses and attitudes.

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience? Has it been replicated with positive results in other organizations?

According to the aforementioned statistical data, the home-based personal assistance sector is used by 23.5% of the population. The importance of that sector for the economy and the social wellbeing of our homes has led to considerable advances to the benefit of how that sector is organized.

The legislative and business regulations of the personal assistance services sector allow the current needs of homes to be covered professionally and efficiently. At the present time, there are increasing numbers of different small enterprises and corporations which are trying to meet this demand by offering varied services that comply with the prevailing regulations and protect the interests of homes and of the workers who make up the personal assistance sector. At Serdomas Sistemas, S.L.L., we are fully aware of the limitations faced by the companies in the sector and we are working daily to offer a portfolio of services that make the daily lives of many homes easier and that are progressing in line with the current regulatory framework.

The model of Serdomas Sistemas is totally capable of being transferred to other territories and other entrepreneurial groups, given that it is designed as a franchise system, and thus the know-how

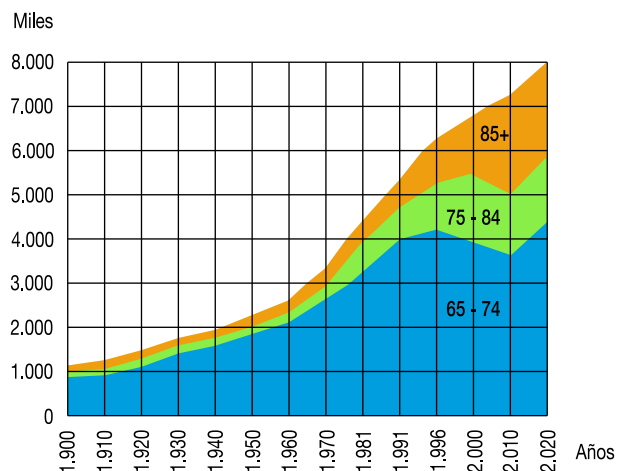
and management technology which has been developed in the management software can be transferred.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

In 2020, Spain will have more than 8 million people aged over 65 years old

EVOLUCIÓN DE LA POBLACIÓN ESPAÑOLA DE EDAD, 1900 - 2020 (MILES)



As the graph shows, in 2020 Spain will have more than 8 million people aged over 65 years old, according to Spain's National Institute of Statistics (Instituto Nacional de Estadística, INE). Furthermore, according to the report "Health at a Glance - OECD Indicators 2007" (in Spanish, Panorama de la Salud 2007 - LOS INDICADORES DE LA OCDE), in 2050 Spain will be the country with oldest population of all the member states, with 35.7% of its population aged over 65 years old.

Experts calculate that population aging will become particularly intensive as from 2020, when the first generations of the famous baby boom, which began in Spain at the end of the 1950s, start to swell the ranks of the elderly.

This is why it will be more necessary every day to provide personal assistance services and to reconcile professional and family lives. Therefore, in any locality where there are more than 50,000 inhabitants, it will be necessary for new companies specialising in the sector to be set up and/or created to be able to meet the demand.

This will result in the sector becoming professionalized and in new jobs being created and generated, in addition to the incorporation of new IT techniques in communication and of technology tailored to the wellbeing from the tertiary sector.

INNOVATION

Has it created or adopted a new approach to the problem? Has it generated different alternatives to the traditional options for managing the problem?

- 1 The management software using extensive databases makes it possible to foster management oversight when providing the services both as regards monitoring and in relation to service quality.
- 2 We must highlight how convenient it is for workers to obtain, via the stated agreement with a university, their certificates of professional competence while they are based at the home where they provide the service, as they only need Internet access because the studies are completed online.

There is also the collaboration of all the stakeholders involved in the social services network: business associations such as CONFESAL, ASALMA, AESP, associations for the elderly, trade unions, local authorities, etc.

It would be necessary to modify the current law on the regime for domestic workers to a format similar to the Borloo Act which is being applied in France. This French law authorizes hiring through firms specialising in providing services; this would assert the dignity of the sector and the quality of the work, which would evolve from part-time and temporary employment to full-time, permanent contracts. Thus, the hiring which currently, and still in a large proportion of cases, is occurring in the undeclared economy would rise to the surface.

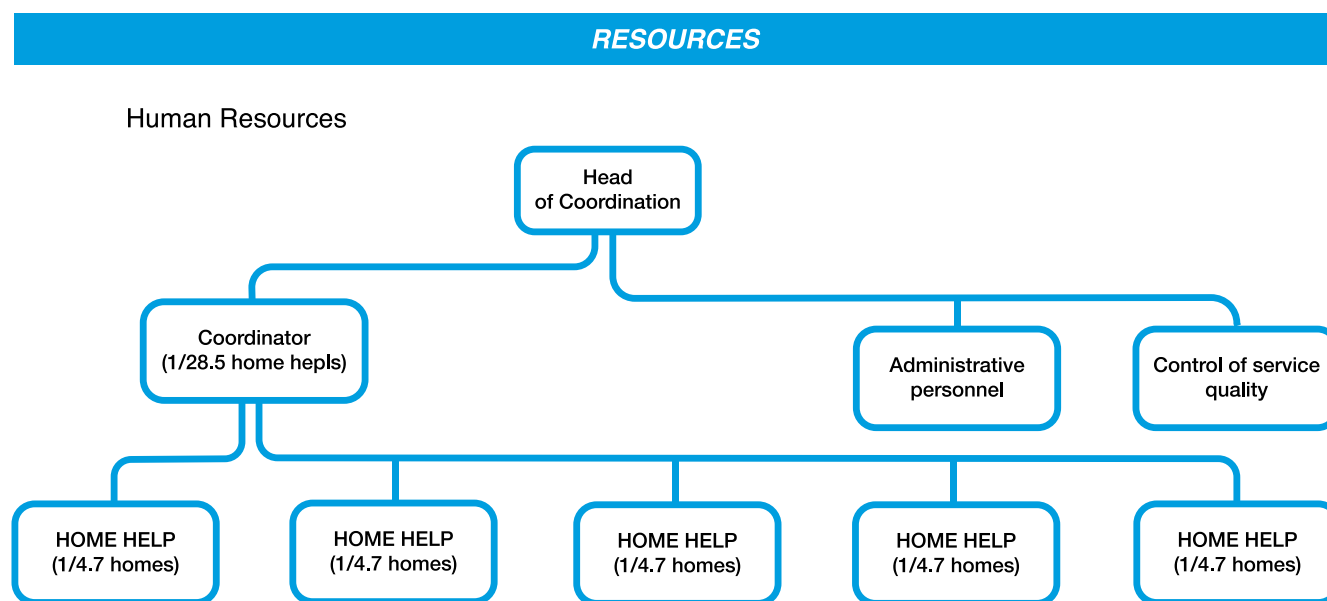
GENDER IMPACT

Please state the visible outcomes of the good practice in terms of transforming gender roles and improving the balance between professional and family life and personal aspects. In the case of public authorities, please state any deficiencies or risks in public policies, services and resources for employment that have been corrected*.

We continue not only to continually recommend and share with our domestic workers that it is necessary for credentials when obtaining certificates accrediting their skills in personal assistance and care work, but also to stress the benefits of ongoing training to improve the quality of the service and care provided to individuals.

Although, concerning gender impact, it is currently the case that more than 85% of the services are provided by women, the percentage of men joining the sector is slowly and gradually increasing. However, as we said, it does not exceed 15%, and our male workers are predominant in the multiservice area, including gardening, chauffeur duties, accompanying users to their doctors' appointments, etc.

This fact has led to a reflection on the use of the domestic service to discharge duties which are not part of their job and for which a higher-level qualification is necessary (at least as regards the formalities) such as caring for the elderly and associated tasks.



As a company model, an average franchise can generate between 100 and 150 positions, between direct and indirect jobs, to serve a geographical area containing around 400,000 inhabitants.

Financial resources (Public/Private)

Estimate of initial investment: It would cost around EUR 50,000.00 to open and run a franchise with an initial team of four staff.

- Hardware, management program, corporate email, direct link www.serdomas.es. Initial operating material. Launch campaign EUR 17,500.00.
- Initial Fee: EUR 12,500.00.
- Acquisition of furniture, as well as having sufficient working capital to pay the fixed costs expected in the first six months of the business, until sufficient revenue is generated to meet the fixed operating costs: EUR 20,000.00

What we require:

Public requirements:

The authorisation of the service cheque, which thanks to the management software and monitoring would lead to oversight of the services provided through having to

Private requirements:

At our organization, we have a maxim consisting of the THREE Ps: Passion, Perseverance and Patience.

In addition, the profile of the entrepreneur who aims to become a Serdomas Sistemas franchisee must be of somebody who, among other things:

- is motivated to launch a business activity independently while being able to work as part of a team;
- has an outlook involving changing their job status;
- has good interpersonal skills and a socially responsible attitude; and

- has specific academic training and/or experience in human resources or in managing people.

Technological resources

What can Serdomas Sistemas offer an entrepreneur?

- An organization that makes it possible for you to develop a company through a recognized framework in an up-and-coming sector
- Proven experience in different markets
- Training, based on our know-how, so that you have sufficient know-how to facilitate your launch of a business
- Proprietary tools owned by Serdomas Sistemas and placed at your disposal to help you to manage the business
- All advisory support for processing the necessary legal requirements so that your service company is duly regulated in accordance with regulations in force
- Ongoing advisory support for the duration of the business relationship with Serdomas Sistemas
- Marketing activities aimed at raising brand awareness and therefore at hitting commercial targets too
- Management software that makes it possible to use extensive databases both of users and of employees, for the formalisation of contracts, billing, etc.

IMPACT

Has the practice had a demonstrable impact? Does it help to solve the problem? Do the results obtained indicate outcomes with a positive trend? Does it contribute to achieving the goals?

It has managed to encourage the social recognition of domestic staff as workers who fulfil a social function and occupy a significant and essential place in the way society, as we understand it nowadays, is organized.

It also promotes the reconciliation of the professional and family life of any family which needs to hire personal assistance services.

In those localities which do not have companies nearby which can provide the services, Serdomas Sistema SLL, is able to open a franchise in no more than two months, as we have stated before.

References:

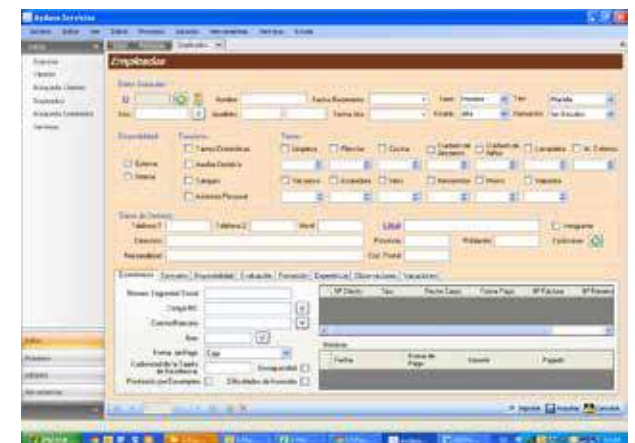
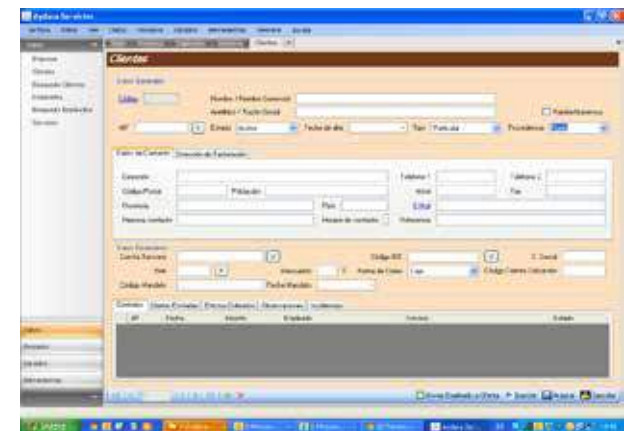
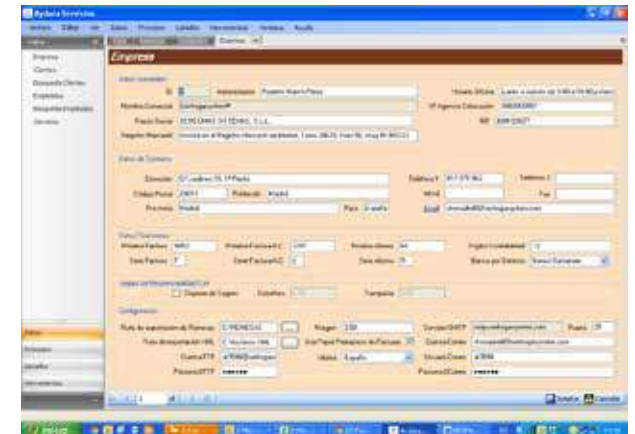
- Web links.
 - www.serdomas.es
 - www.serhgoarsystemcom/madrid8
- Bibliography

Spain's Institute of Statistics
Photos/YouTube, videos.



Link to video about Serdomas Sistemas, S.L.L.

<https://www.facebook.com/roberto.martinperez.9/videos/vob.10000291797293/366886879997702/?type=2&theater>



IDENTIFICATION

Name of the Good Practice	Professionalization of the role of the caregiver for dependent people through ICT, as a means to cope with the existing employment needs and improve the quality of life of carers and dependent people.
Country and Area (Region, City) where implemented	Spain
Territorial scope (is it implemented throughout the territory or in just one part of it?)	Throughout Spain and in the Spanish-speaking community
Period of execution	From May 2013 until the present time

CONTENTS

Description of the Good Practice

Professionalization of the role of the caregiver for dependent people through ICT, as a means to cope with the existing employment needs and improve the quality of life of caregivers themselves (both family carers and professional carers), and of dependent individuals, whether due to their age (elderly people, minors) or because they have some type of disability and/or illness.

General and specific objectives

There are currently 46.7 million people living in Spain, of which 8.4 million are aged over 65 years old and 2.4 million are aged over 80 years old. There are 4 million people with disabilities and 2 million dependent people, and therefore the elderly, people with disabilities and/or dependent people make up approximately 25% of the population of Spain. In less than 40 years, these figures will double, while overall population data will drop to 41.5 million, due to the low birth rate (currently 1.26 children per woman).

Together, the increase in life expectancy (currently 82 years) and the growing rates of family breakdown will multiply the number of older people who will live alone in their old age. The employment dependency ratio is going to rise to 100%, which means that for each person of working age, there would be another who would not be of working age. Spain is going to suffer the “ageing of ageing” effect, which means that services aimed at older and dependent individuals will have to increase, especially when the public health services cannot and will not be able to assume the costs for assisting and caring for these sections of society. Companies and institutions have the opportunity to anticipate this need and stand out from the competition, by offering high-value services for these sectors, as a **general objective**. SUPER Cuidadores is a sustainable social company that provides information, training, online assistance-consultation services, a product recommender, services and interesting mobile apps, searches for professional carers and other services for families and for people with disabilities, dependent individuals and elderly people, thus improving family, personal and work-life balance, thereby improving absenteeism rates, employee productivity and the profitability of firms, in addition to training the people who work in the sector from a business perspective or on a private basis.

The specific objective of SUPER Cuidadores with this practice is to train carers by using ICT, thus optimizing both implementation (through the Internet) and the cost of training, so that they can look after the larger number of dependent people that we are going to have, mainly due to age, given the aging population.

Target groups

The sections of society that are made up by elderly people, people with disabilities and dependent people, which currently make up around 25% of the Spanish population. These figures, according to data from Spain's National Institute of Statistics (Instituto Nacional de Estadística, INE) and the Institute of Social Services and the Elderly (Instituto de Mayores y Servicios Sociales, IMSERSO), will double by the year 2050, and the employment dependency ratio will hit 100%, which means to say that for each person of working age, there would be another who would not be of working age.

BASE

Does the practice achieve the project's objectives? Yes, it is professionalizing a sector which is going to experience strong demand, due to the aging population.

Does it contribute to the identification, creation and professionalization of employment in the personal assistance and home services sector? Yes, both the role of the family caregiver and that of the worker who wishes to work as a professional carer can be professionalized.

RELEVANCE (APPROPRIATENESS)

Does the practice integrate the characteristics and needs of the people acting in the sector?

Yes, the sector needs training. For this reason, the Spanish government has made it

compulsory to demand professional competence certificates for the social-health care field, both for the people who wish to work in social-health care with dependent people in social institutions and for the people who care for dependent individuals at home.

CONSISTENCY

Does it have a methodological approach relating the processes and instruments it uses to the aims and outcomes of the action? Yes, the professional competence certificates for the social-health care field, as they are official, aim to develop to the utmost the abilities and skills that these workers require to look after dependent people, thus improving their quality of life. The training courses and master classes at SUPER Cuidadores are given by professionals, and so they are specialized in order to achieve the same objectives.

MATURITY

Has it had enough time to evolve in order for the results obtained to be stable?

Yes. Training for carers and dependent people is going to increase continually, due to the need that is growing as time passes.

EMPOWERMENT OF PLAYERS

Does it have strategies and mechanisms in place to allow the various stakeholders in the sector to acquire and take into account the good practice's know-how, methods and tools so that it can be automatically implemented?

Yes. Our training and training methodology is accessible through the Internet, and therefore its use can be optimized.

Has it been developed through alliances and collaborations between different public and/or private stakeholders?

Yes, the professional competence certificates for the social-health care field are official and are regulated by the SEPE, an agency which is part of the Ministry of Employment.

SUPER Cuidadores has entered into more than 30 agreements to achieve the broadest and highest-quality training catalogue.

EVALUATION AND MONITORING

Are monitoring mechanisms in place?

Yes. Over 90% of the people we train find work.

Are results regularly evaluated?

Yes. The satisfaction rate of the people who do their training with SUPER Cuidadores is 98%.

TRANSFERABILITY

Does the practice have mechanisms and tools in place to enable other organizations to adopt the experience?

Yes, the training services of SUPER Cuidadores can be replicated, and franchise systems or other collaboration agreements can be set up.

Has it been replicated with positive results in other organizations?

Access to training at other organizations is reproduced, but through the SUPER Cuidadores training platform.

SUSTAINABILITY

Does the practice enjoy the political, technical, human and financial conditions to ensure its continuity over time?

Yes. SUPER Cuidadores has a stable infrastructure and team, as well as the support of a private university, UNIR, the online UNIVERSITY par excellence, where over 1,500 people work.

INNOVATION

Has it created or adopted a new approach to the problem?

Yes, the focus is on quality online training, where a tutor accompanies the student throughout the learning process; this results in practically all students completing the training that they start.

Has it generated different alternatives to the traditional options for managing the problem?

Yes, the alternative of studying and learning, from wherever they want (as they only need an Internet connection) and when they can (training is accessible 24 hours a day, as they are mostly virtual classes, that is, video classes that have already been recorded) and having all the support materials at their disposal on the training platform in an easily accessible way.

GENDER IMPACT

Please state the visible outcomes of the good practice in terms of transforming gender roles and improving the balance between professional and family life and personal aspects. In the case of public authorities, please state any deficiencies or risks in public policies, services and resources for employment that have been corrected.

RESOURCES

Human Resources

The SUPER Cuidadores team is made up of eight people working full-time, the support

of the UNIR University, and works in conjunction with numerous professionals, companies and institutions from the sector.

Financial resources (Public/Private)

The resources of the project total more than EUR 400,000 which have been privately invested.

Technological resources

The training platform is that of the UNIR University, an authorised platform which currently has 23,000 people from 79 countries studying there.

IMPACT

Has the practice had a demonstrable impact?

Yes, although the results are for private use, there are indicators that measure the impact.

Does it help to solve the problem?

Yes, the Spanish authorities themselves wish to professionalize the role of the carer through professional competence certificates.

Do the results obtained indicate outcomes with a positive trend?

Yes, more people are entering training all the time.

Does the practice contribute to achieving the goals?

Yes, it professionalizes the work of the caregiver, whether this is a family member or a professional, and it covers a social need, which is a demand for qualified personnel to care for dependent people.

References:

Web links. Bibliography

<http://cuidadores.unir.net/>

Photos/YouTube, videos.

See the YouTube channel for SUPER Cuidadores:

<https://www.youtube.com/user/UNIRCuidadores>

REVES

GOOD PRACTICES TEMPLATE

IDENTIFICATION	
Name	Bottega dei Servizi (Faenza/Ravenna, Italy)
territorial scope	(Sub-) regional
Period of Reference	2012-ongoing

CONTENT

The "Bottega dei Servizi" was established in 2012 in the Province of Ravenna (Emilia-Romagna, North of Italy).

The Consortium brings together 12 cooperatives operating in different areas - mainly in social and health services, but also in service areas such as (social) housing, cleaning, catering or repair.

MAIN OBJECTIVES are:

- to promote and offer a broad range of services of cooperatives to families (in the broad sense of this term) through a unique one-stop shop;

- to respond, through cooperation between service providers in different service areas, to the complexity of needs a family might have;
- to make families themselves become the protagonists and give them the opportunity to co-conceive the service offer that would respond to their specific needs;
- to promote a commercial brand that reflects the values and the offer of the participating cooperatives and that valorizes the inter-sectoral approach of the cooperative movement;
- to provide a system able to guarantee the legality (acting against the black market!) and quality of the services, their (financial) accessibility and sustainability
- to facilitate and promote the creation of new and innovative services.

Among the services offered figure mainly:

- 1 Care Services: homecare for elderly, people with a handicap, babysitter etc.), night assistance at home or at the hospital, food delivery, psychological assistance for families etc.;
- 2 Domestic Services: Cleaning, moves/relocation, gardening, repair services, maintenance of electrical installations.

The "Bottega dei Servizi" operates through two "shops" (situated in Ravenna and Faenza) and through a website.

It seems worth to highlight the double role fulfilled by the Consortium: Next to the services provided for families it also acts as an 'Observatory' for cooperatives: It helps them to better define the (changing) needs of the families and, based on this, to review and further develop their offer in cooperation with other cooperatives.