EXAMPLE of CONTRIBUTION FOR WORKSHOP

1. I would like to submit a proposal for the following:

○ Interactive Workshop

○ Thematic Panel Discussions

○ Project Forum

2. Main contact point (Our point of contact for information and communications about this proposal):

Name | Marcus

Organisation/company | Municipality of X

Job Title (in English) | Team Leader

Email Address | marcus@municipalityofx.org

Country |

Phone Number |

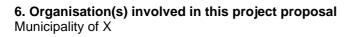Mobile phone number |

3. Title of proposal

Digital solutions to support independent living

4. Presenter 1 (This will be the lead presenter at the ESSC)

Name | Ludmilla

Company | Municipality of X

Job Title (in English) | Project Coordinator

Email Address |

Country [   ]

Phone Number [   ]

Mobile phone number [   ]

5. Presenter 2 (If applicable)

Name [   ]

Company [   ]

Job Title (in English) [   ]

Email Address [   ]

Country [   ]

Phone Number [   ]

Mobile phone number [   ]

6. Organisation(s) involved in this project proposal
Municipality of X

7. Website(s) and links to online materials about the project and organisations involved
www.municipalityofx.org/technology-strategy-2019
www.municipalityofx.org/about-us

8. Summary of proposal (max. 600 words)
Please include:

- What is your proposal about?
- What population groups does the proposal target?
- What is the objective of the proposal being presented?
- Explain how the proposal is implemented (including its costs)
- Why was the proposal developed?
- Where is the project taking place (local, region, country)?
- Who are the actors involved in its planning and delivery?

The social services department of the Municipality recognised that the use of digital technology could promote the health and independence of people with disabilities and older people by ensuring their safety and security. To implement its plan, a dedicated team of ten people, including specialised technicians and social workers was set-up to organise and manage the delivery of digital solutions. They have collaborated with x private technology company to develop a range of technological solutions that promote the health and independence of the target group.

These include a portable GPS alarm watch, a device with an alarm button that can be activated to send a signal to emergency services and the person's family who can then pinpoint their location. There are 150 in use in the area, and it has been successful in providing a sense of safety for people with disabilities and their families. Another is a digital key. Designed to minimise time spent preparing for a home visit, digital keys allow for carers to unlock the front door of a user's property using an application on their phone.

There are 1,400 of these in the municipality area, and an evaluation report has found that the initiative has saved the amount of time that carers spent preparing and carrying out home visits. Remote home cameras are another example. These cameras are installed in the bedrooms of service users and are able to check if they are in bed at night. They can send an alert to health services if the camera detects that the person is not in bed over a certain length of time. Ten have been set-up so far and have been able to replace or complement night visits by care staff. Next is an Internet of things. Professionals caring for a person with disabilities or any other service user can access an online platform to check their data which can be uploaded automatically onto the 'Internet of things' by service users using digital-ready bodyweight scales and sleep sensors. By accessing this information, staff can verify basic information about the person, reducing the need for regular in person check-ups.

Measures are in place to protect the confidentiality of users' data on this platform with each user represented by a code known only by staff responsible for them, ensuring their anonymity. Overall, the combination of these different technologies has enabled staff to focus more of their time on caring for users instead of administrative tasks or travelling. Another benefit is also cost-savings for the municipality resulting from more efficient use of staff's time. Ultimately, the most important achievement is the promotion of the health and independence of service users.

9. Please tick most relevant thematic theme.
Proposals are accepted for all population groups and social services: children, young people, older people, migrants, mental health, disability, victims of violence, others.

- ○ Workforce and the transformation of community care

- ○ The economic case of community care

- ○ Ethics/ Human rights principles in community care

- ○ The use of technology in delivering community care

10. How is your practice funded? How are you ensuring that it is financially sustainable?

The project was initially implemented with 50% funding from ERDF (European Regional Development Fund) and 50% funding from the municipal budget.

The project was established with EU funds, but now it is sustainably financed by local sources following recognition of the cost-benefit saving. Now, 80% of the funding comes from municipal budget, 20% comes from private investors. Currently, we have secured the budget for the next four years.

11. Status

- ○ Pilot Project

- ○ Ongoing Project

- ○ Finished Project

12. How are service users, carers, family members or citizens engaged in your practice?

We organised 3 meetings with people with disabilities in our municipalities. The group consisted of 25 people, aged between 16-85. We also included 2 parents of children with disabilities younger than 16, and 5 carers.

During the first meeting, we discussed their needs. During the second meeting we discussed how the municipality could support them to have a more independent life. During the third meeting we presented some of the technological tools we had identified in order to gather their feedback.

13. Has the practice been evaluated? Will the practice be evaluated?
If so, with which instruments?
(e.g. qualitative/quantitative approaches - formal surveys, interviews, informal client/professional feedback)

After the ERDF funded project came to an end, a new wave of local funding helped implement the project and this new stage has taken place for one year. The Research Institute of our Municipality supports us with the monitoring and evaluation of the project using both quantitative and qualitative data.

The evaluation involves qualitative interviews with service users, their families, and professionals plus quantitative analysis of each case.

Results were measured by comparing the initial situation of each user with implementation after one year of the project. It focused on four criteria:

• health
• safety
• happiness/quality of life
• inclusion in local community

Each criteria was scored on a scale from 0-10.

14. What are the results of this practice? Will this practice have a long-term impact on the targeted population group?
Please support your answer with quantitative or qualitative information.

After one year from the start of the project, we have distributed 1,400 digital keys to care workers in the municipality area, and an evaluation report has found that the initiative has saved the amount of time that carers spent preparing and carrying out home visits. Time spent on home visits time has been reduced by 20% which in turn leads to a saving in funding.

The evaluation of the different technological solutions based on the four criteria found that 87.7% of users experienced an improvement on at least one criteria, whilst 53% improved on at least three criteria. The highest improvement was seen in safety which improved from 6.5 before the project to 8 following one year of implementation.

One of the limitations of the project concerns the privacy and confidentiality can be problematic issues when recording people's health data. With the internet of things, measures were put in place to protect the confidentiality of users' data on this platform with each user represented by a code known only by staff responsible for them, ensuring their anonymity.

Overall, the combination of these different technologies has enabled staff to focus more of their time on caring for users instead of administrative tasks or travelling. Another benefit of this is also cost savings for the municipality resulting from more efficient use of staff's time. Ultimately, the most important achievement is the promotion of the health and independence of service users.

15. What is innovative or special about the practice in your proposal?
We are the first municipality in our Region to have introduced these technological tools to support people's independent living. We think that it could be an added value to the programme of the Conference because it shows an innovative way to provide community-based services.

16. I would like to submit a proposal for an interactive workshop

⦿ Yes (please go to question 17-23)

⦾ No (please go to question 24)

WORKSHOP FORMAT MUST BE INTERACTIVE
You must complete this section if you are submitting a workshop proposal

17. Who is this workshop mainly addressed to?

Practitioners

Policy-makers

Researchers

Other

18. What would you like to achieve at the workshop session?

(e.g. what will participants take away from participating at your workshop?)
Our objective is to present some concrete examples of what we have done to improve people with disabilities independent living and to inspire participants. Moreover, we would like to highlight the role of co-production in the implementation of this project.

19. Describe the experience of the presenters in giving presentations.
Ludmilla has represented our municipality in 11 external events. She also regularly runs workshops and training sessions for professionals working in other municipalities on the technological solutions developed in municipality X.

20. How will you structure the workshop?
(e.g. 15-minute presentation, 30-minute group discussion, 15-minute feedback session)

10-minute introduction, 30-minute trial of technological tools, 20-minute interactive feedback from participants

21. What tools and audio-visual elements will you use/want to use to ensure the workshop is interactive?
(e.g. film, PowerPoint, social media, flip charts etc.)

We will use a PowerPoint presentation and the technological tools used in the project.

22. What is your preferred set-up to make your workshop interactive and why?
(Your preferred set-up is not guaranteed and depends on the availability of the venue)

We would like to have theatre-style set up.

23. What do you intend to get out of hosting this meeting?
(e.g. self-evaluation of your practice)

We would like to share but also learn from participants' experience. We would like to specifically learn about other technological tools that could be used to support independent living of people with disabilities.

24. DECLARATION

○   If my proposal is selected, I can confirm that my delegate fee, travel and hotel costs and those of my co-presenter(s) will be funded by my organisation.

Signature (please enter your name to sign this form)

> Marcus

Date

> 15.10.2019

Thank you for your submission to take part in the European Social Services Conference 2020 in Hamburg! We will be in contact with you soon.

If you have any questions, please contact us by emailing:
Benoit Froment
Senior Conference & Events Manager
benoit.froment@esn-eu.org.