

DESCRIPTION OF THE PRACTICE	
1. Title of the practice	
<i>- 'HAVU CENTRE PROJECT (2009-2011) – A PERSONAL ASSISTANCE CENTRE' -</i>	
2. Organisation responsible for the practice	
The initiative was led and managed by the Joint Municipal Authority for Social Services (Eskoo) and was supported by TEKES Innovation within the Social and Healthcare programme.	
3. Contact person(s)	
E-mail	policy@esn-eu.org
4. National/regional/local context of the practice	
<p>The MSAH (Ministry of Social Affairs and Health) coordinates the Finnish disability policy, the implementation of which is the responsibility of all administrative sectors. The principles of disability policy are:</p> <ul style="list-style-type: none"> • Equality • Non-discrimination • Sufficient services and support <p>Finland's Disability Policy Programme sets out specific measures for the period 2010-2015. The main objective of the programme is that society as a whole is committed to promoting the rights and equality of people with disabilities. The policies intend to:</p> <ul style="list-style-type: none"> • Lead towards the ratification of the UN Convention on the Rights of Persons with Disabilities and the required legislative changes entailed, • improve the socio-economic situation and eradication of poverty of people with disabilities • ensure the nationwide availability and quality of special services and support • increase and strengthen wider accessibility in society • enhance research on disability, increasing the knowledge base and developing versatile methods supporting the implementation and monitoring of disability policy. <p>Public services and a barrier-free environment are designed for everyone. When general services prove insufficient, special ones are arranged - such as services concerning housing, assistive devices, transport, and interpretation. The aim is to</p>	

support the working and functional capacity of people with disabilities and their individual autonomy. Local services support and enable people with disabilities to cope with everyday life. The policy supported the HAVU-Centre project as required by law. From 01 September 2009 onwards, **people with disabilities have been entitled to the right to a personal assistant.**

5. Summary of the practice

The objective of the Havu-Centre project is to renew the way personal aid is organised by funding areal personal aid centres in Central Finland and into South Ostrobothnia. After the renewal of the Act on Disability Services as of 1st September 2009, municipalities are obliged to arrange personal aid in conformity with the law. One way is to hire an assistant for the disabled person so that the service user is able to manage everyday-life activities better.

With the personal aid centres, it is possible to offer significant help to disabled persons, to support municipalities in organising personal aid, and make it easier to work as a personal assistant. Personal aid centres also provide other types of temporary help to support disabled persons and families with disabled children. The most important service users of the personal help centres are those who have been granted a personal assistant by the municipality, as well as service providers that offer personal aid services (single personal assistant employees as well as enterprises providing temporary workers), family care workers of disabled children and municipalities. Special attention is also given to those supporting personal assistants. Personal aid centres make use of technology that is available and cooperate with common service points of the municipalities. Personal aid centres take constant customer feedback and quality of service systems into account.

6. Staff involved

Each of the three Personal Assistance Centres had a qualified office and a trained project worker. Advisors were trained in aspects of employment and welfare regulations. Social workers referred service users to the Personal Assistance Centre for support and advice and to work with the Centre staff. The Centre staff worked with service users and personal assistants. Mobile digital technology supports scheduling appointments, managing working hours and assigning jobs.

7. Target group

People with learning disabilities

8. Aims of the practice

- Supporting independent living for people with learning and other disabilities who use personal budgets to hire personal assistants

<ul style="list-style-type: none"> Establishing Personal Assistance Centres for people with learning and other disabilities who manage their own care and employ support workers (personal assistants) and advise social workers on related issues Offering a single point of access in the form of a centre to users Providing expertise to a variety of government stakeholders and expertise/advice on employing personal assistant employment Offering training for the management of personal assistants 				
9. Issues for social services				
Service Integration/ Cooperation across Services	X	Service Planning		Contracting
Technology		Skills Development (of the workforce)		Quality of services
ANALYSIS OF THE PRACTICE				
10. Status				
Pilot project (ongoing)				
Pilot project (terminated)				
Project (ongoing)				
Project (terminated)		X		
Implemented practice (restricted areas)				
Widely spread practice/rolled out		X – The project became permanent in the region of Southern Ostrobothnia (Seinäjoki)		
11. Scope of the practice				
<i>Describe the setting of the practice, considering the following criteria:</i>				
<ul style="list-style-type: none"> <i>Micro-level practice:</i> a practice that involves individuals at the local level <i>Meso-level practice:</i> a practice that involves organisations or communities <i>Macro level practice:</i> a practice that involves large population groups 				
Micro level practice				
12. Leadership and management of the practice				
<i>Describe the leadership of the practice, considering the following criteria:</i>				
<input type="checkbox"/> <i>Collaborative management:</i> shared between large partnerships, often of central, regional, and local representation				

<ul style="list-style-type: none"> • <i>Organisational management:</i> by one organisation • <i>Professional management:</i> managed by a single person • <i>Shared management:</i> shared with no defined leadership
<p>The initiative was led and managed by the Joint Municipal Authority for Social Services (Eskoo) and supported by TEKES Innovation in Social and Healthcare programme.</p>
<p>13. Engaging stakeholders in the practice Describe the engagement of stakeholders, considering the following criteria:</p> <ul style="list-style-type: none"> • <i>Individual practice:</i> individuals have sought practice change • <i>Network approach:</i> one or more organisations develop a network • <i>Collaborative approach:</i> large collaboration with relevant stakeholders
<p>Stakeholders were engaged through the TEKES Innovations in Social and Healthcare Services Programme.</p>
<p>14. Involvement of service users and their families Describe the involvement of service users, considering the following criteria:</p> <ul style="list-style-type: none"> • <i>Team involvement:</i> service users and carers were part of the practice team • <i>Consultative:</i> a consultative body of users was set up for an ongoing dialogue and feedback <input type="checkbox"/> • <i>Involvement in care:</i> person-centred approaches to care/support
<p>15. Costs and resources needed for implementation Describe how the practice is financed, considering the following criteria:</p> <ul style="list-style-type: none"> • <i>Within existing resources:</i> staff time and other resources are provided 'in-house' • <i>Staffing costs:</i> costs for staff investment • <i>Joint/Pooled budgets:</i> two or more agencies pool budgets to fund services • <i>Funded project:</i> external investment
<p>During the 2009-2011 pilot period, the initiative was funded jointly between TEKES Innovation in Social and Healthcare programmes (40 per cent) and the Joint Municipal Authority for Social Services (Eskoo) (60 per cent). The total cost for the 3-year pilot initiative was EUR 490,000. The 2015 budget for the established Opus Eskoo Personal Assistance Centre is EUR 95,000.</p>
<p>16. Evaluation approaches Describe the evaluation method of the practice, considering the following criteria:</p> <ul style="list-style-type: none"> • <i>Multi-method:</i> use of both a qualitative and a quantitative approach • <i>Single method:</i> a qualitative or quantitative approach • <i>Audit:</i> looks at data sources such as existing medical records and/or other routinely collected service data. • <i>Informal:</i> refers to in-house service evaluation using locally designed tools and/or collecting opportunistic feedback • <i>No evaluation</i>
<p><input type="checkbox"/> <i>An evaluation is planned</i></p>

Feedback was collected from a questionnaire which was disseminated among employers, personal assistants, and social workers.	
17. Measurable effects of the practice and what it has achieved	
Service users	People with disabilities received support and guidance as to being an employer (hiring, drafting, and dealing with an employment contract, understanding, and fulfilling their duties as an employer) despite their disability.
Formal caregivers	
Informal carers	
Organisations	
18. Anticipated or 'aspirational' effects of the practice and what it has achieved	
<i>This category can include outcomes which are not documented, quantified, or properly evaluated. They can include such elements as improved knowledge, quality, workforce, etc.</i>	
Service users	The initiative built capacity among disabled people to be direct employers of their own support staff, which enhanced choice, control, and independent living.
Formal caregivers	
Informal carers	
Organisations	
19. How has the practice changed the way the service is provided	
By providing support to disabled people employing their own personal assistants, the initiative enabled greater degrees of choice and control over support for independent living; also, it strengthened knowledge about independent living.	
20. Sustainability of the practice	
<i>Describe if the practice is sustainable, considering the following criteria:</i>	
<ul style="list-style-type: none"> • <i>Potential for sustainability:</i> practice was newly started or is ongoing/not yet mainstreamed. How could the practice be sustained (in terms of resources)? • <i>Organic sustainability:</i> service users have been empowered to take the practice forward <input type="checkbox"/> <p style="text-align: center;"><i>Established:</i> the project has been operational for several years</p>	
Following the pilot, the Opus Eskoo Personal Assistance Centre was permanently established, with 580 clients in 2014. Throughout Finland, there are 9 similar Personal Assistance Centres.	

21. Transferability of the practice

Describe if the practice has been transferred, considering the following criteria:

- *Transferred:* transfer to other regions, countries, service user groups, etc.
- *Potential for transferability:* there is interest from the outside; elements of the practice have been taken up and used elsewhere; material for transferability (for ex. training material) has been developed

There are similar projects in Finland, and several regions have expressed interest. The training material that was produced can be used anywhere in Finland and in Europe, yet it needs to be adapted to the context. See section 20.

22. Further information sources/background documents / Website

[Here](#) (Henkilökohtaisen avun keskus)

[Summary on TEKES website](#)