



RuralCare		
Organisation(s):	Junta de Castilla y León	
Country:	Spain	
Contact:	policy@esn-eu.org	
<u>Theme:</u>	 Ageing & Care Asylum & Migration Young People Support for Children & Families Community Care Co-Production Disability Housing & Homelessness Artificial Intelligence Digitalisation Integrated Care & Support Quality Care 	 Labour Market Inclusion Social Inclusion Technology Workforce and Leadership Social benefits EU Funding Social Service's Resilience Mental Health Person-centred Care Other, please specify:
Principles of the European Pillar of Social Rights: Check the 20 principles here.	 1. Education, training, life-long learning 2. Gender equality 3. Equal opportunities 4. Active support to employment 5. Secure and adaptable employment 6. Fair Wages 7. Transparent employment conditions 8. Social dialogue 9. Work-life balance 10. Healthy, safe work environment 	 11. Childcare and child support 12. Social protection 13. Unemployment benefits 14. Minimum income 15. Old age income and pensions 16. Health care 17. Inclusion of people with disabilities 18. Long-term care 19. Housing and assistance to homeless 20. Access to essential services
<u>Current status</u> of the practice:	 Concept and Design Phase Execution & Monitoring Phase Consolidation Phase Scaling Up and Transformation Phase Other (please specify) 	
<u>Context/ Social</u> <u>issues</u> <u>addressed</u> Please explain the problem you attempt to solve.	The region of Castilla and Leon is particularly impacted by the challenge that rurality and ageing impose on the entire EU. Its low population density, high dispersity, rapid ageing and high life expectancy limit access to long-term care services, making them of poor quality and extraordinarily expensive, resulting in the	

	unsustainability of the current way social and healthcare services are provi (mostly in residential and daily care facilities). The project team identified the n for accessible and adaptable care services that respond to the population requirements.	
	RuralCare is a European innovation project in social services consisting of the design, testing and evaluation of an innovative systemic approach for the provision of integrated long-term care adapted to people living in rural areas according to their individual values, wishes and preferences.	
	The project tests a multi-level partnership for care provision, including public and private actors and the coordination of social and health services at the local, regional and national levels, with the participation of users, with the aim of addressing the challenges of accessibility, affordability, quality and sustainability in depopulated rural areas and thus facilitating people to stay at home, with a support plan appropriate to their life project.	
Objectives: Please provide a maximum of three objectives in bullet points.	 Test a model of integrated long-term care adapted to rural areas, which is affordable, of higher quality, and is based on users' needs and aspirations. Gather evidence about the benefits, including in terms of economic efficiency, of this new model in view of its possible upscaling to the whole region. Provide other benefits to rural areas in terms of social and economic activation 	
Activities: Please summarise the activities put in place to achieve the objectives (maximum 200 words).	This project has developed long-term care through proximity support in rural areas with the direct participation of regional, local (provincial and local councils), state (IMSERSO), university and third-sector entities. The project performs a segmentation of households at risk, considering not only the individual situation but also their environment. Four types of HR and 11 subtypes are defined. The classification is carried out considering the following variables: single-person household or household in which more than one person lives together, degree of dependency, characteristics of the main caregiver and presence or not of cognitive impairment. Household conditions are improved through proximity services, family support, health care, home adaptations, support products and community participation. The role of the case coordinator and personal assistants is strengthened, and their support is oriented towards the development of the person's Life Project. Changes in the technical instruments of the interventions will be developed, and new proactive protocols of care for chronic diseases will be implemented according to an individual support plan.	

Evaluation of practice: Please explain how you evaluate the practice, and what the results were/are so far	The evaluation of the project, which has the character of a pilot project, follows an evidence-based approach for future policy planning and proposes reforms in social policies at the state level. Furthermore, within the framework of the project, a specific Quality assurance group has been created, which has elaborated the Quality Plan and the risk and mitigation matrix in agreement with all the project partners.
Links to supporting documents: e.g. website or report of the practice	https://ruralcare.eu/
Comments and tips i.e. for people willing to use your Practice	