Catalonia's Model of Integrated Social and Health Care		
Organisation(s):	Regional Government of Catalonia	
Country:	Spain	
Contact:	policy@esn-eu.org (we will function as an intermediary between you and interested organisations who want to learn more about the practice)	
Theme: *Choose at least one option*	☐ Ageing & Care ☐ Asylum & Migration ☐ Young People ☐ Support for Children & Families ☐ Community Care ☒ Integrated Care & Support ☐ Co-Production ☐ Disability ☐ Housing & Homelessness ☐ Artificial Intelligence ☒ Digitalisation ☒ Quality Care	☐ Labour Market Inclusion ☐ Social Inclusion ☐ Technology ☐ Workforce and Leadership ☐ Social Benefits ☐ EU Funding ☐ Social Services' Resilience ☒ Mental Health ☒ Person-Centred Care ☒ Research & Use of Evidence ☐ Management & Planning ☐ Other, please specify:
Principles of the European Pillar of Social Rights: *Which principles does your practice cover?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 ☒ 16. Health care ☒ 17. Inclusion of people with disabilities ☒ 18. Long-term care ☒ 20. Access to essential services ☐ 17. Inclusion of people with disabilities ☐ 18. Long-term care ☐ 19. Housing and assistance to homeless ☐ 20. Access to essential services
Current status of the practice:	☐ Concept and Design Phase ☐ Testing or pilot phase ☐ Temporary practice that has terminated ☐ Temporary practice that is ongoing and has a termination date ☐ Established and ongoing practice ☐ Scaling Up and Transformation Phase ☒ Other (please specify): Implementation and consolidation phase	
Summary: *Please summarise the practice in maximum 3 sentences. This will be the disclaimer of your*	Catalonia's Social and Health Integrated Care model brings together social services and health services to provide more coordinated, person-centred support for people with care needs. It focuses on continuity of care, support at home and in the community, and better use of professional resources through joint assessment and shared care planning. The model is being progressively rolled out across Catalonia,	

project on our website. Example here.	including territorial experiences in home and community settings and integrated care in residential services.
Context/ Social issues addressed *Please explain the problem you attempt to solve with your practice.*	Catalonia is facing rapid population ageing, with people aged over 65 already representing almost one fifth of the population and long-term care needs expected to rise further. Many people require both social support and healthcare at different stages of life, but services have traditionally been organised through separate systems, creating risks of fragmentation, duplicated interventions, gaps in information, and less personalised care. The practice addresses these issues by improving coordination between social services, health services and local authorities, particularly for older people, people with disabilities, people with mental health problems or addictions, children with high-complexity needs, and people in situations of dependency.
Objectives: *Please provide **a maximum of three** objectives in bullet points.*	1. Guarantee continuity of care through better coordination between social services and health services. 2. Strengthen person-centred care at home, in the community and in residential settings. 3. Optimise available resources while promoting prevention and the early detection of social and healthcare needs.
Activities: *Please describe the activities put in place to achieve the objectives (maximum 400 words).*	The Departments of Health and Social Rights and Inclusion are rolling out integrated social and health care through five strategic lines: integrated care in residential facilities for older people, integrated care in the home environment, mental health and addictions, integration of information systems, and integration of the dependency assessment and support process. In the home-care sector, territorial experiences are being implemented in municipalities and areas across Catalonia, where people receive a single care plan based on a joint assessment of their social and healthcare needs. These experiences involve multidisciplinary teams, including social workers, nurses, doctors, occupational therapists, social educators, psychologists, physiotherapists, speech therapists, nutritionists, gerontology assistants, care assistants, informal carers and family support workers. Work also includes the use of micro-viewers to enable professionals from different systems to access relevant information generated by each service. In parallel, Catalonia is creating the Catalan Social and Health Integrated Care Agency, approved by the Parliament of Catalonia, to support the wider implementation of the model in collaboration with the relevant departments and local authorities.
Outcomes: *Please explain what the results were/are so far and how you evaluated this (i.e. statistics, a study, or feedback)*	The model is being assessed through quantitative data collected internally, with further impact evaluation work under development. In residential care, integration is already well advanced: 99.4% of primary healthcare teams and 95% of residential care homes for older people are working collaboratively. Over the last 15 months, in-person visits by healthcare staff to residents have increased by 25%, admissions to acute-care hospitals have fallen by 11%, and residents spend three fewer days per year admitted to medical facilities. In home-care settings, preliminary findings indicate that integrated care could reduce the risk of institutionalisation by up to 20%, increase the identification of people with social problems requiring follow-up by more than 35%, and reduce admissions to acute hospitals by 15% in territories where the model has been implemented. An impact

	evaluation model for residential centres for older people is also being designed with the support of the Catalan Institute for the Evaluation of Public Policies, using a Theory of Change methodology.
Funding Source	EU Funds: ESF+ ☐ INTERREG ☐ ERDF ☐ ERASMUS☐ RRF ☐ other ☐ ☒ National Government Funds ☒ Regional Government Funds ☒ Local Government Funds ☐ Private Sponsorship / Public-Private Partnership ☒ Financial contribution of People using Services ☐ Other, please define:
Links to supporting documents: *e.g. project website or report of the practice, articles*	Atenció integrada social i sanitària Què és l'atenció integrada social i sanitària?
Comments and tips *i.e. for people willing to implement your Practice in their service*	