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| <i>Theme: Ageing and Care; Country: Denmark; Language: English; Year: 2012; Event: Autumn Seminar (Stuttgart)</i> | |
| Programme's name | Life-long living: maintaining everyday life as long as possible |
| <i>Original title:</i> | <i>LMIEL (Længst muligt i eget liv)</i> |
| <u>Organisation / Country:</u> | City of Fredericia, Denmark |
| <u>Website:</u> | Here |
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| <u>Summary:</u> | <p>The project Life-long living focuses on “everyday rehabilitation” and aims to support older people in need of personal and household services in maintaining an independent life and increasing the control over their own life as long as possible with minimal intrusion. The project started in October 2008 and is now fully operational across different care sectors even though the model is continuously under improvement and development.</p> <p>Paradigm shift in the provision of long-term care</p> <p>The paradigm shift has changed the way care and support for older people was delivered by focusing on people’s strengths and resources and promoting a “can-do attitude” instead of looking at people’s weakness and limitations. This implied concrete shifts:</p> <ul style="list-style-type: none"> • from reactive and late measures to proactive and early interventions, • from compensation to rehabilitation, • from care and treatment to prevention and early detection. <p>What triggered the development of this project? By 2020, there will be at least 2,000 more older people over the age of 65 in the City of Fredericia and a significant increase in the number of people aged above 80. This demographic trend represents an economic challenge as it will bring additional annual costs in old-age care of at least DKK 46 million (around EUR 6.1 million) in a time of budget cuts which challenges the traditional welfare system. Consequently, there is a need to anticipate the demographic effects and work proactively to implement a new way model of interaction with older people.</p> |

The modernization efforts rest on three main pillars:

- increasing job satisfaction among social workforce,
- empowering older people to live an independent and active life,
- reducing public spending related to elderly care

The project is divided into the following five sub-projects:

1. Everyday Rehabilitation and Independent Living Training project,
2. Early detection and prevention of acute illness,
3. Follow-up home visits after hospital discharge,
4. Welfare technology,
5. Prevention and health promotion for people above 60.

Specific focus on the ‘Everyday Rehabilitation project

This is the largest sub-project and constitutes a close interdisciplinary collaboration between citizens, the Older People’s Care Department, the Older People’s Care Assessment Department, the Rehabilitation Centre and the Assistive Technology Section.

- Target group: older people who seek help from The Older People’s Care Department for the first time generally after discharge from hospital.
- Aim of this initiative: offering training in the aim to restore and improve self-care thus reducing dependency of older people and the need for personal and household services.

How does it work in practice?

Older people requiring assistance from the Older People’s Care Department for the first time are invited to attend a 6-8 week rehabilitation programme where they learn how to perform everyday activity independently (cooking, dressing, showering, shopping, engaging in social activities, etc.). Along the training, participants gain more and more confidence and physical capacity to live either on their own or with limited assistance while dealing with current tasks.

A care assessor evaluates the older people’s capabilities and against specific inclusion criteria and in cooperation with the rehabilitation team. In addition to older people’s care assessor, the rehabilitation team consists of two occupational therapists, a physiotherapist, a nurse and a district manager from the Older People’s Care Department.

Based on the needs assessment carried out, an occupational therapist, and/or a physiotherapist and/or a nurse identify, evaluate and prepare an

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| | <p>interdisciplinary and individual rehabilitation plan in cooperation with the care recipient. Trainings are conducted by a team of 12 trainers (social and healthcare assistants, social and healthcare aides and one planner) under the supervision of the rehabilitation team.</p> <p>The independent living trainers and the interdisciplinary team adjust on an ongoing basis the individual rehabilitation plan in cooperation with the care recipient. At the end of the rehabilitation programme, participants require less personal and household services than originally requested because they are self-reliant in daily life.</p> |
| <u>Issues:</u> | <ul style="list-style-type: none"> • Lack of human resources to meet the needs of older people, • Transforming working habits is a long-term process, • Supporting older people in their "2-can-do attitude" |
| <u>Resources:</u> | <p>Fixed costs: staff and training cost Annual saving: around DKK 15 million (around EUR 2 million)</p> |
| <u>Objectives:</u> | <ul style="list-style-type: none"> • Developing a new model of interaction involving older people based on early intervention, rehabilitation and prevention rather than the traditional care system and expensive late interventions so that older people regain physical, social and cognitive abilities in order to postpone and reduce age-related weakening and dependence and consequently the need for long-term care and older people's care. |
| <u>Outcomes:</u> | <ul style="list-style-type: none"> • Improved quality of life and greater satisfaction and empowerment of older people through independence and better health conditions. • Greater satisfaction among the workers in the Older People's Care Department due to higher engagement with service users and commitment to working with the new model. • Approximately DKK 15 million saving per year (around EUR 2 million euro): significantly reduced need for care after the involvement within the "Everyday Rehabilitation Project" (similar trends with the "Independent Living Training project") and less sick leave among the workforce. |
| <u>Evaluation:</u> | <p>From 2008 until 2012, 778 citizens took part in the "Everyday Rehabilitation project". An evaluation was carried out and outlining the following outcomes:</p> <ul style="list-style-type: none"> • 45.9 percent of participants were able to live an independent life, • 38.9 percent needed less support than previously requested, • 84.8 percent stated that their quality of life improved. |

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| | <p>A study carried out by the City of Fredericia in collaboration with the Danish Institute for Health Services (DSI) and iTracks outlined the economic outcomes for the local authority based on the provision of personal and household services and the budget of the Older People's Care Department before and after the start of the project. The number of hours of housework activities provided was reduced by 5 percent and the number of hours for personal services by 23 percent (equivalent to 26,828 hours while the programme provided 4,450 hours of training).</p> |
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