

DELIVERABLE

Project Acronym: AFE INNOVNET

Grant Agreement number: 620978

Project Title: Thematic Network for age-friendly environments in the European Union

D. 3.5 – Background documents and reports for 5 capacity building and matchmaking workshops

Revision: Final

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Dissemination level: Public

Revision History

Revision	Date	Author	Organisation	Description
1	20 June 2014	Nhu Tram – Christina Dziewanska-Stringer	CEMR	Writing and revision of the background document (WS 1)
2	22 July 2014	Nhu Tram – Christina Dziewanska-Stringer	CEMR	Writing and finalising of the report (WS1)
3	23 Sept 2014	Nhu Tram – Marlène Siméon	CEMR	Writing and revision of the background document (WS 2)
4	10 Nov 2014	Nhu Tram – Marlène Siméon	CEMR	Writing and finalising of the report (WS 2)
5	23 March 2015	Nhu Tram – Marlène Siméon	CEMR	Writing and revision of the background document (WS 3)
6	8 June 2015	Nhu Tram – Marlène Siméon	CEMR	Writing and finalising of the report (WS 3)
7	4 June 2015	Nhu Tram – Marlène Siméon	CEMR	Writing and revision of the background document (WS 4)
8	28 Sept 2015	Nhu Tram – Marlène Siméon	CEMR	Writing and finalising of the report (WS 4)
9	29 Sept 2015	Nhu Tram – Nuria Moré Ollé	CEMR	Writing and revision of the background document (WS 5)
10	9 Nov 2015	Nhu Tram – Nuria Moré Ollé	CEMR	Writing and finalising of the report (WS 5)
11	21 Jan. 2016	Julia Wadoux	AGE	Editing and finalisation

Statement of originality:

This deliverable contains original unpublished work except where clearly indicated otherwise. Acknowledgement of previously published material and of the work of others has been made through appropriate citation, quotation or both.

This deliverable has been fulfilled during the two-year project by the Council of European Municipalities and Regions (CEMR) and the hosting local and regional authorities (LRAs) in Ireland, Belgium, Italy, the Netherlands and Poland. The main reason of these workshops was to build the capacity of LRAs to pick up age-friendly environment (AFE) solutions and to offer opportunities for matchmaking between industries in the regions and LRAs looking for innovative evidence-based AFE solutions. All in all five capacity building workshops were organised, for two of them match-making events were jointly organised (please refer to D5.6).

Methodology

Consortium members were the main participants of the workshops, but some external guests were invited to attend when deemed relevant to the theme of the workshop. Each hosting LRA chose the theme of the workshop, based on their local good practices and invited speakers to present local initiatives. To ensure a geographically balanced workshop, CEMR called upon the consortium members to suggest speakers. Together with the hosting LRA, the workshops were organised and agendas were drafted which were then submitted to the approval of the steering group. The workshops were organised in a classic format, namely with a series of presentations, time for discussion and a field visit. To overcome the language barrier, the steering group decided to require to the service of interpreters when needed.

Following a survey on how to improve the organisation of the workshops, it was decided that the number of presentations would decrease in order to dedicate more time to the presentations and the discussion.

To prepare the participants to the content of the workshop, they were provided with a background document, consisting of an overview of the planned presentations and the field visit and the questions they should bear in mind for the discussion. Finally, a report was later sent to the participants, the Consortium members and published on the website.

Content

As mentioned above, for each workshop, a background document and a report were produced and are listed below.

- Workshop 1: Louth county: an Irish Catalyst
- Workshop 2: Dementia-Friendly Cities
- Workshop 3: Independent Living, Housing and Domotics
- Workshop 4: Promotion of Healthy Ageing: Built Environment and Technology
- Workshop 5: Digital Social Inclusion: How Technology Helps Seniors Remain Socially Active

	Topic	Date	Hosting partner	Language	Total Nb of participants	Nb of participants from AFE-INNOVNET
Workshop 1	Louth county: an Irish Catalyst	3-4 July 2014	Louth County	EN	44	32
Workshop 2	Dementia-Friendly Cities	2-3 October 2014	VVSG	EN	35	24
Workshop 3	Independent Living, Housing and Domotics	30-31 March 2015	Friuli Venezia Giulia Region	EN/IT	33	29
Workshop 4	Promotion of Healthy Ageing: Built Environment and Technology	10-11 June 2015	Groningen	EN	23	17
Workshop 5	Digital Social Inclusion: How Technology Helps Seniors Remain Socially Active	8-9 October 2015	Warsaw	EN/PL	38	21

Workshop 1

Louth County: an Irish Catalyst – Age-Friendly Environment Strategies

3-4 July 2014

Louth, Ireland

Background document

The workshop will be the opportunity to present age-friendly environment strategies and for local and regional authorities to pick up age-friendly environment solutions.

Participants of this workshop should reflect on the following questions during our discussions:

- How different is the situation at your local level (national support, active participation of end-users...)?
- What actions could be envisaged and implemented at the local/regional level?
- What barriers exist in creating age-friendly policies? And how do you work with other stakeholders to tackle these?

AFE-INNOVNET will develop a European Covenant on Demographic Change through a bottom-up approach, involving all Thematic Network members, bringing together all committed local and regional authorities and other stakeholders interested, among other things, in sharing their experience, deploying ICT based innovative age-friendly environment solutions. The Covenant will seek to become the necessary long-term political and technical structure supporting our goal. With this in mind, participants should discuss:

- What are your expectations from the Covenant on Demographic Change?
- To what extent could the Dublin Declaration 2013 inspire the Covenant on Demographic Change?

1. Global age-friendly strategy

Europe is changing and our population is ageing, which poses a challenge for the future. The demographic change that Europe is now facing will have significant social, economic and budgetary consequences. According to Eurostat data, between 2010 and 2060, the number of people over 65 will grow from 17.4% to 29.5% (compared to 12.8% in 1985) of the total population and the number of people over 80 will nearly triple to 12%.

Instead of only seeing the negative effects of an ageing population on our society, a decided number of local and regional authorities, universities and businesses decided to take action and saw this negative situation as a positive opportunity to rethink our society, improve the services to older people by taking into account their needs and involving them in the thinking process. Moreover, it is a chance to relaunch local industries and establish Europe as a global leader in providing innovative solutions.

Local and regional authorities across Europe have built up and implemented **strategies and programmes for older people**. To illustrate one of these European

strategies, **Wales (UK)** and the **Province of Biscay (Spain)** will present what has been put in place at the local level. These presentations are the opportunity to learn what shaped these age-friendly strategies, how they evolved over time, what barriers had to be overcome and what the results are.

2. Louth age-friendly County

The [Louth Age Friendly](#) story is based on the voluntary commitment of the public, private and NGO sector in County Louth to make Louth a great place to grow old.

The population of Louth County is 122,808 according to the 2011 census, of which 13% is aged 65 and over. The majority of the county's population lives in either Dundalk in north Louth, or Drogheda in the south. Dundalk and Drogheda are the largest towns in the county, but are also the second and third largest towns in the Republic of Ireland. To address the demographic change, Louth County was the first to launch its Age-Friendly model in 2008 and thus becoming Ireland's first Age Friendly County. Its pioneering Age-Friendly strategy is being rolled out to other counties in the country, particularly in the North East. Louth County has become an affiliated member of the World Health Organisation Global Age Friendly Cities Network and the European Innovation Partnership on Active and Healthy Ageing (EIP AHA). Louth is an exemplar to other countries wishing to adopt the age-friendly initiative.

3. Age-friendly business

Louth is still a relatively young County, with 13% of the population over 65. However, there is an urgency to be smart about ageing and address this demographic change as an economic and social opportunity. Louth County found a way to shift from the notion of "burden" to the notion of "bounty" when it comes to ageing.

Louth Economic Forum was established in 2009 under the auspices of the County Development Board, chaired by Padraic White, former managing director of the Industrial Development Authority and currently small and medium business entrepreneur. The Louth Economic Forum has devised an overall **10 point plan**, identifying 10 specific areas to be addressed within its work programme over the next 3 years. A task group has been established for each of the areas, the fifth one being dedicated to **age-friendly business**.

The Louth Economic Forum established the **Age-Friendly Business Forum** to prepare the [Age-Friendly Business action plan](#), consulting relevant stakeholders. Louth's Age-Friendly Business Action Plan is a set of initiatives, promoted by the Louth Economic Forum, to position Louth as a **leader in age-friendly business development, sustaining, supporting and creating jobs and new models of flexible value creating enterprise**. The action plan results in a business approach that **recognizes and addresses a golden opportunity for both business and communities** offered by society where more people are living healthier for longer.

4. European Innovation Partnership on Active and Healthy Ageing: Reference Site

Reference Sites provide the EIP on AHA with examples of a comprehensive, innovation-based approach to active and healthy ageing. They can be coalitions of regions, cities, integrated hospitals or care organisations that are able to show their impact and particular innovative practices which could be transferred to other European contexts.

The current [32 Reference Sites](#) from 12 Member States are willing to share what they have discovered on their expedition to excellent innovation for ageing. Some found what ageing people need to stay active, independent and healthy for as long as possible; others have good ideas on how to innovate the systems for health and social care in such a way that they cater to real needs in a more effective and efficient way; and others also found out if and how a healthy business can be made out of it.

5. Great Northern Haven (field visit)

Great Northern Haven is a collection of 16 ambient assisted living smart homes, representing a unique **collaboration** between Louth Local Authorities, local Health Service Executive, industry partners, research & development and the end-users. This flagship project for Louth County and for the Netwell & CASALA research centres at the Dundalk Institute of Technology (DkIT) is a demonstration project for independent living, using sensor technologies in a community and research context. The project seeks to enhance the quality of life of older people through ambient assisted living (AAL) technologies, using the best sensor and healthcare technologies currently available.

Great Northern Haven represents a **living lab**, allowing Netwell Centre to examine the impact of the housing on older people's quality of life, while CASALA manages the technological aspects of the living lab, such as collating data and adapting the systems to meet the unique needs of individual occupants. Thanks to this project, a wide range of data is continuously gathered from consenting residents, internally within the apartments and from the grounds of the development. Great Northern Haven will inform national policy and provide international experience in relation to services for older people, and has a wide range of potential commercial applications.

6. Dublin Declaration 2013

The [Dublin Declaration](#) was originally signed in 2011, during the 1st International Conference on Age Friendly Cities. Building on this and timed to coincide with the Irish Presidency and EU Summit on Active and Healthy Ageing, the [Dublin Declaration 2013](#) includes a new EU pledge to uphold a set of principles to measure, benchmark and drive future development of age friendly cities. Clear commitment was made by all leaders to undertake a continuous cycle of improvement through a planning process supported by participation in the WHO Global Network of Age-Friendly Cities; to promote the Declaration; to collaborate with others; and to

communicate through their networks to share learning, promote equal rights, opportunities and outcomes for older people.

Sharing the same ambitions and objectives of the Dublin Declaration 2013, AFE-INNOVNET's objective is to develop a **European Covenant on Demographic Change** through a bottom-up method involving all AFE-INNOVNET Thematic Network members. The Covenant will bring together all committed local and regional authorities and other stakeholders interested to share their experience, pool their efforts and deploy ICT based innovative age-friendly environments solutions to support active and healthy ageing. The Covenant will seek to create the necessary political and technical framework to bring together local and regional authorities across the EU in a more formal and long-term structure in close cooperation with the WHO Global Network of Age-Friendly Cities and Communities.

Report

44 people attended the AFE-INNOVNET workshop on 3-4 July 2014 in Dundalk, Louth County, Ireland; of whom 32 participants were Consortium members ([see participants' list](#)). The first workshop was the opportunity to share good practices between the European stakeholders and the Irish partners, which have a network of their own, namely the Regional Alliance.

The workshop officially started with the welcoming speech of Cllr Oliver Tully, Cathaoirleach, Louth County Council. He presented the agenda of the workshop and wished us a fruitful working session. The first session of the workshop was moderated by Nora Owen, Chair of Fingal Age Friendly Alliance; the second session by Mary T Daly, SEO of the Louth Economic Forum; and finally the political debate was moderated by Rodd Bond. Nora Owen's main advice would be to avoid the use of acronyms and academic jargon as much as possible, as most of our audience is not necessarily an expert in the field. Her overall observation, also mentioned by most of the speakers, was that by making a city/region "people-friendly", you would automatically make it "age-friendly".

1. Global Age-friendly Strategy

Sergio Murillo, Director-General for the Promotion of Personal Autonomy in the Social development Department at Biscay Provincial Government, started his presentation by locating the region in Spain. Biscay has 1,150,000 inhabitants, of which 76% lives in the area of Bilbao. In 2011, Biscay counted 20% of 65 and more and estimated that in 2050, 37% of the population of Biscay will be aged 65 and more (in other words, 2 out of 5 will be aged 65 and more). People have changed and they need new policies. The Province of Biscay established a global age-friendly strategy since 2005, when they restructured the Council of Older People. At the same time, actions were also taken at the European level. Indeed, in 2005, Healthy Life Expectancy was included in the Lisbon Strategy.

Sergio Murillo went through the timeline of age-friendly achievements in Biscay that allowed going further in the implementation of age-friendly initiatives (see PPT – slide

6&7). He mentioned that although active ageing was recognized at the European level, civil society was the one to really make things move forwards at first.

A change of paradigm was observed and necessary, switching from “doing for” to “doing with”, involving older people in the activities and the organisation of activities. Biscay now has an association of elderly people in every village and run an annual programme.

Biscay’s global age-friendly strategy consists in

- Establishing concrete objectives: Biscay intends to increase by 2 years the active and healthy ageing life expectancy by 2020 and making Biscay an excellent place to grow old;
- Measuring the impact of the global strategy by using the Active Ageing Index (AAI) and by setting up common rules for every policy-maker;
- Breaking silos and making “ageing” a transversal topic: various plans are now including ageing in their strategy (Health Plan 2013-2020; Life Long Learning Law; MUGI-Plan...)
- Involving the end-users in the process (applying the “doing with” method), through the Council of Older People;
- Organising trainings to empower local communities to start an age-friendly initiative.

For more information, see [Sergio Murillo’s presentation](#).

Alan Hatton-Yeo, expert in age-friendly communities at the Ageing Well in Wales Programme, explained that the Welsh government launched a broad consultation across Wales in order to determine what needed to be included in an age-friendly strategy in Wales according to the end-users. He presented the evolution of attitude towards elderly people, who are an asset and an integrated part of our society. Grounded on what older people told them, a first ageing strategy was launched in 2003. The first two phases raised awareness of the challenges older people face and put in place structures to make sure they would be heard by decision makers at local and national level. The third phase of the Welsh Government’s Strategy for Older People was launched in 2013 for 10 years and identifies how public services will respond to meet the needs of the Welsh ageing population. Through this Strategy and other associated policies, national and local government, health and social services, third sector agencies and businesses have formed strong partnerships and worked together to achieve the desired outcomes for older people. Most important thing, older people were involved at all levels of policy development and planning. The Ageing Well in Wales Programme is hosted and chaired by the Older People’s Commissioner for Wales and it contributes and complements the Welsh Government’s Strategy for Older People. The Programme will be formally launched in the Senedd (National Assembly for Wales) on 22 October 2014 by the First Minister. The Programme wants to ensure the improvement in the wellbeing of people aged 50+. Here are their main objectives (see slide 2) that:

- Support and champion positive changes to attitudes of an ageing society;

- Increase the opportunities for older people to access services adapted to what they want;
- Contribute to preventative action to reduce the pressure on health and social care;
- Provide support and advice to the public sector to enable them to adapt their policies and practices

The Ageing Well in Wales Programme has 5 initial areas of focus, each area has a dedicated lead expert and an advisory group that will help to identify and champion action to underpin and achieve its aims and priorities as well as a detailed implementation plan. Each area of focus is supported by a thematic network (including local individuals, groups and agencies) which will raise awareness and action at a local level by the harnessing and dissemination of best practices and innovation, sharing of ideas, projects, tools and resources to better support the role out of effective and impactful change across Wales, including the liaison with organisations and individuals in other EU countries.

For more information, see [Alan Hatton-Yeo's presentation](#).

→ Both strategies insisted on the notion of “people-friendly” that needed to be applied, because it leads to the creation of age-friendly environments. They also highly involve the end-users in the thinking and implementation process of the strategies. One last common feature is the strong political back up of Biscay and Wales.

2. Louth age-friendly County

Mary Deery, project manager at Louth Age Friendly County, introduced what the Louth Age Friendly County initiative is about and that it gained the Excellence Award in 2012 and is part of the signatories of the Dublin Declaration. Again, the end-users are put at the centre of every decision; hence the participatory and collaborative approaches are really important in Louth County to set up the age-friendly strategy. Besides this, solidarity is also an important part of the implementation of age-friendly initiatives. Mary showed a video presenting the thinking behind an activity organised in the County: some inhabitants discovered that one of their new comers could not speak English and were asking their children to translate for them. The elderly people decided to organise English classes for them and now +/- 10 to 45 people are attending the classes. This first attempt led to the organization of other activities that involve and encourage intergenerational activities. Mary Deery explained that there was an Older People's Forum that supports the Regional Alliance for the implementation of age-friendly initiatives. The objective of Louth County is to make the County adapted to elderly people by 2020 according to WHO criteria of an age-friendly environment. Mary Deery stated that time and patience were crucial to the creation of age-friendly environments.

For more information, see [Mary Deery's presentation](#).

Fiona Murphy, General Manager at Health Service Executive, presented how the health sector was organised in Ireland and how it was linked with the topic of age-

friendly. Fiona explained that one of the objectives was to give equal access to health care to everyone. Special health programmes are being set up to prevent falls. Indeed, in a typical population of 300,000, one can expect more than 70 elderly persons per week will attend emergency departments presenting with a fall, there will be 70 or more calls for an ambulance per week and 1,000 fragility fractures including 350 hip fractures per year¹. She presented the role of Cúltaca (meaning a strong support in Irish), an innovative home visiting programme for vulnerable older people. The Cúltaca promote and develop a person centred approach to care to ensure the wants and needs of the older person take priority over standard service delivery, in other words, it empower the older people to take charge of their own life. Activities, such as day trips, are organised for older people that need social interaction and groups like “Men’s Shed” are regularly meeting. Some services are staffed by volunteers, such as “Good Morning Louth Telephone Service”, which aim is to talk with older people and check they are safe and well in their own home and in so doing reduce feelings of loneliness, fear and isolation.

For further details, see [Fiona Murphy’s presentation](#).

Miriam McKenna, Manager of Flexibus, presented Flexibus, a response to regional transport demand. Flexibus’s budget is composed of 50% grant (funded by the Department of Transport) and 50% income from their activities. They are answerable to the community. The services started in 2002. Flexibus follows a regular business model and some of their employees are from the live register (list of people registering for Unemployment Assistance/Benefit or for various other statutory entitlements at local offices of the Department of Social Protection). Flexibus manages 24 accessible vehicles and are adapted to the transport of passengers in wheelchairs. A survey was carried out in order to determine the reasons they would use Flexibus: hospital and health services were high on the list, but other reasons that allowed them to meet up with their friends (bingo) or running some errands were one of the reasons mentioned.

Today, Meath, Louth and Fingal came together, expanding the area and the service. In 2012, Flexibus and Meath Volunteer Centre came together to introduce a new transport scheme: Meath Community Car scheme. The initiative aims at improving transport access to hospitals for older people and are driven there by volunteer drivers and using the volunteer cars.

Further information, see [Miriam McKenna’s presentation](#).

Rodd Bond, Manager Netwell Centre, Dundalk Institute of Technology, started by presenting the “trilemma” (demographic change – urbanization challenge – climate & energy challenge) faced by our modern society. According to him, the solution lies in the people; therefore, people should be consulted and be at the heart of the decisions made. The relationship between public services and people should be

¹ Gillespie LD et al. Interventions for prevention falls in older people living in the community. The Cochrane Collaboration 2012(9).

reorganized and citizens should be given a say whenever they are concerned. By involving older people in the thinking process, we improve the economic scheme and long-term care system and thus local and regional authorities will make savings in the long-term. Again, a change of paradigm has to be implemented, local and regional authorities have to adopt the people-oriented approach. According to Rodd, leadership, evidence and funding are the keys to scaling up innovation. And the collected evidence should be more global in order to converge on common goals. For further details, see [Rodd Bond's presentation](#).

→ Louth County's successful age-friendly journey can probably be explained by the leadership from all stakeholders/shareholders, but particularly Louth's County Manager, Rodd Bond and the HSE (Health Services in Ireland). Leadership is essential, but communication, collaboration and the involvement of end-users in the age-friendly process are also a huge criteria in the success of Louth.

3. Age-friendly business

Padraic White, Chair of the Louth Economic Forum, gave a general overview of the Louth Economic Forum structure (see PPT). The idea was to avoid fragmentation and put people together to make Louth a prosperous County economically but also age-friendly-wise. From the age-friendly perspective, services and products were redesigned and adapted to the needs of older people. A network of businesses was built to satisfy the needs of a population that has been put aside and by-products and services were introduced, such as special diet services for older people, particular insurance for older people or heating systems that is controlled remotely via an application. Since 2012, Louth County welcomes the Age-Friendly Business Consumer Fair, where people **learn about the innovative products and services dedicated to elderly people**.

The idea of the Forum was also to reintroduce older people in the working sphere either by hiring them or offering them the opportunity to give back to society by volunteering in activities, such as sharing their entrepreneurial experience with younger generation. Indeed, as pointed out by Padraic White, it is time to capitalize in the wisdom of older people and take advantage of their experience.

See [Padraic White's presentation](#) for further details.

Françoise Abry, coordinator of the project HOST, briefly presented Opac Rhône, the leader of the HOST project, which is a social housing organization in the Rhône County that owns 42,000 housings managed by one head office, one call centre, 3 districts and 16 local agencies spread in France. Because their tenants are ageing, Opac Rhône committed to an ageing policy. In other words, they have to adapt their flats to the demand of the elderly people; together with gerontologists, they have developed a special training for the staff; and according to the contract they signed with the Rhône County, they committed to build dwellings in an AFE, of which 20% are dedicated to seniors.

HOST project objectives are to promote the well-being, autonomy and social inclusion by providing easy-to-use ICT and services to older people living in social housing. Two applications were co-designed with the end-users and tested by around 100 elderlies. The participatory approach was once again crucial for the setting up of these two applications.

See [Françoise Abry's presentation](#) for further details.

- ➔ Demographic change should be considered as an opportunity and not a plague. The case of Louth County and Rhône County has proven that by-products and by-services could be created to fulfil the needs of elderlies and thus create a renewal in the local economy. Older people are a market that has to be taken into account for the next years.

4. European Innovation Partnership on Active and Healthy Ageing: Reference Site

Ireland - COLLAGE

Dr **Anne Nolan**, Research Director at TILDA, explained a survey called “towards making Ireland the best place in the world to grow old” carried out in Ireland among 8,504 participants aged 50+ for 10 years. The challenge of the increased longevity is to make sure that it is synonym of health, happiness and decent. Three subjects were taken into account: health, economics and social. See PPT for the results. The data collected will help inform policy on active and healthy ageing.

Refer to [Anne Nolan's presentation](#) for more information.

Dr **Eileen O’Herlihy**, presented Collage – Collaboration on Ageing Partner, which is a collaboration formed by Cork Healthy Ageing (through Resource Generation & Education – University College Cork) and Louth Age Friendly County. The CARTS (Community Assessment of Risk and Treatment Strategies) programme is a risk intervention strategy developed at the Centre for Gerontology and Rehabilitation in University College Cork. This innovative programme is a key initiative within COLLAGE, Ireland’s 3 star EIP AHA Reference Site and it aims to screen, triage, assess and manage risk of three adverse outcomes (institutionalization, hospitalization, death) among community dwelling older adults. The programme comprises of a rapid screening instrument that quantifies the impact of multiple predictors of adverse outcomes to generate a unique risk score for each of the three outcomes of interest. An assessment and treatment programme then identifies and defines the most beneficial interventions for the patients. 803 patients have been screened in a pilot phase in Ireland. Initial findings show the screening instrument to have a superior sensitivity, accuracy and specificity in predicting long term care, hospitalisation and death, and has the potential to improve efficiency in healthcare and its delivery. A largescale trial of the programme is planned across Europe and a consortium from 6 European countries and Australia, Canada and Turkey is applying for funding through Horizon 2020. This will include a randomized control trial with targeted interventions. The overall goal of the CARTS programme is to keep older

adults healthy, independent and active in their own homes by developing tailored, cost effective health intervention strategies in an expedient way and to manage the factors that are putting older adults at risk.

Another initiative from the group is the “Let Me Decide” Advance Care Planning and Palliative care in Long-term Care programme aims to increase older people’s independency and reduce unnecessary treatments at end of life. A pilot study is examining the feasibility of implementing an advance care planning (ACP) programme using the ‘*Let Me Decide*’ advance care directive (ACD) in three long-term care (LTC) facilities. It includes delivery of a palliative care educational programme for staff and assesses the effect of the programme on the quality of the end-of-life (EOL) experience. Data are being collected from chart review of deceased residents, survey of bereaved relatives and a survey of staff using a newly developed tool to assess staff perceptions of the EOL experience. A survey of LTC staff has been carried out to assess their attitudes and barriers to ACP and ACDs and to determine educational needs of staff in relation to ACP. E-learning modules on ACP and palliative care are being developed in conjunction with the All Ireland Institute of Hospice and Palliative Care to facilitate the sustainable delivery of the educational components of this programme. The programme aims to empower patients, improve the quality of death and end of life care and to reduce the burden and stress on families and healthcare professionals.

For further details, see [Eileen O’Herlihy’s presentation](#).

Southern Denmark

Henriette Hanson, EU-consultant & Project Manager at South Denmark European Office, presented the Region of Southern Denmark. Since 2007, Denmark is composed of 5 regions and 98 local authorities. The State level sets the overall strategic frame for the society but local authorities have the responsibility for assignments close to the citizens (education, labour market, culture...) and the regions have the responsibility for primary care and overall development plans for the entire region. One of the commitments of Southern Denmark is “health and welfare innovation”, supported by funds from the regional Growth Forum (regional funds and European Structural Funds). A Regional Advisory Council for Health and Welfare Innovation was created to allow the collaboration of various actors to achieve the development priorities, such as regions and municipalities, the private sector and Educational institutions (see PPT for comprehensive list). In terms of health services, regions, local authorities and general practitioners have specific tasks (see PPT).

SAM:BO is one of these innovation success stories coming from Southern Denmark. It is an agreement on collaboration between health sectors based on digital technologies, aiming at higher quality, efficiency and patient satisfaction, and better collaboration between all health and social care players in the Region. Thanks to this agreement and the IT tool adopted by the Region, the information regarding patients’ hospitalisation is transferred electronically using an agreed proforma which creates better continuity of care by allowing professionals working in the community to better prepare for caring for the older person at home upon discharge.

SAM:BO builds on the concept of LEON – lowest possible cost level – which means that the patient will receive the best and most efficient treatment, but to the lowest cost possible without compromising the provision of healthcare. The starting point is the individual's needs, so that treatment is offered on a needs basis. The system expresses the essence of integrated care, where the citizen experiences consistency from the very beginning in the process where the general practitioner is contacted, to the diagnosis and treatment at the hospital and until the citizen is back in his/her own home for the follow-up rehabilitation therapy. For the complex patients with one or several chronic diseases, the Region of Southern Denmark is implementing the Shared Care system, an innovative solution that runs on the backbone of SAM:BO. The Shared care is an ICT system that is established on the basis of the chronic care guidelines that have been issued both nationally and internationally. See [Henriette Hanson's presentation](#) for further details.

Northern Netherlands

Daan Bultje, Director of Healthy Ageing Network Northern Netherlands ([HANNN](#)), presented the Northern Netherlands as one of the Reference Sites of the EIP AHA. [LifeLines](#), a large cohort study comparable to COLLAGE, is monitoring 165.000 participants (10% of the population of the Northern Netherlands) including 3 generations – for at least 30 years follow-up – in order to investigate why some people get old in a healthy/unhealthy manner, and try to find a pattern with those suffering from severe impairments or diseases. The Health Ageing Network Northern Netherlands is a successful combination of researchers/knowledge institutions, entrepreneurs and governmental bodies that generates opportunities for all parties, such as developing business, building relations with comparable knowledge clusters in Europe (Norgenta, BioCon Valley, ScanBalt), and expanding and enhancing networks. Since January 2012, [Embrace](#) a new care model has been implemented, resulting in an improved quality of care and a reduction of service use and costs. Daan Bultje presented various age-friendly solutions that could help older people to age well and decently: [RITA](#) (an assisting robot), health tourism and gaming for health (video games such as Wii Balance to improve rehabilitation). Daan Bultje announced there will be an international conference in 2016 on “Building the future for health”.

Refer to [Daan Bultje's presentation](#) for more information

5. Great Northern Haven (field visit)

The attendees of the AFE INNOVNET workshop visited the Great Northern Haven apartments, Ambient Assisted Living Smart Homes for older people. These homes provide a new model for independent living and inform national policy in relation to services for older people. This demonstration project for independent living uses sensor technologies in a community. This is a flagship project for County Louth as Ireland's first 'Age-Friendly' County, and for the Netwell & CASALA research centres at the Dundalk Institute of Technology.

The initiative, presented by Rodd Bond, Director of the Netwell Centre, comes from the collaboration between the Louth Local Authorities, local Health Service Executive, industry partners, research & development and the older residents. The Netwell Centre set up an ageing-in-place research project to analyse the impact of the housing on older people's quality of life, while CASALA manages the technology, collates the data and adapts the systems to meet the unique needs of individual occupants.

At the end of the visit, due to their similar activities, Françoise Abry suggested to Rodd Bond to arrange a visit of Opac Rhône to Louth County and see how they could learn from each other.

6. Dublin Declaration

The Dublin Declaration

Conn Murray, Limerick County Manager, presented the [Dublin Declaration](#) and its role in committing mayors to creating age-friendly cities and communities. Alongside Dublin and several counties in Ireland, 66 cities in 10 European countries signed up the declaration, together with other cities across the world including Mexico City, and New York. In doing so, the cities have declared they will work to meet actions based on the World Health Organisation (WHO) [Global Age-Friendly Cities Guide](#):

- raise awareness about older people's rights, needs, and potential;
- develop inclusive and accessible environments (public places, transport systems housing, etc);
- develop participatory decision-making processes that empower older citizens;
- promote the participation of older people in social and cultural life;
- promote and support the development of employment and volunteering opportunities for older people;
- ensure support and health services are available to older people.

The WHO framework gives the international legitimacy of the initiative and it has helped mobilise stakeholders and invite them to sign up the Declaration.

From the Dublin Declaration experience, Conn Murray learned the importance of:

- encouraging mayors to commit to age-friendly communities by providing them with concrete examples of what they can do;
- listening and engaging mayors and citizens in the debate;
- putting communities and not environments at the centre of the debate and stressing the importance of transferring lessons between generations;
- empowering people through the commitment process.

For more information, see [Conn Murray's presentation](#).

Towards a EU Covenant on Demographic Change

Anne-Sophie Parent, Secretary General of AGE Platform Europe, presented the [Covenant on Demographic Change](#) that the AFE INNOVNET project aims to launch to bring together EU local and regional authorities – and other stakeholders - who want to implement smart and innovative evidence-based age-friendly solutions. The

Covenant aims to support longer healthy and active life years by pooling and sharing the knowledge and expertise of the WHO age-friendly environments, the outcomes of the [European Innovation Partnership on Active and Healthy Ageing](#), the [EU standardisation work on Design-for-All](#), relevant EU projects, and the [Knowledge for Innovation Community for healthy living and active ageing](#). It should be inspired by the [Covenant of Mayors on Climate Change](#) which already exists.

Anne-Sophie Parent also added that AFE-INNOVNET is closely collaborating with WHO, in particular the Europe Region Office based in Copenhagen, in order to adapt the WHO age-friendly environments framework to the EU context. Since 2008, AGE has been working together with WHO to promote an age-friendly environment across the European Union and the Covenant on Demographic Change that will be launched by the AFE INNOVNET project aims to become the EU programme of [the WHO global network of age-friendly cities and communities](#).

Demographic change has been identified as a key priority by President van Rompuy in his speech after the nomination of the EC new President Mr Juncker. Moreover, in 2012 the proposed Covenant on Demographic Change received the support of the Committee of the Regions in their "[Opinion on Active Ageing: Innovation, Smart Health and Better Lives](#)" requested by the Danish EU Presidency, as well as of a large network of national governments and other stakeholders ([commitment on the framework of the European Innovation Partnership on Active and Healthy Ageing](#)).

Starting the AFE INNOVNET workshops with the Irish example of age-friendly counties was not only a recognition of what has been done in an increasing number of Irish counties but also what has been done in terms of political support with the Dublin declaration.

From the roundtable of the AFE INNOVNET workshop, Anne-Sophie Parent expected to discuss how to link the Dublin Declaration to the Covenant on Demographic Change and share their experience in mobilising local authorities. She also wanted to discuss:

- the possible Covenant's accreditation criteria
- the tools used to assess the age-friendliness of a city/region
- Indicators to assess progress of cities and regions – what kind of link with the Active Ageing Index (which is expected to be further developed to be usable at local and regional level).

Roundtables

During the roundtables, it was proposed to enable those who signed the Dublin Declaration to join automatically the AFE INNOVNET network in order to create synergies between the two initiatives. It was also proposed that the Dublin Declaration could serve as a vision for the Covenant on Demographic Change that takes into account the European context and the social European values.

Concerning the use of assessment tools and indicators, some participants raised some concerns:

- Not every city is at the same starting point. Criteria and indicators could be frustrating and discouraging for some municipalities;
- Not every city has the same cultural model. Criteria and indicators could not be in line with some models;
- Cities could not necessarily be able to meet the Covenant's requirements every single year due to temporary circumstances/ a changed situation (crisis, change of the mayor, etc.).

Some mentioned their concern that a too formal framework would slow down, and in some instances be the end of volunteer collaboration, which has been and is still crucial for the development of age-friendly environments. The Covenant on Demographic Change should try to find a method to keep the local and voluntary initiatives.

Others raised the questions related to the reporting that signatories of the Covenant should do. Because every city/region is starting differently and at different levels, the situation could hinder the reporting; therefore, the reporting should be flexible and take into account the various scenarios possible.

On the other hand, participants recognised that the WHO methodology already takes into account some of these concerns. Moreover, accreditation and assessment tools and indicators would guarantee the quality of the Covenant's commitments. In order to define them, the AFE INNOVNET partners will need to:

- Take into account that municipalities start from different levels of age-friendliness (the WHO methodology already does it);
- Take into account the different cultural models that exist in the EU;
- Think about the Covenant's accreditation criteria and the procedure to be adopted when municipalities don't meet the requirements.

Participants also mentioned that there is sometimes a lack of political will among policy makers at local and national level, and that we should think about how to mobilise the policy makers that are now reluctant to adapt the environment to the ageing population.

Joan Martin, Responsible for the Louth Age-friendly portfolio, wrapped up the workshop by thanking the participants for their contribution, their presence and their efforts to implement age-friendly initiatives all over Europe. She also mentioned that Louth would not be where they are today if it were not for the work of Conn Murray, former Manager of Louth County. The workshop was closed with the following sentence: "We are only at the start of the age-friendly journey".

Workshop 2
Dementia-friendly Cities – Age-Friendly Environment Strategies
2-3 October 2014
Brussels, Belgium

Background document

The workshop will be the opportunity to present age-friendly environment strategies – in particular, dementia-friendly initiatives – and to present good practices that work. Local authorities will have the chance to see how they can lead their town/city/region in creating a dementia-friendly environment (or improve the existing one); but most importantly, they will be able to understand what dementia itself really is about and what a dementia-friendly environment is, as it is a much wider approach than the one that is limited to social care and the interface with health.

Worldwide, 35.6 million people have dementia, according to the World Health Organization, with 7.7 million new cases being diagnosed every year. At that rate, the number of people with this degenerative disease is expected to double by 2030 and triple by 2050 mainly due to the increased number of the elderly. There is currently no cure for dementia, but if we don't address the issue properly, the demands on current services and the cost of caring well for people with dementia will become unmanageable. Times have come to plan for a different future and shift our perception and response to dementia.

Participants of this workshop should reflect on the following questions during our discussions:

- How different is the situation at your local level (national support, active participation of end-users...)?
- What synergies could be envisaged between the different cases and your city/region?
- What barriers exist in creating dementia-friendly policies? And how do you work with other stakeholders to tackle these? What local services would need to be adapted?

1. “Customer Remains King in Brugge”

Bruges, with about 2 000 people suffering from dementia, is one of the European leading cities that expand the dementia-friendly approach. In the framework of the “Together towards a dementia-friendly Bruges”, the “Customer Remains King” project strives to improve the quality of life of persons with dementia and their environment by bringing about a mentality change in all citizens, organisations, businesses, institutions and officials, all leading to more respectful, equivalent communication and interaction. Various actions have been set up in Bruges to improve the social integration of persons with dementia so as to let them be considered as “full citizens” again.



Through four testimonies, the movie reveals to the audience how local shops and shopkeepers make a big difference and what they mean for people suffering from dementia and for their relatives. Dementia-friendly shops can be easily recognized by the red-knotted handkerchief logo on their facade. The movie takes place in Bruges, but the initiative can be duplicated to the European and global level.

2. “A Reminiscence Promenade in Aalbeke” (Field visit)

“A Reminiscence Promenade in Aalbeke” is the 2014 award winner of the European Foundation Initiative on Dementia (EFID). The EFID is an initiative of a group of foundations engaged in the Network of European Foundations (NEF) that developed in 2011. Foundations involved are the Atlantic Philanthropies (IE), the Fondation Médéric Alzheimer (FR), the King Baudouin Foundation (BE), the Robert Bosch Stiftung (DE) and lately, the Joseph Rowntree Foundation (UK). The EFID awards are designed to reward initiatives promoting the integration and support of people with dementia and their carers in the local community through a large range of activities and aim to encourage context-relevant projects in the field of awareness building about dementia.

The promenade was created to stimulate reminiscence, enhance intergenerational work, improve accessibility and mobility and favour integration into village life. Indeed, strollers will find along the path several stops that are referring to past events or buildings recognizable by Aalbeke resident who can share their knowledge about them with the residents. Local history experts helped set up an explanatory guide to enrich the promenade. Moreover, paths were designed and wide enough to give access to wheelchairs or buggies. Finally, through intergenerational work and educational programmes, citizens get to better know the symptoms of dementia, and thus help people with dementia to be integrated and destigmatised.

3. “Dementia-friendly communities in Flanders”

The Association of Flemish Cities and Municipalities (Vereniging van Vlaamse Steden en Gemeenten, VVSG) offers support and promotes the interests of the local authorities with other authorities and institutions. VVSG is the representative member organisation of all the Flemish municipalities, of the public centres for social welfare (Openbare Centra voor Maatschappelijk Welzijn, OCMWs, the administratively autonomous social services) and of about fifty intermunicipal companies. It represents the interests of both local elected politicians and municipal employees. VVSG is involved in different fields of ageing, such as supporting dementia-friendly municipalities, developing age-friendly cities and municipalities, representing the Flemish public elderly care organisations, and proactive working with elderly people.

4. “The ethical issues linked to the perceptions and portrayal of dementia and people with dementia”

How are people suffering from dementia perceived by others? How do people suffering from dementia feel when there are depicted in the media or in films? What do their families and carers need to support them? These questions are addressed in

the presented report. It looks at the many different ways that people make sense of [dementia](#). It covers perceptions associated with the experience of [dementia](#), the cause of dementia and the possible implications of dementia on individuals and society.

Sections of the report are also dedicated to the use of metaphor and on the portrayal of dementia in the media and films. Each section contains details of the reflection by the multidisciplinary working group on the ethical implications for people with dementia of being perceived and portrayed in a particular way. The report takes into account how people with dementia feel about dementia and about the way they are perceived and portrayed within society.

5. “The Missing Persons project in HEKLA”

The Missing Persons project in HEKLA – 2012 EFID Award winner – is a project implemented on 5 local authority areas in Belgium (Hove-Edegem-Kontich-Lint-Aartselaar). Everything started in 2006 when the Orion Expertise Centre on Dementia asked the police whether they knew how to deal with people suffering from dementia and the answer was no. In the framework of the project, the police – working together with external partners, such as representatives of care centres, hospitals, Missing Person Unit, Child Focus and others – have set up a procedure to rapidly locate and return home missing persons with dementia within 2-3 hours. Today, this network-based approach has been so successful it has already been adopted by other local police forces and wishes to disseminate the good practice to as many interested stakeholders as possible.

6. Dementia Supported Environments - Empowering and Connecting People with Dementia and Carers

Alliance Scotland implements initiatives to enable people with dementia to live well in their own communities, thereby reducing admissions to long term care. The range of initiatives being undertaken in Scotland to support this, including the Post Diagnostic Support guarantee, the Charter of Rights for People with Dementia and their Carers, Scotland’s National Dementia Strategy and therapeutic interventions aim to keep people well and connected, while raising awareness among key sectors of factors which can assist and promote community connectedness for people with dementia.

7. “Alzheimer: intergenerational springboard of social and professional inclusion”

In most European countries, Alzheimer is a major societal issue considered as a priority that needs the implementation of public support policies in the social, medical and financial field. In parallel, many young citizens or isolated women without qualifications experience great difficulty in finding a job. The bilateral project between Spain and France aims at creating a bridge between these two target groups, developing a win-win relationship: younger people and isolated women without qualification receive a professional training to accompany people suffering from Alzheimer and their families; and people suffering from Alzheimer and their carers

can maintain their social link. One of the objectives is to bring an added value to the existing national initiatives by creating jobs and creating a new type of support system for people suffering from Alzheimer and their families.

8. “Geel, a dementia-friendly community 1+1=3”

The “house Perrekes” is a small-scale living project, based on the principle of normalization for people suffering from dementia. The non-profit organization “Huis Perrekes” started in 1986 and has been running three autonomous houses, each housing 15 people suffering from dementia. Provision and care is given in the context of a small-scale project, in which daily living is based on the principle of normalization – within a house that is as normal as possible, in an ordinary street, in an ordinary village. The wording is carefully chosen. Indeed, the word **house** stresses the influence of the surrounding material and immaterial environment that protects and supports its inhabitants, but also invite them to keep on living their lives as meaningful for as long as possible.

9. “Dementia and ethnic minorities in Boom”

Boom is a Belgian city, located in the province of Antwerp. The project objectives of “Dementia and ethnic minorities” are to inform and educate the immigrant community of the city of Boom to dementia, explain to them what services and choices are available to them. Indeed, for the different ethnic minorities (Moroccan, Spanish and Balkan) tailored information sessions are organised with the help of interpreters.

Report

The second AFE-INNOVNET workshop on dementia-friendly cities took place on 2 and 3 October 2014 in Brussels, at VVSG premises. It was co-organised by VVSG (Veerle Baert) and CEMR (Nhu Tram). It was moderated by Anne-Sophie Parent, Secretary General at AGE Platform EU and was attended by 35 AFE-INNOVNET Consortium members and external guests ([see participants' list](#)). The background document was sent a week prior to the workshop to the participants to give further details about the presentations. Participants were invited to fill in a survey to share their opinion about the workshop.

The first part consisted in a field visit of the 2014 award winner of the European Foundation Initiative on Dementia (EFID), namely “**A Reminiscence Promenade in Aalbeke**”, which allowed participants to visit a care facility adapted to patients with dementia – the architecture and interior design was well thought out to make them feel comfortable. Participants were given the chance to visit the amenities and do the “Reminiscence Walk” at the end of Jan Goddaer’s presentation. The 4 walks designed for people with dementia are well integrated in the local community of Aalbeke, made for residents with dementia, but also local people and tourists, as the buildings are part of the historical heritage of the town. The signs are simply designed

and offer no confusion nor misunderstandings for the walkers. For more information, see [presentation](#).

A representative of the City of Bruges, Claire Meire, also joined the AFE-INNOVNET group at Aalbeke to present their dementia-friendly initiative implemented in Bruges “**Customer Remains King**”. The initiative allows people with dementia to live longer and independently in their homes and neighbourhoods. By training staffs and raising awareness about dementia to local shops, people with dementia no longer feel limited in their movements and can keep on with their habits. A DVD was created by Foton – an expertise centre on dementia – in the framework of the project “[Together for a dementia-friendly Bruges](#)” to raise awareness about dementia through 4 short stories (see [trailer](#)). For more information, refer to Claire Meire’s [presentation](#).

On the second day of the workshop, participants of the workshop were welcomed by Jan Van Alsenoy (VVSG) and Anne-Sophie Parent (AGE Platform EU). Time was then dedicated to the **Flemish Minister for Health and Welfare** – Jo Vandeurzen – and the representative of **Walloon Minister for Health and Social Affairs** – Jean-Paul Procureur. Both presented initiatives that are already implemented in their regions and expressed the intentions of their respective governments to continue promoting innovative solutions for age-friendly and dementia-friendly environments, such as adapted homes for independent living, adapted urban policies to face demographic change and awareness raising about dementia.

Veerle Baert, working for the **Association of Flemish Cities and Municipalities** (VVSG), presented the case of Belgium with its communities, regions and provinces and thus the different competences they are responsible for. She expressed the case of Flanders as a dementia-friendly region with the support of the **King Baudouin Foundation**, with whom they published a guide on “How to make your community dementia-friendly” (available in [Dutch](#) and [French](#)). Even though it is quite difficult to start a dementia-friendly initiative due to the particular political structure of Belgium, Flanders is at the forefront of dementia-friendly initiatives. Indeed, 4 of the Flemish projects have won a European Award. VVSG has also designed a dementia-friendly meter (Dementiaproof meter), that assess the dementia-friendliness of a municipality.

- ➔ This assessment tool could be used for the socio-economic assessment tool developed by AFE-INNOVNET.
- ➔ Participants showed a great interest in the “dementiaproof meter” used by VVSG and the guide “How to make your community dementia-friendly”. Unfortunately, it is only available in Dutch and French. VVSG would need financial support to translate the guide into English.

For more information, see Veerle Baert’s [presentation](#).

To illustrate Flemish good practices, Mr. Alain Remue, Chief of the Missing Persons Unit in Belgium, exposed the **HEKLA project**, which started in 2006 in a local authority area. Between 2010 and 2013, there were 500 cases of missing persons

with dementia. A procedure is now implemented to easily find missing persons suffering from dementia and staff of care centres are trained to react properly when a resident is missing. The project is so successful that it is now adapted to the Walloon context since 2013. It is also being promoted outside Belgium and is an easy good practice that can be duplicated.

→ The notion of **privacy** and **freedom** came up when asked Mr. Remue's opinion about "chips" that could be installed on residents/people with dementia. He is not against it, but we should be careful to only use them on a person considered "at risk" by a doctor and respect them by only activating them when they are going missing for example.

→ The material linked to the HEKLA is only available in Dutch and French.

For more information, see www.hekla.be

Dianne Gove gave us an overview of what dementia meant to people with dementia but also for those without dementia. Based on a report published by Alzheimer Europe "**The ethical issues linked to the perceptions and portrayal of dementia and people with dementia**", raising awareness is one of the key objectives to implement successful dementia-friendly initiatives. As Dianne Gove mentioned, it is vital to understand the different ways of looking at dementia, and emphasise that dementia is not only a medical condition but also a complex social phenomenon. The way we look at dementia differs from one person to the next and according to the situation or context. Our ethical reflection focused on ways in which various ways of perceiving and portraying dementia were likely to be beneficial or potentially harmful to people with dementia (e.g. in terms of their dignity, wellbeing, autonomy, rights, personhood, relationships and role in society). In order to maintain people with dementia as full citizens, we need to reflect on and question the ways dementia and people with dementia are perceived and portrayed.

More information can be found on their [website](#) and on the [presentation](#) of Dianne Gove.

Scotland adopted a [National Dementia Strategy](#) in 2010 and has been implemented in 4 different parts of Scotland. Reports were released about the monitoring of the results since then. In 2013, the strategy was refreshed, planning a strategy for the 2013-2016 period. The strategy was approved by 17 local authorities to put in place a strategy for dementia. A model based on a 5-pillar approach was created to bring support to people with dementia. The model is being tested.

The work carried out by [Alliance Scotland](#) implements initiatives that enable people with dementia to live well in their own communities, to raise awareness and keep people well and connected with their communities. Their work allows bridging the gap between policy and the work led at the ground level, involving end-users and (in)formal carers in the decision-making process and make their voices heard.

For more information, see **Irene Oldfather's** [presentation](#).

Polibienestar, a research institute based in Valencia, Spain, is involved in a EU funded study on training and inclusion of people caring for patients with Alzheimer's Disease. It identified a great lack of formal and informal support as well as training of carers, which leads to overburdening of informal carers and non-appropriated care. Eventually evidence showed premature institutionalization, violence against patients and social exclusion. The project developed a theoretical and practical training programme based on strengthening social networks, social support, labour guidance and was based on intergenerational solidarity. This programme will help support carers to provide appropriate care, to see their work valued and help increase vocation to work with patients with Alzheimer's Disease. The programme is also the opportunity to make a link between people with Alzheimer and unemployed people. Indeed, the programme gave the opportunity to train people at risk of labour exclusion to take care of patients with Alzheimer. It allowed to strengthen social networks for patients with Alzheimer and at the same time, it gave a professional training to those that were unemployed for a certain period of time.

→ The results were quite positive. Out of the 59 potential trainees, some continued working as carers.

For further information, see Mireia Ferri's [presentation](#).

The "[House Perrekes](#)" was represented by **Karen Lambrechts** and **Caroline Maas** at the workshop. They exposed the various activities implemented in the municipality of Geel, such as intergenerational activities at the municipal library. Once a month, reading sessions are organised for children and people with dementia, giving them the opportunity to interact. One of their recommendation was to involve children and put them into contact with elderly people with or without dementia as much as possible. By doing this, they hope to reduce from an early age the fear and stigma associated with illness and ageing.

The House Perrekes is also locally famous for their knitting and choir activities (De Betties), contributing to the "connectedness" network. These activities reach a broad public and create spontaneous relationships between the different actors of these groups.

The House Perrekes was the subject of a film "[Feel my love](#)" which depicted the residents of the house in a positive way, focussing on what remains instead of what has been lost.

→ They realise that in a society in crisis that relies on money and immediate economic results, it is often difficult and unnecessary for authorities to invest time and money in actions that will only bare fruits in a long time, and not necessarily in economic results.

The workshop ended with the presentation of **Kathleen Mariën**, service responsible at day care centre in Boom (Belgium). The dementia-friendly project they undertook was related to the ethnic minorities present in the city of Boom, namely Spanish, Moroccan and Balkan minorities. She explained that they noticed that very little residents were from different ethnic background and therefore wanted to inform the

population of the services that were available to them. They organised information session among the three communities and tried to break the taboo of residential care centres that people have about them. Translators were hired to assure the communication between the service providers and the minorities. They realised that only the Moroccan communities were responsive to the information and were interested in the care services provided by the authorities.

→ The issue of political support came up in this particular project. They had it at first, but due to local elections, there was a shift in the local priorities.

For further information, click [here](#) (only available in Dutch/French).

Participants had the opportunity to hear about local initiatives that could be duplicated at the local level. Several topics such as political support, involvement of the community, awareness of dementia were raised and are crucial to the success of dementia-friendly initiatives. Indeed, according to the Local Government Association, “for communities to be dementia-friendly, people with dementia need to feel confident that they will be welcomed and encouraged to remain engaged and active in all services and activities, wherever they are²”.

Participants were provided with the contact details of the speakers and were invited to contact them for further details about the projects.

² “Developing Dementia-friendly Communities, Learning and Guidance for Local Authorities”, Local Government Association, May 2012, p. 13

Workshop 3

Independent Living, Housing, Domotics – Age-Friendly Environment Strategies

30-31 March 2015

Udine, Italy

Background Document

The world population is ageing and people aged 50+ in Europe already represent 37% of the population. [Eurostat](#) population projections foresee that the number of [people aged over 60 will increase](#) by about two million persons per annum in the coming decade. It will inevitably lead to a shortage of beds in hospitals and home care facilities. Adapting the housing with domotics or with smaller things, such as secure floor pads in the bathroom or a second bannister on the stairwell to encourage independent living is a solution put forward to tackle the issue. Moreover, older people have expressed their wish to remain longer and live independently in their homes, where they have spent most of their lives.

Adapted housing and independent living not only enables older citizens to regain confidence, it also decrease the risk of falls, the admission to home care facilities, and thus puts less pressure on the public budget. The workshop will be the opportunity to present age-friendly environment strategies and for local and regional authorities to pick up age-friendly environment solutions that are designed to encourage **independent living** and innovative solutions in regards with **domotics**³ and **housing**.

Participants of this workshop should reflect on the following questions during our discussions:

- What measures can municipalities and regions undertake to encourage older citizens to remain longer and live independently in their homes?
- Are domotics a must to allow independent living or can it be achieved with other means?
- What synergies could be envisaged between the different cases and your city/region?
- Would your municipality or region be in favour of encouraging independent living? What modification, adaptation would be necessary at the local or regional level?
- Would a national or European support be an incentive to implement independent living initiatives?

³ **Home automation** (also called **domotics**) is a field within building automation, specializing in the specific automation requirements of homes and in the application of automation techniques for the comfort and security of its residents: light and climate control, control of doors and window shutters, security and surveillance systems, etc. The main difference between building automation and home automation is, however, the human interface. In home automation, ergonomics is of particular importance

1. LAK Project - Living for All Kitchen and REFREEDOM Project by Felice Pietro Fanizza – Friuli Innovazione and Rino Snaidero Foundation

LAK is a project of industrial research and experimental development co-financed by the autonomous Region Friuli Venezia Giulia and promoted by a group of business and regional research centers headed by Snaidero Rino Spa. The aim of LAK is experimenting and integrating new domotic technologies in the kitchen-environment, to make it more livable, especially for the elderly or people with slight mental disability. Starting from the needs of this specific type of users and applying principles typical of the “design-for-all” approach, that is, respectful of the peculiarity of each individual, the project studies some solutions intended to improve life-quality standards at home in terms of security, comfort and energy conservation.

The REFREEDOM project is addressed to people with problems of orientation, offering them assistance in complex confined environments, that is to say, both indoor and outdoor places that feature paths and possible obstacles that people with difficulties cannot face without help. More precisely, the project is born out of the idea to apply home automation technologies to allow people with difficulties to interact autonomously with the environments of hospitals, of universities, of diagnosis centres and of the other places, which by nature feature a high number of users of this kind.

2. Field Visit: Domotic houses and independent living pilot projects in Udine

Participants will visit living lab domotic apartments linked with the presented LAK project and REFREEDOM project.

3. “Independent living supported by the city of Tampere” by Essi Mäki-Hallila and Mari Lahtinen

Tampere is the largest inland city in the Nordic countries with about 223 200 inhabitants. Almost one in five of the citizens are over 65 years old. The elderly population will increase to almost 60 000 by the year 2040. The growth is especially substantial among those aged 85 and over. In this group also the coverage of regular municipal home care has increased most rapidly since the early 2000s.

In the framework of the process for the promotion of senior citizens’ welfare, the Municipality offers a range of home care services that enable senior citizens to live at home through preventive and rehabilitative facilities and by providing round-the-clock services and care at home as required. The strategic goal is to increase the number of residents living at home or in a homely environment.

4. “Home Care Services for Independent Living in Ljubljana” by Tanja Hodnik – Head of Social Security Office at the Municipality of Ljubljana

The Municipality of Ljubljana gives special care and attention to the elderly. The City of Ljubljana regularly implements all legislative activities for the elderly and also extensive support, through public tenders, co-financing many other activities, programs and projects, which are carried out by non-governmental organizations and public institutes.

By law, Slovenian local communities are obligated to provide a network of public services *family help at home*. This service is intended for those who, due to age, disability, illness or other circumstances require social assistance which can replace institutional care. The City of Ljubljana subsidizes social service in the amount of 80 % instead of 50 % - minimum amount in the law. This service is provided by the public Institute for home care Ljubljana (the City of Ljubljana is its founder) and concessioner Institute Pristan. The purpose of their work is to ensure aid and quality life at user's home and to provide users with care that ensures them longer stay in home environment, preventing loneliness and relief of their relatives.

5. “Independent living and telemonitoring experience in Pordenone province” by Massimiliano Bertetti – Project Manager at The Polo Tecnologico of Pordenone “Andrea Galvani”
(not available)

6. “Age-friendly co-housing initiatives in Trieste” by Luca Bianchi - University of Trieste

Trieste appears as a vantage point to the phenomenon of an aging European population. The demographics of this city imposes to respond to challenges linked to this phenomenon, especially in terms of sustainability of welfare systems. In this regard, policies on housing appears as a strategic hub, placing itself in an intermediate position between the public policies of housing and health and social measures closely. In recent years, they have developed some experiments that have gone in this direction, trying to integrate actors, perspectives and aspects concerning the residency of the elderly and, more generally, of vulnerable groups. Specifically, the initiatives of solidarity and Condominium project Montebello allowed, in view of the public private partnership, to propose a management model of these new forms of living.

7. “Innovative housing and care solutions: results and recommendations of the HELPS Project” by Matteo Apuzzo, Project Manager, Local Health Authority n.2, FVG Region

HELPS project started in October 2011 until December 2014. It aimed at tackling socio-demographic challenges such as ageing, disability and social exclusion. The objective was to contribute to the development of residential and care models strengthening independent living of elderly and persons with disabilities in Central European cities.

Over the years, HELPS fully explored the potential of a multi-sectorial and integrated approach to care services: health, social innovation and housing issues were faced by combining research studies with on-field activity.

Report

The first day of the workshop was held at the City Hall of Udine and hosted by the Mayor of the Municipality, Professor Furio Honsell. 33 participants attended the meeting, speakers included ([see participants' list](#)). Rodd Bond, moderator for the second day of the workshop, took this opportunity to thank the Municipality and the Mayor for hosting the workshop, especially as the city is doing many actions in favour of active and healthy ageing and is part of the [network of Healthy Cities of the WHO](#). Professor Furio Honsell, Mayor of Udine, gave an introduction about his city and voiced his please to host the workshop, as he would like to know more about the good practices that will be presented during the workshop. Indeed, the city is implementing multiple services and actions for older citizens and disabled citizens, as what is good for older and disabled citizens is undoubtedly useful for other citizens as well. The Mayor indicated that the environments is an important enabler to make citizens healthy, independent and active physically but also mentally. Therefore, his city is undertaking various actions to design the city into a healthy one. Three ingredients are necessary: inclusive society, health improvement and design the city for “all”, ex: restructuring neighborhoods, improving the quality of the pavements, increasing the notion of safety, walking groups for elderly citizens that decrease traffic jams and favours intergenerational activities.

The Mayor got also involved in the design of [kitchens](#) through the Rino Foundation. These kitchen are specially designed for disabled people, people with limited mobility and has been a best-selling product for 8 years now. The mayor also mention that the Friuli Venezia Giulia Region was also involved in other innovative projects that improved and refurbished products and houses to be adapted to the needs and demands of its citizens, such as the [RE-FREEDOM](#) and [LAK](#) projects.

Finally, Professor Honsell announced that he will organize a conference in May on how to maintain one’s cognitive skills with adapted trainings activities (ex: how to train and maintain one’s balance).

Gianfranco Napolitano, Coordinator of the Local Health Authority AAS n.2, presented the opportunities and the need to adapt the health care systems and the advantages of exchanging experience. Indeed, there will be savings on the public budget by investing now in the adaptation of the current systems. He also mentioned the current reforms that the region is undergoing and hopes it will achieve the planned objectives. More information about the reform is available [here](#) (in Italian only).

Finally, Mr. Felice Fanizza, from the Rino Snaidero Scientific Foundation presented two projects that were co-financed by Friuli Venezia Giulia Autonomous Region -

Central Directorate for Health, Social Health Integration and Social Policies: **LAK**⁴ and **RE-FREEDOM** (March 2011 – Sept 2013).

Both projects follow the same methodology: choice of a project, assessment of the state of the art and analysis of the potential. Afterwards, they focus on the activity to create new business models and new activities.

They integrate domotics in indoor environments to enable end-users to be more independent and remain in their homes. Approximately 30 end-users were involved in the process and helped decide what new technologies were or were not useful for their daily living. In regards with service providers, they were involved as from the validation phase of the project.

The projects intends to reply to the following questions: are domotics, internet and new technologies a solution to improve the quality of older citizens? Can they enable them to live longer and better? More information about the methodology and procedure is available for [RE-FREEDOM](#) and [LAK](#).

Consortium partner were invited to visit the lab-apartments established in the framework of the RE-FREEDOM project. They address two different impairments: mobility impairment for the first apartment and hearing and visual impairment for the second apartment. Both are equipped with ICT solutions, ergonomic furniture and other products selected and created during the research phase of the project. The first apartment is a brand new apartment that has been built from scratch; whereas the second on is an existing one that has been equipped with new technologies that help people with hearing and visual impairments. This method helped them evaluate the potential costs it might incur for people willing to adapt their homes with the displayed technologies⁵.

The second day of the workshop took place at the *Casa della Contadinanza* and Rodd Bond, the moderator, reminded the audience about the importance of mobilizing social innovation and change to have a significant impact on the quality of people's lives. Five speakers presented initiatives in favour of independent living, housing and domotics.

Essi Mäki-Hallila and Mari Lahtinen presented the **City of Tampere** (Finland) and their strategic project – “**TampereSenior – Ageing Society as a possibility**”. The municipality has given priority to its seniors and their wellbeing and enabled their citizens aged 75+ to keep on living independently in their homes by offering a range

⁴ LAK being an industrial research and development project promoted by Snaidero through a partnership network that joins universities, research facilities and companies. It seeks to create a new concept for a kitchen environment able to “communicate” outside the confines of the house, where home automation devices and innovative remote control systems can be installed.

⁵ It is important to signal that these lab-apartments have never been tested in real conditions, meaning that end-users have visited the places but have never spent for example one or two nights in the apartments. They are currently waiting for the approval of the municipality of Udine to implement the results of the project.

of home care services that enable senior citizens to live at home through preventive and rehabilitative facilities; by providing small financial support from the government to renovate their dwellings (ex: bathrooms, slope, handles); round-the clock services and care at home as required through the **Kotitori**⁶ and **Lähitori**⁷ model, a home care service integrator. The strategic goal being to increase the number of residents living at home or in a homely environment, thus creating an environment and services that prevent them from entering long-term institutional care facilities⁸. Various technological based solutions were also presented, which helped them encourage their senior citizens to remain independently at home and helped care takers to manage their time more efficiently, such as the SeniorLine, SmartVisio TV, Pieni Piiri tablet solution and electric locks. Further information is available [here](#).

The second speaker, Ms. Tanja Hodnik, Head of the social care department, explained how the **City of Ljubljana** gives special attention and care to its older citizens and has developed a strategy for the development of social care in the city for 2013-2020. The “Family Assistance at Home” service (FAH) has been implemented since 1992, which helps ensuring the quality of live at home for as long as possible, prevents loneliness and helps relieving the relatives. It was first provided by the Ljubljana social centres and retirement homes, but now is provided by a Home care institute. Indeed, the demand increased with the higher population of seniors, thus a better organization was needed. It is important to mention that the service is available for everyone that needs the service: children and adults with disabilities. By law, Slovenian local communities are obligated to provide a network of public services. The City of Ljubljana covers 80% of the total cost of the FAH services – instead of the 50% required by the law. The remaining 20% are taken over by the individual. Further information is available [here](#).

Massimiliano Bertetti, Project Manager at the Polo Tecnologico di Pordenone, explained how active the Friuli Venezia Giulia (FVG) Region is in the field of health care and mechanical engineering, which favours the development of ICT solutions for independent living and offers better life conditions for older citizens. The FVG Region is one of the smallest of Italy with +/- 25% of citizens aged 65+. Several pilot projects involving ICT, technology, benefits and improvement of older people, were carried out in the region: Presto a CASA⁹, LAK, REFREEDOM, Help-Key TV¹⁰, Easyhome¹¹, EasyMob¹².

⁶ Kotitori is a service integrator gathering services from both public and private sources to a one-stop shop for home care of older people in a multiple-provider model. The one-stop shop means both a physical location at the city hall for walking in, call center to answer calls and Internet portal.

⁷ Lähitori is a more local version of the Kotitori that offers for example the possibility to take one's blood pressure.

⁸ In 2014, 90.2 % of 75+ lived in their own homes. Their 2017 target, would be to increase the amount of 75+ living in their own homes to 92%.

⁹ Apartments with a tele monitoring system dedicated to young adults with physical impairments.

¹⁰ The project encourages communication of the elderly and the disabled, through the use of a more understandable and simplified television set.

¹¹ The house is equipped with lights informing the occupant about an obstacle (e.g. furniture).

Thanks to the data collected by the pilot projects, a dialogue between public and private actors was made available to work together and continue developing solutions to improve the lives of those with impairments. The next step would be to find a secure and safe infrastructure that allows a sustainable way to scale up the pilots implemented in the region.

Further information is available [here](#) (in Italian).

As stated by the Mayor of Udine, the Region of Friuli-Venezia-Giulia has been involved in many age-friendly projects. Luca Bianchi, from the University of Trieste, presented the *Housing and Home-care for the Elderly and vulnerable people and Local Partnership Strategies in Central European cities*, pilot action implemented in the City of Trieste in the framework of the HELPS project. The general goal was to produce answers to the problem of the ageing population, which has several *focused* actions, including that of experimenting innovative housing solutions. The subject experimentation has highlighted the fact that the innovation of housing policies means, above all, launching integration processes between actors, policies, resources and health and social services professions. This is a challenge that does not only concern the social and economic dimension of our communities, but it refers to a cultural maturity that often seems still to be a distant prospect. Further information is available [here](#) (in Italian).

Finally, Gian Matteo Appuzo, project manager at the Local Health Authority n. 1, Friuli Venezia Giulia Region, presented the HELPS project that started in October 2011 until December 2014. It aimed at tackling socio-demographic challenges such as ageing, disability and social exclusion. The objective was to contribute to the development of residential and care models strengthening independent living of elderly and persons with disabilities in Central European cities. Over the years, HELPS fully explored the potential of a multi-sectorial and integrated approach to care services: health, social innovation and housing issues were faced by combining research studies with on-field activity. 8 pilot projects were carried out in Weppersdorf (AT), Brno (CZ), Leipzig (DE), Debrecen/Budapest (HU), Trieste (IT), Poznan (PL), Ljubljana (SI) and Slovakia. By the end of the project, a report was drafted with the [findings](#) of the pilots and [recommendations](#). For Further information is available [here](#).

The moderator ended the workshop by reminding us that there is still some way to go before we live in an age-friendly Europe, where seniors are empowered to live as long as possible in their homes and independently. Much work remains to be done, such as in the field of scaling-up good practices, legislation allowing these application to be sustainable, integration – e.g. integration of older people in society, integration of different technologies, integration of solutions across different providers – raising awareness. Domotics and technology are helpful solutions among many others that

¹² The project is aimed at people with orientation difficulties in closed complex, through the integration of different technologies (IR, QR codes, smartphones, light guides).

support independent living but the different stakeholders will have to work together to integrate them properly and make these new solutions work harmoniously.

Workshop 4

Promotion of Healthy Ageing: Built Environment and Technology Age-friendly Environment Strategies

10-11 June 2015

Groningen, the Netherlands

Background document

According to the Discussion paper of the Services of DG SANCO, DG ECFIN and DG EMPL "[Healthy ageing: keystone for a sustainable Europe – EU health policy in the context of demographic change](#)" published in January 2007, "A healthy population is the keystone for economic growth and prosperity in Europe for at least two clear reasons; it will limit strain on health and social care systems and it will allow people to remain active in society longer".

In the framework of the AFE-INNOVNET network, workshops are organized to present age-friendly environment strategies and local good practices that make a change in the establishment of a Europe that will be fair to all generations. The workshop organized in Groningen will be the opportunity to discuss how local and regional authorities promote healthy ageing through the [built environment](#)¹³ and the technology and what is currently being done in Europe to continue improving their work. From the local governments' point of view, improving the built environments has substantial [benefits](#), such as reducing the cost associated with health and aged care, increase independence and encourage social interaction. Speakers during the workshop will present how the built environment and technology is influencing the way the population is ageing and how standards of a healthy surrounding of the previous decades might not apply anymore.

Participants of this workshop should reflect on the following questions during the discussions:

- In order to adopt a transversal and integrated approach, does your municipality/region work with other city council thematic departments to

¹³ In social science, the term **built environment** refers to the human-made surroundings that provide the setting for human activity, ranging in scale from buildings and parks or green space to neighborhoods and cities that can often include their supporting infrastructure, such as water supply or energy networks. The built environment is a material, spatial and cultural product of human labour that combines physical elements and energy in forms for living, working and playing. It has been defined as "the human-made space in which people live, work, and recreate on a day-to-day basis." The "built environment encompasses places and spaces created or modified by people including buildings, parks, and transportation systems." In recent years, public health research has expanded the definition of "built environment" to include healthy food access, community gardens, "walkability" and "bikability."

guarantee concrete results and if so, how? (e.g. social, urban planning, transport, environment)

- What synergies could be envisaged between the presented cases and your municipality/region?
- What conditions would help your municipality/region implement effective age-friendly initiatives related to the built environment? What kind of additional support would you need from the EU, national, regional levels? E.g. more exchange of good practices, more research, more joint projects, more peer reviews, less regulations in certain fields, etc.
- Has your municipality/region already implemented actions promoting healthy ageing through the built environment and technology? Are there any positive results? If yes, which ones? Are there any negative results? If so, what have you learnt from these?

Healthy Urban Patterns by Cor Wagenaar, professor Health and Space - University of Groningen

Until only a decade ago, suburban settlement patterns were seen as healthy and convenient; moreover, they represented the lifestyle allegedly best suited for the modern welfare state in Europe as well as America. Among their advantages, critics praised the vicinity to greenery, which indeed is ubiquitous in most suburban settlements; when they were first introduced in Europe, they were also promoted as enhancing health. Now suburbia is no longer anybody's dream. Echoing the criticism of medical doctors in the 1950s, the advocates of healthy ageing and healthy lifestyles began to question the healthy qualities of suburbia. Remarkably, Manhattan was discovered as a prime example of a healthy city: few places can boast a higher density of all kinds of amenities that provide incentives to go out and walk or bike there; social hubs (bars, restaurants, community centers) can be found everywhere. There is little use owning a car, the inhabitants walk a lot (and a lot faster than the average American). Even for older people, Manhattan provides an almost ideal living environment. So, which type of settlement pattern is to be preferred? How do they affect public health?

Implementation of AFE: assessing the impacts by Willeke van Stalduin – TNO, Innovation for Life. Implementing age-friendly environments needs the involvement of a lot of stakeholders: citizens, authorities, housing companies, IT companies, shops and health care institutions. Usually local and regional authorities play a major role in this process: they organize and facilitate the process of implementation. To fulfil this role adequately, LRAs need to be equipped with instruments that inform them properly about the expected impacts of age-friendly environments. They also want to actively involve stakeholders, to have them on board when implementation measures are being taken. In the AFE-INNOVNET project we developed the Socio Economic Environmental Impact Assessment Tool (SEE-IT) that includes a participatory approach and enables LRAs to assess measures on age friendly environments on their social, economic and environmental

impacts. During the presentation the working of the 5 stages of SEE-IT will be explained using a practical example.

Practical application: serious gaming demonstrations from incubator Indietopia

According to Google, Applied Gaming now, is what the internet was in 1995. Applied gaming (sometimes called Serious Gaming) has only just begun and is here to stay! At this moment, there is a great demand for applied games coming from the medical sector that can help people around the world recover faster from an injury, train medical personnel or teach people how to have a healthier lifestyle.

Design for Active Ageing by Simone Caljouw - University Medical Center, Movement and Health

Physical activity seems to be beneficial to health and may prolong the period ageing adults live in relatively good health. In contrast, insufficient physical activity and time spend in sedentary activities increase the risks of developing chronic diseases which may lead to death. Most activities of daily living involve movement and require adequate motor control. A physically active lifestyle may have health benefits and prolong independent living. Our living environment may limit or enable movement activities. For example, an office chair affords “sitting on” but a high workstation not. By manipulating a design one can make certain actions more likely to occur. Noteworthy, people often unreflectively respond to the environment’s solicitations. Architectural forms and object designs may invite certain movement activities or may even urge a person to do something. Threats, challenges and possibilities for active and healthy ageing will be addresses, as well features within the environment that may impact the character of movement activities and may act as facilitators or obstacles.

SPRINT@ Work by Hans Wortmann - professor in Information Management at the Faculty of Economics and Business within the University of Groningen (RuG)

Demographic ageing means that the average age of the working population is increasing. This has significant consequences for the labour process. Growing older is linked to physical and mental changes which can influence the performance of tasks. SPRINT@Work develops and tests products – in collaboration with the business world and other knowledge institutions on continued employability of the ageing working population – designed to measure and react to these changes. These solutions are developed to make sure that employees in the North of the Netherlands can remain healthy and keep on working longer. The project is funded by the SNN (Northern Netherlands Assembly), the municipality of Groningen and the provinces of Groningen and Drenthe. It will be running until September 2017.

Promoting healthy lifestyles in underactive older adults living in deprived neighborhoods by Annemiek Bielderma - Hanze University of Applied Sciences, Delfgoud project

Older inhabitants of socio-economically deprived neighbourhoods are at higher risk to experience a lower quality of life and to develop frailty. Furthermore, physical inactivity prevalence is highest in older age groups, and residents of deprived neighbourhoods. Therefore, especially older inhabitants of deprived neighbourhoods who are physically underactive should be targeted for intervention programmes to enhance active ageing and quality of life. In the project, a strategy is developed to enhance active ageing in underactive community-dwelling older adults living in a deprived neighbourhood: the Groningen Active Ageing Strategy (GAAS). This strategy contains a community-based approach consisting of several building blocks such as tailoring of the project, recruitment of physically underactive older adults, bonding and empowerment of the participants, and encourage social participation and maintenance of behavioural change. They employed the GAAS approach in a lifestyle project in a deprived neighbourhood in the north of the Netherlands: the Delfgoud project. The intervention programme focused on physical, social, and psychological functioning, and consisted of weekly group exercise sessions combined with lifestyle modules about coping with feelings of depression and loneliness, and physical activity in daily living. In this presentation, the background of the Groningen Active Ageing Strategy will be explained. In addition, effects of participation in the Delfgoud project on physical, social, and psychological functioning will be presented.

Network for Market Uptake of technologies for Ageing Well – Case Study by Miguel Sousa – COO of Inova+ and coordinator of the AgeingWell Network

The presentation will showcase how a European network, aiming at putting together developers and end-users through the market uptake of innovative solutions for health and ageing well, has contributed to help an SME successfully deploy an e-health solution through a public procurement process.

Discussion: How to involve the industry

Time will be dedicated to discuss with the participants on how to better involve the industries in the process of age-friendliness of Europe. It will be the opportunity to get your feedback and see with your own experience if in your country, the industry is present or not and how you have managed to open the dialogue with them and involve them in your activities. Your feedback will help TNO prepare the future matchmaking events in the framework of the AFE-INNOVNET project.

Report

The fourth AFE-INNOVNET workshop was placed under the moderation of Mrs. **Nicoline Tamsma**, President of Eurohealthnet since 2014. Various presentations were made and speakers presented how the built environment and technology is influencing the way the population is ageing and how standards of a healthy surrounding of the previous decades might not apply anymore. It was thus an opportunity to discuss how local and regional authorities promote healthy ageing through the [built environment](#)¹⁴ and technology and what is currently being done in Europe to continue improving their work. From the local governments' point of view, improving the built environments has substantial [benefits](#), such as reducing the cost associated with health and aged care, increase independence and encourage social interaction.

The 23 Participants ([see list](#)) of the workshop were welcomed by the Mayor of Groningen, Mr. **Peter van Oudsten**, who praised the worked carried out by Groningen, its universities, its students and citizens in the field of the built environment and healthy ageing. The Mayor informed the audience that the HANN network organises a Congress on 1-3 June 2016 on [Building the Future of Health](#).

Cor Wagenaar, Professor Health and Space at the University of Groningen, presented the concept of healthy urban patterns and the notion of suburbia through the comparison of two cities: Manhattan and Almere. In that case, Manhattant is clearly a healthier city than Almere based on features such as mobility, social hubs, access to healthy food, to greenery, safety or the density. According to Professor Wagenaar, architecture and urbanism have a role to play in the healthiness of a city and have an impact on public health. However, Cor Wagenaar raised the issue of incompatibility between public health, architecture and urban planning, making it hard to work together and thus creating an effective healthy city. One of the solutions put forward is to include public health thinking in the curriculum of architecture schools for example. More information is available [here](#).

Willeke van Staalduinen (TNO) presented the SEE-IT tool (Social, Economic and Environmental Impact Tool) developed in the framework of the AFE-INNOVNET project. It enables local and regional authorities to measure the impact of age-friendly

¹⁴ In social science, the term **built environment** refers to the human-made surroundings that provide the setting for human activity, ranging in scale from buildings and parks or green space to neighborhoods and cities that can often include their supporting infrastructure, such as water supply or energy networks. The built environment is a material, spatial and cultural product of human labour that combines physical elements and energy in forms for living, working and playing. It has been defined as "the human-made space in which people live, work, and recreate on a day-to-day basis." The "built environment encompasses places and spaces created or modified by people including buildings, parks, and transportation systems." In recent years, public health research has expanded the definition of "built environment" to include healthy food access, community gardens, "walkability" and "bikability."

environments on the communities from the employment, housing or transport point of view. The tool follows a 5-step methodology that supports the municipality to set up an action plan and determine what concrete impact AFE initiatives have. Moreover, it will also help establish a participative approach between the citizens and the decision-makers. More information is available [here](#)¹⁵.

Two startups were present to show their work on **applied gaming** – in other words, make the learning experience more active through games: teach people how to have a healthier lifestyle, recover faster from an injury or learn an environmental strategy. Rinneke Schaap from [Studio Bleep](#) presented projects such as [StoryWall](#) and [Game pond](#) designed for children. Both start-ups highlighted the importance of end-users' involvement in the creation process. However, according to Milan Vogelaar from [Stark Learning](#), to overcome the financial aspect of a new concept, serious gaming can only be targeting the broader public, rather than a very specific audience, such as people suffering from dementia¹⁶.

According to **Simone Caljouw**, a Human movement scientist from the University Medical Centre, Movement and Health, physical activity seems to be beneficial to health and may prolong the period where ageing adults live in relatively good health. In contrast, insufficient physical activity and time spend in sedentary activities increase the risks of developing chronic diseases which may lead to death. Most activities of daily living involve movement and require adequate motor control. A physically active lifestyle may have health benefits and prolong independent living. Our living environment may limit or enable movement activities. Therefore, the built environment has a major influence. Architectural forms and object designs may invite certain movement activities or may even urge a person to do something: urban planning should be more sensible about the topic and favouring more space for bicycles, traffic lights adapted to bikes; buildings could adopt [designs](#) that invite to use the stairs instead of the elevators, work places could also invest in [innovative designs](#) that invite workers to movement instead of a static sitting position.

Hans Wortmann and **John van Meurs** from the Faculty Economics & Business - University of Groningen explained the barriers of innovations in healthy ageing products for the built environment. According to Hans Wortmann, these products have difficulty reaching the market, because they are too expensive, are targeted to a very specific market, end-users do not see the long-term benefit of such an investment and because current solutions are fragmented, responding to an individual problem with no integral view on the end-users' needs. The project Sprint@Work developed and tested products linked to the business world and other knowledge institutions on continued employability of the ageing working force analyzing e.g. the built environment (temperature, furniture), health of the employees.

¹⁵ Further reading related to the work carried out by Frank Vanclay on the Social Impact Assessment.

¹⁶ Marieke Zwaving from the city of Groningen mentioned the [skating game](#) project aimed at improving older peoples' balance.

Actions are then taken to improve and ensure healthy and active employees. More information is available [here](#).

Annemiek Beilderman from the Hanze University of Applied Sciences presented the [Delfgoud project](#) implemented in the Delfzijl Noord. The project promotes healthy lifestyles in underactive older adults living in deprived neighbourhoods. The intervention programme focused on physical, social, and psychological functioning, and consisted of weekly group exercise sessions combined with lifestyle modules about coping with feelings of depression and loneliness, and physical activity in daily living. Annemiek Beilderman mentioned that the organised activities were tailored and adapted together with the local communities, and favoured the feeling of ownership of the programme. More information is available [here](#).

Finally, **Miguel Sousa** presented the [Ageingwell network](#) which focusses on the market uptake of technologies with the help of 90 organisations. The network facilitates the networking, the exchange of innovative solutions, and innovative procurement among its members. Its aim being to link the investors, the startups and the research community together to favour the uptake of ICT solutions for active and healthy ageing. Further information is available [here](#).

The workshop was also the occasion to discuss the collaboration between the local and regional authorities and the industrial sector, trying to pinpoint the main issues that could hinder such a partnership. Public procurement, the question of open source and the investment were according to the participants the main issues. However, it looks like the collaboration works well, such as in Louth County, where an [age-friendly business strategy](#) has been implemented for years now.

All presentations have demonstrated that many factors need to be taken into account when it comes to ageing in a healthy and active state. The one debated at this occasion was the built environment, whether it be the public space, the working environment or the private sphere, adaptations are needed to ensure that the population could age independently with the support of all stakeholders in adequate conditions. It is maybe time to restructure our current way of working and break the silos for the common good.

Workshop 5

Digital Social Inclusion – How Technology helps seniors remain socially active - Age-friendly Environment Strategies

8-9 October 2015

Warsaw, Poland

Background document

According to the Discussion paper¹⁷ of the Services of DG SANCO, DG ECFIN and DG EMPL, a healthy population is the keystone for economic growth and prosperity in Europe for at least two clear reasons; it will limit strain on health and social care systems and it will allow people to remain active in society longer”. One way to allow the population to age healthily is to encourage social inclusion by increasing accessibility to various public services, providing information and education for example. How do local and regional authorities allow senior citizens to remain socially active? What are the means used to allow this? For the last AFE-INNOVNET workshop, through local initiatives, participants will be invited to discuss how technology can help seniors to remain socially active in their community.

Social inclusion

Social inclusion is a process which ensures that those at risk of poverty and social exclusion gain the opportunities and resources necessary to participate fully in economic, social and cultural life and to enjoy a standard of living and well-being that is considered normal in the society in which they live. It ensures that they have greater participation in decision making which affects their lives and access to their fundamental rights¹⁸

Participants of this workshop should reflect on the following questions during the discussions:

- Does your municipality/region carried out some statistics to determine who are potentially threatened by social exclusion? If yes, what were the following steps to address the issue?
- What are the available channels at your level to allow individuals to express their opinion?
- Is there a system that allow decision-makers to monitor the impact of social inclusion policies?

¹⁷ [“Healthy ageing: keystone for a sustainable Europe – EU health policy in the context of demographic change”](#), January 2007

¹⁸ As defined in the Charter of the Fundamental Rights of the European Union - [Joint report by the Commission and the Council on social inclusion 2004](#)

- Could any of the presented cases be partly replicated to your local/regional context?
- What conditions would help your municipality/region implement effective social inclusion policies? What kind of additional support would you need from the EU, national, regional levels? E.g. more exchange of good practices, more research, more joint projects, more peer reviews, less regulations in certain fields, etc.

Presentations: summary

1. As a way to give a digital training to the citizens of Warsaw, the **digital education model** for the City of Warsaw will be presented by Tomasz Pactwa - Director of the Welfare and Social Projects Department, City of Warsaw. Tomasz Pactwa will give a broad overview of the model, addressing the basics, the main rules, the different models of digital education and the stakeholders and policymakers involved in the abovementioned model.
2. The Polish-Japanese Academy of Information Technology established in 1994 is one of the best non-public schools (2nd place in the 2013 ranking) in Poland that offers education in IT, New Media Art and related domains. Dr. Katarzyna Abramczuk, assistant professor at the Institute of Sociology of the University of Warsaw and Wieslaw Kopec PhD student in social informatics at the Polish-Japanese Academy of Information Technology will present the **LivingLab Project** and the eSenior platform that allow e-learning modules for seniors.
3. The municipality of Fredericia (Denmark) is shifting **towards a paperless system**. What was the thinking behind it and how did they manage to train citizens of all ages to send and receive emails from the public authorities? Mrs. Mai-Brit Berg, project manager at the communication department, will explain how this shift was made possible.
4. In 2007, the city of Ljubljana was the first municipality in Slovenia to start providing free **computer literacy lessons** for the seniors. These lessons are provided by the Office for Local Self-Government in cooperation with municipal districts. In 8 years, the number of attendees has risen to 12.000, showing the high interest of citizens.
5. What happens with public services when branch offices need to be closed down due to resource shortages (shortage of labour, no funds for rent and utilities) or due to inefficiency (too few customers)? To address the situation, the Saxony State Ministry developed a **Mobile Residents' Briefcase** that maintain the quality and quantity of services in rural areas. They can therefore continue to respond to citizens' needs and act efficiently. Observations during the pilot phase will be used for the replication in other municipal administration.

Report

A healthy population is the keystone for economic growth and prosperity in Europe for at least two clear reasons; it will limit strain on health and social care systems and it will allow people to remain active in society longer". One way to allow the population to age healthily is to encourage social inclusion by increasing accessibility to various public services, providing information and education for example. How do seniors find their way in this fast-paced society, where technology continuously occupies an important place? What is implemented at the local and regional level to allow seniors to remain socially active? And finally are they involved in the thinking and creation process?

At the last AFE-INNOVNET workshop, several European initiatives were presented to the 38 participants ([see list](#)), where technology was involved and used as a mean to better integrate senior citizens and allow them to still accomplish meaningful activities to them. With different approaches and capacities, they managed to integrate the technological world into senior citizens' lives and assure their social participation and contribution. Work still needs to be done to achieve a full digital social participation of the seniors (and other generations) and information campaigns to explain the benefits older people could get from these digital devices; however, the initiatives showed they were learning from their current experience and were improving their strategy to reach as many seniors to the digital world.

The workshop was also the occasion to meet local SMEs, linking LRAs and industries. Participants working for a public authority exposed a daily issue where technology could be a solution and SMEs were then invited to propose potential ideas to solve the complex situation they are facing. The exercise allowed actors from both side to grasp the difficulty each one of them is confronted with and hopefully a future collaboration will be possible. The workshop was co-organised by the City of Warsaw and the Council of European Municipalities and Regions and was moderated by Menno Hinkema, senior researcher at TNO.

For this occasion, Marcin Wojdat, the Secretary of the City of Warsaw and the Vice-President of the Polish Japanese Academy of Information Technology (PJAIT), Adam Wierzbicki, welcomed the AFE-INNOVNET participants to the last workshop. Both actors are working closely together to make sure that senior citizens in Warsaw can and know how to use technology at its best to remain socially active. They reminded the asset the seniors represent for the society and to make good use of their experience. Adam Wierzbicki stated that "older people are the future of the media" and will dominate social media in the future. Therefore, it is interesting to include them in the co-creation of innovative ICT solutions and be able to meet their needs and expectations.

Presentations: summary

1. Tomasz Pactwa, Director of the Welfare and Social Projects Department, City of Warsaw, presented the **digital education model** provided to the citizens of Warsaw. They started from scratch in 2011 when they realized that only 6% of the seniors used internet. A guide explaining the different learning modules was produced, from basic computer skills to advanced skills. Since 2011, several places opened to be able to provide these courses; sometimes given by professional IT volunteers but also seniors that were trained to become instructors themselves. This allowed to maintain the senior computer courses at a very high level. They are proud to count more than a thousand participants to the courses and are managing to successfully educate the population to the use of the internet (Photoshop, e-banking, e-shopping...). The city may also help students and citizens who can't afford a computer. The good collaboration between the city, volunteers, universities and NGOs was put forward to explain the success of the initiative and also the sustainability of the programme.
Further information is available [here](#).
2. The Polish-Japanese Academy of Information Technology established in 1994 is a non-public school in Poland that offers education in IT, New Media Art and related domains. Dr. Katarzyna Abramczuk, assistant professor at the Institute of Sociology of the University of Warsaw and Wieslaw Kopec PhD student in social informatics at the Polish-Japanese Academy of Information Technology presented the **LivingLab Project** funded by the [Norway Grants](#). The project is aimed at the 60+ (representing a fifth of Warsaw's population) who want to self-improve, look for fruitful ways to spend their free time and are willing to help collect knowledge about their needs, with a special focus on their interaction with modern technology. One of the objectives was to create a location based game together with the students and the seniors, which was the subject of the field visit organised for the workshop. The game combined historical and architectural features on a tablet and the pair, composed of a senior and a student, have to solve the riddles and different challenges thanks to their respective knowledge. This intergenerational activity allowed seniors to improve their IT skills and the youngster learned more about their city but also understood what needed to be taken into account when creating an application or programme for seniors. Further information is available [here](#).
Further information about the [location based game](#).
3. The municipality of Fredericia (Denmark) shifted **towards a paperless system** in November 2014 when the law came into effect. Every citizen aged 15+ were provided with a digital mailbox and would receive mails from public authorities (e.g. pension statement, letters from the hospital, message from

daycare, vehicle inspection) on that specific digital mailbox from November 2014. Mai-Brit Berg, project manager at the communication department at the Municipality of Fredericia, explained that one of the challenges was to reach all the citizens, older ones included, but figures have shown that 93% of the population have internet at home and 63% of those aged between 65-89 use internet at least once a week. The national level worked together with councils of elders and other organizations to develop guidelines and instructions that were communicated through different channels (tv, newspapers, radio). At the local level, Fredericia organised visits to schools, nursing homes, collaborated with voluntary organisations, and published information in local radio and newspapers to make the citizens aware of the digital mailbox. When compared with the national figures, the use of the digital mailbox by seniors (55 – 94 years old) in Fredericia is either the same or higher than the national rate. In case of problem, a hotline or the local library are there to help citizens who have trouble using their digital mailbox. It is important to say that some citizens do not have a digital mailbox for various reasons: no access to a computer, suffers from a disability or bad communication due to a language barrier. Since the implementation of the law, older people are more confident in using the internet and feel more included in society. Further information is available [here](#).

4. The city of Ljubljana is the winner of several awards (European Green Capital 2016, Tourism for Tomorrow 2015 Award) and became a member of the WHO Global Age-Friendly Cities network in 2011. In 2007, the city of Ljubljana was the first municipality in Slovenia to start providing **free computer literacy lessons** for the seniors, along with other classes, such as language classes. Simona Topolinjak, Senior adviser at the city of Ljubljana, explained that the average age is 68 years old and there is a clear majority of women attending these lessons. These lessons are provided by the Office for Local Self-Government in cooperation with 17 municipal districts. The main objective of these free computer classes is to empower older people to start using new information and communication technologies – being able to communicate with relatives that are living in other cities for example. The classes are divided in three different levels (basic, intermediate and advanced). In order to adapt and improve the classes, the participants are invited to fill in a survey about their general satisfaction of the computer classes. The city fully takes into account the needs and expectations of the seniors. This year, the city counts 12,000 attendees, translating the increasing demand of seniors to be more tech-savvy. Further information is available [here](#).
5. What happens with public services when branch offices need to be closed down due to resource shortages (shortage of labour, no funds for rent and utilities) or due to inefficiency (too few customers)? To address the situation, Wolfgang Kowalewski from the Saxony State Ministry presented a tool

developed to maintain the quality and quantity of services in rural areas where population decreases: the **Mobile Residents' Briefcase** and the **Resident's Terminal**. Thanks to these devices, civil servants can therefore continue to respond to citizens' needs and act efficiently. The briefcases can be brought along for home visits and enables the civil servant to perform regular administrative procedures. Terminals provide virtually the same services but are installed in strategic points (hospitals or nursery homes). So far, the Free State of Saxony counts 8 mobile residents' briefcases and 3 terminals in rural areas, with a preference for the briefcase solutions according to the surveys. Further information is available [here](#).