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AUSTRIAN RED CROSS

Addressing and preventing care needs through innovative community care centres (I-CCC)

2nd Partner Meeting
13-14 September 2021, Vienna

MINUTES



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Aims of the meeting:

- To share results and experiences from WP1
- To plan and discuss WP 2 and WP3 in detail
- To present the overall evaluation concept and first results
- To address organisational, financial and administrative questions
- To plan next steps in detail

Welcome, introduction and overview of agenda

After the welcome address by Katarina Banicevic, head of the East and Southeast Europe Team at the Operations and International Cooperation Division at the Austrian Red Cross, a short introduction round was made. Participants were asked to elaborate on their role in the project, bring forward any expectations they have for the partner meeting and share a funny or great moment from their summer holidays. Statements on expectations included to obtain a clearer picture on the evaluation component of the project, to gain insights into results of other project partners, to identify connections with other projects and to continue the good cooperation. Before the meeting went into session some **staff changes** were announced:



- **Jelena Sofranac**, I-CCC project coordinator at the Red Cross of Montenegro left the project due to another professional engagement and was replaced by Ivana Smolovic. The partners welcomed Ivana to the team and are looking forward to a fruitful cooperation.
- **Anna Scheithauer**, project assistant, will also leave the I-CCC project for a new role in the ACCOP project so that Franziska Watzka, I-CCC project coordinator at the Health and Social Services Division of the AutRC, will additionally take on the role of the I-CCC project assistant at the OIC Division of the AutRC with October 2021.

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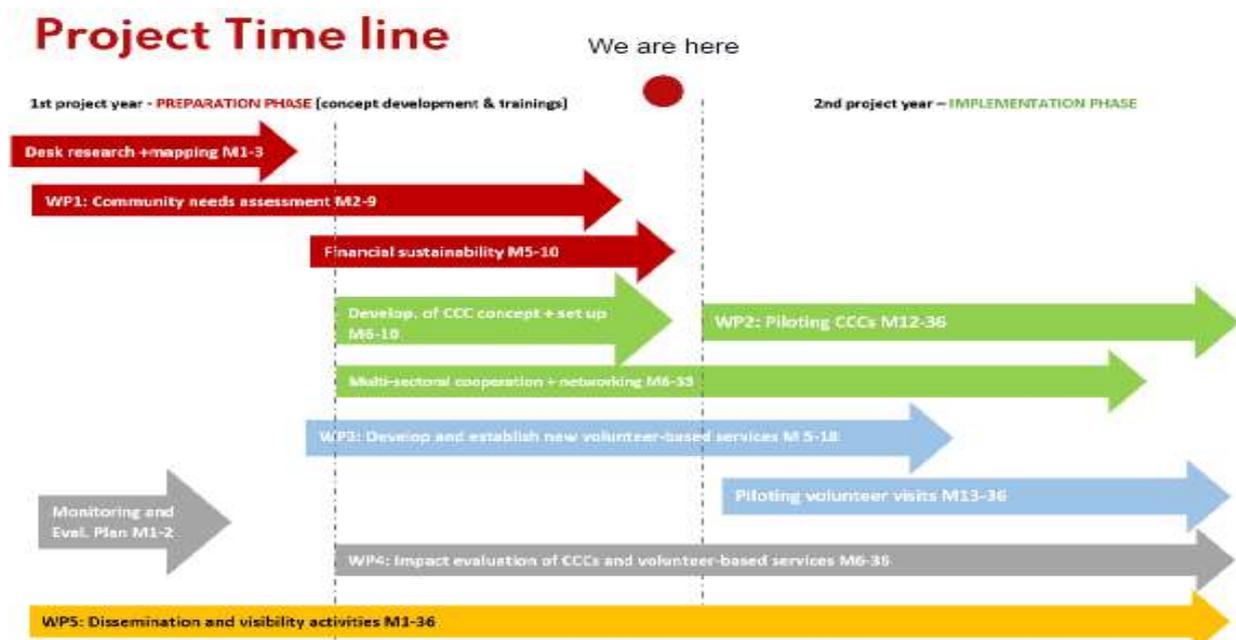
- **Cornelia Zwicker**, I-CCC project manager, will discontinue her engagement for the project in December as well due to her pregnancy so that the OIC division will recruit a substitute.

Where do we stand?

Cornelia Zwicker, then gave an overview of the status quo of the project.

- The needs assessment including the desk research, focus group discussions and interviews was successfully carried out in six communities and the financial sustainability options were assessed as well.
- With regards to the piloting of the Community Care Centers (CCCs) the first concepts were drafted so that the first activities can be implemented in fall already.
- Concerning the evaluation of the project, the monitoring tool was developed in close cooperation with the project partners and adapted to the local context. The survey for the process evaluation was also developed as were interview questions for partners to be answered during coffee breaks at the I-CCC partner meeting.
- Regarding dissemination and other PR activities, an international dissemination plan was established as was a project website. Currently, the project partners are working on their national dissemination plans and first PR activities with view to the official opening of the CCCs.
- Altogether, project activities have been on schedule and some substantial progress can be noted. Next steps will be to open and pilot the CCC and develop services for people with dementia.

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Presentation_ICCC_Overview_IJ.pdf



WP1 Community needs assessment and financial sustainability

Austria

After the coffee break participants presented the results of the needs assessment. The **Gesundheit Österreich GmbH (GÖG)** who conducted the research in Austria found that **loneliness** is a major problem in Vienna and that **pick-up and drop-off services** were identified as one of the main needs by people in need of care.

In Styria on the other hand, results showed that **a lot of services exist already that older people in care often don't have information to**. So, a **single point of contact** should be made available to obtain all the relevant information about these services and services should also be available on a short-term basis. It was also mentioned that there is especially a need for **adult social work** (e.g. legal support in terms of care questions)

With regards to the needs assessment with family care givers in Vienna it became clear that questions and challenges change with duration of the care situation. The **need for professional guidance and support, the option of home visits, to have one person as continuous support and support at off-peak times** were mentioned as the most important issues to be addressed.

In Styria family caregivers identified **flexible opening hours and availability by phone, the possibility of home visits, networking with general practitioners, breaks from every day (caring) life, and someone to talk to** as the most pressing needs.

Two stakeholder meetings were also conducted to assess financial sustainability options for the CCCs. The option of **service cheques** for people living in the community, where 2-3 communities join together, could be one finance idea as is the idea to establish the CCCs in the care system (funding through the federal state vs funding through the regional states)

Montenegro

The needs assessment was carried out in the two communities Bar & Bjelo Polje.

The most pressing need would be to have doctors available within 4km since currently it takes older people a very long time to even get to a doctor. **Self-help groups, peer-to-peer counselling and phone services** were also identified as major needs.

A main challenge that was identified via the community assessment was the **lack of knowledge of people about where they could obtain help and different services** as was the general lack of ideas what they might need. Poverty seems to be the overarching challenge that pervades their lives next to the cultural perception that once you are retired you take care of your grandchildren rather than of yourself. Long-term care services (LTCs) are also fragmented between the different ministries in social protection and health care, which makes the prevention side a challenging issue considering that it is solely one of social protection and not of health care in Montenegro.

Serbia

The needs assessment was conducted in Pirot and Sombor. Interviews and focus groups were conducted. It was reported that a **lack of information on available services exists** and that **informal carers are not recognized as group** as such – there is **no legal framework or supportive conditions for informal carers in place** (e.g. possibility to take time off to care for someone). Informal carers are also not organized and there is no group of informal carers established as such.

Following points were discussed additionally:

- Offers for older people and informal carers should make sense, e.g. healthy ageing activities to stay longer independent – it should not be meaningless activities just to pass time



- Self-help groups: people are generally interested but it is often difficult for informal carers to take time to attend these meetings. On-line meetings, telephone circles or peer to peer approaches can be interesting alternatives to “classical” self-help groups.



WP 2 Community Care Centers



After lunch the project partners presented the CCC concept papers to give each other an idea of what the different activities offered and structure of the CCCs will be. **In Serbia** the CCCs will be implemented in Pirot and Sombor and run by the Red Cross of Serbia branches in these municipalities starting their activities in September respectively November 2021. The I-CCC staff will be composed of a project manager/secretary of the local RC branch, a CCC coordinator and volunteer coordinator, a home visit coordinator and three home helpers as well as approx. 30 volunteers. A

Beneficiaries’ Councils will serve to direct the activities in more detail. With regards to the healthy ageing activities in the CCCs, there will be an array of activities to choose from: advice, healthy food, knowledge sharing, support for outdoor and indoor exercise, health-related lectures and workshops, structured activity such as knitting and other forms of handiwork, psychosocial support and activities for prevention of loneliness. Concerning the development of the COVID-19 situation, a COVID-19 contingency will involve remote services (including telephone circles) and the RC branches will work with informal caregivers to ensure epidemiologically safe behavior. The CCCs will be promoted among other activities via the Red Cross of Serbia website, social media platforms, press releases and through the HumanaS network as well as through cooperation with other organizations.

In Montenegro the CCC staff will consist of one social worker, one nurse, two geronto housewives and volunteers, who will work in two shifts (from 8-14h and from 16-18h). Healthy ageing activities will relate to healthy diets, physical activities, disease prevention and prevention of social isolation. The CCCs will be promoted through a press conference on October 1st, an opening ceremony, the use of social networks and social media, guest appearances on radio and television, newspaper articles and cooperation with CSOs and other institutions.

In Austria, the CCC activities will start in Vienna and Hartberg in November 2021 with the centers being open at off-peak times and being easily accessible featuring four main activities: 1. counselling of older people and their relatives in health, social, or financial matters in relation to the need for care consisting of general and financial information, help for self-help, psychological support and training and counselling at home, 2. support and trainings for family carers, where 20-25 group trainings per region will be offered to approx. 200 caring relatives on topics such as care techniques, back-friendly care, body hygiene, fall prevention and dealing with dementia among others, 3. activities for health promotion and healthy ageing including loneliness & emotional support for family caregivers, gymnastics for the target group +80, workshops and exercise classes on fall prevention, 4. Setting up self-help groups to provide beneficiaries with space to discuss, ask questions, get helpful information and share experiences in a pleasant atmosphere, while obtaining inputs from speakers about different care-related topics. In Hartberg, preventive home visits will additionally be conducted.



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CCC_template.pdf



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Study Visit 13.09.21.p

WP 3 Services for people with dementia and cognitive impairments

Refreshed from the coffee break the project partners shared their concepts for the visiting services and discussed the dementia tool and the training for volunteers.

In Austria, 45 volunteers and one volunteer coordinator are selected and trained in each region over a period of two years, who will visit 30 people with dementia and cognitive impairments per region mainly in their own homes. The visits will be conducted once a week over a period of 12 months and for the purpose of carrying out the tablet-based trainings together. With regard to the training process, volunteers will need to undergo a first aid course, the introduction workshop "We are the Red Cross" and some sort of assessment in the beginning. They will also undergo the basic training for HSS volunteers and a training for volunteers in the "Accompaniment of People with Dementia. The volunteer coordinator will recruit volunteers, provide ongoing support to them and will visit the clients at home and decide which volunteer and which client are a good match. The coordinator will also organize regular meetings with all volunteers to discuss cases and organizational issues.

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In Serbia, volunteers will be selected from the already active volunteers working in home care and day care centers for older people. The selection shall feature a good mix of younger and older volunteers as older volunteers will help build trust since they are known to the community already. The training will be carried out by the Red Cross of Serbia and will focus on topics such as first aid for older persons, monitoring the health of the person we care for, urgent states in older persons, protection from abuse, burnout syndrome, the most common tasks of caregivers, the use of technology in performing some activities of informal caregivers, communication skills and situations when communication is difficult (e.g. communication with a person with dementia). While some of the volunteers have already passed a ToT training on human rights of older persons and violence against older persons, two one day training workshops will still be organized for 30 participants - volunteers working with persons with dementia, CCC staff and informal caregivers each in both Sombor and Pirot.

In Montenegro, the selection of volunteers still has to be defined and decided upon. The focus will probably be on persons with mild symptoms. The RC branch in Styria has for example a cooperation with an organization where people with severe dementia will be referred to and the other way around.

Also, the songs for the dementia tool were discussed. It is not so easy to get the consent of authors to transfer the rights to DigitAALife. Serbia has stated that a choir might volunteer and to use these songs then for the dementia tool.



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International exchange meeting June 2022

The aim of the international exchange meeting next year is the international exchange of best practices and innovation in supporting informal carers – e.g. models of peer support, self-help groups for people in remote areas using Skype, other systems or individual counselling, etc. The focus will be on the content, method and organization of the trainings for informal carers. Around 30 participants including partners, associate organizations, and 5 experts, who will introduce innovative examples of support tools for informal carers will join the international exchange meeting from **30 May to 3 June 2022** at the House of Solidarity in Sutomore, Montenegro.

The 3rd partner meeting will take place right after the exchange meeting. The project partners then brainstormed about the experts that could be invited such as Alzheimer Europe and discussed some budgetary questions in this regard.

-> Travel days are planned on Monday and Friday. Tuesday/Wednesday is planned for the internal exchange meeting and Thursday and half day Friday for the partner meeting.

Video about the training center in Sutomore:

<https://drive.google.com/drive/folders/1kZ0f1PkwmW6G06fINuM4MadsRtLgFmN1?usp=sharing>

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WP 4: Evaluation

On the second day, Manuel Kern from the NPO Competence Center presented the progress made with respect to the evaluation component of the I-CCC project. So far, a monitoring tool was designed in close cooperation with the project partners and workshops were held on the impact model. As to the process evaluation an online survey was compiled and in person interviews were conducted. Manuel then also notified the project partners of a staff change: Olivia Rauscher has been on maternity leave since Sept. 6th, 2021 and subsequently Christian Grünhaus will work more closely on the I-CCC project again.

The **monitoring tool and the impact model** were then presented in detail as were the first results of the process evaluation. In a next step, the QPPQ and WHO QoL_BREF will be finalized and collected data analyzed. The NPO Competence Centre will send out the questionnaires to the project partners who in turn will coordinate with their volunteer coordinators how to best distribute them among the beneficiaries and collect them again. Translation of the questionnaires will be necessary for Serbia and Montenegro. The process of the impact evaluation and tasks of partners were discussed in detail.



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How do we plan the survey process? (I)



At the CCC

1. A client comes to the CCC.
2. The client receives a questionnaire.
3. The client fill out the questionnaire at a quiet place at the CCC.
 - If necessary, the person receives support
4. The client throws the questionnaire into a locked box.
5. The collected questionnaires are sent to the local partners.

At home

1. A volunteer/staff member visits a client at home.
2. She/He gives the questionnaire to the client.
3. The client fill out the questionnaire.
 - If necessary, the person receives support
4. The client gives the questionnaire back to the volunteer/staff member.
5. The volunteer/staff member takes the questionnaire to the CCC.
6. The collected questionnaires are sent to the local partners.

This process is repeated every 6 months (2 or 3 times per person)

PAGE 11 SAMPLE MASTER



How do we plan the survey process? (II)



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- In advance, there will be **training** for some staff members on how to support people to fill in the questionnaire
 - What does support mean?
 - The trained persons are also **multipliers** for other staff member and volunteers
 - Everyone who is working at the CCC should be informed about the survey process
- The printed questionnaires must be provided at the CCC
 - Volunteers and staff members who are going to the clients' home will receive the printed questionnaires at the CCC
 - They also have to return the questionnaires in a sealed envelope at the CCC
- We will send out the link to the QPPQ volunteer survey. However, we need a **list of e-mail addresses** and **consent forms** from the volunteers.

➔ Partners are responsible for entering the data in English in the provided data collection template and a short summary report will be produced in English after each wave.

In the end, the question was raised on how best to provide support to older people in filling in the questionnaires without biasing them since it will distort results. According to the NPO Competence Center there is a box to tick in the BREF where you have to say if you did the survey alone, with support, or if someone else filled it in for you to reflect this potential bias also in the evaluation results.

➔ A short training will be organized by the NPO Competence Center for partners/volunteer coordinators regarding the handling and process of the impact evaluation questionnaires.



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➔ **First results** were also presented on the **process evaluation** which are also summarized in a report:



Results of first
process evaluation_Oct

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WP5: Evidence-based advocacy

Next up the project partners present their national dissemination plan respectively dissemination ideas. The Red Cross of **Montenegro** has already a very elaborated national dissemination plan, which can be shared with the other project partners. Some brainstorming also took place with regards to more immediate PR and advocacy activities:

The RC of the Republic of **Serbia** suggested that synergies can be used regarding advocacy activities they are already undertaking in the context of the COVID Resilience project. There will be a dissemination event on 21/9 on dementia and LTC, where also three bridges will be illuminated in purple in three towns. On 27/9 will be a big regional conference on ageism and ageing, where the I-CCC project could also be promoted. The RC of Serbia is also part of LTC working group of the government, where they are promoting the I-CCC project and is in constant communication with different kinds of ministries regarding the LTC policy reform.

The **AutRC** will draft the dissemination plan in September and asked the project manager to share a template for the advocacy plan. There will be two stakeholder meetings for the purpose for exchange and networking and the Vienna branch might have something planned for the World Alzheimer's Day on 21 September 2021. The I-CCC opening will also be advertised extensively in the two regions as well as at the HSS Conference. Furthermore, an article on the AutRC website will be placed about the I-CCC project and the opening of the CCCs in Austria.

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Detailed time planning & open administrative and financial questions

The first progress report to the EU is due shortly. Please send all documents until 15 November latest to Cornelia and Franziska covering the reporting period of 1 November 2020 – October 2021.

For the financial report the supporting documents need to be sent only for the last period (August-October 2021). Please also send a filled in dissemination list and a filled in monitoring tool (as far as possible). For the narrative reporting the project partners will be provided with a template based on the EU reporting standards and formats.

→ Next partner Zoom meeting: 19 October at 2pm

Overview of next steps and time planning

TO DOs I-CCC	Who?	Until when?
Summary report of needs assessment in each country, including desk research, community context, overview of existing services + stakeholders + results of community needs assessment + final recommendations for CCC in each community (20 pages, national language)	RCS, MRC, AutRC/HSS in cooperation with policy partners	done
Summary report of needs assessment in English (summarizing most important results) (5-8 pages)	RCS, MRC, AutRC/HSS -> please fill in the template so that AutRC/OIC can prepare the summary report	done
Joint summary report in English	AutRC - IZ	End of September, 2021/ Beginning of October
Short paper on financial sustainability options for each country (5 pages/country)	RCS ✓, MRC, AutRC ✓ /HSS in cooperation with policy partners	End of September, 2021 (Austria) October 2021 (Montenegro)
Develop a concept for each CCC and definition of services to be provided	RCS ✓, MRC, AutRC/HSS ✓	Mid October (ready before opening on 1 November)
Translation of tablet-based training over the summer Clarification of the question on songs	RCS, MRC	10 October (Montenegro) End of September (Serbia)
Develop a national dissemination plan, including social media presentation of CCC	RCS, MRC, AutRC/HSS	September/October 2021
Contracting external PR agency for visibility	MontRC	October 2021



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Contracting external evaluator for local evaluation – starting tender process and selection of consultant/agency	MontRC	October 2021
Development of promotional material for the CCC – leaflets, posters, social media presence, Viber number	RCS, MRC, AutRC/HSS	September/October 2021
Develop a concept for volunteer-based services for people with dementia	RCS, MRC, AutRC/HSS	October-December 2021
Development of toolbox for informal carers -> module 3 will be the training for volunteers for the visiting services	RCS/Montenegro	November/December 2021
Save the date for international exchange meeting in Montenegro (experts and Think of experts and associate partners: 30 May – 3 June	MontRC/EIZ	November 2021
Template for advocacy plan	EIZ	November 2021
Piloting CCC activities	RCS, MRC, AutRC/HSS	From October/November 2021
Training of volunteers for the tablet-based training – training conducted by DigitAALife	RCS, MRC, AutRC/HSS	November 2021 (AT) Dates for Serbia and Montenegro (tbd)
Evaluation		
Development of data entry tool and template for reporting for partners	NPO Competence Center	End of September/beginning of October 2021
Excel list for tracking evaluation process of clients	NPO Competence Center	End of September/beginning of October 2021
Development of QQPQ and collect Feedback from Partners	NPO Competence Center	Mid October 2021
Brief on-line training on questionnaire (1 in German, 1 in English?)	NPO Competence Center + partners (1 person in CCC and volunteer coordinator – person in charge of volunteers) – people working on the 1 st of start of CCC	October – before CCC are starting
National evaluation partners prepare short report in English on evaluation and send it to NPO Competence Center	National evaluation partners (MRC-consultant, RISP)	May 2022

Responsible for minutes:

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15. October 2021