‘Live Safely, Enjoy Life, Stay involved’

SFC Activities Conference

@euPrevent #SFC #EuregioMaasRijn

November 23, 2017

Interpreters

German: number 1

French: number 2

Dutch: number 3

Crossing borders in health

‘Live Safely, Enjoy Life, Stay involved’

SFC Activities Conference

Marleen van Rijnsbergen

November 23, 2017

Memory card Marleen van Rijnsbergen

‘Een sluipend afscheid’

An insidious farewell
Ein schleichender Abschied
Un départ insidieu

Crossing borders in health

Memory card Jack Gerats

A senior friendly municipality:

connecting with and caring for caregivers and- takers.

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Caroline Glaude & Eric Salmon

November 23, 2017

Memory Card

- You can find the memory card in your conference map.

- Please leave your idea about dementia or age-related depression behind on this card; make a visual, write a quote... feel free to **be creative**!

- We will use your inspiration later on in this project to make a memory game.

- Please drop this card in the **green SFC mailbox today**.

Crossing borders in health

Mailbox Memory Cards

Crossing borders in health

Memory Card Caroline Glaude

Crossing borders
in health

Goals of today

- Inform participants about the activity buffet, the euregional assessment report and tools.

- Networking and learning from others.

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Program

Program

09.30	**Welcoming at the Rebelle**
10.**00**	**Program begins in plenary session (Rebelle)** – Opening of the Congress by Deputy Marleen van Rijnsbergen (Province of Limburg, Netherlands) – Presentation by Dr. Machteld Huber – Presentation by Prof. Dr. Liane Schirra-Weirich – SFC project status – Short overview of the activities buffet
12.30	**Lunch at the Rebelle**
13.30	**Boarding at the shipping company Stiphout, Scheldevallei**
13.30- 17.00	**Beginning of the information fair about the activities buffet and informal networking.** The boat will be running from 14.00 to 16.00.

Warming up for today

- Use the yellow card on your chair.
- Please write down what you want to discuss today with an other visitor of this conference (2 minutes).
- Pass on your card, and the onces you receive untill we say stop.
- The cube microphone will be thrown in the audience.
- If you catch the cube please read the card in your hand.
- Hold on to the card you got. You can use it for networking.

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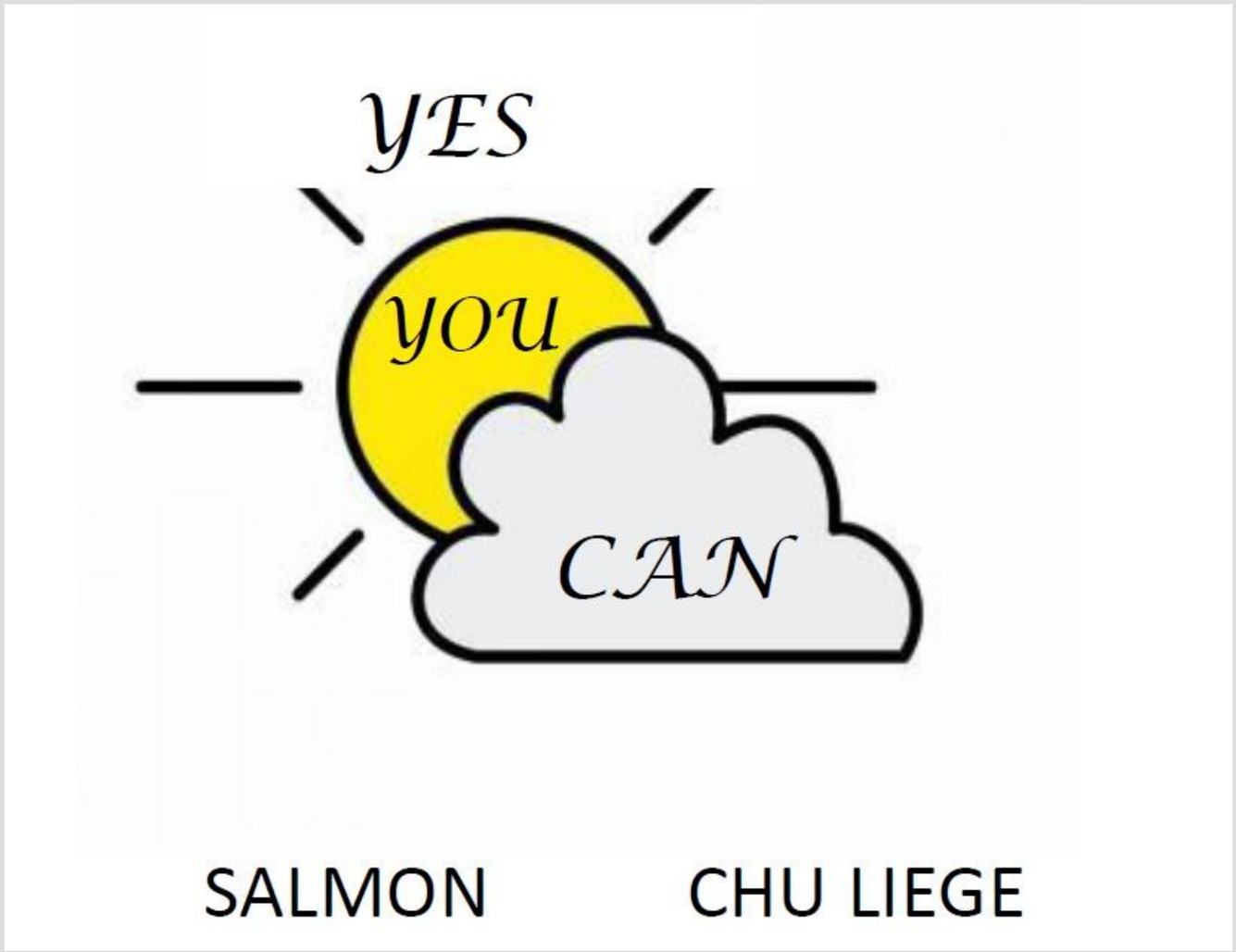
Badge

- Find the person which name is also on your badge.
- Discuss whatever you want with this person. Preferably use a topic of the conference ☺
  For example use the output of the warming up.

Memory card Eric Salmon



With many thanks to:

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Kreis Heinsberg ..... Der Landrat

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Wallonie

provincie limburg

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Machteld Huber
‘Positive Health’

November 23, 2017

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Liane Schirra – Weirich
‘Ageing in the community’

November 23, 2017

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Frans Verhey
‘Update of the project’

November 23, 2017

Background

More care needed in the future

More elderly with chronic conditions

More elderly with dementia

More elderly with depression

Crossing borders in health

The project

Senior Friendly Community in the EMR

Mental health – Dementia - Depression

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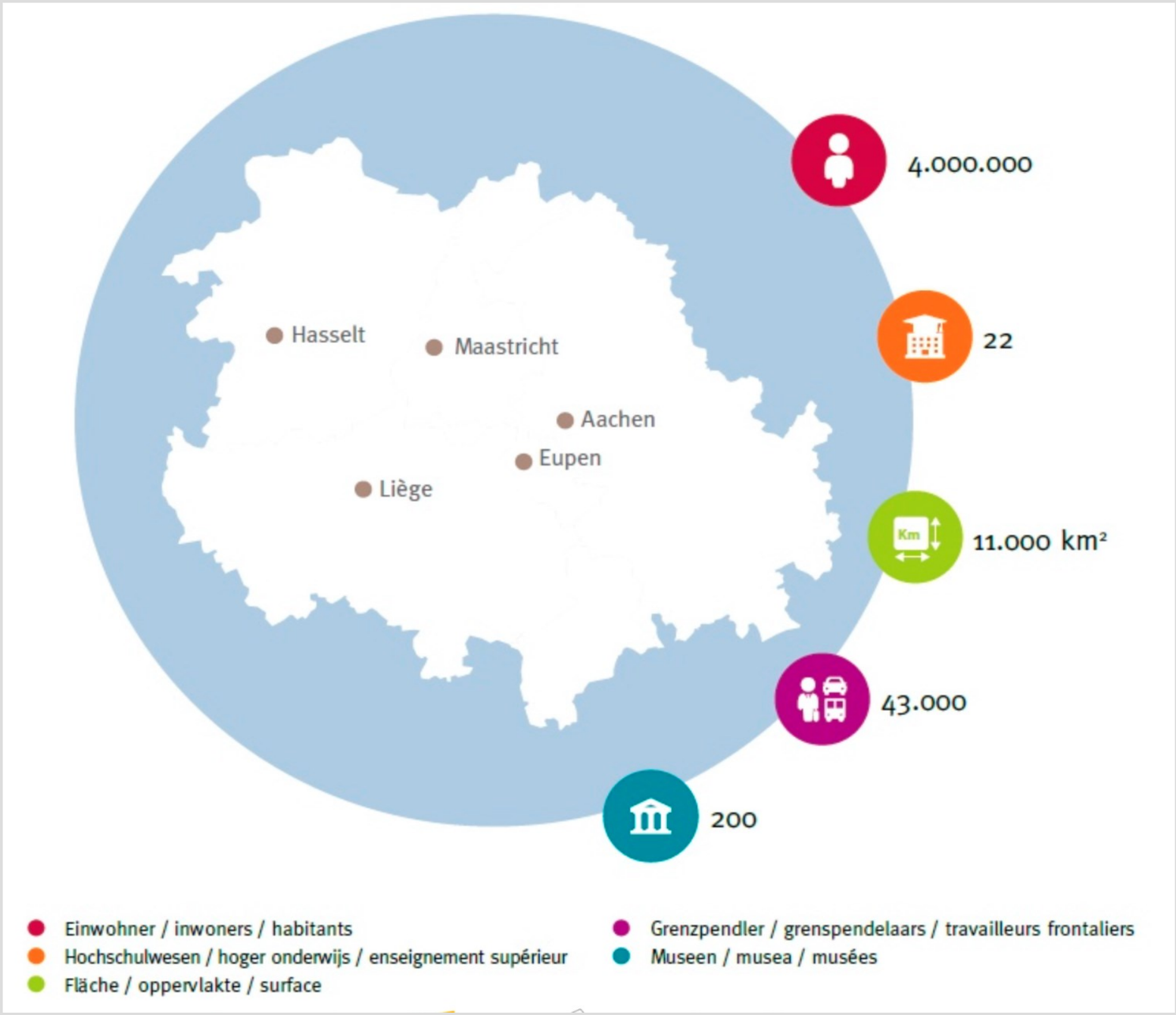
Hasselt
Maastricht
Aachen
Eupen
Liège
4.000.000
22
11.000 km²
43.000
200
Einwohner / inwoners / habitants
Hochschulwesen / hoger onderwijs / enseignement supérieur
Fläche / oppervlakte / surface
Grenzpendler / grenspendelaars / travailleurs frontaliers
Museen / musea / musées

Overall aim

- To promote senior-friendly municipalities that are care-friendly, carer-friendly and inclusion-friendly.
- To enhance senior citizens to participate in social life.
- Target groups;
    - people who currently work as caregivers;
    - potential caregivers;
    - people who need care:
        - elderly persons with late-life depression and/or senile dementia.
- Based on WHO policy model for Active Aging.

Three pillars of WHO policy model for Active Aging

- **Health:**
  - Higher quality of life for older people, maintaining their health and the ability to manage their own live.
  - Limiting the risk factors.
  - Access to a wide range of health care and social services.
- **Participation**
  - Contribution to society in both paid and unpaid activities.
  - Specific capacities, preferences, needs and rights of older people.
- **Security**
  - Social, financial and physical security needs and rights of aged people.
  - Feel secure, dignified and well-cared-for,
    - even if they can no longer ensure their own security.
  - (local) network to ensure security.

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WHO Pillars

SFC – Depression and dementia

Theoretical framework[1]	1. Participation	2. Health	3. Safety
	1. Positive image senior 2. Accessible and useful information 3. Voluntary engagement 4. Lifelong learning	1. Active leisure and socialisation 2. Information, programs to promote healthcare 3. Social support and assistance 4. Accessible and correct healthcare	1. accessible services 2. support of informal caregivers 3. Public information 4. Safe shelters
Activity buffet	**1. Participation**	**2. Health**	**3. Safety**
	1. Information about a normal memory 2. Website and facebook 3. Campaign to break the taboo dementia/ depression 4. eHealth support seniors 5. …..	1. Living room initiative 2. Policy dementia friendly communities 3. Visiting widowers 4. …..	1. Training informal care givers 2. Training service oriented organisations 3. eHealth support informal caregivers 4. Lifelong learning 5. …..

1. 'Active ageing policy framework', WHO, 2002, WHO/NMH/NPH/02.

General overview of the project

Year 1: **- Recruit communities/ municipalities.**

- Needs assessment, baseline.

- Design and prepare the ‘activity buffet’.

Year 2: **- Identify needs of each community.**

- Communities pick up activities that are helpful.

- Implementation activities.

Year 3: - Implementation of activities that are selected.

- Advise communities on sustainability.

- Evaluation, Follow-up.

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Participating communities

Belgium	Germany	The Netherlands
Amel	Aldenhoven	Beek
As	Dahlem	Beesel
Hamont-Achel	Erkelenz	Eijsden-Margraten
Hasselt	Euskirchen	Kerkrade
Kelmis	Herzogenrath	Maastricht
Liège	Hückelhoven	Mook
Plombières	Jülich	Onderbanken-Nuth-Schinnen (Beekdaelen)
Tessenderlo	Stolberg	Roermond
Thimister-Clermont	Wassenberg	Valkenburg aan de Geul
Verviers	Wegberg	Venlo
		Venray
		Weert

Kick-off Liege January 31, 2017

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Results so far

- Each of the 32 municipalities had an assessment:
  - Questionnaire:
    - Send out before interview;
    - Interview with relevant employees;
    - Care- Senior organisations involved.
  - Mystery Guests:
    - Citizen perspective.
  - Demographic data.
- Report of each of the 32 municipalities.
- Overall report EMR.
- Capacity assessment tool online available.

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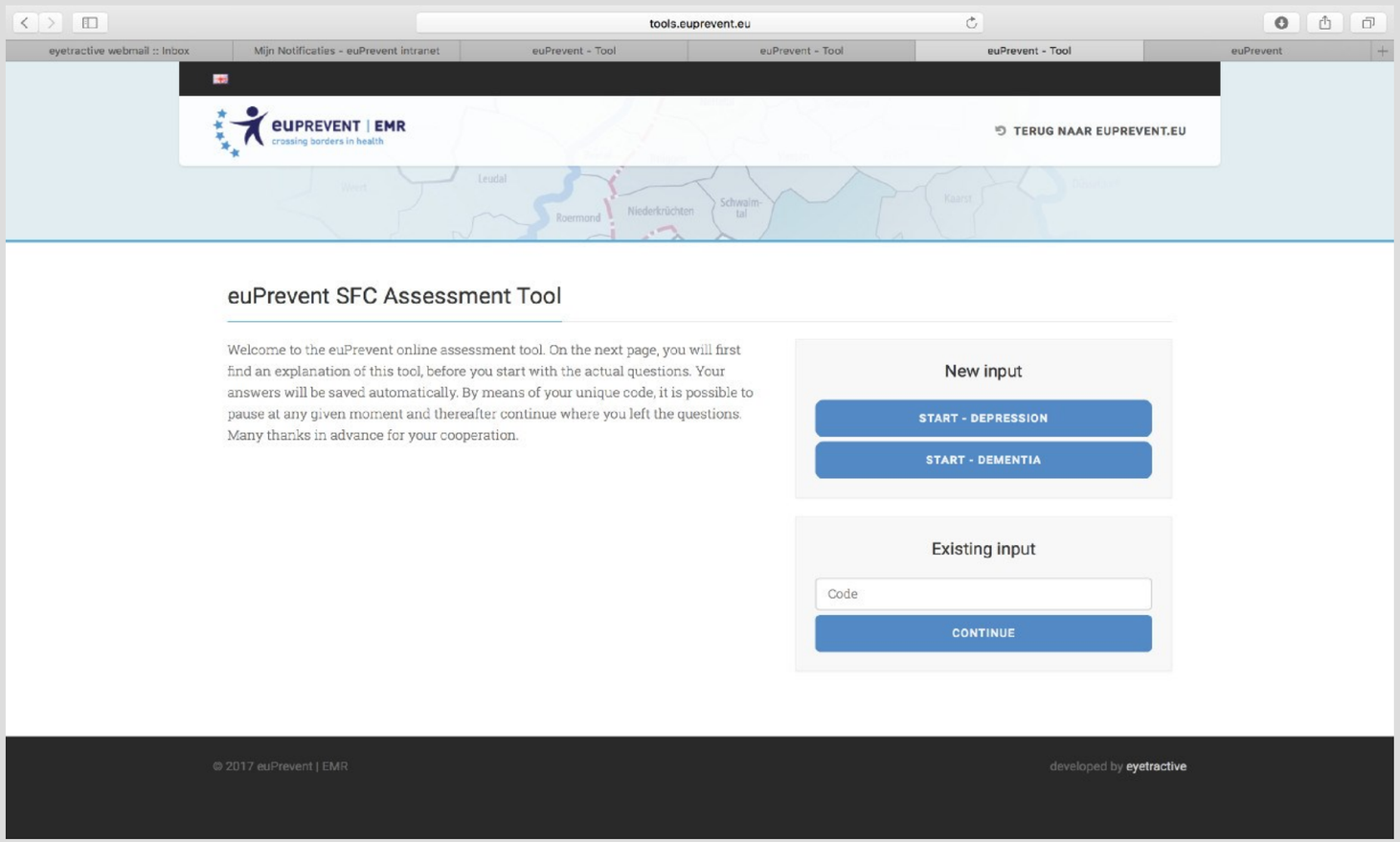
Results so far (cont'd)

- 3 online assessment tools available: general, dementia, depression.
- Focus on communities.



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Results overall

- Policy of the municipalities in all regions focusses on broad target groups of elderly, not particularly specific groups.
- Municipalities often referred to organisations for more detailed information.
- Municipalities both underestimate and overestimate what they have in place.
- More awareness for dementia, compared to depression.

Results overall (cont'd)

- Almost all communities expressed their interest to cooperate within the EMR, across borders, and exchange best practices.
- Obstacles to Euregional exchange:
  - unfamiliarity with employees in another community:
  - unfamiliarity with the work of another community across the border:
  - different rules and laws making it difficult to judge whether an activity can be implemented in a similar fashion;
  - language barrier, time constraints, budget constraints.

Results overall (cont'd)

- Difficulties to find and reach the informal caregivers, and doubts if the activities really fit needs of the target groups.
- Importance of having a (strong) social network was stressed by all.
- Municipalities play an important role in giving attention and emotional support to both the person in need of care and the informal caregiver.

My Memory Card

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Raymond Stijns
‘Activity buffet’

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It is about active ageing

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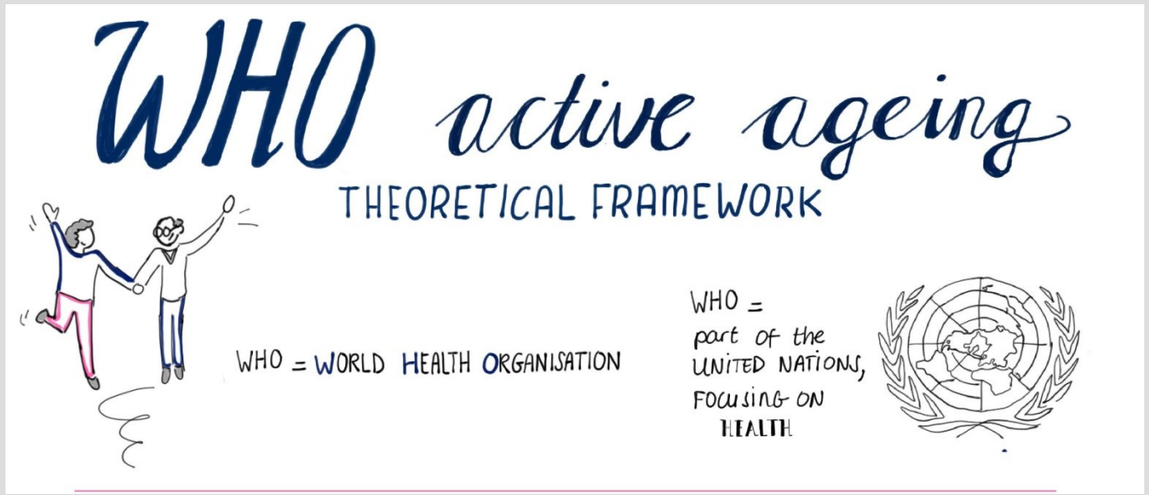
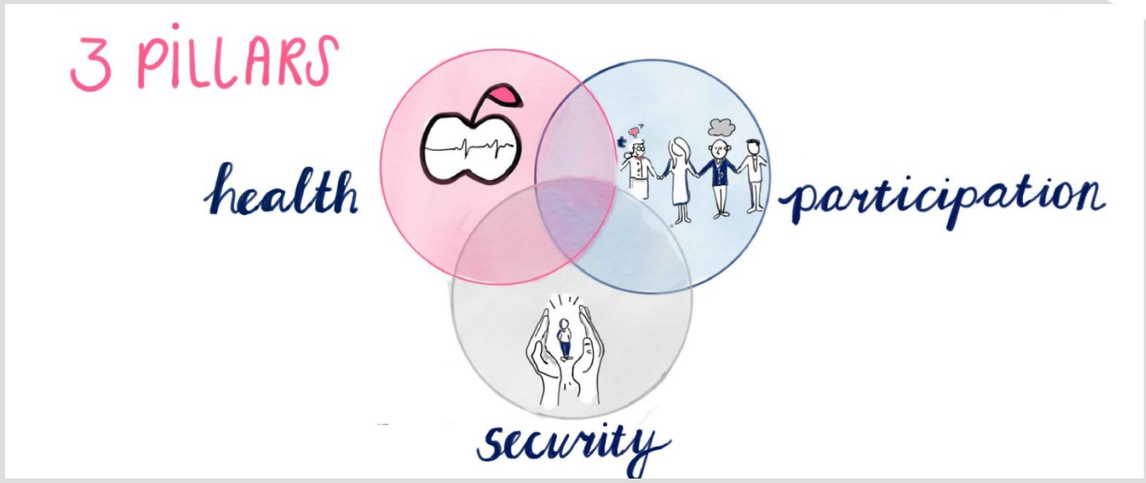
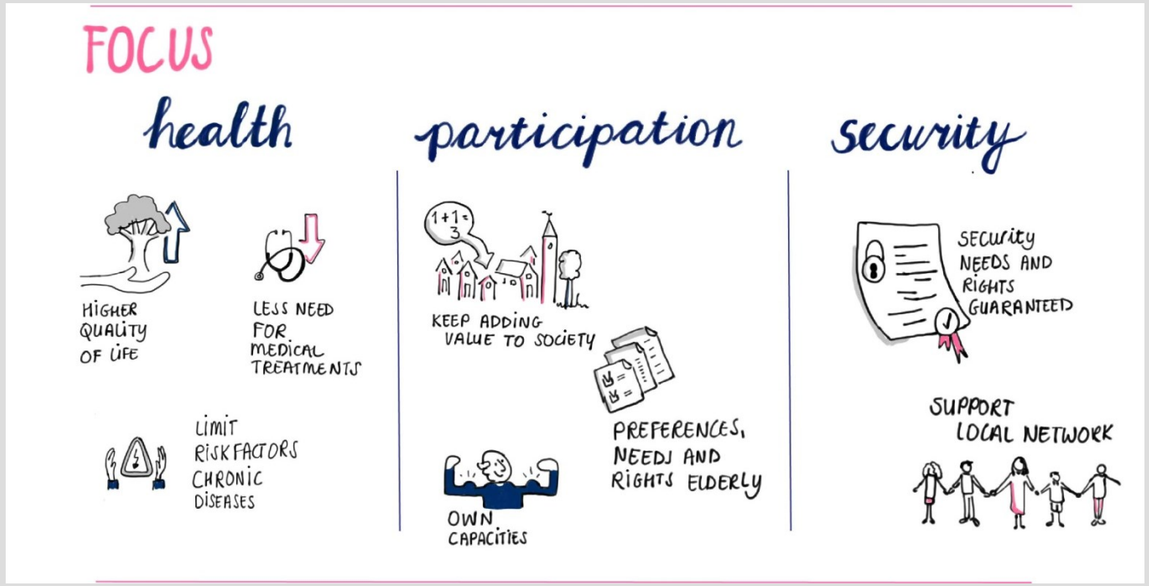
Why we do it Where does it start







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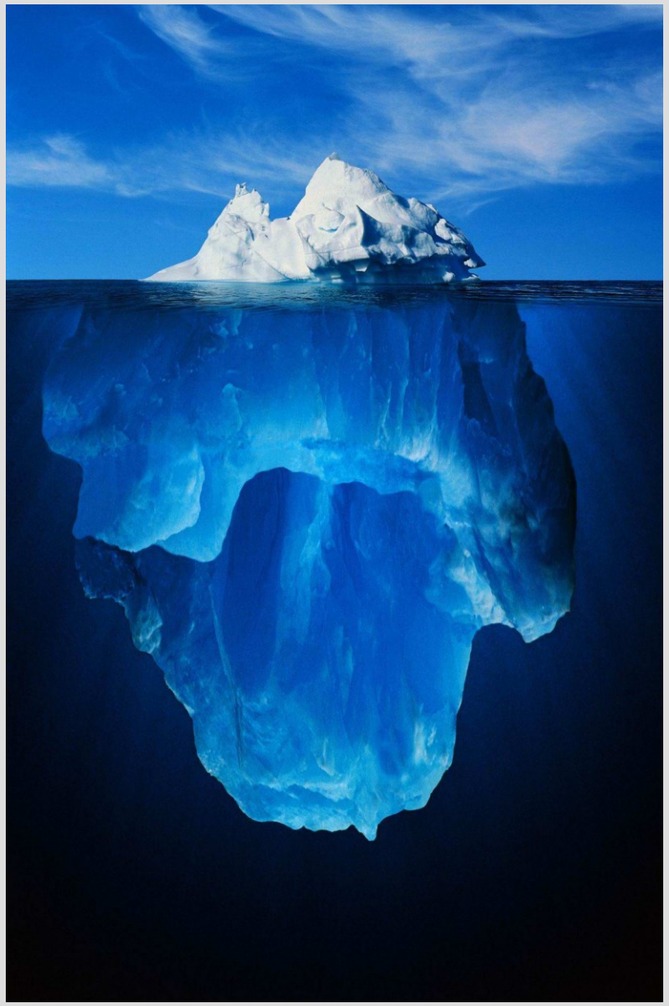
Activities…….all Icebergs



What you see

What organisations did/do:

- Evidence/practice based
- Professional approach based on research and experience
- Translation for use in all regions
- Willingness to share and help in other regions

Crossing borders in health

- Advice on Dementia Prevention to municipalities.
- Expert for:
  - Discussion (groups)
  - Policy review
  - Presentations
- Municipalities take care for; room, beamer, sound, catering.
- Translator may be needed.

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Crossing borders
in health

- Increase awareness.
- Target groups: elderly, policy makers, caregivers, inhabitants.

- Expert for:
  - Discussion (groups)
  - Policy review
  - Presentations
- Municipalities take care for; room, beamer, sound, catering
- Translator may be needed.

Crossing borders in health

- Increasing awareness on Dementia.
- Learn to accept people with dementia and see there colourful life, trough art, culture and encounter.
- Target group: all inhabitants.
- Events with agreed concept and content according the principle of ”Confetti in your Head”.
- Municipality; project manager, and facilities if needed.
- Project time: 2 month.

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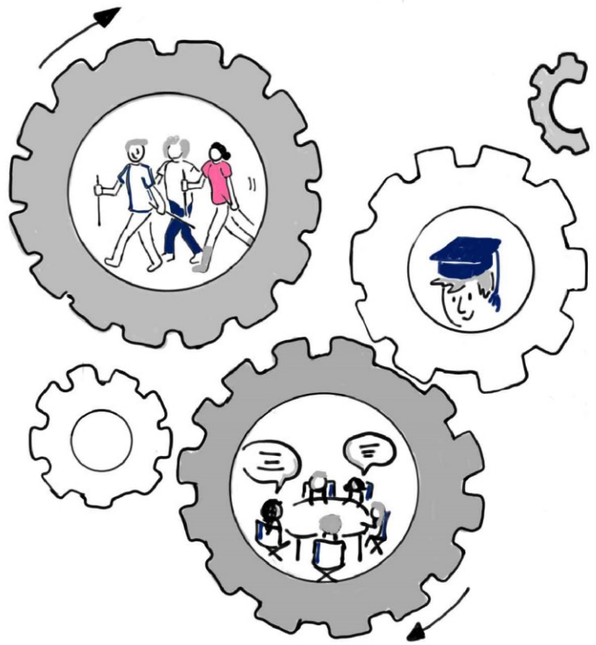

CREATION AND ORGANISATION OF LOCAL GROUPS OF ELDERLY

- To increase the participation and involvement of older people in the community - in their social, cultural, economic and political lives.
- Target groups: > 50 years.
- To create and organize their network of local groups of older people.
- Needed: several rooms (sound/beamer), catering, project manager.
- Possibly Translator.

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- To learn more about crossing borders in health and its value for the community.
- To visit another organization or community on a cross border basis in order to start possible collaboration.
- Target group: people working in a municipality: Civil servants, Managers, Alderman.

- Learning to deal with people with dementia.
- Several groups and organizations in society.
- Needed: Meeting room, efforts to invite and organize (person in charge).

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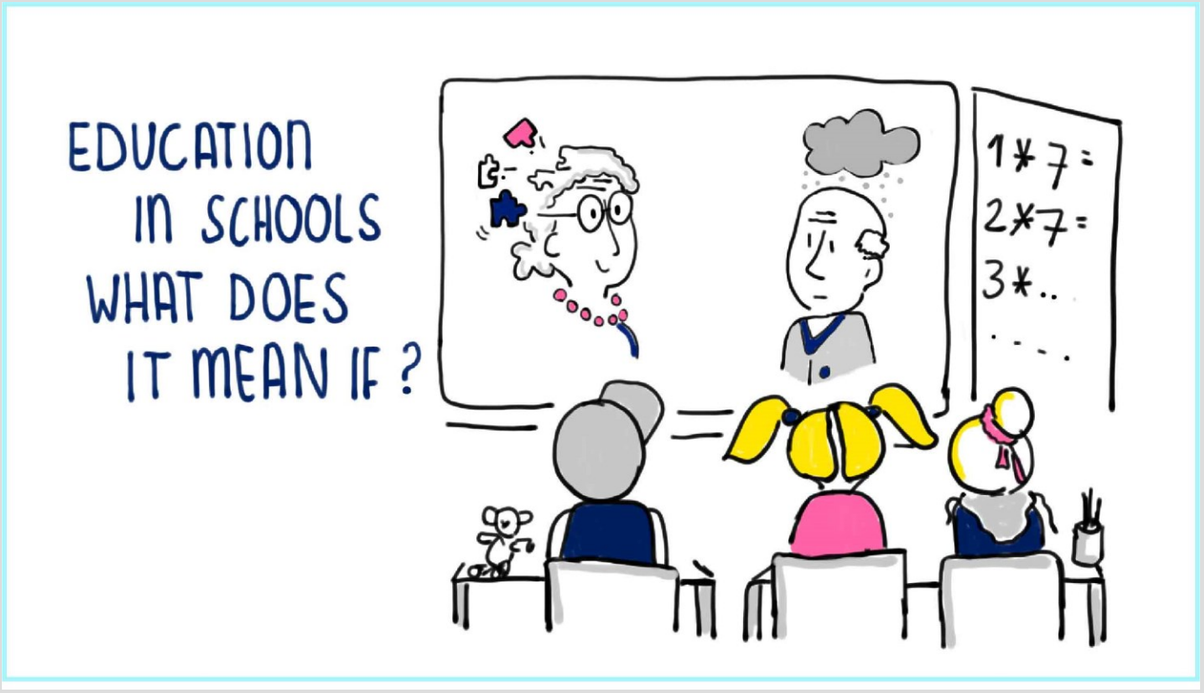

- Education in schools; what does it mean to have Dementia?

- Children around 10 and 12 years old, approached via schools, also informal caregivers.

- Information and a visit to elderly home.

- Needed: experienced expert, classroom, sound/beamer, transportation to the elderly home.

- Toolbox to support caregivers from ”Alzheimer Centrum Limburg”.

- Stakeholder meeting, Caregivers meeting, Customized advice.

- Meeting room, computer/tablet, internet.

- Debate about Depression.
- Target group: Caregivers, patients, Family, etc..
- Showing Art made people who in some way are confronted with depression.
- Library, list of books about depression, information corner, invitation for the exhibition, press.
- Coordinator & Volunteer.

- Customized support through municipalities for caregivers on dementia.

- self-management programme to support dementia caregivers by empowering them and increasing their self-confidence and quality of life.

- Target group: municipality.

- Needed: coaches provided by the municipality that will be trained.

Crossing borders in health

- Workshop is to create awareness and operationalize the new concept ‘Positive health’.

- Dementia and depression.

- Given by trained volunteers.

- Focused on the questions ‘what does health mean for me, ‘what would I like to change’ and ‘how can I communicate with professionals about my health?

- For dementia and depression.
- Understanding memory from several points of view.
- Presentation, Discussion, Brochure.
- Needed: facilities, person in charge aligning with the psychologist.

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- To prevent depression by helping elderly out of their isolation.

- Elderly who do not go outside.

- Short telephone call on regular base by a volunteer.

- Needed: Coordinator (social worker) to support the volunteers.

- Ongoing program.

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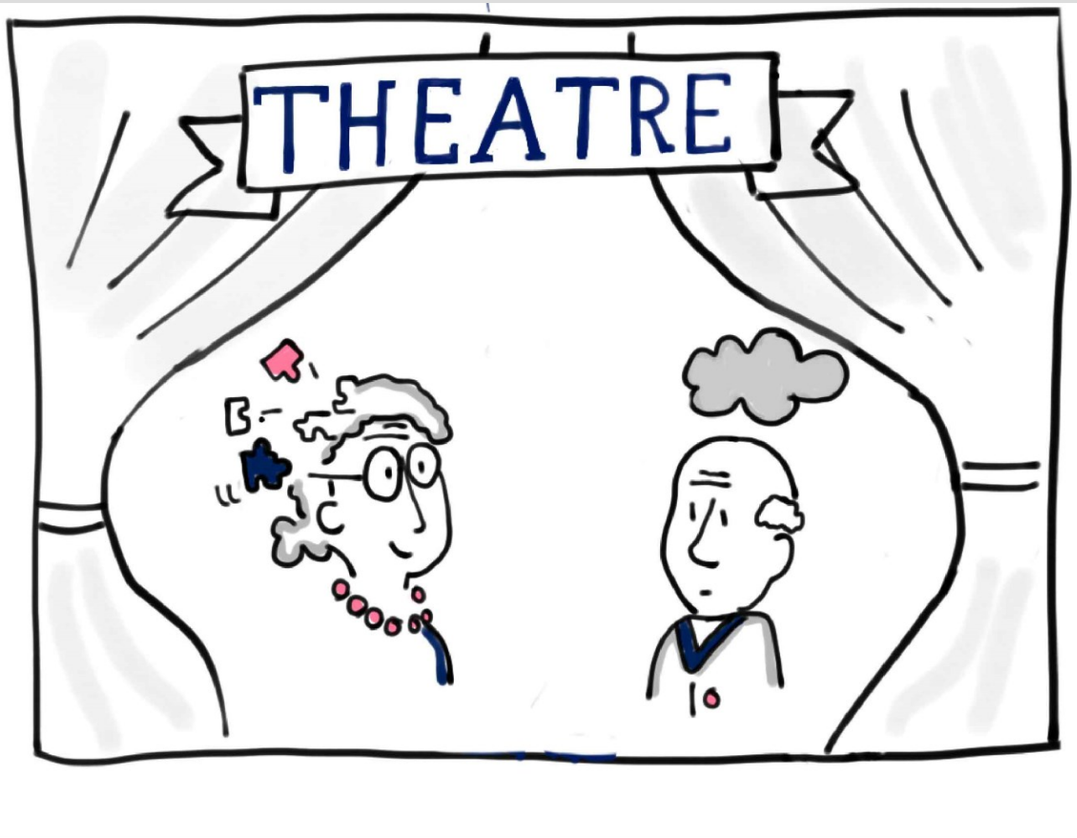
Crossing borders in health



- To break the taboo on dementia and depression.
- The audience feels the emotional impact and starts talking about it.
- Broad audience.

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- Coaching and observing people with minor complaints to improve their well-being and mental health.

- A coach supports the client during the program.

- Needed:
  - Social worker to coordinate project.
  - Coach (can be the social worker).
  - Commitment of first-line workers.

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Crossing borders
in health

	DEMENTIA	Age-related DEPRESSION	HEALTH	PARTICIPATION	SECURITY
1. Advice Dementia	X		X	X	
2. Advice on prevention of age-related depression		X	X	X	X
3. Confetti in your head	X			X	X
4. Creation & Organisation of local groups of Elderly		X	X	X	
5. Crossing borders in health	X	X	X	X	X
6. Dealing and Communicating with people with Dementia	X			X	X
7. Education in schools	X	X	X	X	
8. Inlife	X			X	
9. It's raining on my nose		X		X	
10. Partner in Balance	X		X	X	
11. Positive Health	X	X	X	X	
12. Psychoeducation on memory	X	X	X	X	X
13. Telephone-Star		X	X	X	X
14. Theatre	X	X	X	X	
15. Well-being on prescription		X	X	X	

O = dementia = (age-related) depression = dementia & (age-related) depression

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Memory card Raymond Stijns

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SFC Activities Conference

Frans Verhey
‘The future of the project’

November 23, 2017

General overview of the project

Year 1: - Recruit communities/ municipalities.

- Needs assessment, baseline.
- Design and prepare the ‘activity buffet’.

Year 2: - Identify needs of each community.

- **Communities pick up activities that are helpful.**
- **Implementation activities.**

Year 3: - **Implementation of activities that are selected.**

- **Advise communities on sustainability.**
- **Evaluation, Follow-up.**

This afternoon

- Ample opportunities to get acqainted with each of the activities.
- Networking.

Crossing borders in **health**

Next

- Game rules and pricing to be sent out to the communities after the conference.
- Determination of activities packages.
- Based on:
  - Assessement report.
  - Price.
  - Cross border.
- January 2018: express of preferences of municipalities.
- February 2018: final choice.
- March 2018: start implementation activities.

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Last year of the project

- Re assessments.
- Evaluation, follow-up.
- Advise communities on sustainability.

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