

Technical support on the deinstitutionalisation process in Greece
Grant Agreement: SRSS/S2019/02

Factsheets on promising practices on community-based living

Deliverable 9 (as per the Workplan) under Component 2, Output 2.1
Activity 2.1.1 “Factsheets on DI, the needs of persons that will move
in the new communities”



Original title according to project Workplan

Eleven (11) Factsheets on best practices on community-based living. Deliverable 9 (as per the Workplan) under Component 2, Output 2.1 Activity 2.1.1 “Factsheets on DI, the needs of persons that will move in the new communities”.

Page | 2

Credits & Rights

Attribution: Please cite this work as follows: European Association of Service providers for Persons with Disabilities (EASPD), Brussels, February 2021.

Copyright: Copyright © EASPD 2021. All rights reserved. No part of this publication may be reproduced, stored in or introduced into a retrieval system without the prior permission of the copyright owners.



This publication has been produced with the financial support of the European Union via the Structural Reform Support Programme of the European Commission. The information contained in this publication does not necessarily reflect the official position of the European Commission.



Table of Contents

1. Executive summary.....	5
1.1 Introduction	5
1.2 Collection of information	5
1.3 Glossary.....	6
2. Models of promising practices on community-based living.....	8
2.1 Children and children with disabilities	8
2.1.1 Support services for children with disabilities – Service Foundation for People with an Intellectual Disability (KVPS), Finland	8
Service Foundation for People with an Intellectual Disability (KVPS)	11
Petra Rantamäki, Project Leader.....	11
2.1.2 Family support and foster care services – Amalthea, Czech Republic	11
<i>The support needs of individuals:</i>	13
2.1.3 Support services for families with children, including children with disabilities - Slezská Diakonie, Czech Republic	14
<i>The support needs of individuals:</i>	15
2.2 Persons with disabilities	17
2.2.1 Preparatory program for the independent living of individuals – Margarita, Greece	17
2.2.2 A holistic approach enabling individuals to live in the community – Community for all, Keystone Human Services, Moldova	19
<i>The support needs of individuals:</i>	21
<i>The approach:</i>	21
<i>The staff:</i>	22
2.2.3 Community-based living for individuals with different support needs– Pro Act Suport Association, Romania.....	23
<i>The support needs of individuals:</i>	25
2.2.4 Supported Living Apartments - Greece	26
2.2.4.1 Sotir, Center of Rehabilitation, Social Support and Recreational Activities for persons with disabilities	26
<i>The support needs of individuals:</i>	27
2.2.4.2 Petagma, Parents Association for the Supported Living of Persons with Intellectual Disabilities	28
<i>The support needs of individuals:</i>	29

2.2.4.3 ESTIA, Center for Support of Persons with Intellectual Disabilities	31
<i>The support needs of individuals:</i>	32
2.2.5 Supported decision-making while offering support services – SUPPORT, Catalonia (Spain).....	33
<i>The support needs of individuals:</i>	35
<i>The staff:</i>	36
2.3 Older persons	38
2.3.1 Help at Home - Greece	38
<i>The support needs of individuals:</i>	39



1. Executive summary

1.1 Introduction

This paper is published in the framework of EASPD's project "Technical support on the deinstitutionalisation process in Greece" (Grant Agreement: SRSS/S2019/02), and features models of promising practices on community-based living, supporting children, children with disabilities, adults with disabilities and older people from multiple European countries.

Page | 5

A model of promising practices on community-based living refers to a setting based in the community which resembles typical community life, offering individualised support and inclusion in the society. This model also incorporates the principles of participation, inclusion, non-discrimination, equality, choice, control over life, and the right to receive support adapted to individual needs.

The main international frameworks underpinning the need of transitioning to community-based living are the United Nations Guidelines for the Alternative Care of Children; the UN Convention on the Rights of the Child (UNCRC); the UN Convention on the Rights of Persons with Disabilities (UNCRPD); the UN Principles for Older Persons and the UN General Recommendation on Older Women and Protection of their Human Rights. Based on these frameworks, the Deinstitutionalisation Strategy for Greece aims at developing a solid framework of social care support systems so that children, children with disabilities, adults, and older people with various support needs can be fully included in society.

The Strategy's objective is to establish the conditions for all individuals, regardless of their support needs, to participate in society, allowing them to enjoy their fundamental rights, empowering them, and promoting their active contribution as full citizens with equal rights.

1.2 Collection of information

A Call for proposals was addressed to relevant stakeholders in order for them to propose models and/or forward EASPD's call to interested services. A questionnaire was attached to this call, which included questions related to the model proposal. The questions referred to the services each model provides, their staff, the users of their services and their needs, as well as the service delivery approach with a view to identifying models of promising practices on community-based living based on the following guiding criteria.

Guiding criteria of a model of promising practices on community-based living:

- Each facility should not exceed the number of persons in a typical family (i.e. no more than 5 people). The smaller the structure, the more personalised the support provided to the individual.
- The services provided shall be tailored to the needs of the person. A person-centred approach that organizes and provides support based on personal needs and wishes, empowering the individual.
- The setting shall recognize the right of individuals to choose where and with whom to live.
- The individuals and their families shall be included in the decision-making process. All individuals, including children, should be thoroughly informed before taking decisions on their lives and supported in making a fully informed choice.
- It shall provide ongoing interaction with the local community and access to services of the general population on an equal basis. Additionally, the residents need to be integrated into the community and to actively participate in it, while receiving adequate support to reach their optimum level of functioning.

After our call for proposals, we received several responses most of which featured models of practices, which did not meet all the guiding criteria of our initial call. We then identified the need of a round of consultation with relevant stakeholders from organizations supporting children, persons with disabilities and older persons to identify which models will be featured in this factsheet. The final decision was guided by the type of services that each model offers, their approaches and innovative spirit.

Based on this method, we are introducing here models of promising practices on community-based living. Under the description of each model we have inserted a “Strengths and Weaknesses” section identifying the opportunities they offer, as well as their limitations.

1.3 Glossary

Independent Living: living independently means that individuals with disabilities are provided with all necessary means enabling them to exercise choice and control over their lives and make all decisions concerning their lives. Personal autonomy and self-determination are fundamental to independent living, including access to transport, information, communication, personal assistance, place of residence, daily routine, habits, decent employment, personal relationships, clothing, nutrition, hygiene and health care, religious, cultural, sexual and reproductive rights. These activities are linked to the development of a person’s identity and personality: where we live, with whom, what we eat, whether we like to sleep in or go to bed late at night, be inside or outdoors, have a tablecloth and candles on the

table, have pets or listen to music. Such actions and decision constitute who we are. Independent living is an essential part of the individual's autonomy and freedom and it does not necessarily mean living alone. It should also not be interpreted solely as the ability of carrying out daily activities by oneself. Rather, it should be regarded as the freedom of choice and control, in line with the respect for inherent dignity and individual autonomy, as enshrined in article 3 (a) of the Convention. Independence as a form of personal autonomy means that the person with a disability is not deprived of the opportunity of choice and control regarding personal lifestyle and daily activities. (Definition from General comment on article 19 of the UN Convention on the Rights of Persons with Disabilities)

Community-based care services: the spectrum of services that enable individuals to live in the community and, in the case of children, to grow up in a family environment as opposed to an institution. It encompasses mainstream services, such as housing, healthcare, education, employment, culture and leisure, which should be accessible to everyone regardless of the nature of their impairment or their required level of support. It also refers to specialised services, such as personal assistance for persons with disabilities, respite care, and others. In addition, the term includes family-based and family-like care for children, including substitute family care and preventative measures for early intervention and family support.

Deinstitutionalisation (DI): a complex and multipurpose process that implies a fundamental reshaping of how society can provide the necessary tools to individuals to participate on an equal basis. DI includes the transition of individuals living in institutional settings to settings based in the community where individualization of support and inclusion in society is made possible. This implies the development of a range of person-centred support systems and other services in the community which enable participation and inclusion, such as prevention, early childhood intervention (ECI), family support, health, education, employment and housing.

2. Models of promising practices on community-based living

This paper includes models of promising practices on community-based living from Greece, Spain, Moldova, Romania, Finland and the Czech Republic and aims to provide information to a wide range of stakeholders in Greece and assist them with the National Deinstitutionalisation Strategy for Greece.

2.1 Children and children with disabilities

2.1.1 Support services for children with disabilities – Service Foundation for People with an Intellectual Disability (KVPS), Finland

Background Information

The Service Foundation for people with an Intellectual Disability (KVPS) was founded by Inclusion Finland KVTL in the 90s. Inclusion Finland KVTL is a non-governmental organization aiming to promote equal opportunities in society for people with intellectual disabilities and their families. Until the creation of KVPS there had mainly been institutionalised care in Finland and KVPS was founded to develop and deliver services for the families, who decided not to place their children in institutions. The aim of the organization is to find individual solutions and to create high-quality services to support people with intellectual disabilities or special support needs, and their families.

The organisation promotes a person-centred approach towards individuals with disabilities, advocates for their rights, lobbies with decision-makers and legislators and carries out EU-funded projects. Over the past few years, KVPS has been partner in projects intended for self-directed support, deinstitutionalisation processes, supported decision making, transition support and inclusion. It supports independent living for persons with disabilities by acquiring houses and developing assisted living apartments for people with special needs and it also offers a range of services to support families based on their different needs and situations.

The model

Overview:

KVPS offers 4 types of services to support children with disabilities and their families, organised in 123 Municipalities across Finland:

1. **Home carer**, currently supporting 195 families: The child with disability lives with the family and the home carer visits the family once or twice every two weeks, depending on the needs and preferences of the family. Home carers not only support the children in their natural environment, but also support their family as a whole. They enhance the relationships of children with disabilities with their siblings as well as with both their parents when, for example, the parents are separated.

2. **The Personal support circle** is a circle of nurses supporting the family at their home on a 24/7 basis. This service is for children with very high support needs, requiring constant care. The nurses of this service follow a rotation schedule making sure there is always a member of KVPS staff in every home.
3. **Professional family carer**, currently supporting 99 families: this type of carer supports children from families at risk. It can offer either short- or long-term support, depending on the family's needs. The professional family carer may support the family by taking care of the child several days per month or for a few years. The difference in this service is that the child lives in the house of the professional family carer, so it is a type of foster care service. This service is also provided when the child has no parents or other family member to take care of him/her.
4. **Residential services**, currently supporting 5 children with very high support needs: KVPS has one unit, where each child has their own room and bathroom. The children are between 4 and 16 years old, and are separated into two smaller units based on their age group. Thirteen permanent staff members offer 24hour support. The support they offer depends on the specific needs of the child. The children are close to their families, as the unit is located in the centre of the community. For example, parents may visit their children on their way to and from work or to and from the grocery store. The parents can visit their child whenever they want and so can siblings. Parents can also take their child home or on family vacations, but when the child has very high support needs and requires large medical equipment or are sensitive to infections, then the family may come and stay with the child in their room in the unit for a few days. The staff members organise the additional services that the child may need, and all the children attend school and activities outside the unit.

The Municipality is responsible to assess the needs of the family and identify which services may be most suitable for each family. It is also responsible for funding these services, offering a service voucher to the family or allowing the family to go through a public procurement process. When families have specific preferences, which may not be offered by the Municipality, they may go through a negotiation process with the Municipality. Some families may also decide to pay for the services themselves, without the financial support of the Municipality.

KVPS services are certified according to the ISO 9001 standard. Public authorities monitor the quality of the services implementing different monitoring systems depending on the municipality in which each service is delivered. They also perform quality assurance assessments for the families receiving their services as well as impact assessments for the children they support. They also offer opportunities to their users to provide feedback regarding the services on multiple occasions.

The support needs of individuals:

KVPS supports children with disabilities and their families. Each individual has specific support needs based on which their services are developed and provided. They support children with multiple diagnoses and they have recently seen an increase in children with neuropsychiatric needs and disorders.

Page | 10

The approach:

Each Municipality and its social workers assess the needs of the families and develop a customer service plan, updated every few years. Based on this assessment, the family is referred to KVPS, the staff of which is then responsible to implement an individualised assessment and discuss specific needs and preferences with the family, in cooperation with the Municipality. The Municipality may have the main responsibility of identifying the needs of the family, but KVPS works with the family to develop their individualized service plan.

The staff:

KVPS is a training and expertise dissemination centre, which organises face-to-face or online training sessions. They also organise peer-to-peer groups for the personal and professional development of the staff. The online courses support carers to identify ways of working, in line with the values of professional carers, provide strategies on overcoming challenging situations, ways of collaborating with the family of each child, and other skills required by the legislation.

Strengths and Weaknesses

KVPS services offer person-centred support based on the needs and preferences of each family, with skilful and professional staff. The administrative workload per family is rather heavy, as an individual contract needs to be signed between the municipality and KVPS services for every family. The families that are supported by KVPS trust the services provided and KVPS has developed cooperation mechanisms, which are key for their work with the families and the Municipalities. In Finland, self-directed support and a personal budget will be developed, which will support the further development of these services. One of the main challenges faced by KVPS services is the risk of fragmentation as not all Municipalities offer all the types of services provided by KVPS. Regarding the services, home carers support the families and the children with disabilities, yet this service is not the most appropriate for children with higher support needs, requiring constant care. Although the personal support circle may assist children with higher support needs, it is an expensive service that some Municipalities cannot afford, and may also be disruptive for the family, as this service requires the constant presence of an external person in the family home. Moreover, there are challenges in recruiting more professional family carers and the care units are not yet mainstreamed, however there are indications that more units may be developed in the coming years.

Further Information

Service Foundation for People with an Intellectual Disability (KVPS)

Petra Rantamäki, Project Leader

<https://kvps.fi/english> / petra.rantamaki@kvps.fi

2.1.2 Family support and foster care services – Amalthea, Czech Republic

Background Information

Amalthea is a non-governmental not-for-profit organization operating in the Pardubice region of the Czech Republic. The organization provides social, educational and therapeutic services to families with children, and ensures social and legal protection of the children. It was founded in 2003 providing services to children and their substitute families; in 2007 it started offering support services to children and their families; in 2011 it launched a program to recruit more foster care parents; and in 2012 a program to support pregnant women and their partners.

Amalthea's services are based on the belief that the best place for a child's life is in a family, either biological, adoptive, or foster. Its main goal is to increase the satisfaction of children in the family and prevent institutionalisation, therefore a comprehensive network of services has been developed to support the children and their families. Its services help to prevent the placement of children outside their own family, support future mothers and their partners, as well as young mothers with little children facing challenges. Amalthea also assists foster families and offers alternative care services and support. Moreover, it educates professionals and the general public through awareness-raising campaigns and introduces innovative methods of working with families and their children. Amalthea also supports other organizations that provide similar services.

The model

Overview:

Amalthea operates two main services that are mainly aimed to help children live in a family-based environment by either empowering the biological families or strengthening foster care.

1. **Support services for the biological families and their children** are currently offered to 100 families and 224 children. The families can be referred by the local government childcare services, the school of the children, the physician of the family, or another organization but they can also seek support on their own. The services offered depend on the needs of the family. They may support families to manage the care of their children and learn how to better cope with challenging children's behaviours, reinforce the relations within the family, and help arrange external services to assist families in their negotiation with authorities, such as supporting them in defending their rights. Moreover, they may assist with other types of services, such as support families with financial difficulties by identifying ways to increase their income by receiving benefits/

allowances or negotiating with creditors for their debts. Other services offered include finding volunteers to help tutor the children or accompany them in their leisure time activities and offer material support, such as food, toys, school aids.

Moreover, the organization may also work as a mediator, once parents are divorced, ensuring that children maintain the connection with both parents. They also facilitate meetings, called “family conferences”, using the least invasive process and guiding the family in finding solutions to their challenges alone. They also work closely with the schools of the children, arranging meetings between the family, the school and, if appropriate, the child to identify the needs and challenges of the child and create an individualized plan. Lastly, they offer day childcare services to encourage mothers to find and maintain employment. If the family cannot ensure appropriate care for the child, despite the support provided, the organization supports the transition of the child to a substitute family, while ensuring that the connection of the child with their biological parents is preserved.

- 2. A Substitute Family Care Center** currently supports 104 children and 76 foster care families. Through this centre, Amalthea offers short and long-term foster care for children who must be separated from their families. In the short-term foster care, children live with a family from 1 month to a maximum of 2 years until a foster care family is found and then they move to the long-term foster care family. The organization holds awareness- raising events to recruit more foster care parents, who after an initial assessment undergo training before they can foster a child. The organization facilitates the meetings between the child and the potential foster care family, to ensure a smooth transition for the child.

Supportive Services are also offered for the foster care families, as foster care parents play not only a parenting but also a therapeutic role, as they support the child to overcome challenging situations. These supportive services may include crisis intervention, counselling, support in communicating with other services, training to the foster care parents, respite services during afternoons or weekends, as well as support at home, and help children maintain their relationships with their biological families. Foster care parents receive financial support from the state which is equal to an average monthly salary. Additionally, short-term foster care families are granted higher financial support.

Amalthea’s services are co-financed by the state and other financial sources and belong to the Ministry of Labour and Social Affairs and the Ministry of Education. There are several internal and external monitoring mechanisms for the operation of the organization, such as peer supervision, case management interventions, methodological supervision by an external body, expert supervision and community planning. The practice abides by the legal procedures

of the Czech Social Security Administration and Law 401/2012 of the Office for International Legal Protection of Children.

The support needs of individuals:

The supported families may live in unfavourable conditions, such as temporary housing settings; parents may have been institutionalized in the past and do not have the necessary skills to care for their children. Support is also provided to parents with illnesses, domestic violence victims, families who have placed children in institutions in the past and parents with substance abuse history.

Page | 13

The approach:

Each family is assessed by the social workers of the organization, who evaluate the situation of the family and children, including the risks that may be involved. In the second phase, an individualized plan is created with the family, which includes the wishes and the priorities of the families. Based on this individualized plan, social workers visit the family in their natural environment, where they offer support tailored to the family. The support is provided to the families until they are capable of caring for their children and managing their everyday lives independently. Amalthea follows the principles of interactive case management, while interconnecting the different services delivered to the families and the children. They work closely with the families and they interactively involve them in the services. They also use person-centred approaches, such as eco-maps, life books and different therapeutic approaches.

The staff:

The organization employs 34 staff members, mainly social workers. Methodological supervision sessions are held every month both individually and in teams, and there are ongoing training courses with professionals from relevant professional fields.

Strengths and Weaknesses

An identified challenge is that there may be occasional mismatches in the foster care program, due to the fact that foster care parents may use services from different organizations. For example, foster care parents may be assessed, recruited and trained by one organization and then supported in fostering a child by another. Amalthea believes that the organization which is responsible for assessing, recruiting and training the foster care parents, should also be involved in matching the foster care parents with a child. Therefore, Amalthea focuses on improving and ensuring ongoing cooperation in the social sector and interconnecting the different services received by families. Moreover, it aims to use new approaches and methodologically develop new practices. The organization is underfinanced and under constant pressure to secure enough financing to cover its existing programs and ensure the continuity of services.

Further Information

Amalthea

Hana Slezáková Kadlecová, Fundraising and PR

hana.slezakova@amalthea.cz / <https://www.amalthea.cz/>

2.1.3 Support services for families with children, including children with disabilities - Slezská Diakonie, Czech Republic

Background Information

Slezská Diakonie is a non-profit, faith-based organization that supports individuals with different support needs. It was first founded 30 years ago but its foster care program was initiated in 2013, when the foster care law was implemented. Services are offered to persons with disabilities and mental health challenges, children and their families, including families with children with disabilities, to older people and homeless individuals. Additionally, the organization offers a foster care program, education settings for children with support needs and operates as an accredited educational institution providing training to both its employees and other organizations.

The organization operates 200 centres covering the east and north part of the Czech Republic. They provide many services, such as personal assistance, day care centres, independent living support to individuals, housing, social rehabilitation services, respite care, support to domestic violence victims and many more. In this document three of their services will be presented: The support services for families at risk; the foster care program; and the assistant worker for families with children with disabilities.

The model

Overview:

Slezská Diakonie operates the following family and children support services:

1. **The Family Support program** includes services to support families at risk, which need support to overcome their challenges. These families are mainly referred by the local authorities and it is compulsory for them to receive support from an organization, such as the Slezská Diakonie. The families are supported in their natural environment, whereby a social care worker visits the family as frequently as needed by the family. The services offered by this program, are based on the individualized needs of each family, such as financial support, support with the tutoring of their children, support to parents with substance abuse issues.
2. **The foster care program** includes short-term and long-term foster care. Once children are separated from their biological families, they are placed in temporary foster care for up to 1 year and then transition to a long-term professional foster care where they can stay until their adulthood. Currently, there are 200 families and 250 children supported through this program. Each foster care family have their dedicated social

worker, who visits the family once or twice per month based on the needs and preferences of the family. The social worker works closely with the child to help them understand their life story, including the reason why the child was separated from their biological family and what the future prospects are. Through “assistive contacts” with the support of the social worker, children can be in contact with their biological family if they so wish or prefer. The organization provides respite services, as foster care parents are entitled to a 14-day “break” under the law, during which the organization cares for the children. Furthermore, foster care parents participate in a mandatory 24hour training program, as well as courses and meetings, and receive psychological support and legal services, as required.

3. **The Assistant worker program** whereby a social worker supports a family once they have received a diagnosis for their child. This service may be provided from the birth or early childhood until the age of 7 years. After that, there are other support services provided by the organization for the support of the children and their families. The main role of the assistant workers is to provide mentoring to the family on how they may organize their life and the support services for their child. They provide psychological support to the families and organize weekend retreats for the parents where they have the chance to connect with other parents who face similar challenges and, thus, create a support network.

The organization is supervised by the Ministry of Labour and Social Services and operates according to the quality standards set by the Ministry. The services provided by the organization are inspected by auditors of the Ministry. Additionally, Slezská Diakonie hires an external expert to evaluate and monitor the quality of services provided, who also advises the organization on how to manage the challenges they face. Finally, the organization also performs internal audits using questionnaires to measure the satisfaction of users with the services they receive and arranges face-to-face meetings to evaluate the staff.

The support needs of individuals:

The organization supports families with different needs, who may face challenges that could endanger the care provided to the child, such as financial difficulties, parents with substance abuse disorder, or families requiring support with the tutoring of their children.

The approach:

The social worker who is assigned to the family will first assess the needs of the family in order to draw up an individualized plan which details the support services that will be provided to the family to overcome their challenges. The organization provides a range of support services that meet most of the needs of the families, from 1:1 psychological support to day care centres or respite services for the children. Each of the services is based on the organization’s values which are to offer a personal approach, as every user has their own identity; to treat users and employees with respect; to be a responsible organisation providing transparent services;

to create an environment for personal growth where everyone contributes and works as a team member.

The staff:

The family support program employs 39 staff members, the foster care program 14 and the assistant worker program 54. The programs are mostly supported by social workers and psychologists as well as auxiliary staff, based on the needs of the organization. Moreover, part-time trainers are hired on fixed-term contracts to support the training of foster care families. The organization offers training to its staff based on their individual needs, which may be held by the organization itself or other organizations. Additionally, staff members are offered the opportunity of coaching.

Page | 16

Strengths and Weaknesses

The main strength of Slezská Diakonie's services is the willingness and commitment of the staff providing support services to the families. The staff is supported through training and coaching to develop their skills, however, due to lack of funding, they participate in short-term trainings and their overall professional development may last longer. As the organization offers a range of services, the same families may use different services based on their needs. However, due to legal limitations, the services are not allowed to communicate the progress of each user of the services among them and this lack of communication creates challenges in the services delivery. In the Czech Republic education services fall under the Ministry of Education while social services under the Ministry of Labour and Social services, but there is no cooperation between these two Ministries, which is also reflected in the services in the field. Due to this absence, Slezská Diakonie faces difficulties in communicating and cooperating with the schools of the children who receive support services from the organization.

Further Information

Pestouni, Slezská Diakonie

Ester Heczková, Head of the Foster care program

pestouni.vedouci@slezskadiakonie.cz / <http://pestouni.slezskadiakonie.cz/>

2.2 Persons with disabilities

2.2.1 Preparatory program for the independent living of individuals – Margarita, Greece

Background Information

Margarita is a non-governmental organization, operating for 40 years, which supports individuals with intellectual disabilities, aged from 15 to 50 years. The vision of the organization is to promote the equality of persons with intellectual disabilities within society. Margarita has a multi-level and scalable program based on three pillars:

Page | 17

- Development of independent living skills by implementing training in daily life skills, such as self-care and hygiene training, household, cooking and communication skills development and by offering education in independent living in the community in real conditions.
- Community-based education, such as traffic education, use of public transportation and other community-based services.
- Vocational training and inclusion in the labour market.

The main goal of the program is the transition of people with intellectual disability to the adult phase of their life, as active citizens included in the community.

The model

Overview:

Margarita has implemented a Living in the Community program for the past 7 years, which supports individuals with disabilities to gain skills that are essential for their lives in the community. The program is divided into two phases:

1. A five-hour daily program for 30 individuals from Monday to Friday providing training in daily living and social skills.
2. A community living training program, based in an apartment at Pagrati, Athens, offering a two-day training in independent living to alternating groups of four beneficiaries, based on a continuous rotation schedule.

During the first phase of the program, individuals participate in daily living skills training, which includes self-care and hygiene training, household management, as well as the development of communication skills. Moreover, during this first phase of the program, users are trained in using community-based services, including public transportation, doing the shopping and moving safely as a pedestrian on the street. When the individual is ready and has acquired specific skills, they can move to a second phase of the program, where they live in a house for 48 hours putting in practice the skills they acquired during the first phase of the program. In this second phase, individuals are separated into groups of four and participate in the 48h training program based on a rotating schedule. The purpose of this program is to train and

prepare persons with intellectual disabilities to live independently with the ultimate goal to either transition to community-based living, or their own apartment or continue living with their families and avoid institutionalization later in life.

The organization is supervised by the regional authorities and, indirectly, by the Ministry of Labour and Social Affairs and the funding of the organization varies, as its activities are supported by state and insurance companies' funds, in-kind donations and financial contributions from the beneficiaries.

The support needs of individuals:

The needs of Margarita's service users are related to socialization and inclusion in the community. Through the program, they familiarize themselves with activities related to the community life as adults, they develop their communication and collaboration skills with peers and learn how to make decisions about their lives, supported by an individual life plan.

The approach:

The service users are engaged in the preparation of their individual plan and are supported in the implementation of their wishes and requests. The individual plan is updated regularly - usually every six months - and is a key element in the daily work of the staff. The family of each individual also play an essential part in the implementation of the individual plan. The services provided to each individual vary in frequency, depending on their individual needs, and following a person-centred approach. The individuals are called to make decisions and choices ranging from their personal choice of entertainment to their future life based on a Supported Decision-Making model. At the start of each week, the designated group of beneficiaries, who will participate in the current week's living in the community training program, meet and make decisions about the 48h program. These decisions may include the purchases which need to be made all the way to different options of entrainment, and based on those they calculate their expenses. They are also separated in different groups, such as "the tenants' group" or "the assembly group", whereby different options are provided to individuals with higher support needs, and they are encouraged to decide by making choices. The users of Margarita's services are included in the community, as Margarita's programs encourage the participation and presence of each user in the daily community life. Margarita also offers vocational training and opportunities for its users to enter the labour market.

The staff:

Margarita employs 15 members of staff, special education teachers, a social worker, a psychologist, an occupational therapist and a psychiatrist. The program is supported by auxiliary administrative staff on a case-by-case basis. The staff is supported with training delivered by the organization, participation in conferences of European Organizations, such as EASPD, EUSE, EPR and other training activities of NGOs and/or other scientific bodies in

Greece, participation in ERASMUS+ programs for persons with disabilities and individual supervision and facilitation of the staff in completing postgraduate studies.

Strengths and Weaknesses

Margarita's model consists in a preparatory program for individuals before they transition from institutions to community-based living. Currently, community-based living options in Greece are limited and, in many cases, individuals continue living with their families even after the completion of the training program. However, although they remain with their families, they have acquired essential daily living skills that help them to care for themselves and avoid institutionalization later in life when their parents will not be able to provide them with adequate support. Furthermore, Margarita's model offers a connection between theory and practice, as individuals are trained to acquire skills that they can later put into practice in a supported and supervised environment. The supported decision-making and person-centred approaches are key elements, which support the implementation of a community integration program. However, the outdated medical-centred financing system of services hinders the inclusion of models, such as Margarita's, ongoing funding programs. The absence of community-based living options makes it difficult for individuals to transition to independent living.

Further Information

Margarita, Vocational Training Center
Ioannis Bistas, Head of the Educational Department
g.bistas@eeamargarita.gr / www.eeamargarita.gr

2.2.2 A holistic approach enabling individuals to live in the community – Community for all, Keystone Human Services, Moldova

Background information:

Keystone Human Services Moldova was founded in 2004 by the Keystone Human Services International Association with the aim to contribute to the social inclusion of people with disabilities, children with special educational needs and those at risk. To this end, the organization supports the deinstitutionalization and inclusion of the abovementioned groups in mainstream community-based services; the development of community-based alternative social care services; the development of the legal framework to ensure the sustainability of the reform in the field of social protection and social assistance of persons with disabilities; and activities to prevent and combat discrimination against the abovementioned groups.

Keystone Moldova works with the Ministry of Health, Labour and Social Protection to assess the needs of children and adults with intellectual disabilities and their families; to map the existing social services and set up new ones; and to develop community-based services, for

individuals with higher support needs. The organization also supported the national authorities to develop the transformation plans for residential institutions. The practice was nominated by the Zero Project in 2019 as an innovative Practice on Independent Living and Political Participation / A Holistic Approach that enables people to live in the community and also as a Promising Practice in Inclusive Social Housing in Europe within the TOPHOUSE Project.

Keystone Human Services Moldova (Keystone Moldova) implements the program “*Community for All Moldova*” in partnership with the government at local and national levels with the support of Civil Society Organizations. The program aims at supporting the reforms of the Government of the Republic of Moldova in the field of social protection of persons with disabilities. Moreover, the program was created through the established partnership between Keystone Human Services International in the United States, Keystone Human Services in Moldova, Moldova’s Ministry of Health, Labour and Social Protection, the Open Society Foundation, the Mental Health Initiative and the Soros Foundation at Moldova.

The model

Overview:

The Community for all Moldova program operates based on a holistic approach enabling people with intellectual disabilities to live in the community. It promotes the social inclusion and deinstitutionalization efforts of the users transitioning from institutions to their families or into community-based living and provides them with services at a community level, including education, health care, and labour services. In addition, the program offers comprehensive services to people at risk of institutionalization.

Keystone Moldova offers three types of community-based services:

1. **Supported Living for four families living independently** in their homes with their children, receiving assistance 2-8 hours per week based on their individual needs. These houses were either purchased by donor contributions or inherited by the users’ families. The type of services offered are social and psychological support and guidance.
2. **Supported Living for individuals with intellectual disabilities.** Seventeen individuals in total, aged 23 - 45 years, living in five different settings located in different geographic areas are offered 40 hours of support per week. The level of support is gradually decreasing; in the beginning during the transition period, the users received 60 hours of support per week.
3. **Supported Living for individuals with severe disabilities and high support needs.** Forty individuals in total, aged 18-35 years, in eight different settings are offered ongoing 24h support. The services focus on basic needs, such as meals and hygiene care, rehabilitation, physiotherapy, and nursing.

The Ministry of Health, Labour and Social Protection is responsible for the legal framework, the monitoring and evaluation of the services and their users. All the services provided are accredited for their quality and sustainability by the National Council for Accreditation of Social Services Providers.

The practice receives funding from the State budget and each service belongs to and is run by the local public authorities. In the beginning of their deinstitutionalization efforts, the government could not allocate funds to build community-based services, therefore Keystone Moldova with the support of the Soros foundation purchased 14 properties, which were offered to the public authorities to develop community-based services, which are maintained and monitored by Keystone Moldova. Today, the national authorities have purchased with their own funds 24 additional houses, which are also monitored by Keystone Moldova.

The support needs of individuals:

The individuals supported by Keystone Moldova have lived all their life in institutions and have not acquired the necessary skills to live independently. Their needs range from acquiring independent living skills and building relationships to accessing mainstream services in the community and finding a job. The users of the services are mainly individuals with intellectual and psychosocial disabilities, and require support services for their inclusion in the community, their political and cultural participation, their vocational education and employment, the development of self-determination and self-advocacy. They also need direct support services during the transition period from residential care to community-based living.

The approach:

The services users are involved in all phases in the development of the community-based services. From their decision to join the community-based living settings to their everyday life decisions, depending on their dreams and wishes. The decisions are taken in a participatory manner and the staff provides adequate support to this end. For each individual, a support group is established at a community level, which participates in the process of the development of an Individual Assistance Plan alongside the person with disabilities, based on person-centred and human-rights approaches. Furthermore, the services users participate in self-advocacy activities implemented by external consultants that are aimed to empower them, so as to advocate for their rights and roles. Social networks are developed for each user aiming at establishing and maintaining relationships with relatives, neighbours and other community members. All users are connected to different mainstream services, such as vocational education, open labour



market opportunities, community family doctors, mental health community centres, and receive adequate support depending on their needs.

The staff:

There is a community-based service manager and a social worker for each service. Supported living for individuals with higher support needs involves additional personnel, such as social care workers and a nurse specialized in physical therapy. Besides, other types of support are offered on a monthly basis, according to the users' needs, such as psychological, behavioural and mental health support. Keystone Moldova has developed a training toolkit for its staff which includes:

- A 40 hour initial education program
- 20 hours of continuing education per year
- 120 hours of individual and group supervision per year
- Monitoring and evaluation of the services provided.

Strengths and Weaknesses

The model offers support services, based on the needs of individuals in line with person-centred and supported decision-making approaches. It focuses on a social role valorisation philosophy by empowering the users to take over the role of self-advocates, whereby individuals who have transitioned to community-based living act as coaches and support their peers. At a community level, Keystone Moldova raises awareness and advocates for the social inclusion of persons with disabilities, partners with community stakeholders and other CSOs, and develops models of community services based on individual needs, as well as networks for the individuals to promote their rights. Furthermore, the program, through its partnership with the public authorities, encourages the participation of persons with disabilities and CSOs in policy implementation.

Based on the results of the "Community for All Moldova" program, the government approved a National Program on the Deinstitutionalization of Persons with Intellectual Disabilities and established a mechanism for the prevention for institutionalization at a national level. The models of community-based services developed by Keystone Moldova in partnership with the local public authorities are scaled up by the central government through the purchase of community-based properties for 4-6 people to continue the DI reform and contribute to the inclusive living of people with intellectual and psychosocial disabilities.

Despite their awareness-raising campaigns, there is a high level of discrimination against persons with intellectual disabilities at societal level and lack of access to the community, as well as resistance on behalf of the staff in residential institutions. The authorities have a weak interest in partnering with civil society organizations for the development of community-

based services and there are limited capacities of mainstream services at the community level (i.e. educational and health institutions) to address social inclusion issues, as well as scarce financial resources for the development of community-based services for persons with intellectual disabilities.

Further Information:

Keystone Human Services International Moldova Association

Ms. Parascovia Munteanu,

pmunteanu@keystonehumanservices.org / www.keystonemoldova.md

<https://www.facebook.com/keystonemoldova>

2.2.3 Community-based living for individuals with different support needs– Pro Act Suport Association, Romania

Background Information

Pro ACT Suport Association was founded in April 2011 to support individuals with disabilities, formerly living in institutions, to transition to independent living and be included in the community. The association focuses on the deinstitutionalisation of adults with disabilities and offers vocational training services to its users. Through complex but successful partnerships, they improve the living conditions of persons with disabilities.

Pro ACT Suport Association focuses on the deinstitutionalisation of persons with disabilities, offering them community-based alternatives and supporting them in developing skills that will enable them to live independently in society. Its efforts aim at changing the misconceptions about persons with disabilities by including them in the community, as residents in community-based houses, as employers or employees, as neighbours, friends and customers.

The association also provides vocational training to each user in cooperation with other non-governmental organizations and public institutions. It develops and promotes partnership programs to improve the living conditions of persons with disabilities. The General Directorate of Social Assistance and Child Protection Giurgiu is a key partner in the work performed by the Association. Moreover, Pro ACT works closely with the authorities, offering them technical support.

The model

Overview:

Pro ACT has developed 11 pilot services supporting the transition of individuals from public institutions in different counties and regions of Romania to community-based living and is in the process of developing 2 more services. Currently, it supports forty-nine clients, but has assisted in the deinstitutionalisation of more than a hundred individuals since the launch of the first community-based services in 2012. Nineteen former users have successfully

transitioned to unassisted independent living, fully included in the community and in the local labour market. Some services provide 24hour support, others provide support only during the night and in a few services the users live with no additional support. The community-based services which provide intensive support are in the countryside of Bucharest, whereas in the city of Bucharest most of the users attend school or work and live in rented apartments where some receive medium support and others live without any assistance.

Pro ACT cooperates with institutions, where it introduces its services to the residents, who can then decide whether they are interested in such services. When an individual expresses interest, they visit different services, in the countryside or in the city and can stay in each one of them for 2-3 days. This way they can experience the services, meet with the staff or the other people living there and decide if they would like to transition to Pro ACT's community-based services. This initial period might take up to 3 months before they can transition to one of the services. During the transition, there is a team, which supports them and helps them to stay connected with some residents or staff from their previous life in the institution.

The individuals, first transition to a service, which offers 24/7 support, where they acquire the necessary independent living skills. During this time, the staff observes and assesses the needs of the individuals, and after 6-8 months it evaluates their level of autonomy and offers them support based on their individual needs. An individual may transition to a service that does not provide 24/7 support or continue living in a community-based service with 24/7 support depending on their needs. Each individual has an individualised plan, which is drafted in cooperation with them rather by the service alone.

Each service of Pro ACT is different; there are services accommodating only one individual, and others where 2 or 3 or more individuals may live together. Unfortunately, due to financial difficulties, at the moment, there is 1 which supports 8 individuals and another supporting 7 individuals, because not funding has been granted since December 2019.

The practice is supervised by the Romanian Ministry of Labour and Social Protection and the National Authority for Disabled people. At the beginning of the project, it was privately funded by the Open Society Foundation and the Mental Health Initiative, but it is currently financed through the state budget. Since 2016, the authorities contract NGOs to deliver services through public procurement procedures. The organization then applies for the funding of 90% the costs of each supported individual, while the remaining 10% is financed through grants and European funds. The contracts with the public authorities ensure the funding of its services and the costs are covered accordingly based on the cost standards for social services. Moreover, to ensure its sustainability, two social economy projects have been established in two of the community-based living settings, a farm for chicken, turkey and rabbit breeding and two greenhouses. The food produced from these projects is distributed to all the community-based services, lowering food costs.

The practice is subject to internal assessments, established by the national framework, such as satisfaction questionnaires filled out by the users and evaluation forms for the staff. The monitoring mechanism includes annual external audits, as well as regular audits performed by the sanitation, health and work department and the government.

The support needs of individuals:

Pro ACT supports individuals living in institutions to transition successfully to community-based settings, be included in society, acquire independent living competencies and vocational skills in order to successfully enter the labour market. The people supported are individuals with intellectual or physical disabilities, with multiple diagnoses and mental health challenges.

The approach:

The services provided vary depending on the needs of the individuals. The needs of the individuals are assessed, and the support provided is based on person-centred planning with the cooperation of the users and the staff. Personal planning tools, such as PATH and MAPs, are used to identify the needs and the preferences of the users. The practice supports the inclusion of individuals in the community, as the services are located in the community and the users access different community services daily, such as health care services, cultural facilities, local stores. Based on Pro ACT's philosophy connections between care workers, neighbours and clients are encouraged and many of them have developed long-lasting friendships.

The staff:

The staff consists of twenty-six social care workers, two psychologists, a social worker, a career counsellor, a general manager, two regional coordinators, a financial manager, an innovation manager, and a communications officer. An ongoing training program is provided to the staff by international experts in areas such as active support, independent living, how to approach a person with disabilities, and alternative ways of training are also used. Furthermore, it implements monthly supervisory meetings in each service with the participation of the care workers and the clients.

Strengths and weaknesses

Pro ACT's activities and services are considered as innovative models of social inclusion and have been recognised by the Ministry of Labour and Social Justice in Romania, the Essl Foundation, and the Zero Project Conference. The association is a member of the International Network on Disability and has received international acclamation. Furthermore, through partnerships, the organization has further developed its services, such as the "Casa Mihail" project. In this project, the local authorities offered a plot, the Boston's Institute of Human Design in the USA designed the building by promoting a multifunctional house concept,

adapted to cover any need, the Habitat for Humanity in Romania built the house with the support of volunteers, the OSI-Mental Health Initiative financed the building and Pro ACT provides the necessary services to support the users. Despite the organization's innovative model, the quality standards imposed by the state are not as flexible as they should be and public policies need to change to allow further development of the services as such. In addition, the legislation prohibits people with disabilities and legal incapacity to work. The organisation faces challenges with its funding and its staff training.

Further Information

Pro ACT Support Association
Predescu Cerasela Nicoleta, General Manager
office@proactsupport.ro / www.proactsupport.ro

2.2.4 Supported Living Apartments - Greece

2.2.4.1 Sotir, Center of Rehabilitation, Social Support and Recreational Activities for persons with disabilities

Background Information

The Center of Rehabilitation, Social Support and Recreational Activities for Persons with Disabilities, Sotir, is a non-profit organization that was founded by experts and the Association of parents of children with disabilities. It was established out of urgency, to support the right of individuals to continuing education and training, as well as their right to independent living. Sotir aims at providing special education, vocational training, social inclusion and independent living to persons with disabilities.

The Center operates two Supported Living Apartments, a simulation of Supported Living Apartments, three Day Care Centres, two Creative Activities Centres, a gym that provides physiotherapy sessions and a music therapy centre. The services offered by the different departments of Sotir are mainly speech therapy, occupational therapy, group and individual psychotherapy, music, dance movement and art therapy. Sotir also operates six pre-vocational programs, a workshop for the production of seasonal and decorative products as well as jewellery, favour box making, painting, hagiography and weaving workshops.

The model

Overview:

The Center "Sotir" supports the inclusive living of adults with disabilities, by promoting their autonomy and offering an environment that enhances and improves their social and daily living skills. The goals of the practice are to advocate for the individuals supported and their rights and to promote their autonomy and ability to support themselves through the improvement of their daily living skills. The centre aims at improving their social skills and

cultivating a team spirit while encouraging their social engagement and participation in leisure activities based in the community; at ensuring the quality of life of the users based on their personal needs, wishes and preferences; and at avoiding institutionalization and raising public awareness while reducing the stigma and discrimination.

The Centre was first funded by the European Structural and Investment Funds and by the National Organization for Health Care Services Provision (EOPPY), and it ensures its sustainability through a contract signed with the National Public Health Organization, the disability allowances of the users and in-kind donations. Moreover, the quality of the services is ISO certified and the setting, the staff and the users are monitored by the administration of SOTIR and the Administrative District of Health of Central Macedonia.

Page | 27

The model supports a total of 8 adults with intellectual disabilities in two apartments accommodating 4 tenants each. The support services are offered continuously on a 24/7 basis, with 2 staff members per shift. The users are selected based on their socioeconomic and family status in conjunction with the criteria of the organization. A public invitation is posted when there is a vacancy in either apartment, and individuals can express their interest. The interest in joining the practice is mainly expressed by the family of the individual, usually because of the unsuitable living circumstances in their home environment. Sotir supports each individual to decide on their own whether they wish to join the practice, by providing information about the perspective of their new life at the Supported Living Apartments.

The support needs of individuals:

The support needs of individuals vary and so does the support which they receive. Their needs are different and, therefore, the approach needs to be flexible and responsive to their personal needs. As individuals build their confidence or take on more challenging roles, their support needs also evolve. Ongoing discussions and assessment processes ensure that their needs are met. Moreover, the users of the practice receive support to advance their basic skills, which include literacy, numeracy, ability to learn, reasoning and problem-solving, as well as their vocational skills, how to undertake tasks from repairing an item to providing a service that will help them progressively enter the local job market.

The approach:

Sotir's support is based on two pillars. First, the constant involvement of the residents in all household activities, thus advancing their daily living skills and enhancing their autonomy. Second, the ongoing promotion of the social presence of the users in the community and the participation of the supporters of the community in the activities of Sotir, which helps in the social integration of the users and their acceptance by the community. The support plan is individualized based on the needs of the tenants in conjunction with their desires and requests, offering them a person-centred approach. Apart from a daily program, including vocational and daily living activities, individuals also manage their free time by deciding how



they want to spend it, which ranges from going for coffee with a friend to visiting a museum. Their daily meetings with the psychologist of the practice are conducive to a supported decision-making approach that aims at advancing their autonomy and inclusion in the local community. The setting is designed in such a way as to promote and ensure inclusion in every aspect of the users' lives, as the practice is purposefully housed in apartment buildings at the core of the community, which meet all the appropriate requirements for a safe and healthy living of the users.

The staff:

The staff consists of four live-in caregivers working on a rotating schedule, who assist the individuals with daily living activities and maintain the user's emotional and social well-being. The users are also supported by a psychologist via daily meetings, a social worker who supports their interaction with the communities by researching and offering them community referrals, and a psychiatrist, who monitors their medical prescriptions monthly. The staff participates every six months in an evaluation process regarding their personal and professional development, in group and individual supervision by the psychologist and the director of the practice, as well as in continuing education programs to stay up-to-date with recent developments in their field of work.

Strengths and weaknesses

Sotir provides to their users a safe, accepting and empathetic environment, where they feel the warmth of a family-like atmosphere. Strong relationships of trust and understanding are developed amongst the tenants and the staff supporting them, which ensures a quality of life, based on the needs and desires of the individuals. The whole setting resembles the life of an active member of the society including vocational, recreational and leisure time during the day. Sotir, is strongly oriented toward the vocational training of the users and has successfully completed the establishment of the first social enterprise in order to promote the inclusion of its users in the local job market of Thessaloniki and support the high operating cost of the community-based living facilities.

Further Information

Center of Rehabilitation, Social Support and Recreational Activities for persons with disabilities "Sotir"

Thanos Tsavalakoglou, Supervisor and Coordinator of the Community-Based living services

www.kentroameasotir.gr

2.2.4.2 Petagma, Parents Association for the Supported Living of Persons with Intellectual Disabilities

Background Information

Petagma Association was founded in 2002 by a group of families of persons with intellectual disabilities, in an effort to fill the gap in the provision of services that their children will need,

when their parents will no longer be able to provide them with adequate support. Representatives of the association worked in close collaboration with experts and organizations for independent living in the UK and as a result, they founded the first Supported Living flat in Greece in 2007.

As a pioneering service for people with intellectual disabilities, their main priority is to develop and operate Supported Living flats where people with disabilities may live permanently in a socially integrated environment, which provides them with adequate support based on their needs and wishes. Petagma supports adults with intellectual disabilities to live meaningful lives in the community by offering services in community-based settings that do not differ from a typical apartment in the community. Petagma's policies and practices are based on five fundamental principles: Home of One's Own; Choice and self-direction; Community membership; Relationships; and Flexible and tailored services. Self-advocacy groups run on a regular base supporting the users to understand their strengths, their preferences and responsibilities, to know their rights and to learn how to communicate them.

The model

Overview:

Petagma is a family-led non-governmental organization, which is supervised by the Ministry of Labour and Social Affairs and the Region of Western Attica. It implements the quality framework provided by the existing legislation and the internal operating regulations, while it has established ongoing mechanisms and procedures to monitor the quality of services provided, the satisfaction of the users, and the performance of the staff. Petagma has developed a sustainable financing mechanism while receiving regular funding from insurance funds, additional financing from the local government, users' benefits, donations and membership fees.

The model supports twelve adults, living in groups of four in three separate apartments, where support is provided on a 24/7 basis and one member of the staff is allocated for every 2-3 users, while 1:1 support is offered for specific programs or as required. The beneficiaries of the services are selected on the basis of their needs and preferences.

The support needs of individuals:

The service users are adults with intellectual disabilities having different levels of support needs, from more complex support needs to individuals with higher levels of autonomy. The services offered vary, as support is provided in the areas of personal hygiene, home care, and community activities, such as shopping, outings, participation in cultural and sports activities and excursions.

The approach:



Petagma implements a person-centred approach and provides support that is flexible and tailored to the changing needs and preferences of its users. The person-centred plan is developed following a co-production approach, which involves the users and their families in the planning and is assessed and revised at least every six months reflecting its individualised and person-centred character. A risk management procedure enables users to take reasonable risks, respecting their right to risk-taking. Petagma is inextricably linked to the community by offering opportunities for the daily presence and active participation of the users in the community. Moreover, Petagma offers an innovative program facilitating the creation and development of social networks of supports, called the Circles of Support program. This is a relationship-based method of organizing things around a person, which intentionally mimics the natural ways that people build and use social networks in their lives. A member of the staff, called the community connector or facilitator, undertakes the role to track the person's connections and involve people that know and care about the person in their circle. The Circle has a role of being an advocate for the person and doing ordinary things, such as visiting, going for a coffee, sharing the person's interests and in the long term if some really strong relationships of love and care develop some members of a circle of support they might be prepared to stand up for the person in the good and the bad moments of his/her life.

The staff:

The staff consists of three administrative employees, six support care workers, one manager/coordinator of the practice and five persons of auxiliary staff, a total of 15 members. The members of the staff keep abreast with recent developments in their field of work by participating in continuing education programs and individual and group supervisions. Systematic staff evaluations, user satisfaction questionnaires and daily follow-up sheets are used to monitor the quality of the services provided.

Strengths and weaknesses

Petagma's person-centred approach with a clear commitment to social inclusion provides its users with an independent living setting that resembles typical life in the community. The philosophy of the practice is to create a safe and creative environment for the tenants in each of the Supported Living Flats, focusing on individualization and respecting the personality of each individual. Moreover, the small number of tenants in each flat ensures that adequate support is provided, tailored to the needs and preferences of the individuals.

A weakness of Petagma, which is common to many family-led organisations in Greece, lies in the fact that the Board of Directors consists largely of parents of people living in the supported flats, who have an active role in the overall management and supervision of the organization. As these parents grow older and many siblings and relatives do not want a similarly active involvement, there is a risk of creating an administrative deficit. There is a need to expand the

Board with new members and to strengthen the role and responsibilities of professionals while ensuring that the circle of natural social relations of the tenants is kept alive and active.

Further Information

PETAGMA, Parents Association for the Supported Living of Persons with Intellectual Disabilities

Vasilis Kalopisis, Coordinator

petagma@petagma.gr / <https://www.petagma.gr/>

2.2.4.3 ESTIA, Center for Support of Persons with Intellectual Disabilities

Background Information

The Center for Support of Persons with Intellectual Disabilities was first established in 1982. It offers a holistic approach to children and adults with intellectual disabilities, from special education and vocational training to independent living and inclusion in the community. Yearly, more than 80 individuals develop different skills through the vocational workshops of Estia, as well as through social inclusion programs and cultural and sports activities, thus achieving the equal participation of Estia's users in the community. Moreover, Estia uses alternative ways of education, such as drama therapy, to support its users in the development of their emotional intelligence and their critical ability, as well as a mean for self-improvement and self-expression.

In Estia's workshops, individuals are trained in handicrafts, fine arts, confectionery and baking, and weaving. A dedicated computer lab has been set up for the users to develop of their computer skills, such as their ability to communicate and access information on the internet, development of skills in image digitization and administrative assistance tasks. The centre has also developed a showroom displaying the items made by users in the workshops, which is also operated by the users of the services, helping them to obtain skills in sales, customer services, transaction procedures, communication and getting them ready for the competitive employment market. Moreover, in collaboration with companies in Greece, it has developed a vocational rehabilitation program, where more than 40 users have been employed through an internship program or have been hired.

The model

Overview:

Estia is a network of Supported Living Houses in the Community which supports the independent living of individuals with intellectual disabilities based on a person-centred approach. The first house was established in 2010 by donations and state funding and the model ensures its sustainability through participation in funding programs, collaborations, state subsidies, as well as personal contributions, whenever is possible. The practice is

supervised by the Ministry of Labour and Social Affairs, the National Healthcare provider and local government. It refers to a quality framework based on internal operation regulations, the Greek legal framework and Estia's mission, monitored by the Board of Estia and by the local and state authorities.

The model provides 24h support to sixteen individuals with disabilities in total, living in three separate houses, two houses accommodate six individuals each and one house, four. First, the family of the user expresses interest for their relative with a disability to join the practice and then Estia guides the potential user through a preparation phase. Estia uses a gradual integration approach whereas, after the referral of the potential user, informational meetings are organised with the potential user to assess their needs, personality, demographic criteria, as well as get-to-know meetings with the Supported Living Houses and their existing users. After this phase, the potential user decides with the support of their family and Estia's staff if they will join the practice.

The support needs of individuals:

The users of the practice have multiple levels of support needs, such as basic needs, personal hygiene, daily living activities, medical care, support during their external activities, such as recreational activities, participation in events and social interactions.

The approach:

A personal development plan focused on the strengths, needs and wishes of the individual is drawn up in collaboration with each individual, their family and the staff. Self-advocacy groups educate the users about their rights and responsibilities, and support them in the development of their personal plans and supported decision-making. Estia uses a risk assessment process to evaluate the risk of the decisions made by users and weighs their staff's duty of care in full respect of the users' right to take risks. All the users participate in Estia's Day Care Center, developing their daily living, social interaction and communication skills, participating in vocational training workshops, sports activities and speech and occupational therapy sessions. Every Estia's house as unique as every user. The location of each house, the opportunities offered in the community and the personal choices of the individual support the individualized Estia's model of approach. Moreover, established cooperative relationships in the community support the users in achieving inclusion through their participation in community programs, events organized by local authorities or organizations in cooperation with Estia, by building relationships with the neighbourhood.

The staff:

The staff consists of 26 members comprising a scientific director, three operational managers, six caregivers accompanying the users on a 24 hour basis, four staff members that join the practice in the afternoon to support the users in external activities, to maintain their skills. Estia is also supported by two social workers, two administrative assistants, two members in

the program services, three in the accounting department, one security technician, one information technology technician and one driver. The staff participates in continuing education programs and on-the-job training activities to stay up-to-date with recent developments in their field of work, as well as undergoes certification processes.

Strengths and Weaknesses

Building a supportive network in the community is one of the main goals and strengths of the practice. Estia's users are included in the community on an equal basis and are offered multiple options to participate in community-based activities and be integrated in society. Furthermore, Estia ensures the quality of the services by providing high-quality standards of living and by selecting carefully and evaluating the staff. The sustainability of the practice has been a main concern of the organization, as the bureaucracy involved in the financial aspect is enduring. The overprotecting role of the family, which is embedded in the Greek culture, challenges the risk-taking philosophy that Estia desires to implement. In addition, when users lose their family, the Supported Living Houses assume the legal guardianship of the users, which is a challenging situation involving many risks for the staff as they need to make decisions, which exceed their duties. Estia offers continuous training support to the staff, but as the users grow older, their support needs are higher and there is a constant concern and need in anticipating and identifying the future needs of the staff related to the advancement of their skills to continue offering high-quality support services.

Further Information

Estia, Center for Support of Persons with Intellectual Disabilities
Vasilis Kassimatis, General Manager
mirtok@yahoo.com / www.eseepa.gr

2.2.5 Supported decision-making while offering support services – SUPPORT, Catalonia (Spain)

Background information

The Fundació Tutelar Girona, SUPPORT, was created on April 11, 2003, with the main objective to defend, promote, develop and extend the human rights of people with disabilities. Assisting them to pursue their well-being with dignity and to seek autonomy through support services is an essential part of their services. One of the Foundation's objectives is to encourage and promote the creation of programs, resources and social facilities to improve the living conditions of people with psychosocial, intellectual, or cognitive disabilities arising from the aging process. The number of people cared for by the Foundation has not stopped growing and a total of 1,740 people have been supported in the more than fifteen years of the Foundation's life.

Moreover, SUPPORT Foundation offers a variety of services aiming to improve the quality of life of persons with disabilities and the quality of the service provision in this area. Therefore, an advisory service intended for organizations, professionals and individuals has been developed, the "Future Support Forecasting Service", to anticipate the future needs of the persons. Moreover, two commissions have been set up, the Housing and the Leisure - Culture Commissions. The Housing Commission was established as part of the commitment of the organisation to the deinstitutionalisation process in the region of Girona and is comprised of professionals from the different areas of the organisation. It promotes independent living and social inclusion by providing advice to the individuals finding a home and accessing, activating and coordinating the support they need to live independently. The Leisure - Culture Commission aims at facilitating leisure and cultural activities in the community for persons with disabilities and contributes to the improvement of their quality of life, their emotional well-being as well as expanding their social network and inclusion in the community.

Since 2010, the Catalan Civil Code has embedded in its legal framework a legal mechanism, which allows individuals with various support needs to request assistance services without losing or transferring their legal capacity. The framework is called assistance mechanism and individuals may request it during a court hearing, where they can also select the organization or the person who will exercise the role of their assistant. SUPPORT has developed a program called *Assistència* offering support services in the form of assistance to individuals with various disabilities and support needs. The services presented in this paper are delivered by SUPPORT Foundation, but it's worth mentioning that 70 more organizations offer similar services in Catalonia (i.e., SOM Fundacio), and that in total 173 individuals in Catalonia have opted for the assistance service and 86 of those use SUPPORT's program.

The model

Overview:

Assistència provides support services, in the form of assistance, which are individualized to its users, in one or more aspects of life, based on their support needs, wishes and personal preferences. The program aims to provide a support service based on the assistance mechanism, which is requested by the individual through a legal but most importantly voluntary process; to promote an individualized service level agreement between the person and the service provider; and to provide a dynamic, flexible and tailor-made support to the user.

The users of the services may join the practice through the assistance mechanism, retaining their legal capacity, or can be referred from social services with power of attorney in which case their legal capacity is either removed or substantially limited and transferred to the organization. In each case, SUPPORT follows a supported decision-making approach based on

a non-intrusive and non-coercive philosophy, where the individual is the main decision-maker and the service provider supports its own decisions.

The individual determines in which areas he/she needs support, the limits and scope of the assistant's role and defines his/her own personal plan. Accordingly, they can request to change assistant and/or to stop receiving the assistance services. The service's users receive support in different spheres of life, ranging from assisting the person with their Basic Everyday Living Activities, their financial and real-estate management or legal situations. Additionally, as the support offered varies and is tailor-made to the needs of each individual, the services are provided by a wide range of professionals working as a coordinated team. Each area of support -social, legal, financial- serves a different role and purpose and, as such, it can be activated and deactivated by the user depending on their support needs and the level of intensity and complexity of the situation at hand. The services are offered on a 24/7/365 basis, with the operations running from Monday to Friday from 8 am to 6 pm and professionals on call during nights, weekends and holidays.

Page | 35

The organization receives funding through a grant agreement (subsidy) from the public administration on a periodical basis which is calculated based on the support received by each person, taking into consideration their personal situation and other factors. SUPPORT operates as a private non-profit, non-governmental organization and the assistance services are linked to the Department of Justice, the Department of Labour, Social Affairs and Families and it's supervised by the Commission for Advice and Supervision of non-profit legal entities of the Government of Catalonia.

The support needs of individuals:

Assistència provides services to individuals with various disabilities, such as intellectual, psychosocial disabilities and/or cognitive impairments. In more detail, 47% of users are individuals with psychosocial disabilities, 21% with intellectual, 9% with cognitive impairments and 23% with other disabilities or in challenging social situations, such as homelessness. The individuals may live in their own homes, or in residential facilities, while some are also homeless. Individuals with higher support needs may reside in institutions which offer 24h support, but Assistència may still provide them with services and help them overcome challenges, some of which might be with the residential service managers or the housing service providers.

The approach:

The model is based on person-centred and supported decision-making approaches. There is no substituted decision-making in any sphere of life, whether the decision is for a financial or a health-related matter. As mentioned previously, some users are referred to the organization through power of attorney and they lose their legal capacity, in this case, the users might be reluctant and negative to accept the services provided by Assistència. In such cases, the



practice uses an engagement process, where it respects the wishes and preferences of the individual, spends time with the individual, engaging in conversations, until the individual voluntarily asks for their assistance. The individual is involved in all the stages of the decision-making process, from the moment they request support. The users are involved in the design of their support plan in cooperation with the frontline staff, and in deciding by whom, when, where and how the service will be delivered to them. The services are provided in the community and one of the aspects of Assistència's program is to coordinate existing services in the region and ensure that the users have equal access to those services, as the rest of the population. The program acts as a facilitator and promotes the engagement of the users in the community-based services, especially when the person has never accessed them before. The program empowers the individuals to use the services in the future, on their own, without their assistance if possible, and advocates for the individuals in the community-based services.

The staff:

Assistència consists of 89 professionals and based on their job function they support the different areas of the program, legal, financial or social area. The staff is comprised of lawyers, real-estate managers, financial technicians, administrative assistants, social workers, social educators, psychologists and other social care profiles. The professionals are registered in a public registry ensuring their legal recognition and the rights of the users are safeguarded as the assistants are supervised by the court and public administrations. There are opportunities for the staff to stay up-to-date with recent developments, to be involved in European Projects, Dissemination Activities, International Forums and Local Events. They are also supported by group supervision, as part of the Ethics Commission and participate in internal processes, such as the Quality Assurance Plan process.

Strengths and weaknesses

Assistència is an individualized support service provided as a separate service from residential or community-based housing services, allowing the users to be supported by professionals who will advocate for them and support them if they face challenges in any sphere of life. Moreover, while using person-centred and supported decision-making approaches, the practice does not remove, modify or restrict the person's legal capacity, even if decided differently by the court, and it focuses on assisting the person to implement their decisions and personal choices with concrete actions. Assistència has been supporting its users who have lost their legal capacity to regain it and wishes to convert the cases it has received through power of attorney from full or limited guardianship to an assistance mechanism and full legal capacity. It is a model, which can be transferred to other EU countries, advance the implementation of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) and contribute to every country's deinstitutionalisation processes. Moreover, the model improves the quality of life of individuals by ensuring and respecting their rights, and it also represents a cost-effective way to ensure the enjoyment of rights on independent living (Article 19, UNCRPD) and on legal capacity (Article 12, UNCRPD).

Regardless of the increase in the service's users, the program is not publicly known causing a general lack of awareness of the assistance mechanism and the services provided through this scheme. Moreover, the funding is insufficient or not paid in a timely manner and the training provided to the professionals is insufficient.

Further Information

Fundació Tutelar de les Comarques Gironines (FTCG)
Ferran Blanco Ros, Project and Development Officer
ferran@supportgirona.cat / www.supportgirona.cat

2.3 Older persons

2.3.1 Help at Home - Greece

Background Information

Help at Home is a program implemented by the local government aiming to meet the basic needs of social care for the independent living of the older individuals, people with permanent or temporary social problems or health issues as well as persons with disabilities. The program was first approved, coordinated and supervised by the Ministry of Health and Welfare in Greece with the main objectives of investigating, recording, processing and studying the needs of the above-mentioned categories; the mapping of the individuals and their needs; meeting the basic needs of the users by organizing the provision of services such as social care, psychosocial support, nursing care, physiotherapy and occupational therapy; to inform the users of their rights and support them accessing the health and welfare services in the community; and to facilitate their participation in religious, cultural, recreational and social activities. (Art. 13, Law 3106/2003: Reorganization of the National System of Social Care, Greek Government Gazette 30/10.2.2003, Vol. A)

Page | 38

Help at Home was first launched as a pilot project in 1997, in the Municipality of Peristeri, Athens, and with the implementation of the 3rd Community Support Framework it expanded to all the municipalities in Greece with an initial funding period of two years. (Sotiriadou K., Antonopoulou L. (2009), PEST and SWOT Analyses of the Home Care Program in Greece, Hellenic Journal of Nursing Science). Since then, the program has been receiving last-minute renewals with the latest funding renewal in 2020 by the Ministry of Interior and the Hellenic Agency for Local Development and Local Government.

The model

Overview:

Help at Home provides home support services to the older persons and persons with disabilities who live alone, and are not capable to care for themselves. The purpose of this program is for the beneficiaries to live in their home and avoid situations of social exclusion. The individual or someone from their environment can express their interest in joining the program. The social worker schedules a visit to the house of the applicant to identify their needs. Then the applicant files a request to join the practice and collects the appropriate documentation. If the applicant meets the program's criteria, they may join the program. After approval of the application, the program's coordinator determines the frequency of the visits and the services which will be provided to the user, based on their individual needs. The staff provides visits to their houses on a rotating schedule and offers them support based on their needs and preferences. In March 2020, the Help at Home service initiated a new program called "Prevention at Home" for the support of residents in rural and insular areas with under 20.000 inhabitants. It will provide medical examinations in the house of the beneficiaries and



forward the results through ICT systems to their doctors. The staff of the Help at Home service will be responsible for the implementation of all the necessary steps from the initial determination of the needed medical exams to the update of the Personal Electronic Medical File of each user.

The support needs of individuals:

The beneficiaries of the program are individuals with disabilities or older people and are selected based on socio-economic criteria, such as low income and/or absence of a family environment.

The approach:

The support is provided based on the needs of the users in a rotating schedule. The social worker has the overall supervision of the program, assesses the needs of each individual, manages the schedule of visits and the services offered, offers psychological support and conducts research to identify the challenges that each individual faces. The social worker coordinates the activities of the program and documents the services provided. The nurse offers preventive health services, such as measuring and recording their blood pressure, prescribing medicines and accompanying users to their doctors' appointments. The family assistant undertakes the cleaning of their house, supplies them with emergency items from local shops and provides them companionship.

The staff:

Based on the legislation, the staff of each program should consist of at least a social worker, a nurse and a family assistant.

Strengths and Weaknesses

The Help at Home program in Greece has proven an essential service for the support of individuals with needs in their own environment. However, it faces many challenges, such as staff shortages, fragmentation of services, absence of sustainability of the program, absence of the necessary technological infrastructure and inadequate training of the staff.

Further Information

The Help at Home program has been developed through desktop research. For more information, you may consult the references mentioned within the presentation of this program.