

Why is this project relevant?

More than 20,000 Gipuzkoan people have been recognized with some degree of dependence. The current model of provision of home services cannot respond to the desire of people to continue living at home, forcing the decision of getting into a residence care center.

What is our aim?

The objective of the project is that people can stay at home as long as possible with the highest quality of life for them and their caregivers ensuring joint costs of the coordination of services equal to or less than the cost of a residential space.

What is our approach?

We are accompanying three municipalities in establishing networking links to coordinate the agents involved in the care of families, social services, SAD, primary care, employment sector of home and care, personal assistants, volunteering, proximity services and community participation initiatives through the case management methodology.

All this to achieve a person centered care, where the person participates in an active way being the subject of the attention he or she receives.





How we have planned to address the efficiency study?

We are carrying out an experimental randomized study with control and experimental conditions and 5 longitudinal with the aim of describing sociodemographic, medical, psychological and social conditions through time in both traditional/Etxean Bizi frameworks. Participants are 182 people over 65 with a dependency grade II, according to the scale of the Law for the Promotion of Personal Autonomy and Care for people in situations of dependency, and their carers (formal and informal), of the municipalities of Elgoibar, Pasaia and Errenteria

What are we measuring?

We have three assessment protocols: older person, caregiver and case management protocol (more details on the back of the page).

Openness to collaboration

The project is aligned with the new perspectives of Integrated Care and we consider it of utmost importance to be able to contribute not only to knowledge, but also to establish knowledge networks where we can learn about other experiences, share common objectives, practices and results. If you are participating in a project that shares the approach, the objective or observe similar aspects and you are interested in establishing synergistic collaboration, do not hesitate to contact us at the following email:

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Variables Instruments

variables	instruments
Older person assessment protocol	
Historial of Chronic Health Disorders	Extracted and adapted from the international Mobility in Aging Study (IMIAS)
Visual competence	Stardarized visual equity test
Hearing capability	Extracted and adapted from the international Mobility in Aging Study (IMIAS)
Drug intake record	Extracted from Etxean Ondo Project
Depression	CESD-20
Basic Activities of Daily Living	Extracted and adapted from the international Mobility in Aging Study (IMIAS)
Cognitive Status	Mini Mental State Examination (MMSE)
Motor Status	Short Physical Performance Battery
Falls	Fall Efficacy Scale (FES-I) Fall record, extracted and adapted from the international Mobility in Aging Study (IMIAS)
Loneliness	UCLA scale
Satisfaction with care	Client Satisfaction Questionnaire CSQ-8
House arrangement	Extracted and adapted from an developing scale
Caregiver assessment protocol	
	Zarit Burden Scale
Caregiver burden Satisfaction with care	Client Satisfaction Questionnaire CSQ-8
	Ad hoc item
Perceived health	Extracted from Etxean Ondo Project
Care perception	
Quality of life Euro-QOL	
Case management assessment protocol	
Social network	Social network ad hoc questionnaire
Preferences and habits	Religion habits ad hoc questionnaire
Personal relationships	Personal relationships ad hoc questionnaire
Present and future projects	Descriptive qualitative item
Personal grooming	Descriptive qualitative item

Activity schedule

Schedule, provider, satisfaction and evaluation ad hoc questions.

Self management

Service resources