

Case Study 3: Support and Assistance for Those in Need with LAG Orlicko, z.s. – Support for Shared and Informal Care

Abstract



The case study focuses on the project *Support and assistance for people who need it with MAS ORLICKO, z.s.*, specifically the activity *Support for informal carers in home palliative care, including support for survivors and the introduction of a palliative approach in residential social services for the elderly*. The impetus for the implementation of the project was insufficient support for informal

carers, who could not be supported within the existing network of social services, as they were not the target group of social services under the Social Services Act, as well as insufficient awareness of families and limited cooperation of actors. Thanks to the project, support focused on carers was combined with care provided to patients.

Case Study Subject

The aim of the activity is to create a network of support available in the area, which would comprehensively help people in difficult life situations and thus increase their quality of life. The selected activity provides support to informal caregivers of long-term ill and palliative patients, including support for bereaved families. It also supports the introduction of palliative approaches in residential facilities for the elderly. An important component is the mobile palliative care team, which is complemented by mental health experts and, if necessary, also clergy. In general, the project aims to support greater accessibility, quality and sustainability of the support provided. A multidisciplinary team was created to support mobile specialized palliative care, and the capacities of local services were further strengthened. Carers were given the opportunity to practice skills for coping with care in the home environment, clients of residential services for the elderly and their families were informed about the concept of palliative care, and the professional staff of the facility was supported in the implementation of its principles.

LAG Orlicko and partners

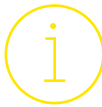
The Orlicko LAG brings together a total of 58 municipalities and has been operating in the region for 20 years. Within the project, the LAG cooperates with a number of partners, such as the Social Care Centre of the City of Žamberk and the Regional Charity of Ústí nad Orlicí. A number of other actors were also involved in the project, such as individual counsellors for carers and survivors, a psychotherapist and a clergyman. It was important to involve organizations that know the target groups and have been working with them for a long time. Participation in the project allowed the partners to develop activities for which they would otherwise not have the resources and capacities.



Co-funded by
the European Union



The target group of the key activity of the project are **informal caregivers of people in the terminal stage of life** and **long-term caregivers**, as well as **providers and sponsors of social** services who involve the principles of palliative care. The benefit of the project was comprehensive support for carers through education, skills training, relief, providing counselling and information on follow-up care. The specific benefits for the target group are summarized in the diagram below.

		
Acquiring practical skills for caring for relatives. Support was provided through a multidisciplinary team.	Stabilization of people involved after the loss of a loved one through individual counselling, provision of information and crisis support.	Raising awareness through the knowledge of target groups by the partners involved and the implementation of seminars.



Support for informal carers

Support for informal carers, who were a marginalized group before the amendment to the Social Services Act, even though their support is essential for the long-term functioning of care in a natural environment, was perceived as an innovation. LAG projects have thus preceded the adopted changes and can serve as an example of good practice for projects supporting carers. The project made it possible to involve a number of experts and tailor the needs to specific people (e.g. individual counselling). An accompanying benefit of the project is also the implementation of lectures for the public, which raise awareness of the issue. In addition to caring for carers, a benefit of the project is also a space for caring for survivors.



"I think that the support for informal carers carried by the LAG is has a clear goal to be able to continue in the service after 6 years of the project. For both projects, and for the palliative, we are talking to the region about changes to the system."

- Representative of the project partner

THE ADDED VALUE OF CLLD

- ▶ **A bottom-up approach** based on mapping needs in the territory, active cooperation with local actors and open discussion. The project involved representatives of the public and private sectors, including social service providers, municipalities, non-profit organizations and other community actors. The LAG is also the driving force behind the local partnership, because it initiated this activity.
- ▶ **Improving cooperation between the partners involved**, through sharing of know-how, networking of actors and linking in the provision of care (e.g. follow-up care). This makes support more accessible and sustainable to target groups. At the same time, expertise is also being built and one of the involved entities could provide mentoring in a follow-up project thanks to this experience. Support for entities that would not be **able to provide financing and administration of such activities on their own** without the LAG project. An example is **the pilot of a palliative approach in residential facilities for the elderly**, in which palliative care is also supported for families of terminally ill people, or a space for the creation of pre-visits and educational activities in field palliative care.



Co-funded by
the European Union



- ▶ **Synergy effect with other programs**, such as NZÚ Light or complementary subsidy opportunities in IROP. **Taking an innovative approach** through a combination of medical, psychosocial and spiritual support. The participating organizations would not be able to provide such comprehensive support without involvement in the project, as multidisciplinary issues **do not fall directly within their system of financing and care provision**

- **Linking interventions focused on caregivers with care provided to patients** through the involvement of organizations that work with patients on a long-term basis. **The flexibility of the project** made it possible to close the blind spots on the socio-health border.
- × The problem is the gaps in the interconnection **between social and health services**, where social services cannot perform medical tasks and vice versa. Unavailability of health care can make it difficult to meet the goal of keeping people in their home environment.

