



Project Number 517927-LLP-2011-IT-LEONARDO-LMP



Education and Culture DG

Lifelong Learning Programme

This project has been funded with support from the European Commission.

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WP1: Research and Identification of Best Practices

Presentation of Romanian report



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Database of publications

- 50 National Publications on health assistance in hospital and at home of patients with chronic diseases and/or disabilities.
- Most of the publications are web articles, but also interviews, articles in newspapers/magazines, researches and laws/legislative articles.
- The publications refer both to the doctor-patient relationship but also to home care and institutional care services, the organization of social assistance, etc.

Case studies

- 3 narrative descriptions from health care professionals
- 2 narrative descriptions from the relatives of patients with chronic diseases

From their descriptions the following conclusions resulted:

1. The communication between doctors and patients is vital from the beginning. The communication should be bilateral, formal, friendly, concise and to the point. The future relationship between the doctor and its patient will depend completely on their communication.
2. Psychological support is highly needed in case of some patients. Most of them refuse medication and therefore is difficult to treat. So using the proper communication tools and establishing a connection with the patient by motivating him, offering hope will increase the chances to receive medication and for the patient's state to improve quicker.
3. When communication is positive and the patient is getting closer to his carer the relationship develops from a patient- carer relationship to a patient- trustable person, part of family. When this trust is developed, the patient accepts treatment, he is more relaxed, his positive behaviour towards treatment helps him progress and overcome easily any problems.
4. The doctor is communicating well with the patient when positive results are visible. Not only communication is important, but also constant preoccupation and high involvement of the doctor towards the patient's state.
5. The medical personnel in charge of patients with mental problems need special training to deal with their patients as they need to develop specific communication skills and techniques.

Best practices

1. COACH BOT- Modular E-Course With Virtual Coach Tool Support

The COACH BOT project aimed at designing and testing an innovative e-learning methodology for adult education that combines the Conversational Agent Technology (chatbot or chatbot) with an ad hoc designed modular learning path.

Pilot e-courses were designed and delivered addressing to home health care professionals, such as medical staff, nurses, care workers and doctors, who constitute the project's direct target group.

Results:

- The e-course “**Enhancing the European home healthcare professionals’ competencies**” was based on an e-learning methodology that allows each learner to build a **personalized learning path**.
 - The complete course curriculum includes 15 modules divided in 4 main areas as follow:
 - A) **Medical issues:** A1 Support Individuals to access and participate in recreational activities; A2 Support individuals in their daily living.
 - B) **Psychological issues:** B3 Communication with elderly people; B4 Communication with dying patients and their family; B5 Communication with patients with hearing disabilities; B6 Communication with patients with seeing disabilities; B7 The relationship with patients family; B8 Establishing an help relationship.
 - C) **National/EU health laws:** C9 Introduction to the main Home Healthcare Worker EU legislation; C10 Home Healthcare Worker UK legislation; C11 Home Healthcare Workers SI legislation.
 - D) **Social/ethical aspects:** D12 Nurse: professional code and ethical aspects; D13 Cultural differences in help relationships; D14 Social care workers professional code; D15 Self instruction and continuing learning.
- More information on www.coachbot.eu

2. GAT4ProVIP - Guidance advice and training for parents and relatives of visually impaired persons

Through this structure the project aimed to give new carers all the practical help and guidance as to how to cope with their immediate problems and how to plan ahead to give the best possible support and future lifestyle opportunities to their partner or relative.

The project tried to address all practical issues the target group need to be informed about for both their short and longer term practical needs, as well as lessening the impact of psychological issues through both a residential course offering contact with experts in rehabilitation and a long term self-help forum group.

Results:

1. A 3 day course to explain physical eye conditions, how to act as a sighted guide, essential steps to take in the home, how best to understand the psychological impact of the event, what support is available.

The courses:

- Training Book 1 – Physical Issues of Visual Impairment***
- Training Book 2 – Psychological issues for the carers of visually impaired people***
- Training Book 3 – Advice, Guidance and Training***
- Training Book 4 – Assistive Technology***
- Training Book 5 – Life Skills and Motivation***

2. A website that further details all the above for long term reference and give links to additional sources of information, help and guidance.

More information on <http://www.gat4provip.eu>

3. Home care services project by White - Yellow Cross Foundation from Romania

The **Home care services** project started in collaboration with the United Way Romania in 2005 with a total of 50 beneficiaries and continued in each successive year until now due to the favorable results recorded. The project won in 2007 award for the best program of the year 2006/2007 within the Civil Society Gala.

The project proposes to provide comprehensive health services to address persons with special needs, mostly elderly, dependent and very dependent residents from Bucharest.

The target group consists of 60 persons / month, with an advanced level of support need (unable to move and / or to meet their own needs). Most of them are elderly persons (54 persons), others are not subject to admission to hospital, or cannot be hospitalized for a long period. Here we find patients terminally ill with cancer and pathologies requiring palliative care.

Results:

Over 90% of diabetic patients will learn to manage themselves and their hypoglycemic medication to manage responsibly their diet

- Acquiring knowledge and skills for self-care to patients who have family
- 100% reduction in family stress caused by patient care in the terminal phase, the team's presence at critical moments
- Independence for the monitoring of physiological parameters and blood glucose in patients with hypertension and / or diabetic
- 20% of beneficiaries will get medication
- Restoring skills in active power and educate family on artificial feeding.

4. Care for the elders

The project proposed the provision of social care and palliative care at home to the elderly, contributing to:

- the development of palliative care services and socio-medical home tailored to elderly patients and based on the principle of equality;*
- to facilitate access of vulnerable groups of elderly to the social care services;*
- developing partnership between institutions that can offer support, innovation and flexibility of specialized services and palliative care social care.*

The beneficiaries were:

- 1. immobilized elders and deprived of care*
- 2. elders that are in the terminal phase of illness;*
- 3. Elderly patients that are in areas without access to social services and medical care for which deprivation leads to worsening of health.*

More information on <http://www.ingrijirevarstnici.ro>

Results:

Quality standards for home care services:

Socio-medical home care

Palliative care at home

5. Quality standards for palliative care services

This is a document in which standards for palliative care services in Romania are presented. The project drafted the minimum quality standards that were born from the desire to improve medical care provided to very vulnerable patient groups and assisted insufficiently, ie those with incurable diseases.

Standards resulted in a set of criteria to be met by any potential palliative care service about to be established and can also be used by health authorities and donors as a practical tool for assessing palliative care services in Romania.

Based on a minimum quality standards in palliative care the costs of palliative care in Romania (February 2010) were calculated.

Also there have been proposals for norms for the personnel working in palliative care services; for palliative care providers authorized and to train nurses in palliative care.

More information at <http://www.studiipaliative.ro/STANDARDE%20INTERIOR.pdf>

Results:

14 principles with a total of more than 30 quality standards



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