Collection of Notable Practices within the frame of the D4 Action Group on Innovation for age-friendly buildings, cities and environments of the European Innovation Partnership on Active and Healthy Ageing, July 2013

Template for Notable Practice

1. General part

1.1 **Pôle Autonomie Santé (PAS) de LATTES**
MACVIA-LR (Contre les Maladies Chroniques pour un Vieillissement Actif en Languedoc Roussillon)

1.2 **Initiative Name**: POLE AUTONOMIE SANTE (Centre of Health Autonomy)

1.3 **Country, Region name/City Name/Municipality**: France – Région Languedoc Roussillon – Département de l’Hérault (34) - Ville de Lattes

1.4 **geographical scope of the initiative**: Département de l’Hérault

1.5 **type of stakeholder** who has submitted the initiative:

| X | Hospitals | ☐ | Primary care centres | ☐ | Specialist physicians | ☐ | General practitioners |
| ☐ | Pharmacists | ☐ | Nurses | ☐ | Day care centres | ☐ | Home care centres |
| ☐ | Nursing homes | ☐ | Informal caregivers | X | Housing organisations | ☐ | Private companies |
| ☐ | Micro-sized industry | ☐ | Small-sized industry | ☐ | Medium-sized industry | ☐ | Large-sized industry |
| ☐ | Research centres | ☐ | Academia | ☐ | NGOs | ☐ | International/European public authorities |
| ☐ | WHO | ☐ | OECD | ☐ | National public authorities | ☐ | Regional public authorities |
| X | Local public authorities | ☐ | Advocacy organisations patients/users | ☐ | Advocacy organisations physicians | ☐ | Advocacy organisations nurses |
| ☐ | Advocacy organisations others | ☐ | Other, please specify |

1.6 Please specify the **target group** of your initiative: **action area 1**

1.6.1 [Please specify the **size of your target group**]

1.6.2 Please tick relevant **category of the target group** of your initiative

| X | Older people in general population | ☐ | Older people using public infrastructure (e.g., transport, buildings, environments) | ☐ | Older people living at home | ☐ | People 50+ |
| ☐ | People living in a municipality/region | ☐ | Local and regional authorities | ☐ | Community awareness and education | X | Senior centres |
| ☐ | People receiving care at home | ☐ | People in day care centres | ☐ | People in care homes | ☐ | People in nursing homes |
| ☐ | Older People visiting general practitioners | X | Older People with a specific illness/disease | ☐ | Older Persons with disabilities | ☐ | Patients’ groups |
| X | General practitioners | ☐ | Specialist physicians | ☐ | Patients in hospitals | ☐ | Nurses |
| ☐ | Formal caregivers | ☐ | Informal caregivers | ☐ | Other, please specify |
1.7 Please tick the type of stakeholders involved in the Notable practice

| X | Hospitals | X | Primary care centres | ☐ | Specialised physicians | ☐ | General practitioners |
| ☐ | Pharmacists | ☐ | Nurses | ☐ | Day care centres | ☐ | Home care centres |
| ☐ | Nursing homes | ☐ | Informal caregivers | ☐ | Housing organisations | ☐ | Private companies |
| ☐ | Micro-sized industry | ☐ | Small-sized industry | ☐ | Medium-sized industry | ☐ | Large-sized industry |
| X | Research centres | ☐ | Academia | ☐ | NGOs | ☐ | International/European authorities |
| ☐ | WHO | ☐ | OECD | ☐ | National public authorities | ☐ | Regional public authorities |
| X | Local public authorities | ☐ | Advocacy organisations patients/users | ☐ | Advocacy organisations physicians | ☐ | Advocacy organisations nurses |
| ☐ | Advocacy organisations others | ☐ | Other, please specify |

2. Relevance to the D4 Action Plan

2.1 D4 Action Plan:

1 Implementing policies and practices for regions, cities and communities: starting from concrete local initiatives, partners bring together their experience in order to learn from each other and promote a better elderly participation, a multi-stakeholders approach, new practices X

2 Networks promoting a European covenant on demographic change: awareness-raising campaign at European level and repository of good examples to create political and technical conditions able to adopt concrete changes to promote an effective age-friendly environment across the EU

3 Spatial context: collaboration between different research centres and programmes in order to better understand the links between elderly people’s well-being and their urban environment X

4 ICT and smart environment: promotion of ICT products and services adapted to elderly people’s needs through the promotion of better access to urban services, higher autonomy and home services

2.2 Keywords: accessibility, awareness raising, stakeholder engagement, elderly people’s voice opinions, falls prevention initiative, chronic diseases, lifelong learning.

2.3 WHO framework “Global age-friendly cities: a guide”:

| X | Housing | ☐ | Transportation | ☐ | Outdoor spaces and Buildings | X | Social Participation |
| X | Respect and social inclusion | ☐ | Civic Participation and Employment | X | Community support and health services | X | Information and Communication |

3. Description of notable practice

Lattes is one of the 31 cities of the Montpellier Agglomeration (410,000 inhabitants). Since 2005, this city (18,000 inh.) has been working in close collaboration with various actors (local authorities, universities, health and social care professionals, companies) to propose multisectoral innovative solutions to enable elderly and/or handicapped people to maintain independent living.

In 2009, Lattes initiated the first free municipal public service in France. It was dedicated to supporting the population in the choice and testing of technical and technological aids: ETAPE.

This service is supported by the Centre Communal d'Action Sociale, a public service which includes local authorities (Town Hall) and delegates of the population, including elderly people. It is handled by 2 therapists, 1 Secretary-documentalist and 2 project leaders. This device was completed in 2011 by the creation of a public space of training, public training center which included an educational apartment and a show room, to raise awareness and train personal and professional caregivers in the proper use of technical aids.

In 2012, this service had responded to the requirements of over 800 people (2/3 health or social carers, 1/3 disabled people or care givers).

The reasons for this success are primarily:
- the professionalism of the players and a multi-stakeholder approach
- high quality and active listening to the needs of the population and practitioners
- pragmatic answers, tailored to each individual/end user and its monetary resources (cash and grants)
- a follow-up and evaluation of the solutions in practice
- a free public service, independent of manufacturers and distributors.

In 2013, within the framework of the EIP AHA Reference Site “MACVIA-LR” (Fighting Chronic Diseases for active and healthy ageing in Languedoc Roussillon, www.macvia.cr-languedocroussillon.fr), and of its action A2 (“Integrated falls prevention clinic”) and B3 (Chronic Diseases comorbidities), a close link between Etape and the Montpellier hospital and University of Sports has been initiated in order to provide help for patients at risk of falls. The objective is to raise awareness and help the population at risk by outsourcing the services and tools of evaluation and rehabilitation of the hospital in order to make contact with the population. This pilot experiment will begin in November 2013, with two experimental towns: Lattes and Prades-Le-Lez.

At the same time Lattes will outsource its step service by creating an antenna in a small city (population 8,000 inh.) located in a remote rural area: Lodève. The aim is to deploy the service offered by experimenting with new intervention methods and to seek economic models based on the pooling of services in the aims to reduce the costs of intervention and to enrich experiences.

Finally, the Pole Autonomie Santé de Lattes has been involved over the past 6 months in a reflection conducted by the Région Languedoc Roussillon with actors of innovation in the domain of “non-drug intervention to active ageing” to create a regional living lab.

In this programme, the objective of PAS is to create a platform for experimentation, observation and evaluation in in situ and in vivo products and innovative services dedicated to autonomy and active ageing in the Montpellier Agglomeration. This program is scheduled to begin in 2014.

4 Innovation, Impact and Outcomes

4.1 Innovative Elements: Outline the key innovative elements of your good practice

The originality of the PAS approach is to try to provide solutions adapted to the real needs of people suffering from loss of autonomy without technical and technological special assistance. This takes into account all of the needs of these people by studying in detail their personal circumstances, their housing, their environment, their income and by seeking the best possible solutions: technical or technological aid, human services, training, etc.

We start from the principle that there is no miracle solution (ICT?) but a set of possible improvements with personalized support and high quality of listening to the needs.

We draw this strength from the fact that our Organization is a free and independent public service of proximity.
4.2 Impact and outcome:
Currently, we are working to develop measurable outcomes of the impact of our work (see 4.3). However, we can already measure the increase in the number of contacts and visitors in our office (2010: 450, 2011: 650, 2012: 800), coming in to apply for counselling and assistance, manufacturers and distributors of technical AIDS to make reference in our showroom, or practitioners wanting to become familiar with our services.

Coaching for independent living: This facility was completed in 2011 by a public coaching centre (with INRS, occupational health and safety - www.inrs.fr). This unit consists of an educational apartment that is used to heighten awareness and to train personal and professional carers with regards to the correct use of technical aids and teaching courses. 300 persons attended courses in 2012.

4.3 Evaluation:
Currently, we have a system of indicators which is fully computerised and therefore needs some work before being operable.

In 2013, we performed a first internal survey of a sample of 50 people who had benefited from our services: the satisfaction rate was 100%!

In the context of the establishment of a regional living lab (see Chapter 3), we are organising an initial exchange of expertise with a regional partner (the Foundation partnership I2ML Nîmes - Mediterranean Institute of crafts of longevity, Ecole des Mines, Ales). We will benefit from their expertise in terms of randomisation and evaluation, and in return will provide them with our experience in applied occupational therapy.

These exchanges will begin in October 2013.

4.4 Success Criteria:
Currently, our main criterion is to increase participation, both locally and at the regional level. We do not yet have an internet site and operate therefore mainly through "word of mouth". This proves our success so far!

However, our goal is to improve the conditions of healthy ageing. The indicators that we wish to implement (see 4.3) will go in this direction to measure the increased length of time that people losing their autonomy stay on at home, their ability to continue to fit into the social life of the commune, as well as the decrease in hospitalisations and drugs.

5 Transferability to other organisations/regions
We expect our exchanges within the D4 group and the study of the other "good practices" to address these issues of regional partnerships.

In September 2013, PAS recruited a project leader to work in this direction. We now await results.

6 Funding source(s) of the initiative:
6.1 Do you use EU-funding?

<table>
<thead>
<tr>
<th>Has the initiative already received some funding?</th>
<th>x</th>
<th>YES</th>
<th>NO</th>
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<td>Has the initiative received EU funding? If the answer is Yes, please specify which EU funding instrument (please tick below):</td>
<td>□</td>
<td>YES</td>
<td>x</td>
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6.2 How do you plan to sustain the initiative?
Currently, the step and step are financed 70% by the municipality of Lattes. The remainder (30%) is funded by public aid - Department and national agencies - in the context of service agreements and INRS.
7. Further information

Contact info:
Contact person: Pierre Martin-Gousset pole.autonomie.sante@ville-lattes.org

Insert links to web pages, documents, brochures etc. (It's no problem if this information isn't in English)
If possible, please include an illustration, picture, chart, etc. to make the document visually more attractive.

Part of our show room:

![Part of our show room](image1)

One of our 2 rooms used for the training of practitioners:

![One of our 2 rooms](image2)