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Recommendations from the Best Practice Catalogue (5.2.8)

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Executive Summary

This deliverable entitled 'Recommendations from the Best Practice Catalogue' is prepared within the ADAPT2DC project, under the WP5 and it is based on the 'Best Practice Catalogue' prepared under O4.1.1 of this project (Ehrlich et al., 2013). Whereas the 'Best Practice Catalogue' aimed at providing an overview of projects that have been established in order to adapt public social and technical infrastructures and services to demographic change, the document 'Recommendations from the Best Practice Catalogue' aims to evaluate the gathered international examples concerning the possibilities of adapting technical and social infrastructures and services to demographic change and give the overall recommendations for the transferability of these good examples across Europe. This report was prepared by the strategic expert team (SET) from different countries represented by the project partners with active input of the Coordinator of the project and some regional partners. This deliverable is aiming to be used when preparing further outputs of WP 5, such as the European Strategy on Demographic Change (O5.3.10) and Transnational Action Plan (O5.4.10).

This publication consists of the following parts:

- Part 1: Introduction - summarizes the purpose of the document
- Part 2: Methodology used for evaluation,
- Part 3: Information and a short overview of the practices selected for evaluation,
- Part 4: Overall evaluation of the practices and transferability,
- Part 5: Limitations of evaluation,
- Part 6: Annex with a more detailed analysis and references.

General recommendations of the report:

1. Most of the practices in the field of social services are based on the principles of citizens' participation and voluntary engagement. Involvement of citizens and their voluntary work with additional fundraising for new activities seem to be crucial success factors of the solutions.
2. Volunteering should be regarded as a clear added value; however, it cannot guarantee sustainability of activities in the long run.
3. In the field of transport, combined school and public transport, DRT, and integrated transport planning can be highly effective for rural areas and should be highlighted during the further work on the project.
4. Regarding transferability of best practices, differences between financing and governance models across Central Europe, especially in the area of transport and public services, should be taken into account.
5. It is also necessary to learn from failed attempts / "bad practices" as generally too little information is available concerning failed attempts and the reasons for failure.

1. Introduction

The Best Practice Catalogue prepared under O 4.1.1 of this project (Ehrlich et al., 2013) provided a collection of international examples of projects with the aim to adapt public social and technical infrastructures and services to demographic change, mostly focussing on shrinking rural regions and cities. Thus, the collected projects are either located in rural or urban regions.

One of the tasks under WP5 was to prepare the report “Recommendations from the best practice catalogue” but it could be only possible via the evaluation the initiatives and projects collected in the ‘Best Practice Catalogue’, which could be used by the project consortium and regional experts, particularly for further work in the WP5.

First, it has to be stressed that various methods could be used for selection and evaluation of criteria to filter a long list of good practices already considered in the submitted report. They are usually based on some conceptual frameworks. For example, in case of health and social care for elderly people, it could be helpful to read: Banks, 2004; Billings & Leichsenring, eds., 2005; Hollander & Prince, 2008; Leichsenring, 2004; MacAdam, 2008¹. Other conceptual frameworks of evaluation may be found for the remaining domains: public infrastructure, inter-communal cooperation as well as other infrastructure and service fields. However, rather than to elaborate an evaluation method, the aim of this report is to share strategic experts’ subjective opinions and comments on the possible use of the practices in further work for the project and to provide useful recommendations for implementation in the project’s partner regions.

The evaluation of the collected best practices is important in a result-oriented environment because it provides feedback on efficiency, effectiveness, and performance of public policies. The most important element of evaluation is transferability, because it enables policy improvement and innovation. Then the solution could be recommended for implementation in the Regional Action Plan and later in the Transnational Action Plan. In essence, it contributes to accountable governance,

¹ I.e. an example could be the evaluation of best practices and projects in social and health services for long-term care done within the project *Advancing Integration for a Dignified Ageing: Fostering the integration of social and health services in long-term care* (AIDA, coordinator: Liguria). Jolanta Perek-Białas was an expert/evaluator of the selected practices in the Advisory Board (Expert Group) of that AIDA project. See more <http://www.projectaida.eu/> [25.01.2014]

being an important factor both in policy formulation, improving the quality of policy intervention and in the budget process supporting priorities and savings. Also, initiatives and projects collected in the Best Practice Catalogue could be used by the project consortium and regional experts, particularly for further work in the WP5. However, in the other WPs of the project like WP 4 on such a topic the Transnational Guidebook also proposes an alternative approach: transferability of existing good practices is just an option that can be considered. A second option is to focus on *policy mobility*, which means that, before being implemented in a different context, the successful solutions proposed by the best practice (or a selection of them) are contextualized, reframed, critically deconstructed and reconstructed.

Nonetheless, not always all information relevant for the project's goals and needed for the evaluation could be delivered in this catalogue, also due to the fact that when the catalogue was prepared, it was not yet decided what the evaluation criteria would be. However, it is still possible to prepare the report by collecting evaluation of presented projects and initiatives by independent experts from the regions participating in the project and give recommendations which could be used in the further work.

2. Methodology

The evaluation of these gathered practices is based on opinions and comments of experts from the partner regions, who were selected on the basis of their background, experience, and expertise in relation to ADAPT2DC goals and earlier experience with the project (i.e. being an expert in other WPs).

The ADAPT2DC strategic experts (WP5) were asked to read the Best Practice Catalogue in the extent related to the assigned subject (see Table 1) and to apply suggested selection criteria (see the template below) to prepare the evaluation of the practices for each subject with the recommendations based on what they learnt from this report.

Table 1. TASK: Evaluation of good practices from the ADAPT2DC Best Practice Catalogue

COUNTRY	RESPONSIBLE STRATEGIC EXPERT	RESPONSIBLE PROJECT PARTNER	SUBJECT
CZ	Michal Tomčík	Ústí Region - PP 5 (supported by PP 4)	Public infrastructure, housing & public buildings**
PL	Jolanta Perek-Białas, Phd	Małopolska Region - PP 11	Health care, social care**
IT	Fedora Gasparetti (substituted by Francesca)	UNCCEM -PP 9	Social Services (except: health care, social care, transport)

	S. Rota, PhD)		
DE	Prof. Dr. Matthias Gather	Thuringia, LP	Transport and Mobility
HU	Zoltán Dorogi	Észak-Alföld Region - PP 8 (supported by PP 14)	Intergenerational cooperation and multigenerational approach/planning**

** no separate chapter in the Best Practice Catalogue –the appropriate best practices from the whole catalogue.

As it was mentioned, one of the key elements of the evaluation is to address the issue of the cost efficiency and/or cost reduction. However, the experts realize as it was stated by the authors of the catalogue that this is a difficult requirement to meet, and the real cost savings were seldom measured directly and so presented.

Additionally, some practices were evaluated by more than one expert, if a specific practice was assigned to more fields, e.g. social service and at the same time public housing or intergeneration solidarity.

Nevertheless, the summary of the work presented below gives the overview of initiatives across Europe and which are of a quality that allows to recommend them for implementation in other parts of Europe. They can be used for further WP5 work as well as for preparing the European Strategy on Demographic Change and Transnational and Regional Action Plans.

3. Information about the evaluated projects - objectives, cost saving information and other relevant information

Below is a summary of the evaluated practices with a short description stating if the practice is considered good enough or some additional information is needed in order to be recommended to other places (including pilot regions).

Social Service (including social care)

Practices	Objective	Cost saving info (Y/N), if Yes what kind?	Other important info for evaluation
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3.1.1.Our shop	Developing a volunteer-driven local supply system and use of an abandoned building	YES, through the activation of citizen voluntary engagement and applying an alternative financing instrument (cooperative). But no information about the current cost and if it is still profitable.	Voluntary engagement of the citizens is the most significant achievement
3.1.2. DORV	Consolidating local social services, use of an abandoned building and establishing a central meeting point in the village.	YES; through the voluntary engagement of the citizens, the establishment of a cooperative and consolidating services in one central place. However, there is a little information about savings and current costs of running centre	Basically there was voluntary engagement of the citizens and gathering the services in one place for a community
3.1.3. Hudson House Enterprise Centre	Combining local services and providing a social meeting point.	YES: The staff of the Hudson House covers all public services offered. Additionally, it covers services of the local police station in the form of a lost-property office.	Income is guaranteed through the fees companies and organizations have to pay for using the facilities of the Hudson House. It is innovative solution: community, business, learning centre, consulting. The web page is under modification and there is no possibility to check the case.
3.1.4. Community Centre SCHWALBE	Providing a city quarter with a community centre for communication, events, and social meetings; use of an abandoned building	YES: Costs can be saved in the project through the efficient sanitation of unused infrastructure and the voluntary engagement of citizens. However, only if this offer is not “on top” of other offers	Community management and availability of national funding programme “Socially Integrative City”

3.1.5. Community Care in the Commune of Lipinki	Ensuring care and support for the elderly who live independently.	YES: subsidizing care of the elderly in nursing homes would be more expensive for the commune/municipality than paying the staff involved in this initiative for all 23 participants.	Community capacity building; the elderly/disabled continue keep on living at their homes
3.1.6. Dual Network Infrastructure for the Elderly	Establishing dual network infrastructure and supporting voluntary engagement for improving the provision of social infrastructure for the elderly	The concept of neighbourly help can be seen as a new, practically oriented provision model on the community level which helps to reduce costs for the society	The project was part of "MORO - Modellvorhaben der Raumordnung" programme
3.1.7. Village shop allgaeu krugzell	Ensuring the local grocery supply and preventing the decay of the village centre	Yes, but not info about current costs	The positive impact of engaging various sources of funding
3.1.8. Dual network infrastructure for the elderly	Network infrastructure and supporting voluntary engagement for improving the provision with social infrastructure		Web page and regional office – as a coordination centre

Based on these cases within the field of social service, it must be noted that most of the examples show the use of abandoned buildings in depopulating regions, integrating services (3.1.1, 3.1.2, 3.1.4, 3.1.7) and the need for a local point providing different services for the community (3.1.3, also 3.1.6). A few cases are different. Best practice 3.1.5 shows services provided at the local level in the place of living, whereas 3.1.8 refers to a regional network aimed at improving the social infrastructure.

Health Care

Best practices	Objective	Cost saving info (Y/N), if Yes what kind?	Other important info for evaluation
3.2.1. Mobile	Offering emergency and acute treatment. The	YES/ The costs for the installation of the	Health care and

dentist	mobile dentist offers her service once a week additionally to the normal opening hours of her dental practice. For the realization of this service a specially equipped car had to be installed.	mobile dentist car were funded by the Federal State of Brandenburg and by the European Agricultural Fund for the Development of Rural Regions. The service of the mobile dentist helps to avoid costs in a long term for extended treatments due to preventive checkups.	prevention
3.2.2. Ambulatory health-care centre	Securing medical care provision in rural areas	YES: The Centre offers several cost saving options: the employed doctors share the electronic instruments. Centralization of the buying costs.	It is interesting to learn how sharing electronic instruments by doctors is organised and using electronic health records. Another feature of the centre is the employment of specially trained nurses that conduct house calls and by that relieve the doctors in their daily work.
3.2.3. Tellappi	Securing health care in remote areas	YES: Expenditures of EU- and national funds and the involved municipalities. The highest expenditures were caused by the investments into the hardware and the software programmes. Especially the introduction of video conferences among the doctors and patients revealed cost saving options, so saving in travelling	Innovative

		costs.	
3.2.4. Securing Medical Provision in Rural Areas	Securing Medical Provision in Rural Areas	Probably YES, but two new practices installed, hence new costs. “Cost savings can be realized through the creation of an efficient system of medical provision and prevention of unnecessary travels of doctors and patients”.	Independent from the cost aspect, there is a need to provide local communities with medical services
3.2.5. Family Doctor Academy	Attracting young doctors to work in rural areas	Probably YES, i.e. savings in travel costs Costs can be saved on a long term through the installation of an efficient system of medical provision and the avoiding of additional costs for travel of doctors and patients by attracting young doctors to work in rural areas.	Innovative – mentoring programmes related to age management measures
3.2.6. SOS-Mobile Medical Emergency Supply	Providing medical emergency help in rural areas around the clock	YES: Private funds “Costs can be saved through efficient organisation and outsourcing of public services to private agents.”	Better organization of medical emergency system

Based on the analysis of these cases, it is surely a great challenge to secure proper and adequate medical services and help citizens living in depopulated areas. Several cases show how it could be solved, e.g. by private organizations. In addition, a better coordination of the existing health care system (with the new technological solutions) and incentives for young doctors could result in “learning by doing” via mentoring system. Cost saving is based on limiting direct travelling to patients and using the technology instead of an on-site practice, e.g. ‘a mobile dentist’. Surely, a better organization of medical help around the clock is a ‘must’ in all regions.

However, even though “attracting young doctors to rural areas” is certainly a very important goal, it may not necessarily reduce costs. It is extremely difficult to reduce costs in the health care system because it is a kind of Service of General Interest (public good) that is obligatory by law and has to be delivered and secured by the authorities. In other words, all countries must provide their citizens with health care (so cost efficiency is not the primary focus). So, the finding would be that opportunities for cost saving are limited in the case of health care and may be reduced for example to “centralization” activities or “mobile” offers.

Transport

Best practices	Objective	Cost saving info?
3.3.1.Citizen Bus Gransee	Securing and improving the mobility of citizens in rural areas and providing access to social and health services	*
3.3.2.Village Mobile	Securing and improving the mobility of citizens in rural areas	*
3.3.3.Citizen Bus Ringgau	Connecting social services and public transport with the help of an individually and voluntarily introduced transport system	*
3.3.4.CARLOS	Connecting the public transport system with the individual transport hence securing mobility and access to relevant services and infrastructures	*
3.3.5.Stop by Need	Avoiding redundant public transport, which results in cost-saving	*
3.3.6. School Transport in Rural Areas	Maintaining the school bus and connecting it with public transport and social services	*
3.3.7. RUTO	Using capacities in school buses and integrating them into the public transport system	*
3.3.8. Samkom	Coordinating the public transport in rural areas, consolidating budgeting and administration of the public transport system	*
3.3.9. New Public Transport Concept	Introduction of a new public transport concept in a rural area	*
3.3.10. Adaptation of Public Transport Service	Saving costs for public transport as a response to demographic change	*

* **Cost savings** - this issue is very difficult to deal with. The authors tried to give some information or estimation of the impact on cost savings, but the estimates unavoidably remain vague. Some best practices mainly try to improve rural accessibility; cost reductions should therefore not be expected. In those cases, it might rather be advisable to indicate whether costs are relatively high or low compared to no service at all (as in 3.3.1 and 3.3.2); other solutions aim at reducing costs, but this generally goes together with deterioration of accessibility (3.3.10) and therefore cannot be directly used as not fit to the overall objectives of ADAPT2DC.

It could be noticed that new communication possibilities also offer new opportunities for synergies / networking / saving costs by combining two existing offers into one. The activities in this field were grouped into general “strategies” (i.e. “ride sharing” and “citizen bus” as example types of strategies) and then the best practices serve as examples or illustrations of them.

With the aim to make additional recommendations below there are some solutions which could be shares as good experience between regions:

- *Citizen Buses*
This issue is shown in the best practice catalogue with many interesting examples dealing with local civil initiatives (3.3.1 – 3.3.4)
- *Rural car / ride sharing schemes*
These attempts also can be subsumed under the roof of solutions by the civil society. In many countries with a poor public transport system, mobility in rural areas is organised with the use of ride sharing sometimes (as in Romania) even in a half formalised, not personalised way. On the other hand, in many “old” member states of the EU car sharing schemes as well as ride sharing are booming due to the possibilities offered by the internet.
- *Demand responsive transport (DRT)*
Very little information is given to this established and well investigated solution for rural areas as a possible backbone of public transport in rural areas. 3.3.5 shows a very interesting example of DRT but with a rather specialised and limited solution. Also 3.3.6 gives some hints to this but it is basically concerned with a specialised solution of employing transport staff.
- *Combined school and public passenger transport*
The example of opening school transport to the public is a very important (though in many countries already extensively practiced) solution for securing transport and mobility in rural areas (refer to the practices 3.3.6 and 3.3.7 in the best practice catalogue).
- *Combined freight and passenger transport*
This has been a well-known solution for decades in many countries and is still practiced in Switzerland and Austria. In some countries combined freight and passenger transport is currently being tested. Despite all problems with these schemes, some attention could have been given to those attempts.
- *Integrated transport planning*
This attempt is probably the most important one. 3.3.8 - 3.3.10 show different solutions either improving demand (3.3.8 and 3.3.9) or cutting costs (3.3.10)

Very little information is given concerning the outcomes and impact of the presented solutions. In some cases (3.3.9) the regional impact is indicated, but other “best practices” such as 3.3.4 do not exist anymore due to the lack of success.

Altogether it is extremely difficult to measure concrete savings in the field of transport solutions, and also the logic and thinking of authorities is often less focussed on cost savings than on providing the service to the citizens (often because it is their legal duty to provide the service to the citizens). Looking at the best practice in this area with the aim of identifying cost savings, the easiest way seems to be a reduction of public services and the hope for civil engagement. However, this is not an easy and always accepted by citizens.

Intergenerational cooperation

Best practices	Objective	Cost saving info (Y/N), if Yes what kind?	Other important info for evaluation
3.1.6 Intergenerational house “Fruits of Society”	Setting up an intergenerational house for bringing together different groups of society and activities.	YES Only general information is provided on the cost-related benefits of the best practice.	<u>Target field:</u> Social service <u>Target group:</u> young and elderly people
3.2.5 Family Doctor Academy	Attracting young doctors to work in rural areas e.g. family doctors and by that tackling the issue of providing health care in shrinking regions.	YES Only general information is provided on the cost-related benefits of the best practice.	<u>Target field:</u> Health care <u>Target group:</u> local communities various age groups
3.3.2 Village Mobile and 3.3.3 Citizen Bus Ringgau	Securing and improving the mobility of citizens in rural areas and avoiding redundant public transport and thus saving costs.	YES In case of Village Mobile exact calculations are provided on cost savings.	<u>Target field:</u> Transport and Mobility <u>Target group:</u> local communities various age groups
3.4.6 Centre of Culture and Leisure for Senior Citizens	Further use of an abandoned school canteen, provision of professional help for the elderly, disabled and low-income citizens in form of day-care, individual and group therapy, rehabilitation for senior	YES Only general information is provided on the cost-related benefits of the best practice.	<u>Target field:</u> Public infrastructure <u>Target group:</u> seniors (however, younger people are also concerned indirectly -

	citizens and cultural offers.		as employees)
3.5.3 Integrated and efficient planning of infrastructure in rural areas	Restructuring existing infrastructure through inter-communal cooperation in order to secure the provision of efficient and user-friendly infrastructure in the future.	YES Only general information is provided on the cost-related benefits of the best practice.	<u>Target field:</u> Inter-communal Cooperation <u>Target group:</u> local communities various age groups
3.6.1.3 Active Energy Concept	Capitalisation of waste products that are emerging in the process of sewage treatment.	YES Only general information is provided on the cost-related benefits of the best practice.	<u>Target field:</u> Other infrastructure and service fields <u>Target group:</u> local communities various age groups

4. Limitation of the evaluation of the practices and transferability

As in the Best Practice Catalogue many information about the practice were given like that the practice is known from the literature or suggested by the region, nevertheless, some additional questions could be interested for those who need to evaluate and then give recommendations, such as:

- at what stage of the development it is? E.g. ended, ongoing, planned; however, most projects are probably ongoing but without indication about the future/perspectives,
- what is the geographical coverage? (population)
- what are the numbers of users? And who they are?
- what is the accessibility of the project/initiative? Who have an access to the project? Who can be engaged in the initiative (by age, by education level, by income)?
- what is the co-financing with others? What is the co-payments of users?
- how many volunteers are involved?
- what are the key success factors making integration and cooperation possible?
- what are the outcomes and impact? Has evaluation of the practice/projects/initiative been conducted including the analysis of cost-effectiveness?
- and most importantly, what is the transferability of the initiative?

And the last question, even it was not direct part of the catalogue, some recommendations already were given in the conclusion section of this Catalogue.

Transferability

Social service (including care)

In general, most of the examples in the field of social service refer to the use of abandoned buildings for purposes of opening new or keeping existing services (usually in one place) for inhabitants. In addition, they include concentration of services and coordination of service network for citizens. **Involvement of citizens and their voluntary work with additional fundraising for new activities seem to be reasons why practices could be considered as successful.** Also, new social enterprises and social cooperatives are established showing how to activate people in the labour market. These cases demonstrate that even if the public sphere is weak, the citizens may be motivated to cooperate in doing something for themselves. Hence, the initiatives could be examples for others to think about such buildings and change their activity/adjust their past or current use for the new/future demand. Often such cases are examples for similar local level units within the same and others regions, within the country and in Europe.

In fact, a number of initiatives are valuable due to the fact that the citizens decided to run the projects/initiatives. **And voluntary action is good, but only as long as there are volunteers which cannot be guarantee for the future.** However, **there should be additional evidence that it is financially sustainable in the long run.** For those who would like to use these examples in their regions it could be more convincing to see costs directly, not only the positive 'soft' impact of the practices. As it was stated in the catalogue the cost issue often was not referred to and/or measured; also that some of the projects base mostly on voluntary engagement of citizens and it was evaluated critically in the best practice catalogue.

Thinking about transferability to other regions, the chosen practices from the field of social service represent concrete examples concerning the possibilities of adapting infrastructure and services to demographic change and at the same time addressing the issue of cost saving in the areas characterized by remoteness and isolation of the territory. For instance, this is the case of the upper Po Valley where a structural condition of marginalisation from the main urban and productive areas within the region is combined with a strong demographic shrinkage, high mortality rate and the consequent very high age dependency ratio. In this context, best practices such as Community Care in the Commune of Lipinki (3.1.5.), focused on the care of the elderly living independently, or Our shop (3.1.1.), to the development of a volunteer-driven local supply system re-using an abandoned building, could be very successful as they are based on the reinforcement of existing capacities allowing independence and a cost-effective action at the local level. At the same time, however, transferability inevitably remains a challenging task. For instance, the dual network infrastructure²

² Dual network infrastructure was described in one of the projects described in the Catalogue which aim was to establish dual network infrastructure and supporting voluntary engagement for improving the provision with social infrastructure for the elderly. The networking of regional competences and the linkage between voluntary engagement and professional work were central parts of this project. This could be realized amongst others through the establishment of a network of the elderly and the development of a general principle. Therefore a website was developed that functions as information and communication platform; additionally the public and political level were sensitised for the significance of establishing networks for improving the provision of the elderly in the communes. Another central instrument was the installation of a regional coordination office. It is responsible for initiating projects related to the maintenance of network infrastructure

for the elderly can be successfully replicated, but it is necessary to ensure sensitization to the importance of ICT for sharing information.

Most of the practices in the field of social services are based on the principles of citizens' participation and voluntary engagement. On the one hand, individual members of the local community are involved in the decision-making and they can influence the institutions and programs that affect them. On the other one, voluntary community organizations are formed by local residents responding to local conditions. What pushes them is the mutual concern about their own community and the persuasion that, collectively, they can change things for the better. Even when adopting a nationally sponsored model, the local community shapes the organization to fit its own needs and to operate in its unique context. This is the concept of "Our Shop" and DORV projects, whose main strength is the mutual participation and engagement of citizens that is translated into a cooperative operating for the common interest. Again, this scheme can be suggested for replication in small villages, like Ostana in the Po Valley region, which face the problem of the local supply system. Hudson House Enterprise Centre and Community Centre SCHWALBE are also based on voluntary participation of citizens in order to provide the local community with public services. The partnership model and the functioning mechanism of the Hudson House guarantees an income that allows independency and sustainability in the long term, representing a very good practice in the sector of social services. SCHWALBE Centre is supported by a public funding programme and it is focused on the reuse of an abandoned building as a space for social meetings and participation. Despite the fact that it is related to urban space, the principle of cooperation and integration between the local inhabitants with the aim of promoting and contributing to the changes of the local context can be transferred, through the active involvement of inhabitants, also to rural and mountainous areas, characterized by social segregation.

In case of the organization of community care for the elderly and disabled, the example of Lipinki (in Poland) shows how a municipality, which does not have its own care centre or nursing house providing help for the elderly and disabled, can ensure care and support for the elderly living independently by developing a cost-saving solution: instead of paying for services in the care centres of other cities, the municipality of Lipinki decided to pay for home/domiciliary care services to all 23 participants involved in this initiative. That would allow the elderly/disabled to stay in their familiar environment. Moreover, a calculation was provided that subsidizing care of the elderly in nursing homes (which is a responsibility of local authorities) would be more expensive for the commune. Again, this initiative is transferable because it is cost-effective, it is based on the reinforcement of existing capacities within the community and it allows a higher degree of independency from external service centres.

However, in the field of social and care services, sometimes simple solutions could be introduced in other places, e.g. the dual network infrastructure for the elderly in Neumarkt i.d. Oberpfalz /Bavaria, Germany. This project can be seen as a new, practically oriented provision model on the communal level, which helps to reduce costs for the society. The project showed that it is important to qualify,

and the support of voluntary engagement, for the fostering of the networks and the passing on of information within the network. The project showed that it is important to qualify, supervise and award those citizens who are voluntary engaged (based on description of the project from the Catalogue, p. 12).

supervise and reward those citizens who are voluntarily engaged. However, it also showed that a key condition of transferability is the existence of local technical capacities and network infrastructure, and a well-spread use of ICT as a central instrument of sharing information.

Health care

The organization of mentoring practices (e.g. by more experienced doctors to their younger colleagues) is absolutely necessary, as it can facilitate the process of integration and support of the staff in the field of health care. And such programmes (such as Family Doctor Academy) can be successfully adopted in many regions in Europe but again, the every time the cost-saving aspect has to be proven. However, supporting decisions from the local authorities and strong cooperation between local authorities and universities are required. In case of health care (e.g. the Family Doctor Academy), for instance a few-week-long practice under the initial supervision of a family doctor could be integrated in the medical training. Subsequently, the young doctors could practise without external supervision, e.g. acting as back-up during summer holidays.

Transport

In general, the transferability of the best practices in the field of transport and mobility seems to be comparably high. Although the state of the art in the CE countries differs considerably, many “classic” solutions (from a Western point of view) are cost-neutral or even help to reduce costs while improving accessibility. Combined school- and public transport, DRT, and integrated transport planning can be highly effective for many rural areas and should be highlighted during the further work on the project.

Some practices which integrate the needs of young and elderly people could be indicated as good practices. It is achieved through workshops and activities (quasi-study groups), in which both young and elderly people take part and which both groups find interesting. E.g., with the support of local community, volunteers could use abandoned buildings to develop services with low costs or even with savings.

Intergenerational cooperation/planning

There could be sum up a few lessons from these practices with recommendations for transferability to others countries and regions in Europe in this field. First, initiatives which integrates demands and needs of young and elderly people into a common sphere by its practice could be easily case for transferability based on activities like cooking, performances in theatres or handicraft (pottery) and personal relationships are established and via regular meeting can be developed and maintained (Fruits of Society). However, an proper place/location is needed that meets the requirement of these activities (e.g. a clubhouse in Debrecen). The example like Family Doctor Academy – for example – was suggested as a case for successfully adaptation in the Észak-Alföld Region. However – with such a recommendation - supporting decision from the local authorities and a strong cooperation between the local authorities and universities are required. For instance a few week-long practice under the supervision of a family doctor could be embedded in the medical training, afterwards without external supervision (it would clear up several difficulties of family doctors concerning their summer holiday). As well, empty immoveable properties or buildings without being fully utilized, belong to local governments, can be found in every municipality of many regions. Furthermore, it is easier to

organize varieties of services concentrated and settle to the elderly, for instance to supply various screening examinations or the family doctor may visit patients at their home. Another need is to organize cultural events that the senior can visit according to their demands. Programs can be led by volunteers. However, weakness of the program depends on the activity of seniors whether they are motivated enough to take part in such events and occasions.

Besides, expectable demographical changes have to be taken into account paying attention to innovations, available services and infrastructure of municipalities to be attractive for the young in the future, too. And so the integrated and efficient planning of infrastructure in rural areas are needed.

And the last case – Active Energy Concept – shows that energy dependence is always an issue to secure and even there are regions (like in Hungary) possesses several potentials at the same time and bias condition can be reduced by the usage of these potentials as well as society can have access to cheaper energy, so it is cost effective from several points of view. A regional energy scheme and strategy are obviously required, of which design is expected to be completed in the near future. And utilisation of varied technological solutions is necessary, for instance circular usage of energy of thermal water by building different systems on each other (greenhouse, plastic tunnel, public facility, spa etc.). Another similar field is agriculture, in which significant amount of by-products is accumulated. Its usage is possible in energy production as well as application of natural gases, too, e.g. to supply animal farms that could cut costs more significantly. The sphere of entrepreneurs is also open towards new solutions in respect of energetic investments.

Cross regional evaluation of transferability

Although some experts considered the practices transferable as it is shown above, the evaluation scheme of the practices firstly suggested by the Czech partner and then followed by the other experts for their regions showed **that transferability is not always possible due to the different financing and governance models** (see Annex 1 with more detailed evaluation of practices).

This approach was checked by all experts if:

- evaluated projects can be fully implemented in selected pilot regions as they correspond to the possibilities and practices in the country,
- some aspects of the project are useful for our purposes, but for some reasons cannot allow to make the project fully implemented,
- the main aim (or idea) of the evaluated project seems to be very interesting and inspiring but there are especially legislative, political, infrastructural or cultural specificities that prevent the implementation of the project in the near future,
- there are specific reasons for the rejection of the project's implementation (different financing) and
- no evaluation is conducted due to the lack of some information.

The evaluation has four or five options:

1. YES



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These projects can be fully implemented or is already implemented in the region. The solutions correspond to the possibilities and practices in the region.

2. PARTLY

Some aspects of the project are useful for our purposes, but for some reasons (and the comments specify them) cannot be the project fully implemented.

3. NOT YET

The main aim (or idea) of the evaluated project seems to be very interesting and inspiring. But there are especially legislative, political, infrastructural or cultural specificities that prevent the implementation of the project in the near future.

4. NO

The specific reasons for the rejection of the project implementation are listed in the additional comments in Annexes).

5. ?

In some cases, some information was missing to fully understand the main objectives and benefits of the presented projects or it was difficult to evaluate and decide about transferability.

Social service (including care)

	Best practice	USTI	MAŁO-POLSKA	THURINGIA	PIEDMONT PO VALLEY	ÉSZAK-ALFÖLD
3.1.1	"Our Shop"	NOT YET	NOT YET	YES	YES	NOT YET
3.1.2	DORV	NOT YET	NOT YET	YES	NOT YET	NOT YET
3.1.3	Hudson House Enterprise Centre	YES	PARTLY	PARTLY	NOT YET	PARTLY
3.1.4	Community Centre SCHWALBE	NO	NOT YET	YES	NO	NO
3.1.5	Community Care in the Commune of Lipinki	YES	YES	PARTLY	NOT YET	YES
3.1.6	Intergeneration house "Fruits of Society"	YES	YES	?	NO	YES

3.1.7.	Village Shop Allgaeu Krugzell	YES	NOT YET	YES	NOT YET	NOT YET
3.1.8	Dual network infrastructure for the Elderly	-	YES	YES	NO	NO

Health care

	Best practice	USTI	MAŁOPOLSKA	THURINGIA	PIEDMONTPO VALLEY	ÉSZAK-ALFÖLD
3.2.1	Mobile Dentist	NO	YES	NO	NO	NO
3.2.2	Ambulatory Health-care Centre	YES	YES	YES	NO	YES
3.2.3.	Tellappi	NOT YET	NOT YET	YES	NO	NO
3.2.4.	Securing Medical Provision in Rural Areas	YES	YES	PARTLY	NOT YET	NOT YET
3.2.5.	Family Doctor Academy	NO	NOT YET	YES	NO	NO
3.2.6	SOS - Mobile Medical Emergency Supply	NO	YES	NO	NO	NO

Transport

	Best practice	USTI	MAŁOPOLSKA	THURINGIA	PIEDMONT PO VALLEY	ÉSZAK-ALFÖLD
3.3.1.	Citizen Bus Gransee	NO	NOT YET	NOT YET	NO	NO
3.3.2.	Village Mobile	NO	NOT YET	YES	NOT YET	NO
3.3.3.	Citizen Bus Ringgau	NO	NOT YET	PARTLY	NO	PARTLY
3.3.4	CARLOS	NO	NO	NO	NO	NO
3.3.5	Stop by Need	NO	YES	YES	PARTLY	NO
3.3.6	School Transport in Rural Areas	NO	YES		NOT YET	YES

3.3.7	RUTO	NO	YES	YES	NO	PARTLY
3.3.8	Samkom	NO	PARTLY	PARTLY	NO	PARTLY
3.3.9	New Public Transport Concept	?	YES	YES	NO	NO
3.3.10	Adaptation of Public Transport Service		YES	PARTLY	?	NO

Public Infrastructure

	Best practice	USTI	MAŁOPOLSKA	THURINGIA	PIEDMONT PO VALLEY	ÉSZAK-ALFÖLD
3.4.1.	Reduction of Public School Stock	YES	YES	PARTLY	NO	YES
3.4.2.	Renovation of historical centre of Tržič	?	YES	?	YES	YES
3.4.3.	Reduction of Public Dwelling Stock	NO	YES	YES	NOT YET	NO
3.4.4.	Revitalisation of the City Centre	YES	YES	YES	NO	NO
3.4.5.	“Poessneck is coming back”	NO	YES	YES	YES	PARTLY
3.4.6	Centre of Culture and Leisure for Senior Citizens	-	YES	YES	?	YES

Inter-Communal cooperation/Intergenerational cooperation/Planning

	Best practice	USTI	MAŁOPOLSKA	THURINGIA	PIEDMONT PO VALLEY	ÉSZAK-ALFÖLD
3.5.1.	Administration Union Schwalm-Eder-West	PARTLY	YES	YES	YES	NO
3.5.2.	Mobile Citizens	NO	NOT YET	YES	NOT YET	NO

	Advice Bureau					
3.5.3.	Integrated and efficient planning of infrastructure in rural areas	YES	YES	YES	?	YES

Other infrastructure and Service Field

	Best practice	USTI	MAŁOPOLSKA	THURINGIA	PIEDMONT PO VALLEY	ÉSZAK- ALFÖLD
3.6.1.1	Water supply and sewage treatment	?	?	?	?	?
3.6.1.2.	Reduced water provision costs	NO	YES	YES	NO	NO
3.6.1.3.	Efficient purification plants	NO	YES	YES	NO	YES
3.6.1.4.	Active Energy Concept	NO	YES	YES	NO	NO
3.6.1.5	Adapted Sewage Treatment Plants	NO	YES	PARTLY	NO	PARTLY
3.6.1.6.	Adapted Water Supply	NO	YES	PARTLY	NOT YET	NO
3.6.2.1.	Self supporting village of Túrístvándi	YES	NO	PARTLY	?	YES

In case of Małopolska and as well Thuringia it seems that quite a lot of practices could be recommended for introducing and even more than in other regions. It is the fact that many of practices already exist or there are no legal, administrative obstacles to introduce them in these regions. However, the open question is if there are resources to be able to initiate the particular change and then maintain them.

In the case of Piedmont's Po valley region (where the municipality of Ostana is), main problems of transferability refer to the lack of available of institutional partners, investors and investments, the lack of critical mass (too few citizens cannot collect enough money to do almost anything; also, they do not allow for a critical mass of users), the lack of competences (ICT, health/medical), the lack of young people (to pursue intergenerational aims), the eminently rural dimension of the local context

(whereas some practices are thought for an urban environment), the lack of decision power (the administrative level in charge for decisions in the areas of public services such as schools, health, social care is the Region: individual municipalities do not have much decision power on them). In many examples for Usti region the transferability of suggested solutions is not possible.

5. Conclusions and possible recommendations

According to the strategic experts many limitations could be indicated to give recommendations which could be directly and easily used as transferable cases across Europe. The evaluations are analytical assessments addressing results of public policies, organisations or programmes that emphasise reliability and utility of findings. Their role is to improve information and reduce uncertainty; however, even evaluations based on rigorous methods can be subject to limitations at different levels. Some criteria may not be very clear; for example, in this case, the criteria of inclusion in the catalogue. Whereas some of the cases are known from the literature, one can only suppose that the others were suggested by the regions (but perhaps they were provided by the authors of the catalogue?). Also, it is not so clear if a project is on-going/planned/finished, and this information could be added. Transferability is another field that raises doubts as it is not measurable; also, the specificity of every context should be taken into account and the implicit assumptions (for example, one assumption can be that citizens are willing to be voluntarily engaged and have time/resources/possibility to do it) should be verified.

Presenting best practices in the catalogue was an interesting idea and for sure it could be seen as an important input for the further work within the project. However, as the practices were not presented in a detailed manner (due to formal restrictions of the paper), there is a risk that the evaluator may neither understand everything properly nor see all various aspects of some of the practices. This is necessary for conducting the evaluation properly, in compliance with WP5 and the purposes of the whole project as well as for coming up with suggestions to implement the specific case somewhere else.

Consequently, there is a risk of improper or unjust evaluation, of seeing the examples as not good enough even if they might be considered the best or good examples in the local context. Such initiatives may be highly valued by the society, for which all the adaptation in the face of demographic change should take place.

Last but not least, websites of some practices are mentioned but in some cases it is not possible to find out or read more about initiatives as the websites are not valid anymore or the information is provided only in national languages. This is also a limitation for disseminating such examples at the international level and for transferability.

As the subject of the evaluation is rather broad, the investigation covered several regions of different countries. The examined territories are dissimilar in the capabilities, in the needs, and demands of the local citizens, which poses difficulties for the precise evaluation of the best practices (e.g. what is a problem in another country is not a problem in Hungary or vice-versa). However, we realize that

the task of the catalogue was to gather good examples across Europe and did not imply that all selected projects will be transferable to all other European regions.

Concerning cost savings, the possibilities of evaluation are sometimes limited when the explanations of savings are provided in different ways. With precise calculations and exact figures, the evaluation could be more detailed but this was not possible due to lack of information. This would possibly support transferability of certain best practices.

However, it is possible to deduct more general strategies noticed for dealing with demographic changes (that go beyond transport): such as “combining existing offers” or “using the initiative of volunteers” or “on-demand offers” instead of constant offers. This could be one of our general conclusions. As there could be identified a set of strategies or approaches from the catalogue that are relevant for all fields of infrastructure. And then in the end even the pilot actions could be subsumed under it as the set of “possible strategies” could even include seemingly contradictory notions, both “centralization” and “decentralization” can possibly save costs, depending on context.

And last but not least, **it is also necessary to learn from failed attempts / “bad practices” as generally too little information is available concerning failed attempts and the reasons for failure** which could be the best lessons for others.

Annex 1

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Valerie Marková – mayor, Měděnec

Jana Müllerová – mayor, Loučná

František Henzl – mayor, Kryštofovy Hamry

1. Introduction

This Best Practice Catalogue was discussed twice. The first meeting was organized in Vejprty with the members of the regional team. The second roundtable was held in Ústí nad Labem with the members of the regional expert team.

We concentrated on the usability of ideas in the pilot area (microregion Vejprty). The **decisive criterion** for evaluating the projects is **the possibility of their transferability**. Respectively, we try to describe the possible difficulties in its adaptation to local (regional, national) conditions.

Our evaluation has four or five stages:

YES

These projects can be fully implemented in our pilot region. They correspond to the possibilities and practices in the Czech Republic.

PARTLY

Some aspects of the project are useful for our purposes, but for some reasons (and the comments specify them) cannot be fully implemented.

NOT YET

The main aim (or idea) of the evaluated project seems to us very interesting and inspiring. But there are legislative, political, infrastructural or cultural specificities that prevent the implementation of the project in the near future.

NO

The specific reasons for the rejection of the project implementation are listed below in the comments.

?

In some cases, we don't fully understand the main objectives and benefits of the presented projects.

Social Service

Project No. 3.1.1

Transferability: **NOT YET**

Justification of the evaluation:

There is no experience with volunteering in the Czech Republic. This (good) idea is applicable only in developed civil societies. The willingness of local (Czech) residents to participate voluntarily in the rehabilitation of the public budget is minimal, unreal. Public collection at the local grocery store is (in our opinion), unworkable in the Czech Republic.

Community activities only work in small communities in the Czech Republic. The dominant force driving the development is still the government, not NGO sector.

Project No. 3.1.2

Transferability: **NOT YET**

Justification of the evaluation:

See point No. 3.1.1

In our conditions (microregion Vejprty) it can be possibly implemented by using European (public) funds. But there is one important condition – the project cannot bring profits.

Project No. 3.1.3

Transferability: **YES**

Justification of the evaluation:

A transferable idea. A similar solution exists here. With the financial support from the European funds, there are many investment projects for the re-/construction of local community centres. A similar project is currently implemented in Vejprty.

Project No. 3.1.4

Transferability: **NO**

Justification of the evaluation:

The project is not usable for the purposes of our region (deals with a specific issue relevant for larger cities).

Project No. 3.1.5**Transferability:****YES****Justification of the evaluation:**

It is unclear whether the costs associated with institutional care for the elderly have been reduced. From the description the money/subsidy questions are not clear. Fieldwork (home assistance) is generally less expensive than institutional care. In our conditions (microregion Vejprty), it is possible to combine institutional and field (home) assistance. The aim is not to reduce costs but rather to improve the life quality of the elderly. In this area, the services of the non-profit sector are used.

Project No. 3.1.6**Transferability:****YES****Justification of the evaluation:**

The general trend in all the communities (municipalities) in Czech Republic is to concentrate services in one place thus saving on fixed costs.

Problem of volunteering, see point. No.3.1.1

Project No. 3.1.7**Transferability:****YES****Justification of the evaluation:**

Health Care

Project No. 3.2.1**Transferability:****NO****Justification of the evaluation:**

This is a very interesting and useful idea. The key problem is the question of co-financing. Who and how would contribute to the described activity (e.g. insurance companies)?

In our region (country) there is a lack of dentists. They must be motivated (financially, by provision of housing, etc.).

Project No. 3.2.2**Transferability:****YES**

Justification of the evaluation:

Currently a similar project is implemented in Vejprty: reconstructing a building that concentrates health services. At the same time we try to make the building more energy efficient and thus save on operating costs. Our building will provide housing for doctors - to increase their comfort and motivation.

Project No. 3.2.3**Transferability:** NOT YET**Justification of the evaluation:**

There is an attempt of establishing a similar system in the Czech health care (national level). A sufficient system to secure the database is not operating, yet. In our conditions, the size of the territory is not a problem, nor is the unavailability of professional medical care. Average waiting time in the Czech health care is about 25 minutes (general medical practice).

Project No. 3.2.4**Transferability:** YES**Justification of the evaluation:**

See point No. 3.2.2

Project No. 3.2.5**Transferability:** NO**Justification of the evaluation:**

Tradition of family doctors has stopped in our country after World War II and decades of communism. Public medical care in the Czech Republic is preferred.

Project No. 3.2.6**Transferability:** NO**Justification of the evaluation:**

Cannot be implemented. Outsourcing of public services in health care is a kind of taboo for Czech citizens. Certainly it cannot be done in our region. The entire Ústí region belongs to the regions undergoing structural difficulties- meaning (among others) low purchasing power.

Transport and Mobility

Project No. 3.3.1**Transferability:** NO**Justification of the evaluation:**

Transport services in the region are covered by the public administration. And the quality (frequency and the routes) is relatively high. For more information see Field Study (Project Activity WP3.2.2 implementation, output 3.2.1). The system of cooperation, collaboration between the municipalities and region administration is established.

Project No. 3.3.2

Transferability:

NO

Justification of the evaluation:

Individual transport needs of the inhabitants of the villages can be solved in a similar way. In our conditions, this burden is on the public budget (transport services are provided –subsidized mostly by the regional administration). For some residents it is a problem because of timetables.

Project No. 3.3.3

Transferability:

NO

Justification of the evaluation:

It works rather in larger cities. The engagement of the shopping centres is possible in cities with public transport, which in our area does not exist.

Project No. 3.3.4

Transferability:

NO

Justification of the evaluation:

A similar problem has been solved in the Czech Republic by a spontaneous process (there are some internet sites that offers similar services). And it has been achieved without a mediator (administration). In a small community such activities occur spontaneously, because of the social capital of the community.

Project No. 3.3.5

Transferability:

NO

Justification of the evaluation:

See point No. 3.3.4

Project No. 3.3.6

Transferability:

NO

Justification of the evaluation:

Not transferable to our tradition and conditions. There is no “segregation” of specific types of passengers in the Czech republic public transport system. There is no tradition of specific school

buses.

Project No. 3.3.7	Transferability:	NO
Justification of the evaluation:		
See point No. 3.3.6		

Project No. 3.3.8	Transferability:	NO
Justification of the evaluation:		
In the Czech republic (and our region) basic transport service is provided and available according to individual needs. The quality (frequency and the routes) is relative high – premium. For more information see Field Study (Project Activity WP3.2.2 implementation, output 3.2.1).		

Project No. 3.3.9	Transferability:	?
Justification of the evaluation:		
It was difficult to evaluate it but the project was about improving management, provision and financing of public infrastructure and services.		

Public Infrastructure

Project No. 3.4.1	Transferability:	YES
Justification of the evaluation:		
Merging of schools is economically efficient, but there is a lot of pressure to keep two elementary schools in our microregion. Although the current cost is very high, the political administration is not interested in changing this situation. Closing elementary school is a politically sensitive topic.		
But at the regional level (Usti region), the educational system is optimized every four years, according to demographic progression, resp. regression.		

Project No. 3.4.2	Transferability:	?
Justification of the evaluation:		
We do not comment this project, because we do not perfectly understand it.		

Project No. 3.4.3	Transferability:	NO
Justification of the evaluation:		

The project deals with large investments that in our conditions cannot be realized.

Project No. 3.4.4	Transferability:	YES
Justification of the evaluation:		

In our region a similar project works: incentives to move into the village. Kryštofovy Hamry - a village which became rich by renting land; for example, it pays the cost of heating to their existing and new residents.

Project No. 3.4.5	Transferability:	NO
Justification of the evaluation:		

The extent (scope) of the project is unusable in our pilot region due to the limited possibilities.

Inter-Communal Cooperation

Project No. 3.5.1	Transferability:	PARTLY
Justification of the evaluation:		

In our conditions a similar type of cooperation has existed for 5 years (microregion Vejprty).

Some activities cannot be carried out on the micro level due to the issue of ownership. Microregion builds for example line structures such as greenways, bike paths. There are some soft projects, strategic planning documents, etc.

Project No. 3.5.2	Transferability:	NO
Justification of the evaluation:		

By the law, mayors in municipalities are forced to have a fixed office in the village. This project is possible to implement in large, sparsely populated areas but not in our region. To change this

situation, a central/government regulation (ordinance) would be necessary.

Project No. 3.5.3	Transferability:	YES
Justification of the evaluation:		
It can be implemented at our level. Some strategic documents, development plans, etc. are similarly formed both at the regional and local, municipal level.		

Other Infrastructure and Service Field

Project No. 3.6.1.1	Transferability:	?
Justification of the evaluation:		
From the project description is not exactly clear what is implemented.		

Project No. 3.6.1.2	Transferability:	NO
Justification of the evaluation:		
Similar projects cannot be implemented here because of the Czech legislation. Water and other infrastructure are owned by private, often multinational entities. For example water purifiers are not in public property. Municipalities do not have a legitimate right to intervene in these matters (issues).		

Project No. 3.6.1.3	Transferability:	NO
Project No. 3.6.1.4	Transferability:	NO
Project No. 3.6.1.5	Transferability:	NO
Project No. 3.6.1.6	Transferability:	NO

See point No. 3.6.1.2.

Project No. 3.6.2.1	Transferability:	YES
Justification of the evaluation:		
Some support for local producers in our region has been ensured by "Farmers' Markets" for about three years.		

Annex 2

MAŁOPOLSKA

Social Service

Project No. 3.1.1	Transferability:	NOT YET
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Justification of the evaluation:

The idea is great but unfortunately the voluntary organizations do not have any support and they have to count on themselves in using (and so paying for) the abandoned buildings. It is also related with the cost of maintaining the building which is usually too high for them

Project No. 3.1.2	Transferability:	NOT YET
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Justification of the evaluation:

As above and there is needed the political will and if funds of local levels could be used then it is possible to organize such initiative as well

Project No. 3.1.3	Transferability:	PARTLY
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Justification of the evaluation:

As above

Project No. 3.1.4	Transferability:	NOT YET
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Justification of the evaluation:

As above

Project No. 3.1.5	Transferability:	YES
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Justification of the evaluation:

Already such initiative is implemented

Project No. 3.1.6	Transferability:	YES
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Justification of the evaluation:

This could be introduced and implemented as more it depends on the local authorities if they

wish such network infrastructure introduced.

Project No. 3.1.7	Transferability:	NOT YET
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Justification of the evaluation:

The idea is good but there has to be checked if in Polish society it could be organized, as usually it is in private hands

Project No. 3.1.8	Transferability:	YES
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Justification of the evaluation:

It is positive for the collaboration and exchange of information, so there are no serious legislative objections for that.

Health Care

Project No. 3.2.1	Transferability:	YES
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Justification of the evaluation:

It is already established

Project No. 3.2.2	Transferability:	YES
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Justification of the evaluation:

There are no serious objections and it is possible and easy to recommend for implementation.

Project No. 3.2.3	Transferability:	NOT YET
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Justification of the evaluation:

There are some objections related to the cost of such initiative.

Project No. 3.2.4	Transferability:	YES
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Justification of the evaluation:

Needed and necessary to recommend and implement

Project No. 3.2.5	Transferability:	NOT YET
Justification of the evaluation:		
The problem of financing this solution, the solution is needed but the issue of financing the young doctors programmes in rural areas has to be negotiated with the Ministry of Health, and National Fund of Health (responsible for financing such services)		

Project No. 3.2.6	Transferability:	YES
Justification of the evaluation:		
The solution is not dependent on the public funds, so possible to implement if only there will be enough clients and interested in such services persons.		

Transport and Mobility

Project No. 3.3.1	Transferability:	NOT YET
Justification of the evaluation:		
Difficult - due to organizational issues and lack of infrastructure		

Project No. 3.3.2	Transferability:	NOT YET
Justification of the evaluation:		
Difficult - due to organizational issues and lack of infrastructure		

Project No. 3.3.3	Transferability:	NOT YET
Justification of the evaluation:		
Difficult - due to organizational issues and lack of infrastructure		

Project No. 3.3.4	Transferability:	NO
Justification of the evaluation:		
Rather it is not possible, as it needs the collaboration which could be impossible with individual, private and public providers		

Project No. 3.3.5	Transferability:	YES
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Justification of the evaluation:

Needed and a good planning should take it into account

Project No. 3.3.6	Transferability:	YES
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Justification of the evaluation:

It is already in many places organized in this way

Project No. 3.3.7	Transferability:	YES
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Justification of the evaluation:

Possible

Project No. 3.3.8	Transferability:	PARTLY
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Justification of the evaluation:

Possible, but it needs the organization and financing planning in this coordination

Project No. 3.3.9	Transferability:	YES
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Justification of the evaluation:

Project No. 3.3.10	Transferability:	YES
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Justification of the evaluation:

Public Infrastructure

Project No. 3.4.1	Transferability:	YES
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Justification of the evaluation:

Yes, and it is needed

Project No. 3.4.2**Transferability:** YES**Justification of the evaluation:**

Yes, especially in city of Cracow

Project No. 3.4.3**Transferability:** YES**Justification of the evaluation:**

Needed and possible

Project No. 3.4.4**Transferability:** YES**Justification of the evaluation:**

As above

Project No. 3.4.5**Transferability:** YES**Justification of the evaluation:**

As above

Inter-Communal Cooperation

Project No. 3.5.1**Transferability:** YES**Justification of the evaluation:**

Yes, possible and needed

Project No. 3.5.2**Transferability:** NOT YET**Justification of the evaluation:**

Due to lack of stable financing such initiative

Project No. 3.5.3	Transferability:	YES
Justification of the evaluation:		
Needed		

Other Infrastructure and Service Field

Project No. 3.6.1.1	Transferability:	?
Justification of the evaluation:		

Project No. 3.6.1.2	Transferability:	YES
Justification of the evaluation:		
Should be taken into account		

Project No. 3.6.1.3	Transferability:	YES
Should be taken into account		
Project No. 3.6.1.4	Transferability:	YES
Should be taken into account		
Project No. 3.6.1.5	Transferability:	YES
Should be taken into account		
Project No. 3.6.1.6	Transferability:	YES
Should be taken into account		
Project No. 3.6.2.1	Transferability:	NO
Justification of the evaluation:		
Not possible		

Annex 3

PIEDMONT PO's valley

Social Service

Project No. 3.1.1	Transferability:	YES
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Justification of the evaluation:

Ostana pilot action will provide a sort of small grocery shop with local products

Project No. 3.1.2	Transferability:	NOT YET
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Justification of the evaluation:

The reduced number of citizens living in Ostana does not allow the collection of the necessary budget

Project No. 3.1.3	Transferability:	NOT YET
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Justification of the evaluation:

local services provided by the community-led company (community, business, learning, consulting are not the most urgent respect to Ostana's and the Po valley's needs

Project No. 3.1.4	Transferability:	NO
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Justification of the evaluation:

here is not a city quarter characterised by high unemployment and social segregation

Project No. 3.1.5	Transferability:	NOT YET
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Justification of the evaluation:

lack of unemployed people to be trained to be assistants of senior/disabled persons

Project No. 3.1.6	Transferability:	NO
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Justification of the evaluation:

no critical mass of inhabitants of different generations and activities to be brought together

Project No. 3.1.7	Transferability:	NOT YET
Justification of the evaluation:		

lack of funds (no LEADER+ project that can funds this project)

Project No. 3.1.8	Transferability:	NO
Justification of the evaluation:		

lack of ICT competences and infrastructure

Health Care

Project No. 3.2.1	Transferability:	NO
Justification of the evaluation:		

no funds nor critical mass of patients for the installation of the mobile dentist car

Project No. 3.2.2	Transferability:	NO
Justification of the evaluation:		

no political power (the Region regulates healthcare services), no funds nor critical mass of patients.

Project No. 3.2.3	Transferability:	NO
Justification of the evaluation:		

no political power (the Region regulates healthcare services), no funds nor critical mass of patients.

Project No. 3.2.4	Transferability:	NO YET
Justification of the evaluation:		

no political power (the Region regulates healthcare services) nor critical mass of patients.

Project No. 3.2.5	Transferability:	NO
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Justification of the evaluation:

no initial competences nor critical mass of patients.

Project No. 3.2.6**Transferability:****NO****Justification of the evaluation:**

no political power (the Region regulates healthcare services) nor critical mass of patients.

Transport and Mobility

Project No. 3.3.1**Transferability:****NO****Justification of the evaluation:**

lack of funding and institutional partners. No critical mass of clients

Project No. 3.3.2**Transferability:****NOT YET****Justification of the evaluation:**

a large agreement (including also other cities and mountain villages) with the transport provider is **needed**

Project No. 3.3.3**Transferability:****NO****Justification of the evaluation:**

No shopping mall as a partner. No critical mass of clients

Project No. 3.3.4**Transferability:****NO****Justification of the evaluation:**

lack of funding and institutional partners. No critical mass of clients

Project No. 3.3.5**Transferability:****PARTLY**

Justification of the evaluation:

by-voice requesting of stops is already introduced by bus-drivers

Project No. 3.3.6**Transferability:****NOT YET****Justification of the evaluation:**

lack of critical mass of students

Project No. 3.3.7**Transferability:****NO****Justification of the evaluation:**

lack of funding and institutional partners. No critical mass of clients

Project No. 3.3.8**Transferability:****NO****Justification of the evaluation:**

lack of funding and institutional partners. No critical mass of clients

Project No. 3.3.9**Transferability:****NO****Justification of the evaluation:**

lack of funding and institutional partners. No critical mass of clients

Public Infrastructure**Project No. 3.4.1****Transferability:****NO****Justification of the evaluation:**

no Public School Stock to be reduced

Project No. 3.4.2**Transferability:****YES****Justification of the evaluation:**

Ostana and the other municipalities of the Po valley are already working to improve the local

(built and natural) environment to increase their social, cultural and economic attractiveness

Project No. 3.4.3

Transferability: NOT YET

Justification of the evaluation:

no relevant abandoned public dwelling stock to be reduced

Project No. 3.4.4

Transferability: NO

Justification of the evaluation:

the measure is thought for an urban environment. In the Po valley there is no need for the creation of green areas

Project No. 3.4.5

Transferability: YES

Justification of the evaluation:

Ostana and the other municipalities of the Po valley are already working to increase their attractiveness

Inter-Communal Cooperation

Project No. 3.5.1

Transferability: YES

Justification of the evaluation:

Ostana and the other municipalities of the Po valley are already working to increase synergies of neighbouring communities

Project No. 3.5.2

Transferability: NOT YET

Justification of the evaluation:

lack of ICT competences and infrastructure

Project No. 3.5.3

Transferability: ?

Justification of the evaluation:

Other Infrastructure and Service Field

Project No. 3.6.1.1	Transferability:	?
Justification of the evaluation:		
-		
Project No. 3.6.1.2	Transferability:	NO
Justification of the evaluation:		
Water provision is not problematic		
Project No. 3.6.1.3	Transferability:	NO
No purification plants in Ostana		
Project No. 3.6.1.4	Transferability:	NO
Sewage water treatment is not problematic		
Project No. 3.6.1.5	Transferability:	NO
Sewage water treatment is not problematic		
Project No. 3.6.1.6	Transferability:	NOT YET
an agreement with a large number of municipalities is needed		
Project No. 3.6.2.1	Transferability:	?
Justification of the evaluation:		
-		

Annex 4

Thuringia

Social Service

Project No. 3.1.1	Transferability:	YES
Justification of the evaluation:		

This example does already exist

Project No. 3.1.2	Transferability:	YES
Justification of the evaluation:		

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Project No. 3.1.3	Transferability:	PARTLY
Justification of the evaluation:		

Could possibly be difficult with European competition legislation

Project No. 3.1.4	Transferability:	YES
Justification of the evaluation:		

Possible in a more urban environment

Project No. 3.1.5	Transferability:	PARTLY
Justification of the evaluation:		

Could be difficult to employ unskilled personnel for the care of elderly people

Project No. 3.1.6	Transferability:	?
Justification of the evaluation:		

-

Project No. 3.1.7	Transferability:	YES
Justification of the evaluation:		

This example does already exists

Project No. 3.1.8	Transferability:	YES
Justification of the evaluation:		

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Health Care

Project No. 3.2.1	Transferability:	NO
Justification of the evaluation:		

Project No. 3.2.2	Transferability:	YES
Justification of the evaluation:		

Project No. 3.2.3	Transferability:	YES
Justification of the evaluation:		

Project No. 3.2.4	Transferability:	PARTLY
Justification of the evaluation:		

Project No. 3.2.5	Transferability:	YES
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Justification of the evaluation:

Project No. 3.2.6

Transferability:

NO

Justification of the evaluation:

Transport and Mobility

Project No. 3.3.1

Transferability:

NOT YET

Justification of the evaluation:

Legal problems and some problems with finding voluntary workers could be possible

Project No. 3.3.2

Transferability:

YES

Justification of the evaluation:

This example does already exists

Project No. 3.3.3

Transferability:

PARTLY

Justification of the evaluation:

A strong shopping center is needed for sponsoring PT

Project No. 3.3.4

Transferability:

NO

Justification of the evaluation:

-

Project No. 3.3.5

Transferability:

YES

Justification of the evaluation:

This example does already exists

Project No. 3.3.6**Transferability:****NO****Justification of the evaluation:**

Legal problems due to concessions and for employing private staff in PT

Project No. 3.3.7**Transferability:****YES****Justification of the evaluation:**

This example does already exist

Project No. 3.3.8**Transferability:****PARTLY****Justification of the evaluation:**

Exists as demand responsive transport (DRT)

Project No. 3.3.9**Transferability:****YES****Justification of the evaluation:**

This example does already exist

Public Infrastructure**Project No. 3.4.1****Transferability:****PARTLY****Justification of the evaluation:**

Urban example, more difficult in rural areas

Project No. 3.4.2**Transferability:****?****Justification of the evaluation:**

Project No. 3.4.3	Transferability:	YES
Justification of the evaluation:		

Project No. 3.4.4	Transferability:	YES
Justification of the evaluation:		

Transferable for cities and major towns

Project No. 3.4.5	Transferability:	YES
Justification of the evaluation:		

This is a Thuringian example

Inter-Communal Cooperation

Project No. 3.5.1	Transferability:	YES
Justification of the evaluation:		

Already being practices i.e. tried

Project No. 3.5.2	Transferability:	YES
Justification of the evaluation:		

Project No. 3.5.3	Transferability:	?
Justification of the evaluation:		

Quite a lot of effort has been undertaken for that example

Other Infrastructure and Service Field

Project No. 3.6.1.1	Transferability:	?
Justification of the evaluation:		

Project No. 3.6.1.2	Transferability:	YES
Justification of the evaluation:		

Project No. 3.6.1.3	Transferability:	YES
Project No. 3.6.1.4	Transferability:	YES
Project No. 3.6.1.5	Transferability:	PARTLY
Urban example, problems with low density areas with no sewage treatment are not being tackled	Transferability:	PARTLY
Project No. 3.6.1.6	Transferability:	PARTLY
As 3.6.1.5	Transferability:	PARTLY
Project No. 3.6.2.1	Transferability:	PARTLY
Justification of the evaluation:		

Good idea – regional money as being practices in South Thuringia could be even more interesting

Annex 5

Észak-Alföld Region

Author: Zoltán DOROGI, Regional Expert, Észak-Alföld Regional Development Agency, Hungary

Social Service

Project No. 3.1.1	Transferability:	NOT YET
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Justification of the evaluation:

It is a good idea for strengthening prosperity of rural areas. However, volunteer activity is less widespread in Hungary. In some case local markets are working, mainly in summertime.

Project No. 3.1.2**Transferability:** NOT YET**Justification of the evaluation:**

See point No. 3.1.1

Project No. 3.1.3**Transferability:** PARTLY**Justification of the evaluation:**

Very useful idea and perfect for transferability. A similar solution exists here supported by from the European funds.

Project No. 3.1.4**Transferability:** NO**Justification of the evaluation:**

City quarters, characterised by high unemployment rate and social segregation can be found in larger cities. They need complex development actions.

Project No. 3.1.5**Transferability:** YES**Justification of the evaluation:**

Elderly care services are operated in Hungary in smaller settlements by municipalities. These services are similar, than the proposal one.

Project No. 3.1.6**Transferability:** YES**Justification of the evaluation:**

The general trend in all the communities is to concentrate services in one place in order to saving on fixed costs. Problem of volunteering, see point. No.3.1.1

Project No. 3.1.7**Transferability:** NOT YET

Justification of the evaluation:

No Leader project that can funds this type of projects.

Health Care

Project No. 3.2.1**Transferability:****NO****Justification of the evaluation:**

Dental care is one type of services in basic care system which operated by government. Dentist can be found in every larger settlement.

Project No. 3.2.2**Transferability:****YES****Justification of the evaluation:**

Currently a similar project is implemented in our region. In seats of micro regions health-care centres were building that concentrates these services. In this buildings inhabitants have access other services and practices, for example pharmacy, optics as well.

Project No. 3.2.3**Transferability:****NO****Justification of the evaluation:**

Lack of ICT infrastructure in health-care services.

Project No. 3.2.4**Transferability:****NOT YET****Justification of the evaluation:**

Very interesting idea, but because of regulates, legislative and infrastructure specificities it can not be possibly implemented right now.

Project No. 3.2.5**Transferability:****NO****Justification of the evaluation:**

Unfortunately young doctors rather do their practices in abroad, not in the region nor rural

areas.

Project No. 3.2.6	Transferability:	NO
Justification of the evaluation:		
See point. No.3.2.4.		

Transport and Mobility

Project No. 3.3.1	Transferability:	NO
Justification of the evaluation:		

Transport services in the region are covered by the public administration. Transport companies are in state or municipality ownership. And the quality (frequency and the routes) is relatively high.

Project No. 3.3.2	Transferability:	NO
Justification of the evaluation:		

Individual transport needs of the inhabitants of the villages can be solved in a similar way. In our conditions, this burden is on the public budget (transport services are provided –subsidized mostly by the regional administration).

Project No. 3.3.3	Transferability:	PARTLY
Justification of the evaluation:		

It works rather in larger cities. The engagement of the shopping centres is possible in cities with public transport, which is working in our region.

Project No. 3.3.4	Transferability:	NO
Justification of the evaluation:		

See point. No.3.3.1.

Project No. 3.3.5	Transferability:	NO
Justification of the evaluation:		

It is working in Hungary for ages.

Project No. 3.3.6	Transferability:	YES
Justification of the evaluation:		
In some smaller settlements municipalities operate bus services connecting school buses with public transport to provide alternative methods to timetable problems.		

Project No. 3.3.7	Transferability:	PARTLY
Justification of the evaluation:		
See point No. 3.3.6		

Project No. 3.3.8	Transferability:	PARTLY
Justification of the evaluation:		
In our region transport service is provided and available according to individual needs. The quality (frequency and the routes) is relative high – premium.		

Project No. 3.3.9	Transferability:	NO
Justification of the evaluation:		
Lack of funding and institutional partners. No critical mass of clients		

Public Infrastructure

Project No. 3.4.1	Transferability:	YES
Justification of the evaluation:		
Merging of schools is economically efficient, are some example in our region. Social centre for youth was formed from a building of closed school. Open programs, concerts, creative occupations take place there.		

Project No. 3.4.2	Transferability:	YES
Justification of the evaluation:		

Some similar actions were implemented in the past years in city centres in our region.

Project No. 3.4.3	Transferability:	NO
Justification of the evaluation:		
Not a relevant problem.		

Project No. 3.4.4	Transferability:	NO
Justification of the evaluation:		
In our region it is not an aim that elderly people live in an own quarter. This is a high rate of youth living in city centres.		

Project No. 3.4.5	Transferability:	PARTLY
Justification of the evaluation:		
It is an interesting idea to create attractive environment in where inhabitants can live under favourable conditions. Usage of brownfield areas is less relevant in the pilot region.		

Inter-Communal Cooperation

Project No. 3.5.1	Transferability:	NO
Justification of the evaluation:		
In our region common administration, co-operation of municipalities decreased in the past few years. Some activities cannot be carried out on the micro level due to the issue of ownership.		

Project No. 3.5.2	Transferability:	NO
Justification of the evaluation:		
By the law, mayors in municipalities are forced to have a fixed office in settlements. Central/government regulation would be necessary.		

Project No. 3.5.3	Transferability:	YES
Justification of the evaluation:		

It can be implemented at our level. Some strategic documents, development plans, etc. are similarly formed both at the regional and micro regional level by participation of municipalities.

Other Infrastructure and Service Field

Project No. 3.6.1.1	Transferability:	?
Justification of the evaluation:		
From the project description is not exactly clear what is implemented.		
Project No. 3.6.1.2	Transferability:	NO
Justification of the evaluation:		
Water provision is not problematic in our region.		
Water infrastructure is owned by public entities, often regional companies, so water purifiers are in public property as well. In spite of these municipalities do not have a legitimate right to intervene in these fields.		
Project No. 3.6.1.3	Transferability:	YES
It works in larger cities. Some strategies draw attention for		
Project No. 3.6.1.4	Transferability:	NO
Sewage plants and system were build up in our region in 2007-2013 period,		
but one part of projects will continues into the next period.		
Project No. 3.6.1.5	Transferability:	PARTLY
It is not problematic.		
Project No. 3.6.1.6	Transferability:	NO
In large cities it is legislative task for municipalities the gasfermantetion.		
Project No. 3.6.2.1	Transferability:	YES
Justification of the evaluation:		
It is enough interesting and useful idea to implement.		

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