

PROCAREFUL

Training Manual

D.1.3.1 Document that presents the PROCAREFUL model training manual

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OVERVIEW

Table of content

1. Purpose, framework and objectives of the training
2. Short description of the PROCAREFUL HYBRID model (including short target groups description)
3. Technical part of the training
 - 3.1. Short platform description
 - 3.2. How to start
 - 3.3. How to assign seniors informal carers
 - 3.4. Senior's profile mock-up
 - 3.5. Carer's profile mock-up
 - 3.6. Assessment
 - 3.7. Cognitive games
 - 3.8. Physical exercises
 - 3.9. Social activities
 - 3.10. Warnings and notification
4. Non-technical part of the training
 - 4.1. Why hybrid model (link between the platform and personal work)
 - 4.2. Working with older people
 - 4.3. Creating new habits and meaning of prevention
 - 4.4. Good communication is key to good relations
 - 4.5. Question of motivation
 - 4.6. Understanding digital barriers
5. On-site Training at Pilot Sites
 - 5.1. For formal and informal carers
 - 5.2. For seniors
6. Annexes
 - 6.1. Train-the-trainers Training toolkit
 - 6.2. On-site Training toolkit



1. PROCAREFUL TRAINING MANUAL: PURPOSE, FRAMEWORK AND OBJECTIVES

Purpose: The Procareful Training Manual aims to equip formal, informal, and senior carers with the knowledge and skills needed to effectively implement the PROCAREFUL hybrid model in home care environments. This model aims to prevent cognitive decline, physical decline, and social isolation in adults aged 55 and older. By encouraging the development of healthy habits and leveraging digital tools and modern care practices, the training seeks to improve or maintain the mental, social, and physical wellness and autonomy of older adults.

Framework: The training is delivered in two phases:

1. Online Train-the-Trainers Training:

- **Structure:** This training is structured over two days, totalling 20 hours of instruction, divided into 8 hours of theory and 12 hours of individual practical work.
- **Timing:** Theoretical training will take place on August 8-9th, from 9:00 AM to 1:00 PM.
- **Language:** English.
- **Participants:** Trainers who will subsequently train the pilot sites, at least 2-3 representatives from each organisation, including formal and informal carers.
- **Content:** The training will cover familiarisation with the platform and the core concepts and methodologies of the PROCAREFUL model, preparing trainers for localised training.

2. On-site Training at Pilot Sites:

- **Structure:**
 - For formal and informal carers, the training is structured over one or two days, including 4 hours of theory and, if possible, 4 hours of individual practical work.
 - For seniors, the training focuses mostly on pilot and platform understanding and is structured over one day, with 2-3 hours of theory and practice.
 - Both types of training can be conducted in groups or individually, depending on the needs and possibilities of the local trainers.
- **Timing:** September, up to the first part of October for seniors.
- **Language:** National languages of the pilot sites.
- **Participants:** Formal carers, informal carers, and seniors.
- **Content:** The training will focus on the practical application of the PROCAREFUL model, tailored to local contexts.

Objectives:

1. **Knowledge Acquisition:** Provide carers and volunteers seniors a thorough understanding of the testing and PROCAREFUL hybrid model, including cognitive, physical, and social exercises.
2. **Skill Development:** Equip informal and formal carers with skills to support older adults' mental, social, and physical wellness using the model's techniques and tools.
3. **Localized Implementation:** Adapt training materials and methods to local languages and contexts for effective learning and application.
4. **Trainer Preparation:** Develop well-prepared trainers who can disseminate the training to a broader audience, ensuring sustainability and scalability.
5. **Practical Application:** Offer hands-on experience, allowing participants to practice and refine their skills under guided supervision.



2. SHORT DESCRIPTION OF PROCAREFUL HYBRID MODEL

The PROCAREFUL hybrid model aims to **PREVENT** cognitive decline, physical decline, and social isolation of persons 55 +. The model includes ways to improve or at least help people sustain their mental, social, and physical level of wellness and autonomy, by encouraging development of **HEALTHY HABITS**, taking advantage of digitalisation and modern knowledge about how to better provide care or support.

The model consists of a technical platform with three types of exercises: cognitive exercises, physical exercises and social exercises, that can be combined and partly adapted to the level that is most appropriate for a person who will be using them. Beside that model also consists of knowledge and exercises that can help you, carers and volunteers, to better understand ageing, illness and frailty, development of good habits and prevention, motivation, digital barriers and communication with older person, helping you to develop good relationship with older person and support him or her in healthy habits development as much as possible.

WHO IS THE MODEL FOR?

PROCAREFUL hybrid model is being developed in a way that can support different pairs of people in different situations which we can find across central Europe in the field of long-term care:

The main purpose of the model is to support adults aged 55+ who need various levels of care, provided by informal carers and/or professionals and can still strongly benefit from preventive solutions. We refer to them as seniors in the technical part of the model. Model solutions focuses especially on those showing early signs of cognitive or physical decline, also those living alone or feeling lonely, including during long absences of household members or carers. This diverse group can often improve their health and well-being through regular cognitive exercises, physical activities (suitable to their abilities), and social interactions. As part of the model seniors are supported by informal and/or formal carers, while in long-run it might be also possible to include the support of volunteers who are also part of long-term care in some countries.

Using a model for cognitive support, physical support, and social support of older people offers several benefits also for participating **INFORMAL CARERS, VOLUNTEERS, AND PROFESSIONALS WORKING IN A HOME CARE ENVIRONMENT:**

1. **Holistic care delivery:** By addressing cognitive, physical, and social needs, carers can provide more comprehensive and personalised care, improving the overall well-being and quality of life for older people. This ensures that all aspects of the person's health are being considered and supported.
2. **Improved outcomes:** Integrating cognitive, physical, and social supports can lead to better health outcomes for older people, such as enhanced cognitive function, increased physical mobility, and greater social engagement. This holistic approach contributes to both mental and physical health, helping to maintain independence and reduce the need for more intensive care as long as possible.
3. **Enhanced efficiency and quality of care:** A structured model helps informal carers, volunteers, and professionals systematically address various aspects of care. This can lead to better quality of care that includes also critical psychosocial aspects - that is often overlooked - and by providing digital platform model hopes to be time-efficient in long run understanding the time constrains on both informal carers and people employed in the care sector.
4. **Reduced carer burden:** By using a clear model and a digital tool with set exercises, informal carers, volunteers, and care workers can feel more confident. They get clear guidance on how to help with cognitive, physical, and social activities. This framework and guidelines reduce the guesswork and emotional stress that often come with caregiving.



5. Increased- job, informal care provision and volunteering satisfaction: Seeing positive impacts on the lives of those they care for can boost job, informal care provision and volunteer satisfaction for professionals, informal carers and volunteers. Knowing their efforts lead to meaningful improvements in cognitive, physical, and social domains can be highly rewarding and motivating for both carers and care recipients.
6. Improved relationship between carers and care recipients: Formal and informal carers, along with their care recipients, may sometimes struggle to establish and maintain good relationships. As people age and/or become ill, they can change and more often than not they find it difficult to accept help, which can complicate the caregiving process. Additionally, the demands and time constraints on carers can create further challenges for these relationships. The Procareful hybrid model aims to improve these dynamics by offering space and tools for social interaction, as well as enhancing carers' understanding of old age and illness.

In summary, employing a comprehensive support model enables informal carers, volunteers, and home care professionals to deliver more holistic, efficient, and high-quality care. This approach benefits carers by providing structure, reducing stress, and enhancing satisfaction, while significantly improving the health and well-being of older adults (55+) and older people.



3. TECHNICAL PART OF THE TRAINING

3.1. Short platform description

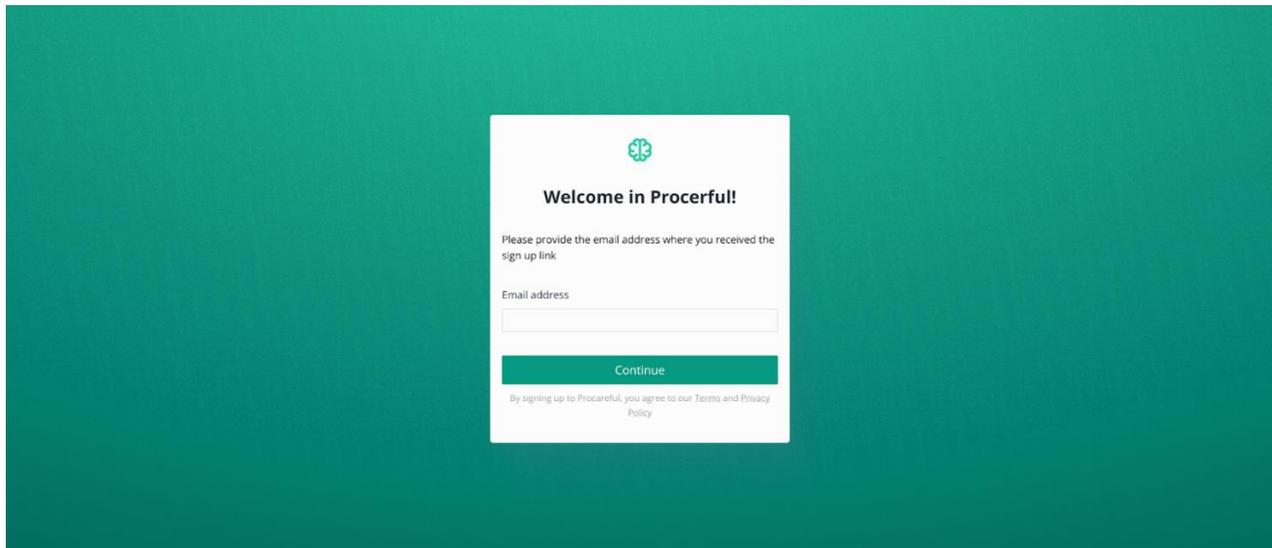
Procareful is a comprehensive platform designed to enhance the quality of care for seniors by facilitating seamless communication and coordination among carers. It allows formal and informal carers to manage care plans, track senior progress, and ensure that all necessary care activities are performed.

The platform includes robust features for user management, allowing administrators to add, edit, and remove carers and seniors efficiently. Formal carers can assign informal carers to seniors, ensuring that every senior has the support they need.

In addition to its web-based functionalities, Procareful offers a mobile version specifically for seniors. This app keeps seniors engaged in cognitive games, physical activities, and personal growth challenges, aimed at improving their overall wellbeing and access to home care. The mobile app is designed to be user-friendly, ensuring seniors can easily stay active and engaged.

Procareful's primary purpose is to streamline the caregiving process, enhance the quality of care provided to seniors, and support their overall health and wellbeing.

3.2. How to start



3.2.1. For Head Admins

- 1) Account Creation:
 - a. A request must be given to the technical team to create a Head Admin account.
 - b. The Head Admin must be added to the database by the technical team.
 - c. Once added, the Head Admin will receive an email with a registration link from Procareful.
- 2) Registration:
 - a. Open the email and click on the registration link.
 - b. Enter your email address and the phone number provided to the technical team.
 - c. Set up your password according to the platform's requirements.
 - d. Log in using your registered email address and newly created password.



3.2.2. For Super Institution Admin/Institution Owner and Institution

- 1) Admin Account Creation:
 - a. Contact your Head Admin to create an account for your institution.
 - b. You will receive an email with a registration link from Procareful.
- 2) Registration:
 - a. Open the email and click on the registration link.
 - b. Enter your email address and the phone number provided to the Head Admin
 - c. Set up your password according to the platform's requirements.
 - d. Log in using your registered email address and newly created password.
- 3) Onboarding:
 - a. Upon logging in, you will be redirected to the dashboard.
 - b. Use the onboarding menu at the top of the screen to enter institution details, set support hours, and manage users within your institution.

3.2.3. For Formal Carers

- 1) Account Creation:
 - a. Contact your SIA or IA to create your account.
 - b. You will receive an email with a registration link from Procareful.
- 2) Registration:
 - a. Open the email and click on the registration link.
 - b. Enter your email address and phone number provided to the SIA or IA.
 - c. Set up your password according to the platform's requirements.
 - d. Log in using your registered email address and newly created password.
- 3) Onboarding:
 - a. Upon logging in, you will be redirected to the dashboard.
 - b. Locate the onboarding menu at the top of the screen to explore platform options.

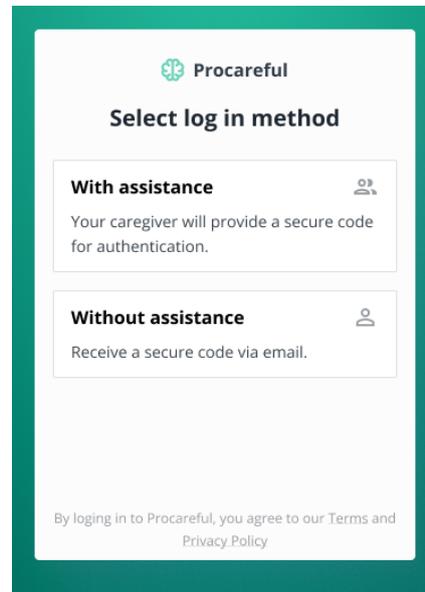
3.2.4. For Informal Carers

- 1) Account Creation:
 - a. Ask a Formal Carer or Administrator to create an account and assign you as an Informal Carer to the senior you are taking care of.
 - b. You will receive an email with a registration link from Procareful.
- 2) Registration:
 - a. Open the email and click on the registration link.
 - b. Enter your email address and phone number provided to the Formal Carer/Administrator.
 - c. Set up your password according to the platform's requirements.
 - d. Log in using your registered email address and newly created password.
- 3) Onboarding:
 - a. Upon logging in, you will be redirected to the dashboard.
 - b. Use the onboarding menu at the top of the screen to explore platform options.



3.2.5. For Seniors

Seniors have two primary methods to access the Procareful platform, ensuring they can easily engage with their assigned activities and carers.



Methods of Access:

- 1) Via Email Link - Seniors receive an email containing a unique link to access the Procareful platform.
 - a. Steps:
 - i. Seniors open the email and click on the provided link.
 - ii. If not already installed, they download the Procareful mobile app on their device.
 - iii. Enter their credentials (email address and phone number) to log into the platform.
 - iv. If they selected the login method "without assistance," they receive a security code via email for authentication.
- 2) Using QR Code (Assisted Access) - Seniors can access the platform by scanning a QR code provided by their Informal or Formal Carer.
 - a. Steps:
 - i. Carers navigate to the Seniors tab within their part of the platform.
 - ii. If the senior's device does not have the app installed, carers assist in downloading the Procareful mobile app. To do this, they need to scan QR code and start downloading process
 - iii. Carers provide the security code to the senior for log-in authentication.

3.3. How to assign seniors and informal carers

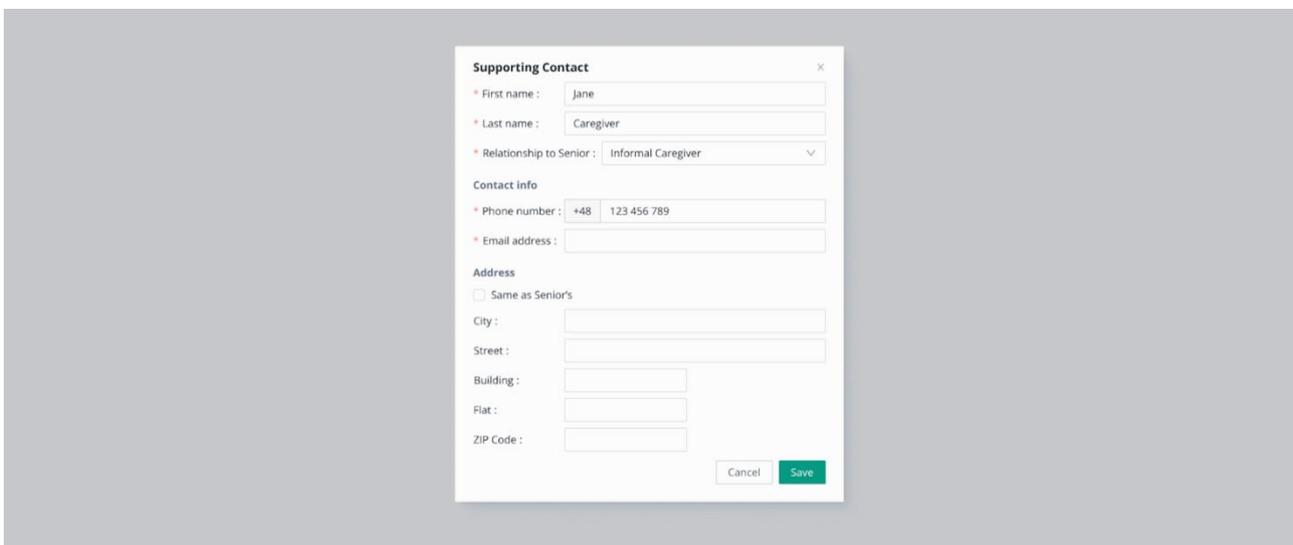
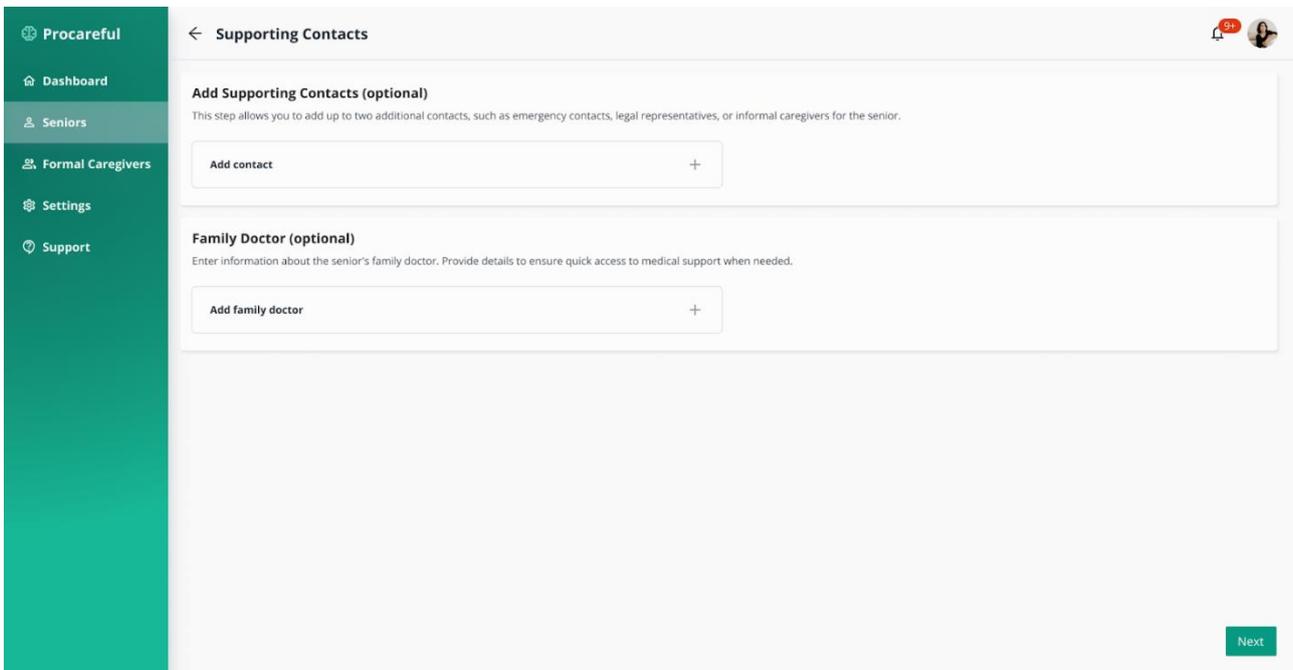
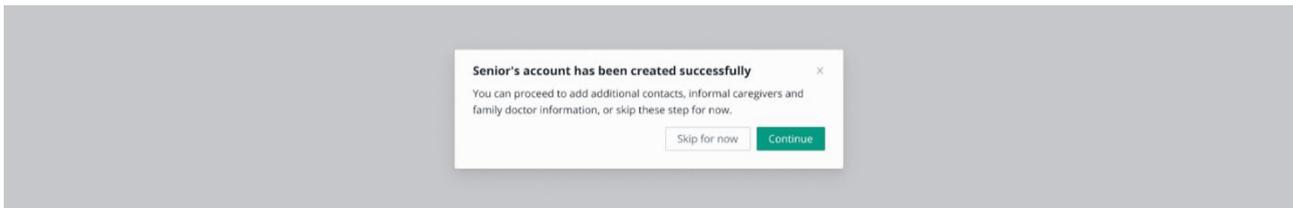
3.3.1. Role of Formal Carer or Other person in charge

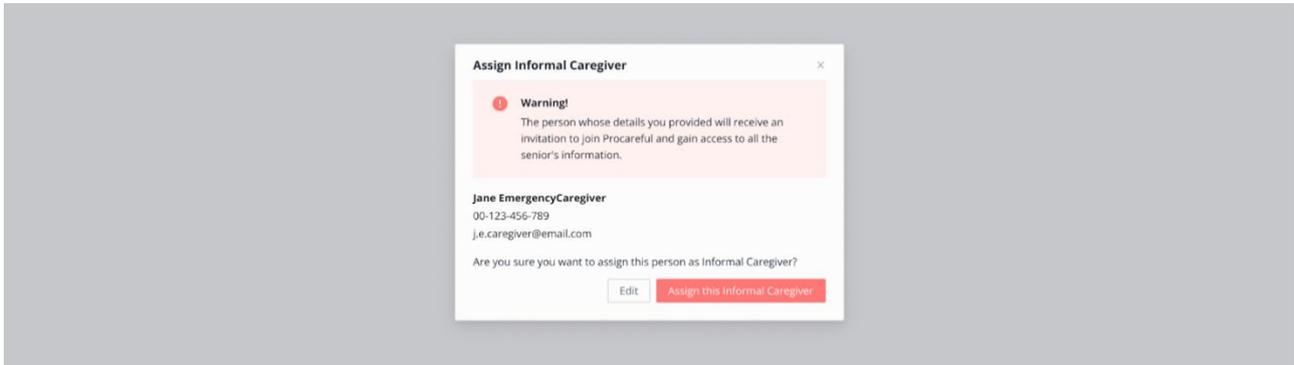
The process of building a comprehensive support network for a Senior begins with the Formal Carer or Other person in charge. Here's a detailed breakdown of the steps involved:

- 1) Adding a Senior to the Platform - The Formal Carer or Other person in charge is responsible for initiating the process of adding Senior to the Procareful platform.
 - a. Automatic Assignment: Upon adding a Senior, the Formal Carer or Other person in charge who completed the process is automatically assigned as the Senior's first Formal Carer.
- 2) Assigning Informal Carers:

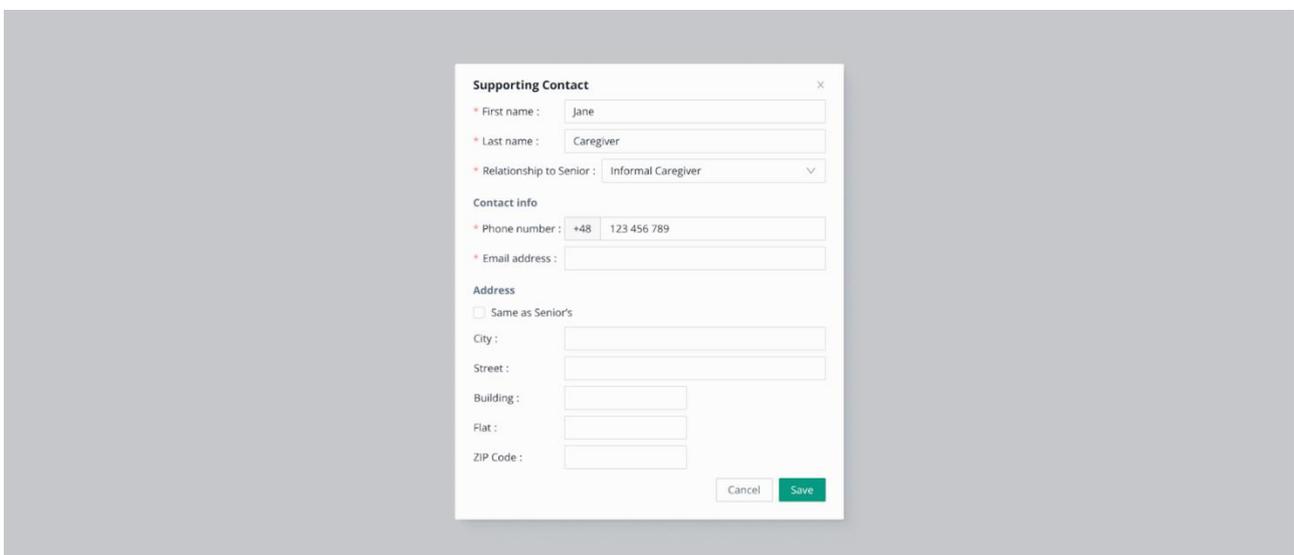
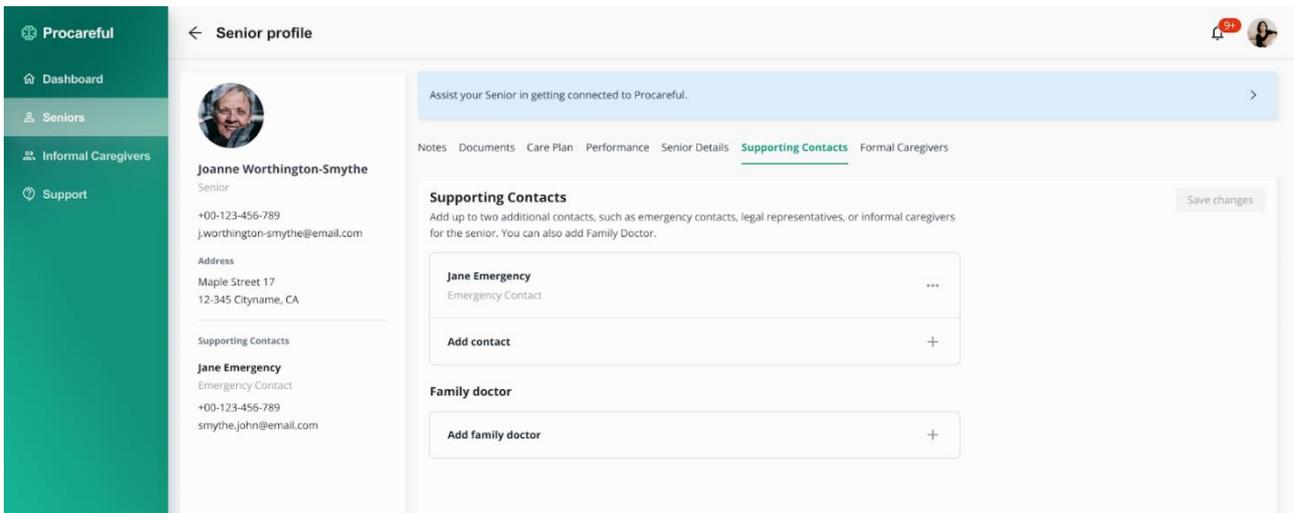


- a. During “Add Senior” process:
 - i. In the “Supporting Contacts” step of adding a Senior, the Formal Carer can assign Informal Carers.
 - ii. Data Entry: After filling in the necessary details for the Senior, the Formal Carer can add an Informal Carer by providing their details and selecting their relationship to the Senior as “Informal Carer.”
 - iii. Warning: A warning will inform the user that the person with the given data will receive access to all the Senior’s data.
 - iv. Invitation: The Informal Carer receives an invitation to join Procareful.





- b. In the Senior profile:
 - i. At any time, the Formal Carer or Other person in charge can access the "Supporting Contacts" tab in the Senior's profile to add an Informal Carer.
 - ii. Procedure:
 - 1. In the "Supporting Contacts" tab, they need to select "Add Supporting Contact"
 - 2. Modal will appear, and Formal Carer or Other person in charge should select "Relationship to senior" as "Informal Carer," and the individual will be invited to join Procareful.

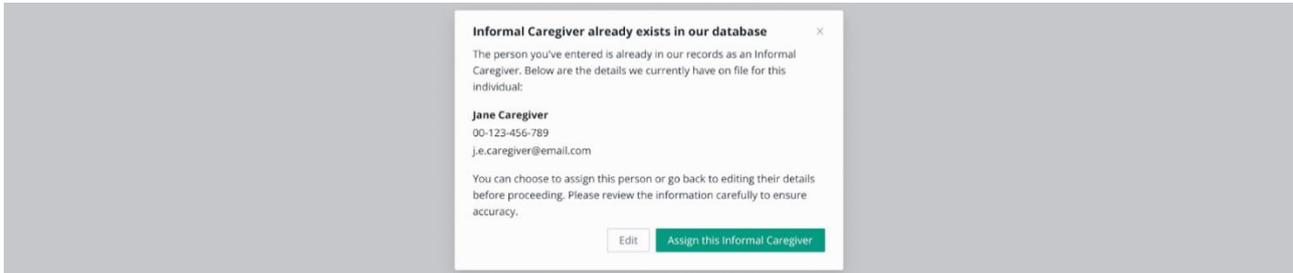




3) Assigning Multiple Seniors

It is possible for one Informal Carer to be assigned to multiple Seniors.

Example: A child can act as an Informal Carer for both parents, managing their care through the same platform.



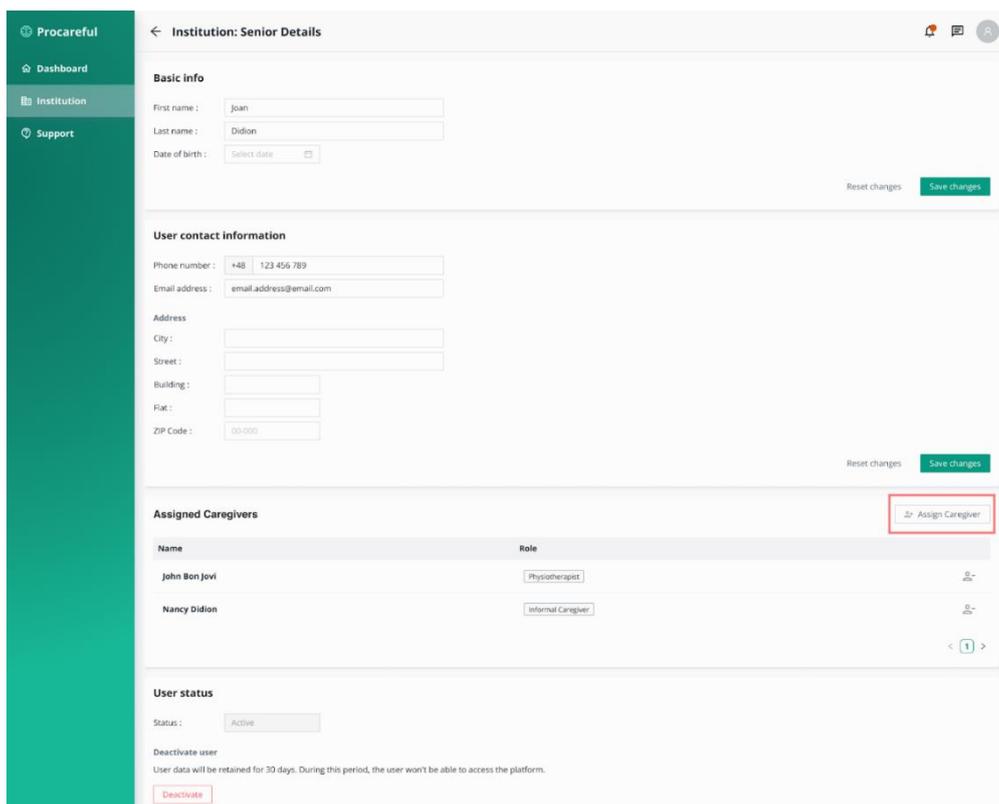
3.3.2. Role of the Super Institution Admin (SIA) / Institution Admin (IA)

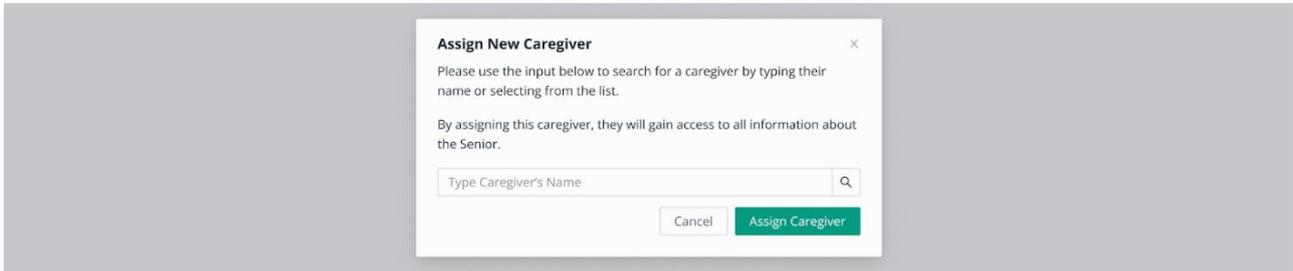
SIAs and IAs have the authority to manage the assignments of Seniors and Carers within their institution. This includes assigning additional Formal Carers to Seniors, as well as reassigning or removing existing assignments.

SIAs and IAs can assign additional Formal Carers to a Senior upon the request of the currently assigned Formal Carer.

1) Steps to Assign a New Formal Carer:

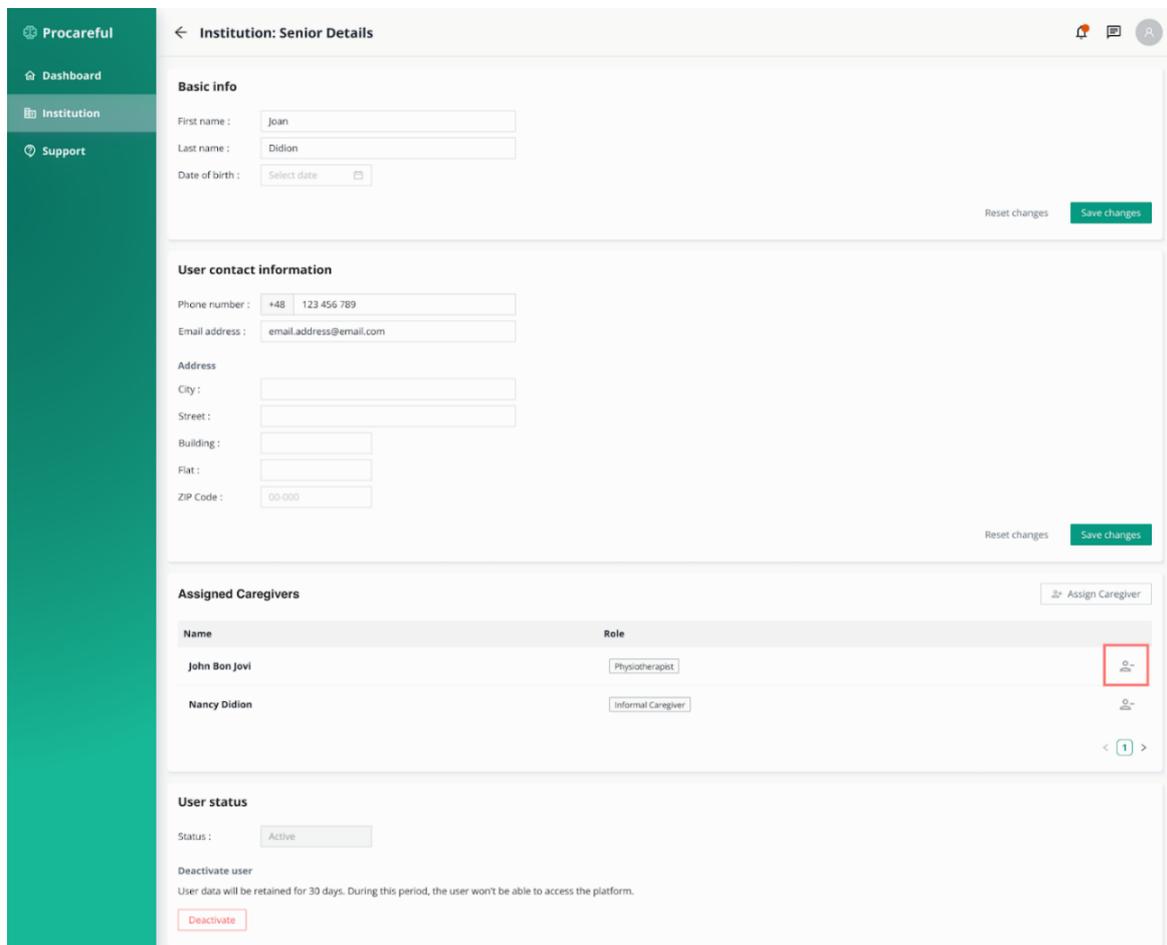
- a. Access Senior Details - SIAs and IAs need to navigate to the Senior Details section within their part of the platform.
- b. Assigned Carer Table
 - i. In the table listing assigned carers, they can click on the "Add Carer" button.
 - ii. From the list of available Formal Carers within the institution, they can select the desired carer to assign to the Senior.





2) Removing an Assignment:

To remove an assigned carer, SIAs and IAs should click on the icon next to the carer's name in the assigned carer table.



3.4. Senior's profile mock-up

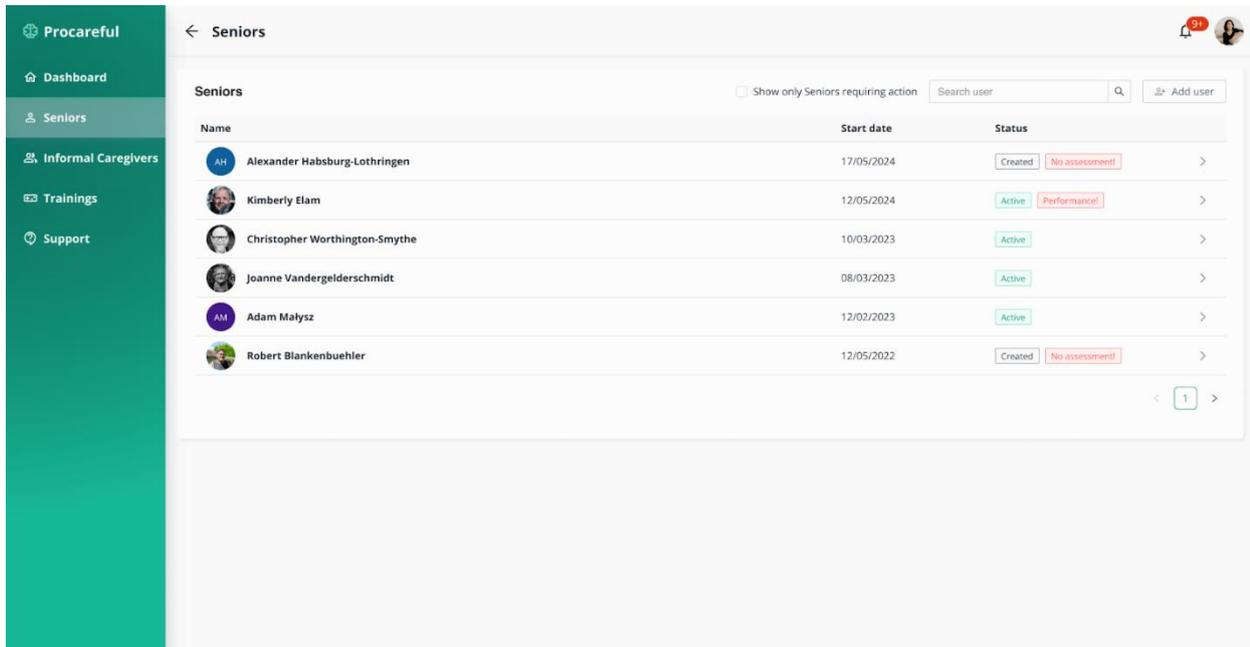
3.4.1. Status

On the Seniors tab, you will see all seniors assigned to you. Each senior can have one of the following statuses:

- Created: Senior has their account created but has not logged in yet.
- Active: Senior has logged in.
- No Assessment: Senior account is created, but a condition assessment has not been performed yet.
- No Activities: Senior has assessment completed, but activities has not been assigned
- Performance!: Indicates a performance warning, meaning the senior is performing less than expected.



PROCAREFUL

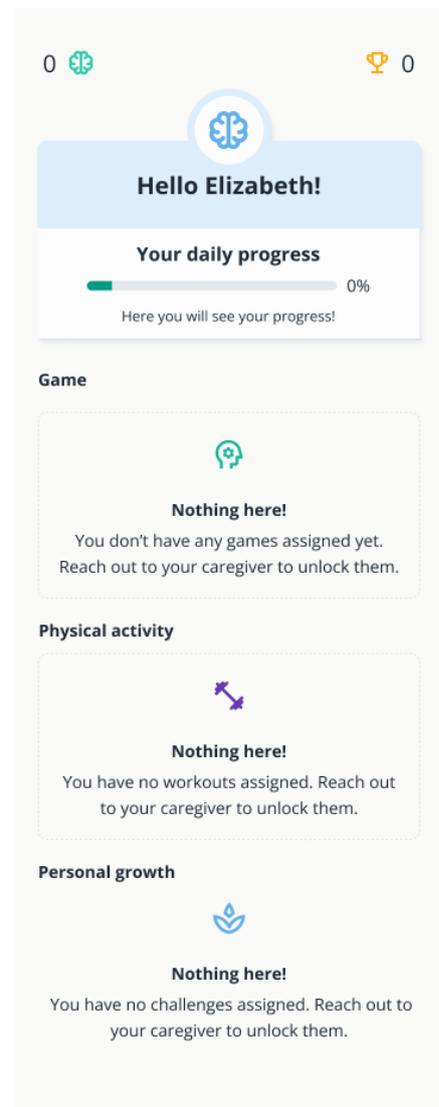


3.4.2. Senior profile

3.4.2.1. For Seniors

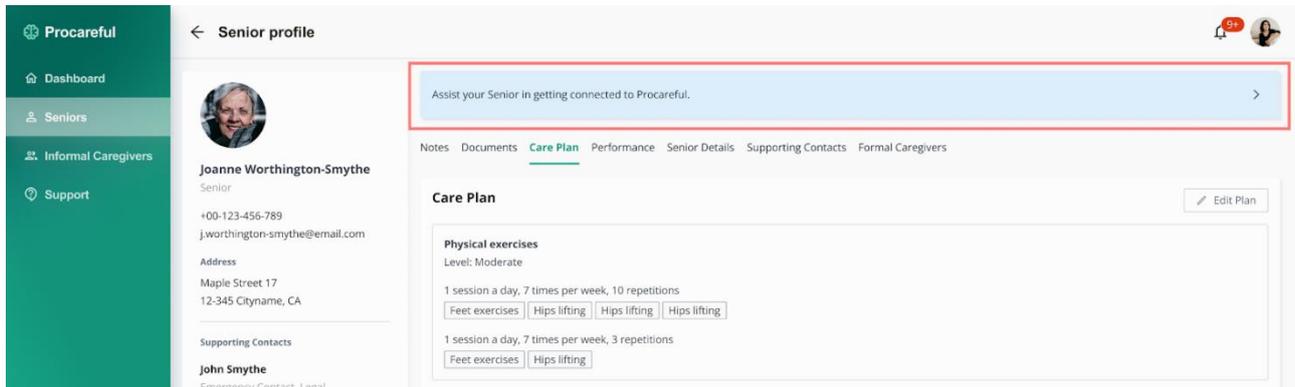
3.4.2.1.1. Log In - Senior

Important: Seniors can access the platform as soon as their account is created by a caregiver. However, they will not be able to access any activities until their condition assessment is performed and activities are assigned. If there is no assessment and no assignment, seniors can log in, but there will be nothing for them to engage in.

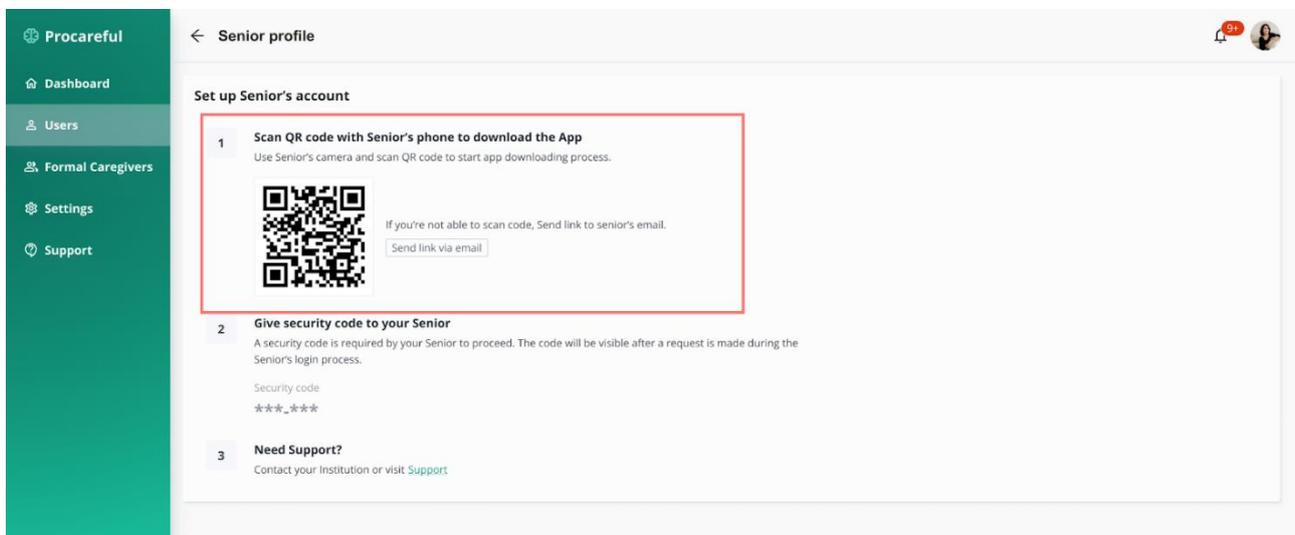


With assistance

1. Complete Initial Setup:
 - Ensure the senior has their condition assessment performed and activities assigned.
2. Download the Senior's App:
 - Access the senior's profile in the Seniors tab.
 - Click "Assist your Senior in getting connected to Procareful."

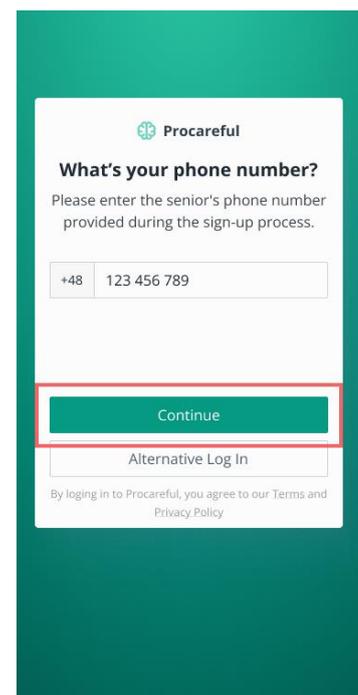
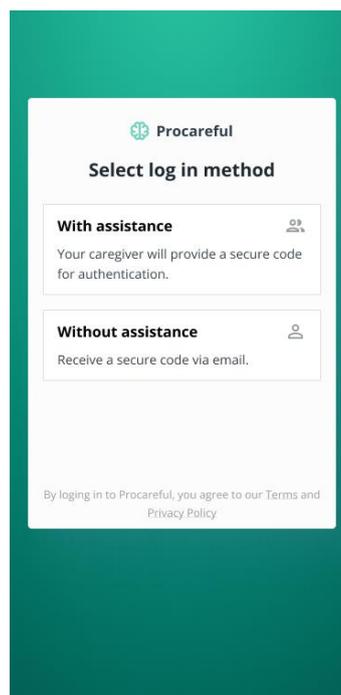


- Scan the QR code displayed with the senior's phone to download the app.



3. Register on the App:

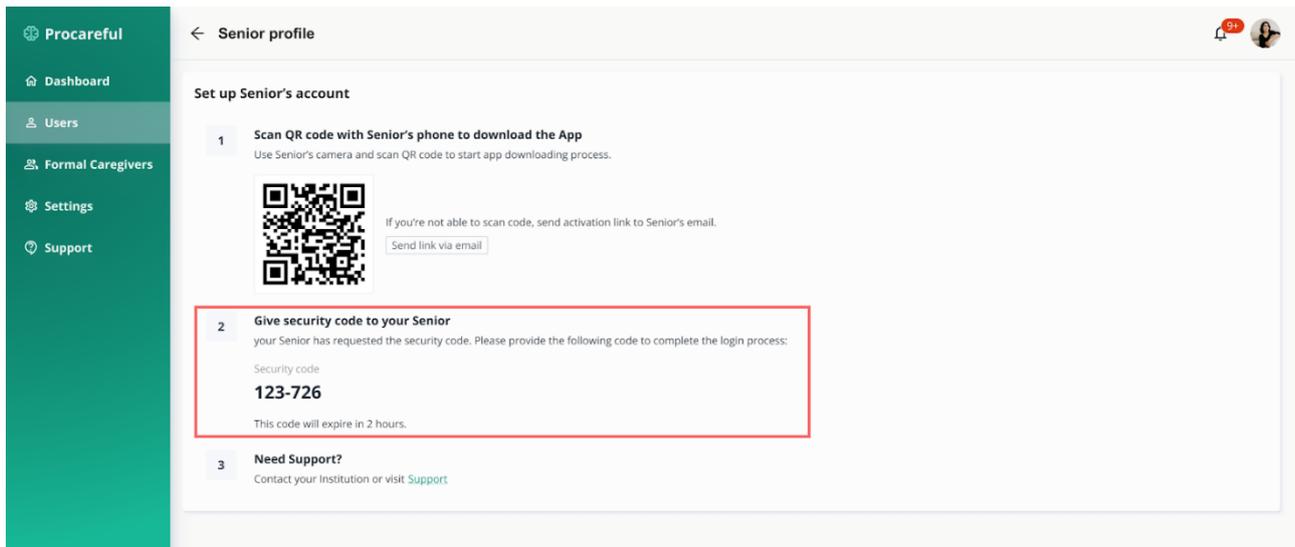
- After downloading, the senior will be asked to register. Select “With assistance” option.
- Provide all necessary data and click “Continue”.





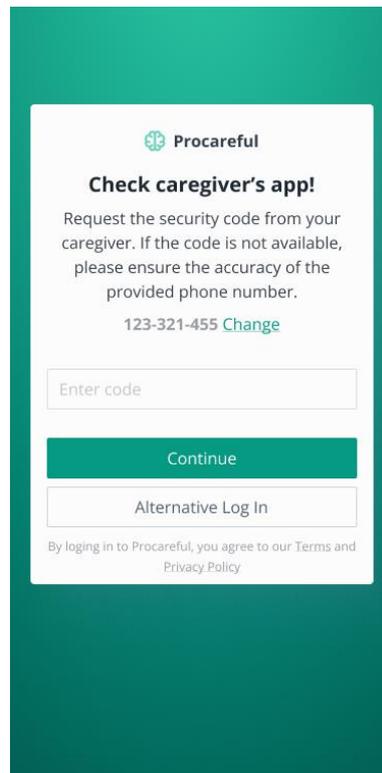
4. Enter the Six-Digit Code:

- After the senior provides their phone number during the login process and clicks “Continue”, the six-digit code will become visible in the caregiver’s platform.
- The code is located below the QR code you scanned previously.



5. Complete Setup:

- Once the code is confirmed, the senior is ready to use their app.

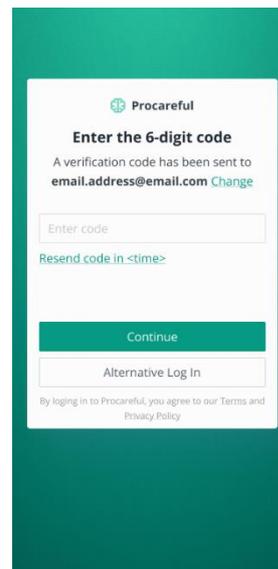
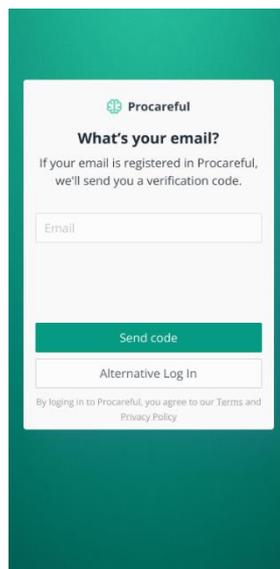
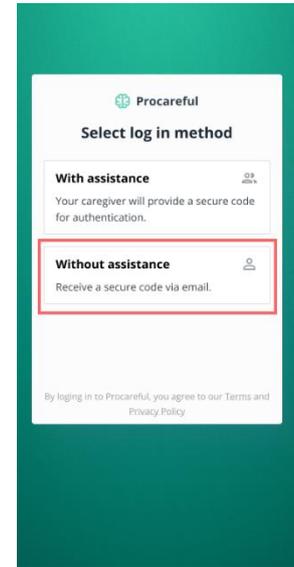




Without assistance

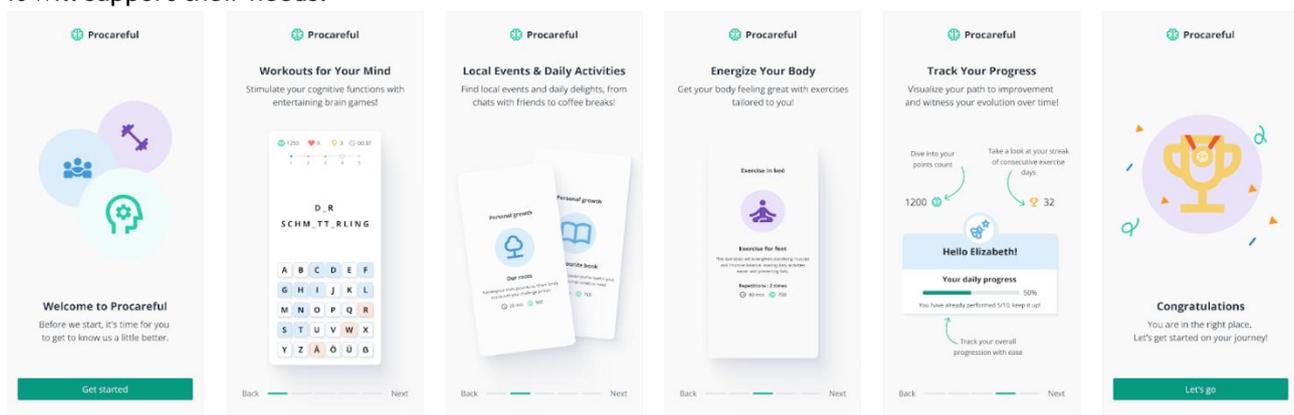
1. Complete Initial Setup:
 - Ensure the senior has their condition assessment performed and activities assigned.
2. Download the Senior's App:
 - The senior will receive a download link via the email provided during account creation.
3. Register on the App:
 - After downloading, the senior will be asked to register. Select the “Without assistance” option.
 - Provide all necessary data - email address and the security code, that senior will receive via the email provided on the previous step.

If there is a mistake in the email address provided, click “Change” next to the email address displayed above the input field. Users will be redirected to the previous screen where they can update the address.



3.4.2.1.2. Onboarding

After logging in, the user is redirected to the onboarding process, where they receive an overview of what to expect from the platform. This step ensures that users are familiarized with the app's features and how it will support their needs.





3.4.2.1.3. Dashboard

The dashboard in the Senior app provides a user-friendly interface for tracking daily activities and progress:

Top Section:

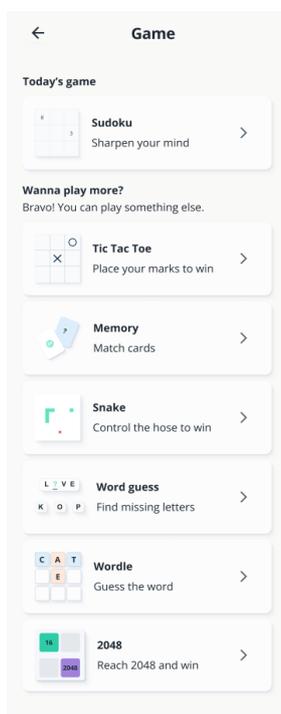
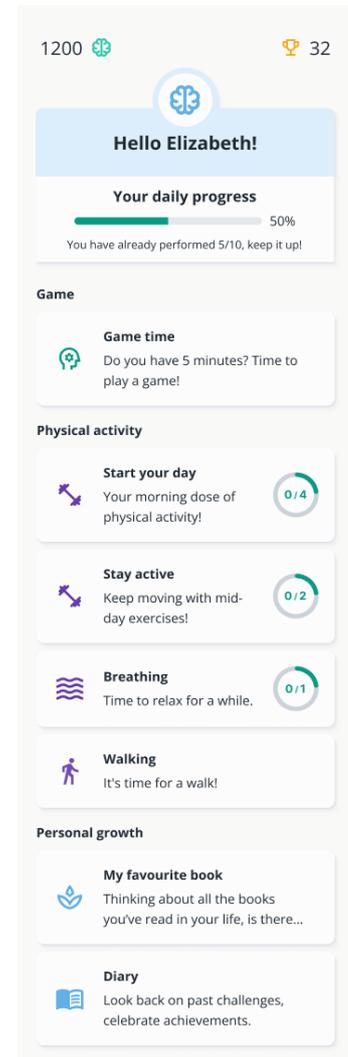
- **Points Count (Top Left):** Displays the total points earned by completing activities.
- **Streak Counter (Top Right):** Shows the number of consecutive days the user has completed challenges.
- **Daily Progress Bar:** Located below the user's name, this bar indicates the user's progress toward daily goals.

Sections:

1. **Game Section:** Provides access to cognitive games designed to engage and challenge the user's mind.
2. **Physical Activities Section:** Displays the planned physical activities for the day, which can include:
 - Physical exercises
 - Breathing exercises
 - Walking

Activities vary depending on the care plan assigned to the senior.

3. **Personal Growth Section:** An optional section offering personal growth challenges aimed at stimulating social abilities and preventing loneliness.
 - Activities may include reading, reflecting on past experiences, or other exercises designed for personal development.
 - **Diary:** allowing Senior to add notes and reflections about previous activities.



3.4.2.1.3.1. Games

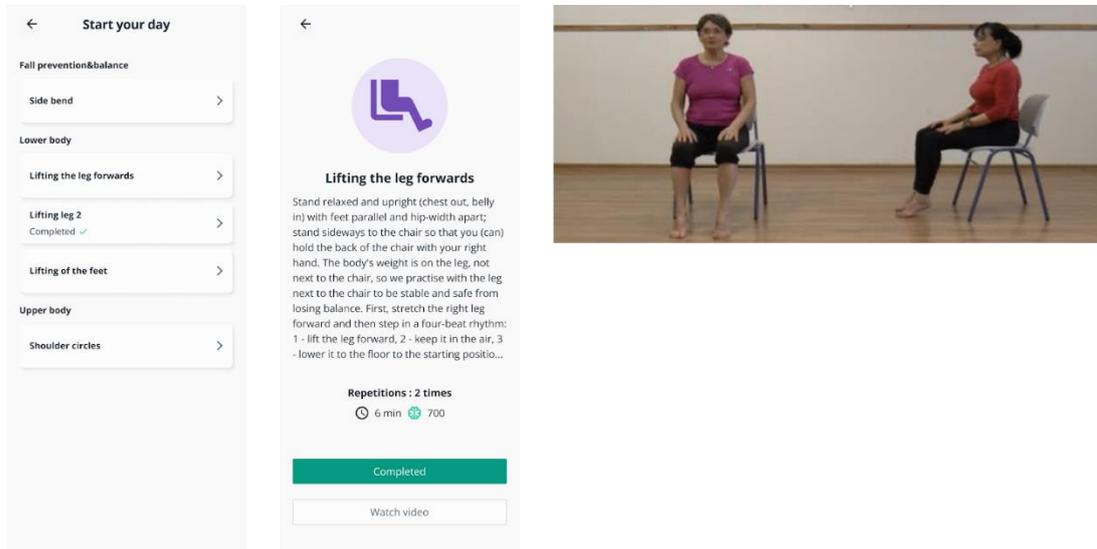
Upon accessing the Game Section, seniors are presented with the following options:

1. **Today's Game:** A daily recommended game is highlighted at the top. This game changes every day, and seniors are encouraged to play it to keep their minds sharp.
2. **Additional Games:**
 - Below the recommended game, seniors can choose from a list of other games to play if they wish to engage further.
 - Each game offers different cognitive challenges, with details available in a separate section of the document.



3.4.2.1.3.2. Physical activities

In the Physical Activities Section, seniors can engage in a variety of exercises tailored to their care plan. Here's how it works:



1. Exercise List:

- Upon selecting a physical activity, a list of specific exercises is displayed.
- Seniors should choose an exercise to access its description and, if available, an instructional video.
- Note: Not all exercises include videos.

2. Completing Activities:

- After performing an exercise, the senior must click the "Completed" button.
- Marking an activity as completed is essential for it to be counted as done. This completion is also tracked and visible to caregivers, contributing to the senior's overall performance evaluation.

3.4.2.1.3.3. Personal growth

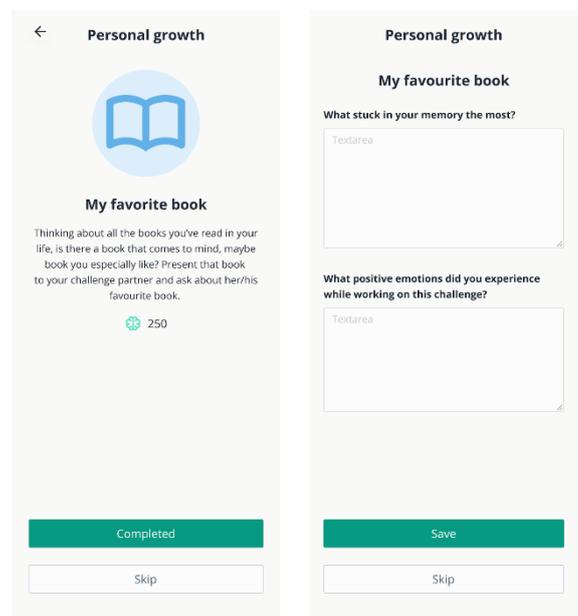
In the Personal Growth Section, seniors can engage in challenges designed to stimulate social interaction and personal development.

1. Challenges:

- Each challenge includes a brief description and its intended goal.
- After completing a challenge, a new one will be displayed.
- Seniors have the option to skip a challenge if they prefer not to do it or wish to revisit it later.

2. Diary Feature:

- Seniors can use the diary to reflect on and record memories related to completed challenges.
- This feature encourages users to document their experiences, helping them track their personal growth over time.





3.4.2.2. For Formal and Informal Carers

When you select a senior to view details, you will be redirected to their profile. Here you can find all information about the senior.

The profile contains multiple tabs:

- Notes: Add and read notes added by other carers.
- Documents: Upload all relevant documents related to the senior (not available for Informal Carers)
- Care Plan: Check and modify activities assigned to the senior (editing not available for Informal Carers)
- Performance: Monitor how the senior is performing, with detailed information about their completed activities.
- Senior Details: Check and edit the senior's personal details.
- Supporting Contacts: Add, remove, or edit supporting contacts, such as legal representatives, informal carers, and emergency contacts (editing not available for Informal Carers).
- Formal Carers: View all formal carers assigned to the senior who provides care.

3.4.2.3. For Super Institution Administrators (SIA) and Institution Administrators (IA)

SIAs and IAs have comprehensive permissions to manage Senior profiles. They can edit Senior details, manage carer assignments, and deactivate or delete Seniors from the institution.

Steps to Access Senior Profiles:

- 1) Navigate to the "Institution" Tab
- 2) Click on the "Users" section within the Institution tab.
- 3) Select the Senior:
 - a. In the table listing users, locate the senior whose profile you wish to access.
 - b. Click on the row corresponding to the selected senior to view their profile details.



3.4.2.4. What You Can Do in the Senior Profile:

- Edit Senior Details - Modify the senior's personal information, such as contact details and other relevant data.
- Manage Carer Assignments:
 - Assign Additional Carers: Add more formal or informal carers to the senior.
 - Remove Carer Assignments: Reassign or remove current carers from the senior's profile.
- Deactivate or Delete Senior Account:
 - Deactivate Account: Temporarily prevent the senior from accessing the platform.
 - Delete Account: Permanently delete the senior's account from the institution after deactivation.

Basic info

First name :

Last name :

Date of birth :

Reset changes

User contact information

Phone number :

Email address :

Address

City :

Street :

Building :

Flat :

ZIP Code :

Reset changes

Assigned Caregivers

Name	Role	
John Bon Jovi	Physiotherapist	
Nancy Didion	Informal Caregiver	

< 1 >

User status

Status :

Deactivate user

User data will be retained for 30 days. During this period, the user won't be able to access the platform.

3.5. Carer's profile mock-up

3.5.1 For the Formal and Informal Carers

The Formal Carer Profile is exclusively available to Formal Carers. This profile contains crucial information such as contact details, working hours, and professional role. Both Formal and Informal Carers can access the Formal Carer Profile to retrieve this information.



The screenshot displays the 'Formal Caregiver profile' page. On the left is a navigation menu with 'Procareful' at the top, followed by 'Dashboard', 'Seniors', 'Formal Caregivers', 'Settings', and 'Support'. The main content area shows the profile for 'Joanne Worthington-Smythe', a 'Formal Caregiver'. It lists her contact details: phone number '+00-123-456-789' and email 'j.worthington-smythe@email.com'. Her address is listed as 'Not provided'. Under the 'Role' section, there are two buttons: 'Physiotherapist' and 'Volunteer'. The 'Working hours' section includes a sub-header 'Find out the specific days and hours when Caregiver is available to provide support.' and a table of hours: Monday (9:00 - 12:30), Tuesday (9:00 - 18:00), and Friday (10:00 - 16:00).

Details Included in the Formal Carer Profile:

- Contact Information: Phone number and email address.
- Working Hours: Available times when the carer can be contacted.
- Professional Role: The specific role and responsibilities of the carer within the institution.

How to Access Carer Profiles

- 1) Accessing Through Senior Profile:
 - a. Navigate to the Seniors tab in the platform.
 - b. Select the senior whose carer profile you wish to view. This will take you to the Senior Profile page.
- 2) Accessing the Formal Carers Tab:
 - a. Within the Senior Profile, locate and click on the "Formal Carers" tab.
 - b. You will see a list of all formal carers assigned to the selected senior.
- 3) Viewing Carer Profile:
 - a. Click on the name of the carer listed in the table.
 - b. This action will open the Carer Profile, displaying their contact information, working hours, and professional role.

3.5.2. For Super Institution Administrators (SIA) and Institution Administrators (IA)

SIAs and IAs can access, manage, and edit both Formal and Informal Carer profiles within the platform. Managing permissions is only applicable to Formal Carers.



Procareful ← Institution: Senior Details

Basic info

Added by : Bob Caregiver

* First name : Joan

* Last name : Didion

* Date of birth : Select date

Reset changes Save changes

User contact information

* Phone number : +48 123 456 789

Email address : email.address@email.com

Address

City :

Street :

Building :

Flat :

ZIP Code : 00-000

Reset changes Save changes

Assigned Caregivers Assign Caregiver

Name	Role
John Bon Jovi	Physiotherapist
Nancy Didion	Informal Caregiver

User status

Status : Active

Deactivate user

User data will be retained for 30 days. During this period, the user won't be able to access the platform.

Deactivate

How to Access Carer Profiles:

- 1) Go to the "Institution" tab in the platform.
- 2) Click on the "Users" section within the Institution tab.
- 3) Select the Carer:
 - a. In the table listing users, locate the carer whose profile you wish to access.
 - b. Click on the row corresponding to the selected carer to view their profile details.

What You Can Do in the Carer Profile:

- **View Assigned Seniors:** See all seniors assigned to the carer.
- **Carer Details:** Access and edit carer's contact information, working hours, and professional role.
- **Manage Permissions (Formal Carers Only):** Adjust additional permissions for the formal carer if applicable.
- **Deactivate or Remove Carer Account:**
 - **Deactivate Account:** Temporarily prevent the carer from accessing the platform.
 - **Remove Account:** Permanently delete the carer's account from the institution after deactivation.
- **Remove Senior Assignments:**
 - Reassign seniors to other carers if necessary before deactivating or removing a carer.



3.6. Assessment

The assessment is a comprehensive evaluation conducted by professionals. The purpose of the assessment is to evaluate seniors' cognitive, physical, social conditions and create personalized care plans tailored to their specific needs. Moreover, the score obtained are used to develop an AI system capable of matching the users' conditions with appropriate training activities.

In PROCAREFUL, the assessment covers the cognitive, physical, and social domains. Moreover, sleep quality and overall well-being are examined.

The **platform** guides formal carers through the **main steps** of the assessment process. It provides the necessary test and questionnaires to be administered and offers a detailed final report that can be downloaded and used to track progress over time. This report contains the answers provided by the senior and a summary of the scores obtained. The assessment process is expected to take about **40 minutes**.

Based on the assessment, the platform recommends the most suitable training for the individual, but it is the responsibility of the **formal carer to use their expertise to adjust and finalize the training plan**. While the platform provides robust tools and resources to facilitate the assessment process, the human element brought by care professionals is indispensable. Through empathetic conversations, carers ensure that seniors feel understood and cared for. Their expertise allows them to gather nuanced information that standardized questionnaires might miss and define the care plan that is suited to the person.

Assessment timeline

During pilot activities, assessment will be performed three times:

- *Initial assessment*: before the definition of the personalized care plan
- *Intermediate assessment*: after three to four months of training
- *Final assessment*: at the end of the pilot activities

However, the PROCAREFUL platform allows for the assessment of a person's condition whenever there is suspicion of decline or a need to change the care plan (e.g., the number / type of exercises should be changed, etc.).

Test and Questionnaires

The platform provides the test and questionnaires to obtain quantitative measures of participants' cognitive, physical, social conditions, quality of sleep and overall well-being. They are administered either outside or within the platform.



Assessing cognitive status

- *Montreal Cognitive Assessment (MoCA) test*

One sheet screening tool for the assessment of cognitive performance. It is a 30-question validated test that measures multiple cognitive domains. The test is administered outside the platform using the paper version, and the final score is then reported. For more information and to access the free training on how to administer MoCA test for care professionals visit the website <https://mocacognition.com/>

Assessing physical status

- *Screening for physical fitness*

Three items are proposed to determine whether the person is bedridden, can walk without support, or has severe problems with balance. These are yes/no questions. Only people without severe limitations will complete the IPAQ questionnaire to assess their level of physical activity.

- *International Physical Activity Questionnaire (IPAQ)*

The questionnaire is used to self-assess the level of physical activity. It distinguishes between moderate activities (those that require moderate physical effort and make the person breathe somewhat harder than normal) and vigorous activities (activities that require hard physical effort and make the person breathe much harder than normal). It also allows for the assessment of time spent in each activity, considering the estimated metabolic equivalent (MET) energy expenditure. Results permit categorizing the person into one of three levels (inactive, sufficiently active, or highly active). Answers to the questions can be entered directly into the PROCAREFUL platform to calculate results. For more information, visit the website <https://sites.google.com/view/ipaq/home>

Assessing loneliness

- *The 6-item De Jong Gierveld Scale*

This questionnaire is aimed at assessing the individual's subjective evaluation of loneliness. It distinguishes two components of loneliness: emotional loneliness, characterized by the feeling of missing an intimate relationship, and social loneliness, defined by the lack of a wider social network. It is a shorter, 6-item valid and reliable tool (Gierveld & Tilburg, 2006). Answers to the questions can be entered directly into the PROCAREFUL platform to calculate results.

Assessing quality of life

- *5-level EQ-5D version (EQ-5D-5L)*

This questionnaire was introduced by the EuroQol Group (2009) to assess people's quality of life in relation to health status. It is composed of two parts: the descriptive system questionnaire and the visual analogue scale. The first part asks questions on mobility, self-care, usual activities, pain/discomfort and anxiety/depression. The second part provides an alternative way for the person to rate their own overall



health in scale from 0 (worst health) to 100 (best health). Answers to the questions can be entered directly into the PROCAREFUL platform to calculate results.

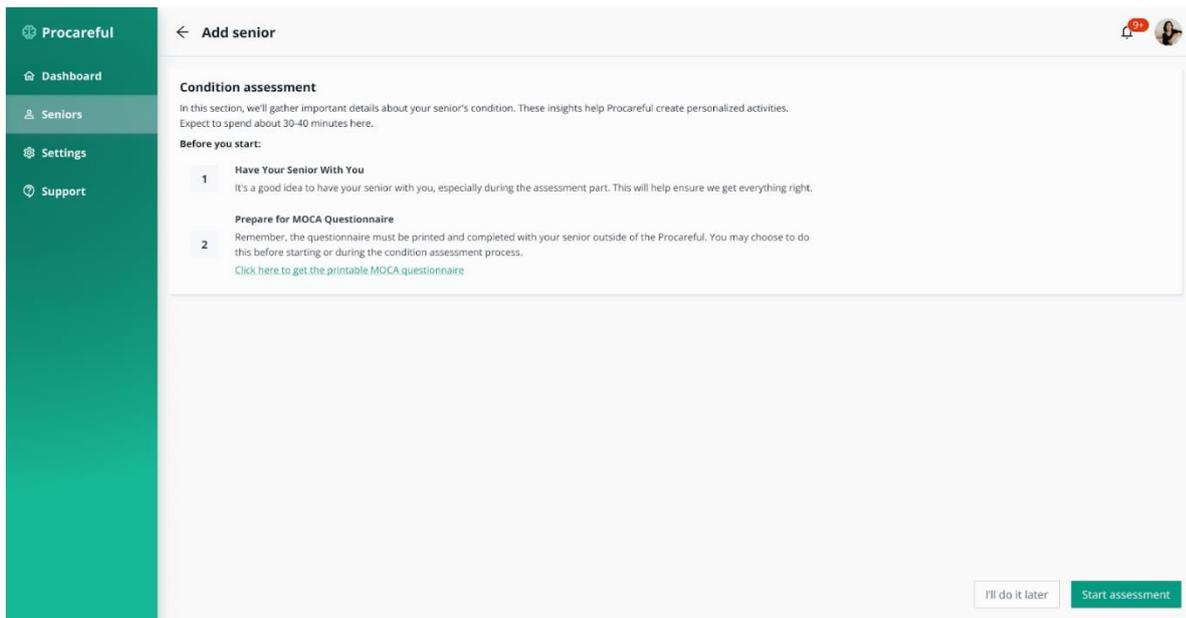
Assessing quality of sleep

- Pittsburgh Sleep Quality Index (PSQI)

Sleep quality is assessed as it is crucial for preserving cognitive functions and reducing the risk of dementia (Lim et al., 2013), and poor sleep quality has a negative impact on health (Buysse et al., 2005). PSQI is a 19-item self-report questionnaire used to measure sleep quality over the previous month (Buysse et al., 1989). The questionnaire assesses different sleep domains, including sleep quality, sleep latency, sleep disturbances, sleep duration, use of sleeping medications and daytime disfunctions and it also provides a global sleep quality score. Answers to the questions can be entered directly into the PROCAREFUL platform to calculate results.

How to perform the assessment within the PROCAREFUL platform

Step 1: Start the assessment, assessing senior's cognitive abilities outside the platform



The assessment needs to be completed in one attempt. If you abort, you won't be able to return to it later, and all data provided during the attempt will be lost. MoCA test must be performed outside the platform. The total score is then added by the formal carer.



Step 2: Assess senior's physical conditions

Three questions for screening physical conditions are presented. Only if the person does not have mobility impairments, the IPAQ questionnaire can be completed.

Physical activity level

Time for IPAQ questionnaire! It's all about figuring out how active the senior is. We'll ask about the kinds of activities they do and how much time they spend sitting. Your answers will give Procareful a good picture of their activity level.

- During the last 7 days, on how many days did you do vigorous physical activities like heavy lifting, digging, aerobics, or fast bicycling?
- How much time did you usually spend doing vigorous physical activities on one of those days?

 Don't know/ Not sure
- During the last 7 days, on how many days did you do moderate physical activities like carrying light loads, bicycling at a regular pace, or doubles tennis? Do not include walking.
- How much time did you usually spend doing moderate physical activities on one of those days?

 Don't know/ Not sure
- During the last 7 days, on how many days did you walk for at least 10 minutes at a time?
- How much time did you usually spend walking on one of those days?

 Don't know/ Not sure
- During the last 7 days, how much time did you spend sitting on a week day?

 Don't know/ Not sure

Buttons: Back, Cancel, Next step

The IPAQ is presented within the platform to be filled out.

Step 3: Assess senior's social condition and feeling of loneliness

Social abilities

Let's dive into assessing social well-being using the De Jong Gierveld Scale! It's a quick 6-question quiz split into emotional loneliness (EL) and social loneliness (SL). Your answers will help Procareful understand how the senior feels about their connections.

- I experience a general sense of emptiness [EL]
 Yes
 More or less
 No
- I miss having people around me [EL]
 Yes
 More or less
 No
- I often feel rejected [EL]
 Yes
 More or less
 No
- There are plenty of people I can rely on when I have problems [SL]
 Yes
 More or less
 No
- There are many people I can trust completely [SL]
 Yes
 More or less
 No
- There are enough people I feel close to [SL]
 Yes
 More or less
 No

Complete with the senior the 6-item De Jong Gierveld Scale to assess loneliness.



Step 4: Assess senior's motivation to use the platform and quality of life

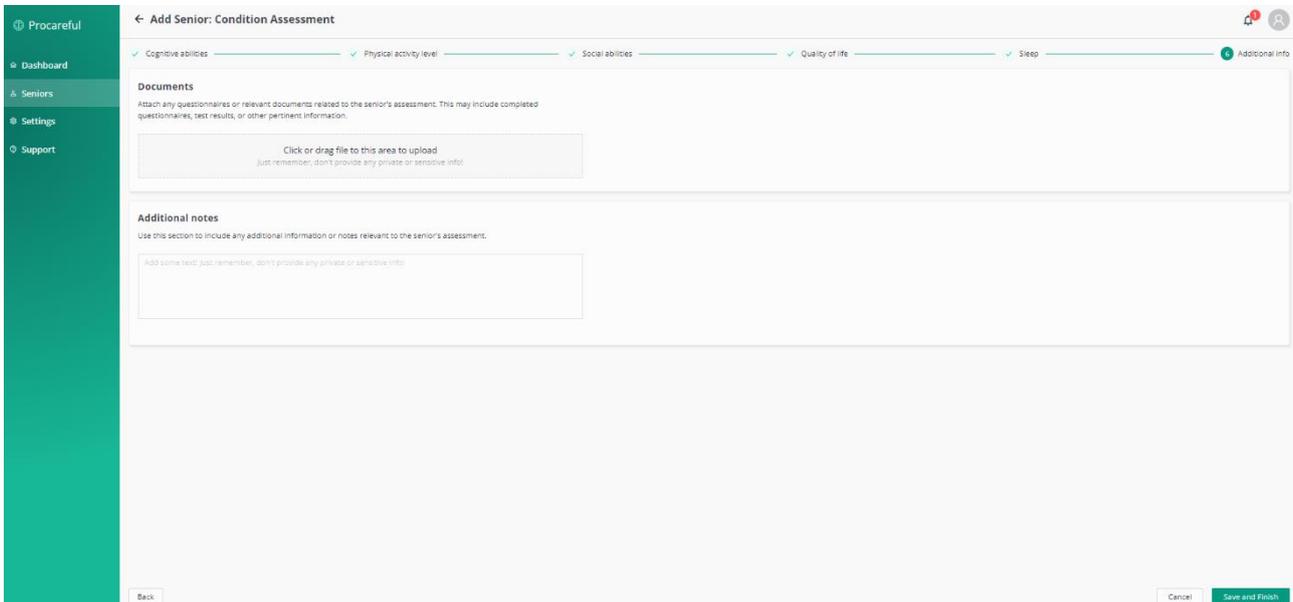
At this stage of the assessment, you should be able to infer the senior's motivation to engage in activities. You could also ask the person about their motivation for performing activities. One of three options can be selected: low motivation, medium motivation, or high motivation. This parameter will influence training frequency and duration over the week. Then, complete the assessment of the quality of life.

Step 5: Assess senior's quality of sleep

At this stage, you are almost done! Assess senior's quality of sleep and report the answers within the platform.

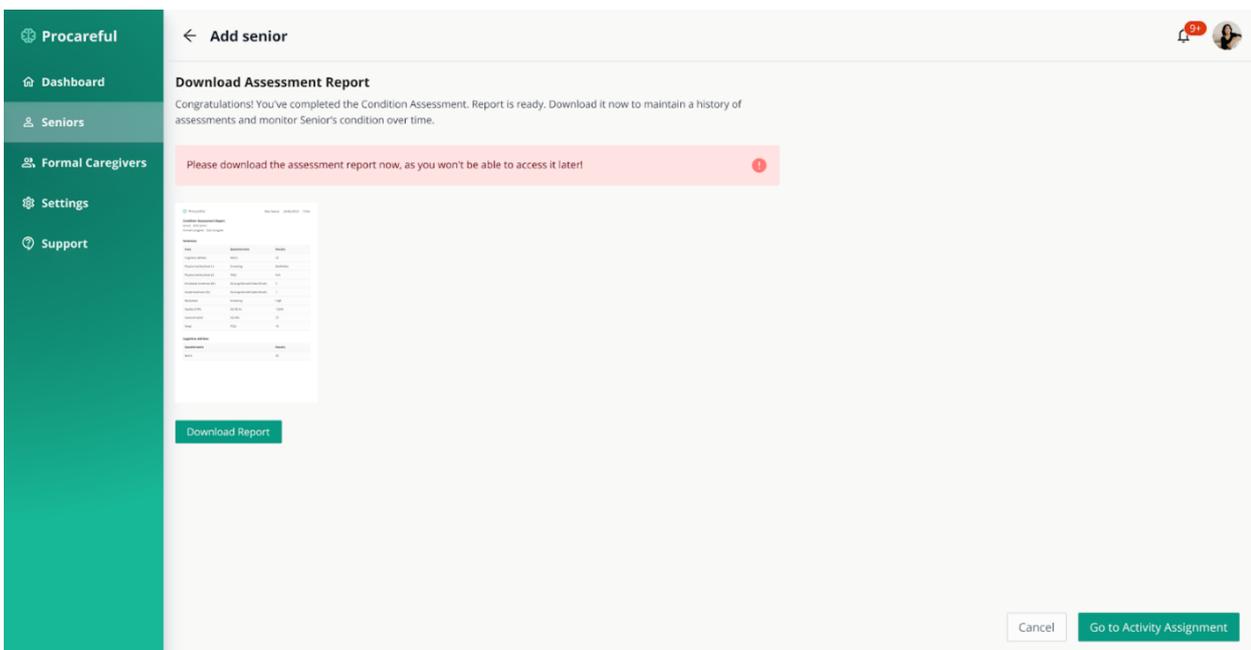


Stage 6: Optional: add documents and notes



Before ending the assessment, you can add any document that you may find relevant for the assessment and additional notes that may be useful, such as qualitative information derived from the interview. This section is optional. Finally, click on the "Save and Finish" button to save the input provided and end the assessment.

Stage 7: Download the assessment report



You will have the option to download the assessment report. This report serves as the sole means to obtain a summary of the senior's results. This data is not stored anywhere on the platform, so if you wish to track and compare the senior's progress over time, it is necessary to download this report.



3.7. COGNITIVE GAMES

3.7.1. Principles of cognitive trainings

Cognitive training aims to enhance cognitive functioning. The core aspects of cognitive trainings are:

- To stimulate individual's cognitive plasticity by generating a **mismatch** between brain capacity and tasks requirements that forces the brain to adapt, change its processing modalities and functioning, in a long-lasting way. This can happen only if tasks are neither too easy nor too hard for the individual.
- To ensure **transferability**. Training should improve not only the specific cognitive function targeted, but it should also impact the real-life cognition.

To develop effective cognitive trainings aimed at improving cognitive functioning of older people at risk of dementia, it is important to consider the following aspects:

- Trainings should follow the principles of “**novelty**” and “**variability**”: not only task difficulty, but also the types of tasks performed, and cognitive functions targeted should vary across the training. Otherwise, it would allow people to learn a specific solution that is effective to solve a single task, but do not have a real impact in terms of cognitive plasticity (Turnbull et al., 2022).
- **Multi-component cognitive trainings** seem to be more beneficial and more likely to result in a broader transfer (Deveau et al., 2015).
- **Personalization**: cognitive trainings should be designed to target specific populations. Moreover, personalizing cognitive tasks would increase the effectiveness of a positive “mismatch”.

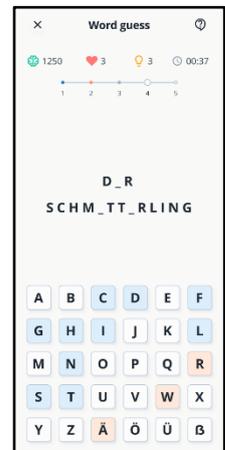
Computerized cognitive trainings are becoming increasingly popular due to the fact that they are easily accessible to the general public, highly interactive, and allow to monitor the evolution of the performance. Their popularity has raised the attention of the scientific community to study whether their benefits are effective as they claimed. There is evidence of efficacy, but it seems to be quite related to trained cognitive functions, while transferability to other cognitive functions or everyday life seems quite low. Bonnechère et al. (2020) conducted a meta-analysis of randomized controlled trials assessing the use of commercially available computerized cognitive games. They included 16 studies that tested different brain apps and that were published up to December 2019. Results showed that these cognitive games are effective in improving diverse cognitive functions in older people without cognitive impairment aged over 60 years. In particular, improvements were observed for processing speed, working memory, executive functions, verbal memory, but not for attention or visuospatial abilities.

Procareful offers a variety of games designed to be both challenging and stimulating for users' minds and cognitive abilities. Each game comes with six different levels of difficulty, which vary in terms of puzzle complexity. Below are descriptions and rules for each game:



3.7.2. Word Guess

- In this game, players are given the number of letters in a word and must guess the word.
- Rules:
 - Player selects letters to guess the word.
 - If the selected letter is correct, it will appear in the correct place in the word.
 - If the letter is incorrect, the player loses a chance, and the letter will not be added to the word.
 - The game continues until the word is guessed correctly or the player runs out of chances.



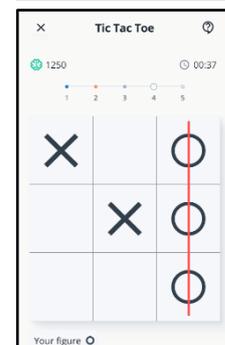
3.7.3. Wordle

- Players have a limited number of chances to guess a secret five-letter word.
- Rules:
 - Type in a word as a guess.
 - The game indicates which letters are correct and in the right position, which are correct but in the wrong position, and which are not in the word at all.
 - The objective is to guess the secret word with the fewest guesses.



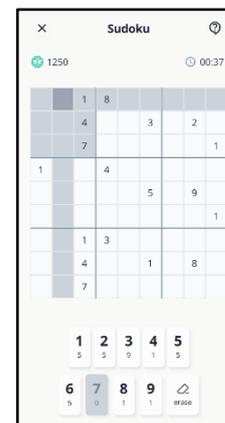
3.7.4. Tic Tac Toe

- A classic two-player game where players take turns marking a space in a 3x3 grid.
- Rules:
 - Player place their marks (X or O) on the grid.
 - The first player to place three of their marks in a horizontal, vertical, or diagonal row wins the game.
 - If all nine squares are filled and neither player has three in a row, the game is a draw.



3.7.5. Sudoku

- A number puzzle game played on a 9x9 grid divided into 3x3 subgrids.
- Rules:
 - Each row, column, and 3x3 subgrid must contain all numbers from 1 to 9 without repetition.
 - The game starts with some numbers already filled in.
 - The objective is to fill in the missing numbers following the Sudoku rules.
 - Each row must contain the numbers from 1 to 9, without repeating any numbers.
 - Each column must contain the numbers from 1 to 9, without repeating any numbers.
 - Each 3x3 subgrid must contain the numbers from 1 to 9, without repeating any numbers.





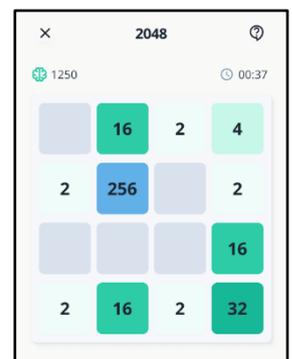
3.7.6. Snake

- A game where players control a snake that collects numbers in a given order while avoiding obstacles.
- Rules:
 - The snake moves in a chosen direction and collects numbers in ascending or descending order.
 - The player must avoid running into obstacles (wrong numbers or “X” symbols)
 - The objective is to collect all the numbers in the correct order.



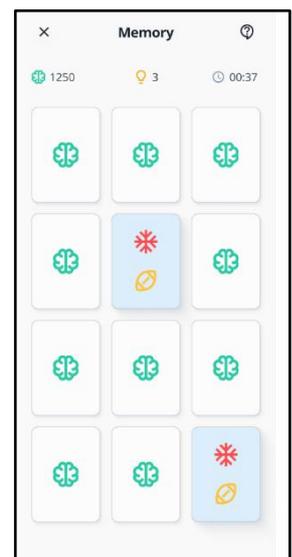
3.7.7. 2048

- A sliding tile puzzle game where the objective is to combine tiles to create a tile with the number 2048.
- Rules:
 - Tiles with starting values appear on the grid.
 - Players slide tiles in one of four directions (up, down, left, right).
 - When two tiles of the same number collide, they merge into a single tile with their combined value.
 - The game continues until the player creates a tile with the value of 2048 or no more moves are possible.



3.7.8. Memory

- A card-matching game where players must find pairs of matching cards.
- Rules:
 - All cards are face down on the screen.
 - Player flips over two cards per turn.
 - If the cards match, they remain face up; if not, they are turned face down again.
 - The objective is to find all the matching pairs with the fewest number of turns.





3.8. PHYSICAL EXERCISES

Most older people are too physically inactive: some feel ill, some are unconsciously influenced by perceiving old people as no longer able to move and exercise regularly, and many were not used to healthy exercise in middle age. They did not make an effort to get used to it later on. Indeed, the flexibility and physical strength of the older people cannot be compared with those of younger people. However, older people need physical activity just as much as younger people. Moreover, regular physical activity allows the older people to stay youthful, improves their health and prolongs their lives. Physical activity benefits the cardiovascular system, reduces the risk of diabetes and stroke, enables natural weight loss, promotes digestion and reduces the risk of bowel and breast cancer, maintains muscle flexibility and bone strength, improves balance and reduces the risk of falls, affects well-being and reduces the risk of depression (Ramovš, 2023).

The most suitable activities for older people are walking, including brisk walking, cycling and swimming. Working in the garden and the house are also suitable physical activities. Regular exercise is also recommended to maintain flexibility, balance and fitness. The range of exercises may be slightly different for everyone. Tailoring your routine to your chronic illnesses (e.g. respiratory or heart problems) and orthopaedic problems (e.g. back, neck, shoulder, knee or other issues) is good. However, it is also suitable for everyone to have some balance or fall prevention exercises in their routine. Exercises can be done with assistive devices and home fitness equipment, but often, a chair or a table for support is enough. The range of exercises should not be too extensive; 5 to 10 exercises are sufficient, or even three for the less active. But it is crucial to do them regularly - preferably daily (Ramovš, 2023).

Chronic illnesses should not be a barrier to regular exercise but an incentive for it. For example, suppose a person controls high blood pressure with appropriate medication and lifestyle. In that case, the disease is not a barrier to these activities, but physical activity is part of the treatment for the disease. This is even more true for respiratory diseases, where breathing exercises are essential; for balance problems, where exercises to promote balance are helpful; and for orthopaedic issues, where it is usually impossible to maintain or even improve the condition without regular exercise (Ramovš, 2023).

Exercises can even be done on the bed when we are ill or bedridden after an injury. For most injuries, it is essential to start doing the exercises as soon as possible (as instructed by a doctor or physiotherapist). Otherwise, the muscles lose strength and elasticity to the extent that the limb can never be used well again, and in the case of the older people, they may even become permanently disabled.

Anyone who wants to maintain health and vitality in old age should make it a habit to do some physical activity as early as possible in their regular daily and weekly schedule to maintain flexibility, strength, coordination of movements and balance. When we are in a bad mood, feeling low or "too busy", our good habits are the main engine to get us moving regularly (Ramovš, 2023).

3.8.1. INSTRUCTIONS FOR PHYSICAL EXERCISES BY TYPE OF EXERCISE

3.8.1.1. Walking

Humans are made to move to stay healthy; regular exercise is essential. Walking is the simplest, cheapest, and best form of regular exercise for most people. Walking gets the blood flowing and improves circulation. It exercises the heart and lungs, uses up excess fat and sugar, and benefits the metabolism; regular walking can improve digestion.

Regular walking keeps us fit. Good physical condition is beneficial when we get sick or injured - it helps us recover better and faster. It is also beneficial in keeping chronic diseases (e.g. heart failure, COPD, type 2 diabetes, etc.) in the best possible condition. This is even more true for the older people. As we age, the body's reserves become smaller and smaller, and good physical fitness is one of the best investments in



physical health. Walking, especially in nature, also relaxes us, calms us down and helps us tune in with ourselves. The saying applies to walking even more than any other exercise: A healthy mind in a healthy body!

For any adult, also for a healthy older person, 30 minutes of walking per day and 2 hours of more intensive walking per week is recommended, in steps at least 3,000 steps a day and around 12,000 steps once a week. It is good to make some of this walking faster so that it increases the heart rate. Walking is also recommended for people with chronic diseases, but the amount of exercise needs to be adjusted for some of these. The best guideline is to start with what a person can do and gradually increase the amount they walk. If they have knee or hip problems, they can use walking sticks. But for absolutely everything, walking shorter distances to run errands and not to avoid stairs is advisable. Let's do something for ourselves today - let's get moving! (Ramovš, 2023).

As part of the platform every older person is encouraged to walk depending on their abilities with the goal to improve their performance for 10% or 20% during the testing or, in case it was good before, to keep the performance stable.

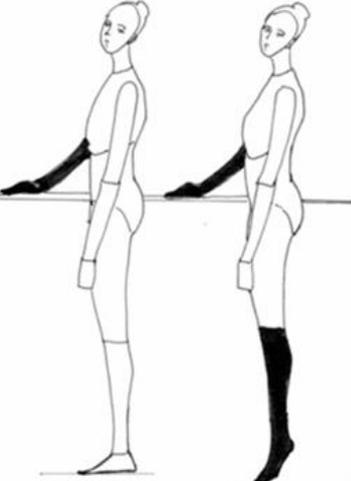
3.8.1.2. Exercises to prevent falls or balance exercises

Balance exercises are not strength exercises - they are done in a relaxed and slow way, not forceful and fast. The exercises that will be presented are part of the exercise set developed at Anton Trstenjak Institute as part of the Fall prevention program that has been carried out for more than 20 years.

Selection is based on international data (Australia is especially strong in this field) of what kind of exercises can help older people retain their balance as long as possible in a safe way. Do the exercises with a stable chair so that the back of the chair is always close at hand for support if you lose your balance. Hold on to the back of the chair throughout the exercises. If you feel more stable, touch the back of the chair; if you feel stable enough, do the exercises without touching the chair. The difficulty and effectiveness of the exercises can be increased by performing them on an unstable surface, such as a soft cushion.

Each person does the exercises to the best of their ability, in a relaxed and safe way, at their own risk.

EXERCISE 1 - Standing on your toes

<p>Description of the exercise:</p> <p>Stand relaxed and upright in front of the back of the chair (chest out, belly in), feet parallel and hip-width apart, with the back of the chair in front of you so that you (can) hold onto it with both hands. Slowly rise on toes, hold and lower to the entire foot. In a slow four-beat rhythm: 1 - rise, 2 - hold, 3 - descend, 4 - rest. Doing all the exercises fluidly and connectedly is essential, like a dance. Note that the exercise's fourth beat is meant to relax the whole body before starting again.</p>	 <p>IAT copyright</p>
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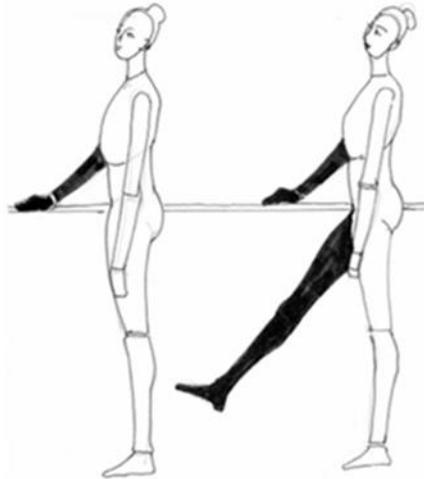


EXERCISE 2 - Lifting the leg forwards

Description of the exercise:

Stand relaxed and upright (chest out, belly in) with feet parallel and hip-width apart; stand sideways to the chair so that you (can) hold the back of the chair with your right hand. The body's weight is on the leg, not next to the chair, so we practise with the leg next to the chair to be stable and safe from losing balance. First, stretch the right leg forward and then step in a four-beat rhythm: 1 - lift the leg forward, 2 - keep it in the air, 3 - lower it to the floor to the starting position, 4 - rest by swaying slightly, relaxed and bending at the knees.

After repetitions, turn half a circle so you can hold onto the back of the chair with your left hand and repeat the exercise with your left leg.

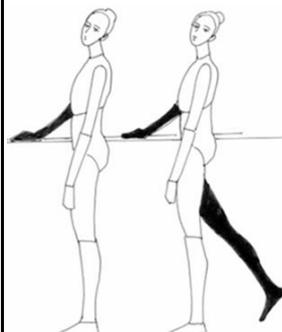


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EXERCISE 3 - Lifting the leg backwards

Description of the exercise:

The starting position is the same as in exercise 2. Lift the leg next to the chair off the floor in the opposite direction to the previous exercise - back to a height where you still feel stable while at the same time leaning the torso slightly forward. The rest is the same as in exercise 2.



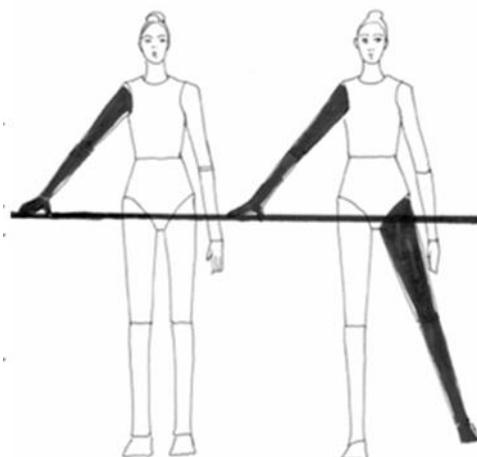
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EXERCISE 4 - Lifting the leg to the side

Description of the exercise:

Stand relaxed and upright in front of the back of the chair (chest out, belly in), feet parallel and hip-width apart, with the back of the chair in front of you so that you (can) hold onto it with both hands. First, lift the extended right leg to the side to a height where it still feels stable. Perform the exercise in a four-beat rhythm: 1 - lift the leg sideways, 2 - keep it in the air, 3 - lower it to the floor to the starting position, 4 - rest by rocking slightly, relaxing, and bending at the knees.

After the repetitions, repeat the exercise with the left leg.



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EXERCISE 5 - Bending the knee, lifting the leg and touching the opposite arm

Description of the exercise:

Stand relaxed and upright (chest out, belly in) with feet parallel and hip-width apart; stand sideways to the chair so that you (can) hold the back of the chair with your right hand. Lift the knee of the leg against the back of the chair to a height where you still feel stable. In doing so, squeeze the hip and abdominal muscles of the leg you are standing on. To increase the difficulty and effectiveness of the exercise, place the opposite hand on the knee of the bent and raised leg. The exercise is performed in a four-beat rhythm: 1 - bend and lift the leg (touching it with the opposite hand), 2 - hold the position, 3 - lower it to the ground to the starting position, 4 - rest by rocking slightly, relaxed and bending at the knees.

After repetitions, turn half a circle so you can hold onto the back of the chair with your left hand and repeat the exercise with your left leg.

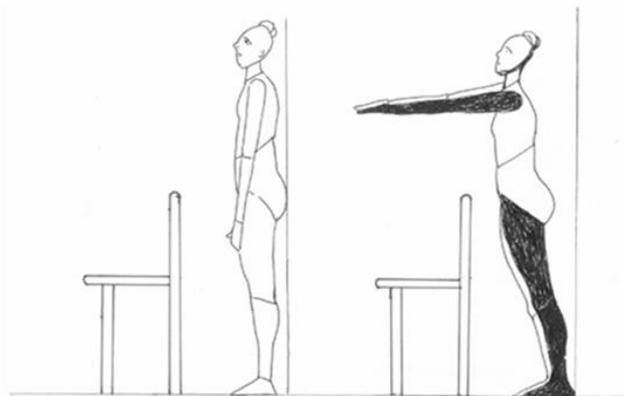


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EXERCISE 6 - Leaning the body forward

Description of the exercise:

We position ourselves in front of the back of the chair so that it is a safety support in front of us in case we lean too far forward and lose our balance. Extend your arms perpendicular to your body, palms facing upwards at the wrists. Then, slowly lean forward with the whole body, keeping the body straight all the time, with no bending at the hips, abdomen, chest, or neck, only at the ankles. Keep leaning as long as you can balance using the muscles on the back of your legs and your abdominal muscles. Always keep the whole foot (including the heel!) on the floor. Lean forward in a four-beat rhythm: 1 - lean forward, 2 - hold the position, 3 - return to a neutral position, 4 - rest.



IAT copyright

3.8.1.3. Sitting exercises

These exercises are performed while sitting and are organized into three categories: lower-body, upper-body, and balance exercises. Lower-body exercises are aimed to train and strengthen the muscles in the lower part of the body. They help improve leg strength and mobility. Upper-body exercises focus on strengthening the muscles in the upper part of the body, enhancing arm, shoulder, and upper back strength. Balance and coordination exercises aim to improve balance and coordination, which are crucial for reducing the risk of falls. All exercises are performed with the support of a chair, ensuring they are safe and accessible. Participants will also have the opportunity to watch a video demonstrating how to perform each exercise correctly.



LOWER-BODY EXERCISES

▪ EXERCISE 1 - Lifting of the feet

Instructions: Sit with your back straight and your feet flat on the ground. Lift your heels and toes alternately on both legs.

Video: https://www.youtube.com/watch?v=_VGZUsY4_XI

▪ EXERCISE 2 - Alternate step with toe or heel

Instructions: Sit with your back straight and your hands on your knees. Keep your feet flat on the ground, then lift your feet and place your toes back down alternately eight times. Next, lift your feet and place your heels back down alternately eight times.

Video: <https://www.youtube.com/watch?v=qPlMKOBRxTA>

▪ EXERCISE 3 - Leg opening and Closing exercise with Toe or Heel support

Instructions: Sit with your back straight and your hands on your knees. Extend one leg at a time, placing the heel or the toe of your foot on the ground alternately.

Video: https://www.youtube.com/watch?v=6hlOng6_FRg

▪ EXERCISE 4 - Skipping exercise

Instructions: Sit with your back straight and your arms at your sides. With your legs at a 90-degree angle, lift one leg and then the other alternately.

Video: <https://www.youtube.com/watch?v=QjYti7hA3Bs>

▪ EXERCISE 5: Rotating legs

Instructions: Sit with your back straight and your hands crossed under your knee. Rotate your leg outward. Repeat the sequence with the other leg.

Video: <https://www.youtube.com/watch?v=FgglSJ4RNS0>

UPPER-BODY EXERCISES

▪ EXERCISE 1 - Shoulder circles

Instructions: Sit with your back straight and your feet flat on the ground. Place your hands on your shoulders and draw a circle with your elbows, rotating your shoulders first backward and then forward.

Video: <https://www.youtube.com/watch?v=KJflvjTEKcQ&t=50s>

▪ EXERCISE 2 - Alternating Arm Reaches

Instructions: Sit with your back straight and your feet flat on the ground. Stretch your arms forward, then extend one arm at a time alternately.

Video: <https://www.youtube.com/watch?v=TcpPqHBpYHE>

▪ EXERCISE 3 - Spine twist with bent arm

Instructions: Sit with your back straight and your feet flat on the ground. Stretch your arms out. Keeping your arms horizontal and parallel to the floor, bend one arm and follow the elbow with your gaze, then switch to the other arm.

Video: <https://www.youtube.com/watch?v=YvOmadiZrVE&t=35s>

▪ EXERCISE 4 - Alternating Arm Lifts



Instructions: Sit with your back straight and your feet flat on the ground. Place your hands on your shoulders. Extend one arm upward and the other arm downward. Repeat the movement, alternating arms, and touching your shoulders.

Video: <https://www.youtube.com/watch?v=yBvBcBDIF4s&t=27s>

- EXERCISE 5: Arm Circles

Instructions: Sit with your back straight and your feet flat on the ground. Cross your hands. Rotate the palms of your crossed hands outward, stretch your arms, and bring them above your head, remembering to keep your shoulders away from your ears. Once above your head, release your hands and complete the arm rotation by bringing them back down to your sides.

Video: <https://www.youtube.com/watch?v=uX3mFpGNZT0&t=14s>

BALANCE AND COORDINATION EXERCISES

- EXERCISE 1 - Side bend

Instructions: Sit with your back straight and your feet flat on the ground. Keep your arms extended along your sides. Without leaning forward, but maintaining your position, reach one arm toward the floor, then alternate with the other arm.

Video: <https://www.youtube.com/watch?v=7TSD00QxV88>

- EXERCISE 2 - Spine twist with extended arm

Instructions: Sit with your back straight, your feet flat on the ground, and your hands on your knees. Raise one arm to eye level and move it backward. Follow the movement with your gaze and head. Repeat the exercise four times, then switch to the other arm.

Video: <https://www.youtube.com/watch?v=hgbpzxbJ8XY>

- EXERCISE 3 - Hip abduction

Instructions: Sit with your back straight, your feet flat on the ground, and your arms along your sides. Lift your knee up and rotate your leg to place your foot to the side. Then lift your leg again and bring it back to the center. Perform the movement four times, then repeat with the other leg.

Video: https://www.youtube.com/watch?v=BkFXT_LDq3k&t=43s

- EXERCISE 4 - Opposite arm and leg lift

Instructions: Sit with your back straight, your feet flat on the ground, and your arms along your sides. Lift your leg bent at a 90-degree angle and simultaneously extend the opposite arm forward. Repeat the exercise with the other leg and arm.

Video: https://www.youtube.com/watch?v=bJvNhaNKB_s&t=21s

- EXERCISE 5 - Sit-to-Stand with Arm Reach

Instructions: Sit with your back straight, your feet flat on the ground, and your arms along your sides. Stand up from the chair while keeping your back straight and bringing your arms forward. Then, keeping your arms extended forward and your back straight, sit back down.

Video: <https://www.youtube.com/watch?v=RryDgij8WJO>



3.8.1.4. Breathing exercises to be carried out standing or sitting

The purpose of breathing exercises for older people is to improve lung function, enhance oxygen intake, reduce stress, and promote relaxation. These exercises can help maintain respiratory health, increase overall energy levels, and contribute to a sense of well-being.

EXERCISE 1

Description of the exercise:

1. Sit or stand upright. Place your hands on the lower third of your chest (ribs).
2. Slowly inhale through your nose, feeling your chest expand under your hands.
3. Hold your breath for a moment.
4. Slowly exhale with the lips closed and feel the fingertips under your hands return to their original position.



Image courtesy of the Slovenian Lung and Allergy Patients Association

EXERCISE 2

Description of the exercise:

1. Sit or stand upright.
2. Place your hands on the back of your neck.
3. Slowly inhale through your nose, opening your elbows (as if opening a book).
4. Hold your breath for a moment.
5. Then slowly exhale with the lips closed.
6. Push your elbows together (closing the book) while bending your head and upper torso.

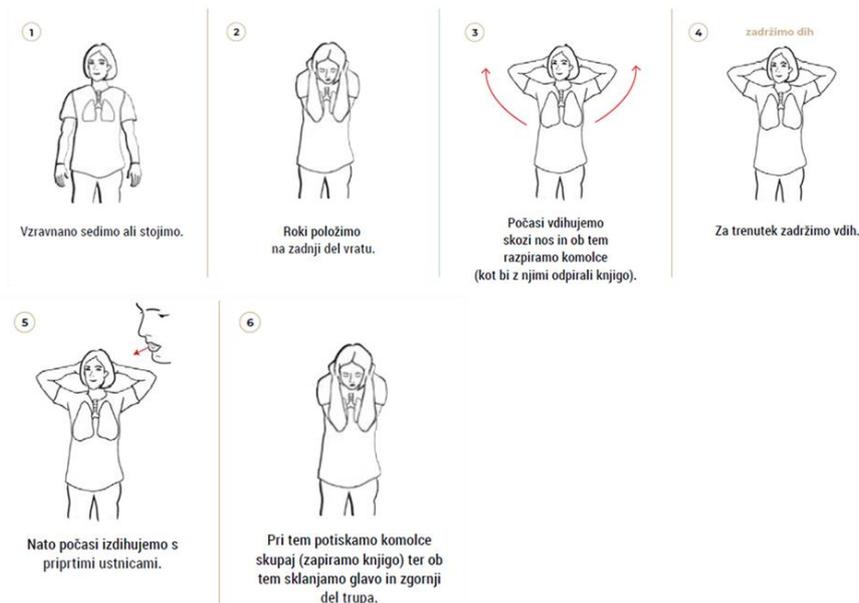


Image courtesy of the Slovenian Lung and Allergy Patients Association



EXERCISE 3

Exercise description:

1. Lying down or sitting upright. Relax the shoulders and upper chest.
2. Place one hand on the abdomen (at the navel level) and the other on the upper part of the chest.
3. Slowly inhale through the nose. The abdomen should bulge outwards. Also, the hand resting on the abdomen should rise more than the hand resting on the upper chest.
4. Slowly exhale through the mouth while lowering the abdomen.



Image courtesy of the Slovenian Lung and Allergy Patients Association

3.8.1.5. Exercises in bed - rehabilitation exercise for bedridden persons

You can do the exercises in bed with a person who is less able or immobile, lying down in bed. They can be the first step in rehabilitation after a stroke, injury, etc. OR just help to maintain mobility. The person does the exercise lying on their back, legs relaxed hip-width apart, arms by their side. Make sure the person is comfortable, with a pillow under their head. At the beginning, when the person is weak, do the exercises for a shorter time. Observe the person; if you notice pallor or sweating, or if they say they are in pain, stop the exercises immediately. The exercises are designed to maintain the patient's independence, mobility and well-being. Regular and persistent repetition bears fruit!

EXERCISE 1 - Exercise for feet

Description of the exercise:

The person lies comfortably on their back in bed, legs relaxed hip-width apart, arms resting against the body, head supported by a pillow. Ask the person to pull the toes towards the chin and then push down (outwards). The person performs the exercise to the best of their ability, with assistance if needed.

EXERCISE 2 - Bending a leg

Description of the exercise:

The person lies comfortably on their back in bed, legs relaxed hip-width apart, arms resting against the body, head supported by a pillow. Ask the person to drag the heel on the surface towards the buttocks in a contracted position and then extend the leg back on the surface to the lying position. Alternate the exercise with the right leg first and then the left leg. The person performs the exercise to the best of their ability and is assisted if necessary.

EXERCISE 3 - Lifting the heels

Description of the exercise:

The person lies comfortably on their back in bed, legs relaxed at hip-width, arms by their side, and head resting on a pillow; a pillow or cushion is placed under their knees. Ask the person to lift their heels off the surface, hold the position for a few seconds, and slowly lower them back to the surface. The person performs the exercise to the best of their ability, with assistance if needed.



- EXERCISE 4 - Lifting of the hips

Description of the exercise:

The person is lying comfortably on their back in bed, arms by their body, and head resting on a pillow. The person is asked to fold their legs at right angles, lift their buttocks off the surface, hold the position for a few seconds, and lower the buttocks back to the surface. The person performs the exercise to the best of their ability and is assisted if necessary.

- EXERCISE 5 - Knee exercise with a ball

Description of the exercise:

The person lies comfortably on their back in bed, arms by their body, head resting on the pillow, and legs bent at right angles. Place a ball between the person's knees and ask them to squeeze the ball between their knees with all their strength, hold it for a few seconds, and then release it. The person performs the exercise to the best of their ability and is assisted if necessary.

- EXERCISE 6 - Opening a book - lowering the knees outwards

Description of the exercise:

The person is lying comfortably on their back in bed, arms by their body, head resting on a pillow, legs bent at right angles. Ask the person to open their legs outwards and then back together. The person performs the exercise to the best of their ability and is assisted if necessary.

- EXERCISE 7 - Touching the knee with the opposite hand

Description of the exercise:

The person is lying comfortably on their back in bed, arms by their body, head resting on the pillow, legs bent at right angles. Ask the person to try to touch their right knee with their left hand and repeat the exercise with the other hand. The person does the exercise to the best of their ability and is assisted if necessary.

- EXERCISE 8 - Lifting the arms above the head

Description of the exercise:

The person lies comfortably on their back in bed, head resting on a pillow, legs bent at right angles; ask them to fold their arms in front of them, slowly raise them above their head, and slowly lower them back in front of them. The person does the exercise to the best of their ability, with assistance if needed.

- EXERCISE 9 - Hip Flexibility Exercise

Description of the exercise:

The person is lying comfortably on their back in bed, with their legs relaxed hip-width apart, arms by their body, and head resting on a pillow. Ask the person to bend the right leg, extend the left leg as far as possible, hold the position for a few seconds, and then relax and extend the right leg backwards. Repeat the exercise with the other leg. The person performs the exercise to the best of their ability and is assisted if necessary.

3.8.1.6. Breathing exercises in bed - for bedridden person

We do breathing exercises after surgery and with a weakened person to prevent pneumonia or other respiratory complications and to maintain person's lung capacity. The exercises help to improve lung ventilation and blood circulation. The person does the exercises lying on their back, with their legs relaxed hip-width apart and their arms by their side. Make sure the person is comfortable, their head resting on a pillow. If the person is strong enough, they can also do the exercises sitting down or leaning on a table.

- EXERCISE 1 - Breathing with the prefix

Description of the exercise:



The person lies comfortably on their back in bed, legs relaxed hip-width apart, head resting on a pillow. It is best to do the exercise together with the person.

1. Place the palms of the hands on the lower third of the chest (ribs).
2. Slowly inhale through the nose, feeling the chest expand under your hands.
3. Hold your breath for a moment.
4. Exhale slowly with the lips closed, feeling the chest under our hands return to its original position.

▪ EXERCISE 2 - Lifting the elbows away from the body

Description of the exercise:

The person lies comfortably on their back in bed, legs relaxed hip-width apart, head resting on a pillow. It is best to do the exercise together with the person.

1. Bend the arms at the elbows at right angles to the body.
2. Slowly inhale through the nose and open the arms to shoulder height.
3. Hold your breath for a moment.
4. Slowly exhale, lowering the arms to their original position.

▪ EXERCISE 3 - Blowing newspaper strips on the trapeze

Description of the exercise:

For this exercise, we need a trapeze. The person is lying comfortably on their back in bed, if they can, with their head slightly raised and a pillow under their knees, with their arms resting next to their body - this will make the person more comfortable and easier to perform the exercise. Glue newspaper strips to the trapeze.

1. Slowly inhale through the nose and hold the breath.
2. On the exhalation, encourage the person to blow the newspaper strips as high as possible.

▪ EXERCISE 4 - Blowing the whistle

Description of the exercise:

For this exercise, we need a whistle. The person is lying comfortably on their back in bed, if they can, with their head slightly raised and a pillow under their knees, arms resting next to their body - this will make the exercise more comfortable and easier for the person to do. If the person is strong enough, they can also do the exercise sitting down, leaning on a table.

1. The person slowly inhales through the nose and holds the breath.
2. On exhalation, they blow the air through the whistle.

▪ EXERCISE 5 - Blowing ping pong balls on the table

Description of the exercise:

For this exercise, we need a table and ping-pong balls. If the person is lying in bed, lift the pillow and place the table before them, then put the ping-pong balls on the table. If the person is strong enough, they can also do the exercise sitting up, leaning on the table.

1. The person slowly inhales through the nose and holds the breath.
2. They blow the ping pong balls off the table on exhalation.

▪ EXERCISE 6 - Blowing soap bubbles

Description of the exercise:

For this exercise, we need a soap bubble tool. The exercise is fun and suitable, especially for people who are harder to motivate to do breathing exercises. The person can do the exercise lying in bed or sitting up, leaning on the bed.

1. The person slowly inhales through the nose and holds the breath.
2. They blow through the soap bubble ring on exhalation.



3.9. SOCIAL ACTIVITIES

Loneliness among older adults is a significant issue with a widespread impact. Studies have shown that loneliness can lead to a variety of health problems, including:

- **Mental Health Issues:** Loneliness is strongly linked to depression, anxiety, and cognitive decline. Social isolation can exacerbate feelings of worthlessness and lead to mental health disorders.
- **Physical Health Decline:** Chronic loneliness can contribute to a range of physical health issues, such as increased blood pressure, weakened immune system, and higher risk of chronic diseases like heart disease and diabetes.
- **Increased Mortality Risk:** Loneliness has been associated with higher mortality rates, comparable to other major health risk factors.

It is important to know, that person can be lonely while alone or among other people.

Development of good, quality relations, is crucial for maintaining mental and emotional well-being for everyone. Meaningful engagement of older adults in social activities and maintenance or growth of interpersonal relations can mitigate above mentioned risks and promote a sense of belonging, community and purpose.

Care provision is inherently a relational activity. When we provide or receive care, we enter into a relationship with another person. Caring for someone's increasingly basic needs or allowing someone to care for us is a deeply personal experience. This makes it essential to build trust and maintain a good relationship from both sides. This is true for both informal and formal care provision. Unfortunately, caregivers, often pressed for time, frequently lack the knowledge and tools to foster these relationships effectively. Additionally, as individuals age, become frail, or ill, they may change or become more challenging, making the provision of care and the development of good interpersonal relationships even more difficult.

To facilitate meaningful social interactions, we have prepared weekly personal growth challenges for seniors. These challenges can be carried out in various ways and for different purposes. Seniors willing to try them can do so with an informal or formal carer, a friend, a relative who is not their primary carer, volunteer, or even with grandchildren or other young people (with special set of challenges). We recommend that, if possible, seniors complete all the challenges with one person to strengthen their relationship through meaningful tasks and conversations. However, the challenges are also designed to be independent of one another, so they can be completed with different people.

Participating in the personal growth challenges is optional, but if a senior decides (or you, as an informal or formal carer, decide with the senior) to embark on this journey, it is important for everyone involved to understand the purpose behind the challenges and to adhere to some key guidelines:

1. **Partner Selection:** Encourage the senior to select a partner for the challenges before starting. This partner can be a formal or informal carer or another person they regularly meet, whether weekly or biweekly.
2. **Effective Communication:** Good communication, as described in Chapter 4.4, is essential for carrying out the personal growth challenges. To foster a strong relationship, it is imperative to practice open listening without interrupting, speak in the first person when sharing personal experiences, avoid judging others' experiences, and keep personal stories confidential within the relationship.
3. **Engagement and Preferences:** When starting the personal growth challenges, it is natural to have preferences. However, we encourage you to try to complete them on a weekly basis and attempt most of them. While some challenges may be more enjoyable than others, you might discover an unexpected appreciation for them once you begin this journey.



EXAMPLES OF WEEKLY CHALLENGE WITH A PERSON YOUR AGE OR SOMEONE A BIT YOUNGER THAN YOU:

- **1st challenge: A teacher I remember with happiness and pride**

Alber Einstein found the role of teachers important, calling teaching art to awaken our joy, creativity, and knowledge. While growing up, there were teachers (inside the school and some outside) who helped us become who we are today; teachers we still remember with happiness and pride. Tell the person you do challenges with about one such teacher for you and ask them about one teacher who inspired them.

- **2nd challenge: Let's walk together**

Invite a person with whom you do your challenges or (if you do challenges with different people) a person you haven't seen for some time for a walk. You can spend the time walking to observe things around you and talk about at least one good thing that happened to you and the other person over the last period. If you find it hard to walk, you can do the exercise you enjoy together.

EXAMPLE OF WEEKLY CHALLENGE WITH A GRANDSON, GRANDDAUGHTER OR ANOTHER YOUNG PERSON

- **1st challenge: Let's share a small precious memory**

Nowadays, we often use phones to capture small, precious memories. Look through your phone and share some photos and stories with a young person you do a challenge with, and then ask them to do the same if they are ready. You can use a photo album if you don't have a phone that takes photos. You can choose more photos, but don't choose too many - often, one or two precious memories are enough to lift us up, and it is good to keep some stories for the next time. This challenge aims to hear one or two precious moments you both gathered (and took photos of) during the last weeks and months since. By sharing small, precious memories, we grow closer to each other

3.10. Warnings and notification

The Procareful platform includes a comprehensive system of warnings and notifications, providing quick access to crucial updates about seniors. This system ensures that carers stay informed and can take immediate action when necessary.

3.10.1. Types of Warnings:

3.10.1.1. Performance Warning:

- This warning relates to a senior's performance.
- If a senior's performance is lower than expected based on their Condition Assessment form.
- The platform displays notifications to both formal and informal carers, informing them that the senior's performance is not meeting expectations. Carers are advised to check with the senior to understand and address the issue.



Kimberly Elam

12/05/2024

Active

Performance!





The screenshot shows the 'Senior profile' page for Joanne Worthington-Smythe. A red banner at the top reads 'Performance warning!' with a sub-message: 'Your senior is performing worse than expected, completing less than [threshold] activities they were expected to do. Check in with your senior, as their condition may have changed. Please consider performing a new assessment to better understand their current situation.' Below the banner is a blue button 'Go to Assessment' and a link 'Ignore'. A blue bar below says 'Assist your Senior in getting connected to Procareful.' The 'Care Plan' section shows 'Physical exercises' with a level of 'Moderate', including 'Feet exercises' and 'Hips lifting' with their respective frequencies. Below that are sections for 'Walking' (Level: Base+10%, 35 minutes per day) and 'Breathing exercises' (Level: Intense).

3.10.1.2. No Assessment Warning:

- This warning indicates that a senior account has been created, but a condition assessment has not yet been performed.
- Visible in the “status” column of the seniors table.
- Displayed as a red banner at the top of the profile.
- The senior has access to the platform but does not have any activities assigned to them yet.

The screenshot shows the 'Senior profile' page for Alexander Habsburg-Lothringen. A red banner at the top reads 'Condition Assessment Not Completed!' with a sub-message: 'Until the assessment is finished, they will not be able to participate in challenges, games, and other activities. Please complete the assessment as soon as possible to ensure they can join in on all the fun!' Below the banner is a red button 'Start assessment'. A blue bar below says 'Assist your Senior in getting connected to Procareful.' The 'Care Plan' section is empty, displaying a 'No Care Plan available!' message: 'Looks like the Care Plan isn't available yet. Complete Senior's Condition Assessment to access Schedule.' with a green button 'Start assessment'.



3.10.1.3. No Activities Warning:

- This warning indicates that a senior account has been created and a condition assessment has been completed, but no activities have been assigned to the senior.
- Visible in the “status” column of the seniors table.
- Displayed as a red banner at the top of the profile.
- The senior has access to the platform but does not have any activities assigned to them yet.

3.10.2. Notifications:

Procareful integrates a robust system of notifications to keep users informed about important updates and activities concerning seniors and carers. Notifications can be accessed conveniently through the Notifications Center, ensuring that users stay up-to-date with real-time information.

3.10.3. Accessing Notifications:

- Dashboard:
 - Users can view the five most recent notifications directly on the dashboard.
- Notifications Center:
 - Accessible from the dashboard by clicking on the bell icon located at the top right corner.
 - Users can see a complete history of notifications by clicking “Show all” next to the Notifications Center or by clicking the bell icon.



3.10.4. Types of Notifications:

- 1) Performance Decline - Indicates when a senior's performance falls below expected levels based on the condition assessment.
- 2) User Inactive for 7+ Days - Alerts when a Senior has not been active on the platform for seven or more days.
- 3) Monitoring Visit Request - Notifies about a request for a monitoring visit for a senior.
- 4) New Carer Assigned to Senior - Informs when a new carer has been assigned to a senior.
- 5) User Completed Their Daily Assignment - Updates when a user, typically a senior, has completed their daily assigned activities.
- 6) New Note Added - Alerts when a new note has been added to a senior's profile.
- 7) New Document Uploaded - Informs about the uploading of a new document related to a senior.
- 8) Care Plan Change - Updates when changes are made to a senior's care plan

The screenshot shows the Procareful dashboard for a user named Michelle. The dashboard includes a sidebar with navigation options: Dashboard, Seniors, Settings, and Support. The main content area is titled 'Hello, Michelle!' and features two primary sections: 'Cognitive games engagement' and 'Senior's performance'. The 'Cognitive games engagement' section displays a bar chart for the last 30 days, showing an average game time of 11 minutes, the most played game being 'Snake', and the least played game being '2048'. The 'Senior's performance' section shows a 75% completion rate for cognitive games, 40% for physical activity, and 95% for personal growth. Below these sections is a 'Notifications center' with a table of recent notifications:

Added	Title	User
15 minutes ago	New note	Joan Didion (00-123-456-789)
2 hours ago	Monitoring visit requested	Joan Didion (00-123-456-789)
1 day ago	Monitoring visit requested	Joan Didion (00-123-456-789)
1 day ago	Performance warning!	Joan Didion (00-123-456-789)
3 days ago	New note	Joan Didion (00-123-456-789)

The screenshot shows the 'Notifications center' in detail. It includes a search bar and a list of notifications with checkboxes for each. The notifications are:

Added	Title	User
15 minutes ago	New note	Joan Didion (00-123-456-789)
2 hours ago	Monitoring visit requested	Joan Didion (00-123-456-789)
1 day ago	Monitoring visit requested	Jane Doe (00-123-456-789)
1 day ago	Performance warning!	Joan Didion (00-123-456-789)
3 days ago	New note	Robert Godwin (00-123-456-789)
3 days ago	New note	Edward Cullen (00-123-456-789)
1w ago	Performance warning	April May (00-123-456-789)
1w ago	User inactive for 7+ days	Jane Doe (00-123-456-789)
2w ago	New document uploaded	Edward Cullen (00-123-456-789)
2w ago	New note	Edward Cullen (00-123-456-789)

You can find detailed instructions on how to use technical part of the model in the document: [Procareful - First Steps.docx](#)



4. Non-technical part of the training

4.1. Why hybrid model (link between platform and personal work)

PROCAREFUL hybrid model consists of two parts: technical solution and non-technical solution. In the latter part, we want to improve the personal segment of care, especially in the field of prevention.

What does the technical part of the model look like?

As described above, PROCAREFUL platform is a technical web-based solution that supports older people with concrete preventive measures, such as physical exercises, social exercises called challenges, and cognitive exercises. A prevention plan can be set automatically or manually by a formal or informal carer and can respond to a person's needs and abilities.

What do we talk about when we talk about a non-technical aspect of the model?

If we want to change the way we provide care and if we want to work more preventively, mind shift is required: from service orientated care to personal, relational, emphatic care and from reactive care to proactive, preventive care. And this mind shift has to happen on all levels: from developers, care providers to people we work with. To achieve that training on topics related to care, understanding of ageing, understanding of illness, frailty, formation of new habits, meaning and motivation for prevention, understanding of digital barriers and communication will be conducted as part of the preparation for the implementation.

4.2. Working with older people (J. Ramovš, 2003)

Knowledge about ageing

Ageing is a biological, natural, lifelong process. **Chronologically**, we are ageing every minute; we are one year older every birthday. This is an age on which a person cannot have any impact. Physical and mental health also changes over time - some organs can regenerate to a certain degree, while others slowly decrease in functionality. This kind of ageing is **functional**; it is at least 50% in a person's hands. It can be influenced by a healthy lifestyle and be postponed to an older age. However, for quality ageing, an **experiential perspective** is particularly important - how we experience our age and our capabilities completely depends on a person. Some people are ashamed of their age or cannot accept this process; others are more comfortable with their age and live a relaxed life. One should not deny and run away from the fact of ageing and not live to full potential because he/she feels old and thinks that older people's lives do not matter anymore. It is important to keep in mind that all life periods are equally important and purposeful. A human being is developing for the whole life. It is also important to accept each life stage - with all the tasks and challenges and to keep learning about intergenerational coexistence and solidarity.

Retirement is usually the most obvious and important transition to the last period of life - old age or the third generation. After retirement, a person can continue learning and participating in social life. Life after retirement has extended over the last few decades. Among the whole population of older people, 75% are healthy and independent and continue helping younger generations. Some of the traditional tasks are taking care of grandchildren, learning, doing things for which there was no time earlier, traveling, etc. However, this life period brings its own tasks, which influence the quality of aging. In old age, a person can bring all his/her life experiences together with pride, gratefulness, and happiness and save them in his/her "life granary"; yet one should throw bad experiences on the compost - forgiving him/herself and others, letting go of what is not important, and learning to accept present conditions, including helplessness. Processing life experiences is an important task, and it gives a person deeper insight and life wisdom.



Even in the third generation, it is important to acknowledge various subcategories of retired persons; life is different at the ages of 65, 75, and 85. There are many stigmas and prejudices around old age in European societies; the best response to “ageism” is for older people to accept old age themselves and find their purpose in it.

Needs and positive personal development

A person cannot achieve personal development at any age without satisfying his or her needs. Needs are automatic impulses of any living organism that motivate it and direct it to behaviour and coexistence with the environment in which it is kept alive and develops. Needs are the main driving force for a person's personal development. All living beings have common basic survival needs, and each species and every human being always has its own specific needs. A human being has the most complex scope of needs. In 1954, humanist psychologist Abraham Maslow classified human needs by hierarchy into basic or biological, followed by higher human needs: security, love and belonging, reputation and self-esteem, and at the very top of the pyramid, there is a need for self-fulfilment. Addressing and satisfying the higher needs is what makes a difference between a human and any other living being and defines us as human beings. The needs can be presented through six dimensions of a human being:

1. **The physical or biophysical dimension**—these are the fundamental needs for self-preservation (growth, health, food and fluids, warmth, exercise, and rest) and the preservation of the human species (reproduction, childcare).
2. **The mental or psychic dimension** - the need for information, pleasure, security, and validity.
3. **The spiritual dimension** - the need for freedom, responsibility, and life orientation.
4. **The interpersonal social dimension** - the need for basic interpersonal relations and functional relationships for one's own reputation in society and for the rational organisation of society.
5. **The developmental or historical-cultural dimension**—the main needs are learning, creativity, work success, passing on one's life knowledge and experience to other people, and preserving culture.
6. **The existential dimension**—the need to experience the meaning of the present moment and different periods in one's life, as well as the meaning of human history and the world around.

Every individual person has a specific set of needs. Needs change during life development: some are quite constant throughout life; others appear in certain periods of life, and some occur only in a particular period of life.



Ageing is a lifelong process. Every generation (young, middle-aged, old) is a complementary whole and equally important and meaningful.

Needs change throughout life. Every person's human dimension and specific needs during a particular life course should be considered.

Specific competencies and habits based on interest and possibilities

In the previous paragraph, healthy personal development was explored, in which all human dimensions need to be considered; it is necessary to remember that each individual person is unique. During the life span, different historical, societal, and cultural aspects shape every human being, along with the development of skills, competencies, knowledge, habits, and interests.

When working for or with a particular person or group of people, the uniqueness of an individual or a group should be integrated with the development of habits. This is especially important when working for or with older people. During their lifetime, older people have developed specific knowledge, skills and



interests through active work and contributions to society, participation in various societal and individual activities and developed individual habits and particular lifestyles/ways of being.

Formal and informal carers and volunteers will be able to work better by addressing specific needs based on each individual's uniqueness. It is much easier if a person's biography is known. Knowing a person's occupation or profession, hobbies and interests, and how he/she engages with society will help us better understand his/her reactions, create achievable and meaningful habits or better choose among the existing options, creating more personalised training and conversations.



Every individual is unique, so acknowledging and including a person's interests, knowledge, and skills is important when creating habits.

4.3. Creating new habits and meaning of prevention (J. Ramovš, 2003 and A. Ramovš, 2023)

Habits make our lives easier. For example, we naturally get up at the same time in the morning, wash up and have coffee or tea. Habits are learned, taken-for-granted and repeated behaviours that make our lives easier; bad habits are a major obstacle to healthy human development. Habits are linked to a person's needs and the culture of the environment in which he or she lives. Basic human physical needs are feeding, excretion, dressing and exercise. Even young children are taught to feed themselves with a spoon, to defecate in the toilet, to dress themselves and to move around safely until it becomes a habit or routine. Children acquire habits through play, but older children have a much harder time. Acquiring any habit is a process: first, there is a need, then a desire to satisfy that need, followed by behaviour to satisfy the need, and when that behaviour is repeated, it becomes a habit. For example, when someone breaks his leg, he develops a need to walk with crutches. One has to accept this and learn to do it - gradually, one gets used to the crutches.

All people have good and bad habits. It is much easier to live if we have more good habits than bad ones. When a person's memory is failing, good habits help him to live more relaxed. For example, if we are used to putting our keys in the same place all the time, we won't look for them, and we will have more time for other, more meaningful things than looking for our keys.

Habits are very tough—the Slovenian saying "Habit is an iron shirt" explains it well. This applies to good habits as well as bad ones. In order to live as well as possible, there is no other way than to consciously introduce and reinforce good habits throughout life and eliminate bad ones. Regarding habits, we also have a life task in old age to:

- a. **Introducing new habits.** When, for example, a new chronic illness arises, one must first recognise and accept the illness and then get used to a lifestyle appropriate to it, such as going to the doctor for check-ups and taking the prescribed medication.
- b. **Reinforcing good habits.** Good habits are strengthened and reinforced by repeating them regularly. Habits such as regular exercise in nature, eating raw fruit and vegetables, a good conversational culture, a relaxed attitude, confidence in any situation, etc., are all investments in healthy ageing.
- c. **Mitigating bad habits.** Bad habits are a major obstacle to health. We cannot give up many of them, even if we know they are harmful. If we cannot replace a bad habit with a new healthy habit, we can at least mitigate it. For example, in the case of high blood pressure or diabetes, the bad habit of eating large quantities of white bread and sausages can be alleviated by replacing half of the amount of these unhealthy foods with vegetables that we like.



- d. **Changing habits.** The most successful way to eliminate a bad habit is to displace it by habituating to its opposite good habit. Learning a new good habit requires a lot of effort and discipline. Unlearning a bad habit requires three times as much. We replace our bad habit with its opposite good habit by looking forward to the new habit and delighting in learning it, rather than thinking about the bad habit and burdening ourselves with it. A good opportunity to replace a bad habit with a good one is the distress of a new illness. Distress is the greatest human energy that can drive us to persistently practise a new good habit to control the disease.

Reinforcing good habits is a constant and challenging task, but it is also beautiful and rewarding. Good habits are the easiest way to live a quality and healthy daily life; the more we have, the more conscious energy we have left to tackle tasks creatively. Acquiring them in old age is exhausting, so let's not expect radical changes but rather significant adjustments in our habits.

Holistic health prevention

The WHO Constitution begins with the phrase: "**Health is a state of physical, mental, and social well-being,**" and emphasizes: "**Promoting and protecting health is a value that is important to everyone.**" Health is our greatest wealth, and we often hear the saying, "Only health will do." In practice, however, we often do not realize the importance of health until we or someone close to us becomes ill. As long as we are healthy, we push our bodies to the limit, neglect our spirit, and only mend our relationships when absolutely necessary. When the body can take no more and we fall ill, we may either try to compensate for lost time by taking care of ourselves all at once or feel paralyzed by fear and helplessness, resigning ourselves to our fate and allowing the illness to take over. Neither approach is beneficial.

Our bodies, minds, and relationships require constant care. Constant care means developing good habits—habits that help us stay healthy and habits that help us regain health. Although we cannot control illness and accidents, it is within our power to cultivate and nurture good habits. By doing so, we can often prevent the onset or worsening of illness, or, conversely, aid in recovery and improve our condition.

Let us also recognize that our bodies, minds, and relationships are inextricably intertwined. It is no wonder if we feel unwell—if our stomach hurts or our chest tightens, for example—when we are afraid of something or if our relationships at home are deteriorating. It is not surprising if we become irritable or depressed after becoming physically ill, or if someone close to us does. Health is an indivisible whole, and any part that gets sick or neglected affects all the other parts.

It is important to remember that we can start taking care of our health at any time. It would have been better if we had started yesterday, but as long as we are alive, we have the chance every day to do something for our bodies, something for our minds, and something for our relationships with the people around us—in essence, to do something for our health. This is our chance and our responsibility. We have only one body, one mind, and one life with the people around us. Let us make it as healthy as possible, despite the multitude of illnesses and ailments.

4.4. Good communication is key to good relations (J. Ramovš, 2017)

Good family relationships, work relationships, and social harmony are the main contributors to a good quality of life. The best way to see how people feel about each other, how they work together, and how they live together is through their conversations—good conversation reflects good coexistence.

If we ask ourselves how we can create a better coexistence, the answer is the same: by learning a conversational culture, that is, by talking nicely to each other. A good conversational culture among our neighbours and with every human being is a most precious good habit. It is worth consciously acquiring it; whoever has it lives happily and creates a pleasant atmosphere around him.



A person who is pleasant in conversation and has good relations with people has developed the ability to make contacts and communicate well. This ability is called communicativeness. Today, the development of communicativeness is more critical for a satisfying and successful human life than the development of any other capacity. The basic insight of modern communication science is that as soon as we are in contact with someone, it is impossible not to communicate - everything we say, all our behaviour around them and everything we do to them is communication.

But like everything else, good communication needs to be learned. We learn it in the following ways:

- ***When communicating, follow the basic rules of conversational culture.***

Wherever people follow the basic rules of a conversational culture, coexistence and cooperation are good. Below are four basic rules of conversation: the sooner and better we learn them, the more pleasant the conversation with us will be.

1. We listen carefully to everyone, not jumping into the conversation.
2. We are talking about the current topic that we are discussing.
3. We talk about our own experiences in the first-person singular.
4. What anyone says about themselves stays between the people involved in conversation.

- ***We choose topics for discussion that are interesting to everyone.*** This way, all involved will be motivated to participate in the conversation. We are careful to choose a topic that we are passionate about. When we talk, we make sure that we focus on the positive and that we don't get bogged down in complaining and moaning—that way, nothing will be achieved or solved, and we all leave the conversation in a worse mood than when we started.
- ***We consciously engage with people of all generations:*** young people, people in their middle - that is, working years, and people after retirement. At the Anton Trstenjak Institute, in our research on human coexistence and in our practical learning about better relationships between people, we have also come up with the following rule for good coexistence and healthy personal development:

“In every period of life, a person must make sure that he or she is intensely personally connected with at least one positively oriented person from each generation: one young, one middle-aged and one old. Being personally connected means talking for at least one hour a week about their good personal experiences”.

There is an insecurity in the air today about connecting with people; we fear depending on others. It is important to be thoughtful when making deeper connections because, in reality, there are many unhealthy relationships. But where there is a disease risk, it is necessary to be conscious about health - fostering healthy coexistence is a priority. There are also many very nice relationships between people, but they remain more in the background than the bad ones. Everyone has good experience of how a deeply personal conversation between two people establishes a connection through which their feelings, experiences, insights and mutual support flow; both grow humanly in the relationship, and each grows as a separate and unique human being.

In establishing and maintaining good relationships with people, it is very helpful to make a good habit of using the three golden words:

- **Please!** - to genuinely ask when I need something from someone else.
- **Thank you!** - to say thank you warmly when the other person has done something good for me.
- **I am sorry!** - to apologise sincerely when I have done something to hurt them, either willingly or unwillingly.

The three golden words fit very nicely with a fourth good habit: to praise another for a specific good deed or quality. The praise must be concrete and genuine.

- ***We consciously focus on the sunny, positive side in every conversation and with every person.*** When we pay attention to the beautiful and the good in every person and every topic of



conversation, we are delighted. It gives us strength and the right direction to pursue a healthy life. Conscious attention to the positive side of people and things gives us the strength to endure when life is hard.

Today, there is a distrust of people and a caution about impressing others. The mass blind fascination with Nazi, fascist, communist and other bad leaders in the 20th century was a severe doctrine of sick fascination with other people. Even in personal and family life, after the initial enthusiasm, there is a lot of disappointment with each other. Blind enthusiasm and the naive expectation that the other will make my life and our coexistence beautiful and better in a way I imagine it is a severe disease of coexistence between individuals and the community. But if an organ is sick, it does not mean that it is not vital. Healthy human enthusiasm and joy for other human beings is a valuable ability - without it, there is no beautiful coexistence.

The condition for good harmony with others is my conscious decision to pay attention to each person's good, pleasant, or helpful words, actions, and qualities. Since 2000, research has been conducted to discover why some people are very good at getting along and working well together. It turns out that these people notice five nice, encouraging, or positive things about another person for every one negative thing.

The good makes us happy and enthusiastic; the bad makes us angry and discouraged. The bond that binds good relationships is the joy in one another. When one is delighted by another, one's muscles spontaneously put on a friendly face. A bright ray of grace spontaneously shines from the eyes. Beautiful words come to the tongue. The brain steers behaviour towards kindness. Attention to another spontaneously flows in a healthy direction - beneficial for all. Rejoice in oneself and others, and life is a great thing.

Getting used to directing our attention to the sunny side of each person is very challenging - no less than learning a foreign language. But it is also very rewarding - our relationship with another person depends on how we experience them. We are in contact and conversation with people all the time - our happiness depends on having a good relationship with them. To learn to see five times more of the good than the bad in the words and actions of another, in their appearance and our memories of them, as spontaneously as possible, we can practise "turning a light on another". This method is based on three insights into human experience and interpersonal harmony:

1. My relationship with others depends on how I experience them,
2. one has the greatest freedom in directing one's attention and one's point of view,
3. I can only expect better coexistence from myself - if I demand it from another, I am already making coexistence worse.

Understanding this insight shows us that the only way to improve our relationships is to consciously learn to experience others from their sunny, positive side.

4.5. Question of motivation (Ramovš, 2024)

Needs and capacities are a **complementary pair** in every living being: needs are the driving force for action and capacities are the means to satisfy needs and to develop. Unlike animals, human beings can only develop in a healthy way if they direct the satisfaction of their needs in a conscious and meaningful way. We must therefore be aware of them, so let us give a few more insights into needs.

Every need has great **power or energy** - needs are motivators of experience and behaviour. All needs give man all the energy he has available and needs for his life and development. Energy is a great value; just think of wars over oil for example. The human energy that comes from needs is the most precious energy for everyone, the energy that drives his capacities. In order to orient one's life towards a healthy and meaningful development, one needs to identify one's genuine needs on an ongoing basis.

The key link between a need and its realisation is one's **motivation**; the English words for this mental activity are will and desire (to have a will or desire to do, change, improve something). For holistic



prevention - and also for personal and cohesive development - knowledge about motivation is crucial. Human experience and action are driven (Lat. movere = to move) by several different motivations.

If we consider a few types of motivations:

1. Unconscious and conscious motivation
2. Intrinsic and extrinsic motivation
3. Inherent and learned motivation
4. Push and pull motivation

Knowledge about this motivation pair is particularly crucial for prevention and for the development of one's own personality and coexistence. We are constantly pushed into concrete experience and action by internal and external forces, both unconscious and those of which we are clearly aware. Typical examples of push motivation are hunger, excretion, unconscious barriers, addictions, consumerism, legal regulations, etc., while human values, goals, principles, ideals, etc. are referred to as pull motivation. Both motivations are generally considered to operate simultaneously, with one or the other dominating. Attraction motivation is uniquely human - it is the only way in which a person can autonomously direct his or her own experience, behaviour and development. It is rooted in a person's spiritual, existential, coexistential and developmental capacities, and can also include all physical and mental needs and capacities when deeply experienced by a person.

While testing new solution understanding and working on motivation is crucial. What motivates me as developer? What motivates me as formal or informal carers while trying out this solution? What motivates seniors? Only by searching for answers to those questions can we successfully try out and develop new things that can later serve to slightly improve, in this case, long-term care field.

4.6. Understanding digital barriers

Older people face several digital barriers, including:

1. **Lack of Digital Skills:** Many older adults may not be as familiar with using computers, smartphones, or the internet as younger generations due to limited exposure.
2. **Physical Limitations:** Issues like poor vision, hearing loss, or reduced motor skills can make using digital devices challenging.
3. **Cognitive Decline:** Memory problems or slower cognitive processing can affect their ability to learn and use new technologies.
4. **Fear and Distrust:** A fear of making mistakes, concerns about privacy, and distrust in technology can deter older adults from engaging with digital tools.

It is important to keep in mind, that big part of people providing care (formal and informal carers, including volunteers) face the same set of doubts and challenges.

Given the diversity of this population, including varying levels of education, income, and health, addressing these barriers requires a multifaceted approach:

1. **Do not assume when it comes to digital literacy:** It is crucial not to assume the digital proficiency level of older adults because they are a highly diverse group with varying experiences and skills. Some older adults might have had extensive exposure to technology through their careers or personal interests, while others may have had limited opportunities to engage with digital tools. Assuming a uniform level of digital ability can lead to inadequate support and training, leaving some individuals frustrated and disengaged. On the other hand underestimating people can have the same negative effect.



2. **Tailored Training Programs:** While preparing the training for informal carers, formal carers and seniors, keep in mind their diversity. When it comes to the use of PROCAREFUL platform, if needed, provide beginner-friendly, step-by-step training that considers the learning pace of seniors and carers older adults. Those trainings can be carried out individually or in group - depending on skills of the participants. But it is important that they include prepared, easy-to-understand materials, practical, hands-on learning experiences and possibility to ask questions. Remember, that investing in this step of the testing is worthwhile since it defines the quality of the testing and sets up the relationship with pilot and people involved in it.
3. **Accessible Design:** We tried to ensure that devices and applications are designed with larger text, simplified and intuitive interfaces to accommodate physical and cognitive limitations and to facilitate user experience. Feedback is always welcome though, so we can further improve the solution.
4. **Support Network:** It is essential that continuous support technical and non-technical support is offered on each pilot side and that people know, who they can call if they have an issue. Those people provide one-on-one assistance, answer questions, and offer ongoing support to build confidence.
5. **Building Confidence:** Encourage a positive and patient approach to learning technology, emphasizing its benefits and ensuring a supportive environment to build trust and reduce fear. Success stories and examples of how technology can improve daily life, talking about the purpose of the testing and possible benefits of the solution, assessing information and following the improvement, can motivate older adults and carers to embrace digital tools. Providing reassurance and celebrating small achievements can help build our confidence over time.

By addressing these barriers with a comprehensive, inclusive strategy, we can help each other become more comfortable and proficient with digital technology, enhancing seniors' quality of life and social connectedness.



5. On-site training at Pilot Sites

5.1. For informal and formal carers

5.1.1. PROPOSED AGENDA

Tasks to complete before training

- **Adding informal and formal carers to the platform:** We advise you to insert all the informal and formal carers into the Procareful platform before the training. For that, you will need a phone number and e-mail address.
- **Account creation:** If you will have one-day training, we advise carers to create an account before the training, especially if you'll be working with them simultaneously. If you will use only a demo presentation during the training, they can create the account also after the training. But please note, that in that case they will need individual technical support after the training. If you will have two days training, we advise that carers create an account and try out the platform between the first and second training.

One day training (4 hours)

15 min	Short presentation of trainers and participants On-site training introduction: Presentation of the Procareful hybrid model, pilot (<i>purpose, target groups, timeline, pilot ID card</i>) and training introduction	PPT: Procareful_On-site training introduction_carers
1h 30 min	Cognitive, physical and social activities - presentation and reasoning Procareful platform presentation	PPT: Cognitive, physical and social activities
15 min	Break	
45 min	Communication with an example of social activity Short introduction and in-group social learning exercise	Worksheet 8
15 min	Presentation, feedback on the exercise and conclusion	PPT: Communication and social growth challenge_carers
15 min	Break	
25 min	Prevention, healthy habits development and motivation A short introduction and exercise in pairs	Worksheet 10
10 min	Feedback and a short presentation	PPT: Prevention, habits and motivation_carers
15 min	Conclusion of the training and instruction about the next steps	PPT: Conclusion and next steps_carers



Two days training (day 1 two hours, day 2 two and a half hours)

DAY 1		
20 min	Short presentation of trainers and participants On-site training introduction: Presentation of the Procareful hybrid model, pilots (<i>purpose, target groups, timeline, pilot ID cards</i>) and training introduction	PPT: Procareful_On-site training introduction_carers
15 min	Cognitive, physical and social activities - presentation and reasoning	PPT: Cognitive, physical and social activities
10 min	Break when needed (during platform presentation)	
1h 15 min	Procareful platform presentation	
DAY 2		
25 min	Feedback on the Procareful platform, Q&A	
45 min	Communication with an example of social activity Short introduction and in-group social learning exercise	Worksheet 8
15 min	Presentation, feedback on the exercise and conclusion	PPT: Communication and social growth challenge_carers
15 min	Break	
25 min	Prevention, healthy habits development and motivation A short introduction and exercise in pairs	Worksheet 10
10 min	Feedback and a short presentation	PPT: Prevention, habits and motivation_carers
15 min	Conclusion of the training and instruction about the next steps	PPT: Conclusion and next steps_carers

After the training

- **Procareful Platform Worksheet (Worksheet 12_carers):** We propose you provide carers with a Worksheet to test the platform at the end of the training (if you will carry out one-day training, in which case be prepared to give individual technical support when needed) or between the first and second day of the training (if you will carry out two-days training). The Worksheet is prepared in a way that will encourage them to try out the platform and realise the challenges before they start to use it with seniors.

5.1.2. SUPPORTING CONTENT AND METHODOLOGY

Short presentation of trainers and participants and On-site training introduction

Since not all of you might know each other, **starting the training with a short presentation** of you, the trainers and all the participants (formal and/or informal carers) is important. You can do that sitting in a circle or ex-cathedra, passing a word from one person to another, depending on how you plan to continue the training. Keep in mind that due to the time constraint, the presentations shouldn't be too long, but they are important since they can also help you create a good working atmosphere. So, when you ask carers to



introduce themselves, you can invite them, for example, to share a name and one thing they find important when they provide care. If possible, refer to what they'll say during the training. Don't forget to thank the person who presented themselves after each presentation.

Please refer to the Procareful Training Manual Chapters 1 and 2 for the content of the PowerPoint (Procareful_On-site training introduction_carers) presentation, especially the target group description. While translating, pay attention to insert missing information (marked in yellow) and replace slide 5 with your Pilot ID Card.

Cognitive, physical and social activities - presentation and reasoning

Start the presentation by briefly introducing the PROCAREFUL platform for seniors. The platform is designed to offer a multi-component intervention, including cognitive and physical exercises and social activities, to promote healthy habits.

COGNITIVE ACTIVITIES

The presentation "Reasoning for Cognitive Prevention" aims to **present key concepts and evidence on prevention and the reasoning behind cognitive training.**

Start the presentation by focusing on prevention. It is important to emphasise that dementia is not an inevitable consequence of ageing. While age is the strongest known non-modifiable risk factor for dementia, not everyone who ages will develop dementia. You can use the picture from the 2020 Report of the Lancet Commission (Livingston et al., 2020) to support this statement, showing that there are 12 modifiable risk factors that increase the risk of developing dementia. Many of these factors (e.g., physical inactivity, smoking, social isolation, etc.) are related to lifestyle.

Then, focus on the reasoning behind cognitive training. The brain is "plastic", meaning it can reorganise itself in response to new learnings. This plasticity allows for improving or maintaining cognitive functions and performances throughout life. Trainings take advantage of plasticity to create new connections, develop new skills, or find new ways to use them, thereby maintaining or improving performance. Through training, we can increase our cognitive reserve, which is the ability to cope with or compensate for neuropathology or damage. Cognitive reserve is a protective factor that can postpone the onset of dementia. Evidence suggests that cognitive reserve can be enhanced through cognitive training, as well as physical activity, social connections, and new experiences. You might consider presenting the figure from Stern's article (2012), which illustrates that the manifestation of clinical symptoms of dementia is delayed relative to the progression of brain damage in people with high cognitive reserve compared to those with low cognitive reserve. The figure is more technical: if you are not comfortable presenting it, you can omit it from the presentation.

Finally, move to the slide presenting cognitive exercises, inform the trainees that project partners are working on an AI algorithm that can automatically adjust cognitive exercises' difficulty level. However, data is needed to create an effective algorithm. For this reason, exercises will be randomly assigned to seniors for six weeks. In the first phase of the pilot, customising exercises or difficulty levels will not be possible. It is essential to ensure that seniors are aware of this limitation to avoid dropouts. Emphasise the valuable contribution seniors are making by participating and ask carers to reassure them that results are not important - it is normal to make mistakes.

PHYSICAL ACTIVITIES

The main purpose of presenting the physical activities on the Procareful platform is to explain the benefits of physical activity on the health and general well-being of older people, which exercises are included in the Procareful platform, and how these specific exercises can improve the health of seniors.



We start the presentation with some highlights of why physical exercise is important for older people. Many seniors are physically inactive or not active enough due to illness, social perceptions, and lack of exercise habits that they didn't develop in their younger years. Physical exercise has many benefits for their health; you can present them all listed on the slide or choose just a few. There are some types of exercises that are especially recommended for seniors, including walking, swimming, doing housework, gardening, etc. Walking is simple, cost-effective, and an excellent form of regular exercise for anybody. You may point out that it is important that seniors enjoy in activities that they choose to do and that they are tailored to individual health conditions. Exercise is essential for managing chronic conditions like high blood pressure, respiratory diseases, and orthopedic issues. Even for bedridden individuals, performing exercises to maintain muscle strength and elasticity is important. The best way to get regular exercise is to develop exercise habits and start with 5 or 10 exercises or even less for less active. Consistency is key - aim for daily routines. Good habits drive regular exercise, especially during low motivation periods.

On the following slide, please present the 6 different types of physical exercises that the Procareful platform provides: 1) Exercises in bed, 2) Breathing exercises in bed, 3) Sitting exercises, 4) Breathing exercises that can be performed standing or sitting, 5) Balance exercises, 6) Walking. Depending on the person's health condition, we suggest different types of physical exercises and combinations. Next, please present which exercises we recommend for bedridden persons, people with balance problems and people with no restrictions (regarding walking and balance). Explain that people will initially be divided into three groups (for all exercise types, not for each exercise separately): beginner, moderate challenge level, and big challenge level. So, in total, they are expected to do 4 to max 8 exercises 3 to 7 times a week (depending on the difficulty).

Then, alongside each slide, present each type of exercise in more detail, including the benefits of doing that exercise, the number of different exercises on the platform, the division into three groups, and the intensity for each group.

You can conclude that physical exercise has many positive effects on an individual's health and well-being. The Procareful platform can help us to integrate exercise into our daily or weekly routine. Repetition is key to developing good habits while working on physical health prevention!

SECOND PART OF PHYSICAL ACTIVITIES AND SOCIAL ACTIVITIES

For the content of the rest of the presentation, please refer to the Procareful Training Manual Chapters 3.7. Cognitive games, 3.8. Physical exercises, 3.9. Social activities.

Tip: In one-day training, skip the presentation of social activities at the end and explain that you will do it more in-depth after the break. In a two-day presentation, repeat this slide two times—first as part of the platform and second as part of the practical exercise.

Procareful platform presentation

- Checklist for Procareful platform presentation for informal and formal carers.

For most of the presentation, follow the steps described in the Procareful - First Steps document (Chapter Formal Caregiver from page 23 onwards), but keep in mind that formal and informal carers will start using the platform from scratch, so you should follow the logic of a beginner. If possible, use a step-by-step approach where carers can do steps following your presentation. Show how to:

- Access the platform
- Use the dashboard and onboarding menu
 - Complete your personal profile
 - Enhance your professional profile
 - Set your notification preferences



- Add Senior
 - Create a Senior Account
 - Look up the assessment documentation for seniors
 - Assign Activities
- Show how they will see the senior profiles and their performance
 - Seniors tab and seniors profile:
 - Notes, Documents, Care plan, Performance, Senior details, Formal Caregivers
 - Supporting contacts (Add Informal Caregiver)
 - Dashboard:
 - Performance, Most and least active seniors, Notification Center
- Activating Senior's profile

Switch to the senior profile and:

- Show how seniors will see the activities
- Show examples of exercises:
 - Cognitive exercises: Word Guess, Wordle, Tic Tac Toe, Sudoku, Snake, 2048, Memory (choose 2, for example, Word Guess and Sudoku)
 - Physical exercises: walking, balance exercises, sitting exercises, breathing exercises (show walking and breathing exercises with just instructions, and choose 2 other exercises with short videos, for example, lifting the leg forwards and shoulder circles)
 - Social activities: show how a challenge looks in the platform and explain that they are to be done every week or two weeks

- **Tips and tricks:**

- **Adding carers to the platform:** As mentioned above, we advise you to insert all the informal and formal carers into the Procareful platform before the training. You will need their phone numbers and e-mail addresses for that.
- **Account creation:** As mentioned above, if you will have one-day training, we advise carers to create an account before the training, especially if you'll be working with them simultaneously. If you will use only a demo presentation during the training, they can create the account also after the training. But please note, that in that case they will need individual technical support after the training. If you will have two-days training, we advise that carers create an account and try out the platform between the first and second training.
- **Procareful Platform Worksheet (Worksheet 12_carers):** As mentioned above, we propose you provide carers with a Worksheet to test the platform at the end of the training (if you will carry out one-day training, in which case be prepared to give individual technical support when needed) or between the first and second day of the training (if you will carry out two-days training). The Worksheet is prepared in a way that will encourage them to try out the platform and realise the challenges before they start to use it with seniors.
- If possible, try all the steps together with carers, demonstrating a step first and then having them repeat it after you. If that is not possible, we propose that at least you give carers Worksheet 12 and be prepared to work with them individually after the training.
- **Add Senior:** This is especially important for creating a senior step if cares will be the ones onboarding seniors. An alternative and maybe better option in the pilot is that one of the assessors or person in charge of the technical support does the onboarding of all the seniors, in which case cares don't have to be so familiar with that step, and you can only show it in passing without try-outs.



- **Look up the assessment documentation for seniors:** We advise you to explain to carers that they cannot complete onboarding before their assessment is done. In other words, they can create a senior account but cannot start with the training plans before their assessment is done.
- **Activating seniors profile:** As with Add senior, the training depends on who will carry out the onboarding of the seniors. We advise activation of seniors profile is done by one of the assessors or by a person in charge of technical support, in which case carers don't have to be so familiar with that step, and you can only show it in passing without try-outs.
- **While switching to the seniors' profile:** This part can be done only as a demo version. While showing cognitive and physical exercises, you can try to engage carers to solve the exercises with you in order to make the presentation more engaging.

Communication with an example of social activity

EXERCISE IN GROUP SETTING

We suggest conducting this exercise in a group setting, with trainers who participated in the training-for-trainers taking on the role of group leaders. If there are two group leaders working with one group, divide the steps below between you to ensure a balanced approach. If the group of formal and/or informal carers exceeds seven people, we recommend splitting into two groups, with each trainer leading one group.

Tasks of the group leader in steps:

1. Sit in a circle (Tip: If possible, arrange the chairs in advance to save time. Ideally, leave the centre of the circle empty so everyone can see each other directly—this setup fosters an open atmosphere).
2. If you haven't already done so at the start of the training, ask each participant to introduce themselves.
3. Ask everyone to read the text together, passing the reading from one person to another so that it's not all on one person.
4. After reading the text together with participants, you, as a group leader, read the task and give participants around 3 minutes to think and, if possible, draft an answer. Tell participants directly that: "We'll take 3 minutes for reflection and writing after which we'll do the sharing." Emphasise the importance of remembering a positive example or influence.
5. Following 3 minutes of silence, as group leader, give each participant an opportunity to share their thoughts, starting with yourself or your co-leader. Try to share your positive experience in a way that is not too short and not too long (ideally around 3-4 min) in the first person singular since it will give the pace and example for the others. After that, continue the circle to your or your co-leaders left (your heart site 😊). Thank each person who shared their experience; if possible, include their name when you say: "Thank you for your sharing." Gratitude and calling people by name give acknowledgement and create a more connected atmosphere.
6. If someone thinks he/she doesn't have anything to share or is too shy to do so, kindly probe one more time, telling them it is fine also to share something really small; maybe there was a good teacher in primary or secondary school? If they still don't remember anything, tell them it is fine and that if they want, they can still share something later. In that case, you have to remember to ask: "Does anyone else want to share something?" when you finish the whole circle.
7. The group leader is also responsible for reminding the group about communication rules if needed: listening well or, in other words, being quiet when another person is speaking, talking in the first person singular about personal experience, not being too long (normally people need up to 5 min



to share their experience after that encourage them to wrap up the story so others can also share unless you deem for this person very important for the person to finish in their own pace). The group leader also guides the discussion to focus on positive experiences or on negative experiences that have been processed well. You might steer the conversation by saying, "I can hear that this is difficult and important for you, but today, we'd like to focus on something that worked, to learn about your good experiences. Can you remember one of those, even if it's a small one?" This approach stems from the realisation that we adults learn more effectively from the experiences of others than from theoretical knowledge, and positive experiences of others on the same topic can be particularly useful.

8. At the end of the group sharing, the group leader should conclude with a few words about what impressed them and what they learned from others.
9. After this, present a short summary of what good communication is (look under tips) and explain the purpose of social challenges (called personal growth challenges). We propose that you do that with your own words still sitting in the circle, but you can also use Power-point slides Communication and social growth challenge_carers.
10. Finish this part with the reflection about: **How did you find the exercise? What did you learn from others? Could this type of sharing help to grow or improve a relationship between people working and being taken care of as part of long-term care? If so, how and why?** Depending on your time, ask two to three people to share their thoughts. Due to time constraints, avoid discussion, with, for example, saying: "It seems to be a really interesting topic, but so we are not too long, maybe we can continue some of that during the break or even after the training." Also, depending on the situation, you can switch steps 9 and 10.

Beware! In a group, we are all (including the group leaders), both teachers and learners. The differences among us enrich the experience, so let's listen to each other's experiences with curiosity and respect.

EXERCISE CARRIED OUT INDIVIDUALLY

If you'll be working with formal or informal carers individually, we suggest conducting this exercise in a pair with the person you teach. Sit next to each other and read the introduction together, concluding with the conversational question. Both of you should take a few moments to silently think about the person you want to present. Then, follow the same steps as in the group meeting, but adapt them to a more conversational mode—share your own experience, listen attentively to your partner, and consider asking follow-up questions at the end. Finish by explaining the importance of this exercise from a conversational standpoint and discussing the meaning behind personal growth challenges.

Tips:

- To keep your part of the sharing interesting for you and your partner, think of different people each time you conduct this exercise.
- When explaining communication, emphasise the following:
 - Adhere to the four basic rules of communication.
 - Create an open space for sharing where everyone feels comfortable, unthreatened, and free from judgment and feels they can contribute by sharing their experience.
 - Show curiosity about others' responses. We are all both teachers and learners when it comes to sharing personal experiences. A great way to show interest is to ask about something you found particularly interesting, or if pressed for time, repeat a small segment that stood out to you.
 - Thank others for sharing.



All these practices, observed during this training in groups or pairs, also apply to our conversations with care recipients.

- When explaining the purpose of personal growth challenges, highlight the following:
 - These challenges support the need for everyone to be “intensely personally connected with at least one positively oriented person from each generation: one young, one middle-aged, and one old. Being personally connected means talking for at least one hour a week about their good personal experiences.” The challenges provide both the senior and their partner with various conversational topics and other opportunities.
 - Personal growth challenges can be utilised by formal or informal carers, or if more beneficial, carers can encourage a senior to find a challenge partner among their other relatives, friends, or even someone from a younger generation.

Prevention, healthy habits development and motivation

Most of this part of the training is to be carried out in pairs. Start by handing out the Worksheet 10 to all the participants.

Read the short introduction:

PROCAREFUL hybrid model consists of two parts: a technical solution and a non-technical part. In the letter, we want to improve the personal segment of care and understanding of prevention.

If we want to change the way we provide care and work more preventively, a mind shift is required: from service-orientated care to personal, emphatic care and from reactive care to proactive, preventive care. And this mind shift has to happen on all levels: from developers and trainers to formal and informal carers (so all of us) and to the people we will work with.

Give instructions for working in pairs. Tell the participants:

- To keep in mind good communication advice (which we talked about in the previous exercise).
- That they'll have around 20 minutes to draft the answers and **share answers to questions 1 to 3** with each other. That gives them around 5 minutes for preparation and 7 minutes each for sharing. **We will collect answers to question 4 together in a group.**
- To return the worksheets to you at the end of the exercise. You, as trainers, and we, as a consortium, might find some of the answers, especially the one about motivation, interesting later on, to monitor the development.

After giving the instructions, divide people into pairs; you can ask them to turn to the person closest to them OR suggest they stand up and go into a pair with a person they know the least, OR you can use some other method. If someone is missing a pair, go into pair with that person yourself. If you are left alone, observe others and keep time, reminding them one or two minutes before the end of the allocated time that they should start wrapping up their conversation since the exercise is coming to an end.

Feedback and presentation of prevention, healthy habits development and motivation:

For the content of the presentation, please refer to the Procareful Training Manual, Chapter 4.

Tips:

- Remember that this presentation is short; you'll probably have 10-15 minutes. So, keep the explanation of holistic prevention, development of healthy habits, and motivation simple.
- While talking about mitigating bad habits and changing habits, keep in mind that if we want to achieve that, it is crucial to introduce a healthier alternative, a new habit. In other words, habits are deep-rooted, and only by growing something new in place of the bad habit we pulled out can we prevent the weed from growing again.



- It is important to allocate 5-10 minutes for feedback. You have two slides to guide you through this process:
 - o On the 4th slide, you'll have the opportunity to ask for feedback on the first three questions. You can ask the entire group whether they find the exercise interesting. Then, using the introduction on this slide as a prompt, invite one or two participants to share their thoughts, while being mindful of the time.
 - o The 7th slide invites you to explore motivation together. Encourage participants to share their answers with you, paying particular attention to these questions:

- What potential benefits do you see for yourself and (only for formal carers) your organisation?
- What benefits do you see for seniors?

You can also share some of the motivations developers and trainers had, as well as the benefits they hoped to achieve while creating this solution:

- For formal and informal carers: To help informal carers feel like an integral part of the long-term care system by participating in the project and using the Procareful platform. For both informal and formal carers to gain a new tool that enhances their ability to provide care for seniors. For formal carers, it offers an opportunity to expand their care practices and incorporate more holistic care.
- For seniors: To get an opportunity to better take care of themselves also by gathering new understanding on wellbeing in old age. It is fundamental to give older adults tools, knowledge, and possibilities to take care of their wellbeing, with respect for their characteristics and desires. By using the tool they can hopefully learn something new to maintain their health and potentially improve their overall wellbeing; a goal would be to include at least one positive change into their daily routines after the end of the pilot.
- General: To promote a new approach to ageing and care provision, emphasising more holistic, relational, and preventive strategies.
- o Motivation is crucial for changing habits!

Conclusion of the training and instruction about next steps

It's important to conclude the training by summarizing everything and maintaining a positive atmosphere. Two key points you should keep in mind:

1. **Finish on time:** Aim to end the training within the scheduled time. If you anticipate needing a bit more time, ask participants in advance if they can stay longer. If not, adjust the content by leaving out something less essential.
2. **Provide an opportunity for participants to share also at the end:** Depending on the time available and the group size, invite all participants (or, if the group is larger than seven and time is limited, a selected few) to share one sentence about what they will take away from the training, whether for their personal lives or the testing.

You can apply the same approach if the training was conducted individually. Ask the participant for feedback on the session and what one key takeaway they will carry with them.

Remind participants about the "homework" (Worksheet 12 for carers) given after the presentation of the platform. Ask them to return it to you (or the person responsible) within two weeks after the training.

Inform participants about the next steps: When will the testing phase begin? What will happen between now and then? Do they need to complete any further tasks before testing starts?

Tell participants about the continuation of the training. To develop non-technical skills and deepen their understanding of the Procareful hybrid model, formal and informal carers will continue training throughout the pilot phase. We plan to meet four times, for two hours each, over the next 8 to 9 months.

Conclude by expressing your anticipation for the experience and invite any questions they may have.



5.2. For seniors

5.2.1. PROPOSED AGENDA

Tasks to complete before training

- **Adding seniors into the platform:** We advise you that you insert each senior into the Procareful platform before the training. For that, you will need a phone number and e-mail address.
- **Assessment:** In the case of individual training, depending on the senior, you can carry out the assessment on the same day as the training (just before the training). If you will carry them separately, please make sure that an assessor informs the senior that short training will be carried out to help them familiarise themselves with the model, testing, and platform. If possible, he / she should also tell them the date and time of the training.

One-day On-site Training for Seniors - Individual (2 hours)

10 min	Presentation of the Procareful hybrid model, pilots (<i>purpose, target groups, timeline, pilot ID cards</i>) and short On-site training introduction	PPT: Procareful_On-site training introduction_seniors
40 - 60 min	Cognitive, physical and social activities - presentation and reasoning Procareful platform presentation	PPT: Cognitive, physical and social activities
20 - 30 min	Communication with an example of social activity	
10 min	Questions, conclusion and feedback	
15 min	Break when needed (for example, during platform presentation)	

One-day On-site Training for Seniors - In group (2 hours)

15 min	Short presentation of trainers and participants Presentation of the Procareful hybrid model, pilots (<i>purpose, target groups, timeline, pilot ID cards</i>) and short On-site training introduction	PPT: Procareful_On-site training introduction_seniors
50 min	Cognitive, physical and social activities - presentation and reasoning Procareful platform presentation	PPT: Cognitive, physical and social activities
15 min	Break when needed (for example, during platform presentation)	
30 min	Communication with an example of social activity In-group social learning exercise	
10 min	Questions, conclusion and feedback	



After the training

- **Procareful Platform Worksheet (Worksheet 12_seniors):** We propose you give seniors a Worksheet to test the platform at the end of the training. The Worksheet is prepared in a way that will encourage them to start using the platform. Be prepared to assist them with any technical issues or questions.

5.2.2. SUPPORTING CONTENT AND METHODOLOGY

Short presentation of trainers and participants and On-site training introduction

If you will carry out the training individually, start with a short presentation of yourself and ask the person a bit about themselves, for example, why they volunteered to join the testing.

If you will carry out the training in a group where not all of you might know each other, starting the training with a short presentation of you, the trainers and all the participants (seniors) is important. You can do that sitting in a circle or ex-cathedra, passing a word from one person to another, depending on how you plan to continue the training. Keep in mind that due to the time constraint, the presentations shouldn't be too long, but they are important since they can also help you create a good working atmosphere. So, when you ask seniors to introduce themselves, you can invite them, for example, to share a name and what encouraged them to join the Procareful testing. If possible, refer to what they'll say during the training. Don't forget to thank the person who presented themselves after each presentation.

Please refer to the Procareful Training Manual, Chapters 1 and 2 for the content of the PowerPoint (Procareful_On-site training introduction_seniors) presentation, especially the target group description. While translating, pay attention to insert missing information (marked in yellow) and replace slide 5 with your Pilot ID Card.

Cognitive, physical and social activities - presentation and reasoning

Start the presentation by briefly introducing the PROCAREFUL platform for seniors. The platform is designed to offer a multi-component intervention, including cognitive and physical exercises and social activities, to promote healthy habits.

COGNITIVE ACTIVITIES

The objective of the presentation "Reasoning for Cognitive Prevention" is to present key concepts and evidence on prevention and the reasoning behind cognitive training. The presentation has been developed for formal carers, so you may want to consider adapting it for a senior audience. When explaining the reasoning behind cognitive prevention, it is important to use simple words and provide concrete examples with real-life implications.

Start the presentation by focusing on prevention. It is important to emphasise that dementia is not an inevitable consequence of ageing; not everyone who ages will develop dementia. You could use the picture from the 2020 Report of the Lancet Commission (Livingston et al., 2020) to support this statement, showing that there are 12 modifiable risk factors that increase the risk of developing dementia. Many of these factors (e.g., physical inactivity, smoking, social isolation, etc.) are related to lifestyle.

Then, focus on the reasoning behind cognitive training. You could introduce the concept of plasticity, explaining that our brain can change and adapt when we learn new things. You could use the example of muscles: *just like our muscles get stronger when we exercise, our brain can stay fit or even get better when we challenge it with new activities.*



One of the great things about keeping the brain active is that it helps build what is called “cognitive reserve”. It can be defined as a store of resources for dealing with daily challenges. However, life presents us with various difficulties, which can have an impact on the resources we have at our disposal. That is why it is important to constantly add new resources to our reserve. Doing cognitive exercise can help, but doing physical activity, having good social relationships, and new challenging activities are also important for keeping the brain healthy. When training seniors, you might consider omitting the figure taken from Stern’s article.

Regarding cognitive exercises, inform seniors that we want to propose cognitive activities that are feasible for them, and that can challenge their brains with fun. However, we need their support in this phase of the pilot. Explain to seniors that it will not be possible to customise exercises or difficulty levels for the first six weeks. It is essential to ensure that seniors are aware of this limitation to avoid dropouts. Emphasise their valuable contribution by participating and reassure them that results are not important - it is normal to make mistakes.

PHYSICAL ACTIVITIES

The main purpose of presenting the physical activities on the Procareful platform is to explain the benefits of physical activity on the health and general well-being of older people, which exercises are included in the Procareful platform, and how these specific exercises can improve their health.

We start the presentation with some highlights of why physical exercise is important for older people. Many seniors are physically inactive or not active enough due to illness, social perceptions, and lack of exercise habits that they didn’t develop in their younger years. Physical exercise has many benefits for their health; you can present them all listed on the slide or choose just a few. There are some types of exercises that are especially recommended for seniors, including walking, swimming, doing housework, gardening, etc. Walking is simple, cost-effective, and an excellent form of regular exercise for anybody. You may point out that it is important that they enjoy in activities that they choose to do and that exercises are tailored to individual health conditions. Exercise is essential for managing chronic conditions like high blood pressure, respiratory diseases, and orthopedic issues. Even for bedridden individuals, performing exercises to maintain muscle strength and elasticity is important. The best way to get regular exercise is to develop exercise habits and start with 5 or 10 exercises or even less for less active. Consistency is key - aim for daily routines. Good habits drive regular exercise, especially during low motivation periods.

On the following slide, please present the 6 different types of physical exercises that the Procareful platform provides: 1) Exercises in bed, 2) Breathing exercises in bed, 3) Sitting exercises, 4) Breathing exercises that can be performed standing or sitting, 5) Balance exercises, 6) Walking. Depending on the person’s health condition, we suggest different types of physical exercises and combinations. Next, please present which exercises we recommend for bedridden persons, people with balance problems and people with no restrictions (regarding walking and balance). Explain that people will initially be divided into three groups (for all exercise types, not for each exercise separately): beginner, moderate challenge level, and big challenge level. So, in total, they are expected to do 4 to max 8 exercises 3 to 7 times a week (depending on the difficulty).

Then, alongside each slide, present each type of exercise in more detail, including the benefits of doing that exercise, the number of different exercises on the platform, the division into three groups, and the intensity for each group.

You can conclude that physical exercise has many positive effects on an individual’s health and well-being. The Procareful platform can help us to integrate exercise into our daily or weekly routine. Repetition is key to developing good habits while working on physical health prevention!



SECOND PART OF PHYSICAL ACTIVITIES AND SOCIAL ACTIVITIES

For the content of the rest of the presentation, please refer to Procareful Training Manual Chapters 3.7, Cognitive games, 3.8, Physical exercises, and 3.9, Social activities.

Tip: For seniors, skip the presentation of social activities at the end of the Power-Point Cognitive, physical and social activities. Explain that you will do the presentation of social activities more in-depth together with a practical exercise of social activity.

Procareful platform presentation

- Checklist for Procareful platform presentation for seniors.

For most of the presentation, follow the steps described in Procareful Training Manual, Chapter 3.4., but keep in mind that seniors will start using the platform from scratch, so you should follow the logic of a beginner. Show seniors how to:

- Account creation and activation
- Access to the platform and dashboard
- Show how seniors will see the activities
- Show examples of exercises:
 - Cognitive exercises: Word Guess, Wordle, Tic Tac Toe, Sudoku, Snake, 2048, Memory (chose 2, for example, Word Guess and Sudoku)
 - Physical exercises: walking, balance exercises, sitting exercises, breathing exercises (show walking and breathing exercises with just instructions, and choose 2 other exercises with short videos, for example lifting the leg forwards and shoulder circles)
 - Social activities: show how does a challenge look in the platform and explain that they are to be done every week or two weeks
- Show how carers will see the senior profiles and their performance *from carers profile

When showing seniors how to do things, use a step-by-step approach, clicking on things in the same order as seniors as expected while performing exercises. We propose you use an approach where you demonstrate something first, and the senior can repeat it after you.

- Tips and tricks:
 - **Adding seniors into the platform:** We advise you that you carry out the training for the seniors right after the assessment (if same person will carry out the assessment and training) or soon after the assessment (if the assessor and trainer are two different people) in which case give seniors proposed date and time for the training at the end of the assessment.
 - **Account creation and activation:** Do this step with seniors if it was not done before with the assessors (if you chose approach of two separate meetings).
 - **Procareful Platform Worksheet (Worksheet 12_seniors):** We propose you give seniors a Worksheet to test the platform at the end of the training. The Worksheet is prepared in a way that will encourage them to start using the platform. Be prepared to assist them in case of any technical issues or questions.

Communication with an example of social activity

Use Worksheet 8 (for seniors). Use section 2.5, Communication with an example of social activity from this document, as a reference on how to carry out this exercise in a group or individually. For seniors, it is even more important that you do that exercise sitting in a circle or sitting next to a person you train (in case of



individual training) without a Power-Point presentation. Depending on your situation (time constraints and context), you can leave out step 10.

Tips adjusted to working with seniors:

- To keep your part of the sharing interesting (especially when you do individual trainings), think of different people each time you conduct this exercise.
- When explaining communication, emphasise the following:
 - Adhere to the four basic rules of communication.
 - Create an open space for sharing where everyone feels comfortable, unthreatened, and free from judgment and feels they can contribute by sharing their experience.
 - Show curiosity about others' responses. We are all both teachers and learners when it comes to sharing personal experiences. A great way to show interest is to ask about something you found particularly interesting, or if pressed for time, repeat a small segment that stood out to you.
 - Thank others for sharing.

All these practices, observed during this training in groups or pairs, also apply to our conversations with a person we'll do challenges with.

- When explaining the purpose of personal growth challenges, highlight the following:
 - These challenges support the need for everyone to be “personally connected with at least one positively oriented person from each generation: one young, one middle-aged, and one old. Being personally connected means talking for at least one hour a week about their good personal experiences.” The challenges provide both the senior and their partner with various conversational topics and other opportunities.
 - Challenges are optional (you can choose to try them out or not), but if you decide to do them, please keep in mind a few things:
 - Partner selection: You can carry out challenges with your friend, relative, volunteer, carer or even with grandchildren or other young people (if needed, adapt that to your situation). If possible, do all the challenges with one person since that will help you know that person even better from another point of view. Challenges are independent, though, so if that is not possible, you can also try them out with more people.
 - Good communication: It is important for both participants in the challenge to observe the rules of good communication we just talked about.
 - Engagement and Preferences: Aim to complete the challenges weekly - not more or less often since this gives us routine and time to digest what we've received. If you don't like a challenge, you can skip it. But keep in mind that even if some challenges initially seem less appealing, you may find unexpected value in them if you try them out. Finally, there is a limited number of challenges, so after you finish them all, those that you skipped will pop up again to give you an opportunity if you change your mind in between.

Conclusion of the training and instruction for next steps

It's important to conclude the training by summarizing everything and maintaining a positive atmosphere. Two key points you should keep in mind:

3. **Finish on time:** Aim to end the training within the scheduled time. If you anticipate needing a bit more time, ask participants in advance if they can stay longer. If not, adjust the content by leaving out something less essential.
4. **Provide an opportunity for participants to share also at the end:** Depending on the time available and the group size, invite all participants (or, if the group is larger than seven and time is limited,



a selected few) to share one sentence about what they will take away from the training, whether for their personal lives or the testing.

You can apply the same approach if the training was conducted individually. Ask the participant for feedback on the session and what one key takeaway they will carry with them.

Also, remind participants about the "homework" (Worksheet 12 for seniors) given after the presentation of the platform. Ask them to return it to you (or the person responsible) within approximately two weeks after start of the testing.

Finally, inform participants about the next steps: When will the testing phase begin? What will happen between now and then? Do they need to complete any further tasks before testing starts?

6. Annexes

6.1. Train-the-trainers Training toolkit

Procareful Train-the-trainers Training toolkit consists of:

- Worksheet 7: Procareful pilot identity (ID) card and preparation for the on-site training on pilot sites
- Worksheet 8: Attitude and communication
- Worksheet 9: Assessment exercise
- Worksheet 10: Prevention and development of healthy habits
- Worksheet 11: Motivation
- Worksheet 12: Procareful platform feedback
- PPT template: Procareful_project ID card
- PPT: 1 Procareful_Training introduction_IAT_Day1
- PPT: 2 The assessment within the PROCAREFUL Project_ISRAA_Day1
- PPT: 3 Attitude and communication_IAT_day 1
- PPT: 4 The assessment PROCAREFUL feedback_IAT_Day2
- PPT: 5 Cognitive, physical and social activities_ISRAA and IAT_Day2
- PPT: 6 Prevention, habits, motivation_IAT_day 2

6.2. On-site training toolkit

Procareful On-site Training toolkit for carers consists of:

- Worksheet 8 (for carers): Communication and relationship
- Worksheet 10 (for carers): Prevention, healthy habits and motivation
- Worksheet 12 (for carers): Procareful platform feedback
- PPT: Procareful_On-site Training Introduction_carers
- PPT: Cognitive, physical and social activities
- PPT: Communication and social growth challenge_carers
- PPT: Prevention, habits and motivation_carers
- PPT: Conclusion and next steps_carers
- Procareful Training Manual for Carers (without Chapters 5 and 6)

Procareful On-site Training toolkit for seniors consists of:

- Worksheet 8 (for seniors): Communication and relationship
- Worksheet 12 (for seniors): Procareful platform feedback



- PPT: Procareful_On-site Training Introduction_seniors
- PPT: Cognitive, physical and social activities

All the On-site Training toolkit (for carers and for seniors) is to be translated into national languages.