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## Implementation Guideline for Service Standards for Elderly Home Care

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## List of Abbreviations

Full Form in English	EN-Abbr.	TR-Ks.	Türkçe Açık Hali
European Union	EU	AB	Avrupa Birliđi
Family Social Support Programme	ASDEP	ASDEP	Aile Sosyal Destek Programı
Ministry of Family and Social Services	MoFSS	ASHB	Aile ve Sosyal Hizmetler Bakanlıđı
Ministry of Environment, Urbanization and Climate Change	MoEUCC	ÇŞİDB	Çevre, Şehircilik ve İklim Deđişikliđi Bakanlıđı
General Directorate of Services for Persons with Disabilities and the Elderly	EYGM	EYGM	Engelli ve Yaşlı Hizmetleri Genel Müdürlüğü
Union of Municipalities of Turkey	UMT	TBB	Türkiye Belediyeler Birliđi
Turkish Standards Institute	TSE	TSE	Türk Standartları Enstitüsü

# SERVICE STANDARDS FOR ELDERLY HOME CARE

## 1. Introduction

Local Administration Reform Project Phase III (LAR III) is implemented by the United Nations Development Programme (UNDP). The co-beneficiaries of the project are the Ministry of Interior (MoI) and Ministry of Environment, Urbanization and Climate Change (MoEUCC). The project is funded by the European Union. The overall objective of the project is to maintain the implementation support for local administration reform process executed between 2003 and 2013 and ensure an effective, inclusive, accountable and participatory local governance which is in accordance with international standards in Turkey.

These standards are considered significant in terms of consistency especially in the delivery of increased and diversified local services of MMs and providing a certain service quality in accordance with international standards. At the same time, it is expected that prepared standards will contribute to the intended results of local administration reforms.

Meetings on service areas were held with central government units including particularly the MoEUCC and MoI; the opinions of relevant institutions were received in the project advisory committee, the survey study was conducted to compile the opinions of MMs in relation to service areas and the “Workshop on Improvement of Service Delivery Standards” was held with the participation of 8 MMs. As a result of these studies, five service areas listed below were identified to develop standards:

- Public Health
- Public Health in Public Transport
- Preventive and Protective Fire Department Services
- Elderly Home Care Services
- Agricultural Support Services

Services for the elderly may be provided by public sector agencies, municipalities, non-governmental organizations and private sector. These services may be listed as social protection/assistance and care services in the most general sense. As provided in institutions, care services may be also provided at home. Elderly home care services are composed of home healthcare and home care/support services. This study is related to home care/support services provided by municipalities. The purpose of the study is to help the elderly maintain their lives in a decent manner and accordingly improve standards for home care service which will gradually have a larger share of elderly care.

When developing standards for elderly home care, a series of studies were conducted which might be summarized as follows: Presenting demographic change through data, identifying norms that will set the key framework in service delivery, mapping services for the elderly and developing a draft set of standards. During all these stages, the studies conducted in relation to elderly home care services were reviewed by mainly the Ministry of Family and Social Services (MoFSS) and affiliated General Directorate of Services for Persons with Disabilities and the Elderly (EYGM); development plans, action plans, legislation, regulations and directives were addressed in the frame of municipalities.

In the meetings held with the participation of project provinces, similarities and differences in service delivery, issues and solutions developed were sought to be understood through the experience of municipalities. An online meeting was held on 7 April 2021 through the questions whose framework was set beforehand with the participation of Denizli, Eskişehir, Kahramanmaraş, Kayseri, Konya, Muğla MMs, Çanakkale and Gaziantep Şahinbey Municipalities and Turkish Standards Institute (TSE) to compile more detailed information on home care services provided to the elderly by municipalities.

The “Comparative Assessment Report” prepared for Denmark, France, Spain, Italy and Slovenia as 5 selected EU countries, presented the service standards for elderly home care comparatively. The second municipality meeting was held on 7 May 2021 with the participation of the municipalities from Belgium, Poland, Spain, Italy to listen to elderly home care services and experience of member states of the European Union (EU). Standards were developed through the said studies.

Standards for elderly home care were classified under 4 headings.

- Policy making, planning and coordination
- Identifying needs for and access to services
- Service delivery
- Monitoring and evaluation

In the ***Workshop on “Development and Implementation of Local Service Delivery Standards to Simplify the Processes in relation to Service Delivery”*** which was held in Ankara on 18-19 August 2021, standards were discussed with public sector agencies and municipality representatives and revised through their feedback. Revised standards were discussed during the seminars in which public sector agencies and municipality representatives participated in Eskişehir (3 September 2021), Ankara (13 September 2021), Konya (7 October 2021), Denizli (18 October 2021) and Muğla (19 October 2021) and finalized.

## 2. Purpose and Scope

The world population and Turkey's population are gradually getting older. The demographic change affects the policies for the elderly, service planning and delivery. As a result of increased elderly population, there is also a trend towards home care instead of institutional care. The fact that the elderly person spends his/her aging period at home both affects the prosperity of the elderly person and reduces the financing needed for care.

This Implementation Guideline was prepared in a participatory manner to ensure that service standards for elderly home care would be included in planning, implementation, monitoring and evaluation processes by MMs.

Standards for home care/support services are important to assure the provision of care services in a decent manner. The Main purpose is to ensure that the elderly person receives the services that s/he requests in a recognized and respected manner and ensure that there is no unmet needs left.

Home healthcare and home care/support services for the elderly are provided in home environment in Turkey.

**Home healthcare services** include healthcare services provided in home environment for the elderly by professional healthcare workers. Home healthcare services, which are commonly provided by MoH and are also included in services of some municipalities, are services that are provided to the elderly, people with disabilities and patients. Home healthcare services are implemented in the frame of the regulation and directives prepared by MoH.

**Home care/support services** include care services and supportive activities provided by trained care-givers and/or family members to help individuals to maintain their lives in home environment. There are no regulations or directives in relation to the implementation of home care/support services, which have been prepared with the participation of relevant institutions and used by the whole of these institutions.

This Implementation Guideline covers home care and support services largely provided by municipalities. Home healthcare services were not included in the Implementation Guideline. There are studies conducted by the Ministry of Health (MoH) in relation to this subject at present.

When standards were drafted, all the stages including policy making process, monitoring and evaluation of the service were considered. For this purpose, 31 standards for elderly home care were described under 4 headings:

- Policy making, planning and coordination (6)
- Identification the need for service and access to service (3)
- Service delivery (18)
- Monitoring and evaluation (4)

The concepts referred in the Implementation Guideline may be defined as follows.

**Standard:** It defines objectives, principles and rules at minimum level which are set in relation to a specific area and intended to reach.

**Monitoring Indicator:** It is a tool used to monitor and evaluate whether the intended objectives have been reached and whether the standards have been implemented.

## 3. Implementation Guideline for Service Standards for Elderly Home Care

### 3.1. Policy Making, Planning and Coordination

Theme	Policy Making
<b>Standard</b>	1.1.The legislation which will set the general framework of home care/support services with the participation of municipalities should be prepared.
<b>Monitoring Indicators</b>	- Was the legislation prepared? (Y/N)
<b>Responsible Institutions</b>	MoEUCC General Directorate of Local Governments, MoFSS, Municipal Councils and Mayor
<b>Related Institutions</b>	Union of Municipalities of Turkey (UMT)

Legislation studies should be conducted to transform home care services into one of core service areas and clarify the frame of service delivery. While some municipalities provide service in the frame of MoH Regulation on Delivery of Home Care Services (OG of 10.03.2005 issue 25751) at present, some municipalities provide service through the directives prepared by themselves or guiding documents prepared by the unit. To ensure the unity in practice, MoEUCC may prepare the Regulation with the effective participation of municipalities. Until such regulation is prepared, the Directive may be prepared, and the frame of services may be set with the approval of Municipal Council and/or Mayor. The legislation study which will set the frame of home care/support services will assure the implementation of minimum standards by all the municipalities that provide this service.

It is important that the municipality issue a directive so that the municipal council/mayor owns the service.

Theme	Policy Making
<b>Standard</b>	1.2. A unit which deals directly with services for the elderly in the scope of the municipality (department/directorate/division,...) should be established.
<b>Monitoring Indicators</b>	- Were structures like Elderly Services/Home Care Services Unit etc. established? (Y/N)
<b>Responsible Institutions</b>	Metropolitan Municipal Council, Mayor

A unit which deals directly with services should be established in the scope of the municipality to increase prosperity of the elderly and implement the services for the elderly in an efficient manner.

Such unit will ensure that home care services are provided in a more efficient manner, the subject is addressed in a multi-dimensional way, and experience and specialization build up on the matter.

**References:** Law No. 5216 on Metropolitan Municipalities

Theme	Policy Making
<b>Standard</b>	1.3 A Commission on Aging should be established within Municipal Council.
<b>Monitoring Indicators</b>	- Was a Commission on Aging established? (Y/N)
<b>Responsible Institutions</b>	Metropolitan Municipal Council, Mayor

A specialised commission for the elderly may be established within Municipal Council. At present, it is mandatory to establish land development planning and public works commission, environment and health commission, planning and budget commission, education, culture, youth and sports commission and transport commission. However, it is also possible to establish a commission apart from these commissions.

**References:** Law No. 5216 on Metropolitan Municipalities

Theme	Policy Making
<b>Standard</b>	1.4 Services should be provided to everyone without discriminating language, religion, ethnicity, occupation, gender, sexual orientation, being citizen/non-citizen.
<b>Monitoring Indicators</b>	Is the elderly population who is offered the service being recorded by disaggregation? <ul style="list-style-type: none"> <li>- Citizens</li> <li>- Population under protection</li> <li>- Asylum-seekers/refugees</li> </ul>
<b>Responsible Institutions</b>	Mayor, Municipal Council, relevant municipal units
<b>Related Institution</b>	MoFSS

Many people who are not Turkish citizens reside in Turkey under different categories (refugee/asylum-seeker/population under protection). It is a fundamental human right to ensure that everyone living in national boundaries to have access to services.

**References:** Universal Declaration of Human Rights, Turkish Constitution

Theme	Planning
<b>Standard</b>	1.5 Home care services should be included in key documents of the municipality like the Strategic Plan.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Were services for the elderly included in the Strategic Plan? (Y/N)</li> <li>- Were they included in performance? (Y/N)</li> <li>- Were they included in activity report? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	Mayor, relevant directorates of the municipality (Strategy Development Unit, Social Services Unit etc.)

Services for the elderly should be included in the Strategic Plan and relevant documents so that they are among commitments of the municipality. It is not adequate that they are included only in relevant documents. The level of achieving the objectives included both in the Strategic Plan and performance programme should be periodically monitored and reported.

**References:** Strategy and Budget Office of the Presidency (SBO) Strategic Planning Guide for Municipalities

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Theme	Coordination
<b>Standard</b>	1.6 Coordination between relevant municipal units should be ensured to provide services for the elderly in an integrated manner.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Are coordination meetings on services for the elderly being held? (Y/N)</li> <li>- The number of coordination meetings held in relation to services for the elderly.</li> <li>- The number of municipal units that participate in coordination meetings.</li> <li>- Minutes of meeting.</li> </ul>
<b>Responsible Institutions</b>	Mayor, relevant directorates of the municipality, (Strategy Development Unit, Social Services Unit etc.)

To be able to achieve the objective of an age-friendly city, different municipal units such as technical affairs, transport, social services should work together. That each service unit knows what and why other units do will ensure the effective provision of services and it will also activate the utilisation of resources. For instance, when building a park, the planning should consider the elderly right from the beginning; or when working on social assistance for the elderly, reviews should be conducted in such manner to also identify the need for social services.

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### 3.2. Identifying Needs for and Access to Services

Theme	Identifying needs for services
<b>Standard</b>	2.1 Studies should be conducted to identify the need for service.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Was cooperation document/protocol etc. on data sharing with MoI, MoFSS, MoH prepared?</li> <li>- The number of the elderly visited or households where the elderly reside</li> <li>- The number of the elderly whose need was identified</li> <li>- Was the needs assessment report prepared? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	MoI, MoFSS, MoEUCC, MoH, Municipal Council, Mayor
<b>Related Institutions</b>	UMT

Municipalities provide home care services largely based on request and application. For the application-based service delivery, individuals who cannot request but are in need are not considered. A transition should be made from application-based service approach to needs-based approach. For this purpose, regular field survey may be carried out. The need may be identified by collecting information through mukhtars. However, field survey is a costly practice and it may not be always possible to allocate budget for these studies that should be periodically conducted. Mukhtars may not provide reliable data all the time. Utilizing the data infrastructure of central government, MoI and MoFSS is considered as the most appropriate method in the study on the identification of the need.

- MoI: Address Based Population Registration System (ABPRS) may be used for this purpose. The system may select the population aged 65 and older automatically and it may share them with relevant municipalities. When it has become possible for municipalities to know where the population aged 65 and older live, it will also be easier to identify the need for service. Municipalities may compile the need for service by using different tools, for instance calling regularly, sending a social worker after these telephone interviews where necessary. One of the establishment purposes of ABPRS is to contribute to data-based policy making. Such cooperation is aligned with the establishment purpose of the system.

- The results of field survey carried out in the frame of Family Social Support Programme (ASDEP) of MoFSS may be shared with municipalities.

“ASDEP is a Programme that includes guidance and counselling services at all the stages of the process to identify families’ and individuals’ needs for social aid and social services, plan and implement social aid and social service models according to the needs, ensure the utilisation of other public services (training, health, employment etc.) where necessary.... With our three thousand employees who are experts in the field, household visits are paid in 81 provinces and our citizens who are in need of social aid and social service are identified and it is ensured that

they benefit from services which are appropriate for their situation and other public services where necessary.”<sup>1</sup>

**References:** Protocol on the Execution of Home Healthcare, Home Care and Social Support Services in Cooperation

Theme		Identifying needs for services
<b>Standard</b>		2.2 Rural areas should be considered when identifying the need for service.
<b>Monitoring Indicators</b>		<ul style="list-style-type: none"> <li>- The number of urban and rural neighbourhoods in the boundaries of the municipality and the distribution of urban/rural neighbourhoods which the municipality provides home care service to (number and rate)</li> <li>- Was a final report on the identifying needs for services prepared? (Y/N)</li> </ul>
<b>Responsible Institutions</b>		Mayor, Municipal Social Services Unit

While there are municipalities that provide service without discriminating between urban and rural areas, home care services are generally provided in urban areas. The identification of service should be carried out both in urban neighbourhoods and rural neighbourhoods.

**References:** Law No. 5216 on Metropolitan Municipalities

Theme		Access to Service
<b>Standard</b>		2.3 It should be ensured that everyone who need home care services benefit from it.
<b>Monitoring Indicators</b>		<p>Are there any charts in which those who request services are classified by their socio-economic characteristics? (Y/N)</p> <ul style="list-style-type: none"> <li>- The number of people in financial deprivation</li> <li>- The number of people who are not in financial deprivation</li> <li>- The number of people who live alone</li> <li>- The number of people whose family-relatives live near them</li> </ul> <p>Was the service model with contributory pay established for those who are not in financial deprivation? (Y/N)</p> <ul style="list-style-type: none"> <li>- Distribution of the elderly who benefit from the service by years under this model.</li> </ul>

<sup>1</sup> <https://www.aile.gov.tr/ss/aile-ve-toplum-hizmetleri-genel-mudurlugu/asdep/>

<b>Responsible Institutions</b>	Mayor, relevant municipal units (Social Services, Financial Affairs etc.)
<b>Related Institutions</b>	MoFSS

Home care services provided by municipalities are considered as a form of social aid. While the municipalities holding a social examination help the elderly who experience economic neediness and loneliness to benefit from all services, they cover certain services of lonely elderly persons who do not experience economic deprivation.

However, the elderly persons who do not experience economic deprivation also need home care services. Charging for the service may be considered for the elderly individuals who are not in need to benefit from this service; price-contribution may be requested according to financial situation. Especially the elderly individuals rely on municipalities, which causes them to prefer the municipality instead of private sector in receiving service. The municipality should also consider the vulnerability of individuals.

To develop the service funding model, the study should be conducted with the central government. In the following period, there will be an increase in demand for services as a result of increased elderly population. It will not be possible to meet the demand for service with existing resources of the municipality. While developing the model, transforming it into a part of Social Security System so that everyone who needs home care services benefits from them and deducting premium for home care services may be considered. Of course, budget and power may be delegated to municipalities. What is important is to meet relevant stakeholders and address the subject of funding.

**References:** Fundamental human rights instruments, UN Principles for Older Persons

### 3.3. Service Delivery

Theme	Service Delivery
<b>Standard</b>	3.1 Care prioritization system should be established and a transition should be made to integrated service model.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Was the prioritization system established?</li> <li>- Were the services that the elderly need apart from home care services defined?</li> <li>- Was the number of the elderly who benefit from each service recorded by socio-economic disaggregation?</li> <li>- Are coordination and cooperation meetings being held with MoFSS, MoH and Governorships of the Provinces?</li> </ul>
<b>Responsible Institutions</b>	MoFSS, relevant municipal units (Elderly Services Unit/Social Services Unit, Strategy Unit)
<b>Related Institution</b>	MoH, Governorships

In the frame of integrated service, a 5-step prioritization system may be established:

1. Care for elderly people is ensured by themselves by receiving home care support, in case that self-maintenance cannot be ensured
2. Ensuring elderly care through family-public cooperation by ensuring public support for families and relatives of the elderly, if it is not possible
3. Providing a professional care-giver at home
4. Supporting the elderly person and family members whom s/he lives together with through daycare centre as a final point
5. Residential institutional care services are brought to the agenda.

Care prioritization system is a system that may be established with the cooperation of MoFSS. The establishment of such system by the municipality on its own does not seem possible due to existing institution building, legislation and budget. However, it seems essential to set the frame of elderly services, identify the scope of service, conduct such study to identify the necessary resource for this service to be provided and classify the elderly by integrated service model.

Theme	Service Delivery
<b>Standard</b>	3.2 Home care services should be provided in a manner that will complement each other with temporary institutional care services.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Are there any opportunities provided so that the family can rest in home care services implemented through family support? (Y/N)</li> <li>- Is there a Temporary Institutional Care practice? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	MoFSS, relevant municipal units (Elderly Services Unit/Social Services Unit, Strategy Unit)

Standard 3.1 and Standard 3.2 are interrelated. Integrated service delivery is an approach that aims to enhance life quality and prosperity of individuals. Therefore, the studies on identifying needs for services should include not only home care services but also other services. Thus, the services that the elderly person need apart from home care are made visible and relevant institutions are galvanized. Integrated care service approach is adopted. Ensuring the integration between home care services and temporary institutional care, for instance providing institutional care service to the elderly who live with their family for a while will enable family members who deal with elderly care to undertake works that their own lives require and deal with the elderly person. Having a place at which the elderly person will be left during the business trips or creating such opportunity so that family members who experience burnout due to care can rest will also have a positive impact on elderly well-being.

**References:** MoFSS Care Services Quality Standards (2014)

Theme	Service Delivery
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<b>Standard</b>	1.3 Individual Care Plan on the elderly who apply for home care services should be prepared.
<b>Monitoring Indicators</b>	<p>Were Social Examination Reports prepared? (Y/N)</p> <p>Was the Care Plan prepared? (Y/N)</p> <p>Is the Care Plan specific to a person? (Y/N)</p> <p>Are the following headings included in the Care Plan? (Y/N)</p> <ul style="list-style-type: none"> <li>➤ Does the service have a purpose?</li> <li>➤ Was the scope of the service stated?</li> <li>➤ Is information on personnel/employees who are responsible for the service included?</li> <li>➤ Were Elderly Care Charts (Date-Time-Period of service) prepared?</li> <li>➤ Is there a complaint scheme on the service?</li> </ul>
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit

Preparing a tailor-made Care Plan for each person and ensuring service variation are important in terms of increased satisfaction and prosperity of the elderly. The Care Plan is also important to provide services systematically and ensure the continuity.

The services needed in the Care Plan and their scopes should be identified. Evaluations that measure the level of performing daily activities by the elderly person should be made and the scope of service should be identified according to that. These services may be as follows:

- Personal hygiene
- House cleaning
- Maintenance and repair
- Follow-up of drug utilization
- Diet
- Transport-transfer
- Companionship

It should be identified how often the elderly person needs each service and it should be added to the Care Plan. The frequency of the need for care may be classified as follows:

- 7 days 24 hours
- Daycare
- Weekly care
- Short term care that supports family member who provides care
- Emergency care (Unexpected works of people who provide care)

Home care services are provided within working hours in Turkey. The service is provided at rehabilitation centres to the ones who need 7/24 care.

**References:** MoFSS Care Services Quality Standards (2014)

<b>Standard</b>	3.4 When planning home care services, those who benefit from this service should be included in the process, their opinions should be asked, information should be provided and their approval should be received.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Was a questionnaire compiling opinions of the elderly on care services prepared? (Y/N)</li> <li>- Were the reports including opinions of the elderly prepared? (Y/N)</li> <li>- Was the Approval Form on Elderly Care Plan prepared/Is it being used? (Y/N)</li> <li>- Were Information Materials on Elderly Care services prepared/Are they being used? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit

The elderly person is informed about the whole service process in detail. On behalf of the elderly person, insofar as his/her health status permits, it is ensured that the elderly person talks and decides. Before service delivery, the Approval Form should be prepared and signed by the elderly person. The Approval Form is also a tool that protects the personnel who provide service and reduces the adverse conditions which the personnel will face with.

**References:** UN Principles for Older Persons

Theme	
Service Delivery	
<b>Standard</b>	3.5 In the care for the elderly who stay with family members, services that will be provided by family and professional care should be defined, work should be divided between two of them.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Were the charts indicating services provided by Family and the municipality prepared? (Y/N)</li> <li>- Was the cooperation with families in relation service chart ensured? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	MoFSS, relevant municipal units -Social Services Unit, Elderly Services Unit

Standard 3.5 defines ideal situation and it is possible to implement it in the medium term. Currently, there is no municipality which operates in accordance with this standard.

It will be significant to identify which services of the elderly who live with their families are provided by the family and which services are provided by a professional care-giver in terms of both services complementing each other and decreasing care loads of families. Thus, families may be included in elderly care without carrying a heavy burden.

Theme	Service Delivery
<b>Standard</b>	3.6 Training, supervisory and counselling services for people who are in charge of care in family should be provided.
<b>Monitoring Indicators</b>	<p>Are training services being provided? (Y/N)</p> <ul style="list-style-type: none"> <li>➤ The number of people who benefit from these training courses</li> </ul> <p>Are Supervisory/Counselling services being provided? (Y/N)</p> <ul style="list-style-type: none"> <li>➤ The number of people who benefit from supervisory/counselling services provided</li> </ul>
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit
<b>Related Institution</b>	Provincial Directorate of MoFSS

Supervisory system will enhance both prosperity and life quality of the elderly and family members who are responsible for elderly care. Supporting family members who take responsibility in elderly care will reduce fatigue and burnout that may occur due to care service and secure the continuity of the care.

To ensure that care is provided in a qualified manner and in a manner that will take into consideration the need, it may be required for people who provide home care to complete the programme on “Training for People Who Will Support Self-Care of the Sick and the Elderly” which is provided by the Ministry of National Education (MoNE) and takes 160 hours.

**References:** MoFSS Care Services Quality Standards (2014), Commission Reports of Council on Aging (2019)

Theme	Service Delivery
<b>Standard</b>	3.7 The systems that support the mobility of the elderly person in the house (home environment of the elderly person) and external environment should be established to create an accessible and safe environment and support independent life in home environment.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- The number of tailor-made parks for the elderly</li> <li>- The number of tailor-made townhalls, service centres for the elderly</li> <li>- The number of elderly households that need housing arrangement and request it</li> <li>- The number of elderly households in which housing arrangement has been made</li> </ul>
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, Strategy Unit, Technical Affairs

<b>Related Institution</b>	MoFSS
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That the elderly person maintains his/her life independently should be major axis of all services. Home and environment arrangement should be made in a manner that will ensure that.

Currently, it is not possible for municipalities to make indoor arrangement. However, the inside of apartment complexes, building entrances, parks, sidewalks and roads may be arranged according to the elderly.

While housing arrangement helps the elderly person live independently, it also facilitates the employees who provide home care service to perform their job. For this purpose, arrangement may be made in the following areas to ensure that the elderly person lives an independent life:

- Bathroom
- Electric system
- Cabinets
- Ladders
- Doorbell

In housing arrangement, focus should be on falling prevention activities. For this purpose, it is necessary to work with occupational therapists. While making the house suitable, different function losses should also be considered as far as possible.

**References:** UN Principles for Older Persons, MoFSS Care Services Quality Standards (2014), TS 9111 Accessibility Requirements in Buildings for Persons with Disabilities and Limited Movement Ability

Theme	Service Delivery
<b>Standard</b>	3.8 Emergency Button Service should be established for the elderly who live alone.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Is Emergency Button service being provided? (Y/N)</li> <li>- The number of the elderly who are provided with Emergency Button Service</li> <li>- The number of the elderly who use Emergency Button Service actively</li> </ul>
<b>Responsible Institutions</b>	MoFSS, Municipal Social Services Unit, Elderly Services Unit
<b>Related Institution</b>	Governorships

An emergency button system through which the elderly who live alone at home will press and ask for support in case of emergency should be established. Life Button practice enabling 7-24 service delivery which was implemented between the years 2011 and 2017 under Life Support Project with the cooperation of Governorship of Ankara and Research, Certification and Training Foundation for Social Services (SABEV) was included. This experience may be examined to develop a model.

Theme	Service Delivery
<b>Standard</b>	3.9 Personnel who provide service to the elderly should have graduated from schools that provide instruction on aging-care.
<b>Monitoring Indicators</b>	- The rate of people who graduate from relevant schools between personnel/employees
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, relevant units related to Human Resources
<b>Related Institution</b>	Council of Higher Education, MoNE and MoNE Public Education Centres

Home care service, by its nature, is a service that operates through personnel/employees who provide service and the elderly who receive service (sometimes relatives of the elderly). As a whole, preparatory process, planning process, monitoring process of the service are intended for improvement of service delivery. Therefore, service providers-employees who are main actors of service delivery are at the centre of the service. Elderly care and care services require a special training and personal skills. People who have received their instruction on health and certified people in case of lack of personnel/employee who have the qualification should be preferred. It may be obligatory for people who will provide care to complete the programme on “Training for People Who Will Support Self-Care of the Sick and the Elderly” which is provided by MoNE Public Education Centres and takes 160 hours.

That the personnel who will provide service have received instruction is a fundamental standard.

**References:** MoFSS Implementation Manual on Care Services (2013), Commission Reports of Council on Aging (2019)

Theme	Service Delivery
<b>Standard</b>	3.10 Personnel/employees who have just commenced work should gain at least 3-month experience in the company of senior care-givers.
<b>Monitoring Indicators</b>	- Was the orientation programme established? (Y/N) - The number of personnel who have experience in relation to elderly care - The number of personnel who are provided with the internship opportunity in the company of senior care-givers
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, relevant units related to Human Resources

In home care/support services, employment of people who haven't undertaken care work before and do not have a practical experience will decrease the service quality and the elderly person's satisfaction and confidence in the service. An environment where beginners will gain experience should be created.

Theme		Service Delivery
<b>Standard</b>	3.11 All services in relation to elderly care should be provided by at least 2 personnel/employees.	
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Were employee work schedules prepared? (Y/N)</li> <li>- Were people who provided the service stated in schedules? (Y/N)</li> </ul>	
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit	

Home care services pose risks for both the ones who receive service and the ones who provide service. One of the ways to reduce these risks is to provide the service by more than one person. Thus, unexpected situations, crises may also be managed and personnel may support each other.

Theme		Service Delivery
<b>Standard</b>	3.12 Personnel/employees who provide elderly home care service should have awareness of elder rights and rights-based approach. Pre and in service training on this subject should be implemented.	
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- The subjects of training provided to personnel/employees and the number of training courses</li> <li>- Period of training courses</li> <li>- The number of personnel who participate in training</li> <li>- The number of personnel/employees who have completed the assessment process successfully after training</li> </ul>	
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, Human Resources Unit	
<b>Related Institutions</b>	Provincial Directorates of MoFSS	

Awareness training, workshops on elder rights and rights-based approach should be provided. The subjects such as ethics of care, decent service delivery, language that should be used while providing service and forms of approach to the elderly should be definitely included in training programme.

**References:** UN Principles for Older Persons

Theme		Service Delivery
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<b>Standard</b>	3.13 Personnel/employees who provide elderly home care service should respect privacy and use places to the extent permitted by the elderly person.
<b>Monitoring Indicators</b>	- Was the Document on Employee Code of Conduct/Employee Code of Ethics prepared? (Y/N)
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, Human Resources Unit

Privacy should be one of key standards while working with the elderly. It is necessary to use the house in the manner that the elderly person permits and it is necessary not to intervene with the elderly person.

This standard should be written in personnel/employee contracts.

**References:** UN Principles for Older Persons, Guideline on Care Standards (2014)

Theme	Service Delivery
<b>Standard</b>	3.14 Privacy Statement should be prepared so that information on the elderly is not shared with others and it should be signed by all personnel/employees who commence work or an article related to this should be added to the employment contract.
<b>Monitoring Indicators</b>	- Was the Privacy Statement Form prepared/Is it being used? (Y/N) - Were relevant articles included in the Employment Contract? (Y/N)
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, Human Resources Unit

Data related to the elderly person should not be shared with anyone except for relevant manager. In pre-service training, information should be provided in relation to this issue. Awareness of personnel/employees about the results which information exchange will lead to should be raised. It should also be reminded that there will be legal results like the fact that sharing information with third parties requires the termination of job.

**References:** Law No. 6698 on Protection of Personal Data

Theme	Service Delivery
<b>Standard</b>	3.15 In case of outsourcing, it should be ensured that preliminary processes such as contracting and the like do not interfere with services.

<b>Monitoring Indicators</b>	- Do interruptions related to scheduling of articles of association and pre-service training occur? (Y/N)
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, Financial Services Unit
<b>Related Institutions</b>	Service provider company

All the organizations on tendering, contracts, pre-service training of employees should be held in a manner that will not damage the continuity of service.

<b>Theme</b>	<b>Service Delivery</b>
<b>Standard</b>	3.16 Standards for home care services provided by the company should be developed by the municipality.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Are there any minimum standards developed for companies by municipalities? (Y/N)</li> <li>- While preparing the standards, were health and occupational safety risks of employees considered? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit, Financial Services Unit

All above-mentioned standards under the heading of Service Delivery also apply to the outsourcing, the provision of service by the company. In addition to that, it is important that the municipality develops standards for services provided especially by the company and the company promises that it will provide service according to them for the service quality.

<b>Theme</b>	<b>Service Delivery</b>
<b>Standard</b>	3.17 Company employees should be ensured to have training when they commence work and during work process, training programme and content should be evaluated and approved by services for the elderly and/or relevant Municipal Social Services Units.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Did the municipality approve pre-service training provided to company employees? (Y/N)</li> <li>- Does the municipality conduct studies on elder rights, code of conduct etc. for company employees or does the municipality ensure that these studies are conducted? (Y/N)</li> </ul>

<b>Responsible Institutions</b>	Social Services Unit, Elderly Services Unit
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The scope of service and the qualifications of employees are two significant subjects that are at the centre of home care services. Therefore, the standard identifying the qualifications of employees in relation to training and awareness was also included in it as well.

Meetings, training courses and workshops should be held to convey the municipality's service approach to company employees. Because it will not be possible for the company to convey the municipality's service approach, relevant municipal unit managers or senior experts should undertake the work in person. Thus, company employees may understand the meaning and importance of service for the municipality.

In training courses and workshops that will be held, it should be aimed to raise the awareness of company employees about the subjects such as elder rights, rights-based service delivery etc.

Theme	Service Delivery
<b>Standard</b>	3.18 The continuity of care under risk conditions should be assured. For this purpose, alternative service plans should be made.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Is there a risk plan on home care services? (Y/N)</li> <li>- Were second people and/or institutions that may provide support for elderly care in the risk plan identified? (Y/N)</li> <li>- Was the system which the elderly who live alone may receive support established? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	Provincial Directorate of MoFSS, Municipal Social Services Unit, Elderly Services Unit, Strategy Development Unit
<b>Related Institution</b>	Provincial Directorate of Health, Disaster and Emergency Management Agency

The delivery of service to the elderly during and after the disaster should be included in relevant plans so that it can be assured.

In situations like the pandemic, it is necessary to prepare alternatives to provide care for the elderly who cannot ensure home care in terms of protection of the health of the elderly. For this purpose, it should be considered to provide temporary housing opportunities, cooperate with family members of the elderly person if there are any, communicate with mukhtars. To provide service under risk conditions, it is necessary that the municipality should be in communication with not only the elderly person but also his/her inner circle and neighbours. For this purpose, contact information on at least 2 people who will be communicated under risk conditions should be included in the Care Plan provided that one of them resides near the elderly person.

### 3.4. Monitoring and Evaluation

Theme	Monitoring and Evaluation
<b>Standard</b>	4.1 Input, output and result indicators should be defined for home care services, monitoring studies should be conducted through these indicators.
<b>Monitoring Indicators</b>	<p>Were indicators developed for Monitoring Study? For instance:</p> <ul style="list-style-type: none"> <li>➤ The distribution of the budget transferred to the service by years</li> <li>➤ The distribution of the budget designated for the service by resources (municipality budget-YADES)</li> <li>➤ The amount of budget used for each elderly person</li> <li>➤ The number of personnel providing service</li> <li>➤ The distribution of the number of the elderly who benefit from the service by services, age and gender etc.</li> </ul>
<b>Responsible Institutions</b>	Mayor, Strategy Development Unit, Social Services Unit, Elderly Services Unit, MoFSS

Monitoring should be conducted through indicators to monitor home care services. Examples of indicators were presented in the above-mentioned table. In addition to them, the municipality may monitor the service by creating indicators such as input, output, result, efficiency etc. on its own.

Examples of indicators:

- Input indicators: The resources used (employee, material,...).
- Output indicators: The services provided, the number of the elderly who benefit from each service.
- Result indicators: The elderly people's satisfaction with the service, the number of the elderly who stay at home-who do not need institutional care.

Another study that may be used to evaluate home care/support services is conducting monitoring study through Strategic Plan, Performance Programme and Activity Reports. Whether elderly home care is included in strategic plan, whether the objectives included in strategic plan are included in the performance programme belonging to relevant period and their levels of realisation, the events/actions held in activity reports in relation to elderly home care is an important part of monitoring. The objectives included in these key documents in relation to elderly home care services, performance indicators and activities should be aligned with standards.

The Checklist prepared to monitor elderly home care services effectively may be seen in Annex-1.

#### ***In case of outsourcing:***

To ensure the quality of service, the services provided by the company should be delivered in accordance with foreseen standards and they should be periodically monitored by using structured tools. The municipality should utilize not only company but also the elderly person's satisfaction as a monitoring tool.

**References:** Law No. 5216 on Metropolitan Municipalities, Regulation on Procedures and Principles for Preparing Strategic Plans, Performance Programmes and Activity Reports in Public Entities (OG of

Theme	Monitoring and Evaluation
<b>Standard</b>	4.2 An efficient, accessible complaint scheme through which the elderly may convey their complaints in relation to services should be established.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Was a complaint scheme established? (Y/N)</li> <li>- Are complaints being regularly analysed and reported? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	Strategy Development Unit, Social Services Unit, Elderly Services Unit, Information Processing

It is important that a complaint scheme should have been established so that vulnerable groups feel safe. Such system will also decrease the sense of abandonment and loneliness. Analysing complaints is one of effective tools that may be used to improve service delivery. Knowing the subjects, services and places in which complaints are concentrated will also enable to know the areas that will be intervened.

Theme	Monitoring and Evaluation
<b>Standard</b>	4.3 The elderly person's satisfaction should be periodically measured, the results should be reported, and they should be used for the development of service delivery.
<b>Monitoring Indicators</b>	<ul style="list-style-type: none"> <li>- Are satisfaction surveys being implemented once a year? (Y/N)</li> <li>- Are the results of these surveys being evaluated and reported? (Y/N)</li> <li>- Are in-depth interviews being held with the elderly? (E/H)</li> <li>- Are interview results being reported? (Y/N)</li> </ul>
<b>Responsible Institutions</b>	Mayor, Strategy Development Unit, Social Services Unit, Elderly Services Unit

Satisfaction studies on the elderly people should be periodically conducted and reported. Results of the report should be used as an effective tool in structuring and revising services for the elderly. The form that will set an example for satisfaction studies may be seen in Annex-2.

Theme	Monitoring and Evaluation
<b>Standard</b>	4.4 Standards should be reviewed and revised according to monitoring and evaluation results.

<b>Monitoring Indicators</b>	- Are standards being revised with the participation of relevant units of the municipality? (Y/N)
<b>Responsible Institutions</b>	Strategy Development Unit, Social Services Unit, Elderly Services Unit

Main purpose of monitoring and evaluation studies is to develop policies and services. For this purpose, it should be periodically reviewed how applicable standards are and how aligned they are with changing conditions and necessary revisions should be made accordingly.

## 4. Conclusions and Evaluations

It is necessary to consider home care services with other services for the elderly so that home care services can be provided in an efficient manner and ensure integrated, holistic service delivery. Providing home care services for the elderly in a manner that will complement each other through daycare, supporting families, temporary residential care and home healthcare services is necessary for a holistic model. When it comes to central government agencies, home care and the elderly, a holistic service model requires coordination and cooperation with MoFSS and MoH. Conducting studies to ensure this coordination in the following period remains an obligation before us.

## Annexes

### Annex-1. Checklist for Monitoring Elderly Home Care Services

Monitoring of Elderly Home Care Services	Y/N	Notes/Remarks
1. Were home care services included in the strategic plan of municipalities?		
2. Were the documents that set the framework and that were used by the municipality in relation to home care services prepared? Was the directive prepared?		
3. Is there a unit that deals with services for the elderly in the municipality?		
4. Is there a unit/commission related to aging in municipal council? Is it working effectively?		
5. Are coordination meetings on services for the elderly being held? (Y/N)		
6. Was cooperation document/protocol etc. on data sharing with MoI, MoFSS, MoH prepared?		
7. Were the data on the distribution of urban/rural neighbourhoods which the municipality provided home care service to (number and rate) stored?		
<p>8. Were charts in which those who request services and those who receive service are classified by their demographic-socio-economic characteristics prepared?</p> <ul style="list-style-type: none"> <li>• Distribution by gender (number and rate)</li> <li>• Distribution by age (number and rate)</li> <li>• The number and rate of people in financial deprivation</li> <li>• The number and rate of people who are not in financial deprivation</li> <li>• The number and rate of people who live alone</li> </ul>		
9. Is there a Temporary Institutional Care practice?		
10. Was an Individual Care Plan prepared for each elderly person?		
11. Were the services which the elderly person benefits from included in the Care Plan?		

12. Were the period and frequency of providing services included in the Care Plan?		
13. Was the Approval Form on Elderly Care Plan prepared and is it being used actively?		
14. Are training, supervisory and/or counselling services being provided for people who are in charge of elderly care in family?		
15. Were parks tailored for the elderly? The number of parks which were tailored for the elderly.		
16. Are townhalls and service centres being tailored for the elderly? The number of townhalls and service centres which were tailored for the elderly?		
17. Is housing arrangement service for the elderly being provided? The number of elderly households in which housing arrangement has been made.		
18. Is Emergency Button service being provided? The number of the elderly who are provided with emergency button service.		
19. The number of personnel/employees who provide service and the number of personnel/employees per the elderly person.		
20. The number and rate of the ones who have graduated from relevant schools (health, occupational therapist, psychology etc.) among personnel/employees who provide elderly home care service.		
21. The number and rate of personnel/employees who have completed the programme on "Training for People Who Will Support Self-Care of the Sick and the Elderly" by the Ministry of National Education.		
22. Were pre-service training programmes prepared for people who have just commenced work? Do these training courses include the headings of ethics of care, approach to the elderly and communication techniques, right-based service delivery?		
23. Is the internship opportunity being provided in the company of senior care-givers for the ones who have just commenced work? The number and rate of personnel/employees who have done internship in the company of senior care-givers among the ones who have just commenced work.		

24. Was the subject that elderly home care services are provided by at least 2 personnel/employees stated in relevant documents (directive, work flow schedule etc.)?		
25. Was the Document on Employee Code of Conduct/Employee Code of Ethics prepared?		
26. Was the Privacy Statement Form prepared/Is it being used and/or were the articles related to the confidentiality of personal data included in the Employment Contract?		
27. Are supervisory and/or counselling services being provided for personnel/employees who provide home care service?		
28. Were minimum standards that the company will follow in case that home care services are provided by the municipality through outsourcing developed?  (The above-mentioned monitoring indicators also apply to the situations in which service is provided by the company.)		
29. Was the system through which the elderly who live alone and need home care can receive support under risk conditions established?		
30. What is the amount of budget allocated for home care services? The amount of resource used per person and the amount of resource used in total.		
31. Distribution of budget by resource (municipal budget and YADES).		
32. Was an effective complaint scheme that the elderly people can convey their complaints established? The number of complaints received in the recent year and their distribution by subjects.		
33. Are satisfaction surveys being implemented for the elderly who receive home care service once a year? What are the analysis results of surveys?		
34. Are standards being periodically reviewed and revised?		

## Annex-2. Satisfaction Survey on Home Care Service

1. Characteristics of the interviewee (if the information have been recorded by the municipality, this section may be filled in directly by the municipality and it may be entered in the survey.)
  - a. Gender
  - b. Age
  - c. S/he lives alone.
  - d. S/he lives with her/his partner.
  - e. S/he lives with his/her relatives (her/his children etc.).
  
2. How did you hear about the service?
  - a. The municipality notified (home visits etc.).
  - b. Other public institutions notified.
  - c. Relatives and neighbours notified.
  - d. Mukhtar told.
  - e. I saw the advertisements (billboard, newsletter etc.).
  - f. Other .....

What are your thoughts about the following statements.

1. Agree 2. Neutral 3. Disagree

3. It was easy for me to have access to the service. I did not have difficulty in having access to it.
4. Before service delivery, they talked to me and provided detailed explanations.
5. All the services that I need are being provided to me.
6. I need more service.
7. Caregivers behave in a courteous and polite manner.
8. Caregivers sometimes may behave in a rude manner.
9. Caregivers are good at their work.
10. Caregivers care about what I think while they perform their duties.
11. Caregivers respect me.

12. I can receive service whenever I need.

13. I know where I can apply in case of emergency.

14. When an unpleasant situation arises, I know where and how I will apply and where I will convey my complaint.

15. I am regularly asked whether I am satisfied with the service.