



ANT Psychological and Social Service (APSS)

1. Location

Country: Italy

Region: Lombardy, Veneto, Emilia Romagna, Tuscany, Marche, Lazio, Puglia, Campania, Basilicata

Total population : 36.194.971 (amount of the Italian population of 9 regions in which we operate)

2. Description

Target population : Dependent Patient - Oncological elderly patients and family members (the average age of our patients is 75 years)

Target population: 1.447.799 (According to FAVO Report 2013 the 4% of Italian population has a cancer diagnosis)

Main topic: Frailty in general

Description: The ANT Psychological Service was born in 1985 to assist cancer patients and their relatives suffering from psychological distress. The caregivers' psychosocial problems are assessed through a socio-psychological questionnaire that caregiver fills at the start of the home assistance. The activation of psychological and social services might occur by the physician or by direct request of the family in order to prevent high risk of frailty due to coping with cancer. The psychologist takes care of family members with psycho-educational interventions, psychotherapies and psychological advice depending on their needs. The ANT psychologist can visit caregivers both at home and at some dedicated surgeries of ANT Institute. If the patient cannot stay at home, ANT is always in contact with most of long-stay wards and structures where they are admitted. In some cases physician and psychologist continue to follow patients also when they are in these structures. Furthermore the relatives of the patients temporary admitted in hospital continue to be supported by the ANT psychologists.

In 2012, the percentage of beneficiaries followed by our Psychology Service was 10% of the total number of ANT patients. The ANT psychologists conducted 3.394 psychological consults with the family members in order to support them in self-management of their dear's health and to promote for both of them a good daily life. Moreover, we have helped caregivers during bereavement: last year we assisted 413 relatives for grieving process. In all, the psychologists conducted 1.703 psychological consults with the family members after the death of the patient.

A selected group of volunteers supports patients and care-givers to reduce social isolation of the family through the proposal of different activities to patients such as reading, walking, watching movies; at the same time they incite care-giver into taking time for themselves. In 2012, for example in Bologna these volunteers were activated more than 600 times. ANT psychological and social service provides several support interventions in order to:

A3 Action Group "Prevention on early diagnosis of frailty and functional decline, both physically and cognitive, in older people"



- help the family to cope with cancer
- Empowered old people for better quality of life

Deliverables:

- We perform care-giver training courses about practical and psychosocial aspects.
- Training programmes for volunteers are run twice or third a year

In some area of Italy, over the years, several free-of-charge health/social activities have been developed. This thanks to the help of lots of volunteers. For example in Bologna we have ANT “Family Service”. This is composed by six employees and fourteen volunteers, who work hand-in-hand with the health professionals. The service include:

- Door-to-door service: it's based on transport of patients from their homes to Hospital for routine check-ups, hospital admittance and outpatient treatments. In 2012 the service has been activated 994 times.
- Medical devices at-home supply service: in 2012 ANT delivered 1,918 devices (beds, wheelchair, ecc.)
- “Solidarity Package” Program: the service provides for food for the families with economic problems. In 2012 ANT delivered 309 Solidarity Package in Bologna.
- clean bed service: sheets and towels are delivered to the families with social and economic difficulties.
- Personal cleaning of the patient: in 2012 ANT carried out 3,043 interventions of personal hygiene care
- Kit-comfort programme for patients admitted to the Centre’s inpatients’ ward. It contains various kinds of simple comforts (e.g. soap, toothpaste, toilet paper, a bottle of mineral water).
- Library and DVD at home service

Outcomes: Access to APSS to 10% of ANT cancer patients. In 2012 we assisted almost 2400 people (patients and care-givers) who were, in a lot of cases, more than 60 years. They need to be helped with a psychological support and with an access to social activities.

- Has an impact on health status and quality of life for your local population
- Has an impact on the sustainability and efficiency of the health or social care system of your local population
- Has been adopted, tailored and validated in at least 2 other settings

Evidence of the impact:



A satisfaction evaluation with people who utilize the APSS was performed. Results show 72% of excellent or very high perception of these services.

Resources available:

Funds for these services were provided for 85% by private citizens, companies and banks, the remaining 15% comes from public funding.

3. Innovation element

- Has a cost analysis approach
- Has a multidisciplinary approach
- Has a vision on integrated care
- Adds to the existing large body of evidence
- Has relative advantages or brings benefits over existing practices

4. Further information

We introduce a concept of humanization of public health;

- Our work is based on a strong principle of solidarity;

5. Contact details

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