**INNOVATIONS – BEST PRACTICES**

Dear colleagues,

this part of questionnaire is assigned for detailed description of 5 best practices you have selected. **We kindly ask you to fill it up for every practice, i.e. to use this questionnaire five times**. Please, **save the questionnaire separately** for each best practice: one in the area of community building, one in the area of housing accessibility, one in the area of housing affordability, one in the area of social and health care, and one in the area of access to information / education (so you will have five different documents).

***N.B.: Terms written in BLUE color are defined in the attached manual!***

|  |
| --- |
| Please, check below one of the areas of the described best practice. |

|  |
| --- |
| [ ]  community building |
| [ ]  housing accessibility |
| [ ]  housing affordability |
| [ ]  social and health care |
| [ ]  access to information / education |

1. This part is aimed at ANNOTATION OF THE PRACTICE. Please, enter your answers into the provided boxes.

|  |
| --- |
| * 1. Title of the practice
 |

YOUR ANSWER (max. 90 characters):

|  |
| --- |
| * 1. Brief description (annotation) of the practice.
 |

YOUR ANSWER (max. 450 characters):

|  |
| --- |
| * 1. The main goal of the practice.
 |

YOUR ANSWER (max. 450 characters):

|  |
| --- |
| * 1. The main target group (recipients) of the practice. *Describe criteria of eligibility.*
 |

YOUR ANSWER (max.900 characters):

|  |
| --- |
| * 1. Does the practice exist at national, regional or local level?
 |

YOUR ANSWER (max. 150 characters):

|  |
| --- |
| * 1. What is the coverage of the practice? *How many users, eventually the percentage of elderly living in the municipality, region, state…*
 |

YOUR ANSWER (max. 150 characters):

|  |
| --- |
| * 1. Detailed description of the practice. *Provide basic description of the practice by your own words. Concentrate on aspects that you think that distinguish it from other practices in the same field and may be relevant for international audience, such as innovative aspects, unique form of management or financing, improvement of targeting to those in need, comprehensive practice (meeting several goals together), etc. Describe the main pillars of practice in detail.*
 |

YOUR ANSWER (max. 3500 characters):

|  |
| --- |
| * 1. In your opinion, why can it be considered being the best practice within respective area?
 |

YOUR ANSWER (max. 1500 characters):

|  |
| --- |
| * 1. Please provide contact information (e.g. websites).
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Please provide a photograph or another relevant picture representing the practice.
 |

**INSERT BELOW:**



1. In this part, we will turn your attention to the PROCESS OF APPLICATION OF THE PRACTICE, i.e. proposing and designing the practice. Please, enter your answers into the provided boxes or tick it.

|  |
| --- |
| * 1. Why was the practice introduced? What was the impulse to introduce it?
 |

YOUR ANSWER (max. 750 characters):

|  |
| --- |
| * 1. What is the origin of the practice?
 |

|  |
| --- |
| [ ]  fully new (original) practice |
| [ ]  innovative amendment of already existing practicePlease, specify:       |
| [ ]  practice inspired from abroad and adapted on local conditionsPlease, specify:       |
| [ ]  other (please specify):       |

|  |
| --- |
| * 1. Were any financial resources required during design and preparation of the practice?
 |

 [ ]  Yes [ ]  No

**🡪 If YES, please specify by clicking on all relevant sources of funding.**

|  |
| --- |
| The preparation of practice was funded by:[ ]  municipality[ ]  regional authority[ ]  government[ ]  EU [ ]  private capital (please, specify):      [ ]  other (please specify):       |

**YOUR COMMENTS/CLARIFICATIONS to previous question:**

|  |
| --- |
| * 1. Who is the “author” of the practice? *Who (what team, institute, organization, think-tank, NGOs etc.) was the most important actor during designing and proposing the practice?*
 |

|  |
| --- |
| [ ]  NGO |
| [ ]  Municipality |
| [ ]  Other (please, specify):       |

**YOUR COMMENTS/CLARIFICATIONS to previous question:**

|  |
| --- |
| * 1. Did potential beneficiaries (elderly people) take part in the process of designing the practice?
 |

[ ]  Yes [ ]  No

**🡪 If YES, please specify:**

YOUR ANSWER (max. 750 characters):

|  |
| --- |
| * 1. When was the proposal of the practice designed?
 |

***YOUR ANSWER:***

1. In this part, we are interested in the PILOT PROJECT before final implementation of practice. If there was a pilot to the described practice, please fill in the table below. If there was no pilot, please proceed to the next section.

|  |
| --- |
| * 1. Who were the main actors participated in realization of the pilot project?
 |

***YOUR ANSWER:***

|  |
| --- |
| * 1. How long did the pilot run?
 |

***YOUR ANSWER:***

|  |
| --- |
| * 1. How was the pilot funded?
 |

***YOUR ANSWER:***

|  |
| --- |
| * 1. How did the findings from pilot project influence the design of the new implementing practice?
 |

***YOUR ANSWER (max. 1100 characters):***

1. The following questions address the INTRODUCTION of the innovation TO THE PRACTICE, i.e. information about the actors, the related norms and the process of implementation.

|  |
| --- |
| * 1. Who did participate in the application of the practice? *Please make a list of all actors who participated in application process of the practice (e.g., NGO, local politicians, politicians on national level, municipal authority, and support of EU). To each actor provide a brief description of his/her role. Please identify the key actors who are responsible for successful implementation of practice. Identify also the actors who blocked the process of implementation or made the process of implementation difficult. Write as a story.*
 |

YOUR ANSWER (max. 8000 characters):

|  |
| --- |
| * 1. How long did the process of application take? How long did it take from the beginning of the enforcement of the practice to the successful application?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. What were the key factors/milestones for the successful implementation? *E.g. cooperation with other actor and common “push through” their interest, finding a strategic partner, interest of potential recipient of the practice, etc.*
 |

YOUR ANSWER (max. 2200 characters):

|  |
| --- |
| * 1. On the opposite, what were the main barriers to the successful implementation? *E.g. opposite political interest, no possibility to find financial resources in terms of existing subsidies), etc.*
 |

YOUR ANSWER (max. 2200 characters):

|  |
| --- |
| * 1. How were these barriers overcome?
 |

YOUR ANSWER (max. 1500 characters):

|  |
| --- |
| * 1. Was it necessary for application to modify any legal norms?
 |

[ ]  Yes [ ]  No

**🡪 If YES then answer the question below**

|  |
| --- |
| * 1. How did the actors “push though” their interest to influence the development of legal norms?
 |

YOUR ANSWER (max. 1500 characters):

1. In the section below, we focus on the LENGTH AND SCOPE OF THE PRACTICE, i.e. its continuity, length, integration with other policies, stakeholders.

|  |
| --- |
| * 1. For how long has the practice been going on? *When was firstly the practice introduced? Has the practice been going on since the introduction without any breaks? If there were any discontinuity, please specify the reasons.*
 |

YOUR ANSWER:

|  |
| --- |
| * 1. For how long is the practice programmed/designed?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Were there any extensions of the length or scope of the practice? *E.g., integration of other NGOs, extension to other localities, and extension of activities.*
 |

[ ]  Yes [ ]  No

**🡪 If YES then, specify the extension.**

YOUR ANSWER:

|  |
| --- |
| * 1. Are there any interests of extension of the length or scope of the practice recently or in the future? *E.g. integration of other NGOs, extension to other localities, and extension of activities.*
 |

[ ]  Yes [ ]  No

**🡪 If YES then specify interests and actors interested in the extension of the practice.**

YOUR ANSWER:

|  |
| --- |
| * 1. Has the practice become a mainstream? Has it been integrated to a wider social policy scheme? Or is an outstanding practice which differs significantly from other programs in this field?
 |

YOUR ANSWER (max. 200 characters):

1. This section turns your attention to MANAGEMENT AND ORGANIZATION OF THE PRACTICE, especially description of actors and relations between them, as well as evaluation of the sustainability of the practice.

|  |
| --- |
| * 1. List all actors (e.g. municipalities, NGOs, health authorities, private sector) that participate in the implementation/audit/subcontracting of the practice. *To each actor write a short description of the actor and specify its role (responsibility, legal commitment, power and obligations etc.).*
 |

|  |  |
| --- | --- |
| **Name of the actor** | **Short description (max. 800 characters each)** |
|  |  |
|  |  |
|  |  |
|  |  |
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| --- |
| * 1. Now describe the interactions among the listed actors. *E.g., communication channels, division of rights and duties, hierarchy in decision making, roles in practice implementation etc.* *You may draw a scheme of mutual relationships.*
 |

YOUR ANSWER:

YOUR SCHEME (optional):



|  |
| --- |
| * 1. What do you think are the strengths of these interactions with respect to the long-term sustainability of the practice? And what are the disadvantages?
 |

YOUR ANSWER (max. 2200 characters):

|  |
| --- |
| * 1. What is, according to your opinion, essential to the long-term sustainability of the practice within this structure?
 |

YOUR ANSWER (max. 2200 characters):

|  |
| --- |
| * 1. Please describe the organizational structure of the carrying out the practice. *E.g., how many people and on what positions (leader/manager, administrative worker, social worker, care worker, volunteers etc.) are present in the structure. Provide a short description of their main responsibilities and working tasks or activities within the practice; describe the decision-making process as well. In short, describe the way that the organization arranges people and jobs so that its work can be performed and its goals can be met. Again, you may draw an organizational chart as well.*
 |

YOUR ANSWER:

YOUR CHART (optional):



|  |
| --- |
| * 1. What do you think are the strengths of this set-up of the management and staff with respect to the long-term sustainability of the practice? What are the disadvantages?
 |

YOUR ANSWER:

1. This part addresses the PARTICIPATION OF THE ELDERLY ON THE DESIGN OF THE SCHEME.

|  |
| --- |
| * 1. Did the elderly participate in definition of the goals of the scheme?
 |

[ ]  Yes [ ]  No

**If YES, how could they express their opinion (tick all appropriate answers):**

|  |
| --- |
| [ ]  via regularly meetings with the management |
| [ ]  they may fill in a questionnaire |
| [ ]  accidentally, if they meet anyone from the staff they can tell their opinion |
| [ ]  other (please, describe):       |

|  |
| --- |
| * 1. Write an example how an opinion of the older person(s) influenced the definition of the goals.
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Do the elderly participate in definition of the provision of the practice (e.g. rules of allocation, time of provision)?
 |

[ ]  Yes [ ]  No

* **If YES, how could they express their opinion (tick all appropriate answers):**

|  |
| --- |
| [ ]  via regularly meetings with the management |
| [ ]  they may fill in a questionnaire |
| [ ]  accidentally, if they meet anyone from the staff they can tell their opinion |
| [ ]  other (please describe):       |

|  |
| --- |
| * 1. Please, write an example how an opinion of the older person(s) influenced the design of the carrying out of the practice.
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Does the organization have internal rules how to gather and use the elderly´s opinion?
 |

[ ]  Yes [ ]  No

**🡪 If YES, please very briefly describe the rules.**

YOUR ANSWER:

1. This section focuses on the EVALUATION OF THE EFFECTIVENESS of described practice.

|  |
| --- |
| * 1. Has the practice fulfilled its original objectives? If not, what was the deviation?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. If the practice (service) involves public spending – is it set in a way that it targets especially those who need public help (low-income, socially needy, vulnerable)? How is the target group defined and how targeting is audited (checked)? What is the deviation between originally planned target groups and actual participants (clients)?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Are any low-income (socially needy, vulnerable) elderly people implicitly or explicitly excluded from participation in the practice (conditions of actors involved, strict rules)? What is the rationale behind such exclusion?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. How are the social outcomes of practice (meeting goals) measured? What are the results of these evaluations? Is there a regular assessment of outcomes of the practice? Who is providing such assessment?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Is satisfaction with the practice measured among target population and, if so, what is the satisfaction rate?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Can the program be used (or abused) for other purposes or to serve other than target population due to free riding, bad legislation/rules or insufficient control? Are there effective provisions to prevent this situation?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. What are the unintended consequences of practice application on general equality (inequality) in a society: both positive and negative?
 |

YOUR ANSWER:

1. This section focuses on the EVALUATION OF THE EFFICIENCY of described practice.

|  |
| --- |
| * 1. What is the share of public and private finance on total costs of practice application (in %)?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. What are the total costs of practice? *Please provide detailed budget, distinguishing capital and operational (monthly) costs. For operational costs indicate the figures for staff costs, travel costs and overhead (administration).*
 |

YOUR ANSWER:

|  |
| --- |
| * 1. If not provided in the section F (management of practice), how many people are involved in the practice application: distinguish full-time and part-time employees and write the full list of posts.
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Is outsourcing used in the practice application? If so, what is the share on total costs and how tenders are organized?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Is there any problem with monopoly or oligopoly in any practice cost item? This means that there might appear a situation when there is no choice than to accept offer of one (few) supplier(s). If so, what is the share of this cost item on total costs?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. How the costs are met by income? *Please provide detailed budget with sources of income from different actors, especially indicate the price paid by target households (clients, participants). Is income sufficient to meet the costs?*
 |

YOUR ANSWER:

|  |
| --- |
| * 1. What is the financial profit, if any, of each actor induced from practice (service) application?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. If public finance is involved is the price paid for service (practice) by target participants (clients) appropriately lower when compared to the market price for the same (comparable) service (practice)?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. If public finance is involved what is the danger that private initiatives are crowded out due to public involvement? In other words, how the practice (service) would work under no-public spending?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Is there any, though minor, inefficiency defect, such as overspending, low number of participants in tenders, high salaries of staff, non-functioning outsourcing?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Is there any source of potential public savings and why is it not used?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. What financial (audit) control mechanism is applied and what are the results of such controls?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. What are the unintended consequences of practice application on housing (social care) market: both positive and negative?
 |

YOUR ANSWER:

1. In this section, we are interested in the TRANSPARENCY OF THE PRACTICE and related processes.

|  |
| --- |
| * 1. Are costs, finance sources and benefits publicly available?
 |

[ ]  Yes [ ]  No

|  |
| --- |
| * 1. How are they accessible? Where is it possible to check them?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. If public finance is involved are providers selected within public tenders?
 |

[ ]  Yes [ ]  No

**🡪 If NOT, please skip to the question Q.72.**

|  |
| --- |
| * 1. How are these tenders announced?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Is the information available online?
 |

[ ]  Yes [ ]  No

|  |
| --- |
| * 1. Are the winners communicated online?
 |

[ ]  Yes [ ]  No

|  |
| --- |
| * 1. Is attributed budget published online?
 |

[ ]  Yes [ ]  No

|  |
| --- |
| * 1. Have any allocation rules been settled?
 |

[ ]  Yes [ ]  No

**🡪 If YES, please answer the following question.**

|  |
| --- |
| * 1. What are these rules?
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Are annual reports at disposal to broad public?
 |

[ ]  Yes [ ]  No

|  |
| --- |
| * 1. Have there been any cases of abuse of the finances?
 |

[ ]  Yes [ ]  No

**🡪 If YES, please very briefly describe the case.**

YOUR ANSWER:

1. The questions below address the ADMINISTRATIVE SIMPLICITY of described practice, i.e. the time, organization or funding needed during the process of application.

|  |
| --- |
| * 1. Describe, by your own words, the process of the administration of the practice.
 |

YOUR ANSWER (max. 1500 characters):

|  |
| --- |
| * 1. What are the costs of administration (percentage of overall costs):
 |

YOUR ANSWER:       %

|  |
| --- |
| * 1. Is the practice linked to any other relevant policies (social care, health care, etc.)? Please, specify them.
 |

YOUR ANSWER:

|  |
| --- |
| * 1. Are there any legal obstacles / gaps concerning administration of practice?
 |

[ ]  Yes [ ]  No

**YOUR COMMENTS/CLARIFICATIONS to previous question:**

**Please, evaluate the flexibility of the practice by filling in following questions.**

|  |
| --- |
| * 1. Is there any follow-up foreseen?
 |

[ ]  Yes [ ]  No

**YOUR COMMENTS/CLARIFICATIONS to previous question:**

|  |
| --- |
| * 1. Are there any modifications / innovations foreseen in addressing possible future needs?
 |

**[ ]** Yes [ ]  No

**YOUR COMMENTS/CLARIFICATIONS to previous question:**

|  |
| --- |
| * 1. Does the practice enable such innovations?
 |

 [ ]  Yes [ ]  No

1. In this last part, we kindly ask you for your own brief evaluation of the strengths and weaknesses of the practice (SWOT analysis).

|  |  |
| --- | --- |
| **STRENGHTS:**       | **WEAKNESSES:**       |
| **OPPORTUNITIES:**       | **THREATS:**       |

|  |
| --- |
| * 1. This is the final part of the questionnaire. We might miss some important question/information concerning the particular practice. You have the possibility to add it (or provide us with any comments or details) in the following box.
 |

YOUR ANSWER (max. 2200 characters):

**DEAR COLLEAGUE, THANK YOU VERY MUCH FOR YOUR TIME AND VALUABLE INFORMATION!**