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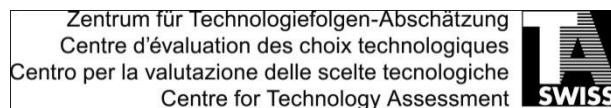
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Executive Summary

We are living in an innovation age challenged with increasing complexity of decisions in all aspects of society. Such ICT innovations, advancing at an unprecedented rate, demand a sophisticated policy response to assess the impact of the rapid technological advances on society. Recent innovative developments in technology have produced ICT devices supporting elderly people. Information and communication technology (ICT)-based care technologies include real-time audio and visual contacts between patients and caregivers; embedded technologies such as smart homes, clothes and furniture to monitor patients inside and even outside their homes; electronic tagging of dementia patients and more biotechnological innovations, such as implants and devices for chronic disease monitoring. These technologies cover a wide range of innovations, from those already functioning to those that are prospective and theoretical. They provide health care and enable elderly people to maintain their autonomy and allow them to live independently for a longer period of time. These technologies are subsumed under the term telecare. However as well as the positive benefits, theorists are speculating on the social and legal risks of telecare, specifically regarding the issue of technology failure and the onus of responsibility, be it the users or the providers of the technology. As part of the project University College Cork held a scenario workshop, with the aim to engage stakeholders in such discussions and facilitate recommendations to policy makers concerning future policy relating to telecare. The aim of the report is to summarise, evaluate and analyse the Irish scenario workshop, and to contextualize the results to the Irish national policy on the field of welfare services. The workshop engaged a wide range of stakeholders within both the public and private sector. The participants were health care workers, researchers and industry participants, so that the all perspectives on the issue at hand were represented. At the workshop the participants were presented with three scenarios, and had group discussions of their possible consequences.

At the workshop the participants recommended four specific visions for the future. Overall the discussions focused on:

- a) A need for a coordinated national strategy for telecare technology with the citizen at the heart of the strategy
- b) A focus on the onus of responsibility
- c) A need to consider Data Protection
- d) A focus on user needs driven innovation for telecare

Introduction

How to cope with ageing societies is one of the grand challenges pointed out in the Lund Declaration (Lund, 2009). The rapidly growing population of senior citizens¹ confronts Europe with a double demographic challenge. The ageing population's need for healthcare services increases at the same time as the access to workforce declines².

Use of technology can be increasingly important for the society to be able to offer health care services at a quantity and quality that mirrors the expectations of the European populations. Our society can choose different strategies for the care services, and for the introduction of new technological tools in this sector. The technology promises many opportunities, but there are challenges to be solved and ethical dilemmas to be considered. How can we best use new technology in care services, what is acceptable and what is the resistance by the senior citizens themselves, and what type of options are policy makers faced with?

To facilitate and provoke forward-looking discussions and identify policy alternatives the PACITA project have conducted nine national and regional scenario workshops in; Denmark, Czech Republic, Hungary, Catalonia (Spain), Norway, Wallonia (Belgium), Switzerland, Austria and Bulgaria. A scenario workshop is a method aimed at facilitating forward-looking discussions and identifying policy alternatives in different contexts. In PACITA, the workshops will stimulate discussions on how one can meet the needs and face the challenges of the rising number of older adults in different European countries, with a set of scenarios as a starting point for the discussion.

To create awareness of the possible consequences of political choices, the participants were presented with three scenarios; "One size fits all", "Freedom of choice" and "Volunteering community". They differ with respect to which degree public and private players are providing future elderly care and how the senior citizens and other groups in the society organise themselves in order to meet the needs for care. To create awareness of the possible consequences of the choices, the participants was also presented with user stories, where four people were pictured and further how they could live their lives in 2025 in the given scenarios.

¹ The term „elderly“is commonly used. We are aware that this is a sensitive terminology. We have chosen to use the more neutral term "senior citizen" throughout this document.

² An ageing population is defined as a population in which the number of elderly (65+) is increasing relative to the number of 20-64 year olds. <http://www.population-europe.eu/Library/Glossary.aspx>

The scenarios and user stories have been used to provoke discussions in scenario workshops on how one can meet the needs and face the challenges of the rising number of older adults in the European countries. The scenario workshops in the PACITA project have produced visions for what kind of elderly care services the Europeans (though the views of a diverse range of elderly care stakeholders) want and policies envisaged to achieve these visions.

This report summarises and analyses the results of the national scenario workshop held in Ireland. The findings from the nine national workshops will be gathered and analysed in a synthesis report, to be presented to regional, national and European policy-makers at a policy conference in Brussels in early 2015.

National Context

In Ireland, it is predicted that the 2011 levels of 532,000 old people could reach 860,700 by 2026, and increase by a further 470,000 by 2046. Mortality rates are assumed to decrease which will result in gains in life expectancy at birth from 77.9 years in 2010 to 85.1 years in 2046 for males and 82.7 years in 2010 to 88.5 years in 2046 for females. From a demographic point of view, the age group 50 and in 2011 were 23.4 per cent of the labour force, but this is projected to slowly increase over the period to reach 30.3 per cent by 2026 through a combination of increased participation and demographic shifts. The older population (i.e. those aged 65 years and over) is projected to increase significantly from its 2011 level of 532,000 to over 1.4 million by 2046. The very old population (i.e. those aged 80 years of age and over) is set to rise even more dramatically, increasing from 128,000 in 2011 to between 484,000 and 470,000 in 2046. The young population (976,600) was considerably higher than the old population (531,600) in 2011 but this will reverse by 2031 whereby it is projected that there will be older persons than younger persons under all scenarios by 2036. The excess will widen further by 2046 at which stage it is projected that there will be between 112,000 and 561,000.⁴⁷

What will be the impact on society of these demographic changes? The care sector in Ireland is considered a “welfare mix” involving family, public, voluntary (community) and private provision, and financing – the majority of provision comes from the informal sector (family, friends, and voluntary groups). The majority of funding comes from public sources topped-up by private contributions. Long-term community-care provision in Ireland has been described as weak, fragmented, and uncoordinated, primarily resulting from funding bias towards long-stay care. There is little evidence to suggest that families will stop providing care in the future as the onus of care of older people will continue to be their families. However, demographic changes, changing family structures and labour-force participation raise socio-economic concerns in relation to the sustainability of these informal long-term care support systems. This shift has led to the crucial question of how best to support older people and their carers at home, given the finite resources available to look after them.

Telecare is reasonably well established in Ireland and consists largely of private-based provision of social alarm services. The uptake of social pendant alarms in Ireland is approximately 13 percent to 15 percent of those aged 65 or older. The older-adult care sector in Ireland is considered a “welfare mix” involving family, public, voluntary (community) and private provision, and financing – the majority of provision comes from the informal sector (family, friends, and voluntary groups), and the majority of funding comes from public

sources topped- up by private contributions. Relevant policy, along with care needs and care preferences in Ireland, emphasize community structures of care. However, the sector in Ireland remains largely underdeveloped. In relation to home tele health, Ireland can be classified as having little or no level of market maturity, with such services for older people generally unavailable across Ireland. As a result, the uptake of such services is minimal. Furthermore, in relation to higher-level telecare services (such as smart homes), while there have been a number of pilot schemes in recent years, there has been little uptake of these more advanced technologies. Both tele health and telecare provision are currently not linked into the mainstream health and social care services in Ireland.

Like many other countries in Europe, the Irish health and social-care system is looking at the potential of ICT to serve as a complementary support structure for independent living and community care, thereby establishing a sustainable and balanced approach. Aside from the socio-economic implications of an aging population as a motivating factor, the recent uptake of ICT-based products, e.g. Internet and broadband, are also significant in furthering ICT application. Given the public, private, and voluntary mix of health and social care provision in Ireland, and an already fragmented community care provision, it is unclear at this time where tele health and more advanced telecare services would fit into the organizational structure of the care sector. There are also legitimate concerns that if technology is integrated into an already problematic care model, the existing issues in community care around service fragmentation, social connection, and quality of care may be further exacerbated, intensifying the challenges experienced by older people living in the community. Current long-term community-care provision in Ireland has been described as weak, fragmented, and uncoordinated, primarily resulting from funding bias towards long-stay care. The consequences of such a system place the onus of care on older people and their families to bridge the gap between care needs and care provision. There is little evidence to suggest that families will stop providing care in the future. However, demographic changes, changing family structures and labour-force participation raise socio-economic concerns in relation to the sustainability of these informal long-term care support systems. This shift has led to the crucial question of how best to support frail older people and their carers at home, given the finite resources available to look after them.

There is no official definition in Irish policy documents. From review of policy documentation, the evidence is that the recognition of telemedicine and telecare is inconsistent. However Cardi defines Telecare as; the Equipment and detectors providing continuous, automatic and remote monitoring of care needs (including emergencies and lifestyle changes). Using ICT to trigger human responses or shut down equipment to

prevent hazards. Devices alert to a call centre – who contact service user or nominated carers. Telemedicine refers to the “use of modern technology to facilitate healthcare”.

A Seniors Alert Scheme, which provides grants for over 65’s to buy personal monitored alarms, was put in place by the government to encourage the adoption of telecare among senior citizens. An investment was made by the government in 2013 of 2.45 million. In addition, despite the support for socially monitored alarms under the Scheme of Community Support for Older People funded by the Department of Community, Rural and Gaeltacht Affairs, the availability and take- up of social alarms in Ireland is very low compared to a number of other European countries, and social alarms are not yet adequately integrated into health and social care.

Current Technologies and Services

SensorMind is a private corporation at the forefront of the emerging ambient assisted living/telecare market and builds solutions to empower older/vulnerable people to remain independent at home. Sensormind’s flagship service ‘Sensormind Independent Living’ detects changes in an older person’s behaviour patterns and raises an alert automatically, without the need for the person to take any action. The system is complementary to existing care services and offers an extra level of support for vulnerable persons. Sensormind customers derive safety, peace of mind, control and independence, while saving cost on acute and residential care facilities.” (Reference)

Smart Telecare Ireland is a Cork based company providing a telecare & tele health service designed to support the elderly and those with long term medical conditions to live independently. Their solutions are designed to improve quality of life, giving the user the confidence & ability to remain in their own home safe in the knowledge that help is always available when and if it is needed. Their products include the traditional Emergency Pendant or Carephone and are also sold under the Senior Alert Scheme. (SAS) (Reference)

At CARA Wellness the technology helps users gather information about their health from several sources so that they can keep an eye on their wellbeing and share this with their carers. They do this through the use of medical technology, such as blood pressure cuffs, weight scales and sensors built into homes to identify unusual or abnormal patterns of behaviour and health readings. Their technologies allow individuals and those invested in their care to manage their chronic condition. Users are diverse and managed conditions

include heart problems, diabetes and dementia. The CARA Wellness solution helps users act and react quickly when something out of the ordinary occurs. CARA Wellness is a complete solution. They install the technology in your home and teach you the basics to get you started. Their support staff are at the end of the phone 24/7/365 to deal with issues as they arise. They are there to help with clinical, technical and social problems that strain wellness and health on a day-to-day basis Link:

Supporting Policy Documents

In 1999 the National Development Plan 2000- 2006 recognised the potential role of telemedicine to deliver services at the most appropriate locations, to access various centres of excellence with their professional expertise and to share diagnostic imaging and laboratory data. IN 2001 a report, “Quality and Fairness: A Health System for You, Health Strategy” was published by the Department of Health and Children. It stated Telecare and Telemedicine have the potential to bring specialised diagnostic and clinical expertise closer to people, especially those in remote locations, making the health service more accessible and responsive”.

In 2004, “Embedding the ‘e’ in Health: A Strategic Framework for the Irish Health System”, published by the HSE whereby various regional Health Boards incorporated telemedicine in their services

In 2006, “ The National Action Plan for Social Inclusion 2007- 2016” was published and officially recognised the role that family carers play in supporting government policy of caring in the home and community and suggest that carers require a range of supports including ICT training in telecare. In 2008, the Action plan on Health Research 2009 -2013 was published and committed to further develop ICT related health research and the overall interface between the ICT and health research with the expected deliverable to be innovative outcomes in areas such as independent living and telemedicine. Finally, in 2013, the National Positive Ageing Society as published where the Government committed to completing and implementing the National Positive Ageing Strategy so that older people are recognised, supported and enabled to live independent full lives. This strategy, which was published in April 2013, is a new departure in policy making for older people given its focus on the broader determinants of health. It is the blueprint for age related policy and service delivery in Ireland, outlining a vision for positive ageing and older people, the national goals and objectives required to achieve this vision and a suite of priority areas for action that are based on the broader determinants of health. It recognises telecare and tele health services are becoming increasingly recognised as an effective way to prevent or manage some health conditions effectively.

Relevant Actors

There are a multitude of government agencies concerned with the aging society in Ireland. Firstly, the Department of Health is a Government Agency responsible for health and ageing as evident from their 2013 report: Positive Ageing - Starts Now: The National Positive Ageing Strategy. Also, the Department of Social Protection is another government agency with a responsibility for aging as outlined in the National Action Plan for Social Inclusion 2007 – 2016 whereby they committed to the goal of sufficient income for older people to enable them to enjoy an acceptable standard of living. Finally, the Department of Jobs, Enterprise and Innovation is a government department responsible for economic opportunities for the aging as outlined in their report Trading and Investing in the Smart Economy (2010) whereby it specifically highlighted Silver Tech as a key area for action. Of interest also, is the Irish Senior Citizen's Parliament, A non-partisan political organisation working to promote the views of older people in policy development and decision-making. The Parliament is run by older volunteers who are elected annually at the Annual Parliament Meeting by delegates from affiliated organisations. The ISCP currently has 400 affiliated organisations whose memberships combine to a total of 100,000 individuals. This membership means the ISCP has a genuine mandate to be the Voice of Older People in Ireland.

Furthermore, there are research groups concerned with the challenges and opportunities of the ageing society in Ireland. Tilda, in Trinity College Dublin is a research centre responsible for delivering the Irish Longitudinal Study on Ageing. TILDA collects information on all aspects of health, economic and social circumstances from people aged 50 and over in a series of data collection waves once every two years. TILDA is unique amongst longitudinal studies in the breadth of physical, mental health and cognitive measures collected. This data, together with the extensive social and economic data, makes TILDA one of the most comprehensive research studies of its kind both in Europe and internationally. Also, the Irish Centre for Social Gerontology (ICSG) multidisciplinary research centre on ageing at NUI Galway. ICSG focuses on research, education and training in the field of social gerontology in Ireland and internationally. The mission is to develop and promote social and economic aspects of ageing in Ireland to support a holistic and positive view of ageing and act as a source for all involved in ageing in Ireland.

Also, national voluntary organisations are key actors in this space. Age and Opportunity are one such organisation tasked with delivering programmes to promoting older people's active involvement in areas ranging from the arts to physical activity; delivering education programmes to challenge negative attitudes to ageing; confidence-building and influencing and enabling development within the ageing sector. Furthermore, the Carers Association is Ireland's national voluntary organisation for and of family carers in

the home. Family carers provide high levels of care to a range of people including frail older people, people with severe disabilities, the terminally ill and children with special needs. Third Age Foundation plays a role in the championing of older people locally, nationally and internationally in an interconnecting range of initiatives, including the challenge of negative perceptions and the representation of older people at policy-making. The Alzheimer Society of Ireland is an extensive national network of branches, regional offices and services that aims to provide people with all forms of dementia, their families and carers with the necessary support to maximise their quality of life. Active Retirement Ireland is a national network of over 500 local Active Retirement Associations with over 23,000 members. ARI believes that older people have the right to be full and participative members of our society. ARI combats ageism through the reality and everyday work of the self-organised local associations and the regional councils. ARI has a large voluntary base with local, regional and national voluntary committees.

Finally, charities also play a key role. For example, Age Action Ireland is a charity which promotes positive ageing and better policies and services for older people. Also, the Society of St. Vincent de Paul is the largest, voluntary, charitable organisation in Ireland. Its membership of 11,000 volunteers throughout the country are supported by professional staff, working for social justice and the creation of a more just, caring nation. This unique network of social concern also gives practical support to those experiencing poverty and social exclusion, by providing a wide range of services to people in need.

Stakeholder workshop in Ireland

Planning

We researched the core stakeholders who might have an interest in participating in the scenario workshop. The objective was to source participants from a heterogeneous group, encourage diversity of opinion and derive somewhat representative visions during the workshops. These groups were Elderly/relatives, Care Personnel, Researchers in the domain of health, aging, and ICT, industry and business, local politicians and finally NGOs. Scenario workshops can be recognised as a somewhat novel concept in Ireland and so the organisers did not have previous experience to draw on. The closest resemblance of a complementary methodology was focus groups which the department had significant experience of organising. Thus, as part of the recruitment, the organiser had to spend a significant amount of time explaining the process in order to entice the participants to attend. The recruitment of participants was carried out in-house.

20 participants were involved in the creation of the scenarios. There was a balance of researchers, care personnel, industry and business and NGO. No politician or government member accepted the invitation to participate, nor did elderly. This was a key learning to be applied in the organisation of future events.

Organisation of the workshop

The scenario workshop was organised by University College Cork.

The main structure of the workshop followed the three phases:

1. Three scenarios of the future (Phase 1)

- Positive and negative feedback on the scenarios

2. Development of visions (Phase 2)

- What visions do you have for the elderly care in the future?

3. Solutions for realization of the visions (Phase 3)

- Which options for action and which challenges does Ireland face in order to realize the visions?
- Identification of concrete solutions to be included in the political agenda.

All participants were expected to have read the information material with the described scenarios beforehand so they were ready to start and give feedback on the scenarios. We highlighted this expectation in the invitation and sent reminders to all participants a few days before the workshop.

Programme

8.45 – 9.00 Registration

9.00 – 9.15 Welcome and introduction

9.15 – 9.30 Short presentation of the scenarios

9.30 – 10.30 Phase 1: Feedback and reflections on the scenarios

10.30 – 11.50 Phase 2: Development of visions

11.50 – 12.45 Lunch

12.45 – 13.30 Presentation of phase 2

13.30 – 14.45 Phase 3: Solutions and challenges to the visions

14.45 – 15.00 Coffee and tea break

15.00 – 15.45 Presentation of phase 3

15.45 – 16.00 Sum up

Responses to the scenarios

Overall the scenarios were well received and were an important stimulant for many interesting discussions. While it can be argued the scenarios were somewhat simplistic in nature, it was recognized they were a useful starting point to facilitate participants to delve into the more intricate complexities and challenges of technology adoption in the aging society.

Scenario 1: One size fits all

There is no panacea to address the challenges and opportunities of the aging society. This one size fits all approach suggests a formulaic approach that is indeed unrealistic and improbable. In the case of Ireland, there is a mixed welfare approach with many private and public models therefore there needs to be a hybrid approach rather than a one size fits all. The discussion highlighted the need for a national strategy to offer a consistent approach and guidelines on the type of technology implemented; however the creation and implementation of technologies need flexibility to be innovative, thus a top down approach might stifle the innovation. The issue of the role of technology was addressed. The questions arose of whether the role of technology is to offer security and comfort to the elderly or indeed is it a form of electronic surveillance, which may stir feelings of loneliness and fear in the aging population. It was recognised that an extensive training plan would have to be constructed to overcome feelings of loneliness and fears. Furthermore, an element of product design was discussed to ensure the user would be equipped with the best knowledge on how to maximise the use of technology.

Scenario 2: Freedom of choice

This scenario was deemed to be one that might be most applicable to the Irish case. It was deemed to be one where innovative technologies could be encouraged and stimulated to benefit the economy. Thoughts were expressed on how Ireland could become a leader in the telecare technology and government could play a role in incentivising companies to come up with innovative technologies. However it was noted that the user needs to be at the heart of the innovations. Companies should be encouraged to create innovative products that meet user needs.

Scenario 3: Volunteering community

While this scenario was deemed to be promising, it was deemed to be unrealistic in the Irish context. While there are many volunteer communities, the culture has indeed become more segregated and isolated. While it was agreed that a volunteering approach would overcome the issue of loneliness amongst the aging population, it was deemed to be unrealistic to rely 100% on this structure. The question of governance was also discussed. How would volunteers be selected? And is there a stronger onus of responsibility on the protection and security of the elderly population. It was suggested that a hybrid approach would most certainly encourage a volunteer ethos together with public and private groups.

Analysis and synthesis of visions and recommendations from Ireland

The scenarios acted as a trigger for many interesting discussions relating to the challenges and opportunities of the use of technology, for example tele-care, sensors etc. in addressing the care and wellbeing of the aging society. A common theme amongst many of the discussions was the economic cost of such projects and the question of feasibility of implementation. This is perhaps understandable given the current economic climate at the time of the study whereby Ireland had witnessed a significant period of austerity as a result of the economic downturn. Whilst the groups recognised the concept of the visions referred to a future timeframe, the focus on cost concerns represented a national mood. In several groups the caveat was articulated that such visions and recommendations were desired solutions but needed to be considered in the context of financial constraints. An analysis and synthesis of visions and recommendations from Ireland will be presented now.

Coordination of policy initiatives

It was discussed how the very nature of ICT and aging falls within a number of governmental departments remits and it was questioned who should be responsible for implementing a strategy and direction of the role of technology in the ageing society. The concern was expressed that given the multi-faceted, multi-disciplinary nature of the subject that it was in danger of “falling between the cracks” with no one department looking after it, thus resulting in a neglect of policy decision making. The discussions centred on the need for a coordinated approach as it impacted a number of departments, including the Department of Health, the Department of Communications, Energy and Natural Resources, the Department of Environment, Community and Local Government, the Department of Finance, the Department of Health, including the Health Service Executive (HSE) and the Department of Jobs, Enterprise and Innovation and the Department of Social Protection.

A focus on user needs driven innovation for telecare

The area of telecare was recognised as a prime area of innovation for new and existing companies. To overcome the governmental fiscal challenge, it was discussed that companies could play a leading role in

devising new telecare technologies to meet the needs of the senior citizens and address the double demographic challenge of an aging population, coupled with lower numbers of health workers. The leading innovations can facilitate senior citizens to live at home longer; a solution most discussions agreed was an optimal one. Thoughts were expressed on how Ireland could become a leader in the telecare technology and government could play a role in incentivising companies to come up with innovative technologies. Companies should be encouraged to create innovative products that meet user needs using initiatives like the R&D tax credits. However it was noted that the user needs to be at the heart of the innovations. Repeatedly within the innovation debate, the user emerged as the primary actor who should be centric to all technological innovations created to meet the challenges of the aging society.

A need to consider Data Protection

Data protection was also up for debate. Given the sensitivity of the data that would need to be collected about the senior citizen in the home, to offer a telecare service, it was acknowledged as being vital that assurances were made on data security. Such assurances would help with instilling trust among the senior citizens users in the telecare system and also create legitimacy among the medical profession who may use the technology to diagnose patients through monitors and other telecare technologies. It was noted data security does not come cheap; therefore significant investment would have to be made to guarantee the security of the data as best possible. Also questions were asked on where would be the optimal place to store the data, on company servers or should there be a national database of senior citizen data as captured by the telecare technology.

A focus on the onus of responsibility

The issue of responsibility was discussed. Given there are multiple actors involved the question was raised as to who has the duty of care when technology is involved in diagnosing senior citizens in the home. Is it the telecare personnel, the companies behind the technology, the carer in the home looking after the senior citizen or should the senior citizen themselves have a sense of responsibility to learn how to best use the technology to meet his or her needs. Whilst no agreed panacea was suggested to the issue of responsibility, it was recognised that the debate needs to be had at government level and be guided by national policy.

Overview of visions

Vision 1: A coordinated national strategy for telecare technology with the citizen at the core

Recommendations:

- The government needs to clearly delineate what departments are responsible for the implementation of technology to cater for the needs of the aging society.
- The citizen should be considered as core to all decision making and indeed be involved in the debates by employing such methods as the scenario workshop.

Vision 2: Clear governance of telecare technology understood by all actors

Recommendations:

- There is a need to recognise the challenges involved concerning the responsibility of the telecare technology when it is implemented in the home and performs such important functions as monitoring falls in the home, or performing medical diagnostics on patient care. The onus of responsibility, whilst recognising it will be case specific, needs to be articulated and the associated legal and financial risks and challenges understood by all parties involved.
- Transparency is needed in this area of governance in order to instill trust in the technology by all parties; namely the senior citizens, the carers, the medical profession, the volunteers. This will encourage and facilitate the increased adoption of such technology in the home and proceed to address the challenges of the aging society.

Vision 3: Data protection is core to all future telecare technologies

Recommendations:

- Utmost care and sensitivity must come into practice when it comes to capturing, processing and storing the confidential senior citizen data.
- There needs to be a protocol developed to offer guidelines on these procedures, in particular addressing the question of storage and access. Should the data be stored on company servers or should there be a national database where the government takes ownership and stewardship of the data.
- In the incidence of a security breach, utmost care must be taken to reassure senior citizens on the implications and the measures that are being put in place to prevent a reoccurrence.

Vision 4: New Telecare Technologies created from user needs driven innovation

Recommendations:

- Telecare technology is a prime area of innovation for new and existing organisations. Given Ireland's strategic priority of ICT and Medical Devices, there is an opportunity for Ireland to become a leading nation in the creation and adoption of technology to address the aging society challenges.
- The government should incentivise companies to create innovations in this space using initiatives like the R&D tax credit.
- Companies should be encouraged to apply for funding, such as H2020 funding to seek opportunities to meet the grand challenge of aging.
- The user needs to be at the heart of the innovation.

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Appendix A: Type of Participants.

Elderly/relatives	Care personnel	Research	Industry/business	Local politicians	Organizations/NGO
	1				
	1				
	1				
		1			
	1				
	1				
	1				
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		1			