



COURSE DATA

Data Subject

Code	43767
Name	Family care and new technology
Cycle	Master's degree
ECTS Credits	6.0
Academic year	2021 - 2022

Study (s)

Degree	Center	Acad. year	Period
2170 - M.U. en Bienestar Social: Intervención Fam. 13-V.2	Faculty of Social Sciences	1	Second term

Subject-matter

Degree	Subject-matter	Character
2170 - M.U. en Bienestar Social: Intervención Fam. 13-V.2	3 - Family care and new technology	Obligatory

Coordination

Name	Department
RODENAS RIGLA, FRANCISCO JOSE	350 - Social Work and Social Services

SUMMARY

The subject "Family care and new technologies" of 6 ECTS credits allow students to learn new technology tools and methodologies to address the needs of long-term care from the family. In the teaching of this subject are involved professors from the departments of Social Work and Social Services, Nursing and Electronic Engineering from the University of Valencia.

The course is divided into three thematic units. In the first, we analyze the tools to make a comprehensive assessment of care needs at home, considering different factors of health and quality of life, and connects to the case management methodologies, as a starting point for developing individual care pathways, progressive and continuous, and coordination of health and social services in a unique portfolio. In the second unit examines the process of intervention, based on the care plan, and design of the home visit, which incorporates concepts such as 'patient safety', bioethics and dignified death. The third unit focuses on real solutions of ICT applied to long-term care. The new digital home, which extends beyond the concept of domotics or telemedicine can offer solutions for the care of patients with special needs, such as chronically ill or elderly. After evaluating the benefits and problems from the point of view social and bioethical, which may have these groups of people, we review commercial devices and technologies that



can help improve your health and quality of life.

At the end of the course, students will have the skills to respond to the needs of long-term care of people who are cared from the family.

PREVIOUS KNOWLEDGE

Relationship to other subjects of the same degree

There are no specified enrollment restrictions with other subjects of the curriculum.

Other requirements

Not required.

OUTCOMES

2170 - M.U. en Bienestar Social: Intervención Fam. 13-V.2

- Students should apply acquired knowledge to solve problems in unfamiliar contexts within their field of study, including multidisciplinary scenarios.
- Students should be able to integrate knowledge and address the complexity of making informed judgments based on incomplete or limited information, including reflections on the social and ethical responsibilities associated with the application of their knowledge and judgments.
- Students should demonstrate self-directed learning skills for continued academic growth.
- Proyectar sobre problemas concretos sus conocimientos y saber resumir y extraer los argumentos y las conclusiones más relevantes para su resolución.
- Be able to access to information tools in other areas of knowledge and use them properly.
- Trabajar en equipos multidisciplinares reproduciendo contextos reales vinculados con el bienestar social y la intervención familiar, aportando y coordinando los propios conocimientos con los de profesionales de otras áreas, desde una posición crítica con carácter constructivo.
- Desarrollar la capacidad de iniciativa, pensamiento crítico y creatividad.
- Diseñar intervenciones individualizadas adaptadas a cada realidad.
- Gestionar y coordinar las diferentes respuestas que deben ofrecerse en cada situación individual.
- Tener capacidad de análisis y reflexión sobre situaciones, problemas y necesidades sociales que encierran/constituyen dilemas éticos.
- Elaborar estrategias de intervención que puedan implicar a los miembros de la familia, al sistema familiar, y a la red de relaciones de la familia.



LEARNING OUTCOMES

- Provide tools and performance criteria within the family environment to satisfy the need of long term care that is required for dependent persons or chronically ill.
- Students will learn new intervention models and technological solutions to improve the quality of life of affected people, and their social environment.

DESCRIPTION OF CONTENTS

1. Assessment and case management

- Comprehensive Assessment. To know comprehensive assessment systems, and multidisciplinary, for dependents or chronic patients, and their families, in order to promote their independence and autonomy.
- Case management and social and health care coordination. Theoretical models and professional profile of the case manager, as part of care for dependents or chronic patients. Professional intervention and appropriate use of best practices.

2. Care Plan (maintenance / prevention, rehabilitation, death with dignity)

- Social intervention and comprehensive health care addressed to people requiring long-term care and their families. The bioethical debate and the ethics of care, right to information and confidentiality.
- Prevention and comprehensive care at home, the home visit (technical and process), detection and control of risks.
- The support at the end of life, the grieving process and handling difficult situations. Experiences and reactions to significant losses, emotional competence as a key to the accompaniment of dependents.

3. Home care: sht & teleheath

- DIGITAL HOME AND DIGITAL SOCIETY Definitions: e-Health, telecare, telemedicine. Premises. Needings. Market analysis of Digital Home: trends and handicaps, consumers, agents, standards. Forecast and emerging trends. History of telemdicine. Benefits and limits. Health service, economical and social environments. Users and actors. E-inclusion. Independent Living filosophy.
- COMERCIAL DEVICES AND PROPRIETARY SYSTEMS General review. Devices for basic tasks. High end devices, Residential Gateways, User Interfaces, Inmotics, specific devices. Emmbded connectivity. Body Area Networks, Personal Area Networks, connectivity technologies in e-Health: WiFi, UMTS, GPRS, ADSL, Zigbee, Bluetooth,...
- HOME ASSISTANCE SYSTEMS Telemonitoring. Disease Management. Hospital at Home. Hardware/Doftware in Telemedicine. Telemonitoring devices. Medical Devices integration. Integral Management of Assistential Processes for Cronical Patients.

**WORKLOAD**

ACTIVITY	Hours	% To be attended
Theory classes	35,00	100
Theoretical and practical classes	5,00	100
Other activities	5,00	100
Development of group work	5,00	0
Development of individual work	25,00	0
Study and independent work	20,00	0
Readings supplementary material	25,00	0
Preparation of evaluation activities	30,00	0
TOTAL	150,00	

TEACHING METHODOLOGY

The methodology used for the development of content is as follows:

- Participatory Master class (MD1).
- Discussion of papers and other readings (MD2).
- Resolution of case studies (MD3).
- Debate and Guided Discussion (MD4).
- Workgroup (MD5).
- Research and analysis of documentation (MD6).

EVALUATION

The attendance is a prerequisite for evaluation and must cover a minimum percentage of sessions (90%). Below this minimum, unless valid reasons, the student will not be evaluated. Weight on the final score: 10% (SE1).

The assessment of learning of knowledge will be done through the observation and recording the participative attitudes of the students in the development of the tasks and activities related to the competences (SE2), and an individual report (SE5). Weight on the final score: 90%.

The individual report will consist of a maximum of 25 pages (Times New Roman, 12 point, single spaced) in which will be assessed:



- Application of learning in the subject, which will be implemented in the use of the basic bibliography and recommended by teachers.
- Capacity critical argumentation.
- Search other sources of information and selection criteria.
- Correction in written expression.

Structure of individual report:

- 1 - Cover: title, name of the Master's degree, the name of subject, name of the student, academic course, delivery date.
 - 2 - State of the art.
 - 3 - Developing the theme.
 - 4 - Bibliography.
- Summary of the four selected references.
 - References: References used in the report, ordered alphabetically (only those cited in the state of art or the development of the topic).
 - Other references. They include a list of references found on the chosen topic, which has not been used for report, ordered alphabetically.

The report will be submitted in electronic format (pdf), with copy to the coordinator. The deadline for submission of the report will be the day fixed in the calendar of the Master's degree.

REFERENCES

Basic

- Garcés J, Carretero S, Ródenas F. Readings of the social sustainability theory. Valencia: Tirant lo Blanch; 2011. 223 p
- Garcés J, Carretero S, Ródenas F. y Sanjosé V. La sobrecarga de cuidadoras de personas dependientes: propuestas de intervención psicosocial. Valencia: Tirant lo Blanch, 2006.
- Serrano Aguilar, P., Yanes López, V. Guía de diseño, evaluación e implantación de servicios de salud basados en telemedicina / Publicació [Santa Cruz de Tenerife] : Consejería de Sanidad del Gobierno de Canarias, D.L. 2009
- Márquez Peláez, Sergio: Telemedicina en el seguimiento de enfermedades crónicas : diabetes mellitus : revisión sistemática de literatura y evaluación económica, Sevilla, Agencia de Evaluación de Tecnologías Sanitarias de Andalucía, D. L. , 2008.



- Constantinos. Phellas (ed.) Aging in European Societies: Healthy Aging in Europe, Volumen 6 de International perspectives on aging. Springer, 2013
- Alfaro, M; Bonis, J; Bravo, R; Fluiters, E; Minué, S. Nuevas tecnologías en atención primaria: personas, máquinas, historias y redes. Informe SESPAS 2012. Gac Sanit.2012; 26(Supl.1) :107-12
- Cotel J C, Gené J, Peya M. Atención domiciliaria. Organización y práctica. Barcelona: Masson. 2003
- Camps, V. (2011): El valor y el ejercicio del cuidado cap. 17; en: Libro Blanco del Envejecimiento Activo. IMSERSO. Madrid.
- Garcés, J., Rodenas, F. and Teija, H. Converging Methods to Link Social and Health Care Systems and Informal Care - Confronting Nordic and Mediterranean Approaches;Chapter 5 (p. 100-117) in Liechsenring, K, J. Bilings, H. Nies (eds.). Long term care in Europe. Basingstoke: Palgrave Macmillan, 2013
- Ródenas-Rigla, F; Fombuena-Valero, J; Pérez-Cosín, JV. (eds) (2017). Bienestar Social: Intervención Familiar. Valencia: Tirant Humanidades.

Additional

- De la Fuente Robles, Y. M^a (coord.) Situaciones de dependencia y derecho a la autonomía. Alianza Editorial. Madrid, 2009
- Esping-Andersen, G. y Palier, B. Los tres grandes retos del Estado del Bienestar. Barcelona. Ariel, 2010
- Gil Calvo, E. El poder gris. Una nueva forma de entender la vejez. Mondadori. Barcelona, 2003
- Heath I. Ayudar a morir. Katz Editores. Madrid, 2008
- Carretero S, Garcés J, Ródenas F. Evaluation of the home help service and its impact on the informal caregiver's burden of dependent elders. Int J Geriatr Psychiatry. 2006; 22: 738-749
- Andrew E. Scharlach, Kazumi Hoshino (editors)Healthy Aging in Sociocultural Context, Volumen 81 de Routledge Advances in Sociology Series. Routledge, 2013
- Sánchez García AM, Mazarrasa Alverar L, Merelles Tormo A: La evolución del modelo sanitario español y sus repercusiones en la profesión de enfermería. En: Mazarrasa Alverar L et al.: Salud Pública y Enfermería Comunitaria. Colección Enfermería Profesional. Tomo I. Ed. McGraw-Hill/Interamericana. Madrid. 2003.
- Sanchez García AM.; Merelles Tormo A. Análisis de la situación de salud en una comunidad: una propuesta de investigación acción participativa (Capítulo 7). En: Mazarrasa, Germán, Sánchez M, Sánchez G, Merelles, Aparicio. Salud Pública y Enfermería Comunitaria. Colección Enfermería Profesional. Tomo I.Madrid: McGraw-HillInteramericana; 2003.
- Corrales-Nevaldo, D.; Alonso-Babarro, A; Rodríguez-Lozano, MA. Continuidad de cuidados, innovación y redefinición de papeles profesionales en la atención a pacientes crónicos y terminales. Informe SESPAS 2012. Gac Sanit.2012; 26(Supl.1) :63-8.



- Jiménez-Martina, S.; Vilaplana Prietob, C. La interacción del sistema social y el sanitario. Informe SESPAS 2012. Gac Sanit.2012:26(5):124-133.
- López Martínez J, Crespo López M. Guía para Cuidadores de Personas Mayores en el hogar. Cómo mantener su bienestar. Colección Manuales y Guías. Serie Dependencia. Madrid: Ministerio de Educación, Política Social y Deporte. Secretaría de Estado de Política social. IMSERSO. 2008.
- IMSERSO. Libro blanco de la coordinación sociosanitaria en España. Madrid. Dirección General de la Agencia de Calidad del Sistema Nacional de Salud. Ministerio de Sanidad, Política Social e Igualdad. [Citado 20 marzo 2011]. Disponible en <http://www.imsersomayores.csic.es/documentos/documentos/mspsi-libroblancosanidad-01.pdf>.
- Beaver, M.L. y Miller, D. A. (1998), La práctica clínica del Trabajo Social con las Personas Mayores. Paídos. Barcelona. ISBN 844930511X
- Rocío Fernandez Ballesteros (Directora). Gerontología social Publicació Madrid : Pirámide, 2000
- Ródenas F, Garcés J, Carretero S, et al. Case management method applied to older adults in the primary care centres in Burjassot (Valencian Region, Spain). Eur J Ageing. 2008; 5: 57-66.
- Munuera Gómez, M. p. (2016). El impacto de las nuevas tecnologías (TICs) en discapacidad y envejecimiento activo. Valencia. Tirant humanidades.

ADDENDUM COVID-19

This addendum will only be activated if the health situation requires so and with the prior agreement of the Governing Council

1. 1. CONTINGUTS *CONTENIDOS* CONTENTS

Contents of the original teaching guide will be maintained and distributed according to the different types of sessions (face-to-face or synchronous videoconferencing).

1. 2. VOLUM DE TREBALL I PLANIFICACIÓ TEMPORAL DE LA DOCÈNCIA

The activities and volume of work of the original teaching guide will be maintained. The planning of sessions will be specified at the beginning of the season.

1. 3. METODOLOGIA DOCENT *METODOLOGÍA DOCENTE* TEACHING METHODOLOGY



- *Tutorials will be on-line*
- *If sanitary situation imposes that all classes must be on-line, all sessions will be substituted for (select): materials in virtual Classroom, synchronous videoconferencing or registered presentations. Practical activities will guarantee the interaction with students by videoconference, forum or chat in virtual classroom. Teachers will communicate these adaptations through virtual classroom.*

FOR VULNERABLE OR AFFECTED STUDENTS methodology will be adapted to the following activities no face-to-face (select):

- *Synchronous videoconferencing*
- *Individual works*
- *Tutorials through videoconference*
- *Individual projects*

1. 4. AVALUACIÓ EVALUACIÓN EVALUATION

The criteria of the teaching guide will be maintained regarding the estimation of each type of activity. For vulnerable or affected students, group activities qualification will be considered in individual activities.

5. BIBLIOGRAFIA

The bibliography of the guide will be maintained. If the sanitary situation imposes shutdown of libraries, teachers will facilitate materials of support in virtual classroom.