MODELS OF GOOD PRACTICE REGARDING SOCIAL SERVICES FOR THE ELDERLY IN ROMANIA - QUALITATIVE APPROACH

Gianina CHIRUGU¹, Felicia ANDRIONI²

¹PhD Student, University of Craiova (Romania)
E-mail: chirugu.gianina@yahoo.com
² Professor, PhD, habil, University of Petroșani (Romania)
E-mail: felicia_andrioni@yahoo.com

Abstract: The elderly in Romania benefit from a set of social benefits and a wide range of social services depending on the needs identified by specialists. The main social services for seniors are residential centers, home care services and day centers. The aim of the paper is to present the models of good practice of social services for the elderly in Romania, and the research aims at mapping social services for the senior citizens in Romania and identifying models of good practice in terms of the following analysis indicators: type of service provider; typology of the social service; category of activities carried out; elements of novelty and originality of the analyzed services. The methods used in the research were: analysis of the case study documents, comparative analysis of the mentioned indicators.

The results highlighted the implications and role of social services on beneficiaries and communities. The conclusions of the survey reflect the importance of the existence of social services for the elderly perceived as models of good social practice, on the one hand, and on the other hand we highlight the essential role of adapting these services to the needs of elderly beneficiaries.

Key words: elderly person; social service; residential center; day center; home care.

1. Introduction

The elderly represent a vulnerable population with special needs, because of the physiological limitations and fragility characteristic of the aging phenomenon and depending on personal situations of a socio-economic, medical and physiological nature; they benefit from social work measures, in addition to social insurance benefits, meant to cover the risks of old age and health (Bodi, 2017: 34). Elderly people face a set of complex challenges and it is imperative that specialists identify and address their particular needs and the problems they face, so that this segment of the population can adapt (Chirugu, Răduț, Andrioni, Popp, 2020). Social services contribute to meeting the needs and increasing the individual capacity to participate in society, guaranteeing respect for human rights (Andrioni, 2018b, Andrioni 2018a).

Starting from the needs of each senior citizen, social services can have a wider addressability, at the group or community level. Social services are proactive and involve an integrated approach to the needs of the elderly, in relation to the socio-economic situation, health, level of education and social environment of life.

In order to achieve coherent, unitary and efficient social actions for the benefit of the senior, social services can be organized and provided in an integrated system with employment, health, education services, as well as other social services of general interest, as appropriate. (Mureșan, 2012 : 122).
2. General contextual framework for providing social services to the elderly

In order to prevent, limit or eliminate the temporary or permanent effects of situations that may affect the life of the elderly or may generate the risk of social exclusion, the seniors have the right to social services (Jaylor and Francis, 2015). Dependent elderly people benefit from personal care services provided in accordance with the degree of their dependency and their individual needs for assistance, as well as according to their family situation and their income. The local public administration authorities have the obligation to provide personal care services at home or in residential centers for dependent elderly people who live alone or whose family cannot take care of them. The evaluation of the functional autonomy of the dependent persons and the establishment of the degrees of dependence are made on the basis of some standard criteria, approved by a decision of the Government. The provision of care services is made according to the individualized assistance and care plan, developed by specialized personnel, based on the recommendations formulated by the evaluation team. The provision of personal care services at home for the elderly is done by formal or informal caregivers. They benefit from facilities and support services, allowances, counseling services, respite services and care leave, according to Law 17/2000.

In order to keep them in their familiar environment and prevent situations of difficulty and dependence, the elderly benefit from counseling services, accompaniment, as well as services for arranging or adapting the home, depending on the nature and degree of impairment of functional autonomy. The care of dependent elderly people in residential centers can be arranged only if their home care is not possible.

Elderly people with income are required to pay a monthly contribution for the provision of personal care services at home and for assistance and care in residential centers, established by local public administration authorities or private providers who manage them. If the senior citizen has no income or cannot pay the full monthly contribution, the amount related to it or the difference up to the full amount of the contribution is provided by the legal supporters of the elderly person, according to their income level, calculated per member family, in the amount provided by law. Elderly people who have no income or legal supporters do not owe the monthly contribution, this being ensured from the local budgets, within the limits decided by the local public administration authorities. The elderly person who concludes legal acts translating property, for a fee or free of charge, for the purpose of maintenance and personal care, has the right to protection measures granted under the law.

Sorin M. Rădulescu claims that except for the inequalities between the elderly and the rest of the population, in the distribution of income and in the consumption of goods and services, there are a number of inequalities related to living conditions, access to services, communication isolation, lack of active social work. Beyond the precarious financial situation of the elderly population, they face acute problems, such as abandonment of active social roles, poor health, loneliness, dependence, the feeling that the elderly is generally a "burden" for society (Rădulescu, 1994: 89). In Romania, the contemporary family tends to exclude from its bosom old age, illness, death, to institutionalize them, isolating them in hospitals and homes. Young people ignore that they are also part of life, being "mandatory" existential components. An extremely difficult situation is registered in the homes for the elderly, where there are only modest resources to meet the care needs of this category. Although worldwide the current trend is for institutionalization to be an extreme solution, with true social protection for the elderly to be provided at home, "in România, institutionalization remains a necessary solution, as long as interment resolves, within acceptable limits, the need for housing, food security and, in many cases, gives a sense of security to the elderly" (Matei et all, 2019: 6). On the other hand, in the Western world, there are protection systems meant to make sure that institutionalization is a voluntary act, carried out only at the request of the beneficiaries.
In Romania there is a particular situation, namely the requests of a large number of elderly people to be cared for in social work institutions, because personal incomes are insufficient to cover the costs of daily living, on medicines, food and housing expenses, and because they were left alone. Also, the rural environment is a space truly little open to the offer of social services, medical and socio-medical care. The centers for the elderly, the care and assistance centers, the recovery and rehabilitation centers financed from the local budgets are few in number and do not cover the requests, these being much larger than the capacity of these institutions (Nicoară, 2014: 92). Centers for the elderly funded by non-governmental organizations also have few places and the demand for assistance is extremely high, although the maintenance costs in these social work institutions are high. In this situation, the provision of social services requires a complex and integrated approach to ensure the maintenance of the elderly at home, which would substantially relieve their accommodation and care in institutions, where the costs, as mentioned, are much higher. Starting from this presentation, research that revolves around social services in general and those aimed at the elderly in particular must be extended.

3. The methodological approach of the research

The general aim of the paper was to identify and present models of good practice in social services for the elderly in Romania, and the specific objectives of the research were to map social services for the elderly in Romania, on the one hand, and to identify models of good practices in terms of the following analysis indicators: type of service provider; typology of the social service; category of activities carried out; elements of novelty and originality of the analyzed services. The methods used in the research were document analysis, case study, comparative analysis of the aforementioned indicators. The research universe consisted of social services provided by private bodies or public institutions in Romania.

The analysis of documents as the first method used in the preliminary stage of investigation aimed at analyzing the pages and official reports of institutions providing social services in Romania: Ministry of Labour and Social Protection, Social Work Departments of Brasov, Tulcea, Turda and Iasi, Directorate of Social Work and Public Services Galati, Hârja Complex for the Elderly, Crucea Alb-Galbena Foundation; specific legislative elements: Law 17/2000 and Law 292/2011. Through this method, the following specialized studies were also analyzed with reference to the social services segment: Development of social services for the elderly in Romania: The contribution of European funds (Stănculescu and Marin, 2019), Social services in a contemporary context (Andrioni, 2018), Dynamics of social services development (Andrioni, 2018), Models of good practice in integrated social care for the elderly (Măță, 2016). The mentioned studies and the analyzed legislative elements aimed at understanding the real interest of the topic for the real world and the legislative framework in force that regulates the organization, functioning of social services, for the elderly in Romania. Also, the investigation of the level of development of social services at national level, from the official reports allowed the mapping of social services for the elderly.

The second qualitative method used, the comparative analysis, was substantiated on the basis of specific analysis indicators: a) type of service provider; b) typology of the social service; c) category of the activities carried out; d) elements of novelty and originality of the analyzed services, indicators that allowed the comparison of the own data with the data gathered from the targeted research field coming from the analyzed documents. This method was significant in obtaining relevant information about social services, in identifying services considered as models of good practice, and in comparing these models.

The third method used was the case study that combined multiple methods (Yin, 2005), incorporating data obtained through the methods of document analysis and
comparative analysis. The case studies were structured according to the four analysis indicators specified above.

4. Analysis of good practice models for seniors’ residential centers - Case studies

Based on the mapping of residential social services for the elderly through the research methods previously illustrated, Figure no. 1 summarizes the extension of residential services to all counties in Romania. According to the figure below, on 08.03.2021 659 residential centers were licensed, of which 19% operate in the public system and 81% in the private sphere, the county with the most centers being Ilfov, followed by Cluj with 40 centers. At the other extreme we find the counties of Tulcea, Olt and Vaslui, each with two centers.

**Figure 1: Map of residential centers in Romania (number of services)**

![Map of residential centers in Romania](image)

Source: servicii-sociale.gov.ro, 2021

Depending on the four dimensions of the proposed analysis, here are are some social services perceived as models of good practice by the Ministry of Labour and Social Justice.

**a. Home for the Elderly - Brașov Social Work Department** offers accommodation for an indefinite period up to a capacity of 25 places for independent elderly people and 110 places for dependent and semi-dependent elderly people. The elderly benefit from special living conditions, being accommodated in rooms with only two beds, the rooms have been equipped with chest of drawers, shelves, coffee table, refrigerator and TV. At the same time, the rooms have balconies, this outdoor space allowing the beneficiaries to go outside whenever they want and to admire the special landscape that the forest and the zoo in the immediate vicinity of the building naturally offer.

Beneficiaries receive food appropriate to their needs and, as far as possible, their preferences and within the limits of compliance with the recommendations of the diet. The elderly periodically benefit from specialized medical services, as a result of the collaboration contracts that the center has concluded with various specialists (cardiologist, ophthalmologist, psychiatrist, imager, optometrist), the services being offered free of charge at the center's headquarters. Regarding the recovery and functional rehabilitation of the beneficiaries, the specialized staff, with the help of the techniques and methods used, corroborated with the advantage of having a recovery center in the building, manages to maintain the current functional status of the beneficiaries and even improve it.

Social integration / reintegration services and psychological assistance are provided by specialists who succeed through the multitude of activities - individual or group social / psychological counseling sessions, collaboration with beneficiaries and community services
to transform the institutional environment into an environment that it allows coexistence in conditions of tolerance and mutual acceptance, thus leading to an increase in the quality of life of the beneficiaries. The elderly interned in the home have the opportunity to receive spiritual assistance, right in the center, where a chapel is set up where a parish priest is assigned.

The center has concluded a collaboration contract with the Brașov County Library, and once a week a representative of this institution travels to the center to carry out activities with the beneficiaries, which consist of thematic readings, music auditions at the express request of the beneficiaries, representative photos for the cultural-artistic field from different historical periods. The center provides the beneficiaries with a space where they can receive visits from relatives, friends and / or relatives, which ensures an intimate setting and a pleasant ambiance, being arranged in a hospitable manner, different from the model room.

The center is structured by distinct compartments, provides all the necessary resources and is equipped with elevators that allow easy access for the elderly to all spaces and all services offered, regardless of their functional status. Each compartment is equipped with a living room where leisure activities are carried and a dining room. Also, within the center there is a virtual information office equipped with computers with different operating systems, webcam, microphone and internet access, ensuring all the necessary conditions so that the beneficiaries keep in touch with family members and / or friends who live in other counties or abroad. In order to really reproduce the living conditions in the center, so that any potential beneficiary or owner can have the opportunity to view and form an opinion on how the living space is structured, the model room has been arranged. At the level of the center, there is an Advisory Council made of representatives of the beneficiaries, who participate in the monthly meetings with representatives of the institution's management. During these meetings, the "voice" of the beneficiaries conveys any wish or suggestion that may lead to the Improvement of their subjective well-being. On these occasions, all the suggestions expressed by the elderly are recorded, along with the extent and the term in which the center can concretize them, this approach aiming to actively involve the beneficiaries in the decision-making act at the center level. The personalization of the living rooms, the diversity of services, the professional training of the specialized staff, the complexity of the activities intended for spending free time make the adaptation of the elderly to the institutional environment much easier.

b. Home for the Elderly "St. Spiridon", Galati County, Galati Department of Social Work and Public Services. Openness to the community is the model of good practice. Among the cherished projects implemented we may mention the intergenerational exchanges and collaboration with animal welfare associations. The elements of novelty and originality consist in the intergenerational exchange, the avoidance of social and psychological isolation; initiating animal-assisted therapies, maintaining the cost of maintenance at an acceptable level for the elderly and his family. Seniors accommodated in the home are permanently treated as partners in the provision of social service and not as passive actors, as "recipients".

c. Social-medical center for the care of the elderly - Parish „St. Gheorghe “Hârlia, Bacau County. Spiritual therapy is relevant for all institutionalized elderly people, with chronic / terminal illnesses, people with disabilities because it is the only viable alternative to avoid the trauma of leaving home or children / relatives, giving them maximum autonomy, respect for human dignity, individuality (Mata, 2016: 5). The beneficiaries of the residential complex discover, by participating in the activities of spiritual therapy, a new moral and affective support, either in the relationship with the priest / spiritual counselor, or in the relationship with the divinity or with other colleagues who take part in the same religious service. In
addition, the program offers the possibility of involvement in social recreational activities, within the limits of physical and mental peculiarities, encouraging interpersonal contacts. The service also comes to the support of the family, the relatives by reducing their overload and the correct information regarding the psycho-socio-spiritual recovery techniques.

The livestock farm was inaugurated in 2013, the animal farm is the main supplier of milk, eggs and meat needed for healthy and quality food for the elderly. The vegetable greenhouse started its activity in 2016 in order to provide, in addition to the farm, food and vegetables to be consumed both fresh and canned. As for the bakery / pastry, the building was inaugurated in 2015, being located in the courtyard of the Residential Center and provides bread and pastries recommended by the nutritionist to the elderly, but also for the employees, for a fee. The candle workshop is the main leisure activity for both the elderly and the children’s center within the institution, over time the business became known, and now we offer candles for a price as wedding testimonials or as simple decorative objects.

5. Analysis of good practice models of elderly home care units - Case studies

Based on the mapping of social services such as home care for the elderly through the research methods previously illustrated, Figure no. 2 summarizes the situation of these categories of services in all counties of Romania.

The map of home care units presented in figure 2 shows that of the 265 home care units licensed on 08.03.2021 in Romania, 28% are public and 72% are private, most of them in Sălaj County.

Figure 2: Map of home care units in Romania (number of services)

Source: servicii-sociale.gov.ro, 2021

a. Assistance and care at home for the elderly - Care unit "Harmony", under the coordination of the Tulcea Social Work and Protection Directorate, and the multidisciplinary team that ensures the provision of services, monitoring the evolution of the person receiving services but also monitoring the activity of caring for the elderly consists of 3 inspectors - case managers, 1 psychologist, 13 caregivers for the elderly, volunteers and other specialists employed by DAPS, namely 1 physiotherapist and 3 community nurses. On 20.11.2018, the beneficiaries of the services provided by the "Harmony Care Unit " are 44 senior citizens who, due to loss of functional autonomy caused by physical, mental or mental ailments, need significant help to perform the usual activities of daily living with day. The main services provided by the caregiver of the elderly are personal care services, such as body hygiene, support and / or clothing-undressing, feeding and hydration, support for mobilization, support for travel and communication, housekeeping and household services like food preparation and administration or in the case of elderly people without income, providing two meals through the Municipal Canteen, personalized space sanitation activities, administration of medicines according to the doctor's prescriptions, shopping, support for
moving outside the home and accompanying the elderly person to various social actions dedicated to them (shows, plays) or marking of international days (International Day of the Elderly, March 8th), accompaniment or socialization, making payments for services and obligations, recovery and physical and mental rehabilitation services such as psychological counseling, social a, physiotherapy services (medical gymnastics, massage). In order to support the care staff and to facilitate a quick and good accommodation of the elderly with the care staff, the team psychologist provides emotional support and supportive counseling to the beneficiaries of the services. In situations where difficulties arise in establishing an appropriate relationship between beneficiary and caregiver, the activity was monitored through regular visits to identify sources of dysfunctions (poor communication, discrepancies between expectations and possibilities, etc.) and their elimination. As a member of the multidisciplinary team, the physiotherapist provides, through specific techniques and methods, prophylactic, therapeutic and recovery kinetic assistance, all actions aimed at improving the health and comfort of the elderly, educating or re-educating some deficiencies. Through social counseling services, the elderly benefit from information, guidance, moral and emotional support, legal advice, support for obtaining social work rights (the case manager for the degree of disability is prepared by the case manager) and also for obtaining financial rights (pension), support for obtaining certain civil status rights documents or identity documents. Social work services are information services, home visits, ensuring links with other services / institutions, needs assessment and elaboration of the service plan, accompanying the elderly in various social situations.

The implemented practice model is promoted and shared with other providers by participating in meetings / reunions / conferences organized locally or nationally, participation in the works organized by the Professional Body of Specialists in Social Services within the Association of Romanian Municipalities.

b. Home Care Unit for the Elderly - DAS Brasov

The social services offered through the Home Care Unit are carried out at the home of the elderly who are in a situation of social-medical dependence, in order to reduce the number of people requesting specialized assistance in institutions. The services of evaluation, coordination and monitoring of the Home Care activity are offered with the support of a social worker, a psychologist and a nurse, as well as a physiotherapist. The services performed at the beneficiaries’ home are specialized Home Caregivers and include basic and instrumental activities according to minimum quality standards for home care services for the elderly and body hygiene; dressing and undressing; disposal hygiene; nourishment and hydration; transfer and mobilization; moving inside; food preparation; shopping; housekeeping activities; accompaniment in means of transport; travel abroad; support for the payment of current services and obligations, etc.

Home care comprises a range of services and facilities provided through measures of prevention and assistance for the dependent people in the community, so that they can increase their degree of independence, and can remain, as much as their health allows, in their own homes, thus making more efficient integration and maintenance of the elderly in the community.

The representatives of the multidisciplinary team within the activities, hold information and counseling sessions on various topics of general interest: health topics aimed at maintaining a healthy and active lifestyle, identifying possible risks of injury or worsening of health caused by the environment and / or family, facilities and services provided to the elderly in the community, knowing and combating forms of abuse and neglect, etc.

They provide the coverage of the basic and daily instrumental needs and additional psychological counseling and physiotherapy session.
c. Services, Care and Home Care Center - Crucea Alb-Galbena (The White/Yellow Cross) Foundation of Romania.

The beneficiaries of the Center receive integrated home care services, monitored through the telecare system (services dispatched through the call center): medical and social services, recovery, provision of recovery and medical rehabilitation equipment, basic care services, with the help of a complex team of specialists (doctors, nurses, social workers, physiotherapists, home caregivers) and modern means of recovery. Through the registry service of the Center, the persons requesting support are identified in order to overcome certain situations, as the case may be, followed by the socio-medical evaluation at the home of the potential beneficiary of services, according to the legislation in the field. Medical and social needs assessment - consists of a visit to the beneficiary's home, needs assessment, completion of the socio-medical worksheet which includes data on the beneficiary, type of services requested, time and hours that will be provided for care; evaluation that is followed by the elaboration of the Individualized Care Plan - which includes information about the care needs, the degree of dependence of the respective beneficiary, the types of services that correspond to his care needs, the objectives to be achieved in the care process, the team involved providing services to the respective beneficiary. The organization offers to the beneficiaries with pathologies with high vital risk the possibility of communication of the assisted person through the Telecare service through the dispatcher. The Crucea Alb-Galbena Foundation in Romania aims to improve the quality of life of the elderly, by using advanced communication technologies combined with individual, responsible, long-term monitoring by a team of professionals. An additional benefit, which cannot be quantified is the peace of mind of those who know that their parents and grandparents are monitored in emergency situations in the most complete and empathetic way possible by means of the latest communication technologies available on the market. at the superlative, at the professional and human level. This innovative monitoring system, in a country and at a time when the aging process is growing, greatly reduces the costs for the institutionalization of the elderly and for their supervision at home.

6. Day centers for the elderly from the analytical perspective of good practice models - Case studies

In consideration of the mapping of day social services for the elderly through the research methods previously illustrated in figure no. 3 summarizes the extension of day services to all counties in Romania.

Figure 3: Map of day centers for the elderly in Romania (number of services)

Source: servicii-sociale.gov.ro, 2021
The map of day centers presented in figure 3 shows that out of the 152 day units with license in operation on 08.03.2021 on the Romanian territory, 48% are public and 52% are private, most of them being in located in Bucharest.

a. Day center for socializing and leisure time spending for the elderly (club) Noua - Brasov county is directly subordinated to the Brasov Social Work Department. The services offered to the elderly aim at maintaining and improving physical abilities (manual dexterity, exercising), maintaining or improving mental and sensory abilities (training cognitive functions, prevention of depression, cognitive decline and senile dementia), prevention of health deterioration, valorization of the elderly person, promotion of the image of an active aging, valorization of the life experience, of the altruism and availability of the elderly person and the social interaction between generations.

The representatives of the multidisciplinary team, within the activities, hold information and counseling sessions on various topics of general interest: health topics aimed at maintaining a healthy and active lifestyle, identifying possible risks of injury or worsening of health caused by the environment and / or family, facilities and services provided to the elderly in the community, knowing and combating forms of abuse and neglect etc.

The elements of novelty and originality consist in the fact that the beneficiaries of the Day Center for socialization and leisure for the elderly (club) of Noua every year since the establishment of the services go on stage in one of the largest performance halls in Brasov, on various occasions (International Day of the Elderly, December 1st, Winter Holidays, etc.) to present cultural and artistic performances, in which they hold poetry recitals, folk dances, society dances, plays, etc. The FOOD project came to the aid of the elderly by providing housing facilities in order to optimize their eating style and improve their quality of life by using IT technology. The homes of the elderly people involved in the project were equipped with an electric oven, a hob and a refrigerator. All the pieces of equipment were connected to computer software, accessed via a tablet offered to each beneficiary during the project. The Social Work Department (DAS) Brasov in partnership with Transilvania University of Brasov, the Indesit company, the IT solutions company Vision Systems, as well as research institutions / organizations from 4 other European countries have successfully implemented the FOOD Project - "Smart Kitchen", intended for a number of 30 beneficiaries from 3 European countries, of which 9 beneficiaries of services for the elderly within the DAS. The second project that targets the elderly is the NOAH project, which aims to monitor the elderly in their own home and transmit to formal or informal data about them through an application. Implementation of a senior academy, where they received information from several spheres of activity and interest for the elderly such as methods of preventing fires in homes, providing first aid, methods of preventing aggression and abuse against the elderly in the community, as well as the collaboration with the students of the Faculty of Sociology and Communication, Social Work Section for establishing intergenerational relations.

b. Vovidenia Day Center for the Elderly from Iași county, subordinated to the Iasi Social Work Directorate, offers the possibility to the elderly, who are mostly alone, to enjoy the meeting with elderly people, the possibilities to spend their free time in an active way through participation in various activities and actions of the center. The beneficiaries of the center are 50-60 seniors who participate daily in activities. The services offered are psychosocial counseling and information, socialization and leisure, primary medical services / maintenance and recovery.

As novelty elements we may cite the following activities carried out within the center developed at the request of the beneficiaries, namely a number of 7 retirement clubs divided uniformly within the municipality, to multiply its activities in all areas of the city. The clubs are attended by a number of 700 registered beneficiaries and organize shows with the
participation of beneficiaries on various topics twice a year, on the occasion of the International Day of the Elderly and the Winter Holidays, in which the participation and involvement of the beneficiaries is significant.

Within the center, under the guidance of a specialized instructor, recreational therapeutic activities are performed such as gymnastics, aerobic gymnastics, dance therapy, board games, thematic competitions and trips to the monasteries and other touristic sights with special cultural value in the Iasi area and throughout Bucovina. An important partnership was concluded with the Faculty of Physical Education and Sports because dozens of students completed their internships working directly with the beneficiaries in the physiotherapy and massage rooms. The beneficiaries offered emotional support to groups of detainees from the Iasi Maximum Security Penitentiary, who participated in various activities (dance therapy, rummy, free discussions) in the center. The elderly showed compassion by giving them food and books.

c. **Turda Day Center for the Elderly** is subordinated to the Social Work Department Turda, Cluj county and is one of the first centers of its kind in the country. The socio-medical services provided by the Day Center are socialization and leisure, medical and social counseling, psychological counseling, physical therapy. The number of people who want to be among the beneficiaries of the socio-medical services of the Day Center is growing, currently 657 people being enrolled. One of the originality elements is the fact that the Day Center operates together with the Home Care Center for the Elderly. The daily activities within the center consist of socializing, board games, medical, social and psychological counseling as well as medical recovery programs in the room for physiotherapy and massage. In 2012, the Day Center in collaboration with the Turda Tin Association, educational institutions and the Ratiu Theater Workshop began to organize activities with children and young people, that proved to be very well received by both generations. One aspect that confers originality to the activity of the center is the yearly organization (starting with October 1st) of the "Senior Month" event. The most successful and interesting activities of the Day Center have become organized parties and trips in the country and abroad. The fact that the staff of the center receives invitations from other day centers or institutions to present cultural programs or to carry out other activities is the very recognition by them that the Turda Day Center for the Elderly is a good practice model.

7. **The results obtained**

The case studies described above show that social services for the elderly contribute to increasing the quality of life of service recipients. The residential centers for the elderly manage to prevent the aggravation of the dependence of the elderly and maintain them in a permanent acceptance towards the community of the center and provide the possibility of a family reintegration perspective. Assisted people feel at home, free to express their opinions, to have social relationships with acquaintances, to satisfy certain pleasures of their own. They recovered from the point of view of mental balance, living with hope. The implications of social service on its beneficiaries consist in creating a family atmosphere, ensuring and guaranteeing a standard of living that meets the needs of the elderly, socializing the elderly, by engaging in cultural activities, occupational therapy, rediscovering the sense of usefulness by involvement in various activities, respect for privacy and confidentiality in the process of assistance, developing a relationship based on trust and acceptance, obtaining positive results - when medicine does not have sufficient resources to treat the body, to offer to treat the soul, cultivating and harmonizing the beneficiary-employee relationship based on feelings of esteem, empathy, friendship, mutual respect, solicitude, belonging, prevention of the installation and / or aggravation of the dependent state of the elderly person by expanding the spiritual therapy service, reducing the degree of isolation and social exclusion.
of the senior citizens in situations of addiction and their reintegration into society, the
decrease in the number of people with various chronic / mental illnesses hospitalized by
providing psycho-socio-spiritual therapy services. Some of the elderly have the power to find
new motivations, to dedicate themselves to activities they have always wanted to
accomplish. Those who no longer have the power to do so have the fear of death, the only
thing that keeps them alive, or the consideration of death as the only possible relief for them.
The effort to find motivations is new to us, the young people, being convinced that life must
be part of a goal that gives it meaning and significance. However, most of them elderly people
have stopped to look for the meaning of their lives. They simply live, some with the conviction
that our purpose is not to ask ourselves what we live for, others with the hope that maybe
one day things will change for them.

Through the services provided by the home care units, the beneficiaries can maintain
their degree of independence, are able to continue their life at home as long as possible, so
that they can benefit from dignified care, adequate and appropriate to individual needs
directly in their family environment. Due to this type of care, the costs necessary for
specialized care, the number and duration of hospitalized treatments are reduced.

The elderly who benefit from social home care services feel more protected and more
important. The attention of the specialized staff is focused only on the beneficiary, building a
friendship relationship between the two parties based on respect and understanding. The
elderly person keeps his habits, living in his own house, he keeps his feeling of independence.
Social relationships are especially important for the health of the elderly, both his friends and
family can visit him whenever needed.

In order to promote the beneficiary's independence, to maintain the person's
autonomy and to reduce the degree of dependence, the physiotherapist performs movement
and physical activities at home.

Among the advantages of home care for seniors we may list the prevention of the
elderly institutionalization, especially for low-income people, the decongestion of
overcrowded hospital unit full of social cases, due to the fact that sometimes old age is
confused with disease, the drop of the number of elderly people who need
institutionalization.

The absence of a support network and implicitly of social contacts leads to the
degradation of the psychic and sensory capacities, marginalization and social exclusion.
Thus, in order to promote active aging, the emphasis is laid on the involvement of the
beneficiaries in the activities carried out within the day centers for socialization and leisure
for the elderly where they interact with people of the same age but also with the younger
generations. Both seniors and young people are involved in organizing events and actions
through projects carried out in collaboration with educational institutions.

Among the benefits brought by the activities carried out in the day centers for seniors
we may mention the enhancement of beneficiaries' self-esteem, through outfits, external
personal appearance, changing mentalities, attitudes, improved communication. We witness
the improvement of physical and mental health by developing sports activities, dance
therapy and adapted gymnastics, overcoming anxiety through group therapy, awareness of
community members for their involvement in support measures for the elderly vulnerable
to overcoming difficult situations, overcoming crisis situations such as losing a partner
through occupational therapies, member interaction community with the elderly to create
an extended family for the vulnerable person. The trips and pilgrimages organized and
attended by most of the elderly led to the establishment of friendly relations, which
subsequently involved mutual support, spending free time together, overcoming moments
of loneliness.

Through the activities carried out, these facilities lead to the increase of the
beneficiaries' self-esteem, manifested in outfits, external personal aspect, change of
mentality and attitudes, improvement of communication. Sports activities, dance therapy, adapted gymnastics and physical therapy have left their mark on the state of physical and mental health of the elderly, and this aspect is highlighted by the medical documents periodically added to the social dossiers.

8. Conclusions

Depending on the elderly people’s needs and degree of dependency, they are provided with adequate social services. In the context of the accelerated aging of the population at the national and global level, the development of services dedicated to the elderly is especially important. For independent seniors who want to have an active life it is useful to participate in day center activities. Home care and residence in centers is necessary for people who need long-time specialized help and care. For the elderly living alone without assistance, home care becomes vital. Often home caregivers are the only people who still visit the of beneficiaries. The models of good practices identified are landmarks in improving social policies in Romania. Based on the research, it was found that keeping the elderly in the family environment and providing support at home, by offering support through prevention services at the community level has a greater utility because the costs of these services are significantly lower than the costs of living in a residential institution.

References:

19. ***FRAME LAW – Law of social work no. 292/2011, with subsequent amendments and completions
20. ***Law no.17/2000 on social work for the elderly, republished, with subsequent amendments and completions