Good Practice template

- All Good Practices identified by an Interreg Europe project and reported in the progress reports have to be submitted to the Programme.
- In order to submit a practice, you will have to register in the Interreg Europe website. Online submission will be available the first semester of 2017.
- NB: in orange: 2 optional fields. All other fields are compulsory.

1. General information	
Title of the practice	*S-ALERT Citizens*
Does this practice come from an Interreg Europe Project	*YES*

In case 'yes' is selected, the following sections appear:

Please select the project acronym	*HoCare*

Specific objective	*Drop-down list of the 6 specific objectives* *[Technical: In case a project is selected, the specific objective is automatically completed]*	
Main institution involved	*IDE-RAM*	
Location of the practice	Country	*PORTUGAL*
	NUTS 1	*Região Autónoma da Madeira*
	NUTS 2	*Região Autónoma da Madeira*
	NUTS 3	*Região Autónoma da Madeira*

2. Detailed description	
Detailed information on the practice	*[1500 characters] Please provide information on the practice itself. In particular:* - *What is the problem addressed and the context which triggered the introduction of the practice?* - *How does the practice reach its objectives and how it is implemented?* - *Who are the main stakeholders and beneficiaries of the practice?* *The Covid19 pandemic posed several new challenges and threats to authorities and citizens. Due to the nature of the disease, this was specially true with the most vulnerable population, the elderly ones and people of suffer from specific clinical situations. Apart all the restrictions and severity of the disease itself, Covid19 really did impact the mental well-being of citizens, specially the most vulnerable and those of already lived alone or with very limited mobility. This was specifically the case of home caregivers and their loved ones. The feel of stress and fear of getting ill with Covid played an important role and increased the mental burn felt by caregivers.* *As the infection numbers increased and the pandemic spread, the Regional Health Authorities of Madeira started getting tangled with too much contact-tracing and paperwork for sickness leaves, etc.* *In order to make the whole process much more efficient and reliable for the population and therefore decreasing response times, decreasing*

	stress in the infected population and their respective contacts and what they should do. *Therefore, a tech platform named S-Alert was developed with the following goals:* *Communicate in a easier way the changes in law and covid-19 measures;* *Make more efficient the emission of all paperwork related to work absences and sick leaves;* *Release admin and medical staff from these kind of duties to more urgent matters.* *The platform works via web and SMS. As soon as a citizen tests positive, that contact is automatically registered and he received a link with the test result and what to do. This leads to a website in which he can fill all the data for sick leaves, report symptons and get the paperwork digitally processed. A security PIN sent by SMS guarantees the security during all the process. After 5 days reporting if he/she has symptons, the system automatically informs the citizen if he is considered recovered or if he should continue to isolate himself.*
Resources needed	*[300 characters] Please specify the amount of funding/financial resources used and/or the human resources required to set up and to run the practice.* *This GP requires server/hosting access and token/SMS API emission. It also requires integration to each national Covid19 testing reporting systems to make it easier and automatic to work.* *Total cost may vary according the size of target-population, server needs and work involved with integration but it's estimated in between 20.000€-30.000€ with a yearly cost on server/SMS of about 25.000€/year at least.*
Timescale (start/end date)	*e.g. June 2012 – May 2014/ongoing* *Project started January 2022 and is still operating.*
Evidence of success (results achieved)	*[500 characters] Why is this practice considered as good? Please provide factual evidence that demonstrates its success or failure (e.g. measurable outputs/results).* *The platform has been launched early 2022. More than 105.000 contacts have been traced and more than 35.000 positive cases situations addressed. Given this spectrum, more than 220.000 SMS have been delivered with tokens (bear in mind that a positive case receives an SMS per day at least during 5 days so he can report symptons).* *This allowed that waiting times in hospital and health centres reduced dramatically as the population no longer queued to report and get documentation.* *This was quite useful for home caregivers and people who really felt that going out was a risk due to their own illness, conditions and age.*
Difficulties encountered/ lessons learned	*[300 characters] Please specify any difficulties encountered/lessons learned during the implementation of the practice.*

	Despite the maximum automatism being used, some specific paperwork still takes some time for the citizens to receive. This is due to legal issues which demand signature of health delegate who needs to verify and validate nevertheless all the positive cases situations. *Also despite the majority of citizens – including elders – own and are used to work with a cellphone or smartphone, not everyone is at ease with internet and needed help from relatives to complete the online forms, etc.* *This was cope with a side-by-side manual/paper system for those who wished.*
Potential for learning or transfer	*[1000 characters] Please explain why you consider this practice (or some aspects of this practice) as being potentially interesting for other regions to learn from. This can be done e.g. through information on key success factors for a transfer or on, factors that can hamper a transfer. Information on transfer(s) that already took place can also be provided (if possible, specify the country, the region – NUTS 2 – and organisation to which the practice was transferred)* *[Technical: A good practice be edited throughout a project life time (e.g. to add information on the transfers that have occurred)]* *This Good Practice might be interesting for partners as it shows that the deployment of tech solutions and platforms can be made successfully in short-time in order to address efficiency problems and without letting anyone left behind besides tech-usage.* *This shows that ICT solutions can be applied freely to home caregivers and their relatives without restrictions and humans have the ability to quickly adapt when they really need.*
Further information	*https://s-alerta.pt/cidadao/*
Contact details *[Technical: the contact details will be visible only to "Policy Learning Platforms registered members"*	
Name	*Dr.ª Carina Ferro*
Organisation	*SESARAM*
Email	*Carina.ferro@sesaram.pt*
Expert opinion	*[500 characters] [Technical: to be filled in by the Policy Learning Platforms experts]*