

**The first mobile rehabilitation team for the elderly at home established in Pomurje.**

**Nursing home Radenci, 4. 12. 2015 - Great inequalities occur in the field of rehabilitation of elderly after a stroke because of access to medical services. Elderly over the age of 70 and patients with chronic diseases are not treated equally or they do not have the same access to rehabilitation services after a stroke as others do.**

The stroke annually effects about 4,500 Slovenes, about 20 % of them die. Only one tenth of the patients receive appropriate neuropsychological and speech therapy rehabilitation after damage or diseases of the brain.

After completing hospital treatment the dilemma of where to send the patient - the elderly - usually occurs, because rehabilitation in the University Rehabilitation Institute of RS Soča or medical rehabilitation are not always immediately accessible. Situations also occur when the mentioned treatments are not enough and the patient's condition requires continuation of the rehabilitation.

Based on concrete experience in working with the elderly and the response to actual needs, the people at DOSOR nursing home Radenci developed a program for comprehensive and high-quality rehabilitation after a stroke. The primary purpose of the rehabilitation is to achieve a greater degree of independence and autonomy of the individual in performing basic life activities and to return the patient to his home environment.

Within the framework of the project "Potentials of the population and the institutions of the Pomurje region in reducing health and social inequalities of elderly people in the local environment", which is funded through the Norwegian Financial Mechanism Programme 2009-2014, DOSOR set up a mobile rehabilitation service for the elderly at home, based on the actual needs of the elderly outside of institutionalized care. Because the service is self-funded, people at DOSOR strive to make the service accessible to all elderly patients and to include it under services that are financed by the mandatory health insurance, on the basis of a granted concession. They also carried out educations for family members and people who take care of an elderly person at home. They noticed that a too big physical and emotional burden occurs for people that take care of an elderly person at home, because of lack of qualification for high-quality care. These are mostly employed women. They will therefore continue to address the growing need for a supportive environment with the execution of these educations in order to enable high quality care of family members at home.