



ETORKIZUNA
ERAIKIZ
think tank

**NEW FUTURES OF THE WELFARE
STATE
REPORT OF THE 10th MEETING**

27/05/2021

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1. Programme

Theme	Presenter/Driver
Introduction and presentation of the workshop	Maite Peña
Presentation of the 2030 Agenda for Gipuzkoa	Carlos Alfonso
Design of futures	Javier Castro-Spila
Dynamics of reflection and debate	Javier Castro-Spila
Assessment and end of session	Maite Peña

2. Participants

- | | |
|--------------------------|----------------------------------|
| 1.- Maite Peña | 12.- Arantxa Gonzalez de Heredia |
| 2.- Javier Castro | 13.- Mikel Malcorra |
| 3.- Carlos Alfonso | 14.- Paz Morer |
| 4.- Elena Basagoitia | 15.- Garikoitz Agote |
| 5.- Javier Sancho | 16.- Belen Larrion |
| 6.- Koldo Aulestia | 17.- Adriana Martinez |
| 7.- María Muñoz | 18.- Felix Arrieta |
| 8.- Arantxa Gorostiaga | 19.- Andoni Zulaika |
| 9.- Miren Larrea | 20.- Bakarne Etxeberria |
| 10.- Julian Florez Esnal | 21.- Iñigo Kortabitarte |
| 11.- Jon Arzallus | 22.- Joseba Zalakain |

3. Introduction and presentation of the workshop

The Deputy for Social Policies welcomed all the participants to the session and said that the workshop would be divided into three sections. She shared the PowerPoint presentation on the screen and began by explaining each part of the session. The first is the opening of the workshop, where they will also discuss the results of the evaluation. The second is a presentation of the 2030 Agenda for Gipuzkoa. Thirdly, they will conduct the exercise on design of futures.

4. Presentation of the results of the evaluation

The Deputy for Social Policies said that the first item was the evaluation of the Think Tank. *"We have had some very favourable results. There are some issues that point to clear areas for improvement, but most of the participants have a very positive view of everything that has gone on this year in this Think Tank".*

The Deputy of Social Policies highlighted four points in the evaluation:

- a) The Think Tank has fulfilled its objectives of fostering deliberation on social policies, building trust among the people/organisations involved, and fostering a shared vision on the issues.
- b) Integration (people and organisations) in the Think Tank was considered suitable (although there have been requests to incorporate users).
- c) The organisation of the sessions (time, frequency, load and modality of work) was also considered suitable.
- d) The Think Tank outputs and outcomes are scalable and facilitate deliberation.

The Deputy of Social Policies emphasised that there are major improvements that they can work on. *"40% of participants feel that the Think Tank is not transforming social policies. 25% consider that cooperation is not being strengthened. 35% of us do not know the Think Tank's website".*

After analysing the conclusions, she said, they have drawn up the following list of recommendations.

- Include users in the deliberative processes of the Think Tank.
- Promote a second phase and move on to a "do-tank".

- Improve the methodology in order to intersperse theoretical reflection with practical action.
- Combine intervention with experts and users more successfully.
- Improve the make-up of the Think Tank: there may be underrepresented groups.
- Improve the Think Tank website: the aim is to make it a platform for collaboration.
- Use the White Paper as a teaching tool to guide future social policies in relations with the public.
- Structure the pilot actions in an action plan: a 2021-2023 development and action plan will be presented for the Think Tank.

DFG7 said that they felt that the seven recommendations they have chosen cover the most relevant suggestions made by the participants.

The Deputy of Social Policies added that they have taken into account all the opinions from the participants in the group. She went on to say that: *“you may agree with some of the contributions, and you may not like others. But we have tried to reflect the group's general proposals”*. She then asked if anyone wanted to add any further comments and moved on to the next item.

5. Presentation of the 2030 Agenda for Gipuzkoa

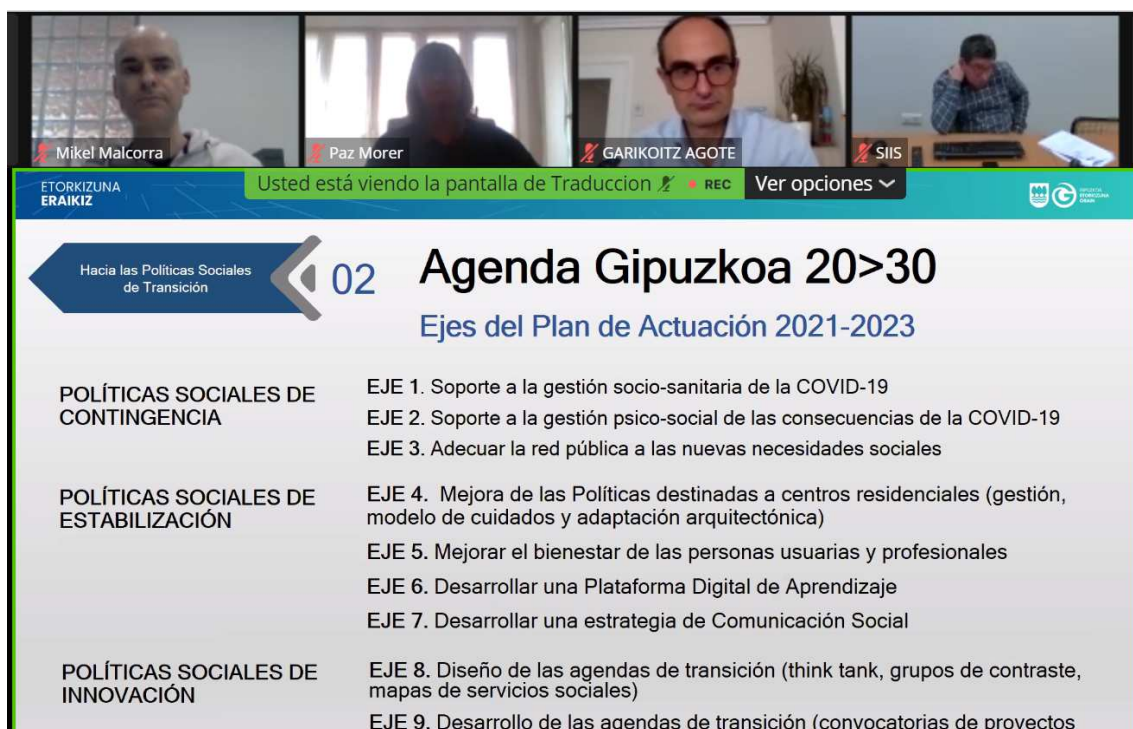
The Deputy for Social Policies began by presenting the 2030 Agenda for Gipuzkoa. She said that they have made good progress in the presentation of the agenda, and that the presentation is intended to show how far they have come in preparing it. She emphasised the participatory nature of the agenda, and the fact that it has had to be sped up due to the challenges posed by the Covid crisis.

As for the objectives of the agenda, the Deputy for Social Policies said that *“it seemed more appropriate to establish a medium-term roadmap”*. She added that they have included the participants' proposals and the action plan within an overall agenda: *“We have launched a participatory process to design it. The aim is to promote the*

transition towards a new model of care, and within this transition, to establish what actions are required”.

Using the Power Point presentation, the Deputy for Social Policies explained that *“the agenda has three main dimensions:*

- *The first dimension is the short-term future or flexibility: it is about contingency social policies. Right now, the urgent thing is to address the Covid emergency.*
- *Secondly, there is the question of medium-term adaptation. The important thing is users' quality of life, applying the regulatory framework that we have today. i.e., the institutional competences we currently hold.*
- *Finally, we come to the long-term future or the question of anticipation: this involves our innovation policies. What actions should be included in the agenda. In this dimension we need to introduce actions that will enable us to move to the next care paradigm.*



The screenshot shows a video conference interface with four participants: Mikel Malcorra, Paz Morer, GARIKOITZ AGOTE, and SIIS. Below the participants is a presentation slide titled "Agenda Gipuzkoa 20>30" with the subtitle "Ejes del Plan de Actuación 2021-2023". The slide is divided into three main sections: "POLÍTICAS SOCIALES DE CONTINGENCIA", "POLÍTICAS SOCIALES DE ESTABILIZACIÓN", and "POLÍTICAS SOCIALES DE INNOVACIÓN".

Section	Actions (Ejes)
POLÍTICAS SOCIALES DE CONTINGENCIA	EJE 1. Soporte a la gestión socio-sanitaria de la COVID-19
	EJE 2. Soporte a la gestión psico-social de las consecuencias de la COVID-19
	EJE 3. Adecuar la red pública a las nuevas necesidades sociales
POLÍTICAS SOCIALES DE ESTABILIZACIÓN	EJE 4. Mejora de las Políticas destinadas a centros residenciales (gestión, modelo de cuidados y adaptación arquitectónica)
	EJE 5. Mejorar el bienestar de las personas usuarias y profesionales
	EJE 6. Desarrollar una Plataforma Digital de Aprendizaje
	EJE 7. Desarrollar una estrategia de Comunicación Social
POLÍTICAS SOCIALES DE INNOVACIÓN	EJE 8. Diseño de las agendas de transición (think tank, grupos de contraste, mapas de servicios sociales)
	EJE 9. Desarrollo de las agendas de transición (convocatorias de proyectos)

The Deputy for Social Policies added that [as shown in the Power Point presentation](#) it is necessary to *"bring together the three dimensions. We need to tackle the urgent and the important, the short and the medium term, but we also need to implement actions to achieve that future model"*.

For the Deputy, this transition must include some key elements. Amongst these, she mentioned collaborative governance, experimentation and innovation, as well as evaluation and learning. The Deputy said that *"another of the fundamental elements of the transition will be, precisely, to build an agenda for the transition in care"*.

[Using the slides in the presentation](#), the Deputy went on to explain some of the specific features of the agenda: *"We have designed some general axes. We want you to tell us if you think these are the right ones or whether we need to add more elements"*.

She stressed that the Think Tank, as a generator of a consolidated network, can be a very important element in the construction of this networked care evaluation agency: *"In the action plan there are four lines. We are creating this plan in collaboration with many actors in order to discuss and draw up the 2030 Agenda for Gipuzkoa. We want to establish a series of steps to achieve the future model"*.

The Deputy added; *"we want to hear your contributions: whether you agree with our classification and whether you think we've got the axes right. We need information to develop the 2030 Agenda for Gipuzkoa and the 2021-2023 Action Plan. We want to put order on this whole movement we are generating. We can gradually take the necessary steps to adapt this model for the future. Once we have listened to all the different points of view, we will be able to have an initial working document"*.

The screenshot shows a video conference with four participants: AFAGI-Koldo Aulestia, Maria Muñoz - Fundación Goye..., Felix Arrieta, and Arantxa Gorostiaga. The presentation slide is titled '02 Agenda Gipuzkoa 20>30' and 'Componentes de las Políticas Sociales de Transición'. It lists four components: GOBERNANZA COLABORATIVA, EXPERIMENTACIÓN E INNOVACIÓN, AGENDA DE CUIDADOS Y TRANSICIONES, and EVALUACIÓN Y APRENDIZAJE. A text box at the bottom of the slide states 'Euskara and Spanish interpretation is available'.

Having set out the main steps in the preparation of the 2030 Agenda for Gipuzkoa, the Deputy for Social Policies asked the participants if they had any contributions or comments to add.

DFG4 said *"we will send out the evaluation report next week. This report sets out in more detail all your contributions about the work done. For example, they show that the website should be much more interactive. However, there are mixed opinions because we have taken all the comments into account"*.

After DFG4's intervention, the Deputy for Social Policies again took the floor, saying they would now move on to the third item in the session, where they would make a prospective analysis of the design for the futures of care. With a view to 2050, the Deputy said that the aim of the session was to design the preferred futures for 2050: *"let's see if we can reach a consensus on what we think the future of the care field will look like"*.

6. Design of futures: probable and preferable scenarios


DFG4 opened the discussion on the third point of the session saying that the participants *"have received some reports with a short introduction on futures design. We will send you a form addressing approaches to futures design: different trend analyses and scenario design"*. DFG4 added that there is a time limit on the Think Tank, and that they will not be able to comment on all the answers they get. However, he said that *"there are some very interesting results from the forms we received"*.

DFG4 presented the hypothesis the participants would be asked to work on at home: *"The hypothesis is that the Covid crisis has transformed the current social policy paradigm. We therefore posed the following question: What scenarios are generated around this significant event?"*. DFG4 said that the exercise had allowed them to contextualise the reflection on the future. In addition, he said, the 2030 futures design exercise will make it easier to draw up the task for the session they are working on.

DFG4 summed up the answered and reflections received: *"On probable futures, in a first scenario, most of you believe that the future will not be change much. You think that there will be enough stability, and that the new balances will be based on institutionalisation. However, there will be imbalances between resources and administration, and social policies may be more subordinate to economic policies. Problems will grow at a faster rate than resources, so family members will need to get involved in care. There will also be an improvement in the social services. Ultimately, though, the changes will not be very profound"*.

DFG4 went on to comment on the answers they had received. He discussed the second scenario they posed: *"In the second scenario, you say there will be a trend towards technification. According to you, the dynamics of technology will grow. Technology will be rolled out to accompany people throughout their lives. Systems will become much more efficient because technology will be customised. However, due to governance issues there will be a lack of coordination of systems. In the field of care, deprofessionalisation can be expected: digitalisation will emerge and speed up the processes, creating a technological divide that will create confusion"*. Finally, DFG4 drew a comparison between the two scenarios raised in the pre-session exercises: *"The two futures you have indicated as probable futures in 2030, share almost the same problems*

as we are experiencing today. For most of these problems, there is not enough time to make structural changes by 2030”.



The screenshot shows a video conference interface with four participants: ArantxaGdH, Mikel Malcorra, Paz Morer, and GARIKOITZ AGOTE. The presentation slide is titled "Diseño de futuros" and "FUTUROS PREFERIBLES (2050)". It features a blue arrow icon with the number "03" and the text "Diseño de Futuros". The slide content includes:

Escenario 2: MODELO TECNOLÓGICO (predominio del mercado y lo privado)

En el futuro estamos frente a un enorme giro tecnológico, pero no cultural, así que la transformación digital no se incorpora a la cultura del cuidado pero sí a los procesos del cuidado. Hay mucha innovación tecnológica al punto que los nichos ligados al cuidado exportan tecnologías hacia otros sectores y viaja a través del mundo (Gipuzkoa ya es un modelo tecnológico). Existe una importante red de colaboración estatal y empresarial. Se gana más en personalización, pero se pierde en control de los datos, y también en contacto humano en el cuidado. Existe una mayor autonomía de las personas y sus cuidados, pero menos atención personal. Mas negocio, pero menos relaciones sociales. Predomina el cuidado en la vivienda gracias a la domótica, robótica, monitorización digital, pero nace un nuevo modelo de soledad, aunque vigilada.

Hay mayores niveles de mutualización del riesgo en la dependencia: las personas financian los servicios ex ante (por si les toca) y no ex post (cuando les toca). Las personas pueden elegir, dentro de unos límites, los servicios que quieren recibir y la entidad que los presta, a partir de una gama de proveedores y de una gama de servicios amplia y adecuada a las necesidades de las personas. Este sistema permite mayores cotas de seguridad y la posibilidad de realizar de forma eficiente determinadas tareas. Pero el sistema es caro y se necesita una participación económica mayor de las familias (por eso también se desarrollaron los sistemas de ahorro privados a lo largo de la vida).

DFG4 said that in the second part of the exercise, participants had to design preferred futures. Here, he noted that *"there have been more differences"*. He began by reading the document with the responses and said that *"in the first scenario, the sense of community predominates. In this scenario, there is a single institution that is responsible for all care policies. The municipalities will have merged to become much more sustainable entities. Housing will be adapted, as will employment, education, urban living issues and income guarantee schemes"*. DFG4 went on to say that *"the care system will be more coordinated. Social care is managed by the public sector and will be carried out by small businesses and locally-based cooperatives"*. DFG4 added that in this scenario *"the approach is very community-based. The system is based on improving people's life habits, so the deterioration of cognitive functions comes very late. Personalised care will be provided by immigrants. There will be little space for technology and social policies will be more robust than they are today. A significant proportion of the population will be ageing, and the social problems of ageing will be much more*

significant". DFG4 concluded that "from a care policy point of view, technology is marginal".

In the second scenario, DFG4 highlighted a *"technological shift, where digital transformation is not incorporated into the culture of care"*. He said that in this future, *"the technology divide will remain. There will be such powerful technological niches that even new technologies discovered in the technological field will be exported to other planes. The public sector will partner up with private enterprise. We will gain in personalisation of care, but we will lose in personal attention, due to technology"*. As for the importance of technology in the care sector, DFG4 said that *"in care, robotisation will predominate. There will be a new model of loneliness, and technology will take care of that loneliness. In the future there will be a private ecosystem for choosing the care system"*. He added that it will be *"an expensive system, where the service will need to be funded"*.



03 > Diseño de Futuros

Diseño de futuros

FUTUROS PREFERIBLES (2050)

Escenario 2: MODELO TECNOLÓGICO (predominio del mercado y lo privado)

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DFG4 explained that in the exercise of designing preferred futures, they have distinguished two different models for the future. Firstly, the community model, and secondly, the technological model. DFG4 summarised by saying that *"this Think Tank believes that in the future, with the pre-session exercise we have done at a*

methodological level, the longer-term future will be diversified. That is, in a timescale up to 2050”.

Before moving on to the presentation of the group dynamics, DFG4 described the aim of the project described above: *“the 2030 Agenda seeks precisely to change the probable future”.*

7. Dynamics of reflection and debate

DFG4 began by explaining the exercise to be carried out by the participants: *“For today's exercise, we want to propose a radical form of thinking. We want you to think about 2050 from a very radical perspective. We want your thoughts to take you out of the present to think about radical actions: actions that will change the system radically”.* DFG4 went on to say that *“such performances are probably not feasible today. However, the key is to locate the quality of performance in the future”.*

He explained that, in the first part of the exercise, each group will have to choose one of the preferred futures described above. In other words, they will have to choose between the future with the more communitarian trend, or the more technological future: *“you will have a few minutes to decide which future you want to work on”.* Afterwards, DFG4 explained, the participants would have to think about and discuss three radical actions to transform the future so radically that society could be changed within two years. *“When you have done everything, we have described, we will discuss it as a group and talk about the preferred future”.*

Having explained the exercise, DFG4 opened the floor to questions.

ECO7 asked whether the participants should approach the actions in such a way that they can have a greater impact on radicality.

With regard to ECO7's question, ECO1 asked whether actions should be chosen for their radical nature or for their usefulness.

DFG4 answered the two participants, saying that *“is a complicated exercise to implement. It has to do with designing a future scenario, when in our logic we always think of the present. You therefore need to take into account both radicality and utility. We would like you to propose three actions that can be carried out now, in order to have an impact in the future”.*

DFG4 wished them all good luck, and they then divided up into groups for one hour to discuss the question posed.

8. Results of the dynamic and feedback

The deliberation dynamic had a duration of one hour.

Following that time, DFG4 opened the session up to the presentations of the results of the dynamics, with the spokespersons of each group commenting on what they had discussed. DFG4 said that *"all the contents we discuss now will be reflected in the White Paper"*.

Results of the dynamic:

Group 1:

The spokesperson of Group 1, ECO14, began by explaining the future proposed by the participants in his group. He explained that his group had chosen the community-based public model for the future. In addition, he said, they had had a general discussion on the care offered in the family environment: *"we see a clear decline in care within the family. The community is taking on less and less of the care burden. In the past, the local environment was more concerned with the care of the people who formed part of its immediate ecosystem. Today, however, we are moving towards an increasingly individualistic society. How can we strike a balance so that a person's immediate community has a greater involvement in their care? We believe that public policies should be designed to promote family care, without replacing the work of the public services. To do this, we have an idea: co-financing linked to people's social commitment"*.

ECO14 set out some examples of projects that have been carried out elsewhere. He mentioned the Radax project in Barcelona — a group of people who are dedicated to non-professional care, complementing professional care. *"It's not the same for people to receive care from a neighbour, or to be offered it by a volunteer. We don't know how we can put this into action going forward"*. ECO14 explained that *"there are people with a certain social co-responsibility: young people who display social commitment to caring for the elderly, for example. We don't know how to put this into action going forward, but co-financing linked to social engagement might be one way of doing it"*.

ECO5, from Group 2, commented that there are some very difficult situations in old people's care homes, given, first of all, that they have a very high cost. *"If we could allocate the money that families spend on nursing homes to the person who needs the care, that person could design a system in their own home to receive care in a more personalised way"*. ECO5 added that, *"we need to create citizenship: we have to make people feel part of a community and a neighbourhood. Public activities should be promoted to work on this sense of belonging. But public services cannot cover all the needs: as citizens, we have rights but also duties"*.

Group 2:

ECO7, speaking on behalf of the second group, began by saying that her group had also opted for the Community model. She said that they have added a bit of technological incursion to this community model: *"We have imagined care in a very proximate environment. In a neighbourhood or district, with the people who need them. That's why we came up with an innovative idea: Living Lab, a space, a neighbourhood, or a host community where spaces are designed on a community basis. The key is to identify the supports in the user's environment"*. ECO7 talked about the new skills and new professional profiles that will be required in this future context: *"in the care sector there are both natural supports and professional supports. Therefore, it is necessary to define the professionalisation of support"*.

ECO7 went on to discuss technology for prevention, to ensure people's autonomy and independence. She said that it would be necessary to raise awareness on self-support and self-care: *"We have talked about how technology could facilitate collaboration and cooperation. But this requires legislative changes"*.

ECO10, a member of the second group, said that *"in our care ecosystem, there are many immigrant care workers. We would therefore need to adapt labour legislation and the social services. Today, traps are created for immigrants, generating an underground economy"*. ECO10 went on to note that *"at a policy level, a fairly radical change is needed"*.

Group 3:

ECO2, from Group 2, briefly summarised the scenario that was presented to them at the beginning of the group exercise: *"We are facing two very extreme models: a community model and a technological one. Our group believes that the two models will have to interact, so we are in favour of an intermediate model"*. ECO2 went on to say that *"opting for an intermediate model requires courageous action. We set a radical challenge, which is to centralise social policies. We therefore believe that the theme of the community model must include technology"*. ECO2 said that altruistic volunteer work is increasingly in crisis, and that his group has insisted on autonomy in the design of services. ECO2 mentioned several topics such as students who can exercise a service for citizenship, related to the concept of housing for all: *"in housing, you can love out all the different situations we have in the community"*. He also said that his group has focused on the role that immigration would play in the future care ecosystem.

On the subject of immigration, ECO18 said that in their group they believe that *"immigrant minors should be integrated into the concept of housing for all, so that they can live with their families"*.

ECO2 then took the floor, saying that the blame lay with an intergenerational problem: *"in the aspect of care, we have overprotected the new generations in the face of difficulties. We believe that they do not know how to live alongside people suffering a certain decline"*.

Group 4:

ECO4, from Group 4, said that they had chosen the community model as the basis for their vision for the future, and added that they have been *"very radical"* in proposing the three actions.

"The first measure is related to the economic sphere: we propose an inheritance tax. We propose to get rid of co-payment, and the possibility of incorporating a direct income tax was also mentioned. However, we preferred the idea of linking this tax to inheritance, and not to income that is already taxed". ECO4 said that this system currently exists in other countries: *"we all pay for different social services through our incomes. There are free services such as education and health, and we think it is a good idea to extend this system of free services to the area of care"*.

Next, ECO4 said that the second measure is related to the legal field: *"We propose the creation of a general inspectorate of social services, with capacity for enforcement. This inspectorate should be able to inspect the administrations themselves and ensure they are complying with the law"*. ECO4 said that *"the law on social services is not fully developed: in this regard, we propose to create this inspection to promote competition between different actors. It would be an information system that would be available to users"*.

Finally, ECO4 said that in their future they proposed to redefine the care model. *"In the 2050 horizon, we considered a care model with no residential care homes. We do not want to reproduce the residential model: we want to transform it into a model of home care"*.

ECO4 said that not all the participants in the group agreed on all these aspects. But he said that *"this is what an exercise in radicalism entails"*. Finally, he asked if any colleagues wanted to make any comments.

ECO8 said that in the group they had several slogans: *"We have been evaluating some other measures that have not been so well defined. Intermediate-type bodes, that can attend to people's needs, so that the decision-making capacity is integrated. We weren't able to come up with an exact definition of the idea, but it is a sort of pan-municipal, integrated organisation of services (mancomunidad). This structure should not become too large but should be large enough to contribute to generating something more complicated"*.

DFG7 said *"this ecosystem should be organised with a form and structure designed to advance towards more stable structures"*.

9. Next meeting: White Paper

DFG4 thanked the participants and says that *"all these reflections will be in the White Paper"*. He said the book would be called "The Future of Welfare States" and the idea will be to orient the care system towards a more community-based model, including technologies. *"Next week we will send you the result of the evaluation of the Think Tank"*.

10. Assessment and end of session

The Deputy for Social Policies encouraged the participants to read the document they will receive next week and added that, *"it has been a more complicated group than on other occasions"*. She also said that if anyone wanted to add any further points, they could make their intentions known at that time, or at some other time. *"If you have nothing further to add, we can adjourn the meeting. Thank you all for taking part and for your attention"*.

11. Appendices

a. Working Document No. 9

THINK TANK

Deliberation process on the work of the future: Working Document No. 9

(29 April 2021)

DIGITAL PLATFORMS (ECOSYSTEMS) AND DIGITAL TRANSITION (ORGANISATIONS)

1. Context for reflection

Processes of prevention, warning, diagnosis, information sharing, use of common resources, evaluation and improvement are being digitalised. However, attention is not being digitised, let alone care. Care and attention must be increasingly personal and humanised (personalised models). What is important is to ensure that the time contributed by professionals is valuable time that is used for support and relationship needs, removing bureaucratic or mechanical tasks that can almost entirely be handled by applications and automatisms. The aim is to apply technology to support and create facilitating environments, together with generalised training but not replacing the personal and human relationship with the users.

2. What are the advantages and disadvantages of digitalising care and attention in Gipuzkoa?

2.1. Advantages

Development of a single (social and health) record

New technologies (Artificial Intelligence, for example) make it possible to identify, record and combine different sources of data in order to develop a unique health and social record for each person. This single record would facilitate social and health care management, improving efficiency and also social integration because the services would be adapted to specific needs based on the users track record.

Agile Management

New technologies facilitate swift, flexible and timely management of information systems with benefits for managing health and social services systems. Swift and

flexible management is not only related to efficiency but also to including users in social and health management.

Personalisation of care

This is one of the central assets for which the benefits of using technology (especially digital technologies, AI and Big Data) is argued given the ability to process and adapt to the information needs of health and social care systems, facilitating personalisation thanks to the effective use of dynamic data, in particular in the personalisation of services. This represents an advantage for personalisation of health and social care services provided that adequate controls are in place.

Comprehensive overview and data availability

One of the advantages of Digital Technologies is the capacity to integrate and process data. The integration of single data (a single piece of data in a single place) can be an advantage for health and social care management. This integration allows a comprehensive overview of the case and the social/healthcare record, which offers advantages when it comes to managing services that are adapted to the needs of the users.

Increased coverage and accessibility

New technologies make it possible to broaden the impact and coverage of services, not only in terms of a greater number of users accessing technology and technologised services, but also in terms of the diversity of profiles and therefore of quantitative and qualitative criteria. This boosts additional accessibility to services, helping to cater to people based on their rhythm of life, needs and preferences.

Increase in quality of services

The combination of technologies with direct care can represent an improvement in the quality of care since these technologies make care more efficient and facilitate immediate access to relevant information (such as users social/healthcare record).

Increased foresight capacity

Digital technologies (artificial intelligence and Big Data) using mass data and data sets can improve the predictive and prospective capacity in matters of care, facilitating prevention and anticipation that will improve the management of social services.

Improvement in organisational management

New technologies facilitate organisational management (information processing, impact monitoring and evaluation, project management, personnel management, economic management, etc.), constituting an important potential for improving the quality of the health and social care system.

Improved case management

New technologies facilitate case management due to the adaptability of the technologies, the integration of information in the individual's life history and social/healthcare record, and speed and flexibility in providing timely and suitable responses to each specific situation.

Improvement in communication capacity

Digital technologies have shown their ability to facilitate immediate and real-time communication between people with different user profiles, services, organisations, relatives and professionals. This capacity can be better exploited by social services to foster new channels of communication.

2.2. Disadvantages

Technology Divide

The technology divide is evident between different generations (digital natives vs. non-digital natives) and this is seen particularly among older people (as compared to digital natives), and also in organisations (smaller organisations have more difficulties than larger ones in keeping up to date with the technology), and also between different territories (urban vs. rural) where the gap in digital access is also a disadvantage. The digital divide can be a reason and cause for (digital) social exclusion and is therefore a disadvantage (as a starting point) that needs to be addressed with a systemic approach to technology.

Depersonalisation of care

Although the capacity of technologies to personalise services has been noted, it has also been observed that technologies tend to standardise services, leading to depersonalisation. This can be seen not so much in the use of digital technologies but in robotics when it is intended for the care of the elderly in institutional settings (such as care centres and care homes).

Mistrust (right to privacy)

The use of technologically obtained data and the issue of right to privacy and control of personal information obtained using digital technologies are factors that can cause mistrust and represent a disadvantage for the expansion and use of new technologies in the social and health care field. Increased control of information, decreased privacy, are serious obstacles to digitisation (from the perspective of users).

Process standardisation and loss of control

Digital technologies have a tendency to standardise and homogenise management processes, but this does not always mean changing the organisational culture behind these management processes (organisational, care and relationships). A potential disadvantage of these standardisation processes is that practitioners lose their capacity of control over care settings because their operative capacity is transferred to technological resources.

3. What are the main dimensions that should be included in a digitalisation strategy for the Third Sector?

3.1. Levers

Flexibility and adaptability of organisations

One of the levers that can facilitate digitisation of Third Sector organisations is their ability to adapt and flexibility to integrate new processes. This is due in particular to the small size and accessibility of the management involved.

Increase in service efficiency and effectiveness

New technologies offer an incomparable advantage to optimise processes by generating added value for users, organisations / institutions and the ecosystem in general.

Training in technological skills

Training in and development of technological skills among organisations and users is one of the key levers for the digitalisation of care, services and organisations. In addition, training strategies make it possible to reduce existing technological divides, either between different profiles (older people) or territories (rural areas).

Availability of specialised companies

The province of Gipuzkoa has a critical mass of companies specialising in new technologies (although not all specialise in the social and healthcare area). This represents a lever for digitalisation, since there is potential for the development of new adapted services and technological products, as well as support in the digital transition.

The pandemic and digital culture

The Covid-19 pandemic has led to an unexpected boost in the mass use of digital technologies, breaking down barriers to use that existed before the crisis. This is a new impetus and a lever for change towards the digital transition from the perspective of users and organisations.

Promoting the development of digital social business models for care

The generation of resources for promoting new social business models, market opportunities, for technological development applied to care can be a lever of change for promoting the digital transition in the third sector and social services.

Creation of technological units

The creation of technological units in all third-sector organisations, with a major influence in cultural transformation and redesign of processes. The profiles must have skills in process engineering, communication tools and application development with three functions: R&D, project management, training and support. At least 10–15% of the workforce, as well as temporary subcontracting.

3.2. Limitations

Cost of the digital transition (economic)

The digital transition requires the significant and regular convergence of public and private funds (training, upskilling, equipment, licenses, platforms, support and technological management). This investment can lead to different speeds in the digital transition (between small and large organisations), which is a disadvantage in driving the digital transition.

Sharing data with other organisations (collaborative)

Sharing data with other organisations in the sector and with administrations is also an obstacle, given that it is a small sector, with limited capacity to expand globally, and that it competes locally for scarce resources.

Vision of the added value of technologies (cultural)

In the third sector and the social services there are limitations to understanding not only the complexity of technological systems but in particular their added value; in other words, there is a lack of an overview of the advantages (as opposed to the disadvantages) of digitalisation.

Lack of a strategic diagnosis on the use of technologies (strategic)

One important limitation for promotion of the digital transition in the third sector and the social services involves the lack of a strategic diagnosis of technologies (degree of penetration of technologies, types of technologies, level of use and acquired skills, etc.) that would allow future needs and strategies to be estimated.

Lack of staff trained in new technologies

The lack of trained personnel dedicated to promoting new technologies in the care sector (social services) is a limitation not only because of the lack of a critical mass of qualified personnel but also due to the lack of technological leadership in the third sector.

4. What are the main dimensions that Digital Platforms should have to connect organisations, services and users?

4.1. Accessible and intuitive platforms

Digital Platforms must be accessible, intuitive and easy to use, not only by users, but also by organisations and government. Open government strategies are moving in this direction, but there is still a long way to go. From this point of view, the platforms must be designed on the basis of a technological diagnosis of the sector and from the perspective of the users and user organisations, to guarantee adaptability and usability.

4.2. Organisational and technological connectivity

Digital Platforms should facilitate the connectivity of all organisations (not just some of them) to develop learning strategies (best practice, for example). Equal access to

new technologies and their systems can be an advantage for the whole network. On the other hand, it is also about the connectivity of a very diverse set of technologies and not just a few (software, artificial intelligence, etc.). Interoperability is an important condition for developing digital platforms.

4.3. Security and data protection

The expansion of digitalisation in the sector depends to a large extent on the confidence generated by the use of technologies, not only in organisations but also among users. The existence of clear, understandable and accessible protocols for data control and data security is a key issue to facilitate the use of new technologies and the development of platforms.

4.4. Access to finance for the digital transition

Although the platforms usually have a strictly technological function, they can be equipped better to provide technical support and also to allocate economic resources based on specific criteria to facilitate promotion of the digital transition in the third sector and social services. This twin function of digital platforms (supporting connectivity, but also driving forward the transition) could be novel and innovative.

4.5. Cultural use of technologies

Technologies are seen as supports that facilitate access, efficiency and agility of care management processes, but they must also facilitate a cultural use of the technologies themselves. The digital platforms must include other dynamics — other new, cultural, communicational, life elements that facilitate expansion and use among different types of users.

4.6. Centralised body to define parameters

The connection between systems, organisations and users requires prior steps that need to be promoted by a higher body that sets out a series of models, definitions, codes and parameters so that information exchange is effective and certain fundamental conditions are guaranteed, such as data privacy and ease of access for all types of users.

DOCUMENT NO. 10

Think Tank Evaluation Results

Deliberation group: The futures of the Welfare State

A. Overall assessment of focus group evaluation

A.1. Quantitative data

The overall evaluation of the Think Tank (Deliberation Group on the Futures of the Welfare State) was very positive. Based on the number of items scoring *entirely agree* or *agree*, **87%** of participants have a positive to very positive perception of the work carried out in the Think Tank. The issues where there was least agreement were in three areas:

- a) Influence on the policy ecosystem (60%), i.e., 40% of the people surveyed feel that the Think Tank is not significantly transforming policies.
- b) Cooperation between provincial policies and agents (75%), i.e., 25% of respondents felt that cooperation between social policies and territorial agents was not being strengthened.
- c) Familiarity with the website (65% of those surveyed are familiar with the website). In other words, 35% of those surveyed were unaware of the existence of the Think Tank's website.

SUMMARY OF QUESTIONS

(total= entirely agree + agree)

- 1. **95%** gave **knowledge co-generation** a score of "entirely agree" or "agree".
- 2. **90%** answered "entirely agree" or "agree" to the question on **generation of conditions** to influence the future of the policy ecosystem.
- 3. **60%** answered "entirely agree" or "agree" to the question on whether it is already **influencing the ecosystem**.
- 4. The **objective** set for this phase of the think tank has been met, with an "entirely agree" or "agree" rate of **85%**.

5. **90%** answered "entirely agree" or "agree" to the question on the **composition of the teams**.
6. **95%** answered "entirely agree" or "agree" to the question on whether the **experts** were suitable.
7. **100%** answered "entirely agree" or "agree" to the question on the **organisation** of the sessions.
8. **100%** answered "entirely agree" or "agree" to the question on **the use of the time** in the sessions.
9. **100%** answered "entirely agree" or "agree" to the question on the **frequency** of the sessions.
10. **95%** answered "entirely agree" or "agree" to the question on the **duration** of the sessions.
11. **95%** answered "entirely agree" or "agree" to the question on the **workload** of the sessions.
12. **90%** answered "entirely agree" or "agree" to the question on **trust in the group**.
13. **90%** answered "entirely agree" or "agree" to the question on the **shared vision**.
14. **90%** answered "entirely agree" or "agree" to the question on **engagement** of the group.
15. **75%** answered "entirely agree" or "agree" to the question on **cooperation between agents and policies**.
16. **65% do not know about the website**.
17. **80%** answered "entirely agree" or "agree" to the question on whether the results of the think tank are **scalable**.
18. **85%** answered "entirely agree" or "agree" to the question on whether the think tank **facilitates deliberation**.

A.2. Qualitative data

1. Degree of compliance with the objectives

In general, the distributed opinion of those consulted suggests that the Think Tank has fulfilled its objectives of collective reflection. A new path of greater openness has begun, which is a first step, with a large space for reflection, based on people with

different profiles who can make rewarding but very diverse contributions. In these conditions, the reflection has focused on the general design of social policies, but there is a lack of depth, specialisation and capillarity to influence the policy ecosystem.

Recommendations:

- **To create small working groups, with greater specialisation, that make it possible delve further into the different themes of social policies.**
- **Include users of social policies in the reflection and deliberation process**
- **Promote a new process to move from the phase of deliberation to the phase of collective action.**
- **Change the Think Tank's working methodology to promote capillarity, specialisation and user integration and to move to action.**

2. Organisation and development of the sessions

In general, the distributed opinion of the respondents suggests that the Think Tank has developed suitable, well organised, easily accessible methodology, with good session systematisation. The online sessions are considered to be a success, although some people commented that there should be a combination of online and offline sessions. The expert guests have played an important role in dynamizing ideas, focusing discussions and sharing interesting knowledge. However, some participants highlighted the importance of devoting more time to experts, in order to explore certain topics in greater depth.

Recommendations

- **Include facilitators in each Think Tank working group to improve the internal discussions of the Think Tank subgroups.**
- **Include other groups linked to social policies (such as childhood, adolescence, social inclusion) that were underrepresented in the Think Tank.**
- **Include users in the reflections; they should draw not only on expert knowledge, but also on the knowledge of users to increase the capillarity of the discussions.**
- **Offer more time for experts to set out their presentations.**

- **Intersperse theoretical reflection with practical cases to begin to change the real situation and facilitate orientation towards action. Other proposals included: an expert intervention, a theoretical reflection and a practical case to solve a specific problem.**

3. Impact on the ecosystem

In general, the distributed opinion of those consulted suggests that the Think Tank is generating trust among the participating organisations and between them and the public authorities. Some comments suggest that cooperation between actors is not being developed, but the reason is that this was not one of the Think Tank's objectives. The Think Tank is therefore validated as a support that facilitates the creation of trust relationships with the public administration, but it does not seem to be a good tool to generate cooperation between organisations and citizen participation.

4. Online dissemination

In general, there is a significant lack of knowledge (65%) of the existence of the Think Tank's website. The participants who are aware of the website state that it is static in content and character and does not facilitate the dissemination of the Think Tank's results among the public.

Recommendations

- **Need to turn it into a collaborative workspace, where more can be shared and certain debates can be continued between sessions, and other contributions can be made on topics that are not addressed in the sessions.**

5. Products generated

In general, it should be noted that the work of systematizing the sessions has been good, which is an important output. This output can be evaluated and has been rated very highly. However other products (such as the White Paper) cannot be assessed at this stage as only the analytical index is currently available. Taking this into consideration, it is noted that the White Paper can serve as an educational tool (among organisations and citizens who have not participated in the deliberative process) and a guide for the future of social policies.

Recommendations

- **Use the White Paper as a mechanism for educational dissemination of the Think Tank and its results.**
- **Use the White Paper to guide future social policies.**

Use the White Paper as a support for defining actions, projects, involved actors, resources and impacts.

A.3. Recommendations for development of the Think Tank

As part of the evaluation process, we compiled suggestions for the future development of the Think Tank. These included the following:

- **Development of a new methodology that will make it possible to move from theoretical reflection to practical intervention (projects) with a methodology of accompaniment.**
- **Broaden the scope of activity of participating organisations by integrating other actors in the policy ecosystem (e.g., areas related to child/family, social inclusion, etc.)**
- **To become an area for dissemination and knowledge of best practice and the development of experimental projects.**
- **The Think Tank should continue in a phase of implementation, monitoring and assessment of the actions proposed in the White Paper, structured in an Action Plan and evaluation thereof.**
- **To disseminate the results widely through the creation of reflection groups on the White Paper (user integration).**

B. Action orientation

The Think Tank is action-oriented on three levels. At the first level is the drafting of the White Paper. The book is presented as a guide for social policy action to drives the transition to a new care model, moving from a service-oriented system to an ecosystem- and people-oriented model. At the second level is the implementation of

the Reflection Group on Personalisation in Care, made up of members of the Think Tank, which is organised around a specific theme, with a specific group, to design a change in the care model, which is one of the keys to the transition in social policies. At the third level is the constitution of the group of international experts, who will meet at the Etorikizuna Eraikiz congress to form the Care Evaluation Agency, oriented towards monitoring and evaluating the transition.

C. Planned dissemination strategy (2021)

C.1. Strategy documents

1. White Paper on Futures of the Welfare State

The White Paper summarises the vision, futures and actions proposed by the Think Tank to promote the Social Policies of Transition. The book is not only the result of the Think Tank's deliberations but also constitutes a transition platform for social policies and is at the same time an educational material for generating consensus in the extended ecosystem of social policies.

2. Model of personalisation of services

This document is the result of the Reflection Group on Care Personalisation, led by the Department of Social Policy and composed of 9 members of the Think Tank. This document explores the concept of personalisation in social policies, the feasibility of personalizing services, and the need to promote new models of person-centred care among organisations in the social policy ecosystem.

3. Ecosystemic change in Social Policies in Gipuzkoa: A model of transitions

This document, led by the Department of Social Policy, offers a discussion on the emergence of a new model and new concepts for defining Transitional Social Policies. It also proposes concepts such as local care ecosystems, management of transitions, models of experimental governance, social experimentation as a basis for policies, and the generation of new citizenship through the incorporation of users in the design and evaluation of policies. Finally, the document proposes the strategy for creating a Care Evaluation Agency, based on networked evaluation and participatory models.

C.2. Validation of the White Paper: the discussion groups

The White Paper is a key outcome of the Think Tank that needs to be disseminated and validated in the wider social policy ecosystem (organisations and users that have not participated in the deliberative process). The White Paper will be validated between September and November 2021. The discussion groups are described below:

- Discussion Group 1: Users and family members
- Discussion Group 2: Third sector entities and advisory boards
- Contrast group 3: Trade Unions and Employers' Organisations
- Contrast group 4: Expert and Academic Groups
- Contrast group 5: Political and technical policy makers at municipal and regional level
- Contrast group 6: Technical personnel from the Department of Social Policies.

C.3. Dissemination of the White Paper at the Etorkizuna Eraikiz Congress

The strategic documents will be sent to the group of expert guests at the Etorkizuna Eraikiz Congress (December 2021) to allow them to familiarise themselves with and assess the Think Tank's results. The congress will seek to disseminate these results both locally and internationally.

The Congress will set up the International Experts Group, which will meet twice a year, to carry out an evaluation and make recommendations for the development of the Department of Social Policies 2030 Agenda for Gipuzkoa, within the framework of the Care Evaluation Agency, in order to evaluate the transition towards a new model.

D. Intangible results of the Think Tank (2020-2021)

The experience of the Social Policy Think Tank has created four lessons that have the potential to change the policy style of the Social Policy Department and its relations with the ecosystem. These learnings are based on the fact that technical and decision-makers from the Department participate in the deliberative experience. Potential changes in ecosystem relationships include:

Knowledge. Thanks to the interaction with the ecosystem, the deliberative processes of the Think Tank make it possible to generate new perspectives on the problems and their alternative solutions. Combining expert knowledge and experiential knowledge opens up a new framework for reflection to which the Department's

technical personnel did not systematically have access before the creation of the think tank.

Consensus: The deliberative processes of the Think Tank have been well managed, facilitating consensus and the possibility of bringing visibility to these long-term agreements (the White Paper). In addition, the deliberation process has generated spaces of trust between the policy ecosystem and the Department of Social Policy. In the long run, this process creates better contexts of legitimacy for policies in a crisis context.

Action: The creation of the Reflection Group on the Personalisation of the Attention and Care model (service personalisation), and the drafting of the White Paper has given impetus to a new framework for action that addresses current problems from a transitional perspective.

Technical Capacity. The deliberative processes of the Think Tank are helping build the Department of Social Policy's technical capacity to drive forward collaborative governance. The development of deliberative capacity allows access to consensus with other territorial agents and the potential inclusion of users.

c. Presentation by the Deputy (Provincial Minister) for Social Policies

ETORKIZUNA
ERAIKIZ

GIPUZKOA
ETORKIZUNA
ORAIN

DESIGNING FUTURES

27 May 2021

ETORKIZUNA
ERAIKIZ

GIPUZKOA
ETORKIZUNA
ORAIN

Agenda for the Meeting (27 May 2021)

The agenda is presented in a zig-zag sequence of four items, each with a number and a description:

- 01** Opening: Evaluation of the Think Tank
- 02** Presentation of the results of the Think Tank
- 03** Presentation of the 2030 Agenda for Gipuzkoa
- 04** Towards Social Policies for Transition
- 05** Design of Futures
- 06** Design of Futures: probable and preferable scenarios
- 07** Close of session
- 08** Next Meeting: White Paper on Futures of the Welfare State

EVALUATION OF THE THINK TANK

01



Opening: The Think
Tank's Development
Agenda

Evaluation of the Think Tank

1. General evaluation (+)

90% of the Think Tank participants have a positive to very positive perception of the work performed during this first phase of the Think Tank.

Themes of agreement (more than 80% agreement).

- a) The Think Tank has fulfilled its objectives of fostering deliberation on social policies, building trust among the people/organisations involved, and fostering a shared vision on the issues.
- b) Integration (people and organizations) in the Think Tank was considered adequate (although there have been requests to incorporate users)
- c) The organization of the sessions was considered adequate (time, frequency, workload and modality of work).
- d) The Think Tank outputs and outcomes are scalable and facilitate deliberation

01

Opening: The Think
Tank's Development
Agenda

Evaluation of the Think Tank

1. General evaluation (-)

Topics where there is less agreement:

- a) **40%** of those surveyed think that the **Think Tank is not significantly transforming social policies**.
- b) **25%** of those surveyed consider that it **is not strengthening cooperation** between social policies and provincial agents.
- c) **35%** of those surveyed are unaware of the existence of the Think Tank's website (and those who are aware of it consider that it is static and does not fulfil the function of communicating the results of the Think Tank to the public).

01

Opening: The Think
Tank's Development
Agenda

Evaluation of the Think Tank

2. Recommendations (1)

- 2.1. Include users in the deliberative processes of the Think Tank, which would facilitate the capillarity of reflection and policies at a territorial level.
- 2.2. Promote a second phase going from a Think Tank to a Do Tank, i.e. moving from "deliberation" to "action" thanks to the development of pilot experiences co-designed by the Think-Do Tank.
- 2.3. Improve the Think-Do Tank methodology by interspersing theoretical reflection and analysis with practical cases and the design of proposals for improvement. The methodology should be able to better combine the intervention of experts and users.
- 2.4. Improve the composition of the Think Tank by improving the inclusion of groups that are currently underrepresented (such as child care, teen care, social inclusion, etc.).

01



Opening: The Think
Tank's Development
Agenda

Evaluation of the Think Tank

2. Recommendations (2)

2.5. Improve the Think Tank website not only to facilitate dissemination of the deliberation and results, but also to transform it into a platform for collaboration.

2.6 Use the White Paper as a mechanism not only to disseminate results but also as an educational support to guide future social policies (in relation to citizenship)

2.7. Continue with the Think Tank as a space for developing pilot actions and assessing the development of the White Paper (structured into an Action Plan and assessment of the degree of compliance).

A THINK TANK DEVELOPMENT PLAN (2021-2023) WILL FOLLOW SHORTLY

AGENDA GIPUZKOA 20>30

Agenda Gipuzkoa 20>30

Agenda Goals

ACCELERATION OF THE CHALLENGES

The health and economic crisis caused by the COVID-19 pandemic has exacerbated the challenges already existing in the social services system of Gipuzkoa, highlighting the system's strengths and weaknesses.

POLITICAL-INSTITUTIONAL DECISION

The General Assembly (parliament) of Gipuzkoa has passed a resolution (3 March 2021) calling for the development of an action plan to adapt the social protection system to the new situation arising from the Covid-19 crisis

DRIVING TRANSITION

In this context, the Department of Social Policies (DFG) is launching a participatory process to design the **Agenda 2020-2030 for Gipuzkoa** and an **Action Plan 2021-2023** with the strategic objective of promoting the transition towards a new care model in Gipuzkoa.

Agenda Gipuzkoa 20>30

Dimensions of Social Policies

AGILITY (short-term)

Contingency Social Policies. Actions linked to attending to the COVID-19 emergency in the different areas of social policies, offering a timely, flexible and swift response.

ADAPTATION (medium term)

Stabilisation Social Policies. Actions linked to an improvement in the quality of life of users by applying the regulatory framework in accordance with existing institutional powers/competences.

ANTICIPATION (long term)

Innovation Social Policies. Actions linked to the experimentation and generation of new products, services and/or methods that incrementally promote the change from a service-centred care paradigm to a person-centred one.

02 Agenda Gipuzkoa 20>30

Components of Transitional Social Policies

COLLABORATIVE GOVERNANCE

COMPONENT 1. This component provides supports to the space for collaboration and consensus-building around the central elements of the Agenda 2020-2030 for Gipuzkoa and 2021-2023 Action Plan

EXPERIMENTATION AND INNOVATION

COMPONENT 2. This component provides support to the development of the socio-technical experimentation and innovation (social, institutional and technological) that drives change in the care model (ecosystems)

AGENDA FOR CARE AND TRANSITIONS

COMPONENT 3. This component implements and develops the agreed actions for the three types of social policies in order to promote the Agenda 2020-2030 for Gipuzkoa and the 2021-2023 Action Plan

ASSESSMENT AND LEARNING

COMPONENT 4. This component develops a new networked evaluation system (participative and collaborative) to assess the impact and development of the Agenda 2020-2030 for Gipuzkoa and the 2021-2023 Action Plan.

02 Agenda Gipuzkoa 20>30

Axes of the Action Plan 2021-2023

SOCIAL CONTINGENCY POLICIES

AXIS 1. Support for social/healthcare management of Covid-19

AXIS 2. Support for psycho-social management of the consequences of COVID-19

AXIS 3. Adapting the public network to new social needs

SOCIAL STABILIZATION POLICIES

AXIS 4. Improvement of policies for residential centres (management, care model and architectural adaptation)

AXIS 5. Improving the wellbeing of users and professionals

AXIS 6. Developing a Digital Learning Platform

AXIS 7. Developing an Social Communication strategy

SOCIAL INNOVATION POLICIES

AXIS 8. Design of transition agendas (think tank, contrast groups, social service maps)

AXIS 9. Development of transition agendas (calls for experimental projects, promotion of local care ecosystems, etc.)

AXIS 10. Design and development of the Care Evaluation Agency

Agenda Gipuzkoa 20>30

Roadmap and Validation



STEP 1: Presentation of the main lines of the 20>30 Agenda and the 2021-2023 action plan to the Social Policies Commission of the General Assembly of Gipuzkoa for debate and compilation of contributions (*April 2021*)



STEP 2: Presentation of the aforementioned guidelines to the discussion groups listed below for discussion and compilation of contributions (*May 2021*)



STEP 3: Preparation of the final document "Agenda Gipuzkoa 20>30. Social Policies of Transition. Action Plan 2021-2023" (*June 2021*)



STEP 4: Presentation of the final document to the General Assembly of Gipuzkoa's Social Policies Committee, the discussion groups and society in general (*June 2021*)

DESIGN OF FUTURES

03

Design of Futures

Design of futures

Methodological limits

Foresight analysis and futures design are complex processes that require trend analysis, scenario design and strategic foresight techniques.

We have adapted the methodology to the Think Tank's operating methods in order to develop a future perspective

03

Design of Futures

Design of futures

Methodology used

What technique have we used?

A (relatively complex) form that sought to include three central axes:

- a) **The central hypothesis:** The Covid-19 crisis has transformed the current social policy paradigm. What scenarios are generated around this significant event? This exercise made it possible to contextualise the reflection on the future.
- b) **The probable future 2030:** To facilitate the exercise we have classified the probable futures into 4 types of scenario: a) continuity, b) collapse, c) new equilibria, d) transformation.
- c) **The preferred future 2050:** Open, reflexive and hypothetical futures. Two types of preferred futures emerge from the forms: Community Model and Technological Model of care.

Design of futures

PROBABLE FUTURES (2030)

Probable futures

Scenario 1: A new (but) non-innovative balance

Concrete and limited improvements are being implemented, but the essence of the model (limited mutualisation, residual role of public care compared to family care, de-professionalisation, difficulties for the public system to change the orientation of the system, etc.) are maintained.

There are new balances based on institutionalization, making limited adjustments to suit emerging needs and approaches. There continues to be a lack of coordination between Government-Services/Support resources-People/Families.

Social policies are subordinate to economic policies, competitiveness, employment and tax collection. These resources are not keeping pace with demands on all fronts: childhood, exclusion, dependency, disability, etc. Only an approach involving giving up personal time for social work can provide non-financial coverage of the growing needs. There is an improvement in social services.

Design of futures

PROBABLE FUTURES (2030)

Probable futures

Scenario 2: A new critical and disorienting balance

There is a growth in social spending in line with the growth of the elderly population. There is a tendency towards technification (digitalization) and loss of social focus of social policies. The technology already available today will start to be rolled out to accompany people throughout their lives: robotics, AI, home automation, etc. Technology can facilitate certain savings through more efficient processes. There is resistance to implementing a model based on personalization and free choice by people. Lack of coordination between systems to promote a care model based on remaining in the natural environment (home care). There is insufficient economic and social dignification of professional care and there is even expected to be some deprofessionalisation. Digitalisation emerges as a solution. Mass digitalization disorients / bewilders users due to the technology gap (technology advances faster than society)

Design of futures

PREFERRED FUTURES (2050)

Scenario 1: COMMUNITY MODEL (predominance of state and public)

The system is managed by a single institution, with sufficiently flexible and decentralized internal functioning. This institution is responsible for social policies throughout the province, structuring the services at *comarca* (supra-municipal) level. Municipal authorities will have merged into reasonably-sized units structured in sustainable ecosystems with new, but limited and coordinated power in the field of social services. In the future, local ecosystems will be characterized by coordination and collaboration between different systems (housing, employment, education, income guarantee system, health, etc.). Government focuses on ensuring the quality of direct care services, provided by small, locally-based firms and cooperatives. We are facing a paradigm shift: empowerment of the person. Institutional protectionism and welfarism are abandoned, transferring the protagonism to the individuals themselves, guaranteeing free choice and personalised care according to each person's individual needs. Prevalence of home-based care with strong links to the community (families, neighbours, networks). We also have a system based on prevention and anticipation in relation to personal health and lifestyle habits (exercise, social networks, late deterioration of cognitive abilities). Care is professionalized, with a major growth in immigrant caregivers (integrated via major investment in training to improve their knowledge, professionalization and decent employment). Informal care is marginal in the system. Social policies are more robust than they are today, with society's confidence and approval of their importance. Technology serves mainly to support and monitor processes, but it is marginal to care policy.

Design of futures

PREFERRED FUTURES (2050)

Scenario 2: TECHNOLOGICAL MODEL (predominance of the market and the private)

In the future we are facing a huge technological shift, but not a cultural one, so the digital transformation is not incorporated into the culture of care but into the processes of care. There is a lot of technological innovation, to such an extent that care-related niches are exporting technologies to other sectors and it is travelling around the world (Gipuzkoa is now a technological model). There is a significant state and business collaboration network. There is a gain in personalization, but a loss in control over data, and also in human contact in care. There is greater autonomy for people and their care, but less personal attention. More business, but fewer social relations. Prevalence of home-based care thanks to home automation, robotics and digital monitoring, but a new model of loneliness is emerging, albeit with supervision.

There are higher levels of risk-sharing in dependency: people finance services *ex ante* (in case they have need of them) and not *ex post* (when they have need of them). People can choose, within limits, the services they want to receive and the entity that provides them, from a range of providers and a wide range of services appropriate to people's needs. This system allows higher levels of security and the possibility of performing certain tasks efficiently. But the system is expensive and greater financial participation from families is required (which is also why private life-long savings systems were developed).

Governments only concern themselves with the direct provision of services when there is no other option (for the poorest); However, they have a role to supervise and evaluate the private services provided in their territorial area.

03

Design of Futures

Design of futures

GROUP EXERCISE

THEME TO WORK ON: RADICAL PROPOSALS / RECOMMENDATIONS LINKED TO PREFERRED FUTURES.

STEP 1: As a group, choose one of the two preferred futures designed from the forms.

FUTURE 1: COMMUNITY MODEL (predominantly state and community-based)

FUTURE 2: TECHNOLOGICAL MODEL (market and private predominates)

STEP 2: As a group, once you have chosen the future you are going to work with, discuss and propose **THREE RADICAL ACTIONS, which must be implemented before 2030** to achieve the preferred future (2050) you have chosen.

STEP 3: Present the designed proposals to the entire Think Tank (all groups).

End of session

04

Next session (24 June)

NEXT SESSION

- Discussion of the White Paper
- Presentation of the proposal for continuance of the Think Tank (2021-2023).

THANK YOU

d. Working proposal document

Design of futures

(27 May)

Working Agenda

- 1. Opening:** Presentation of the results of the evaluation of the Think Tank (questionnaire applied in the previous session) (Maite Peña)
- 2. 2030 Agenda for Gipuzkoa:** Presentation of the 2030 Agenda for Gipuzkoa for the promotion of Social Transition Policies (Carlos Alfonso)
- 3. Design of Futures:** Exercise in designing futures and five key axes for transition (Javier Castro-Spila)

Send in the forms (panel of future exercises) by 21 May.

DESIGN OF FUTURES

From anticipation to action

1. Purpose

The Etorkizuna Eraikiz Think Tank's deliberation group on the Futures of the Welfare State plans to structure its deliberations and proposals in a White Paper. The book identifies the challenges of the present and the future of social policies in Gipuzkoa, offering a set of actions to promote social policies for transition. The latter are oriented towards managing the transition from a service-centred care model to an ecosystem and people-centred care model.

Within the framework of drafting the White Paper, a futures design exercise was proposed at the Think Tank session on 27 May to explore *probable* and *preferable* scenarios for the Welfare State in Gipuzkoa. The design of futures is an additional ingredient that will make it possible to identify horizons and actions for Social Policies with a view to promoting long-term transitions.

In futures theory all futures can exist in the future. To better understand this statement, it may be illustrative to explain the central elements of the *Futures Cone* (Figure 1). Two key elements in the timeline become obvious in the Futures Cone: a) Different types of

events and b) Different types of future. Thus, the Futures Cone shows that: a) There is no future, but rather futures, b) All futures compete in the present, c) Designing futures in the present allows us to design futures for the future.

A classification of futures that emerges from the Futures Cone:

Probable Futures: These are the expected futures that can be interpreted thanks to trends and statistical data (weight of the pathway). These are the futures related to the cost of inaction (what happens if we do nothing)

Preferable Futures: These are the futures desired or preferred by a social group that drive dynamics of divergence. These are the futures that are related to the cost of innovation (what happens if we do something).

Possible Futures: These are those futures that might happen (preferred / probable futures), i.e., that are likely to exist in the future either through inaction or through innovation.

Uncertain Futures: These are "chaotic", unpredictable futures, derived from unexpected events, which drive the dynamics of contingency. These are the futures that cannot be designed or foreseen.

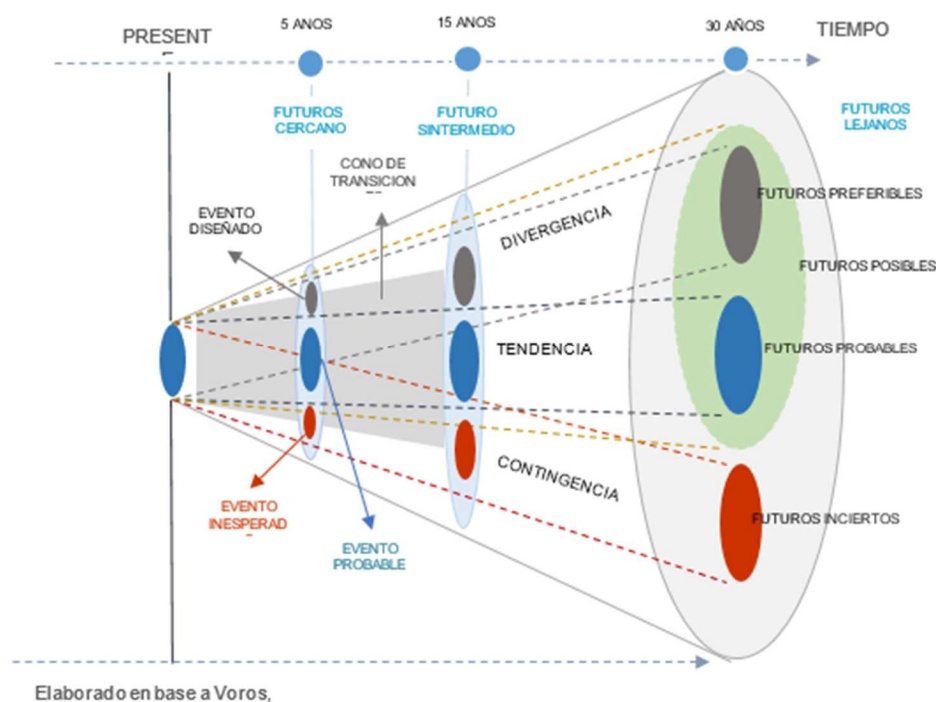
The timeline also offers another type of futures, namely:

Near futures: These are the near futures, which are easier to estimate or foresee (trends) and which range between 3-5 years. They are the most familiar, where no major variations and transformations are expected.

Intermediate Futures: These are futures at between 5-15 years, in which some trends can be extrapolated, and preferable futures can be designed. They combine familiar (contextual) elements and so-called post-normal elements, which are removed from the usual, normal, familiar.

Distant futures: These are futures at between 15-20 years. They are the most *speculative* and removed from the familiar environments of thought and action. These are futures that require greater imagination for the design of long-term systems.

Futures are usually explored as the design of scenarios, but these only refer to packages of futures. Scenarios are more specific and refer to more specific areas of a possible future.



2. Methodology

There are many techniques for approaching futures design that involve different levels of complexity and time for reflection and consensus. Adapted to the way Etorkizuna Eraikiz Think Tank works, we propose a basic methodology adapted to the design of futures/scenarios. Within the framework of the Think Tank, it is assumed that the design of futures is a collective work that augments capacity for observation and trains capacity for projection.

2.1. Main hypothesis of the exercise

The emergence of the COVID-19 pandemic, viewed as a *contingent event* of global impact, has modified the parameters and dynamics in which social policies had been operating. The crisis has prompted and required a paradigm shift in the care model. Thus, the definition emerges (as a framework for action) of **Social Policies for Transition** expressed as a set of short-term actions designed for the long term which promote,

gradually and incrementally, a change from a model focusing on services to one focusing on ecosystems and people.

2.2. Framework for an exercise on the future

Stage 1: Define the purpose and object of the exercise

Purpose: The proposed exercise seeks to identify, from the Think Tank's perspective what horizons (futures/scenarios) would offer elements for promoting transitions in the care and attention model. This is not scenario planning (which requires a full foresight study) but scenario development, which calls instead for the design of particular stories about the future.

Purpose: The focus of the exercise is the care model related to the Social Policies of Gipuzkoa (care linked to disability and ageing; gender violence; childhood and teenage years; and social inclusion).

Timescale: The time horizon for the reflection is 10 years (2020-2030) (intermediate future).

Spatial dimension: Province of Gipuzkoa.

Stage 2: Prospective diagnosis (individual work)

Context analysis: The aim is to identify the central elements of the social policy environment in Gipuzkoa (political, social, cultural, legal, economic and ecological). In order to conduct this analysis feasibly within the framework of the Think Tank methodology, an individual exercise has to be carried out using the futures wheel (or impact wheel) technique. One of the central elements of designing futures is that they must be based on the facts of the present. This allows us to explore divergent scenarios. A present fact is an "event" whose nature makes it possible to describe potential radical transformations in the long term. In this case, the Covid-19 event is considered a disruptive event that breaks the current trajectory of the system and opens up new perspectives for social policies and the care model for the future (see Exercise No. 1).

SUMMARY: In this exercise the central question is: **What impact has the Covid-19 crisis had or is it having on the care model and social policies? (Timescale 2021)**

Stage 3: Construction of futures: likely scenarios (2030) (individual work)

Image of the future: The image of the future refers to the relatively articulated description of how the object that has been subjected to foresight analysis is configured in the future. In the case of the Think Tank, this is the *care model*. In order to offer a future picture, we start with an analysis of the environment (Exercise 1), which is codified in terms of probable scenarios. To conduct this exercise on an image of the future, it is proposed to use "Scenario Archetypes" (see Exercise 2, enclosed).

SUMMARY: In this exercise the central question is: **What is the most likely scenario in 2030 that is configured as a consequence of the Covid-19 crisis? (Time horizon 2030)**

Stage 4: Construction of futures: preferred scenarios (2050) (individual work)

Horizon analysis. The aim is to explore the discontinuities caused by a significant event such as Covid-19 on social policies. This exercise seeks to structure a speculative image about the future.:

To perform the horizon analysis, we explore the "weak signals" that emerge from the forking of the ways and the emergence of futures derived from the Covid-19 crisis. A weak signal would be an element that *does not* agree with the trend or with a current system of relationships. It is a *different* "micro-event" which, in the long term, is capable of creating an anomaly (either positive or negative). Thus, weak signals can be defined as *events that are not very significant* in the present but have the potential to change the future if they develop or expand over time (see Exercise 2 in the appendix).

SUMMARY: In this exercise the central question is: **What will the care model in Gipuzkoa be like in 2050?**

Stage 5: Scenario Evaluation and definition of actions (collective assignment)

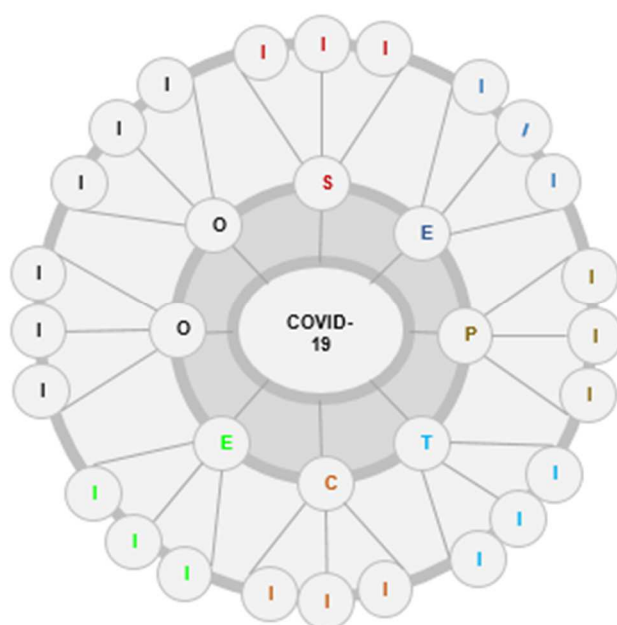
Scenario evaluation is the assessment of the probability of these scenarios talking place and the preferability of individually designed futures (in the exercises). This activity will take place online in the session on 27 May. In the scenarios designed by the participants, consensus will be sought on which scenarios are the most probable in 2030 and which are preferable in 2050. In addition, an attempt will be made to define the five central axes for promoting a transition towards preferable futures.

SUMMARY: In this exercise the central question is: **Which probable and preferable futures do the Think Tank as a whole assume as possible? What five lines of action should be promoted to foster a transition towards preferred futures?**

EXERCISE PANEL

EXERCISE No. 1: Prospective Diagnosis

This exercise should answer the question: **What has been the impact of COVID-19 on the care model and its consequences for social policies in Gipuzkoa?** (Analysis of the Present and trend-breaking) (2021). To answer this question, we will use the futures wheel which allows us to identify different levels of impact of a significant event.



It is not necessary to be an expert to work with the futures wheel. The wheel has several levels.

1. In the central circle we have an event that triggers a set of impacts (social, economic, political, etc.). In this case, the Covid-19 crisis.
2. In the second circle we have the direct impacts of the event

(each letter stands for a different type of impact: P=Political, E=Economic, S=Social, etc.)

3. In the third circle we identify indirect impacts (second-wave impacts).

As mentioned, the Covid-19 crisis is seen as the turning point in the care model in the province of Gipuzkoa.

To perform the exercise, complete the impacts in Table No. 1 that are operationalised by the futures wheel. In this table, you are asked to identify just three indirect impacts to reduce the complexity of the exercise.

Tabla Nº1: Rueda de Futuros		
Evento significativo	Impacto directo	Impactos Indirectos
COVID – 19 en Gipuzkoa (2019-2020-2021)	Políticos	1.
		2.
		3.
	Económicos	1.
		2.
		3.
	Tecnológicos	1.
		2.
		3.
	Sociales	1.
		2.
		3.
	Culturales	1.
		2.
		3.
	Otro (señale)	1.
		2.
		3.

Example: Social Impacts (second wave): 1. Isolation and new experiences of loneliness, 2. New ways of relating, 3. Increase in social control.

EXERCISE No. 2: Probable Futures

This exercise should answer the question: **What is the most likely scenario for 2030 as a result of the Covid-19 crisis? (Time horizon 2030).** The exercise consists of identifying three central elements emerging from the Covid-19 crisis: a) Which elements continue from the care model (trajectory)?; b) Which elements are discontinued in the care model (emergency)?; c) What model of care will we have for the year 2030 (probable scenarios)?

To build the probable scenarios, we will use the Scenario Archetypes, which are classed into four types:

a) Continuity: Where the care model continues without major changes, structured around the current trend and trajectory of the system. In this case, no significant changes in social policies are foreseen.

b) Collapse: Where the care model is no longer working, and no options or solutions are in sight. In this case, Social Policies are left discontinued without alternatives for the future.

c) New Balances: Where the model of care is adapted to the new context to guarantee its continuity, but there are no radical changes in the fundamental or core aspects. In this case, social policies are adapted in a limited, peripheral way, guaranteeing the continuity of the central axes of the existing model.

d) Transformation. Where the care model is radically transformed, promoting new forms of care, breaking the trend and trajectory of the system, with viable and sustainable alternatives. In this case, Social Policies change the rules of the game, the legal frameworks, the ways of managing and integrating the actors and the means of assessment.

The care model here is not limited to the care of the elderly, but to lifelong care (life cycle: childhood, adolescence, adulthood and older adulthood), from the perspective of self-care, family support, social support (close communities), public policies (with a focus on social policies - social services).

To perform the exercise, the three elements mentioned above must be completed.

Table 2 therefore operationalises the construction of probable scenarios.

Tabla Nº 2: Escenarios Probables (Horizonte 2030)	
1. ¿Qué elementos/dimensiones del modelo de cuidados CONTINUARÁN en el 2030?	
1.1. Modelo de cuidados	
1.2. Políticas Sociales	
2. ¿Qué elementos/dimensiones del modelo de cuidados NO CONTINUARÁN en el 2030?	
2.1. Modelo de cuidados	
2.2. Políticas Sociales	
Tipo de Escenario 2030 (según los Arquetipos de Escenarios) (describa y fundamente su elección).	

EXERCISE NO. 3: Preferred Futures

This exercise should answer the question: **What will the care model in Gipuzkoa be like in 2050? (Timescale 2050)**. The exercise consists of modelling the (long term) future, promoting a prospective image, trying to extract it from the present. The aim is to identify preferences in the care model for 2050.

To facilitate the exploration of futures, four "future descriptors" have been identified for the 2050 model of care and social policy. The key question is to imagine: What will it be like? ... (technology, personalisation, ecosystems, social policies).



In order to operationalise the quadrants of the future, Table 3 is proposed, into which the variables can be entered. One way to think about these dimensions is to identify "weak signals". Weak signals are marginal events, experiences and innovations that are peripheral in the present but have the potential to modify the system in the future.

Tabla Nº 3: Escenarios Preferibles (Horizonte 2050)
1. ¿Cómo será la personalización de los cuidados en el 2050 en Gipuzkoa?
2. ¿Cómo será la tecnología ligada al cuidado en el 2050 en Gipuzkoa?
3. ¿Cómo serán los ecosistemas – gobernanza del cuidado en el 2050 en Gipuzkoa?
4. ¿Cómo serán las Políticas Sociales en el 2050 en Gipuzkoa?