

"ALEXANDRU IOAN CUZA" UNIVERSITY

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Abstract of the PhD thesis

SOCIAL ASSISTANCE SERVICES MANAGEMENT

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In attention of _____

We inform you that on December **19, 2013**, in room **502**, Romtelecom Building, Miss. **Mogîrzan** married **Zodieriu Elena**, from the Faculty of Economics and Business Administration, will present in public meeting, the PhD thesis intitled „ **Social assistance services management**”, in order to get a doctorate (PhD) degree in **Management**.

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We are sending you the summary of the PhD thesis and we invite you to attend at the public meeting to present the thesis. The PhD thesis can be consulted in the library of the Faculty of Economics and Business Administration.

Rector, Prof.dr. Vasile Ișan

CONTENTS

1. Importance and the relevance of the theme	4
2. Aim and general objectives of the research .....	.
3. Research hypotheses .....	.
4. Bibliographic documentation on the topic .....	.
5. Research methodology .....	.
6. Structure of the thesis .....	.
CHAPTER 1 - SOCIAL SERVICES: CONCEPTS, OVERVIEW	13
1.1. Social assistance - important component of the social protection	13
1.1.1. Concepts on social services	17
1.2. Social services in the European context	19
1.3. Necessary conditions for the provision of social services in Romania	22
1.4. Classification of social services	25
CHAPTER 2 - ELDERLY PERSON AS SUBJECT OF SOCIAL ASSISTANCE SERVICES	27
2.1. Definition, significances	27
2.2. Adapting the social and health systems to the needs of older people	30
2.3. Determining the need for social assistance services in geriatrics	33
2.3.1. Evaluation of elderly persons' dependency	34
2.3.2. Diagnosis of dependency	36
2.3.3. Classification of older people according to the degree of dependence	38
2.4. Typology of elderly beneficiaries of social assistance services	40
2.4.1. Elderly people with dependence or semidependence due to age, disability, chronic illness or terminal illness	40
2.4.2. Elderly people with disabilities (mental, physical, psycho-physical, neuromotor, HIV-AIDS, rare diseases)	40
2.4.3. Older persons affected by loneliness, problems in couple or widowhood	42
2.4.4. Older people addicted to alcohol	42
2.4.5. Elderly persons, victims of abuse or negligence	43
2.4.6. Elderly people affected by poverty and social exclusion	44
2.5. Analysis on social protection of the elderly	44

2.5.1 Expenses for social protection	44
2.5.2. Expenses fo elderly care	47
2.5.3. Projections on ageing of the population.....	49
2.5.4. Percentage of carers reported to total population	51
2.5.5. Number of beds in elderly care institutions per 1000 inhabitants.....	53
2.5.6. Percentage of institutionalized elderly reported to total population over 65 years old (hospitals were excluded).....	54
CHAPTER 3 - WAYS OF ACHIEVING THE MANAGEMENT IN INSTITUTIONS THAT PROVIDE SOCIAL SERVICES TO SENIORS.....	56
3.1. Social assistance institutions .....	.
3.1.1. The importance of the social assistance institutions.....	56
3.1.2. Features of social service institutions and organizations	58
3.1.3. Social assistance institutions with responsibilities in the elderly field	59
3.2. Management functions of social assistance services .....	.
3.2.1. Outlook	65
3.2.2. Organizational function	66
3.2.3. Coordination function.....	70
3.2.4. Involvement	71
3.2.5. Control - assessment function	73
3.3. Policies and strategies for the elderly .....	.
3.3.1 International recommendations regarding social policies for the elderly.....	74
3.3.2 Social policy for the elderly in Romania.....	78
CHAPTER 4 - TYPES OF SOCIAL ASSISTANCE SERVICES FOR THE ELDERLY.....	84
4.1. Home support for the elderly in the European context .....	.
4.1.1. Forms of home support	85
4.1.2. Methods of maintaining the senior in its origin environment.....	87
4.2. Home care in Romania.....	.
4.2.1. Granting of authorizations for home care services	91
4.2.2. Conditions for ensuring home care services.....	92
4.2.3. Providing social and medical services at home	94
4.2.4. Palliative care services	96
4.3. Social assistance services in residential institutions .....	.
4.3.1. The importance of residential institutions	99

4.3.2. Shelter for elderly	101
4.3.3. Conditions to access the services of a shelter for elderly	102
4.3.4. The principles on which social services are provided in a shelter for the elderly	104
4.3.5. Cost standards for the residential services.....	105
4.4. Other types of residential centers and social services for the elderly	108
4.5. Quality of the social assistance services.....	112
4.5.1. International concerns on the quality of the social services	114
4.5.2. Concerns regarding the quality of the social assistance services in the Romanian legislation	117
4.5.3. The quality of care in the elderly shelters	118
4.5.4. Quality of social services models	120
CHAPTER 5 - RESULTS OF THE RESEARCH CONCERNING THE SOCIAL ASSISTANCE SERVICES MANAGEMENT	123
5.1. Analysis of the elderly care units	124
5.2. Comparative analysis of the satisfaction degree of the elderly hospitalized in public and private care centers	145
5.3. Comparative analysis of the satisfaction degree of the employees from public and private care centers.....	177
GENERAL CONCLUSIONS and PERSONAL CONTRIBUTIONS.....	199
1. General conclusions	199
2. Personal contributions	207
SCIENTIFIC ARTICLES and NATIONAL AND INTERNATIONAL CONFERENCES	209
Articles published in B + journals.....	209
National and international conferences	209
LIST OF TABLES	211
LIST OF FIGURES	213
REFERENCES	215
APPENDIX	229
1. Questionnaire regarding the organization the elderly care facilities and services provided to beneficiaries in these units.....	229
2. Questionnaire for assessment of the satisfaction degree of the beneficiaries defined.	236
3. Questionnaire regarding the staff satisfaction from elderly homes.....	241

Keywords: social assistance services, elderly, elderly care facilities, beneficiary level of satisfaction, staff satisfaction from the elderly care units

The importance and the relevance of the theme

The social services aim to maintain, restore and develop the abilities of individuals and intervene in emergency situations (abandoned or abused children, women victims of domestic violence, elderly) or in difficulty disease (absolute poverty, drug or alcohol addicts, unemployed, ex-offenders, people with chronic or terminal diseases, etc.). One of these categories of persons was the subject of this thesis, namely the **elderly**. In the context of economic and social realities from our country, more and more elderly people choose to spend the last years of their lives in homes for the elderly. Reasons for choosing this way are many, but the most important are the lack of support in personal care and the need for personal company. These two reasons were often invoked by the studied elderly, adding also that they do not want to be a burden to their children. One of the problems encountered when an elderly person decides to enter into a home is the option dilemma between a public or private home. In these circumstances, the present study aims to present from public-private comparative perspective, the realities of the elderly centers, both in terms of the material and human conditions and the satisfaction degree of the beneficiaries and employees from these centers. In our country the research aiming the management of the institutions and of the elderly social assistance services, both in terms of providers and beneficiaries, are in an early stage. Unlike other countries from the European Union, in Romania the attention has not been particularly focused on this sector, which is very important in health/social protection domain. The study of the management of such institutions becomes an interesting option, the results basically offering a series of new knowledge that can form the basis for the formulation of any policy to improve and adequate the services to the needs of beneficiaries, and also members of the organization.

Aim and general objectives of the research

Aim of the research: knowing the realities regarding the management of elderly care facilities, in order to improve services provided to beneficiaries by the social assistance services

Objectives of the research:

- Highlighting the material and human offer from the elderly care facilities in order to provide quality social services.
- Highlighting the available services in elderly care facilities.
- Making public-private distinction in terms of care recipients in the concerned shelters.
- Identification of satisfaction degree of the social assistance services beneficiaries from the elderly care homes.
- Making public-private distinction from the perspective of the employees from the elderly care homes.
- Identification of the staff satisfaction degree towards the working conditions - remuneration, working hours, institution endowment, management.

Research hypotheses

1. Ensuring optimal working conditions by providing materials and equipment that enable the proper conduct of tasks within the organization, contributing to increased job satisfaction of the employees from elderly care homes.
2. Elderly from private sector are more involved from the social point of view than those from public system units.
3. The elderly from the private sector are more satisfied regarding the services received in elderly care homes than those from the public system.
4. The employees from private sector are more satisfied towards the work from elderly care homes than their counterparts from the public sector.

Bibliographic documentation on the topic

Given the complexity and the specific of the research topic, to its achieve, the theoretical underpinning consisted of fundamental work and articles of some authors from our country and abroad in the field of the management and social assistance, and statistical

sources provided by authorized institutions, recognized at European and national level: Census, Eurostat, O.E.C.D., I.N.S.România, Ministry of Labour, Family and Social and Elderly Protection.

Research methodology

Type of research: *Exploratory*. The call for exploratory research was carried through the innovative aspect in terms of subject (*institutions and elderly care services management*) and new courses of action which are brought to the forefront through empirical approach. Because hospitalization in a home for elderly is a viable solution for more and more elderly people from Romania, the research aims to provide from public-private comparative perspective, the existing possibilities in elderly centers, when they decide to be hospitalized in such a home. As a collecting field data method we used *field investigation based on a questionnaire*. We have used three different questionnaires applied to three target groups: elderly people care institutions representatives, beneficiaries (elderly - residents in homes) and employees in elderly care facilities. The questionnaire used in the first study was taken and adapted from the National Council on Ageing Report entitled *Improving Quality of Life for Older People in Long-Stay Care Settings in Ireland*, conducted by a team of scientists from Ireland in 2006. Data from the questionnaires were entered and processed in SPSS v.19.0 and graphs were made in Excel.

The **samples** were constructed using the quota sample method and were composed of:

- **9 elderly care units** grouped as follows:
 - **4 establishments from the public system:** *Roznov* Retirement Home – Neamț County, *Solca* Retirement Home – Suceava County, *Pietricica* Social Center - Retirement Home fom Piatra-Neamț – Neamț County, *Broșteni* Medical and social establishment – Suceava County.
 - **5 establishments from the private system:** *Bethesda* Association of patrimonial purpose-Home for the elderly, Ilișești – Suceava County, *St. Andrew* Settlement of social assistance, Fălticeni – Suceava County, *St. John the New* from Suceava Retirement Home, *Geana* - Residential Elderly Care Center from Vama – Suceava County, "*The Holy Virgin Protection*" Christian charity settlement, Bogdănești Monastery – Suceava County.

- **200 care homes hospitalized elderly** (50% of the elderly are from public centers and 50% of the the elderly are from private centers).
- **80 employees within elderly care homes** (50.60% from public sector and 49.40% from private sector). The proportion of employees in terms of profession is: 37.04% sisters, 17.28% chefs, 14.82% nurses, 8.64% administrators, 6.17% social workers, 3.70% carers, 3.70% guardians, 3.70% psychotherapists, 2.74 % chef aid, 1.24% laundress, 1.24% cashiers.

Period of data collection: April 2012 - October 2012.

Structure of the thesis

The paper entitled "Social assistance services management" includes: introduction, five chapters, conclusions and personal contributions, list of articles and participation to national and international conferences, 46 tables, 50 figures, bibliography and appendices.

Chapter 1 – „*Social services: concepts, overview*” – highlights the conceptual approach of of social assistance services as part of social protection in national and international context. The concept of social assistance services involves several meanings: in American social assistance systems we meet the concept of human services, in Anglo – Saxon social assistance systems we meet the concept of social care and in African countries and in some Arabic countries is preferred the concept of community development (Buzducea, D., 2009). In the opinion of the European Council Report 2003 - 2004, expressions like social services, welfare, social security and social assistance are often used in an interchangeable manner, as if they have the same meaning and referring to the same services. The literature uses the expression *individual social services*, which emphasizes the personalized services designed to meet the needs of private users (such as, for example, placing an elder in an institution) and not a category of users (such as benefits for unemployed people). Granting of social services can be achieved only if the social service providers are accredited. Accreditation is the process by which social service provider demonstrates its own functional, organizational and administrative capacity in providing social services, subject to quality standards in force, and the state recognizes the competence of the supplier to provide social services.

Chapter 2 – „Elderly person – subject of social assistance services” – highlights the elderly person as "a person who has reached retirement age established by law" and which, by social assistance law, can receive social services. For these services benefit seniors which are in a degree of dependence according to the evaluation grid for elderly needs. To identify and appropriately respond to the social needs of the elderly and to the particular conditions in which they are located, **social services** are primarily organized in local communities. Local public administration authorities have the responsibility to identify and assess the needs of older people, to organize, plan and ensure the funding or co-funding of social services and the public and private social services providers have the responsibility to comply the quality standards. The family role remains paramount in elderly informal care in Europe, accounting for 75-80% of total care. Northern European countries tend to establish national solidarity and the continental and southern Europe, work and family solidarity. The first are financed by taxes following to find alternatives to institutionalization (home help). Other countries such as France, Germany, Belgium, Luxembourg, Austria have added a new source of funding for addiction "fifth risk". By contrast, Italy, Spain did not propose such a solution only if there is no family help for the elderly. Instead, throughout Europe the focus is on local community in addiction support (Brown, E. et al., 2005).

Chapter 3 - „Ways of achieving the management in institutions that provide social services to seniors” –presents the institutions attributions with responsibilities in the elderly area both nationally and locally, and also social policies in social services for the elderly. The central public authority, which develops the elderly social assistance policy and promote the rights of older people, is the Ministry of Labour, Family and Social and Elderly Protection, proposing legislative measures in this field (including the National Grid of assessing needs of older people), individually or in collaboration with other ministries or institutions, and provide methodological guidance, coordinate, control and evaluate the application of republished law no.17/2000 and social assistance law. Local councils have an important role in the case of older people by hiring home care staff, providing hourly, part-time or full time care to dependent elderly according to national assessment grid, covers the cost of home care staff salaries (Companion) and annually decides on average monthly amount of maintenance payable by older people accommodated in retirees homes or by their supporters. Informal support system remains the main actor in assisting the elderly, both in urban and in rural areas. As a general line, the social assistance services are not meant to replace services provided by family than where they do not

exist, their role being to complete and supplement. Regarding this issue, the organization of support services for families caring for dependent elderly and the diversification of institutionalized social assistance services for the elderly (day care, household help, accompanying shopping service, companionship, recreational services) are needed. In conditions of underdevelopment and failure of these services, it can not be a fundamental respect for the elderly, we can not speak about the fundamental right of the elderly to choose the preferred form of assistance. The assistance and care of the elderly in residential system is carried out in homes for the elderly. The organization and operation of these homes is provided by the republished law no.17/2000 on social assistance for elderly.

Capitolul 4 – „Types of social assistance services for the elderly” – includes the presentation of social services at home and at elderly care institutions (homes for the elderly) in national and international perspective. Social services at home are nursing home care services spread in western Europe countries. The forms of the home aid are: domestic help, personal assistant, gardening activities, home maintenance, home meal preparation, collecting and delivering ironed laundry, accompaniment for dependent or disabled elderly, nurse, except medical services, etc.. The shelter for elderly people operate under the Local Council or private providers (NGOs) authority and is designed to ensure local implementation of policies and strategies of the elderly social assistance by maintaining, restoring and developing the individual capacity to overcome a need situation, where the person or family is unable to resolve alone. The object of the activity is elderly caring in the shelter, by providing the appropriate conditions for housing and food, medical care, rehabilitation and adaptation, occupational therapy and leisure activities, social and psychological assistance. The services provided to older people in elderly homes is granted based on a **contract**, approved by the Order of the Ministry of Labour, Social Solidarity and Family nr.73/2005 regarding the approval of the contract model for the provision of social services, called **service contract** between the institution head and the beneficiary older person or his legal representative, in compliance with legal provisions in force.

Chapter 5 – „Results of the research concerning the social assistance services management” – present, from the public-private comparative perspective , the realities from nine elderly homes (4 public and 5 private).

The research focused on three dimensions, which have an interdependent relationship.

5.1. Analysis of the elderly care units

In this analysis on profiles of the social assistance units dedicated to elderly care, we highlighted their main features, starting from: type of unit, number of residents, payments made by the residents of units, types of provided services, information on the beneficiaries and personnel, equipment, residents' rights, pecuniary aspects etc.. The first item of the study requested the institutions representatives to fit the working unit in the category that best describes the offered services. Out of the nine targeted units, 5 are characterized as private elderly homes and 4 provide the same services, but in public sector.

➤ **The number of residents who belong to the *long-stay/permanent* category**

Most residents belong to the 65 -74 years age group, their total being 163. At small difference is group with residents of 75-84 years old, with a total of 159. There are a total of 23 institutionalized persons under 65 years old.

➤ **Average monthly payment made by institutionalized residents**

Older people who have their own income and are kept in homes as well as their legal guardians are required to pay a monthly contribution of maintenance, established based on the average monthly cost of maintenance.

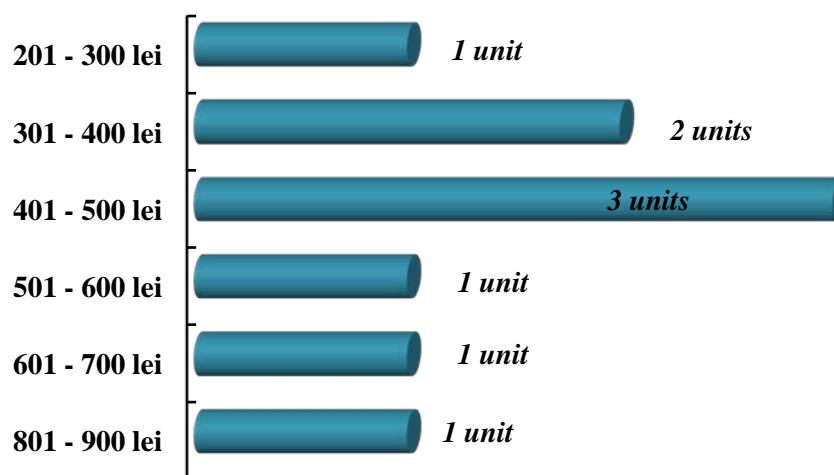


Fig. 5.3 The distribution of the amounts paid by the residents for the provided services

Regarding the amounts charged for accommodation, public homes prices are 301-400 lei, 401-500 lei in two cases and 501-600 lei in one case. In the private institutions there is a wide range of categories of tax: 201-300 lei, 301-400 lei, 401-500 lei, 601-700 lei și 801-900 lei. The smallest amount is paid to the St. John shelter of Suceava, and the highest amount to the Bethesda shelter (fig.5.3).

5.2. Comparative analysis of the satisfaction degree of the elderly hospitalized in public and private care centers

This analysis aimed to highlight the reasons which have led to choose the placement in a home, elderly perceptions about the quality of services received in the home (quality of food, general conditions of accommodation, sanitary and medical care conditions etc.) as well as their concerns at the shelter.

➤ Age of the respondents (elderly from homes)

In figure 5.15 is represented the distribution of the studied elderly by age. The largest share (41.50%) holds the age group 76-85 years, followed at short distance by the 65-75 years group.

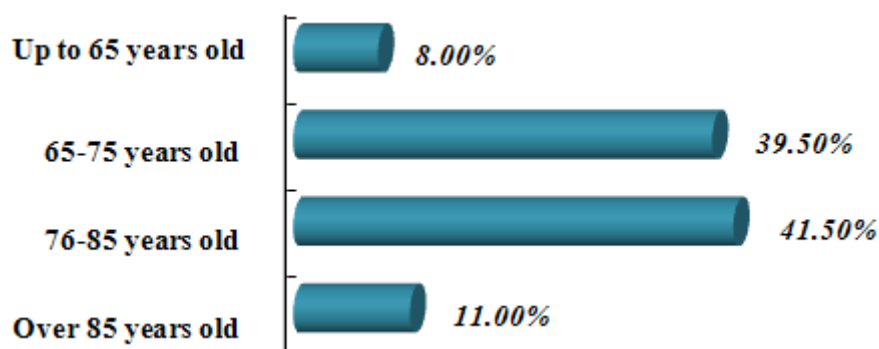


Fig. 5.15 Distribution of respondents by age

➤ The perception of residents concerning the conditions from the elderly home (the accommodation)

Elderly people who have opted for internment in a private care center appreciates much more the *general conditions from the shelter* compared with those institutionalized in the public system. 64% of respondents from the private sector appreciate the existing conditions in the home as excellent and only 36% of subjects from the public sector have said the same thing (fig.5.19).

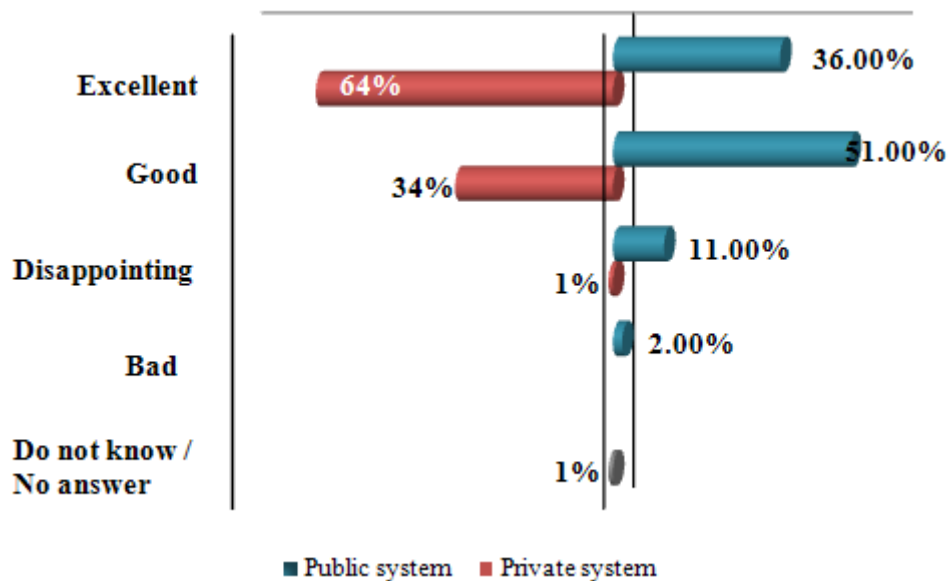


Fig. 5.19 The degree of appreciation of the general conditions from the shelter

The residents' discontent on housing conditions arises from the fact that there is no separation of the healthy persons from the bedridden people or those with mental illness.

➤ **Appreciation of the hygienic and sanitary conditions offered by the center among the elderly**

Within the above component also take part the evaluation of the hygienic and sanitary conditions offered by the center (fig.5.20). Persons admitted to private care centers are very satisfied to a higher extent than those from in homes with public management, with the *hygienic and sanitary conditions* (83% - private system, compared to 49% - the public system) and the *quality of offered food*, which is considered diverse (74% - private system unlike the 29% - the public system).

➤ **Assessing the quality of food offered in the homes**

Another indicator of "hotel conditions" in care centers is the satisfaction degree regarding the menu. As shown in fig.5.21 there is a high percentage (74%) in the private sector who appreciates food as diverse and 25% as acceptable, while in the public sector 4% said that the food has poor quality. Most people from public centers said that the meat often is missing from the menu (Solca shelter). Most of the elderly consider a varied menu when it contains: more pasta, fruit, sweets, more vegetables, meat, traditional food, fasting food, more components in soups.

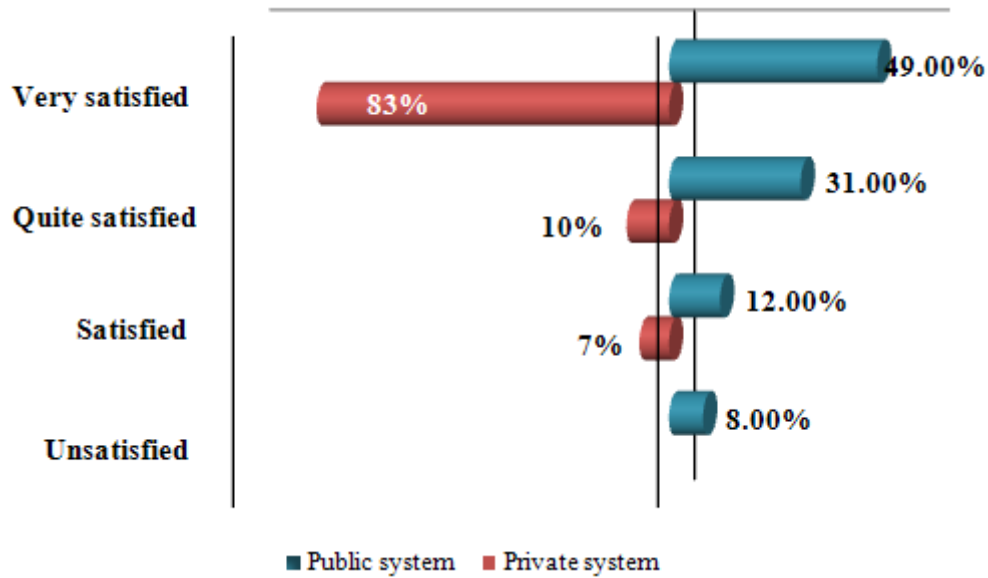


Fig. 5.20 The degree of appreciation of hygienic and sanitary conditions from shelter

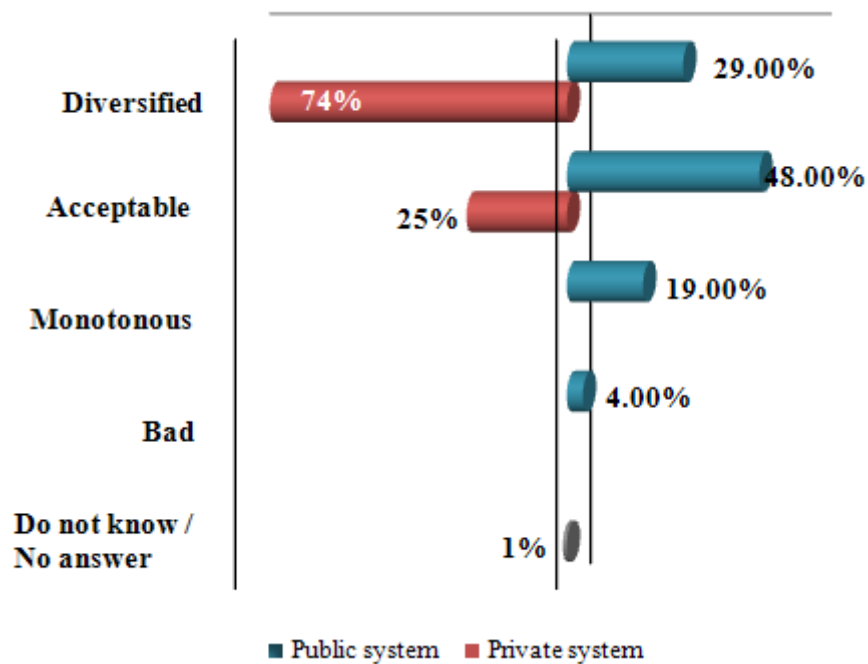


Fig. 5.21 Degree of appreciation on the quality of food offered in the shelters

➤ **Grades given by residents regarding the perception of services quality received in the shelters**

Asked to give one grade from 1 (lowest) to 10 (best) to assess the quality of services received in the center, as shown in Table 5.25, unlike private units, whose residents evaluated, in the proportion of 96%, with the highest scores the quality of services

provided by the center, for the counterparts from public centers there is a greater dispersion of responses on the scale, 30% of elderly assessing grades from 3-8.

Table 5.25 Grades given by residents on the quality of services received

Grade	<i>Public system</i>	<i>Private system</i>
3	2%	0%
5	1%	0%
6	4%	0%
7	8%	2%
8	15%	1%
9	28%	10%
10	38%	86%
<i>Do not know / No answer</i>	<i>4%</i>	<i>1%</i>

Most of the bad grades from the public system have been given by residents of Solca and Roznov centers and were given into account the fact that there is no safe drinking water in the shelter, there are still specific type of hospital wards where large numbers of residents are accommodated in a salon or the independent residents live with those with mental or impairments disabilities. Although there were a few small grades in the private sector, however, the largest percentage is in grade 10, this showing a very good quality of the services from private homes for the elderly.

5.3. Comparative analysis of the satisfaction degree of the employees from public and private care centers

The employee satisfaction is an internal determinant of service quality. Internal environment in which the employees work, the selection and development of their profession, compensation and value recognition system, access to information for customer service, technological equipment and facilities available to them, including how the job is designed, are key factors that determine their satisfaction. The study was conducted on a sample of 80 employees from public and private elderly homes, distributed as follows: 49.40% in the private system and 50.60% in the public system, as shown in Figure 5.33.

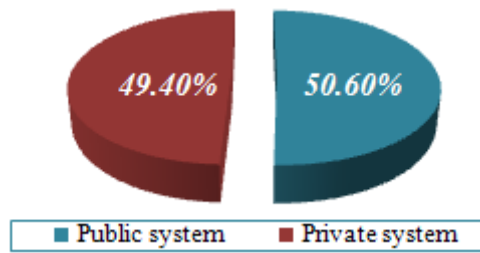


Fig. 5.33 Distribution of the employees from the public and private centers

➤ **Assessment of the working conditions in the elderly centers by the employees**

As shown in Figure 5.37, there are large differences between the private and the public medium regarding the perception on working conditions in homes. *The private sector staff have a high degree of satisfaction with working conditions. Although both systems staff appreciates, overall, working conditions as satisfactory, the private sector is characterized by a significant percentage allocated to very good category (70% compared with 29.30% in public homes). The number of respondents assessing the conditions as satisfying sums up to 17 percents among public centers and only 2.50% in private centers.*

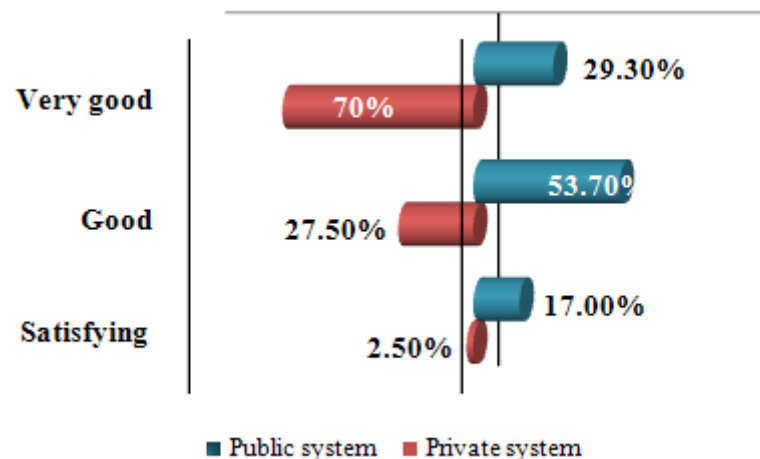


Fig. 5.37 Appreciation to the working conditions from centers of the employees

➤ **Job satisfaction of the employees**

Regarding the satisfaction degree towards the current state from the professional point of view, both categories of employees said that they were mostly satisfied (fig.5.40). However, at the level of *very satisfied / unsatisfied*, the ratio is higher than one in the favor of private centers, which confirms hypothesis 4. Here we identify a much higher percentage of the people who are very satisfied. In general, there are few situations in the public environment to which the employees say they are very satisfied. Compared to the

private space where we can talk about a given state of satisfaction, the public sector staff is somewhat dominated by apathy and a slightly uncertain climate.

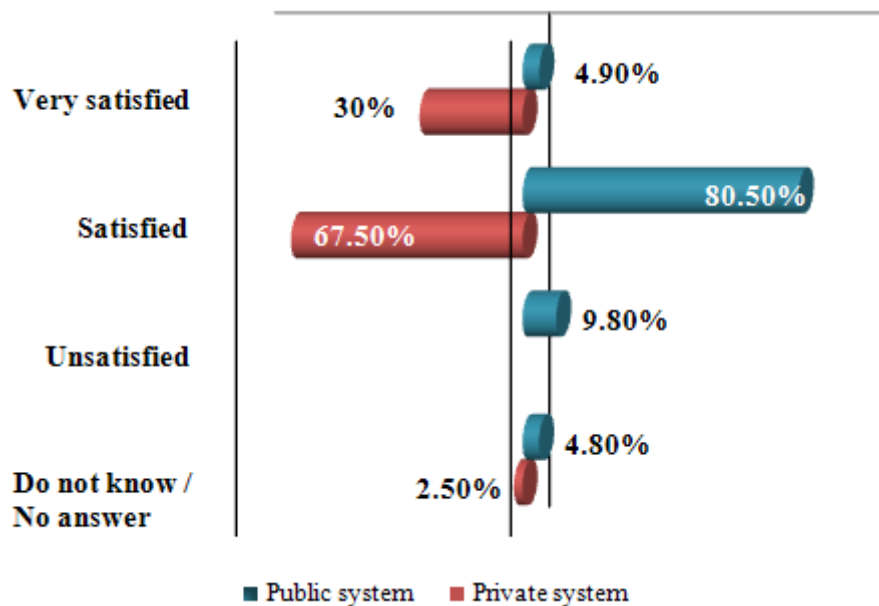


Fig. 5.40 Job satisfaction of the employees from the elderly shelters

GENERAL CONCLUSIONS and PERSONAL CONTRIBUTIONS

1. General conclusions

Guest and Pucci (1994) have pointed out that the effectiveness of an institution could be measured from the perspective of interested groups (the elderly in our case, as consumers and employees as professionals, care services providers). Even if it is a subjective method, based on perception, it can be considered satisfactory because it includes people directly involved. All institutions from the study ensures long/permanent stay, that most of the surveyed beneficiaries stated that they had no difficulties in adapting to the shelter conditions, considering the transition as *quickly* and *fairly quickly* in a proportion of 46% and 23%, respectively, in the private sector and 32% and 41%, respectively, in the public sector. The average costs necessary for the maintenance of the elderly centers varies, depending on the services provided to the elderly, on their dependence degree or the conditions provided in the home, the lower limit being 250 lei in the *St. John the New*

from *Suceava* retirement home up to 850 lei in *Bethesda* elderly home. In general, older people say they are very satisfied with the medical services provided by the centers and the received medical treatment, in a proportion of 38% in the private sector and 21% in the public sector. The residents can participate in various activities in the centers, the participation being optional. In three homes (St. Andrew, St. John and Bogdănești) are joined by a church where residents can participate in various services, in the other two private homes there is a prayer space for the residents, but in the public homes there is no such a space. Most residents say that they feel comfortable in their rooms (97%) in the private system and (89%) in the public system. There is an important number of single rooms (96), most being found in the St. Andrew and St. John homes, double rooms (101), most being found in the other private homes and 40 wards, the majority being in public homes.

Most of the beneficiaries from the private sector were very pleased towards the sanitary conditions (83%) while only 49% from the public sector say were very satisfied. Homes where there wards, in generally have shared bathrooms. Also, the ability to resolve the issues raised by the staff from institutions is appreciated by most older people from the private sector (48% - *very satisfied* and 30% - *satisfied*) than elderly from the public sector (18% - *very satisfied* and 18% - *satisfied*) which reflects a weaker involvement in the public system. Developing of some activities outside the center is not an option for most of the elderly, the hospitalization being for them an adherence to an enclosed space. Service quality provided by the units is determined by the promptitude with which the beneficiaries can get the care they need as well as its adaptation to the health of the elderly. The values concerning the need for help is not much different between systems, 33% of the respondents from the private sector said they need help in performing daily hygiene and 31% need help to move, while in the public sector, 29% need help to perform daily hygiene and 28% need help to move. A significant percentage of 42% of respondents said that they needed counseling in the private sector while in the public sector only 12% said that they need this service. In the public medium we can not speak about a counseling culture, only 12% of the respondents from the public system stated that they receive weekly counseling while in the private sector 44% of elderly people receive counseling once a week. 60% of seniors from the public system and 21% from the private sector said they never had counseling. In general, older people prefer to find support among people in close proximity (roommates/ homemates) or to solve their emotional problems by their own, rather than appeal to specialists/other informed

persons. This aspect is determined by the low number of specialists per unit, and by the frequency of the counseling sessions. TV plays the most important leisure in the home: 85% in the private space and 92% in the public space, closely followed by walks 78% in public space and 68% in private space. The contact with the family helps to maintain social relationships with the external environment and prevent isolation. 35% of the respondents from private space and 21% from the public space believe that the relations with the relatives are *very good*, while 10% from private sector and 5% of the public sector expressed no opinion as they have no family.

To increase the satisfaction degree of the elderly, the homes managements might opt for: involving volunteers who work with the elderly would provide them extra communication, help in their practical tasks (making shopping, mobile uploading, organizing the elderly birthdays); physiotherapy services organization to maintain the autonomy as long as possible; attract public attention to this category in order to reduce the shame or guilt feelings for the elderly that live in a retirement home; setting up parks with benches for rest where is sufficient space; as close contact with the family where it exists.

Reported on how the staff proceeds when an elderly seeking help, the public space is distinguished by a greater involvement when staff has the ability to do this, while in the private sector the involvement increases as the employee believes that can help the applicant. The degree of satisfaction with the work is largely determined by offered working conditions. By conducting the activity in a pleasant environment, the employees can perform their work with more passion, this correlated with other factors, can lead to performance. For the interviewed employees, the staff from the private sector has a higher degree of satisfaction with working conditions: 70% in the private sector towards 20.30% in the public sector appreciates working conditions as *very good*. In general, private sector employees are involved in a greater extent in elderly care work. The number of employees who had *many times* and *often* conflicts with the elderly from the center is higher in the private towards the public sector. However, the percentage allocated to the response variant *never* is higher by 5.50% in the private sector. Thus, the results do not reflect t significant differences between the two spaces. Although most employees consider that the workload is *high* and *very high*, more than half of those, working in the public space, finds the work with elderly people difficult, while 52.50% of employees from the private sector have a contrary opinion. It should be borne from mind that an

important factor of stress at work is the sense of loss of control over tasks and responsibilities. Regarding satisfaction towards the current state from the professional point of view, both categories of employees said they were mostly satisfied. However, at the level of those *very satisfied/unsatisfied*, the ratio is higher than one in favor of the private space. Almost all employees in the public space said they were *pleased* that they are working in the home and 37.50% of private sector employees said they are *very pleased* that they are working in the home. Note that in the private space there were not *unsatisfied* towards the public space where 2.40% were *unsatisfied*. More than 50% of the employees from the public space have *little or low trust* on colleagues. The private sector is dominated by a feeling of comfort in this regard, 85% of the surveyed staff saying that they have confidence in those with whom they work. Almost 90% of employees in the public space are not paid for their work performed outside working hours, while 17.50% from the private sector say that they are paid *each time* and 37.50% *sometimes*. While in the private sector 75% of employees say they have all the materials and equipment needed for their work, in the public sector only 43.90% can say this. In conclusion the private sector is characterized by a higher level of facilities and equipment necessary for carrying materials work in optimal conditions.

2. Personal contributions

In this work it can be mention the following individual contributions:

1. The calculation of some indicators on social protection of the elderly where we used *document analysis method*, namely the statistics provided by the European and national authorized and recognized institutions (social protection expenditure, elderly care expenditure, projections regarding the aging of the population, percentage of over 65 years old persons compared to the total population in Romania, elderly population projection in Romania between 2020-2060, percentage of care staff reported to the total population, number of beds in elderly care institutions per 1000 inhabitants, percentage of institutionalized elderly relative to the total population over 65 years old).
2. For data collection we used field investigation based on questionnaire. Data were obtained from nine elderly care institutions structured as follows:
 - One medical and social establishment (public unit) in Broșteni – Suceava County

- Three public retirement homes: Pietricica in Piatra Neamț – Neamț County, Solca – Suceava County and Roznov – Neamț County
 - Three private elderly centers subordinated to the Romanian Orthodox Church: St. Andrew from Fălticeni – Suceava County, St. John the New from Suceava– Suceava County and Bogdănești Monastery – Suceava County.
 - Two independent residential elderly care centers: Bethesda and Geana, both from Suceava County.
3. In the research it was used three questionnaires as follows: one applied to the homes administrators, other to beneficiaries (elderly) and the last to the employees from elderly centers, with which it was made an overview of the functioning of the elderly care homes management.
 4. Highlighting the similarities and differences between public and private institutions from different points of view: the existing facilities in the homes, the satisfaction degree of the elderly regarding the received services and the satisfaction degree of the employees on the conditions from these homes.

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. *** Government Decision no. 886 from March 20, 2003 for the approval of the framework regulations for the organization and functioning of the institutions of special protection of individuals with disabilities.

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*** Government Decision no. 1024 from June 25, 2004 for approving the methodological norms for the application of Government Ordinance no. 68/2003 on social services and the methodology for accreditation of social services providers, as well as the Order no. 383 from June 6, 2005 of the Minister of Labour, Social Solidarity and Family.

***Government Decision no. 1293 from September 20, 2006 to amend annexes no. 6 and 7 to the Government Decision no. 197/2006 regarding the approval of the national interest programs in the rights protection of the persons with disabilities and in social assistance for the elderly, the homeless and victims of domestic violence and funding these programs.

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