EAN Biannual Autumn Meeting

Warsaw, Poland | 21–23 October 2026

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CONFERENCE MEETING DAY 1

WARSAW – POLAND

Novotel Warszawa Centrum
October 22, 2026

Please, mute your phone

1. Welcome address by EAN President and Polish hosts

Jiří Horecký

Tomasz Michalek

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2. Agenda

1. Welcome address by EAN President J. Horecký and Polish hosts
2. Agenda proposal
3. Welcoming of new EAN members and guests + introduction roundtable session of all participants
4. Minutes from the last GA meeting – Naples 05/2026
5. EU affairs update
   M. Smeets, J. Horecký
   a. Safe staffing levels in long-term care
   b. Resilience and preparedness of the long-term care sector
   c. Care Deal
   d. WHO Global Standards for Long-Term Care
6. Digitalisation 2.0 Report – Introduction
   V. Husáková, M. Smeets
7. WG Housing and Living Environment of older people – state of play
   D. Sapy, M. Smeets
8. Vaccination Hesitancy project update
   M. Smeets, K. Vostrý
9. World LTC Congress Prague 2027 – update
10. EAN Congress 2028 / 2029 – call for host organisation
11. President's visit to Cyprus during the Cyprus EU Presidency – report
12. IFA Pain Management activity / cooperation with EFIC
13. Next GA in Barcelona – initial information, EB elections call, ...

Coffee Break

14. EU Talent Partnership: Creating Legal Pathways for Care Workers from Bangladesh
    L. Kejser
15. Updates from members & participants
16. Miscellaneous & Discussion
17. Artificial Intelligence in Long-Term Care – practical session
    J.-C. Vanderhaegen, R. Schotanus

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PROGRAMME OVERVIEW & AGENDA

EAN Biannual Autumn Meeting

Warsaw, Poland | 21–23 October 2026

1. Welcome and opening of Day 2
2. ActiZ – depopulation / decreasing occupancy of nursing homes in the Netherlands
   Aad Koster
3. Long-term care and senior policy in Poland – current situation and challenges
   Marzena Okła-Drewnowicz
4. Care services in flux: working conditions for quality care – current challenges for Europe
   Hans Dubois – Eurofound

Break

5. European Labour Authority – workforce, labour mobility and long-term care
   Stefan Domonkos – European Labour Authority
6. Salaries and wages in social services in Europe
   Jiří Horecký
7. Discussion / Q&A
8. Closing of the Meeting

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3. Welcoming of new EAN members and guests + introduction roundtable session of all participants

New members

- Clementas (Czech Republic)
- Cyprus Third Age Observatory (Cyprus)
- Senior Care Service Kft. (Hungary)

- THALPO (Cyprus)
- Dohled na dosah, z.s. (Czech Republic)
- Active Ageing and Community Care (Malta)
- Netpolaris (Italy)
- ASL Ogliastra (Italy)

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3. Welcoming of new EAN members and guests + introduction roundtable session of all participants

New EAN partner

Ms. Stéphanie Waworka-Giegerich

Werner & Mertz Professional

Welcome to Werner & Mertz



World Market Leader in Ecological Cleaning



Our History

1867 Founding of the wax wares factory “Gebrüder Werner” in Mainz

1954 Branch in Hallein/Austria starts up production

1971 Founding of tana Chemie GmbH with cleaning products for professional commercial users

1986 Launch of Frosch brand of environmentally friendly, naturally degradable household cleaners



Brands

Frosch · Erdal · bionicdry · emsal · rorax · green care professional · tana professional

Werner & Mertz Today



- Family-owned and operated GmbH
- A member of the fifth generation, Managing Partner Reinhard Schneider leads the company.
- Headquarters with main production is in Mainz.
- Branch in Hallein/Austria manufactures special products.

Facts & Figures for the Business Year 2025



Business Year 2025

Total revenue	628	million €
Consumer	536	million €
Professional	92	million €

Employees	1,184	Employees
- in Germany	887	Employees
In 11 vocations	39	trainees
- in Germany	37	trainees

Werner & Mertz in Europe

- Werner & Mertz GmbH
- Erdal-Rex GmbH
- Werner & Mertz Service & Logistik GmbH
- BNS International GmbH
- Frosch sales team GmbH
- Erdal GmbH Hallein
- Werner & Mertz GmbH & Co KG
- Werner & Mertz France S.A.S.
- Werner & Mertz Benelux Consumer S.A./N.V.
- Werner & Mertz Polska Sp. z o.o.
- Búfalo Werner & Mertz S.A.
- Tana-Chemie GmbH
- Werner & Mertz Professional Vertriebs GmbH
- Werner & Mertz France Professional
- Werner & Mertz Benelux S.A./N.V.
- Werner & Mertz Professional s.r.l.



Werner & Mertz Worldwide



… designed for circular economy - Cradle to Cradle®



Biodegradable formulations

Waste prevention



Recyclate-Initiative

Increase in rPET from the Yellow Bag at Green Care Professional



Graphic based on bottle without cap

Recyclate Initiative

Our Recyclate Ticker

wir-fuer-recyclat.de/en

As of: September 2026

Plastic recycling really works!

Recycled PET bottles:
Does the telling count or is the count telling?
While others just talk about it, we already have this many 100% recycled PET bottles* in use:

1.167.461.672

That's the world record for 100% recycling.

* from the Werner & Mertz Recyclate Initiative



Outstanding Work for the Environment

Formulas

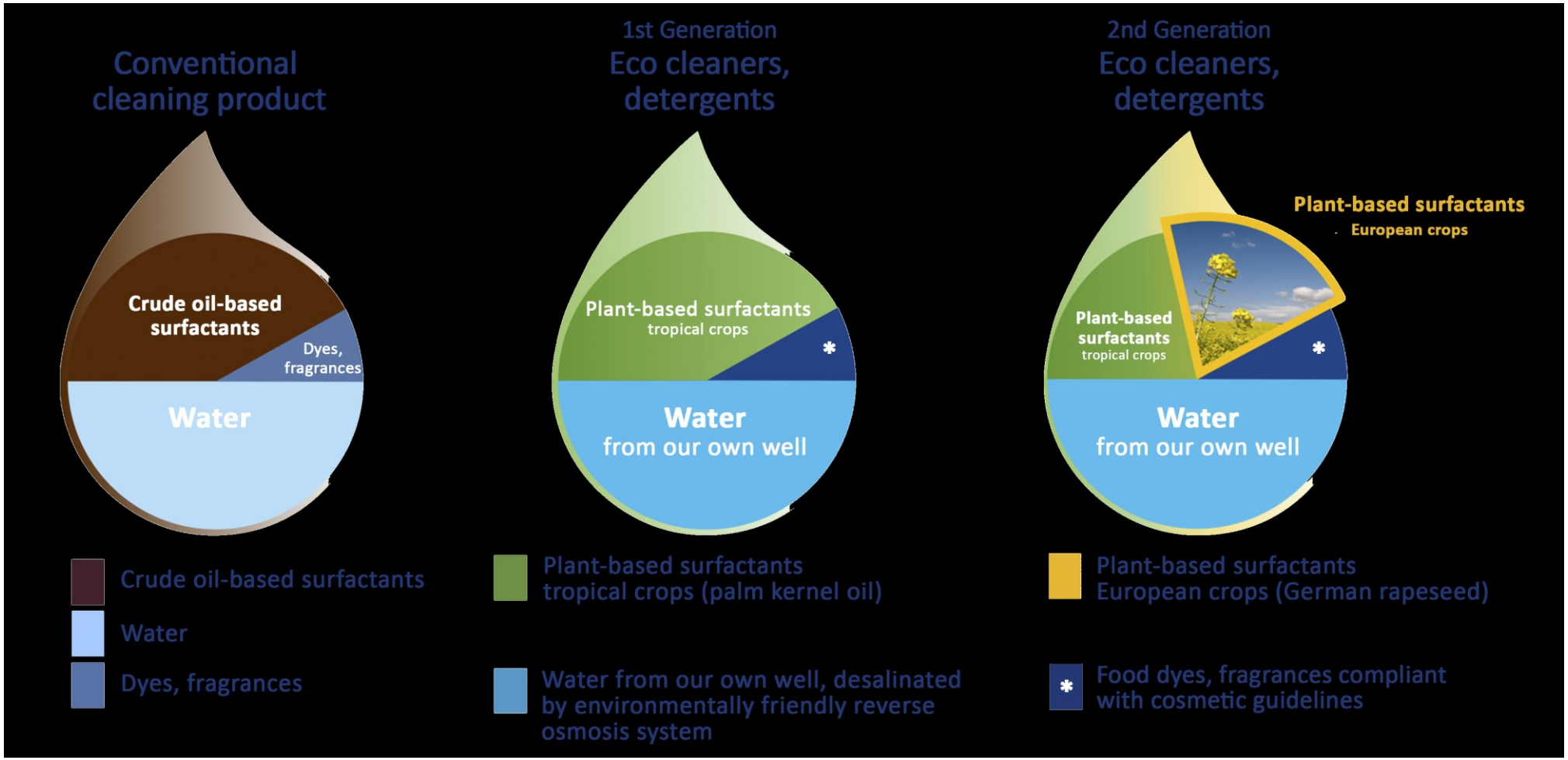
Packaging

Production & Supply Chain

Going even beyond: **Green Care Professional**

	is considered by the following certification:	
Formulation		
Material health		 Surfactants produced from European sources
Circularity of raw materials		
Biodiversity		
Degradability of raw materials		
VOC / Indoor air quality		
Packaging		 Post-Consumer Recyclate from the Yellow Bag in bottles and caps
Recycle share		
Recycle origin		
Recyclability		
Production & Supply Chain		 In-house water treatment and production of electricity using wind and solar power
Energy		
Emissions		
Value chain		
Social fairness & Ethics		
Water & Soil		

Use of European Surfactants in Product Formulas



Systems that fulfill your requirements



- Speed



- Price/Performance ratio



- Mobility



- Safety

INNOVATIVE & SUSTAINABLE DETERGENTS





green care PROFESSIONAL

Award- winning circular packaging



WORLDSTAR WINNER 2026

WPO WORLD PACKAGING ORGANISATION

cradle to cradle GOLD PACKAGING

Werner & Mertz Mainz

Berry

Reduce: Less packaging material and waste

Reuse: Reusable bottles and durable spray triggers

Recycle: Fully recyclable mono-material pouches, botteles and spray heads

Recognised by international packaging and design awards



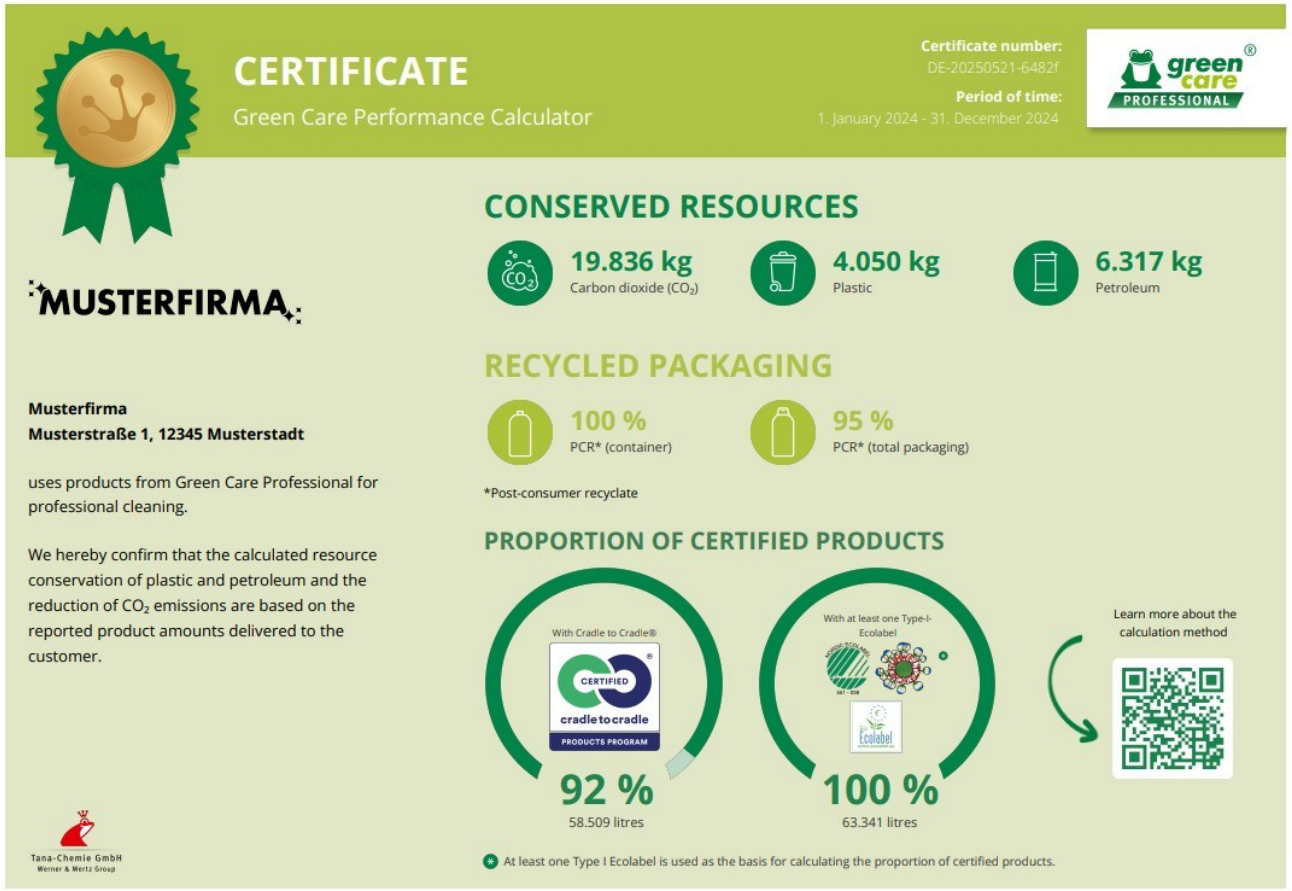
GERMAN PACKAGING AWARD
SUSTAINABILITY
WINNER 2022

WORLDSTAR WINNER 2023

WPO WORLD PACKAGING ORGANISATION

Verified by INTECHNICA CERT GmbH

Point out the advantages



CERTIFICATE

Green Care Performance Calculator

Certificate number: DE-20250521-6482f

Period of time: 1. January 2024 - 31. December 2024

green care PROFESSIONAL

MUSTERFIRMA

Musterfirma
Musterstraße 1, 12345 Musterstadt

uses products from Green Care Professional for professional cleaning.

We hereby confirm that the calculated resource conservation of plastic and petroleum and the reduction of CO_2 emissions are based on the reported product amounts delivered to the customer.

CONSERVED RESOURCES

19.836 kg Carbon dioxide (CO_2)

4.050 kg Plastic

6.317 kg Petroleum

RECYCLED PACKAGING

100 % PCR* (container)

95 % PCR* (total packaging)

*Post-consumer recyclate

PROPORTION OF CERTIFIED PRODUCTS

With Cradle to Cradle®: CERTIFIED cradle to cradle PRODUCTS PROGRAM

92 %
58.509 litres

With at least one Type-I-Ecolabel

100 %
63.341 litres

Learn more about the calculation method

At least one Type I Ecolabel is used as the basis for calculating the proportion of certified products.

Tana-Chemie GmbH
Werner & Mertz Group

Green Care Performance Calculator

- Use the concrete numbers for tenders, offers or as positive PR in sustainability reports
- Calculation methodology certified by INTECHNICA CERT GmbH.

Measure your sustainability progress on **get.wmprof.com**

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4. Minutes from the last GA meeting – Naples 5/2026

- No remarks

Meeting Minutes of the General Assembly

6 May 2026 at 9:00 – 16:00, doors open at 8:30

Venue: Hotel RAMADA NAPLES, Via Galileo Ferraris 40, 80146 Naples, Italy

Present: See the annexed list of participants
Agenda: Attached
Meeting materials and presentations: The materials and presentations from the General Assembly meeting will be made available on the EAN website: https://www.ean.care/en/articles/ean-general-assembly-2026-in-naples

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01. Welcome address by EAN president J. Horecký and member of Executive Board Mrs. E. Weber together with Mr. Nicola Galdiero, member of the General Assembly and host in Naples

- Mr. Jiří Horecký (JH) welcomed delegates, EAN members, partners and guests to the first EAN General Assembly meeting in 2026.
- JH thanked the Italian colleagues, especially Mrs. Elena Weber, Mr. Nicola Galdiero and Mrs. Lina Paduano, for co-hosting the meeting and supporting the organisation of the event in Naples.
- Mrs. Elena Weber and Mr. Nicola Galdiero welcomed the participants on behalf of the Italian hosts.

02. GA Agenda proposal

- JH presented the proposed agenda and informed participants about the structure of the day.
- Participants were informed that the workshop "In Times of Crises – AI & Preparedness as a Solution" would be postponed to the next General Assembly meeting.
- No comments or amendments to the agenda were proposed.

Decision: The proposed agenda for the GA meeting was approved.

03. Welcoming of new EAN members and guests + introduction roundtable session of all participants

- Since the last GA meeting in Lisbon, EAN has welcomed the following new members: COPAS – Luxembourg, Workforce Edge Consulting Inc. – Belgium / Canada, Anume s.r.o. – Czech Republic, Clementas – Czech Republic, RINATA Association – Italy, Institute of Health and Social Support – Poland, DemenTalent – The Netherlands, Cyprus Third Age Observatory – Cyprus, Senior Care Service Kft. – Hungary.
- The new members present at the meeting briefly introduced their organisations.
- All participants introduced themselves to each other.

04. Minutes from the last GA meeting – Lisbon 10/2025

- No remarks were raised.

Decision: GA members adopted the Minutes of the meeting in Lisbon 10/2025.

05. WG on Funding – Presentation of the Final Report "Towards a Framework for Sustainable, Equitable and Responsible Funding of Elderly Care in the European Union" A. Koster

- JH introduced the new EAN report on funding of long-term care and briefly recalled previous EAN expert reports.
- Mr. Aad Koster and Mr. Marcel Smeets presented the Final Report prepared by the EAN Working Group on Funding.

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5. EU affairs update

Marcel Smeets, Jiří Horecký

a) Safe staffing levels in long-term care
b) Resilience and preparedness of the long-term care sector
c) Care Deal
d) WHO Global Standards for Long-Term Care



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A European preparedness strategy and long-term care

Marcel Smeets

Warsaw, 22 October 2026

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What are we talking about?

EU policy inventory: the critical files

- Preparedness Union Strategy: Whole-of-society preparedness; include LTC explicitly
- Civil Protection Mechanism reform: Emergency coordination, evacuation and care continuity
- EU Stockpiling and Medical Countermeasures: Last-mile delivery to care settings
- Critical Entities Resilience an NIS2: Infrastructure dependencies and cyber continuity
- European Care Strategy and Care Deal: Main route to embed LTC resilience and funding

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Preparedness Union & Civil protection

1. Preparedness Union Strategy · 2025: Advocate recognition of residential, home and community care as essential societal functions. Include LTC in risk assessments and exercises.
2. Civil Protection Mechanism · reform underway: Seek operational protocols for evacuation, accessible transport, temporary care capacity and continuity of home care.

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Supplies, health security and infrastructure

1. Stockpiling: Includes medicines, hygiene products, nutrition, water, fuel and PPE — with reliable last-mile delivery.
2. HERA / medical countermeasures: Design care-specific distribution, vaccination, infection prevention and outbreak scenarios.
3. CER / NIS2: Support continuity of energy, data, records and communication without unfunded compliance burdens.

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Institutional targets and engagement

- DG ECHO / Member States: Preparedness Union and civil protection
- DG EMPL / Social Protection Committee: Care Deal, LTC monitoring and workforce
- HERA / health authorities: Medical countermeasures and supply access
- DG REGIO / DG BUDG: Funding and infrastructure resilience
- DG HOME / DG CONNECT: Critical infrastructure and cybersecurity

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Thank you

Marcel Smeets
EAN EU Executive Consultant

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A European Care Deal for sustainable long-term care

Marcel Smeets

Warsaw, 22 October 2026

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What is the European Care Deal?

A proposed EU-wide political commitment to care — not a single enacted law.

1. **OLDER PEOPLE: Affordable, accessible, person-centred care and meaningful choice.**
2. **WORKFORCE: Decent conditions, training, recognition and recruitment.**
3. **PROVIDERS: Stable funding, innovation and proportionate regulation.**
4. **FAMILIES & ECONOMY: Support for informal carers, labour participation and social resilience.**

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Policy timeline: from strategy to deal

1. 2022, Care Strategy: EU Care Strategy and Council Recommendation on affordable, high-quality long-term care.
2. 2025, Monitoring: Long-term care monitoring framework to assess national progress.
3. 2026, Preparation: Commission preparation and parliamentary calls for stronger care policy.
4. 2027, Planned deal: Expected Commission presentation; legal instruments and funding remain to be defined.

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Why the Care Deal matters to EAN

1. WORKFORCE CRISIS: Persistent recruitment and retention difficulties affect service continuity and quality.
2. QUALITY & CHOICE: Integrated home, community, assisted living and residential care are all necessary.
3. FINANCIAL SUSTAINABILITY: Demographic ageing increases care needs while provider costs and public budgets are under pressure.
4. POLICY VOICE: Care providers need a meaningful role in EU policy design and implementation.

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EAN priorities:

- LONG-TERM INVESTMENT: Multiannual financing opportunities in the 2028–2034 EU budget; support national recurrent funding.
- CARE WORKFORCE: EU action on skills, retention, professional recognition, career pathways and ethical recruitment.
- FULL CONTINUUM OF CARE: Equal policy recognition for home, community, assisted living, residential and nursing care.
- QUALITY WITH FEASIBILITY: Person-centred quality and safeguards backed by realistic resources and proportionate requirements.
- INFORMAL CARER SUPPORT: Respite, social protection and coordination with professional care.
- DIGITAL & AI INNOVATION: Fund responsible technology, interoperability and digital skills; preserve human care.
- PROVIDER REPRESENTATION: Structured EU stakeholder dialogue with meaningful long-term care provider participation.

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WHO consultation on Global Standards for Long-Term Care

Marcel Smeets

Warsaw, 22 October 2026

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Why this matters now

- Long-term care faces demographic, workforce and financial pressures.
- WHO is developing a common global reference for dignity, quality, workforce, financing, governance and monitoring.
- These standards may shape national policy, regulation and expectations of providers.
- EAN can influence how ambition translates into practical delivery.

The consultation: what EAN should seek

EAN welcomes the WHO working draft and proposes a constructive response.

- Retain the standards as a flexible, outcome-oriented framework — not a uniform compliance checklist.
- Ensure implementation reflects national care systems and available resources.
- Recognise providers as co-designers and implementation partners.
- Strengthen the link between standards, funding, workforce and lived experience.

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EAN position: four advocacy priorities

1 QUALITY OF LIFE FIRST

Dignity, autonomy, choice and meaningful outcomes — not paperwork alone.

2 FUND QUALITY PROPERLY

Governments must ensure sustainable financing for real delivery costs.

3 MAKE WORKFORCE EXPECTATIONS FEASIBLE

Fair pay, skills and recruitment; avoid universal staffing ratios.

4 GIVE PROVIDERS A SEAT AT THE TABLE

Co-design indicators, implementation and proportionate monitoring.

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What the final standards must also protect

- Choice across the full continuum: home, community and residential care — no automatic hierarchy.
- Integrated health and social care without over-medicalising daily life.
- Digital tools and AI as human-centred enablers, with privacy and oversight.
- Measures of lived experience, social participation and workforce experience.
- Shared responsibility with matching resources — not cost-shifting to families.

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EAN EU Executive Consultant

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7. WG Housing and Living Environment of older people – state of play

Didier Sapy, Marcel Smeets

Brithany Boucly, Anna Ježková

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Survey — 14 questions (EN)

Proposed title: ***EAN inventory of practices — living well in later life***

Intro

We already have a state of the art from online sources. **What is missing is what is not published: local and rural initiatives, Central and Eastern Europe, everyday practice.**

Rough orders of magnitude are fine. Short beats long. If you do not know, skip.

Every respondent will receive the aggregated findings. Unless you ask for confidentiality, the practice enters a **European inventory** searchable by setting, country and outcome. Some practices may be selected for a later case study.

Before we start — consent

C1. I agree to take part.

☐ Yes

☐ No

C2. This practice — whatever its scale, setting or level of documentation — may be included in the European inventory in non-confidential form, unless I indicate otherwise below.

☐ Yes

☐ No

8. Vaccination Hesitancy project update

Marcel Smeets, Karel Vostrý

- Mapping of vaccination policies and practices in 7 countries – completed
- Online survey – completed
- On-site survey at the EAN General Assembly in Naples (May 2026) – completed
- Interviews – completed
- Main report – being finalised
- Guidelines – being finalised
- Both documents will be available in the **PUBLICATION** section of the EAN website



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Vaccination hesitancy and delivery for older people

EAN–MSD project: purpose, approach and early lessons

Marcel Smeets

Warsaw, 22 October 2026

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Why this project?

- Older adults in care facilities face heightened risks and practical barriers to vaccination.
- Vaccination hesitancy can reflect safety concerns, trust, misinformation and communication gaps.
- Access also depends on staff capacity, consent procedures and coordination with clinical partners.

Project design and deliverables

- Mapping: Austria, Netherlands, France, Czechia, Spain, Slovakia, Denmark
- Policy, uptake and legal review, expert interviews, questionnaires
- Guidelines and toolkit to promote uptake

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Emerging themes from the mapping

- Influenza and COVID-19 are widely prioritised; pneumococcal and shingles policies vary.
- Hesitancy relates to perceived risks, trust, misinformation and differing information needs.
- On-site delivery can reduce access barriers, but staffing and GP workload constrain capacity.
- Fragmented records and limited care-home coverage data hinder follow-up and evaluation.

Next steps

- Guidance and toolkit
- Implementation EAN?

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EAN EU Executive Consultant

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2027 WORLD LTC CONGRESS

PRAGUE, September 6-9, 2027



9. World LTC Congress Prague 2027

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CONGRESS WEEK | 6–9 September 2027

9. World LTC Congress Prague 2027

- 6 Sept GAN International Summit
- 7 Sept Czech National Congress
- 7-8 Sept GAN Congress in Partnership with EAN
- 9 Sept EAN Members Meeting

The Future of Long-Term Care
Prague • 2027

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6. - 9. SEPTEMBER 2027

GAN

CONGRESS

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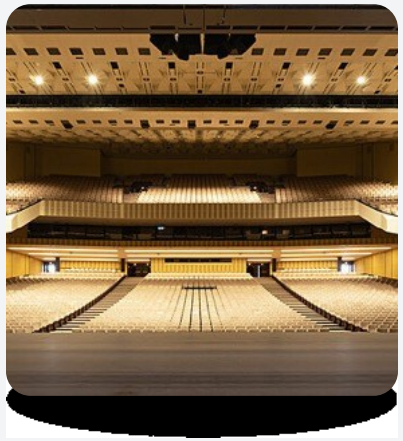
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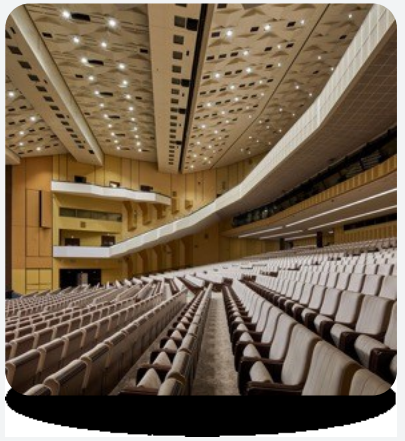
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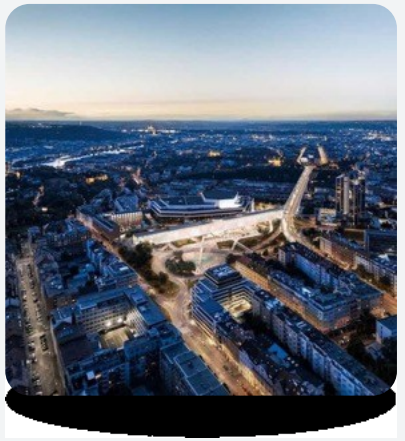
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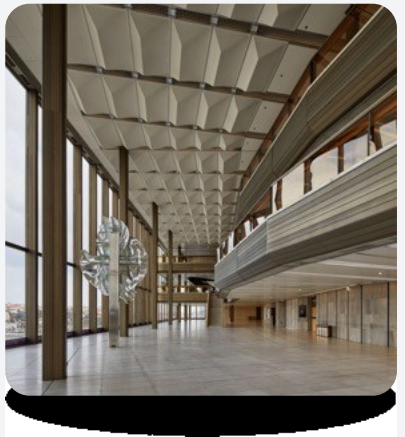




















PRAGUE
CONGRESS CENTRE

















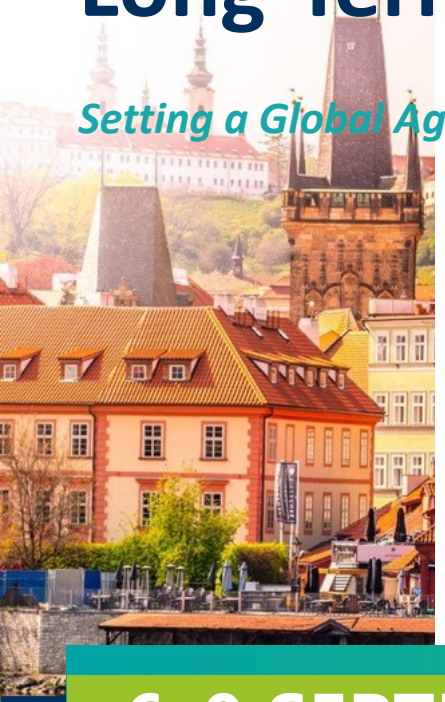




The Future of

Long-Term Care

Setting a Global Agenda





6–9 SEPTEMBER 2027, PRAGUE

RESOURCES – SKILLS

DIGITALIZATION

FUNDING – NEEDS

TRANSFORMATION

INNOVATIONS AND

HOPES

SESSIONS

- The future of long-term care – political responsibility
- Digital care – what changed and what is about to come
- The end of nursing homes – will everybody stay at home?
- Profit in long-term care - who should/will be the provider?
- Quality of life of older persons and care receipents Housing enviroment, person-centred care, re-enablement and self-determination Workforce – re-skilling, outsourcing, work migration, quality
- shifts, robotics?
  Informal care with/alongside/within the
- professional care sector?

The Future of Long-Term Care
Prague · 2027

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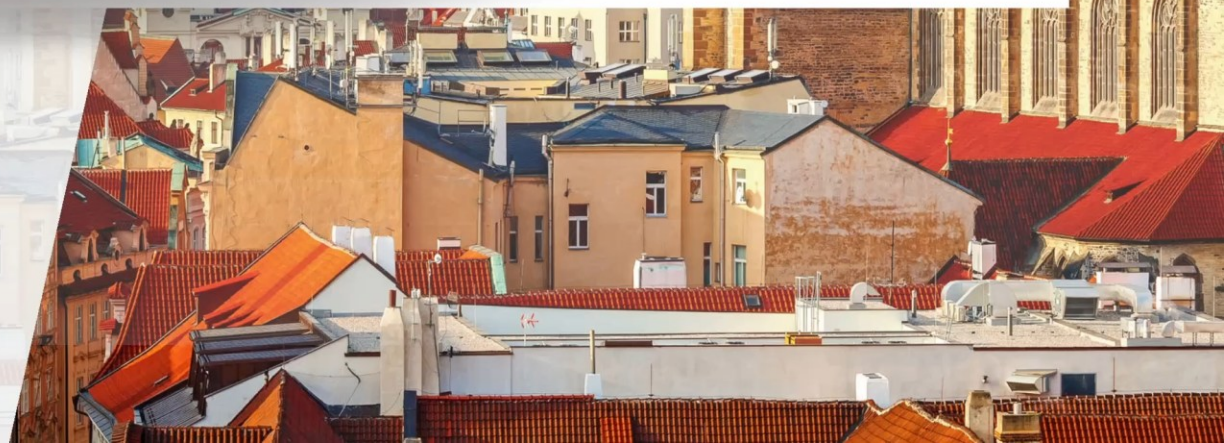
6. - 9. SEPTEMBER 2027

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ASSOCIATION OF SOCIAL SERVICE PROVIDERS CZECH REPUBLIC

EEZY



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10. EAN Congress 2028 / 2029

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11. President's visit to Cyprus during the Cyprus EU Presidency – report

Jiří Horecký, Demos Antoniou



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12. IFA Pain Management activity / cooperation with EFIC

International Federation on Ageing

EFIC
EUROPEAN PAIN FEDERATION

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13. Next GA in Barcelona – initial information, EB elections call, …

SAVE THE DATE

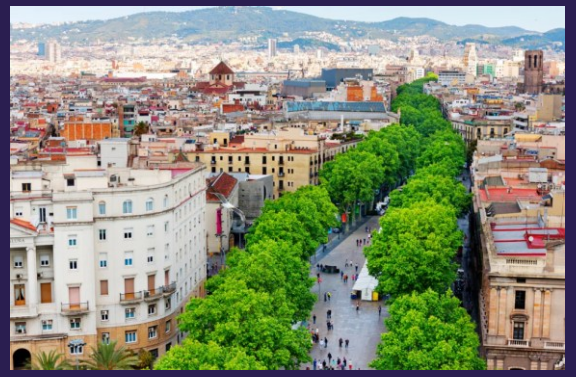
12-13 APRIL 2027



EAN EXECUTIVE BOARD ELECTIONS







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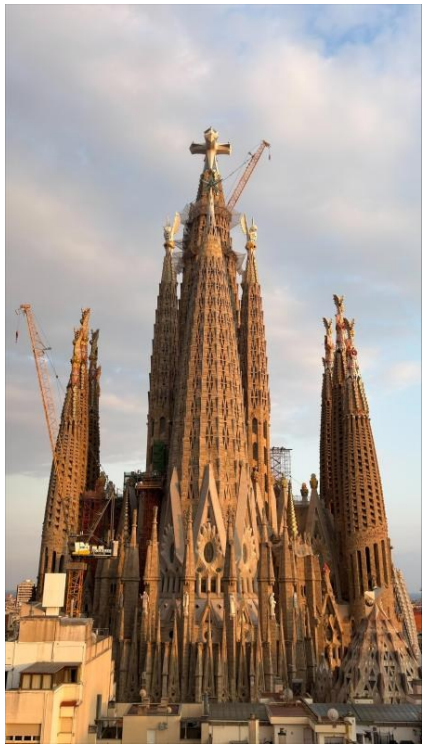
ASSOCIACIÓ CATALANA DE RECURSOS ASSISTENCIALS

2027 EAN General Assembly

Welcome to Barcelona!

Barcelona, a Mediterranean capital

A city of nearly 1.6 million people (5.7 million in its metropolitan area), Barcelona is one of Europe's most vibrant Mediterranean capitals, with a unique architectural heritage and a strong cultural identity.





The heart of Catalonia

Barcelona is the political, economic and cultural capital of Catalonia, and a historic gateway between the Mediterranean and the rest of Europe: a city built on centuries of trade, exchange and openness to the world.





Where ACRA calls home

Barcelona is home to ACRA's headquarters and to most of our member organisations, which makes it the natural setting to welcome the EAN community and share our work in elderly care.

acra

Associació Catalana de Recursos Assistencials



A city that shaped great minds

Barcelona has long inspired the world: Antoni Gaudí left his mark across the city with the Sagrada Família and Park Güell; a young Pablo Picasso found his artistic voice here; and Joan Miró, born in the city, is celebrated at the foundation that bears his name.







Beyond the meeting room

Beaches, world-renowned cuisine and mild spring weather: Barcelona in April is a city made for wandering its streets and enjoying every moment beyond the agenda.





See you in Barcelona

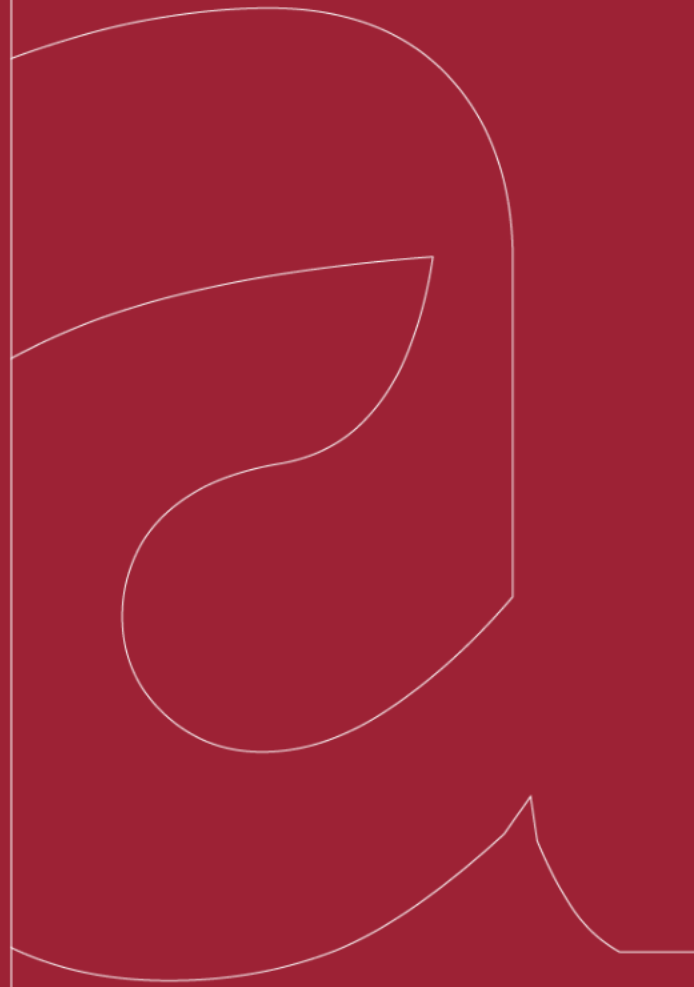
It would be our pleasure to welcome you to Barcelona on 12–13 April 2027. We very much look forward to hosting you.

Cinta Pascual
President of the Board of Directors and of the Association
ACRA – Catalan Association of Care Resources

Antoni Vidal
Director General
ACRA – Catalan Association of Care Resources

WWW.ACRA.CAT

@acragentgran | acra@acra.cat



ASSOCIACIÓ CATALANA DE
RECURSOS ASSISTENCIALS

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We start again at 18:00

EAN partners

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14. EU Talent Partnership: Creating Legal Pathways for Care Workers from Bangladesh

Ms. Lotte Kejser
Chief Technical Advisor, ILO



EAN Bi-Annual Autumn Conference 21-23 October 2026

Skills mobility for EU shortage sectors

- *creating legal pathways for care workers from Bangladesh*

EU–Bangladesh Talent Partnership project – a partnership with employers' associations and HR agencies

Implemented by ILO with EU, GoI & GoB• Financed by the European Union

Presenter: Lotte Kejser, Chief Technical Advisor, ILO

ILO - Advancing social justice, promoting decent work

Why partner with Talent Partnership? – experienced, skilled, job-ready workers

What EU employers tell us

- Persistent EU skilled labour shortages in construction, care, hospitality, transport and manufacturing
- Workers' productiveness and workplace integration uncertain
- Recruitment: bureaucratic complexity, costs and duration, uncertain outcomes, illicit practices, legal compliance, and reputational risk
- SMEs require collaboration for overseas recruitment; cannot manage alone

What the Talent Partnership offers

- Experienced workers trained, assessed and certified in Bangladesh, in alignment with EU EQF and Italian SEP/ADA qualifications frameworks – additional competency testing by employers/agents.
- English & Italian A2 proficiency level
- 10-day pre-departure & cultural training
- Soft-skills & life-skills training
- Verified digital profiles on OEP government platform (transparency and accountability)
- Ethical recruitment (ILS) through BOESL, BMET or assessed recruitment agencies

The pipeline of skilled labour: a growing talent pool

3,000
overall beneficiary target

1,002
workers enrolled

776
assessed competent

148
competent through RPL

12
occupations, 6 sectors

10
partner TVET institutes

159
employers and agencies engaged

42
licensed agencies assessed

EUR 3m project funded by the EU and implemented by the ILO. Status as at 28 September 2026.

One managed pipeline from skills demand to deployment

1	2	3	4	5	6
EU skilled labour demand Shortage-occupations chosen from EU market and skills-need analysis	**Skills training + RPL** Competency-based training and recognition of prior learning (RPL)	**National assessment** NSDA (National Skills Development Authority) assessment and certification	**Languages + PDO + soft-skills** English and Italian A1–A2, OSH, 10-day pre-departure training, soft-skills and life-skills	**Employer matching** Structured worker profiles/ CVs on OEP; competencies demonstration, interviews, tests,	**Visa + deployment** Ethical recruitment and legal pathway by assessed agencies

Steps 1–4 are completed in Bangladesh, before recruitment. Employers join at step 5.

Occupations aligned with EU labour market demand

Electrical installation Construction, building services	**RAC / refrigeration** Building services, cold chain	**Plumbing** Construction, retrofit	**Health care assistant** Long-term institutional care; home-based care; ageing, special needs;	**Food production** Food manufacturing
Bakery and pastry Hospitality, food retail	**Food & beverage service** Hospitality and tourism	**Automotive mechanic** Transport and logistics fleets	**Driving / transport support** Transport and logistics	**Sewing machine operation** Manufacturing

Shown: 10 of 12 occupations across 6 sectors, selected through EU labour-market and skills-need analysis.

Training and RPL- competency-based and employer-oriented

Technical skills

Practical, workplace-oriented training at 10 partner TVET institutes, benchmarked to EQF (European) and SEP/ADA (Italian) qualifications frameworks- upskilling/specialization

Recognized qualification levels

BNQF Levels 2–4 with competency standards, curricula and assessment tools

RPL (recognition of prior learning)

Assessments for recognition of existing skills for experienced workers: 148 already competent

Whole-worker readiness

English and Italian language proficiency levels A1–A2, OSH, PDO pre-departure and cultural training, soft skills and life skills, labour rights, protection and fair recruitment

Experienced workers – certification – practical demonstration of competencies – digital records

2+ years experience

Relevant occupational experience is an enrolment criterion for employer-facing batches; returnee migrants included

National certification

Practical assessments by NSDA against national standards; 776 workers assessed competent

Verifiable evidence

Certificates, competencies and training records shown on the OEP digital platform worker profile; employers and agents can establish user profile and verify certificates

Competence is shown by practical assessment and demonstration by employer & agent, not only by a certificate.



English & Italian languages: A1–A2 level & workplace/OSH vocabulary

What workers learn

- English & Italian to CEFR A2 (A1–A2 level) Occupational & OSH-specific vocabulary
- Workplace communication and teamwork

What it means for employers

- Shorter induction period, increased effectiveness, productivity and integration of workers
- Language evidence available for quota application package
- Accredited language assessment centres in Bangladesh



10-day pre-departure orientation training (PDO)

Know Italy & EU MS

Civic & cultural orientation; social and workplace integration

Work-ready; soft-skills

OSH, work focus, team-work, maturity, resilience communication, flexible

Know rights

Workers' rights, fair recruitment, complaints mechanism, protection

Life-skills

Financial and digital literacy



Result: better retention, productivity and workplace stability.

Digital access and validation: see verified competency profiles/ CVs, before you interview

Digital OEP platform: www.oep.gov.bd

Registration of employers and HR agencies, job demand submission, review of competency profiles/ CVs using search filters; and shortlisting candidates for interview etc.;

Microsite: tp.oep.gov.bd

Entry point for employers and HR agencies to OEP platform: entails employer guidance, occupations, partner institutes, recruitment process options;

What you can do

- Search by profession, course or training center
- Review structured CVs/ competency profiles: qualifications, competencies, certificates
- Target: request for registration of user account is verified within 24 hours when information is complete
- Enquiries handled by the support team at the OEP Probashi Support Centre

Benefits of partnering with Talent Partnership

EU HR agencies and associations

- Compliance with EQF and SEP/ADA qualifications frameworks; quality-assurance and independent assessment of skills competencies
- Faster screening of profiles online
- Better shortlists by occupation, certification, experience, languages etc.
- Lower risk: verified records before interviews
- Realistic planning for language, PDO and documents
- Pooled demand for SMEs through employer associations and agencies feasible

For skilled workers

- Legal, safe, skills-based mobility with no fees paid by workers
- Safer recruitment and mobility process by assessed agencies and validated employers
- Recognition of skills and experience
- Employer feedback continues to improve training
- Long-term, mutually beneficial partnership aligned with fair mobility policy of EU and national labour migration policies of Bangladesh and EU MS.

Partner modalities

Pilot batch

One occupation, 20–50 workers; we prepare shortlist, support interviews by employers/ agents, confirm bridging training, as required

Framework collaboration

Recurring/ ongoing pipeline by occupation(s) and recruitment windows with feedback loops

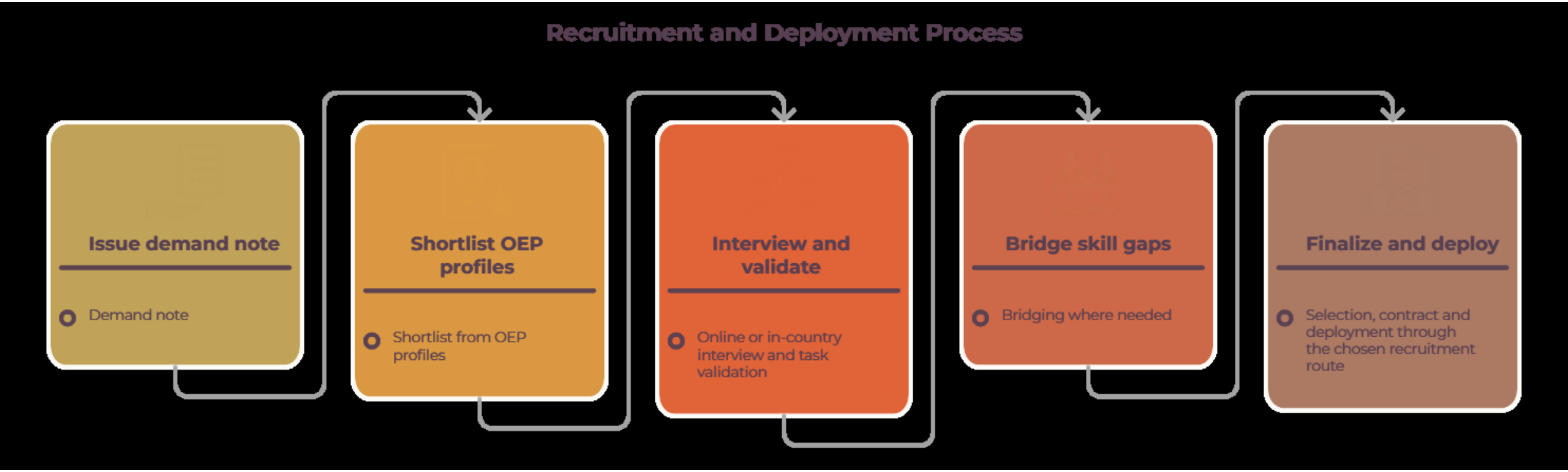
Employers' association facilitation

Consolidate demand from several SMEs that cannot recruit at scale

Technical validation

Sector bodies review competencies and CV formats

Your recruitment journey – process in five steps



Ethical recruitment is built in

Safeguards

- No recruitment fees charged to workers
- Transparent, verified contracts
- Grievance and protection mechanisms
- Agencies assessed against ILO fair recruitment principles; 42 so far





Your options for recruitment channel in BGD

- Public agencies: BOESL or BMET
- Licensed private agencies via RAIMS
- Both routes shown openly on the OEP employer module

Next step: send us one demand note

Occupation(s) • number of workers • location • minimum experience • language level • contract conditions • interview date

We then provide

- A matched shortlist
- A recruitment and bridging plan
- A one-to-one follow-up meeting

Contact

Lotte Kejser, Chief Technical Adviser
EU–Bangladesh Talent Partnership, ILO Bangladesh
Email: kejser@ilo.org

15. Updates from members & participants



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EAN in European projects

- Running projects

WELL CARE	HORIZON-HLTH-2023-CARE-04-02	HORIZON
Care4Elders	EU4H-2023-PJ-04	EU4H
Eldicare 2.0	ERASMUS-EDU-2022-PI-ALL-INNO-BLUEPRINT	ERASMUS2027
Care4Skills	ERASMUS-EDU-2023-PI-ALL-INNO-BLUEPRINT	ERASMUS2027

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EAN in European projects

- Submitted applications (EAN as project partner)

FORTIFY-LTC	HORIZON	HORIZON-RIA	HORIZON-CL2-2026-01	Submitted
CARE-REAL	HORIZON	HORIZON-RIA	HORIZON-CL2-2026-01	Submitted
LTC COMPASS	HORIZON	HORIZON-RIA	HORIZON-CL2-2026-01	Submitted
SAFE	HORIZON	HORIZON-RIA	HORIZON-CL2-2026-01	Submitted
CARENET	HORIZON	HORIZON-RIA	HORIZON-CL2-2026-01	Submitted

Care4Skills Project

Care4Skills is an innovative project designed to tackle the pressing issue of skills gaps in the European Long-Term Care (LTC) sector. It is structured as a "**Blueprint for sectoral cooperation on skills in LTC**", reflecting its ambition to create a new strategic approach to skills development. The project is deeply rooted in a collaborative partnership model, bringing together a diverse range of stakeholders from across Europe, including LTC providers, VET providers, higher education institutions, and certification body. The project is dedicated to tackling the skills gaps in the sector, covering not only the needs of frontline staff, predominantly women, but also of managers and directors of services.

Eldicare 2.0: Re-defining skills in a post COVID European Silver Economy

Project Number:101111721

https://eldicare2-0.eu/

- **Eldicare 2.0 intends to:**

☑ **Strengthen the cross-sectoral cooperation among sectorial partners and VET providers in healthcare.**

☑ **Update the occupational profiles and competencies of professionals in the sector, providing a sectoral skills long-term strategy.**

🤝 **The main mission of Eldicare 2.0 project is creating a future where elderly care professionals are empowered, skilled, and ready to meet the challenges of tomorrow!**

Co-funded by the European Union

This project has been funded with support from the European Commission. This publication reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

Well Care

Funded by
the European Union

WELL CARE is a **transdisciplinary and participative project** in which informal carers and long-term care (LTC) workers, researchers, NGOs, experts and stakeholder organisations within health and social care, psychology, sociology and gerontology work together to strengthen supports available for improving the mental wellbeing and resilience of all carers.

The WELL CARE project aims to **increase the understanding of successful ways of preventing and managing mental health and wellbeing issues among informal carers and LTC workers**. This includes looking at personal factors, the environment, and how organisations can make solutions successful.

Care4Elders

Developing innovative practices for tackling dementia and eliminate stigma



Co-funded by the European Union

Funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or HaDEA. Neither the European Union nor the granting authority can be held responsible for them.

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16. Miscellaneous & Discussion

17. Artificial Intelligence in Long-Term Care – practical session

Digitalisation 2.0 Report – Introduction

Věra Husáková
Marcel Smeets







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DIGITAL CARE, HUMAN FUTURE

MAKING TECHNOLOGY AND AI WORK FOR EUROPEAN OLDER PERSONS CARE

Digitalisation 2.0 Report

Věra Husáková & Marcel Smeets

Warsaw, 22 October 2026

WWW.EAN.CARE

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Why another report?



Building on the 2024 report

The first report called for a faster digital transition and identified barriers in investment, skills, evidence and interoperability.

A changed context for care providers

AI now reaches everyday work and new care models. Data governance, cybersecurity and responsibility require greater attention.

Guidance for implementation

The second report connects these developments with practical recommendations for better care and better working conditions.

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Inside the report



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13 chapters

Member priorities, four roles for AI, implementation, governance, workforce and human-centred care.

Practical guidance

A decision framework, pilot evaluation and ten questions before adopting a digital or AI solution.

Three appendices

Member experiences, a technology and solution overview, and the Working Group's contributors and method.

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Four roles for AI in care

Reducing routine work

Documentation, summaries and scheduling. Assess time saved after checking and correcting outputs.

Supporting professional decisions

AI can highlight patterns in data. Professionals interpret them in the context of the individual.

Anticipating changing needs

Prediction creates value when an alert leads to professional assessment and an appropriate response.

Enabling new models of care

AI, monitoring and telecare may support people between visits and enable earlier intervention.

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Technology decisions based on care value

Care need, expected value and users before the product

Define the problem, involve users and assess data, integration, risks and available evidence.

A baseline and success criteria before the pilot

Agree measures of quality, safety, workload and cost. Assess acceptance and unintended effects as well.

Scale, adapt or stop

A working demonstration does not establish value in everyday care. Wider deployment requires a further assessment.

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The AI Act: management priorities

An overview of AI systems in use

Include care, administration and recruitment, embedded AI functions and tools staff use informally.

Clarifying purpose and responsibility with suppliers

Request the intended purpose, classification, limitations and respective roles. Assign approval and incident responsibilities.

Rules for everyday use

Set rules for data, output checking and human oversight. Provide training by role and explain how AI affects care.

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Data, EHDS and cybersecurity

Information should follow the person across services

Map data flows and prepare for EHDS by examining exchange between health and social care. Reduce repeated data entry.

Integration and portability in procurement

Check compatibility, access rights and the ability to retrieve data. Assess data quality and supplier dependency.

Cybersecurity as continuity of care

Identify critical systems, backups, recovery and incident response. Teams need a workable way to continue essential care during outages.

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Workforce skills and the organisation of care

Involving staff before procurement

Staff should influence selection and workflows. Budget for implementation time, training and ongoing support.

Learning matched to responsibility

Basics for all staff, application practice for users, change management for managers and specialist training for responsible roles.

Usable capacity for direct care

Measure the net workload change, including corrections and alerts. Decide how released time will support direct care.

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Keeping the person at the centre

Human contact as part of quality

Assess how automation affects personal attention, relationships and continuity. Use released time to support these activities.

Understandable choice and proportionate monitoring

Involve older people and families. Explain the purpose and limits, protect privacy and allow results to be questioned.

Access to care beyond digital channels

Retain suitable alternatives for people who cannot or do not wish to use digital tools. Adapt explanations to individual needs.

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Vision 2030: four proposed priorities

Useful technologies in everyday care

Support sustained use of proven solutions and invest in integration, skills and continued operation.

Connected information across services

Support continuity between home, residential and health care through reliable, portable information.

Workforce skills and capacity

Develop critical use of digital tools and create capacity for direct care and individual attention.

AI that strengthens choice and relationships

Develop earlier, more personalised support while preserving human help, dignity and responsibility.

Proposed priorities for discussion and local adaptation, rather than an agreed EAN work programme.

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Ten questions before implementation

1 What problem are we solving?

2 What should measurably improve?

3 Is technology, especially AI, the right solution?

4 Who is affected and have they been involved?

5 What data are needed, created and shared?

6 What evidence supports the expected benefit?

7 What could go wrong, and with what consequences?

8 Where must human judgement remain?

9 How will we assess success?

10 What would make us adapt or stop?

Technologies will change. The discipline required to evaluate them should remain.

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Practical resources in the appendices

Appendix A: six experiences from EAN members

Documentation, monitoring, administration, social interaction and telecare, including implementation lessons and limits of the reported outcomes.

Appendix B: technologies and solution overview

More than twenty named solutions and suppliers for safety, monitoring and staff response, with a particular focus on falls management.

Appendix C: the people and working method

Who contributed, and how meetings, the survey and expert input informed the report’s recommendations.

Appendix B draws on Marek Šoltys’s overview of 25 February 2026. Check availability and configuration.

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Putting the report to work after Warsaw

Care providers: apply it to one real decision

Use the ten questions for a planned investment or current pilot. Agree a baseline, outcomes, responsibilities and a review point.

Associations: organise practical learning

Use the report in workshops or training. Compare implementation conditions, workforce effects and results across providers.

EAN members: share experience that others can use

Explain what changed, what did not work and why a solution was scaled, adapted or stopped. Discuss shared needs with suppliers and public authorities.

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With thanks to the Working Group Members



Clémence Lacour
FNAQPA, France

Jessica Grausgruber
SeneCura, Austria

Ulrika Olsson
Arjo, Sweden

Cornelia Sicher-Planinschetz
Myneva, Austria

Michiel Kooijman
ActiZ, the Netherlands

Michael Ganter
Paul Hartmann, Germany

Věra Husáková
Clementas, Czech Republic

Marcel Smeets
EAN EU Executive Consultant, Belgium

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AI in elderly care

An update on activities and emerging directions

European Ageing Network

Warsaw • 2026



This presentation is co-created with AI

Contents

01 Work in progress: four workstreams

02 Capacity management

03 Voice-enabled working

04 The digital colleague

05 National AI support structure

Work in progress

Four workstreams — within organisations, across elderly care and across healthcare

01 Capacity management

Individual care organisations

Using AI in Forecast demand and support workforce planning. (Government funded)

02 Voice-enabled working

Individual care organisations

Use speech to support documentation and daily workflows. (Government funded)

03 Digital colleague

Across the elderly care sector

Develop a shared, modular approach to AI assistants and agents. (Mixed funding)

04 National AI support structure

Across the healthcare sector

Joint implementation support with hospitals, GPs and other partners. (Government funded)

Local implementation • sector-wide reuse • national support

Capacity management

Organisation-level initiatives | Better insight into demand and available capacity

Forecast

Anticipate changes in care demand and workload.

Plan

Support staffing, skills mix and scheduling.

Evaluate

Track planning quality, staff experience and time saved.

People make the decisions; AI helps them explore better options.

Vitalis: use case


vitalis

Voice-enabled working

Organisation-level initiatives | Less time documenting, more time for care

1 **Speak**

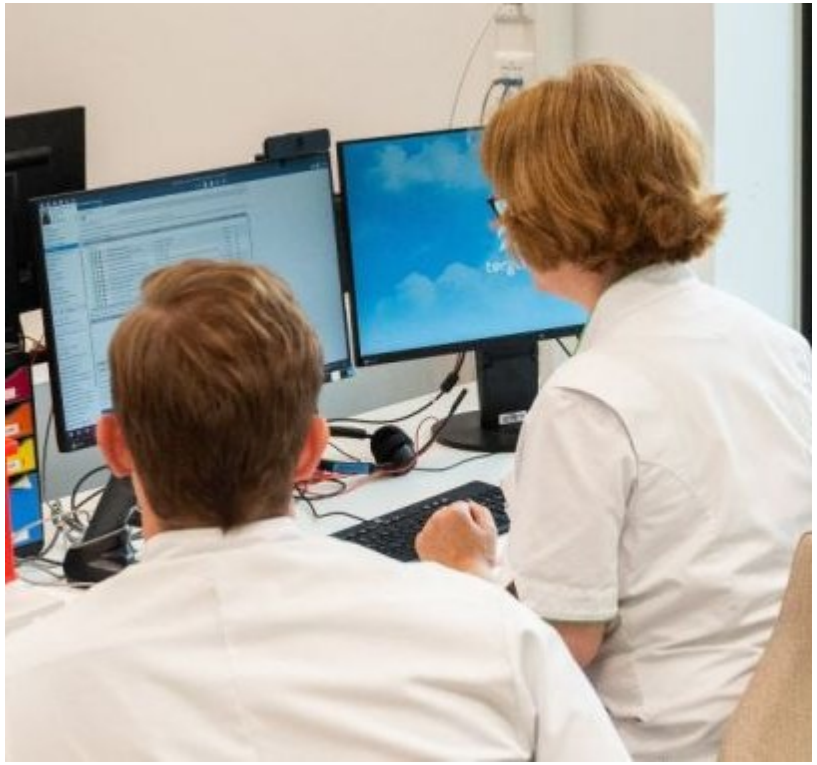
Capture observations in the flow of work.

2 **Draft**

Turn speech into a draft care record.

3 **Review**

Check accuracy and approve before saving.



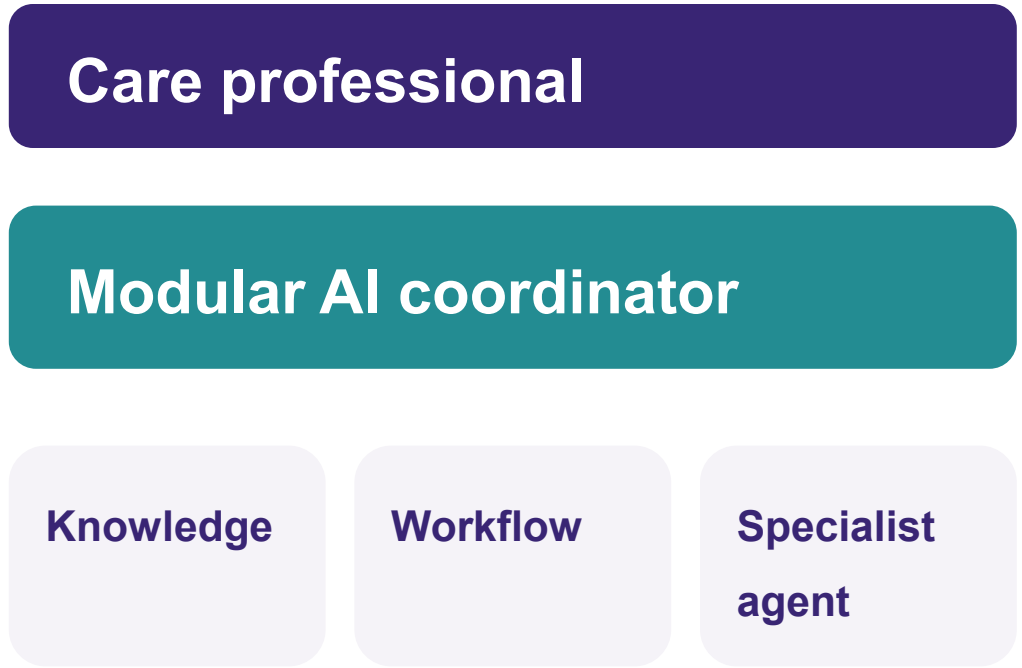
Add an organisational example: adoption • record quality • net time saved

Digital colleague

Sector-wide development | A modular approach to supporting care professionals

A shared coordinator connects specialist AI agents.

- Help professionals access trusted knowledge
- Support routine tasks within agreed boundaries
- Add or replace agents as needs evolve
- Reuse an open architecture across providers



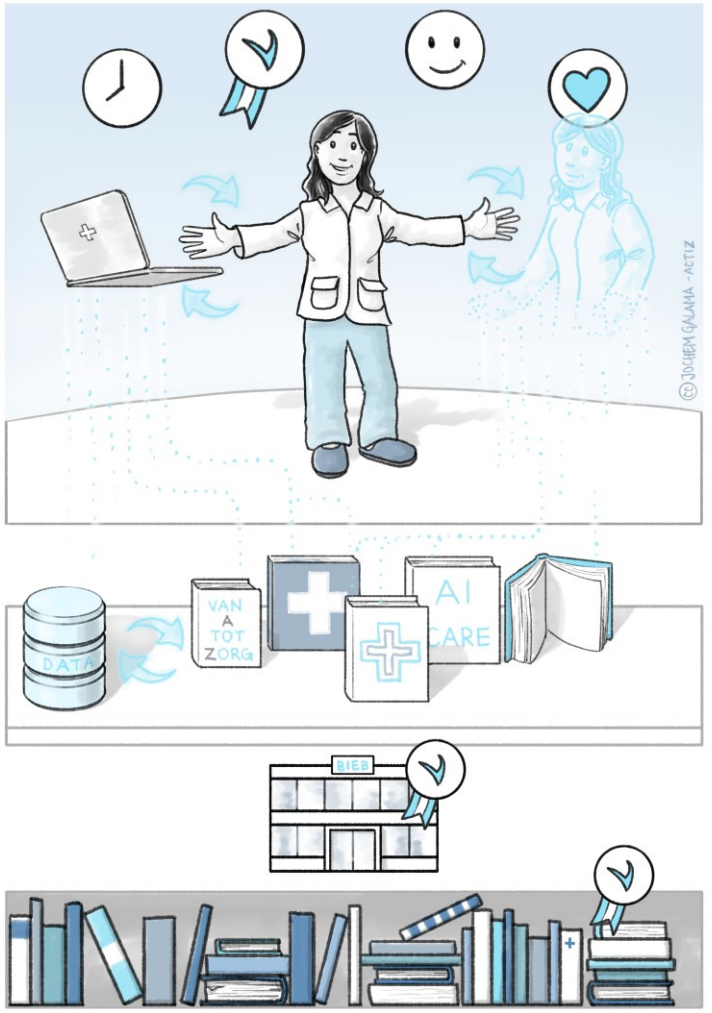
ActiZ convenes and enables; providers and suppliers build and implement.

Digital colleague

Sector-wide development | A modular approach to supporting care professionals

First Developments / findings

- Lokal Digital colleagues helping professionals to ask questions and retrieve information through the loca, systems
- The group who uses it establish fast and then stop growing but the usage per person grows
- People are positive to be helped finding information.



First steps allready help professionals.

National AI support structure

Healthcare-wide collaboration | Announced on 1 October 2026; now being developed

Knowledge hub

Shared practical guidance

Helpdesk

A route to implementation advice

Expert teams

Access to specialist support

AI community

Learn and scale together

Initial focus: speech-based documentation, capacity planning and evaluation of home and remote monitoring.

First forms of support are expected from early 2027.

Thinking in progress

A direction for discussion — building on the digital colleague

Start with the person

Organise AI around people,

their lives and the care they need.



Connect intelligence

Explore cooperation between specialised agents across care settings.

Keep data close to the source

Retrieve relevant,

authorised information when the task requires it.

Build trust into the architecture

Define mandates, traceability, human oversight and reusable building blocks.

How can we develop these foundations together across Europe?

Questions

Sharing experience across the European Ageing Network

What are you working on?

Which AI applications are delivering value in your country?

What helps organisations move from pilots to routine use?

Where could European collaboration make the difference?

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Thank you — let's learn and build together.

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DINNER

BURSZTYNOVA SER I WINO RESTAURACJA

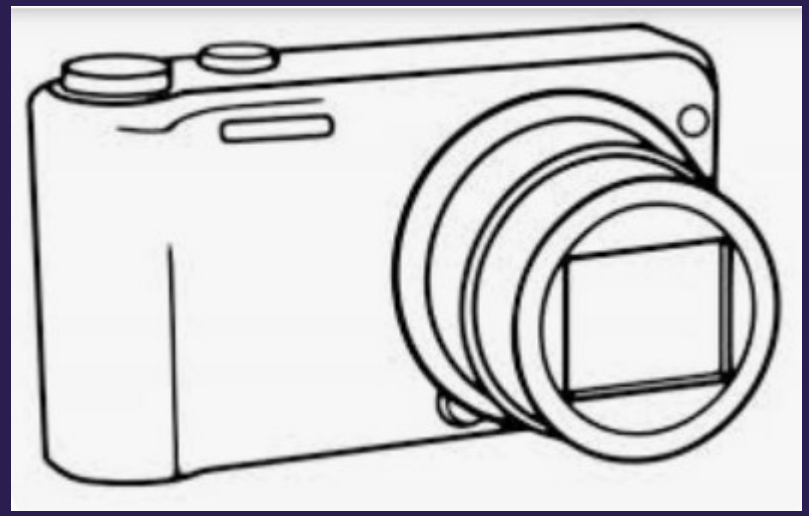
- Start at 8:00 pm
- 17 minutes walk from the hotel
- Królewska str. 16
- Business casual
- 2 big tables

- Welcome toast
- Shared starters
- Choice of two soups
- Choice of two main courses
- Shared desserts
- (2 vegans, 4 vegetarians)
- Water, soft drinks, coffee, tea
- Beer, white and red wine

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JOINT PICTURE



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Thanks for your attention.

Jiří Horecký
Karel Vostrý
Executive Board members
External experts & colleagues

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