



# BUNDESMINISTERIN

für Gesundheit, ~~Sport~~ und Konsumentenschutz  
DR. CHRISTA KRAMMER

A-1031 Wien, Radetzkystraße 2  
Telefon: 0222/711 72  
Teletex: 322 15 64 BMGSK  
DVR: 0649856

GZ 114.140/16-I/D/14/95

Herrn  
Präsidenten des Nationalrates  
Dr. Heinz FISCHER  
Parlament  
1017 Wien

3 MAI 1995

XIX. GP-NR

653/AB

1995-05-03

200

648/13

Die Abgeordneten zum Nationalrat Haidlmayr, Freundinnen und Freunde haben am 3. März 1995 unter der Nr. 648/J an mich eine schriftliche parlamentarische Anfrage betreffend Umsetzung des Behindertenkonzeptes der österreichischen Bundesregierung gerichtet, die folgenden Wortlaut hat:

- "1. Welche Punkte des Behindertenkonzeptes der Bundesregierung werden in Ihrem Bereich 1995 verwirklicht?
2. Wie sieht der weitere Zeitplan für die Umsetzung des Behindertenkonzeptes der Bundesregierung aus?"

Diese Anfrage beantworte ich wie folgt:

Zu den Fragen 1 und 2:

Im Rahmen des Kapitel 7 "Gesundheit" bzw. hinsichtlich der Verbesserung der Ausbildung des Pflegepersonals (Kapitel 13) wurden bzw. werden folgende Maßnahmen gesetzt:

Der Unfallverhütung im Betrieb wird durch Verbesserung der Arbeitnehmerschutzbestimmungen auch für Behinderte Rechnung getragen.

Auf dem Gebiet der Haushalts- und Freizeitunfälle hat das Institut "Sicher Leben" im Einklang mit den darin vertretenen Organisationen und Körperschaften ein Unfallverhütungskonzept ausgearbeitet, dessen Umsetzung anläuft.

Zu erwähnen ist in diesem Zusammenhang auch, daß in der Unfalldatenbank des Institutes "Sicher Leben" alle wichtigen derzeit in Österreich verfügbaren Statistiken über Heim, Freizeit und Sportunfälle zusammengefaßt werden. Damit ist es möglich, die Dimension des Unfallgeschehens in Österreich klar zu erkennen. Die Verläufe und das Umfeld von Unfällen ergeben sich aber nicht aus dieser Quellensammlung. Zu diesem Zwecke wird im Bundesministerium für Gesundheit und Konsumentenschutz an einer EU-konformen Unfallursachenstatistik gearbeitet.

Im Rahmen der Gesundheitsvorsorge hat sich die Beteiligung an Gesundenuntersuchungen drastisch gesteigert. Während sich 1990 428.000 Personen der Voruntersuchung der Krankenversicherung unterzogen haben, ist die Beteiligung 1991 auf 459.444, 1992 auf 501.506 und 1993 auf 524.493 angestiegen.

Im Bereich der Krankenbehandlung und im besonderen der Pflegeberufe wurde bereits durch die Schaffung des Berufes der Pflegehelferin/des Pflegehelfers eine Qualitätsverbesserung erreicht. PflegehelferInnen können sowohl im stationären als auch im ambulanten Bereich in Unterstützung von ÄrztInnen und diplomierten Krankenpflegepersonen eingesetzt werden.

- 3 -

Auch die Verbesserung und Verlängerung der Ausbildung in den gehobenen medizinisch-technischen Diensten durch das neue MTD-Gesetz, BGBl.Nr 460/1992, und die neue MTD-Ausbildungsverordnung, BGBl.Nr. 678, trägt zu einer Qualitätssteigerung im Rahmen der Krankenbehandlung bei. Insbesondere der physiotherapeutische Dienst, der ergotherapeutische Dienst und der logopädisch-phoniatrisch-audiologische Dienst gewinnen auch im Bereich der Rehabilitation an Bedeutung.

Von meinem Ressort wurde der Entwurf eines neuen Gesundheits- und Krankenpflegegesetzes zur Begutachtung ausgesendet, der für die diplomierten Krankenpflegepersonen moderne Regelungen sowohl hinsichtlich des Berufsbildes als auch hinsichtlich Ausbildung, Fortbildung und Sonderausbildung schaffen wird.

Zur Arbeitssituation des Krankenpflegepersonals ist sicher auch die Zahl der zur Verfügung stehenden Kräfte wichtig. Hier kann jedenfalls festgehalten werden, daß sich die Zahl des diplomierten Pflegepersonals in Krankenanstalten von 29.086 im Jahr 1991 auf 32.821 im Jahr 1993 erhöht hat, was eine Steigerung um 13 % ergibt.

Ferner wurde durch die letzte Novelle zum Bundes-Krankenanstaltengesetz, BGBl. Nr. 801/1993, die Verpflichtung der Krankenanstaltsträger, die regelmäßige Fortbildung des Krankenpflegepersonals und der Angehörigen der medizinisch-technischen Dienste zu gewährleisten, erneuert und verstärkt. Weiters wurde vorgeschrieben, daß die Träger der nach dem Anstaltszweck und dem Leistungsangebot in Betracht kommenden Krankenanstalten sicherzustellen haben, daß den in der Krankenanstalt beschäftigten und einer entsprechenden Belastung ausgesetzten Personen im Rahmen ihrer Dienstzeit im erforderlichen Ausmaß Gelegenheit zur Teilnahme an einer berufsbegleitenden Supervision geboten wird, wobei diese Supervision durch fachlich qualifiziertes Personal auszuüben ist.

Zum Ausbau der ambulanten medizinischen Versorgung ist zu bemerken, daß mit Abschluß der Vereinbarung gemäß Art 15 a B-VG über die Krankenanstaltenfinanzierung für die Jahre 1988 bis einschließlich 1990 und der Folgevereinbarung im Art. 2 festgehalten wurde, daß den Ländern jährlich ca. 1 Milliarde Schilling für den Aufbau alternativer Strukturen - vornehmlich im extramuralen Bereich - zur Verfügung gestellt wird.

Die von den Ländern zu erstellenden Konzepte für die Verwendung dieser Strukturreformmittel zeigen einen deutlichen Trend zum vermehrten Einsatz der Mittel zur Errichtung und Verbesserung extramuraler Strukturen, wie z.B. Einrichtung von Gesundheits- und Sozialsprengeln, Auf- und Ausbau der Hauskrankenpflege, Einrichtung von sozialen Diensten usw.

Zur Forderung, daß Rehabilitationsabteilungen in Krankenanstalten eingerichtet werden sollen, ist auf den Versorgungsauftrag der Länder für die Sicherstellung ausreichender Krankenanstaltspflege hinzuweisen. Die Vollziehung im Bereich der Alten- und Pflegeheime fällt jedoch in die Zuständigkeit der Länder.

Durch die Betrauung des Bundesministeriums für Gesundheit und Konsumentenschutz mit der federführenden Betreuung des TIDE-Programmes (Technology/Telematic Initiative for Disabled and Elderly People) der Europäischen Union werden in einigen der im Behindertenkonzept angesprochenen Teilbereiche innovative Aktivitäten gesetzt werden.

Das im 4. Rahmenprogramm für Forschung und Entwicklung der EU im Bereich Telematikanwendungen angesiedelte TIDE-Programm wird österreichischen Universitäten, Industriebetrieben und Anwendergruppen die Möglichkeit einer Beteiligung an von der Europäischen Kommission mitfinanzierten Projekten im Bereich Ältere und Behinderte geben (Das TIDE-Arbeitsprogramm 1995-1998 wird beigelegt).

- 5 -

Vom TIDE-Programm besonders betroffen sind die Abschnitte

- 2.1 medizinische Maßnahmen zur Beseitigung bestehender Behinderungen
- 2.2 Hilfsmittel
- 2.3 Kommunikation
- 2.6 Ziele: Nützung neuer Technologien
- 14.8 Ziele: Beteiligung Österreichs an den Behindertenprogrammen der EU

des Behindertenkonzeptes der Österreichischen Bundesregierung.

Zu erwähnen wäre, daß das Telematik-Programm, und so auch das TIDE-Programm, stark anwenderorientiert sind.

Im Zusammenhang mit der angesprochenen Thematik ist auch der von meinem Ressort der Begutachtung zugeleitete Entwurf eines Medizinproduktegesetzes zu sehen.

Durch dieses Gesetzesvorhaben werden alle medizinischen Geräte, Bedarfsartikel und Labordiagnostika abgedeckt sein, die ua der medizinischen Betreuung von Behinderten dienen.

Die kommenden Regelungen werden gemeinsam mit den auf der Basis der einschlägigen EU-Richtlinien erstellten Europäischen Normen bei den medizinischen Hilfen für Behinderte zu einem hohen Sicherheits- und Funktionsniveau führen. Bestandteile der kommenden Regelung sind ua

- einheitliche europäische Zulassungsverfahren,
- ein EWR-Überwachungssystem für die Sicherheit derartiger Produkte, die bereits auf dem Markt sind,
- Regelungen für klinische Prüfungen,
- alle grundlegenden Sicherheits- und Leistungsanforderungen einschließlich geeigneter Produktinformationen für Behinderte, Angehörige oder Ärzte.

Durch diese Regelungen erwarte ich mir für die Zukunft eine deutliche Verbesserung für die Sicherheit und Lebensqualität von Behinderten, die auf medizinische Hilfen angewiesen sind.

Psychiatrie: Zur Zielsetzung der Integration der psychologischen und psychotherapeutischen Maßnahmen in die Gesundheitsversorgung ist festzuhalten, daß als erster Schritt im Bereich des Krankenanstaltenrechtes durch die letzte Novelle zum Krankenanstaltengesetz, BGBl. Nr. 801/1993, der Landesgesetzgebung die Vorgabe gegeben wurde, sicherzustellen, daß in den auf Grund des Anstaltszweckes und des Leistungsangebotes in Betracht kommenden Krankenanstalten eine ausreichende klinisch-psychologische und gesundheitspsychologische Betreuung und eine ausreichende Versorgung auf dem Gebiet der Psychotherapie angeboten wird. Diese grundsatzgesetzliche Vorgabe ist in den Landesausführungsgesetzen zu konkretisieren.

Zur Forderung nach der Einrichtung von Rehabilitationsabteilungen an Krankenanstalten ist zu bemerken, daß es den Spitalsträgern derzeit freisteht, derartige Abteilungen an ihren Krankenanstalten einzurichten. Eine verpflichtende Vorgabe, an allen allgemeinen Krankenanstalten aller Versorgungsstufen Rehabilitationsabteilungen einzurichten, erscheint nicht sachgerecht.

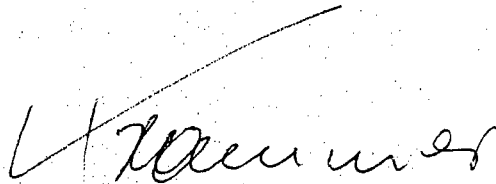
Das Bundesministerium für Gesundheit und Konsumentenschutz hat unter Einbindung von Experten fachliche Vorgaben für den Aufbau einer bedarfsgerechten Struktur der psychiatrischen Versorgung in Österreich ausgearbeitet. Schritte zur Umsetzung dieses Konzepts scheiterten allerdings bisher am Widerstand der für die Umsetzung zuständigen Länder.

Die Umsetzung der genannten Empfehlungen und Verpflichtungen ist Aufgabe der Bundesländer. Der Ausbau der regionalen, also dezentralen psychiatrischen Versorgung, insbesondere im ambulanten Bereich, geht voran. Allerdings ist die Finanzierung der

- 7 -

auf Basis privater Trägerschaften organisierten Nachbetreuungseinrichtungen vielfach nicht ausreichend gesichert.

Die Schaffung von geeigneten Betreuungseinrichtungen für geistig Behinderte außerhalb psychiatrischer Anstalten erfolgt in regional unterschiedlichem Ausmaß. Für betroffene Behinderte, bei denen sowohl eine schwere geistige Behinderung als auch eine schwere körperliche Behinderung bzw. Erkrankung vorliegt, kann aufgrund der notwendigen Pflege und Behandlungsmaßnahmen ein Aufenthalt in Krankenhauseinrichtungen nach wie vor erforderlich sein.

A handwritten signature in cursive script, appearing to read 'K. K. K.', is written across the page.

# Disabled and Elderly People

BEILAGE

The objective of work in this sector is to use information and communications technologies to improve the autonomy and quality of life of disabled and elderly people and to facilitate their integration into society. Two main topics will be addressed. The first, access to telematics services, aims to help the disabled and elderly (particularly those with cognitive and sensory impairments) to access information and communications technology; here work will concern the development of appropriate equipment and interfaces to help them use telematics systems and services, and the development of systems for managing work and home environments. The second topic, compensation for functional disabilities, involves developing applications with a view to restoring functional capabilities. This work will focus on systems for improving mobility, interpersonal communication and the ability to cope with the immediate environment. All work in this sector should pay particular attention to the identification of users' needs through user requirements studies, and to the validation by users of the applications developed.

## Users

The first group consists of the professional service providers in the field. These professional service providers can offer advice on structuring needs assessments, on potential assistive technologies and their adaptation, on motivation and training, on follow-up, on financing, etc. The professionals include therapists, nurses, social workers, psychologists, special teachers, medical doctors, engineers, and other groups, including carers.

The second group are the end-users, the individual disabled or elderly people. The end-users comprise those having one or several different types of disabilities affecting mobility, sight, hearing, speech and communication, cognition, and causing other medical problems; and also elderly people who require some support with the activities of daily living. Most often the end-users need professional advice on solving their practical and functional problems through the use of assistive technologies.

## Research tasks

### Access to Technology and Services

*GENERAL OBJECTIVES: Enable access to technology and services for disabled and elderly people and use information and communication technologies to improve the quality, effectiveness and efficiency of services which support the independent living and integration in society of disabled and elderly people.*

---

#### 1. Access to Communications and Information Technologies

---

*OBJECTIVES: Improve accessibility and usability of present and future information and communication technologies products and services for elderly and disabled people through the development and application of "design for all" principles, through*



**Disabled and Elderly People****area C, sector 8**

*appropriate adaptations, and through the development of special services, applications and equipment.*

**Tasks****DE 1.1 ACCESS TO TELECOMMUNICATIONS SERVICES AND IT PRODUCTS**

Develop and validate prototype interfaces and adaptations to current and emerging services, applications and equipment thereby achieving the widest practicable accessibility and usability. *PARTICULAR OBJECTIVES:* improve the usability and accessibility of current and emerging services and equipment for interpersonal telecommunications by disabled and elderly people; improve the accessibility and usability of current and emerging services and equipment for access to information and other resources; and to improve the accessibility and usability of computer-supported group activities and consider new uses of this technology that will be of particular value to disabled and elderly people.

**DE 1.2 INTERFACES AND TOOLS**

Develop and validate systematic approaches and tools and demonstrate prototype user interfaces that enable designers to also cater for the needs of disabled and elderly people. *PARTICULAR OBJECTIVES:* develop systematic approaches and demonstrate prototype user interfaces facilitating multimodal user interaction by different user categories; develop systematic approaches and demonstrate prototype intelligent user interfaces which are adaptive to individual user requirements; develop systematic approaches and demonstrate prototype dialogue control structures that facilitate the definition of flexible interaction techniques in order to meet the needs of different user categories; and develop and demonstrate methods and tools that enable the elicitation and description of user requirements and the design, prototyping and evaluation of user interfaces accessible by different user categories.

**DE 1.3 NEW ICT-BASED SERVICES AND PRODUCTS**

Develop, validate and pilot new specific services, applications and equipment to address the telecommunications and information-handling needs of elderly and disabled users. *PARTICULAR OBJECTIVES:* develop innovative input/output devices and techniques in the application of information and communication technology for disabled and elderly people; develop and demonstrate new relay and mediation services for interpersonal telecommunications and access to information and other services; and develop and demonstrate new special applications and services for the distribution of information to elderly and disabled people.

---

**2. Integrated Systems Supporting the Activities of Independent Living, Education, Work, Leisure, Mobility and Training**

---

*OBJECTIVES: Develop and demonstrate systems that integrate different devices and systems that support daily living and promote wider involvement of users in society.*

**Tasks****DE 2.1 INTEGRATED SYSTEMS FOR DAILY LIVING**

Develop and validate technically and functionally integrated systems for the home with common operational procedures and presentations that are adaptable to the needs of individual users and enhance or enable daily living. *PARTICULAR OBJECTIVES:* develop and validate integrated systems and services to support the activities of daily living which combine information technology, home systems and telecommunications; integrate different teleservices to support the activities of daily living; develop appropriate human/machine control interfaces that take into account issues of cognitive overload and consider the user's abilities and changing needs; integrate devices, including sensors and actuators, within systems for daily living; develop systems that help elderly and disabled people to maintain their health and to obtain advice for self treatment; and develop and validate tools that support the training of elderly and disabled people in daily living skills.

**DE 2.2 INTEGRATED SYSTEMS FOR PROMOTING INVOLVEMENT IN SOCIETY**

Bring together latent human resources and state-of-the-art technologies to develop new, or adapt existing, integrated systems so that the integration of disabled and elderly people in society will become a reality. *PARTICULAR OBJECTIVES:* develop systems that enable people to move freely and safely around the European Union and elsewhere; develop services that allow communication with people and services outside their home, including vocational, educational, leisure and cultural activities; identify the specific requirements for elderly and disabled people for the emerging systems, services and underlying infrastructures; develop and validate tools which support the training of elderly and disabled people in order to increase their involvement in society; and develop and validate systems that provide accessible and adaptable environments encompassing vocational, educational, leisure and cultural activities.

**DE 2.3 SPECIFICATIONS, STANDARDS AND PRINCIPLES FOR SYSTEMS INTEGRATION**

Develop and validate a set of design principles that will form the foundation for the integration of rehabilitation systems. These principles will cover issues such as user needs, interface design and standardisation for system integration. *PARTICULAR OBJECTIVES:* form common interest groups to develop and validate common specifications, standards and principles for systems integration taking

**Disabled and Elderly People****area C, sector 8**

into consideration user requirements and all relevant technologies; adapt modelling and simulation tools which allow the rapid prototyping and emulation of integrated systems and environments according to user requirements and their demonstration to prospective users; explore the issues of isolation and human contact that underline the provision of remote services in order to better involve people in society; and explore the incompatibilities between systems in the EU member states and develop bridges and gateways between such systems at the device and infrastructure levels.

---

### **3. Information and Communication Systems for Enhancing the Efficiency and Effectiveness of Service Organisations Supporting Independent Living**

---

*OBJECTIVES: Improve the quality of services supporting autonomous living by using information and communications technologies to improve their efficiency and effectiveness.*

#### **Tasks**

#### **DE 3.1 SOCIAL INFORMATION NETWORKS**

Introduce logical or physical connections between people and organisations within the same service activity in order to enhance active social coordination and communication through the use of information and communication technologies by and for disabled and elderly people. *PARTICULAR OBJECTIVES:* increase the benefits of existing databases and knowledge-based systems by facilitating and improving access to them; integrate database technology and knowledge-based systems into service delivery to provide gains in the quality of service provided to the client; provide information and communications technology applications for the development of "virtual teams" on public networks that provide services to support autonomous living, and enable people with mobility restrictions to enjoy active membership of these service provision teams; develop information and communications technologies applications that provide flexibility in service delivery by enabling mobile staff to maintain contact with their core service organisation while working in the field; identify opportunities for using information and communications technologies to support the provision of intelligently linked services, so allowing an improvement in the processing of complex administrative operations; and identify opportunities for using information and communication technologies for supporting the management of care services.

#### **DE 3.2 REMOTE SERVICE PROVISION**

Improve the quality of services supporting autonomy and quality of life by using information and communications technologies to deliver services remotely where appropriate. *PARTICULAR OBJECTIVES:* identify new opportunities for using information and communications technologies in the management and provision of social support services and demonstrate and validate these; identify

**Disabled and Elderly People****area C, sector 8**

opportunities for using information and communications technologies in the provision and management of activities of daily living support services and demonstrate and validate these; identify opportunities for using information and communications technologies in care services and demonstrate and validate these; identify opportunities for using information and communications technologies in personal security services and demonstrate and validate these; and identify and demonstrate the opportunities for using information and communications technologies in services to support client-managed care packages.

**DE 3.3 VALUE-ADDED NETWORK SERVICES**

Develop and validate methods and technologies that enable service providers to transport their services across different technological platforms and support organisations that provide services to disabled and elderly people. *PARTICULAR OBJECTIVES:* incorporate available network services into other modes of communication such as text telephony and fax-and-image communication; develop methods and techniques to make information and service provision transportable across multiple technological modes, including those specifically developed for elderly and disabled people; develop methods and techniques enabling the service providers to integrate interactions from people using special devices into their services, and ensure that consumer needs are recognised in the provision of new services; and identify opportunities for using information and communications technologies to improve the efficiency and effectiveness of relay and mediation services and demonstrate and validate these.

**Compensation for Impaired Functions**

*GENERAL OBJECTIVES:* Apply new technologies, including information, communication and control technologies, to the assessment of functional impairment and to providing technical aids to compensate for impairment.

**4. Applications of Manipulation and Control Technology**

*OBJECTIVES:* Enhance personal mobility and transportation, control of the immediate environment, and assistance with manipulation and carrying.

**Tasks****DE 4.1 PERSONAL MOBILITY AND TRANSPORTATION**

Enhance access and safety in transportation in order to develop and validate self-help facilities for improving mobility both indoors and outdoors. *PARTICULAR OBJECTIVES:* provide improved access to the public transport infrastructure through the application of intelligent, safe control technology; provide new solutions and devices for people with restricted walking abilities to move about in public areas; provide increased mobility for wheelchair users

**Disabled and Elderly People****area C, sector 8**

through the use of intelligent drives, actuators and controllers; and develop a robotic transfer aid to assist in the collection, lifting, posture adjustment, transport and transfer of a disabled person within residential buildings.

**DE 4.2 CONTROLS FOR DEVICES AND FACILITIES**

Develop and validate improved controls for devices and facilities used by disabled and elderly people, with an emphasis on the interoperability and compatibility of several home and work systems. *PARTICULAR OBJECTIVES:* develop an improved personal device controller and control technology with multifunctional capabilities; develop assistance and safety systems giving people on the move greater independence and control; and provide the user with self-controlled dynamic postural support.

**DE 4.3 ASSISTANCE IN MANIPULATION AND CARRYING**

Increase and prolong the independence of elderly and disabled people through the provision of cost-effective intelligent devices for manipulation and carrying. *PARTICULAR OBJECTIVES:* enhance the usability and affordability of existing intelligent manipulators for rehabilitation; extend the use of mobile platforms and manipulators by developing safe navigation and docking systems; and improve and extend the independence of people with low to medium dependency by developing intelligent systems to assist in a range of activities of daily living.

---

**5. Technology Supporting Assessment, Restoration and Enhancement of Function**


---

*OBJECTIVES: Develop and improve technology for functional assessment and training, for restoring or enhancing sensory, motor and mental abilities, and for augmentative communication.*

**Tasks****DE 5.1 ADVANCED SOLUTIONS FOR THE ASSESSMENT OF PEOPLE WITH DISABILITIES AND THEIR SKILLS TRAINING**

Develop technology solutions supporting the assessment of the ability and the skills training of persons with motor, sensory, communication, and cognitive disability. *PARTICULAR OBJECTIVES:* simplify and consolidate approaches to the assessment and training of people with motor disability through the exploitation and adaptation of available technologies and through the development of a pan-European network; develop, demonstrate and evaluate methods, devices and systems to support the assessment, rehabilitation and training of people with communication or sensory disabilities; and to develop, demonstrate and evaluate methods and technology support for the assessment and training of people with learning and affective difficulties and disabilities arising from other cognitive impairments.

**Disabled and Elderly People****area C, sector 8****DE 5.2 ALTERNATIVE AND AUGMENTATIVE COMMUNICATION SYSTEMS**

Develop and adapt technologies to provide alternative and augmentative communication strategies applicable in multicultural contexts for people with communication disabilities, such as in oral and written expression. *PARTICULAR OBJECTIVES:* provide technology solutions for interactive personal communication systems for people with communication difficulties that are portable, easy to use, applicable in real-world contexts, and that enable user control of communication; and develop technical strategies for personal information and communication management systems offering multimodal acquisition and expression of information.

**DE 5.3 COMPENSATION BY SUBSTITUTION OR ENHANCEMENT OF SENSORY FUNCTION**

Develop and adapt technologies for compensation for sensory disability by substitution or enhancement of sensory function, such as hearing and vision. *PARTICULAR OBJECTIVES:* develop and evaluate systems to assist visually disabled persons to receive visual information, including text, in real time; and enhance or enable access to speech information and other acoustic events.

**DE 5.4 RESTORATION AND ENHANCEMENT OF MOTOR ABILITY**

Develop and adapt technologies to assist in the restoration and enhancement of motor ability, including functional electrical stimulation, prostheses and orthoses. *PARTICULAR OBJECTIVES:* develop telematic systems for supporting the restoration of motor ability, including the integration of existing technology and evolving technology, along with the establishment of agreement on the interpretation and presentation of assessment and monitoring information; develop and integrate informatics tools to assist in the planning of rehabilitation of motor function, and develop tools for simulation, forecasting and the selection and adaptation of assistive devices; and develop information systems for design, fitting and maintenance of devices for the restoration of motor function.

**DE 5.5 TECHNOLOGICAL SUPPORT FOR ENHANCING MENTAL ABILITIES**

Develop, apply and demonstrate the use of technology for the enhancement of mental abilities. *PARTICULAR OBJECTIVES:* develop a strategy and technical solutions for combining state-of-the-art technology devices in a coherent structure that facilitates meaningful interaction with information technology by people with learning disabilities; and develop technical solutions whose availability will significantly reduce the extent to which people with cognitive disabilities must depend on direct supervisory care for the activities of daily living.

**Disabled and Elderly People****area C, sector 8****6. Support Issues Specific to Telematics for Disabled and Elderly People**

This section refers to activities specific to the Telematics for Disabled and Elderly People sector that are not covered by the actions described in the chapter on Programme Support Actions (which deals with, for example, telematics watch and assessment, trans-sector consensus development and coordination, awareness, dissemination of results and promotion of telematics, international cooperation, and training). Those actions include practical measures to ensure that the applications developed will ensure, in the most cost-effective way possible, that the needs of disabled and elderly people are taken into account in all sectors of the TELEMATICS APPLICATIONS Programme.

*The RTD tasks in this sector will be accompanied by a set of specific measures tailored for the assistive technology domain, supplementing those provided in the general chapter on Programme Support Actions. These measures can be associated with a specific task or may add value and impact to a group of projects in a particular subsector or across the assistive technology area as a whole. GENERAL OBJECTIVES: raise the level of knowledge and awareness across the fragmented industries and markets in the assistive technology field; develop and support new standards; get users involved in developments and validation; facilitate the interaction between sector actors, especially involving SMEs; and develop measures of the cost-effectiveness and cost-utility of assistive technology.*

- **Education, Information, and Awareness**

*OBJECTIVE: Raise the level of knowledge and awareness of assistive technology within Europe.*

<b>Tasks</b>
--------------

**DE 6.1 EDUCATION**

Promote the availability of educational materials appropriate for different European cultures to professionals and disabled and elderly people

**DE 6.2 ASSISTIVE TECHNOLOGY AWARENESS**

Stimulate the dissemination of awareness of research and development between the actors of the highly fragmented assistive technology subsector and to decision makers, sector actors and end users through focused workshops etc.

- **Methodologies, Innovation Strategies and Future Perspectives**

*OBJECTIVE: Provide methods to fully involve end-users in the process of bringing innovative assistive technology to the market.*

<b>Tasks</b>
--------------

**DE 6.3 ETHICAL METHODS FOR USER INVOLVEMENT**

Provide methods for involving end-users of assistive technology and their user organisations throughout the process of developing technical solutions, ensuring

## Disabled and Elderly People

## area C, sector 8

processes to overcome the special ethical problems that can result when working with these users.

### DE 6.4 METHODS FOR VALIDATION

Provide methods for the implementation and validation of assistive technology solutions.

### DE 6.5 FUTURE PERSPECTIVES IN ASSISTIVE TECHNOLOGIES

Guide research and technological development in assistive technologies in the medium and long term.

#### • Standardisation

OBJECTIVE: *Ensure that assistive technology and other products are designed to appropriate standards.*

#### Tasks

### DE 6.6 FACILITATING THE STANDARDISATION PROCESS

Ensure that the potential standardisation aspects of all assistive technology projects and studies are handled effectively.

### DE 6.7 INCLUDING ELDERLY AND DISABLED PEOPLE IN THE STANDARDISATION PROCESS

Ensure that all relevant standardisation bodies and activities take account of the requirements of disabled and elderly people.

#### • Market Development and Technology Transfer

OBJECTIVE: *Encourage the development of the market in assistive technology products and services and the transfer of research results into products and services on the market.*

#### Tasks

### DE 6.8 ASSISTIVE TECHNOLOGY MARKET DATA AND DIFFUSION

In addition to the market watch carried out by task SU 1.1 (see the chapter on Programme Support Actions), there is a need to develop structures and methods to analyse and collect data at the subsector levels, due to the extremely fragmented nature of the assistive technology market, and so support the emergence of a coherent internal market and sector.

### DE 6.9 COST EFFECTIVENESS AND COST UTILITY ANALYSIS

Measure the impact of assistive technology on the quality of life of disabled and elderly people, and measure the "value for money" that society receives from the deployment of assistive technologies.