

PERSONAL INFORMATION

Family name, First name: Garcés Ferrer, Jorge

Researcher unique identifiers: 0000-0003-4093-7140 (ORCID); L-5179-2014 (Research ID)

Nationality: Spanish

URL for web site: <http://www.polibienestar.org/team/jorge-garces-ferrer/>

EDUCATION: Doctorates: PhD in Political Science and Public Administration (University of Granada, 2003) and a PhD in Social Psychology (University of Valencia, 1985), in both grade of distinction “Cum laude”. Degrees: Degree in Philosophy, specialising in Psychology (University of Valencia); Degree in Social Work (University of Alicante); Degree in Criminology (University of Valencia).

CURRENT POSITIONS: In 2014 I obtained the position **Prince of Asturias Distinguished Visiting Professor at Georgetown University** through a competitive process called by the Ministry of Education, Culture and Sport of the Spanish Government (<http://cges.georgetown.edu/people/facultystaff/garces>). This position was created in 1999 to honour the Prince of Asturias (current King of Spain) who undertaken postgraduate studies in the Edmund A. Walsh School of Foreign Service and is framed within the agreement between Georgetown University, the Embassy of Spain in USA and the Fundación Endesa. Since January 2014 I have been teaching and carrying out research in the BMW Center for German and European Studies of the Edmund A. Walsh School of Foreign Service. My purpose during this period has been to promote and disseminate the studies about Spain and Europe in the field of the European Comparative Social Policy, assuming also the institutional representation of the position in front of entities and personalities of the academic, scientific, economic, social and diplomatic world in Washington D. C.

I am **Full Professor of Social Policy at the University of Valencia** and in 1996 I created a research group of Social Welfare Policy –Polibienestar- at the University of Valencia which would later transform into a public University Research Institute and which I have managed since its creation as Director. Its objective is to improve social welfare and the quality of life of society through interdisciplinary research of the technical and social sciences (www.polibienestar.org). Presently, Polibienestar is a European research centre of public policies composed by 56 researchers from nine different departments from the University of Valencia and six associated units from the Universities: Castellón, Murcia, Castilla la Mancha, Castilla y León, Extremadura, and Politécnica de Madrid. From this centre with my research team, we have developed projects funded by the VI and VII Framework Programmes and H2020 of the European Commission. Two features are key descriptors of the research I led. On the one hand the interdisciplinary approach where researchers from different backgrounds work together to study social and health phenomena. Therefore, experts on medicine, engineering, informatics, architecture, sociology, political science, economy, law, social work and education join their experience to tackle the study of welfare policies. Besides, my research is also characterized by the cooperation of a network of inter-institutional research bodies, public administration, private companies, social organizations and NGOs, with the objective of increase the commitment and efficacy in the implementation of the solutions to the social problems object of study. Both dimensions create in the team learning synergies, promoting mutual learning and consensus in the definition of research processes from a basic and applied perspective.

PREVIOUS POSITIONS: Throughout my professional university career I have held academic posts at the University of Valencia with the objective of actively participating in management processes as well as in both teaching and university: Member of the Governing Board; Dean of the Faculty of Social Work and Director of the official Master’s degree in Social Welfare.

FELLOWSHIPS AND AWARDS

2015	Honorary Medal of the University of Burgos, Burgos, Spain
2013	Honorary Doctorate by the University of Encarnación, Paraguay
2012	First Prize of the University Nebrija and ACS Foundation on Accessible Tourism, Spain
2009	Honorary Doctorate by the University of San Pedro, Peru
2003	First Prize within the call V of the American Foundation Awards 3M, United States

SUPERVISION OF GRADUATE STUDENTS AND POSTDOCTORAL FELLOWS

2008 – 2012	3 Postdoc Student, University of Valencia, Spain (one of them was awarded by the prestigious <i>Juan de la Cierva</i> Grant of the Ministry of Education, Culture and Sports).
2000 – 2014	13 PhD Students; University of Valencia, Spain (one of them hold the prestigious grant <i>V Segles</i> of the University of Valencia). All my PhD students received a Cum Laude and had developed an excellent career, occupying positions in the Joint Research Center of the

European Commission and in the *Universidad de Concepción* (Santiago de Chile).

2000 – 2014 25 Pre-doc Students, University of Valencia, Spain

2000 – 2014 107 Master Students, University of Valencia, Spain

TEACHING ACTIVITIES: An accredited teaching experience of 30 years since 1985 to the present in subjects related to Compared European Welfare Policy and European Public Health and Social care reform. I have taught in degree and postgraduate (Master's and Doctorate) levels in different European and North-American universities such as Valencia (Spain), Innsbruck University (Austria), Erasmus University of Rotterdam (Holland) and Georgetown University (Washington DC, USA).

SCIENTIFIC OUTPUTS: My scientific outputs have been positively evaluated as 24 consecutive years of high quality research by the Spanish National Agency of Accreditation and Evaluation of Quality (ANECA). My scientific contribution has been the development of the Social Sustainability Theory (SST) - as theoretical basis and operational principles - and its operationalization and validation through the Sustainable Socio-Health Model (SSHM) based on the coordination between social and health care systems, tools and methodologies in integrated care and tailored provision of social-health care services. My research has result in more than 100 scientific publications in Spanish, English and German including articles, chapters and books on comparative public policies, methodology, interactions between the social and health care system and design of tailored care programmes. The research line framing the DyingNity_EU project and guiding my research in the last fifteen years kicked off with these publications: Garcés, J. (2000). *La nueva Sostenibilidad Social*. Ariel, Barcelona; and Garcés, J., Ródenas, F. and Sanjosé, V. (2003). *Towards a new welfare state: The social sustainability principle and health care strategies*. *Health Policy*, 65, 201-215. Impact factor 0.754.

ORGANISATION OF SCIENTIFIC MEETINGS

2015 Chair of the seminars “Global Financial Crisis: Looking Back and Moving Ahead” and “Retos de la Política Científica en España” at the University of Georgetown / Washington DC, USA

2015 Chair of the “First conference of the Spanish Scientific Association in the USA” / Washington /USA

2013 Chair of the “Supporting collaborations between the Ambient Assisted Living Joint Programme and Local and Regional Authorities” / Spain, Austria and Belgium

2011 Chair of the IX ESPANet Conference /300 participants / Spain

2007 Chair of the LivingAll project European Conference / Spain

INSTITUTIONAL RESPONSIBILITIES

2011 – present Director of Polibienestar Research Institute

2012 – present Coordinator of the Action Group D4 of the European Innovation Partnership on Active and Healthy Ageing, European Commission/ Belgium

2013 Scientific Committee of “Grants and Fellowships 2013” of the Fund for Scientific Research / FNRS/ Belgium

2010 Expert Committee of 'Joint Programming Initiative: demographic change. The potentials and challenges of longer lives - German Federal Ministry of Education and Research/Germany

COMMISSIONS OF TRUST

2003 – present Member of the editorial committee for Political Sciences, Foxwell & Davies/Italy

1995 – present Co-director of the collection “Políticas de Bienestar Social”, Editorial Tirant lo Blanch/Valencia (Spain)

2011 Evaluator of R&D research proposals of the 7th Framework Programme in the area of health for the Directorate General for Research of the European Commission

2011 Expert Evaluator of French-Speaking Community of Belgium, Fonds de la Recherche Scientifique /Belgium

1999 Spanish Deputy Congress – Commission of Social Policy and Employment

MEMBERSHIPS OF SCIENTIFIC SOCIETIES

2014 – present Funding Member, Spanish Scientifics in the USA - ECUSA / USA

2014 – present Member, The Gerontological Society of America / USA and Spain

2014 – present Member, Council of European Studies / USA

2014 – present Member, International Long-term care Policy Network / United Kingdom

2014 – present Member, Coral network / The Netherlands

2003 – present Funding Member and Treasurer, Spanish Society of Social and Health Care / Spain.

On-going Grants

Project Title	Funding source	Amount (Euros)	Period	Role of the PI	Relation to current ERC proposal
APPCARE	III Health Programme EC	1.337.071	2015 2018	<p>In this project I am leading the work package “Data Interoperability” with the main objective of setting up an ICT solution to grant the exchange of health data among care givers and monitoring the implementation of the APPCARE model in the city of Valencia.</p> <p>I am also contributing to the activities leading to coordinated care management modules and the study of impact assessment and sustainability of the results of the project.</p>	<p><i>Appropriate care paths for frail elderly patients: a comprehensive model (APPCARE)</i> addresses the challenges faced by the European Health Systems to respond effectively and efficiently to the increasing demand of integrated care as a result of the ageing processes.</p> <p>The APPCARE project aims at creating a new model for the management of frail elderly people including: (1) a standardized application of Comprehensive Geriatric Assessment (CGA); 2) a homogeneous and coordinated care pathway; (3) a particular hospital admission care path for +75 patients, with short intensive observation periods; and (4) a new frailty prevention program to demonstrate how an innovative and comprehensive management of complex and co-morbid clinical situations may maintain patient’s functional status in its clinical trajectory, optimizing health care systems.</p> <p>DyingNity_EU will benefit from the results of the APPCARE project as it will allow to better understand the European health care system. In particular, APPCARE contributes to the <u>development of personalized care delivery, improvements in quality of life of elderly and integration of health and social care systems</u> which leads to a reduction on services consumption and consequently, to increasing the sustainability of the health care systems.</p>
IENE	Erasmus +	290.000	2014 2016	<p>In this project I lead the elaboration of learning tools for culturally competent and compassionate care and I am responsible of the implementation of training based on seven self-learning tools among nurses and other healthcare leaders and senior staff.</p>	<p>The <i>Strengthening the nurses and health care professionals’ capacity to deliver culturally competent and compassionate care (IENE)</i> project aims to improve the quality of training for nurses and health care professionals in the delivery of compassionate and cultural competent care which responds to the healthcare sector needs.</p> <p>This project is highly related with DyingNity_EU as it: (1) responds to the need of creating appropriate communication and interpersonal skills among health professionals to provide <u>personalized and culturally competent care</u>; and (2) it proposes <u>the transferability of a solid model to European regions</u>.</p>
SAVE	Daphne III Programme	567.100	2014 2016	<p>Under the SAVE project I coordinate the Work Stream 2 and I lead the elaboration of an ICT tool to improve</p>	<p>The <i>Solutions Against Violence in Europe (SAVE)</i> project responds to the need of collaborative European action to improve the quality of the systems of prevention, detection and intervention in cases of violence on</p>

<i>Project Title</i>	<i>Funding source</i>	<i>Amount (Euros)</i>	<i>Period</i>	<i>Role of the PI</i>	<i>Relation to current ERC proposal</i>
				the quality of the response to cases of violence on children in Europe.	<p>children in Europe. This project implies the cooperation of 6 countries representing 3 welfare models to create a Model of Intervention based on innovative public-private partnerships.</p> <p>The SAVE project is related with DyingNity_EU proposal as it proposes the <u>generation of a model to improve the coordination of professionals</u> and to contribute to <u>more effective public policies</u>, in this case on child violence, from a European cross-national comparative perspective.</p>
AFE-INNOVNET	Competitiveness and Innovation Framework Programme	999.927	2014-2016	In this project I have developed: (1) a support evaluation framework of innovation for age-friendly environments; (2) a participatory methodology on how involve older people in the co-production of age friendly environments solutions by local and regional authorities; and (3) a framework to evaluate the social, economic and environmental impact of age-friendly solutions.	<p>The overarching goal of the thematic network <i>Innovation for Age-friendly environments in the European Union (AFE-INNOVNET)</i> is to set up a large EU wide community of local and regional authorities and other relevant stakeholders who want to work together to find smart and innovative evidence based solutions to support active and healthy ageing and develop age-friendly environments.</p> <p>This project has a strong relationship with the DyingNity_EU project as it aims at fostering the understanding on how the <u>elderly population need specific channels and processes</u> to express their preferences in different areas, as it might be the end-of-life decisions.</p>
ASSEHS	II Health Programme EC	2.237.326	2014-2016	In the ASSEHS project I am leading the evaluation work package (WP3) and I am responsible for the design of the Evaluation Framework to assess the project performance in terms of effectiveness (measurement of results) and quality of the outputs (quality assurance).	<p><i>Activation of Stratification Strategies and results of the interventions on frail patients of Healthcare Services</i> (ASSEHS) aims at activating stratification strategies on the ground and assess the results of their deployment in different European Health Services, by focusing on their utilization and added value to the delivery of care to frail elderly patients.</p> <p>This project is highly related with DyingNity_EU as it contributes to the <u>provision of personalized integrated social and health care by the use of stratification tools</u> which leads to improvements in the sustainability of both systems.</p>
UHC2.0	II Health Programme EC	2.327.471	2014-2016	Within the UHC project I have had a relevant role coordinating the implementation of the 5 pilot sites of the project (WP6), being directly responsible of the implementation of a	<i>Urban Health Centres 2.0 (UHC2.0)</i> promote innovative integrated health and social care pathways, early detection of frailty, management of polypharmacy and prevention of falls. Its main objective is to develop, implement, and evaluate the model in 5 European cities to produce a transferable and easily implementable model for the innovative UHC2.0.

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				pilot in Valencia (Spain) with 500 end-users.	The UHC2.0 provides a lot of relevant information for the DyingNity_EU project as it <u>proposes innovative efficient pathways to provide tailored social and health care for elderly population and co-responsible use of services</u> . The implementation of the model empowers patients and informal caregivers to assume an active role in the decision making processes in coordination with the professionals. The model, focusing on primary care, is designed from a proactive and preventive approach to move to community based services.
CAP4ACCE SS	7th Framework Programme	2.787.161	2013-2016	In this project I lead the WP about “Policy Recommendations” for the use of collective approaches to digital social innovation in mobility policies and I also coordinate the piloting of the ICT solution in the city of Elche (Valencia).	The objective of <i>Collective Awareness Platform for Improving the Accessibility in European Cities and Regions (CAP4Access)</i> is to develop and pilot-test methods and tools for collectively gathering and sharing spatial information for improving accessibility. The execution of this project has increased my knowledge about how ICT solutions facilitate the awareness raising and the participation of vulnerable groups as well as proactively create solutions to mobility problems. The generation of collective processes to develop consensus assessment methodologies has been used to propose policy recommendations. This know-how is aligned with the methodology approach of the DyingNity_EU project in two main points: (1) the <u>qualitative methodology to be used in the design of the Dignified Death Index</u> , and (2) the <u>procedure to generate the roadmaps</u> including policy guidelines.
INSPIRES	7th Framework Programme	3.091.891	2013-2016	In the project I have led the execution of the Work Package 2 “ <i>Analysis and Explanation of the impact of the economic crisis on vulnerable groups</i> ” by undertaking a EU comparative analysis of the situation of vulnerable groups in Europe. I have also coordinated the scientific contribution of Spain in all the project activities, including interviews with policy makers and collection and	The <i>Innovative Social and Employment Policies for Inclusive and Resilient Labour Markets in Europe (INSPIRES)</i> aims to contribute to the resilience and inclusiveness of labour markets in European countries. This project is related with the DyingNity_EU project in the performance of EU comparative analysis based on qualitative and quantitative techniques. Concretely I have applied the <u>Qualitative Comparative Analysis method that will be also used in the DyingNity_EU</u> .

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				analysis of innovative labour policies.	
EOSIAC	Lifelong Learning Programme	122.500	2013 2016	In this project I am the responsible researcher of the design of a methodology aimed to integrate children with autism in public schools facilitating their social inclusion in ordinary educative contexts.	<p>The <i>Equal opportunities to social inclusion for autistic children (EOSIAC)</i> aims to achieve the integration in public education of a larger number of children with autism aged 5-10 years by facilitating training to parents and professionals of the public educational system and by performing integration methodologies and good practice guides to support and represent the starting point in achieving integration.</p> <p>This EOSIAC project is related with the DyingNity_EU proposal as it proposes the <u>generation of a model to improve the coordination of professionals and to contribute to more effective public policies</u>, in this case on the educational system, from a European cross-national comparative perspective.</p>
MEET	Lifelong Learning Programme	365.881	2013 2015	Within this project I participate in all the research activities of the project and lead the post-implementation of the training programme.	<p>The <i>Meeting the health literacy needs of immigrant populations (MEET)</i> is an empowering health promotion model in which members of migrant and minority ethnic communities are recruited and trained to participate in the delivery of health promotion initiatives. The main aim of this project is to propose actions aimed at reducing inequities including targeted health promotion and best practice exchange.</p> <p>The MEET is highly related with DyingNity_EU as it proposes the <u>transferability of a solid model to European regions</u>.</p>

Applications

<i>Project Title</i>	<i>Funding source</i>	<i>Amount (Euros)</i>	<i>Period</i>	<i>Role of the PI</i>	<i>Relation to current ERC proposal</i>
COCARE	H2020 PHC-25	4.833.511	2016 2019	In this proposal I am the responsible of (1) the quality assurance of the structure, processes and outcomes of the project; (2) the definition procedures and methodologies to ensure that indicators and methods are consistent; (3) the definition of an evaluation methodology that allows the measurement of the impact in several dimensions such as efficiency, efficacy, health outcomes, satisfaction and user acceptance; (4) the evaluation of the results and the validation of the tools used within the proposal to assess the improvements on the expected impacts.	<p>The CoCare proposal sets out a radical model for the implementation of integrated health and care in Europe. Grounded in strong practical experience of integration initiatives and in the experience of the European Innovation Partnership on Active and Healthy Ageing, the CoCare aims to enable the transfer of integrated care interventions from one context to another. Focusing on the organisational, social and technical barriers to integration and proposing solutions based on co-production that address scale-up, integration of organisational processes and motivation to use information and communication technologies (ICT) support for health and care services.</p> <p>This proposal has in common with the DyingNity_EU that both aims to support incremental increase in more appropriate policies and services. The CoCare <u>is based on model implementation for integrative care services along with supporting ICT components.</u></p>
COMPATH	H2020 PHC-25	4.658.062	2016 2019	In this proposal I am the responsible of (1) the quality assurance of the structure, processes and outcomes of the project; (2) the definition procedures and methodologies to ensure that indicators and methods are consistent; (3) the definition of an evaluation methodology that allows the measurement of the impact in several dimensions such as efficiency, efficacy, health outcomes, satisfaction and user acceptance; (4) the evaluation of the results and the validation of the tools used within the proposal to assess the improvements on the expected impacts.	<p>The objective of Personalised Dynamic Care Pathways for People with Co-Morbidities (COMPATH) is to empower elderly people with comorbidities through the utilisation of advanced, secure ICT services (COMPATH-services) that promote remaining in the daily living environment, strengthen personal autonomy, facilitate monitoring of the personal health status, activity and compliance with therapy and thus improve the quality of life and optimise care. COMPATH shall integrate the different players in healthcare, social and home care. The objectives shall be achieved by the implementation of COMPATH-services that are based on the concept of personalised dynamic care pathways (PDPs), The evaluation of the COMPATH-services will be a proof-of-concept in four pilot regions.</p> <p>The COMPATH proposal has in common with the DyingNity_EU that both allow <u>data collection</u> from multiple sources for <u>developing customized responses</u> for the challenges faced by the design of integrated care for the elderly.</p>
DISPILL	H2020 PHC-29	3.131.995	2016 2018	Within in the DISPILL proposal I will be in charge of evaluating the needs and requirements of the system of electronic	The main aims of the Remote Pill Dispenser (DISPILL) are to use the Public Procurement of Innovative Solutions approach in a joint cross-national procurement of electronic medicine dispensers, which will aid

				<p>pill dispenser by involving all stakeholders in a co-production procedure.</p>	<p>more safe, efficient and sustainable handling of medicines in the four participating municipalities and regions. The joint PPI method will enable the health care public procurers' to better meet their and their users needs. To achieve these objectives, the buyers' group and their support partners will take on the PPI process with a preparatory phase, in which needs analysis and dialogue with the suppliers are at the core, succeeded by the procurement and follow-up phases. Evaluation and dissemination work will take place in all project phases. The evaluation work builds on the Monitoring and Assessment Framework of the EIP AHA, so lessons learned can be fed into the European efforts of scaling up of good eHealth initiatives.</p> <p>The DISPILL proposal, promoted by policy makers and care providers, aiming to improve the quality of the services to people in need of long-term care medication. This proposal is highly related with the DyingNity_EU as both of them are <u>built up on real needs and demands of decision makers, i.e. improvements in the sustainability of the systems, the co-responsibility of users and care providers, and in the quality of life of patients</u></p>
Co-CreAgeing	H2020 ICT-10-2015	1.999.531	2016 2020	<p>My role in this proposal is coordinating the work package on testing usability, relevance and transferability of IT based co-production tools in which the tools developed will be tested in 4 pilot sites in a first phase and in 8 pilot sites in a second phase involving citizens and local and regional authorities.</p>	<p>On 7 December 2015, the Covenant on Demographic Change will be launched by the AFE-INNOVNET Thematic Network, an open EU network currently funded by the CIP ICT-PSP programme (see in previous table). In line with the positive vision of ageing promoted by the European Innovation Partnership on Active and healthy Ageing, the <i>Digital Social Platform for Sustainable Responses to Demographic Change (Co-CreAgeing)</i> will develop, test and deploy IT tools aimed at supporting the members of the Covenant on Demographic Change in the design, implementation and evaluation of their age-friendly initiatives through a participative methodology that involves citizens in the co-creation of the solutions envisaged and implemented by their local authorities to respond to their needs.</p> <p>This proposal has a strong relationship with the DyingNity_EU project as it aims at fostering the adoption of <u>policy recommendations developed in a comprehensive, collective and consensus-based processes.</u></p>
SUPER	Erasmus + KA2	329.399	2015 2018	<p>Within the project SUPER I will be responsible of developing a knowledge</p>	<p>The proposal <i>Social Urban Protection Empowerment Resilience (SUPER)</i> intends to strengthen the capacity of elderly care providers</p>

				<p>kit to allow the link offer and demand of care products and services to evaluate how such a tool can improve the quality of care provision in local communities.</p>	<p>organizations to reduce the gaps between elderly needs and formal caregivers skills to take care of them in abuse or ageism situations. The project, draws on different analyses of different training models in white jobs and try to find the right way to foster their ability to recognize and cope ageism approach to elderly inside and outside nursing homes.</p> <p>This proposal has in common with the DyingNity_EU that both aims to support incremental increase in more appropriate policies and services for elderly people in need of specific needs related with long-term care and proposing <u>the transferability of a solid model to European regions.</u></p>
ALTAS	Erasmus + KA2	449.172	2015 2018	<p>In this project I will coordinate the Stakeholder engagement activities, which to gain feedback from key stakeholders and to integrate the expertise and insight into the intellectual outputs of the project. This work will be possible through the implementation of a Delphi study with two rounds involving experts from different European countries and regions.</p>	<p>The <i>Assistive Living Technology and Skills (ALTAS)</i> project addresses the shortfall of assistive living technology training courses for health and social care staff that will ultimately enable their clients and patients to benefit from smart solutions to live independently, self-care and improve their health and well-being.</p> <p>This project is highly related with DyingNity_EU as it responds to the need of creating appropriate skills in the provision of social and health care services, especially in increasing the independency by offering innovative assisted living technology and proposing <u>the transferability of a solid model to European regions.</u></p>

KEY PUBLICATIONS AS SENIOR SCIENTIST**Comparative public policies through Social Policy Index application**

- **Garcés, J.**, Ródenas, F., Vidal, C. (2015, in press) Application of Social Policy Index (SPI) amended in three OECD countries: Finland, Spain and México. *Social Indicators Research* (Manuscript Accepted) ISI.

- Ródenas, F.; **Garcés, J.**; Vidal, C. & Castillo, G. (2015) Application of two subindexes of Social Policy Index, Social Spending and Taxes, in Spain. The effects of the current crisis in a country with a southern welfare model. *The International Journal of Interdisciplinary Civic and Political Studies*, 10: 1-11.

Tools and methodology in integrated care

- Doñate-Martínez, A.; **Garcés, J.** & Ródenas, F. (2014) Application of screening tools to detect risk of hospital readmission in elderly patients in Valencia Healthcare System (VHS) (Spain). *Archives of Gerontology and Geriatrics*, 59: 408-414. Impact factor: 1.525.

- Ródenas, F.; **Garcés, J.**; Doñate-Martínez, A. & Zafra, E. (2014) Aplicación de The Community Assessment Risk Screen (CARS) en centros de atención primaria del Sistema Sanitario Valenciano. *Atención Primaria*, 46: 25-31. Impact factor: 0.894.

- Grimaldo, F.; Orduña, J.M.; Ródenas, F.; **Garcés, J.** & Lozano, M. (2014) Towards a simulator of integrated long-term care systems for elderly people. *International Journal on Artificial Intelligence Tools*, 23: 1-24.

Coordination between the social and health care systems

- **Garcés, J.**, Ródenas, F. and Sanjosé, V. (2006) Suitability of the health and social care resources for persons requiring long-term care in Spain: an empirical approach. *Health Policy*, 75, 121-130. Impact factor: 1.201.

- **Garcés, J.**; Ródenas, F. & Hammar, T. (2013) Converging Methods to Link Social and Health Care Systems and Informal Care. Confronting Nordic and Mediterranean Approaches. In Liechsenring, K., Billing, J. & Nies, H.: *Long-term Care in Europe*. Chapter 5 (pp.100-107). Palgrave Macmillan, London.

- **Garcés, J.**, Ferri, M., Durá, E., Scott, M., Sánchez-García, J. (2015, in press) Social tourism and healthy ageing. *International Journal of Tourism Research* (Manuscript Accepted).

Tailored provision of care

- **Garcés, J.**; Carretero, S.; Ródenas, F. & Alemán, C. (2010) A review of programmes for alleviating the burden of informal carers of dependent persons. *Archives of Gerontology and Geriatrics*, 50: 254-259. Impact factor: 1.270

- **Garcés, J.**; Carretero, S.; Ródenas, F. and Vivancos, M. (2010) The care of the informal caregiver's burden by the Spanish public system of social welfare: a review. *Archives of Gerontology and Geriatrics*, 50 (3), 250-253. Impact factor: 1.270

MAJOR RESEARCH MONOGRAPHS

1.- **Garcés, J.** & Ródenas, F. (2015, in press). Sustainable social and health care transitions in advanced welfare states. In Broerse, J. & Grin, J.: *Towards system innovations in health systems: Understanding historical evolution, innovative practices and opportunities for a transition in healthcare. Parte II: Innovating practices: Experiences and lessons* (Chapter 6). Routledge, New York.

2.- **Garcés, J.** and Monsonís, I. (2013). *Sustainability and transformation in European Social Policy*. Oxford: Peter Lang.

3.- **Garcés, J.**; Carretero, S. and Ródenas, F. (2011). *Reading of the Social Sustainability Theory: Applications to long-term care field*. Valencia, Spain: Tirant Lo Blanch.

INVITED PRESENTATIONS

1.- "Towards an European Welfare Policy. Rethinking the foundations of the Welfare State in EU", Department of Economics at the University of Virginia, USA, 2014.

2.- "Transatlantic Integrated Care Model", 5th EU-US eHealth Marketplace & Conferences, Massachusetts State House of Boston, USA, 2014.

3.- "Is the Welfare State a sustainable formula of doing politics in EU nowadays?" Massachusetts Institute of Technology (MIT), USA, 2014.

- 4.- “Implementation of screening tools of patients at risk of hospital readmissions in Spain: impact on the management of chronic patients”, Gerontological Society of America Annual Conference, Washington DC, USA, 2014.
- 5.- “Towards a more social Europe from multidisciplinary perspective?” The European Network of Social Authorities - E.N.S.A. - General Assembly - Investing Social Policies, Garda, Italy, 2013.
- 6.- “Emerging links between informal and formal care” Does Europe Care? European Conference on long term care and diversity, Amsterdam, The Netherlands, 2011.
- 7.- “Políticas sociales en el marco de la descentralización” Encuentro municipalista Hispano/Colombiano, Santiago de Cali, Colombia, 2011
- 8.- “Tourism for All: the challenge of accessibility and innovation in tourism”, Innovation and Creativity. Basis of competitiveness of hotel management, Santander, Spain, 2008.
- 9.- “Gender Equality and business efficiency: a hybrid possible and necessary”, VIII Conference of the assembly of the regions on equal opportunities between men and women, Valencia, Spain, 2008.
- 10.- “Improving the sustainability of the Spanish Health Care System: procedure reforms on the hospital admittance of dependent older adults”, Assessing Health Care Reforms: Europe, USA and Israel, Ben Gurion, Israel, 2008.

3 RESEARCH EXPEDITIONS: My research activity has been developed at the University of Valencia as well as in other universities and centres where I have had research stays, such as: George Washington University (USA) in 1989, 2014 and 2015; Instituto Superior de Ciências da Saúde-Sul de Lisboa (Portugal) in 2004; Université Paris Dauphine XI (France) in 2006; University of Kent in Canterbury (UK) in 1996 and 2008; Cambridge University (UK) in 2009; Universidad San Pedro (Peru) in 2009; Oxford University (UK) in 2010; Leopold-Franzens-Universität de Innsbruck (Austria) in 2011 and 2013, Erasmus University of Rotterdam (Holland) in 2012 and Universidad Autónoma de Encarnación (Paraguay) in 2013.

3 ORGANIZATION OF WELL-ESTABLISHED INTERNATIONAL CONFERENCES: I have organised and led a scientific activities of an international nature as: (1) the European Conference “Living-All” in 2009 about the free movement of disabled people in Europe; (2) the three series conferences in Valencia, Vienna and Brussels “Supporting collaborations between the AAL JP and local and regional authorities” in 2013 tendered by the Ambient Assisted Living Joint Programme; and (3) I was designated by the organising committee of ESPAnet (The Network for European Social Policy Analysis) as President of the IX International Conference of the mentioned network that took place in Valencia, 2011 under the banner “Sustainability and Transformation of European Social Policy”.

INTERNATIONAL SCIENTIFIC OR ARTISTIC AWARDS / ACADEMIC MEMBERSHIP: Recently I have been awarded the Medal of the University of Burgos, honorary distinction to recognize my scientific contributions to the social sciences. In 2009 and 2013 I was given Honorary Doctorates from the University of San Pedro (Peru) and the Autonomous University of Encarnación (Paraguay), respectively. In 2003 I was awarded 1st prize of the American Foundation 3M for Innovation in healthcare and in 2012 the 1st prize of the University of Nebrija and the ACS Foundation in “Accessible Tourism”.

I have promoted the creation of the Spanish Society of Health and Social Care, Technological Platform of Tourism -THINKTUR-, the European Network of Social Authorities for Youth, and two micro-clusters of excellence between the University of Valencia, the Polytechnic University of Valencia and CSIC in the area of ICT for active and healthy ageing. At the University of Georgetown, as Ambassador of Spanish Universities in the USA and as an academic representative of the King of Spain, I want to emphasize that I have worked with the Embassy of Spain and the Ministry of Education of Spain for the creation of ECUSA (Spanish Scientists in USA), the first association of Spanish scientists in the US with representatives from all areas of knowledge and a decisive step for the recognition of Spanish scientific talent in the US. I have also collaborated with prestigious American Think-Tanks as Brookings, Wilson Center, Peterson Institute for International Economics, Center for Strategic and International Studies and Council on Foreign Relations.

MAJOR CONTRIBUTION TO THE EARLY CAREERS OF EXCELLENT RESEARCHERS: I have supervised the early careers of 25 junior researchers, 13 PhD students (one holding the prestigious grant *V Segles* of the University of Valencia), and 3 Postdoc, (one was awarded by the prestigious *Juan de la Cierva* Grant of the Ministry of Education, Culture and Sports). All my PhD students received a Cum Laude and had developed an excellent career, occupying positions in *the Institute for Prospective Technological Studies - Joint Research Center of the European Commission*, in the Universidad de Concepción (Santiago de Chile), in the OIT and as Managing Director of a R&D start-up.