



News letter

2/2006

Observatory for the Development of Social
Services in Europe

The German EU presidency

In the first half of 2007, Germany will be taking over the presidency of the European Union. At the same time, Europe will be celebrating the 50th anniversary of the foundation of the EEC. The European Economic Community was established on 25 March 1957. By 2007, it will have become a union that actively supports the principles of equal opportunities, social integration, and improved living and working conditions for all its citizens.

The German federal government's programme for the German Council presidency includes the following important topics under the aegis of the Ministry for Family Affairs, Senior Citizens, Women and Youth:

- We want to take advantage of demographic change to promote equal opportunities for all – both at work and in society as a whole. To achieve this objective it is more crucial than ever to strengthen the family. The following slogan might best

describe this policy objective: more children in the family and more families in society.

- Equal opportunities for men and women on the job and in the family – this is the second priority that will be fostered during the German presidency.
- "Experience is the future – drawing on the well of experience – increasing employment participation – opening up markets": these are slogans that can describe the role of older people as participants in economic life, consumers and producers of goods. We must use the potential of older people to contribute to society.
- Moreover, we want to strive for equal opportunities and societal participation of all children and young people.

To implement these aims, the Ministry for Family Affairs, Senior Citizens, Women and Youth is pursuing a number of individual projects, and in this context it will also be holding a series of conferences.

One of the central projects will involve the formation of a European Alliance for Families. Its objective will be to create a framework for EU-wide exchanges of opinions and experience about family-friendly policies. The idea is to encourage cooperation and mutual learning among the Member States; there is no intention of transferring national competences and rights to the EU. The efforts of the European Alliance for Families will be directed towards implementing the Lisbon strategy for economic growth and the sustainability strategy, towards creating more and better jobs, ensuring sustainable demographic development, securing human capital, strengthening social cohesion and improving equality between men and women.

Family-friendly policies can become a positive locational factor in global competition for both the European Union and the individual Member States. In other European countries, companies are already profiting significantly from family-friendly measures. Investment in family-friendly measures has had positive economic effects. This is an area where Germany has a lot of catching up to do. We would benefit from examining and comparing the objectives and effects of family-friendly policies in other countries. We could also profit from European learning partnerships and from Europe-wide cooperation between the social partners as well as with them. Germany needs to find new ways to improve the reconciliation of family and career that are oriented to the best interests of women, men and children. The European Alliance will be based on the variety of family models and on the great range of approaches to family policy in the various Member States.

Editorial

DEAR READER,

AT THE END OF THIS YEAR, THE FINNISH GOVERNMENT WILL BE PASSING THE EU PRESIDENCY ON TO THE GERMAN GOVERNMENT. IN OUR EDITORIAL ARTICLE, STATE SECRETARY GERD HOOFE OF THE GERMAN FEDERAL MINISTRY FOR FAMILY AFFAIRS, SENIOR CITIZENS, WOMEN AND YOUTH FORMULATES THE PRIORITIES AND OBJECTIVES OF THE UPCOMING GERMAN PRESIDENCY.

IN OUR GUEST COLUMN, THE CHILD AND YOUTH WELFARE ASSOCIATION [ARBEITSGEMEINSCHAFT KINDER- UND JUGENDHILFE (AGJ)] ALSO LOOKS AT THE GERMAN EU PRESIDENCY AND EXPRESSES ITS HOPE THAT THE GERMAN GOVERNMENT WILL TAKE ADVANTAGE OF THE EUROPEAN YEAR OF EQUAL OPPORTUNITIES 2007 TO BRING THE INTERESTS OF ALL CHILDREN AND YOUNG PEOPLE INTO THE EUROPEAN DEBATE.

OUR ARTICLES ON OBSERVATORY EVENTS OF THE YEAR 2006 COVER THE WORKSHOP ON MODERNISING SOCIAL PROTECTION AND THE EXPERTS' MEETING ON CROSS-BORDER PROVISION OF SERVICES IN THE HEALTH AND SOCIAL AREA IN THE EUROPEAN UNION.

ANOTHER ARTICLE DESCRIBES THE STATUTORY AND ADMINISTRATIVE FRAMEWORK OF SOCIAL SERVICES PROVIDING CARE FOR THE AGED IN ENGLAND. MORE SPECIFICALLY, VANESSA DAVEY DESCRIBES THE PROVISIONS AND AGREEMENTS INTRODUCED IN THE LAST FEW YEARS BY BOTH LOCAL AUTHORITIES AND PROVIDERS TO IMPROVE THE COORDINATION OF THESE SERVICES AND THE QUALITY OF THE CARE, AND THE FUTURE CHALLENGES FACED BY BOTH LOCAL AUTHORITIES AND PROVIDERS.

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THE EDITORIAL TEAM



Brandenburg Gate, Berlin



Gerd Hoofe, State Secretary, German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth

The Alliance for Families should be realised with projects of a high concrete quality. For instance, a high-level body of Member States representatives could be formed to foster inter-institutional exchanges of information and opinions on family-friendly measures. The European Commission could be asked to concretely contribute by addressing the question of “family-friendliness as a positive locational factor in global competition”. The European Commission could also create an impulse group of representatives of research institutions to look at topics relating to family policy. The EU and its Member States should foster close cooperation between EU and national institutions on the one hand and the social partners on the other in an effort to bring more family friendliness to the working world.

Furthermore, we also hope to get the Council to adopt a resolution on the economic potential of the elderly. The potential of older people to contribute to society should be used to the benefit of both the economy and society itself. Older citizens create a significant demand for goods and services.

Our priorities in the area of equal opportunities are the implementation of the EU Commission’s “Road Map” for gender equality and the recommendation of indicators in the field of “women and education” within the scope of the implementation of the Beijing Platform for Action.

In the area of youth policy, the first Youth Council should lead to the passing of a Council resolution on “equal opportunities and social integration for all young people”.

Within the scope of the Employment, Social Policy, Health and

Consumer Affairs Council (EPSCO), the German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth is currently holding ministerial level negotiations on demographic change, equality and social services, and is – through the Permanent Representation in Brussels – represented in the Council working group on social affairs. The Ministry is also responsible for the two Youth Councils that will be held during the German presidency. A number of other EU bodies are of significant importance for the ministry – for instance the Social Protection Committee, the regular meetings of the directors of the Member States in the area of youth policies, and the high-level group on gender mainstreaming. In this area, the informal meeting of the ministers responsible for family and equality policies that will be held in Hanover in May 2007 will be one of the highlights of the German EU presidency.

The negotiations between the governments of Germany, Portugal and Slovenia regarding the 18-month programme – the so-called team presidency negotiations – were the first of their kind and can be seen as having pilot character for the European Union. These negotiations were held by the German Foreign Ministry on behalf of the federal government, and they also involved departmental groups with the two partner countries in the various policy areas. The components of the 18-month team presidency programme being organised by the Ministry for Family Affairs, Senior Citizens, Women and Youth will be oriented to the issues raised above and further developed in the course of the programme. They are ambitious projects that will contribute to progress on important social policy topics.

Gerd Hoofe
State Secretary, German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth

Guest Column

Equal opportunities for all children and young people

In June 2006, the Child and Youth Welfare Association – *Arbeitsgemeinschaft für Kinder- und Jugendhilfe (AGJ)*, a federation of German associations and institutions involved in child and youth welfare – submitted a position paper on the occasion of the German presidency of the EU Council: “Equal opportunities for all children and young people”.

This paper expresses the expectation that, in view of the European Year of Equal Opportunities 2007, the German federal government will take advantage of Germany’s Presidency of the EU Council to bring child and youth issues to the forefront of the common European debate. At the same time, the Association calls on all parties involved in the society to organise more activities and provide more information to push forward the European idea, particularly among young people, and to convince them of the opportunities and relevance of a European policy extending beyond each country’s national borders.

‘Equal opportunities for all children and young people means improving the living conditions of young people and their chances for the future, with the objective of overcoming social inequalities and ensuring social inclusion regardless of social origin, gender, religion, ethnic background or disability.’ We need to guarantee the equal access of all young people to services in education, employment, recreation, public life and adequate housing. Equal opportunity means focusing on children and young people as individual beings, giving them encouragement and support, and ensuring that they have favourable conditions of living, a healthy environment, and a safe and peaceful life without fear of discrimination or violence. Equal opportunity can be achieved only with concerted activities covering all levels of political action within structures based on the principle of subsidiarity.

‘At European level, too, a successful child and youth policy also requires to interfere in other policy areas

that are relevant for the situation of young people in an effort to create an across-the-board policy into which all stakeholders are actively involved’. The European policy-makers responsible for youth policy should, in addition to their “specific policy areas”, feel responsible for the interests of young people in other policy areas as well. They are called upon to contribute their expertise to other policy areas, and thus to foster awareness for an approach oriented to concrete life situations in these other policy areas as well. At the moment, the European Youth Pact provides an excellent opportunity to create concrete involvement and participation processes at EU level.

“European responsibility for the situation of young people is more than just support for their professional and occupational skills, and more than the promotion of ‘economic usability’ only.” Equal opportunity and social inclusion are a general policy objective, and as such independent of economic efficiency issues. At European level, too, child and youth policy must work towards creating a positive environment in which children and young people can grow up. The social integration of children and young people cannot succeed only through integration into the employment market: it also involves different forms of participation in society and the ability to structure one’s own housing and recreational environment.

‘If the interests of children and young people in European policy processes are to become more visible, we need concrete concerted efforts to this effect between the Member States.’ Specifically, the German government, as a model for the Open Method of Coordination and for the implementation of the Lisbon process, should focus on formulating the topics of social integration and equal opportunities for children and young people as integrated policy objectives across the various portfolios. The National Reform Programmes and annual progress reports as well as the National Strategy Reports on social protection and social inclusion and their implementation as policy instruments should explicitly mention these topics.

‘Learning from one another is a European principle that should also be facilitated and expanded in the area of child and youth (welfare) policy.’ We need intensive

exchanges about national and regional policies and implementation strategies if we want to be successful in the struggle against discrimination at national and European level and encourage equal opportunities for all children and young people. It would seem sensible to develop more advanced forms of European cooperation to foster exchanges about national coordination processes, funding strategies and good practice examples.

'The participation of young people themselves as well as that of organisations and structures working in the area of child and youth (welfare) policy should guarantee useful and sustainable participation at all levels.' In awareness of the broad experience gained so far, we should now critically review current participation processes, try out new forms and concepts of participation and develop successful processes.

'The German presidency of the EU Council is more than just being at the head of the table in Brussels. It offers a concrete opportunity to make European objectives, policies and participation processes at local, regional and national level visible and transparent, and at the same time, to transport national priorities to Europe.'

The full version of the AGJ position paper (in German) is available at www.agj.de/pdf/2006/Chancengleichheit.pdf

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Main Report

Experts' meeting on cross-border provision of services in the health and social area

On 28 September 2006, the Monitoring Unit of the Observatory and the German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth hosted an experts meeting in Berlin on cross-border provision of services in the health and social area. It picked up the thread of an experts' conference on "Trans-border provision of social services/work" held in Aachen in April 2002.

The primary objective of the meeting was to achieve an overview of the basic conditions and influencing factors affecting cross-border service provision in the health and social area. It was also intended as a forum for exchange of experiences that might give participants new impulses for their own work areas as well as an opportunity to elucidate current and future challenges and formulate unresolved issues.

The topics dealt with were the European Court of Justice (ECJ) rulings on cross-border utilisation of health services as well as current EU-level developments with regard to policy coordination in the area of patient mobility. Discussions also focussed on the significance and role of the Euregios for cross-border cooperation. Finally, three projects were presented as examples of cross-border cooperation in the health and social area.

The judgments in the Decker and Kohll (1998) cases have been fol-

lowed by a series of further ECJ judgments on the utilisation of cross-border health services within the EU. According to these rulings, the freedom of service provision embodied in the Treaty includes the freedom of users to seek treatment abroad regardless of the mode of operation of the health system of their home country. A permission requirement is justified only when treatment is provided on an in-patient basis. This liberalisation of the right to medical services across national borders will increase competitive pressure on service providers. In individual cases, organisational differences between health systems may make it difficult to draw a line between out-patient and in-patient treatment. The distinction might be based, for instance, on the institution providing the treatment or on the nature of the treatment itself.

The ECJ rulings have not influenced the High-Level Reflection Process on patient mobility and the development of health care in the EU. The effects of this process on actual practice are still slight. Nor does it contribute to the clarification of the position of long-term care or to a differentiation according to type of provider. Even though many of its activities have yet to be completed, the work of the High-Level Group on Health Services and Medical Care has been suspended due to the Communication from the Commission on the "Consultation regarding EU action on health services" of 26 September 2006. As activities at EU level tend to overlap, it is difficult to keep track of the situation. In the area of health services the extent of regulations is already denser than in the area of social services. But, there too, clarifications and/or regulations are needed to ensure improved legal certainty for providers.

With regard to concrete cross-border cooperation, it became clear that much depends on the commitment of the parties and persons involved. An exchange of ideas and the systematic evaluation of projects were thought to be helpful approaches. Participants thought that cross-border cooperation should begin on a small scale so that not too many interests have to be coordinated. In the area of health insurance, cooperation takes the form of bilateral agreements, and efforts are being made to solve new types of problems with a practical approach.

Cross-border projects are hindered by the diversity of national interests, responsibilities and priorities. This is particularly evident in the issue of co-financing by neighbouring Member States. Another problem is the continuity of projects, cooperation and network structures once the initial support phase is over.

In spite of all obstacles and hindrances, the Euregios are nevertheless hubs of cross-border cooperation at a regional level. As formal structures of cross-border cooperation between regional or local authorities, they are service providers and partners, and a motor for cross-border cooperation. Their task as political lobbies is to open doors, to clarify planning conditions, to help find project partners and to mobilise funds.

Although the Euregios are also responsible for the health and social area, in the social area it is often a struggle to be considered when funds are being distributed. One of the reasons for this problem was seen in the fact that NGOs are often not represented in the decisionmaking bodies of the Euregios, although it would be important for committed stakeholders to present their experience and project ideas in such structures.

Overall, participants made it clear that there is still a great need for information and for exchange of experiences. The Observatory will continue to monitor developments in the area of cross-border service provision in the health and social area.

A publication presenting the results of the meeting will soon be available.

Anna Englaender, ISS



Sylvia Weisbach, German-Czech day-care center „Regenbogen“ Oberwiesenthal, Brigitta Dewald-Koch, Ministry of Employment, Social Affairs, Family and Health of the State of Rhineland-Palatinate, Anna Englaender, Institute for Social Work and Social Education (from left to right)

Modernising social protection: what it involves, and what options are open for providers of social services

In the last few years, the concept of 'modernising social protection' has consistently come into appearance in European public discussions. New living and working conditions, demographic changes across Europe and globalisation are usually the reasons given for the urgency of such a modernisation. Much has been said recently about the creation and further development of a 'European Social Model' (ESM), and about the increased social dimension of European economic and labour policies.

One of the problems with the modernisation debate is that the terms used in the discussion are not always the same. The Observatory office of the coordination group has published a Working Paper giving an overview of the terms and processes involved in the national and European discussion about modernising social protection (the countries covered by the Working Paper are France, Germany, Great Britain, Hungary and Sweden). The analysis also takes into account the results of an expert workshop held on 27 April 2006.

The relationship of economic policy, labour policy and social protection

The dominant approach in the modernisation debate in all of the countries covered by the study is for government policies to be oriented to labour and economic objectives. This applies – to varying degrees – to all state stakeholders surveyed. The perspective of the European Commission (EC) and of the British, French, German and Hungarian governments is strongly oriented to labour and economic objectives, while the social protection policies of the Swedish government and of the European Parliament, on the other hand, are more concerned with issues of equality, universal entitlement and access to services.

In contrast, the providers of social services view social protection primarily as a separate policy area, independent from economic and labour objectives and oriented not

only towards integration into the labour market but indeed primarily towards successful social integration. In their view, excessive concentration on objectives that are related to labour policies produces insufficient results in terms of both the quality and sustainability of social protection.

Providers of services also emphasise the necessity of a modern system of social protection, particularly for those segments of the population for whom integration into the labour market is difficult and for whom policies oriented primarily to economic and labour factors will consequently fail to offer a sufficient degree of social protection.

Quality, accessibility and financeability

Government policy-makers generally define the 'quality' aspect of modernisation in terms of financeability, a factor which they always see as having top priority. Some countries, such as Great Britain and Hungary, focus on providing basic social protection, particularly for needy persons, while Sweden, for instance, offers a relatively more comprehensive, universally accessible and high-quality system of social protection. Policy-makers also often mention the necessity of stronger user orientation (EC, F).

Providers of social services, on the other hand, all call for a particularly high level of quality and universal accessibility of social services. In the case of a conflict of objectives with the financeability goal, quality and accessibility have greater priority for them than for the national governments surveyed or for the European Commission. One argument brought up in favour of more quality is the long-term cost of non-existing or insufficient social protection measures.

Current trends in the modernisation debate

1. Flexibility is increasingly important as a modernisation criterion. From a labour policy point of view, both national and European stakeholders are currently discussing the concept of 'flexicurity'. In view of the changes expected in the coming years with regard to the demand for social services, the modernisation debate has also been focusing on measures for flexible forms of service production, for instance in the area of compatibility of family and career.

2. Before the backdrop of current political developments, not least in view of the project of a Constitutional Treaty for Europe, social protection as a factor legitimising and stabilising the political condition of the EU is gaining in importance in the debate about modernising social protection. In this connection, the policy process aiming at improving communication between the EU and its citizens is also of importance. Here providers of social services could play an important coordinating role and at the same time act as partners in the effort to shift the social dimension of the Lisbon strategy back into the foreground.

Conclusion

The analysis shows clearly that there are still major differences among the stakeholders covered by the survey with regard to central aspects of the efforts to modernise social protection. In the face of these conflicting views on modernisation, we can conclude by raising the basic question of how to deal with this discrepancy. How much economisation should providers put up with? Should they, because of their non-profit mission, follow a line of argumentation that is independent from the modernisation concept of the European Commission and of other state stakeholders, or is it better for the providers not to do this in order to be able to push through their own political objectives (taking advantage of 'win-win situations')?

What the providers of social services should do is encourage further debate within their own organisations and dialogue with other providers, and step by step

present and implement their own interests.

Hanna Steidle, DV

Social Services in Europe

Social care for older people in England

Background

There are 150 local authorities in England each with its own Council with Social Services Responsibilities (CSSRs) responsible for commissioning social care. Although some demand for care involves direct purchasing by privately-paying users, local authorities dominate local markets for care for older people. A large part of formal social care provision for older people now takes place in market conditions. As a result central government has increasingly focused on installing systems that govern the roles of purchasers and providers. The various forms of governance are the subject of this review.

Level I – Governance of Councils with Social Services Responsibilities Statutory agreements between central and local government

Two new forms of statutory agreement between central and local government were instated in recent years which aimed at improving the level of coordination of local service delivery. Local Public Service Agreements (LPSAs – commenced in 2001) and Local Area Agreements (LAAs – 2004) require Council with Social Services Responsibilities to define the terms and means by which they



Yorkshire Dales, England

will improve local services within a three-year time frame which may run across the full range of local services. To attract a more coordinated approach to local service delivery, a requirement of this planning framework is the development of a local partnership body composed of different parts of the public sector as well as of the private, business, community and voluntary sectors. In addition, Local Area Agreements require either pooling or aligning of (existing) funds from the respective bodies involved. The agreements involve incentives in the form of pump-priming and reward grants; the first to provide an initial input to plans defined and the second a reward for achievement of defined outcomes.

Performance management regimes

The first major influx of audit and inspection of the Council with Social Services Responsibilities occurred in the late nineties in the form of the 'Best-Value' regime. The reviewing process required local authorities to set strategies and plans setting out how they would ensure they would attain or maintain a level of performance equal to the top 25 % of local authorities. CSSRs were required to show how they were fostering the conditions of fair competition, recognising quality, the role of the private and voluntary sector and the wishes of service users.

The Best-Value reforms included the introduction of 'Personal Social Services (PSS) Performance Assessment Framework (PAF) Indicators', a number of which are specific to, or relevant to older people's services. The indicators reflect strategic objectives – targeting services on those in greatest needs; maintaining care within the home; promoting cost, efficiency, quality and fair access to services. Data for assessment of PAFs are submitted quarterly to the Commission for Social Care Inspection (CSCI) (www.csci.org.uk). There is a large degree of overlap between the requirements for PAF and data routinely collected for central government examining service activity and expenditure, thus minimising the burden of data completing on Council with Social Services Responsibilities.

Since 2003 inspections of social services fall under the remit of the Commission for Social Care Inspection. The focus of inspection is increasingly on how well services

meet local needs, rather than simply how cost-efficient services are. Since 2006 inspections routinely involve discussions with a sample of service users and utilise any local surveys of service user satisfaction.

The Commission for Social Care Inspection issues star ratings of performance (0–3 stars) on the basis of: their reviews; measurement on performance indicators; and the assessments by government departments of statutory plans such as Local Public Service Agreements and Local Area Agreements. They also describe what potential the council has to improve. Reports on all 150 Council with Social Services Responsibilities are published on a yearly basis and accessible via the CSCI website. CSCI also provides independent review of any complaints concerning the Council with Social Services Responsibilities.

The Audit Commission holds an umbrella function with respect to the overall performance of all local authorities. In keeping with the overall trend in audit and inspection of the Council with Social Services Responsibilities, its focus is on helping councils to improve services by rewarding innovation, improvement and value for money rather than compliance. The assessments comprise evidence from the Commission for Social Care Inspection plus the Commission's judgements.

Level II – Regulation of Social Care Providers

The Care Standards Act 2000 paved the way for new forms of inspection of social care providers. This marked a new wave of regulations which have had a profound effect on the way providers work be they public, voluntary or private. New quality standards termed 'National Minimum Standards' were introduced in April 2002 for residential and nursing homes and for domiciliary care in April 2003. In addition, six monthly inspections of residential and nursing care homes and annual inspections of domiciliary care agencies were introduced. During inspections, data is gathered from staff, services users, reviews of paperwork and observation and the information is assessed against the National Minimum Standards for care services. Reports on providers are available to anyone on request from the Commission for Social Care Inspection or via their website. There are plans to introduce a star rating system in 2007 to help



Llandudno, Wales

empower service users in making choices about the services they receive.

The Commission for Social Care Inspection also registers all new and existing providers. At registration, applicants have to provide information about the type of service they are planning to provide (including the staff, facilities, accommodation and the type of services they will provide) and about their own background.

Level III – Workforce regulation

The General Social Care Council (GSCC) was set up in 2000 to set qualifications and training for the social care workforce ranging from simple compulsory training to vocational training. These include National Vocational Qualifications (NVQs) which are work-related, competence-based qualifications designed to reflect the skills and knowledge needed to do a job effectively. All care staff must have, or be working towards a Level 2 NVQ. The Commission for Social Care Inspection monitors levels of training and standards within residential, nursing care homes and domiciliary care agencies and ensures compliance with regulations.

Level IV – Involving older people in the design of their own services

Increasingly the best services are considered to be those that involve the people they are there to serve in their design. A growing disparity between services and aspirations has led central government to initiate governance by choice. Although choice is an objective across all forms of service delivery, much recent focus has been on the option of receiving cash equivalents of care-pack-

ages known as 'direct payments' for community-based care which were made available to older people in April 2003. Direct payments offer a sharp distinction from the supply of mainstream service as the service user becomes the direct purchaser and takes on the role of determining how and by whom their needs should be met (including the freedom to employ a relative or friend to provide care). Anyone hired outside an agency (termed a 'personal assistant') is not currently governed by any regulatory mechanism.

Although service users are required to use the funds only to purchase care to meet their assessed needs they are able to express their own preferences and ingenuity when doing so. In principle they have access to the full range of services available on the market as the payments fully compensate for all eligible needs and rate equivalent to what it would cost the local authority to purchase care. Users are often aided by independent agencies which offer support and brokerage. At present less than 1% of older people using social care receive direct payments.

Future challenges Improving service responsiveness

Despite contract specifications, service users complain about poor timekeeping and lack of continuity of care. Direct payments offer users greater control over these functions but some commissioners feel that this mechanism of providing services challenges the basic protectionist function of Council with Social Services Responsibilities and the requirement for best-value services.

Introducing an outcomes-based performance assessment regime

Outcomes-driven performance assessment framework for Council with Social Services Responsibilities is due to be introduced at the end of 2006/early 2007.

Improving the impact of regulation on coordination between health and social care services

A merger of health and social care inspectorates is planned for 2008, aimed at improving partnership working.

Vanessa Davey

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A MISSOC table provides an overview of long-term care-related benefits in kind and cash benefits and of core characteristics of the system (applicable statutory basis, basic principles, risk covered, field of application, entitlement conditions) as of 1 January 2006, cf. http://ec.europa.eu/employment_social/missoc/2006/tables_part_6_en.pdf, pp. 129-135, Table XII "Long-term care", column "United Kingdom".

News from the Observatory

Study on the situation of social and health services of general interest in the European Union

The Institute for Social Work and Social Education, in a consortium with two partner institutes in Vienna and Liège, is participating in a project on the "Situation of social and health services of general interest in the European Union". This study was announced in the Communication on "Social services of general interest", which was presented on 26 April 2006.

The Directorate-General for Employment, Social Affairs and Equal Opportunities has commissioned a pilot study, to be carried out between now and mid-2007, to provide the basis for a monitoring and dialogue tool expected to be established as of late 2007. The purpose of this instrument will be to support ongoing exchanges on issues surrounding the organisation, regulation and funding of non-profit services in the health and social area between the European Commission, the governments of the Member States and the providers of such services.

The study will focus on describing and analysing the effects of Community regulations in the area of competition rules (including regulations governing state aid), contract award rules and internal market rules and the related rulings of the European Court of Justice with regard to the delivery of social services. It will also examine existing possibilities for the organisation of the public authorities responsible for guaranteeing the provision of social services. The main issues will be defining and implementing public service obligations, transferring public tasks to private non-profit or to commercial providers, as well as regulation, social planning and funding.

The study, which will look at eight selected EU Member States including Germany, will focus on employment, on changes in the structure of services offered and on employment, regulatory and financing instruments, and the structure of quality management processes in the field of social and health services. Five fields of person-related social services will be looked at more closely: long-term care and care for the elderly, social integration and re-integration (focusing on social services for migrants), labour market services focusing on disadvantaged groups, child care and social housing. The study also includes a questionnaire addressed to European umbrella organisations of NGOs in the social and health area and of municipal and regional territorial authorities, calling for support in view of a fact-finding exercise and also inviting them to send in information about own positions, expectations and concerns.

For further information (in English, French and German), please consult the project website at: <http://www.euro.centre.org/shsgi>

Mathias Maucher, ISS

The Observatory at the 77th German Welfare Congress, 3–5 May 2006 in Düsseldorf

Well-timed to coincide with the "European Year of Workers' Mobility 2006", a workshop on practical social work in border regions was offered by the Observatory in cooperation with the German Association for Public and Private Welfare.

Dr. Bodo de Vries of 'Evangelisches Johanneswerk' in Bielefeld (one of



the largest providers of the social welfare organisation of the Protestant church in Germany) presented the 'Dinxperlo-Suderwick Europa project' along the German-Dutch border. The aim of the project is to develop a residential and nursing home serving both sides of the border. In a concept which is so far one of a kind, a bridge will be built across the border from the existing Dutch nursing home to care units soon to be built on the German side. The residents themselves will decide where they would like to live. The nursing care project goes hand in hand with a training concept involving mutual recognition of the professional qualifications and competencies of the care staff.

Another project presented at the workshop is a youth welfare project described by Prof. E. Steinhilber – 'Cross-border education and networking of social work in the Neisse Euroregio' – and implemented in the German-Polish-Czech triangle. This project has chosen a "peer education" approach (orientation on resources, self-organisation of young people with approximatively the same age, peer representatives). There is a high level of interest in the project on the part of the professionals. The young people, however, hampered by their nearly total lack of experience with participatory structures, by the language barrier and by the unwillingness of some of the German participants to "look eastwards", have found it difficult to form a firm group.

The workshop was rounded off by the contribution of Sylvia Müller-Wolff, EURES adviser in Karlsruhe,

Germany, who discussed the practical aspects involved in taking up employment abroad. As a result of historic structures in the border regions, cooperation has been facilitated by a number of initiatives in place since the 1960s. There are not yet so many social workers crossing borders for their daily work, as language barriers and lack of recognition of professional qualifications present a major obstacle to employment abroad.

Bi- and tri-national cooperative structures in border regions provide information on the experience made and on best-practice examples from other countries. Employee mobility is not the major aspect. However, the workshop demonstrated clearly that there are important cooperation projects in the border regions that are worth copying.

You will find additional information on this topic (in German) in the documentation of the 77th German Welfare Congress 2006 at <http://dft.deutscher-verein.de/dokumentation.php?lang-de>.

Cornelia Markowski, DV

A generational change in Europe

The European Social Network hosted its 14th annual conference on "Young and old in a changing Europe – the demographic challenge to social care and health" in Vienna from 19 to 21 June 2006. On this occasion, the Observatory hosted a workshop on the Open Method of Communication (OMC) entitled "Involving local authorities". The seventy or so partici-

pants, coming as they did from a great variety of countries, institutions and professions, offered an excellent opportunity to present the topic to a broad audience and explain the role of the OMC for municipal or regional authorities.

Cornelia Markowski's and Hanna Steidle's introductory remarks on the OMC were followed by contributions by Frits Tjadens, The Netherlands Institute for Care and Welfare (NIZW), and Brigitta Dewald-Koch of the Ministry of Employment, Social Affairs, Family and Health of the State of Rhineland-Palatinate, Mainz, Germany.

A new NIZW study has investigated political strategies to improve the access to and quality and financeability of long-term care in eight EU Member States. No uniform picture emerged across the countries surveyed. However, the experts discovered interesting approaches to implement these OMC objectives, e.g. voucher systems (Finland), personal budgets (Germany), 'hospital advisers' (Belgium), support for care-giving relatives (Great Britain) and 'hubs' for integrated care (Italy). Aside from the criticism for lack of involvement of the European Parliament or of the Committee of the Regions and for poor dovetailing with other political processes, the OMC does, however, offer a new basis for improved information exchange among the Member States.

In an example demonstrating possible practical implementations of OMC objectives, Ms. Dewald-Koch described a project to create local networks in nursing care. Networking, dialogue and cooperation among all stakeholders, for instance through nursing care networks, allows communication between planning and objective-setting tasks at national level on the one hand and practical experience made and needs felt in the field on the other.

The discussion showed that long-term care structures in the field are often characterised by fragmented interests that hinder cooperation.

Before this backdrop, further efforts to realise improved access, quality and financial sustainability in long-term care will remain an imperative and a discussion topic for the future.

For further information: http://www.socialeurope.com/english/e_conferences.htm#vienna

Cornelia Markowski, DV

New publications

Anna Englaender has drawn up an overview of relevant ECJ judgments on the use of health services by EU-citizens in EU countries other than their own. This document (only available in German) can be found at http://www.soziale-dienste-in-europa.de/dokumente/Aktuelles/EUGH_Urteile_Zusammenfassung.pdf

The Working Paper on the modernisation of social protection will be published as one of the Observatory Working Papers (no. 15, in German only) in December 2006 (cf. main report: Modernising social protection: what it involves, and what options are open for providers of social services).

News Update

On 26 April, the Commission published its **Communication on social services of general interest in the European Union** [COM(2006)177 final]. As a follow-up to the May 2004 White Paper on services of general interest, this document takes on a key function in the development of a systematic approach to the identification of social services at EU level and in efforts to further clarify the Community framework in which non-profit social services operate. This process is closely integrated in the implementation of the Lisbon Strategy. The Communication was to exclude health services (to a large extent); nevertheless, Annex 1 does indeed take them into consideration.

The Communication deals with two areas: "social security schemes covering the main risks of life" (health, ageing, occupational accidents, unemployment, disability) and "services provided directly to the person" (rehabilitation, vocational training, reintegration into the employment market, services for the social integration of people in special situations (over-indebtedness, homelessness, drug addiction, etc.), social housing).

On the basis of the results of a broad consultation process, the

Communication lists six specific organisational characteristics of social services:

- they operate on the basis of the solidarity principle (no exclusion of "bad risks", offsetting of risks)
- they help guarantee human rights and contribute to the protection of the most vulnerable
- they are not for profit
- they involve the participation of voluntary and honorary workers
- they are strongly rooted in local traditions and cultures (proximity between the provider of the service and the beneficiary, so that the specific needs of beneficiaries can be taken into account)
- they are based on an asymmetric relationship between providers and beneficiaries: this is not a normal supplier-consumer relationship, as it entails the participation of a financing third party (partial or complete assumption of costs by social security or social welfare).

A second round of consultation with the governments of the Member States, based on a survey started in mid-September 2006, will examine these criteria and evaluate their use at Community level. The questionnaire-based inquiry launched by the Social Protection Committee will also investigate reactions to the opinion expressed by the Commission that "almost all services offered in the social field (can be considered) an economic activity" as defined in the Treaty (page 6). Our Newsletter 1/2007 will report more extensively on the broad and lively debate surrounding the Communication and on the initial results of the consultation and the further steps announced in the Communication (pages 9f) (cf. http://ec.europa.eu/employment_social/social_protection/docs/com_2006_177_de.pdf).

To complement the Communication on social services of general interest, the European Commission has issued a second Communication entitled "**Consultation regarding Community action on health services**" (SEC (2006) 1195/4). This Communication, which was published on 26 September 2006, sets in motion a public consultation on how Community law can provide legal certainty in the area of cross-border health care and how regional cooperation between the health systems of the

D a t e s

2007

January

31/Berlin, Germany
Opening Session for the 2007 European Year of Equal Opportunities for All

February

21-22/Melbourne, Australia
Conference: "From Welfare to Social Investment: Reimagining Social Policy for the Life Course"
<http://www.public-policy.unimelb.edu.au/conference07/index.html>
Dr. Lauren Rosewarne,
E-Mail: lrose@unimelb.edu.au

March

12-13/Venice, Italy
6th Workshop 'Challenges of Managing the Third Sector', European Institute for Advanced Studies in Management
http://www.eiasm.org/frontoffice/event_announcement.asp?event_id=491
Audry O'Connor,
E-Mail: audry@eiasm.be

15-17/Parma, Italy

IFS 'European Conference on 'Socialwork 2007 - social changes and social professions', International Federation of Social Workers
<http://www.newteam.it>
E-Mail: info@newteam.it

April

17-19/Berlin, Germany
eHealth Europe 2007 - From Strategies to Applications
<http://ehealth.gvg-koeln.de/>
Tel.: +49 221 91 28 67-23
E-Mail: j.dolle@gvg-koeln.de

26-27/Magdeburg, Germany
5. Kongress der Sozialwirtschaft: Europa sozial managen - Werte, Wettbewerb, Finanzen
<http://www.kongress-der-sozialwirtschaft.de/>
Tel.: +49 228 66 85-0
E-Mail: sozkon@awobu.awo.org

June

01-02/Kiel, Germany
Joint seminar of the DGS and the Gender Research Group, University Kiel: "Diversity & Inclusion: Potentials of an aging society"
<http://www.sektion-altern.de/>
E-Mail: buer0@gender.uni-kiel.de

18-20/Berlin, Germany
15th European Social Services Conference, European Social Network
http://www.socialeurope.com/deutsch/d_about.htm

Member States can be facilitated. Answers to the nine specific questions asked in the Communication should be sent in by 31 January 2007. On the basis of these answers, the Commission plans to elaborate proposals that will be presented in the course of 2007. The Communication is available at http://ec.europa.eu/health/ph_overview/co_operation/mobility/docs/comm_health_services_comm2006_en.pdf.

On 10 May 2006 the EU Commission activated the **Health-EU Portal**. The portal offers a range of information and data on health issues to facilitate the search and research for citizens, patients, service providers and scientists. The portal can be accessed via http://ec.europa.eu/health-eu/index_en.htm

On 17–18 October a seminar on “**Social Rights and Market Freedoms – is a better balance possible?**” took place in Tampere, Finland. It was organised by the Finnish Federation for Social Welfare and Health together with the Social Platform, the European Anti Poverty Network (EAPN) and the Observatory for the Development of Social Services in Europe. In speeches, discussions and working groups it was discussed what would be needed to achieve a better balance between the social rights and the market freedoms. Topics were amongst others the role of social services in the internal market, flexicurity and the Lisbon strategy, the relevance of the Constitutional Treaty and the role of NGOs in the European Social Model. The conclusions of the seminar were presented as a common position paper to the official Finnish EU presidency conference “EU’s Evolving Social Policy and National Models – Seeking a new Balance” in Helsinki, 9–10 November 2006.

Publications

The European Social Insurance Platform (ESIP) published the paper on Euroregional cooperation in the health sector: “**EUREGIO-social – Euregionale Zusammenarbeit im Gesundheitswesen 2005**” (German publication). Melanie Thorn and Andreas Drespe describe health projects in the German border regions. The publication can be downloaded here: <http://www.deutschesozialversicherung.de/de/europa/dokumente/dl4/EUREGIOsocial.pdf>



NGO-seminar Tampere, Finland: Antti Kaikonen, Member of the Finnish Parliament, Ronald Janssen, European Trade Union Confederation, Dr. Florian Bauckhage, German Association for Public and Private Welfare, Anne-Sophie Parent, Social Platform. (from left to right)

In the context of the Europe4-Patients project Magdalene Rosenmüller, Martin McKee and Rita Baeten edited the book on “**Patient Mobility in the European Union: Learning from Experience**” (May, 2006). This book presents a series of case studies providing a very broad picture of contemporary developments on Patient Mobility. Each case study describes the extent of patient mobility between the featured countries, the scale and nature of mobility, the reasons why mobility exists, the factors that either facilitate or hinder it, and the potential impact on the health care systems concerned. The publication can be downloaded from: http://www.iese.edu/en/files/6_22160.pdf



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in Europe**

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