

Denmark's National Follow-up to the UNECE Regional Implementation Strategy (RIS) of the Madrid Plan of Action on Ageing (MIPAA)

Executive Summary

The Danish Ministry of Social Affairs and Integration coordinates the national Danish follow-up to the MIPAA/RIS. Other ministries who have contributed to this report are the Ministry of Employment, the Ministry of Health, the Ministry of Culture, the Ministry of Children and Education, the Ministry of Finance, The Ministry of Economic Affairs and the Interior and the Ministry for Gender Equality.

The recommendations in the Regional Integration Strategy on the Madrid International Plan of Action on Ageing are embedded in the Danish Government's policies and strategies concerning the elderly.

Among some of the major achievements in fulfilling the commitments of MIPAA/RIS since the last report in 2007 are the launch of a national action plan on dementia and the establishment of an Elderly Commission. The purpose of the Commission is to find new ways to enhance the quality of life and self-determination of elderly people living in nursing homes and care homes. Another important achievement has been the establishment of a steering committee for the elderly medical patient, which has presented an outline of possible initiatives on how to improve the care of the elderly medical patient.

In the near future the Danish Government intends to launch labour market and pension reforms in order to among other things enhance the sustainability of public finances in the face of the ageing population. Further, the Government among other things intends to focus more on preventing health problems and deterioration of functions of elderly people and to work towards increasing the feeling of safety and security among elderly people.

1. National ageing situation

Denmark has a total population of 5.6 million people, of which 17 percent are 65 years or older. In 2040 the total population is expected to be 6.0 million people, of which 24 percent will be 65 years or older.

This forecast reflects the demographic trends. Life expectancy is increasing, and the large post-war generation is now beginning to reach the retirement age. Evidence shows that when life expectancy is increasing, the need of care and other services will set in at a later stage in people's lives. This means that the increasing life expectancy will not (or only marginally) result in an increasing need for care or other services on an individual level in the future.

What will result in an increasing need of care and services in the coming years is the large post-war generation reaching the age-groups where the need of care and services are beginning to be an important economic factor.

In table 1, national forecasts of the number of persons aged 65-74 years, persons aged 75 years or older (75+ years), and the need of care and services to persons aged 65 years or older (65+ years), are shown as indexes for the period 2010 to 2040:

Table 1. National forecasts, 2010-2040 (2010=100)

Year	Persons 65-74 years	Persons 75+ years	Need of care and services for persons 65+ years
2010	100	100	100
2015	121	109	107
2020	125	129	114
2025	121	157	125
2030	128	173	138
2035	137	185	148
2040	136	200	152

Source: Statistics Denmark and the Ministry of Social Affairs.

The need of care and services will increase every year until 2040. Especially between 2025 and 2030, the need of care and services will increase rapidly, when the post-war generation reaches the age of 80 years. In 2040 the need of services is expected to be 52 percent higher than in 2010.

This development represents a challenge for public fiscal policies because of the organisation of the Danish welfare system that consists of generous, universal, publicly funded benefits and services to elderly people and others in need regardless of their economic situation. The challenges facing fiscal policies have increased as a result of the recent recession and the major fiscal easing during the crisis. In response a fiscal consolidation including labor market reforms, limited growth in public consumption and increased taxes, has been implemented.

A new Danish centre left government took office October 3rd 2011 after a general election. The new government pledges to carry out reforms – i.e. a retirement reform - in order to increase the supply of labour and secure sustainable public finances in the future. In the light of the demographic development, such reforms are generally perceived to be a precondition for upholding the Danish system of universal, publicly funded help to elderly people in need.

2. Methodology

Significant parts of Danish elderly policy are placed under the Ministry of Social Affairs and Integration. Hence, the Ministry of Social Affairs and Integration coordinates the national Danish follow-up to the MIPAA/RIS. However, other ministries also legislate in areas of special importance to elderly people, and have thus also been asked to contribute to this report. These are the Ministry of Employment, the Ministry of Health, the Ministry of Culture, the Ministry of Children and Education, the Ministry of Finance, The Ministry of Economic Affairs and the Interior and the Ministry for Gender Equality.

Assessment of the correspondence of the effect of policy actions concerning elderly people to the recommendations in RIS is embedded in the day to day work in the Danish Government, since the recommendations included in RIS form a natural part of the government's work. Further, in recent years the Ministry of Social Affairs has increased its focus on evaluating the effectiveness of initiatives and methods in the social sector. This shift is expected to result in better knowledge about the effectiveness of policy actions, among other things in regard to initiatives of special relevance to elderly people.

Involvement of other stakeholders and research

Across sectors, involvement of stakeholders is an important part of the decision making process, the legislative process as well as the process of assessing the impact of initiatives with a bearing on the conditions of elderly people.

Both private stakeholders and NGOs are invited to participate in the work with securing good conditions for elderly people, participating in various forms. Research into the conditions of elderly people is carried out by a number of institutions and organizations. In the social sector, The Danish National Centre for Social Research plays an important part. Danish universities also focus increasingly on conditions for elderly people. Several universities have for instance established units focusing on healthy ageing.

Commitment 1: To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages

As mentioned in the previous section, it is an integral part of the Danish political and administrative system that the views of elderly people themselves are taken into account in the ongoing process of developing new policies of particular significance to elderly people.

Age Forum

One of the mechanisms for securing this is the existence of the publicly funded, but independent Age Forum. Age Forum consists of a group of elderly people with expertise in different areas of relevance to ageing. The forum follows the development in the field of ageing and issues a number of publications on issues chosen by the forum members. Age Forum works for a varied and precise picture of the elderly and of getting old. The forum helps identify and put focus on elderly people's resources and helps provide a fuller picture of older people and ageing.

Senior citizens council in all municipalities

In order to mainstream ageing in all policy fields, each municipal council must set up a senior citizens council, to be elected by direct election.

The aim of the senior citizens council is to enhance the co-determination and co-responsibility of the citizens in the municipalities and to help ensure a good dialogue and cooperation between elderly people in the municipality and the local council.

The senior citizens council gives elderly people formalised access to discuss and follow the contents and form of the municipality's ageing policy and thereby helps elderly people to be heard and have influence on the local ageing policy.

All citizens above the age of 60 with permanent residence in the municipality have the right to vote and are eligible for the senior citizens council.

Commitment 2: To ensure full integration and participation of older persons in society

Many Danish elderly people are active participants in society. Many are members of organisations for the elderly which aim to be the political voice of the elderly. The two major organizations in this field are The DaneAge Association

with nearly 600,000 members and The Danish Association of Senior Citizens with approx. 330,000 members. Volunteer work, advice and social humanitarian work is also part of the work of the organizations. To support the work of the organizations they are given grants from the Danish state. In addition the Danish state supports individual projects within the organizations.

As described under Commitment 1 all municipalities have a senior citizens council. These councils help to ensure integration and participation of elderly people in society.

The National Civil Society Strategy

In 2010 the former Danish government launched the National Civil Society Strategy. The overall aim of the strategy is to strengthen the involvement of civil society and voluntary organisations in the field of socially vulnerable people and families. The strategy has a number of specific initiatives under four target areas and has a public funding of 100 million Danish Kroner.

The four target areas are:

- 1) *Strengthening innovation and development in social welfare.* The government has funded projects focusing on prevention, outreaching work and new forms of cooperation between the public sector and voluntary organisations.
- 2) *Promoting active citizenship and volunteering.* The government has highlighted and encouraged voluntary work e.g. by introducing a national day of volunteering.
- 3) *Strengthening voluntary organisations.* The government has funded a research programme on civil society and increased funds for education in voluntary organisations.
- 4) *Strengthening cooperation between sectors.* The government promotes cooperation between the public sector, private businesses and voluntary organisations.

Survey of user contentment

As part of a national documentation project the former Government and Association of Danish municipalities in 2006 agreed on an annual national survey of user contentment among recipients of help.

The aim is to collect information about the social services and thereby establish knowledge about outcomes and effect of the social performances. The study subjects are asked to rate their contentment with the quality of the services they receive, their contentment with the carers and the stability of the help. They are also asked if they are informed of their right to choose between different providers of the help.

The first national survey was carried out in 2007 and showed a high rate of contentment among the receivers of help. Results of 2008 and 2009 validate the high rate of contentment. Since 2009 the survey is carried out every second year.

Percentage of receivers content or very content with the quality of the help delivered

Quality of help received	Practical help		Personal help	
	<i>Own home</i>	<i>Dwellings</i>	<i>Own home</i>	<i>Dwellings</i>

2007	84 %	88 %	87 %	91 %
2008	82 %	88 %	95 %	89 %
2009	86 %	87 %	92 %	89 %

Commitment 3: Promotion of equitable and sustainable economic growth in response to population ageing.

Measures have been initiated to ensure that the Danish economy will be able to shoulder the increased costs of elderly people that the demographic changes are expected to bring.

Generally, pursuing a stability-oriented and sustainable economic policy has been the declared aim of changing governments for a number of years. The Welfare Agreement of 2006, including a 2-year raise in retirement ages and subsequent increasing retirement ages as life-expectancy rises, contributes to an increasing work-force which offsets the impact on public finances of increasing age-related expenditure. The challenges facing fiscal policies have increased as a result of the recent recession and the major fiscal easing during the crisis. In response a fiscal consolidation including labor market reforms, limited growth in public consumption and increased taxes has been implemented. Furthermore a majority in parliament has agreed to bring forward the increase in retirement ages under the Welfare Agreement by 5 years and reduce the early retirement scheme from 5 to 3 years.

The substantial reforms mentioned above and the continued aim of having a long-term sustainable fiscal policy provides security regarding the financing of future pensions and other ageing-related expenditure. Furthermore the pensions of future pensioners are supported by the expansion of the labor market pensions, which gained particular momentum at the end of the 1980s, and which today cover 80 per cent of employees in the labor force. Labor market pensions impact positively on the economy – both in the form of a higher savings and postponed taxes (contributions are tax exempt, resulting benefits are taxed). Additionally, the maturing of the labor market pension system will reduce spending pressure for state pension in the future as parts of the state pension – the pension supplement – is means-tested.

Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences

To address the demographic changes and their social and economic consequences, the Danish elderly care sector has a focus on welfare technology because it potentially saves resources, supports employees in their work, and enhances the quality of life for elderly people.

One initiative is the Danish PWT Foundation (Investments in Public Welfare Technology; in Danish: ABT-fonden) which was established in 2008 with the purpose of financing projects that test and disseminate new, effective solutions and labour saving technologies.

The aim is to increase productivity in the public sector while maintaining a high quality. 3 billion dollars has been earmarked for the foundation up to and including 2016. In 2010, the foundation among other projects has supported a number of projects in the area of care for the elderly. For example solutions for lifting and moving frail elderly people, electronic shower chairs and vacuum cleaning robots.

5. Commitment 5: To enable the labour markets to respond to the economic and social consequences of population ageing

In 2008 the government and 3 other political parties entered an agreement called the Job Plan with the goal to increase the supply of labour. The Job Plan was adopted by the Parliament the same year. The Job Plan includes the following measures:

- Disability pensioners on the ‘old scheme’ (pension granted before 2003) who are able to work have full assurance that they will not risk losing their pension entitlements by working.
- It is made more economically attractive for public old age pensioners to continue to work by the introduction of an additional income test offset of 30,000 DKK and by reducing the employment requirements for deferred pension from 1500 to 1000 hours per year.
- A tax credit of up to 100,000 DKK has been introduced for 64-year-olds who have worked full time since they were 60 years old. The scheme is temporary. The tax credit applies to persons who reach the age of 64 years in the period 2010-2016.

As mentioned under commitment 3, the former government and two other political parties in May 2011 entered an agreement on a Retirement Reform with the goal to increase the supply of labour. A general election has brought a new government, but a majority in Parliament still wishes to implement the Retirement Reform, and it is part of the new government’s program. The adoption of the Retirement Reform as proposed will include:

- Advancement of the Welfare Agreement with 5 years
In the scheme for Voluntary Early Retirement Pay the retirement age is gradually increased by two years from 2014 to 2017. In the Public Old Age Pension scheme the pensionable age is gradually increased by two years from 2019 to 2022.
- Maximum 3 years with early retirement pay.
Early retirement period shortened progressively from five to three years from 2018 to 2023
- Other measures
It is made more economically attractive for public old age pensioners to continue to work by increasing the special additional income test offset from 30,000 to 60.000 DKK and by reducing the employment requirements for deferred pension from 1000 to 750 hours per year.

Automatic stabilizers, flexible labour market policy budget

The need for large intervention by the Government during periods of rising unemployment as at the beginning of the economic and financial crises may be smaller in Denmark than in other countries. This is due to the automatic stabi-

lizers built into the Danish budget for unemployment benefits and active labour market policy measures (ALMP).

They constitute two of the three corners in the Danish flexicurity triangle. The public expenditure allocated to the unemployed is simply expanded with the unemployment level. Thus, public spending on unemployment benefits is expanded significantly with the rapid increase in unemployment due to the relatively generous benefits and broad coverage. Although the budget allocated for ALMP measures is much smaller than that for unemployment benefits, it is likewise expanded with a rising unemployment rate. Thus, the budget used to labour market measures expands and shrinks with the movements in registered unemployment and use of activation. Thus, the number of people participating in ALMP measures is not limited by the budget being insufficient to support the increasing number of unemployed (even if the estimate is incorrect).”

Commitment 6: To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic conditions

As reported in the Danish 2007 report to the UNECE the political agreement, ‘Agreement on future prosperity and welfare and investments in the future’ is a very important basis for the promotion of lifelong learning in Denmark. This agreement and the political ‘Agreement on the implementation of the globalization fund’ in autumn 2006 created the basis for the long-term, coherent development of human resources in Denmark up to 2012, which is to contribute to overall educational and competence enhancement for everyone in the Danish society. The report, ‘Denmark’s strategy for lifelong learning – Education and Skills Upgrading for All’, which has been forwarded to the EU Commission, builds on these agreements and includes all state financed key initiatives to be implemented.

In adult general and vocational education and training, initiatives have been taken to make adult vocational training more attractive, targeted and flexible in relation to the needs of the individual and of enterprises to promote employability. Denmark has not taken particularly aging policy initiatives in education and training (E&T) since 2007 because older persons can benefit from a broad range of Education and training programmes offered to all adults. The initiatives taken since 2007 includes in particularly:

New financial framework for continuing vocational training

Since 2007 a tripartite agreement between the government and the social partners on a shared responsibility on the financing of adult vocational training has been agreed upon. The social partners have successfully in 2008 within the private sectors and the collective agreements agreed on enhancing the employees’ rights to training and on a new financial scheme where companies pay a ‘levy’ per employee to competence funds set up within the sectors in order to promote workforce participation in continuing vocational training, including public financed adult vocational and in-service training.

Basic skills – adult literacy and numeracy courses

Since 2007 state funding has been provided to increase the number of adults participating in adult literacy and numeracy courses provided by adult general education centres. The aim is that 40.000 adults annually participate in basic skills courses in order to promote employability and further education and training.

Recognition of non-formal and informal learning

The implementation of legislation concerning increased recognition of actual competences in adult vocational education and training from general adult education to diploma level came into force in 2007. All adult workers have the opportunity to acquire publicly recognized certificates or a shortened training programme on the basis of an individual assessment of their competences. The implementation of the new legal framework has included a number of accompanying measures and initiatives and was evaluated in 2009/2010. The preparation of an action plan in 2012 to promote recognition of non-formal and informal learning is foreseen.

New infrastructure for adult guidance and provision of E&T

A new legal framework has from 2010 established 13 regional adult education and training centres. The aim of the Act is to improve the overall infrastructure for guidance and provision of adult vocational education and training especially targeting low and semi skilled workers. Guidance and counselling of employees and companies regarding adult education and training play a key role in the tasks of the regional centres and so do the coordination of the provision of general and vocational adult education and training. The regional centre includes in total more than 130 providers of general and vocational adult education and training in a cooperative networks. The centres receive state financial support to guidance and counselling activities at local and regional level.

Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being

Equal access to health services

According to Danish legislation all residents are entitled to public health care benefits in kind. There are no age-specific health services; except when there are professional reasons for this (e.g. age-conditioned screenings, preventive health examinations for children) Most of the primary and municipal services are aimed towards older persons as well as other citizens, e.g. the right to rehabilitation therapy, home nursing, preventive health and health promotion in the municipalities, special dental care etc.

All citizens in the municipalities are entitled to home nursing. When prescribed by a general practitioner, the municipalities must provide home nursing free of charge. Moreover, the municipalities are obliged to provide all necessary appliances free of charge. Home nursing provides treatment and nursing at home for people who are temporarily or chronically ill or dying.

According to the Danish Health Act the Regional Council must offer an individual retraining plan for patients with a medically grounded need for retraining after discharge from a hospital. Patients with a retraining plan are hereafter entitled to retraining provided by the municipalities. In many municipalities chronically ill citizens with COPD (chronic obstructive pulmonary disease), diabetes or chronic heart disease are offered rehabilitation programs according to disease managements programs for the mentioned diseases.

National plan of action towards the elderly medical patient

A steering committee for the elderly medical patient is commissioned under The National Board of Health. To ensure a strong professional basis for political initiatives the steering committee has presented an outline of possible initiatives on how to improve the care for the elderly medical patient.

These professional recommendations will among other things constitute a basis for a national plan of action summing political initiatives to strengthen the actions towards the elderly medical patient in the near future.

The immediate political priorities are:

- Early diagnosis, treatment, rehabilitation and care.
- Disease management coordinator to the specially weakened medical patients who for example suffer from several diseases.
- Analyzing the need for more beds at hospitals for medical patients.
- Preventive initiatives that can reduce the number of (re)-admissions
- Strengthening coherence and coordination in the patient pathway, including disease management coordinator to the specially weakened medical patients who for example suffer from several diseases.
- Analysis of the medical wards, including for assessment of bed capacity

Independent living

It is a central aspiration of Danish elderly policy that citizens should stay as long as possible in their own homes. To further this ideal it is a cornerstone in the Danish legislation that the help a citizen can receive is tied to their individual needs, rather than to their type of residence. The Danish approach to improving the housing and living environment for the elderly has run in three parallel tracks; initiatives to enable senior citizen to stay as long as possible in their own homes, legislation to secure access to care homes when home care is no longer possible and programs to strengthen the quality of these care homes.

Ambient assisted living

To enable elderly citizens to stay as long as possible in their own homes, and to improve their quality of life, Denmark has supported several research- and test processes towards integrating tools of ambient assisted living in both care homes and senior social housing. In addition, the issue of “access” is a top priority when older social housing projects are renovated and modernized. The emphasis lies on the instalment of lifts.

Access to convenience stores in rural areas

New legislation from 2011 allows the municipal or regional authorities to establish commercial premises´ in connection with senior social housing, which they may let to the purpose of a local convenience store. The rent may be less than the market price of the premises. The object is to make grocery shopping easy and accessible to senior citizens in areas where a convenience store can not survive on full market terms, thus improving the living conditions for the elderly in rural communities.

Rehabilitation

Preventive and health-promoting efforts are made at both national and local level.

A recent development that seems promising in relation to health promotion, prevention of disability, and limiting the demand for elderly care is a revitalisation of the activating dimension of elderly policy in the social sector that has taken place in the Danish municipalities in recent years. According to a report by Gallup carried out on behalf of The DaneAge Association in 2011, 90 per cent of the Danish municipalities now offer training as an alternative to conventional more compensatory home-care services in line with a focus on rehabilitation. Several municipalities already report that their increased focus on

training and rehabilitation helps limit the resources spent on elderly care as well as increase the individuals' quality of life.

One of these municipalities is Fredericia which has implemented the project "*In your own life as long as possible*". The project was initiated in 2009. The objective is to enable older people and others with need for care to cope with everyday life, to become self-reliant and hereby "stay as long as possible in one's own life". The project focuses on how physical, mental and cognitive skills can be maintained and strengthened in order to postpone the weakening caused by old age. The elderly citizen will achieve greater quality of life and at the same time the elderly citizens' need for health care will be postponed.

Other measures to ensure quality of life at all ages

In the beginning of 2011 the former Danish government established an Elderly Commission. The commission analyses and discusses how nursing homes and care homes, with the involvement of relatives, may support the elderly's quality of life and self-determination. Another purpose of the commission is to look into whether there are any unnecessary rules which are obstacles for the work of the municipalities or private actors. The Commission's findings are planned to be reported by the end of 2011 or beginning of 2012.

Preventive house calls

Citizens who have reached the age of 75 have the right to receive a preventive house call at least once a year unless they receive both personal and practical help. The aim of the house call service is to create a sense of security and well-being and also to give advice and guidance about activities and support services (both private and public). Another objective is to support elderly people in putting their personal resources to better use and maintaining their functional capacity for as long as possible. The elderly person may freely choose whether he or she wants house calls and contribute to deciding what subjects should be discussed during the call

Maximum payment for mealservice

Since new legislation entered into force July 1st 2009 there is a limit to how much recipients who live at a nursing home can be charged when the local authority refers a citizen to meal service. A similar limit exists for recipients who get meals delivered to their own homes (meal arrangement with delivery) or is served to the recipients at the local day centre (meal arrangement without delivery). The maximum charge limit ensures that all recipients get meal service to a fair price and quality regardless of income. The local authority sets the standard for the meal service and decides how much a person is entitled to, based on the individual need. The local authority is obliged to ensure that the offer is fully sufficient and adequate in relation to the recipient's individual needs and has the correct nutritional value.

Permanent contact person

All recipients of home-care service were given the right to have a permanent contact person, to whom they can turn for advice and guidance if they have questions about home care, when new legislation entered into force on January 1st 2009. The purpose of the appointment of permanent contact persons is to facilitate the access to the municipal authority for recipients of home-care services thereby creating security and continuity for the individual.

Care home guarantee

In 2009 the Danish parliament passed a care home guarantee. According to this, all citizens who are approved by the local government for a home care residence, are guaranteed a maximum waiting period of only two month.

Best practice for building care homes

To not only improve the access to care homes, but also secure the quality of the physical frames of these homes, Denmark has developed a Model Program for care homes aimed at securing good quality buildings, quality in professional care giving and resident satisfaction. The Model Program is a database of knowledge and best practice.

Initiatives concerning special needs in case of dementia and Alzheimer's disease

In 2010 the Government and regional authorities together launched an action plan on dementia based on a thorough analysis of the public help and support that people with dementia receive. The action plan, which is currently being implemented, has a cross sectional focus and includes 14 recommendations covering the health and social sector on how to enhance the cooperation between sectors and improve the quality of the services given to people with dementia. In the Finance Act for 2011 approximately 30 million DKK (approximately 4 million euro) was earmarked to the implementation of the action plan on dementia. The implementation of the action plan among other things entails development of new methods and better dissemination of knowledge.

The Danish Dementia Research Centre

The Danish Dementia Research Centre was founded in 2007 as a development project from 2007-2011 financed by the Ministry of Health and The Health Foundation. The centre was established to boost and coordinate the health care research in relation to the development of specific treatment and nursing offers regarding dementia, and to ensure knowledge dissemination and presentation to hospitals and municipalities in order to enhance the treatment, care and counselling of patients and relatives. The funding of the centre has been extended until the end of 2015 middle of 2013.

The Danish Dementia Research Centre is involved in a number of tasks regarding dementia i.e. clinical research, patient diagnostics and education of health care professionals, patients and caregivers.

The National Board of Health is preparing clinical guidelines on dementia

Actions to improve the coordination and integration of health policies to older persons

In 2007, the responsibility of primary prevention and health promotion was transferred from regions to municipalities, whereas the regions have retained the responsibility for among other things the hospitals. The municipalities have the advantage of being close to the citizens and the needs and health challenges which the elderly population is facing now and in the coming years. Thus, the municipalities are well placed to establish health policies which set up the frames for coherent and systematic primary prevention and health promotion services for people in all ages.

Health agreements between the regions and the municipalities describe the shared responsibility for health care and treatment offered to the citizens/ patients. One of the areas where the responsibility is shared is the prevention (dis-

ease specific as well as the general prevention) and health promotion aimed at patients with chronic diseases.

For the past years the municipalities have striven to establish health services focused around structural factors and health promoting activities (reducing the number of smokers, reducing alcohol consumption etc.) to enhance public health. As a consequence of this focus the municipalities have prioritized health in all policies across administrations within the municipalities.

The following initiatives are currently being carried out aimed at restructuring the Danish health care system:

- Approx. 76 mio. Euros has been allocated to 38 projects which will strengthen the prehospital care and the local medical centres - especially in the rural and remote areas of Denmark, where the distance to a specialized hospital with acute care facilities can be longer.
- The government will strengthen the quality of health care in the rural and re-mote areas of Denmark. The government will analyze the need for further medical ambulances/acute vehicles in the rural and remote areas and for improved electronic medical records.

The restructuring means that the specialized treatment and the acute care will be centralized in fewer hospitals.

The overall aim is to increase the quality of care, create better education environments and secure an optimal use of the resources. At the same time, the prehospital care and the local medical centres are being strengthened.

The following initiatives are central to the government's work with improving the health status of elderly people:

- Early detection:
Among elderly citizens there is a great potential (of prevention) to detect early signs of disability and illness/ exacerbation of chronic disease as early as possible. This can be done by using simple validated tools (every-day- or life indicators). This must be followed by initiatives in the municipality offering patient-education and rehabilitation, which supports the patient's opportunities for self-care and to actively take part in their own treatment and monitoring of the disease and prevent hospitalizations. Many elderly people are increasingly involved in disease management programs where the efforts outside the hospitals are coordinated primarily through a well-established cooperation between general practitioners and health professionals in the municipality.
- Hospice:
From 2003 to 2006, massive resources were allocated to expand the hospice capacity. In 2010, additional funds were set aside for 42 new hospice beds for the period 2011-2014. This will bring the total hospice capacity up to 250 beds in 2014.
- Cross-sectoral cooperation:
An important area of focus is to strengthen the cross-sectoral cooperation between the primary health care sector, the general practitioners and the

hospitals. This challenge will be addressed in the reinforced action for the elderly medical patient.

Mechanisms put in place to strengthen the role of communities, organizations and associations in providing support and care to elderly persons.

Section 18 of the Danish Act on Social Services plays a key role in relation to local interaction between public and voluntary social work in that it requires local authorities to cooperate with the voluntary social organisations and societies and to allocate an annual amount in support of voluntary social work.

Besides section 18, the government financially supports the voluntary organisations, including organisations in the social sector, the support comes to effect by different funds earmarked at the voluntary social organizations.

Commitment 8: To mainstream a gender approach in an ageing society

The Danish Gender Equality Acts prohibits sexual discrimination outside as well as on the labour market. One of the acts obliges public authorities to work to promote equality by taking equality into account in all public planning and activities – the so-called gender-mainstreaming strategy.

Commitment 9: To support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members

Denmark has several well established measures aimed at ensuring that families are able to provide care for their older family relatives, such as:

▪ **Care of a close relative**

A person who is attached to the labour market may be employed by the local authority to take care at home of a close relative with severely and permanently reduced physical or mental functional capabilities or long-term illness. The caretaker will be paid by the local authority. Employment normally lasts for a maximum of six months. It is a condition that the alternative is residential accommodation away from the home or that the care corresponds to a full-time job. It is furthermore a condition that both parties agree on the care scheme and that the local authority does not find anything decisive in disfavour of the care scheme.

▪ **Care allowance**

People caring for a dying relative at home can claim compensation for lost earnings (care allowance). One condition for payment of care allowance is that a medical assessment must show hospital treatment to be futile. In addition, the doctor must agree that the dying person can and should be cared for in the home. Another condition is that the patient must agree on establishing the care scheme.

▪ **Citizen-managed personal assistance**

Persons with severely and permanently reduced physical or mental functional capabilities may be eligible for citizen-managed personal assistance. It is a condition that the following requirements are also met: the person must have a high degree of dependency on others or massive need for care, monitoring or escort assistance. It is also a condition that the help needs

cannot be met by conventional personal help and care under the provisions of social legislation. If a person is eligible for citizen-managed personal assistance, that person must on his or her own employ helpers and manage and plan the help. The employment relationship is a matter between the citizen and the helpers. The objective is to make the scheme as flexible as possible. However, the local authority must advise and help with practical aspects and should at least once annually make sure that the helper scheme is working as intended. The citizen can transfer the financial assistance and employer's responsibility to a close relative, an association or a private company offering citizen-managed personal assistance.

Commitment 10: To promote the implementation and follow-up of the regional implementation strategy through regional cooperation

The Ministry of Social Affairs and Integration has participated in meetings in the Working Group on Ageing in UNECE. Further, the ministry has participated in other international forums such as Nordic meetings on enhancing active and healthy ageing.

4. Conclusions and Priorities for the Future

As described in the beginning of this report, Denmark shares the challenges experienced in many Western countries of a changed demographic pattern with a rising share of elderly people.

The Danish publicly funded pension system and system of universal elderly care has advantages in the light of the demographic challenges ahead. However, the generous system also brings with it challenges of securing the financial basis of the benefits and services that the oldest age groups more frequently than other age groups make use of. These challenges are addressed by various means ranging from trying to limit the demand for benefits and services by prevention and other measures aiming at enhancing healthy and active ageing to securing a broader tax base through labour market and pension reforms as described under commitment 3 and 5.

In the social sector, the Government will work towards enhancing the feeling of security among elderly people and towards enhancing co-determination and self-management of elderly people. This will among other things be fulfilled through an increased use of welfare technology.

Concerning the health situation of elderly people, the government will focus on prevention and early detection, expanding the hospice capacity as well as enhanced cross-sectoral cooperation. Further, the government has a special focus on improving the offers given to elderly medical patients.