

Report on national follow-up on UNECE's regional
implementation strategy (RIS)

Denmark

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Abstract

This report describes the ageing policy measures taken by the Danish government that relate to the ten RIS obligations.

Danish health care for older people rests on the basic principle of free and equal access to assistance. This means that all residents of Denmark have direct access to various services, should temporary or permanent physical or mental impairment prevent them from handling such tasks on their own. The related expenses are financed through local taxes and block grants from central government.

In recent years, attention has been focused on developing quality as well as free choice and legal protection.

Chapter 1 analyses demographic trends in Denmark and the expected impact on the demand for services. In this connection, Danish legislation in the area is described and the most important initiatives taken since the government took office in 2001 are reviewed. Chapter 2 presents the framework for the RIS follow-up process, including the relevant stakeholders' involvement in implementing initiatives in the field. Chapter 3 reviews the government's strategy and initiatives structured around the ten RIS obligations.

General information

This report was prepared by:
Ministry of Social Affairs
Holmens Kanal 22
DK-1060 Copenhagen K
Denmark
Tel. +45 33 92 93 00
www.social.dk
sm@sm.dk

Contacts/national focal points: Ms Anne Bækgaard, Head of Section, and Ms Simone Heinecke, Head of Section, the Division for Elderly of the Ministry of Social Affairs.

1. Situation, activities and priorities related to ageing

The following sections analyse demographic trends in Denmark and the expected impact on the demand for services.

Danish legislation in the area is also described, and the most important initiatives taken since the government took office in 2001 are reviewed.

Finally, a description is given of the government's focus on developing the field in recent years: development of the free choice of provider, quality assurance and quality development as well as legal protection and co-determination.

1.a National ageing situation

Denmark has a total population of 5.4 million people. Demographic trends in the oldest age groups (65 and older) show increasing life expectancy and a large post-war generation that is reaching retirement age. The number of 65-year-olds and older (65+) and 80-year-olds and older (80+) appear from table 1.

Table 1. Number of people aged 65+ and 80+ in thousands, 2002-2007 (actual numbers) and 2010-2040 (forecast)

Year	Aged 65+	index 2007=100	Aged 80+	index 2007=100
2002	795	95	217	96
2003	798	96	217	96
2004	805	96	218	97
2005	813	97	221	98
2006	823	99	223	99
2007	835	100	225	100
2010	895	107	226	100
2015	1023	123	232	103
2020	1105	132	256	114
2025	1177	141	312	139
2030	1257	151	383	170
2035	1329	159	415	184
2040	1366	164	441	196

The increase in the oldest population groups is considerable, particularly for those aged 65+ after 2010.

The demographic trends have given rise to legislative amendments concerning the state pension age (see 3. d Adjustment of social protection systems in response to demographic changes and their social and economic consequences). No assumption is made, on the other hand, with regard to whether the demand for services to older people will be adjusted. Only the larger number of older people resulting from the impact of the post-war generation necessitates more expenses for services. The increasing life expectancy is not projected to create a need for additional services.

In table 2, these assumptions are accounted for in the expected trend regarding the number of state pensioners and the number of service recipients having reached 65 years of age.

Table 2. Number of state pensioners and service recipients in thousands, 2002-2005/7 (actual numbers) and 2010-2040 (forecast)

Year	Number of	Index	Number of	Index
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	state pensioners	2007=100	service recipients	2005=100
2002	690	84	184	98
2003	689	83	185	98
2004	701	85	186	99
2005	751	91	188	100
2006	805	97	-	-
2007	826	100	-	-
2010	883	107	196	104
2015	986	119	207	110
2020	1044	126	217	116
2025	1029	125	236	126
2030	944	114	260	138
2035	1005	122	266	141
2040	990	120	265	140

The new pension legislation has substantially reduced the size of the problem arising from demographic trends. The need for services for older people is also growing, but not nearly at the rate one might expect when looking at the demographic trends for people aged 80+.

Combined, this means that expenses for older people can be anticipated to rise but that the rise must be expected to be moderate. With the present legislation, total expenses for state pension and geriatric services are expected to rise until 2020-2025, after which they will fall again by some 20 per cent.

1.b Old-age care

Danish legislation defines the overall objectives of social policy and rights to old-age care. However, the principle of local self-government gives the individual local council the responsibility, as regards both content and financing, for providing the various forms of assistance to which citizens are entitled under Danish legislation.

Local authorities finance the costs of long-term care through local taxes and block grants from the state.

The local authority always decides on the assistance to be granted, irrespective of whether such assistance is provided by the public or private sector, the authority function being separated from the provider function.

Local authorities are obligated to ensure assistance for the necessary personal care and practical tasks in the home that individuals are unable to handle on their own. Assistance is planned in cooperation with the recipient and is granted following a concrete and individual assessment of the recipient's functional abilities and needs based on the local authority's adopted service level.

Assistance takes the form of help to recipients to help themselves, i.e. supplementary assistance for tasks they are unable to perform themselves. Furthermore, assistance aims at activation, the object being to enable the recipient as best possible to help perform a maximum of tasks.

Home help can be granted as temporary or permanent assistance. Most older people receiving home help are granted permanent assistance. Payment may be charged for temporary assistance but not for permanent assistance.

The local authority offers all older people above 75 two annual preventive home visits. These visits aim at curtailing any problems in the older person's daily life and helping the older person to the best possible life, including creating security with a large social network.

The visit must include a structured, holistic interview where the older person's general circumstances are reviewed and any questions discussed. The contents of the interview must centre on how the older person manages his/her life. On the basis of the interview, the older person may be referred to various preventive and activating services found in the local authority, organised by volunteers, organisations or the local authority itself.

Meal arrangements

Meal arrangements are part of the practical home help services, so the recipient's eligibility for this service must be assessed. The designation 'meal arrangements' is used for schemes where food is prepared outside the home and is either brought to the recipient's home (meal arrangement including delivery) or is served to the recipient at the local day centre (meal arrangement without delivery). It is up to each local authority to decide whether it will subsidise meal arrangements. Meal arrangements thus differ from the rest of the old-age care sector in that, in principle, they may be paid entirely through user fees.

Housing for older people

A basic principle of Denmark's ageing policy is that the type of home should not dictate what care services are offered to the older person. Individual needs should guide such decisions. Consequently, Denmark has constructed no conventional care homes in the form of institutional accommodation since 1987. Rather, Denmark has constructed subsidised housing for older people in the form of social housing, including retirement housing with care facilities and associated care staff. Unlike conventional care homes, housing areas are separated from the service areas.

Table 1. Trend in health costs between 1993 and 2003

	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
Public health costs	79.4	81.1	80.4	83.1	84.8	88.3	92.2	93.4	98.2	102.0	104.1
Private health costs	16.6	17.5	17.0	17.7	18.3	19.4	20.0	19.9	20.6	21.0	21.4
Total health costs	96.0	98.6	97.4	100.8	103.0	107.7	112.2	113.4	118.8	122.9	125.5

Source: OECD health database 2004

Note: Health costs have been determined according to international definitions. Moreover, all costs have been calculated in 2003 prices.

1.c The pension system

The Danish pension system is based on three pillars, each having its own main target and form of financing consistent with those that the World Bank proposed in 1994 in its publication “Averting the old age crisis”.

a. The pension system is based on the universal state pension. The first main target is to secure all older people a basic retirement income at a reasonable level. In this public pension the basic payments are age-related, and the pension is paid to all citizens irrespective of their labour market participation. State pension is paid to all citizens over 65, the only condition for receiving full pension being that the citizen must have lived in Denmark for 40 years. State pension is tax-financed, secures older people a basic income that is equal for all and ensures that no one is in want in retirement age.

Besides state pension, pensioners may receive a number of extra services in the form of housing benefits, housing tax discount, personal allowances, heating benefits and discounts on TV licence fees and transport. The schemes are income graduated, which means they are aimed at pensioners with modest supplementary income.

The Danish state pension system efficiently protects older people against poverty – thus, in 2004, only 1 per cent of state pensioners were in the group of people with so-called “relatively low income”. The group consists of families with income under half of the median income in the population. By comparison, just under 5 per cent of the population was in the low-income group in 2004. Pensioners in the low-income group tend to have atypical financial circumstances, such as large tax losses connected with self-employment.

The “pure” net state pension (full state pension after tax without extra services) exceeds 50 per cent of the disposable median income in the population.

b. The second main target is to secure citizens a reasonable replacement rate when they enter retirement. The private labour market pension schemes (together with the public state pension, etc.) perform this function, presently covering some 90 per cent of all full-time employees. The bulk of labour market pensions are contribution-defined, savings-based group schemes that are either based on collective agreements or agreed in individual enterprises. Labour market pensions are typically mandatory for the individual person, but it is becoming more customary to give him/her some say in the combination of benefits. Labour market pension schemes have expanded considerably over the last couple of decades. Contribution rates are typically in the interval 10 – 18 percent.

c. The third main target is to ensure flexibility, i.e. the ability to allow for individual requirements. Individual pension schemes, in particular, perform this function. Insurance companies, etc. provide a wide variety of offers. Some one million Danes pay to individual pension schemes.

1.d Instrumental assessment

A wide range of new initiatives in the old-age area has been introduced since the present government took office in 2001. The most important ones are presented below.

Free choice of home help provider

Since 1 January 2003, local authorities have been obliged to create the framework for enabling older and disabled people to choose between various home help providers. This means that recipients of personal and practical help can usually choose between the local authority home help and one or more private providers. See below for more information.

Initiatives to improve conditions for people suffering from senile dementia

In summer 2003, the government and the Danish People's party made an agreement to allocate a total of DKK 80m for improving the area of senile dementia (DKK 22m of which will go to the health care area). The agreement entails earmarking funds for the following initiatives in the social area:

Information campaign on senile dementia (DKK 10m)

Pool for supplementary training of care staff (DKK 10m)

Application pool for preventing the use of force (DKK 10m)

Application pool for day-care and job activation services for young people suffering from dementia. (DKK 13m)

Application pool establishing housing for people suffering from senile dementia (DKK 15m)

Another DKK 37m was allocated for developing and establishing temporary respite care homes, etc. Most recently, the government and the Danish People's Party agreed to allocate a further DKK 20m to the old-age area, especially towards a number of initiatives concerning senile dementia, e.g. the conditions of medical patients suffering from senile dementia.

Personal care proxies

From 1 January 2005, local authorities' plans for care, etc. have to the widest extent possible had to respect the wishes people diagnosed with senile dementia express for their future housing and care ("personal care proxy").

Prevention centres

In the 2005 rate adjustment pool agreement, which is part of the Finance Act, a total of DKK 70m was earmarked for initiating pilot projects establishing local-authority prevention and counselling centres. The pool will be paid over a period of three years.

Free choice between local-authority and private care homes as well as independent institutions – Private care dwellings

In January 2007, the government adopted an extension of free choice, which expanded the local authority's housing supply to include a scheme for private care dwellings. The idea is to give citizens greater free choice when it comes to different types of housing for the elderly and various providers of such housing.

The documentation project

In connection with the agreement on the local authorities' economy for 2006, the decision was made to launch cooperation across public sector authorities to improve, simplify and ensure more coherent documentation in the important local authority service areas. To ensure that future, key steering initiatives will increasingly rely on the determination of effect goals, framework and result requirements instead of on detailed steering of local authorities, it has been agreed to focus documentation sharply on measuring results and effects.

The agreement on documentation in the old-age care sector comprises 23 indicators, including seven effect indicators and 16 background indicators. The majority of the effect indicators will be collected through an annual national user survey based on random selection, while the majority of the background indicators are obtained from simplifying and improving the information presently included in the social resource counting.

The agreement also means that from 2008 a greater amount of the national documentation in the old-age care area is to be built on data based on individuals taken directly from the local authorities' care systems instead of on manually aggregated information. All indicators will be published aggregated at local authority level. It has also been agreed that old-age documentation should be embedded and collected in Statistics Denmark.

1.e Identification of areas for in-depth evaluation

The government strongly focuses on the old-age care area and has injected many extra funds into the area since 2001. Since then, the government has thus annually injected DKK 500m into the area with a view to giving the old-age care sector a general boost. From 2006, a further DKK 500m annually will be granted to ensure better and more flexible home help services in the local authorities. The government's agreement with the local authorities on the local authorities' economy for 2007 stipulates that the government will seek to ensure that local authorities are granted an additional DKK 300m annually to meet the drain on services for older people.

However, economy is not the only aspect in the work of ensuring older citizens in society the best possible conditions. For this reason, the Ministry of Social Affairs has a wide range of action areas.

Recent years have seen strong focus on the development of free choice of provider, quality development, legal protection and involvement of citizens in decisions affecting them.

Free choice

Since taking office in 2001, the government has, as mentioned above, implemented a number of legislative initiatives aimed at offering citizens free choice. This allows greater freedom of choice, while also focusing attention on efficiency and better quality.

All home help users thus have the right to choose freely between various home help providers. Usually, home help users can choose between public home help and one or more private home help firms.

Since 1 July 2002, all persons assessed to be eligible for retirement housing/assisted living accommodation, care home places and sheltered housing have been entitled to choose such housing freely within the local authority as well as across local authority borders.

In March 2006, a bill on a care-home guarantee was adopted. The care-home guarantee guarantees older people that they will be offered a dwelling in social housing for the elderly or a place in a care home for the elderly at the latest two months after admission on a waiting list. The guarantee has been met when the older person is offered a specified dwelling in social housing for the elderly or care home place that can be occupied at the latest two weeks after the expiry of the two-month time limit. The Act will be fully implemented at 1 January 2009.

Quality development

2005 saw the launch of the project “Quality in the care of older people”. The project will run until 2008 and consists of research, method development and communication. The goal of the project is to learn about the existing barriers to and opportunities for creating quality in the care of older people, the emphasis being on the citizen’s experience of quality. The project is to result in new methods and tools that the local authorities can use in their work to improve quality in the care of older people.

Several training opportunities to improve the quality of the care older people receive have been launched in recent years and are meant to enhance the professional upgrading of managers and staff in the old-age care sector.

The training courses focus on organising and planning care, but also to a high degree on upgrading the professional competencies of care staff. This track will be followed in future, for example by launching the development of a management training programme at institution level. The training programme

will also be aimed at care home managers in both the public and private sectors.

Presently, work is being carried out to create more transparency and thus ensure more systematic quality assurance in the care homes. The aim is to make it easier to compare information about individual care homes within and across local authority borders. Besides becoming an essential management tool, this will also play a key part when citizens are to choose housing for the elderly. The proposal is expected to enter into force in summer 2007.

Since 1 January 1999, a statute has required local authorities to prepare quality standards for personal and practical help. Since April 2001, local authorities have also been obliged to prepare quality standards for local authority rehabilitation.

The quality standards must state to which assistance citizens are entitled if they need personal and practical help, local rehabilitation and physical maintenance training. The content, scope and performance of the service must be precisely described, and quality targets (operational targets) set. Local authorities must adopt quality standards once a year and follow them up on the basis of the operational targets, thus ensuring follow-up on the political targets of the initiatives.

Overall, a broad aim for quality has been set. In the late summer of 2006, the government initiated work on a quality reform of the public sector to secure future public sector quality. To ensure that the public sector has a culture where attention is continually focused on developing quality and where meeting citizens' needs and solving citizens' problems are vital to all parts of the work, the government will prepare an overall strategy for public sector quality, the primary focus being on the quality of public services in selected welfare areas, i.e. older people, children and health. The strategy will be published in summer 2007.

Legal protection and co-determination

The government finds it crucial that care be provided in a way that shows respect for older people's differing wishes and needs. It should also be transparent and clear which services citizens can receive and how to complain if the right treatment has not been provided. Good possibilities for this have been ensured.

Firstly, local authorities must prepare quality standards for personal and practical help and for rehabilitation. This is an important tool ensuring, among other things, that older people and their relatives can find out what assistance they may expect from the local authority. A written decision about such services must always be available.

In individual care homes, care plans must also be prepared, which will ensure that help is planned individually and with focus on the older person's resources, skills and life style. The care plans can also give users and relatives better information about the help required by each person.

Personal care proxies have been introduced, giving the older person better possibilities for getting care that respects his/her wishes and needs. Personal care proxies allow older people to express their wishes for care in advance, for example if a person suffers from dementia and can expect to lose the ability to express his/her wishes in future.

Furthermore, under social legislation a number of councils must be set up locally to safeguard older people's interests and communicate older people's views. Committees of users and relatives are mandatory in care homes and must be involved when guidelines for daily life in the care home are laid down with regard to menus, work routines, activities, etc. The committees are also entitled to comment on the inspection reports. A senior citizens council must be established in all local authorities. It advises the local authority on matters of ageing policy and communicates views concerning older people.

A well-developed complaints system also exists, including a complaints council that discusses, assesses and communicates complaints about home help and respite care. In addition, the public administrations legally supervise how the local authorities administrate the rules.

As mentioned above, the free-choice package assures citizens greater influence in the personal and practical help they receive.

2. National capacities for follow-up to MIPAA/RIS

This chapter presents the framework for the RIS follow-up process, including the relevant stakeholders' involvement in implementing initiatives in the field.

The old-age care area primarily belongs under the Ministry of Social Affairs, which is responsible for social services legislation. However, a number of other ministries also legislate in areas of importance to older people: health matters belong under the Ministry of Health and labour market issues under the Ministry of Employment.

The basis for this report is the social area, where the Ministry of Social Affairs lays down the framework for the old-age care area, while local authorities are responsible for filling in the framework.

In its work in the old-age care area, the Ministry of Social Affairs is focusing strongly on ensuring that we all have the opportunity to age under safe conditions and in a dignified manner as bona fide citizens in society. The recommendations included in RIS form a natural part of the Ministry of Social Affairs' work.

2. a Involvement of other stakeholders and research

Involving relevant stakeholders, both private ones and NGOs, is an integral part of the work. Stakeholders are involved through working groups, through involvement in the legislative process and other development of the area as well as through follow-up and, to the relevant extent, implementation.

Research in the area is undertaken by a number of public and private research institutions and organisations, which largely work independently of the Ministry of Social Affairs.

The Ministry of Social Affairs works closely with the National Board of Specialist Consultancy and Social Services, which is a subdivision of the Ministry of Social Affairs. The Board undertakes a number of method development tasks in the old-age care area. The ongoing projects focus on management tools such as quality standards, free choice and case-handling methods, as well as on specific case areas, such as infirm older people, training of older people, staff recruitment and user-friendly communication tools.

The relevant stakeholders will be consulted about this report.

See also below for a review of the cooperation with relevant stakeholders.

3. Review and appraisal by subject area

Chapter 3 reviews the government's strategy and initiatives structured around the ten RIS obligations.

3.a. Mainstreaming ageing

The Act on Social Services lays down that local authorities have a duty to provide various forms of services to persons who due to temporary or permanent physical or mental impairment or special social problems are prevented from handling such tasks on their own. The assistance is thus not age- but need-determined.

The objectives of the Act on Social Services are to offer advice and support for preventing social problems, to offer a number of general services that may also have a preventive aim and to consider needs following from physical or mental impairment or special social problems, including to improve the individual's possibilities of managing on his/her own or to ease his/her everyday existence and improve the quality of life. The assistance is based on the individual's responsibility for him- or herself and his/her family.

In relation to measures aimed at adults with physical or mental impairment or special social problems, the Act lays down four general main objectives. They are:

- to prevent the aggravation of the individual's problems;
- to improve the individual's scope for social and personal development;
- to improve the individual's scope for self-realisation through contact, interpersonal relations, activity, treatment and care; and
- to provide comprehensive activities with services adapted to the individual's special needs in his/her own home, including long-term accommodation under the Act on Social Housing, etc. or in accommodation facilities under the Act on Social Services.

As regards differential treatment and discrimination of older people in the labour market, an Act was adopted in early 2005 prohibiting differential treatment in the labour market, which also includes age as a protection criterion.

In 1996, the Ministry of Social Affairs established an independent council, AgeForum. The objective is to create a forum that can follow and assess older people's conditions in Denmark in relevant areas. AgeForum is to help give a varied and adequate picture of the older generation and ageing.

AgeForum should also help inspire present and future older people when they plan their lives as older people, for example by pointing out the options available for individual planning and participation in society. Furthermore, AgeForum should help authorities and others gain awareness of the great variation among the older population as regards health, needs, etc. when they are planning legislation and services.

AgeForum should assess all initiatives aimed at older people and provided by public authorities, private entities, volunteers and the older people themselves, help compile experience in the old-age care area and make older people's resources visible as well as any barriers that may prevent older people from using them. Finally, AgeForum should help coordinate and communicate information about older people's conditions and rights and propose initiatives to improve conditions for older people, e.g. concerning coordinating and preventive activities.

A Council on Housing for the Elderly has also been set up, which is a consultative body to the Ministry of Social Affairs in matters concerning housing for older people and disabled people.

Pursuant to section 171 of the Act on Social Housing, etc., the Minister for Social Affairs shall set up a council for dwellings for the elderly with representatives of local authorities, regional authorities, social housing organisations, homeowners and residents as well as social organisations related to the area. The provision was originally laid down in the Act on Housing for the Elderly, which entered into force on 1 July 1987.

The Council on Housing for the Elderly must follow and assess housing conditions for older people and disabled people. The Council must keep the Minister for Social Affairs continually informed. The Council may initiate investigations on the housing conditions for older people and disabled people, e.g. by obtaining statistical information.

Where special financial or social problems are involved in securing older and disabled people reasonable housing conditions, the Council must submit a recommendation to the Minister for Social Affairs about measures to alleviate such problems.

Finally, the Council must consider the planning and layout of future dwellings for older people and disabled people.

3.b Integration and participation of older persons

No special measures have been taken to give ageing a better image, but in general legislation efforts are being made to incorporate the principle that older people should be treated on an equal footing with all others.

As for contact across generations, volunteer visitor schemes have been established where a younger volunteer visits an older lonely person.

However, as mentioned above, various councils have been set up to help older persons influence their everyday lives.

Senior citizens councils

The legislation on senior citizens councils and complaints councils entered into force on 1 January 1996. At that time, senior citizens councils had already been established on a voluntary basis in a large number of local authorities, and, because this cooperation between the local authority's older citizens and the local council proved positive, the establishment of senior citizens councils became compulsory.

The local council must set up a senior citizens council, to be elected by direct election. The senior citizens council should help enhance co-determination and co-responsibility for the local authority's older citizens and help ensure that the dialogue and cooperation between older people and the local council develop. The senior citizens council gives older people formalised access to discuss and follow the contents and form of the local authority's ageing policy.

The senior citizens council consists of at least five members elected in direct election. All citizens with permanent address in the local authority and who have reached the age of 60 have the right to vote and are eligible for the senior citizens council.

The senior citizens council is to advise the local authority in ageing policy matters. Consequently, the local council is obliged to consult the senior citizens

council about all proposals concerning older people. Older people must thus have influence on the local authority's ageing policy in a broad sense and on both general matters and matters of importance to older people's everyday lives. The senior citizens council must be consulted about, for example, annual budgets, plans for building dwellings for the elderly, proposals to initiate activities for older people, the local council's objectives and service information in the old-age care area.

Complaints councils

The legislation on complaints councils entered into force on 1 January 1996 concurrently with the rules on senior citizens councils. The complaints councils were introduced because the senior citizens councils gave older people influence on local ageing policy. The complaints councils should help secure older people the possibility of following and ensuring that home help tasks are actually carried out in accordance with the local council's aims in the area.

The local council must ensure that a complaints council is established. The complaints council must consist of three members elected by and among the members of the senior citizens council, two members elected by and among the members of the local council and one member elected by the disabled persons organisations in the local authority.

The complaints council must follow trends in the area and – through its cooperation with the local council – help ensure that tasks are performed in practice in keeping with the local council's aims. It is also assumed that the complaints council contributes to the area's general development through the dialogue arising between the local council and the complaints council.

The complaints council discusses, assesses and communicates complaints about eligibility assessment and determination of assistance under the provisions of the Act on Social Services on personal and practical assistance and respite care and relief.

Committees of users and relatives

The rules contained in the Act on Social Services governing committees of users and relatives took effect on 1 January 2002. Many care homes and centres already had various forms of cooperation with residents and relatives before the Act commenced. The Ministry of Social Affairs' guidance on social services for older people, etc. recommended the establishment of a users' committee that could help create a forum for cooperation between the residents and the management of a care home.

The local council must thus set up committees of users and relatives in connection with care homes, assisted living accommodation covered by the Act on Social Housing, etc. or the Act on Housing for the Elderly and Persons with Handicaps and similar housing units.

This committee is meant to safeguard the vital interests of the infirm older people in each housing unit. The committees are to function as a forum for dialogue between the local authority and users as well as their relatives about how to plan the daily lives of residents in care homes and similar dwellings. This should help create greater coherence in the initiatives aimed at persons living in care homes and similar dwellings.

The committees should be involved when guidelines for the daily life in and around the dwelling are laid down, including guidelines for menus, work routines, activities, etc. Moreover, the committees should be involved in setting up the guidelines for staff conduct. However, the committees have no influence on managerial authority. Therefore, the committees cannot discuss the work of specific employees. The committees may point out the need for employees with special competencies/training but committee members should not participate in job interviews. The local authority is the employing authority. The legislation on committees of users and relatives does not prevent the committees from also taking on tasks, including arranging activities for older people in the area, beyond their primary role as the mouthpiece of users and relatives.

In addition, a **Council on Housing for the Elderly** exists as described in 3. a.

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

Macroeconomic policy

Measures have been initiated to ensure that the Danish economy will be able to bear the increased costs of older people:

(a) Public debt reduction has been one of the strategies applied to prepare the Danish welfare society for the larger number of older people in future. Generally, pursuing a stability-oriented economic policy with limited growth in public consumption has been the declared aim of changing governments for a number of years. This has helped secure large public surpluses and reduced national debt. Denmark is presently among the countries in EU15 with the lowest debt – only Ireland and Luxemburg have lower debt.

(b) The expansion of the labour market pensions, which gained particular momentum at the end of the 1980s, and which today cover 80 per cent of employees in the labour force. Labour market pensions impact positively on the economy – both in the form of a higher savings quota and in the form of public expense relief for state pension in future. This is because a large part of state pension – the pension supplement – is scaled down with supplementary income. Among tomorrow's pensioners, a growing number will have a supplementary labour market pension and consequently receive a smaller pension supplement than would otherwise be the case.

3.d Adjustment of social protection systems in response to demographic changes and their social and economic consequences

Higher pension age

(c) The government has entered into a broad political agreement called “Initiatives to secure future wealth and welfare and investments in the future” with participation of the Danish People’s Party, the Social Democratic Party and the Social-Liberal Party. The agreement launches various across-the-board measures that increase the labour force and its qualification level, thus enabling the welfare society to handle the future challenges posed by more older people and increasing competition pressure caused by globalisation.

The agreement mainly focuses on three action areas:

- Older people should stay in the labour market slightly longer. Specifically, the voluntary early-retirement and state pension age will be gradually increased by two years in the period up to 2027. After this year, the voluntary early-retirement and pension age will be indexed so that both follow the trend in life expectancy. The indexation mechanism means that the total period in which a person can expect to receive voluntary early-retirement benefit and state pension will be 19½ years. This will bolster the welfare society against any increases in life expectancy. Initiatives will be launched to improve older people’s employment possibilities, including a wage subsidy scheme for those aged 55+, a better older worker policy in the public sector as well as intensified preventive measures and a boost in health and safety at work to reduce physical wear and tear.

- Focus on training, education, research, etc. and investments in the future. Public research grants will be increased, and the government has committed itself to the goal that at least 95 per cent of all young people should complete a youth education programme in 2015 and 50 per cent should complete higher education. A system of mentors and contact teachers will be introduced in vocational youth training programmes, and more funds will be injected to boost the quality of vocational training programmes, including supplementary training of teachers. Young people should also start studying sooner, and a quotient model will be introduced where the average marks of young people who start studying not later than two years after having passed a qualifying examination will be multiplied by 1.08. Furthermore, adult and supplementary training will be improved, and more adult apprenticeships will be introduced.

- Intensified measures to help vulnerable groups (including refugees and immigrants) into the labour market. In future, insured unemployed persons and social assistance and start help claimants ready for the labour market must check Jobnet at least once a week, and a facility will be established where unemployed persons must confirm that they are searching for a job. A special scheme will be introduced for employment with subsidised wages in private

firms for persons who have received social assistance, introduction benefit or start help assistance for 90 per cent of the time within the past three years.

As of 2025 (voluntary early retirement) / 2030 (state pension), the age limits in the retirement system will be indexed to the mean life expectancy of 60 years, so that the combined period with voluntary early retirement and state pension will be around 19½ years (of this 14.5 years with state pension) in future. If life expectancy does not change, the voluntary early retirement age will stay at 62 and the pension age at 67.

b. Anticipatory pension

The anticipatory pension system was reformed with effect from 2003. The reform includes a number of initiatives making it more attractive to employ persons with reduced capacity for work. The reform significantly simplifies the anticipatory pension system. The main purpose of the reform was to ensure that people who have (residual) capacity for work are actually given a chance to prove their ability in the labour market, possibly through a government-supported job. Consequently, the reform will result in a lower influx of new anticipatory pensioners than would otherwise have been the case.

c. Deferred state pension

A new scheme introduced on 1 July 2004 allows a person to defer taking up state pension provided the person continues to do work corresponding to at least 1500 hours per year. The age of the person/pensioner at the time of deferment has no impact on the right to defer state pension. Total deferment cannot exceed 120 months. The scheme was chiefly intended to make it more financially advantageous to continue working after pension age.

3. e Enabling labour markets to respond to the economic and social consequences of population ageing

Improving labour market participation

Labour market participation is relatively high in Denmark, also among women and older people. Sixty per cent of persons aged 55 to 64 are in employment.

Barriers for employment are handled through the initiatives mentioned in the other sections.

Regarding discrimination in the labour market, the decision has been made to set up a complaints board to handle complaints about discrimination, including discrimination because of gender and age. The board will be set up in 2008.

Raising retirement age and making retirement more flexible

In 1999, the Danish voluntary early-retirement pay scheme was changed to provide better possibilities of combining voluntary early retirement and employment. The voluntary early-retirement pay scheme offers the option of

voluntary retirement from the labour market before actual pension age. The flexible voluntary early-retirement pay scheme means that recipients of early-retirement benefits can now work as much as they can and want – but pay will be set off against the benefit. Another change was introduced in 1999, making waiting with voluntary early retirement until the age of 62 advantageous.

Moreover, central government finances a scheme where a group of experienced consulting firms can give companies five hours of consultancy services about older worker practices. A website has also been developed where companies can get inspiration and knowledge regarding what they can do in the older worker area.

Finally, the plan is to continue with attitude campaigns aimed at both enterprises and employees, including older workers themselves.

Initiatives to promote employment and reduce joblessness for older people

In general, the government is seeking to foster an attitude in the labour market where focus is on the person and the person's competencies instead of on age. Thus, allowance is also made for the fact that large individual differences exist among older workers.

Attitude campaign

In 2005-2006, the government thus implemented a major campaign with a view to pointing out to both enterprises and older workers the advantages and possibilities of staying in the labour market longer. The campaign stressed the older workers' possibilities of combining work and private interests through so-called older worker agreements. In this connection, the Minister for Employment has established an older worker practice award, first awarded in 2006 to three enterprises that make good efforts to maintain older workers in the workplace.

Older worker think tank

The Minister for Employment is setting up an older worker think tank, whose task is to come up with new, good ideas about what we can do to improve older workers' employment and affect the age of retirement.

Welfare reform – amendments to the employment legislation

A large majority in the Danish parliament supports a welfare reform (agreed in 2006), abolishing former special rules within unemployment rules and active labour market policy. The special rules encouraged older unemployed people to remain passive until the age of voluntary early retirement (extended right to unemployment benefits, exemption from job activation) or to retire early (shortened unemployment-benefit period for those aged 60+ compared with other unemployed persons). These rules are now the same for all unemployed people, which is another way to indicate that a person is not automatically

about to leave the labour market, just because he or she is nearing the age of 60.

A special wage subsidy is also being introduced for older people over 55 who have been unemployed for more than one year, and a right to an older worker job in a local authority if the older unemployed person loses his or her right to unemployment benefits.

Active employment policy

The active labour market and employment policies provide good opportunities for taking special initiatives dealing with all unemployed persons who need it, including older unemployed persons. Such initiatives may include special job-activating schemes where unemployed persons are upskilled in connection with a change of industry. Furthermore, agreements have been established with private stakeholders having special expertise in working with older employees. They may, for example, handle job activation efforts in relation to older unemployed people.

Improve employability

Prevention of physical wear and tear

A special fund, the Prevention Fund, has been set up in order to prevent physical wear and tear. The Fund is established by statute. The object of the Fund is to finance activities aimed at preventing the premature withdrawal of Danish workers from the labour market due to physical and mental wear and tear.

The Fund will have a capital of DKK 3 billion. The Fund is financed by funds from the Danish state. Support from the Fund may be granted to enterprises, local authorities, associations and organisations for the purpose of implementing a specific project.

The enterprises are the focal point for activities necessary to achieve the social objective of preventing and reducing physical wear and tear and ensuring that fewer persons withdraw prematurely from the labour market. The workplace is thus the key point of entry as regards activities targeted on employees.

It is thus a condition for obtaining financial support from the Fund that the project is implemented in an enterprise or involves one or several enterprises. The enterprises thus assume responsibility for extraordinary efforts to reduce physical wear and tear among employees and to avoid that employees are leaving the labour market prematurely.

Education and training system for adults, including older people

Denmark has a well-developed public basic, further and continuing education and training system for adults, with access for all, and with possibilities of recurrent competence development aimed at facilitating acquisition of general and work related competences, and ensuring their broad recognition by individuals, employers and society at large, including access to recognition of

prior learning. The state is the major supplier of education and training for adults.

Through the Welfare Agreement (2006), it has been agreed that the adult education and continuing training effort must be reinforced and that all concerned – individuals, enterprises and the social partners – are responsible for fulfilling the objective. A strengthened adult education and continuing training effort must be targeted at socially disadvantaged groups on the labour market. Thus, the effort will include:

- The setting up of a fund of DKK 1bn focusing on more vocationally oriented adult education and continuing training, which will benefit i.a. individuals with a low educational level. Payment will depend on whether the social partners agree to increase the financing contribution for a strengthened adult education and continuing training effort in a forward-looking manner.
- A simplified and permanent job rotation scheme aiming at the continued education and continuing training of employees and further qualification of unemployed individuals on the labour market.

Moreover, a series of additional new initiatives are expected to be implemented as part of the Welfare Agreement, which are also to contribute to the promotion of socially disadvantaged groups' participation and integration in the labour market. These include enhanced opportunities for recognition of prior learning acquired outside formal education and training.

3. f Promotion of life-long learning and adaptation of the educational system in order to meet the changing economic, social and demographic conditions

Education and training in Denmark cater for all age groups. In the field of life-long learning, Denmark has no particular active ageing policy initiatives. However, the adult education and training offered by the state provides a good framework for re- and upskilling opportunities, including financial support, which are accessible to all and widely used.

Older people can benefit from the same education and training programmes offered to all other adults, including receiving educational grants if they meet the conditions.

At the local level, education and training initiatives aimed at older people may be launched, but on a voluntary basis.

3.g Striving to ensure quality of life at all ages and maintain independent living including health and well-being

Danish health care for older people rests on the basic principle of free and equal access to offers of assistance (universal assistance). This means that all residents of Denmark have access to various services, should temporary or

permanent physical or mental impairment prevent them from handling such tasks on their own.

Legislation only allows local authorities limited access to charge payment for permanent help concerning personal care or practical assistance in the home. Local authorities may charge payment for expenses for raw materials and other materials connected with providing temporary or permanent help, but not for staff expenses. However, staff expenses may be included, when decisions on meal arrangement schemes are made. However, user charges only account for a diminutive part of total health care expenses for older people.

Residents in social housing for the elderly pay monthly rent corresponding to the costs of running the housing estate, loan instalments and interest. Residents have access to receive housing benefits depending on income. Residents of conventional care homes pay rent approximated to the costs of running the care home. Deductions may be granted on the basis of the resident's financial situation.

3.h Mainstreaming a gender approach in an ageing society to support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members

The gender equality aspect is incorporated in all legislation, and gender-segregated statistics are prepared to the widest extent possible. All authorities must work for gender equality in their respective areas and ensure equal rights for men and women.

As mentioned above, the Danish model is based on allocation of assistance from public authorities if a citizen needs it, irrespective of income, gender or age.

In 2003, an act on equal pay was adopted, prohibiting discrimination in the labour market based on gender.

Generally, the parents of a child have joint custody of the child, and parents are entitled to one year's maternity or paternity leave, i.e. absence from work with payment of daily cash benefits, the organisation of which the parents can to a wide extent plan themselves.

3.i Support for families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members

The local authorities are obliged to ensure necessary assistance to all citizens who need it. Assistance is universal and financed via taxes. In addition, there are a number of schemes aimed at relieving relatives of some of their work.

Care allowance

People caring for a close 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.

Respite care/relief

The local council must also offer respite care or relief for spouses or other close relatives caring for a person with physical or mental impairment. Relief is performed in the home while respite care takes place outside the home, e.g. in the form of day, night or 24-hour stays at care homes or in assisted living accommodation.

3. j Promotion of the implementation and the follow-up of the Regional Implementation Strategy through regional cooperation

In connection with preparing the RIS, the Division for Elderly has contacted the Ministry of Education and the National Labour Market Authority and the following internal units with a view to obtaining sufficient information about the areas described:

- International Unit
- Department of Gender Equality
- Division of Economics and Statistics
- Pension Unit

Annex

1.

Ministry of Social Affairs:
Holmens Kanal 22
DK-1060 Copenhagen K
Denmark
Tel. +45 33 92 93 00
www.social.dk
sm@sm.dk

- Division for Elderly:
Tel. +45 33 92 93 00
aeldre@sm.dk

- International Unit
Tel. +45 33 92 93 00
inter@sm.dk

- Department of Gender Equality
Tel. +45 33 92 93 00
lige@lige.dk

- Division of Economics and
Statistics
Tel. +45 33 92 93 00
ktoesk@sm.dk

- Pension Unit
Tel. +45 33 92 93 00
kontant@sm.dk

National Labour Market Authority
Holmens Kanal 20
DK-1016 Copenhagen K
Tel. +45 35 28 81 00
ams@ams.dk

Ministry of Education
Frederiksholms Kanal 21
DK-1220 Copenhagen K
Tel. +45 33 92 50 00
uvm@uvm.dk