Delivering on the European Pillar of Social Rights

Long-term care and Assistance for the homeless

Eszter Zolyomi | Tamara Premrov | Kai Leichsenring
Overview

• The European Pillar of Social Rights
• Our contribution to underpin Principle 18 (long-term care)
• Our findings in the area of homelessness (Principle 19)
• Recommendations for better intergovernmental cooperation
What is the European Pillar of Social Rights?
20 principles and rights

• A new opportunity to strengthen the social dimension of the EU?
• A changing paradigm?
• A way to initiate a broader discussion on social rights and convergence in the EU?
Our focus

Principle 18
Everyone has the right to affordable long-term care services of good quality, in particular home-care and community-based services.

Principle 19
a. Access to social housing or housing assistance of good quality shall be provided for those in need.

b. Vulnerable people have the right to appropriate assistance and protection against forced eviction.

c. Adequate shelter and services shall be provided to the homeless in order to promote their social inclusion.
Access to good quality long-term care

What is at stake?

• A focus on older people in need of care, work-life balance, consumer protection: informal care, quality of formal care services and facilities

• Not a real domain for a Directive (unless social protection)
  • Recommendations and selected regulations regarding the delivery of services are conceivable

• The Commission is preparing policy options and a potential initiative
  • Study coordinated by EFTHEIA with CEPS, the University of Leuven, and the European Centre
Access to good quality long-term care

Evidence provided

• Mapping quality assurance mechanisms in LTC in EU Member States
  • Huge differences, but mostly inspection of structures and processes

• Clustering national approaches to quality assurance in LTC: 4 regime types
  • Rudimentary: BG, CR, CZ, EL, EE, HU, PL, RO, SK, LT, LV
  • Paternalistic: AT, ES, FR, IT, LU, IE, PT, SI (FI, DK)
  • Market-oriented: BE, DE, ES, FI, NL, SE, DK
  • Outcome-oriented: first attempts in BE, NL
<table>
<thead>
<tr>
<th>Status of LTC system</th>
<th>TYPE 1: Rudimentary governance of QA</th>
<th>TYPE 2: Paternalistic QA governance</th>
<th>TYPE 3: Market-oriented QA governance</th>
<th>TYPE 4: Outcome-oriented quality improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public expenditures on LTC in % of GDP</td>
<td>low</td>
<td>medium</td>
<td>medium-high</td>
<td>based on assessed needs</td>
</tr>
<tr>
<td>Expenditures for home care in % of expenditures for residential care</td>
<td>low</td>
<td>low</td>
<td>low-medium</td>
<td>equal distribution, according to needs</td>
</tr>
<tr>
<td>Public QA agency established</td>
<td>no</td>
<td>yes/no</td>
<td>yes, partly with public reporting</td>
<td>yes, incl. public reporting</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of provider mix</th>
<th>Share of private for-profit providers in residential care</th>
<th>low</th>
<th>medium-low</th>
<th>medium-high</th>
<th>Level playing-field for all providers, networking, partnerships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Share of private for-profit providers in home care</td>
<td>low</td>
<td>medium</td>
<td>medium</td>
<td></td>
<td></td>
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<td>Share of private non-profit providers in residential care</td>
<td>low</td>
<td>high</td>
<td>medium-high</td>
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<table>
<thead>
<tr>
<th>Pathway of LTC system development</th>
<th>General assessment</th>
<th>late mover</th>
<th>traditional welfare-mix</th>
<th>from public to market: choice &amp; competition</th>
<th>future forerunner</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Key mechanisms to ensure quality in LTC</th>
<th>Residential care</th>
<th>authorisation, inspection</th>
<th>accreditation, inspection, (QM)</th>
<th>accreditation, QM, public reporting</th>
<th>joint accreditation, QM across settings (case management), QM at system level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home care</td>
<td>-</td>
<td>accreditation, inspection</td>
<td>inspection, consumer satisfaction</td>
<td>(consumer satisfaction)</td>
<td></td>
</tr>
<tr>
<td>Informal care</td>
<td>not foreseen</td>
<td>restricted</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Countries</td>
<td>BG, CR, CZ, EL, EE, BG, HU, PL, RO, SK, LT, LV</td>
<td>AT, ES, FR, IT, LU, IE, PT, SI (FI, DK)</td>
<td>BE, DE, ES, FI, NL, SE, DK</td>
<td>Some aspects in BE, NL, PT</td>
<td></td>
</tr>
</tbody>
</table>
Access to good quality long-term care

Evidence provided – Promising examples of good practice

- Voluntary quality assurance via a National Quality Certificate (AT)
- PREZO (NL, BE): a voluntary quality framework based on training, self-assessment and external auditing
- Assessment of quality in care homes through the observation of ‘key situations’ (Bavaria, DE)
- A large scale programme of quality improvement and a novel framework for the quality of long-term care in residential settings (NL)
- A new approach to external monitoring of quality in LTC settings (DE)
Access to good quality long-term care

Recommended EU policy options

• Defining a set of key principles for long-term care in Europe
  • Based on the Voluntary European Quality Framework for Social Services (2010), the European Quality Framework for long-term care services and the EU Charter of rights and responsibilities of older people in need of long-term care and assistance

• Guidelines to establish essential elements of quality assurance mechanisms (“from inspection to continuous improvement”)
  • National level: QA agency dedicated to LTC, LTC human resource strategy, developing integrated and person-centred long-term care systems
  • Organisational level: Establish processes of continuous improvement, ensure resources (time and money) and capacities of quality management
Access to adequate housing and assistance for the homeless

Principle 19 in the EPSR Action Plan

New in 2021

- Launch of the ‘European Platform on Combatting Homelessness’ (exchange of best practices and innovative approaches)
- Affordable Housing Initiative (as part of EU Renovation Wave Strategy) to pilot 100 renovation districts

Ongoing

- European Semester Process – monitoring of housing policies in EU Member States, but so far little attention to the issue of homelessness
Access to adequate housing and assistance for the homeless

Evidence provided

Mapping trends and policies to tackle homelessness in Europe

• European Centre project commissioned and funded by the Swedish Ministry of Health and Social Affairs

• A multi-dimensional framework with indicators:
  • Adequate housing (affordability, habitability, security)
  • Homelessness services
  • Social security benefits and services
  • Healthcare (including mental health)

• Analysis covering 10 EU countries with focus not only on access, but also on rights and entitlements
Access to adequate housing and assistance for the homeless

Some key findings and recommendations

**Adequate housing – security of tenure and protection from forced evictions**

- Need for preventative and integrated measures that can detect problems at an early stage (debt counselling, housing advice, outreach measures)
- Forced and unlawful evictions could be avoided by providing free legal aid and assistance

**Homelessness services**

- Insufficient resources, limited supply and issues related to quality of emergency or temporary shelters are among the most frequently reported problems
- Alternative and complementary modes of housing provisions offering quick and long-term accommodation are of upmost importance (scaling-up of housing-first services)
Some key findings and recommendations

Social benefits and services – eligibility conditions and administrative barriers
- Conditionalities related to activation and inclusion measures should consider the situation of homeless people (establishing low-threshold services)
- Problems with postal address/proving local connection prevents homeless people receiving benefits (e.g., ‘address point’ in Ireland to facilitate access and take-up)

Healthcare – follow-up care and coordination upon discharge
- Very few policies/initiatives to ensure continuity of care for homeless people (e.g., Safetynet clinic in Dublin, HOGAR Sí in Madrid)
- Need for integrated health and social services (esp. housing services)
- Hospitals should establish discharge policies that refer homeless people to housing services, coordinate outpatient care and ensure follow-up
Housing allowances to enhance housing affordability

• One in ten households is overburdened by housing costs
• Most EU countries provide (means-tested) housing allowances
• Limited research on the effect of this benefit → potential for improvement?
Non-take-up

- Non-take-up: despite being eligible households don’t claim the benefit
- Reasons:
  - Lack of information
  - Administrative burden
  - Stigma
# Non-take-up rates in Europe

<table>
<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Non-take-up rate of housing allowances in % of households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Czech Republic</td>
<td>2010</td>
<td>70 %</td>
</tr>
<tr>
<td>Denmark</td>
<td>1992</td>
<td>33 %</td>
</tr>
<tr>
<td>Netherlands</td>
<td>2003</td>
<td>27 %</td>
</tr>
<tr>
<td></td>
<td>2010</td>
<td>18 %</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>2010</td>
<td>21 %</td>
</tr>
<tr>
<td></td>
<td>2015</td>
<td>19 %</td>
</tr>
<tr>
<td></td>
<td>2019</td>
<td>19 %</td>
</tr>
</tbody>
</table>
Example: Non take-up (NTU) in Upper Austria

- 30% of households: **12,000**
- 21% in expenditure: **15 Mio €**
- **Single-person** households and **third-country nationals** affected most

<table>
<thead>
<tr>
<th>40,000 entitled households</th>
<th>30% NTU</th>
<th>71 Mio € entitled</th>
<th>21% NTU</th>
</tr>
</thead>
<tbody>
<tr>
<td>70% Take-up</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>79% Take-up</td>
<td></td>
<td></td>
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</table>
What is needed?

- Provision of more and better information
- Simplification of application process + better guidance and support
- Automatic enrolment
- Influence public discourse to reduce stigma
Conclusions

• ‘New’ social risks are getting more attention also at intergovernmental level

• Intergovernmental cooperation:
  • Mutual learning and exchange of good practice
  • ‘Trickle-down effects’?
  • Integration of related issues in bridge-building activities

• Towards rights-based approaches?
Questions? Comments?

More information on long-term-care
https://www.euro.centre.org/projects/detail/3964

More information on housing
https://www.euro.centre.org/projects/detail/3656
https://www.euro.centre.org/projects/detail/3938