



**Inclusion & Sustainability  
Consultants**

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**Models of special accommodation  
for older people across Europe  
ANEC-R&T-2012-DFA/SERV-001**

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- ANEC, The European consumer voice in standardisation
- Age-Platform
- EURAG - The European Federation of Older People
- European Federation of Public, Cooperative and Social Housing
- Platform of European Social NGOs
- The European Association for Providers and Directors of Long-Term Care Services for the Elderly
- National Standards bodies listed on the website of CEN, The European Committee for Standardization (CEN, French: Comité Européen de Normalisation)

Thanks are also due to Professor Judith Phillips and Dr Sarah Hillcoat-Nallétamby of the Centre for Innovative Ageing, Swansea University, for their input and valued guidance; and to my colleagues in Access Design Solutions UK Ltd for their support.

Finally, my thanks to Malcolm Barrow, the Project Advisor, and Ayse Sumer of ANEC.

Carol Thomas,  
Director, Access Design Solutions UK Ltd

## Executive Summary

This report was commissioned by ANEC, The European Association for the Co-ordination of Consumer Representation in Standardisation. As the European consumer voice in standardisation, ANEC represents the European consumer interest in the creation of technical standards, especially those developed to support the implementation of European laws and public policies.

The impetus for the commissioned study was the work of CEN, the European Committee for Standardization CEN PC385, between 2008 and 2012, to develop a CEN standard for Sheltered Housing for Older People. This was CEN's first ever attempt to develop a standard in the social welfare field, and it became clear during the progress of this work that there is a diversity of models of accommodation and care for older people across Europe that must be taken into account in future standards development.

The purpose of the Report is the provision of an Information Record of models of specialist accommodation and care for older people, and related standards, in use across the countries of the European Union, the acceding and candidate countries, and the EFTA countries: Norway, Switzerland, Iceland and Liechtenstein (in total 38 countries). This will be used by ANEC to inform future work on standardisation in relation to accommodation and care for older people.

The scope of the project did not include assessing the quality of care, or the contents of standards and regulations.

A combination of primary (online questionnaire survey) and secondary research (literature review) techniques were used

to gather information from as wide a range of sources as possible.

The Information Record reveals a pattern of information on models and standards which may be divided into Northern Europe, Southern Mediterranean, and Eastern Europe. This broadly follows the categorisation of provision and coverage of care services for older people in the European Commission Report, "Long-Term Care for the elderly: Provisions and providers in 33 European countries" (Francesca Bettio and Alina Verashchagina, 2010).

The lack of information on standards in some Eastern European countries reflects the low level of development of specialised care facilities for older people in Eastern Europe. For instance, in Kosova there are only 2 care homes; in Macedonia 4 public care homes as well as a few privately run, but coverage is uneven across the country; and in Montenegro there are only 2 private nursing homes.

Southern European countries such as Greece, Italy and Portugal have a range of supported housing and residential care options but they are generally less standardised than in Northern Europe. For instance, in Greece local authorities provide the licence to run the service and set the minimum standards, however there is not a "systematic or obligatory evaluation of quality" (Kagialaris, G and Mastrogiannakis, T, 2010)

In Northern European countries such as Austria, Germany, Finland, Ireland and the UK, the Information Record reveals a range of models of supported housing and residential care

options, together with evidence of standards and regulations for the premises and quality of care.

In other cases in Northern Europe such as Norway, Switzerland and the Netherlands, however, there is evidence of a range of models of accommodation but relatively low availability of standards for specialised housing and residential care. This may reflect a focus on innovation rather than standards, as one survey respondent suggested. It is important that standards are used to inform and raise quality levels without being seen to stifle innovation.

There is evidence of an increasing focus in Northern Europe on enabling older people to remain at home or in supported housing where they retain independence while having access to support where needed.

Northern and Western European countries generally provided information about home care standards; while in most Eastern European countries there was little information found about the provision of home care or any existence of standards.

The provision of care support to an older person in their home is affected by the culture of the country with an expectation on families to care for older relatives in some

countries. For instance in Bulgaria, care is only provided if the individual is unable to care for themselves and has no relatives who can care for them (Mincheva & Kanazireva, 2010). In Estonia the law requires children to care for their elderly parents. This compares to the situation in Switzerland where compulsory health insurance will pay for up to 60 hours per week of care at home (Daley and Gubb, 2013)

The availability of day care centres also varies between countries. Day care centres are not regularly available in some Eastern European countries, hence there are no standards. For instance, in the Czech Republic only a few centres exist, and they are usually only open for a few hours a day; only one centre exists in Macedonia; and day care centres are currently being piloted in Lithuania funded by the European Social Fund.

The countries that have implemented mandatory long-term care insurance such as Austria, Germany, and the Netherlands, have a range of options for home and residential care and quality standards, possibly reflecting the influence of the insurers on standards.

## **1. Introduction**

### **1.1 ANEC**

ANEC is The European Association for the Co-ordination of Consumer Representation in Standardisation. As the European consumer voice in standardisation, ANEC represents the European consumer interest in the creation of technical standards, especially those developed to support the implementation of European laws and public policies.

Each field of priority in which ANEC operates, determined by the ANEC General Assembly and Steering Committee, has a Working Group as its focus. Working Group members are voluntary experts drawn from across the countries of the ANEC membership. In 2013, the ANEC budget allowed ANEC to operate in the following main areas of priority: Child Safety, Design for All (DfA), Domestic Appliances (DOMAP), Environment, Information Society, Services, Traffic, Nanotechnologies and Smart Meters.

In April 2013 ANEC commissioned Access Design Solutions UK Ltd to undertake a desk based research project on 'Models of Special Accommodation for Older People across Europe'.

### **1.2 Client brief: Purpose of the Research Project**

ANEC commissioned this report in order to inform future work on standardisation in relation to accommodation and care for older people. The impetus for the commissioned study was the work of The European Committee for Standardization CEN PC385, between 2008 and 2012, to

develop a CEN standard for Sheltered Housing for Older People. This was CEN's first attempt to develop a standard in the social welfare field, and it achieved CEN European consensus for a Technical Specification published in 2012.

It became clear during the progress of this CEN work that there is a diversity of models of accommodation and care for older people across Europe that must be taken into account in future standards development.

The CEN work revealed a tension between the demands for high quality high cost sheltered housing in some of the wealthier northern European countries, and the need for low cost entry level supported housing elsewhere, with little demand in some countries. ANEC considers that similar issues may apply to other models of care for older people, including residential care, nursing home care, and care at home. Little seems to be known about how different countries address or achieve solutions to the challenges of a society supporting and caring for its older populations.

The aim of this research project was to compile an Information Record containing information on models of specialist accommodation and care for older people in use across the countries of the European Union, the acceding and candidate countries, and the EFTA countries: Norway, Switzerland, Iceland and Liechtenstein (total 38 countries). Models of accommodation and care studied:

- Sheltered (Supported) housing
- Residential care
- Nursing care in special institutions

- Hospital care
- Hospice care
- Day care centres
- Care at home

### **1.3 Scope**

The Information Record includes, for each country, types of accommodation/care model, definitions, and regulations and standards applied to these models. This study did not extend to assessing the contents of standards or issues such as quality of care.

In addition to the required information this report also includes other information recorded during the study such as eligibility, accommodation tenure and funding.

### **1.4 Report Structure**

Chapter 2 describes the methodology used to research and gather the information required to compile the Information Record.

Chapter 3 is the main body of the report. This comprises an Information Record set out in two sets of tables:

The first set lists, for each model of accommodation and care identified, the availability of that model in each country, definition of the model, and information on regulations and standards which apply to that model. A separate table is provided for each model.

The second set of tables lists, again for each model identified, additional information such as eligibility conditions, tenure and funding.

Information referred to in the table, such as details of standards, is provided in the footnotes following each table.

This is followed by a brief assessment of the information focused on emerging themes (3.2) and a summary of the gaps in the Information Record (3.3). Chapter 4 forms the conclusion.

Chapter 5 contains References and Sources. This chapter outlines published research identified during the study, and sources of further information, providing a short description of content and relevance.



## 2. Methodology

A combination of primary (online questionnaire survey) and secondary research (literature review) techniques were used to gather information from as wide a range of sources as possible.

### 2.1 Literature Review

This was used to identify the appropriate terminology to be used in the online questionnaire survey, and to obtain information from research reports and reports published on government websites (EU and individual countries).

While ANEC had provided a list of models of accommodation and care to be covered in the study, it was recognised that terms or names for these models may differ between countries and also what is understood by these terms. To combat this, a short description of each model term was prepared for use with the survey.

#### 'Supported Housing'

For the purposes of this study, 'supported housing' may be described as arrangements where residents live independently in individual dwellings within a scheme or complex where some form of service is available to assist them.

Various terms or names may be used to describe 'supported housing' in different countries, such as 'sheltered housing', 'retirement homes', 'housing for seniors / or older people', 'extra care sheltered housing'. The key factor is that residents live independently in a dwelling, with their own cooking and eating facilities, within a scheme or complex

where the aim is to support the residents. The type of support may vary.

#### Residential Care Homes

For this study these are described as care homes where people live either short or long term. They normally provide accommodation, meals, and personal care (such as help with washing and eating).

They differ from 'supported housing' where residents live independently in individual dwellings within a complex. Residents in a care home may have an individual room, or set of rooms, but this is not normally a separate dwelling.

Nursing Homes / Care homes with nursing: These are similar to the above residential care homes, but they also provide regular on site nursing care for residents who need this.

#### Residential Care in a Hospital Setting

This relates to residential care provided for older people in a hospital setting beyond that provided to a patient who goes in for medical treatment at the end of which the patient goes home or to another facility. The individual may live there either short or long term.

#### Hospice

For this study, hospices are described as separate specialist facilities providing residential end-of-life care or palliative care for people with terminal illness.

### Day Care Centres

This relates to supported facilities without residential accommodation where older people who live independently or with family, or in another facility, can attend during the day and receive support or services. The support or services may vary.

### Care provided in an individual's own home

This is care provided in an individual older person's own home if care is required. The individual may live alone, with a partner or with family. This differs from the 'supported housing' model as the individual's home is not part of a scheme or complex set up for the purpose of supporting older people.

### Specialised facilities for older persons with dementia

These may be within or alongside any of the above models, or they may be separate.

The survey also considered other models of care or accommodation not covered by the above list.

## **2.2 Survey**

An online survey was carried out from July to October 2013. Options to receive the questionnaire in a word document or take the survey by telephone were not taken up. A copy of the questionnaire is provided in the appendix. The questionnaire was subject to peer review among the project group before being piloted with members of the ANEC Design for All and Services Working Groups.

The advantages of using ANEC members for the pilot were: Members cover a wide range of countries across Europe; ANEC could ask for their support to arrange a quick return; avoids difficulty of approaching 'new contacts' twice if the survey changed following pilot. The possible disadvantages that ANEC members may have prior knowledge of the subject and/or survey, a vested interest, and provide a biased sample were carefully considered, however the survey was targeted to obtain factual information from experts so these issues were deemed not to affect the pilot.

### Pilot Survey results:

- 12 responses were received out of 66 distributed.
- All respondents found it easy to use the online survey
- Most (9 out of 12) had used an online survey at least once before; 2 had not and they also found it easy to use (one respondent did not answer).
- All respondents said that the purpose of the survey was clear.
- In addition two contacts who had not completed the survey but had looked at it, emailed to give feedback. They also described the survey as clear and easy to follow.
- There were no substantive changes required to the survey questions so the surveys completed in the pilot could be included.
- The main suggestion for improvement was to provide a word document listing the topics that respondents would be asked about, that could be kept for reference. This was provided for the final survey.

- Respondents to the pilot survey were offered an opportunity to take the survey again if they considered their answers would be different with the additional introductory paper provided with the final survey. No-one required this.

### **Survey Distribution**

The survey was distributed widely, with several organisations promoting it among their members and contacts, including:

- ANEC, The European Association for the Co-ordination of Consumer Representation in Standardisation
- Age-Platform
- EURAG - The European Federation of Older People
- European Federation of Public, Cooperative and Social Housing
- Platform of European Social NGOs
- The European Association for Providers and Directors of Long-Term Care Services for the Elderly
- National Standards bodies listed on the CEN website;

### **Survey Response**

62 questionnaires were completed. No overall response rate could be calculated because of the use of gatekeepers and

websites as dissemination points for the online questionnaire. A relatively large number of responses were received from two countries, Germany (7) and the UK (12). This may be due to the way the survey was circulated within the countries, for instance in the UK the British Standards Institution sent the survey to their Consumer and Public Interest Representatives with a request to complete. Several of these respondents answered 'don't know' for many of the detailed questions so most of the information came from the response of one or two 'experts' as was the case for countries where only one or two responses were received. The survey response was low, despite reminders, therefore most of the information was obtained from the secondary research.

### **Assessing Results**

As this was an information gathering exercise, the questionnaire responses and information gleaned from the desk based search were used to populate the Information Record tables. The information gained from the survey was cross-validated by other sources where possible.

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## Survey Responses

Country	Responses
Austria	1
Belgium	3
Bulgaria	1
Croatia	2
Cyprus	0
Czech Republic	1
Denmark	2
Estonia	1
Finland	5
France	2
Germany	7
Greece	2
Hungary	0
Iceland	1
Ireland	1
Italy	1
Kosovo	0

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Latvia	1
Liechtenstein	0
Lithuania	0
Luxembourg	0
Macedonia <sup>1</sup>	1
Malta	0
Montenegro	0
The Netherlands	0
Norway	0
Poland	0
Portugal	1
Romania	0
Serbia	1
Slovakia	3
Slovenia	3
Spain	3
Sweden	4

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<sup>1</sup> The Former Yugoslav Republic of Macedonia

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Switzerland	0
Turkey	1
United Kingdom <sup>2</sup>	12
Other (Canada) <sup>3</sup>	1

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<sup>2</sup> The relatively high number of responses from the UK and Germany appears to be related to the distribution of the survey within the country, for instance in the UK the British Standards Institution circulated the survey to their Consumer and Public Affairs Members.

<sup>3</sup> Response from Canada not included

### **3. Information Record**

The information compiled is presented in the following tables. There is then an assessment of the information obtained considering the main patterns, and gaps in the information.

#### **3.1 Tables**

There are 2 sets of tables: The first set records, for each model of accommodation / care, availability of that model in the country, the definition, standards and regulations. The second set of tables records additional information such as eligibility, tenure, funding.

The Information Record tables list the sources of the information from the Survey and/or from desktop research in terms of the following groups:

- Government department
- Academic (literature or survey respondent)
- Consumer organisation or organisation of disabled or older people
- Individual response
- Other

## **Tables**

### **Set One:**

**Models of accommodation / care, availability, definitions, standards and regulations.**



## Supported Housing

Country	Models available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Austria</b>	Yes 3+	"Unterstütztes wohnen", "Betreutes wohnen" <sup>4</sup> (Assisted Living); "Seniorenwohnhäuser" <sup>5</sup> (Senior Housing); "Betreubares wohnen" <sup>6,7</sup> (Sheltered Housing) <sup>8</sup>	Yes <sup>9</sup>  Yes  Yes	Yes <sup>10</sup>  Yes  Yes	Yes	Survey – UN-affiliated body
<b>Belgium</b>	Yes 1	'Service flats' <sup>11</sup>	Not known	Not known		Desktop research
<b>Bulgaria</b>	Yes	'Protected Housing' <sup>12</sup>	Not known	Not known		Desktop research
<b>Croatia</b>	Yes <sup>13</sup>		Not known	Not known		Survey – government dept.; individual

### Austria

<sup>4</sup> <http://www.kwp.at/unserangebot.aspx>

<sup>5</sup> [http://www.noe.gv.at/bilder/d67/Betreutes\\_Wohnen.pdf](http://www.noe.gv.at/bilder/d67/Betreutes_Wohnen.pdf)

<sup>6</sup> <http://www.wimtec.com/upload/santec/downloads/de///Broschuere2.pdf>

<sup>7</sup> [http://www.land-oberoesterreich.gv.at/cps/rde/xchg/ooe/hs.xsl/18783\\_DEU\\_HTML.htm](http://www.land-oberoesterreich.gv.at/cps/rde/xchg/ooe/hs.xsl/18783_DEU_HTML.htm)

<sup>8</sup> Other smaller models include *Wohngemeinschaften* (residential communities) for small groups of people with dementia.

<sup>9</sup> ÖNORM B 1600 2011-04-01: Barrierefreies Bauen – Planungsgrundlagen (Barrier-free construction - Planning Fundamentals); OIB-Richtlinie 4: Nutzungssicherheit und Barrierefreiheit (use and accessibility); OIB-Richtlinie 2: Brandschutz (fire protection)

<sup>10</sup> [http://www.jusline.at/Heimaufenthaltsgesetz\\_\(HeimAufG\).html](http://www.jusline.at/Heimaufenthaltsgesetz_(HeimAufG).html)

[Regional Care Acts](#): (LGBl 52/2000); (LGBl 108/1994); (LGBl 7/1996); (LGBl 29/1996 idF 123/1996); (LGBl 61/1996)

### Belgium

<sup>11</sup> Willemé, 2010.

### Bulgaria

<sup>12</sup> Mincheva & Kanazireva, 2010.

### Croatia

<sup>13</sup> Responses to survey differed, but it appears that a model of supported housing is currently in the process of being implemented, see [Social Welfare Act](#)

Country	Models available	Definition	Standards/Regulations			Source
			Buildings	Services	Other	
<b>Cyprus</b>	Not known					Desktop research
<b>Czech Republic</b>	Yes 1	'Protected Apartments with domiciliary care' <sup>14</sup>	Not known	Not known		Desktop research
<b>Denmark</b>	Yes 2	'General dwellings for elderly persons'; 'Protected dwellings' <sup>15</sup>	Yes <sup>16</sup>  Not known	Yes  Not known		Survey – org of/for older people; desktop research
<b>Estonia</b>	Yes 2		None	Yes <sup>17</sup>		Survey – government dept.
<b>Finland</b>	Yes 2+	"Palvelutalo" (Sheltered housing); "Senioritalo" (Senior housing)	Yes <sup>18</sup>  Not known	Yes <sup>19</sup>  Not known <sup>20</sup>		Survey – org of/for older people; government dept.

### **Czech Republic**

<sup>14</sup> Pfeiferová et al, 2013.

### **Denmark**

<sup>15</sup> Campbell & Wagner, 2009.

<sup>16</sup> Respondent referred to Ministry of Social Affairs as the relevant government department, but gave no further details. No other information could be found: <http://english.sm.dk/social-issues/Elderly-people/danish-senior-policy/Sider/Start.aspx>

### **Estonia**

<sup>17</sup> From the survey response there are some standards but not obligatory. No details provided and no other information could be found.

### **Finland**

<sup>18</sup> [Building regulations.](#)

[Lift standards](#)

<sup>19</sup> [http://www.stm.fi/en/social\\_and\\_health\\_services/old\\_people/quality\\_and\\_development/recommendations;](http://www.stm.fi/en/social_and_health_services/old_people/quality_and_development/recommendations;)  
[http://www.stm.fi/vireilla/lainsaadantohankkeet/sosiaali\\_ja\\_terveydenhuolto/ikaantyneet](http://www.stm.fi/vireilla/lainsaadantohankkeet/sosiaali_ja_terveydenhuolto/ikaantyneet)

<sup>20</sup> It is not clear whether the same standards/regulations that apply for the first model also apply for the second model.

Country	Models available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>France</b>	Yes 1+	"Foyer logement" (sheltered housing); "Domitys" residences <sup>21</sup> ; "Bebuinages"	Yes <sup>22</sup>  Not known <sup>23</sup>	Yes  Not known		Survey – government dept.
<b>Germany</b>	Yes 2+	"Betreutes Wohnen" (Assisted Housing) <sup>24</sup>	Yes <sup>25</sup>	Yes <sup>26</sup>		Survey – orgs of/for older people; individual
<b>Greece</b>	Yes 2+	"ΜΟΝΑΔΑ ΦΡΟΝΤΙΔΑΣ ΗΛΙΚΙΩΜΕΝΩΝ" (old age care units) <sup>27</sup>	Not known	Not known		Survey – academic; Desktop research
<b>Hungary</b>	Not available					Desktop research <sup>28 29</sup>

### France

<sup>21</sup> Brieu, Duveau and Shineman, 2013, [ILC France](#)

<sup>22</sup> <http://www.codes-et-lois.fr/code-de-la-construction-et-de-l-habitation/toc-partie-reglementaire-texte-integral>

<sup>23</sup> The same standards/regulations that apply for the first model may also apply for the second model, but this is not clear from the information obtained.

### Germany

<sup>24</sup> Survey respondent commented that there is no national definition so various models exist using this term, making it difficult for consumers to compare them.

<sup>25</sup> DIN 18040-2: standardization of accessible buildings; Home Construction Regulation; DIN 18025; regional regulations e.g. HeimBauVerordnung, BrandschutzVerordnung (fire protection), Rahmenverträge (contracts).

<sup>26</sup> German Institute for Standardization: DIN 77800, Publication: 2006-09 – Quality Requirements for providers of residential form "assisted living for the elderly".

[Regional Seals of Quality of Assisted Living](#)

### Greece

<sup>27</sup> Mastroiannakis & Kagialaris, 2010.

### Hungary

<sup>28</sup> OECD- *Hungary: Long Term Care*, [report](#) published May 2011

<sup>29</sup> Czibere, K et GÁL, R.I *The long-term care system for the elderly in Hungary*, 2010

Country	Models available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Iceland</b>	Yes 1	'Serviced apartments' <sup>30</sup>	Not known	Yes <sup>31</sup>		Survey – consumer association; desktop research
<b>Ireland</b>	Yes 2	'High support housing' Not known	Yes <sup>32</sup> Yes	Yes <sup>33</sup> Yes		Survey – org of/for older people
<b>Italy</b>	Yes 3+ (?) <sup>34</sup>		Yes	Yes		Survey – org of/for older people; desktop research
<b>Kosovo</b>	Not known					Desktop research
<b>Latvia</b>	Not available					Survey – individual; desktop research
<b>Liechtenstein</b>	Not known					Desktop research
<b>Lithuania</b>	Not known					Desktop research
<b>Luxembourg</b>	Not known					Desktop research
<b>Macedonia</b>	Not known					Desktop research
<b>Malta</b>	Not known					Desktop research
<b>Montenegro</b>	Not known					Desktop research

### **Iceland**

<sup>30</sup> Siguroardottir, 2013.

<sup>31</sup> <http://www.island.is/efri-arin/husnaedi/thjonustuibudir>

### **Ireland**

<sup>32</sup> <http://www.environ.ie/en/DevelopmentHousing/BuildingStandards/> also applies for model 2.

<sup>33</sup> [www.hiqa.ie](http://www.hiqa.ie) also applies for model 2.

### **Italy**

<sup>34</sup> From survey response: No information provided in response or found in desktop research

Country	Models available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Netherlands</b>	Yes	'Smart homes'; 'Apartments for Life'; 'Co-housing/ <i>centralwonen</i> '; 'Care Co-operative Villages' <sup>35</sup>	Not known	Not known		Desktop research
<b>Norway</b>	Yes	'Alternative Housing'; 'Care Flats' <sup>36</sup>	Yes <sup>37</sup> Yes	Not known Not known		Desktop research
<b>Poland</b>	Yes <sup>38</sup>	'Modified homes for the elderly' <sup>39</sup>	Not known	Not known		Desktop research
<b>Portugal</b>	Yes <sup>340</sup>		Not known	Not known		Survey – individual
<b>Romania</b>	Yes	'Assisted living arrangements' <sup>41</sup>	Not known	Not known		Desktop research
<b>Serbia</b>	Not available					Survey – standards body
<b>Slovakia</b>	Yes		Yes <sup>42</sup>	Yes <sup>43</sup>		Survey – government

### **Netherlands**

<sup>35</sup> Tinker, Ginn and Ribe, 2013.

### **Norway**

<sup>36</sup> 'Future Housing for the Elderly in Norway: Session 31-E: Senior Housing for the Future' by Espen H. Aspnes.

<sup>37</sup> Local authority Planning and Building Acts require new homes to be built to the Lifetime Homes Standard and the Universal Design standard. However, not all new homes comply with these standards. 50% of new homes financed by the Norwegian State Housing Bank are fully adapted.

### **Poland**

<sup>38</sup> Very few facilities exist, only 14 (in 2010).

<sup>39</sup> Pfeiferová et al, 2013.

### **Portugal**

<sup>40</sup> No information provided by survey respondent or found in desktop research.

### **Romania**

<sup>41</sup> Law 17/2000.

### **Slovakia**

<sup>42</sup> Decree no. 532/2002 Z.z. Ministry of Environment, which provides details on general technical requirements for construction for buildings used by persons with reduced mobility.

Country	Models available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Slovenia</b>	Yes <sup>44</sup>	'Sheltered housing'	Yes <sup>45</sup>	Yes <sup>46</sup>		Survey – other
<b>Spain</b>	Yes 2	"Viviendas para la tercera edad" (Housing for the elderly); "Viviendas Tuteladas" (Protected housing); "Centros residenciales" (Residential centres for the elderly)	Yes	Yes <sup>47</sup>		Survey – org of/for older people
<b>Sweden</b>	Yes 3+	"Assisted Living; "Servicehus" (Senior Housing); "Trygghetsboende" (safety housing) <sup>48</sup>	Yes <sup>49</sup>	None <sup>50</sup>		Survey – standards body; desktop research

<sup>43</sup> § 34 Act no. 448/2008 Z.z. on social services and on amending and supplementing (see Annex 2 for quality conditions); Law no. 455/1991 Trade Licensing (Trade Act)

#### **Slovenia**

<sup>44</sup> Unclear as to exactly how many models are available.

<sup>45</sup> [Minimum technical requirements](#) for social services providers

<sup>46</sup> [http://www.mddsz.gov.si/si/zakonodaja\\_in\\_dokumenti/veljavni\\_predpisi/#c8031](http://www.mddsz.gov.si/si/zakonodaja_in_dokumenti/veljavni_predpisi/#c8031) (See *Pravilnik o standardih in normativih socialnovarstvenih storitev*)

#### **Spain**

<sup>47</sup> Seals of approvals provided by the Instituto de Biomecánica (IBV) and the organization for elderly people Democrática de Pensionistas y Jubilados de España (UDP): [www.simplit.es](http://www.simplit.es); The Spanish Association for Standardization and Certification (AENOR): <http://www.aenor.es/>

<sup>48</sup> Jegermalm & Henning, 2013.

#### **Sweden**

<sup>49</sup> See the Swedish National Board of Housing, Building and Planning

<sup>50</sup> The Swedish Standards Institute (SIS) is currently working on national standards for quality of care for elderly people with extensive needs in ordinary and special housing, which should be in place by 2015: <http://www.sis.se/>

Country	Models available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Switzerland</b>	Yes <sup>51</sup>		Not known	Not known		Desktop research
<b>Turkey</b>	Not available					Survey – org of/for older people
<b>Ukraine</b>	Not available					Survey – org of/for older people
<b>United Kingdom</b>	Yes 3+	'Almshouses'; 'designated dwellings'; 'sheltered housing'; 'extra-care (sheltered) housing'	Yes <sup>52</sup>	Yes <sup>53</sup>		Survey – standards body; academics; desktop research

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### Switzerland

<sup>51</sup> For example: <http://www.homesandcommunities.co.uk/ourwork/happi>

### United Kingdom

<sup>52</sup> Current government consultation on housing standards: <https://www.gov.uk/government/consultations/housing-standards-review-consultation>; Part M of the Building Regulations; 'codes of practice' supported by The Centre for Housing Support (CHS) (see <http://www.chs.ac.uk>) e.g. sheltered housing management; [Development Quality Requirements](#) (Wales)

<sup>53</sup> 'Codes of practice' for social alarm, telecare and telehealth services which can help support people in their homes (for the UK see [www.telecare.org.uk](http://www.telecare.org.uk); and for the EU see [www.telehealthcode.eu/project/documents.html](http://www.telehealthcode.eu/project/documents.html)).

## Residential Care

Country	<sup>54</sup> Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
Austria	With & without nursing	"Alten- und Pflegeheim" (Nursing home);	Yes <sup>56</sup>	Yes <sup>57</sup>	Yes <sup>58</sup>	Survey – UN affiliated body; desktop research
		"Altenwohnheim" (Home for the elderly);	Yes	Yes	Yes	
		"Seniorenresidenz" (Senior residence) <sup>55</sup>	Yes	Yes	Yes	

<sup>54</sup> Table records if residential care homes available and, if known, whether separate models for homes 'with and without' nursing care

### Austria

<sup>55</sup> Froggatt & Reitingner, 2013.

<sup>56</sup>ÖNORM B 1600 2011-04-01: BarrierefreiesBauen – Planungsgrundlagen (Barrier-free construction - Planning Fundamentals)  
OIB-Richtlinie 4: Nutzungssicherheit und Barrierefreiheit (use and accessibility)

OIB-Richtlinie 2: Brandschutz (fire protection)

Regional Building Codes, Structural Engineering Acts/Regulations, Civil Engineering Regulations

TRVB 132 Krankenanstalten, Pflege- und Altenheime – Teil 1 – BaulicheMaßnahmen

[http://www.no.e.gv.at/Gesundheit/Pflege/Landespflegeheime/Regelwerk\\_Normpflegeheim.pdf](http://www.no.e.gv.at/Gesundheit/Pflege/Landespflegeheime/Regelwerk_Normpflegeheim.pdf)

<sup>57</sup> [http://www.jusline.at/Heimaufenthaltsgesetz\\_\(HeimAufG\).html](http://www.jusline.at/Heimaufenthaltsgesetz_(HeimAufG).html)

Regional Care Acts: (LGBl 52/2000); (LGBl 108/1994); (LGBl 7/1996); (LGBl 29/1996 idF 123/1996); (LGBl 61/1996)

TRVB 133 Krankenhäuser und Pflegeheime – Teil 2 – BetrieblicheMaßnahmen

Regional Care/Nursing Home Acts and Regulations

e.g. <http://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=LrSbg&Gesetzesnummer=10000546>

<sup>58</sup><http://www.bmask.gv.at/siteEN/SocialAffairs/SeniorCitizens/Qualityoflifeanddignity/NationalQualityCertificateforResidentialandNursingHomesinAustria>



Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
Belgium	With & without nursing	"Rust-en Verzorgingstehuizen/Maisons de repos et de soins"(Nursing homes)	Not known	Yes <sup>59</sup>		Desktop research
		"Maison de repos pour personnesagees/RustoordenvoorBejaarden" (Residential homes)	Not known	Yes <sup>60</sup>		
Bulgaria	With & without nursing	'Homes for elderly people' (HEP); 'Homes for disabled elderly people'; 'shelters' <sup>61</sup>	None None	None None	Yes	Desktop research; survey – standards body
Croatia	With & without nursing	'Home for the elderly'; 'Nursing home'	Yes <sup>62</sup> Yes	Yes <sup>63</sup> Yes	Yes <sup>64</sup> Yes	Survey – government dept.; individual
Cyprus	Yes Not known	'Residential homes'	Not known	Yes <sup>65</sup>		Desktop research

### Belgium

<sup>59</sup> Nursing homes must have training programmes for their staff as well as a programme to ensure quality. Regional regulations ensuring quality also apply.

<sup>60</sup> Regional regulations ensuring quality also apply.

### Bulgaria

<sup>61</sup> Mincheva & Kanazireva, 2010.

### Croatia

<sup>62</sup> Official Gazette 64/09

<sup>63</sup> Official Gazette 52/10

<sup>64</sup> Foster Care Act

### Cyprus

<sup>65</sup> Regulation: P.I. 213/2000 – The Homes for the Elderly and Disabled Regulation; the Social Welfare Services register and supervise privately owned and community residential homes.

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Czech Republic</b>	Yes Not known	"Domov pro seniory" (home for seniors) "Domov se zvláštním režimem" (home for those with particular care needs e.g. dementia) <sup>66</sup>	Not known	Yes <sup>67</sup>		Desktop research
<b>Denmark</b>	With nursing	'Nursing dwellings' <sup>68</sup>	Not known	Not known		Desktop research
<b>Estonia</b>	With & without nursing		Do not apply	Do not apply		Survey – government dept.
<b>Finland</b>	With nursing only	"Vanhainkoti" (rest home); "Hoivakoti Tehostettupalveluasuminen" (enhanced sheltered nursing home); "Palvelukoti" (Intensified service accommodation)	Yes <sup>69</sup>	Yes <sup>70</sup>		Survey – government dept.; org of/for older people

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### **Czech Republic**

<sup>66</sup> Horecký, 2010.

<sup>67</sup> Some homes adhere to the relevant ISO standards, and some others adhere to EFQM standards (European Foundation for Quality Management).

### **Denmark**

<sup>68</sup> Campbell & Wagner, 2010.

### **Finland**

<sup>69</sup> [Standards for Healthcare Buildings; Lift standards.](#)

<sup>70</sup> The recommendation for a good quality of aging, protect and improve the services of Social Affairs and Health 2013:11; 'Enhanced sheltered housing rulebook':

[http://www.sitra.fi/julkaisut/muut/Tehostetun\\_palveluasumisen\\_saantokirja.pdf](http://www.sitra.fi/julkaisut/muut/Tehostetun_palveluasumisen_saantokirja.pdf);

[http://www.stm.fi/en/social\\_and\\_health\\_services/old\\_people/quality\\_and\\_development/recommendations](http://www.stm.fi/en/social_and_health_services/old_people/quality_and_development/recommendations)

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
France	With nursing	"Etablissement d'Hébergement pour personnes âgées dépendantes" (EHPAD – nursing homes); "Maison de retraite, Foyers logements" (retirement homes) <sup>71</sup>	Not known	Not known		Desktop research
Germany	With & without nursing	"Pflegeheime/Altenheim" (Nursing home); "Altenwohnheime/Seniorenresidenz, Seniorenstift" (Retirement home) <sup>72</sup>	Yes <sup>73</sup>	Yes <sup>74</sup>		Survey – orgs of/for older people; orgs of/for consumers; individual
Greece	Yes Not known <sup>75</sup>		Not known	Yes <sup>76</sup>		Desktop research

### France

<sup>71</sup> Froggatt & Reitinger, 2013.

### Germany

<sup>72</sup> Froggatt & Reitinger, 2013.

<sup>73</sup> DIN 18040; National: Homes Act; Housing and Care Contract Law (WBGV). Regional Land Homes Acts (Baden-Württemberg (LHeimG); Lower Saxony Homes Act (NHeimG); Saarland Land Homes Act (LHeimGS).

<sup>74</sup> Social Welfare Law: SGB XI; SGB XII; Various quality certificates e.g. <http://www.heimverzeichnis.de/index.php?id=177>; DIN EN ISO 9000 ff. Regional Nursing and Residential Care Laws (Bayern (PfleWoqG); Berlin (WTG); Brandenburg (BbgPBWoG); Bremen (BremWoBeG); Hamburg (HmbWBG); Hessen (HGBP) Official Gazette, 2012, 34, outline no. 34-69; Mecklenburg-Vorpommern (EQG); Nordrhein-Westfalen (WTG); Rheinland-Pfalz (LWTG); Sachsen (Sächs. Official Gazette GVBl p.397); Schleswig-Holstein (SbStG).

### Greece

<sup>75</sup> Residents with acute illnesses are usually moved into hospitals where the medical care is thought to be more suitable.

<sup>76</sup> Local governments issue licenses to service providers and set standards. Services are regulated by the Ministry of Health and Social Solidarity, but evaluations aren't made public, and the quality criteria that are set are not obligatory.

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Hungary</b>	Yes Not known	"Időskorúakotthona, gondozóháza" (Home and respite care for the elderly) <sup>77</sup>	Not known	Yes <sup>78</sup>		Desktop research
<b>Iceland</b>	With nursing	'Nursing home' <sup>79</sup>	Not known	Not known		Desktop research
<b>Ireland</b>	With nursing		Yes <sup>80</sup>	Yes <sup>81</sup>		Survey – org of/for older people
<b>Italy</b>	With nursing	"Residenzesanitarieassistenziali" (nursing home); "Residenzeprotette" (nursing home for partially dependent people); "Residenze/Comunità per anziani" (care homes for mildly dependent older people) <sup>82</sup>	Not known	Yes <sup>83</sup>		Desktop research
<b>Kosovo</b>	Yes Not known	Not known <sup>84</sup>	Not known	Not known		Desktop research

### **Hungary**

<sup>77</sup> Czibere & Gál, 2010.

<sup>78</sup>The Health Insurance Supervisory Authority (HISA) monitored quality of care provision between 2007 and 2011; this task was partly delegated to the NHIFA, partly to the National Public Health and Medical Officer's Service.

### **Iceland**

<sup>79</sup> Hjaltadottir, 2012.

### **Ireland**

<sup>80</sup> <http://www.environ.ie/en/DevelopmentHousing/BuildingStandards/>

<sup>81</sup> The National Quality Standards for Residential Care Settings for Older People in Ireland [www.hiqa.ie](http://www.hiqa.ie)

<sup>82</sup> Froggatt & Reitingger, 2013.

### **Italy**

<sup>83</sup> General minimum standards set at national level, whilst accreditation systems exist at regional level. Ministry of Health and Social Policy regulates standards.

### **Kosovo**

<sup>84</sup> Only 2 care homes exist, one in Prishtine and the other in Skenderaj.

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Latvia</b>	Yes Not known	"Ilgstošassociālāsaprūpes un sociālāsrehabilitācijasinstitūcija"(Long-term social care and social rehabilitation institution) <sup>85</sup>	None	Yes <sup>86</sup>		Survey – individual; desktop research
<b>Liechtenstein</b>	Yes Not known <sup>87</sup>		Not known	Not known		Desktop research
<b>Lithuania</b>	Not known					Desktop research
<b>Luxembourg</b>	Yes Not known	'Nursing homes', 'Integrated centres'	Not known	Not known		Desktop research
<b>Macedonia</b>	Yes Not known <sup>88</sup>		Not known	Not known		Desktop research
<b>Malta</b>	Yes Not known					Desktop research
<b>Montenegro</b>	Yes Not known <sup>89</sup>		Not known	Not known		Desktop research

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### Latvia

<sup>85</sup> <http://likumi.lv/doc.php?id=68488>

<sup>86</sup> <http://likumi.lv/doc.php?id=75887>

### Liechtenstein

<sup>87</sup> There are 5 care institutions in Liechtenstein.

### Macedonia

<sup>88</sup> 4 public care homes exist as well as a few privately run, but coverage is uneven across the country

### Montenegro

<sup>89</sup> Only 2 private nursing homes exist.

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Netherlands</b>	With nursing	"Verpleeghuizen" (Nursing home); "Verzorgingshuizen" (Residential home) <sup>90</sup>	Not known	Yes <sup>91</sup>		Desktop research
<b>Norway</b>	With nursing	"Sykehjem" (Nursing home); "Aldershjem" (Retirement home) <sup>92</sup>	Not known	Yes <sup>93</sup>		Desktop research
<b>Poland</b>	With & without nursing	Care and treatment facilities, nursing and care facilities, and for people who do not need nursing care. <sup>94</sup>	Not known	Not known		Desktop research
<b>Portugal</b>	With & without nursing	"Lares" (Nursing home); "Residencias assistidas" (residences for elderly people); "Unidades do cuidados continuados" (continuing care units) <sup>95</sup>	Not known	Not known		Desktop research

### **Netherlands**

<sup>90</sup> Froggatt & Reitinger, 2013.

<sup>91</sup> Law on quality of care (*Kwaliteitswet Zorginstellingen*- KWZ); Law on professions in personal healthcare (*Wet op de Beroepen in de Individuele Gezondheidszorg*; Wet BIG. The Health Care Inspectorate (IGZ) acts as supervisor.

### **Norway**

<sup>92</sup> Nakrem, 2011.

<sup>93</sup> Care Plan 2015 includes minimum standards for medical care in nursing homes; Helse- og omsorgsdepartementet, 1991. Lovav 13. desember 1991 nr 81 omsosialetjenesterm.v.; Helse- og omsorgsdepartementet, 1982. Lovav 19. November 1982 nr. 66 omhelsetjenestekommunene; Helse- og omsorgsdepartementet, 1983.

Forskrift om lovbestemt sykepleietjeneste i kommunens helsetjeneste. Norwegian Knowledge Centre for the Health Services has produced a national healthcare quality indicator system.

### **Poland**

<sup>94</sup> Alzheimer Europe.

### **Portugal**

<sup>95</sup> Services are linked to Ministry of Health (Froggatt and Reitinger 2013:19). There is a shortage of places in residential care and long waiting lists.

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Romania</b>	Yes Not known	'Old age home' <sup>96</sup>	Not known	Yes <sup>97</sup>		Desktop research
<b>Serbia</b>	With & without nursing	'Residential care home'	Yes <sup>98</sup>	Yes <sup>99</sup>		Survey - standards body; desktop research
<b>Slovakia</b>	With Without nursing	Not known "Zariadenie pre seniorov" (facilities for seniors); "Zariadenia opatrovateľskej služby" (institution for care services)	Yes <sup>100</sup>	Yes <sup>101</sup>		Survey - government dept; individual
<b>Slovenia</b>	With & without nursing	'Home for the elderly'	Yes <sup>102</sup>	Yes <sup>103</sup>		Survey - org of/for older people; desktop research

### **Romania**

<sup>96</sup> Popa, 2010.

<sup>97</sup> Minimum standards for services are from decree 246/2006 ('The LTC System for the Elderly in Romania, ENEPRI).

### **Serbia**

<sup>98</sup> Law on Planning and Construction.

<sup>99</sup> Law on Social Protection; Rulebook on the conditions and standards for the provision of social protection; Rulebook on licensing organization; Rulebook on the licensing of professionals.

### **Slovakia**

<sup>100</sup> Decree no. 259/2008 - requirements for indoor climate environment and minimum requirements for lower standard accommodation facilities; Decree no. 532/2002 - technical requirements for buildings used by persons with reduced mobility; Act no. 50/1976 Planning and Building Regulations (Building Act); Law no. 455/1991 Trade Licensing (Trade Licensing Act).

<sup>101</sup> Act 448/2008 Social Services, especially Annex no.2: A. Quality conditions of social service provided.

### **Slovenia**

<sup>102</sup> Minimum [technical requirements](#) for service providers

<sup>103</sup> Norms and [standards](#) of social services. There is also a 'working paper' on standards in social and health care services, but it hasn't been published yet.

Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Spain</b>	With nursing	"Residencias para personas mayores/residencias de validos" (residential homes) <sup>104</sup>	Yes <sup>105</sup>	Yes <sup>106</sup>		Survey - org of/for older people; desktop research
<b>Sweden</b>	With & without nursing	"Sjukhem" (nursing homes); "Gruppbiende for personer med demens" (group homes); "Alder-domshem" (residential care); "Seniorboende" (senior housing) <sup>107</sup>	Yes <sup>108</sup>	Yes <sup>109</sup>		Survey – org of/for older people; standards body; desktop research
<b>Switzerland</b>	With & without nursing	"Pflegeheim; Etablissement Medico-social, casa di cura medicalizzata" (nursing care homes); "Altersheim; Maisons pour personnes ages, casa di cura non medicalizzata" (Older people's homes). <sup>110</sup>	Yes	Yes <sup>111</sup>		Desktop research

<sup>104</sup> Froggatt & Reitinger, 2013.

### **Spain**

<sup>105</sup> [Regulatory services for older people](#); [Rules of Cantabria](#) (regional)

<sup>106</sup> [Legislation](#) for elderly residential centres'; Madrid [legislation](#) on nursing homes; [Resolution](#) of 16 May 2007.

### **Sweden**

<sup>107</sup> Froggatt and Reitinger, 2013; Malmqvist, 'Housing for Elderly in Sweden'.

<sup>108</sup> See Building and Planning and the National Board of Welfare.

<sup>109</sup> See National Board of Health.

<sup>110</sup> Froggatt & Reitinger, 2013.

### **Switzerland**

<sup>111</sup> A national law sets out minimum standards (Froggatt and Reitinger, 2013).



Country	Models available	Definition(s)	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Turkey</b>	Yes Not known	"Huzurevleri" (residential care homes) <sup>112</sup>	Yes	Yes <sup>113</sup>		Survey - org of/for older people; desktop research
<b>Ukraine</b>	With & without nursing		Yes <sup>114</sup>	Yes <sup>115</sup>	Yes <sup>116</sup>	Survey - org of/for older people
<b>United Kingdom</b>	With & without nursing	'Nursing homes'; 'Care homes' – provide only personal care	Yes	Yes <sup>117</sup>	Yes	Survey – standards body; academics; desktop research

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### Turkey

<sup>112</sup> Main provider is 'SHREK' – General Directorate for Social Services and Child Protection Agency.

<sup>113</sup> Regulations for Public rest and nursing homes (1987), Regulations for Private rest and nursing homes (1997) - 'The Situation of Elderly People in Turkey' (2007).

### Ukraine

<sup>114</sup> National standards are currently under discussion. Regulations apply but details of these were not provided.

<sup>115</sup> There are 15 basic types of social services and national standards for these are being developed. Seven of them are ready and have already been tested: [www.mlsp.gov.ua](http://www.mlsp.gov.ua)

<sup>116</sup> Regulations about food, medical services, treatment, medications, etc.

### United Kingdom

<sup>117</sup> Standards for care homes are regulated by the Care Quality Commission (in England and Wales) and by the Care Inspectorate in Scotland (Froggatt and Reiting, 2013: 21, 32).

## Care in a hospital setting

Country	Available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Austria</b>	Available	"Geriatriezentrums" (Geriatric Centres) <sup>118</sup>	Yes <sup>119</sup>	Yes	Yes	Survey – UN-affiliated body
<b>Belgium</b>	Available <sup>120</sup>		Not known	Not known		Desktop research
<b>Bulgaria</b>	Available		Not known <sup>121</sup>	Not known		Survey – standards body
<b>Croatia</b>	Available		None	Yes <sup>122</sup>		Survey – government dept.
<b>Cyprus</b>	Not known					Desktop research
<b>Czech Republic</b>	Available	In wards for patients with chronic conditions <sup>123</sup>	Not known	Not known		Desktop research
<b>Denmark</b>	Available		Not known	Yes <sup>124</sup>		Desktop research
<b>Estonia</b>	Not known					Survey – government dept.; desktop research

### Austria

<sup>118</sup> Froggatt & Reiting, 2013.

<sup>119</sup> Same standards and regulations (building design, services etc) that apply for hospitals.

### Belgium

<sup>120</sup> Is available but is reducing (Willemé 2010).

### Bulgaria

<sup>121</sup> There are no standards but the respondent to the survey was unsure if there are regulations.

### Croatia

<sup>122</sup> Social Welfare Act: Official Gazette 33/12.

### Czech Republic

<sup>123</sup> Horecký, 2010.

### Denmark

<sup>124</sup> Danish Healthcare Quality Programme (Campbell & Wagner 2009).

Country	Available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Finland</b>	Available	Short term stay only	Yes <sup>125</sup>	Yes		Survey – government body; org of/for older people
<b>France</b>	Available	“Unité de soins de longue durée” <sup>126</sup>	Not known	Not known		Desktop research
<b>Germany</b>	Available	Geriatric centres/Geronto-psychiatric facilities <sup>127</sup>	Not known	Not known		Desktop research
<b>Greece</b>	Available	Short-term stay only <sup>128</sup>	Not known	Not known		Desktop research
<b>Hungary</b>	Not known					Desktop research
<b>Iceland</b>	Not known					Desktop research
<b>Ireland</b>	Available		None	Yes <sup>129</sup>		Survey – org of/for older people
<b>Italy</b>	Not known					Desktop research
<b>Kosovo</b>	Not known					Desktop research
<b>Latvia</b>	Not known					Survey – individual; desktop research
<b>Liechtenstein</b>	Not known					Desktop research
<b>Lithuania</b>	Not known					Desktop research
<b>Luxembourg</b>	Not known					Desktop research

### **Finland**

<sup>125</sup> Same standards and regulations (building design, services etc) that apply for hospitals.

### **France**

<sup>126</sup> Froggatt & Reitinge , 2013.

### **Germany**

<sup>127</sup> Like nursing homes but some will have their own medical staff (Froggatt & Reitinge, 2013).

### **Greece**

<sup>128</sup> Mastrogiannakis & Kagialaris, 2010.

### **Ireland**

<sup>129</sup> Same standards and regulations that apply for residential care homes: [www.hiqa.ie](http://www.hiqa.ie)

Country	Available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Macedonia</b>	Available	In specialised hospitals as well as general hospitals <sup>130</sup>	Not known	Not known		Desktop research
<b>Malta</b>	Available	Geriatric centres in two hospitals <sup>131</sup>	Not known	Not known		Desktop research
<b>Montenegro</b>	Available	1 specialised unit exists for chronic patients, otherwise in general hospitals <sup>132</sup>	Not known	Not known		Desktop research
<b>Netherlands</b>	Not known					Desktop research
<b>Norway</b>	Available	Geriatric centres, short-term stay only <sup>133</sup>	Not known	Yes <sup>134</sup>		Desktop research
<b>Poland</b>	Not known					Desktop research
<b>Portugal</b>	Not known					Desktop research
<b>Romania</b>	Not known					Desktop research
<b>Serbia</b>	Not available					Survey – standards body
<b>Slovakia</b>	Available	In both general and specialised hospitals, short-term stay only	Not known	Yes <sup>135</sup>		Survey – government dept.; standards body; individual; desktop research

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### **Macedonia**

<sup>130</sup> Apostolska & Tozija, 2010.

### **Malta**

<sup>131</sup> Alzheimer Europe

### **Montenegro**

<sup>132</sup> McCarthy & Brajovic, 2009.

### **Norway**

<sup>133</sup> Froggatt & Reiting, 2013.

<sup>134</sup> General healthcare regulations

### **Slovakia**

<sup>135</sup> Licences given by Ministry of Health. Regulations for healthcare workers: Act No. 578/2004 (Radvanský & Páleník, 2010).

Country	Available	Definition	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Slovenia</b>	Available	Short-term stay only	Yes <sup>136</sup>	Yes		Survey – org of/for older people
<b>Spain</b>	Not known					Survey – orgs of/for older people; desktop research
<b>Sweden</b>	Available		Yes <sup>137</sup>	Yes	Yes <sup>138</sup>	Survey – org of/for older people
<b>Switzerland</b>	Available	“Allgemein” (wards); “halb-privat” (semi-private); “privat” (private) <sup>139</sup>	Not known	Not known		Desktop research
<b>Turkey</b>	Available		Not known	Yes <sup>140</sup>		Survey – org of/for older people; desktop research
<b>Ukraine</b>	Not available					Survey – org of/for older people
<b>United Kingdom</b>	Not known <sup>141</sup>		Not known	Yes <sup>142</sup>		Survey – academics; standards body; desktop research

### **Slovenia**

<sup>136</sup> Same standards and regulations as those that apply for hospitals.

### **Sweden**

<sup>137</sup> Same standards and regulations (building design, service provision, etc.) that apply for hospitals. The National Board of Health and Welfare oversee healthcare standards: <http://www.socialstyrelsen.se/english/aboutus>

<sup>138</sup> Regional standards covering other aspects. Details unknown.

### **Switzerland**

<sup>139</sup> Stuckelberger, 2005.

### **Turkey**

<sup>140</sup> The Turkish Accredited Hospitals Association regulates hospital standards (Health Tourism Turkey website)

### **United Kingdom**

<sup>141</sup> Survey responses differed as to the availability of hospital care for older people.

<sup>142</sup> The Care Quality Commission, monitoring hospitals in general: [www.cqc.org.uk](http://www.cqc.org.uk)

## Hospice Care

Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Austria</b>	Available	7 hospices exist <sup>143</sup>	Not known	Yes <sup>144</sup>		Survey – UN-affiliated body; desktop research
<b>Belgium</b>	Available	No stand-alone hospices exist <sup>145</sup>	Not known	Yes <sup>146</sup>		Desktop research
<b>Bulgaria</b>	Available	As separate institutions, as wards within hospitals, and as home care.	Not known	Yes <sup>147</sup>		Survey - standards body; desktop research
<b>Croatia</b>	Available	Under jurisdiction of Ministry of Health.	Not known	None		Survey – individual; government dept.; desktop research
<b>Cyprus</b>	Available	1 hospice in Nicosia. No national policy and not included in current national health system. <sup>148</sup>	Not known	In progress <sup>149</sup>		Desktop research

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### Austria

<sup>143</sup> EAPC Atlas of Palliative Care in Europe.

<sup>144</sup> [Guidelines and standards. Voluntary standards.](#) In addition, all regulations for care homes apply.

### Belgium

<sup>145</sup> EAPC Atlas of Palliative Care in Europe.

<sup>146</sup> Evaluation Commission for Palliative Care. In addition, service providers must provide annual evaluation reports of the services they provide. In order to receive funding, service providers must pass these evaluation procedures.

<sup>147</sup> Law on Healthcare Institutions, Article 28 and National Standards of Cancer Treatment and Care, EAPC Atlas of Palliative Care in Europe 2013.

### Cyprus

<sup>148</sup> EAPC Atlas of Palliative Care in Europe.

<sup>149</sup> National Cancer Control Strategy is being developed (EAPC Atlas of Palliative Care in Europe, 2013).

Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Czech Republic</b>	Available	Mainly for those with oncological conditions. <sup>150</sup>	Not know	None <sup>151</sup>		Desktop research
<b>Denmark</b>	Available	Hospitals have set up palliative wards; Outreach teams – for homecare; 6 private hospices <sup>152</sup>	Not known	Yes <sup>153</sup>		Survey - org of/for older people; WHO employee; desktop research
<b>Estonia</b>	Available	No data for adult palliative care is available <sup>154</sup>	Not known	None		Survey - government dept.; desktop research
<b>Finland</b>	Available	4 hospices exist – society-based No official organisation <sup>155</sup>	Yes <sup>156</sup>	Yes <sup>157</sup>		Survey - government dept.; org of/for older people; desktop research

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### **Czech Republic**

<sup>150</sup> Alzheimer Europe.

<sup>151</sup> A national strategy of palliative care is being debated (EAPC Atlas of Palliative Care in Europe, 2013).

### **Denmark**

<sup>152</sup> EAPC Atlas of Palliative Care in Europe.

<sup>153</sup> The Danish Quality Model – [www.ikas.dk](http://www.ikas.dk); National Recommendations for Palliative Care in Denmark, from the National Board of Health [2011](#)

### **Estonia**

<sup>154</sup> EAPC Atlas of Palliative Care in Europe.

### **Finland**

<sup>155</sup> EAPC Atlas of Palliative Care in Europe.

<sup>156</sup> [Building regulations: https://www.rakennustieto.fi/index/english.html](https://www.rakennustieto.fi/index/english.html)

<sup>157</sup> Guidelines for palliative care (2003) published by the Ministry of Health; *Hyvä saattohoito Suomessa* (Terminal care recommendations based on expert consultation), Ministry of Social Affairs and Health: [www.stm.fi/](http://www.stm.fi/)

Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>France</b>	Available	Available in hospitals, as home support teams or as day centres. No difference between an inpatient palliative care unit and a hospice. There are 78 'units'. <sup>158</sup>	Not known	Yes <sup>159</sup>		Desktop research
<b>Germany</b>	Available		Not known	Yes <sup>160</sup>		Survey - org of/for older people; standards body; individual
<b>Greece</b>	Available	Home-based services; Within hospitals; Specialist pain centres <sup>161</sup>	Yes	Yes <sup>162</sup>		Desktop research
<b>Hungary</b>	Available		Not known	Yes <sup>163</sup>		Desktop research

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### France

<sup>158</sup> EAPC Atlas of Palliative Care in Europe.

<sup>159</sup> National standards: [www.sfap.org](http://www.sfap.org). The French National Authority on Health (HAS) assesses security and quality of care (including palliative care).

### Germany

<sup>160</sup> Laws, regulations, guidelines: [http://www.dhpv.de/service\\_gesetze-verordnungen.html](http://www.dhpv.de/service_gesetze-verordnungen.html); health insurance companies set national minimum requirements for contracts with service providers; In some counties the regulations for residential care also applies to hospice services.

### Greece

<sup>161</sup> EAPC Atlas of Palliative Care in Europe.

<sup>162</sup> In 2007 a Ministerial Decree was passed referring to the prerequisites for building and organising hospices in Greece – EAPC report.

### Hungary

<sup>163</sup> National minimum standards (2004) [www.hospice.hu/en/standards/96](http://www.hospice.hu/en/standards/96)



Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Iceland</b>	Available	Home support teams; Day centre; Within some hospitals	Not known	Yes <sup>164</sup>		Desktop research
<b>Ireland</b>	Available		Not known	Yes <sup>165</sup>		Survey - org of/for older people
<b>Italy</b>	Available	Within hospitals or self-standing institutions	Not known	Yes <sup>166</sup>		Desktop research
<b>Kosovo</b>	Not known		Not known	Not known		Desktop research
<b>Latvia</b>	In progress		Not known	Yes <sup>167</sup>		Survey – individual; desktop research
<b>Liechtenstein</b>	Not known		Not known	Not known		Desktop research
<b>Lithuania</b>	Available		Not known	Yes <sup>168</sup>		Desktop research
<b>Luxembourg</b>	Available		Not known	Yes <sup>169</sup>		Desktop research

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### **Iceland**

<sup>164</sup> Clinical [guidelines](#) on palliative care (2009)

### **Ireland**

<sup>165</sup> National Quality Standards for Residential Care Settings for Older People (2009) and Quality Standards for End of Life Care in Hospitals (2010). In addition, service providers must provide performance metrics to the Health Service Executive for evaluation. The data is then published annually.

### **Italy**

<sup>166</sup> Law 38/2010 – includes guidelines on organisational standards for hospice care; Ministerial Decree 43, 22 (Feb 2007): “Defining standards for assistance to terminally ill patients receiving palliative care”.

### **Latvia**

<sup>167</sup> National Programme for Palliative Care (2009), development of guidelines is in progress (WHO, 2011).

### **Lithuania**

<sup>168</sup> Order in the Inventory for Requirements of Palliative Care Services for Adults and Children (2009).

### **Luxembourg**

<sup>169</sup> [Law](#) on palliative care

Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Macedonia</b>	Available	Specialised institutions exist	Not known	Yes <sup>170</sup>		Desktop research
<b>Malta</b>	Available	'Malta Hospice Movement' – home care or residential care in hospitals <sup>171</sup>	Not known	None		Desktop research
<b>Montenegro</b>	Not available	Palliative care is only available in one nursing home				Desktop research
<b>Netherlands</b>	Available		Not known	Yes <sup>172</sup>		Desktop research
<b>Norway</b>	Available	Some independent units exist	Not known	Yes <sup>173</sup>		Desktop research
<b>Poland</b>	Available	'Palliative care homes'	Not known	Yes <sup>174</sup>		Desktop research
<b>Portugal</b>	Available		Not known	Yes <sup>175</sup>		Desktop research
<b>Romania</b>	Available	'Hospices of Hope' organisation	Not known	Yes <sup>176</sup>		Desktop research

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### **Macedonia**

<sup>170</sup> Hospices are governed by the Gerontology Institute (WHO, 2011); National Strategy for Palliative Care was integrated into the national healthcare system in 2007; Printed National Standards for Palliative Care are published annually – EAPC report.

### **Malta**

<sup>171</sup> Alzheimer Europe.

### **Netherlands**

<sup>172</sup> Standards available from: [www.palliative.nl](http://www.palliative.nl)

### **Norway**

<sup>173</sup> Published by Health Directorate in 2009. There are also National Palliative Care Standards (2010): [www.helsebiblioteket.no/Retningslinjer/Palliasjon](http://www.helsebiblioteket.no/Retningslinjer/Palliasjon)

### **Poland**

<sup>174</sup> Ministry of Health (2009, updated 2011) provides minimum standards of care.

### **Portugal**

<sup>175</sup> Standards – Organisation of Services of Palliative Care (2006): <http://www.apcp.com.pt/documentao/diretivasrecomendaesapcp.html>

### **Romania**

<sup>176</sup> Set out in: National Strategy for Palliative in Romania: [www.studiipaliative.ro](http://www.studiipaliative.ro)

Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Serbia</b>	Not available					Survey - standards body; Desktop research
<b>Slovakia</b>	Available	Under jurisdiction of Ministry of Health. Residential and mobile	None	None		Survey - standards body; government dept.; individual; desktop research
<b>Slovenia</b>	Available	3 hospices <sup>177</sup>	None	None		Survey - org of/for older people; individual; care providers; desktop research
<b>Spain</b>	Available	Hospital or home support; Palliative care units; CUDECA Foundation, Malaga <sup>178</sup>	Not known	Yes <sup>179</sup>		Survey - org of/for older people; desktop research
<b>Sweden</b>	Available		Yes	Yes <sup>180</sup>		Survey - org of/for older people; standards body; desktop research

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### **Slovenia**

<sup>177</sup> Desktop research (Rupel and Ogorevc, 2010) contradicts survey response.

### **Spain**

<sup>178</sup> Source: [www.ehospice.com](http://www.ehospice.com)

<sup>179</sup> National Plan on Palliative Care, Ministry of Health (2007). Law on Cohesion and Quality in the NHS is also applied to palliative care in hospices. "Palliative Care Units. Standards and Recommendations" (Unidades de Cuidados Paliativos. Estándares y Recomendaciones, 2010). See [legislation](#)

### **Sweden**

<sup>180</sup> Nationellt vårdprogram för palliativ vård (National guidelines for palliative care) January 2012.

Country	Available	Information	Standards / Regulations			Source
			Buildings	Services	Other	
<b>Switzerland</b>	Available	Specialist hospital in Geneva 'Mobile palliative care teams' (home care) <sup>181</sup>	Not known	Yes <sup>182</sup>		Desktop research
<b>Turkey</b>	Not available <sup>183</sup>					Survey - org of/for older people; desktop research
<b>Ukraine</b>	Available	Within existing hospitals	None	None <sup>184</sup>		Survey - org of/for older people; desktop research
<b>United Kingdom</b>	Available	Stand-alone units	None	Yes <sup>185</sup>		Survey - standards body; academics; desktop research

<sup>181</sup> Stuckelberger, 2005.

### **Switzerland**

<sup>182</sup> National Guidelines on Palliative Care (2010). The Swiss Association for Palliative Care provides a series of criteria for quality and offers health service accreditation through external audits:

<http://www.palliative.ch/index.php?id=127>

### **Turkey**

<sup>183</sup> Aksoy (1998).

### **Ukraine**

<sup>184</sup> Hospices are new to Ukraine, the development of national standards is underway, but regulations that come under the Ministry of Health still apply.

### **United Kingdom**

<sup>185</sup> [National Care Standards; Regional standards: \(England\)](#), [\(Scotland\)](#), [\(Wales\)](#).

## Daycare

Country	Available	Definition	Standards / Regulations		Source
			Buildings	Services	
<b>Austria</b>	Available		Yes <sup>186</sup>	Yes	Survey – UN-affiliated body
<b>Belgium</b>	Available		Not known	Yes <sup>187</sup>	Desktop research
<b>Bulgaria</b>	Available		Not known	Yes	Survey – standards body
<b>Croatia</b>	Available		Yes <sup>188</sup>	Yes	Survey – government Dept.
<b>Cyprus</b>	Available <sup>189</sup>		Not known	Not known	Desktop research
<b>Czech Republic</b>	Available <sup>190</sup>		Not known	Not known	Desktop research
<b>Denmark</b>	Available <sup>191</sup>		Not known	Not known	Desktop research
<b>Estonia</b>	Available		None	None	Survey – government dept.
<b>Finland</b>	Available		Yes <sup>192</sup>	Not known	Survey – org of/for consumers

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### Austria

<sup>186</sup> Care Home regulations will apply as daycare centres are usually linked to them.

### Belgium

<sup>187</sup> Regional regulations governing quality apply (Willemé, 2010).

### Croatia

<sup>188</sup> Social Welfare Act (Official Gazette 64/09).

<sup>189</sup> Social Welfare Services, government of Cyprus [website](#)

### Czech Republic

<sup>190</sup> Only a few exist, and usually only open for a few hours a day.

### Denmark

<sup>191</sup> 'Denmark: Long-term Care' (OECD, 2011).

### Finland

<sup>192</sup> [Lift standards](#): Buildings are mostly regulated at the national level by the Building Information Foundation [RTS](#)

Country	Available	Definition	Standards / Regulations		Source
			Buildings	Services	
<b>France</b>	Not known				Desktop research
<b>Germany</b>	Available		Yes <sup>193</sup>	Yes <sup>194</sup>	Survey – orgs of/for older people
<b>Greece</b>	Available	Friendship Clubs (LEFI); Centres of Daily Care for Older People (KIFI); Open-Care Protection Centres for Older People (KAPI) <sup>195</sup>	Not known	Not known	Desktop research
<b>Hungary</b>	Available	<i>Idősek klubja</i> (daycare for the elderly) <sup>196</sup>	Not known	Not known	Desktop research
<b>Iceland</b>	Available <sup>197</sup>		Not known	Not known	Desktop research
<b>Ireland</b>	Available		Not known		Desktop research
<b>Italy</b>	Available <sup>198</sup>		Not known	Not known	Desktop research

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### Germany

<sup>193</sup> DIN 18040

<sup>194</sup> Same that apply for care homes: Social Welfare Law: SGB XI; SGB XII; Various quality certificates e.g.

<http://www.heimverzeichnis.de/index.php?id=177>; DIN EN ISO 9000 ff. Regional Nursing and Residential Care Laws (Bayern (PfleWoqG); Berlin (WTG); Brandenburg (BbgPBWoG); Bremen (BremWoBeG); Hamburg (HmbWBG); Hessen (HGBP) Official Gazette, 2012, 34, outline no. 34-69; Mecklenburg-Vorpommern (EQG); Nordrhein-Westfalen (WTG); Rheinland-Pfalz (LWTG); Sachsen (Sächs. Official Gazette GVBl p.397); Schleswig-Holstein (SbStG).

### Greece

<sup>195</sup> Mastrogiannakis & Kagialaris, 2010.

### Hungary

<sup>196</sup> Czibere & Gál, 2010.

### Iceland

<sup>197</sup> For those with Alzheimer's disease (Alzheimer Europe). No information found on daycare centres for all older people.

### Italy

<sup>198</sup> For those with Alzheimer's disease (Alzheimer Europe). No information found on daycare centres for all older people.

Country	Available	Definition	Standards / Regulations		Source
			Buildings	Services	
<b>Kosovo</b>	Not known				Desktop research
<b>Latvia</b>	Available		Yes <sup>199</sup>	Yes <sup>200</sup>	Survey - individual
<b>Liechtenstein</b>	Not known				Desktop research
<b>Lithuania</b>	Available <sup>201</sup>		Not known	Not known	Desktop research
<b>Luxembourg</b>	Not known				Desktop research
<b>Macedonia</b>	Available <sup>202</sup>		Not known	Not known	Desktop research
<b>Malta</b>	Available		Not known	Not known	Desktop research
<b>Montenegro</b>	Not known				Desktop research
<b>Netherlands</b>	Not known				Desktop research
<b>Norway</b>	Not known				Desktop research
<b>Poland</b>	Available		Not known	Not known	Desktop research
<b>Portugal</b>	Available <sup>203</sup>		Not known	Not known	Desktop research
<b>Romania</b>	Available	'Clubs for the elderly' <sup>204</sup>	Not known	Yes <sup>205</sup>	Desktop research

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### Latvia

<sup>199</sup> <http://likumi.lv/doc.php?id=68488>

<sup>200</sup> <http://likumi.lv/doc.php?id=75887>

### Lithuania

<sup>201</sup> Currently being piloted.

### Macedonia

<sup>202</sup> Only one centre exists.

### Portugal

<sup>203</sup> Joël, Dufour-Kippelen & Samitca, 2010.

### Romania

<sup>204</sup> Popa, 2010.

<sup>205</sup> Law 17/2000.

Country	Available	Definition	Standards / Regulations		Source
			Buildings	Services	
<b>Serbia</b>	Available		Yes <sup>206</sup>	Yes <sup>207</sup>	Survey – standards body
<b>Slovakia</b>	Available		Yes	Yes <sup>208</sup>	Survey – government body; individual
<b>Slovenia</b>	Available		None	None	Survey – org of/for older people
<b>Spain</b>	Available		Yes	Yes <sup>209</sup>	Survey – orgs of/for older people
<b>Sweden</b>	Available		Yes	None	Survey – org of/for older people
<b>Switzerland</b>	Available <sup>210</sup>		Not known	Not known	Desktop research
<b>Turkey</b>	Available	Solidarity Centres <sup>211</sup>	Not known	Yes <sup>212</sup>	Desktop research

### Serbia

<sup>206</sup> Law on Planning and Construction

<sup>207</sup> Law on Social Protection; Law on Local Self-Government; Rulebook on the conditions and standards for the provision of social protection; Rulebook on licensing organization; Rulebook on licensing of professionals.

### Slovakia

<sup>208</sup> *Zákon č. 448/2008 Z.z. o sociálnych službách* (Act no. 448/2008 Social Services); *Vyhláška 532/2002 Z.z.* (Decree 532/2002).

### Spain

<sup>209</sup> <http://www.inforesidencias.com/reglamentacion.asp>;

<http://www.madrid.org/wleg/servlet/Servidor?opcion=VerHtml&idnorma=460&word=S&wordperfect=N&pdf=S>

### Switzerland

<sup>210</sup> Stuckelberger, 2005.

### Turkey

<sup>211</sup> The Situation of Elderly People in Turkey' 2007.

<sup>212</sup> Paragraph (j) of Article 9 of Law No. 2828.



Country	Available	Definition	Standards / Regulations		Source
			Buildings	Services	
<b>Ukraine</b>	Available		Not known	Yes <sup>213</sup>	Survey – org of/for older people
<b>United Kingdom</b>	Available		Yes	Yes <sup>214</sup>	Desktop research

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**Ukraine**

<sup>213</sup> See Ministry of Social Policy - [www.mlsp.gov.ua](http://www.mlsp.gov.ua)

**United Kingdom**

<sup>214</sup> Day Care Settings - Minimum Standards 2012 - [www.rqia.org.uk/cms\\_resources](http://www.rqia.org.uk/cms_resources)

## Care at home

Country	Providers	Definition	Standards / Regulations	Source
<b>Austria</b>	Mix of providers, mostly private non-profit		Yes <sup>215</sup>	Survey – UN-affiliated body
<b>Belgium</b>	Not known, but is available <sup>216</sup>		Yes <sup>217</sup>	Desktop research
<b>Bulgaria</b>	Not known, but is available		None	Survey – standards body
<b>Croatia</b>	Mix of providers		Yes	Survey – government dept.
<b>Cyprus</b>	Mix of providers, but paid by state <sup>218</sup>		Not known	Desktop research
<b>Czech Republic</b>	Public, not available everywhere <sup>219</sup>		Not known	Desktop research
<b>Denmark</b>	Mix of providers, but paid by state <sup>220</sup>		Yes <sup>221</sup>	Desktop research

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### Austria

<sup>215</sup> [Salzburger Pflegegesetz](#)

### Belgium

<sup>216</sup> Willemé 2010.

<sup>217</sup> Cooperation Initiatives in Home Care (Samenwerkingsinitiatieven Thuiszorg or SITs) and Cooperation Initiatives in Primary Care (Samenwerkingsinitiatieven Eerstelijnszorg or SELs) [in Flanders]; Coordination Centres for Home Care Services (Centres de Coordination de Soins à Domicile or CSSDs) [in Wallonia]. Therefore, regulated at the regional level.

### Cyprus

<sup>218</sup> Social Welfare Services, government of Cyprus [website](#)

### Czech Republic

<sup>219</sup> Alzheimer Europe

<sup>220</sup> Campbell & Wagner, 2009.

### Denmark

<sup>221</sup> Standards set by local councils but must meet the requirements set out in the Consolidation Act on Social Services.

Country	Providers	Definition	Standards / Regulations	Source
<b>Estonia</b>	Not known, but is available		Yes <sup>222</sup>	Survey – government dept.; desktop research
<b>Finland</b>	Mix of providers		Yes <sup>223</sup>	Survey - government dept.; org of/for older people; desktop research
<b>France</b>	Not known			Desktop research
<b>Germany</b>	Mix of providers		Yes <sup>224</sup>	Survey – orgs of/for older people
<b>Greece</b>	Not known, but is available <sup>225</sup>		Not known	Desktop research
<b>Hungary</b>	Public	“Házi segítségnyújtás” (home care); “szociális étkeztetés” (meal provision)	Yes <sup>226</sup>	Desktop research
<b>Iceland</b>	Not known <sup>227</sup>	‘Homemaker services’	Not known	Desktop research
<b>Ireland</b>	Mix of providers		None	Survey – org of/for older people

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### **Estonia**

<sup>222</sup> Some standards, but are not compulsory. For more details see [link](#)

### **Finland**

<sup>223</sup> Kotihoidon sääntökirja (Homecare regulations): [http://www.sitra.fi/julkaisut/muut/Kotihoidon\\_saantokirja.pdf](http://www.sitra.fi/julkaisut/muut/Kotihoidon_saantokirja.pdf)

### **Germany**

<sup>224</sup> Within the laws for care insurance are regulations for care services. Some regional laws for care services include care provided at home.

### **Greece**

<sup>225</sup> Mastrogiannakis & Kagialaris, 2010.

### **Hungary**

<sup>226</sup> There are national and regional regulations for home nursing care (Czibere & Gál, 2010).

### **Iceland**

<sup>227</sup> Organised by local service councils for the elderly (Alzheimer Europe).

Country	Providers	Definition	Standards / Regulations	Source
<b>Italy</b>	Not known, but is available <sup>228</sup>		Not known	Desktop research
<b>Kosovo</b>	Not known			Desktop research
<b>Latvia</b>	Not known, but is available <sup>229</sup>		Yes <sup>230</sup>	Survey - individual
<b>Liechtenstein</b>	Not known, but is available	"Familienhilfevereine" (family assistance associations) <sup>231</sup>	Not known	Desktop research
<b>Lithuania</b>	Not known, but has (limited) availability <sup>232</sup>		Not known	Desktop research
<b>Luxembourg</b>	Not known, but is available <sup>233</sup>		Not known	Desktop research
<b>Macedonia</b>	Not known, but is available <sup>234</sup>		Not known	Desktop research

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### Italy

<sup>228</sup> 1% of citizens over 65 years old use home care services (Alzheimer Europe).

### Latvia

<sup>229</sup> Funded by the state if the citizen cannot afford the payment.

<sup>230</sup> Same standards and regulations as for [care homes](#)

### Liechtenstein

<sup>231</sup> Zaglmayer, 2012

### Lithuania

<sup>232</sup> Alzheimer Europe.

### Luxembourg

<sup>233</sup> At least some providers are private non-profit organisations, e.g. [Stiftung Hellef Doheen](#) (SHD), which is the largest homecare provider in Luxembourg

### Macedonia

<sup>234</sup> The state is responsible for providing care at home services (Apostolska & Tozija, 2010).

Country	Providers	Definition	Standards / Regulations	Source
<b>Malta</b>	Not known, but is available <sup>235</sup>		Not known	Desktop research
<b>Montenegro</b>	Not known, but is available <sup>236</sup>		Not known	Desktop research
<b>Netherlands</b>	Not known, but is available <sup>237</sup>	Example: scheme called 'Alpha Care' <sup>238</sup>	Yes <sup>239</sup>	Desktop research
<b>Norway</b>	Public <sup>240</sup>		Not known	Desktop research
<b>Poland</b>	Not known, but is available <sup>241</sup>		Not known	Desktop research
<b>Portugal</b>	Mix of providers <sup>242</sup>		Not known	Desktop research
<b>Romania</b>	Not known, but is available <sup>243</sup>		Yes <sup>244</sup>	Desktop research

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### Malta

<sup>235</sup> Service user pays a nominal fee (Alzheimer Europe).

### Montenegro

<sup>236</sup> McCarthy & Brajovic, 2009.

### Netherlands

<sup>237</sup> Costs covered by long-term care insurance scheme (*Algemene Wet Bijzondere Ziektekosten – AWBZ*).

<sup>238</sup> Alzheimer Europe.

<sup>239</sup> Law on quality of care (*Kwaliteitswet Zorginstellingen; KWZ*); Law on professions in personal healthcare (*Wet op de Beroepen in de Individuele Gezondheidszorg; Wet BIG*), see Froggatt & Reitinger, 2013.

### Norway

<sup>240</sup> [Samfunnskunnskap](#)

### Poland

<sup>241</sup> Responsibility of local government. Citizen pays up to 10% of cost (Alzheimer Europe).

### Portugal

<sup>242</sup> Joël, Dufour-Kippelen & Samitca, 2010.

### Romania

<sup>243</sup> Services are employed by the state, although sometimes they are also funded by NGOs (Popa, 2010).

Country	Providers	Definition	Standards / Regulations	Source
<b>Serbia</b>	Mix of providers		Yes <sup>245</sup>	Survey – standards body
<b>Slovakia</b>	Not known, but is available <sup>246</sup>		Yes <sup>247</sup>	Survey – government dept.; standards body; individual
<b>Slovenia</b>	Mix of providers		Yes	Survey – org of/for older people
<b>Spain</b>	Mix of providers <sup>248</sup>		Yes <sup>249</sup>	Survey – org of/for older people; desktop research
<b>Sweden</b>	Not known, but is available <sup>250</sup>		Yes <sup>251</sup>	Survey – org of/for older people; standards body
<b>Switzerland</b>	Not known, but is available	Services of home care and assistance <sup>252</sup>	Not known	Desktop research

<sup>244</sup> The training of care-givers is regulated (see National Strategy for the Development of the Elderly People Social Assistance System). Decree (Ordin) 318/2003; Decree (Ordin) 246/2006 establishes minimum quality standards for home care services.

#### **Serbia**

<sup>245</sup> Law on Social Protection; Law on Local Self-Government; Rulebook on the conditions and standards for the provision of social protection; Rulebook on licensing organization; Rulebook on licensing of professionals.

#### **Slovakia**

<sup>246</sup> Respondents to survey disagreed over whether there are only state providers or also private (for profit or not) providers.

<sup>247</sup> Law. 448/2008 Social Services.

#### **Spain**

<sup>248</sup> Alzheimer Europe.

<sup>249</sup> Link 1: [http://www.diputaciondevalladolid.es/extras/extras\\_accion\\_social/NORMATIVAREGULADORASERVICIO\\_\(SAD\).pdf](http://www.diputaciondevalladolid.es/extras/extras_accion_social/NORMATIVAREGULADORASERVICIO_(SAD).pdf);

Link 2: <http://www.femp.es/files/566-930-archivo/sad.pdf>

#### **Sweden**

<sup>250</sup> Respondents to survey disagreed over who paid for the service (citizens or communities), but it appears that the service is provided at least by the state.

<sup>251</sup> National Board of Health and Welfare [oversee standards](#)

#### **Switzerland**

<sup>252</sup> Gobet et al 2009

<b>Country</b>	<b>Providers</b>	<b>Definition</b>	<b>Standards / Regulations</b>	<b>Source</b>
<b>Turkey</b>	Not known, but is available <sup>253</sup>		Not known	Desktop research
<b>Ukraine</b>	Public <sup>254</sup>		Yes <sup>255</sup>	Survey – org of/for older people
<b>United Kingdom</b>	Mix of providers		Yes <sup>256</sup>	Survey – standards body; academics; desktop research

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### **Turkey**

<sup>253</sup> The Ministry of Health began providing home care services in 2010 (Home Care Services in Turkey, 2012).

### **Ukraine**

<sup>254</sup> The services are free, unless the citizen has adult children living in another city.

<sup>255</sup> See [www.mlsp.gov.ua](http://www.mlsp.gov.ua)

### **United Kingdom**

<sup>256</sup> The [Care Quality Commission](http://www.carequalitycommission.gov.uk)

## **Tables**

### **Set Two:**

#### **Eligibility criteria, tenure and funding**



## Supported Housing

Country	Model	Age-related criteria	Impairment	Tenure	Funding			Source
					Private	Public	Mix	
<b>Austria</b>	1	Above certain age	Must have impairment <sup>258</sup>	Other <sup>259</sup>			Yes	Survey – UN-affiliated body
	2	Above certain age <sup>257</sup>	Must have impairment	Rented (private)	Yes <sup>260</sup>			
<b>Belgium</b>	1	Not known	Not known	Not known				Desktop research
<b>Bulgaria</b>	1	Not known	Not known	Not known				Desktop research
<b>Croatia</b>	1	No restriction	No restriction	Owned <sup>261</sup>	Yes <sup>262</sup>			Survey – individual; government dept.
	2	No restriction	No restriction	Owned or rented	Yes			
<b>Cyprus</b>	n/a							Desktop research
<b>Czech Republic</b>	1	Not known	Not known	Not known				Desktop research

### Austria

<sup>257</sup> Residents must be 70+ years old with an impairment. In Upper Austria, however, they are eligible if over 60 and living in a precarious situation.

<sup>258</sup> Exact requirements vary according to the amount of care that's needed.

<sup>259</sup> A fee is charged that is paid from the pension income (except 20%) and from LTC allowance (if appropriate). If this does not cover the whole fee, means-tested social assistance may cover the rest.

<sup>260</sup> State support is restricted to housing subsidies to keep rents low, but should care services be needed, state support will subsidise those additional costs.

### Croatia

<sup>261</sup> Owner-occupied but residents are charged for the use of shared facilities.

<sup>262</sup> Paid for by the individual occupiers, owning or renting.

Country	Model	Age-related criteria	Impairment	Tenure	Funding			Source
					Private	Public	Mix	
<b>Denmark</b>	1	No restrictions	Varies <sup>263</sup>	Not known				Survey – org of/for older people
	2	No restrictions	Not known	Not known				
<b>Estonia</b>	1	No restrictions	No restrictions	Not known	Yes <sup>264</sup>		Yes <sup>265</sup>	Survey – government dept.
	2	Not known	Not known	Rented (private)				
<b>Finland</b>	1	No restrictions	Must have impairment	Rented (private or social)	Yes <sup>266</sup>		Yes <sup>267</sup>	Survey – org of/for older people; government dept.
	2	Above certain age	No restrictions	Owned or Rented				
<b>France</b>	1	Above certain age <sup>268</sup>	No restrictions	Rented (private or social)			Yes <sup>269</sup>	Survey – government dept.

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### Denmark

<sup>263</sup> Depends on the type of housing. (Survey response)

### Estonia

<sup>264</sup> Paid for by the occupier.

<sup>265</sup> Combination of occupier and state funded.

### Finland

<sup>266</sup> Paid for by the occupier.

<sup>267</sup> Combination of occupier and state funded.

### France

<sup>268</sup> Over the age of 55.

<sup>269</sup> Combination of occupier and state funded. State support is means-tested.

Country	Model	Age-related criteria	Impairment	Tenure	Funding			Source
					Private	Public	Mix	
<b>Germany</b>	1	Above certain age <sup>270</sup>	Restrictions <sup>271</sup>	Owned or rented <sup>272</sup>			Yes <sup>274</sup>	Survey – org of/for older people
	2	Above certain age	Restrictions	Owned or rented	Yes <sup>273</sup>			
<b>Greece</b>		Not known	Not known	Not known		Yes <sup>275</sup>		Survey - academic
<b>Hungary</b>	n/a							Desktop research
<b>Iceland</b>	1	Not known	Not known	Owned or rented	Not known			Survey – consumer association; desktop research
<b>Ireland</b>	1	Within lower and upper age limit	No restrictions	Rented (social)			Yes <sup>276</sup>	Survey – org of/for older people
	2	Within lower and upper age limit	Not known	Rented (social)			Yes	

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### Germany

<sup>270</sup> Occasionally there are no age restrictions. The same applies for model 2.

<sup>271</sup> Sometimes an impairment/specific care need is required to be eligible. The same applies for model 2

<sup>272</sup> Can be either privately or socially rented. The same applies for model 2.

<sup>273</sup> Paid for by individual residents, but if social criteria apply then some state support may subsidise rent.

<sup>274</sup> Available in a range of funding models.

### Greece

<sup>275</sup> One respondent stated that 'old age care units' are publicly funded.

### Ireland

<sup>276</sup> Combination of state and occupier. The same applies for model 2.

Country	Model	Age-related criteria	Impairment	Tenure	Funding			Source
					Private	Public	Mix	
<b>Italy</b>	1 2	Not known No restrictions	Not known No restrictions	Not known Rented (private or social)			Yes <sup>277</sup>	Survey – org of/for older people
<b>Kosovo</b>	n/a							Desktop research
<b>Latvia</b>	n/a							Survey - individual
<b>Liechtenstein</b>	n/a							Desktop research
<b>Lithuania</b>	n/a							Desktop research
<b>Luxembourg</b>	n/a							Desktop research
<b>Macedonia</b>	n/a							Desktop research
<b>Malta</b>	n/a							Desktop research
<b>Montenegro</b>	n/a							Desktop research
<b>Netherlands</b>		Not known	Not known	Not known				Desktop research
<b>Norway</b>		Not known	Not known	Not known				Desktop research
<b>Poland</b>		Not known	Not known	Not known				Desktop research
<b>Portugal</b>		Not known	Not known	Not known				Desktop research
<b>Romania</b>		Not known	Not known	Not known			Yes <sup>278</sup>	Desktop research
<b>Serbia</b>	n/a							Survey – standards body

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### Italy

<sup>277</sup> Combination of state and occupier.

### Romania

<sup>278</sup> Various funding sources: government funds, NGOs, or donations or private sources (Popa, 2010).

Country	Model	Age-related criteria	Impairment	Tenure	Funding			Source
					Private	Public	Mix	
<b>Slovakia</b>	1 & 2	No restrictions	Must have impairment	Rented (private or social)			Yes <sup>279</sup>	Survey – government dept.; individual
<b>Slovenia</b>	Not known	Not known <sup>280</sup>	No restrictions	Owned or rented <sup>281</sup>			Yes <sup>282</sup>	Survey - org of/for older people; org of care providers
<b>Spain</b>	1 & 2	Not known	Not known	Not known	Not known			Survey – org of/for older people; desktop research
<b>Sweden</b>	1	Above certain age <sup>283</sup>	Not known	Rented (private or socially)	Yes <sup>285</sup>			Survey – org of/for older people; standards body; desktop research
	2	Above certain age <sup>284</sup>	Must have impairment	Rented (social)				

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### **Slovakia**

<sup>279</sup> Combination of funding sources (state, residents, other private sources). The fees charged to residents are dependent on their incomes.

### **Slovenia**

<sup>280</sup> Survey respondents gave contradictory answers as to whether there is an upper and lower age limit, or not.

<sup>281</sup> Rented housing may be socially or privately rented.

<sup>282</sup> Combination of resident and state-funded. Some may also be part-funded by charities.

### **Sweden**

<sup>283</sup> At least 55 years old (Jegermalm and Henning, 2013).

<sup>284</sup> One respondent also stated that this may vary, if the occupier has a particular condition e.g. dementia.

<sup>285</sup> Paid for by the occupier, though the government may subsidise the rents of those on low incomes.

<sup>286</sup> Combination of occupier and state-funded, although one respondent claimed there are no state subsidies.

Country	Model	Age-related criteria	Impairment	Tenure	Funding			Source
					Private	Public	Mix	
Switzerland		Not known	Not known	Not known	Not known			Desktop research
Turkey	n/a							Survey – org of/for older people
Ukraine	n/a							Survey – org of/for older people
United Kingdom	1 <sup>287</sup>	Above certain age	Restrictions <sup>288</sup>	Owned or rented	Yes <sup>289</sup>			Survey – academics; standards body
	2	Above certain age	Restrictions	Rented (private or social)	Yes			

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### United Kingdom

<sup>287</sup> Model 1 is called 'sheltered housing'. Model 2 is known as 'extra-care sheltered housing'.

<sup>288</sup> Eligibility is determined based on many factors, of which impairment is just one. Similarly for model 2.

<sup>289</sup> Paid for by individual occupiers, owning or renting. Also applies to model 2. Housing benefit may be available (means-tested)

## Residential Care

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
<b>Austria</b>	Nursing Without nursing	Above certain age <sup>290</sup>	Must have impairment			Yes <sup>291</sup>	Survey – UN-affiliated body
<b>Belgium</b>	Nursing Without nursing	Not known Not known	Restrictions <sup>292</sup> Restrictions	Not known			Desktop research
<b>Bulgaria</b>	Nursing Without nursing	Above certain age <sup>293</sup> Above certain age <sup>294</sup>	Restrictions <sup>295</sup> Restrictions <sup>296</sup>			Yes <sup>297</sup> Yes <sup>298</sup>	Survey – standards body; desktop research

### Austria

<sup>290</sup> Some exceptions e.g. if a disabled citizen below 65 years old cannot be housed elsewhere (increasingly rare).

<sup>291</sup> Funding is related to eligibility, not ability to pay (if the resident cannot pay, means-tested social assistance will pay it).

### Belgium

<sup>292</sup> Eligibility is based on an assessment of need of care. The same applies for institutions without nursing, where some residents don't need care (Willemé, 2010).

### Bulgaria

<sup>293</sup> Must be over pensionable age, for either form of residential care (Mincheva & Kanazireva, 2010).

<sup>294</sup> Survey respondent stated that there is an upper age limit.

<sup>295</sup> Survey respondent answered that residents must be independently mobile and self-supporting. However, desktop research found that residents must also need some care to be eligible, and be unable to receive care at home (e.g. can't afford it or have no relatives). See Mincheva & Kanazireva, 2010.

<sup>296</sup> Residents must require some care and be unable to receive care at home (e.g. can't afford it or have no relatives).

<sup>297</sup> Available in a range of funding models. Residents must pay a fee (Mincheva & Kanazireva, 2010).

<sup>298</sup> Combination of resident and state-funded.

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
<b>Croatia</b>	Nursing Without nursing	Above certain age Above certain age	Not known Must have impairment		Yes	Yes <sup>299</sup> Yes	Survey – individual; government dept.
<b>Cyprus</b>	Not known	Not known	Restrictions <sup>300</sup>			Yes <sup>301</sup>	Desktop research
<b>Czech Republic</b>	Not known	Not known	Not known			Yes <sup>302</sup>	Desktop research
<b>Denmark</b>	Nursing	Not known	Not known			Yes <sup>303</sup>	Desktop research
<b>Estonia</b>	Nursing <sup>304</sup> Without nursing	No restrictions	No restrictions	Yes <sup>305</sup>			Survey – government dept.

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### **Croatia**

<sup>299</sup> Funding is means-tested and also depends on the types of services that are provided to residents.

### **Cyprus**

<sup>300</sup> Residents must be unable to care for themselves on a 24-hour basis, and be unable to have these needs met by family or other supportive services (Social Welfare Services website of Cypriot government).

<sup>301</sup> There are private, governmental and community-run retirement homes (Social Welfare Services website of Cypriot government).

### **Czech Republic**

<sup>302</sup> Health insurance usually covers about 60-70% of the cost of residential care (Horecký, 2010).

### **Denmark**

<sup>303</sup> Residents pay rent but some receive income-based financial support to help cover these costs (Campbell & Wagner, 2009).

### **Estonia**

<sup>304</sup> Both forms come under the same model of care (standards, eligibility, funding etc.)

<sup>305</sup> Paid for by individual residents.



Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
<b>Finland</b>	Nursing	No restrictions <sup>306</sup>	Must have impairment			Yes <sup>307</sup>	Survey – org of/for older people; government dept.
<b>France</b>	Nursing	Not known	Not known	Not known			Desktop research
<b>Germany</b>	Both	No restrictions	Must have impairment or medical condition and need care			Yes <sup>308</sup>	Survey – org of/for older people
<b>Greece</b>	Not known	Not known	Not known	Yes <sup>309</sup>	Yes		Desktop research
<b>Hungary</b>	Not known	Not known	Restrictions <sup>310</sup>			Yes <sup>311</sup>	Desktop research
<b>Iceland</b>	Nursing	Not known	Not known	Not known			Desktop research

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### Finland

<sup>306</sup> It appears that in some regions there are age restrictions, but no further details could be found.

<sup>307</sup> Combination of resident and state or charity funded. Payments are related to ability to pay.

### Germany

<sup>308</sup> Long term care (LTC) insurance covers most of the cost, the resident pays the rest. If they or their relatives cannot afford it, the state will step in. Charities and communities may also cover some of the costs. LTC insurance doesn't cover short-term stays for residents with minimal care needs.

### Greece

<sup>309</sup> Most are privately run but there are some public care homes (Mastrogiannakis & Kagialaris, 2010).

### Hungary

<sup>310</sup> For those who require at least 4 hours care a day (Hungary: Long Term Care, OECD Report, 2011).

<sup>311</sup> Most care homes are privately funded, but even they receive some funding from Hungary's compulsory health insurance system (Hungary: Long Term Care, OECD Report, 2011).

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
<b>Ireland</b>	Nursing	Above certain age	Must require care			Yes <sup>312</sup>	Survey – org of/for older people
<b>Italy</b>	Nursing	Not known	Not known	Not known			Desktop research
<b>Kosovo</b>	Not known	Above certain age <sup>313</sup>	Not known	Not known			Desktop research
<b>Latvia</b>		Above certain age <sup>314</sup>	Must have impairment <sup>315</sup>			Yes <sup>316</sup>	Survey - individual
<b>Liechtenstein</b>	n/a						Desktop research
<b>Lithuania</b>	n/a						Desktop research
<b>Luxembourg</b>	Not known	Not known	Not known	Not known			Desktop research
<b>Macedonia</b>	Not known	Not known	Must have impairment <sup>317</sup>			Yes <sup>318</sup>	Desktop research
<b>Malta</b>	n/a						Desktop research
<b>Montenegro</b>	Not known	Not known	Not known	Not known			Desktop research

### **Ireland**

<sup>312</sup> Combination of resident and state-funded.

### **Kosovo**

<sup>313</sup> Must be at least 65 years old and be living alone (Country Fact Sheet - Kosovo, 2011).

### **Latvia**

<sup>314</sup> Must be of pensionable age.

<sup>315</sup> Must have care needs that cannot be adequately met by home care or day care institution.

<sup>316</sup> All costs are covered by the state or municipality in cases where the resident and/or their family cannot afford to pay. If it is deemed that the resident can pay then they are required to pay part/all of the costs.

### **Macedonia**

<sup>317</sup> Also, in cases where the individual's home is such that they can't receive care at home (Apostolska & Tozija, 2010).

<sup>318</sup> Some care homes are private, others publicly funded. Waiting lists are long for public care homes because of the high cost of private care homes, and geographical coverage is uneven (Eastern Macedonia has no public care homes). Public care homes are funded partly by the state and partly by residents' contributions (Apostolska & Tozija, 2010).

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
<b>Netherlands</b>	Nursing	Not known	Not known		Yes <sup>319</sup>		Desktop research
<b>Norway</b>	Nursing	Not known	Not known			Yes <sup>320</sup>	Desktop research
<b>Poland</b>		Not known	Not known	Not known			Desktop research
<b>Portugal</b>	Both <sup>321</sup>	Not known	Not known			Yes <sup>322</sup>	Desktop research
<b>Romania</b>		Not known	Not known			Yes <sup>323</sup>	Desktop research
<b>Serbia</b>	Both	Above certain age <sup>324</sup>	Must not have impairment or medical condition			Yes <sup>325</sup>	Survey – standards body

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### **Netherlands**

<sup>319</sup> Costs are covered by the country's long term care insurance scheme (*Algemene Wet Bijzondere Ziektekosten – AWBZ*) which all citizens are entitled to (Tinker, Ginn and Ribe, 2013).

### **Norway**

<sup>320</sup> Most care homes are owned by the state and partly paid for by the state and by the residents, dependent on their income (Nakrem, 2011; Samfunnskunnskap.no).

### **Portugal**

<sup>321</sup> Waiting lists are long for places in residential care homes due to a shortage of places (Dufour-Kippelen & Samitca, 2010).

<sup>322</sup> 30% of providers are private for profit organisations (Dufour-Kippelen & Samitca, 2010).

### **Romania**

<sup>323</sup> Residents pay part of the costs of care. If neither they nor their family can pay the fees, then the government will pay it. Most care homes are state-funded, others are funded by NGOs, others through donations or private sources, and still others through a combination of sources (Popa, 2010).

### **Serbia**

<sup>324</sup> Aged 65 or over.

<sup>325</sup> Combination of resident and state-funded.

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
Slovakia	Nursing	Not known <sup>326</sup>	Must not have impairment or medical condition			Yes <sup>328</sup>	Survey – government dept.; standards body; individual
	Without	Above certain age <sup>327</sup>	Must have impairment or medical condition				
Slovenia	Both	Above certain age <sup>329</sup>	Must have impairment or medical condition <sup>330</sup>			Yes <sup>331</sup>	Survey – org of/for older people; org of care providers; desktop research
Spain	Nursing	No restrictions	Not known <sup>332</sup>			Yes <sup>333</sup>	Survey – org of/for older people; desktop research

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### Slovakia

<sup>326</sup> It appears that nursing homes have no age restrictions, but the survey responses were not clear and could not be verified.

<sup>327</sup> Above retirement age.

<sup>328</sup> Combination of resident and state-funded, related to the residents' ability to pay. Applies for all care homes.

### Slovenia

<sup>329</sup> Must be over 65 years old (Alzheimer Europe). One survey respondent also stated that there is also an upper age limit.

<sup>330</sup> However, one survey respondent contradicted a previous response and stated that residents must not have a medical condition requiring care, which suggests there may be variation between different care homes.

<sup>331</sup> Combination of resident and state-funded.

### Spain

<sup>332</sup> Survey respondent gave contradictory answers.

<sup>333</sup> Combination of resident and state-funded.

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
Sweden	Nursing	Above certain age	Must not have impairment or medical condition			Yes <sup>335</sup>	Survey – org of/for older people; standards body
	Without	Above certain age	Must have impairment	Yes <sup>334</sup>			
Switzerland	Nursing	Not known	Must have impairment or medical condition <sup>336</sup>			Yes <sup>338</sup>	Desktop research
	Without	Not known	Not known <sup>337</sup>			Yes <sup>339</sup>	
Turkey	Not known	Above certain age	Not known	Not known			Survey – org of/for older people; desktop research

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### Sweden

<sup>334</sup> Paid for by residents.

<sup>335</sup> Combination of resident and state-funded.

### Switzerland

<sup>336</sup> Must require daily nursing care that cannot be provided at home (Froggatt & Reitinger, 2013).

<sup>337</sup> Care homes without nursing are for citizens who require less nursing care (than residents of nursing homes) but require some help with personal care (Froggatt & Reitinger, 2013).

<sup>338</sup> Providers include public, private for profit and private non-profit. Private non-profit and some for profit care homes receive state subsidies if they choose to comply with the standards set by the government (Crivelli, Filippini & Lunati, 2001). Compulsory health insurance will pay for up to 60 hours per week of care in a nursing home (Daley and Gubb, 2013).

<sup>339</sup> Providers include public, private for profit and private non-profit. Private non-profit homes without nursing care are less likely to receive state subsidies because they're not subject to as many regulations (Crivelli, Filippini & Lunati, 2001).

Country	Model	Age-related criteria	Impairment	Funding			Source
				Private	Public	Mix	
<b>Ukraine</b>	Both	No restrictions	Restrictions <sup>340</sup>		Yes <sup>341</sup>		Survey – org of/for older people
<b>United Kingdom</b>	Nursing	Not known	Not known			Yes <sup>342</sup>	Survey – academics; standards body
	Without	No restrictions	Must have impairment			Yes <sup>343</sup>	

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### **Ukraine**

<sup>340</sup> Must be in need of care for at least 3 days a week, be unable to live independently without care, and have no family who can care for them.

<sup>341</sup> State-funded. However, adult children are legally obliged to care for their elderly parents. If they refuse, the parent(s) may be given residential care and the children are required to pay the fees. (Survey response)

### **United Kingdom**

<sup>342</sup> Available in a range of funding models, including combination of resident and state-funded.

<sup>343</sup> Combination of resident and state-funded.

## Care in a hospital setting

Country	Age-related criteria <sup>344</sup>	Impairment or health condition	Funding			Source
			Private	Public	Mix	
<b>Austria</b>	Above certain age	Must have impairment			Yes <sup>345</sup>	Survey – UN-affiliated body
<b>Belgium</b>	Not known	Not known	Not known			Desktop research
<b>Bulgaria</b>	No restrictions	Must have impairment			Yes <sup>346</sup>	Survey - standards body
<b>Croatia</b>	Above certain age	Must have health condition <sup>347</sup>			Yes <sup>348</sup>	Survey – individual; government dept.
<b>Cyprus</b>	Not known	Not known	Not known			Desktop research
<b>Czech Republic</b>	Not known	Not known			Yes <sup>349</sup>	Desktop research
<b>Denmark</b>	Not known	Not known		Yes <sup>350</sup>		Desktop research
<b>Estonia</b>	Not known	Not known	Not known			Survey – government dept.

<sup>344</sup> n/a (not applicable) where this model is not available

### **Austria**

<sup>345</sup> Same as for residential care.

### **Bulgaria**

<sup>346</sup> Combination of resident and state-funded.

### **Croatia**

<sup>347</sup> Must require regular medical treatment.

<sup>348</sup> Funding is related to the eligibility of the resident and their ability to pay.

### **Czech Republic**

<sup>349</sup> Costs are covered by health insurance but only up to 3-months (stay in hospital). After that, funding falls (Horecký, 2010).

### **Denmark**

<sup>350</sup> Part of universal healthcare system, free at the point of delivery (Campbell & Wagner, 2009).

Country	Age-related criteria	Impairment or health condition	Funding			Source
			Private	Public	Mix	
<b>Finland</b>	No restrictions	Must have health condition or impairment			Yes <sup>351</sup>	Survey – org of/for older people; government dept.
<b>France</b>	Not known	Not known	Not known			Desktop research
<b>Germany</b>	n/a					Survey – org of/for older people
<b>Greece</b>	Not known	Not known	Not known			Desktop research
<b>Hungary</b>	n/a					Desktop research
<b>Iceland</b>	n/a					Desktop research
<b>Ireland</b>	Above certain age	Must require medical care			Yes <sup>352</sup>	Survey – org of/for older people
<b>Italy</b>	n/a					Desktop research
<b>Kosovo</b>	n/a					Desktop research
<b>Latvia</b>	n/a					Desktop research
<b>Liechtenstein</b>	n/a					Desktop research
<b>Lithuania</b>	n/a					Desktop research
<b>Luxembourg</b>	n/a					Desktop research
<b>Macedonia</b>	Not known	Not known	Not known			Desktop research
<b>Malta</b>	Not known	Not known		Yes <sup>353</sup>		Desktop research
<b>Montenegro</b>	Not known	Not known	Not known			Desktop research
<b>Netherlands</b>	n/a					Desktop research
<b>Norway</b>	Not known	Not known	Not known			Desktop research

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### Finland

<sup>351</sup> Combination of resident and state funded. Fees are related to ability to pay.

### Ireland

<sup>352</sup> Combination of resident and state-funded.

### Malta

<sup>353</sup> Hospital care is state-run and free (Alzheimer Europe).



Country	Age-related criteria	Impairment or health condition	Funding			Source
			Private	Public	Mix	
<b>Poland</b>	n/a					Desktop research
<b>Portugal</b>	n/a					Desktop research
<b>Romania</b>	n/a					Desktop research
<b>Serbia</b>	n/a					Survey – standards body
<b>Slovakia</b>	Not known	Not known			Yes <sup>354</sup>	Survey – government dept.; individual; desktop research
<b>Slovenia</b>	No restrictions	Must have impairment or medical condition <sup>355</sup>			Yes <sup>356</sup>	Survey – org of/for older people; org of care providers
<b>Spain</b>	n/a					Survey – org of/for older people
<b>Sweden</b>	No restrictions	Must have impairment or medical condition			Yes <sup>357</sup>	Survey – org of/for older people; standards body
<b>Switzerland</b>	Not known	Not known		Yes <sup>358</sup>		Desktop research

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### **Slovakia**

<sup>354</sup> State-funded but occasionally recipients are asked to contribute towards some of the costs (Radvanský & Páleník, 2010).

### **Slovenia**

<sup>355</sup> Residents must require medical and nursing care for their impairment or medical condition.

<sup>356</sup> Combination of resident and charity/community funded.

### **Sweden**

<sup>357</sup> Combination of resident and state-funded.

### **Switzerland**

<sup>358</sup> Compulsory health insurance covers the cost of hospital care (Daley and Gubb, 2013).

Country	Age-related criteria	Impairment or health condition	Funding			Source
			Private	Public	Mix	
<b>Turkey</b>	No restrictions	Must have impairment or medical condition <sup>359</sup>		Yes <sup>360</sup>		Survey – org of/for older people
<b>Ukraine</b>	n/a					Survey – org of/for older people
<b>United Kingdom</b>	n/a				Yes	Survey – academics; standards body

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### Turkey

<sup>359</sup> Residents must require medical and nursing care for their impairment or medical condition.

<sup>360</sup> State-funded.

## Hospice

Country	Age-related criteria <sup>361</sup>	Impairment	Funding			Source
			Private	Public	Mix	
<b>Austria</b>					Yes <sup>362</sup>	Survey – UN-affiliated body
<b>Belgium</b>			Not known			Desktop research
<b>Bulgaria</b>					Yes <sup>363</sup>	Survey – standards body
<b>Croatia</b>			Not known			Survey – individual; government dept.
<b>Cyprus</b>			Not known			Desktop research
<b>Czech Republic</b>		Restrictions <sup>364</sup>	Not known			Desktop research
<b>Denmark</b>				Yes <sup>365</sup>		Desktop research
<b>Estonia</b>					Yes <sup>366</sup>	Survey – government dept.

<sup>361</sup> Little information on age or impairment related eligibility criteria was provided in survey responses, some information was found through desktop research.

### **Austria**

<sup>362</sup> There's also the possibility that funding for palliative care will be funded by social health insurance.

### **Bulgaria**

<sup>363</sup> Combination of resident and state-funded.

### **Czech Republic**

<sup>364</sup> Limited to those with oncological conditions (Alzheimer Europe).

### **Denmark**

<sup>365</sup> Although there are some private hospices, and palliative care wards in private hospitals, the care of anyone referred there is paid for by the state (Campbell & Wagner, 2009)

### **Estonia**

<sup>366</sup> Combination of resident and state-funded.

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Finland</b>				Yes <sup>367</sup>		Survey – org of/for older people; government dept.
<b>France</b>				Yes <sup>368</sup>		Desktop research
<b>Germany</b>					Yes <sup>369</sup>	Survey – org of/for older people
<b>Greece</b>			Not known			Desktop research
<b>Hungary</b>			Not known			Desktop research
<b>Iceland</b>			Not known			Desktop research
<b>Ireland</b>					Yes <sup>370</sup>	Survey – org of/for older people
<b>Italy</b>			Not known			Desktop research
<b>Kosovo</b>			n/a			Desktop research
<b>Latvia</b>			n/a			Survey - individual
<b>Liechtenstein</b>			n/a			Desktop research
<b>Lithuania</b>				Yes <sup>371</sup>		Desktop research

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### **Finland**

<sup>367</sup> Respondents to the survey disagreed over whether hospices are state funded or if the resident must pay.

### **France**

<sup>368</sup> Palliative care services are funded by the state (EAPC Atlas of Palliative Care in Europe).

### **Germany**

<sup>369</sup> Range of funding models, including when funding is provided by: the resident, a charity or community, or health insurance.

### **Ireland**

<sup>370</sup> Available in a range of funding models.

### **Lithuania**

<sup>371</sup> Patients receiving palliative care don't pay for treatment, apart from some medication (EAPC Atlas of Palliative Care in Europe).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Luxembourg</b>					Yes <sup>372</sup>	Desktop research
<b>Macedonia</b>				Yes <sup>373</sup>		Desktop research
<b>Malta</b>					Yes <sup>374</sup>	Desktop research
<b>Montenegro</b>	n/a					Desktop research
<b>Netherlands</b>					Yes <sup>375</sup>	Desktop research
<b>Norway</b>					Yes <sup>376</sup>	Desktop research
<b>Poland</b>					Yes <sup>377</sup>	Desktop research

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### **Luxembourg**

<sup>372</sup> Patients receiving palliative care do not pay for treatment, apart from some medication (EAPC Atlas of Palliative Care in Europe).

### **Macedonia**

<sup>373</sup> Care is free for the terminally ill (Apostolska & Tozija, 2010).

### **Malta**

<sup>374</sup> Whilst there is no fee required for much of palliative care and treatment, some medications are charged to the recipient of care (EAPC Atlas of Palliative Care in Europe).

### **Netherlands**

<sup>375</sup> While the government will pay some costs of palliative care, service users may be required to pay part of the hospice care costs (although health insurance may reimburse these payments) (EAPC Atlas of Palliative Care in Europe).

### **Norway**

<sup>376</sup> The government funds palliative care services, but it is unclear as to whether recipients must also pay some of the costs (<http://www.eapc-taskforce-development.eu/documents/national/norway.pdf>)

### **Poland**

<sup>377</sup> Provision is guaranteed by the Ministry of Health Act 2009. Much of the costs are paid for by the government, but some costs must be met by the recipient (EAPC Atlas of Palliative Care in Europe).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Portugal</b>					Yes <sup>378</sup>	Desktop research
<b>Romania</b>			Not known			Desktop research
<b>Serbia</b>	n/a					Survey – standards body
<b>Slovakia</b>					Yes <sup>379</sup>	Survey – government dept.; individual; desktop research
<b>Slovenia</b>				Yes <sup>380</sup>		Desktop research
<b>Spain</b>					Yes <sup>381</sup>	Survey – org of/for older people; desktop research
<b>Sweden</b>				Yes <sup>382</sup>		Survey – org of/for older people; standards body
<b>Switzerland</b>					Yes <sup>383</sup>	Desktop research
<b>Turkey</b>	n/a					Desktop research

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### Portugal

<sup>378</sup> Recipients pay some of the costs of care while the government pays others (EAPC Atlas of Palliative Care in Europe).

### Slovakia

<sup>379</sup> Costs are covered by health insurance but occasionally the recipient is asked to contribute (Radvanský & Páleník, 2010).

### Slovenia

<sup>380</sup> No payment is required for palliative care (EAPC Atlas of Palliative Care in Europe).

### Spain

<sup>381</sup> Combination of resident, state and community funded. Palliative care itself is free of charge (EAPC Atlas of Palliative Care in Europe).

### Sweden

<sup>382</sup> State-funded.

### Switzerland

<sup>383</sup> Recipients are required to pay some of the costs of palliative care (EAPC Atlas of Palliative Care in Europe).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Ukraine</b>					Yes <sup>384</sup>	Survey – org of/for older people
<b>United Kingdom</b>					Yes <sup>385</sup>	Survey – academics; standards body

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### **Ukraine**

<sup>384</sup> A combination of state, charity (often religious) and resident.

### **United Kingdom**

<sup>385</sup> State, charity and private available

## Day Care

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Austria</b>	Above certain age	Must have impairment			Yes <sup>386</sup>	Survey – UN-affiliated body
<b>Belgium</b>	Not known	Restrictions <sup>387</sup>				Desktop research
<b>Bulgaria</b>	Under certain age	No restrictions			Yes <sup>388</sup>	Survey – standards body
<b>Croatia</b>	Not known <sup>389</sup>	Not known <sup>390</sup>		Yes		Survey – individual; government dept.
<b>Cyprus</b>	No restrictions	No restrictions		Yes <sup>391</sup>		Desktop research
<b>Czech Republic</b>	Not known	Not known	Not known			Desktop research
<b>Denmark</b>	Not known	Not known	Not known			Desktop research

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### **Austria**

<sup>386</sup> State funded and residents pay to attend.

### **Belgium**

<sup>387</sup> Eligibility is based on the same assessment of need as is used for residential care (Willemé, 2010).

### **Bulgaria**

<sup>388</sup> Available in a range of funding models.

### **Croatia**

<sup>389</sup> Respondents gave contradictory answers.

<sup>390</sup> Respondent gave contradictory answers.

### **Cyprus**

<sup>391</sup> Centres managed by Community Welfare Councils receive funding through the Scheme of State Funding (Social Welfare Services website of Cypriot government).



Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Estonia</b>	No restrictions	Restrictions <sup>392</sup>			Yes <sup>393</sup>	Survey – government dept.
<b>Finland</b>	Above certain age	No restrictions			Yes <sup>394</sup>	Survey – org of/for older people; government dept.
<b>France</b>	Not known	Not known	Not known			Desktop research
<b>Germany</b>	No restrictions	Must have impairment/medical condition			Yes <sup>395</sup>	Survey – org of/for older people
<b>Greece</b>	Not known	Not known	Not known			Desktop research
<b>Hungary</b>	Not known	Not known	Not known			Desktop research
<b>Iceland</b>	Not known	Not known	Not known			Desktop research
<b>Ireland</b>	n/a					Survey – org of/for older people
<b>Italy</b>	n/a					Desktop research
<b>Kosovo</b>	Not known	Not known	Not known			Desktop research

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### **Estonia**

<sup>392</sup> Some restrictions apply to citizens with psychiatric conditions e.g. alcoholism.

<sup>393</sup> State-funded and individuals pay to attend.

### **Finland**

<sup>394</sup> Respondents disagreed as to whether only state-funded centres are available or whether there are multiple funding options.

### **Germany**

<sup>395</sup> Mix of health insurance and service user pays.

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Latvia</b>	Above certain age	Must have impairment			Yes <sup>396</sup>	Survey - individual
<b>Liechtenstein</b>	n/a					Desktop research
<b>Lithuania</b>	Not known	Not known		Yes <sup>397</sup>		Desktop research
<b>Luxembourg</b>	n/a					Desktop research
<b>Macedonia</b>	n/a					Desktop research
<b>Malta</b>	Not known	Not known <sup>398</sup>			Yes <sup>399</sup>	Desktop research
<b>Montenegro</b>	n/a					Desktop research
<b>Netherlands</b>	n/a					Desktop research
<b>Norway</b>	n/a					Desktop research
<b>Poland</b>	Not known	Not known	Not known			Desktop research
<b>Portugal</b>	Not known	Not known <sup>400</sup>			Yes <sup>401</sup>	Desktop research

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### Latvia

<sup>396</sup> Centres are provided by local governments. Where an individual is unable to pay attendance fees, the state pays them.

### Lithuania

<sup>397</sup> Day care centres that are being piloted are being funded by the European Social Fund (Alzheimer Europe).

### Malta

<sup>398</sup> Priority is given to those who are most isolated (Alzheimer Europe).

<sup>399</sup> Service users are only required to pay a nominal fee based on their income (Alzheimer Europe).

### Portugal

<sup>400</sup> Day care centres are for those with low-medium levels of dependency, but it's unclear whether this involves formal restrictions (Dufour-Kippelen & Samitca, 2010).

<sup>401</sup> Most providers are private non-profit organisations (Dufour-Kippelen & Samitca, 2010).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Romania</b>	Not known	Not known			Yes <sup>402</sup>	Desktop research
<b>Serbia</b>	Above certain age	Not known <sup>403</sup>		Yes <sup>404</sup>		Survey – standards body
<b>Slovakia</b>	No restrictions	Must have impairment/ require personal care			Yes <sup>405</sup>	Survey – government dept.; standards body; individual
<b>Slovenia</b>	No restrictions	Not known <sup>406</sup>			Yes <sup>407</sup>	Survey – org of/for older people; desktop research
<b>Spain</b>	Above certain age <sup>408</sup>	Must have impairment and care needs <sup>409</sup>			Yes <sup>410</sup>	Survey – org of/for older people; desktop research

### **Romania**

<sup>402</sup> Some are funded by local governments, others are funded by NGOs, others through donations or private sources, and still others through a combination of sources (Popa, 2010).

### **Serbia**

<sup>403</sup> Contradictory answers given by the survey respondent.

<sup>404</sup> Day care centres are financed through local government budgets, or occasionally with the assistance of national funds.

### **Slovakia**

<sup>405</sup> A combination of different sources e.g. charity and state, and individuals pay to attend.

### **Slovenia**

<sup>406</sup> Survey respondent gave contradictory answers. Verification through desktop research could not be made.

<sup>407</sup> State-funded and individuals pay to attend.

### **Spain**

<sup>408</sup> At least 60 years old.

<sup>409</sup> Must not have a contagious disease that requires immediate medical attention, or mental health issues that would affect co-existence in the centre. In addition, to be eligible one must be without family that can provide care during the day. See: [http://www.plusesmas.com/cuidadorfamiliar/elegir\\_residencia/requisitos\\_para\\_acceder\\_a\\_las\\_plazas\\_publicas\\_de\\_los\\_centros\\_de\\_dia/910.html](http://www.plusesmas.com/cuidadorfamiliar/elegir_residencia/requisitos_para_acceder_a_las_plazas_publicas_de_los_centros_de_dia/910.html)

<sup>410</sup> State-funded and individuals pay to attend.

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Sweden</b>	Above certain age	Must have impairment		Yes <sup>411</sup>		Survey – org of/for older people; standards body
<b>Switzerland</b>	Not known	Not known	Not known			Desktop research
<b>Turkey</b>	Not known	Not known	Not known			Desktop research
<b>Ukraine</b>	Above certain age	Restrictions <sup>412</sup>		Yes <sup>413</sup>		Survey – org of/for older people
<b>United Kingdom</b>	No restrictions			Yes <sup>414</sup>	Yes <sup>415</sup>	Survey – academics; standards body

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### Sweden

<sup>411</sup> State/municipality funded.

### Ukraine

<sup>412</sup> Must be independently mobile and self-supporting, and not have personal care needs. In addition, they must not have contagious diseases, and show that they are socially isolated.

<sup>413</sup> State-funded.

### UK

<sup>414</sup> Age UK charity reported the number of older people using day care centres fell by 25% 2009 to 2012

<sup>415</sup> State, voluntary and private sector available.

## Care at home

Country	Age-related criteria <sup>416</sup>	Impairment	Funding			Source
			Private	Public	Mix	
<b>Austria</b>			Yes <sup>417</sup>	Yes <sup>418</sup>		Survey – UN-affiliated body
<b>Belgium</b>		Restrictions <sup>419</sup>	Yes <sup>420</sup>			Desktop research
<b>Bulgaria</b>	Above certain age <sup>421</sup>	Restrictions <sup>422</sup>			Yes <sup>423</sup>	Desktop research; Survey – standards body
<b>Croatia</b>					Yes	Survey - government dept.
<b>Cyprus</b>				Yes <sup>424</sup>		Desktop research

<sup>416</sup> Eligibility for care at home was not covered in the survey, but some information was found through desktop research.

### **Austria**

<sup>417</sup> Some private commercial service providers but most are run by non-profit organisations e.g. churches and political parties.

<sup>418</sup> Very few public service providers.

### **Belgium**

<sup>419</sup> Available to citizens with mild to severe ADL (Activities of Daily Living) limitations (Willemé 2010).

<sup>420</sup> Paid for by recipient dependent on income and severity of need (Willemé 2010).

### **Bulgaria**

<sup>421</sup> Must be over 60 years old. Priority is given to those over 75 years (Mincheva & Kanazireva, 2010).

<sup>422</sup> Must be unable to care for themselves. They must also have no relatives (who can care for them) (Mincheva & Kanazireva, 2010).

<sup>423</sup> Mix of providers.

### **Cyprus**

<sup>424</sup> State support for care at home is means-tested, based on the income of the recipient, and comes from the Public Assistance Fund (Social Welfare Services website of Cypriot government).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Czech Republic</b>					Yes <sup>425</sup>	Desktop research
<b>Denmark</b>	No restrictions	No restrictions		Yes <sup>426</sup>		Desktop research
<b>Estonia</b>				Yes <sup>427</sup>		Survey – government dept.
<b>Finland</b>					Yes	Survey – org of/for older people; government dept.
<b>France</b>			Not known			Desktop research
<b>Germany</b>					Yes <sup>428</sup>	Survey – org of/for older people
<b>Greece</b>			Not known			Desktop research
<b>Hungary</b>		Restrictions <sup>429</sup>	Not known			Desktop research
<b>Iceland</b>			Not known			Desktop research

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### **Czech Republic**

<sup>425</sup> If a physician approves of the care in co-operation with the insurance company, then health insurance policies will cover nursing care costs, but only up to 3 visits a day. Anything above that must be paid for by the recipient. Social home care can sometimes be paid for by the state, although a contribution is also asked of the recipient, depending on their income. There's also a Care Allowance that some are eligible for, which may help cover these costs (Alzheimer Europe).

### **Denmark**

<sup>426</sup> There are a range of providers, and recipients are given the choice to employ them using government funds. Local authorities can insist that recipients pay the expense of the materials for their care (Campbell & Wagner, 2009).

### **Estonia**

<sup>427</sup> Older people in need of care are cared for by their children (this is required by law). Those without family have care provided and paid for by the state.

### **Germany**

<sup>428</sup> A range of providers, commercial and charity. All are paid for by health insurance, the individual and the state.

### **Hungary**

<sup>429</sup> For those who need 2-4 hours care a day.

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
Ireland					Yes <sup>430</sup>	Survey – org of/for older people
Italy			Not known			Desktop research
Kosovo			n/a			Desktop research
Latvia					Yes <sup>431</sup>	Survey - individual
Liechtenstein	n/a					Desktop research
Lithuania		Restrictions <sup>432</sup>	Not known			Desktop research
Luxembourg					Yes <sup>433</sup>	Desktop research
Macedonia				Yes <sup>434</sup>		Desktop research

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### Ireland

<sup>430</sup> A mix of service providers.

### Latvia

<sup>431</sup> Recipients are required to pay for care unless they and their family are deemed unable to pay, in which case the municipality may cover the costs of care.

### Lithuania

<sup>432</sup> Available home care is very limited, and those with severe impairments who live alone are prioritised (Alzheimer Europe).

### Luxembourg

<sup>433</sup> "Assurance dependence" – long term care insurance pays for help and care given by a care network (Koch and Weisgerber, 2010).

### Macedonia

<sup>434</sup> The state is responsible for providing social care services, including care at home (Apostolska & Tozija, 2010).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Malta</b>	Above certain age <sup>435</sup>	Restrictions <sup>436</sup>			Yes <sup>437</sup>	Desktop research
<b>Montenegro</b>			Not known			Desktop research
<b>Netherlands</b>				Yes <sup>438</sup>		Desktop research
<b>Norway</b>					Yes <sup>439</sup>	Desktop research
<b>Poland</b>					Yes <sup>440</sup>	Desktop research

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### Malta

<sup>435</sup> Must be at least 60 years old, although priority is given to those over 85 with needs that, if met by care services at home, would be able to live independently, or those without family. (Alzheimer Europe).

<sup>436</sup> Recipients of 'meals-on-wheels' must have an impairment and be unable to prepare their own meals (Alzheimer Europe).

<sup>437</sup> Service users must pay a nominal fee towards care. The recipient of 'meals-on-wheels' is charged the full amount for this type of care. 'Meals-on-wheels' is organised by NGOs in co-operation with the government (Alzheimer Europe).

### Netherlands

<sup>438</sup> Costs are covered by the country's long term care insurance scheme (*Algemene Wet Bijzondere Ziektekosten – AWBZ*) which all citizens are entitled to (Tinker, Ginn and Ribe, 2013).

### Norway

<sup>439</sup> Provided by the state, partly funded by individuals (Samfunnskunnskap.no).

### Poland

<sup>440</sup> Care at home is means-tested; recipients pay up to 10% of the costs based on their income. Provision is the responsibility of local government (OECD Report, 2011).



Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Portugal</b>					Yes <sup>441</sup>	Desktop research
<b>Romania</b>					Yes <sup>442</sup>	Desktop research
<b>Serbia</b>				Yes <sup>443</sup>		Survey – standards body
<b>Slovakia</b>					Yes <sup>444</sup>	Survey – government dept.; standards body; individual

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### **Portugal**

<sup>441</sup> Providers include private non-profit (who get some state funding), private for-profit (very expensive but high quality), and some public providers. The coverage rate (number of places divided by the population) was 4.3% for over 65s and 9.5% for over 75s (Dufour-Kippelen & Samitca, 2010).

### **Romania**

<sup>442</sup> Care-givers are employed by local councils. Some are funded by the state, others through funding from NGOs. In addition, severely disabled people are entitled to an Allowance for Personal Assistance to help with the costs of care (Popa, 2010).

### **Serbia**

<sup>443</sup> Care at home services are financed through local government budgets, or occasionally with the assistance of the national budget.

### **Slovakia**

<sup>444</sup> Recipients pay for care, but it is unclear as to whether providers are only government-funded or also include private organisations that are not subsidised by the state.

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
<b>Slovenia</b>	Above certain age <sup>445</sup>	Must have impairment or medical condition			Yes <sup>446</sup>	Survey – org of/for older people; org of care providers; desktop research
<b>Spain</b>				Yes <sup>447</sup>		Survey – org of/for older people; desktop research
<b>Sweden</b>					Yes <sup>448</sup>	Survey – org of/for older people; standards body
<b>Switzerland</b>					Yes <sup>449</sup>	Desktop research
<b>Turkey</b>				Yes <sup>450</sup>		Desktop research

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### **Slovenia**

<sup>445</sup> Must be over 65 (Alzheimer Europe).

<sup>446</sup> Mix of providers. Local governments are required to pay 50% of costs but not all authorities comply (Alzheimer Europe).

### **Spain**

<sup>447</sup> Survey respondent stated that the service is state-funded and free to citizens. However, desktop research revealed that it is only free to those on a minimum pension (Alzheimer Europe).

### **Sweden**

<sup>448</sup> State service paid for by individuals, or can be funded by communities.

### **Switzerland**

<sup>449</sup> Compulsory health insurance will pay for up to 60 hours per week of care at home (Daley and Gubb, 2013).

### **Turkey**

<sup>450</sup> Care at home services are provided by the Ministry of Health in 2010 (Home Care Services in Turkey, 2012).

Country	Age-related criteria	Impairment	Funding			Source
			Private	Public	Mix	
Ukraine					Yes 451	Survey – org of/for older people
United Kingdom					Yes 452	Survey – academics; standards body

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### Ukraine

<sup>451</sup> The majority of service users receive free state-funded home care services, but if the recipient has adult children living in another city, those children may be required to pay for the care.

### UK

<sup>452</sup> State provision, recipients pay or contribute according to their incomes (means-tested), may also purchase care privately.

### 3.2 Patterns in the Information Record

A study of the Information Record reveals patterns in the provision of models of accommodation and care in the countries, and the standards relating to these models. Caution must be exercised in assessing possible reasons for these patterns, noting that the scope of this research project was to compile information and did not extend to analysing the reasoning behind the information obtained.

In the European Commission Report, "Long-Term Care for the elderly: Provisions and providers in 33 European countries" (Francesca Bettio and Alina Verashchagina, 2010) it is suggested that countries may be categorised into 'developed' (Northern and Western Europe); 'semi-developed' (southern Mediterranean); and 'basic' with limited care options for older people (Eastern Europe). It is also suggested that differences in provision between Eastern European countries reflects those post-socialist regimes which have focused on improving social housing.

The Information Record compiled in this study broadly follows this pattern. The lack of standards, or at least information on standards, in Eastern Europe reflects the scarcity of provision of care homes, and even less supported housing models. For instance, in Kosova only 2 care homes exist; and in Montenegro only 2 private nursing homes.

Southern European countries such as Greece, Italy and Portugal have supported housing and residential care options but they are less standardised than in Northern Europe. In Greece local authorities provide the licence to run the service and set the minimum standards, however there is not a

"systematic or obligatory evaluation of quality" (Kagialaris, G and Mastrogiannakis, T, 2010)

Countries with a range of models of supported housing and residential care options, together with evidence of standards and regulations for the premises and quality of care, include Austria, Germany, Finland, Ireland and the UK.

On the other hand, in some Northern European countries such as Norway, Sweden, Switzerland and the Netherlands there is evidence of a wide range of options of supported housing models, however, little information on standards for supported housing. A survey respondent suggested a focus on innovation rather than standards. The Swedish Standards Institute (SIS) is currently working on national standards for quality of care for elderly people with extensive needs in ordinary and special housing, which should be in place by 2015.

The literature review also revealed a move in focus from residential care homes to enabling older people to remain in their homes in Northern European Countries.

The housing design requirements of older people and people with impairments are highlighted in design guidance in several countries. For instance, in the UK 'Lifetime Homes' design criteria highlight the importance of flexible housing which can adapt to residents' changing needs. In Wales the Government Design Quality Requirements for social housing include Lifetime Homes criteria and additional requirements to meet the needs of people with sight loss based on RNIB (Royal National Institute of Blind People) Cymru research.

The provision of care support to an older person in their home is affected by the culture of the country with an expectation on families to care for older relatives in some countries. For instance in Bulgaria, care is only provided if the individual is unable to care for themselves and has no relatives who can care for them (Mincheva & Kanazireva, 2010). In Estonia the law requires children to care for their elderly parents. This compares to the situation in Switzerland where compulsory health insurance will pay for up to 60 hours per week of care at home (Daley and Gubb, 2013)

Northern and Western European countries generally provided information about home care standards; while in most Eastern European countries there was little information found about the provision of home care or any existence of standards.

The availability of day care centres also varies between countries. Day care centres are not regularly available in some Eastern European countries, hence there are no standards. For instance, in the Czech Republic only a few centres exist, and they are usually only open for a few hours a day; only one centre exists in Macedonia; and day care centres are currently being piloted in Lithuania funded by the European Social Fund.

There is evidence of consideration of the needs of people with dementia in good practice building design and management requirements for individual dwellings and residential care homes. Alzheimer Europe provides information on provision across Europe. A report from the UK National Housing Federation and the Dementia Services Development Centre at the University of Stirling highlights

how a range of housing models and services can impact positively on the lives of people with dementia.

The countries that have implemented mandatory long-term care insurance (Austria, Germany, and the Netherlands) have a range of options for home and residential care and quality standards, possibly reflecting the influence of the insurers on standards.

### **3.3 Gaps in the Information Record**

Where no information is recorded for a model of accommodation, or standards and regulations, this may be because the model is not available in that country or there are no published standards. We cannot conclude this, however, we can confirm that information was not found despite an intensive search of research reports and government website information in each individual country.

The main gaps in information are in the Eastern European countries: Kosova, Lithuania, The Former Yugoslav Republic of Macedonia, Montenegro and Serbia. There are also gaps in the information found for Cyprus, Liechtenstein, Luxembourg and Malta.

Information on 'supported housing' was the most difficult to find in Eastern European countries which may indicate that this model is not available. Information on residential care was the easiest to source across all the countries, though information on standards applied to care homes was not found in several countries. There was little information found about the provision of home care or any existence of standards in most Eastern European countries.

## 4. Conclusion

This report was commissioned by ANEC in order to inform future work on standardisation in relation to accommodation and care for older people. The aim of the research project was to compile an Information Record containing information on models of specialist accommodation and care for older people, and related standards, in use across the countries of the European Union, the acceding and candidate countries, and the EFTA countries: Norway, Switzerland, Iceland and Liechtenstein (Total 38 countries).

The Information Record shows a considerable variation between countries in the amount of information recorded. As noted in 3.2, caution must be exercised in assessing possible reasons for these variations, or drawing any conclusions, noting that the scope of this research project was to compile information and did not extend to analysing the reasoning behind the information obtained.

The main gaps in information are in Eastern European countries, generally across all models of accommodation. Where no information is recorded on a model of accommodation, or standards, in a country, we cannot conclude that these are not available, only that information was not found.

The Information Record broadly follows the categorisation in the European Commission Report, "Long-Term Care for the elderly: Provisions and providers in 33 European countries" (Francesca Bettio and Alina Verashchagina, 2010).

In terms of provision and coverage of care services their report suggested that countries may be categorised into 'developed' (Northern and Western Europe); 'semi-

developed' (southern Mediterranean); and 'basic' with limited care options for older people (Eastern Europe).

The lack of information on standards in some Eastern European countries reflects the low level of development of specialised care facilities for older people in Eastern Europe.

In Northern European countries such as Austria, Germany, Finland, Ireland and the UK, the Information Record reveals a range of models of supported housing and residential care options, together with evidence of standards and regulations for the premises and quality of care.

In other cases in Northern Europe, however, there is evidence of a range of models of accommodation but relatively low availability of standards for specialised housing and residential care. This may reflect a focus on innovation rather than standards, as one survey respondent suggested. It is important that standards are used to inform and raise quality levels without being seen to stifle innovation.

The provision of care support to an older person in their home is affected by the culture of the country with an expectation on families to care for older relatives in some countries of Eastern Europe. There is also evidence in some Northern European countries of an increasing focus on enabling older people to remain at home or in supported housing where they retain independence while having access to support where needed.

This study did not extend to assessing the contents of standards or regulations, their application, or the quality of care provision. Several of the referenced sources of

information listed in Chapter 5 consider these areas. The references include pieces of work which contain information and assessments on long term care for older people across Europe or a collection of European countries.

The Information Record may be viewed as a starting point to be updated as new information is available.

It is recommended that:

- The Information Record is monitored and updated annually, or every two years. Updates may possibly be obtained by circulating the document to standards bodies and other stakeholders within each country for them to review and add new information.
- Further research be undertaken to obtain a more detailed picture of the current situation and emerging trends.

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“The objective of this research is to study the responses of European states to the need for home care, starting from the reforms they have undertaken in this field over the past two decades. It also aims to identify the patterns of evolution of contemporary regimes of care in the light of these recent changes and, more specifically, in the context of growing marketisation. Our general hypothesis is that the trend of marketisation has had a differentiated impact on national care regimes” (from Executive Summary). The report makes comparisons between the four countries in terms of measuring and improving performance in homecare services. **Denmark Long-term Care** 2011 [ONLINE] Available at: <http://www.oecd.org/denmark/47877588.pdf>. [Accessed September 2013]

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Introduction: “This study was undertaken to see what can be learned from the experience of the Netherlands about long term care in order to inform policy, research and practice in the UK. The comprehensive analysis of the two countries has also been used to help the Technology Strategy Board’s project - the Long Term Care Revolution – with examples of innovation and best practice in adult social care provision in a country similar to the UK in many ways. Of particular interest is that while the two countries are very similar in demographic profile and the experiences of the older generation, it is notable that according to official statistics older individuals remain disability-free for nearly half a decade longer in the Netherlands than in the UK”.

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**Samfunnskunnskap.no** is a website providing information about Norway for recent immigrants, including information on their rights, opportunities and obligations

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Available at: <http://www.ancien-longtermcare.eu/sites/default/files/ENPRI%20RR%2070%20ANCIEN%20Belgian.pdf>. [Accessed September 2013]

This report describes the organisation of the Belgian long-term care system and considers the challenges of the future increase in the number of dependent older persons over the next two decades as a result of demographic ageing

**World Health Organization Palliative Care for Older People: Better Practices** report published in 2011

[ONLINE] Available at: [http://www.euro.who.int/\\_data/assets/pdf\\_file/0017/143153/e95052.pdf](http://www.euro.who.int/_data/assets/pdf_file/0017/143153/e95052.pdf). [Accessed September 2013]

Provides useful case studies for various European countries.