



SUNDHEDSSTYRELSEN

Denmark's Seniors' Care System and the Role played by the Home Care Program

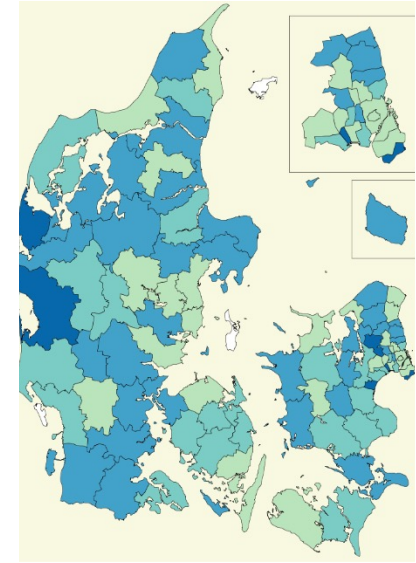


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Director Mads Biering la Cour
Danish Health Authority



Key principles of the Danish Welfare System



1. Universalism

- Equal access to services - generally independent of:
 - Labour market status
 - Nationality
 - Income
- Example – Scope of Act on Social Service (Home Care, Rehabilitation and Nursing Homes)
- Tax-financed (not insurance-based)

2. Decentralization

- 5 regions
- 98 municipalities
 - Municipalities provide local services, e.g. to elderly
 - Municipalities do not have law-making powers but can raise taxes.
 - They implement framework legislation.
 - Direct local elections every 4 years (fixed)

Overall structure of the Danish Healthcare System

National level



Ministry level and Danish Health Authority

- National health policies
- Legislation and general planning
- Setting overall economic framework
- Developing guidelines

Regional level



Five regions

- Hospital and psychiatric care
- General Practitioners
- Private practicing specialist doctors
- Adults dental services

Local level

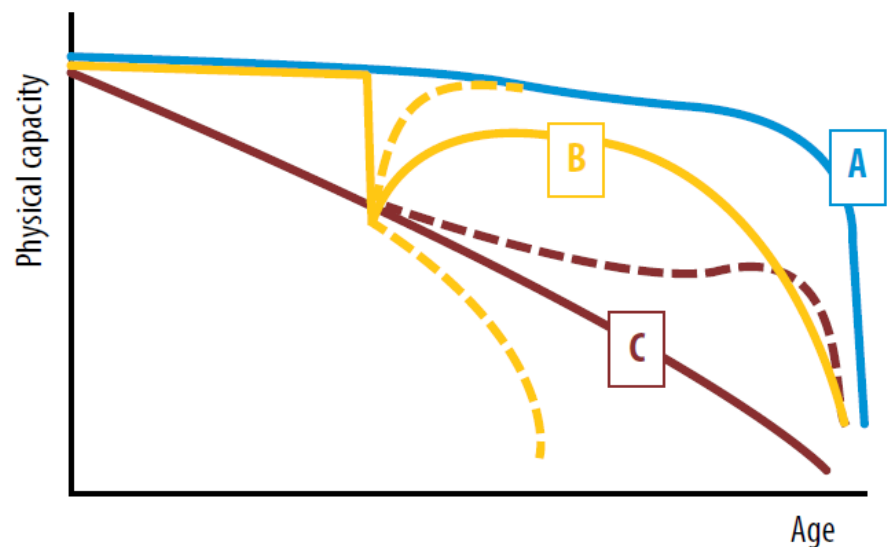


98 municipalities

- Senior and elderly care
- Preventive care and health promotion
- Rehabilitation outside hospital
- Treatment of alcohol and drug abuse

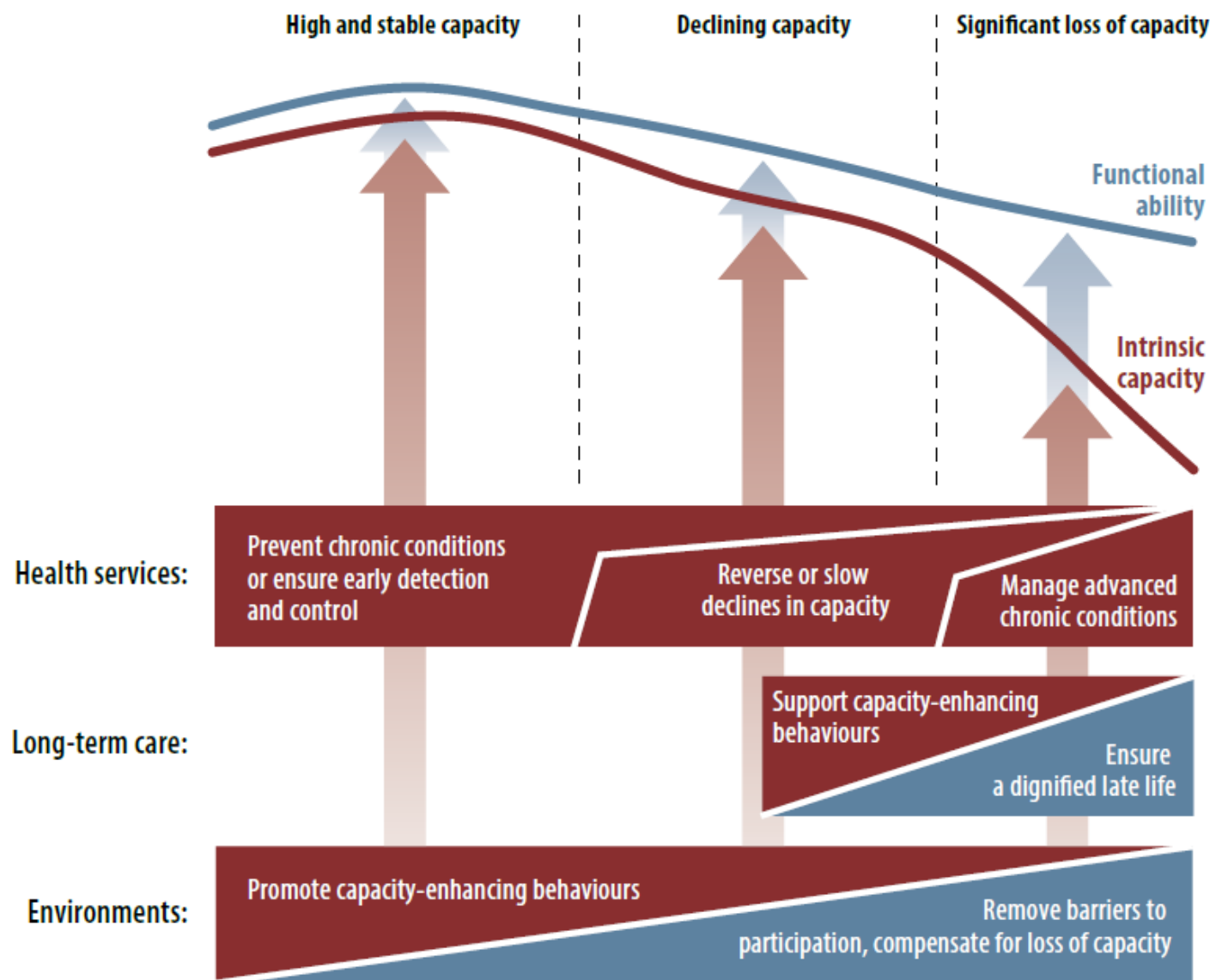
In line with WHO Healthy Ageing

Fig. 2.2. Three hypothetical trajectories of physical capacity



- A. Optimal trajectory, intrinsic capacity remains high until the end of life.
- B. Interrupted trajectory, an event causes a decrease in capacity with some recovery.
- C. Declining trajectory, capacity declines steadily until death. The dashed lines represent alternative trajectories.

Fig. 2.4. A public-health framework for *Healthy Ageing*: opportunities for public-health action across the life course



What we do in Denmark...

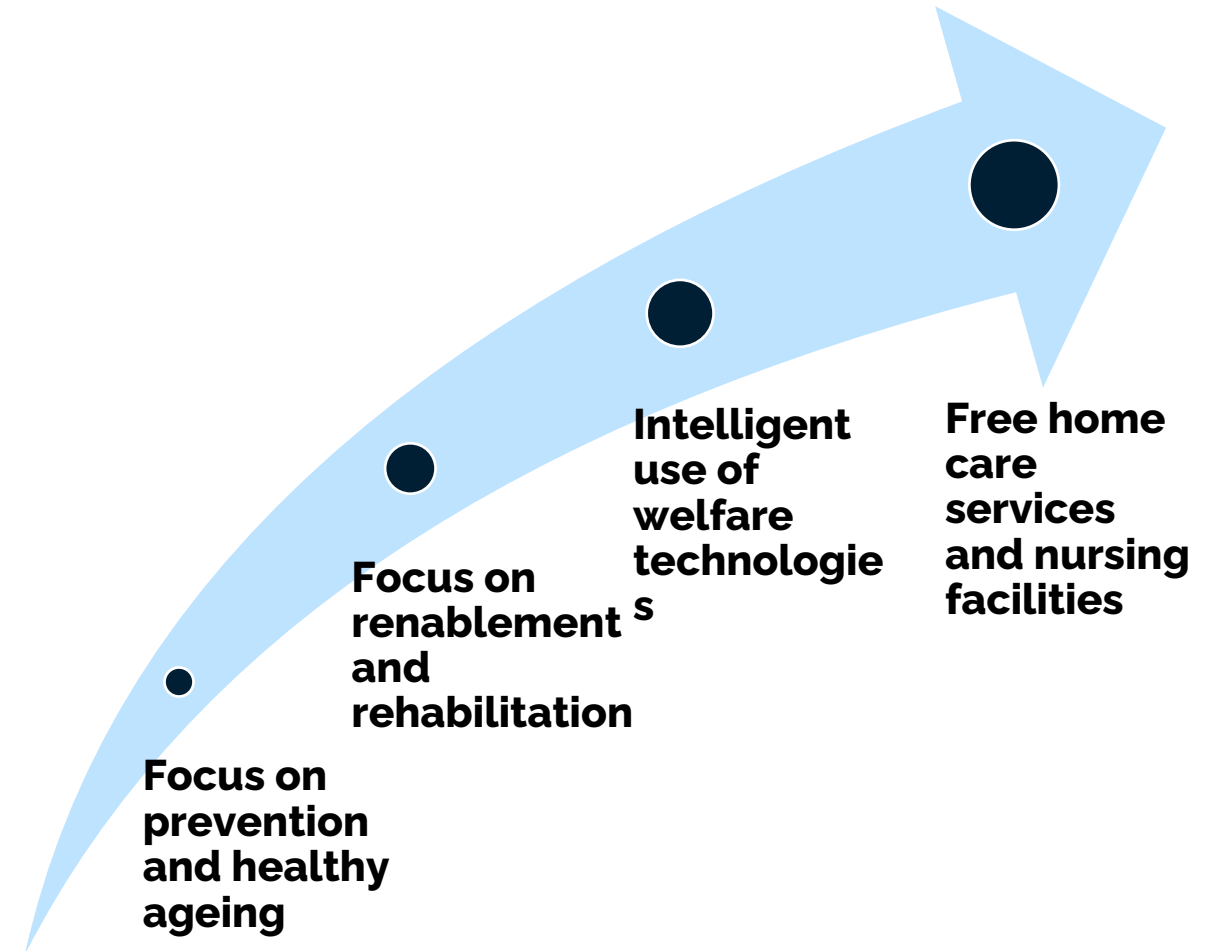
Danish senior-citizen policy aims at:

- Promoting and extending the independence of senior citizens
- Ensuring continued self-sufficiency and well-being

Dignity and autonomy as guiding principles:

- As long as possible in your own home
- A person-centered approach to rehabilitation and care

Danish senior-citizen policy



Home care services

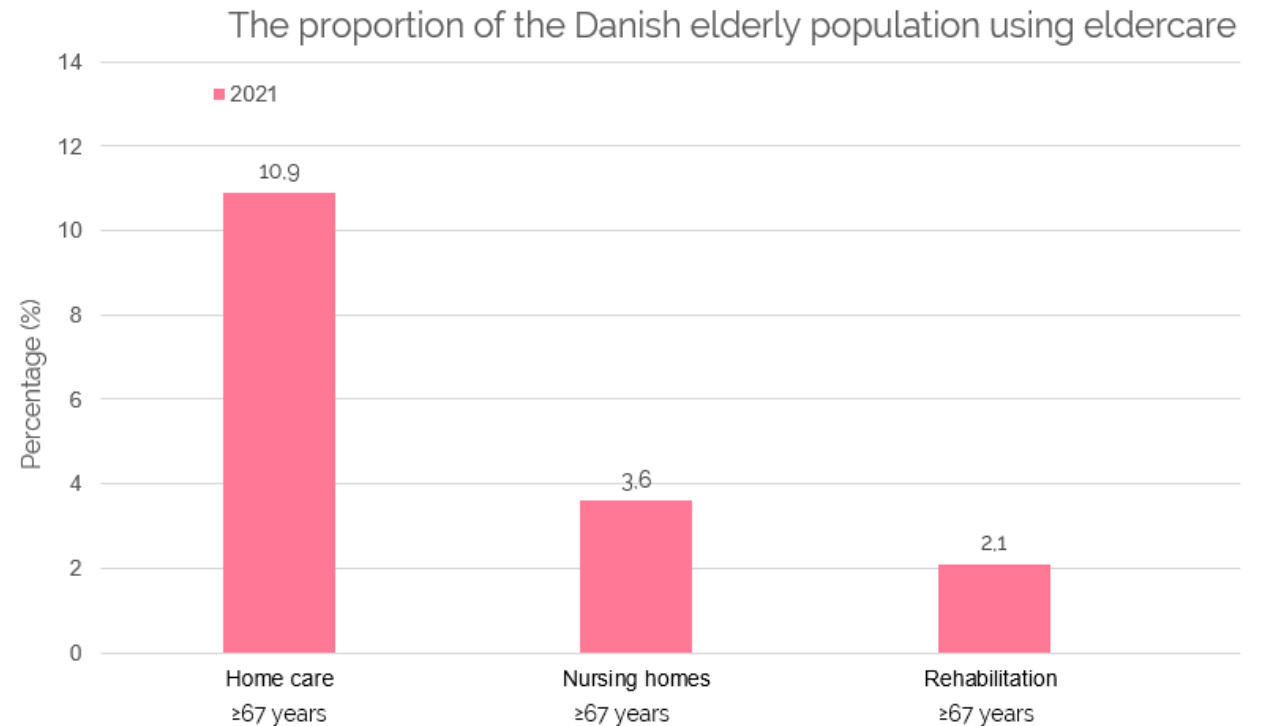
Target group:

- Senior citizens who live at home and are unable to manage everyday life

Tree categories of home care:

- Practical help (e.g. cleaning, doing laundry)
- Personal care (e.g. bathing, shaving)
- Food service (meal delivery, help cooking food, help with grocery shopping)

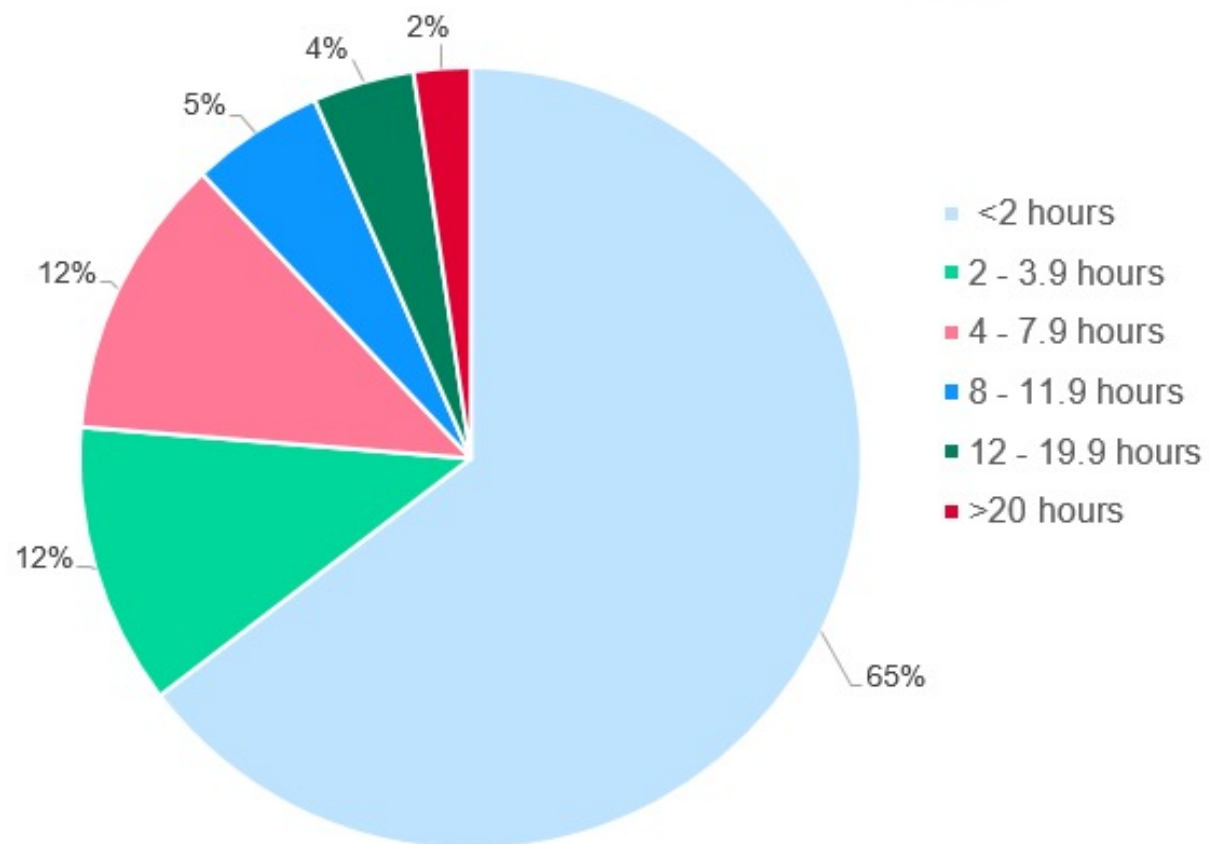
The use of eldercare services



Source: Danmarks statistik, Statistikbanken, AED21: Serviceindikatorer (pct. af befolkningen) efter område, serviceydelser og tid.

Home care services

Hours of home care used per week among recipients aged ≥ 67 years in 2021



Source: Danmarks statistik, Statistikbanken, AED07: Modtagere visiteret til hjemmehjælp, frit valg, efter køn, alder, område, tid, timer pr. uge og ydelsestype, Link: <https://www.statistikbanken.dk/20048>



Rehabilitation

Since 2015, municipalities have been required by law to offer rehabilitation courses:

- Limited in time
- Adjusted to the individual needs and capabilities
- Help to self-help (handling everyday tasks yourself)
- Intensive help in the beginning
- Care as "training" – staff monitors and support
- Care trainers, with therapists and nurses as back-up

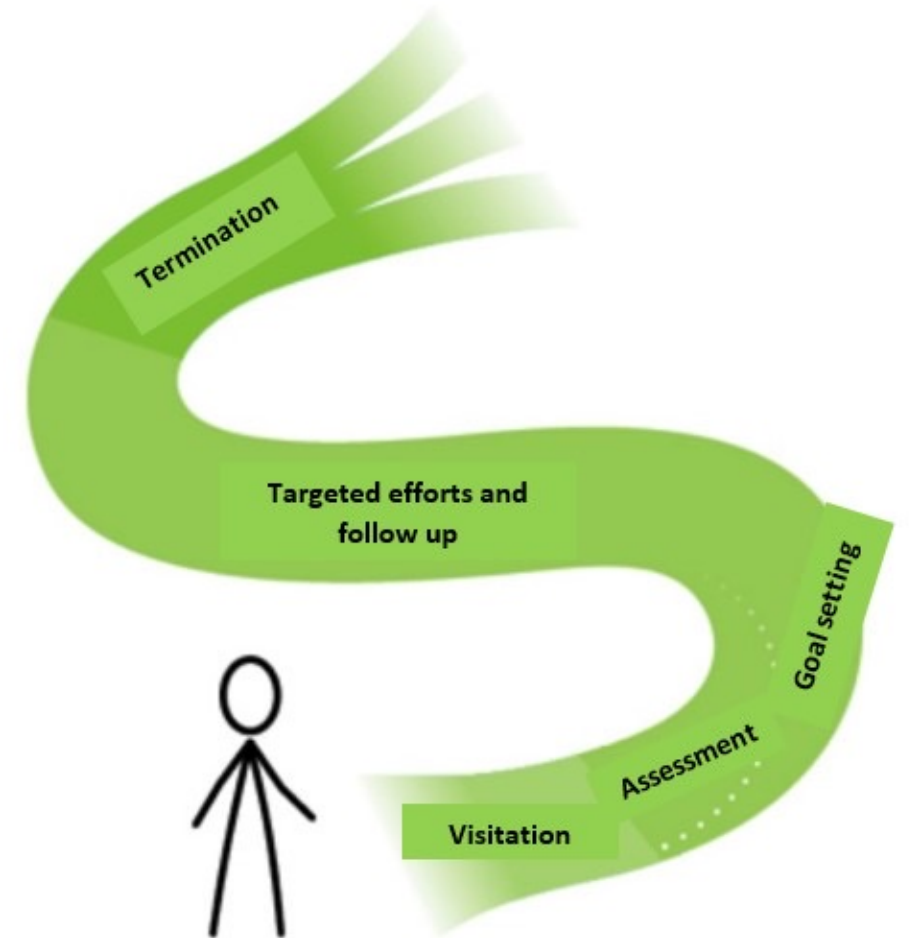
Change of paradigm:

- From compensation to rehabilitation
- From late to early intervention
- From care to prevention
- From senior burden to senior strength



Rehabilitation: the proces

- **Visitation:** A visitation initiates the course (8-12 weeks)
- **Assessment:** A course manager assess with the citizen, professionals and relatives the need for rehabilitation
- **Goal setting:** Goals increases the citizen's motivation and promotes a coordinated effort from the professionals
- **Targeted efforts and follow up:** Efforts are initiated in collaboration with the citizen, and continuously followed up
- **Termination:** At the end of the course goals and functionality levels are evaluated and follow up plan defined.
- **Possible revisitation**



Possible outcomes of rehabilitation

The rehabilitation course can have different outcomes in relation to the need for home care services:

- The elderly is **self reliant** and therefore **do not have a need** for home care services
- The elderly is **partly self reliant** and therefore has a **reduced need** for home care services
- The elderly has **increased independence** but **not reduced need** for home care services



Nursing homes
















- Senior citizens with loss of physical and/or mental function and need extensive care.
- Nursing home facilities are staffed 24 hours a day by healthcare professionals.
- Relatively few elderly people live in nursing homes (as most prefer to stay in their homes)

Focus on:

- Person-centred care
- Preserve individuality and sense of home
- Activities and connection to community
- Both wellbeing and health related care



Welfare technologies & assisted living

 <p>Self-monitoring / motivational technology Technologies for measuring or visualizing own progression. E.g. apps for training, measures blood pressure or tracks physically activity.</p>	 <p>Mobility technology Lifting chairs Hikers Catapult seats Ceiling lift Exoskeletons / computer controlled prostheses</p>	 <p>Hygiene technology Rinse / dry toilets Intelligent / sensor diapers Bath chairs</p>
 <p>Eating / meal technology Dining robots Robot arms / armrests 3D-printed food.</p>	 <p>Sensory technology Lighting, circadian rhythm light Snoezel, Sense room Sound and music therapy Robot pets Stimuli games</p>	 <p>Telemedicine Digital cross-sectoral solutions. Release Conferences Telemedicine, Heart failure</p>
 <p>Bed technology Mechanical care beds Turn sheets Sensor mattresses</p>	 <p>Medication management Automatic dosing machines Reminder / reminder solutions</p>	 <p>Social technologies Chat bots Online communities Virtual Visitors Telepresence robots</p>
 <p>Structure/ planning technology Monitors and information boards for planning of citizens' daily lives as well optimization of employees workflow. Structure apps, watches, etc.</p>	 <p>Training technology Tools for training and rehabilitation; apps, online training programs, sensor and video solutions, weight-relieving technologies as well as AR and VR technology.</p>	 <p>Digital patient education Web platforms, e-learning modules, webinars m.m.</p>
 <p>Screen visit Video solutions for virtual or online housing benefit / home care / nursing, Apps, tablets</p>	 <p>Security-creating technology GPS systems Sensor floors Locks / alarm systems Smart home technologies Voice control</p>	 <p>Cleaning and service technology Robot vacuum cleaners Service robots (waste, laundry) Disinfectants Floor cleaners</p>



https://nordicwelfare.org/wp-content/uploads/2019/06/Nordic-Ambient-assistive-Living_2019.pdf

<https://www.healthcaredenmark.dk/media/plvbj4yz/elderly-care-v10919.pdf>

Discussion on future elderly care in Denmark

- **Interdisciplinary teams** to enhance continuity and quality (especially home care)
- **Attractive workplaces** with focus on professional communities and leadership
- Reduce unnecessary **documentation** and ineffective **organization** to increase time to professional core efforts
- Enhance **cross-section collaboration** with focus on patient/citizen's needs
- Healthy ageing and **rehabilitation** even further as core approaches
- **Welfare technology** and **digital solutions** to enhance quality and empowerment

