



Annual Review

Building caring and inclusive communities









About ESN

The European Social Network (ESN) brings together people key to the design and delivery of local public social services across Europe to learn from each other and contribute their experience and expertise to building effective social policy and practice.

Together with our Members from 25 countries we are determined to provide quality public social services to all and especially to help improve the lives of the most vulnerable in Europe.



Letter from the Director



.....
John Halloran
.....
Director
.....
European Social
Network
.....

Protect vulnerable people. Respond to users' needs and preferences. Respect dignity. Pursue excellence in social care. Promote equality and non-discrimination. Promote solidarity.

Dear members and friends of ESN,

In this annual review we look back over our network’s activities in 2009 and ahead to 2010, the European Year of Combating Poverty and Social Exclusion. There have been a number of highlights for me this past year, notably the filming sessions in Prague, Barcelona and Ghent for “Listening to users and their carers”. This film was made for the European Year 2010 and brings the voice of service users and their carers to the fore.

We were delighted that the European Parliament adopted an amendment proposed by ESN to the draft directive on cross-border health care. This would encourage Member States to ensure continuity of health and social care when a person receives treatment in another EU country (page 22).

Our working group *Children and Families* (page 16) participated in a meeting organised by Eurochild and MEPs about combating child poverty. This was an opportunity to bridge the gap between local practice and the European policy debate. I also took part in a conference in Brussels on measuring child poverty. I supported the development of a more sophisticated measure of poverty than by relative household income and urged that children in public care, especially in institutions, not be forgotten.

The Spring Seminar 2009 (page 10) examined just this issue: managing transitions from institutional to community care. Later in the year, we invited a number of former health ministers to join a high-level advisory committee (see picture opposite), which will advise us on how to ensure this issue gets the political priority it deserves.

We welcomed 18 new members to the Network this year. I hope that you’ll see a concern across all our areas of work for user-led services, with a joint emphasis on quality care and inclusion in society. This report is very much a snapshot of our work across a range of themes. I hope it will encourage you to explore further.

We look forward to working with members and friends of ESN in 2010 and beyond.

John Halloran
Director



ESN director with members of the High Level Advisory Committee (HLAC), October 2009, Brighton. From left to right Władysław Sidorowicz, Agnes Simonyi, Bo Könberg, John Bowis and John Halloran.

John Bowis OBE

President, Health First Europe; formerly Member of the European Parliament, UK Under Secretary of State for Health and advisor to the World Health Organisation.

Štefan Čulík

Head, Department of Social Services and Social Inclusion, Ministry of Labour and Social Affairs, Czech Republic; Member of European Commission High Level Group on Disability. (not pictured).

Virginia Bras Gomes

Vice-Chair, UN Committee on Economic, Social and Cultural Rights; Senior Social Policy Advisor, Ministry of Labour and Social Solidarity, Portugal (not pictured).

Bo Könberg

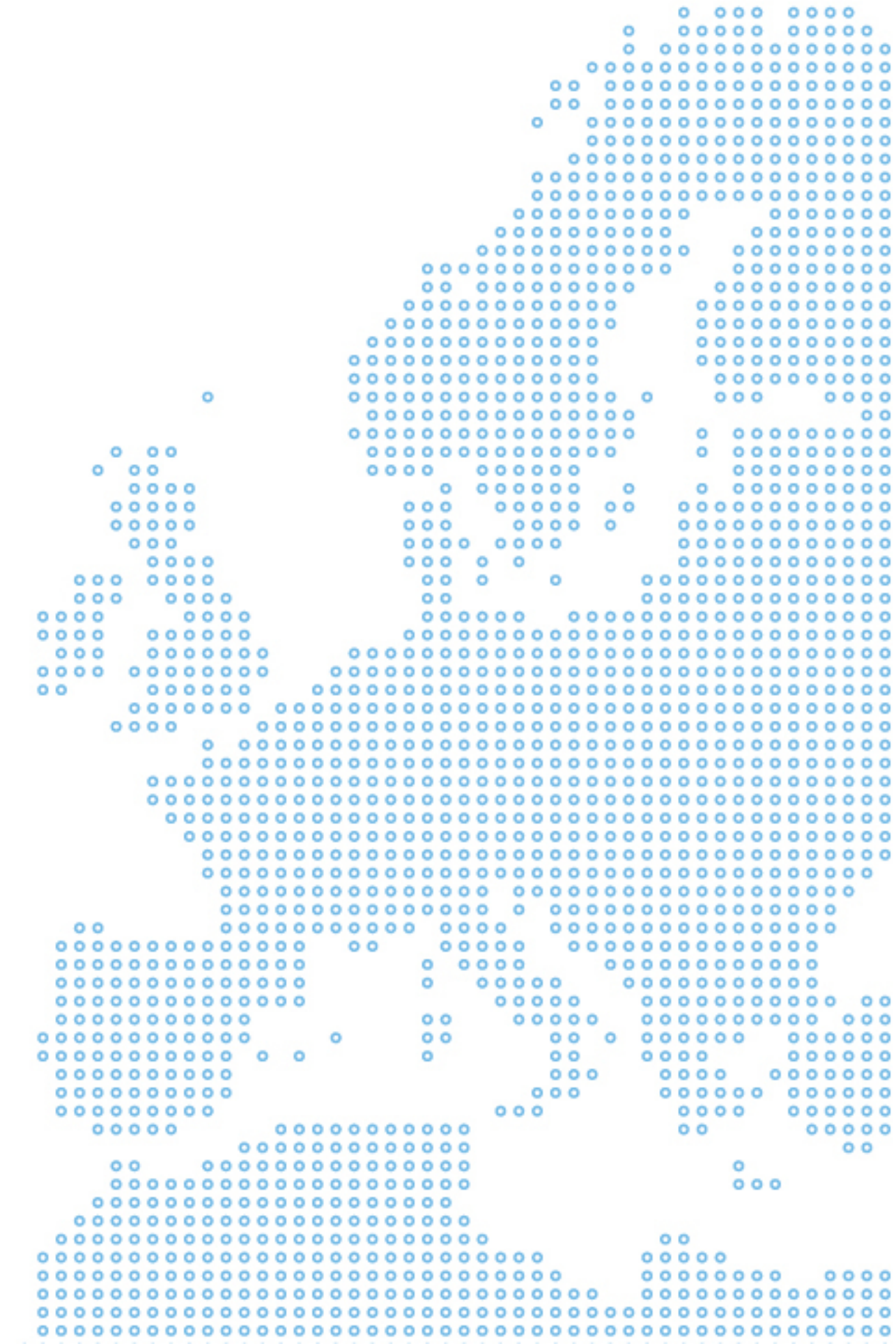
Governor, County of Södermanland in Sweden; formerly Minister of Health and a Commissioner for Health and Social Affairs in the County of Stockholm.

Władysław Sidorowicz

Chair, Health Committee, Polish Upper House of Parliament; former Minister of Health and advisor to the World Bank.

Agnes Simonyi

Director General, Hungarian Institute of Social Policy and Labour and advisor to the government; formerly Deputy Secretary of State for the Ministry of Labour in Hungary.



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Developing community care

ESN Spring Seminar Warsaw

May 2009

ESN has made a long-term commitment to supporting the development of community care. The Spring Seminar in Warsaw was just the beginning of this – later in the year a working group and a high-level advisory committee were established to take this commitment forward.

“Institutions make mental health problems chronic, instead of focusing on rehabilitation.”

Lorenzo Rampazzo,
Veneto Region, Italy.

Institutional care was the traditional way of housing and looking after, for example, people with disabilities or mental illness. The shift towards community care is yet to be completed and ESN is committed to promoting learning and exchange among its members to help them realise this important transition.

“It is relatively easy to close down the institutions, but in Poland re-building social cohesion is a difficult long-term process that requires the cooperation of many stakeholders,” comments Agnieszka Pierzchalska, “Yes, in Reykjavik too, we still have a lot to do to improve our services,” confesses Sigrún Ingvarsdóttir from Iceland.

Sigrún and Agnieszka were taking part in the Warsaw seminar, the aim of which was to look in detail at how to manage the transition to community care. Presenters spoke about their own experiences of closing down institutions and setting up what are in some cases pioneering, community-based services. “We took a lot of time to prepare and implement the change” admits Lars-Göran Jansson from Sweden. “Do not repeat our mistakes, but learn from them” he urges his colleagues.

The role of social services changes with community care, explains Miràn Kerin from Slovenia: “We move from passive care to the active creation of personalised services”. This transition is a challenge for the whole community, as Lorenzo Rampazzo from Italy reflects: “To explain this change to the public, you need to better communicate social services’ work, values and achievements to the local and regional press.”

Communication is key to cooperation and personalisation: these are vital elements of community care. Dieter Kulke from Germany explains what he understands by community care: “It’s about working together across the traditional boundaries of services and working closely with the users.” John Dixon from the UK agrees: “Building care packages around the user’s wishes, not around existing services, is the essence of personalisation.” Halina Lipke from Poland concludes that external regulation and inspection of community services is an important factor in guaranteeing users’ safety and driving up quality.

According to Julie Beadle Brown of Kent University’s Tizard Centre, the single most important element of all is vision: “If you have a vision, you’ll find the way.”





“I am very keen
to implement all
these good practice
examples at home,
but of course it will
not be easy.”

Martial Milaret,
L'Orne Region, France.

Developing community care
Policy and Practice Group and High
Level Advisory Committee

The Warsaw seminar marked the beginning of the long-term project *Developing Community Care*. ESN's vision is to build up a knowledge base on deinstitutionalisation and generate political support for it. Nine ESN practitioners from different social and health care models have come together as members of a new policy and practice group. They are reviewing the difficulties of closing down institutions and assessing how community care can best be introduced as a sustainable model. They are gathering evidence and good practice examples on a range of service user groups.

"Visiting services on the ground and listening to colleagues is making it clear that there is no 'single model' of community care: "we all have to find our own version of it," says Mikael Johansson from Sweden. "But the values remain the same across Europe: respect, independence, choice and dignity" says Ralitsa Petrova from Bulgaria. "Community care is harder to manage than residential care," says Mikael, "it changes with every new user but you try to keep steering it in the right direction."

The transition to community care, like any important reform, requires not only professional know-how, but also political will and support. ESN launched a high-level advisory committee in Autumn 2009. Its members are former government ministers, who have worked with the United Nations, the World Bank and the European Parliament and are currently serving in a range of high-level posts.

Together with these advisors, ESN will prepare a campaign to support progress towards community care among policy-makers. "We must ensure that modern, empowering and person-centred community care services receive adequate political backing in terms of legislation and funding. It is our duty to local communities," stresses John Bowis from the UK. "We have all the elements now," says Władysław Sidorowicz from Poland, "deep understanding of the issues, shared values and a strong commitment to bring about change. And finally we have the EU with its Structural Funds and ESN to take the lead."



Above:
Agnes Simonyi, Director General of the Hungarian Institute of Social Policy and Labour at the High-level Advisory Committee meeting, October 2009.

Results of a survey of delegates from the ESN Spring Seminar. Question: Who had most concerns about the closure of large institutions?

Results 2009

| | |
|---------------------------|----|
| NGOs | 4 |
| Local community | 5 |
| Families of residents | 15 |
| Residents of institutions | 5 |
| Social professionals | 3 |
| Health professionals | 7 |
| Staff | 28 |
| Local government | 14 |
| Central government | 7 |



**With kind thanks for
their participation in
the working group to:**

Zsolt Bugarszki

Lecturer, University of Budapest,
Institute for Social Policy
and Labour, Hungary.

Aleksandra Calosević

Head, Social Innovation Fund,
Serbia.

Bruno Forti

Director, Mental Health
Department, Municipality
of Belluno, Veneto Region, Italy.

Cate Hartigan

Assistant National Director,
Health Service Executive, Ireland.

Mikael Johansson

Director, Social Services,
Municipality of Munkfors,
Association of directors of
Swedish Social Welfare
Services (FSS), Sweden.

Ralitsa Petrova

Senior Expert, Department
of Social Affairs, Municipality
of Sofia, Bulgaria.

Klaus Schumacher

Head of Institute, Network for
integrated Health and Social
Systems Delivery, Austria.

Radka Soukupová

Chair, Social Committee,
Union of Czech Towns and
Municipalities (SMO CR)
Czech Republic.
(not pictured)

Guido Verschaeren

Senior Manager, OCMW Arendonk,
Flemish Association of Social
Directors (VVO), Belgium.

Ingrid Stegmannová

Head, External Relations,
Union of Czech Towns and
Municipalities (SMO CR),
Czech Republic.

Building partnerships in mental health

ESN Autumn Seminar Madrid November 2009

This seminar focused on how social services work together with other agencies and stakeholders to support the inclusion of people with mental health problems in society and the labour market. It marked the beginning of ESN's commitment to contribute to the development of the European Pact on Mental Health and Wellbeing over the coming years.

Mental health and wellbeing is a crucial issue for society. Poor mental health can often be a principal reason for early retirement and has been linked to an increase in disability benefit claims. People with mental health problems find it harder to get a job or to keep it. Conversely, people at the margins of society may be more prone to experience anxiety, depression or more serious mental health disorders. In other words, social exclusion and mental health problems reinforce one another. Support for people with mental health problems, therefore, needs to go beyond medical treatment to include community-based social services. To overcome the risk of exclusion, it is important to tackle the stigma attached to poor mental health.

"We need to enhance coordination between different public services and between public services and the workplace to favour sustainable socio-economic inclusion," said Robert Anderson of the European Foundation for the Improvement of Living and Working Conditions (EUROFOUND).

Coordination of services was one of the main themes of the Spanish National Mental Health Strategy, an evaluation of which was presented at the ESN seminar in Madrid. Jürgen Schefflein from the European Commission's DG Health and Consumer Affairs presented the European Pact of Mental Health and Wellbeing, which seeks to raise the profile of this issue over the coming years.

The seminar in Madrid was a timely opportunity for social and health service managers from around Europe to share their experiences of encouraging social and economic integration of people with mental health problems. "Individuals with mental illnesses are more vulnerable and many of them need help to live a life of dignity, creativity and independence," said Fernando Lamata Cotanda, Regional Councillor of Health and Social Welfare in Castille-La-Mancha.

BT Group in Spain contributed to the debate by presenting their corporate strategy for promoting mental wellbeing among their staff, which has led to an increase in productivity. "Investing in mental health can improve the emotional resilience of our employees and their ability to cope with stress," commented Antonio Hernández Nieto, Health and Safety Advisor from BT Group.

"It was very interesting to see how the private sector supports the mental wellbeing of its employees with the aim of improving their efficiency," observed Darja Kumnova, ESN member from Slovenia.

In the seminar, access to housing and the labour market was recognised as an important issue in social integration. "Mental health could be both a cause and a consequence of homelessness," said Stefania del Zotto from the European Federation of National Organisations Working with the Homeless (FEANTSA), highlighting the high prevalence of poor mental health among homeless people. She also noted that the dual diagnosis of mental illness and alcohol or substance abuse is common among homeless people.

ESN will launch a working group in 2010 to look at how social services work with a range of partners to promote quality care and social inclusion for people with mental health problems.



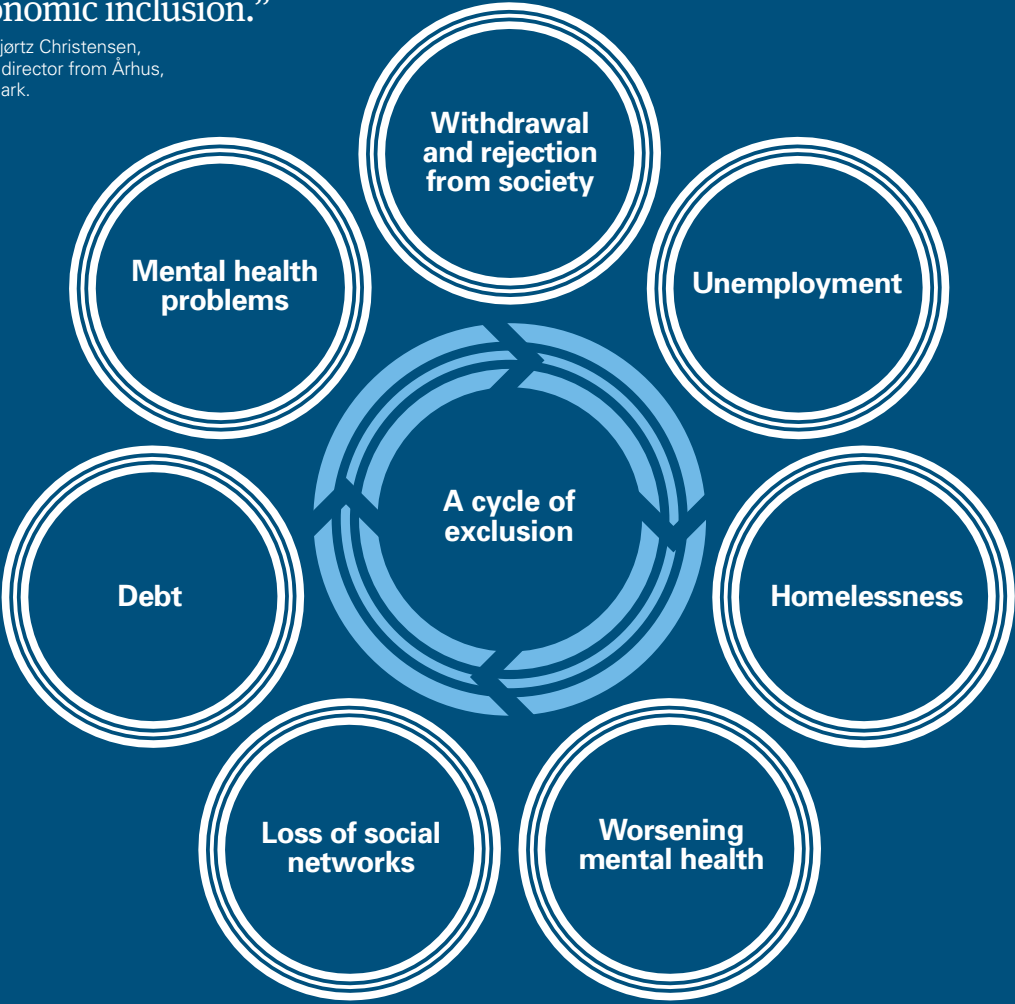
Above:
Antonio Hernández Nieto,
Health and Safety Advisor
from BT group speaking
in Madrid.



“We need to enhance coordination between different public services and between public services and the workplace to favour sustainable socio-economic inclusion.”

Leif Gjørtz Christensen,
social director from Århus,
Denmark.

Diagram below shows the cycle of social exclusion.
Source: 2004, Office of the Deputy Prime Minister, UK:
Mental Health and Social Exclusion, Social Exclusion
Unit Report, page 20.





With kind thanks for
their participation in
the working group
from left to right:

Antonietta Bellisari

Manager, Integration of Social and Health Services, Department of Social Services, Lazio Region, Italy.

Francesc Reverter

Planning Officer, Social Welfare Department, Province of Barcelona, Spain.

Aidan Browne

Chief Executive, Children Acts Advisory Board, Ireland.

Marta Korintus

Head, International Relations Department, Institute for Social Policy and Labour, Hungary.

Martial Milaret

Director, Children and Families Services, County of L'Orne, French National Association of Directors of Social Care and Health of the Départements (ANDASS), France.

Judita Kachlová

Assistant Manager, Department of Socio-legal protection of Children, City of Ostravá, Association of Towns and Municipalities (SMO CR), Czech Republic.

Leif Gjørtz Christensen

Director, Employment and Welfare Services, Municipality of Viborg, Association of Social Directors (FSD), Denmark.

Children and families: breaking the cycle of deprivation

Policy and Practice Group

The working group on children and families held four meetings during 2008-09, where social directors and senior professionals focused on breaking the cycle of deprivation. The group has supported ESN's contribution to EU policy-making on child poverty and exclusion. A report based on the group's work was published recently.



“Children’s and young people’s needs should be met and fulfilled no matter what physical or mental disabilities they suffer from or the social disadvantage they might have.”

Leif Gjørtz Christensen,
Director of Employment
and Welfare Services,
Municipality of Viborg,
Denmark.

Although the European Union often frames child poverty primarily in terms of material deprivation, social work practice indicates that it is a far more complex issue. The ESN working group on services for children and families adopted a broad approach to child welfare. It analysed social services’ interventions in favour of breaking the cycle of deprivation. Members also shared lessons from contemporary social work and care practice, including issues of quality management and inter-agency cooperation.

Models of children’s services vary widely across Europe and resources can vary widely too, even within countries: “In the Czech Republic, big city districts have social departments with specialised sub-departments, whilst there is only one social worker at offices in small districts,” reports Judita Kachlová, a social work manager from Ostravá.

Social services work with children who are experiencing a range of problems that ‘exclude’ them from realising their potential. Children may be victims of physical or psychological harm, have addiction problems, a physical disability or be involved in criminal activity from an early age. Social services work with partners in health, education, housing and social benefits to coordinate services in the best interests of children and their families. Assessment is a vital stage in understanding why a child is at risk of harm. Antonietta Bellisari from Lazio Region describes how this works in practice: “When a child enters a public institution, the social care services prepare a project of assistance which assesses the child’s personal, family and social situation.”

Evaluation based on outcomes is becoming increasingly important too, as services are concerned to demonstrate that their methods really improve children’s lives. Evaluation has to take account of the fact that services are working together more closely. Children’s services are under pressure to protect children from potential harm and to break the cycle of deprivation, but working in partnership they are better placed to do so.

The ESN working group on children and families joined a hearing at the European Parliament organised by Eurochild on the National Reports on Strategies for Social Protection and Social Inclusion. John Halloran expressed concern that the work of social services in addressing the exclusion of children was not properly reflected in these strategies: “It fails to recognise the role of social services as key players when it comes to bringing together all agencies dealing with exclusion, from education and health to housing and employment.”





Above: Participants from the UK and Germany compare and contrast the relationships between different stakeholders at ESN's workshop, 3 November 2009.

Contracting for quality

Policy and Practice Research Project

This research project examines the relationships between financier, provider and user in the area of long-term care for older people. Two ESN workshops brought together practitioners and experts from four countries to review how these relationships are structured. The project will conclude with a final report in Autumn 2010.

Contracting, commissioning or outsourcing are familiar practices and politically sensitive issues in some cases, but any organisation that finances, regulates and/or provides services for dependent older people is involved in a complex set of relationships.

Different institutions fulfil the same function in different countries. Sweden's 290 municipalities generate income from local taxation, central government grants and user fees in order to fund the provision of services, whether they do this in-house or make a contract with another provider to do so. In Belgium or Germany, however, it is the insurance companies that generate income from people and use this to fund the cost of running care. At the same time, tax-payers pay the costs of regulating the system and help co-finance the infrastructure through government grants. In the Belgian model, the public social welfare centres (OCMW/CPAS) are a provider among others, but like the German *Sozialamt*, which is attached to the municipality, they help people without insurance to pay for their care and promote coordination among different actors in the local area.

Local authority social workers in England assess and advise people on their care needs; in Germany this role is played by the medical services of the health insurance funds (MDK). The *Sozialamt* in Germany play a subsidiary role: many offer advisory offices in conjunction with non-profit organisations to support vulnerable citizens in managing their care. The MDK also accredits and inspects service providers. This role is performed by a different agency in England, the Care Quality Commission (CQC), a national public regulator.

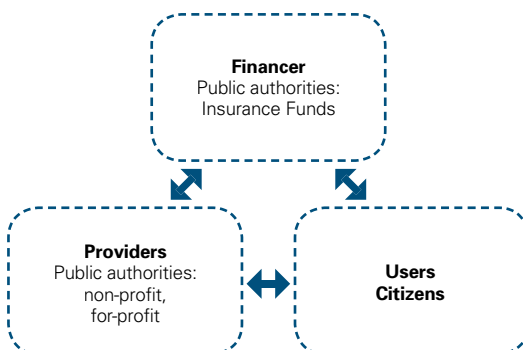
A number of 'contractual relationships' can be identified here, for example:

- between a policy-holder and an insurance company in Germany or Belgium
- between a resident paying taxes and the municipality in Sweden or the UK
- between an insurance company or a municipality and a provider
- between citizens and public regulators of quality (MDK, CQC).

These relationships have financial, legal, regulatory and institutional aspects, and they all affect the quality of the service provided and need to be grounded in the long-established values of social work and care.

With this project, ESN is concerned to help its members strive for higher quality services through a better understanding of these complex relationships.

Diagram below: ESN is exploring the contractual and other relationships between financier, provider and user in care for older people.



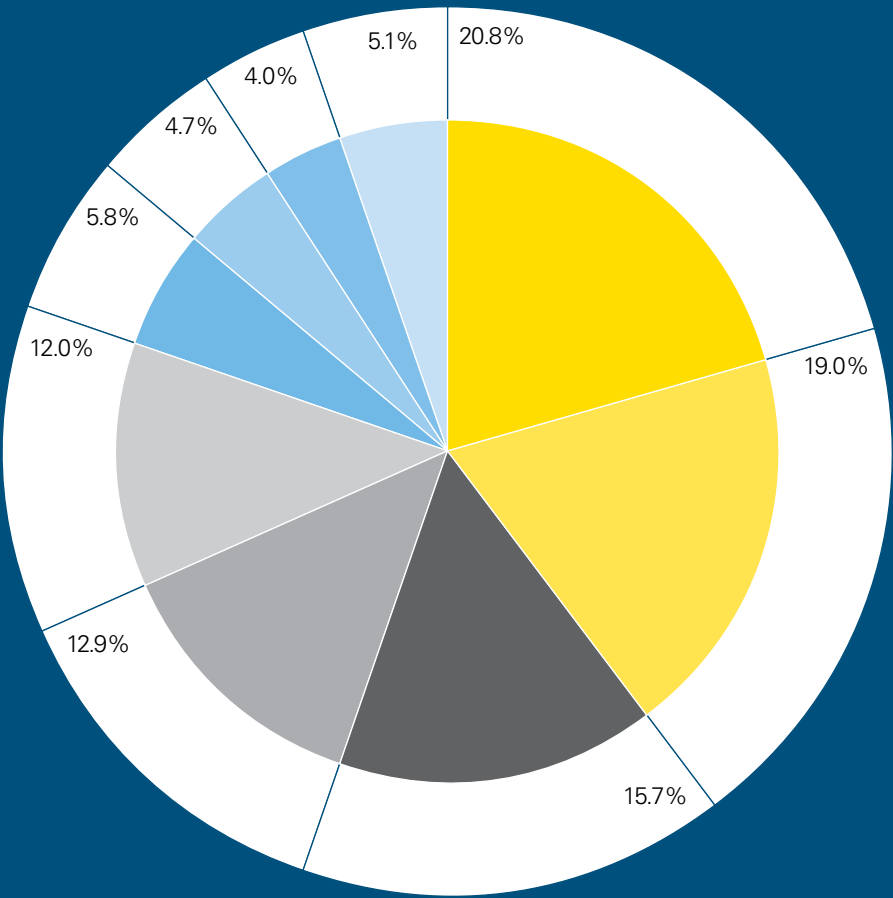


Diagram above shows the percentage of local and regional government expenditure on different sectors in 2007 for whole EU. Source: Dexia presentation to ESN workshop.

| | |
|-------|-----------------------------|
| 20.8% | Education |
| 19.0% | Social protection |
| 15.7% | General public services |
| 12.9% | Health |
| 12.0% | Economic Affairs |
| 5.8% | Housing community amenities |
| 4.7% | Public order and safety |
| 4.0% | Environment protection |
| 5.1% | Recreation |

Managing social services in times of crisis

Policy and Practice Workshop

How are social services adapting to the pressures on resources and demand during the financial crisis? ESN organised a workshop where managers discussed their changing priorities and what the crisis may mean for the future of the welfare state.

Local and regional government had experienced high growth since 2000 due to economic prosperity, decentralisation and European funding (in Central and Eastern Europe). By 2006, the value of social protection expenditure by local and regional government amounted to 3% (€378.1 billion) of the European Union's GDP. In 2009-10, the financial and economic crisis led on the one hand to rising demand for services and benefits and to falling revenue on the other. New welfare clients included lower-middle class families whose wage-earner(s) had lost their job(s) and who had debt problems.

The impact on local government revenues depends on the source of their revenues. Some local authorities have made losses on capital invested in failed banks while others have seen real estate value drop and the cost of loans rise. Declines in local revenue have been mitigated in some countries, e.g. Sweden, by central government support, itself dependent on high levels of public sector borrowing.

Local and regional authorities around Europe are re-assessing their spending priorities both within the social area and across different areas. The Galician Regional Government, for example, has reduced expenditure in building new local social services centres (-65%) and in other programmes (-25%). In total, though, expenditure is set to increase by 11.4%, largely due to the increase in compulsory benefits expenditure (+42.7) and home-care (+48.6%) thanks to the introduction of the dependency law in Spain.

In Latvia, meanwhile, Riga City Council's 2010 budget foresees a 132% increase in minimum living benefits and 13% in housing benefits, offset by a 50% reduction in health care benefits for low-earners and reductions in social care and rehabilitation. Meanwhile pay cuts of up to 20% for municipal employees have been enforced.

Elsewhere, in Scotland (UK), Finland and Iceland, the financial crisis has reinforced questions about the affordability of certain aspects of the universal welfare state. Harri Jokiranta, deputy city manager for social services in Seinäjoki (Finland), for example, notes a new questioning of the culture of entitlement by which a citizen takes up services and benefits to which they have the right, but do not necessarily need.

The president of the Association of Directors of Social Work (ADSW) in Scotland, Harriet Dempster, says: "We are in a very difficult financial situation. It's time to discuss [free personal and nursing care] and to debate whether we are getting the very best outcomes for our older people in continuing this policy."

Given that the economic situation of local and regional government typically lags behind the business cycle by up to two years, these questions are likely to become all the more pressing in the years ahead. ESN will continue to work with its members and other stakeholders to meet the challenge.



Download ESN paper "Managing social services in times of crisis" and workshop presentations at:
www.esn-eu.org/e-newsletter-jan10-recession-paper

ESN is committed to making a practice-based contribution to European policy-making. During 2009 we contributed to policy debates on health care as well as on social care and inclusion.

Health is also social

Draft Directive on Cross Border Healthcare

Promoting the continuity of health and social care

The European Commission proposed a directive to facilitate access to health care treatment for EU citizens in other EU Member States in 2008. ESN believes that the continuity of care from health to social services should be strengthened in this proposal. An amendment proposed by ESN was adopted by the Parliament at its first reading – recital reference 46(a):

The Member State of affiliation and the Member State of treatment should by prior bilateral cooperation and in consultation with the patient ensure that appropriate aftercare and support is made available in either country following the authorised medical treatment and that clear information is available to patients about aftercare options and costs.

To do this, Member States should adopt measures to ensure that:

- (a)** the necessary medical and social care data are transferred with due regard to patient confidentiality;
- (b)** medical and social care professionals in both countries are able to consult each other to ensure the highest quality treatment and aftercare (including social support) for the patient.

ESN is pleased that the Parliament adopted this amendment in May 2009; however the draft directive remains the subject of intense negotiations among national governments.

Raising social care's profile alongside health

ESN responded to a European Commission Green Paper from DG Health and Consumer Protection. Here, we pressed for the Commission to recognise that many of the challenges faced by the health sector are also faced by social services. We advocated that:

- the Commission uses the follow-up to the Green Paper to raise the profile of social work and care on an equal footing with health
- the Commission promotes an alignment of workforce planning with the policy goal of many countries to improve health and social care coordination
- the open method of coordination on social protection and social inclusion plays an important role in supporting Member States to meet the challenges of the care workforce.

ESN is organising a seminar on this topic in Spring 2010.





European
Social
Network

Dear Ministers,

Local social work and care services make a difference to the lives of millions of Europeans by combating social exclusion and poverty.

European Social Network supports service managers, regulatory and research bodies to learn from each other to improve the quality of services including: long-term care, child poverty, active inclusion and deinstitutionalization. Talking with our members about current issues before the Council we urge Members States to:

1. **Promote continuity of care between health and social services by supporting recital 46 (a) of the patient rights directive at its second reading.**
2. **Support social services' work in promoting equality by working towards a directive to outlaw all forms of discrimination in every area of life.**
3. **Increase opportunities for mutual learning among local public social services and partners at European level by supporting a renewed social OMC beyond 2010.**

We look forward to your support on these issues.

John Halloran
ESN Director
john.halloran@esn-eu.org

Above: The Parliament Magazine, August 2009.

A better profile for social services in the social OMC

8th Round Table on Poverty and Social Exclusion

ESN was strongly represented at the 8th Round Table on Poverty and Social Exclusion, co-organised by the Swedish EU Presidency and European Commission on 15–16 October in Stockholm. Lotta Persson and Lars-Göran Jansson, the chair and secretary of the association of Swedish social directors (FSS), ESN member in Sweden, also took part. Lotta was involved in a special workshop on the Swedish social model held at the national parliament.

This was an important opportunity for ESN members, social directors and senior care professionals to share their experience and expertise of working at local level with a wide range of European stakeholders. This included regional ministries, NGOs, European organisations and to some extent regional and local public services.

“People who have been out of work for a long time may have lost trust in the system, and it takes a particular skill to listen to them and restore their trust. We have to start looking at people as problem-solvers rather than as victims,” says John Halloran, reporting back to plenary from a workshop in which members of the ESN working group on active inclusion from Finland and England had participated.

“There is moral panic about disastrous outcomes in child protection which is not necessarily a failure of child protection, but of the whole of society,” says Aidan Browne from Ireland, a member of the ESN Children and Families working group, who was a discussant in a workshop on child poverty. He recalled the particular situation of children in care and children who have experienced abuse in the home, issues which were picked up by Jana Hainsworth of Eurochild in her workshop report.

Six ESN members from Ireland, Germany, Finland, Sweden and UK and the ESN Secretariat were represented at the Round Table in Stockholm, bringing to the forefront the voice of local social services across Europe.

“We have to start looking at people as problem-solvers rather than as victims”

John Halloran speaking at the Round Table in Stockholm.





Above: ESN chair Lars-Göran Jansson with Maria Larsson, Swedish Minister for Elderly Care and Public Health. Larsson opened the round table by reminding the audience that they had “a lot to learn from each other, even if welfare states and systems differ.”



“Great opportunities for information, dialogue and networking with delegates from across Europe.”

Terry Madden,
Dublin City Council,
Ireland.

“This event sends a signal that the social dimension of European unity is an important issue which must be given a high profile.”

Vladimír Špidla, European
Commissioner for Employment,
Social Affairs and Equal Opportunities.

Prague 2009: quality and performance in social services

17th European Social Services Conference

The 17th European Social Services Conference, held in Prague on 22-24 June 2009 welcomed 410 practitioners, policy-makers and researchers from over 30 countries. It was organised in cooperation with the Czech EU Presidency and hosted four plenary sessions and 28 workshops.

Among keynote speakers at this important event for social services were: Vladimír Špidla, the European Commissioner for Employment, Social Affairs and Equal Opportunities; Jérôme Vignon, Director for Social Protection and Integration at the European Commission; Maria Larsson, Swedish Minister for Elderly Care and Public Health; and Petr Šimerka, Czech Minister for Labour and Social Affairs.

Participants were welcomed by Oldřich Vlasák MEP, vice-president of the Council of European Municipalities and Regions (CEMR) and President of the Union of Towns and Municipalities of the Czech Republic (SMO CR), a member of ESN which helped organise the Prague conference. “Whether politicians or professionals, the conference message is that we must meet the needs of all our citizens,” said Vlasák.

The Prague conference recognised that developing social services of the highest quality and performance is the ambition of all those responsible for meeting the needs of citizens. It also recognised that ensuring good outcomes is all the more important at a time when there is pressure on public finances.

A number of key questions were posed: what systems of quality are there and how are outcomes measured? How can those who use social services be involved in monitoring quality? What should the balance be between cost and performance? How can a contracting or ‘commissioning’ approach act as a lever to raise standards?

28 workshops addressed these and other questions, with themes ranging from tackling domestic violence in Sweden to preventing child trafficking in Albania; from reducing child deaths in Europe to applying quality management systems in services for the homeless in Spain; from discussing educational support for youth at risk in Germany to raising the quality of the services supporting drug abuse in the Czech Republic.

The final Round Table looked at the issue of quality standards and measurements.

“Better quality is sometimes treating people better,” said Fabrice Heyriès, Director General for Social Action in France. Catalunya’s Deputy Director General for social action, Esther Rovira Campos, took up the point: “Better motivated staff will also improve quality. We can be more efficient by adapting services to the changing needs of individuals.”

“We’re beginning to look at the results more and more,” said Lotta Persson, chair of the association of Sweden’s social directors: “If we are going to improve the quality of our services, we have to evaluate ourselves all the time.”

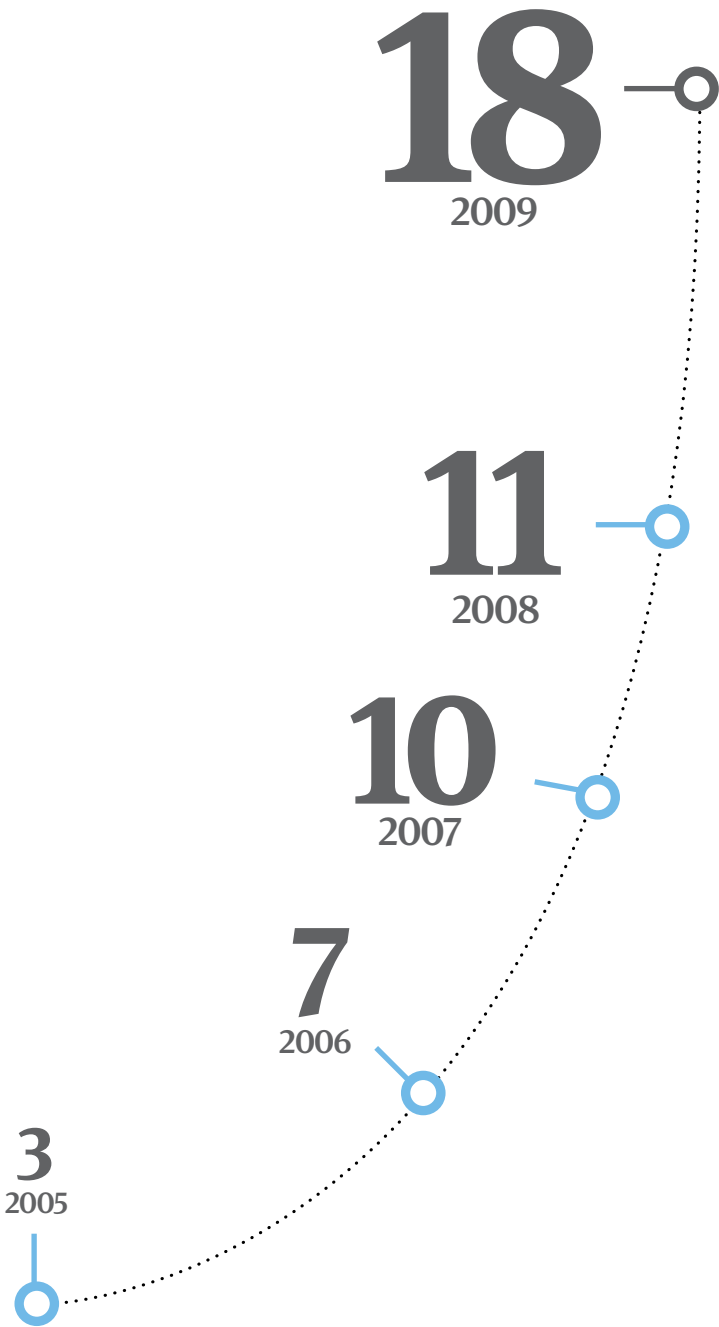


In 2009, ESN has had a 25% increase in membership.

ESN Members in 25 countries:

- Azerbaijan
- Belgium (2)
- Bulgaria
- Cyprus
- Czech Republic
- Denmark (2)
- Finland (4)
- France (2)
- Germany (4)
- Greece (3)
- Hungary
- Iceland
- Ireland (3)
- Italy (7)
- Netherlands (2)
- Norway
- Poland (2)
- Romania (4)
- Serbia (4)
- Slovakia
- Slovenia
- Spain (6)
- Sweden (3)
- Switzerland
- UK (13)

Diagram shows the number of new members that joined ESN each year 2005-2009.





In 2009 ESN welcomed 18 new members in 10 European countries including cities, regions, research centres and regulatory agencies.

Meet ESN members
Working with Members



Alexis Jay
Chief Executive
of the Social
Work Inspection
Agency Scotland
United Kingdom

“With coordination
and leadership from
ESN we are able to
drive up standards for
all who need to use
social services.”

Alexis Jay



**Matthias
Schulze-Böing**
Head of National
Network
for Local
Employment
Germany

“Across Europe there
is huge potential for
synergies at local
level – I believe we
can achieve more by
working together.”

Matthias Schulze-Böing



Agnes Simonyi
Director General
of the Institute
of Social Policy
and Labour
Hungary

“Be open and
interested, leave
prejudices behind
and try to understand
genuine differences
between countries.”

Agnes Simonyi



Luc Kupers
Chair of the
Association
of Flemish Social
Directors
Belgium

“The true level
of development
is measured by
the efforts to
support the most
vulnerable.”

Luc Kupers

Meet ESN members

Working with Members



**Daniel López
Muñoz**

Autonomous
Government
of Galicia
Spain

Daniel is deputy director of social services responsible for social inclusion and cooperation with municipalities in the Autonomous Region of Galicia. He and his team manage over 500 different programmes, benefits and pensions for 55,000 users, delivered by local authorities and non-governmental organisations.

Just like many regions in Europe, the Galician government is trying to do more with less in the current economic climate, but at the same time it is implementing the Spanish State Dependency Act. This gives users the rights to residential care, day centres, home care, benefits and other forms of support. Because it has received widespread media coverage, the Galician government is keen to protect these services from cuts. "Any expansion is linked to the implementation of dependency rights so the risk is that the other pillars of social services, such as social inclusion, may suffer," explains Daniel.

The biggest challenge for social services across Europe is to deal with the diversity of models: "We should very much respect diversity but, at the same time, build up a common conceptual reference: what a social need is; what a social right is; what social services are – and for that particular reason, something like ESN is not only advisable, but necessary."



**Aleksandra
Čalošević**

Social Innovation
Fund
Serbia

Sometimes Aleksandra, Head of the Social Innovation Fund in Serbia, feels a little pessimistic because change comes slowly. But that does not affect her dedication to her work, managing 47 local projects and motivating her staff.

The Social Innovation Fund (SIF) is a programme of the Serbian Ministry of Labour and Social Policy, implemented in partnership with the UN Development Programme and the European Commission. In operation since 2003, SIF provides grants to local stakeholders to initiate social protection services at local level, supporting them financially for 12 months and encouraging local authorities to provide funding for these community care projects in the longer run.

Currently, SIF is supporting the development of new day care centres for children, home care for the elderly, as well as supported living for children and young people leaving care. Some of these projects were quite innovative for Serbia, such as drop-in centres for homeless children and independent living for people with intellectual disabilities. "The projects demand a lot of follow-up work," Aleksandra explains, "but despite many challenges within the system, they survived. This was very exciting for us all."

Events in Romania,
Sweden and France
Working with Members

“We recognise the value of international cooperation and through ESN we are determined to work together with colleagues around Europe, to exchange good practice and learn from each other.”

Sorin Apostu,
Mayor of Cluj,
Romania.

“It is very important to have workshops in the FSS conference presenting the European view reflecting on common challenges such as: deinstitutionalisation of care, decentralisation of services and the development of quality social services.”

Mikael Johansson,
Director of Social Services,
Municipality of Munkfors,
Sweden.



Romania

National Conference on Social Services

The Municipality of Cluj, with the support of ESN, organised the first national conference on social services in Romania on 25-26 May, 2009. This event brought together 150 social directors and other practitioners.

Delegates discussed the position of social services in policy-making, assessed challenges in their daily work and presented good practice examples. Six different workshops and two plenary sessions provided a platform for structured debate on a range of issues, including anti-drug policies, child protection and the needs of the Roma community.

In the concluding session, ESN members from Slovenia, the UK and France presented their experience of working in a national association of social directors. Delegates then discussed ways for Romanian social directors to work together at the national level.



Sweden

FSS annual conference

The association of Swedish social directors (FSS) invited ESN's policy and development officer, Dorota Tomalak, to take part in their annual conference. The conference was a large event with 330 delegates including social directors from across Sweden as well as commercial representatives investing in social services. It hosted 24 different workshops, of which two were held in English.

ESN contributed to the conference with a presentation on the process of de-institutionalisation in Central and Eastern Europe and the work plan of the newly established ESN group on Developing Community Care.

Left: Cake presented to ESN at the Seminar in Cluj, Romania.

“Sometimes people feel a long way away from Europe. ESN’s mission is to make Europe relevant to the local level and support member organisations to engage confidently with European issues.”

John Halloran,
ESN director.

France

ANDASS annual conference

ESN was invited to participate in the 21st annual conference of French Directors of Social Services in the Départements (ANDASS), which took place in Nancy in September, with the theme *European influence on social policy in the French départements*. Pascal Gouffier, outgoing ANDASS President, opened the meeting by stating that there were a number of issues at a European level that affected local social services.

“As directors of local services we should follow European developments and have our local policies fitted into this wider context,” says Gouffier. Specifically, he noted how the RSA reform in France, on which the Départements are the lead actor, followed previous reforms in Germany, the Netherlands and elsewhere, and was mirrored in the development of the European Commission’s active inclusion policy concept. A representative of the European Commission, Concetta Cultrera from DG Employment, Social Affairs and Equal Opportunities, briefed the audience on how European single market rules may affect the work of the Départements.

Below:

Pascal Gouffier, speaking at the ANDASS annual conference in Nancy, France.



2009 in figures

150

Romanians attended
the Going Local
seminar in Cluj,
Romania

20

meetings were held
with national or
regional authorities

43

professionals from
19 countries completed
our questionnaire on
deinstitutionalisation and
community care

114

people attended ESN
seminars including 44
from host countries
Poland and Spain

30

ESN members from
16 countries answered
a questionnaire on
the impact of the
economic crisis

36

ESN staff attended
36 events and spoke
or moderated at
15 of those

16

meetings were
held with European
institutions



50,808

clicks were registered on ESN webpages

35,000

potential readers were reached
through publications in
mass-media

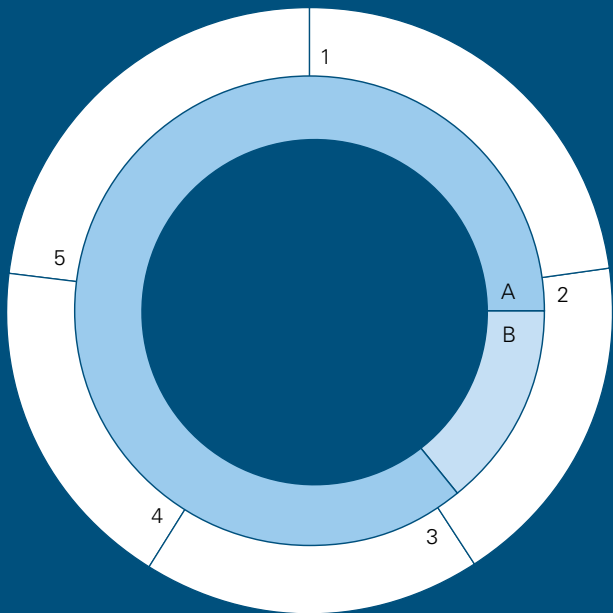
12,852

number of document downloads
from ESN website

410

practitioners, policy-makers
and researchers participated
in the European Social
Services Conference
in Prague

Governance
Board, Business Committee
and Secretariat



ESN's Progress-supported expenditure in 2009 was approximately €610,000 and can be divided into five categories:

1 Policy and Practice Groups 23%

This covers travel, subsistence and staff costs for ESN policy and practice groups on children and families, developing community care and workshops on contracting for quality and the financial crisis.

2 Policy and Practice Seminars 18%

This covers travel, subsistence and staff costs for seminar on Developing Community Care and Building Partnerships in Mental Health and ESN support to the National Conference on Social Services in Romania.

3 Advocacy and Promotion 18%

This covers travel, subsistence and staff costs for policy work in Brussels, promotion in the media and the representation of ESN at European events.

4 Communications and Membership 18%

This covers attendance at ESN member events, visits to members, the production of publications, website development and the making of the ESN film 'Listening to Users', together with translations and associated staff costs.

5 Administration 23%

This covers general administrative, financial support and service costs of the secretariat.

ESN's Progress-supported programme was financed by:

A European Commission 85%

B European Social Network 15%

Progress programme was established to financially support the implementation of the objectives of the European Union in the employment and social affairs area, as set out in the Social Agenda, and thereby contribute to the achievement of the Lisbon Strategy goals in these fields.

The seven-year Programme targets all stakeholders who can help shape the development of appropriate and effective employment and social legislation and policies, across the EU-27, EFTA and EU candidate and pre-candidate countries. To that effect, Progress aims to:

- provide analysis and policy advice on employment, social solidarity and gender equality policy areas;
- monitor and reporting on the implementation of EU legislation and policies in employment, social solidarity and gender equality policy areas;
- promote policy transfer, learning and support among Member States on EU objectives and priorities; and
- relay the views of the stakeholders and society at large.

<http://ec.europa.eu/social/>
The information contained in this report does not necessarily reflect the position or opinion of the European Commission.



Above:
ESN Board members
meeting in Brighton.

The ESN Board is composed of representatives of ESN Members which are national or regional professional associations of directors of social services. In 2009, ESN had 22 Board members.

The Board is responsible for overall ESN direction and financial stability. It oversees delivery of the triennial Strategy 2008-10 agreed with the European Commission. In 2009 the Board met twice and, at its Annual General Meeting on 22 June in Prague, re-elected the Chair and Treasurer and approved annual activity report and accounts for 2008.

As Secretary, the ESN Director manages the secretariat and is accountable to the Board. The Director, together with elected Chair and Treasurer constitute the ESN Business Committee which meets quarterly to review the operational programme and financial management. In 2009, ESN held 2 Board and 4 Business Committee meetings.

ESN is committed to constantly measuring the performance and effectiveness of its activities and regularly consults with its members and other stakeholders. Throughout 2009, the ESN Secretariat has enhanced communication with all its members and beyond through the website, newsletters, and Members' and Board communications.

ESN is grateful for the contribution of Hugh Frazer as external evaluator.



**2010
European Year
for Combating
Poverty and
Social Exclusion**

European Social Network and European Year 2010 >

www.esn-eu.org/2010



“When I was younger, people always told me what they wanted me to do. I didn’t like it. I want to choose what I do and where I go.”

Boudewyn

“I wouldn’t change anything. I’ve got my family. They really look after me and that’s it!”

Esther



"In the past I did the same things every day but now I can choose and it's really great."

Rita

"My role in this centre is pretty straightforward - I'm a mediator. A mediator is a person who has reformed themselves."

Abaga



Find out more about Hedvika, Boudewyn, Aladin and Abaga, about their lives, the care and support they've received, and the ongoing challenges for social services at: www.esn-eu.org/2010

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