



More independence for people with a disability The Flemish context

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- Which provisions are there for us?
- Federal level
 - Allowances for adults (21-65 j):
 - Income replacement allowance (IRA) when due to labour-related inability it is not possible to work and there are no other forms of income (e.g. unemployment, illness or other) – means-tested!
 - Integration allowance (IA): covers extra costs related to disability – means tested!
 - Dec 2009: 59.891 persons → Dec 2012: 65.346 persons (of which half get both)

- Extra child benefit for children with a disability
- Seniors (65 plus): outside the scope of presentation

- Flemish provisions for people with a disability
 - *Flemish Agency for People with Disability (VAPH)*
 - Provides material support: aids and support services
 - Intensity of support depends on kind and degree of disability
 - Must be younger than 65 years to be eligible!
But once registered, support services provided also after age of 65

- However: Waiting lists or the Central Registration of Care-related questions (CRC)
 - VAPH works with closed budget (not like national health insurance institute RIZIV)
 - Consequence: waiting lists
 - Paradox: notwithstanding extra money for VAPH, waiting lists keep on growing
 - Need for policy shift, taking into account the ageing of pwd!

- Moreover: the “black hole”
 - No clear numbers re people with a disability in Flanders/Belgium
 - At federal level for Flanders: 79.102 adults and 24.152 kids receive an allowance = 103.254 Flemish persons
 - ⇔ at Flemish level: 43.156 adults & kids receive care or assistance and 20.786 persons waiting = 63.942 persons.
 - => impact on waiting lists!

- Thus: paradigm shift needed at Flemish level!
- HOW?

- 2010: Concept note “Perspective 2020”: a step toward care innovation
 - Basic philosophy: person with disability should be fully & equally included in our society
 - Along 2 lines: 1) by 2020 all care is driven by request/need & 2) “care guarantee” for persons who are most in need for care and assistance
 - How to translate this to reality?

- Easier direct access to support/care: no need to go through the complex assessment procedure for not-intensive/not-frequent forms of care/assistance/support
- Care innovation projects
 - Inclusive Support Service : in addition to disability-specific support/assistance, also regular assistance service like home care, family care, cleaning service, etc
 - Multifunctional Centers (for kids) & Flexible Offer for Adults: more flexibility in assistance and care services
=> more person-oriented support services

- Transition to “person-following financing”
= most important element of PP 2020
- Support must be more “fit to size”. Thus
need for (more) request-oriented services
(instead of offer-oriented services). How?
 - Through change in financing method : it
follows the person (instead of being linked to
institutions and service organisations like
now)

- Decree proposal “person-following financing” (PFF)
 - First concept note: Fall 2012
 - Then advance decree proposal at government level: Spring 2013
 - Now waiting for advice by Council of State
 - By early next year: decree proposal

- What does PFF contain?
 - 2 levels:
 - 1^o level: **basic support allowance** (fixed amount) through ‘Flemish Care Insurance’. No need to account for spending.
 - If this is not sufficient or does not meet the need, then a ‘support plan’ must be made and application be made for: 2^o level: **person-following financing**. Provided through VAPH. Choice between: voucher or cash budget (or combination). Spending must be accounted for.

- Unclearity re PFF
 - Amount for 1st level: how much?
 - What is the turning point between level 1 and 2?
 - Who will decide whether someone gets the PFF?
 - Interaction between Flemish Care Insurance and VAPH? (risk for ping pong?)
 - Budgetary implications?

- Moreover: the “inactivity gap” is not mended...
- Thank you for your attention!