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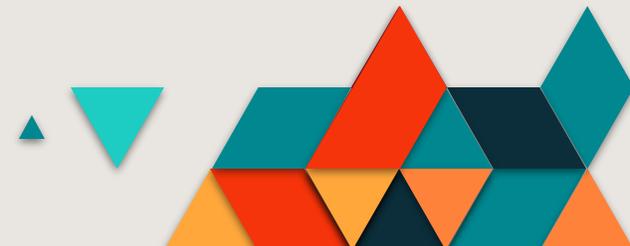
Focus on:



National **Map** of State Funded Social Services



Quality of Social Services

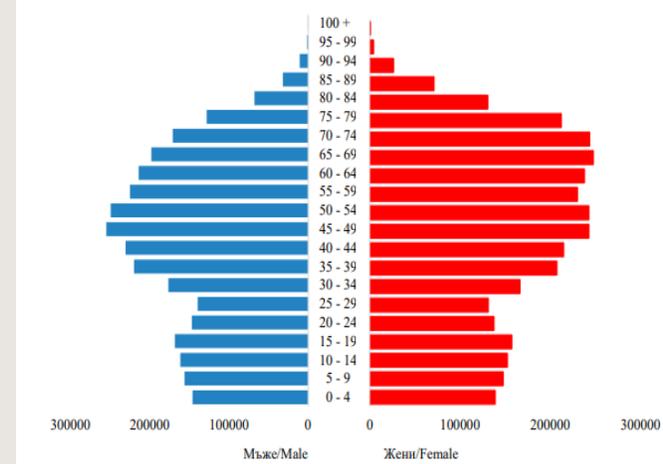




Basic data

Population

- ✓ 6 437 360 persons
 - 0-14 years: 13.8%
 - 15-64 years: 65.2%
 - 65 years and over: 21%
- ✓ The death rate exceeds birth rate by about 80%

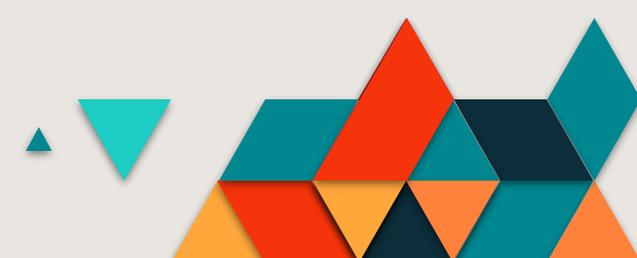


System of State funded social services, incl. LTC

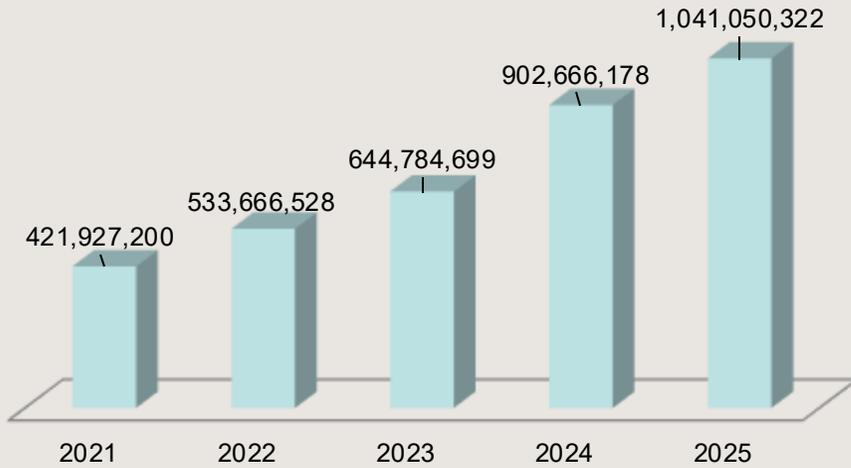
- decentralised, key role of local authorities
- concept of activities, not places or buildings
- complexity & inter-sector feature
- person-centred, individual choice
- rights-based
- licensing of private providers regardless source of funding

Social service principles:

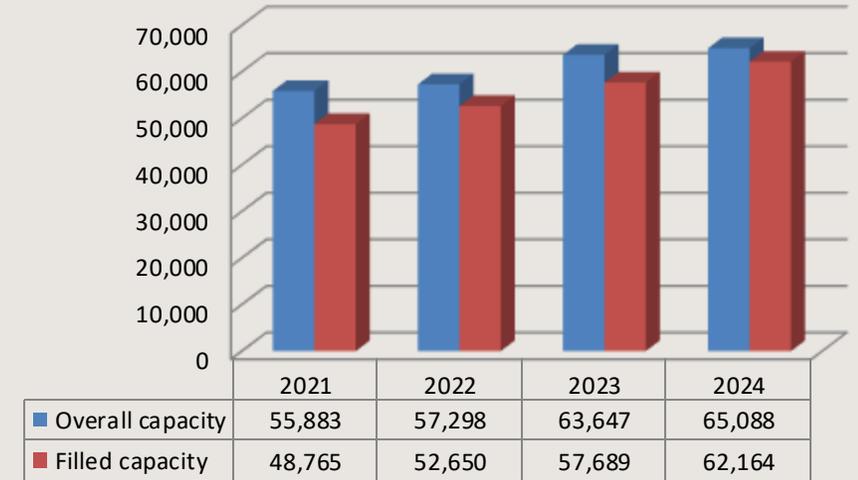
- 1. availability of different types of social services
- 2. accessibility of social services
- 3. individualization of support
- 4. comprehensiveness, integration and continuity of support
- 5. prevention of institutionalization
- 6. respect for the rights of persons using social services and ensuring their active participation in decision-making
- 7. flexibility and transparency in the management of social services
- 8. participation of all stakeholders and use of all available resources



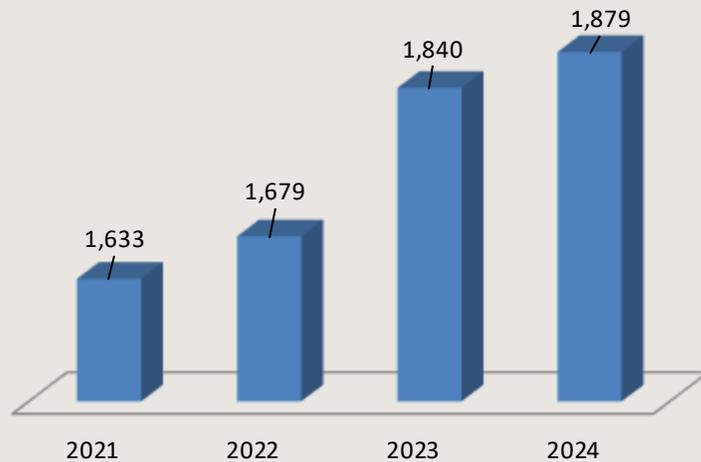
State budget (in BGN)



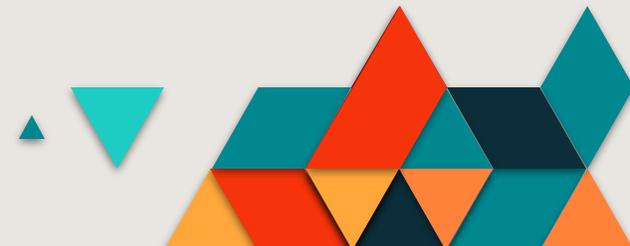
Capacity of social services



Total number of social services



Social services funding & numbers



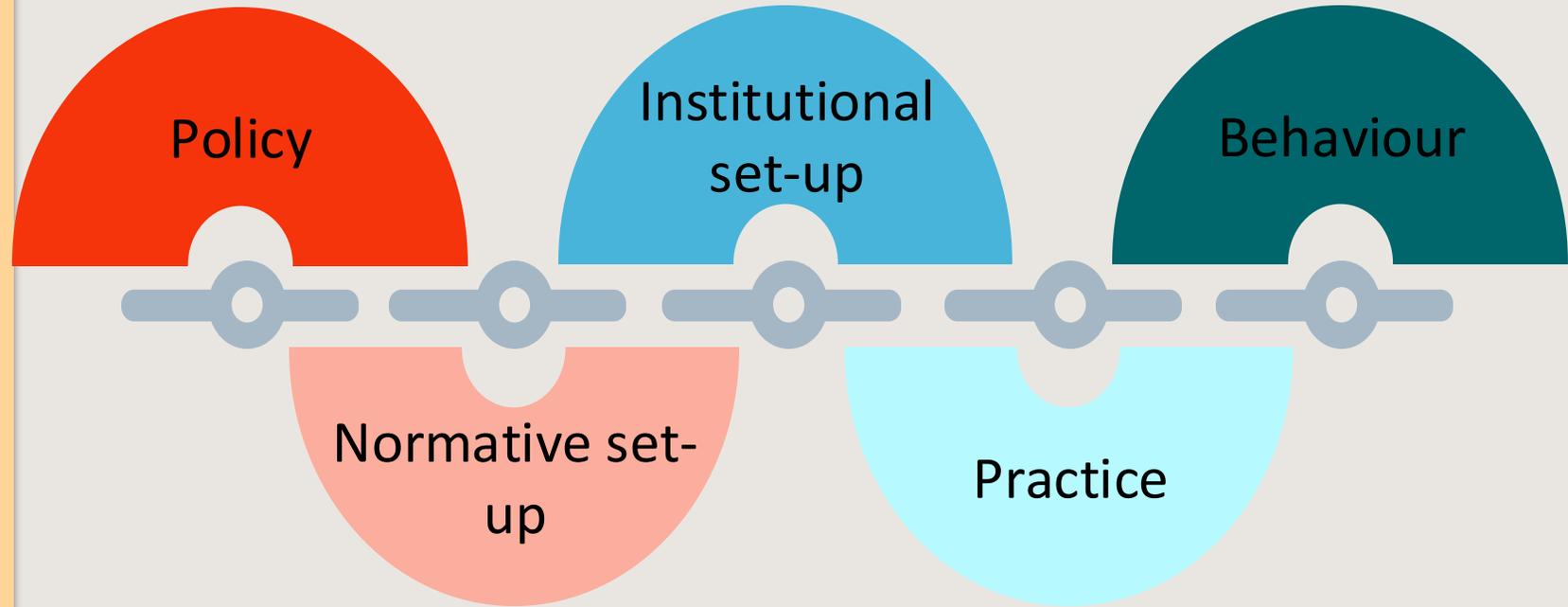


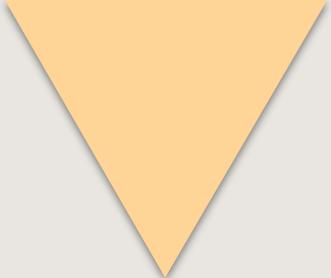
Reform Context



- Demographic trends: ageing population, higher prevalence of chronic conditions, increasing care needs
- Fragmented provision of social services; uneven territorial coverage; variable quality; increasing person-centred, community-based approaches
- Shift at institutional level, discussions about need for advanced changes in normative regulations
- Deinstitutionalisation of child protection services gave momentum to modernise systems and strengthen governance

Reform of the social services system





Key Reform Pillars

 National **Map** of Social Services

Ordinance on the **Quality** of Social Services 



National **Map** of Social Services



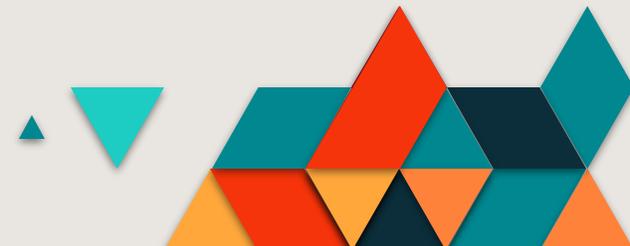
- First strategic instrument to plan services based on *objective needs*, not historical provision
- Introduces evidence-based criteria for determining:
 - Type and volume of services
 - Territorial distribution across regions and municipalities – **municipal** plans
 - Priorities for investment and expansion
- Ensures alignment with EU standards for accessibility, continuity and adequacy of care
- Supports transparent resource allocation and avoids duplication of services



Ordinance on the **Quality** of Social Services



- Establishes uniform quality standards applicable to all providers – public & private
- Defines requirements for:
 - Person-centred assessment and individual planning
 - User participation and informed consent
 - Staff qualifications and ongoing training
 - Safety, dignity, accessibility, rights protection
 - Monitoring, documentation and outcomes
- Introduces mechanisms for internal quality monitoring and external evaluation & control
- Supports the transition to community-based and preventive models of care

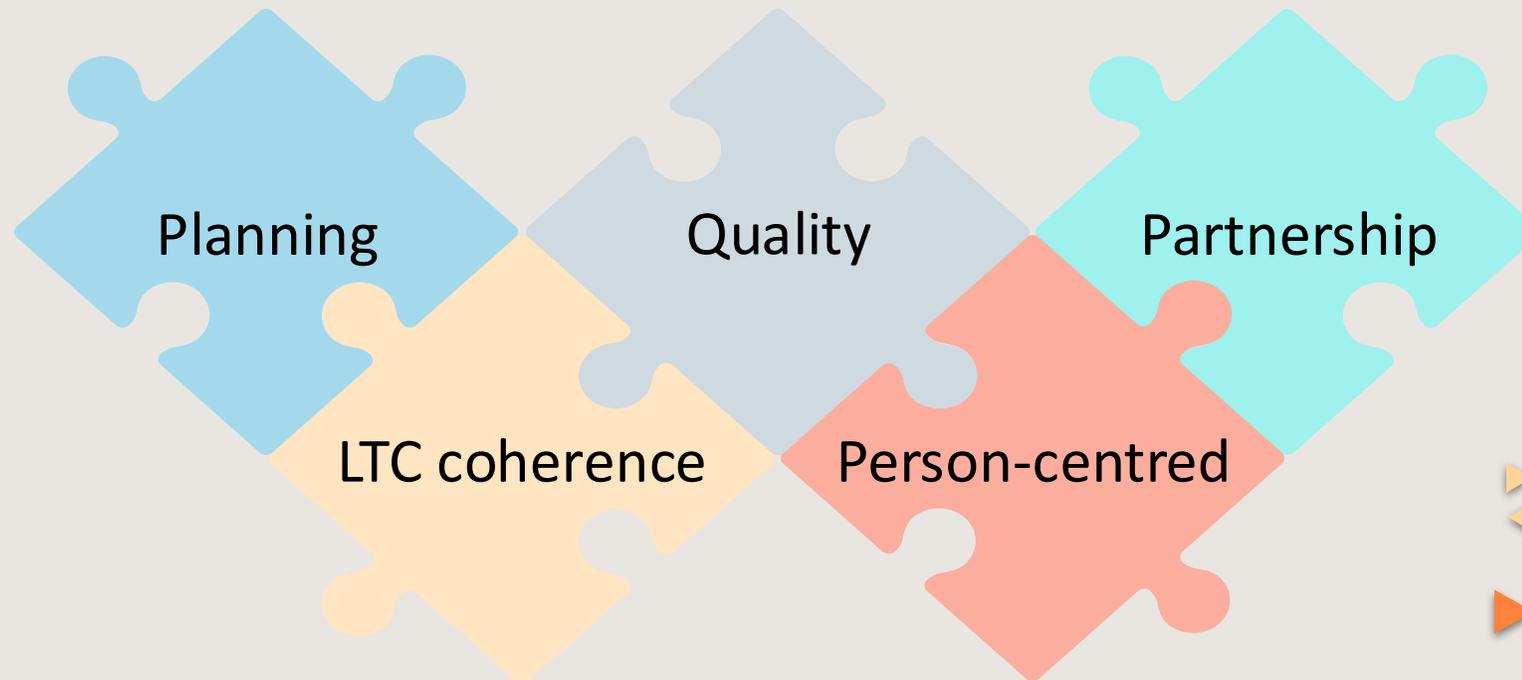


Challenges Addressed by the Reform

- Long-standing inequality in access between urban and rural areas 
- Need for clearer standards to ensure quality and user rights 
- Overreliance on institutional care and insufficient community-based alternatives 
- Workforce shortages and variable skills 
- Need for integrated support for people with complex needs, including older persons and persons with disabilities
- Need to develop integrated health and social services 



Results & Expected Impact





Looking ahead



- Implementation of the National Map in practice, accompanied by monitoring and periodic updates
- Full rollout of the quality standards across all providers
- Strengthening integrated service models, including home-based and mobile services
- Continued investments in workforce development and digitalisation
- Expanding support for prevention and early-intervention services

Conclusion



The reform marks a transition from fragmented, uneven provision to a coordinated, needs-based, rights-oriented system of LTC



EU support has been instrumental in shaping the pathways for change



The ultimate goal remains: ensuring that every person receives timely, high-quality, person-centred care, regardless of where they live



Thank *you!*

