

# Responses to the questions from the List of Issues in connection with the first German country review

- Volume of Appendices -

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# I. Appendices to Question 1

# a) Information on the formulation and implementation of action plans

ſ	BW	Action plan to implement the UNCRPD planned
		- Implementation should occur with the participation of all sectors of society and those affected in
		particular (so-called bottom-up process).
		- The State Advisory Council for Persons with Disabilities, chaired by the State Commissioner for
		Matters relating to Persons with Disabilities, has drawn up a proposal for the areas of activity,
		goals and measures to be taken in a plan to implement the UNCRPD in Baden-Württemberg. This
		proposal underwent further development in a wide-ranging consultation procedure in four re-
		gional conferences with those affected and their families. The regional conference results were
		passed to the state government on 06/ 05/2014.
Ī	BY	Action Plan published 12/03/2013
		"Bavarian policy priorities for persons with disabilities in the light of the UNCRPD" - in short: Action
		Plan.
		– It deals with all the relevant UNCRPD Articles. These include: raising awareness for a positive
		understanding of persons with disabilities; turning integration assistance into a personalised par-
		ticipation service; and full accessibility.
		- Step 1: Action Plan drawn up after intensive study of the UNCRPD involving all departments, tak-
		ing into account the results of a lengthy discussion with the State Council for Persons with Disa-
		bilities and a hearing of the Bavarian Landtag (Regional Parliament) Committee for Social Affairs,
		Family and Labour.
		- Step 2: Comprehensive involvement of persons with disabilities, associations, funding providers,
		the Bavarian Landtag, the Bavarian State Commissioner for Matters relating to Persons with Dis-
		abilities, the State Advisory Council for Persons with Disabilities and other important stakehold-
		ers in its further development.
		<ul> <li>A hearing of associations (more than 140 addressees)</li> </ul>
		Two specialist conferences
		– Alongside this the Bavarian Landtag Committee for Social Affairs, Family and Labour set up a
		round table, whose work is supported by seven working groups. The round table results were
		considered in the Action Plan.
Ī	BE	Disabilities policy guidelines presented by the Federal State of Berlin
		As a result of the Berlin Senate's decision of 07/06/ 2011 (No. S-3710/2011), the "10 disabilities poli-
		cy guidelines of the State of Berlin for lasting implementation of the UNCRPD by 2010" were adopted
		as the main focus of the state of Berlin's action/measures plan for gradual implementation of the
		UNCRPD. The decision was submitted to the Berlin House of Representatives for discussion.
		The "10 disabilities policy guidelines" cover all the essential legal obligations resulting from the
		UNCRPD. The respective subject areas are subordinate to statements within the meaning of defini-
		tions, which contain specified safeguards to ensure their implementation in the State of Berlin.
		On the basis of a Conference of State Secretaries decision of 07/01/2013, a cross-governmental
		working group was set up to review the aforementioned "10 disabilities policy guidelines" adopted
ļ		by the Senate in case they need further definition and to submit to the Senate an appropriate pro-
		posal for a decision.
		The outcome of the work on specifically defining the guidelines is currently at the departmental con-

	sultation stage.
BB	Package of measures on disabilities policy adopted by the Cabinet on 29/11/2011
	This covers eight areas of activity dealing with essential aspects of life and participation affecting
	persons with and without disabilities, and totals 136 individual measures in all.
HB	State action plan with concrete measures planned
	A draft of the state action plan and, it is expected, its finished version will be presented in 2014.
HH	State action plan to implement the UNCRPD passed by the Senate on 18/12/2012
	- The Action Plan was drawn up in a participatory process together with the Senate Coordinator
	for the Equality of Persons with Disabilities and disabled persons' organisations.
	- This participatory process also applies to the way the Action Plan is being implemented and de-
	veloped on an ongoing basis.
	<ul> <li>Focus Action Plan prioritises several important topics.</li> </ul>
	• Alongside a short review of the current situation it contains specific steps to be taken by in-
	dividual authorities or public bodies for UNCRPD implementation, names the relevant bodies
	involved and the date or time period of implementation.
	• The Action Plan should be seen as a starting point for a long-term process; it is a work in pro-
	gress and new areas of activity are being added.
HE	Action Plan brought into effect by Cabinet decision on 02/07/2012
	- More than 70 principal objectives made up of 200 individual goals and a total of more than 350
	individual measures
	- The Action Plan comprises 20 chapters with a lifetime theme stretching from early intervention
	until retirement, with various points of emphasis; comprehensive association participation from
	the start of the Action Plan process; a pre-publication draft was presented to all government de-
	partments and associations as part of an exhaustive process to gather their views; this was used
	as a basis to revise and finalise the Action Plan.
MV	Measures for UNCRPD implementation approved by the state government in 2013
	- It combines the state government's goals and measures in an overall strategy for the years to
	come.
	- It was drawn up in a process involving constructive criticism from the Integration Promotion
	Council, associations of persons with disabilities and other representatives of civil society.
	<ul> <li>Recognition of special action needed to ensure accessibility in all areas of life.</li> </ul>
NI	Action Plan for UNCRPD implementation published in January 2012
	Publication was carried out by a representative commission of experts
NW	Cross-departmental Action Plan "One Society for All – NRW inclusive" adopted on 3 July 2012
	- Runs until 2020.
	<ul> <li>Contains well over 200 different projects and measures.</li> </ul>
	- Groups representing the interests of persons with disabilities were intensively involved in the
	early stages of designing the Action Plan by means of the "NRW Dialogues".
	- Linked to the relevant UNCRPD Articles, which deal with such different areas as: accessibility and
	freedom from barriers, independence and self-determination, representation of interests and
	political participation, barrier-free housing and independent living, family life, children and young
	people, work and training for persons with disabilities, old age and disabilities, health and per-
	sonal care, culture and sport, girls and women with disabilities, counselling structures, social en-
	gagement, volunteer work and self-help, protection from violence, the right to the integrity of

	the person and also to municipal support in planning inclusive communities, and inclusion in
	schools and universities.
	- The Landtag and Advisory Council on Inclusion receive regular reports on the progress of individ-
	ual measures. The Action Plan's four cornerstones are:
	1. Promotion of "a new culture of inclusive thought and action" (i.e. through various aware-
	ness-raising measures)
	2. "Participation of the people affected"
	3. "Regulatory reviews and regulatory review processes"
	4. "Areas of activity and measures"
	– Some measures have already been completed. More than 170 measures are being worked on at
	present. The Action Plan represents a dynamic programme which can be adapted over time and
	is open to taking on new projects and measures.
RP	Action Plan for UNCRPD implementation drawn up in 2010
	<ul> <li>It was designed and written in consultation with the main public body representing the interests</li> </ul>
	of persons with disabilities in Rhineland-Palatinate - the State Advisory Council on the Participa-
	tion of Persons with Disabilities.
	<ul> <li>New ideas to update the State Action Plan have been collected and discussed since March 2014.</li> </ul>
	<ul> <li>Comprehensive consultation period, which gives persons with disabilities as well as other cit-</li> </ul>
	izens and civil society institutions the opportunity to put forward their ideas and concepts for
	an inclusive Rhineland-Palatinate.
	• Throughout this brainstorming phase the highest levels of participation are guaranteed by
	means of thematic ideas workshops as well as a public survey and a survey of the key stake-
	holders in society.
	- The State Action Plan is due to be ready by December 2015 with the involvement of the State
	Advisory Council on the Participation of Persons with Disabilities - concepts for targeted monitor-
	ing of the implementation of measures in the State Action Plan, are also to be developed.
SL	Action Plan "Saarland inclusive – Our State for All People" presented on 20/09/2012
SN	No action plan has been published as yet.
ST	Saxony-Anhalt State Action Plan "Time to Act – Our Way to an Inclusive Society" adopted on
	15/01/2013
	<ul> <li>Drawn up in cooperation with the State Advisory Council for Persons with Disabilities, the State</li> </ul>
	Commissioner for Matters relating to Persons with Disabilities and all government departments,
	and passed by the state government.
	<ul> <li>To be put into action over a period of 10 years.</li> </ul>
	<ul> <li>It is the main instrument for implementation of the UNCRPD.</li> </ul>
	<ul> <li>It aims to bring about universal human rights, the right of all people to equality, self-</li> </ul>
	determination, equal opportunities and participation in all areas of community life and to dis-
	mantle barriers in people's attitudes and in society as a whole.
	- To determine what needed to be done, the Convention requirements were compared to the
	current state of implementation in Saxony-Anhalt. A roadmap was drawn up, in a general consul-
	tation process with civil society representatives, on the basis of the results of this implementa-
	tion progress analysis.
SH	Action plan in preparation
	- The state government is currently working towards a plan preparation decision (= Cabinet deci-

	sion) on drawing up a state action plan. This is currently seeking departmental approval and is
	still expected in summer 2014.
	- The action plan is to be drawn up in a two-step consultative process with the participation of the
	State Commissioner and associations for persons with disabilities, as well as with civil society.
TH	Action plan to implement the UNCRPD published
	– The action points contain numerous measures for different topics such as awareness and con-
	sciousness-raising, fully-accessible buildings, housing, barrier-free footpaths and walkways, bar-
	rier-free local public transport, barrier-free local and regional rail services, etc.
	<ul> <li>Please see the action plan itself for more details.</li> </ul>

#### b) Structures in place for implementation of the UNCRPD and action plans, where applicable

These aspects were not explicitly enquired about as part of the Länder survey. As a large number of replies covered this topic however, they are listed in the relevant order below. This listing should not be considered exhaustive however.

BE	A cross-departmental specialist working group headed by the Senate Department responsible for general disabilities policy, making full use of the expertise of all Senate Departments, the State Commissioner for Matters relating to Persons with Disabilities and the State Advisory Council for Persons with Disabilities, set up to identify which Berlin state laws and regulations are in need of amendment to comply with the legal obligations of the UNCRPD. This specialist working group found real evidence that significant changes for the better had been made in the state of Berlin to enable persons with disabilities to enjoy a more equal level of partici- pation in society.
BB	<ul> <li>Focal point (Art. 33, Para. 1, UNCRPD), located in the Ministry of Social Affairs, coordinates the package of measures.</li> <li>Cross-departmental work structure</li> <li>Since 2012 the "Departmental Coordinators" have met twice yearly, to co-ordinate significant individual actions and the process as a whole.</li> <li>Departments are responsible for implementing measures in the package and for taking them forward.</li> <li>The State Commissioner for Matters relating to Persons with Disabilities named as the state focal point (Art. 33, Para. 1, UNCRPD).</li> <li>The Monitoring Body for UNCRPD implementation at the German Institute for Human Rights commissioned to evaluate the package of measures in progress, as an independent mechanism in compliance with Art. 33, Para. 2, of the UNCRPD.</li> <li>Civil society, and in particular persons with disabilities and organisations representing them, were and continue to be involved in the preparation, execution and further development of the package of measures.</li> </ul>
BY	<ul> <li>Focal point located in the Ministry of Social Affairs;</li> <li>Therefore also has prime responsibility for coordinating appropriate measures for UNCRPD implementation within the state government. Support from the Bavarian State Government Commissioner for Matters relating to Persons with Disabilities.</li> <li>Inter-ministerial working group for UNCRPD implementation in Bavaria.</li> <li>Furthermore, several departments have set up round tables, advisory committees etc.</li> </ul>
нн	- Focal point at the Department of Employment, Social Affairs, Family Affairs and Integra-

	tion.
	<ul> <li>Disabilities policy as a cross-cutting task with cross-departmental working structure.</li> </ul>
	<ul> <li>Management of implementation process by the College of State Councillors.</li> </ul>
	- New post of Senate Coordinator for Equality of Persons with Disabilities complemented by the
	creation of an Inclusion Office.
HE	- Focal point made up of the Ministry of Education and Cultural affairs and Ministry for Social Af-
	fairs and Integration.
	- Creation of five working groups being self-managed by disabilities associations and relevant or-
	ganisations and institutes in Hesse on the priority topics of labour, education, accessibility,
	awareness-raising and women with disabilities.
	- Steering group task force, made up of representatives of the state government, associations of
	persons with disabilities, national associations of local authorities and the Hessian State Welfare
	Association, which is to take suggestions from the working groups and implement them political-
	ly.
	– Inter-ministerial working group, in which all departmental heads or their representatives meet
	regularly through the year, to promote UNCRPD implementation.
	– Evaluation of the preparation process by the German Institute for Human Rights.
	- Close cooperation and coordination between the Hessian State Commissioner for Matters relat-
	ing to Persons with Disabilities and the Hessian Ministry for Social Affairs and Integration.
	- Creation of seven 'Inclusion' flagship regions in Hesse for implementation of the UNCRPD and the
	Action Plan.
NI	Creation of a representative Special Commission on Inclusion to implement the UNCRPD
NW	<ul> <li>Focal point based in the Ministry for Labour, Integration and Social Affairs.</li> </ul>
	– Inter-ministerial working group (IMAG) created for cross-departmental coordination.
	- Advisory Council on Inclusion implemented to strengthen state government political participa-
	tion; this will advise IMAG on the UNCRPD implementation process.
	• Associations and organisations of persons with disabilities, and other civil society stakehold-
	ers as well as the local authorities, are represented. Other state government departments
	are involved in the Advisory Council on Inclusion.
	– Advisory councils on questions of special interest (accessibility, participation, health, children and
	young people, labour, education) have been set up – they work with the Advisory Council on In-
	clusion.
RP	- Tradition of cross-departmental and cross-topic practice throughout state government to imple-
	ment a policy geared towards participation, equality and self-determination by and for persons
	with disabilities.
	- The inclusion of the State Advisory Council for Matters relating to Persons with Disabilities and
	the Municipal Commissioners for Matters relating to Persons with Disabilities is an important
	means of fulfilling these obligations.
SN	Expert committee (inclusion of some 30 associations, interest groups, institutions and individuals,
	with regard to the school system).
	As a result of the Cabinet decision of 27/03/2012, the State Ministry for Social Affairs and Consumer
	Protection was made the state contact point for matters relating to UNCRPD implementation.
ST	<ul> <li>The Ministry of Labour and Social Affairs, as the state contact point, is taking on the role of coor-</li> </ul>
-	dinating the cross-departmental measures, as well as evaluating, updating and presenting the
1	in a serie

		State Action Plan.
	-	The State Action Plan is being implemented by the relevant state government departments.
		When they are implementing measures that fall under the jurisdiction of other departments, au-
		thorities and partners, these are also involved.
	_	Civil society is involved in implementation from the very start. This is particularly the responsibil-
		ity of the State Commissioner for Matters relating to Persons with Disabilities and the State Advi-
		sory Council for Persons with Disabilities.
	-	Inclusion committee set up by the State Commissioner for Matters relating to Persons with Disa-
		bilities,
		• for long-term and strategic monitoring of implementation and updating of the State Action
		Plan,
		• to give ongoing support to the state government in implementing and updating the State Ac-
		tion Plan and
		• to monitor the agreed measures, check they are working, develop problem-solving ap-
		proaches and amendment proposals, and guarantee the participation of persons with disabil-
		ities.

## c) For the general obligations and steps to implement the UNCRPD mentioned below, the following Länder have set priorities and drawn up measures:

# Participation and involvement of persons with disabilities, and awareness-raising (Art. 4, Para. 3, Art. 33, Para. 3, and Art. 8 of the UNCRPD)

HH	– A	n Inclusion Office was created to complement the post of Senate Co-ordinator for the Equality
	0	f Persons with Disabilities.
	– B	oth are tasked with engaging in a dialogue with civil society and raising general levels of aware-
	n	ess.
HE	– T	he participation of persons with disabilities, their associations and organisations representing
	tl	heir interests was one of the original components of the state government's decision to create
	а	n Action Plan for Hesse.
	– P	articipation and influence did not end with the process to create the Action Plan for Hesse; they
	а	re also part of the implementation process (suggestions are welcome, as are responses to the
	ir	nterim draft of the Action Plan; inclusion in the implementation committees, working groups on
	ir	nplementation run by the associations themselves).
	– т	hey also take part in meetings and on the judging panel for the Hessian State Prize for Universal
	D	Design.
	– T	here are numerous informal talks with individual organisations with a view to improving the
	li	ves of people affected in relation to the UNCRPD, and to create full accessibility through the use
	0	f QR codes, for example.
	– F	or 2015 it has been suggested that a specialist unit on accessibility for persons with sensory
	ir	npairments be set up, in coordination with the associations.
NW	"Polit	ical Participation" is a cross-cutting task.
RP	– C	ivil society and local authority stakeholders are encouraged to undertake their own activities to
	ir	nplement the UNCRPD.
	– T	hese are included in the ongoing Action Plan update. The inclusion of the State Advisory Council

		for Matters relating to Persons with Disabilities and the Municipal Commissioners for Matters re-
		lating to Persons with Disabilities, operating at a local level, is an important means of fulfilling
		these obligations.
ST	-	The State Advisory Council for Persons with Disabilities was extensively involved in the creation
		of the State Action Plan.
	-	The State Advisory Council for Persons with Disabilities and the Inclusion Committee are also
		heavily involved in implementing and updating the State Action Plan.
	-	Both bodies include persons with disabilities.

#### Equal opportunities and self-determination, equal participation rights for persons with disabilities / Technological development (UNCRPD, Art. 4(g))

BW	Decentralisation of large disabilities assistance centres (so-called holistic facilities).
BB	Revision/new version of the Brandenburg Equality Act (BbgBGG).
HH	Act on equality for persons with disabilities with corresponding regulations and a programme to pro-
	vide more care in the community, so that persons with disabilities can live as they choose and do not
	have to live in residential facilities.
HE	Measures for equal opportunities and self-determination, also through full accessibility in Hesse:
	<ul> <li>Making its own events fully accessible, accessible homepage, accessible documents in the</li> </ul>
	steering group - for this awareness needs to be raised among state government employees.
	• Funding external events to help make them fully accessible (project sponsorships, donations,
	etc.
	• Facilitating the translation of the Hessian Action Plan into sign language (!) and an easy-to-
	read version.
	Barrier-free publication of numerous other informational items, as in the distribution of bro-
	chures for specific target groups, such as the information brochure about the 2013 state elec-
	tions, in an easy-to-read version or information in sign language.
NW	<ul> <li>Working towards the goals of independent living and inclusion in the community (Art.19,</li> </ul>
	UNCRPD): framework conditions for "more care in the community and decentralisation" were cre-
	ated: already well over half of all persons with disabilities who need assistance with activities of
	daily living can be cared for on an out-patient basis within their own home.
	- The UNCRPD principles are to be enshrined in state law by means of an "Act on Greater Inclusion".
SL	In this legislative period, amongst other things, the Saarland Equal Opportunities for Persons with Dis-
	abilities Act (SBGG) and the Saarland State Building Code (LBO) are both to be amended in line with
	the UNCRPD.
ST	<ul> <li>Revision of State Equal Opportunities for Persons with Disabilities Act (BGG LSA), (came into force</li> </ul>
	on 28/12/2010): according to § 1, Para. 1, the following goals will be pursued and regulations cre-
	ated as part of UNCRPD implementation:
	<ul> <li>Equality obligations and a ban on discrimination</li> </ul>
	<ul> <li>A guarantee of independent living and inclusion in society</li> </ul>
	<ul> <li>Preventing/eliminating discrimination against persons with disabilities</li> </ul>
	<ul> <li>Equal living conditions and equal opportunities</li> </ul>
	Equal rights to participate in community life
	Enabling people to live a self-determined life
	<ul> <li>A guarantee of participation in political and public life</li> </ul>

- The following state norms in Saxony-Anhalt were passed or amended in the light of the UNCRPD:
  - State Equal Opportunities for Persons with Disabilities Act, and ordinance in line with this Act
  - Saxony-Anhalt Building Code
  - Saxony-Anhalt State Sport Promotion Act
  - Law to amend the Child Daycare Promotion Act
  - Law on housing and participation in Saxony-Anhalt

# Accessibility (UNCPRD, Art. 3(f), Art. 9) and full and active participation as a result (including Art. 3(c), Para. 1, UNCRPD)

-	
BY	"Bavaria Barrier-free 2023" programme - a call to make full accessibility a reality; basic concept in the
	planning stage.
BB	Topic identified as a priority.
HB	- 2009: "Barrier-free Bremen" city guide (currently being revised, includes over 1000 locations).
	– 2010: "Bremen takes down the barriers" programme (guiding system for blind persons, ramps,
	private transportation service).
HH	Programme published to schedule a fully-accessible upgrade of all elevated railway stops by 2020.
MV	State Building Code amendment planned for 2014, so that the full-accessibility aspect is given greater
	consideration.
ST	Saxony-Anhalt Equal Opportunities for Persons with Disabilities Act:
	- Obligation to create full accessibility without barriers and to make it possible to access infor-
	mation:
	- Ordinance on Equality for Persons with Disabilities in Public Administration in the State of Saxony-
	Anhalt (Saxony-Anhalt Equal Opportunities for Persons with Disabilities Act - BGGVO LSA) of 23/
	02/2012, with particular regard to the full accessibility of information technology in public admin-
	istration; the current international standards (WCAG 2.0) were adopted into state law.
	Key focus of State Action Plan to implement the UNCRPD: removal of obstacles blocking accessibility to
	buildings, streets, public transport facilities, information and communications.
TH	Amendment to the Thuringian Building Code planned for 2014.

# Protection from discrimination - particularly before the law (state norms) / appropriate legislative measures (UNCRPD, Art. 3(b), Art. 4(a) and Art. 5)

BW	No regulatory review has taken place so far. There are however plans to enshrine a "regulatory re- view" as a measure in the State Action Plan.
BY	All relevant legal regulations were reviewed for their conformity with the UNCRPD and necessary
	measures were adopted in the Action Plan.
BE	"Berlin Monitoring Body Project": since the start of 2013 the German Institute for Human Rights has
	been tasked with developing "expertise for an omnibus act to implement the UNCRPD in the State of
	Berlin". The project reviews legislation in the State of Berlin, to ascertain whether there is a legisla-
	tive need to amend existing regulations in order to fulfil the obligation to observe and implement the
	UNCRPD at Berlin state level (see also the remarks to Question 3 in this regard).
HB	- As part of the ongoing creation of the Action Plan, the relevant provisions of state law relating to
	the topics in question are also being examined.
	<ul> <li>A targeted review of individual norms with particular relevance to items in the UNCRPD is</li> </ul>

	planned.
HE	A regulatory review of all Hessian laws and regulations, with regard to their conformity with the
	UNCRPD and to the protection of persons with disabilities from discrimination, is taking place. The
	development of a review questionnaire by the Max Planck Foundation should guarantee that all laws
	and regulations, and not just selected ones, are reviewed. The review within the relevant depart-
	ments also helps to make state administration staff members more aware of the UNCRPD and of the
	rights of persons with disabilities in general.
NI	A review of state legal norms in relation to compliance with the UNCRPD is currently underway.
NW	Examination of all state regulations to check they comply with the UNCRPD.
RP	State law is being drafted in individual steps with consideration of the needs of persons with disabili-
	ties. This is put into practice by means of a draft presentation and inclusion of the viewpoints of the
	State Advisory Council on the Participation of Persons with Disabilities for those laws relevant to per-
	sons with disabilities.
ST	A regulatory review is enshrined in the State Action Plan and is currently underway.
SH	Regulatory screening as part of the intended Action Plan.

### Terminology/definitions (UNCRPD, Art. 1, 2 and 5)

SL	Definition of the term "disabilities" (UNCRPD, Art.1, Para. 2) and the prohibition of discrimination
	(UNCRPD, Art. 5) (Saarland)
ST	Revision of various concepts:
	- Dynamic, social, functional concept of disabilities, cf. UNCPRD, Preamble (e), also Art. 1, Para. 2,
	and the Saxony-Anhalt Equal Opportunities for Persons with Disabilities Act (BGG LSA).
	- Concepts of communication and speech, cf. UNCRPD, Art. 2, Paras. 1 and 2, and BGG LSA, § 6.
	- Further concept of "discrimination on the grounds of disabilities" in connection with the concept
	of "refusal of reasonable accommodation", cf. UNCRPD, Art. 2, Paras. 3 and 4, and BGG LSA, § 4.

## Protection of the dignity of persons with disabilities (UNCRPD, Preamble (a), Art. 1, and Art. 3 (a) / Awareness-raising (UNCRPD, Art. 8)

BY	Positive understanding of persons with disabilities
	– Bavarian campaign launched
	Homepage set up "www-inklusion-in-bayern.de"
	Inclusion flyer published
	• Togetherness Prize awarded (good examples of inclusion in all administrative districts of Ba-
	varia).
HH	- Making disabilities policy even more of a cross-cutting responsibility with a cross-departmental
	working structure.
	- "And now inclusion as well – what's that got to do with me?" campaign run for City of
	Hamburg administration staff; launch in September and October 2014 in the Department
	of Labour, Social and Family Affairs and Integration, then rollout to other authorities
	planned.
HE	Awareness-raising and public relations work in Hesse:
	<ul> <li>Establishment of the annual Persons with Disabilities Day</li> </ul>
	- Participation and help in staging diverse events such as Hesse Day, Diversity Day, Girls' Day or

	Hessian Family Day, featuring
	<ul> <li>Distribution of information about the UNCRPD and the UNCRPD task force</li> </ul>
	Distribution of information on sign language
	<ul> <li>Accessible UNCRPD homepage</li> </ul>
	<ul> <li>Newsletter three times a year on UNCRPD implementation in Hesse and further afield</li> </ul>
	<ul> <li>Award of a State Prize for Universal Design</li> </ul>
	<ul> <li>Award of a State Prize for Inclusive Employment</li> </ul>
	<ul> <li>Funding of an inclusive TV show on Hesse Television planned for the end of 2014</li> </ul>
	<ul> <li>A wide-ranging campaign of awareness-raising measures is planned for 2015</li> </ul>
MV	- Awareness-raising
	- Promoting respect for rights and dignity through training courses (Local government should be
	familiar with the UNCRPD content and aims relating to all areas of life, to be able to break down
	existing prejudices and fears).
	- "Active involvement in the creation process" and also implementation of the inclusion approach
	outside of local government.
NI	<ul> <li>Enhanced public relations work on the Personal Budget.</li> </ul>
	<ul> <li>Training measures for awareness-raising in the Ministries.</li> </ul>
NW	Subject mentioned in the list of relevant topics.

#### MISCELLANEOUS

Specifically in Hesse: Creation of (currently) seven municipal flagship regions. Various possible ways of removing barriers and creating structures on a municipal level are being trialled. This is being implemented with the inclusion of persons with disabilities and therefore not only contributes to the various priority areas but also aids participation. Further general obligations being fulfilled by the creation of flagship regions:

 Development of administrative procedures along the lines of the UNCRPD; development of structures in administration departments and in the public domain promoting UNCRPD implementation; training of specialists; making information accessible and promoting the participation of persons with disabilities particularly in working life, leisure time, sport and tourism; also making public spaces accessible and thereby promoting the self-determination and equal opportunities of persons with disabilities.

#### d) Measures to protect particularly marginalised groups

- As a rule, mention is made here of the regulatory reviews which the Länder have carried out or which are envisaged (cf. Question 3)
- Other, state-specific measures:

BW	- Promoting investment: increased support for decentralised forms of housing and integrated
	community housing.
	Support for innovative and inclusive housing projects, to make it possible for people to live
	together regardless of whether or not they have disabilities.
	Only in exceptional circumstances will Baden-Württemberg give planning approval for pro-
	jects in so-called central locations with more than 100 residents.
BY	Bavaria has no marginalised groups of people. The Bavarian Action Plan applies to all persons with
	disabilities. Persons affected by disabilities in a particular way are also explicitly identified in the Ac-
	tion Plan, e.g. deafblind persons, girls and women with disabilities.

	The Action Plan for Bavaria provides for the introduction of an allowance for deafblind persons.
BE	The Berlin Senate's policy focus for UNCRPD implementation is in the interest of all persons with dis-
	abilities in the State of Berlin.
BB	The state policy for persons with disabilities is fundamentally structured to guarantee the greatest
	possible self-determination, normality and participation. Care, guardianship and the necessary assis-
	tance and participation services should be provided where daily life happens: in the midst of society.
	All measures are geared towards this.
	- A good example of this is the revised version of the Brandenburg Care and Residential Accom-
	modation Act (BbgPBWoG), which directs the focus of residential home care on this premise.
HB	The group with the biggest mobility problems benefit from a special transportation service.
HE	- Setting-up of its own working group on the theme of women with disabilities, as part of the im-
	plementation process.
	- Commissioning of a study on the accessibility of shelters for persons (with disabilities) affected by
	violence.
	- Planning a specialist unit on accessibility for persons with sensory impairments, also in coopera-
	tion with deafblind persons.
	- Close cooperation with the Hessian State Association pro familia, for example on the subjects of
	barrier-freedom/accessibility for victims of violence and parents with disabilities.
	<ul> <li>Particular attention given to women with disabilities in the Hessian State Government's HePas</li> </ul>
	programme in cooperation with the Hessian State Welfare Association.
NW	- Focus on developing policies on combating violence against women with disabilities (including a
	State Health Conference resolution, planned "State Action Plan to Combat Violence Against
	Women and Girls in NRW", proposals from the Conference of Ministers for Equality and Women
	(GFMK), support for "Equal Opportunity Officers in Facilities" project).
	- Marginalised groups of persons with impairments and an LSBTTI (lesbians, gay men, bi-, trans-
	and intersexuals) background are helped above all by measures to raise awareness in profession-
	al circles and expert communities, society, the relevant advice centres, LSBTTI associations and
	organisations as well as facilities providing assistance to persons with disabilities.
	- Furthermore, they benefit from the that fact that sexual identity is enshrined in legal regulations
	and in state government disabilities policy programmes and support frameworks, as well as from
	the integration of this topic in special advisory bodies for LSBTTI and their families and from sup- port for the activities of the "queerhandicap e.V." state association.
	<ul> <li>In addition, there are more and more opportunities for people to benefit from supervised living in their own home, and this includes persons with mental and multiple disabilities, so that people</li> </ul>
	with greater and more complex support needs can be responsible for their own life and live in an
	environment of their choosing rather than being assigned to a life in institutions (cf. also Ques-
	tion 15 on this topic).
	<ul> <li>Focus on Measures for deafblind and hearing-impaired persons. These people encounter many</li> </ul>
	communicative and physical barriers. These barriers and the possible solutions to them are de-
	scribed in a University of Cologne analysis of real life situations, which was commissioned by the
	state government of North Rhine-Westphalia. In a first follow-on step the state wants to set up a
	specialist centre for hearing-impaired and deafblind persons, which should help to improve their
	inclusion and participation, whilst barriers to communication and orientation are removed. Fur-
	thermore, there are plans to expand and provide secure, long-term training courses (beginners,

	intermediate and advanced) for communication assistants, for example (sign-language interpret-
	ers and deafblind assistants).
RP	As a matter of principle, the State Act on the Creation of Equal Living Conditions for Persons with Disabilities (LGGBehM) throws a spotlight on women and girls with disabilities living in Rhineland-
	Palatinate.
ST	Protection of and support for the self-determination of women and girls is a stand-alone area of ac-
	tivity in the State Action Plan. In particular, this deals with measures to prevent violence in facilities.

### II. Appendices to Question 2

#### a) General forms of involvement

BW	League of Voluntary Welfare Associations on the European Social Fund (ESF) steering committee
BY	Involvement in the steering committee, consultation, statement given by the Bavarian State Commis-
	sioner for Matters relating to Persons with Disabilities
BE	State Commissioner for Matters relating to Persons with Disabilities on the ESF steering committee
BB	League of Voluntary Welfare Associations on the ESF steering committee
HB	State Commissioner for Matters relating to Persons with Disabilities on the ESF steering committee
HH	No association involvement in the ESF steering committee
HE	League of Voluntary Welfare Associations and the Hessian State Welfare Association on the ESF
	steering committee
MV	No response
NI	No association involvement
NW	League of Voluntary Welfare Associations on the ESF steering committee
RP	No association involvement
SL	League of Voluntary Welfare Associations on the ESF steering committee
SN	League of Voluntary Welfare Associations on the ESF steering committee
ST	Representation on the ESF steering committee via the Centre of Excellence for the Promotion of Eco-
	nomic and Business Partnerships in Saxony-Anhalt
SH	Involvement of the Ministry of Social Affairs in the ESF steering committee
TH	Direct association involvement through the participation of the German Equality Welfare Association
	and the Workers' Welfare Association. Also League of Voluntary Welfare Associations on the State
	Advisory Council for Labour Market Policy and the State Commissioner indirectly involved in the de-
	velopment of priority axis B guidelines

#### b) Aspirations for the future

For the 2014-2020 Operational Programme (OP), some Länder give details of improvements in respect of association involvement in the development and monitoring of programmes. Four Länder reported association involvement in the development of the new OP; another (Baden-Württemberg) reported that association involvement was guaranteed through the participation of the Ministry of Social Affairs.

- Berlin: Inclusion of the Senate Department for Health and Social Affairs, to which the Commissioner/State Advisory Council for Matters relating to Persons with Disabilities are assigned; the "State Body for Equality – Against Discrimination" was also involved.
- Brandenburg: Direct association involvement in development via the League of Voluntary Welfare Associations; also consultations with the State Commissioner for Matters relating to Persons with Disabilities.

- Saarland: Direct association involvement in the OP 2014-2020 planning phase (Workers' Welfare Association, Caritas, Diakonisches Werk, SOS-Kinderdorf).
- Saxony: Public consultation and thereby chance for associations to get involved; furthermore, opportunity to take part in the preparation of the support programme content.

Two Länder report that they are making efforts to improve association involvement on the ESF steering committee in future.

- Lower Saxony is reviewing association inclusion.
- In North Rhine-Westphalia, the ESF managing authority has proposed that the steering committee eventually include, in addition to the League of Voluntary Welfare Associations, the North Rhine-Westphalia Self-Help state association and, as necessary, other stakeholders such as the State Social Association VdK North Rhine-Westphalia and the North Rhine-Westphalia Social Association as advisory members.

#### c) Opportunities for persons with disabilities to take part in the programmes

Two alternative standpoints have formed as regards what ESF programmes can offer persons with disabilities. Some Länder make explicit mention of the fact that in principle everything offered was open to persons with disabilities too; other Länder identify specific projects/sub-programmes for persons with disabilities. In some cases (e.g. Bremen) it is stated that, in addition to the specific measures, all other projects and programmes are, in principle, open to persons with disabilities too. It is, however, impossible to give a specific breakdown of all the Länder on the basis of the responses received.

BW	The Ministry of Social Affairs department with responsibility for persons with disabilities was in-
	volved in the preparation of the Operational Programme draft.
BY	Involvement of the Bavarian State Commissioner for Matters relating to Persons with Disabilities.
BE	In the 2007-2013/15 funding period, persons with disabilities are a stand-alone target group for all
	funding; there is also a special focus in Specific Goal 9, to improve the skills and capabilities of per-
	sons with disabilities (support instrument "Training Persons with Disabilities and Specialist Staff to
	Support Them"). The outcome of the support measures was assessed by means of three indicators:
	<ul> <li>Successful completion (this goal was achieved)</li> </ul>
	<ul> <li>Training placement (this goal was surpassed by a significant margin)</li> </ul>
	- Placement on the mainstream labour market (this goal was missed by a significant margin)
BB	- Ongoing involvement guaranteed by the League of Voluntary Welfare Associations' presence on
	the steering committee.
	- The ESF OP 2014-20 for Brandenburg was developed in an intensive cooperative consultation
	process. Associations involved via the League of Voluntary Welfare Associations. The State
	Commissioner for Matters relating to Persons with Disabilities is also being consulted; coopera-
	tion is to continue during the implementation process.
HB	- State Commissioner for Matters relating to Persons with Disabilities continues to have a seat on
	the ESF steering committee with voting rights.
	- Also funding for specific target groups (D Fund) in the employment policy action programme, via
	the compensatory levy.
HH	<ul> <li>No participation of associations of persons with disabilities.</li> </ul>
	- However: State Action Plan on the UNCRPD is an explicit component of the policy terms of refer-
	ence in the ESF OP 2014-2020. In addition Hamburg, as the only ESF administrative body in the

	Federal Republic apart from Berlin, is making provision for measures to support the employment of persons with disabilities.
	<ul> <li>In comparison with the other L\u00e4nder, it has committed resources to the target group and funded innovative measures at a level that is well above average.</li> </ul>
HE	Hessian State Welfare Association as well as the League of Voluntary Welfare Associations.
NI	<ul> <li>Admission of associations onto the steering committee is being reviewed (not yet involved in OP development).</li> </ul>
NW	<ul> <li>Plans to increase the participation of persons with disabilities at the association level.</li> </ul>
	- The ESF administration authorities suggested that in its new rules of procedure the steering
	committee should admit, in addition to the central Voluntary Welfare Associations, the North
	Rhine-Westphalia Self-Help Association and, where appropriate, other stakeholders representing
	the interests of persons with disabilities, namely the State Social Association VdK North Rhine-
	Westphalia and the North Rhine-Westphalia Social Organisation, to be advisory members on the
	committee.
RP	No information
SL	- Early involvement in the OP 2014-2020 planning phase of associations such as: Lebenshilfe,
	Workers' Welfare Association, Caritas regional associations, Diakonisches Werk, SOS-Kinderdorf -
	> all the major associations represented in Saarland.
	– Additionally, involvement in the 2012 annual conference "European Social Fund in Saarland:
	Present and Future", which took place on 08/03/2012 with a key focus on the future direction of
	ESF funding in Saarland.
SN	- Public consultation with economic and social partners during OP development, thereby partici-
	pation opportunities.
	- In addition: the opportunity to be involved in the preparation of the support programme con-
	tent.
	- For participation in the steering committee: public process of partner selection; outcome: rele-
	vant partner organisations identified, but no final decision on partners as yet.
ST	- OP development sphase: on-going association participation via the Centre of Excellence for the
	Promotion of Economic and Business Partnerships for EU Structural Funds in Saxony-Anhalt
	(WKZ); also continues to be on the steering committee.
	- Feedback was also requested on the ESF OP with regard to programme preparation.
	- The EU administrative authorities gave the Commissioner for Matters relating to Persons with
	Disabilities the chance to have direct involvement on the steering committee. Associations of
	persons with disabilities have ongoing representation in the process to monitor programme im-
	plementation via the WKZ.
SH	Indirect involvement via Ministry of Social Affairs participation in the ESF steering committee.
TH	Direct participation: German Equality Welfare Association and the Workers' Welfare Association.
	Also: League of Voluntary Welfare Associations on the State Advisory Council for Labour Market
	Policy; State Commissioner: indirectly involved in the development of priority axis B guidelines
	"Promoting Social Inclusion and Combating Poverty and Discrimination of All Kinds" (relates to Thu-

Two Länder, Hesse and North Rhine-Westphalia, reported they had linked the ESF programme with the State Action Plan:

- Hesse: The Hessian Ministry of Social Affairs and Integration revised its range of support services in the context of the Action Plan to implement the UNCRPD and increased their scope and efficiency as a result. Their task was to bear in mind the needs of persons with disabilities without neglecting the programme's target groups.
- NRW: The specific goal of "Supporting the Inclusion of Persons with Disabilities" was enshrined in the "Active Integration" priority axis and thereby runs alongside the "One Society for All – NRW Inclusive" Action Plan.

In the case of Schleswig-Holstein, all applications for funding must fulfil the funding programme/guideline requirements by demonstrating the envisaged contribution to equal opportunities and non-discrimination, including accessibility for persons with disabilities.

#### d) Examples of best practice

BY	Project entitled "JobAccess: Overcoming Barriers, Starting a Career - Guiding and Integrating Long- term Unemployed Persons with Disabilities into Employment", backed by a company called Access Integrationsbegleitung. On the one hand the project aims to integrate into employment those per- sons with disabilities who are capable of working but have been unemployed for a long time and are claiming unemployment benefit; and on the other hand, to convince employers to take on persons with a disabilities (special feature: two days a week 'block release' for general and career-related training; three days a week working in training placements with employers on the general labour market, on a long-term basis, with socio-educational support). Example: "StudienCoach" student coaching, "back UP team"
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	Applicant: University of Potsdam Duration: 15/03/2011 to 31/12/2013
	Participants: 148 (including 102 women), of which 50 participants had a confirmed level of disabili-
	ties (36 women)
	The transition between school and further education is like graduation in that it can be a critical
	phase. Students with disabilities often find these times particularly challenging. StudienCoach there-
	fore sets itself the task of supporting students with health impairments at the start and end of their
	time in higher education. As an expansion of StudienCoach, the <u>"back UP team" project</u> is planning
	to consolidate what it can offer groups within the target group of students with disabilities. These
	group offerings are organised according to need and take into account either a particular health
	problem affecting students (e.g. depression groups - "How can I cope with university life?" or study-
	related problems (writer's block, exam anxiety, etc.). The back UP team target group is students
	going through a difficult time in their studies who urgently need health and prevention-based coun-
	selling and support to achieve their study-related goals, as well as students with a mental health
	impairment, who require a programme of coaching and support appropriate to their needs, espe-
	cially when they are returning to their studies after illness, in line with the equal opportunities prin- ciple.
НВ	The <b>SIBS aktiv</b> project is aimed at persons undergoing rehabilitation as well as severe persons with
	disbailities and those similarly affected, who are no longer able to do the job they are used to, but
	have the potential to transfer their skills to new occupations which are much in demand. The SIBS
	aktiv project offers such people
	- Training for sunrise industries
L	

	-	Targeted support for occupations needing more skilled personnel
	-	Close cooperation with employers to persuade them to recruit the target groups and to offer
		the participants sustainable employment prospects
		SIBS aktiv covers the following individual activities:
	-	Test and assessment processes
	-	Certified training modules
	-	Integration mentoring with coaching in the workplace; helping people who have difficulty get-
		ting a placement to get used to working life; after-care; educational support for external testing
	-	"Nele" learning and communication platform with e-learning and e-communication
HE	In	principle all Hessian labour market support measures also incorporate persons with disabilities.
	Тν	o innovative projects have particularly focussed on this target group:
	-	As part of the "Training and Employment for Young People" programme, the "Rothschild" train-
		ing and skills project is being supported. This project involves young people who are deaf or
		hard-of-hearing being trained and taught skills together with young people who have no hearing
		impairment.
	-	As part of the "Labour Market Policy Incentives" programme, support is being given to the "In-
		clusion and Innovation" project in cooperation with the German Institute for the Blind and the
		Kompass "Cross Innovations Centre". This project-based approach is opening up new ways of
		promoting employment for persons with sensory impairments.
HH	-	BIHA - Hamburg Integration and Advice Initiative (Provider: Further Training Academy for Busi-
		ness (FAW GmbH), Hamburg)
		Duration: 01/01/2008 - 31/12/2010
		This project advised managers and HR personnel in SMEs, who need support with the employ-
		ment of severely disabled persons, how to integrate and train such people in the workplace.
		Funding: 779,650 euros, of which 332,727 euros of ESF funds
	-	BIHA - Specialist Education and Integration Services in Hamburg (Provider: Further Training
		Academy for Business (FAW GmbH), Hamburg)
		Duration: 01/01/2011 - 31/12/2012
		Managers and HR personnel in SMEs are given specialist advice on how to integrate severely dis-
		abled persons into the labour market and how to improve further vocational training. BIHA has
		structured its activities on the basis of the UNCRPD signed by Germany.
		Funding: 534,824 euros, of which 267,412 euros of ESF funds
	-	Development of a Disabilities Studies course (Provider: the University of Hamburg)
		Duration: 01/03/2009 - 31/03/2014
		The project aimed to exploit Disabilities Studies expertise to improve accessibility for severely
		disabled and disadvantaged persons in systems of further vocational training.
		Funding: 1,576,575 euros, of which 1,098,710 euros of ESF funds
	-	Handicap - Advice and Training (Provider: Arbeit und Leben Hamburg)
		Duration: 01/01/2011- 31/12/2012
		Industry representatives, particularly from SMEs, are given specialist advice on how to integrate
		severely disabled persons into the labour market and how to improve further vocational train-

	ing. In addition, works and staff councils, employee representatives and representatives of se- verely disabled persons were offered informational events on topics of business policy for se- verely disabled persons, business integration management, demographic change and further vocational training.
	Funding: 569,954 euros, of which 286,085 euros of ESF funds
-	Handicap – Integraplus (Provider: Arbeit und Leben Hamburg) Duration: 01/01/2008- 31/12/2010
	Advice was given to works and staff councils, employee representatives and representatives of severely disabled persons in SMEs in this project, Topics included: business policy for severely disabled persons, business integration management, as well as demographic change in businesses.
	Funding: 900,000 euros, of which 385,624 euros of ESF funds
-	Integration by Training Severely Disabled Persons (INES) (Provider: Dibs GmbH) Duration: 01/01/2008- 31/12/2009
	The training helped severely disabled persons improve their IT skills, as required by businesses. This should increase life-long involvement in vocational training.
	Funding: 698,002 euros, of which 349,001 euros of ESF funds
-	NetQ. Further Training Network and Advice Centre (Provider: ARINET GmbH) Duration: 01/01/2010 - 31/12/2012
	This project gave people with a severe disabilities and mental instability problems opportunities for further training to make them more secure on the labour market. SMEs were also given advice on how to deal with persons with mental instability problems.
	Funding: 577,671 euros, of which 292,407 euros of ESF funds
-	Network for Participation of People Facing Multiple Discrimination (Provider: the University of Hamburg) Duration: 01/07/2011 - 15/02/2014
	This Hamburg networking unit promoted the vocational integration of people with a migration background and a disabilities or chronic illness. The project also strove to bring about the intro- duction of "participation research/(dis)ability research" studies and encouraged businesses to implement diversity management.
	Funding: 310,675 euros, of which 157,950 euros of ESF funds
-	PiCo (Provider: ARINET GmbH) Duration: 01/03/2009 - 31/12/2013
	Vocational training measures and coaching sessions helped persons with psychological impair- ments find ways to participate in working and community life.
	This project was a huge success, with 300 people taking part, including 68 who were successfully placed in a job, and has continued since 01/01/2014 with state labour policy funding.
	Funding: 1,003,845 euros, of which 647,557 euros of ESF funds

	-	Literacy for Deaf Persons Using Web 2.0 Technology (Provider: C1 WPS GmbH) Duration: 01/07/2010 - 30/06/2012
		This project helped deaf persons learn German through sign language, to increase their chances of further training and employment. Part of the project was the development of a modern Web 2.0-based sign language editor for creating the teaching materials. The project received scientific support from the University of Hamburg, is now offered by a company called C1 WPS GmbH and will be released nationwide in future as part of a project with the Further Training Academy for Business (FAW).
		Funding: 545,639 euros, of which 262,847 euros of ESF funds
	-	FUTURE - IT skills for severely disabled employees (Provider: Dibs GmbH) Duration: 01/01/2011- 30/09/2012
		Severely disabled persons were offered business-related IT skills which will stand them in good stead for the future.
		Funding: 519,762 euros, of which 259,881 euros of ESF funds
NW	-	Starting in 2012 and continuing on a step-by-step basis till 2019/20, a comprehensive and inclu- sive system for the school/career transition is being implemented. An essential part of this structural, preventative approach, coordinated at municipal level by the 53 regional and local authorities, is the introduction of obligatory standard elements in career and academic counsel- ling from Year 8, while at the same time ensuring the move from school into training, work, more schooling or further education is as seamless as possible. As part of the "No dead-end ca- reers" state programme, all measures are to be bundled and coordinated at a local (municipal) level. Within the framework of the North Rhine-Westphalia Training Consensus, all stakehold- ers, for example mainstream schools and vocational colleges, training providers, businesses, business organisations and employment agencies, are part of the network. This transition sup- port system applies to all young people, including those with disabilities and those who require special educational support. With the "No dead-end careers" Training Consensus, the state gov- ernment and its partners are explicitly and consistently seeking to create an inclusive path for career guidance and the transition between school and work. The <b>"School Meets Working Life"</b> (STAR) project was initiated in 2009 in tandem with the re- gional councils, with recent support coming from funding from the Federal Inclusion Initiative, and has laid the foundations for school pupils with (severe) disabilities to be able to follow basi- cally the same path of career guidance as all other pupils. On the basis of a career counselling process beginning in the pre-penultimate school year, STAR aims to give school pupils with dis- abilities advice and comprehensive information about their career options as well as supporting them as they move from school into working life. The rapid progress of inclusion in schools is presenting STAR with greater and ever-growing demands. This leads us to expect
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	be in a position to gain vocational qualifications with the appropriate support. Once follow-up
	placement activities during the training year have been completed, these young people are of-
	fered additional training opportunities through the "100 Additional Training Places" campaign,
	which has been funded in tandem with the Federal Employment Agency since 2007. Vocational
	rehabilitation centres (vocational training centres and vocational retraining centres) are the
	main contact points. They advise young people on their career choice, agree a training contract
	with them, appoint a mentor to guide them, coordinate the training at various learning loca-
	tions and provide individual tutoring and additional support teaching. Each year up to 150
	young persons with disabilities get this chance of supported vocational training and are able to
	show that they too are capable of completing a vocational training course in a business enter-
	prise - with the support of vocational rehabilitation experts. Since the start of the "100 Cam-
	paign" some 900 young people have started a training course, with most of the practical train-
	ing taking place across nearly 590 participating companies. Over 100 different occupational pro-
	files prove that this support campaign is making a worthwhile contribution to inclusion on the
	labour market.
	- The "Occupational Participation - 1,000 Mainstream Jobs for Persons with Disabilities" initiative
	supports persons with disabilities transferring from a sheltered workshop for disabled persons
	onto the mainstream labour market, by giving employers subsidies to create an out-of-the-
	workshop "field" job for them within the company. As a result of this initiative which started in
	2013, 1,000 additional supported jobs for persons with disabilities should be created in North
	Rhine-Westphalia by the end of 2014. The project runs until 30/09/2015 (after a 3-month ex-
	tension). The Rhineland and Westphalia-Lippe regional councils are managing the project in
	close cooperation with the state government and are contributing to the project costs. By the
	reporting date of 31/05/2014 the creation of 487 supported field jobs was a cause for celebra-
	tion.
RP	Several ESF projects in Rhineland-Palatinate are aimed especially at the target group of persons with
	disabilities. One example worth mentioning is Club Aktiv's <b>BauArt project</b> , which is being offered in
	the Trier region:
	- Through "BauArt" persons with psychological disabilities are gradually (re)integrated into the
	mainstream labour market. The project also combines training in art and handicrafts through
	the competitive design of façades, sculptures and other objects. The participants receive theo-
	retical and practical training for careers as painters and varnishers. BauArt Trier gives partici-
	pants who have proved themselves in the project the chance of a place in mainstream training
	or employment. Further information can be found at <u>www.bauart-trier.de</u> .
ST	The projects aim to improve the chances of unemployed persons with a physical, mental or psycho-
	logical impairment of integrating into jobs requiring social insurance contributions on the main-
	stream labour market.
	The participants were offered individual analyses of their potential and job trials. The job trials can
	take place in businesses suitable for this purpose or in the project backer's own workshops. Voca-
	tional support is also provided in the workplace and is intended to help the participant get used to
	day-to-day life at work and increase their ability to cope with the work on an ongoing basis. The
	participants receive socio-educational support for the duration of their time on the project. The
	activities and support services offered in the projects result in the participants achieving greater
	personal stability and acquiring more skills.
	It is worth noting that the majority of participants were completely disconnected from working life

following long periods of unemployment. Even before they could be integrated into the labour market therefore, one of the project's main aims was to make them employable.Their employability is also improved by positive changes on a personal and social level. It is there-

fore obvious that participation in the project has increased their self-confidence and motivation. The latter was reflected most of all in the fact that more jobs were being applied for. Another positive aspect of note is that some participants made new contacts through the project's group activities and so were able to overcome their social isolation. This was mainly reflected in improved social behaviour and better teamwork, and thereby greater social skills.

SH In the 2011 reporting year five competitions for new ideas were run: to promote the integration of other disadvantaged groups, including persons with disabilities, into working life and to promote their social inclusion. The schemes selected are to help integrate the long-term unemployed back into work. Health impairments and disabilities are an obstacle to integration and this effect should be reduced by participation in the schemes. One scheme carried out in the 2010 reporting year was aimed explicitly at persons who are disabled or at risk of becoming disabled.

#### e) Details of the extent to which persons with disabilities benefit from these programmes

BW	According to our monitoring data, in the current funding period (incl. 2013)							
	4,057 persons	,057 persons with disabilities have taken part in ESF support measures, corresponding to 1.8% of a						
	total 224,002	otal 224,002 people in receipt of support.						
BY	2007-2013: tw	o special sub-	programmes in the Bavari	an ESF OP for persons w	ith disabilities; at the			
			cutting topic on equal acce					
BE			disabilities took part in me	asures financed by the E	SF (among 10,684 un-			
	employed per		1					
BB	•		es have taken part in ESF s	support measures, corre	sponding to 0.8% of a			
		• •	ipt of support.					
	•	•	led "Regional Budget" (1,6		• •			
	-	-	of a total of 141,424 parti	•	•			
		•	ipants = 26.7%) and "Activ		•			
	•		project to trial a more in-	· ·	-			
			ational support, was carrie	d out with around 500 p	articipants.			
HB			at specific target groups.					
	•	•	with a disabilities or mino	r health restriction				
	•	•	persons have a severe disabilities).					
	This corresponds to approximately 11 percent of participants (reference figure unknown).							
НН	2007-2013: a total of 11 projects funded.							
HE	2014 - 2020: three projects have already started. No information							
MV		Π						
NI	No response			No. of persons with	Proportion of persons			
INI	Target area	Data status	Number of participants	disabilities	with disabilities			
	Convergence	01/01/2014	87,835		0.017			
	Support	01/01/2014	67,055	1,551	0.017			
	programmes							
	in regional							
	competi-							
	tiveness and							
	employment							
	(RWB) areas	01/01/2014	190,717	3,750	0.019			

NW	No information								
RP	2007-2013 funding period: the yearly figures recorded for ESF projects in Rhineland-Palatinate were (as at 30/06/2014):								
	Funding year	2008	2009	202	LO	2011	2012	2013	2014
	Number of participants with a disabili- ties	534	1696	172	26	1803	1929	1620	1069
SL	No information								I
SN	In the funding period from 2007 to 2013, up to and including 31/12/2012, a total of 4,051 persons with disabilities took part in ESF measures in Saxony.								
				Total	PA A	PA B	PA C	PA E	
	Persons with dis UN-verified)	abilities (sta	tus:	4,051	722	701	2,623	5	
	Source: 2012 Ann	ual Report o	n the C	perational	Program	nme in Sax	ony for ESF	2007-201	3
ST	Approximately 2,2 270 could be integ	•			•	-		date. Of th	nese, around

# III. Appendices to Question 3

# a) Measures to bring existing laws into line with the UNCRPD

BW	No regulatory review carried out as yet. There are however plans to enshrine a "regulatory review"
0.00	as a measure in the State Action Plan.
BY	The relevant legal regulations were reviewed for UNCRPD compliance whilst the Action Plan was in
	preparation, and the necessary measures were incorporated into it.
	- Amendments were made, for example, to the Bavarian Equal Opportunities for Persons with
	Disabilities Act (BayBGG), the Bavarian Law on Education and Teaching (BayEUG) and the Bavar-
	ia Law on Child Education and Care (BayKiBiG).
BE	"Berlin Monitoring Body Project": at the start of 2013 the German Institute for Human Rights was
	tasked with developing "expertise for an omnibus act to implement the UNCRPD in the State of
	Berlin".
	The review as to whether the obligation to observe and implement the UNCRPD at Berlin state level
	requires legislative amendments to existing regulations has since been carried out in 12 areas (e.g.
	the State Equality Law (LGBG), Berlin Education Act (SchulG), State Electoral Law (LWG), State Elec-
	toral Code (LWO), Berlin Building Code (BauO), Hotel and Catering Trade Regulations (GastV), the
	Law Governing Local Public Passenger Transport (ÖPNV-Gesetz) and the Monuments and Historic
	Buildings Act (DSchG)), selected from the wide range of Berlin legislative norms in consultation with
	those responsible for general disabilities policy.
	The monitoring body found that all 12 areas under review required legislative action and this is
	currently the subject of expert discussions with the relevant Berlin Senate Departments. The legis-
	lative proposals submitted as part of the project are available as consultation papers and contain
	specific suggestions on wording, which provide a basis for discussion and could form part of an

	omnibus act.
	In the current year 2014 three more areas for review (e.g. the Law on Assistance and Protective
	Measures for the Mentally III (PsychKG), inclusive of a consultation on the same, are planned.
	On the basis of the outcome of the aforementioned regulatory review, 2015 should see a draft om-
	nibus act to implement the UNCRPD in the State of Berlin, in which the emphasis will be on an
	amendment to the State Equal Opportunities Act.
BB	Since 2003 the Brandenburg Equal Opportunities for Persons with Disabilities Act (BbgBGG) has
	ensured that persons with disabilities have equal rights and are not discriminated against. This also
	applies to legislation.
HB	As part of the ongoing preparation of the Action Plan, the relevant provisions of state law relating
	to the topics in question are also being examined. One further measure planned is a targeted re-
	view of individual norms/regulations with particular relevance to items in the UNCRPD.
HE	<ul> <li>Decision taken to review all Hessian laws and regulations.</li> </ul>
	- Review questionnaire developed, by which all laws and regulations are reviewed and necessary
	amendments are identified.
	- The next step features a discussion about how the laws in question can be brought into line
	with the UNCRPD.
MV	The Convention is considered in the case of laws and legislative amendments enacted since the
	UNCRPD came into force.
NI	A review of state legal norms in relation to compliance with the UNCRPD is currently underway.
NW	- Comprehensive regulatory review by all state government departments following a review
	questionnaire agreed with the monitoring body as part of Action Plan preparations.
	- The outcome and the resulting courses of action (amending laws etc.) will be presented in the
	Action Plan (cf. Chapter IV.1, pp. 59ff) and in a progress report.
RP	- Waived the drafting of a comprehensive law to implement the UNCRPD across state legislation
	(especially as state legislation has already been comprehensively amended via the State Law on
	Creating Equal Living Conditions for Persons with Disabilities of 16/12/2002 (Law and Ordi-
	nance Gazette RP, p. 481).
	- State law is being drafted in individual steps with consideration of the needs of persons with
	disabilities. This is put into practice by means of a draft presentation and inclusion of the view-
	points of the State Advisory Council on the Participation of Persons with Disabilities for those
	laws relevant to persons with disabilities.
SL	The enforcement of existing state regulations in compliance with the Convention is, given the fact
	that the UNCRPD has the status of Federal Law, and is indeed proving to be binding on the Länder
	too, ensured by the authorities within the framework of the application of state law, i.e. also in
	current administrative practices, and by the courts.
SN	According to the Cabinet decision of 27/03/2012, state government departments themselves are
	responsible for ensuring that existing legislation complies with the UNCRPD.
ST	A comprehensive review of existing state law has not yet been carried out. However, legal provi-
	sions are already being interpreted and drawn up with regard to UNCRPD stipulations.
SH	Regulatory screening as part of the intended action plan (cf. response to Question 1).
TH	The Thuringian Equality Act (ThürGIG) aims to prevent discrimination against persons with disabili-
-	ties and to eliminate existing discrimination, as well as ensuring that persons with disabilities are
	equally entitled to participate in society.

	The state and the municipal, regional and local authorities, their agencies and offices as well as state-level public bodies, institutions and foundations, are obliged to give active support to these goals within their respective areas of responsibility.
b)	Measures to bring draft laws into line with the UNCRPD
BW	<ul> <li>According to the administrative rules of the state government and ministries on the preparation of regulations, all legal provisions must undergo a regulation and sustainability impact assessment before they are enacted.</li> <li>One of the assessment criteria which must be observed here is the extent to which the regulation being assessed enables persons with disabilities to play an active part in society.</li> <li>There are plans to include the implementation of the UNCRPD explicitly in this.</li> </ul>
BY	<ul> <li>State authorities are bound by the regulations in UNCRPD as it is valid Federal law and need to take this into consideration for all current and future legislation.</li> <li>The compliance of current and future draft laws with the UNCRPD is also ensured by the fact that the Bavarian State Commissioner for Matters relating to Persons with Disabilities is involved in the preparation of draft laws and other important state government measures impacting on disabled persons' interests (cf. Bavarian Equal Opportunities for Persons with Disabilities Act (BayBGG), Art. 17, Para. 3).</li> </ul>
BE	The State of Berlin has committed itself to undertake regular reviews as to whether all its measures, and not just those of a legislative and administrative nature, comply with the rights of persons with disabilities enshrined in the UNCRPD, and also to take appropriate measures (including legislative measures to amend or abolish existing laws, regulations, customs and practices) to eliminate dis- crimination of persons with disabilities.
BB	<ul> <li>The Brandenburg Equal Opportunities for Persons with Disabilities Act was revised in 2013 with the aim of aligning it clearly with the UNCRPD.</li> </ul>
HB	Laws and ordinances drafted by the administration are reviewed by the Senator for Justice and the Constitution.         This review also covers conformity with superior rules of law, including therefore the UNCRPD.
НН	<ul> <li>There are plans to introduce a regular, continual process of reviewing regulations for their con- formity with the UNCRPD in future. This will also apply to existing law, when it is amended and/or it is clear there is a need for conformity.</li> </ul>
HE	<ul> <li>Pursuant to § 18 (3) of the Hessian Equal Opportunities for Persons with Disabilities Act, the State Commissioner for Matters relating to Persons with Disabilities is to have early involvement in all "laws, regulations and other important measures dealing with or affecting the interests of persons with disabilities". This however implies no more than a right to be heard and cannot stop the parliamentary process in the event of a draft law running counter to the UNCRPD. There is no conclusive guarantee therefore that all current and upcoming draft laws comply with the UNCRPD. This is especially true as the Commissioner only receives the draft once it has been finalised.</li> <li>There are plans however to trial the participation of associations of persons with disabilities on the basis of the Joint Rules of Procedure (GGO). Therefore the following principal objectives are enshrined in the Action Plan: </li></ul>

	Disabilities shall work together to review what improvements can be made to the way associa-
	tions of persons with disabilities have been involved thus far.
	Principal objective 2:
	In the process of revising the Joint Rules of Procedure, the Hessian State Government is to re-
	view whether the involvement of persons with disabilities is to be adopted as a separate obliga-
	tion.
	Furthermore, the aforementioned regulatory review measures are to be noted.
MV	No information is available.
NI	- An amendment to the Joint Rules of Procedure for the State Government and Ministries in Low-
	er Saxony is currently in preparation, in order that greater consideration is given to the interests
	of persons with disabilities and to the UNCRPD when, for example, decisions are being made in
	Cabinet.
	- As part of the regulatory review (§ 40 of the Joint Rules of Procedure), draft laws will also be
	checked for conformity with the UNCRPD in future.
NW	- The regulatory review process is to be legally enshrined as part of a "First General Act on Greater
	Social Inclusion in North Rhine-Westphalia".
	– In addition to the statutory regulation, there will be a provision for this in the State Government
	Joint Rules of Procedure (GGO).
RP	- § 11, Para. 2, Sentence 1, of the State Act on Equality for Persons with Disabilities (LGGBehM)
	assigns to the State Commissioner for Matters relating to Persons with Disabilities a number of
	tasks, including that of ensuring that provisions benefiting persons with disabilities (not least the
	UNCRPD, which enjoys the status of Federal Law) are observed.
	- Pursuant to § 11, Para. 3, Sentence 1, LGGBehM, the State Commissioner is to have early in-
	volvement in all fundamental matters within the state government relating to the interests of
	persons with disabilities.
SL	
	Inclusion at the Ministry of Education and Culture.
	– Within the framework of the external hearing, the State Advisory Council for Matters relating to
	Persons with Disabilities considers legislative and regulatory drafts and communicates its respec-
	tive views on these to the state government and/or Landtag. The Council members ensure that
	the legal regulations comply with the UNCRPD.
SN	The independent Saxon State Government Commissioner for Matters relating to Persons with Disa-
	bilities, appointed in line with § 10, Para. 1 of the Act on Improving the Integration of Persons with
	Disabilities in the Free State of Saxony, is, pursuant to § 10, Para. 4 of the Act, to have involvement in
1	all important provisions, including those of a legal or regulatory nature, whenever they deal with or
SL	<ul> <li>ing to the State Advisory Council on the Participation of Persons with Disabilities when legal an administrative regulations are being prepared, as long as these have special significance for persons with disabilities.</li> <li>Similarly, § 6, Para. 5, of the Joint Rules of Procedure for the state government and ministries regulate the State Chancellery and the representatives of Rhineland-Palatinate at Federal level and at the European Union (GGO).</li> <li>For new proposed legislation, in view of UNCRPD requirements, the "regulatory review" is systema ically addressed within the framework of the internal and external hearing for the draft regulation.</li> <li>Education and inclusion in schools: UNCRPD implementation is tracked by the Commissioner for Inclusion at the Ministry of Education and Culture.</li> <li>Within the framework of the external hearing, the State Advisory Council for Matters relating the Persons with Disabilities considers legislative and regulatory drafts and communicates its respective views on these to the state government and/or Landtag. The Council members ensure that the legal regulations comply with the UNCRPD.</li> <li>The independent Saxon State Government Commissioner for Matters relating to Persons with Disabilities, appointed in line with § 10, Para. 1 of the Act on Improving the Integration of Persons with Disabilities in the Free State of Saxony, is, pursuant to § 10, Para. 4 of the Act, to have involvement</li> </ul>

	touch on questions relating to the integration of persons with disabilities.
ST	It has been decided to review the state laws and regulations with regard to their conformity with the
	UNCRPD (regulatory screening). Consequently, one of the State Action Plan tasks on UNCRPD im-
	plementation is being carried out (see response to Question 1).
SH	The envisaged state action plan will include relevant statements on this point.
TH	No information is available.

#### c) Overview of relevant political decisions in the Länder

BY	It is worth noting two Landtag resolutions (printed documents 16/8605 and 16/8606) calling on the
	state government to implement the UNCRPD, to formulate an action plan and to align this with the
	regulatory provisions in the UNCRPD.
	- Accordingly, during the formulation of the action plan, state legislation was reviewed for its con-
	formity with the UNCRPD.
	- As a result of this review, measures were included in the action plan to amend articles of state
	legislation.
	Two resolutions relating to the action plan were also passed by the Council of Ministers. On
	03/05/2011 the Council of Ministers approved a draft of the action plan, whilst its final version was
	approved on 12/03/2013 (see also Question 1).
BE	As already mentioned with regard to Question 1, the resolution "10 disabilities policy guidelines of
	the State of Berlin for lasting implementation of the UNCRPD by 2010", passed by the Berlin Senate,
	gives an explicit guarantee on the part of the State of Berlin to carry out a review of state regulations
	and to submit a draft omnibus act, in disabilities policy guideline 10, "Review".
BB	With its resolution of 23/01/2013 (printed document 5/6700-B), the Landtag called on the state gov-
	ernment "to take the fundamental principles of the UNCRPD and the Brandenburg Equal Opportuni-
	ties for Persons with Disabilities Act (BbgBGG) as a basis for its work amending existing state regula-
	tions and formulating new ones".
HB	There is a Parliament order to review and assess the conformity of the Bremen Mental Health Act
	with the UNCRPD (printed document 18/294)
HE	- Hessian Landtag resolution, printed document 18/1673, item 1. Review of need for legislative
	action as a result of the UNCRPD.
	- Coalition agreement 2014-2019: Implementation of the UNCRPD and the Hessian Action Plan.
	– Principal Objective 1, Chapter 3, Hessian Action Plan: "The Hessian state government examines
	all state regulations for their conformity with the obligations arising from the UNCRPD".
	<ul> <li>Resolution taken by the inter-ministerial working group of all departmental heads.</li> </ul>
NI	Coalition agreement for the 17th parliamentary term of the Lower Saxon Landtag 2013 to 2018.
NW	- In 2012 the state government was called upon by the Landtag to present an action for UNCRPD
	implementation which also contains a regulatory review.
	<ul> <li>Consequently several legislative processes have also been initiated in the meantime.</li> </ul>
	• Example: GEPA <sup>1</sup> NRW, by which the Housing and Participation Act (WTG) and the Care and
	Services for the Elderly Act are to be adapted to the requirements of the UNCRPD.
	- There are additional plans to amend the Equal Opportunities for Persons with Disabilities Act

<sup>&</sup>lt;sup>1</sup> The law governing the development and reinforcement of a demographically sound, participation-oriented infrastructure and the enhancement and protection of quality housing and residential care services for the elderly, persons in need of care, and persons with disabilities and their relatives.

and its provisions as part of an ampibus ast ("First Constal Act on Creater Second Indusion in
and its provisions as part of an omnibus act ("First General Act on Greater Social Inclusion in
North Rhine-Westphalia - Act on Greater Inclusion").
The Rhineland-Palatinate Landtag motion for a resolution "Policy on the participation of persons
with disabilities" of 27/03/2014 (printed document 16/3440) states at item 15: "The state govern-
ment is called upon to observe the criteria and requirements of the UNCRPD when formulating and
amending state legislation and to defend its provisions at all times".
<ul> <li>Cabinet decision of 27/03/2012:</li> </ul>
Establishment of a contact point in the State Ministry of Social Affairs and Consumer Protection,
and commissioning of Ministries to take it upon themselves to initiate amendments to the regu-
lations for which their respective departments have responsibility, in order that the rights identi-
fied in the UNCRPD are realised.
<ul> <li>Landtag resolution of 26/08/2011:</li> </ul>
Commitment to formulate a plan of action and measures for targeted implementation of Article
24 of the UNCRPD by 26/03/2012, to keep the Landtag and the public updated on the status of
plan implementation.
The formulation of the State Action Plan to implement the UNCRPD is based on political and/or
parliamentary decisions. The compliance of state legislation with the requirements of the
UNCRPD is enshrined in the State Action Plan, and this includes an action point devoted solely
to it.

# IV. Appendices to Question 4

# a) Legal entitlement to reasonable accommodation

BW	Currently there are no plans for further specific steps.
BY	- Enactment of the Bavarian Equal Opportunities for Persons with Disabilities Act (BayBGG).
	- Regulations stipulating that the refusal of reasonable accommodation constitutes discrimi-
	nation should be passed at Federal level.
BE	No information
BB	- The state has an obligation to guarantee reasonable accommodation; this stems from the
	constitutionally-enshrined ban on discrimination in line with Art. 3, Para. 3, Sentence 2, of
	the Basic Law. Therefore reasonable accommodation can now be demanded by the legisla-
	tor. A state-specific regulation to implement Art. 5 of the UNCRPD is therefore unnecessary.
	- The Brandenburg Equal Opportunities for Persons with Disabilities Act (BbgBGG) will be
	assessed in 2016. In this context a review will determine whether the entitlement to rea-
	sonable accommodation is to be laid down in state law.
HB	- The Bremen Equal Opportunities for Persons with Disabilities Act (BremBGG) has been in
	force since December 2003. The purpose of the Act is to promote equality and counter dis-
	crimination. In § 6 it states:
	1) Disabled persons should not be discriminated against in relation to persons who
	are not disabled. Special measures should be taken to ensure existing discrimina-
	tion against disabled persons in relation to persons who are not disabled is grad-
	ually abolished, prevented or eliminated.
	2) Specific bans on discrimination to benefit disabled persons in other regulations remain
	unchanged.

HH	Where necessary, this matter will be dealt with when the Hamburg Act on Equality for Persons
	with Disabilities is revised (from 2015).
HE	<ul> <li>The current legal basis in Hesse regarding discrimination against persons with disabilities rests on Art. 3, Para. 3, of the Basic Law and the ban on discrimination contained therein. Further individual entitlements, which could be termed reasonable accommodation, are also laid down in various (state) regulations. Alongside the entitlements set out to date, reasonable accommodation can also, however, include other individual entitlements up to and including structural provisions. As long as the inherent meaning of the term "reasonable accommodation" remains unclear, there can be no prospect of enshrining this in law.</li> <li>In which state regulations/norms is or should the entitlement to reasonable accommodation be enshrined? - where necessary, review of the entitlement as part of the revision of the Hessian Equal Opportunities for Persons with Disabilities Act by 31 December 2014.</li> </ul>
NI	Reference to the Lower Saxony Building Code as well as DIN 18040.
	The requirements for barrier-free building construction must be met by planners and architects in line with applicable legislation in Lower Saxony.
NW	Within the framework of the Act on Greater Inclusion (cf. Question 3.3), the legal entitlement to reasonable accommodation is enshrined in the Equal Opportunities for Person with Disabilities Act.
RP	In the Periodic Report the Federal Government referred to numerous legal regulations relating to "reasonable accommodation" (Basic Law, Book IX of the Social Code, Federal Equal Opportu- nities for Persons with Disabilities Act, etc.). In this respect "reasonable accommodation" con- tinues to have a very wide range of meanings in law and can be interpreted differently depend- ing on the context in question. It is therefore only possible here to refer to similar general regu- lations, such as: Article 64 of the Rhineland-Palatinate Constitution or the relevant clauses of the State Act on Equality for Persons with Disabilities of 16 December 2002 (Law and Ordinance Gazette p. 481).
SL	An obligation to guarantee the "provision of reasonable accommodation" (Art. 5, Para. 3, in association with Art. 2, Sentence 4, UNCRPD) will be one of the items to be considered when the Saarland Equal Opportunities for Persons with Disabilities Act is revised; in particular with regard to the revision of the ban on discrimination in § 5. An amendment, as has already been mentioned, is envisaged in the current legislative period.
SN	<ul> <li>There are no generally binding regulations/norms; there are however special regulations, such as the Education Act. Insofar as review regulations or similar regulations make provision for facilities, these are considered reasonable accommodation, e.g. § 34, SGB XI, Saxony Higher Education Act - SächsHSG.</li> <li>The Saxony Integration Act is to be revised in the Landtag's 6th legislative period. In addition, all government departments are individually responsible for implementing the UNCRPD (Cabinet decision of 27/03/2012).</li> </ul>
ST	The entitlement to reasonable accommodation is enshrined in Saxony-Anhalt's Equal Opportu- nities for Persons with Disabilities Act (BGG LSA) of 2010. The BGG LSA and the State Action Plan for UNCRPD implementation serve to prevent any form of discrimination.
	<ul> <li>§ 4 of the BGG LSA defines discrimination as follows:</li> <li>Discrimination occurs when persons with and without disabilities are treated differently for no</li> </ul>

	compelling reason, and thereby persons with disabilities are directly or indirectly disadvantaged
	with regard to equal participation in society. This includes all forms of discrimination, including
	the refusal of reasonable accommodation. Reasonable accommodation constitutes necessary
	and appropriate changes and adaptations, which do not represent a disproportionate or costly
	burden and which, if they are required in a particular case, are carried out to guarantee that
	persons with disabilities are able to participate in the life of the community on an equal footing
	with persons without disabilities and can enjoy their fundamental freedoms."
SH	The envisaged state action plan will include statements on this point. It is not expected to be
	completed before 2017.
TH	In answer to the question, reference should be made to the following measures:
	- The principles of anti-discrimination are enshrined in the Basic Law (Art. 3. Para. 3, Sen-
	tence 2) and in the Constitution of Thuringia (especially in Art. 2).
	- The adoption of the General Equal Treatment Act in 2006, in particular with regulations
	relating to a labour law (§ 7, AGG) and civil law (§ 7, AGG) ban on discrimination against se-
	verely disabled persons (§ 19, AGG).
	- Thuringian Act on Equality and Improved Integration of Persons with Disabilities (ThürGIG)
	came into force in 2005, followed in 2007 by the corresponding ordinance. The current re-
	vision of ThürGlG is not yet complete.
	<ul> <li>The Thuringian action plan to implement the UNCRPD of 24/04/2012.</li> </ul>
	– Independent sources of advice, such as e.g. equality commissioners, commissioners for the
	persons with disabilities, as well as the Thuringian State Commissioner for Matters relating
	to Persons with Disabilities.

### b) Refusal of reasonable accommodation as discrimination

HB	There is a regulation which makes it possible to lodge a complaint against discrimination, as well as
	the grounds for it. § 12 of the Bremen The Equal Opportunities for Persons with Disabilities Act
	(BremBGG) defines the right of associations to take legal action. It allows recognised associations to
	lodge a complaint about specific or structural discrimination. This right also applies representatively
	to individuals, who feel they are being discriminated against:
	(1) An association recognised in line with Paragraph 4 can, with no infringements of its
	rights, lodge a complaint in accordance with the Code of Administrative Court Proce-
	dure, if a violation is ascertained by the authorities named in § 5 against
	(1) the ban on discrimination pursuant to § 6, Para. 1, and the obligation to
	create barrier-free conditions in § 8, Para. 1, § 9, Para. 1, § 10, Para. 3 or §
	11, Para. 1, Sentence 2, or against provisions of the statutory ordinances en-
	acted hereto.
	Currently there are six associations in the State of Bremen that are recognised and have the right to
	legal action.
HE	As yet there is no time-frame for enshrining reasonable accommodation in law in an explicit man-
	ner; however the amendment of the Hessian Equal Opportunities for Persons with Disabilities Act
	(HessBGG) by 31 December 2014 is a possible deadline by which an enshrinement in law could be
	completed. On the whole however we are awaiting a reaction at Federal level, as the implementa-
	tion of reasonable accommodation can be completed in different wordings and the Action Plan
	adopted by the Hessian Cabinet in relation to laws on equality for persons with disabilities makes

	provision for standards which are as consistent as possible nationwide (Hessian Action Plan, p. 33).
	Apart from the explicit identification of reasonable accommodation, note should be made of § 9,
	HessBGG, in which the ban on discrimination against persons with disabilities is enshrined. Para-
	graph 1 obliges the federal state, its offices and agencies as well as the public bodies, institutions
	and foundations it supervises, with the exception of municipal regional and local authorities, to play
	an active role in eliminating discrimination against persons with disabilities within the framework of
	their legitimate or statutory responsibilities. The local authorities, their offices and agencies as well
	as the other public bodies, institutions and foundations, in which they participate to a significant
	extent, need at the very least to examine whether they are able to implement the aims of the Hess-
	BGG within the framework of what is economically feasible.
NI	The Government of Lower Saxony is currently formulating a green paper for a fundamental
	amendment of the State Equal Opportunities for Persons with Disabilities Act. There are plans to
	make provision for appropriate regulations. The draft law should be available in the summer of
	2015 and make its way through the parliamentary process.
NW	This aspect is to be regulated in the Act on Greater Inclusion (cf. Question 4.1). The corresponding
	draft law will soon be put to a vote at state government level. The plan is to submit the draft law to
	the Landtag by the end of 2014.
RP	Please see the response to Question 4.1 owing to the vague concept of "reasonable accommoda-
	tion".
SN	The Saxony Integration Act will be amended in the 6th legislative period of the Saxon Landtag to
	this end too. In addition, all government departments are individually responsible for implementing
	the UNCRPD (Cabinet decision of 27/03/2012).
SH	If this question relates to statements on barrier-freedom, then the answer from Schleswig-Holstein
	is "YES". The Schleswig-Holstein Equal Opportunities for Persons with Disabilities Act (LBGG) of 16
	December 2002, in association with Book IX of the Social Code (Rehabilitation and Participation of
	Disabled Persons) and the Federal Equal Opportunities for Persons with Disabilities Act (BGG),
	marked a fundamental paradigm shift for the status of persons with disabilities in society. Support-
	ed by the provisions of the General Equal Treatment Act (AGG), greater rights to protection and
	participation came into being. At the heart of the LBGG lies the formation of comprehensive barrier-
	freedom as one of the significant prerequisites for persons with disabilities to play their part in soci-
	ety on a basis of self-determination and equal rights.
	Further-reaching regulations have yet to be put into place, but will almost certainly be implemented
	in the LBGG revision already announced.
TH	Please note the ban on discrimination pursuant to § 7 of the Thuringian Act on Equality and Im-
	proved Integration of Persons with Disabilities. In line with this, public administration bodies may
	not discriminate against persons with disabilities whilst performing their legitimate or statutory
	duties. Should persons with disbailities make a credible claim of discrimination by a public admin-
	istration body, the body must prove that there is no unequal treatment, that there are objective
	reasons for it or that there are objective reasons unrelated to the disabilities.

# V. Appendix to Question 10

## a) Access to complaints mechanisms for persons with disabilities in special facilities

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BW	Pursuant to § 7 of the Housing, Participation and Care Act the lower-level regulatory authority (home supervisory board) itself has an obligation to advise all residents of institutional facilities and assisted flat-sharing communities (i.e. persons with disabilities too) about rights and obligations. § 7 also obliges the regulatory authority to deal with complaints. Residents in these types of accommodation can air grievances or shortcomings with the relevant regulatory authority and, where necessary, request an inspection in line with § 17 ff WTPG. It is also possible to voice opinions and make suggestions (complaints too) using the rules of participation, which take the form of a relatives and guardians' advisory board, specifically in facilities for persons with disabilities. Alongside these options for making a complaint, the overwhelming majority of which is located "externally", there is a general requirement for institutional facilities to conduct a system of internal complaints management (§ 10, Para. 3, Sub-para. 5, WTPG).
BY	In line with the Care and Housing Quality Act (PfleWoqG), persons with a disabilities can address
	complaints to the specialist bodies for care homes and disabled persons' facilities in the district au-
	thorities and county boroughs. Furthermore, the PfleWoqG obliges the providers of facilities to oper-
	ate a system of complaints management. Each facility is also obliged to allow residents to choose
	representatives and so guarantee that they can participate and make their voice heard (Art. 9, Pfle-
	WogG). In addition, should there be breaches of contract, the affected parties can take legal action
	through the civil courts.
	According to Art. 21 of the law governing the compulsory admission and care of mentally ill persons
	(Compulsory Admission Act - UnterbrG), each administrative district has an inspection commission.
	The inspection commissions should make regular checks - at least once every two years however - as
	to whether the rights of the people admitted involuntarily under this law are being protected. The
	persons in involuntary accommodation are thereby to be given the opportunity to express their
	wishes and complaints in person (Art. 28 in conjunction with Art. 21, UnterbrG). As a rule the facility
	visits should be unannounced. In line with Art. 21, Para. 4, UnterbrG, the commissions are required
	to submit a report of the inspection outcome to the Bavarian Ministry of Social Affairs.
	In addition, the persons in involuntary accommodation have the opportunity at any time to address
	themselves in writing to the inspection commission, the Bavarian Landtag (Right of Petition pursuant
	to Art. 115, Para. 1, of the Bavarian Constitution) or the State Ministry of Labour, Social and Family
	Affairs and Integration.
BE	The Constitution of Berlin guarantees a right of petition. According to § 8 of the Housing and Partici-
	pation Act (WTG), the providers of residential facilities are obliged to have a system of complaints
	management in place. Furthermore, there is provision in § 8 for a user-based survey.
	Berlin offers several district complaints offices. In addition, the Psychiatry Complaints and Infor-
	mation Centre in Berlin (BIP) works as a Berlin-wide, independent centre. In cooperation with the
	other complaints offices they deal with complaints from service users, their families and people who
	work in the field too. They also offer other services such as e.g. counselling in different languages.
BB	Full-time residential facilities for persons with disabilities must have an internal complaints manage-
	ment system. § 13, Paragraph 1, Sentence 2, Number 8, of the Brandenburg Care and Residential
	Accommodation Act (BbgPBWoG) obliges service providers to record the date and time of receipt of
	complaints and suggestions for improvements regarding living and care conditions, their contents, an
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	assessment thereof, as well as the date, time and nature of any resulting action. As part of external
	quality assurance, persons with disabilities living in facilities have the opportunity to lodge a com-
	plaint with the state regulatory authority. Complaints empower the authority to carry out an on-site
	inspection. In accordance with § 19, Paragraph 1, Sentence 4, BbgPBWoG, such inspections should
	always be made unannounced.
	The opportunities to participate and to make complaints, as stipulated in the Federal Child Protection
	Act - BkiSchG (§ 45(2), Item 3, Book VIII of the Social Code), were implemented on a conceptual basis
	in residential homes for children and young persons with disabilities in the State of Brandenburg up
	until the end of 2013.
HB	In the State of Bremen all patients - that means citizens who had or have contact with the healthcare
	system, including those with psychological disabilities - who wish to lodge a complaint have access to
	independent patient advice centres and in-house complaints offices located in hospitals across the
	state. In the largest psychiatric hospital in Bremen there are two advocates available to represent
	patients' interests: one for the somatic department and another solely for the psychiatric depart-
	ment.
	Pursuant to § 37 of the Bremen Mental Health Act (BremPsychKG), patients in psychiatric clinics have
	the right to address complaints to clinic management and the Senator for Health. Should the clinic
	management prove unable to resolve the complaint of a patient accommodated in the forensic unit,
	this patient has the opportunity to initiate a judicial ruling via the relevant chamber responsible for
	the execution of sentences (§ 109, StVollzG - Prison Act). Irrespective of this, patients in the forensic
	clinic have the opportunity to receive free advice through the Association for Legal Aid (Verein für
	Rechtshilfe) in prisons within the State of Bremen, which holds regular consultation hours in the clin-
	ic.
	Patients who are involuntarily admitted in line with the Bremen Mental Health Act (BremPsychKG)
	and would like to lodge complaints, have a legal entitlement to call on the inspection commission (§
	36, BremPsychKG), whose members visit complainants promptly as needed. All wards must also dis-
	play the names and telephone numbers of the inspection commission (BK) contact persons. The BK is
	a commission that makes an unannounced visit to every facility taking compulsory admissions at
	least once a year, and is thereby accessible to patients and able to contact them directly regarding
	wishes and complaints.
	In addition, patients in the Clinic for Forensic Psychiatry and Psychotherapy are also offered a com-
	prehensive annual consultation session via the BK.
	Providers of facilities, in which persons with disabilities live, generally have a complaints manage-
	ment process. The availability and quality of this complaints management system is also the subject
	of regular reviews in line with the Bremen Residential and Custodial Care Act (BremWoBeG) by the
	Residential and Custodial Care Supervisory Authority (WBA). Pursuant to § 10 BremWoBeG, the facili-
	ties also have bodies representing residents' interests (so-called home advisory boards), whose tasks
	include supporting residents when they wish to lodge complaints. In the event that complaints are
	not dealt with satisfactorily within facilities, the Bremen Residential and Custodial Care Supervisory
	Authority is available to residents as an external point of contact for complaints.
НН	Facilities for adult persons with a disabilities must have an internal complaints management process
	in line with Hamburg's Residential and Custodial Care Quality Act. Additionally, there is also the op-
	portunity to address complaints to the state Residential Care Supervisory Authority. The latter will
	then take action and review the facility for any apparent deficiencies as required. This includes a re-
	view of discriminatory conditions in the facility.

	As a rule, every hospital has a complaints office. The Patienten-Initiative action group, the Hamburg
	Consumer Advice Centre or patient advocates are also available to all patients as independent con-
	tact points for advice.
	Virtually all the hospitals in Hamburg have signed the "Hamburg Declaration" on a patient-oriented
	process of dealing with complaints. The "Hamburg Declaration" is a voluntary self-obligation on the
	part of clinics in Hamburg and is valid for one year at a time
	(http://www.hamburg.de/patientenrechte/125018/beschwerdestellen-hamburger-erklaerung/).
	People who are involuntarily admitted to hospital psychiatric departments or a psychiatric and cor-
	rectional facility can address complaints to the supervisory commission in line with § 23 of the Ham-
	burg Law on Assistance and Protective Measures for the Mentally III (HmbPsychKG) and have the
	legitimacy of the compulsory admission reviewed pursuant to § 12, Para. 4, HmbPsychKG. Unless
	otherwise stipulated, the regulations governing the compulsory admission apply to the compulsory
	medical treatment. Complaints can also be directed to the Hamburg Parliament Petitions Committee.
HE	Pursuant to § 4 of the Hessian Act on Assistance and Care Services (HGBP), complaints about care
	and assistance services in facilities can be made to the regulatory authorities responsible for care and
	assistance.
	Furthermore, facilities are obliged to provide low-threshold, barrier-free complaints mechanisms as
	part of the investment they receive from the State of Hesse. Accordingly, an in-house complaints
	body must be set up and a specific external complaints body nominated within the facility.
	§§ 16 and 17 of the Hessian Equal Opportunities for Persons with Disabilities Act (HessBGG) also pro-
	vides the basis for legal protection via associations and for the right of associations to take legal ac-
	tion, in cases of discrimination against persons with disabilities.
	Finally all persons have the right to complain - as part of a petition - directly to the Landtag (Art. 16 of
	the Hessian State Constitution).
MV	All persons with disabilities living in a special residential facility have unrestricted access to the range
	of complaints mechanisms. These include legal action (objections, complaints) and the opportunity to
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	In addition, the operator of a residential home must set up a quality and complaints management
	system, in accordance with § 5, Para. 3, Sub-para. 3. Rules on how to deal with internal and external
	complaints must be established as part of the complaints management system. In particular,
	measures must be taken to ensure that residents, their relatives or guardians are informed, within a
	specified period, of whether any action has been taken/what action is being taken as a result of their
	complaints. The state home supervisory authorities are responsible for implementing legislation on
	residential accommodation.
NW	In line with the Hospital Configuration Act (KHGG), psychiatric hospitals must ensure that complaints
	are received and dealt with by an independent body. If treatment takes the form of a placement as
	defined in the NRW Mental Health Act (PsychKG), options for making complaints are provided for by
	law, as per the terms of the KHGG. As part of their responsibilities the members of the patient com-
	plaints bodies have the right to enter accommodation and treatment rooms and press for changes in
	the event of any complaints. They report any serious deficiencies to the regulatory authority. In addi-
	tion the ministry responsible for health appoints inspection commissions, which carry out unan-
	nounced visits to hospitals accommodating those concerned under the provisions of this law, and
	then check whether the special obligations associated with the accommodation of mentally ill per-
	sons are being met (§ 23, PsychKG NRW).
	With regard to correction and prevention, the Act on the Execution of Measures of Correction and
	Prevention of North Rhine-Westphalia (MRVG NRW) makes provision for different levels of adminis-
	trative and supervisory control. This gives patient the opportunity to submit petitions and make
	complaints, verbally, in writing or via electronic communication to the regulatory authorities. There is
	also the possibility of requesting a judicial review of the placement order and its continuation, as well
	as individual measures within the accommodation.
	The inspection commissions cited in line with the NRW Mental Health Act are also responsible for
	measures of correction and prevention, as per § 32, MRVG NRW. Persons who are placed in psychiat-
	ric and correctional clinics within the Westphalia-Lippe regional association can also contact a com-
	plaints commission. These commissions are made up of politicians from all groups in the healthcare
	and hospital committee of the Westphalia-Lippe regional association.
	With regard to residential facilities in which mandatory care is provided, complaints procedures are
	laid down in the NRW Housing and Participation Act (WTG). In line with § 8 of the WTG operators of
	such facilities must ensure that regulations concerning complaints procedures are in place. At the
	very least these rules must ensure the following: residents are informed of their right to make a
	complaint; a named person is appointed to deal with complaints; an appropriate time frame for han-
	dling the complaint is given; and complaints and how they were handled are documented and evalu-
	ated.
	At the same time complaints may also be addressed to the State Commissioner for Matters relating
	to Persons with Disabilities, the Commissioner responsible for patients and the State Commissioner
	for Measures of Correction and Prevention.
	Persons placed in special facilities also have the right, as indeed do all citizens, to express their con-
	cerns in an informal written complaint to the Petitions Committee of the North Rhine-Westphalia
	Landtag (regional parliament), or to submit petitions to the relevant regulatory authority.
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RP	The statutory regulations laid down in the State Housing and Participation Act (LWTG), which applies
	to all facilities with a full range of services (§ 4) and specially-configured facilities (§ 4), make provi-
	sion in § 9 for a representative body for residents. This representative body deals especially with
	matters relating to the running of the facility, equipment and furnishings such as accommodation,

	support, conditions of stay, remuneration, house rules, provision of meals and leisure activities.
	At the same time, persons living in these facilities also have access to the same formal and informal
	complaints mechanisms as other people (for example petitions).
SL	a.) Regardless of the statutory means of appeal and redress and complaints mechanisms, full-time
	residents with disabilities always have the opportunity to submit complaints, in line with the or-
	dinance governing the participation of residents in matters relating to the operation of facilities,
	as per the Saarland State Act on Residential Accommodation (MitwVLHeimGS) of 22/11/2013,
	directly to the residents' representative body, an external residents' advisory board or the resi-
	dents' advocate. This ordinance ensures that these bodies are appointed to receive complaints
	from residents and, if necessary, make efforts to have them dealt with by negotiating with the
	home management or facility provider (cf. §§ 2 and 8 ff., MitwVLHeimGS).
	Persons with disabilities in homes and workshops are also represented by workshop councils.
	Furthermore, the central point of contact for complaints from persons with disabilities is the
	State Commissioner for Matters relating to Persons with Disabilities, in accordance with § 16,
	Para. 1, Number 5, of the Saarland Equal Opportunities for Persons with Disabilities Act (SBGG).
	In addition, since 2013 Saarland has had a State Commissioner who has wide-reaching powers,
	under the law governing the appointment of legal guardians, and who also receives complaints
	from persons with disabilities in full-time residential care.
	b) The various complaints mechanisms are easily accessible and may be submitted informally.
	c) These mechanisms have proved to be effective.
SN	Complaints may be submitted via the home supervisory board, as part of unannounced inspections
	by the independent inspection commission, which is enshrined in the Saxony Integration Act, and via
	the home councils in line with Home Co-regulation Ordinance.
ST	Pursuant to § 23 of Saxony-Anhalt's Equal Opportunities for Persons with Disabilities Act (BGG LSA),
	everyone has the right to contact the State Commissioner for Matters relating to Persons with Disa-
	bilities with regard to requests, complaints or suggestions, if he or she believes that the rights of per-
	sons with disabilities are being violated or their needs are not being met in any other way.
	Full-time residential care providers and operators of other residential facilities that are not self-
	organised are obliged, in line with § 8 of the Housing and Participation Act (WTG LSA), to inform resi-
	dents of information, advice and complaints facilities. They are obliged to put in place a system of
	complaints management, as per § 11, Para. 4, Sub-para. 5, of the WTG LSA. The state's home supervi-
	sory board, in particular, deals with complaints.
	The regulations laid down in § 9 WTG LSA promote self-determination in a person's living arrange-
	ments. The participation rights of residents of full-time care facilities and other residential facilities
	which are not self-organised are guaranteed through residents' advisory boards and resident meet-
	ings. One of the responsibilities of the home advisory board is to receive suggestions and complaints from residents and, if necessary, make efforts to have them dealt with by negotiating with the man-
	agement or, in special cases, the facility provider.
	The purpose of the home supervisory board is to examine and redress grievances. The responsibility
	of the authority responsible for implementing the WTG LSA (home supervisory board) is to make
	efforts to ensure the interests and needs of persons who are disabled or in need of care are recog-
	nised, respected and protected. They also receive complaints and follow these up.
	Saxony-Anhalt's Law on Assistance and Protective Measures for the Mentally III (PsychKG LSA) in-
	cludes provisions for a committee for matters relating to mental health care which monitors adher-
	ence to statutory regulations. In line with § 29, Para. 5, of the PsychKG LSA, every person placed in
	chec to statutory regulations. In line with § 23, r and 3, or the r sychicol LSA, every person placed in

	full time residential care is entitled to correspond with the committee and increation commissions
	full-time residential care is entitled to correspond with the committee and inspection commissions
	and their members. Monitoring or restricting communications between both parties is not permitted.
	Each year the inspection commissions submit a comprehensive report to the Ministry of Social Affairs
	and the Landtag.
	In addition, persons with disabilities have the opportunity and the right, as guaranteed under consti-
	tutional law, to submit petitions. These are low-threshold complaints mechanisms available to all
	individuals and social groups.
SH	Like all citizens, persons with a disabilities may also contact the Commissioner for Social Affairs, sub-
	mit a petition or get in touch with the State Commissioner for Persons with Disabilities.
	As regards integration assistance, complaints about facilities are handled by the home supervisory
	board. A quality and cost efficiency concept is to be trialled soon at state level. Many local authorities
	have centralised complaints offices which pass any petitions on to the relevant units. These and any
	direct complaints are usually forwarded to the management team and dealt with from there (assis-
	tance planning, discussions with the service providers, involvement of the home supervisory board,
	meetings with those concerned).
	In virtually all residential facilities which fall under integration assistance, there are residents' adviso-
	ry boards too which also handle complaints from residents.
	In cases where there are local head offices or local commissioners responsible for the affairs of per-
	sons with disabilities, these deal with complaints at a structural level - accessibility, discrimination,
	etc. The state capital Kiel, for example, has made the introduction of a binding complaints manage-
	ment system one of its guiding principles.
	In the psychiatric care sector there are 15 representative bodies, which fall within the scope of the
	Mental Health Act (PsychKG), under the supervision of the county or city councils, and a representa-
	tive body in the form of an inspection commission, which falls within the scope of the Act on the Exe-
	cution of Measures of Correction and Prevention (MVollzG), under the supervision of the Ministry of
	Social Affairs. One of the tasks of the representative body is to check whether the rights of the per-
	son in residential care are being protected and the placement is fulfilling its purpose. It offers advice
	on how the placement should be organised. Its task is to receive and review suggestions and com-
	plaints from persons placed in residential care.
	Experience of the work done by the inspection commission in dealing with correction and prevention
	(BK MRV) has been extremely positive, and it has proved a success since it was set up in 2004. The
	annual reports from the BK MRV are passed on to both the Landtag committee for social affairs and
	the highest state health authority. The Ministry of Social Affairs promotes openness by publishing the
	reports on its website.
	There are also complaints offices, which ensure the interests of those with experience of psychiatric
	care are independently represented.
	The Regional Association of Residents' Advisory Boards for facilities which fall under the scope of
	integration assistance was also set up in March 2014. In virtually all (full-time) residential facilities
	there are residents' advisory boards which also handle complaints from residents.
	Some facilities also have a complaints management system which involves service users.
TH	Thuringia has a host of complaints offices which residents of special care facilities and patients can
	contact. This includes: Medical associations, patient representatives, the Landtag Petitions Commit-
	tee, the Thuringian State Government Commissioner for Persons with Disabilities (operating at re-
	gional level), municipal commissioners for persons with disabilities (working in districts and local au-
	thorities), patient advocates as per the Thuringian Mental Health Act (ThürPsychKG) and ombudsper-
L	

sons / complaints offices (operating at municipal level). In addition, the independent inspection commission, in accordance with § 24 of the ThürPsychKG, carries out its own inspections of psychiatric clinics and other psychiatric facilities and interviews patients, staff and residents. The home supervisory board, as defined in the Housing and Participation Act, as well as the workshop councils and home advisory boards (at institutional level) also act as complaints bodies (see the Home Coregulation Ordinance).

### VI. Appendices to Question 14

# a) How many cases of compulsory or involuntary medical treatment have there been in your

#### federal state since February 2013?

BW	§ 8, Para. 2, Sentence 2, of the Compulsory Admission Act (UBG) governing involuntary medical
	treatment was declared void by the Federal Constitutional Court on 12/10/2011 and was conse-
	quently amended on 02/07/2013. There are no nationwide statistics available for compulsory medi-
	cal treatment or other involuntary procedures in the case of patients who fall under the Compulsory
	Admission Act. From a survey of seven clinics over the period from July 2013 to March 2014, it can be
	concluded that one in every 200 patients admitted to a psychiatric unit on an in-patient basis had
	received involuntary medication.
	The planned Mental Health Act (PsychKHG) makes provision for the nationwide recording of compul-
	sory treatments in clinics which are recognised for compulsory admissions (placements) under public
	law. The aim of this is to give patients and relatives greater rights (via complaints departments, in-
	spection commissions and other bodies).
BY	With regard to measures of correction and prevention, the only figures available are for the 12-
	month period from 01/04/2013 to 31/3/2014. Within this period 4,757 cases of compulsory treat-
	ment took place at psychiatric and correctional facilities in Bavaria.
	Since 1 January 2014 statistics relating to orders for compulsory medical treatment and procedures
	under civil law have been recorded at Guardianship Courts. Consequently, there are no statistical
	data available for the period from February 2013 up to and including December 2013. A poll taken
	separately as part of the Länder survey revealed that a total of 550 compulsory medical treatment
	orders across Bavaria were recorded during the period 1 January 2014 to 6 June 2014. This re-
	presents an approximate figure only.
BE	No information
BB	As yet no valid statistical data have been collected for Brandenburg with regard to committals under
	public law or measures of correction and prevention. A survey is planned for 2014 once the amend-
	ments to compulsory treatment in the Law on Assistance and Protective Measures and the Execution
	of Compulsory Admissions under Law for Mentally III and Psychologically-impaired Persons
	(BbgPsychKG) have come into effect.
HB	470 cases of compulsory medical treatment (compulsory medication).
HH	As yet there are no data available on this. Corresponding statistics are currently being compiled with
	regard to the HmbPsychKG (protective measures and assistance for the mentally ill).
HE	No figures on compulsory admissions are currently available. This will also be regulated in the Mental
	Health Act to be passed.
MV	No information
NI	For the period 1/1/2013 to 30/06/2013: 3,768 compulsory admissions under the Lower Saxony Law

	on Assistance and Protective Measures for the Mentally III (NPsychKG) in psychiatric hospitals and
	units; 663 court-approved medical restraint procedures within this group of patients.
	For the period 01/07/2013 to 31/12/2013: 4,021 compulsory admissions in line with the NPsychKG in
	psychiatric hospitals and units; 824 court-approved medical restraint procedures within this group of
	patients.
	As yet there are no data available from psychiatric hospitals and units for the first half of 2014.
NW	To date hospitals have not been collecting comprehensive, evaluable statistics on this. Psychiatric
	hospitals are required by law to collect statistical data on this from 2014 and report the evaluated
	findings on an annual basis. Preliminary results will be available at the beginning of 2015. The same
	applies to measures involving the deprivation of liberty. Figures for North Rhine-Westphalia on com-
	pulsory medical treatment and procedures as part of measures of correction and prevention are to
	be collected from the middle of 2014. The office of the State Commissioner for Measures of Correc-
	tion and Prevention collects data on medical restraint procedures in psychiatric and correctional facil-
	ities. In 2013 244 medical restraint procedures were carried out on 91 patients. 44 medical restraint
	procedures were carried out on 21 patients in the first quarter of 2104.
	Rhineland Regional Council (LVR) reported that it has been gathering data for many years from its
	regional psychiatric clinics on isolation and medical restraint measures and, since 1 January 2014, on
	compulsory medical treatment and restrictions of outdoor exercise in a dedicated electronic form.
	From 2010 to 2012 the number of medical restraint procedures in all LVR clinics has fallen dramati-
	cally in part: by 12.8% from 2010 (6,392) to 2011 (5,571), 37.2% from 2011 (5,571) to 2012 (3,498),
	and by 45.3% from 2010 (6,392) to 2012 (3,498). The drop in the number of restraint procedures can
	be attributed to increased awareness among medical intervention staff and the organisation of a
	night watch system as part of the law, passed on 22 November 2011, which abolished the video sur-
	veillance of involuntarily committed patients in psychiatric units, as well as the fall-prevention initia-
	tives in the gerontopsychiatric sector.
RP	The Rhineland-Palatinate Ministry of Justice and Consumer Protection does not gather relevant sta-
	tistical data on this. Therefore the Criminal Law department does not have any data on compulsory
	treatment orders for persons subject to measures of correction and prevention.
SL	Saarland does not gather data on compulsory medical treatment and procedures.
SN	No response can be given, as neither the health insurance funds (on behalf of the insured) nor the
514	Municipal Social Organisation collect data on "compulsory medical treatment".
ST	In Saxony-Anhalt in 2013, there was a total of 656 compulsory admissions as per § 1906, Paras. 1 and
51	
	2, of the Civil Code (BGB). It is not possible to say in how many cases a compulsory medical procedure
	was performed. Since compulsory medical procedures have only been explicitly recorded in statistics
	since 2014, as per § 1906, Para. 3 and 3a, of the Civil Code, no figures could be provided for 2013.
	Data for 2014 will be available from February 2015. There is no obligation to report compulsory med-
	ical treatment and procedures that fall outside of the Guardianship Law in psychiatric hospitals and
	rehabilitation centres, in which measures of correction and prevention are carried out in line with §§
	63 and 64 of the German Criminal Code (StGB). Likewise, the Mental Health Act (PsychKG) does not
	make provision for the obligation to report compulsory medical treatment and procedures in psychi-
	atric hospitals which are authorized to enforce the Act in accordance with § 12 of the PsychKG.
SH	No information could be provided.
TH	No statistics are recorded.

## b) How many of these cases fall under the new law (§ 1906, BGB)?

BW	During the period 26/02 - 31/12/2013, 495 Guardianship Court approvals of the new Law in accordance with § 1906, Para. 3a, of the Civil Code (BG - 31/12/2013, 191 Guardianship Court approvals were granted on the bas Compulsory Admission Act (UBG).	B). During	the period 12/07
ВҮ	The compulsory medical procedures which have been recorded at the Gu January 2014 relate to measures covered by § 1906, Paragraphs 3 and 3a ingly, all aforementioned measures (a total of 550) during the period 1 Ja fall under the new law, i.e. Paragraphs 3 and 3a of § 1906 of the Civil Cod via Art. 1, No. 2, of the Law of 18 February 2013 (Federal Law Gazette I, 2	, of the Civ nuary 201 e, which w	vil Code. Accord- 4 to 6 June 2014
BE	No information		
BB	With regard to the period 01/01 to 31/12/13, the following statements can legal guardianship statistics (separate data for the period commencing 26 available):	February	2013 are not
		Order	Rejection
	Consent to medical treatment (§ 1904, BGB)	49	4
	(Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB)	391	37
	Measures similar to involuntary accommodation (§ 1906, Para. 4, BGB)	841	249
HB	34 measures		
HH	See above (Question 14.1)		
HE	No information within the section - see response to 14.1.		
		the numb	er of compulsory
HE MV NI	No information within the section - see response to 14.1. No information In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data w pulsory medical procedures are to be collected from 01/01/2015. It was r mation and figures from the local courts due to the tight deadline.	hich will al	so include com-
HE MV	<ul> <li>No information within the section - see response to 14.1.</li> <li>No information</li> <li>In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data will pulsory medical procedures are to be collected from 01/01/2015. It was remation and figures from the local courts due to the tight deadline.</li> <li>No information is currently available.</li> </ul>	hich will al not possibl	so include com- e to collect infor-
HE MV NI	No information within the section - see response to 14.1. No information In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data w pulsory medical procedures are to be collected from 01/01/2015. It was r mation and figures from the local courts due to the tight deadline.	hich will al not possibl	so include com- e to collect infor-
HE MV NI	<ul> <li>No information within the section - see response to 14.1.</li> <li>No information</li> <li>In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data will pulsory medical procedures are to be collected from 01/01/2015. It was remation and figures from the local courts due to the tight deadline.</li> <li>No information is currently available.</li> <li>Following a request, the Koblenz Higher Regional Court's database was expension.</li> </ul>	hich will al not possibl	so include com- e to collect infor-
HE MV NI	<ul> <li>No information within the section - see response to 14.1.</li> <li>No information</li> <li>In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data will pulsory medical procedures are to be collected from 01/01/2015. It was remation and figures from the local courts due to the tight deadline.</li> <li>No information is currently available.</li> <li>Following a request, the Koblenz Higher Regional Court's database was expension.</li> </ul>	hich will al not possibl valuated an	so include com- e to collect infor- nd the following
HE MV NI	No information within the section - see response to 14.1.         No information         In Lower Saxony no statistical data has been collected to date concerning         medical procedures performed. New legal guardianship statistical data with         pulsory medical procedures are to be collected from 01/01/2015. It was remation and figures from the local courts due to the tight deadline.         No information is currently available.         Following a request, the Koblenz Higher Regional Court's database was exfindings made:	hich will al not possibl valuated an <b>2013</b>	so include com- e to collect infor- nd the following 2014
HE MV NI	No information within the section - see response to 14.1.         No information         In Lower Saxony no statistical data has been collected to date concerning         medical procedures performed. New legal guardianship statistical data w         pulsory medical procedures are to be collected from 01/01/2015. It was r         mation and figures from the local courts due to the tight deadline.         No information is currently available.         Following a request, the Koblenz Higher Regional Court's database was exfindings made:         Consent to medical treatment (§ 1904, BGB)	hich will al not possibl valuated an 2013 67	so include com- e to collect infor- nd the following 2014 13
HE MV NI	No information within the section - see response to 14.1.         No information         In Lower Saxony no statistical data has been collected to date concerning         medical procedures performed. New legal guardianship statistical data with         pulsory medical procedures are to be collected from 01/01/2015. It was remation and figures from the local courts due to the tight deadline.         No information is currently available.         Following a request, the Koblenz Higher Regional Court's database was exfindings made:         Consent to medical treatment (§ 1904, BGB)         (Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB)	hich will al not possibl valuated an 2013 67 978	so include com- e to collect infor- nd the following 2014 13 754
HE MV NI	No information within the section - see response to 14.1.No informationIn Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data w pulsory medical procedures are to be collected from 01/01/2015. It was r mation and figures from the local courts due to the tight deadline.No information is currently available.Following a request, the Koblenz Higher Regional Court's database was ev findings made:Consent to medical treatment (§ 1904, BGB) (Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB) Compulsory medical procedures (§ 1906, Paras. 3 and 3a, BGB)	hich will al not possibl valuated an <b>2013</b> 67 978 2 2,143	so include com- e to collect infor- nd the following 2014 13 754 88 1,631
HE MV NI	No information within the section - see response to 14.1.         No information         In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data wi pulsory medical procedures are to be collected from 01/01/2015. It was remation and figures from the local courts due to the tight deadline.         No information is currently available.         Following a request, the Koblenz Higher Regional Court's database was exfindings made:         Consent to medical treatment (§ 1904, BGB)         (Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB)         Compulsory medical procedures (§ 1906, Paras. 3 and 3a, BGB)         Measures similar to involuntary accommodation (§ 1906, Para. 4, BGB)         This evaluation includes just a summary of the data. It cannot be broken of	hich will al not possibl valuated an 2013 67 978 2 2,143 down into	so include com- e to collect infor- nd the following 2014 13 754 88 1,631 periods within ct. Consequently,
HE MV NI NW RP	No information within the section - see response to 14.1. No information In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data wi pulsory medical procedures are to be collected from 01/01/2015. It was r mation and figures from the local courts due to the tight deadline. No information is currently available. Following a request, the Koblenz Higher Regional Court's database was ex- findings made: Consent to medical treatment (§ 1904, BGB) (Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB) Compulsory medical procedures (§ 1906, Paras. 3 and 3a, BGB) Measures similar to involuntary accommodation (§ 1906, Para. 4, BGB) This evaluation includes just a summary of the data. It cannot be broken of that year, particularly after February 2013. Saarland is currently creating a legal basis by amending its Compulsory Ac- no conclusions can be drawn on compulsory medical treatment following	hich will al not possibl valuated an 2013 67 978 2 2,143 down into	so include com- e to collect infor- nd the following 2014 13 754 88 1,631 periods within ct. Consequently,
HE MV NI RP	No information within the section - see response to 14.1. No information In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data wi pulsory medical procedures are to be collected from 01/01/2015. It was r mation and figures from the local courts due to the tight deadline. No information is currently available. Following a request, the Koblenz Higher Regional Court's database was ex- findings made: Consent to medical treatment (§ 1904, BGB) (Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB) Compulsory medical procedures (§ 1906, Paras. 3 and 3a, BGB) Measures similar to involuntary accommodation (§ 1906, Para. 4, BGB) This evaluation includes just a summary of the data. It cannot be broken of that year, particularly after February 2013. Saarland is currently creating a legal basis by amending its Compulsory Ac no conclusions can be drawn on compulsory medical treatment following of the Civil Code.	hich will al not possibl valuated an <b>2013</b> 67 978 2 2,143 down into dmission A ; the amen	so include com- e to collect infor- nd the following 2014 13 754 88 1,631 periods within ct. Consequently, dment to §1906
HE MV NI RP SL	No information within the section - see response to 14.1.         No information         In Lower Saxony no statistical data has been collected to date concerning medical procedures performed. New legal guardianship statistical data wi pulsory medical procedures are to be collected from 01/01/2015. It was r mation and figures from the local courts due to the tight deadline.         No information is currently available.         Following a request, the Koblenz Higher Regional Court's database was exfindings made:         Consent to medical treatment (§ 1904, BGB)         (Involuntary) Accommodation (§ 1906, Paras. 1 and 2, BGB)         Compulsory medical procedures (§ 1906, Paras. 3 and 3a, BGB)         Measures similar to involuntary accommodation (§ 1906, Para. 4, BGB)         This evaluation includes just a summary of the data. It cannot be broken of that year, particularly after February 2013.         Saarland is currently creating a legal basis by amending its Compulsory Ac no conclusions can be drawn on compulsory medical treatment following of the Civil Code.         A response cannot be given for the reasons cited in Question 14.1.	hich will al not possibl valuated an 2013 67 978 2 2,143 down into dmission A the amen rdianship a	so include com- e to collect infor- nd the following 2014 13 754 88 1,631 periods within ct. Consequently, dment to §1906

	vant statistics. However, most authorities do not yet explicitly record decisions regarding compulsory
	medical treatment. Therefore no reliable data are available here.
SH	No information could be provided. The state government intends to submit a bill amending the Men-
	tal Health Act and the Act on the Execution of Measures of Correction and Prevention which creates
	the necessary legal conditions for carrying out compulsory medical treatment and which is consistent
	with the requirements of the rulings of the Supreme Court. This new regulation will give mentally ill
	persons and persons in involuntary accommodation far greater rights.
TH	No information

# VII. Appendices to Question 15

### a) Measures/programmes and plans aimed at deinstitutionalisation with regard to forms of

### living are in progress in:

BW	The following measures/programmes or plans are in progress in Baden-Württemberg: "Regional De- velopment Conferences on Decentralisation" between the state associations of local authorities and the providers. Their aim is to reach binding agreements on decentralisation while respecting a per- son's wishes and his/her right to choose.
BY	Bavaria has initiated a research and transformation project entitled "On the Road to Vision 2030" that will oversee the deinstitutionalisation of a large facility for persons with a disabilities (Fran- ziskuswerk Schönbrunn).
BB	There is a growing trend towards home and flat-sharing community models and housing in small groups. In 2013, of the total of 490 registered types of tenure for persons with a disabilities 128 were types of housing in which no more than eight persons live, and which do not solely represent dependent sections of a facility. Since 2011 Brandenburg's legislation on residential homes has made provision for the appointment of ombudspersons. They represent a link between the community and those residents living in the facilities and are tasked with promoting participation in society (there were 33 ombudspersons employed in 2013).
HB	An agreement was reached with the voluntary welfare organisations to convert 5% of long-term resi- dential places for persons with mental health impairments into assisted forms of living (living in the community) every year. This resulted in the cancellation of plans to expand residential home places in favour of forms of assisted living.
HH	Hamburg is promoting care in the community through a programme to convert residential care into forms of assisted living for persons with mental health impairments or multiple disabilities. Furthermore, there is also a building construction programme aimed at persons with a mental illness or psychological impairment.
NW	<ul> <li>Since the 1990s, and more increasingly since 2003, there has been a trend towards deinstitutionalisation in terms of housing-related integration assistance (2012: in Westphalia 51.7% and in Rhineland 56.7% of persons with disabilities received care in the community; by comparison, this figure stood at around 20% in 2003). This is regulated via joint agreements between the regional councils and the central voluntary welfare organisations in NRW:</li> <li>– "Wohnen I" ("Housing I") framework target agreement (2006-2008), aimed at reducing the number of institutional care places by 5% (= 1,000 places in each state region), and at creating financial incentives and making the transition more flexible through residential homes.</li> </ul>

	- Framework target agreement II (2009-2010), aimed at cutting 500 institutional care places in
	each state region and further developing advisory service concepts, forms of out-patient sup-
	port, assistance in crises, low-threshold leisure activities and offerings that give structure to a
	person's day-to-day life.
	<ul> <li>Framework agreement "Safeguarding the future of integration assistance in NRW" (2011-2013):</li> </ul>
	Differentiation and optimisation of out-patient services (trialling of compensatory and case-by-
	case services and a social space-oriented background service during the night).
	Furthermore, there are incentive programmes to convert long-term institutional housing and pro-
	mote inclusive social spaces, as well as a range of related support services.
RP	The process of decentralising five large-scale facilities, as part of structured "Future Conference"
	think tank processes, has been underway since its initiation in 2008. It is about creating a wide range
	of small-scale, integrated housing options that are close to the community and offer home care
	wherever possible, by bringing together both providers and the people who live there as well as oth-
	er key stakeholders (e.g. staff).
SL	The 2008 care home reform is aimed at reducing institutional care home places whilst increasing
	out-patient measures at the same time (target ratio of 60% out-patient measures to 405 in-patient
	placements). There were two phases planned: a budget-neutral phase up to 31/12/2010 and a per-
	formance-neutral phase up to the end of 2013 (the results from 31/12/2013 showed a ratio of
	58.80% out-patient measures to 42.19%).
SN	From 1990 onwards around 4,500 persons affected (persons with chronic psychiatric illnesses or
	mental health impairments) were moved out of long-term psychiatric hospital units and homes, i.e.
	"dehospitalised", and moved into more open forms of housing, and in some cases this included as-
	sisted living and unsupported independent living. There is a state-funded programme to this end: a
	network of homes - with close links to the community - for persons with disabilities, as well as socio-
	therapeutic residential homes.
ST	From as early as 1990 onwards, following reunification, there has been a comprehensive policy to
	move persons with disabilities out of hospitals (dehospitalisation) and institutions (large complex
	facilities). In the past ten years huge efforts have been made to increase forms of out-patient care in
	the integration assistance offered to persons with disabilities through target agreements and pilot
	measures. This ten-year period has seen a 500% increase in out-patient care (in-patient care: 6%).
	Between 2011 and 2013, 336 persons with disabilities were successfully moved from residential care
	to assisted living facilities.
SH	The level of out-patient care in terms of integration assistance has been constantly rising for many
	years (2008 = 39%; 2011 = 45%). At 62%, the level of out-patient care for benefit recipients with a
	psychiatric disorder is particularly high. Nevertheless, the ratio of benefit recipients in long-term in-
	stitutional care (full-time and part-time) has been on the increase for years. The state government's
	aim is to use the pending reform of the law implementing Book XII of the Social Code (AG SGB XII) to
	do away with a financing principle that is still primarily geared towards forms of services and benefits
	(in-patient/out-patient) and expand its plans of cooperative participation.
TH	Thuringia has been implementing the principle of "care in the community before institutional care"
	for years now. Assisted forms of living, in particular, are being continually expanded. There has been
	an especially dynamic trend in the movement towards care in the community. Since 2001 the quota
	has doubled, with a threefold increase in persons entitled to benefits in the assisted living sector.

# b) Measures/programmes and plans aimed at deinstitutionalisation with regard to psychiatric

## hospitals are in progress in:

BW	With regard to psychiatric hospitals, it is the psychiatric centres in particular that are striving to ad- vance psychiatric care in the community by means of decentralisation measures and more treatment in day clinics. The planned Law on Assistance and Protective Measures for the Mentally III (PsychKHG) reinforces the psychiatric community associations and thus the principle of "care in the community before institutional care".
BY	The deinstitutionalisation of forensic psychiatry is being further advanced through placements as close to home as possible in each of the 7 administrative districts. With the exception of the district of Upper Franconia, each administrative district now even has two psychiatric and correctional facilities.
BE	The Psychiatry Development Programme was launched as early as 1993 (section of report on psychia- try planning - structural overall planning - dated 28/12/1993, printed document 12/3671). Full dehospitalisation measures have taken place within this context.
HB	Since 1988 there has been a dramatic cut in the number of long-term psychiatric hospital beds, with a simultaneous expansion of places in day clinics and "complementary" forms of living (residential homes and assisted living in line with Book XII of the Social Code, as well as the advancement of outpatient psychiatric care and sociotherapy (Social Code Book V). The expansion of places in residential homes is to be cancelled in favour of assisted living measures. There are plans to further reduce the number of in-patient beds in favour of services that replace wards, such as Home Treatment and other forms of community psychiatric care. This relaxation of the system is being further advanced in the Clinic for Forensic Psychiatry and Psychotherapy and in after-care services, coupled with an increase in day clinic places and assisted living opportunities for forensic patients both in and outside the clinic.
НН	In terms of clinical psychiatric care, Hamburg has been pursuing its goal to provide decentralised care in general hospitals, close to the patient's home, since the 1970s. Today, instead of psychiatric hospi- tals Hamburg has specialist departments for psychiatry and psychotherapy at nine general hospital locations. The number of beds for full-time, in-patient care in these specialist departments has dropped from 1,939 in 1970 to 1,309 in 2013. The number of day patient places has risen from 20 in 1970 to 565 in 2013. The duration of stay for persons receiving full-time, in-patient care has dropped to an average of 22.1 days.
NI	There is currently a range of day clinic services in 58 day clinics for psychiatry and psychotherapy on offer - totalling 1,186 places.
NW	Out-patient departments within the clinics are being gradually expanded, though there are regional differences. Integrated care contracts in line with Book V, § 140ff, of the Social Code have resulted in the development of out-patient, integrated care services, albeit to a relatively small degree thus far. The aim of these services is to help prevent the need for a stay in hospital. Clinic consultations and the expansion of crisis intervention measures and group therapy services should enable easier access to out-patient psychotherapeutic care. Flagship projects based on Book V, §64b, of the Social Code help to make hospital treatment processes more flexible. Hospitals can use regional budgets to offer a more comprehensive range of treatment at an earlier stage, including on an out, patient basis and even at home.
CI.	treatment at an earlier stage, including on an out-patient basis and even at home.
SL	No information
SN	From 1990 onwards around 4,500 persons affected (persons with chronic psychiatric illnesses or

	mental health impairments) were moved out of long-term psychiatric hospital units and homes, i.e.
	"dehospitalised", and moved into more open forms of housing, and in some cases this included as-
	sisted living and unsupported independent living.
ST	From 1990 onwards, following reunification, comprehensive dehospitalisation policies, aimed at
	moving patients out of psychiatric facilities in particular, were introduced. In recent years a consider-
	able number of day clinic places have been created to enable mentally ill persons to be cared for and
	prevent them having to be admitted on an in-patient basis. One aim of the State Action Plan to im-
	plement the UNCRPD is to expand sociotherapy and out-patient psychiatric care services.
SH	For 10 years some districts have had access to a regional psychiatry budget. This has enabled them
	to regulate patient care on an individual basis and - through crisis intervention teams - offers total
	flexibility in how and where a person is treated (in-patient, day clinic or out-patient (psychiatric out-
	patient departments) as well as home treatment. The project allows people to switch between full-
	time residential, day clinic or out-patient care any time they choose. The regional psychiatry budget
	is already providing care to over 30% of the population.

# c) Examples of best practice (chosen according to specificity of information and clear refer-

### ence to deinstitutionalisation):

NW	1. Closure of a large-scale facility complex, in-patient care places divided up into small units
	throughout the Rhineland region, and conversion of in-patient care into a range of assisted living
	services (www.hephata-mg.de).
	2. Assisted living provided by the Diakonie Ruhr for persons with greater, more complex needs (see
	appendix).
	3. Flagship project based on Book V, § 64b, of the Social Code: Integrative Psychiatry Hamm (IPH)
	has set its sights on cross-sector care and provides full-time, part-time and out-patient care ser-
	vices. Home treatment services are planned. The type of treatment chosen is financed from the
	overall budget.
	4. Integrated care contracts in line with Book V, § 140ff, of the Social Code: The Association for
	Mental Health in North Rhine-Westphalia (GPG) offers integrated care contracts in 13 state re-
	gions; see www.psychiatrie.de/dachverband/iv/.
SL	No information
SN	Closure of a residential home in Kleinwachau (isolated from other housing developments with no
	access to public transport). Residents moved (in 2012) to the centre of Radeberg (group home and
	assisted living). Access to all public facilities and shops.
SH	1) The Johanniter-Krankenhaus in Geesthacht (psychiatric department) is running a "housing first"
	scheme in cooperation with the 'Arbeit nach Maß' association. The aim is to find a flat for mentally
	ill people and organise flexible day and work support services in and around their home. As to the
	deinstitutionalisation of hospitals, the Johanniter-Krankenhaus is using the regional budget to set up
	crisis intervention teams. This means people can receive treatment at home just when they need it.
	The Johanniter-Krankenhaus in Geesthacht has managed to cut over 10,000 in-patient treatment
	days in the last 6 years, such that there is now only one ward needed to look after the 188,000 resi-
	dents of the Herzogtum Lauenburg district.
TH	In 2007 three centres for participation and integration were set up in Erfurt, as a result of the state
	flagship project "Deinstitutionalisation and restructuring of assistance with living, structured daily
	routines, employment and leisure activities, as well as the creation of a 'psychosocial centre'". These

now encompass a home and day centre, plus assisted living and a range of employment services. Services are provided solely on an out-patient basis. The scope of services on offer varies, depending on a person's individual support needs. Needs are established as part of a personal assistance plan based on the integrated treatment and rehabilitation plan.

## VIII. Appendix to Question 16

#### a) Information provided by the Länder on integration assistance costs for living support ser-

vices (does not include comprehensive data on all (net) costs for all providers):

BW	Integration assistance for residential care in 2012: between 31,900 and 34,300 euros/year; assisted
	living: 8,400 euros/year.
BY	Integration assistance for residential care in 2012: 23,191 euros/year; assisted living: 5,507 eu-
	ros/year.
HB	Residential care: 44,418 euros/year; assisted living: 13,350 euros/year.
HH	Residential care in 2012: 40,260 euros/year and 33,097 euros/year for persons with psychological
	impairments; assisted living: 13,903 euros/year and 9,788 euros/year for persons with psychological
	impairments.
HE	The 2011 cost comparison does not include individual benefits in the sense of the additional costs
	provision. The cost comparison used shows that the costs of residential care are higher overall than
	the costs of assisted living.
NW	Looking at the example of Rhineland Regional Council, the average expenditure for out-patient and
	in-patient living assistance services is as follows (2012): Residential care: average case costs: 47,567
	euros; assisted living: average case costs: 9,997 euros/year.
	A direct comparison is only possible to a limited extent, as the in-patient case costs are gross case
	costs including day-to-day routine costs (outside of workshops for disabled persons), whereas the
	out-patient case costs are net costs. To obtain a direct comparison one would need to look at the
	costs of basic needs/livelihood assistance and the costs of supplementary day-to-day routine activi-
	ties (see Appendix 1 to Question 16).
SL	Average annual costs in 2013 for in-patient living assistance for persons with a psychological im-
	pairment: 36,750 euros; for out-patient living assistance: 10,220 euros. For persons with a physical
	or mental health impairment the average annual costs in 2013 for residential care were 31,300 eu-
	ros, and around 13,000 euros for living assistance on an out-patient basis.
ST	Gross expenditure for integration assistance (support with living) for residential care in 2013 per
	individual case: 28,352 euros. Net expenditure for integration assistance for assisted living in 2013:
	4,058 euros/year. For information on the lack of comparability of these figures, see Appendix 1 to
	Question 16.
SH	No usable information provided.

## IX. Appendix to Question 17

## a) Childcare support services for parents of children with disabilities

Fe-	a) Support measures	Parents' employment	Age limit for benefit
deral	b) Special measures	status	
state			
BW	Re a) Family support services (FSS)	Such support measures	Support measures pro-
	FSS provide one-to-one support, group	are provided regardless	vided through FSS can be
	support on an hourly or daily basis and	of the parents' employ-	used irrespective of the
	weekend support for persons with a men-	ment.	person's age.
	tal illness and/or physical disabilities who		
	live alone, with their partner, in families,		
	private house or flatshares or in assisted		
	living accommodation, to provide short-		
	term relief for the relatives caring for		
	them.		
	Re b) The FSS measures provide relief for		
	family members looking after such per-		
	sons, thus boosting the family's ability to		
	help itself and supporting a stable family		
	life.		
BY	Re a) Curative education measures for chil-	Integration assistance	Services are provided if
	dren who have not yet started school (out-	benefits in line with Book	the need for them can
	patient early intervention services - start-	XII of the Social Code are	be established.
	ing from infancy; daycare in integrative	also offered to children	
	nurseries - from infancy; integrative day-	with disabilities and are	
	care centres - from a child's second birth-	geared towards the indi-	
	day; in integrative after-school care centres	vidual needs of the child.	
	- from school age)	Entitlement to these ser-	
	- Curative education day centres (= part-	vices is not affected by	
	time) - pre-school age up to the end of	the employment status of	
	school	the parents.	
	- Assistance with obtaining an appropri-		
	ate school education including prepa-		
	rations for it		
	- Assistance to help children with disabil-		
	ities who have not yet started school		
	participate fully in life to the extent of		
	their ability		
	- Assistance with training in school for		
	an appropriate career or training for		
	other appropriate employment, if the		
	services required for this are provided		
	in special facilities for persons with dis-		

	abilities				
		nt convicos an	d advica		
	-	nt services and			
	with disat	ocial services f pilities	or persons		
	Re b) All servi	ces support fa	milies and are		
	provided close	e to home. For	example, cura-		
	tive educatior	n day centres,	assistance with		
	obtaining an a	appropriate ed	ucation pro-		
	vided through	n school suppo	rt assistants.		
	Service recipie	ents in Bavaria	in 2012, e.g.		
	Service	Recipient	(Gross)		
			expendi-		
			ture		
	Outside of fa	acilities			
	Curative	17,373	54,122,977		
	education measure				
	Appropri-	10,294	58,131,501		
	ate school-	10)201	30)131)301		
	ing				
	Within facilit	tios			
	Curative	10,879	105,875,05		
	education	10,075	1		
	measure		-		
		ere are 200 ear	ly intervention		
		social services	•		
	-		ative education		
			16,200 places.		
BE	-	-	nework agree-	In Berlin entitlement to	Social-paediatric centres
DL	-	al-paediatric ca	•	support in a child daycare	provide support to chil-
		•	ne time a state	centre is granted from a	dren and young people
	-		line with § 2 of	child's first birthday, with	up to their 18th birthday.
	-		ance (FrühV) re	no requirement to	
	-	X of the Social		demonstrate the need, in	
	-	by the Senate	,	line with § 24 of Book VIII	
		or youth and h	-	of the Social Code (cf.	
	-	tions of health		§ 4 of the Child Daycare	
	funds.			Act (KitaFöG). No child	
		epartments fo	r children and	should be refused admis-	
		•	ediatric centres	sion to a daycare centre	
	,	gether with th		on the basis of the nature	
		ntres at hospita		or severity of his/her	
	-	system for ch		disabilities or special	
		d children who		needs. As a rule, children	
	disabilities di			needs, / 5 a raie, enharen	

	becoming disabled. In addition to the so-	with disabilities usually	
	cial-paediatric centres linked to clinics,	, receive support in inte-	
	which offer very specialist medical exper-	grative groups together	
	tise, the out-patient departments for chil-	with other children (cf.	
	dren and young people and other social-	§ 6, Para. 1, KitaFöG).	
	paediatric centres are responsible for this	Children with disabilities	
	block of early intervention services, such as	as at 31/12/13:	
	therapeutic, psychological and curative	In daycare, total:	
	education, in line with the Early Interven-	136,438; children with	
	tion Ordinance (FrühV), and complement	special needs 935; chil-	
	socio-educational support services for pre-	dren with disabilities	
	school children in daycare centres. They	6,861.	
	provide a mobile service for children in	,	
	daycare centres or at home, regardless of		
	the parents' employment status. School-		
	age children and young people up to their		
	18th birthday receive a block of out-patient		
	care services in the above-mentioned so-		
	cial-paediatric centres. These centres work		
	on an interdisciplinary basis with other		
	public health bodies, registered doctors,		
	family education and youth welfare ser-		
	vices and schools.		
	Re b)		
	In addition to the complex child daycare		
	support system, the social-paediatric cen-		
	tres, out-patient youth welfare services in		
	line with § 27 ff. (SGB VIII - Book VIII of the		
	Social Code) and family education services		
	in line with § 16 of SGB VIII, case-oriented		
	individual assistance can be provided in		
	line with § 53/54 of SGB XII and § 35 in		
	conjunction with §§ 27 ff. of SGB VIII. Case-		
	oriented individual assistance is a commu-		
	nity-based service offered on a temporary		
	basis, usually for a specific period of time,		
	to help ensure integration assistance tar-		
	gets are met. It is geared towards the		
	needs and goals of children and young		
	persons with disabilities and ties in with		
	the specific problems associated with their		
	disabilities.		
BB	Child daycare, family support services as	A significant obstacle	
	part of recognised, low-threshold support	preventing children with	
	services in line with § 45 b, Para. 1, Sub-	a physical or mental im-	

	para. 4 of SGB XI.	pairment from attending	
	Child daycare	an after-school care cen-	
	The legal entitlement to education, devel-	tre on reaching the ap-	
	opment, support and care, as enshrined in	propriate age was re-	
	§ 1 of the Brandenburg Child Daycare Act,	moved in 2014, when	
	applies equally to children with and with-	families were no longer	
	out a disabilities over the age of one year	required to contribute to	
	up to the end of Year 4 at school. Younger	the costs of integration	
	children and children up to the end of pri-	assistance services from	
	mary school are then legally entitled to	their own income and	
	daycare, provided there is a need due to	assets.	
	the family situation, including the parents'		
	employment.		
	Since as early as 1992, § 12, Para. 2, of the		
	Child Daycare Act (KitaG) has stipulated that children with special needs must be		
	placed in local mainstream daycare cen-		
	tres, if the care and support appropriate to		
	their needs can be ensured: almost all spe-		
	cial needs facilities have been done away		
	with; already one-third of all children with		
	disabilities are looked after in their local		
	daycare centre on an individual basis, while		
	two-thirds attend an inclusive daycare		
	centre, in which children with and without		
	disabilities are cared for together.		
HB	Re a) Individual support for severely disa-	Personal assistance ser-	Interdisciplinary early
	bled persons (ISB) is offered, and this com-	vices are free of charge.	intervention is open to
	prises care, home help services and partic-	Travel costs are covered	all children - from birth
	ipation in community life and activities.	in line with Book XII of	up to starting school -
	This is a range of services which, in con-	the Social Code (SGB XII).	who are disabled or at
	junction with long-term care insurance, is	State long-term care	risk of becoming disa-
	aimed at helping persons with severe disa-	allowance is also	bled.
	bilities and associated need for care - who	offered to children	
	cannot live in their own home without	and young persons	
	third-party assistance but who are suffi-	with disabilities to	
	ciently capable of giving instructions to	compensate for dis-	
	care staff - to live in their own home. Par-	advantages associat-	
	ents of children with disabilities can also	ed with their disabili-	
	take advantage of this service to allow the	ties.	
	child to remain within the parental home.		
	In addition, there is the range of services		
	that all parents are entitled to use.		
	- Interdisciplinary early intervention		
	- Personal assistance with attending a		

	child daycare centre	
-	Payment of travel costs for attending a	
	child daycare centre	
-	Personal assistance with attending an	
	after-school group	
-	Curative education measures in an	
	after-school centre	
-	Services in an integrated curative edu-	
	cation day centre (IHTE)	
-	Socio-educational family assistance	
-	Long-term care allowance	
-	Home treatment as per SGB V	
-	Low-threshold range of support ser-	
	vices as per SGB XI Supplementary Act	
	on Long-term Care	
-	Early Assistance - this is a low-	
	threshold range of support services for	
	all parents wishing to obtain infor-	
	mation on pregnancy, birth, baby and	
	toddler years, health or the develop-	
	ment of their child. Its aim is to support	
	parents in their daily lives and enable	
	them to get in touch and exchange in-	
	formation with other parents.	
Ad	lvice is offered at 5 Parenting Advice	
Ce	entres across Bremen.	
Re	e b)	
_	This range of services offers the earli-	
	est possible support and treatment for	
	children with disabilities or delayed	
	, development problems.	
_	They provide assistance and relief for	
	parents in their everyday lives with	
	their children and allow mothers to	
	take up employment.	
_	They allow parents to obtain and se-	
	cure a place for their child at a daycare	
	centre of after-school centre.	
_	They enable disabled children and	
	young persons to take part in commu-	
	nity life.	
_	They support families and thus ensure	
	children can remain within the family	
	unit.	
Ein	gures as at 2014 for Early Intervention	
	Sures as at 2014 IOF Larry Intervention	

	Management in Dramon Municipality		1
	Measures in Bremen Municipality: Curative education measures for children		
	from birth up to the start of school: 1149		
	cases		
	Holistic services for children from birth up		
	to the start of school: 193 cases		
	Personal assistance in daycare centres: 266		
	cases		
	Curative education measures in an after-		
	school centre 270 cases		
	Personal assistance in after-school centres		
	29 cases		
	IHTE: 49 individual cases plus provider-		
	based grants		
	Residential: 55 cases		
	Figures as at December 2013 for Bremer-		
	haven Municipality:		
	Non-residential: 163 cases		
	Part-time residential: 265 cases		
	Residential: 35 cases		
НН	Re a <u>) Daycare:</u>	The employment status	Schooling:
	<ul> <li>With regard to child daycare, the fol-</li> </ul>	of the parents is irrele-	In all cases regular ser-
	lowing rights are enshrined in law in	vant with regard to these	vices are provided up to
	accordance with the Hamburg Child	services.	the school year in which
	Daycare Act (KibeG):		the child reaches his or
	<ul> <li><u>Non-means-tested legal entitlement</u></li> </ul>		her 14th birthday; young
	to child daycare for five hours per day		persons with special
	for children aged one year and over,		disabilities may receive
	up to the time they start school. This		support beyond this,
	entitlement also applies to children		depending on their indi-
	with disabilities (§ 6, Para. 1, KibeG);		vidual case.
	<ul> <li>Means-tested legal entitlement to</li> </ul>		Early intervention: Early
	child daycare (based on employment		intervention is a service
	and education and training status of		aimed at children who
	parents) on an as-needed basis, from		are disabled or at risk of
	birth up to the age of 14 years; this al-		becoming disabled and
	so applies to children with disabilities		who have not yet started
	(§ 6, Paras. 2 and 3, KibeG);		school.
	<ul> <li>Legal entitlement to integration assis-</li> </ul>		Assistance for families
	tance in a child daycare centre for		with disabled children:
	children who are disabled or at risk of		Children aged between 2
	becoming disabled, from the age of 3		and 17 (and older in
	up to the start of school (§ 26, KibeG);		some cases) are given
	this also includes curative education		support at home for up
	and therapeutic support measures.		to 15 hours per week.
	1 FF		

As well as child daycare services Hamburg also has a social space-oriented infrastructure, providing advice and support for parents and minors as well as child-raising support and integration assistance, which can be used in individual cases by parents and their children who are at risk of becoming disabled.

#### Schooling:

Care within the context of full-time schooling does not depend on the employment status of the parents. All children with disabilities have unrestricted access to fulltime education and support services. These include early-morning care before the start of lessons, after-school care and care during school holidays. Parents have a choice in the services they wish to use. Both mainstream and special education schools provide these child care services - together with other schools if required.

#### Other services:

Early intervention (home outreach assistance); Assistance for families with disabled children (socio-educational service offered in the parental home, geared towards the restrictions a family faces due to their child's disabilities; provides family support).

In addition, the City of Hamburg provides voluntary, lump-sum cash benefits for families with disabilities: **Guest accommodation**, to give the parents and, where appropriate, siblings of children with disabilities a break from caring; a host of providers now also offer holidays for children with disabilities. **Family relief payment**, a lump sum which is paid on a monthly basis to allow parents to pay for a babysitter, so they can occasionally enjoy some leisure time (further training, sport, leisure activities).

Re b)

These comprehensive services enable all

Guest accommodation is a short-term, residential support service (including adventure holidays for children with disabilities) for children who are being cared for at home by relatives. Its purpose is to offer temporary relief for carers and provide appropriate accommodation and assured support. Guest accommodation is available from the time a disabilities is established. There are no age restrictions here. The amount of the lump sum is between 1,500 and 3,900 euros each year, depending on the severity of the disabilities.

	parents to combine work and childcare	
	commitments. The express purpose of all	
	these services is to ensure children can live	
	within the family unit and do not need to	
	be cared for on an institutional basis.	
HE	<u>1. Early intervention</u> : The early interven-	SGB makes provision for
	tion centres set up in all areas of Hesse	services for children (up
	offer development and support measures	to 14 years), young per-
	for children who have developmental prob-	sons (up to 18 years) and
	lems or disabilities or are suffering from	young adults
	delayed development, from birth up to the	(§ 41, SGB VIII).
	start of school. As well as targeted support	Early intervention is of-
	measures for the child, the range of ser-	fered to children from
	vices also includes advice and assistance	birth up to 6 years of
	for parents and others close to the child.	age, i.e. children who
	The interdisciplinary early intervention	have not yet started
	centres support children and their families	school.
	within the family and learning environ-	Integration in child day-
	ment. Connecting with other services and	care centres:
	facilities within the child's social environ-	In line with § 32, Para. 5,
	ment is vital for this. Additionally, Hesse	of the Hessian Child and
	still offers special early intervention cen-	Youth Services Act
	tres for pre-school children with sensory	(HKJGB), providers of
	impairments. The state of Hesse spends	daycare facilities cur-
	around 2.9 million euros, financed from	rently receive from the
	voluntary benefits and services, on early	state a lump sum pay-
	intervention centres and 3.37 million euros	ment of <b>2,340 eu-</b>
	on those in the Hesse State Welfare Organ-	ros/year per child with
	isation.	disabilities under their
	2. Family relief and support services (non-	care for the joint educa-
	institutional assistance): A range of ser-	tion, development and
	vices, such as transport services and ac-	care of children with and
	companying staff, home care over a num-	without disabilities, up
	ber of days while the carer is away, family	until they start school.
	outings, weekends away, 24-hour individu-	Family relief and support
	al care at home, short-term care, holiday	services (non-
	games etc. offer some relief to parents.	institutional assistance)
	The state of Hesse and the Hesse State	from voluntary parental
	Welfare Organisation fund family support	support bodies; no age
	services to the tune of around 1 million	restrictions.
	euros every year.	
	3. Foster families: Placing children with	
	disabilities and young persons with foster	
	families is a support measure which allows	
	biological parents to stay in touch, while	

Г	the definition of the second s
	the child with disabilities can continue to
	live within the family unit and does not
	need to be placed in residential care.
	4. Integration in child daycare centres:
	Children nationwide have a legal entitle-
	ment to a place in a daycare centre, from
	birth right up to the start of school; this
	legal entitlement applies to all children.
	Caring for children with disabilities in day-
	care centres is regulated in Hesse by the
	Integrated Childcare Places framework
	agreement. This ensures that every child
	with disabilities is offered, from birth, care
	in a mainstream nursery close to home.
	In line with § 32, Para. 5, of the Hessian
	Child and Youth Services Act (HKJGB), pro-
	viders of daycare facilities currently receive
	from the state a lump sum payment of
	2,340 euros/year per child with disabilities
	under their care for the joint education,
	development and care of children with and
	without disabilities, up until they start
	school.
	5. <u>Services in line with SGB VIII (Book VIII of</u>
	<u>the Social Code)</u>
	In addition, youth and integration assis-
	tance services in line with SGB VIII are also
	available. These are based on the require-
	ments of national law and are offered by
	local youth service providers (youth wel-
	fare offices). Assistance is provided as and
	when required by the youth welfare offic-
	es, either from care staff at home, in day
	centres or part-time residential facilities, or
	in day and night centres and other forms of
	accommodation.
	Moreover, guardians throughout Germany
	also have a legal right to child-raising bene-
	fits and services, regardless of the nature
	of the disabilities of the child or young
	person, in line with §§ 27ff., SGB VIII, as
	long as there is a need for such child-
	raising measures over and above the need
	for integration assistance, and that such
	needs have to be met to protect the wel-

	fare of the child.	
	Re b) All measures mentioned are particu-	
	larly suitable as they provide a stable home	
	and promote self-determination.	
	The care provided in a child daycare centre	
	also offers relief to parents and provides	
	children with significant developmental	
	opportunities by allowing them to grow up	
	together with children who have no disabil-	
	ities.	
MV	1. Support and development of (severely)	
	disabled children within an integrative	
	facility	
	2. Support and development of (severely)	
	disabled children on an individual basis	
	in a mainstream facility	
	3. Support and development of (severely)	
	disabled children in special needs	
	nurseries	
	4. Integrative schooling	
	5. Development of family support ser-	
	vices and	
	6. Development of care in the community	
	measures.	
NI	Crèches	
	Lower Saxony has decided not to set up	
	special crèches for children with disabili-	
	ties: instead all children (with or without	
	disabilities) are to be cared for together	
	from the outset.	
	from the outset. Nursery	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis,	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte-	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony.	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities attend a special needs nursery. Of these	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities attend a special needs nursery. Of these around 2,000 children with a severe speech	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities attend a special needs nursery. Of these around 2,000 children with a severe speech impediment receive fixed-term support (18	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities attend a special needs nursery. Of these around 2,000 children with a severe speech impediment receive fixed-term support (18 months on average) in a nursery specialis-	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities attend a special needs nursery. Of these around 2,000 children with a severe speech impediment receive fixed-term support (18 months on average) in a nursery specialis- ing in speech and language therapy, in	
	from the outset. <b>Nursery</b> Almost 5,000 children with disabilities are cared for in nurseries on an inclusive basis, with funds provided by the state. As a re- sult, there are now more than 1,300 inte- grative groups in nurseries across Lower Saxony. A further 5,000 children with disabilities attend a special needs nursery. Of these around 2,000 children with a severe speech impediment receive fixed-term support (18 months on average) in a nursery specialis-	

	After-school centres	
	In after-school centres children with disa-	
	bilities are looked after together with chil-	
	dren who have no disabilities.	
	School	
	In Lower Saxony inclusive schooling was	
	introduced on a mandatory basis at the	
	start of the 2013/14 school year. Parents of	
	schoolchildren with special educational	
	needs are given the choice of sending their	
	child to a mainstream school or a special	
	education school. Comprehensive advice is	
	provided by the schools and the Lower	
	Saxony Education Authority.	
	Family support services	
	Lower Saxony provides its family support	
	services using voluntary resources. Parents	
	are able to take up employment.	
RP	Services for children with mental or physi-	Integration assistance as
INF.	cal disabilities in line with SGB XII:	per § 35a, SGB VIII, is
	For children with mental and/or physical	aimed at children and
	disabilities at pre-school age, there is a	young persons and ends
	wide range of services available at daycare	when the child reaches
	centres. Depending on their needs, they	his/her 18th birthday.
	can be cared for in a mainstream daycare	Young adults who have a
	centre or in a special needs nursery. All	psychological impair-
	children from the age of one are legally	ment or are at risk of
	entitled to early years support in a day	having one are entitled
	centre or child daycare centre.	to assistance for young
	Early detection and intervention measures	adults in line with
	provided by the socio-paediatric and early	§ 41, SGB VIII. The entire
	intervention centres include the involve-	range of services cov-
	ment and consultation of parents, as well	ered in § 27, Paras. 3 and
	as diagnostic, therapeutic and develop-	4, and in §§ 28, 30, 33 to
	mental measures for the child.	36, 39 and 40 of SGB VIII,
	Parents can also take advantage of a range	is available here too.
	of home support measures, e.g. those of-	
	fered by family support services or paedi-	
	atric nursing services. The types of assis-	
	tance that are both suitable and necessary	
	are determined as part of the individual	
	participation plan.	
	Children with psychological impairments	
	cilluleri with psychological inpairments	
1	(§ 35a, SGB VIII). Responsibility for children	

[			ГI
	impairment lies with the local authorities.		
	The type of assistance that is suitable and		
	necessary in individual cases is always		
	based on the needs of the individual child		
	in line with SGB VIII. These needs are de-		
	termined over the course of a joint consul-		
	tation and decision-making process be-		
	tween the service provider (youth welfare		
	office) and the child or young person and		
	his/her parents or guardians.		
	Measures may be provided by appropriate		
	carers at home, in day centres or other		
	part-time residential facilities, or in day		
	and night centres and other forms of ac-		
	commodation.		
SL	Re a) Early intervention, structured routine	The parents' employment	
	activities for children in a child daycare	status is not known	
	centre, inclusive education measures on a		
	semi-institutional basis in child day centres,		
	home assistance for participating in com-		
	munity and cultural life for persons with		
	mental or physical disabilities		
	Measures to participate in a special needs		
	day centre (exceptional rule)		
	Re b) All these service are appropriate for		
	ensuring children and young persons can		
	continue to live with their families.		
SN	Corresponding measures are available (see	The Free State of Saxony	
	details in the adjacent column).	, offers parents (depending	
		on their income) a state	
		child-raising allowance	
		when their child turns	
		two years of age, howev-	
		er this ends at the latest	
		when the child turns	
		three. The benefit is paid	
		for 9 months for the first	
		and second child, and for	
		12 months from the third	
		child.	
		For the first child the	
		state child-raising allow-	
		ance is 150 euros, 200	
		euros for the second child	
		and 300 euros from the	

			· · · · · · · · · · · · · · · · · · ·
		third child.	
		In addition to the general	
		compensation for disad-	
		vantages relating to blind,	
		severely visually-impaired	
		and deaf persons, the law	
		governing the provision	
		of a state allowance for	
		blind persons and of oth-	
		er compensation for dis-	
		advantages (LBlindG) also	
		makes provision for spe-	
		cial compensation for	
		severely disabled children	
		, (degree of disabilities of	
		100, up to the age of 18),	
		amounting to a lump-sum	
		payment of 77 euros per	
		month, regardless of the	
		type of disabilities.	
ST	Re a) With its Child Daycare Promotion Act	-,,,	The Act provides for
	(KiföG) Saxony-Anhalt offers a level of care		daycare for children with
	and early years education for children that		and without disabilities
	sets an example nationwide. It guarantees		up until they reach their
	a legal entitlement to child daycare from		14th birthday. All-day
	birth to the end of Year 6 at school or until		places offered to chil-
	the child reaches his/her 13th birthday. In		dren up until they reach
	this way Saxony-Anhalt is contributing to		compulsory school age
	the family/work balance. Since 1 August		comprise a range of care
	2013 all children are again entitled to all-		and support services for
	day child care. Saxony-Anhalt's Child Day-		up to ten hours per care
	care Promotion Act (KiföG) makes no dis-		day, or up to 50 hours
			per week. With regard to
	tinctions based on the employment of the		
	parents or guardians/foster parents etc.		schoolchildren an all-day
	For young persons with disabilities who are		place comprises a range
	no longer or not yet able to attend a day-		of care and support ser-
	care centre, there is a range of all-day ser-		vices for six hours per
	vices offered by schools.		school day. Children and
	Re b) The comprehensive legal entitlement		young persons with dis-
	to inclusive childcare, in particular, as en-		abilities are cared for
	shrined in the Child Daycare Promotion Act		and supported in main-
	(KiföG), is one measure that enables chil-		stream child daycare
	dren to live at home.		centres. Increased per-
			sonnel to participant
			ratios are provided for

		this, as is further finan- cial assistance in individ- ual cases.
<ul> <li>SH - Early assistance measures, including outreach support from family midwin and family, healthcare and child nursing staff, who provide assistance to pregnant women and families with children up to 3 years of age. This range of services is available to all families as part of primary and secondary prevention measures. The district and city councils are responsible for its organisation and implementation.</li> <li>Low-threshold help and support from the family education services</li> <li>Services from advice centres for families in need of specialist advice.</li> <li>wellcome - practical assistance for families with newborn children.</li> <li>The BKE range of online advisory services.</li> <li>Re b) For parents of children with disabilities, attending a daycare centre ca offer real support or allow them to start work. If specific developmental or therapeutic measures are offered in the child daycare centre, this further relieves the pressure on parents, as they no longen need to take the child to therapy themselves.</li> </ul>	<ul> <li>the employment status of those raising the child is made, as the measures and support services are tailored to the actual care needs.</li> <li>The following support measures for parents looking after children with disabilities are available, irrespective of the parents' employment:         <ul> <li>Health insurance fund services</li> <li>Long-term care insurance services</li> <li>Compensation for disadvantages (ID for severely disabled persons, free transportation for person accompanying the disabled person, easier parking)</li> </ul> </li> </ul>	All children aged one and over, up until they start school, have a right to care in a child daycare centre, regardless of any disabilities. This also applies if the parents are not working, though in such cases entitlement is restricted to half-day care. Children aged one or two years old are entitled to early years care in a day centre (crèche, mixed- age family group) or to a daycare place; from his/her third birthday up until he/she starts school, the child is enti- tled to care in a day cen- tre (usually nursery). While attending a child daycare centre children with disabilities are also able to receive supple- mentary curative educa- tion support measures or other therapeutic ser- vices.

		l .	1
		to the start of	
		school), child daycare	
		centres,	
		school/school sup-	
		port assistants, aids	
		and equipment, hous-	
		ing assistance, ser-	
		vices and benefits as	
		part of training, stud-	
		ies and employment	
		Only the childcare benefit	
		for home-based care and	
		the parental allowance,	
		which is paid regardless	
		of the child's disabilities,	
		are dependent on the	
		parents' employment.	
TH	Re a)	Such measures are avail-	The measures listed un-
	- Care services, provided a need for care	able to all parents, re-	der a) are not linked to
	has been established in accordance	gardless of whether they	any particular age group.
	with SGB XI.	work or not.	
	- Family support services		
	- There is also the possibility of providing		
	assistance in the form of a personal		
	budget. In cases such as these, this		
	form of assistance appears to be par-		
	ticularly suitable, since it allows par-		
	ents seeking help to purchase services		
	independently from "third parties".		
	Re b) The type of measure chosen depends		
	primarily on the case in question. It is		
	therefore not possible to rank the		
	measures in terms of their suitability or		
	effectiveness.		
L		I	I

# X. Appendices to Question 18

### a) National results

Α	National results						
	Special educational su	upport joii	ntly in spe	cial educa	tion schoo	ols and ma	ain-
1	stream schools						
1.1	Pupils with special education needs attending mainstream schools						
1.1.4	Mainstream schools						
1.1.4.1	Overall						
		2007	2008	2009	2010	2011	2012
		Mainstr.	Mainstr.	Mainstr.	Mainstr.	Mainstr.	Mainstr.
		schools	schools	schools	schools	schools	schools
Total no	b. of pupils	84,689	88,664	95,475	108,642	121,999	139,605
TOtal IIC	Focus on special	38,831	39,839	42,563	47,259	53,334	61,124
-	learning needs	30,031	39,039	42,303	47,239	55,554	01,124
	Other special educa-	45,858	48,825	52,912	61,383	68,665	78,481
-	tion needs	43,838	40,023	52,912	01,365	08,005	70,401
	- Seeing	1,898	1,899	1,995	2,232	2,393	2,543
	- Hearing	3,651	3,914	4,084	5,210	5,583	6,331
	- Language/Speech	13,271	13,574	14,553	16,550	18,725	20,306
	- Physical and mo-	5,876	6,208	6,671	7,341	7,951	8,864
	tor development	5,070	0,200	0,071	7,341	7,551	0,004
	- Intellectual deve-	2,406	2,554	2,713	3,189	4,229	5,312
	lopment	2,100	2,331	2,713	5,105	1,223	3,312
	- Emotional and	18,173	19,912	22,167	25,478	28,266	33,193
	social develop-				_0,0	_0,_00	00,200
	ment						
	- General special	417	624	435	1,209	952	1,162
	needs focus, non-		-		,		, -
	attributable						
	- Learning, language						-
	and speech, emo-						
	tional and social						
	development						
	- Illness or impair-	166	140	294	174	566	770
	ment						

Α	National results							
	Special educational su	pport join	tly in spec	cial educat	tion schoo	ls and ma	instream	
1	schools							
1.1	Pupils with special education needs							
1.1.4	Mainstream schools							
1.1.4.2	Proportion of pupils with special education needs attending mainstream							
l	schools among all pup	ils with sp	ecial educ	cation nee	ds			
		1	1	1	r	r		
		2007	2008	2009	2010	2011	2012	
		Mainstr.	Mainstr.	Mainstr.	Mainstr.	Mainstr.	Mainstr.	
		schools	schools	schools	schools	schools	schools	
Total no	o. of pupils	17.5	18.4	19.8	22.3	25.0	28.2	
-	Focus on special	17.8	18.9	20.7	23.4	26.8	31.0	
	learning needs							
-	Other special educa-	17.2	18.0	19.1	21.6	23.8	26.4	
	tion needs							
	- Seeing	27.2	27.1	27.9	31.2	33.2	34.6	
	- Hearing	24.7	26.3	27.0	32.2	33.6	36.7	
	- Language/Speech	26.1	26.6	28.0	31.1	34.6	37.2	
	- Physical and motor	19.2	19.9	21.1	22.6	24.3	26.4	
	development							
	- Intellectual deve-	3.1	3.3	3.5	4.1	5.4	6.7	
L	lopment							
	- Emotional and	34.5	35.9	37.7	40.6	43.2	47.1	
	social development							
	- General special	1.8	2.6	1.8	5.1	4.2	8.6	
	needs focus, non-							
	attributable							
	- Learning, language						0.0	
	and speech, emo-							
	tional and social							
	development							
	- Illness or impair-	1.6	1.4	2.8	1.7	5.1	6.7	
	ment							

В	State re	sults								
2	Special educational support in mainstream schools									
2.1	Pupils with special education needs									
2.1.1	Total number of pupils attending mainstream schools									
2.1.1.3	Other sp	pecial ed	ucation r	needs						
2.1.1.3.8	Illness o	or impair	ment							
Federal										
state	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
BW	122	76	108	11	15	58	26	42	96	127
BY	-	-	-	-	-	-	-	-	-	-
BE	30	41	27	45	42	39	53	64	76	110
BB	-	-	-	-	-	-	-	-	-	-
$HB^{1)}$	-	9	12	8	2	3	5	4	3	-
HH	-	-	-	-	-	-	-	-	-	-
HE	14	17	21	19	25	40	45	49	80	118
MV <sup>2)</sup>	-	-	-	-	-	-	-	-	-	-
NI	-	-	-	-	-	-	-	-	-	-
NW	-	-	-	-	-	-	-	-	-	-
RP <sup>3)</sup>	-	-	-	-	-	-	-	-	-	-
SL	-	-	-	-	-	-	-	-	-	-
SN <sup>4)</sup>										•
ST <sup>5)</sup>	-	-	-	-	-	-	-	-	-	-
SH	5	2	-	4	82	-	165	15	311	415
ТΗ	-	-	-	-	-	-	-	-	-	-
D	171	145	168	87	166	140	294	174	566	770
1) HB (200	04): Varia	ations du	e to a cha	ange of p	process. 2	2) MV: 20	04: Data	from pro	evious ye	ar;
2012: Dat	a have be	een calcu	lated. 3)	RP (fron	n 2010): <i>i</i>	Allocatio	n of pupi	ls with n	o special	needs
assessme	nt no lon	ger possi	assessment no longer possible. 4) SN: no information. 5) ST: State schools only.							

#### b) State (Länder) results

### XI. Appendices to Question 19

# a) Has Art. 24 of the UNCRPD been implemented in line with education legislation and where can the main norm for this be found?

BWSince the 2010/2011 school year Baden-Württemberg has been trialling its "Further development of<br/>school education for young persons with disabilities" policy in schools, the rules of which are closely<br/>based on the UNCRPD. These rules have been laid down in school trial provisions devised for this<br/>purpose. The results of this trial in schools also form the basis for the amendment to the Education<br/>Act by the 2015/2016 academic year, whereby the intentions of Article 24 of the UNCRPD will be<br/>enshrined in education legislation.BYYes, by the 2011/210 academic year, as part of the first step in the process, Art. 24 of the UNCRPD<br/>was implemented in education legislation, in the Bavarian Law on Education and Teaching (BayEUG).<br/>Schools are obliged to provide inclusive teaching (Art. 2, Para. 2, BayEUG) and engage in inclusive<br/>school development practices (Art. 30a, Para. 1, BayEUG). Forms of integrated lessons are regulated<br/>in Art. 30a, Para. 7 and Art. 30b, Paras. 2 to 5, BayEUG. Fundamentally equal access to mainstream

	schools is provided by Art. 41, Para. 1 in conjunction with Art. 30a, Para. 5, BayEUG.
BE	Art. 24 of the UNCRPD has yet to be implemented in education legislation. However, in the state of Berlin guardians are entitled to choose whether their child with special education needs attends a mainstream school or a special education school (cf. §§ 36, Paras. 4 and 37, Para. 3, of the Berlin Education Act).
BB	To date no legislative norm with regard to education has been amended for the purpose of imple- menting Art. 24 of the UNCRPD. Nevertheless, since as early as 1996 the Brandenburg Education Act has made legal provision for 'inclusive teaching' to be given priority over special education options in special education schools or classes. At the same time (as part of the opportunities for creating the range of services desired), those affected have a right to choose, which itself should be seen as an expression of the right to participation.
HB	Art. 24 of the UNCRPD was implemented in law in the 2009 Bremen Education Act.
HE	§§ 49 ff of the Hesse Education Act as amended on 14 June 2005 (Law and Ordinance Gazette I, p. 441), last amended in the Act of 18 December 2012 (Law and Ordinance Gazette p. 645) - all school-age children are to be registered at mainstream schools - implemented.
НН	The main norm can be found in § 12 of the Hamburg Education Act (HmbSG). Since then parents have had an unconditional right to choose whether to place a child with special education needs in a mainstream or special education school. The child can no longer be transferred to a special education school against the will of its guardians. The Hamburg Ministry of Schools and Vocational Training (BSB) has set up a policy division for the definition and development of inclusive education and subsidiary special education support measures (www.hamburg.de/integration-inklusion).
MV	In Mecklenburg-Vorpommern Article 24 of the UNCRPD has been implemented in §§ 34 and 35 of the Education Act. The Education Act of the State of Mecklenburg-Vorpommern, as published on 10 September 2010, is detailed in the Law and Ordinance Gazette M-V, p. 462), last amended in the Act of 13 December 2012 (Law and Ordinance Gazette M-V p. 555).
NI	Yes. Article 24 of the UNCRPD is implemented in education legislation through § 4 of the Lower Sax- ony Education Act (NSchG). Inclusion policies in Lower Saxony are being gradually implemented, i.e. on an ascending basis, in all cases starting with year groups 1 and 5 from the 2013/2014 school year (§ 183 c, NSchG). The school governing bodies have also been granted a transition period up to 2018.
NW	Art. 24 of the UNCRPD was implemented through the First Law Implementing the UNCRPD in Schools (9th Education Legislation Amendment Act) of 5 November 2013 (GV.NRW. p. 618). The main norms are § 2, Paragraph 4, and § 19 and § 20 of the Education Act: inclusive education in schools is now standard. Where there is a need for special educational support, the education authority offers parents at least one mainstream school where integrated learning is provided.
RP	The current draft law on the implementation of the UNCRPD is going through Parliament and is likely to be passed before the summer recess. For parents of pupils with an established need for special educational support, it offers the unconditional right to choose whether their children attend a special education school or inclusive lessons in mainstream schools at primary or secondary I level, i.e. so-called specialised inclusive education schools (§ 59, Para. 4, Draft Education Act).
SL	The 2014 draft law of the Government of Saarland amending education legislation (printed docu- ment 15/812) was unanimously approved on 25 June 2014.
SN	As regards the implementation of the UNCRPD, the recommendations of the expert committee on the development of the school system in Saxony, appointed by the State Ministry of Education and Cultural Affairs (SMK), have been reviewed by the relevant specialist departments within the Minis-
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	try. An amendment to the Education Act to implement this in education legislation is being drawn up
	and will be presented in the next legislative period.
	New Education Act (23 January 2013):
	– § 1, Para. "[] In particular all young persons have the right, regardless of their origin or financial
	situation, to development, education and training which promote their particular skills, aptitudes and interests []"
ST	– § 1, Para. 2, Point 6, clarifies the terms equal respect and equality and is largely based on the
	UNCRPD definition
	– § 1, Para. 3 "[] Inclusive education for students is promoted in all types of school to help im-
	prove equal opportunities []. Inclusive teaching methods and principles must be incorporated in
	teacher training []"
	Art. 24 of the UNCRPD has been implemented in education legislation; the main norm for this is con-
	tained in § 5, Para. 2 of the Schleswig-Holstein Education Act. It says: "Students should be taught in
	classes together, regardless of whether they have special educational needs or not, provided this is
<b>C</b> 11	possible from an organisational, personnel and technical point of view, and this meets requirements
SH	with regard to the individual support and development of students with special educational needs
	(inclusive teaching)". Furthermore, § 4, Para. 13 of the Education Act, as amended on 31 July 2014,
	stipulates the following under the heading "Educational Objectives": "Particular support must be
	offered to students with disabilities. The goal of inclusive education is a priority here".
	To date this has not been implemented in education legislation; the priority given to inclusive teach-
	ing was regulated by education legislation back in 2003 (Thuringia Special Education Act and related
тн	ordinance). In 2011 the state government passed the "Thuringia Action Plan on the Implementation
	of the UNCRPD" and, in July 2012, the "Thuringia Development Plan for the Implementation of the
	UNCRPD (Art. 7 and 24) by 2020".

## b) Is there a resource provision in place?

BW	Since work on the Education Act is still ongoing, no definitive comments on this can be made.
	No; with regard to access to a mainstream school: It is true to say that, where considerable additional
	costs are involved, the local school funding authority can refuse to approve the placement of a child
	(in a mainstream school) on the basis of his/her physical or sensory impairment (Art. 30a, Para. 4,
BY	BayEUG); nevertheless, the child is able to attend another (accessible) mainstream school (cf. also
	guest school admissions in line with Art. 43, Para. 2, Sub-para. 4, BayEUG).
	Special educational support measures are regulated in Art. 21 of the BayEUG and Art. 30b, Paras. 4
	and 5 of the BayEUG.
DE	In principle yes (cf. § 37, Para. 3 of the Education Act). However, this is applied in very rare individual
BE	cases only, where a lack of sufficient personnel, spatial or technical resources is identified.
	A very limited (eligible) budgetary proviso is available for 'inclusive teaching' in schools (§ 29, Para. 2,
BB	BbgSchulG)
HB	No resource provision is specified in the Bremen Education Act.
HE	Yes - inclusive teaching depends on the personnel, spatial and technical resources available at the
пс	mainstream school.
	There is no resource provision in the Hamburg Education Act (HmbSG). The financial basis for imple-
HH	menting § 12 of the Hamburg Education Act will be laid down as part of the Hamburg City Parliament
	budget consultations; information on funding for inclusive education are contained in printed docu-

	ment no. 20/3641.
	As a rule, no resource provision is made after the state budget has been confirmed. However there is
MV	a rules and exceptions policy in place which favours integrative/inclusive education in Mecklenburg-
	Vorpommern.
NU	No, there is no resource provision in place. The budget resources provided by the legislature are be-
NI	ing used to implement the obligations set out in the UNCRPD.
	Yes. However, inclusive learning is not offered and students with disabilities are not accepted at a
NW	mainstream school, if the school in question is not equipped for this in terms of personnel or tech-
	nical resources, and it could not be equipped at reasonable cost.
	No. The existing resource provision in § 3, Para. 5, of the Education Act (SchulG), by which the inclu-
RP	sive education of children and young persons with and without disabilities is dependent on the pro-
	curement of sufficient technical, spatial and personnel resources, is to be revoked.
	Based on the present legal situation with regard to the Integration Ordinance (§ 4 (1)), there is a re-
SL	source provision in place which is not applied in current validation procedures, and which will be
SL	revoked with the pending education legislation amendments implementing the changes in the law
	(see Question 1).
SN	Yes.
	§ 1, Para. 3a, of the Education Act stipulates that "students with and without special educational
ST	needs are taught together in class, if an application for this is made by the guardians of the children
51	with special educational needs, and provided the personal, technical and organisational conditions
	can be met or created within the limits of budget resources[]"
	The regulation already described in the response to Question 1 includes a resource provision in that
SH	it stipulates "provided this is possible from an organisational, personnel and technical point of view".
	Current statutory regulations include a resource provision. "Inclusive teaching may be offered if the
TH	necessary personnel, technical and spatial conditions are met" (§ 9, Para. 1, Thuringian Ordinance
	on Special Pedagogical Care).

## c) Will special education schools continue to operate?

	Special educational facilities will continue to operate in future. They are to be seen as an advice and
BW	support system and provider of specialized school education.
	Yes, from a legal point of view they are, as a rule, an alternative service provider. For child welfare
BY	reasons, the obligation to attend a special education school (on a part-time basis) exists within the
	very strict limits of Art. 41, Para. 5, of the Bavarian Law on Education and Teaching.
	Special education schools are to continue in order to maintain the parent's right to choose. However,
BE	due to rising integration levels their number has been falling for years.
BB	Yes, special education schools will continue to operate.
	The number of special education schools is to be scaled back to four remaining special education
HB	centres. Attendance at these special education centres (with one exception) is voluntary.
	Yes - In offering a high level of expertise the special education schools are able to meet specific needs
HE	and are therefore a suitable care and development option for many students. Many parents make a
	conscious choice to send their children to these schools.
	Yes, based on the UN Convention, the highest priority is given to a parent's right to choose in all deci-
НН	sions made within the scope of § 12 of the Hamburg Education Act (HmbSG). Guardians of children

	with learning, language and speech or emotional or social development needs can choose between
	all mainstream schools and the education services of the Regional Education and Advice Centres,
	which followed on from the special education and speech and language therapy schools; guardians of
	children with special needs (hearing, seeing, intellectual development, physical and motor develop-
	ment) can choose between specialised inclusive education schools, which offer a high level of exper-
	tise, and special schools or supraregional education and training centres.
	A decision as to whether special education schools in Mecklenburg-Vorpommern are to be continued
ΜV	can only be made once the "State Government Strategy on the Implementation of an Inclusive Edu-
	cation System in Mecklenburg-Vorpommern by 2020" has been passed by the Mecklenburg-
	Vorpommern Landtag.
	Yes, special education schools - with the exception of the specialist learning and speech and language
	schools - will continue to be offered as an alternative. Since the beginning of the 2013/2014 school
NI	year, the specialist learning school has no longer been accepting students from year 1 and up; there
	are no definitive arrangements in place for the specialist speech and language school.
	Yes. A condition of this is that, as with all schools, the number of pupils allows for proper running of
NW	the school.
RP	Yes; compare here the response to Number 1.
SL	Special education schools are to be continued in line with draft legislation.
	Saxony is committed to a diverse range of special education centres which give parents and pupils
SN	greater choice with regard to a suitable place of learning. Consequently, special education schools
	will continue to operate to the extent required.
	Yes, special education schools still operate in the state; they are steadily falling in number and in
ST	many cases they provide a range of services for children with different special needs.
	Special education schools (known in Schleswig-Holstein as "special education centres") will be re-
	tained as a matter of principle and will continue to teach pupils in future too. Furthermore, efforts
SH	are being made to develop larger special education centres, which no longer teach pupils on a per-
	manent basis, into so-called "centres of excellence", providing greater support for inclusive educa-
	tion.
_	Special education schools are to be continued, with a change in their focus and structure and in line
TH	with the principle of subsidiarity.

## d) What budget resources does your State provide for the implementation of the UNCRPD?

	Based on the schools trial mentioned in (1), much has been achieved. Budget resources are already
	being used for this, however it is not possible to give figures at the present time. As part of the work
BW	being done on the Education Act, issues relating to the future use of funds are currently being dis-
	cussed at a political level and discussions held with the associations of local authorities. For this rea-
	son, a precise figure for the future budget resources to be made available cannot be given.
	Every year since 2011 an additional 100 posts dealing with the subject of inclusion have been includ-
BY	ed in the budget, making a current total of 400 posts. Furthermore, funds to implement Art. 24 of the
	UNCRPD are being used in other areas (e.g. further teacher training; scientific research and support).
	The budget funds for implementing the UNCRPD are spread over several areas. Around 100 million
BE	euros are spent each year on providing additional teaching staff for inclusive classes for students
	with and without disabilities (full-time posts) alone.
BB	To fund measures for implementing the UNCRPD, a variety of dedicated state (national, federal and

	local) and non-state stakeholders (including churches, foundations, associations and organisations)
	provide their own funds, either to finance corresponding projects directly or to support them. As well
	as donations, the relevant expenses for those affected and their relatives are also covered from the
	latter's own funds.
	In the 2013 financial year state expenditure for special education schools run by public and voluntary
	bodies amounted to a total of 115.1 million euros.
	It is not possible to paint a more specific picture for the very reason that the implementation of the
	UNCRPD covers many areas of life and a large number of measures; compare the state government's
	package of policies for the persons with disabilities
	http://www.masf.brandenburg.de/media_fast/4055/Behindertenpolitisches_Ma%C3%9Fnahmenpak
	et_schwer_bfPDF_abA7.pdf
	In addition, there are numerous national, state, local, church and private bodies and facilities - each
	with their own portfolio covering schools/education, care, youth and social welfare, health and their
	own responsibilities and funding contributions, working in the education sector.
	The budget funds available for implementing inclusion measures are essentially passed on to the
HB	schools as system resources. For this reason, a specific, detailed breakdown of budget funds cannot
	be given.
	For the current 2013/2014 school year, Hesse is providing nearly 120 million euros for the implemen-
	tation of the UNCRPD. This is broken down as follows (1 teaching post - for average earnings at A 13
	including old-age provision allowance - estimated at 69,666.52 euros): 117.86 million euros for
	1,691.83 (special education school) teaching posts providing special educational support to main-
HE	stream schools (as at 2013/2014 school year); 420,000 euros for developing special education care
	and support; 1.04 million euros for expert special education advice (15.0 (special education school)
	teaching posts; 104,500 euros for expert advice (1.5 special education school teaching posts);
	348,300 euros for the 'Inclusion' project office (5.0 teaching posts); 87,500 euros for budget funds for
	the 'Inclusion' project office.
	See response to Question 2: the specific calculation of budget funds is taken from parliamentary
	printed paper no. 20/3641. In terms of the student population with learning, language and speech or
	emotional or social development needs, primary and district schools receive system-wide teaching
НН	support; all schools with students with special needs (cf. information given in 3.) are allocated child-
	related resources. In all cases privately-funded schools and grammar schools are given resources
	relevant to the individual students.
	As part of its budget plans, the Mecklenburg-Vorpommern Ministry of Education, Science and Culture
	provides budget funds for the education of children who are disabled or at risk of becoming disabled;
N 41 4	these funds are also used to safeguard the support and development needed to obtain a successful
MV	school education. As part of this, funds for inclusive measures that are not detailed separately are
	also provided. Support and development in inclusive classes as well as educational and special educa-
	tional support are also measures that are given financial backing.
	Approx. 180 million euros are to be made available in the 2014 financial year for the implementation
	of the UNCRPD. This includes the additional resources for inclusive education in schools since 2012,
NI	as well as the funds for various inclusion measures in schools, e.g. mobile services, dedicated inclu-
	sive education classes, basic special educational support, excluding funds for special education
	schools.
NW	The number of additional teaching posts for inclusive education classes is to be increased from 1,200

	to 3,200 in the period 2012-2017. The additional teaching posts offered during this period corre- spond to a funding package of around 750 million euros. Around 100 million euros for training and further education measures for teaching staff will be added to this. From 2015 to 2019 North Rhine-Westphalia will be giving local authorities 175 million euros towards
	spending for inclusive education in schools.
	All special education teachers in specialised inclusive education schools are tasked with offering in- clusive lessons children and young persons with and without disabilities. To implement this, special needs teaching staff and educational specialists - making up around 680 full-time teaching posts - are currently employed this academic year, 2013/2014.
	200 full-time teaching posts will be available until 2016, to drive forward inclusion policies through-
RP	out the school system. In addition, the resources available for inclusive education measures are rising
RP	with the anticipated upturn in the proportion of inclusive education students: Provided there are
	more attending specialised inclusive education schools instead of special education schools, less
	teaching staff will be required for special education schools, meaning resources can then be used on
	a supplementary basis in specialised inclusive education schools, as and when required.
	Talks are currently being held with national associations of local authorities on possible additional
	resources to develop inclusive measures within the remit of local authorities.
	The draft law mentions the following with regard to this: As part of the inclusive schools policy, spe-
	cial education teachers are to be assigned on a fixed basis to a mainstream school in future; as a re-
SL	sult they will be able initially to offer primary teachers 'on the job' support. The special education
	teaching staff resources currently available can thus be used more effectively. The additional re-
	quirements arising from this have been considered in the plans to use the 'demographic dividend'.
	In 2014 Saxony provided 644,000 euros for the explicit implementation of UNCRPD implementation
	measures. The 2015/2016 twin budget, currently under negotiation, makes provision for a further
SN	increase in funds for the gradual implementation of the UNCRPD. That aside, it goes without saying
	that teachers in all types of school - especially special education teachers - play a key role in imple-
	menting the goals of the UNCRPD.
CT.	The UNCRPD is being implemented as part of the state's HR development concept, which details the
ST	employment requirements.
	Since 1990 the Schleswig-Holstein Education Act has underlined the state's commitment to inclusive
	education for all students, regardless of whether they have a disabilities or special educational needs.
	Against this background, the state has not earmarked funds explicitly for inclusive education in its
SH	budget; rather all resources provided for a school are, as a matter of principle, also used for promot-
	ing and developing inclusive education. In particular the social and youth welfare service providers
	are helping to fund inclusive education through the assistance provided with obtaining an appropri-
	ate school education, in line with § 54, SGB XII, and § 35a, SGB VIII.
ТН	The legislative body responsible for the budget is to decide in the next legislative period what funds
	are to be made available.

An annually updated review of the Standing Conference of the Ministers of Education and Cultural Affairs on the implementation of inclusive education in the Länder (as at 27/11/2013), with detailed information on the transformation processes, state-wide action plans, school subjects and issues relating to concomitant financing, is available In German (approx. 87 pages).

## XII. Appendices to Question 20

# a) Measures to support persons with disabilities in employment on the mainstream labour market

BW	For those making the transition from segregated sheltered employment workshops into jobs requir- ing social insurance contributions, support is available from the "Inclusive Employment" support pro- gramme. Implemented as a block of holistic services from several providers: The integration grant from the Federal Employment Agency is used, and is supplemented by up to 70 percent in the first three years of employment, if required, by the Integration Office, using funds from the compensatory levy. If this level of support is still required after the 36th month in employment, funds are approved for a further 24 months. They consist of benefits (totalling up to 40 percent) from the Integration Office, as well as supplementary wage subsidies of up to 30 percent from integration assistance funds.
BY	Ongoing (standard) benefits (as per SGB IX and the ordinance on the compensatory levy for severely disabled persons); special programmes ("Inclusion initiative", "Creating opportunities III", the comprehensive "Transition from special education school to work" project and "Individual career counsel- ling").
BE	As well as the regular services offered by the rehabilitation institutions and the Integration Office to help participate in working life, special measures are available at state level: The "2010 Berlin Job Offensive for Severely Disabled Persons", which took place from autumn 2009 up to and including May 2013 (250 jobs, 64 training places), two specialist integration services providing support with the transition from school and workshops for severely disabled persons (WfbM) into the mainstream labour market; implementation of the Inclusion Initiative in Berlin; joint framework labour market programme offered by the State of Berlin and regional headquarters of the Berlin-Brandenburg Fed- eral Employment Agency.
BB	The package of measures for severely disabled persons from the state government lists 20 measures which offer careers guidance, training and employment support for persons with disabilities on the mainstream labour market. An example of this is the implementation and development of the "Inclusion Initiative" programme, jointly financed by the Federal Government and the Länder: 500 pupils with severe disabilities were offered career counselling over a number of years; 44 severely disabled young persons started a new workplace training course; support for 122 new jobs requiring social insurance contributions for older (50-plus) unemployed persons with severe disabilities; and 61 new jobs requiring social insurance contributions for severely disabled unemployed persons over the age of 45. Once the BMAS programme has come to end, the other programs will be continued and expanded using state funds. Other measures for improving participation in working life - over and above this package of measures - have been developed.
НВ	Participation in working life services, which are offered by the relevant rehabilitation service providers (§§ 5, Nos. 2 and 6, SGB IX) Supplementary measures from the Integration Office (cf. § 102, Para. 1, SGB IX): Integration advice experts in the various chambers; 'Inclusion in Science' flagship project; PLUS labour market programme (for severely disabled persons in cooperation with the employment agencies in the State of Bremen; § 16 of the ordinance on the compensatory levy for severely disabled persons (SchwbAV); implementation of the federal "Inclusion Initiative" programme (see above); the state is complementing the funds provided at federal level with funds from the state

	compensatory levy; employment of trained rehabilitation support assistants with experience in psy-
	chiatry.
HH HE	In line with Book IX of the Social Code, the Integration Office is responsible for ensuring and promot- ing the integration of severely disabled persons into working life. As well as offering advice to severe- ly disabled persons and their employers covering all areas of employment for severely disabled per- sons, the Integration Office also provides financial support, e.g. for technical workplace materials, on- the-job support, professional training and qualifications and with starting up their own business. Employers receive financial support in creating new jobs and training places and making existing workplace and training places suitable for persons with disabilities, and with exceptional costs asso- ciated with the employment of severely disabled persons. General instruments of mainstream labour market development as per Books II and III of the Social Code. Model-only trials using compensatory levy funds, e.g. in the form of the Hessian Outlook Pro-
	gramme for Improved Labour Market Opportunities for Disabled Persons (HePAS) - trials run up to 31/12/2017; support measures for the transition from school to work and out of unemployment.
MV	The action plan drawn up by the state government of Mecklenburg-Vorpommern on the implemen- tation of the UNCRPD includes measures on placing severely disabled persons in the mainstream labour market as part of its "Work and Employment" initiative. Participation in working life is to be improved in future using available funds from the compensatory levy in line with Book 9 of the Social Code.
	The development areas identified in the "Health Sector Master Plan - Mecklenburg-Vorpommern 2020", namely Life Science, Health Services, Healthy Age(ing), Health Tourism and Nutrition for Health, with all their related action recommendations, are driving forward developments which also benefit persons with disabilities. The following state-backed projects on restoring and maintaining a person's ability to work are given
	as an example: "Development and coordination of the centre of excellence for back and spinal health in Mecklen- burg-Vorpommern" "Networking activities for the development and implementation of tourist services for persons with food allergies and intolerances"
	"Accessible health tourism in Mecklenburg-Vorpommern"
NI	As well as funding opportunities from the Integration Office, support is provided via federal and state labour market programmes. The services offered by the Integration Office include (applies to all Län- der): services for creating new jobs for severely disabled persons; services for workplace accommo- dation which is appropriate for persons with disabilities; services for compensating for exceptional costs. In addition to current support programmes:
	<ul> <li>JOB4000 labour market programme - over 60 million euros for the creation of new jobs and training places, with 1,813 new jobs and 74 training places supported to date.</li> <li>11. Special state programme for reducing the number of severely disabled unemployed persons;</li> </ul>
	regional labour market programme based on SGB III (June 2010) and SGB II (June 2011). In terms of SGB III, 1,066 persons have so far taken part in the program, and 531 persons under the terms of SGB II (as at 31/03/2014).
	State participation in the "Inclusion Initiative" federal programme (see above).
NW	With its "Inclusion is our business!" state programme, North Rhine-Westphalia and the regional councils are promoting the inclusion of persons with disabilities and their self-determined participa-

	tion in working life. The aim is to provide 2.5 million euros every year to create up to 250 new jobs
	requiring social insurance contributions every year in inclusive companies for persons with disabili-
	ties. Over 250 inclusive companies in NRW currently employ almost 5,600 people in jobs requiring
	social insurance contributions.
	The "Working together" ("MIAR") project is aimed at developing a regional inclusive support system
	for persons who are disabled or have serious health impairments, and are receiving benefits and able
	to work.
	Since 1997 unemployed persons with disabilities have been offered an 8-month course in a special
	vocational retraining centre, to retrain participants for public sector administrative assistant roles in
	local government. Successful graduates are then given permanent local government posts. To date
	this measure has offered new job prospects to around 250 persons with disabilities.
RP	A target agreement - aimed at reinforcing the inclusion of persons with disabilities in working life and
	supporting them in the transition to the mainstream labour market - between cost and service pro-
	viders and associations for persons with disabilities; commissioning of specialist integration services
	with activities relating to the transition from school to work, with the aim of developing alternatives
	to workshops for disabled persons as part of careers conferences in the last two years of school; de-
	velopment and expansion of inclusive companies, in which persons with disabilities are employed on
	the mainstream labour market with the help of state investment.
SL	Inclusion initiative, focussing on career counselling, new training places and jobs for older persons
_	with severe disabilities.
	Support for inclusive businesses (11 companies offering over 90 jobs across Saarland).
	The Saarland participation programme for mentally-impaired persons (scheduled to run until the end
	of 2014).
SN	Project for developing officially certified training modules in workshops for disabled persons.
511	In addition to statutory policies support is also offered to persons who are particularly affected by
	disabilities in the form of specialist integration services.
	Lump-sum payments from the Saxony labour market programme are given to employers as an incen-
	tive to employ persons with disabilities. Employing persons with disabilities on the mainstream labour market is also a key focal point of the
	, , , ,
	Work + Disabilities Alliance (www.soziales.sachsen.de/arbeit-plus-behinderung.html).
ST	In addition to the whole range of statutory policies based on SGB IX:
	Employment support programmes for severely disabled persons on the mainstream labour market,
	e.g. for young persons up to the age of 25, as regulated by SGB; young persons up to the age of 30, as
	regulated by SGB II; long-term unemployed persons with severe disabilities from the age of 55; sup-
	port for severely disabled persons with the transition from workshops into the mainstream labour
	market. A labour market programme entitled "Jobs for persons particularly affected by severe disa-
	bilities up to the age of 50".
SH	The "Transition from school to work" flagship project and the "Inclusion Initiative" (development of
	sheltered workshop alternatives for persons with disabilities and for students with different types of
	disabilities);
	Schleswig-Holstein - Inclusive Jobs Alliance (cooperation between business associations, chambers of
	crafts and trades, Federal Employment Agency, local authorities, specialist integration services and
	state organisations to educate and make employers aware of the special needs of severely disabled
	persons; support services; development opportunities aimed at opening up the labour market for

severely disabled persons and placing them in jobs requiring social insurance contributions); 18 inclu-
sive companies; "Supported employment" project;
Individual measures based on SGB IX.

# b) Measures to support persons with disabilities in the transition from sheltered workshops into the mainstream labour market.

BW	"Inclusive Employment" support programme: Employers who take on staff from segregated sheltered employment workshops receive inclusion bonuses of up to 10,000 euros. The transition phase is also overseen by specialist integration services.
BY	Plans are underway for a flagship project to support persons with disabilities in the transition from
	sheltered workshops into the mainstream labour market (to be launched at the beginning of 2015).
	Existing (standard) benefits from the compensatory levy are already providing transition support to
рг	disabled workshop employees.
BE	In addition to the statutory responsibility of the sheltered workshops, based on § 136, Para 1, Sen-
	tence 3, of SGB IX - in terms of the transition support measures provided by sheltered workshops - a
	specialist integration service was set up which deals exclusively with severely disabled persons previ-
	ously employed in sheltered workshops, and provides support with the transition to the mainstream labour market.
BB	An academic study on the framework conditions for the transition from sheltered workshops into the
	mainstream labour market is currently being compiled, with corresponding measures to follow. A set
	of transition procedures for workshop employees is being trialled in a workshop and should provide
	valid lessons on what community-wide services to offer.
HB	Promotion of integration projects (§ 132, SGB IX)
	The start of 2013 saw the launch of a special action programme to provide greater support to inte-
	gration projects.
	"JobBudget" flagship project, which enables severely disabled persons with special support needs to
	move out of sheltered workshops and into the mainstream labour market.
	According to § 136, Para. 1, Sentence 3 of SGB IX, one of the duties of the workshop is offer appro-
	priate services to support the transition to the mainstream labour market.
HH	"Hamburg Budget for Work" project since September 2012: financial benefits (wage subsidies of be-
	tween 50% and 70%) paid to employers, plus support and training benefits for employees moving
	into the mainstream labour market. Employees are given comprehensive personal pension advice
	and written confirmation of their right to return to a workshop, to allay any fears.
HE	Special financial incentives for potential employers lasting up to five years; special measures for
	greater provision of inclusive jobs within companies on the mainstream labour market for sheltered
	workshop employees.
MV	In its action plan for implementation of the UNCRPD, the state government has included measures in
	to find employment for severely disabled persons in the mainstream labour market. One example is a
	Budget for Work pilot project, aimed at supporting employees in moving out of sheltered workshop
	for disabled persons and into the mainstream labour market, using funds from the compensatory
	levy.
NI	Budget for Arbeit for severely disabled persons who are legally entitled to employment in a work-
	shop in line with §§ 41 and 136 of SGB IX, to allow them to buy services on the mainstream labour
	market. Over 80 workshop employees are currently using the Budget for Work.

NW	"Budget for Work": The benefits provided by regional agencies and the Integration Office are pooled.
	The budgets allow tailored support measures to be put together which can be adapted to the indi-
	vidual needs of the person concerned and promote the integration process as a whole at the same
	time. By the recording date of 31 January 2014, 619 sheltered workshop employees had moved into
	jobs requiring social insurance contributions.
RP	Permanent wage subsidy to employers who offer jobs requiring social insurance contributions and a
	collectively agreed salary to persons from sheltered workshops (Budget for Work).
SL	For 16 years Saarland has been successfully implementing a concept that is based on two key areas:
	professional preparation and support measures for workshop employees in the transition into and
	acquisition of jobs on the mainstream labour market, as well as the use of qualified specialists for
	business integration within the workshops. Between 1998 and 2013 these measures helped 151
	workshop employees into a job requiring social insurance contributions on the mainstream labour
	market.
SN	The Work + Disabilities Alliance, together with the stakeholders involved, has approved recommen-
	dations for workshop transition concepts.
	(http://www.soziales.sachsen.de/download/familienportal/konzeptionelle_Empfehlung_Uebergaeng
	e.pdf). Specific transitional support is provided by the "Change of Track" (Spurwechsel) programme.
	(http://www.ksv-sachsen.de/menschen-mit-behinderung/leistungen/projekt-spurwechsel
ST	The Ministry of Labour and Social Affairs in Saxony-Anhalt, in cooperation with the Federal Employ-
	ment Agency, the Saxony-Anhalt-Thuringia Regional Directorate and other stakeholders, has devel-
	oped a state pilot project which provides workshop-to-labour market transitional support (ÜWA).
	This project will run until 2019. A job coaching service ensures that support processes are perfectly
	adapted to individual needs. In addition, there is a particular focus on the intensive efforts being
	made by the relevant stakeholders to find partners on the mainstream labour market who are willing
	to embrace the special potential offered by severely disabled persons in the workplace. Using legal
	instruments defined in federal law as well as the means of support possible under state laws, persons
	who are particularly affected by a severe disabilities can be helped on the road to more self-
	determination in life; see also above.
SH	Piloting a budget for work for persons with disabilties currently employed in a sheltered workshop, to
	offer a new perspective in terms of the transition into the mainstream labour market.
TH	Discontinuation of workshops in line with § 136, SGB IX. Also: Supported employment and jobs in
	inclusive companies; "Inclusion Initiative" (see above).