

# Long-term care in the EU

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# Outline

***1) LTC in the EU – landscape and challenges***

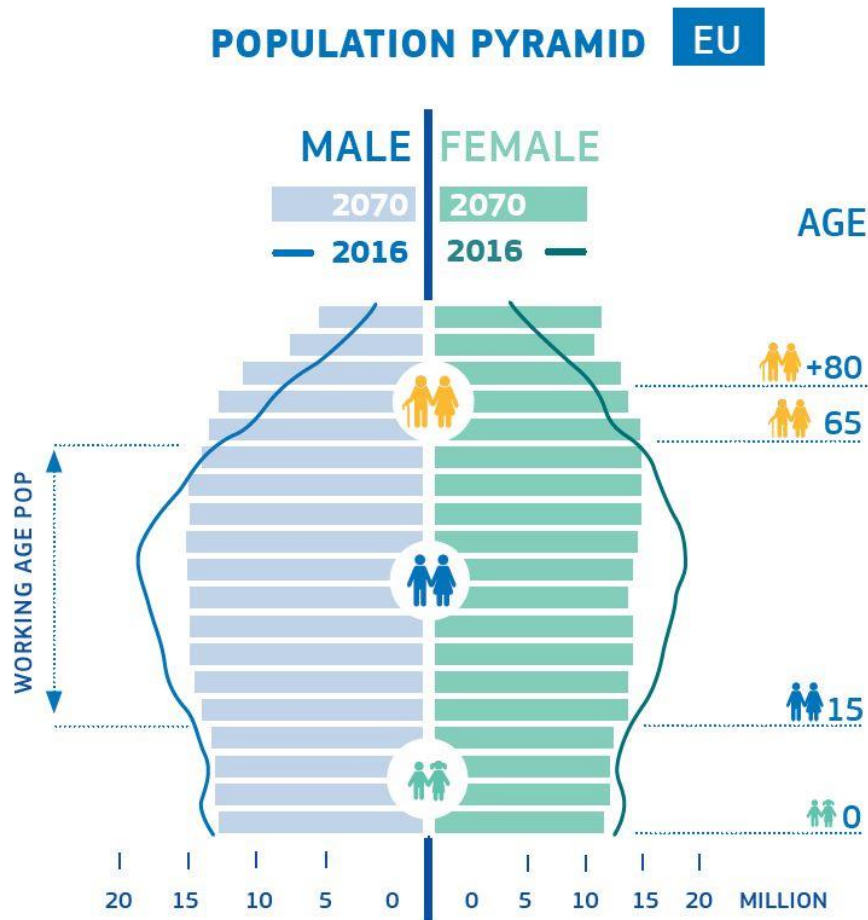
*2) Policy framework and responses*

# Ageing EU



## BETWEEN 2016 AND 2070...

- The total population of the EU is set to grow by 9 million
- The number of people aged 65 + will increase by over 50 million
- The working age population will shrink by over 40 million
- The fertility rate will increase slightly but remain low





## European Pillar of Social Rights

*Principle 18:*

*"Everyone has the right to affordable long-term care services of good quality, in particular home-care and community-based services."*

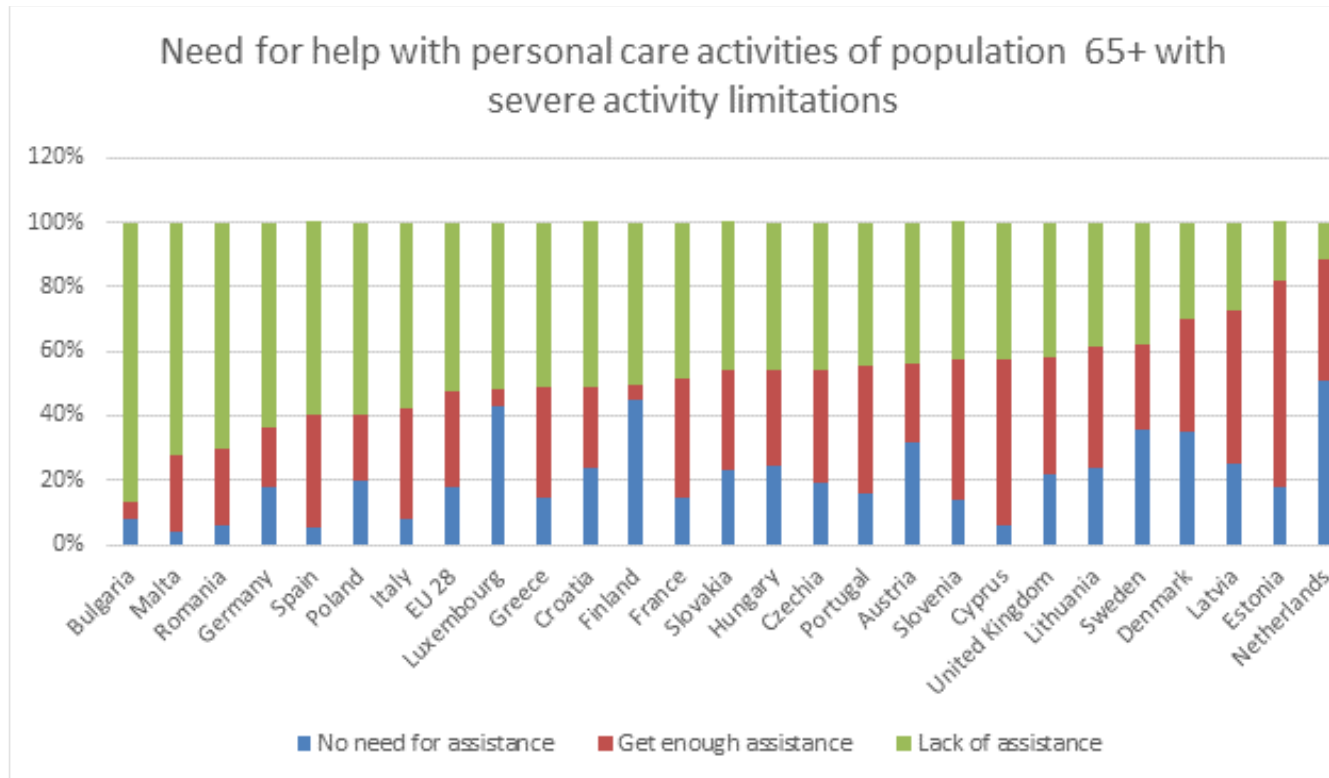
## LTC in the EU – a varied landscape...

- *Role of formal vs. informal care*
- *Types of services and assistance*
  - Home care vs residential care: a clear split between countries
- *Public support related to LTC*
  - Cash benefits vs services in kind
  - Financing models - tax vs insurance based
  - Depth of support
  - Governance levels (national / regional / local)
- *Market structure*
  - Public vs private (profit / non-profit) providers
- ...

## **... but *common challenges* in LTC social protection across the EU:**

- Access and affordability
- Quality
- Employment
- Sustainability

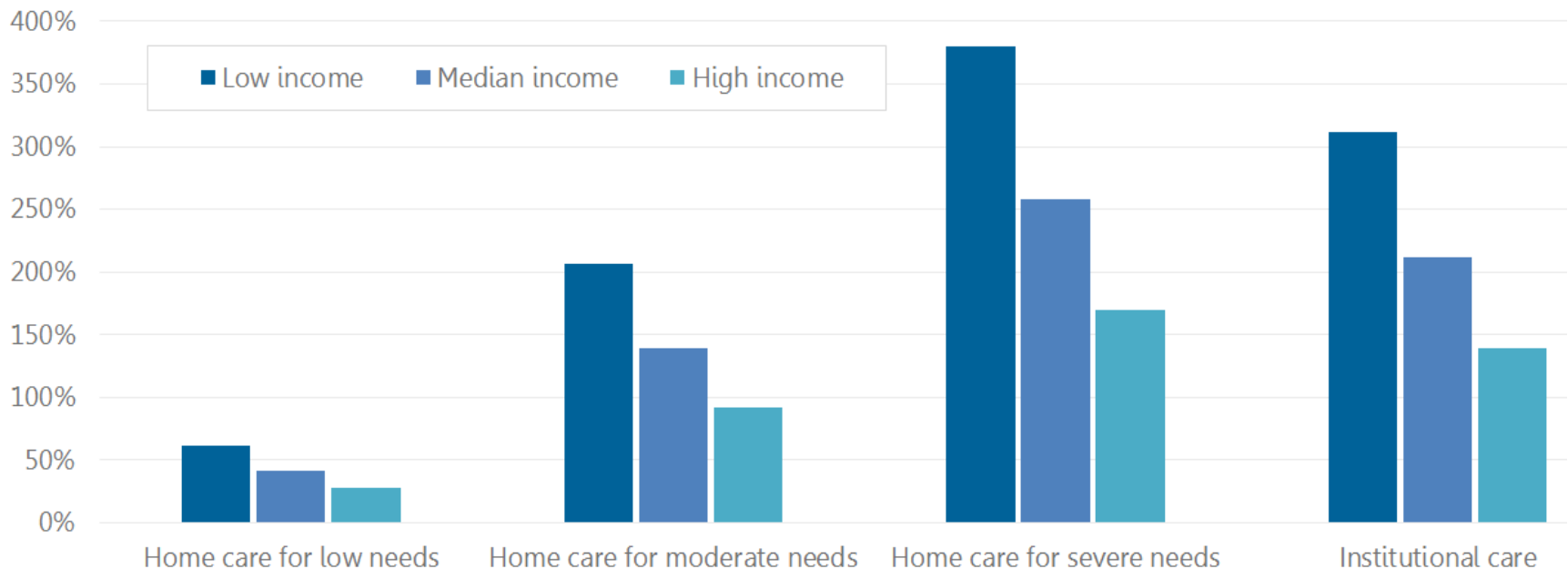
## Access to LTC



Source: Eurostat, EHIS wave 2, 2014, hlth\_ehis\_pchlpd

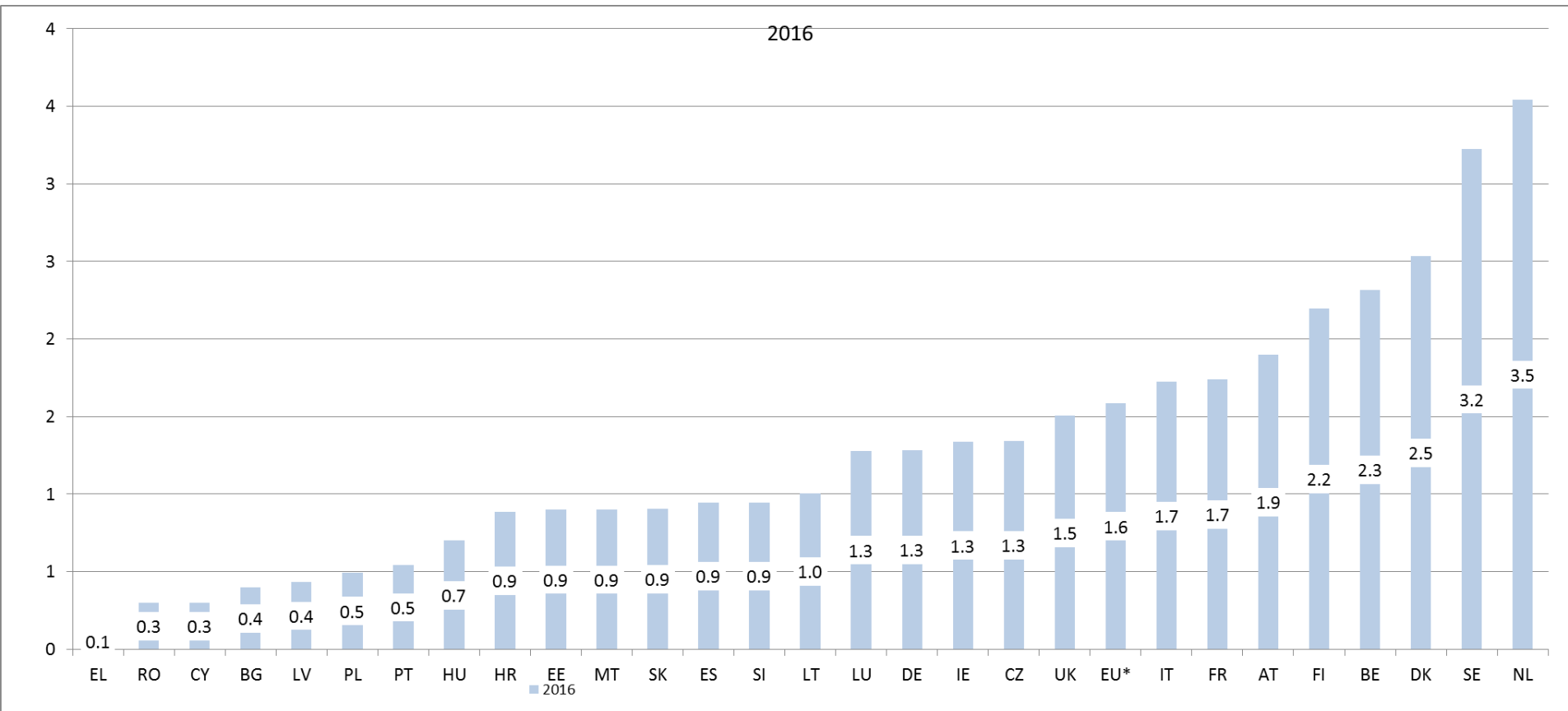
## Affordability of LTC

The cost of one week of LTC as a share of disposable income in old age



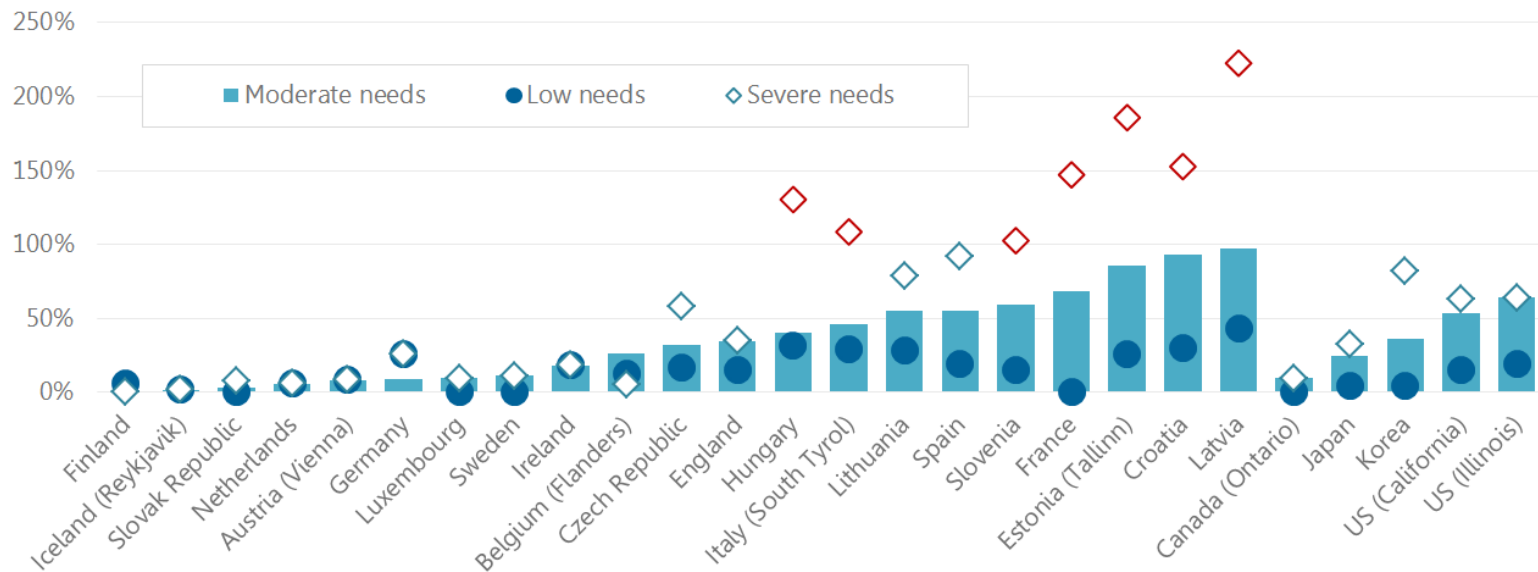
Source: OECD report 2019 "Measuring social protection for long-term care in old-age"

## Current public LTC spending (% of GDP, 2016)



## Levels of out-of-pocket costs

Share of care user's disposable income spent on out-of-pocket costs of home care, for different needs



Care recipients earn the national median income among people of retirement age or older and have no net wealth. Low, moderate and severe needs correspond to 6.5, 22.5 and 41.25 hours of care per week, respectively.

Source: OECD report 2019 "Measuring social protection for long-term care in old-age"

# Quality challenge

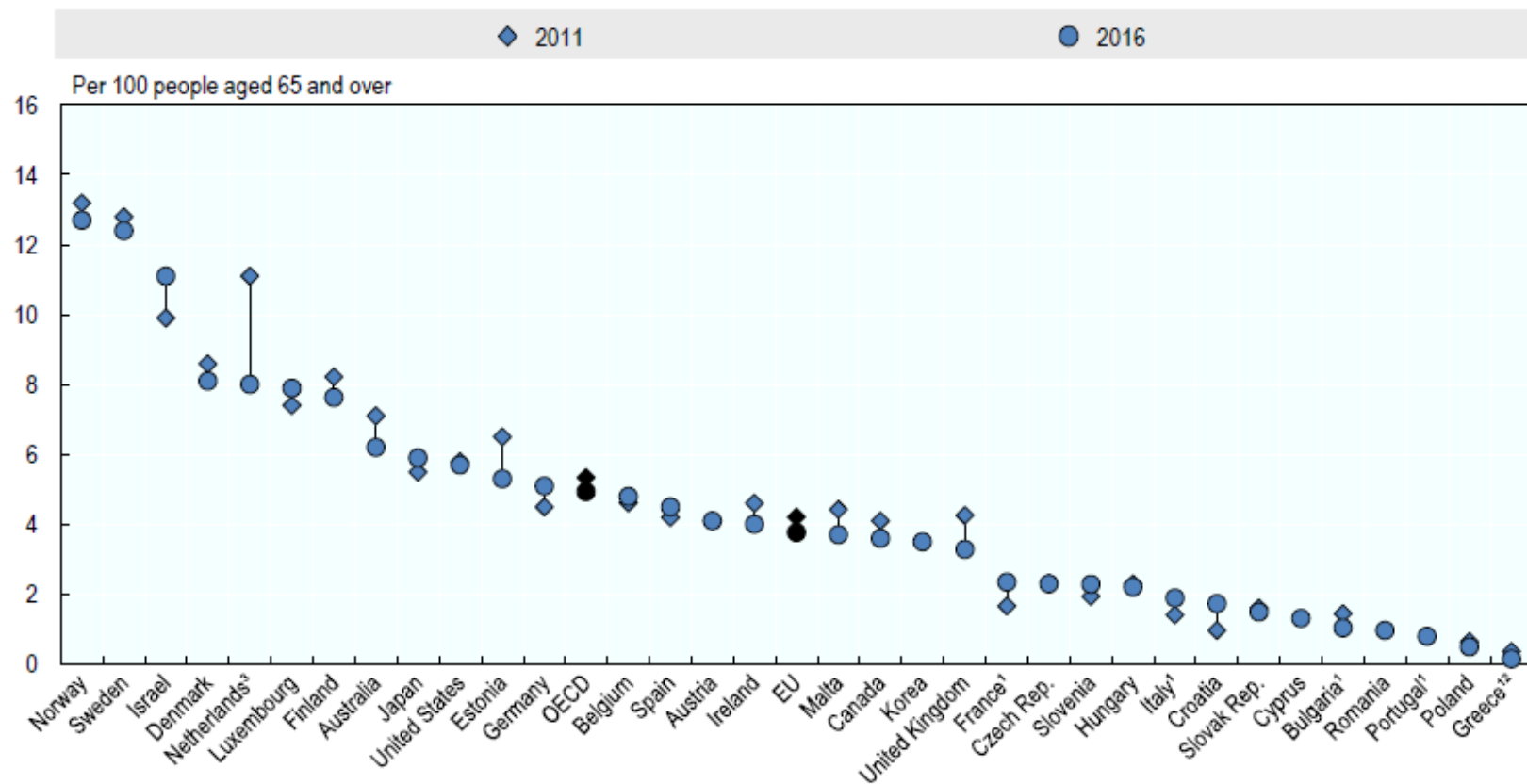


## The institutional infrastructure for quality assurance (selected countries)

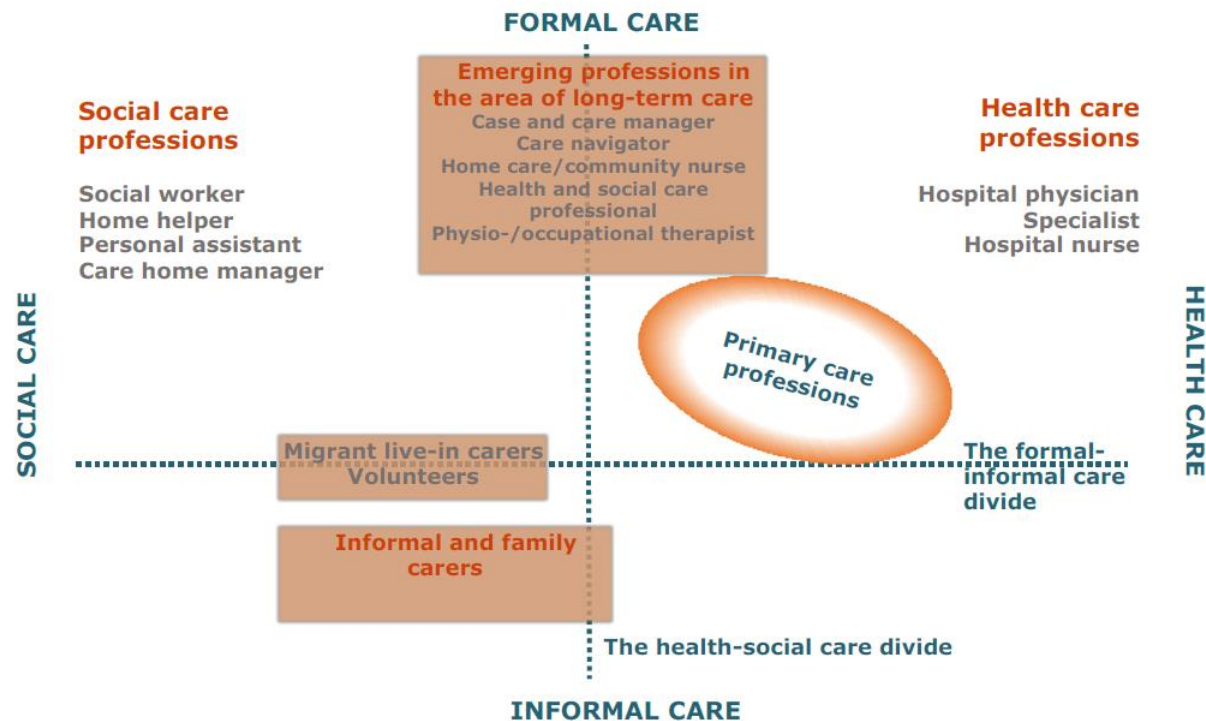
Country	Quality assurance polities/policies (institutional context, responsibilities)	Instruments/methods of quality assurance applied
<b>Germany</b>	Federal level (Ministry of Health; long-term care insurance): open market access; supervision (Medical Board of Health Insurances - MDK) Regional governments: supervision	Public authorities (MDK): Accreditation criteria (structures and processes); yearly inspection based on 'transparency criteria' (outcome-oriented) developed in cooperation with providers; public reporting (this procedure has been waived and is currently under development) Regional governments: Inspection of structural criteria (care homes) Providers: various types of internal quality management systems Informal care: one visit by a home care professional every 6 months with recipients of the LTC cash benefit
<b>Italy</b>	National: Ministry of Health and Social Policy: framework legislation Regional governments: regulation and supervision	Public authorities (Regions, regional agencies): authorisation and accreditation (structural and process indicators; clinical governance); service charter; inspection Providers: voluntary certification of quality
<b>Netherlands</b>	Ministry of Health, Welfare and Sport: framework legislation Health Inspectorate: regulation and supervision	Public authorities (Health Inspectorate): New Quality Framework for Care Homes with two sets of indicators (Quality & Safety; Framework Conditions) Purchasers: quality indicators and measures as requirement for funding Providers: certification, various types of internal quality management systems

## Ensuring a quantitatively and qualitatively adequate LTC workforce

Number of LTC workers per 100 individuals aged 65 and over, in 2011 and 2016 (or nearest year)



## The range of LTC workers across the health/social care and formal/informal divides



Source: Ilinca et al., 2018: 616.



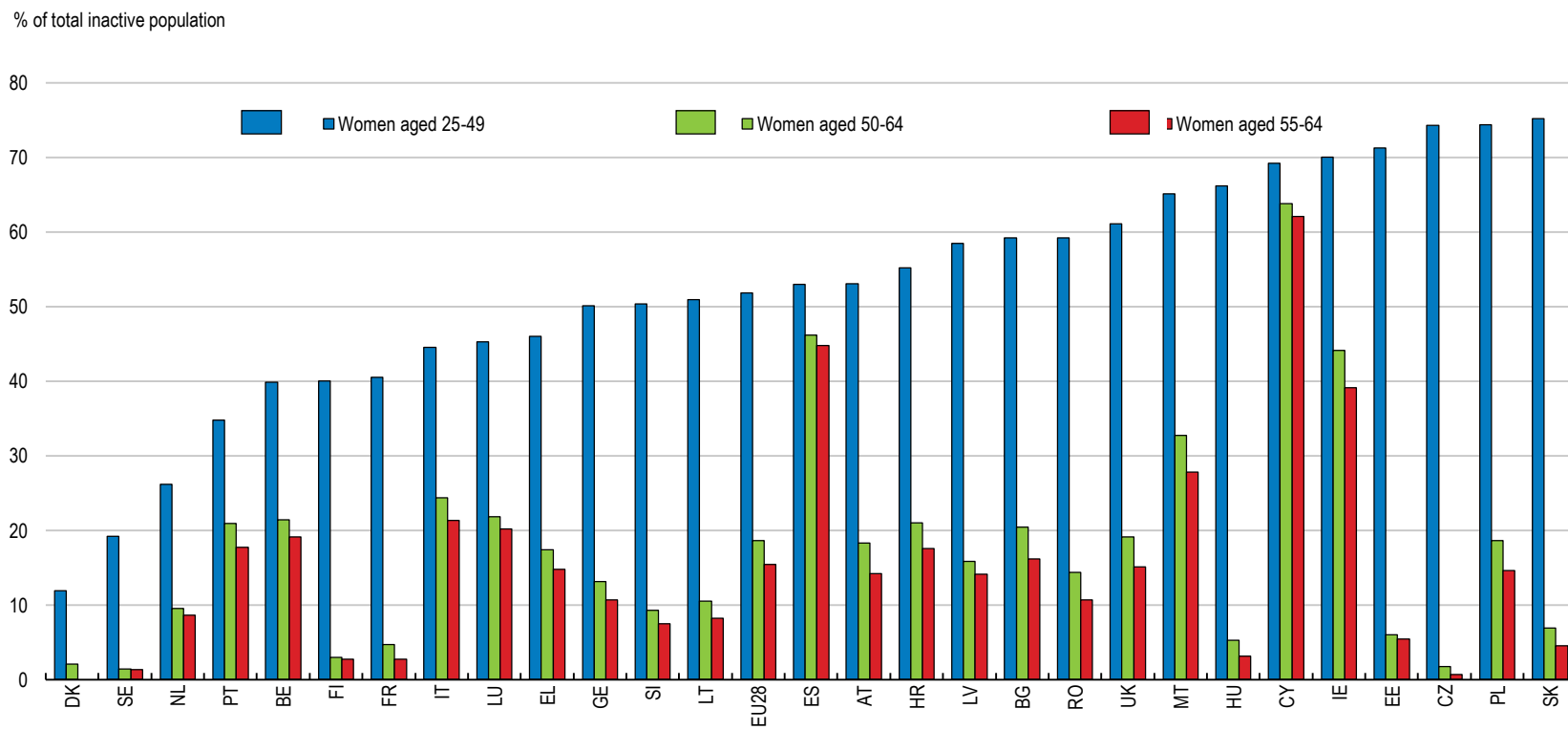
## Informal carers („the invisible social welfare scheme“)

- *Employment challenge of a different kind: reconciling caring responsibilities and paid work*
  - *Gendered issue*
  - *Labour market: Reduce volume of work (part-time) or drop out completely*
  - *Implications for incomes, careers, accrual of social protection entitlements, income / poverty in old age*
- 
- ***Availability of formal care***
  - ***Support for informal carers***

## Informal care

### ‘The invisible social welfare scheme’

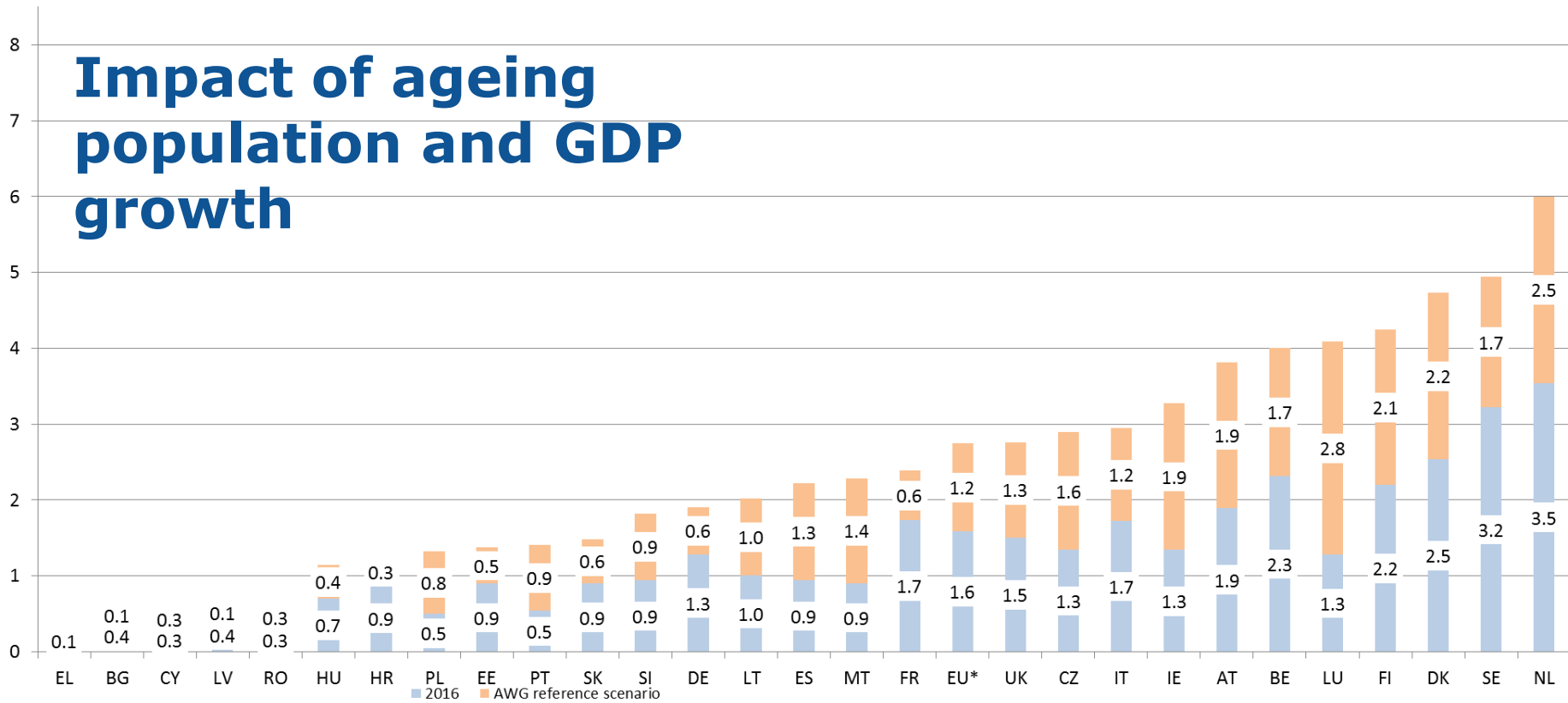
Women inactivity due to caring responsibilities (in % of total inactivity), 2017



Eurostat, Labour Force Survey (Note: Women aged 55-64: no data for DK)

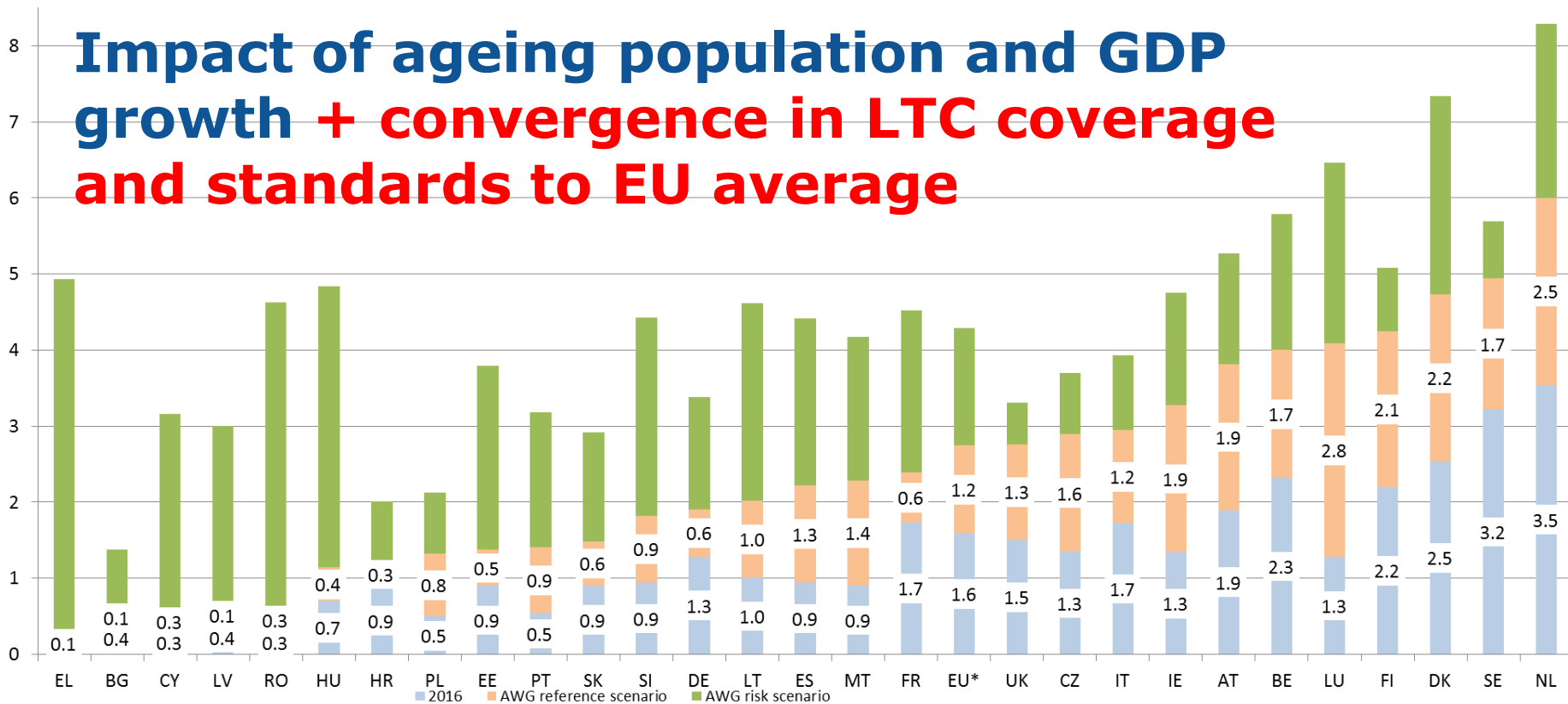
## Ageing Report 2018 – Projections 2016-2070 (Base scenario)

### Impact of ageing population and GDP growth



## Ageing Report 2018 – Projections 2016-2070 – AWG Risk Scenario

**Impact of ageing population and GDP growth + convergence in LTC coverage and standards to EU average**



# Outline

*1) LTC in the EU – landscape and challenges*

***2) Policy framework and responses***

## 2017 European Pillar of Social Rights

Principle 18 on LTC care:

*"Everyone has the right to affordable long-term care services of good quality, in particular home-care and community-based services."*

Principle 9 on Work-life balance:

*"Parents and people with caring responsibilities have the right to suitable leave, flexible working arrangements and access to care services. Women and men shall have equal access to special leaves of absence in order to fulfil their caring responsibilities and be encouraged to use them in a balanced way."*



- **Employment Guidelines**

"Member States should improve the quality, accessibility, efficiency and effectiveness of health and long-term care systems, while safeguarding sustainability."

- **Annual Growth Survey 2018**

"Reforms of health care and long-term care systems need to be pursued to enhance their cost-effectiveness, ensure their fiscal sustainability and ensure quality, affordable access."

- **Joint Employment Report 2018**

"Equal and timely access to quality health and long term care, as well as effective health promotion and disease prevention, are key to foster a healthy and active population and achieve economic prosperity. [...] Moreover, the sufficient provision of formal accessible, high-quality and sustainable long-term care services remains a challenge in several Member States."



## LTC in the country reports (CR)

*The topic is mentioned in 24 country reports  
Depending on the maturity and the set-up of LTC  
systems, CR deal with*

- **Increasing demand due to ageing**
- **Need for a comprehensive policy framework**
- **Access to LTC (waiting lists)**
- **Lack of workforce / role of informal care**
- **Need for better integration of services**
- **Role of homecare and community-based services**

## Country-specific Recommendations on LTC (2019)

AT	Ensure the sustainability of the health, long-term care, and pension systems, including by adjusting the statutory retirement age in view of expected gains in life expectancy.
BE	Continue reforms to ensure the fiscal sustainability of the long-term care and pension systems
FI	Improve the cost-effectiveness of and equal access to social and healthcare services.
IT	Support women's participation in the labour market through a comprehensive strategy, including through access to quality childcare and long-term care.
PL	Take steps to increase labour market participation, including by improving access to childcare and long-term care
SK	Enhance access to affordable and quality childcare and long-term care.
SI	Adopt and implement reforms in healthcare and long-term care that ensure quality, accessibility and long-term fiscal sustainability.

# Ongoing and upcoming work

- ❑ Building a knowledge base
- ❑ Funding / promoting innovation (Social Innovation Call 2019)
- ❑ Agreeing a portfolio of LTC indicators with the Member States (*access & affordability, quality, sustainability*)
  
- ❑ Green paper on Ageing
- ❑ EC-SPC report on LTC 2021

***Thank you for your attention!***

# ***Background slides***

## Long-term care (LTC)

*range of **services and assistance** for persons who, as a result of mental and/or physical frailty and/or disability over an **extended period of time**, are dependent on help with **basic activities of daily living** (ADLs) and/or **instrumental activities of daily living** (IADLs) and/or in need of some permanent **nursing care**.*

**ADLs:** *Activities of Daily Living are self-care activities that a person must perform every day such as bathing, dressing, eating, getting in and out of bed or a chair, moving around, using the toilet, and controlling bladder and bowel functions.*

**IADLs:** *Instrumental activities of daily living are activities related to independent living and include preparing meals, managing money, shopping for groceries or personal items, performing light or heavy housework, and using a telephone.*

## Policy advice

### Introduce/expand **Proactive**

- **Prevent** dependency through better *prevention*, early *detection* of frailty rehabilitation, *re-enablement*, use of technology and *age-friendly* environment

### **Improve** reactive

- Move away from institutional care **to home** care services and other alternative forms (day care centres)
- Better **integrate** health and social care services
- Monitoring and assurance of **quality** (quality guidelines, monitoring systems)
- Better support services to **informal** carers (training, respite care etc.)

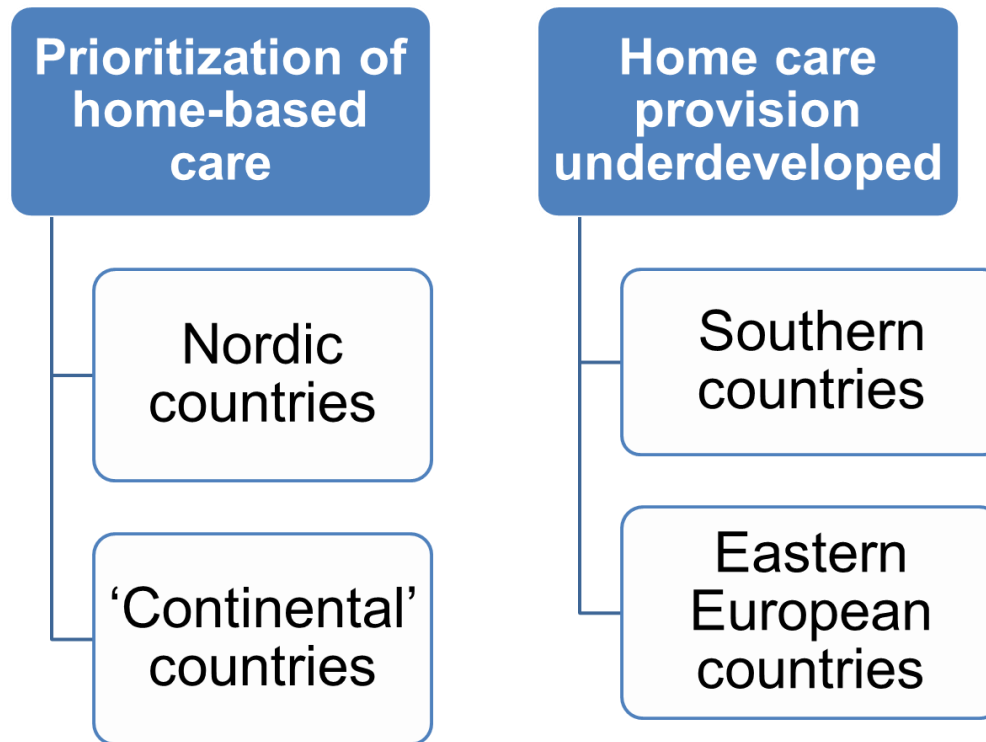
# Types of services & assistance



## Prioritisation of home-based care ?

- A clear **split** between European countries:
  - ✓ Home and community-based services most developed in all the Nordic countries (DK, FI, SE) and some 'Continental' countries (e.g. BE, DE, FR)
  - ✓ Insufficient availability of home care provision in Southern (e.g. CY, EL, ES, MT, PT) and especially Eastern European countries (e.g. BG, CZ, EE, LV, LT, PL, RO, SI, SK) but also underdeveloped residential care (e.g. BG, EE, EL, HR, HU, PL, RO)

# Models of LTC in the EU





## Informal care

### **‘The invisible social welfare scheme’**

- Spouses and children of the care-dependent person
  - Women
  - Neighbours and voluntary organisations
- High incidence in most of the countries (e.g. AT, BE, CY, CZ, EE, EL, ES, HU, HR, IE, IT, LT, LV, PL, SE, SI, SK, UK)
- Family responsibilities for children and parents are enshrined in law (e.g. HU, LV, LT)