

## Newsletter Summer 2020

# "A devastating blow in residential care for elderly in Europe"



The group of people identified as the most at risk for COVID-19 in all countries of the world were the elderly. Seniors are the largest target group of social services - homes for the elderly, care services, respite care, day care and other types of services. And it was these services, their clients and employees that faced the greatest pressure. It was a test that they had never faced in their existence up to now. How did the global pandemic affect social services in Europe?

The European Surveillance System (TESSy) showed an increased number of hospitalized people over the age of 50 with a significantly higher proportion of people over the age of 65. According to TESSy, the total number of deaths from the COVID-19 viral disease was 44% in the age group of 65-79 and 46% in the age group of people who were over 80. The London School of Economics and Political Science

The London School of Economics and Political Science conducted a mortality survey in care and nursing homes in a total of ten countries (Australia, Belgium, Canada, France, srael, Italy, Norway, Portugal, Singapore, Spain and the United

Germany, Hungary, Ireland, Israel, Italy, Norway, Portugal, Singapore, Spain and the United Kingdom). What were the results of this survey? In the countries studied, the proportion of coronavirus-related deaths in the elderly (65+) ranged from 19-72% in care and nursing homes. Compared to these countries, the percentage in the Czech Republic is "only" 24%.

In the Czech Republic, the first unconfirmed cases of a COVID-19 positive client appeared in nursing homes in February. The first confirmed case was then proven on 18th March. Three weeks later, twenty facilities reported infected clients. The total number of infected quickly exceeded 200. Eventually, this number later peaked - over 300 confirmed cases occurred and more than 40 people died.

Yet we were one of the more fortunate countries. In May, France reported infected elderly people in 4,367 care and nursing homes. Germany reports 22,071 elderly infected with coronavirus in care and nursing homes and similar facilities. Belgium states that from the total number of 9,052 COVID-19 that are fatally infected, 51% are from long-term care providers. Spain also reported 17,730 cases from a total of 5,400 care and nursing homes in May which represents 66% of all fatal cases.

#### "The biggest problems and mistakes were that they forgot about us!"

The whole period of the crisis was marked by a lack of information. There was a lack of information, recommended procedures, innovative solutions, preventive procedures, etc. Every health or social service provider tried to obtain the necessary information. The lack only proved how unprepared we were.

Professional associations, professional societies and individual providers communicated together intensively not only within Europe but also around the world. The European Ageing Network (E.A.N.), as well as the Global Ageing Network (G.A.N.) held regular online meetings with two main goals. The first was to find out the real situation in other countries and thus be able to better anticipate developments in their own country. And the second, more importantly, was to get information about possible solutions, ideas and approaches.

However, these meetings had another key reason. To discover and identify any possible mistakes and bad decisions or mistakes that had taken place in individual countries. Some of these were heard again and again - lack of protective equipment, hospitalization of all infected, and thus congestion and collapse of the health system, underestimation of the whole situation, etc.

However, one mistake was repeated in all participating countries independently from each other. In Spain, France, Austria, Switzerland, the Netherlands, Portugal, but also in Australia, Africa, America, Canada or Slovakia and the Czech Republic. What was the mistake? What was the lament of all countries from social service providers, old people's homes, care services, long-term care facilities and others around the world? "They forgot about us - we were left behind!" It was too late for the governments of the countries (central or regional) to remember that in addition to hospitals and health care, there was a social services system that looked after and cared for the most vulnerable group of seniors.

This situation is special and significant at the same time. How is it possible that the social sector has been forgotten all over the world? Does it have a common explanation? Yes, it does. It has been forgotten because it has previously been "invisible" to these national governments and even to the European Commission.

And what is the "European evidence" of neglect of the social care sector? Here are three examples:

- The European Commission, or more precisely its chairman, Ursula von der Leyen, set up a Coronavirus Response Team to try to solve the impact of the pandemic on Europe besides other things. But, the Commissioner for Social Affairs, Nicolas Schmit, remained on the doorstep. He is not represented at all in this "rescue team".
- The European Commission has launched a rescue investment fund to mitigate the effects of the coronavirus crisis - Coronavirus Response Investment Initiative Plus - in the amount of up to 37 billions Euros. However, the possibility of using social services is still zero.
- Although social services are a key sector in Europe with 5% of all employees specifically over 11 million workers, the European Commission is reluctant to allow the establishment of a European Social Dialogue Committee in social services.

Every crisis and every mistake is an opportunity for change, a lesson that will lead to greater preparedness if a similar situation occurs again. If we talk about using the opportunity for positive change, I certainly do not mean the cries in the media of pseudo-experts presenting confident opinions about what should have been done differently or putting down proposals without deeper reflection and consideration. One of them also appeared in the Czech Republic. Due to the fact that 25% of all deaths of elderly in the Czech Republic were in nursing homes, he was considering whether or not these facilities should be abolished in the future. We know that 90% of all deaths are amongst people over 65. We know that the average age in care and nursing homes in Europe is around 85. Age and chronic diseases are the common denominator which means that the people in care and nursing homes are the ones at risk. By this logic, we could conclude that because two-thirds of people die in hospitals, we should solve this "problem" by abolishing them.

On the contrary, without a doubt, using the opportunity is rational consideration such as a rapid global survey intended by European and World assocations. On the basis of its results, there will be concrete proposals for measures that will lead to greater preparedness for something that no one expected at such speed and intensity and that could have not even been prepared for and similar crisis situations as we experienced with COVID 19. Finally, let me emphasize one more aspect of the opportunity we have or will have after overcoming the current crisis. That is the potential of our teams across professions. Obviously, even bold goals can be achieved with people who, in the most difficult moments, willingly sought solutions and used all their strength wherever necessary. And for that, I thank our teams.

#### Ing. Jiří Horecký, Ph.D., MBA

European Ageing Network president Federation of European Social Employers vice-president

#### What EAN has done to raise awareness...

COVID-19 came not only to the care sector like an avalanche. The speed and the impact were overwhelming yet the care sector passed the biggest "test" and secured care for the elderly across the globe trying to protect both seniors and all care staff and other employees working in the aged care sector.

## Joint statements on "sore spots" in LTC

The COVID-crisis has shown the "sore spots" in long term care. CURAVIVA Switzerland launched an international discussion to identify the issues and to initiate a discussion promoting answers solutions. This document and and initiative were co-created together with Ageing Network, European Global Network, Ageing CommonAge and key international Leading Age as stakeholders in long term care for elderly.

Short overarching statements are provided which describe the biggest problems, weaknesses and threats that recent Coronavirus crisis the has opened, showed and/or accented. The goal of this document and action is to open public discussion. Discussion with central and regional governments, with regulators, with the donators and with other stakeholders. It's here for national umbrella associations, expert societies or for everyday care providers to use it.

Feel free to translate it to your languages, to add it, modify or to choose just some of the statements. It supposed to support and encourage you for changing things and for opening taboos that have always been here in elderly care but have been highlighted over global recent months during the pandemic.

The statements can be found here.

### We expect recognition, urgency and resilience

EAN, together with social services partners urge the European institutions to maximise the potential of the Recovery Plan to strengthen resilience and recovery through guaranteed budget allocations to social service provision in existing proposals.

- Social Services provide essential care and support to millions of people in Europe, helping older persons, persons with disabilities, children and young people at risk, people at risk of poverty, homeless persons, migrants, people suffering from domestic violence, and many others to live better, healthier, longer and more active lives. And they help people to enjoy their human rights.
- Social Services provide essential help to family or other carers, contributing to their employment and work-life balance opportunities. And they are extremely important to tackling gender inequalities.
- Social Services are also essential to Europe's social market economy. They help to create meaningful employment for 11 million workers, 5% of the total EU workforce, and with an increase of 24% in the last ten years.1 The contribution of millions of volunteers across Europe can also not be ignored, especially f rom the perspective of social cohesion.

The position paper can be found <u>here</u>.

## Social services providers call for stronger EU commitment to ensure resilience of the sector

On 25 June 2020, EAN and the entire social services sector came together at European level to call the European Union to strengthen recognition, urgency and resilience in social services during the COVID-19 pandemic and the recovery. The Online Summit was also the opportunity for the sector to engage with high level European policy and thought leaders: the Vice President of the European Parliament Dimitrios Papadimoulis, the Vice President of the European Commission Dubravka Šuica, Member of European Parliament Dragoş Pîslaru and University Professor Frank Vandenbroucke. The summit was supported by an ongoing social media campaign.

Twelve partners representing different dimensions to the social services sector at European level organised the online summit "Social Services & COVID19: what role for EU?," viewed by over 2,000 people across different platforms.

Social services is a sector employing over 11 million professionals, primarily in not-for-profit or public services, who provide care and support to millions of people with disabilities, older persons, children, people at risk of poverty and exclusion and many more.

The Vice President of the European Commission, Dubravka Suica, stated that "social services are under particular strain and the European Commission is committed to help"; listing their ongoing exchanges on how to best support the sector and the actions the European Union is taking in response to COVID19, including the Coronavirus Response Investment Initiative.

EAN, together with its social services sector partners now work on the establishment of a more permanent and structured way of meeting with EU officials. A start will be made after the summer break.

# European elderly care providers faced to extra costs due to COVID pandemic

There is general consent that costs have increased not only for the usual supplies but also because of additional measures taken to protect residents and staff. New regulations and increased administration have also pushed up unplanned spending. Availability of masks and PPE has been a massive issue, particularly at the beginning of the crisis. As well as these increased costs, the major concern is the difficulty to attract new residents and the financial loss caused by empty beds.

ERA Healthcare Solutions has published a report about extra costs of COVID for elderly care providers and has been supporting the global care home sector for many years with best practice optimisation processes. The report identifies that all care homes (large or small, local authority or privately funded) have incurred significant additional costs during the last months and will continue to do so. They need to urgently find extra financial resources in the near future, without impacting the quality of services.

The full ERA report can be found here.

# Why was residential care for older people so badly affected by COVID?



The Observatoire Social Europeen has published a new opinion paper about COVID and the elderly care sector. In many countries, residential care for older people was not prepared for a public health crisis: although it was very clear that frail older people were most vulnerable to COVID-19, these places, with the highest concentration of this population, did not have the necessary resources, had no plan, and too late. As a consequence, the percentage of care home eaths ranges from 24% in Hungary to 82% in Canada. The

became the focus of attention too late. As a consequence, the percentage of care home residents as a share of total deaths ranges from 24% in Hungary to 82% in Canada. The authors of this opinion paper argue that this is tragic evidence of how ageism taints the approach to care. The paper discusses what happened in residential care, why it happened, and what should be done.

The OSE opinion paper can be found here.

**Demography on the European agenda** 

Both the European Parliament and the European Committee of the Regions are preparing their own reports and opinions on issues that are related to demography.

The coronavirus epidemic also has an impact on demography. Covid-19 has caused many deaths of elderly people. Certain EU regions have been affected more than others from the spread of the coronavirus. Studies suggest that coronavirus has a considerable impact on EU



**European Parliament** 

coronavirus has a considerable impact on EU population trends, such as number of deaths per country, reduction of life expectancy and family planning.

The EU faces a number of demographic challenges such as ageing, a declining birth rate and depopulation in some of its regions. The EU represents an ever-shrinking proportion of the world population, at just 6.9 % today (down from 13.5 % in 1960), and is projected to fall further to just 4.1 % by the end of this century. This is explained by the low fertility rates as the numbers of children being born has fallen from an EU-28 average of around 2.5 children per woman in 1960, to a little under 1.6 today. This is far below the 2.1 births per woman considered necessary to maintain a stable population in the long term. Ageing is also another population trend in the EU. Due to advances in medicine and quality of life, the average life expectancy the

EU has increased considerably and now stands at about 81 years on average.

#### **Demography matters** The economy, labour market, healthcare, pensions, regional development, and election results – all are driven by demography. EU Member States have their own strategies and policies in order to counteract demographic decline. The EU also has an auxiliary role when it comes to tackling demographic challenges. Nevertheless, the EU has limited legal powers when it comes to dealing with issues that are related to demography.

You can find the full briefing <u>here</u>.

### Lares celebrates XVII Virtual Convention: Forecast and situation in the face of the COVID-19 crisis in nursing homes



On June 23 and 24, the Social Lares Group hosted its XVII Convention, for the first time in a virtual format due to the current health crisis. More than 300 experts and professionals from the residential care sector from Italy, Czech Republic, Netherlands, Australia, and Spain, shared analysis and reflections on the present and future aspects generated by the coronavirus crisis in senior centers. The meeting demonstrated the fundamental role of the Third Sector of Social Action for the future, as it has been during the pandemic.

The meeting opened by Juan Ignacio Vela, National President of Lares/ Spain and Jiri Horecky, President of the European Network on Aging (EAN), highlighted the impact of COVID-19 in nursing homes and the challenges it faces in the care sector after this pandemic. The diagnosis of the situation, at the national and international level, has reflected the discrimination suffered by the Third Sector of Social Action during this crisis, which has affected, especially, the elderly.

Given the lack of foresight on the part of the Public Administration, non-profit Third Sector entities have been an example of commitment and solidarity towards the most vulnerable. Our goal is to take good care of the elderly and dependent people every day better. But we can't do it without the necessary tools. We are PEOPLE who care of PEOPLE. Aad Koster, Vice President of the European Ageing Network highlighted the work of professionals who, throughout the crisis, "have worked tirelessly to offer the best care to residents". The exemplary involvement of volunteers and family members has demonstrated the implicit solidarity in the residential sector, often forgotten by the Public Administrations. The pandemic has caused a social, health, and economic crisis. Faced with this difficulty, nonprofit organizations have imposed solidarity as a response to keep the care of people intact.

# Who Cares? Attracting and Retaining Care Workers for the Elderly



A new OECD report presents the most up-to-date and comprehensive cross-country assessment of long-term care (LTC) workers, the tasks they perform and the policies to address shortages in OECD countries. It highlights the importance of improving working conditions in the sector and making care work more attractive and shows that there is space to increase productivity by enhancing the use of technology, providing a better use of skills and investing in prevention. Population ageing has outpaced the growth of workers in the long-term care (LTC) sector and the sector struggles with attracting and retaining enough workers to care for those dependent on others for care.

Non-standard work is widespread, pay levels tend to be lower than similar-qualification jobs in other health sectors, and LTC workers experience more health problems than other health workers. Further, educational requirements tend to be insufficient to perform more demanding and growing tasks of LTC. With growing demand for care at home, better co-ordination between the health and long-term care sectors and between formal and informal careers is needed.

You can find the full report here.

### QueerAltern and city of Zurich to start project for LGTBI+ seniors, to open in 2025

QueerAltern, the Swiss association for LGTBI+ in lederly care, and the city of Zurich are co-operating in the creation of a dedicated 20 appartment residency in Espenhof-Nord.

"We hope this prioneer project will stimulate conventional care facilities to rethink their operations", says Barbara Bosshard, QueerAltern's president. The new facility is expeted to be opened by 2025.







www.securehospitals.eu

### Upcoming conferences and meetings

### September 2020

• **4 Sept** Session Working group Nutrition in elderly care (Prague, CZ)

### November 2020

 16-17 Nov EAN General Assembly & Executive Board meetings (Lisbon, PT)

### October 2021

- **11-13 Oct** Alzheimer Europe Conference (Helsinki, FI)
- 27-29 Oct
  EAN Conference and LARES Congres (Alicante, ES)

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