CURRENT LTC WORKFORCE CHALLENGES AND POLICY RESPONSES

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Impact on LTC mortality of COVID-19

- 92% of COVID-19 deaths were among those aged 60/65+, with just over half of these deaths among those aged 80/85+
- The share of LTC deaths reached about 50% or more of all COVID-19 deaths in Belgium, France, Ireland and Sweden
- The LTC death rate per million people aged over 80 was about 5 600 on average, and ranged from almost 1 000 deaths to 14 000 deaths

Note: Data on cumulative deaths up to May (between May 6 and 25, depending on the country). Reporting of countries not fully comparable due to different testing, reporting and coding standards. LTC deaths cover confirmed deaths, except in the UK (England, Wales and Scotland), where they include both confirmed and suspected deaths. Unless otherwise stated, deaths among LTC residents include both deaths that occur within LTC facilities and elsewhere (e.g. hospitals and homes).

1. Deaths among LTC residents include only deaths within LTC facilities (for the UK, this is for Scotland only), resulting in an under-estimation.
2. Data cover only about 52% of LTC facilities, resulting in an underestimation.

Source: Comas-Herrera, A. et al (https://ltccovid.org), Eurostat Database, complemented with Canadian Institute for Health Information for Italy.
CURRENT LTC WORKFORCE CHALLENGES
In over three-quarters of OECD countries growth in LTC workers per 100 elderly people has stagnated or decreased

Note: The OECD data point is the unweighted average of the 28 OECD countries shown in the chart. EU-Labour Force Survey data are based on specific 4-digit codes of the international standard classification of occupations (ISCO) and the 2-digit codes of the classification of economic activities (NACE).
1. Data are based on ISCO 3-digit and NACE 2-digit codes. 2. Data must be interpreted with caution, as sample sizes are small. 3. The decrease in the Netherlands is partly due to a methodological break in 2012 as well as reforms. 4. Data refer only to the public sector in Sweden.
Source: EU-Labour Force Survey and OECD Health Statistics 2018, with the exception of the Quarterly Labour Force Survey for the United Kingdom and ASEC-CPS for the United States; Eurostat Database for population demographics (data refer to 2011 and 2016 or nearest year).
Poor working conditions are common

Low pay predominates. LTC workers (nurses and personal carers) receive EUR 9 per hour (median wage), compared to EUR 14 for workers in the same occupation in the hospital sector.

Part-time employment in LTC is twice the average OECD rate.

The average tenure is two-year lower in LTC than in the overall workforce.

Migrant workers are important in many countries.
Most are women in low-skilled jobs with low entry requirements

Across OECD countries:
- Over 90% of LTC workers are women
- Over 70% of LTC workers are personal carers

LTC workers’ minimum education requirements

<table>
<thead>
<tr>
<th>Personal care workers</th>
<th>Nurses in the LTC sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>No minimum education level</td>
<td>High school diploma</td>
</tr>
<tr>
<td>12 countries</td>
<td>1 country</td>
</tr>
<tr>
<td>Primary or intermediate vocational training</td>
<td>Technical degree after high school</td>
</tr>
<tr>
<td>4 countries</td>
<td>9 countries</td>
</tr>
<tr>
<td>High school diploma</td>
<td>Intermediate vocational training</td>
</tr>
<tr>
<td>3 countries</td>
<td>1 country</td>
</tr>
<tr>
<td>Technical degree after high school</td>
<td>Bachelor’s degree</td>
</tr>
<tr>
<td>4 countries</td>
<td>12 countries</td>
</tr>
<tr>
<td>Other (40 hours of training in Lithuania, basic knowledge of Greek language in Cyprus, caregiver course/training in Croatia, training for nursing assistants meets varies across federal states in Germany)</td>
<td></td>
</tr>
</tbody>
</table>

Note: Data are the unweighted averages of the country-specific shares in 19 OECD countries.
Source: EU-Labour Force Survey and OECD Health Statistics 2018 (data refer to 2016 or nearest year).
Numerous physical and mental risk factors at work can lead to health problems and accidents

Across OECD countries:
• Over 15% of LTC workers report work-related health problems
• Almost 65% of LTC workers experience physical risk factors
• Over 45% of LTC workers report exposure to mental well-being risk factors

Note: Data refer to the unweighted averages of 21, 23, 19, 18 OECD countries for accidents at work, work-related health problems, exposure to physical risk factors and exposure to mental risk factors. Mental well-being risk factors cover severe time pressure or overload of work, violence or threat of violence, harassment or bullying. Physical risk factors cover difficult work postures or work movements, handling of heavy loads, noise or strong vibration, chemicals, dust, fumes, smoke or gases, strong visual concentration and risk of accidents.
Source: Ad hoc module EU-Labour Force Survey (data refer to 2013); Survey on Long-term Care Workers for Japan.
LTC systems have aimed to contain the spread of infection, but challenged continuity of care

Overview of policy measures implemented in some European countries:

<table>
<thead>
<tr>
<th>Policy Measure</th>
<th>Countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restrictions within facilities (restricted visits, isolation measures)</td>
<td>AT, BE, CZ, DE, DK, EL, ES, FI, FR, HU, IE, IT, NL, PL, PT, SI, UK</td>
</tr>
<tr>
<td>Improve access to PPE (funding or direct distribution)</td>
<td>BE, CH, CZ, DE, DK, EL, ES, FR, HU, IE, LT, LU, LV, SE, SI, UK</td>
</tr>
<tr>
<td>Expanded telehealth services</td>
<td>AT, BE, CH, CZ, EE, EL, FI, FR, IE, IT, PL, SK, UK</td>
</tr>
<tr>
<td>Prioritised testing of care home residents and staff</td>
<td>AT, BE, DE, DK, FR, HU, IT, LT, NL, PT, SI, UK</td>
</tr>
<tr>
<td>Boosting staff numbers (funding or staff redeployment)</td>
<td>AT, DE, ES, FR, HU, IE, IT, LV, NL, SI, UK</td>
</tr>
</tbody>
</table>

Note: For countries not mentioned, this may reflect insufficient information from the sources used below.
Policy responses about LTC workers

• Ensuring access to PPE
• Recruiting additional staff
• Awarding bonus to LTC workers
• Supporting LTC workers’ families
• Providing psychological support
Moving forward: avenues to develop the LTC workforce

1. Increase recruitment
2. Improve retention
3. Improve productivity to do more with the same amount of staff
4. Improve coordination and prevention
### About COVID-19

2. Beyond containment: Health systems responses to COVID-19 in the OECD
3. Workforce and Safety in Long-Term Care during the COVID-19 pandemic
4. Treatments and a vaccine for COVID-19
5. Testing for COVID-19: A way to lift confinement restrictions
6. Contribution of migrant doctors and nurses to tackling COVID-19 crisis in OECD countries

### About long-term care

1. Workforce and Safety in Long-Term Care during the COVID-19 pandemic
2. Who Cares? Attracting and Retaining Care Workers for the Elderly
3. The effectiveness of social protection for long-term care in old age
4. Assessing the comparability of LTC spending estimates under the Joint Health Accounts Questionnaire (technical paper)
5. LTC & COVID-19 (paper released around end 2021)