Webinar, 5 July 2021

Taking stock of Covid-19 and the Long-Term Care sector in Germany

Where to from here?
How the COVID-19 pandemic amplified some of the structural challenges of Germany’s home care sector

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How is the home care setting structured?

**Long-term care insurance (SGB XI)**

- Need-of-care assessment
  - Mainly ADL-related services
  - Fixed allowance according to one of five levels of care (max 1.995 €)

**Health insurance (SGB V)**

- Doctor’s prescription
  - Treatment related, e.g.
    - Wound care
    - Therapies
    - ADL-assistance if indicated to avoid hospital admission

**Users as purchasers / user payments**

- User co-payments
- Any other services not covered
- Services exceeding the allowance granted
Recipients of long-term care benefits (2019)

- 2.116.451 persons received cash benefits only → only informal care, provided by family etc.
- 982.604 persons used professional home care (nursing) services
- Provided by 14.688 service providers

(Statistisches Bundesamt 2019)
A fragmented system?

• Recent reforms added support services without proper integration with nursing and social services
• Voluntary integration (Genet et al. 2012) of home care services & primary care
• No involvement of the municipalities in planning and oversight
• Market-driven
Impact on health outcomes in the home care setting?

• **Users / carers**
  1.130 cases of SARS-CoV-2 / 433 hospitalised / 187 deceased

• **Staff**
  2.697 cases of SARS-CoV-2 / 80 hospitalised / 3 deceased

(True case numbers are likely (much?) higher)

(RKI, 2 July 2021)
During the first wave (Räker, Klauber, Schwinger 2021)

- Reduced use of professional home care (nursing) services
- Dramatically reduced availability and use of day care services
- Reduced use of other support services
- Carers perceived a loss of physical and emotional functioning in users
- Cares perceive increased stress and demand
Challenges due to the pandemic

- Increased need for user and family education & psycho-social support
- Increased need for prevention and health promotion
- Increased need for provider collaboration
- Linking of health care and social care in the home
Information needs and information supply

- Lack of information vs. information overload
- Rapidly changing information
- Inconsistent / conflicting information

- Distributed responsibilities in the system
- Regional variations
Home care as a policy priority?

- **Official policy tenet:**
  Home care is a priority and takes precedence over other forms of long-term care

- **User and provider perception:**
  Guidance and regulations for home care during the pandemic appear almost like an afterthought
Some possible conclusions

• Listen to service users! Listen more closely!
• Better data is needed to guide policy and practice
• Fund and prioritise user and family education as well as prevention and health promotion
• Better integration of multiprofessional primary care services
• What is the future of very small independent home care providers?
• Rethink information management and distribution of responsibilities
• Make home care a real priority – and dedicate policy and administrative ressources to it
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