THE LTC SECTOR THROUGH THE PANDEMIC

Challenges and policy responses across OECD countries

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A sizeable share of COVID-19 deaths has been in the long-term care sector

Note: Data on cumulative deaths up to early February 2021. 1. Includes confirmed and suspected deaths. 2. Only includes deaths occurring within LTC facilities. 3. Data come from regional governments using different methodologies, some including suspected deaths. 4. Includes deaths in nursing homes and social LTC facilities. Source: (Comas-Herrera et al., 2021), (ECDC, 2021), (OECD Questionnaire on COVID-19 in LTC).
Emergency preparedness in long-term care was insufficient.

Lack of testing hampered contact tracing, but countries took several measures

**Training**
In 13 countries, LTC facilities received training for staff on testing practices

**Mobile teams**
11 countries set up mobile teams to facilitate testing in the facilities

60% of OECD countries had policies to improve testing

**Funding**
In 10 countries, governments provided extra funding for testing

**Other measures**
Germany financed the Armed Forces to perform testing, Greece provided free rapid tests to LTC facilities
In a ranking from 1 (not an issue) to 5 (extremely challenging), countries defined access to PPE as 3.
Around March-April 2020, countries started to apply policies to ensure the provision of PPE. Most countries issued guidelines on the use of PPE in LTC around March 2020, some even earlier. All surveyed countries have also stockpiled PPEs in 2021. Most governments funded PPE.
Community living facilitated viral spread and isolation measures evolved over time

**Facility density and size**

*Higher facility density and size* were associated with *higher infection rates* based on studies from Canada and Spain.

**Visiting restrictions**

A number of countries initially *banned visitors* except for an emergency or end-of-life reason.

Visits often *resumed but with restrictions* on the numbers, frequency or conditions of access.

**Group activities**

Countries had to balance the minimization of the *risk of contagion* with the support of a *dignified everyday life* inside the facilities.
Care integration improved during the pandemic

Coordination with primary care

• Before the pandemic, only 10 OECD countries had guidelines or legislation on integration between LTC and primary care
• Since the pandemic, 8 more OECD countries introduced measures to foster multi-disciplinary teams, with the aim to integrate more primary care in LTC facilities (EE, CA, CO, FI, LV, LU, PT, SI)

Coordination with hospitals

• Since the pandemic, 7 countries introduced new guidelines on the integration of long-term care and care in hospital (BE, CO, EE, EL, FR, HU, NL)
Countries have also addressed the issue of staff shortages.

Thank you!

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https://www.oecd.org/els/health-systems/long-term-care.htm

Read our publication
COVID-19 in LTC: impact, policy responses and challenges
https://doi.org/10.1787/18152015

Further OECD work on LTC – check it out!