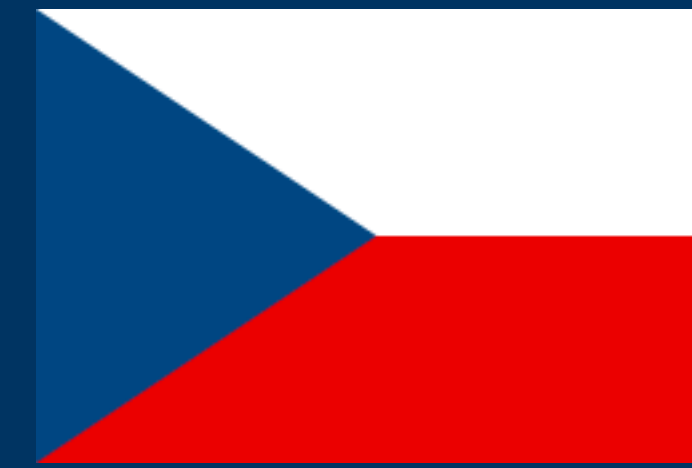


# Czech Republic



Lessons learnt from the pandemic in the LTC sector

Petr Wija, Dec 6, 2021

Institute for Social Policy and Research

# Czechia - Impact of covid-19 on the LTC

- Population 10.70 mil. One of the **highest cumulative death rate of covid in the world** - 312,794 (total deaths per 100.000 population) (Dec 3 2021);
- **Low share of deaths in care homes** compared to other countries (11 % of total deaths)<sup>(1)</sup> - lockdowns and strong support for measures during first wave, and high vaccination rate in care home during the current wave;
- One of the **longest lockdown in care homes** (“homes for seniors”) - 136 days (4.5 month) between March - Dec 2020 = **isolation** from family and social contacts; staff stayed in care homes together with their residents;
- **Low accessibility** of LTC services, especially **non-residential and home-based** and low support of family / **informal carers**;

# Czechia - Lessons Learnt

- One of the **lowest vaccination rates** in the EU (generally CEE countries);
- **Failed vaccination strategy and leadership**, strong impact of **desinformation campaigns** (tens of desinformation webs supported from Russia, facebook, etc.);
- Rising tensions, **polarisation, and aggression towards health workers** (in contrast to the first covid wave during March-May 2020); threats to politicians and medical representatives, role of media (unrepresentative “scientists”);
- Discussion about **obligatory vaccination** of people above 60 and health and social sector workers (police and army, medical students), following discussion in neighbouring Austria;
- More than 92 % care homes residents and 65 % employers vaccinated (08/2021)

# Czechia - LTC Reforms

- Need for **communication strategy** and formal **mechanisms of timely reaction and management**, cooperation, and **training** for emergencies;
- **Compliance and trust** are key for coping with crisis, emergency situations;
- **Plans** for specific services (care homes, home care and support, carers);
- Key role of **community, neighbours**, organisations, volunteers, etc.
- Shortages of **LTC workers**, preparedness for emergencies;
- **Under-financing** of LTC, **lack of support at home**, **diversifying** LTC services (care homes more risky than home / informal care); lack of capacities;
- Stronger **linkages between care and health** care / public health.