

**Lessons learnt from the pandemic in the LTC
sector and reforms that are being considered to
address the challenges**

France

LTC Covid conference, 6th December 2021

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OVERVIEW OF THE IMPACT OF COVID-19 ON THE LONG TERM CARE SYSTEM

People drawing on social care



- Impact on physical and mental health as a result of care breakdown & isolation
- Deaths:
 - Between March-July 2020 care home residents represented 48% of all Covid deaths
 - 26,935 deaths in care homes as of Dec 2021

Formal workforce



- High levels of staff sickness were recorded: between Mar-Nov 2020, 47,428 cases were recorded among care staff working in care homes, of which at least 17 died.
- Chronic workforce shortages further contributed to difficulties with providing care – and led to care staff taking on difficult tasks (e.g. end of life care).

Integration & parity with health



- Issues early in the pandemic with securing access to medical equipment & to health services (e.g. oxygen therapy)
- Limited number of named GPs in care homes
- Delays in guidance and access to PPE, especially in domiciliary care

LESSONS THAT NEED TO BE LEARNT IN THE LONG TERM CARE SYSTEM

- Parliamentary inquiries in late 2020 highlighted the extent of the deficiencies in the social care system that was long **overdue reform** (which had been long delayed).
- **Fragmentation** of the sector & complex **accountability** arrangements led to delays in providing guidance, support and access to key protective measures (e.g. PPE).
- Poor conditions for **staff** entering the pandemic, and limited support during, led to high numbers of shortages and – most staff were paid ‘Covid bonus’ of up to €1,500
- Some **learning** during the pandemic shows promise: mobile geriatric and palliative care teams, named GPs for long-term care facilities, improved relationships between care homes & domiciliary care services.

KEY REFORMS AND POLICY MEASURES

In 2020, a large sector-wide consultation was undertaken with key stakeholders in health and social care. This led to major structural investment & reforms including:

- Increased decision-making powers to regional structures & modernising local authority structures which provide support to older & disabled people → **improve transparency at decentralised level**
- Increased pay bands for domiciliary care (+13-15% based on experience); additional €183/month for care home staff, increased training places for nursing → **improve attractiveness of careers in care**
- Minimum tariff rate for home care of €22 per hour, with the potential to increase to €25/ph for providers committing to improvement (e.g. training staff, investment in infrastructure, innovation...) → **stabilise the sector and drive innovation**
- Major investment into care home infrastructure (€2.1bn over 5 years + €1.5bn over 4 years to transform care home models), with additional funds to develop IT infrastructure & digital health and care records → **build more resilient estates**

A fifth pillar of social security around 'autonomy & independence' is planned – although was delayed due to the pandemic.