

COVID-19 AND LONG-TERM CARE OVERVIEW OF THE ITALIAN EXPERIENCE

*International workshop on COVID-19 and Long-Term Care systems: What have we learnt
and what policies do we need to strengthen LTC systems?*

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December, 6th 2021



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Agenda

- The impact of the pandemic on the Italian LTC system
- The Covid-19 legacy for the LTC system
- What's next: Commissions and PNRR



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The impact of the pandemic on the Italian LTC system

1st wave (March – May, 2020)

- **No official administrative data** on the impact of the pandemic on the LTC system. Only a survey from MoH
- **Absence of coordination** with other care setting, **no prioritization** in the PPE supply
- **3,1% mortality rate** due to Covid-19 in nursing homes for older adults (data refer to a sample)
- **Large share of nurses and doctors left LTC settings to enter the NHS**, which was recruiting professionals to cope with the outbreak in hospitals



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June, 2020 – present (2nd; 3rd; 4rd waves)

- **Still no comprehensive national administrative data** on the impact of the pandemic
- **Guidelines** for the integration of LTC settings with specialized Covid-care centers
- **Prioritization** in the PPE supply for LTC settings
- Nursing homes residents and personnel **were among the first groups to receive the vaccine** in January, 2021.
- **No plan to increase LTC workforce**, the shortage of personnel keeps growing



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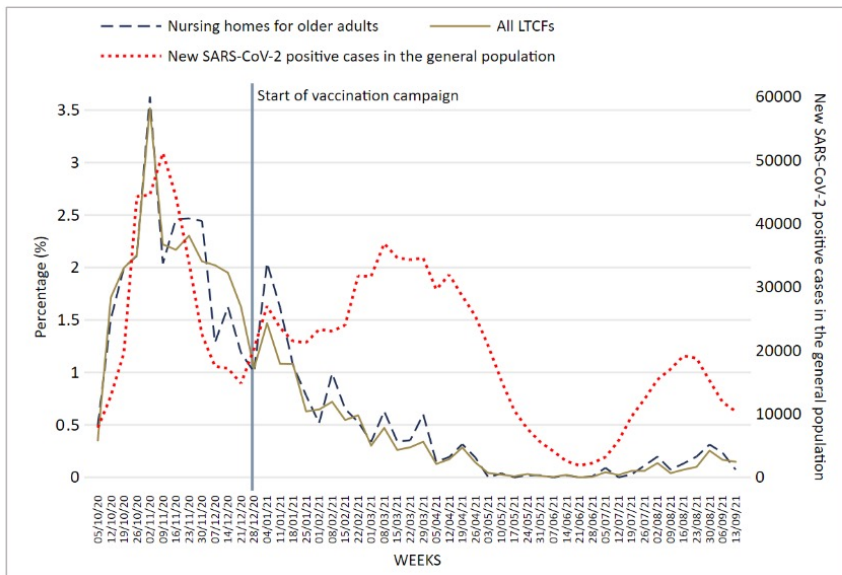
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New cases by weeks

October 2020 – September 2021

Figure 1. Weekly incidence of SARS-CoV-2 positive cases among LTCFs residents and in the general population of the Regions under surveillance in the period October 5th 2020 – September 19th 2021. (labels on the horizontal axis report the first day of each monitored week).



Source: Istituto Superiore di Sanità, 2021, *Surveillance of COVID-19 at Long-Term Care Facilities*
Data refer to a sample of LTC facilities



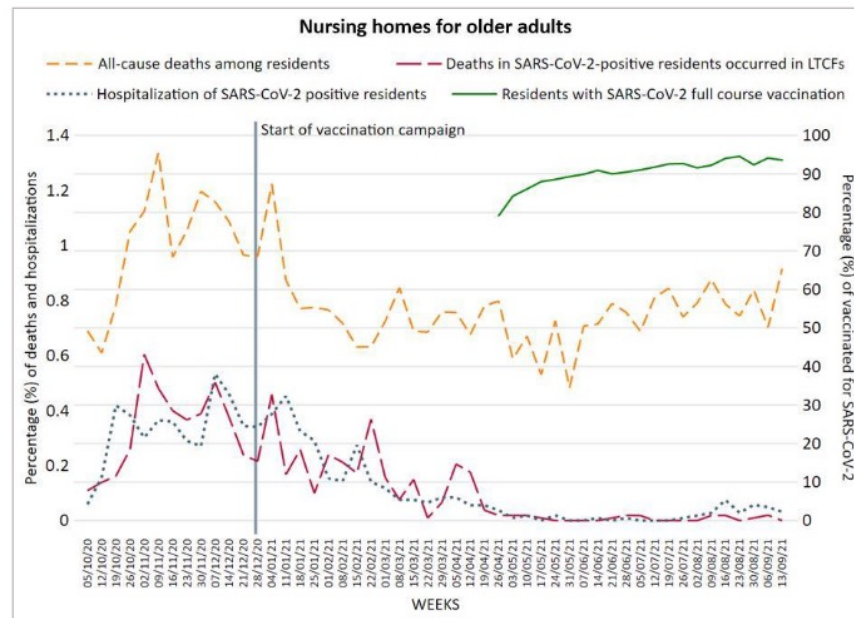
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Distribution of deaths in nursing homes for older adults October 2020 – September 2021

Figure 4. With reference to the period October 5th 2020 – September 19th 2021, and to monitored nursing homes for older adults, the figure shows the percentages of: weekly deaths for all causes among residents, occurred in LTCFs; weekly deaths for all causes among residents, occurred at the hospital; weekly deaths among SARS-CoV-2 positive residents, occurred in LTCFs; weekly hospitalized SARS-CoV-2 positive residents; residents with SARS-CoV-2 full vaccination course (data available from April 26th 2021). (labels on the horizontal axis report the first day of each monitored week).



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The Covid-19 legacy for the LTC system

1. LTC services need to be **better coordinated** with other care settings → Regions are working to promote more protocols to discipline the topic
2. The **shortage of workforce is now chronic**, and it needs to be tackled at the national level
3. Service providers are facing **major economic sustainability issues**, which require both public intervention and business model innovation
4. **Home care** is advocated as the solution to LTC shortages, but the system is lacking extensive and comprehensive proposals on **how** to deliver it
5. LTC sector requires **proper administrative data** at the national level, which should guide policy makers, allow for policy evaluation and ensure accountability to citizens



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What's next: PNRR

- Italy benefits from the “Next Generation EU”, a temporary instrument designed to boost the recovery of the European economy after the pandemic. The Government launched the **National Recovery Plan for Resilience (PNRR)**, which merges multiple sources of funding for a total of **€248 billion**
- The Plan mentions **investments in home care, community care** but does not refer specifically to ageing and LTC
- **Great expectations** from all actors involved (providers, Regions, experts, etc.)
- **No mention of key actors** to be involved
- **No mention of implementation plans**, which should arrive in early 2022.
- **BUT: resources have already been allocated** to National Fund for LTC (*Fondo Nazionale Non Autosufficienza*); Dementia interventions; social care and not for profit sector for innovative initiatives.



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THANKS FOR YOUR ATTENTION!



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