



RISING FROM THE COVID-19 CRISIS: WORKFORCE POLICY RESPONSES IN LTC

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

Eileen Rocard
Directorate of Employment, Labour and Social Affairs



Agenda

1

COVID-19 impacts and pre-existing challenges

2

Policy responses

3

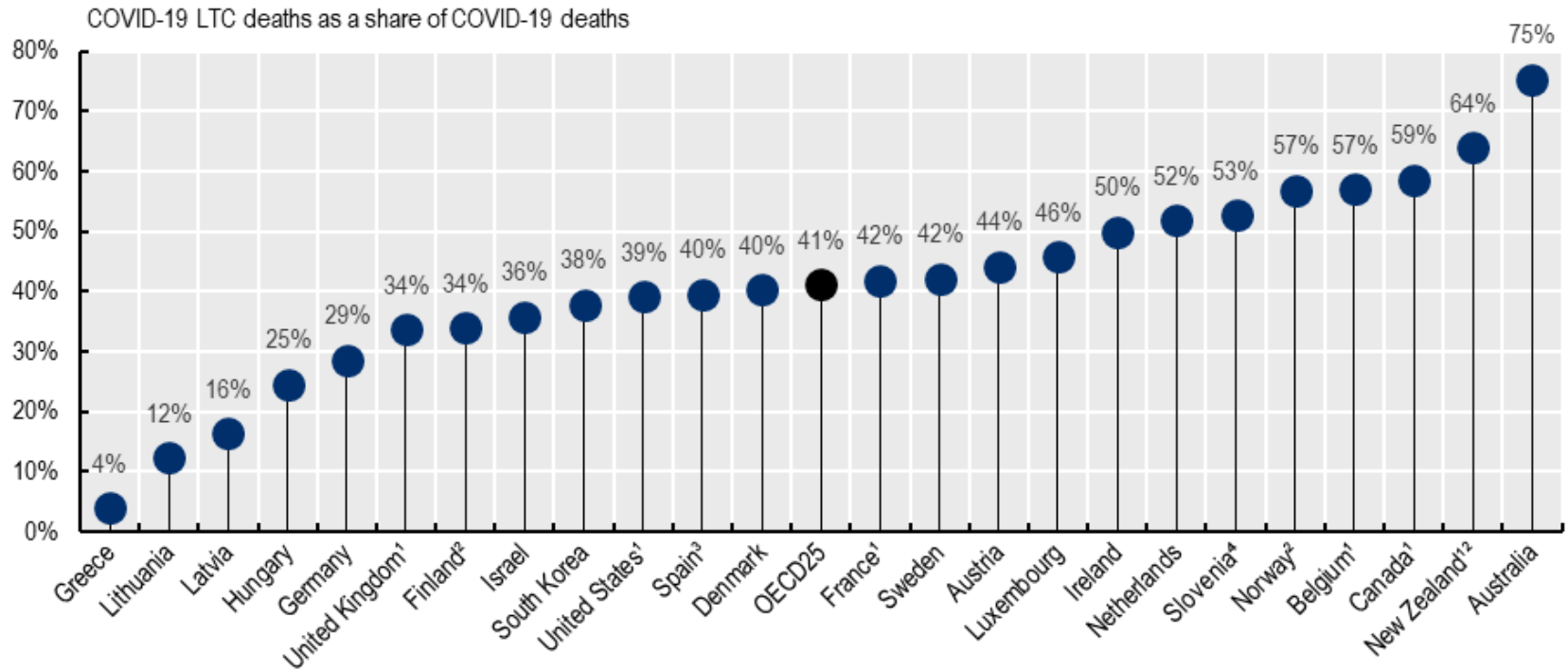
Conclusion



COVID-19 IMPACTS AND PRE-EXISTING CHALLENGES



40% of COVID-19 deaths were among LTC residents on average



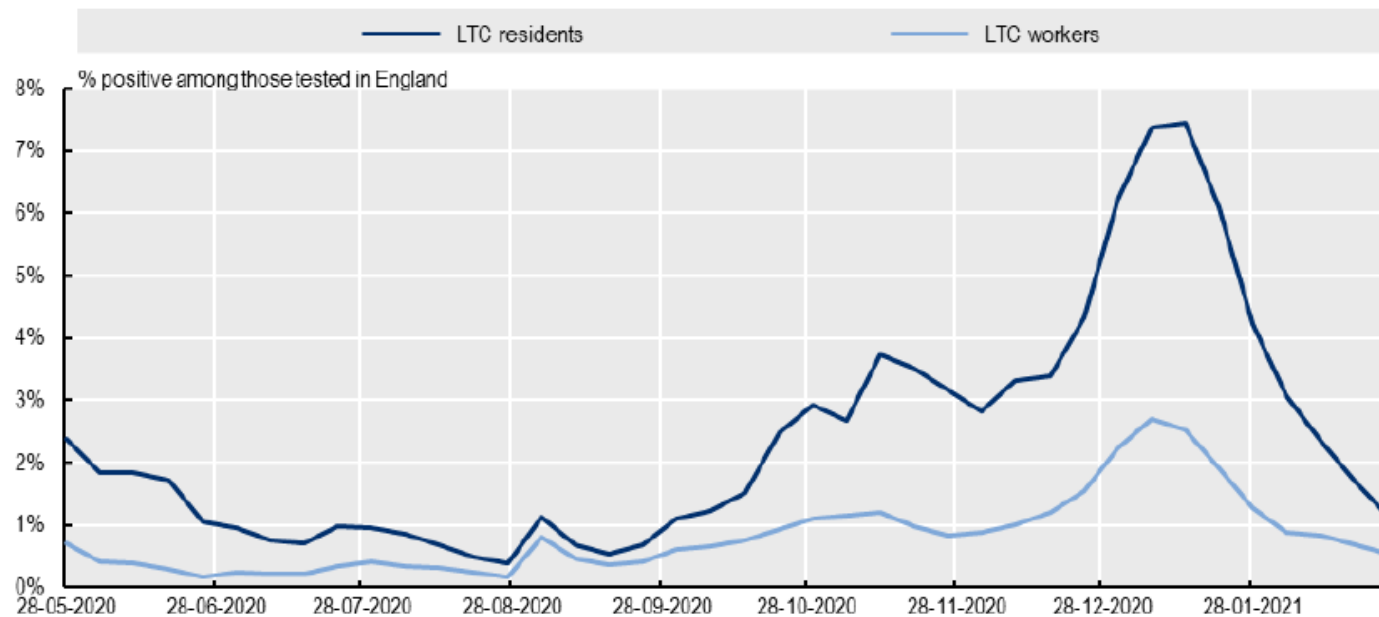
Note: Data on cumulative deaths up to early February 2021. 1. Includes confirmed and suspected deaths. 2. Only includes deaths occurring within LTC facilities. 3. Data come from regional governments using different methodologies, some including suspected deaths. 4. Includes deaths in nursing homes and social LTC facilities.

Source: (Comas-Herrera et al., 2021), (ECDC, 2021), (OECD Questionnaire on COVID-19 in LTC).



Incidence among residents mirrors that of workers in LTC facilities

England



Note: Confirmed cases based on PCR tests.

Source: 2021 OECD questionnaire on COVID-19 and LTC.



Pre-existing structural challenges



Poor **working conditions**: low tenure, part time employment, low pay



Lower spending, a large number of preventable safety failures occurring in the sector prior to the pandemic



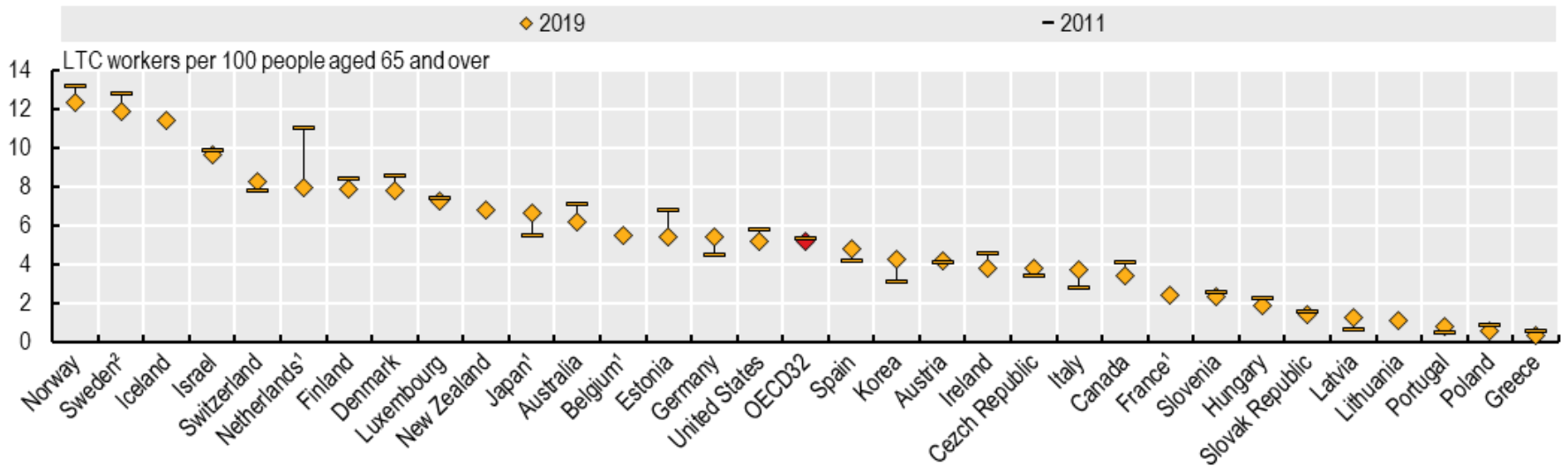
insufficient **quality standards** and monitoring



Insufficient **co-ordination**



The rate of LTC workers varies widely across countries

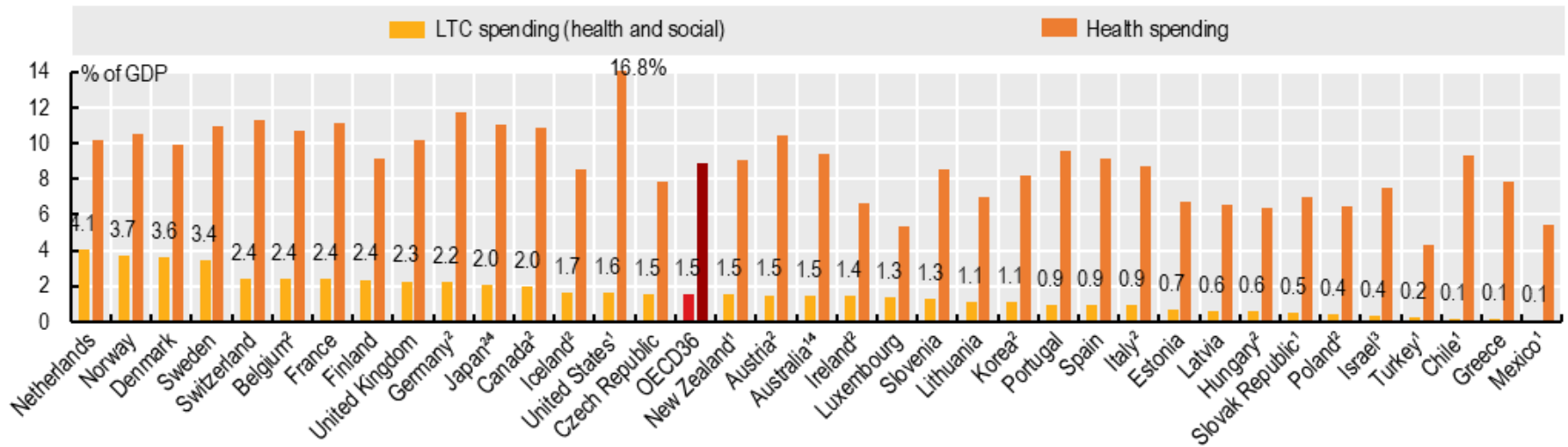


Note: 1. Break in time series. 2. Data for Sweden cover only the public providers. In 2016, 20% of beds in LTC for the elderly were provided by private companies (but publicly financed).

Source: OECD Health Statistics 2021, complemented with EU-LFS.



LTC expenditure was estimated at 1.5% of GDP and health expenditure at about 9% across OECD countries



Note: Data refer to 2019. 1. Estimated by OECD Secretariat. 2. Countries not reporting spending for LTC (social). In many countries this component is therefore missing from total LTC, but in some countries it is partly included under LTC (health). 3. Country not reporting spending for LTC (health). 4. OECD estimates for 2019 for health spending.

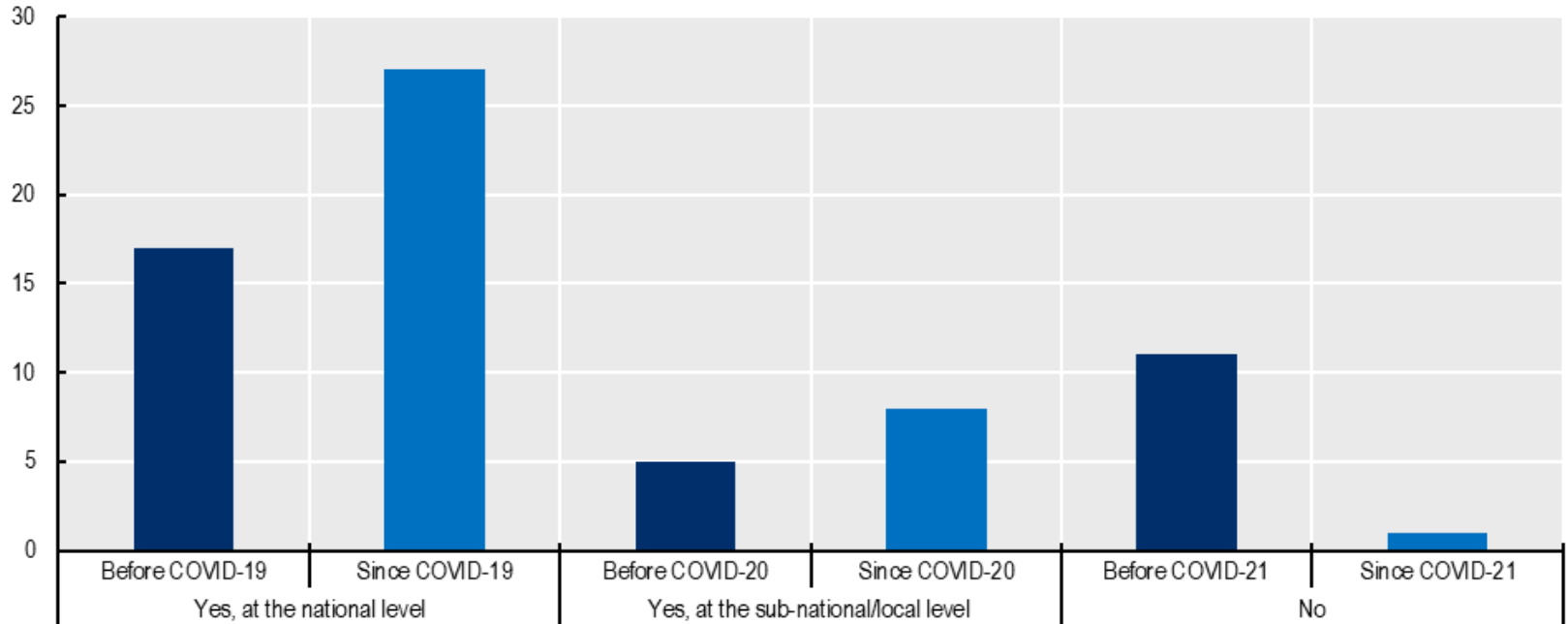


POLICY RESPONSES



Emergency preparedness in long-term care was insufficient

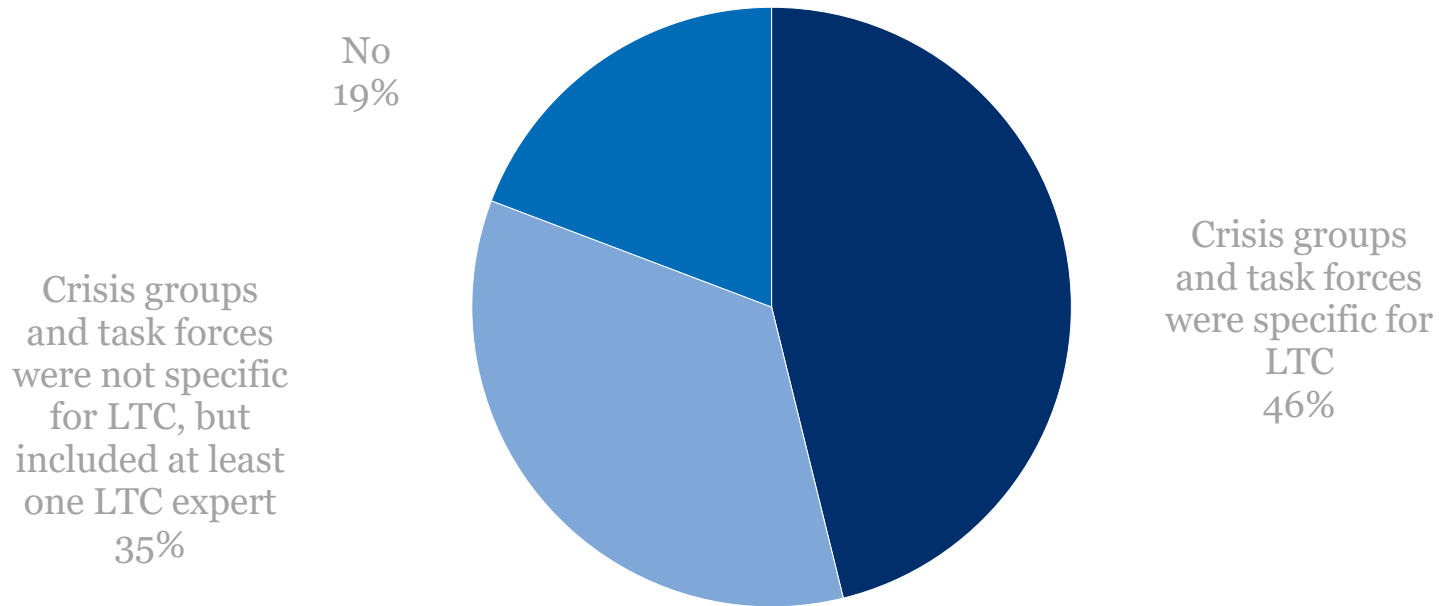
Did/does your country have guidelines on infection control in LTC?





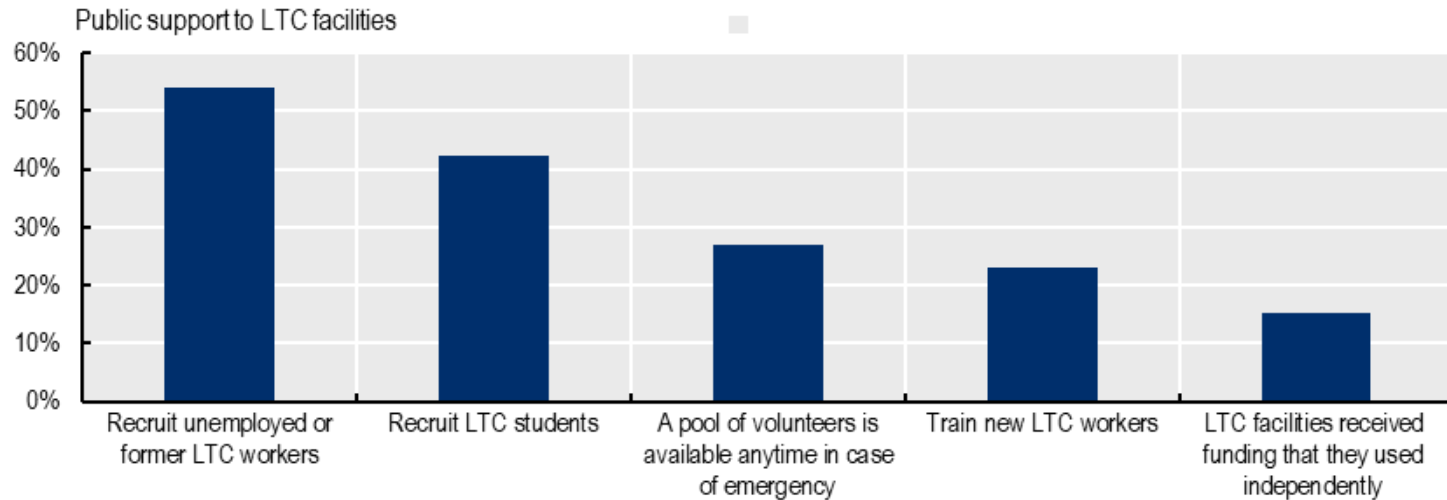
Task forces were created, but very few are permanent

If task forces were created, did they include at least one LTC expert?





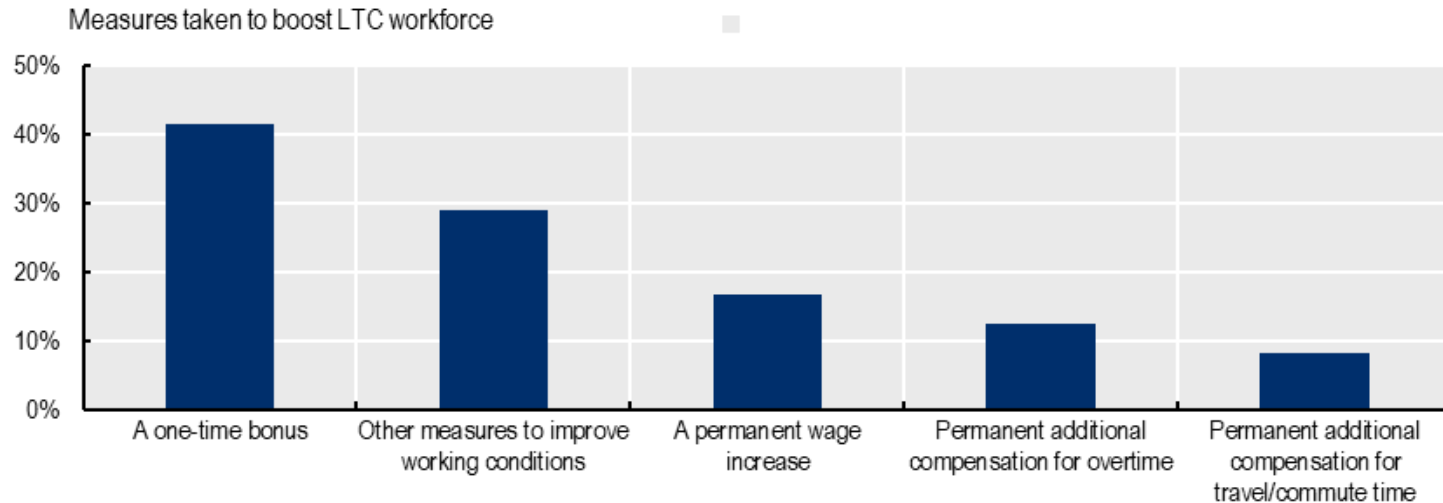
Measures to address staff shortages



- Some countries also suspended minimum education degrees or required qualifications for many tasks
- Use of mobile teams - 11 countries set up mobile teams to facilitate testing in LTC facilities



Measures to reward workers and make LTC more attractive



- In **Germany**, the basic wage will increase to 15.4€/h (2 500€/m) for a qualified carer and 12.55€/h for auxiliary workers in 2022
- In **France**, the minimum tariff for home care will increase 22€/h in 2022. The “new” Fund will receive a share of the General Social Contribution (the main tax for health) has a budget of €31.6 billion for 2022 (€28 billion in 2020)
- In **Lithuania**, the Economic and Resilience Plan has a budget line of €11 million to finance 90 mobile teams and 10 day care centres in 2022-2024
- In **Croatia**, the Economic and Resilience Plan has a budget line of €49.1 million for the construction and equipment of Centres for older people (including staffing)
- In the **UK**, the new health and social levy (National Insurance contributions) should raise £12.4 billion a year



CONCLUSION



Vaccination has been a game-changer, but the new variant brings uncertainty

Previous COVID-19 waves = learning opportunities?

WORKFORCE

- Address existing workforce issues, improve working conditions and staff ratios

DATA

- Ensure standardized, comprehensive and timely data collection

INFECTION CONTROL

- Regular update of infection control protocols

HOME CARE

- LTC recipients at home seem to be better protected from COVID-19. Home-based options require adequate staffing, more sustainable resources and support to informal caregivers



Thank You & Happy Holidays



Email us

Eileen.ROCARD@oecd.org
Paola.SILLITTI@oecd.org
Ana.LLENANOZAL@oecd.org



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Read our publication

COVID-19 in LTC: impact, policy responses and challenges <https://doi.org/10.1787/18152015>

 **Health at a Glance 2021**
OECD INDICATORS



 OECD

 OECD Health Policy Studies
Who Cares? Attracting and Retaining Care Workers for the Elderly



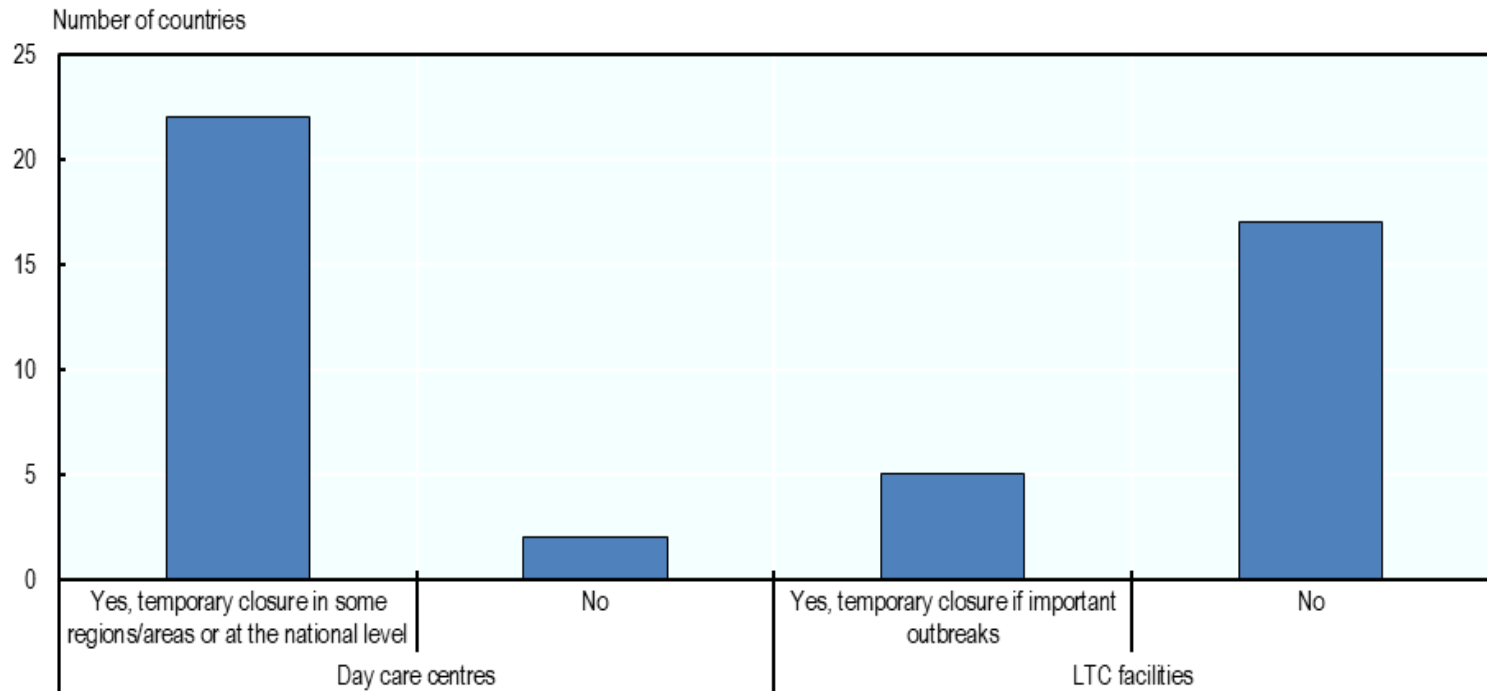
 OECD



ANNEX



Day care centres closed while LTC facilities shielded, requiring organisational changes



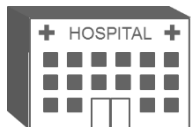


Care integration has improved, but could be strengthened further



Coordination with primary care providers

- Before the pandemic, 10 OECD countries reported having guidelines or legislation on the integration of LTC and primary care
- Since the pandemic, 8 OECD countries have introduced new 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)