

The Implications of COVID-19 for the future of Long-Term Care

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27th October 2020



INTERNATIONAL
LONG TERM CARE
POLICY NETWORK



THE LONDON SCHOOL
OF ECONOMICS AND
POLITICAL SCIENCE ■

Acknowledgements:

Mostly based on this report:

Comas-Herrera A, Zalakaín J, Litwin C, Hsu AT, Lemmon E, Henderson D and Fernández J-L (2020) Mortality associated with COVID-19 outbreaks in care homes: early international evidence. Article in LTCcovid.org, International Long-Term Care Policy Network, CPEC-LSE, 26 June 2020.
<https://ltccovid.org/2020/04/12/mortality-associated-with-covid-19-outbreaks-in-care-homes-early-international-evidence/>

An updated version of this report will be published on 14th October 2014 (same link as above).

The report has built on data and information provided by contributors to LTCcovid and others, thanks in particular to:

David Bell, Shuli Brammli, Robert Gal, Corrina Grimes, Klara Lorenz-Dant, Lee-Fay Low, Norwegian newspaper VG, Andreia Paiva, Maria Pierce, Eleanora Perobelli, Katrin Seeher, Tine Rostgaard, Marta Szebehely, Wong Chek Hooi, Wan Chen K Graham, Andrea E. Schmidt, Kai Leichsenring, Heidemarie Staflinger, Annette Bauer, for information on their respective countries and to Emma Reynolds and Paul Cullen.

I would like to thank my co-authors, all contributors to LTCcovid, ILPN and CPEC-LSE. Any errors, omission and views expressed are my responsibility.

Why do we need to know about deaths of care home residents linked to COVID-19?

- In many countries, care homes not included in initial responses to COVID-19.
- Focus on stopping transmission in the community and boosting hospital capacity, but situation was different in countries in Asia with SARS and MERS experience: strong Infection Prevention and Control systems in care homes.
- No data on number of people infected (and deceased) in care homes: **risk that vital resources needed to tackle infections in care homes are not made available**

What does the international data on COVID-related mortality in care homes show?

- Comparability issues

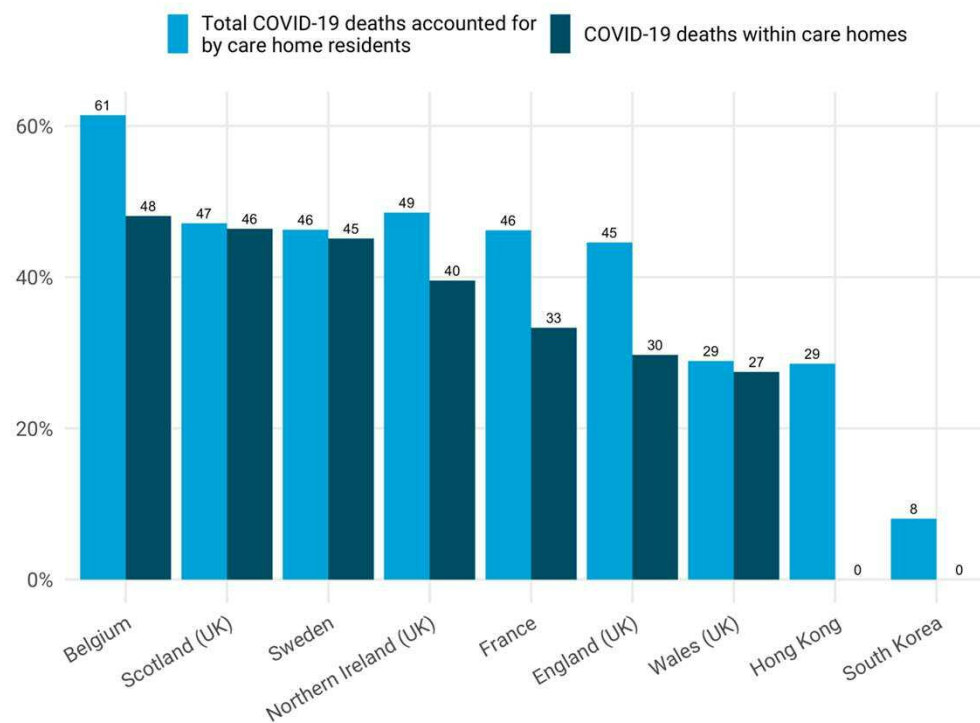
Methods:

- Search for official data sources
- Data checking and harvesting of additional information through international experts, through the LTCcovid.org website and building on the [International Long-Term Care Policy Network](#)
- This has been an entire voluntary activity, not funded
- Data from different countries use different definitions/measures, so needs very careful interpretation

COVID-19 related mortality among people who live in care homes

- Data from 21 countries shows that 46% of COVID-19 deaths were among care home residents
- Population in care homes represents 0.75% of all population in those countries
- Age and underlying health conditions alone do not explain this magnitude of impact
- Some potential explanations:
 - Difficulty (or even impossibility?) of implementing physical distancing in care homes
 - Late / insufficient access to testing and PPE
 - Late adaptation of guidance to recognize “geriatric COVID symptoms” and asymptomatic transmission
 - Reduced access to healthcare

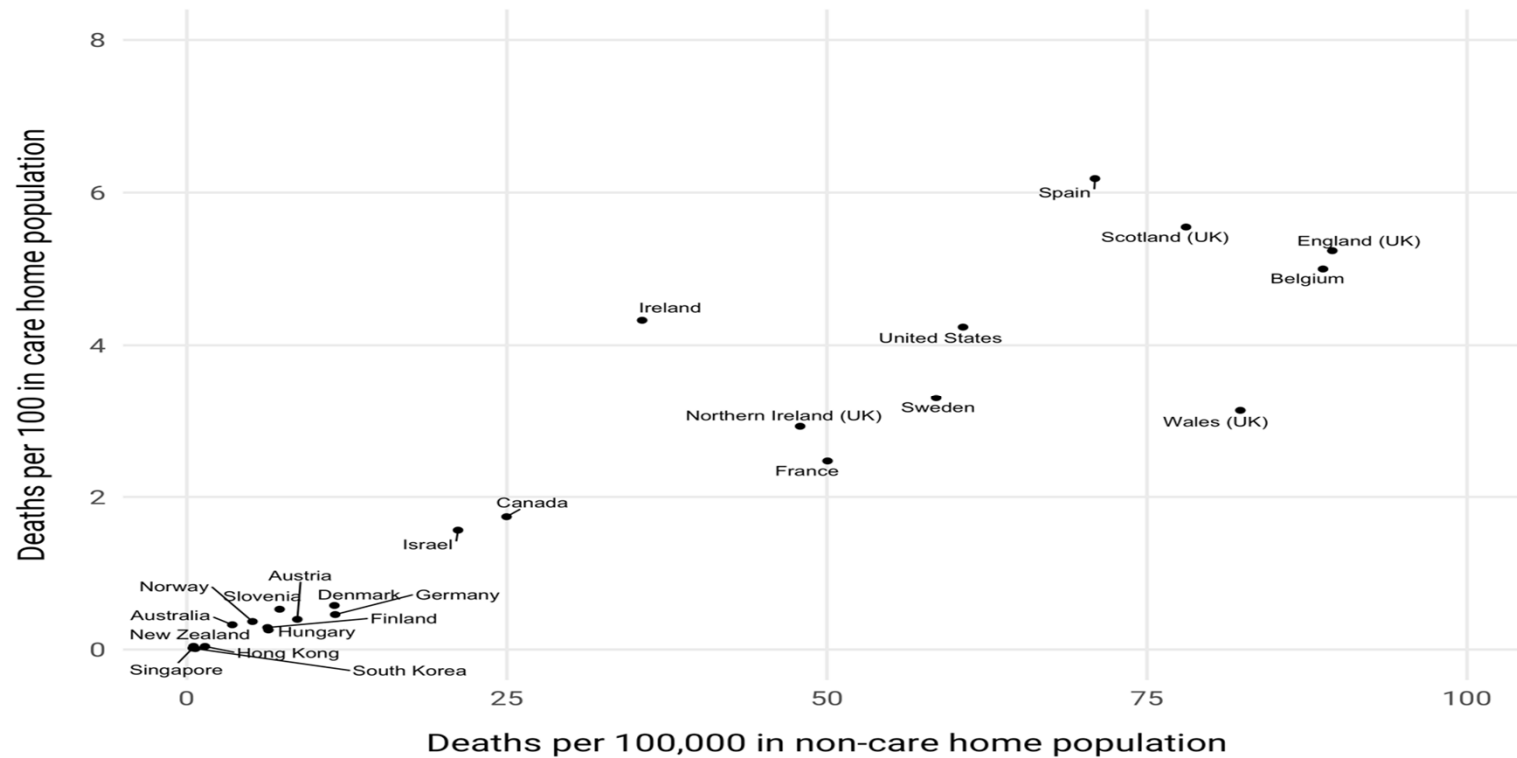
Different patterns of hospitalisation of care home residents



Countries with missing data excluded

Comas-Herrera A, Zalakaín J, Lemmon E, Henderson D, Litwin C, Hsu AT, Schmidt AE, Arling G and Fernández J-L (2020) *Mortality associated with COVID-19 in care homes: international evidence*. LTCcovid.org, International Long-Term Care Policy Network, CPEC-LSE, 14 October.

International data on mortality among people living in care homes



Comas-Herrera A, Zalakaín J, Lemmon E, Henderson D, Litwin C, Hsu AT, Schmidt AE, Arling G and Fernández J-L (2020) *Mortality associated with COVID-19 in care homes: international evidence*. LTCcovid.org, International Long-Term Care Policy Network, CPEC-LSE, 14 October.

What have we learnt from international mortality data in care homes?

- Focussing on % of deaths that happens in care homes is only useful to show the scale of the problem
- To compare impacts in countries, shares of total care homes residents who died offers a different perspective on the differences of impact of COVID-19 on care home residents
- Best explanation for country differences appears to be overall levels of infection, suggesting that attempts to “shield” care homes have not worked, despite visiting bans.
- National studies suggest spread of infection/mortality linked to size of care homes
- We also need to understand other impacts:
 - Staff, people who rely on care in the community
 - Physical and mental health impacts

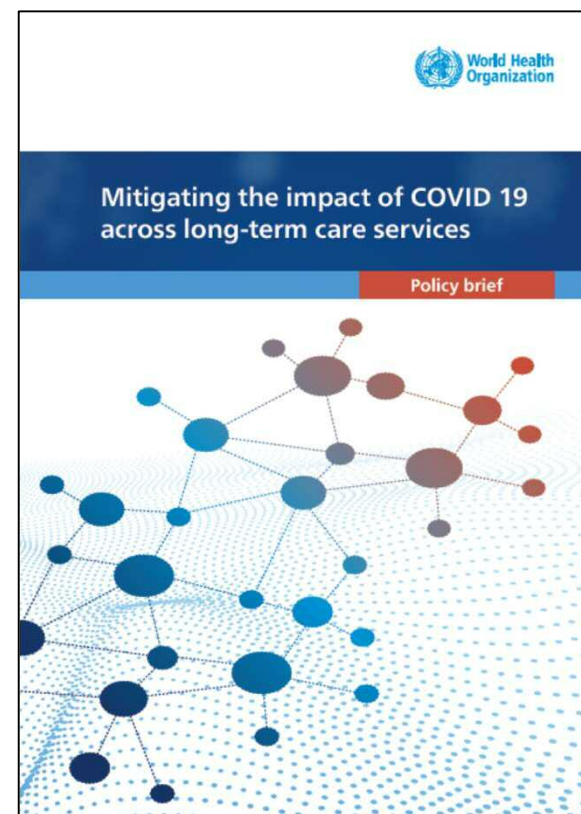
Mitigating the impact of COVID-19 across long-term care services (July 2020)

Targets:

- Policy makers and authorities in local, subnational, and national level

Structure:

- Eleven policy objectives
 - Challenges
 - Implications in the context of COVID-19
 - Key actions
 - Whole of sector
 - LTCFs
 - Community
- Country examples



Structural challenges behind international failures in the LTC COVID-19 responses in care homes

- **Low political priority** for LTC (compared to acute health care & other policy areas)
- Fragmented systems, responsibilities split between different government departments and levels of government (local/regional/national): **no one was in charge**
- **Failures in health/LTC coordination resulting in access to health care**
- **Weak regulatory oversight and inexistent or underdeveloped information systems**
- Lack of recognition of **human rights** of people living in care homes
- Under-recognition of care staff: low pay/staff shortages/poor working conditions

The present/near future: dealing with further COVID waves

- Urgent need to resolve care home visiting restrictions
- Most countries have adopted measures consistent with WHO recommendations, but implementation remains a challenge:
 - Access to testing, speed of test results
 - Cost of PPE and who bears the additional cost
 - Unclear how care homes lacking adequate space to implement isolation of suspected/confirmed cases will be supported
 - Unclear that recruitment drives to increase staff availability have succeeded
- Potential for increased survival given improved treatment/ management of COVID: need to ensure this is available to care home residents?
- Ensure increased capacity/capability to provide palliative care in care homes

Re-thinking LTC after COVID:

- Opportunity to learn and build on public/political attention to address long-standing structural problems (including, but not only, financing)
- But, at the same time, expected high public deficits are likely to reduce scope for increased public spending in LTC
- Emerging picture:
 - Reducing reliance on care homes requires increased capacity in community care and support for unpaid carers
 - Smaller care settings more strongly linked to the community gaining popularity (homes with care vs care homes)
 - Clarify the role of care homes: long term homes with care, vs. intermediate/rehabilitation care settings (post-discharge), vs. palliative care settings