

Projections of Long-Term Care use and supply in Europe

Adelina Comas-Herrera

Care Policy and Evaluation Centre (formerly PSSRU)

Department of Health Policy

London School of Economics and Political Science

@adelinacohe

Outline

1. Overview of projections of LTC use and supply in Europe:
 - a. What has been projected so far?
 - b. Different research questions, data availability and methodology
 - c. Policy implications
2. Projecting change in needs
3. Policy implications

1. Brief overview of projections of LTC use and supply in Europe

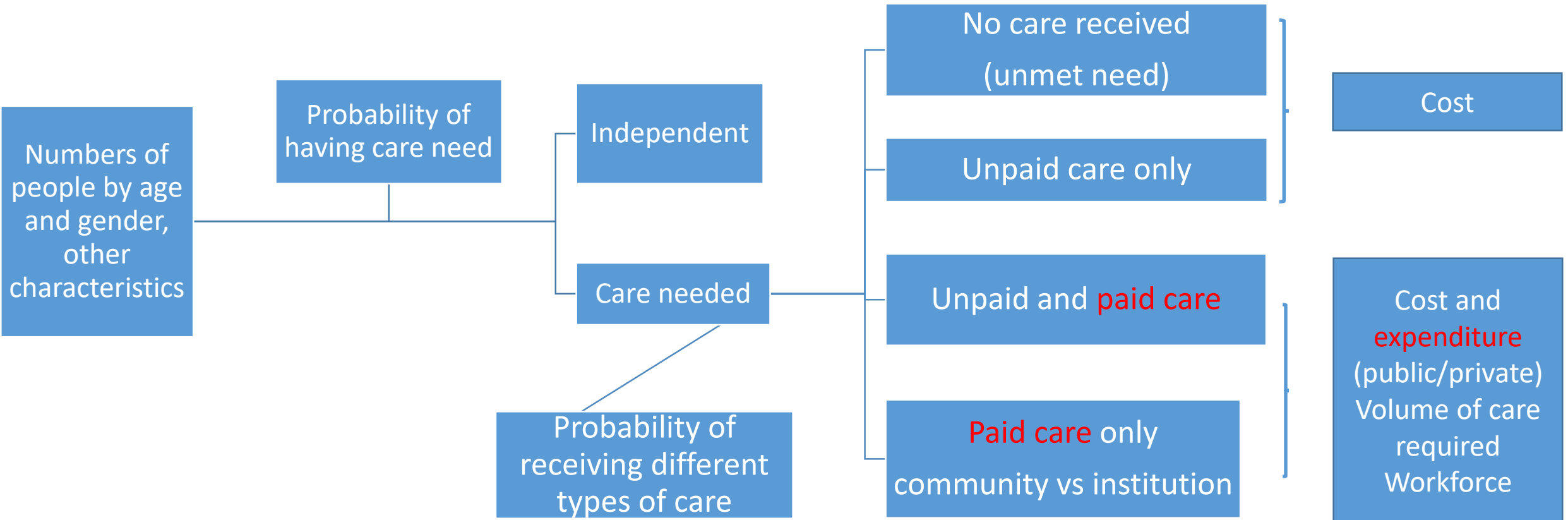
Projecting long-term care into the future

- We know for sure that we will get the wrong answer
- But it is still useful to make projections:
 - To inform strategic planning: capacity & financing
 - To understand the **drivers of change**
 - To understand **budgetary implications** of ageing
- **Sensitivity analysis**: Not all variables involve the same level of **uncertainty**
- vital to understand robustness of projections. Especially when making projections to inform policy decisions.

What are we projecting in relation to Long-Term Care?

- Future number of people with different levels (types?) of care needs
- Future resources needed
 - Service volumes/workforce requirements
 - Cost / public and private expenditure
- Future supply of (potential) unpaid care
- Which care?
 - Assuming care use patterns will stay the same
 - Assuming improved care models: more efficient, better quality, better coverage...

Architecture of most LTC projection models



Existing projections in Europe

- Many national studies
- European Study of LTC expenditure¹ (Germany, Spain, Italy, United Kingdom): attempt to project total expenditure and explore sensitivity
- OECD/European Commission Ageing report: public expenditure projections, considering fiscal sustainability implications (every 2 years since 2012)
- ANCIEN projections of LTC use and supply (Germany, Netherlands, Spain and Poland)

¹Comas-Herrera, A., Wittenberg, R., et al. (2006). Future long-term care expenditure in Germany, Spain, Italy and the United Kingdom. *Ageing and Society*, Vol.6 part 2, March, 2006, pp 285-302.

ANCIEN project:

Projections of **use and supply** of LTC in Germany, the Netherlands, Spain and Poland: Percentage change between 2010 and 2060, based on analysis of SHARE data

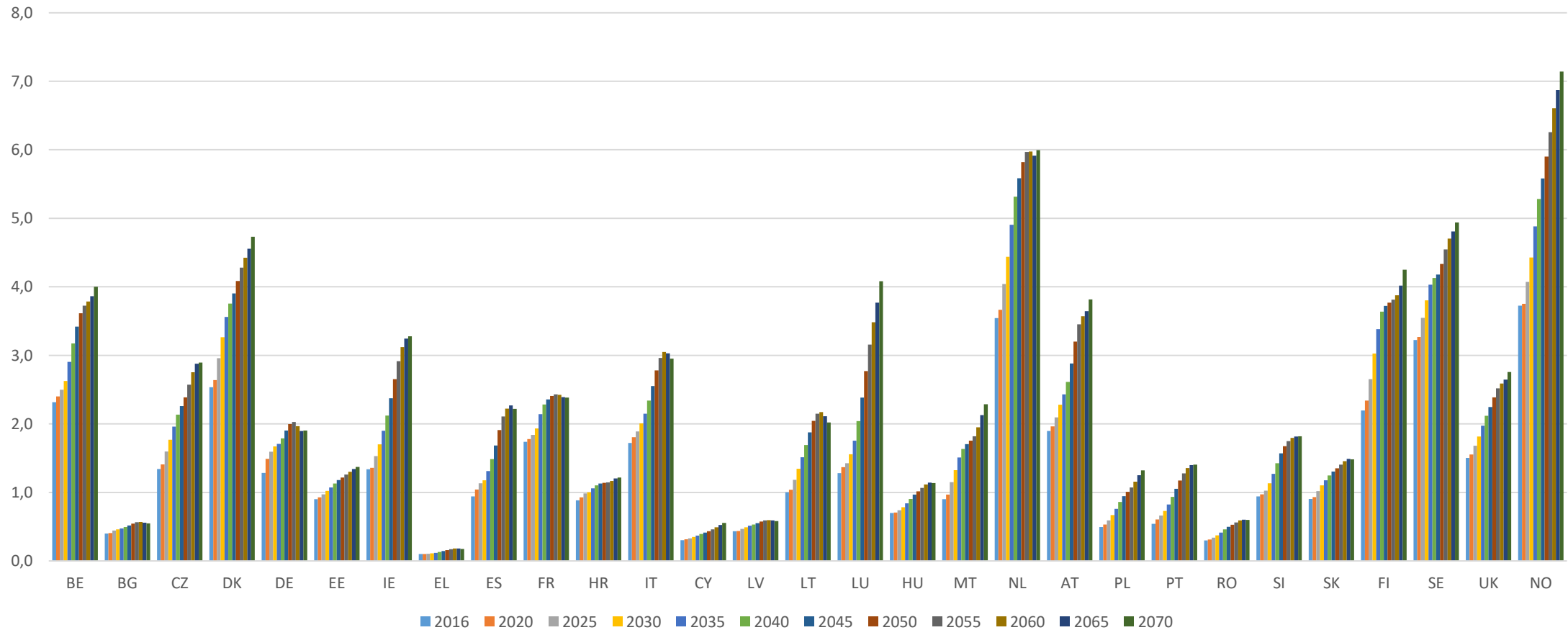
	Care use			Care supply	
	Residential care	Home care	Unpaid care	Unpaid care	Formal workforce*
Germany	102	79	51	25	-20
Netherlands	200	116	66	39	-5
Spain	162	150	140	40	-15
Poland	152	n.a.	n.a.	15	-20

* Formal workforce projections are for 2010 to 2050

Source: Geerts J, Willeme P & Mot E, eds. (2012) Projections of use and supply of Long Term Care for older persons in Germany, the Netherlands, Spain and Poland. ENEPRI research report No. 116

EU Ageing Report 2018: public LTC expenditure

projections as % of GDP in EU+ countries (reference scenario)



Source: https://ec.europa.eu/info/sites/info/files/economy-finance/ip079_en.pdf

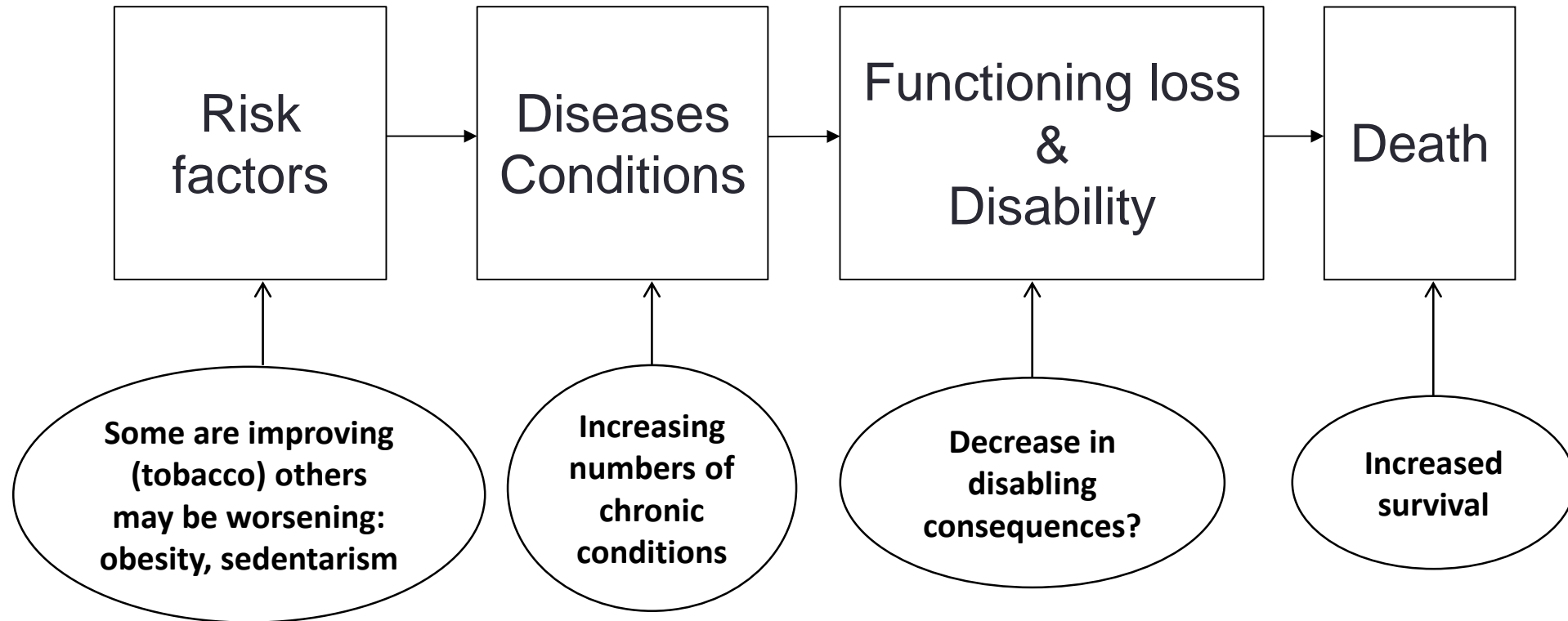
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Policy implications so far:

- **Projections of LTC use and supply:** demographic trends suggest mismatch between care needs and care supply, *under current patterns of needs and care*
- **Projections of LTC public expenditure:** countries that currently have more generous public coverage will also spend more in the future, *under current patterns of needs, care and financing*
- *In terms of scale, in most countries we need expect a least a doubling of need, care use and expenditure*

2. Projecting changes in the type of needs

The Disabling process: what is happening as population ages



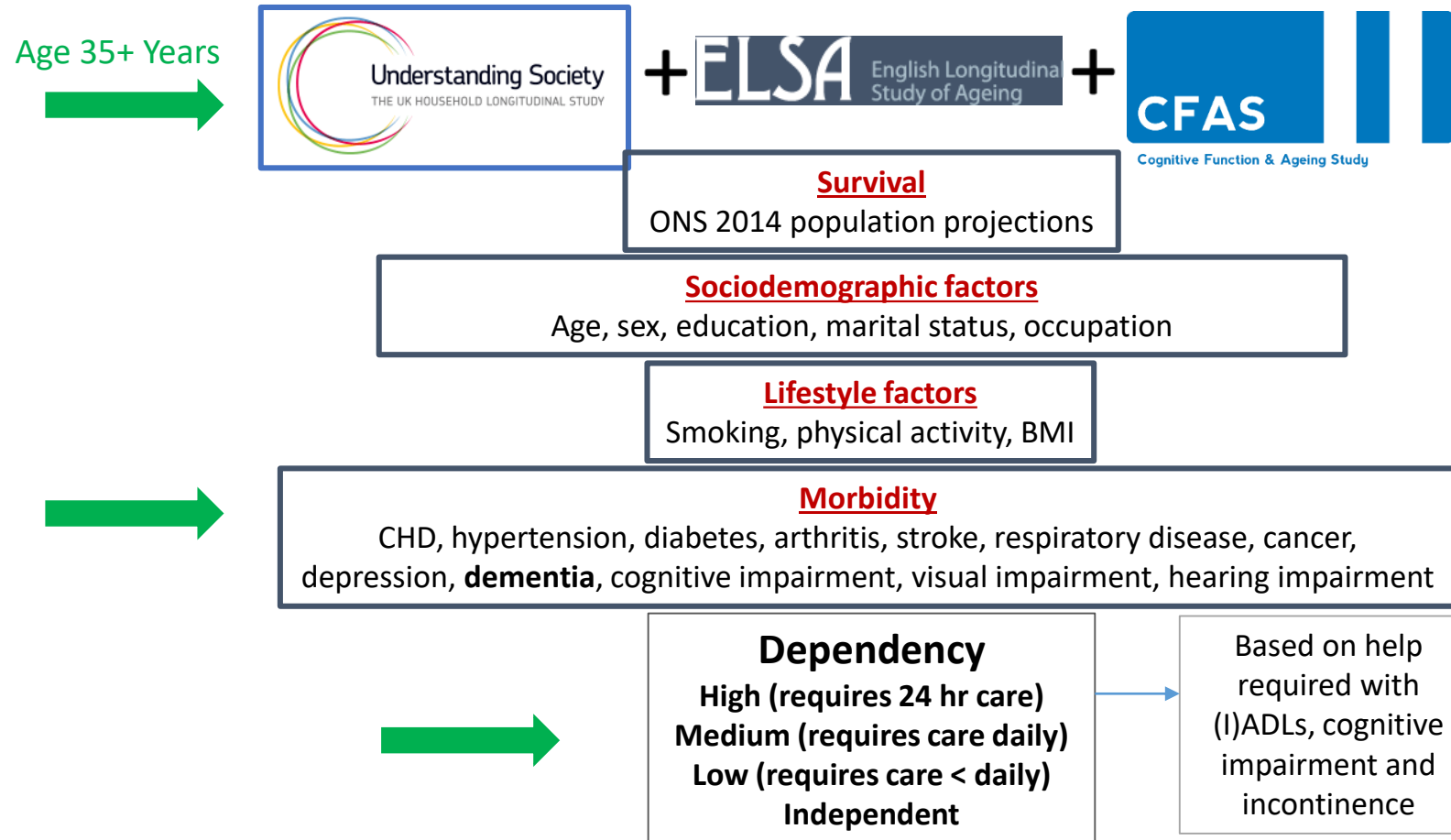
Adapted from Crimmins et al. (2010). *Biodemography: New Approaches to Understanding Trends and Differences in Population Health and Mortality*. *Demography*, 47S: S41-S64.

Population Ageing & Care Simulation (PACSim)

PACSim is a dynamic microsimulation model which


- Simulates future health conditions, dependency and survival of set of **real individuals** (base population) aged 35 years and over
- Feeds results into the CPEC (PSSRU) macro-simulation model to estimate unpaid and formal care and associated expenditure
- Enables evaluation of the effect of interventions (lifestyle, dementia) on future dependency
- Led by Carol Jagger, Andrew Kingston and Heather Booth
- Developed as part of the MODEM project <https://www.modem-dementia.org.uk/>

PACSim data



PACSim: increase in multi-morbidity 2015 to 2035

Between 2015 and 2035¹:

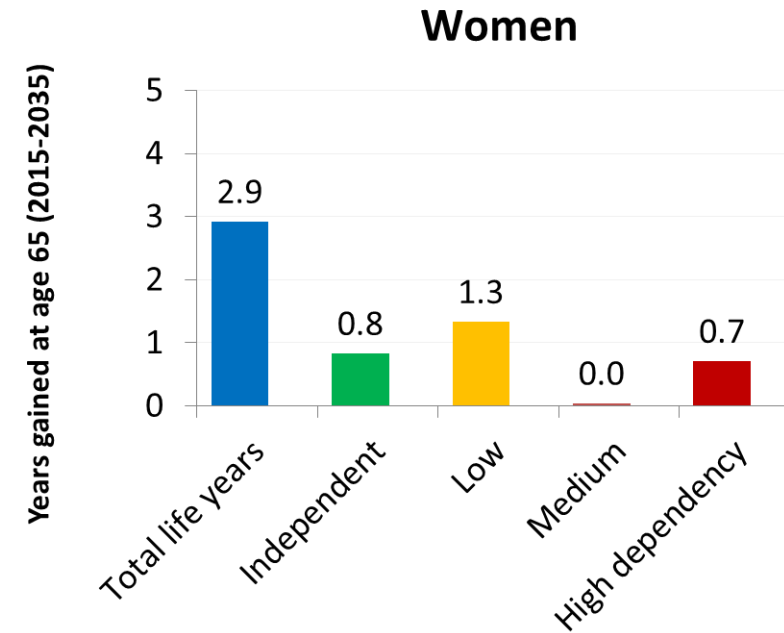
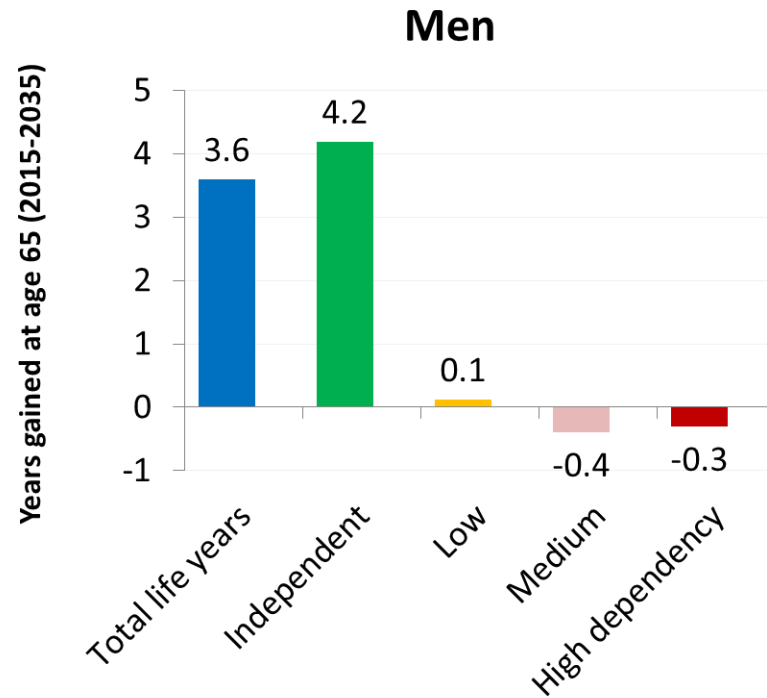
- Numbers of older people with multi-morbidity (2+ diseases) will increase by 86% (from 5.3m to 9.8m)
- Numbers with 4+ diseases (complex multi-morbidity) will increase by 158% (from 1.0m to 2.5m)
- Gain in years spent with multi-morbidity (2+ diseases) will exceed gains in life expectancy  **expansion of morbidity**

¹ Kingston A, Robinson L, Booth H, Knapp M, Jagger C. *Age and Ageing* 2018; 47: 374–380

Will we have compression of dependency?

(as wished by all of us but specially by Treasury/Finance Ministries)

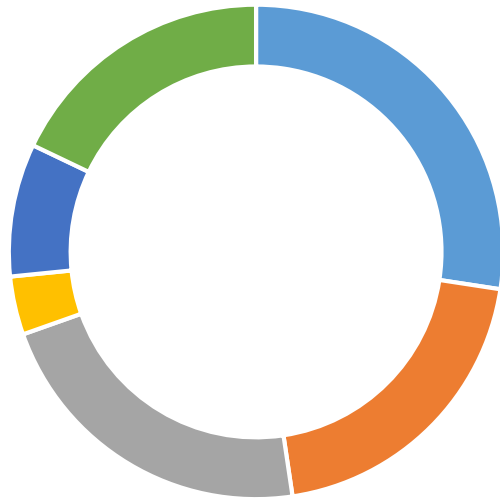
PACSim: Years needing care - change 2015 to 2035



Kingston A, Comas-Herrera A, Jagger C. *Lancet Public Health* 2018; 47: 374–380

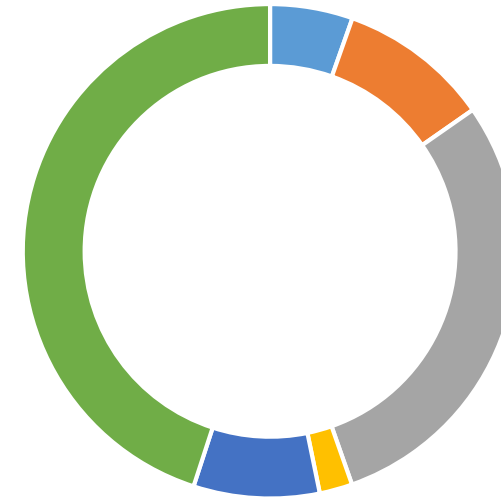
And what will future older people with substantial dependency need? (England, 2035)

2015



- No dementia, 0-1 diseases
- No dementia, 2 diseases
- No dementia, 3 diseases or more
- Dementia only
- Dementia & 1 other disease
- Dementia & 2 or more other diseases

2035



- No dementia, 0-1 diseases
- No dementia, 2 diseases
- No dementia, 3 diseases or more
- Dementia only
- Dementia & 1 other disease
- Dementia & 2 or more other diseases

Kingston A, Comas-Herrera A and Jagger C for the MODEM project (2018) Forecasting the care needs of the older population in England over the next 20 years: estimates from the Population Ageing and Care Simulation (PACSim) modelling study. *Lancet Public Health* (3): e447–55.

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3. Policy implications

Finally:

“There is a history in many countries of LTC policies being developed in a piecemeal manner, responding to immediate political or financial problems, rather than being constructed in a sustainable, transparent manner. The future of LTC is more demand, more spending, more workers, and above all, higher expectations that the final few years of life must have as much meaning, purpose and personal well being as possible. Facing up to this challenge requires a **comprehensive vision of long-term care**. Muddling through is not good enough. “

OECD (2011) Help Wanted? Providing and paying for long-term care

Adding to the OECD's conclusion:

- The future of LTC is more demand, more spending, more workers and **MORE COMPLEX NEEDS**
- Analysis of care needs, service use and **outcomes** will help us develop more efficient and adequate care approaches that work for increasing numbers of people with complex care needs
- The division between *healthcare* and *social care* will become increasingly obsolete. Both need to change, together

Thank you!