

ANCIEN: Assessing Needs of Care in European Nations

FP7 HEALTH-2007-3.2-2:
Health systems and long
term care of the elderly



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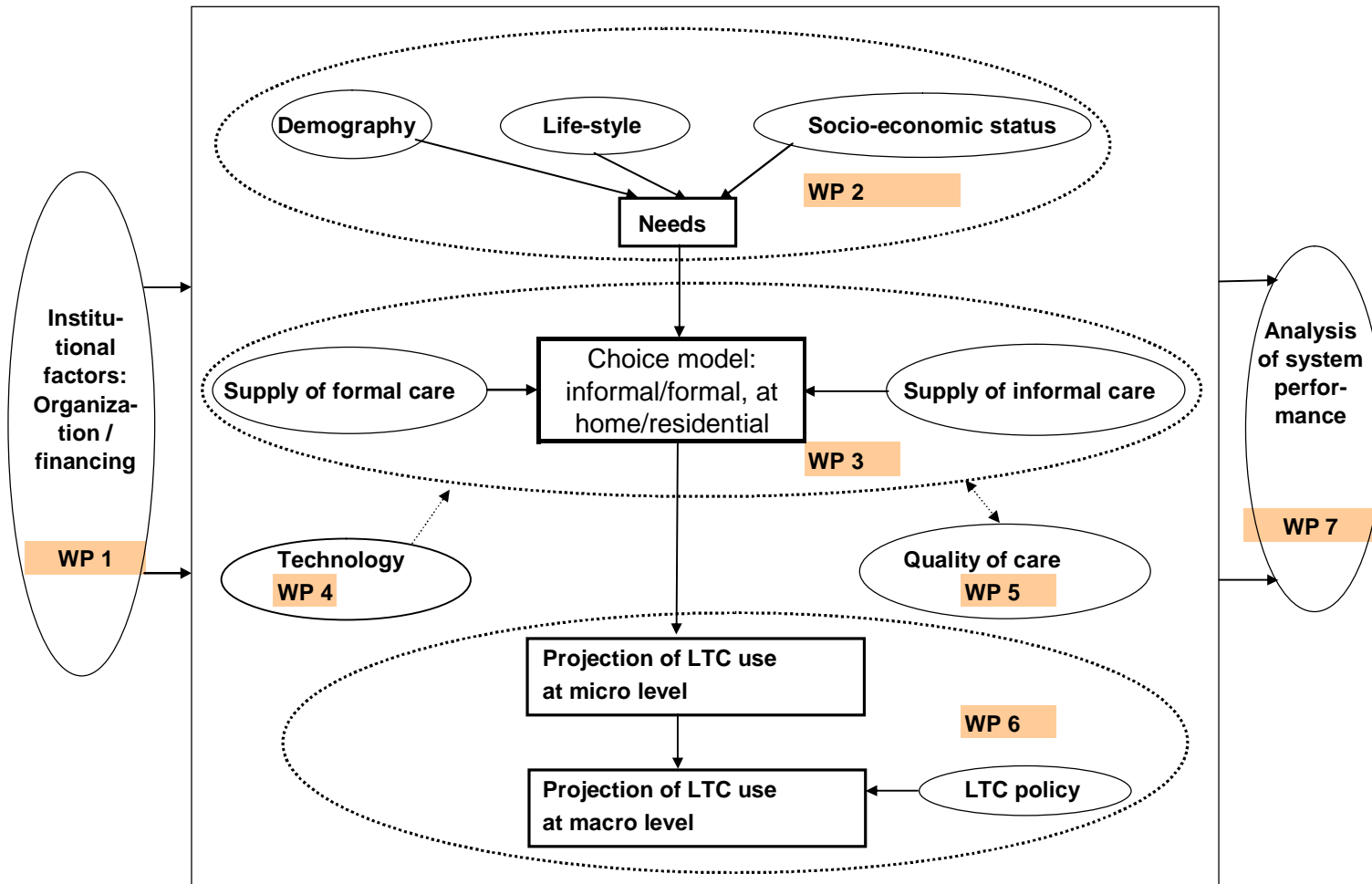
ANCIEN, general information

- research project financed by the EU Commission under 7th Framework Programme (theme Health)
- January 2009 - August 2012
- 21 EU-countries included
- coordination:
Center for European Policy Studies (CEPS): Güldem Ökem
- scientific coordination
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Netherlands Bureau for Economic Policy Analysis (CPB): Esther Mot
- Website: <http://www.ancien-longtermcare.eu/home>

ANCIEN, objectives

- describe and characterise LTC systems in Europe
LTC = long-term care for elderly (65+): palliative care, long-term nursing care, personal care, home help and financing in support of informal care
- analyse the need for care (in relation to demography and lifestyle)
- analyse developments in the supply and demand for formal and informal care
- analyse the potential role of technology in solving LTC problems
- analyse efforts to improve the quality of LTC
- project the use of LTC on the basis of developments in need and supply
- evaluate the performance of different types of LTC systems

Conceptual model of LTC needs and use



Dissemination: WP 8

Management and administration: WP 9

Work Package 1

- description of LTC-systems in Europe

LTC data collected by national experts

- standardised format
- themes: Macrostructure, Financing, Use, Policy
- problems with data collection

country reports available on:

www.ancien-longtermcare.eu

- development of LTC system typology

- identify clusters of countries with similar characteristics

- selection of countries to model

- Choice of one 'representative' country from each cluster for subsequent modelling

WP1: Results by cluster (method 2)

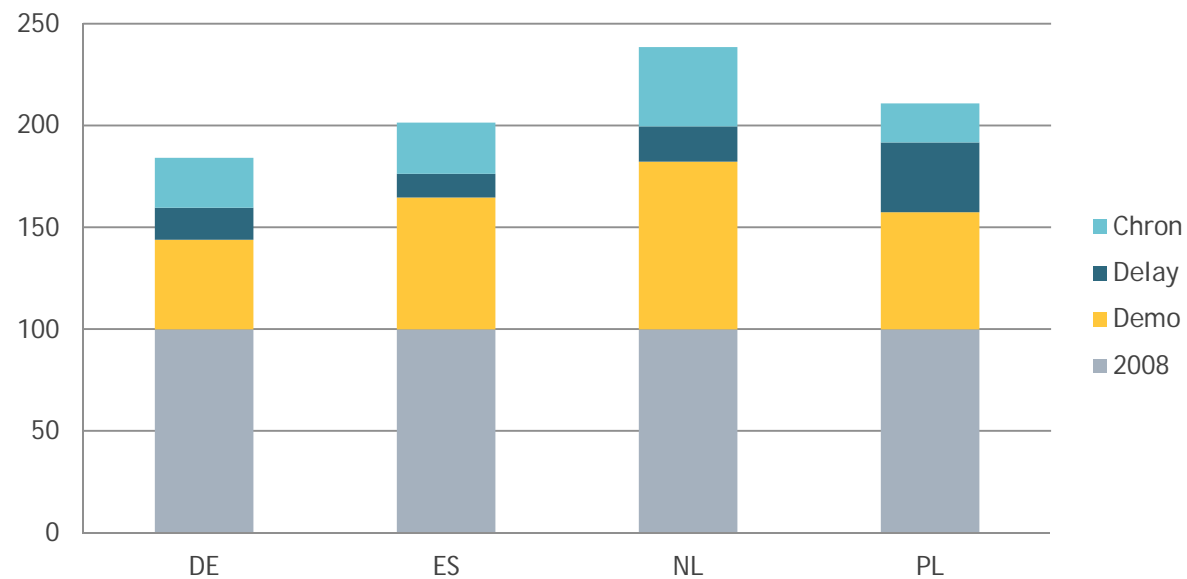
informal care oriented, low private financing	Belgium*, Czech Republic, <u>Germany</u> , Slovakia, (Estonia) * medium spender	low spending, low private, high IC use, high IC support, cash benefits modest
generous, accessible and formalized	Denmark, <u>the Netherlands</u> , Sweden	high spending, low private, low IC use, high IC support, cash benefits modest
informal care oriented, high private financing	Austria, England, Finland, France, <u>Spain</u> , (<u>Slovenia</u>)	medium spending, high private, high IC use, high IC support, cash benefits high
high private financing, informal care seems necessity	Hungary, Italy, (<u>Poland</u>)	low spending, high private, high IC use, low IC support, cash benefits medium

WP 2: Projection of LTC needs (NIDI)

- Estimation and projection of multistate life tables
- Base model distinguishes 4 states (+ absorbing state):
 - 1. being not at Risk, non Disabled (nRnD)
 - 2. being not at Risk, Disabled (nRD)
 - 3. being at Risk, non Disabled (RnD)
 - 4. being at Risk, Disabled (RD)
- Two risk factors: smoking and obesity (BMI)
- Disability defined as having at least 1 ADL limitation
ADL= Activities of Daily Living: bathing, dressing, eating, indoor transferring and toileting and continence

WP 2: Projection of LTC needs (demographic scenarios)

Change in BADL disabled elderly 2008 - 2040



WP 3: use and provision of LTC (FEDEA)

- LTC use and provision in Europe (IHS)
 - Descriptive; WP 1 questionnaire data; all countries
- Determinants of formal and informal LTC use (CASE)
 - Descriptive; Share data; selected countries (NL, D, SP & PL)
- Models:
 - Determinants of informal care provision (LSE)
 - Eurobarometer data; selected countries
 - Choice between formal and informal care and volume of care (FEDEA)
 - Share data; selected countries
 - Determinants of institutionalization (ETLA)
 - Finnish data
 - Trends in formal care supply (FPB & CPB)
 - EU LFS + national data; selected countries

WP4: The potential role of technology in LTC

- to set up a framework to analyse the systemic impact of technologies (in particular ICT and specialized devices) on LTC provision
- to apply it to 3 case studies, namely: dementia, diabetes and obesity
- to identify the qualitative effects on the distribution of activities among formal and informal carers

WP4: The potential role of technology in LTC: results

B2. impact of domotics and remote devices	dementia			obesity			diabetes		
	i	m	s	i	m	s	i	m	s
for surveillance (sensors: position, movement)	1	2	3		1				1
to avoid environmental risks (sensors: gas, fire, ...)	2	3	3						1
to improve adaptation to the environment	1	2	1		2	3			1
for remote vital sign measurements						2			1
for remote clinical measurements					1	2		2	3

B3. impact of domotics and devices on ADLs	dementia			obesity			diabetes		
	i	m	s	i	m	s	i	m	s
1. Bathing (sponge bath, tub bath, or shower)			1		2				
2. Dressing - Gets clothes and dresses w/o assistance					1	1			
3. Toileting - Goes to toilet room, uses toilet, ...			1		1				
4. Transferring - Moves in and out of bed and chair			1		1	2			
5. Continence - Controls bowel and bladder by self		1	2		1	2			
6. Feeding - Feeds self w/o assistance (except cutting)		1							

WP5: Quality of LTC

- reviewing the policies on LTC quality assurance in the EU (organisation, monitoring, ...)
- reviewing the quality indicators for LTC (currently employed)
- providing assessment and recommendations for improving LTC quality

WP5: Quality of LTC: results

Policy options for supporting quality of informal care

	Austria	Estonia	Finland	France	Germany	Hungary	Italy	Latvia	Poland	Slovakia	Slovenia	Spain	Sweden	The Netherlands	UK	TOTAL
Assessment of LTC needs and personalized self-care plans	V	V	V	V	X	X	X	X	X	V	X	X	V	V	V	8
Courses for informal care-givers	V	V	V	X	V	X	V	V	X	V	X	X	V	V	V	10
Statutory visits in the home environment by health and social care personnel	V	X	V	X	V	X	X	X	X	V	X	X	V	X	X	5
Awareness raising campaigns about quality	X	V	V	V	V	X	V	V	X	V	X	X	V	V	V	10
Financial support for buying technologies for self-care and home devices	V	V	V	V	V	X	V	V	X	V	X	X	V	V	V	11
Other	X	X	X	X	X	X	X	V	X	V	X	X	V	V	X	4

WP6: Projecting use and supply of LTC

- Combining the demographic projections (WP2) with the micro models developed in WP3
- Projecting future use of care by setting and type (formal and informal home care, residential care)
- Projecting future availability of informal and formal care givers
- Detecting any imbalances between supply and demand if current patterns persist

WP7: Evaluating LTC system performance

- Comparing simulation outcomes between selected countries, using WP6 projection model
- Linking outcomes to system characteristics
- Evaluating systems by comparing outcomes with inputs:
 - Unmet needs
 - Overall cost of LTC use
 - Private financial burden (out-of-pocket payment)
 - Burden of care on informal carers