

Guiding Questions for the focus areas of the IX Session of the Open-ended Working Group on Ageing: Long-term care and palliative care

1) In your country/region, how is long-term care for older persons defined and provided for in legal and policy frameworks? What types of support and services are covered?

There is no special LTC legislation in the Czech Republic, the system of social care services and the provision of care allowance are regulated by Act on Social Services. The LTC is provided, regulated and financed within social care system; in parallel, there is also LTC provided, regulated and financed within the health care system. The majority of the LTC occurs within the social care system. Social care services are care homes and special care homes adapted for people with dementia, day and week-care centers as a kind of respite care, field-based services like community care services and personal assistance. These services are paid for, with co-funding by clients estimated at 50 % of the costs. The Social Services Act stipulates not only the in-kind services but also a cash social security tax-based benefit – the care allowance provided to people dependent on the assistance of another person due to their age or health status.

2) What are the specific challenges faced by older persons in accessing long-term care?

People with extended care needs living in their homes need to combine several community care providers and home care for nursing tasks, as one provider do not offer services of all kinds. Older people thus distrust field-based services; simultaneously, they lack appropriate information about the services available as well as they lack abilities to coordinate the services of different providers. As a result, they prefer to apply for a place in care homes, although the majority of older people wish to stay at home as long as possible.

3) What measures have been taken/are necessary to ensure high-quality and sustainable long-term care systems for older persons?

- Integration of social and health care within the framework of the LTC system is necessary, particularly with regard to financing and competencies.
- Recognition of the necessity to support the family care-givers and the home-based services (approximately 70 % of all LTC care allowance beneficiaries in Czech are receiving care at home, most of them by informal family care-givers).

4) What other rights are essential for the enjoyment of the right to long-term care by older persons, or affected by the non-enjoyment of this right?

- Older persons who require LTC must be involved in the statutory health insurance system. If they are retired, it is paid by the state.
- According to Social Services Act, a person is eligible to social services, inter alia, when he/she is in poor state of health or your abilities are weakened or lost due to age.

5) In your country/region, how is palliative care defined in legal and policy frameworks?

Palliative care is defined in § 5 Act No. 372/2011 Coll., On Health Services like a care which purpose is to alleviate suffering and maintain the quality of life of a patient suffering from a terminal illness. According to international recommendation we differentiate general palliative care and special palliative care. We describe as general palliative care the clinical care that health workers of different

specializations provide to terminally ill patients within their routine care. Specialized palliative care includes inpatient hospice institutions, out-patient palliative care and home hospice care.

6) What are the specific needs and challenges facing older persons regarding end-of-life care? Are there studies, data and evidence available?

Data about quality of palliative care are not systematically collected. Quality of palliative care depends on many variables. Only 2,6 % of total deaths occur in residential hospices. The most frequent place of death is acute hospital (60 %) and long-term care hospital (9 %). About 20 % of deaths occur at home. The last case however consists mainly of sudden unexpected deaths when the patients die before the arrival of the first aid and medical service team. According to qualified estimation only 5-10 % of home deaths are expected.

There are many years of discussions about financing of hospice care, how much it should belong to health care system and how much to social care system. In 2017 the amendment to the Act on Social Services should have solved it but did not receive sufficient political support.

There is the new Regulation No. 354/2017 Coll. valid from 1. 1. 2018 partially securing payment of palliative care costs by health insurance.

7) To what extent is palliative care available to all persons on a non-discriminatory basis?

Palliative care is basically available for everyone. The person in question only must be a participant in the statutory health insurance system and usually pay a fee of approximately EUR 4 – 20 per day.

8) How is palliative care provided, in relation to long term care as described above and other support services for older persons?

There are three kinds of palliative care services in the Czech Republic. Inpatient hospice institutions, out-patient palliative care and home hospice care. Inpatient hospices are usually non-governmental establishments that are independent (not part of another health institution such as a hospital). There are a few oncology centers with dedicated oncology clinics led by palliative medicine specialists who provide ambulatory palliative care to cancer patients and also pain clinics led by doctors specialized in palliative medicine and pain management. Home hospice care is mobile hospice service providing multi-professional, specialist palliative care in patients' homes.

9) Are there good practices available in terms of long-term care and palliative care? What are lessons learned from human rights perspectives?

Long-term care leave (effective from June 1, 2018). The measure is designed as a coverage period that follows after the release from the hospital, e.g. after a serious injury or illness. For a family member, long-term care leave shall include the possibility of drawing up to 90 calendar days of leave with replacement income in the amount of 60 % of the daily assessment base. During this time, in some cases, the person who needs care recover, in other cases the family must decide how to organize the care. Long-term care leave shall provide space for it, so that the family could prepare for such an alternative and, for example, ask for a care allowance.

Guiding Questions for the focus areas of the IX Session of the Open-ended Working Group on Ageing: Autonomy and independence

1) In your country/region, how is the right to autonomy and independence of older persons defined in legal and policy framework?

In the Czech Republic, there is no special legislation for older persons ensuring the right to autonomy and independence. These rights are ensured for all persons by the Charter of Fundamental Rights and Freedoms which is a part of the Constitution of the Czech Republic. It contains the right to adequate material security in old age (Article 30). Equal treatment (including age, providing social advantage, access to health care, services, social security etc.) is guaranteed by Act No 198/2009 Coll. (Anti-discrimination Act.). The Czech Republic is also bound by international treaties.

2) What other rights are essential for the enjoyment of the right to autonomy and independence by older persons, or affected by the non-enjoyment of this right?

All persons have rights resulting from Civil Code. For example domestic violence regulates currently amended Civil Code (§ 751 - 753 for household of married couple, § 3021 for household of cohousing other persons). An amendment No. 378/2015 Coll. to the Act No. 634/1992 Coll., On Consumer Protection, provides a special protection for older persons. The Criminal Code, § 42 in Act No. 40/2009 Coll., speaks about an aggravating circumstance if perpetrator attacks person, who is old, defenseless or disable. People can be entitled to care allowance (Act No. 108/2006 Coll., On Social Services) which increases their autonomy.

3) What are the key issues and challenges facing older persons in your country/region regarding autonomy and independence? What studies and data are available?

One of the issues the older persons are facing is their financial situation. The overall positive development of the economy is not fully reflected in the income of old age pensioners. Some older persons are threatened by poverty, women more than men (persons aged 75+ in 2016: 15 % women, 2,1 % men). Women live longer than men. Some older persons have a pension burdened by execution (2015: 2,7 % of older persons out of 7 % of the total population). There is a high level of employment of older persons- supported by Active Employment Policy aimed at employees over 55, people with disabilities etc. There are still some barriers in public space, public transport or in private apartments of older persons (such as availability of barrier-free entrance). Another challenge is the underdeveloped network of social services, especially in rural areas.

4) What steps have been taken to ensure older person's enjoyment of their rights to autonomy and independence?

National Action Plan for Positive Ageing ("NAP") is aimed, inter alia, to ensure the rights of older persons. This year is being prepared NAP for the upcoming period of 2018 – 2022. Except the Ministry of Labour and Social Affairs, the NAP also assigns responsibility to other government authorities. In cooperation with the regions there is a plan to prepare Regional Action Plan on Active Ageing for each of them.

5) What mechanisms are necessary, or already in place, for older persons to seek redress for the denial of autonomy and independence?

Special trainings for service providers, medical staff and family members are organized. Complaints by individuals may also address the Ombudsman. He can also carry out inspections in places, where freedom and human rights may be at risk. In case of immediate need a person can contact the Czech Social Security Administration or the Police of the Czech Republic (depends on type of issue).

6) What are the responsibilities of other, non-State, actors in respecting and protecting the right to autonomy and independence of older persons?

There are many NGOs and older person organizations securing matters of older population. They point out the problems, guard observance of older people participation in public life and as representatives of older citizens participate in the decision-making process. They participate in meetings of Government Council for Older Persons and Ageing of the Population.