



Desarrollo de Capacidades para Cuidados de Largo Plazo de Base Comunitaria

Capacity Building for Community Based Long Term Care

Long-term care services and programmes in RUSSIAN FEDERATION



Russian Clinical and
Research Center
of Gerontology

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Russia



Total population	146,5 mil
People 60+	32 mil (22%)
GDP 2019	\$1,6 trillion
GDP per capita	\$4000
State budget	\$0,3 trillion

Social policy spending	24,5%
Healthcare spending	3,3%

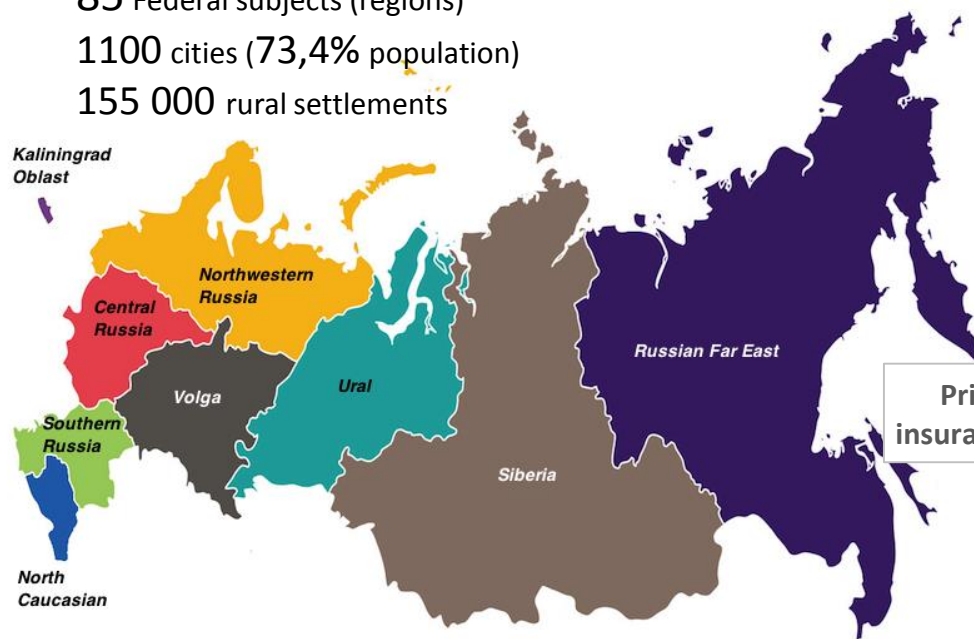
Russia

8 Federal districts

85 Federal subjects (regions)

1100 cities (73,4% population)

155 000 rural settlements



Health System

6300 medical institutions

- Primary
- Specialized
- Obstetrics
- Pediatrics
- Hi-tech

Feldsher-
Obstetrics points

35 500

District hospitals

1754

No. of GPs per

10000 – 2,7

Funding

Private
insurance, 5%

Paid
services,
15%

Compulsory
Medical
insurance,
80%

Social System

614 nursing homes
(79 000 people)

525 mental boarding
homes (160 000 people)

1,1 mil people –
homecare

Funding: budgets of
Federal subjects (regions)

Social charges structure

Pension fund **22% (of salary)**

Social security fund **2,9%**

Compulsory medical insurance **5,1%**

National development projects 2018-2024

May 2018 – the launch of 13 National Projects

National projects

1. Healthcare



Federal projects

8 projects, including
**“The development of
primary medical care”**

2. Demography



5 projects, including
“Old Generation”

Main Indicators

Current By 2024

Life
expectancy

73

78

Healthy life
expectancy

63

67

3. Education
4. Culture
5. Safe and quality roads
6. Habitation environment
7. Ecology
8. Science
9. Entrepreneurship
10. Digital economy
11. Labor productivity
12. International cooperation
13. Power infrastructure

Key policy changes

from

to

Fragmented medical
and social services



**Integrated long-term care
system (“one window”)**

Service by individual
request



Pro-active outreach

Uncoordinated subsidy
system



**Unified care needs
assessment system**

Project implementation system



Ministry of Labor



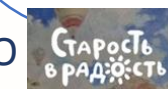
Ministry of Health

Project offices

Social

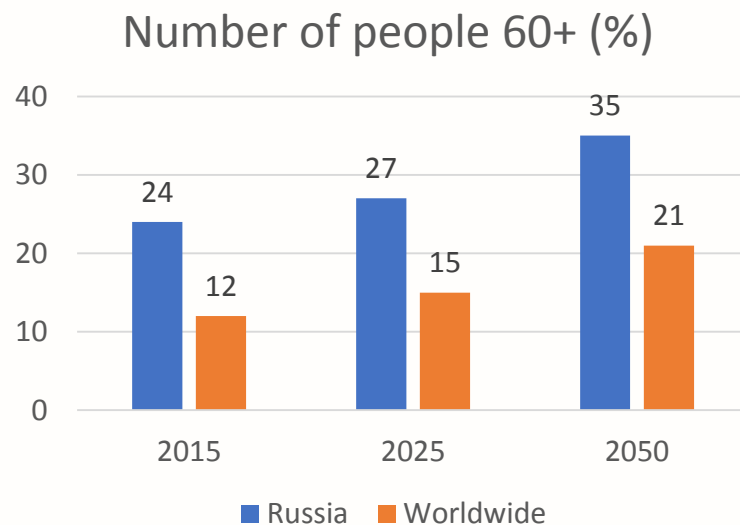
Health

NGO



2018 – 7 pilot regions
2024 – 85 regions (whole country)

Beneficiaries/Target population



60+ 32 million people (25%)
65+ 21 million people (14%)

Pension age

2019: 55 (F) 60 (M)

2032: 60 (F) 65 (M)

Long-term care

People needing long-term care ~ 6 mil



- Elderly people with frailty
- Handicapped
- Palliative patients
- Carers

Selection criteria

Currently

- Individual request
- 3 groups of invalidity (pension)
- Various subsidies

As result of the project:

- 5 groups of needs
 - **Group 1** – self-supporting
 - ...
 - **Group 5** – frail, permanent care

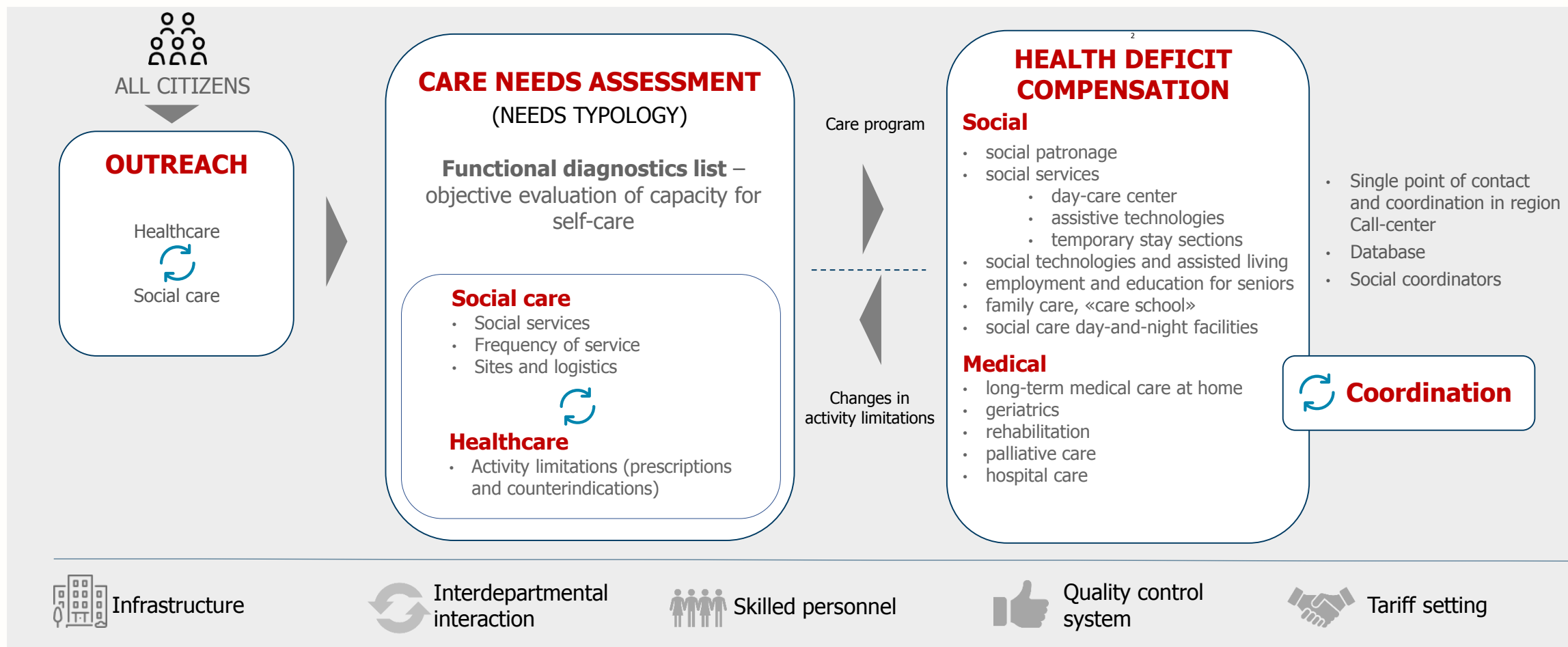
Key strategic considerations

Quality of life of the old is not about the old –
it defines the **quality of the country**

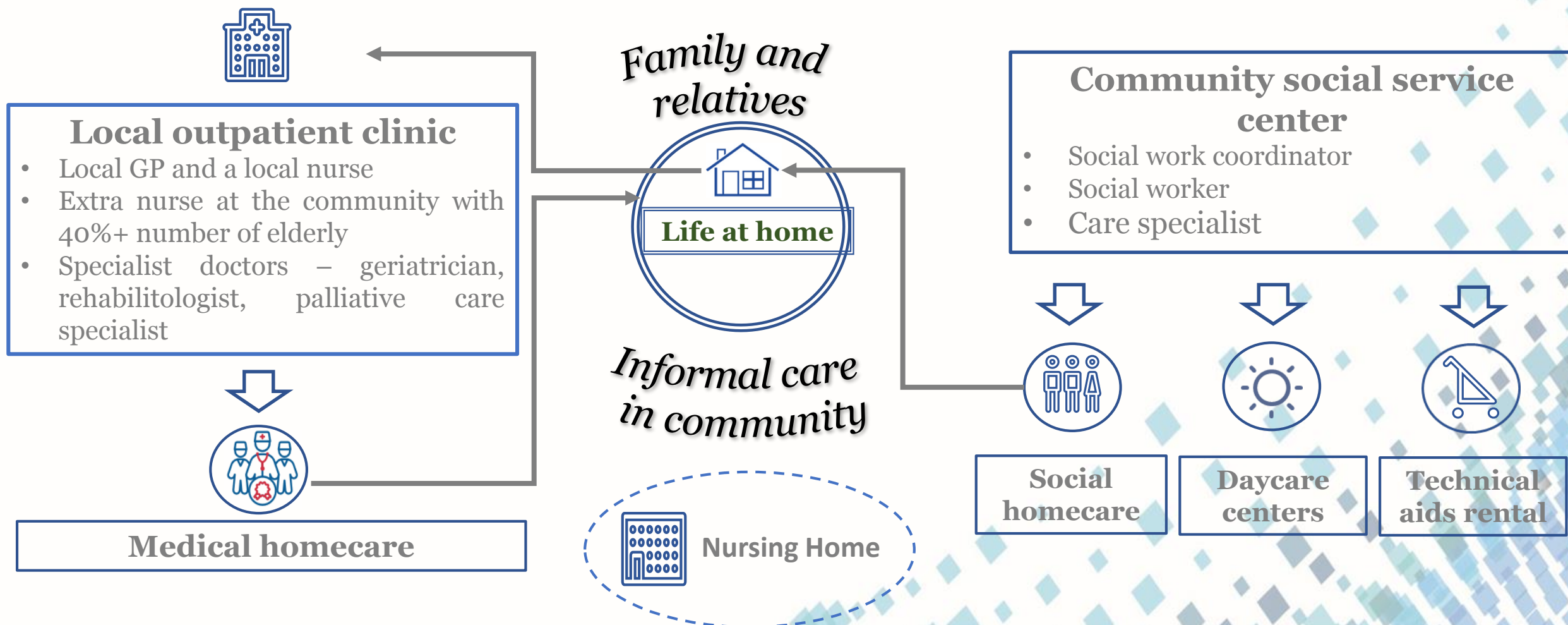
When helping children - aim at **individual result**

When helping the old – aim at **the system**

New approach to LTC



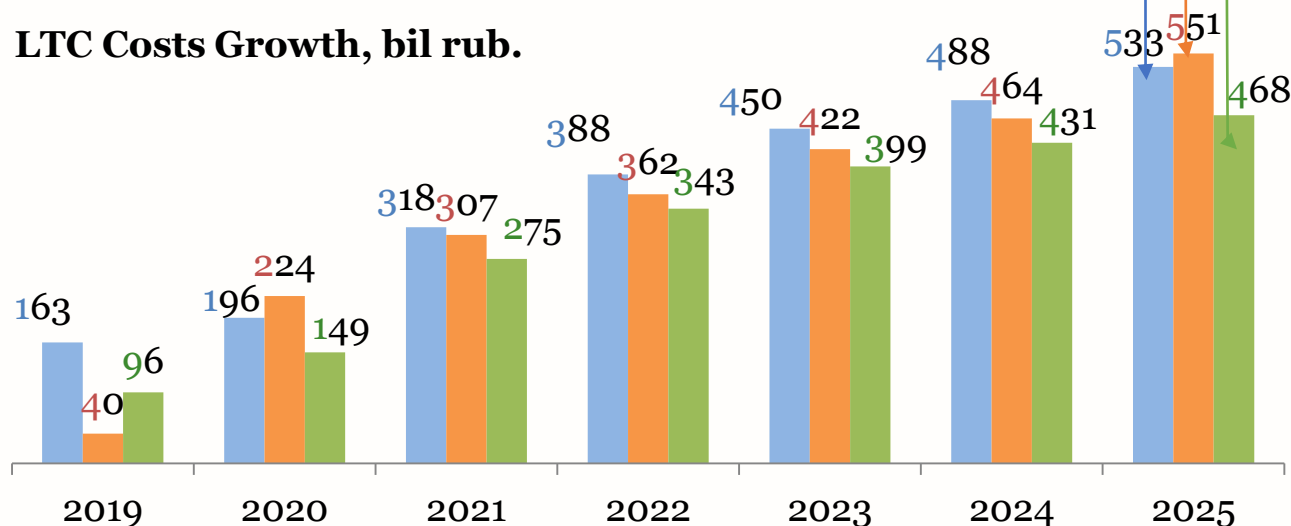
Providers



Financing

- State budget funding
- Non-budget funding
- Return to the budget

LTC Costs Growth, bil rub.



LTC development will **triple** the budget costs by 2025

- The part of private funding will raise from **19,8%** in 2019 to **50,8%** in 2025
- The return from LTC operations will ensure sustainability from 2022
- The amount of budgetary expenses for LTC will not exceed 0,5% GDP (currently – 0,16% GDP)

Barriers and facilitators

Planning and development process

The current fragmentation between authorized government body is extremely strong and it required a long negotiation process



The idea of LTC implementation was developed by a group of public activists, scholars and experts and it was supported by the President who issued special instructions to the government

Implementation

There are huge differences between Russian regions



The decision was made to take a bottom-up approach through pilot regions

Implementation

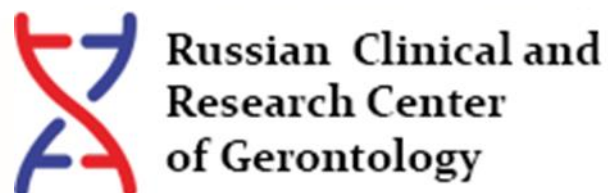
Lack of professional personnel



The project included extensive educational programs

Challenges ahead

- Public opinion towards the elderly – overcoming ageism
- The growth of the system costs will require new funding systems (e.g. LTC insurance)
- The National Projects may fall into the competence gap
- Resistance towards changes



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