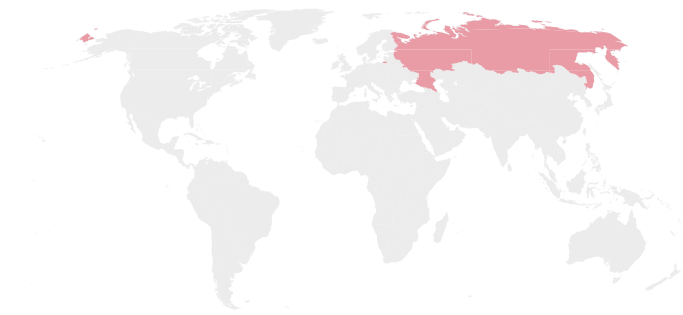


CRC 1342 No.21

# Social Policy **Country** Briefs



Russian  
Federation

Liliya Zenina

## **The Long-Term Care System in the Russian Federation**



Global Dynamics  
of Social Policy CRC 1342



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**Liliya Zenina**

The Long-Term Care System in the Russian Federation

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# The Long-term Care System in the Russian Federation

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# THE LONG-TERM CARE SYSTEM IN THE RUSSIAN FEDERATION

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Liliya Zenina\*

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## 1. COUNTRY OVERVIEW



Source: <https://ontheworldmap.com/russia/> (Accessed: June 01, 2021), the disputed territory is shaded

- » Sub-Region: Eastern Europe
- » Capital: Moscow
- » Official Language: Russian – on the federal level
- » Population size: 144,386,830 (the Federal State Statistics Service of Russia, value 2020 without disputed territory)
- » Share of rural population: 25.4% (UN 2021, value 2020)
- » GDP: 1.7 trillion US\$ (WB 2021, value 2019)
- » Income group: Upper middle income (WB 2021)
- » Gini Index: 37.5 (WB 2021, value 2018)
- » Colonial period and Independence: N/A

## 2. LONG-TERM CARE DEPENDENCY

### a. Population statistics

**Table 1.** Older population in Russia (2020)

	Total number, people	Share of total population
Population 60+	32,225,114	22.32%
Population 70+	14,097,073	9.76%
Population 80+	5,576,781	3.86%

Source: according to the Federal State Statistics Service [https://gks.ru/bgd/regl/b20\\_111/Main.htm](https://gks.ru/bgd/regl/b20_111/Main.htm), and refers to January 1, 2020, without data of disputed territory

**Table 2.** Population with disabilities (2020)

	Total number	Share of total population
Population with all types of disabilities, incl.	11,044,547	7.65%
Group 1	1,407,924	0.98%
Group 2	5,149,593	3.57%
Group 3	4,487,030	3.11%
Population with disabilities 60+	6,904,181	4.78%

Source: Federal Register of Persons with disabilities of the Pension Fund of the Russian Federation, <https://sfri.ru/analitika/chislennost> with reference to January 1, 2020, without data of disputed territories. Group 1 refers to most severe types of disabilities

## b. National definition and measurement of long-term care dependency

Currently, the long-term care (LTC) system is in the implementation phase in a number of the federal subjects of Russia. By 2024, the LTC system is planned to be established in all Russian regions (Ministry of Labor and Social Affairs 2021a, 20), while since 2022, all Russian regions will be involved into the development of the LTC services (Ministry of Labor and Social Affairs 2021b, 70).

According to the new model of the LTC system (hereinafter: the LTC model of 2020) for older persons and persons with disabilities in need of care (Ministry of Labor and Social Affairs 2020a), persons in need of care include older citizens and persons with disabilities, including citizens with mental disorders. The need for long-term care occurs with a person's complete or partial loss of ability to care for themselves, move independently, or meet their own life-sustaining needs due to illness, injury, age, or disability.

To determine and categorize a citizen's individual need for care, the following data is taken into consideration: data from questionnaires on a citizen's functional independence and cognitive abilities, assessments of medical boards, results from clinical check-ups; medical and social examinations (in case of a disability), examination of the living conditions, and information from people in contact with the respective citizen. Based on the examination, the level of need, and consequently the number of care hours and a place for care provision, should be determined. According to the LTC model of 2020 (paragraph 25), there are three levels of need in LTC services:

- » Level 1: equivalent to one to several hours a few times a week
- » Level 2: from one to several hours daily
- » Level 3: from a few hours to 24 hours daily, including night hours

Due to the ongoing process of LTC implementation, including the specification of terminology and methods for measuring LTC dependency, the precise number of people who are in need of LTC services according to the new model will be clarified after the implementation of the system.

Estimates of the number of people who will need LTC services vary. In 2025, according to one estimate, 4.5 million people requiring home care services and 0.52 million people needing institutional care services (Tkacheva 2019, 26). To another estimate, 4.3 million people will need social services, including 1.2 million people receiving LTC services (31% unmet need in LTC), while the need in LTC services will be met by 2032 with 1.8 million people receiving LTC services (Shkrebelo 2021, 9 and 13).

## 3. LEGAL INTRODUCTION OF THE PUBLIC SCHEME ON LONG-TERM CARE

The gradual work on the introduction of the new comprehensive LTC system comprised several steps (Figure 1). Previously, before the introduction of the new LTC system, older people and people with disabilities were also covered by a wide range of social services at home, in semi-stationary and residential facilities. The legal documents that regulated the service provision included, for instance:

- » Federal Law No. 122-FZ from 02.08.1995 "On the Basic Principles of Social Services for Older Citizens and Citizens with Disabilities" (now no longer in force);
- » Federal Law No. 181-FZ from 24.11.1995 "On the Social Protection of People with Disabilities in the Russian Federation" with all related amendments;

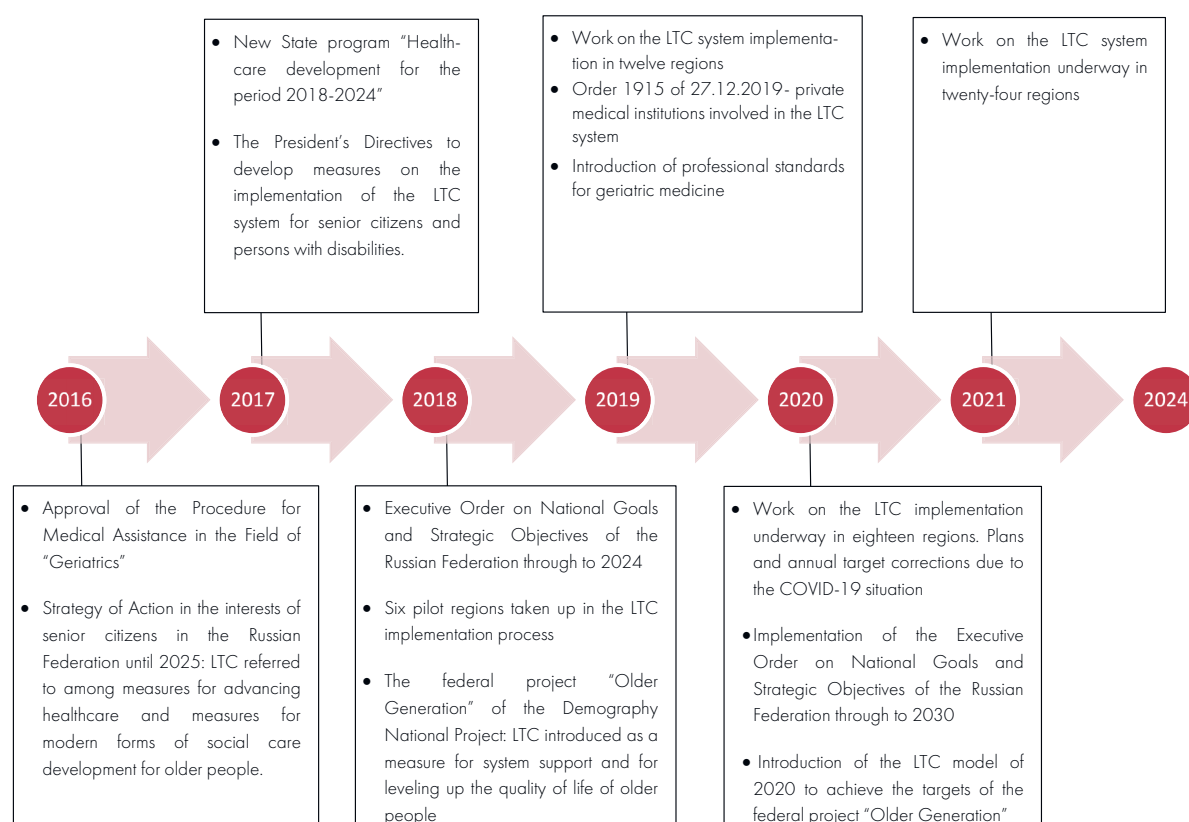
- » Order of the Ministry of Health No. 297 of 28.07.1999 “On Advancing Medical Assistance to Older Citizens in the Russian Federation”;
- » Federal Law No. 442-FZ of 28.12.2013 “On the Basic Principles of Social Services for Citizens in the Russian Federation” with all related legal amendments (hereinafter referred to as Federal Law No. 442-FZ).

According to the LTC model of 2020, the LTC system is based on inter-agency cooperation. It is a system for the organization and provision of social, medical, rehabilitative and other services to citizens in need of care by authorized bodies and organizations, and it also includes assistance in the provision of these services. LTC is defined as the provision of social services (including technologies and solutions developed to replace inpatient care) to citizens in need of care, in order to ensure comfortable and safe living conditions, to help them maintain independence and reduce dependence on outside help, and to integrate these citizens into society (the Ministry of Labor and Social Affairs 2020a).

The implementation of the LTC system offers new solutions and advancements in care services, including the identification of people in need of care; call-centers on LTC issues; a database on LTC; the development of day-care centers; medical and social home care services; schools of care for relatives who are informal caregivers; educational programs for medical workers in geriatrics and social workers; new clinical recommendations and medical standards; and assistive technology rental facilities (Tkacheva 2019; the Ministry of Labor and Social Affairs 2020a).

One step of the LTC development is its incorporation into a number of state programs related to healthcare, social services, modernization of infrastructure, and further training for medical and social care workers, all of which aim to increase lifespan and improve the quality of life, medical and social services for Russian citizens.

Figure 1. The ongoing process of the development of the LTC system in Russia



Source: made by the author based on the legal documents available on October 2021

- The organization of geriatric medicine was regulated by the Order of the Ministry of Health No. 297 of 28.07.1999. This milestone in development was superseded by Order No. 38n of 29.01.2016 “On procedures for providing medical help in the field of geriatrics”. This order defines geriatrics as a system

of long-term medical and social care in coordination with different organizations of the healthcare system (Tkacheva 2016, 34).

In 2016, the Russian Government approved the Strategy of Action in the interests of senior citizens in the Russian Federation until 2025. The main goal of the Strategy is an increased lifespan and leveling up of the quality of life of senior citizens. The measures covered a wide range of issues including the development of geriatrics, a standard of medical care for old-age asthenia, a strategy for a healthy lifestyle and control of non-communicable diseases, engagement of nongovernmental organizations in social services provision, development of some aspects of family care and work of social caregivers, and LTC services (the Russian Government 2016).

- In August 2017, as a result of the meeting with socially oriented non-profit organizations, charity foundations and voluntary work organizations, the President approved a list of instructions on developing measures to create the LTC system for senior people and persons with disabilities, and allocating funds in the federal budgets of 2018-2020 (the President of Russia, 2017).

In December 2017, the new state "Healthcare Development Program" for the period 2018-2025 was approved by Russian Government. The Healthcare Development Program has progressed and included the LTC development. Based on the amendments of July 2021, the Healthcare Development Program has set targets until 2024, including an increased average lifespan to 73.6 years, lower mortality rates from all causes to 13.4 per 1000 people, deaths due to cardiovascular diseases to 55.5 per 100,000 people, deaths due to neoplasm to 19.1 per 100,000 people, and improved satisfaction with the quality of medical care (the Russian Government 2021a).

- In May 2018, the President signed Executive Order on National Goals and Strategic Objectives of the Russian Federation until 2024. The President identified increasing life expectancy to 78 years by 2024 (80 years by 2030) as one of the national development goals (the President of Russia 2018).

In July 2018, in six pilot federal subjects (Volgograd Oblast (1), Kostroma Oblast (2), Novgorod Oblast (3), Ryazan Oblast (4), Tula Oblast (5), Pskov Oblast (6) (cf. Map 1) started the work of adjusting and developing the new LTC system regulated by Order 435 of 29.06.2018 of the Ministry of Labor and Social Affairs. For the period 2018-2024, regions and all related organizations are required to work on

- » improving procedures for identifying citizens in need of social and health care services
- » defining the criteria for assessing circumstances that worsen the living conditions of senior citizens
- » enhancing inter-agencies' coordination and cooperation mechanisms
- » developing and supporting family caregiving
- » developing professional education for specialists involved in LTC provision (the Ministry of Labor and Social Affairs 2018).

In September 2018, in support of the national goals to increase the Russian population and longevity by 2024, the Demography National Project was approved. The project consists of the five federal projects, including the federal project "Development and implementation of a program on a systematical support and improvement of the quality of life of senior citizens" (shortly the federal project "Older Generation"). The federal project "Older Generation" set the goal to cover people above working age and people with disabilities in need of social services with LTC services. According to the version of September 2021, the federal project "Older Generation" identified the aims

- » in 2021, 13.2% out of total number of older people and people with disabilities receiving services in institutional care facility. In 2025, the share is reaching 15.2%
- » in 2021, 5.8% out of the total number of older people and people with disabilities in need of LTC receiving LTC services. In 2025, the share is reaching 50.0% (Ministry of Labor and Social Affairs of the Russian Federation 2021b, 3).

The medical aspect of LTC was strengthened by the approved Clinical Recommendation on Senile Asthenia (Ministry of Health 2018) and the publication of the Russian care recommendations for frail older people (the Ministry of Health et al. 2018), that cover a wide range of care situations including senile asthenia, limited mobility and hygiene issues.



- In 2019, the improvements and developments to the new LTC system continued in 12 federal subjects including: Volgograd Oblast (1), Kostroma Oblast (2), Novgorod Oblast (3), Ryazan Oblast (4), Tula Oblast (5), The Republic of Mordovia (7), The Republic of Tatarstan (8), Kamchatka Krai (9), Stavropol Krai (10), Kemerovo Oblast (11), Kirov Oblast (12), Moscow (13) (Map 1) based on Order 128 of 28.02.2019 of the Ministry of Labor and Social Affairs of the Russian Federation. The work included the following activities:
  - » in social services, e.g. improving the provision of social services at home, in semi-institutionalized and institutionalized forms of social services; developing and supporting family care for senior citizens and persons with disabilities; education and training for employees of social service organizations; development of stationary substitution technologies; development of social assistance and mobile teams; monitoring of the quality of LTC services;
  - » medical help such as advancing preventive care, geriatrics, palliative care and rehabilitation; development of assessment criteria in social and personal services; implementation of measures on diagnosis of cognitive impairments; educational programs for medical workers; inter-agency information exchange (the Ministry of Labor and Social Affairs 2019).

To develop the methodology aspects of the LTC system and participate in the preparation of specialists for pilot regions, a non-governmental organization the Enjoyable Aging Charity Foundation was engaged. Representatives of the Foundation collected information about the best practices and the service quality in institutionalized care facilities, consulted and made trainings for specialists, prepares guidelines for LTC service provision<sup>1</sup>. In 2019, besides the pilot regions, other regions proactively became engaged into the works on the LTC system implementation (Shkrebelo 2019); some of them, would be included in the pilot regions of 2021.

The development of geriatrics as an indispensable aspect of the LTC system began in 2019 with the introduction of a professional “Geriatric Doctor” qualification by Order 413n of 17.06.2019 of the Ministry of Labor and Social Affairs and the publication of methodical recommendations entitled “Program of prevention, early detection, diagnostics and treatment of cognitive disorders in people of old and senile ages” (Russian Clinical and Research Center on Gerontology 2019).

- In July 2020 the President signed the Executive Order on National Goals and Strategic Objectives of the Russian Federation through to 2030, which included ensuring the sustainable growth of the population of the Russian Federation and increasing life expectancy to 78 years by 2030 (the President of Russia 2020).

Additionally, six more regions became the LTC pilot federal subjects including the Republic of Buryatia (14), Altai Krai (15), Tambov oblast (16), Voronezh oblast (17), Novosibirsk oblast (18), Tyumen oblast (19) (Map 1). Thus in 2020, 18 pilot projects were involved. In addition to the activities from 2019 described above, the order also approved the Plan of involving private medical institutions in the care system (the Ministry of Labor and Social Affairs 2020b) pursuant to Order 1915 on 27.12.2019 of the Russian Government “Implementation in the constituent entities of a pilot project to involve private medical organizations in the provision of medical and social services to persons aged 65 or over who are citizens of the Russian Federation, including those living in rural areas” (the Russian Government 2019b).

The Ministry of Health approved the clinical recommendation for the six most common diseases in geriatrics. Besides, the methodological recommendation, “Complex of measures aimed to prevent falls and fractures among people of older and senile ages”, was adopted in December 2020 (the Ministry of Health of the Russian Federation 2020a).

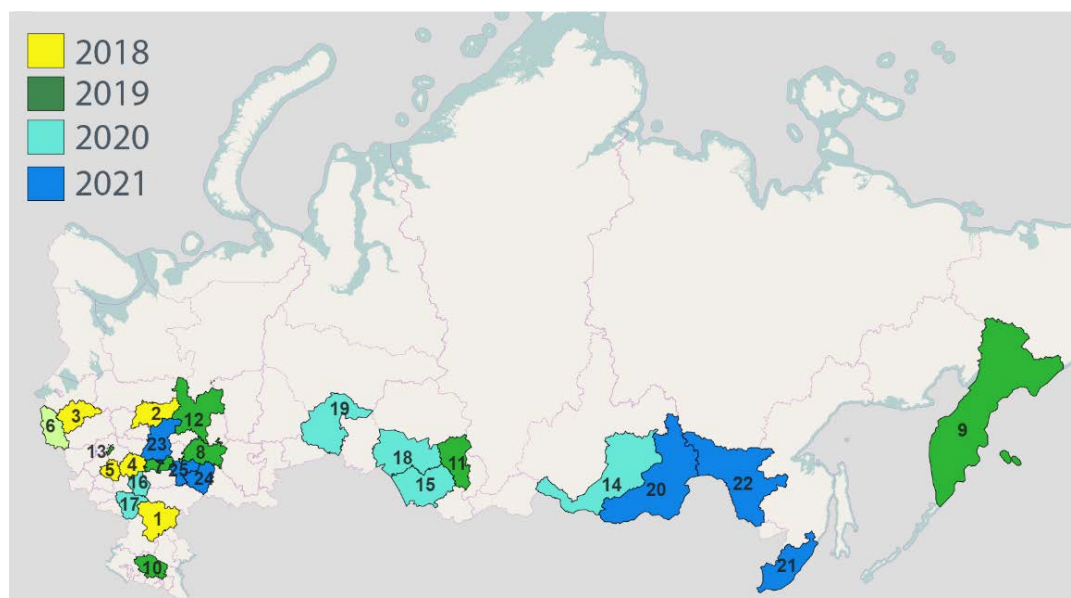
The COVID-19 pandemic disrupted the LTC implementation plans of 2020 and the development of a geriatric system in Russia due to measures to protect older people and people in higher-risk categories, temporary suspensions of planned hospitalizations, medical check-ups, re-dedicating gerontological beds for patients infected with COVID-19 (the Ministry of Health 2020b).

- In 2021, six more regions were included in the ongoing LTC implementation (Zabaykalsky Krai (20), Primorsky Krai (21), Amur Oblast (22), Nizhny Novgorod Oblast (23), Samara Oblast (24), Ulyanovsk Oblast (25) (Map 1), so that a total of 24 regions were involved in the pilot project (Map 1). The Order approved the activity plan and roadmaps for the further implementation and advancement of the LTC model of 2020

<sup>1</sup> <https://starikam.org/sdu/>

and related documentation, including the opening of daycare centers, intensive work on citizens' assessments of their levels of need in LTC services, work on an electronic data base of LTC patients, involvement of voluntary and non-profit organizations in cooperation for the further development of the LTC system (the Ministry of Labor and Social Affairs 2020c).

Figure 2. Federal subjects involved in the pilot project on LTC system development in Russia in 2018-2021 \*



Source: made by the author based on the currently available legal documents.

Notes: \*The map shows only a part of the Russian territory to highlight pilot regions in the LTC system implementation; \*\* Pskov Oblast (6) was among the pilot projects only in 2018

- Starting in 2022, all Russian regions are to implement activities to introduce long-term care services by 2024. The activities will be based on analyses of the pilot regions from 2019-2021 (Ministry of Labor and Social Affairs 2021b, 70). In 2022, the government aims to provide long-term care services to 30% of all older people in need of care and people with disabilities (Ministry of Labor and Social Affairs 2021b, 8).

#### 4. DESCRIPTION OF THE PLANNED LONG-TERM CARE SYSTEM

The description provided is based on current information and the LTC model of 2020. Since the adjustment process of the LTC system is still ongoing, the model implemented in 2024 may include changes.

##### a. Organizational structure

The implementation of the LTC system is carried out by the Ministry of Labor and Social Affairs of the Russian Federation, the Ministry of Health of the Russian Federation, the Ministry of Finance of the Russian Federation, the Ministry of Economic Development of the Russian Federation, the Agency for Strategic Initiatives, the Social Insurance Fund of the Russian Federation, the Enjoyable Aging Charity Foundation and other actors.

According to the LTC model of 2020, actors of the LTC system are:

- » The Social Insurance Fund of the Russian Federation,
- » Executive bodies of the Russian Federation in social sphere
- » Authorized organizations (social services institutions, medical and educational organizations, federal institutions of medical and social examinations)
- » Insurance experts of the Social Insurance Fund
- » Employees of authorized organizations involved in the provision of the LTC services

- » Citizens providing care
- » Citizens in need of care

#### b. Service provision

The points of access for people eligible for LTC services are based on an application principle (when a person or their representative themselves request LTC services) and an identification principle (which, for instance, medical institutions, organizations of social services, police, neighbors may request for a person in need) (Svischeva 2021; the Ministry of Labor and Social Affairs of the Russian Federation 2020, Section V).

The social LTC package provided to citizens in need of care is free of charge and covered by the state. It includes social services in different forms of social provision, and support in receiving medical, psychological, pedagogical, legal, and social assistance that is not related to social services.

Social services include:

- » Social and housing services such as cooking and feeding; provision of food, rest and sleep in day-care facilities; assistance in personal hygiene; help with functional mobility; care for citizens unable to control their behaviors to ensure their safety.
- » Socio-medical services including assistance in medical treatment and taking medication.
- » Services for enhancing communication including usage of rehabilitative equipment, learning alternative ways of communication, communication for comforting people (listening, encouraging), assistance in communication with relatives and close people.

Social assistance within the LTC package includes:

- » Free-of-charge medical help at home and in organization of palliative care, medical check-ups, medical rehabilitation, anti-epidemic measures including vaccination.
- » Medication free of charge;
- » Psychological, pedagogical, legal help;
- » Rehabilitation and habilitation;
- » Other assistance.

The priority form of care are domiciliary and semi-stationary care, their combinations, and variants of inpatient care such as family care support and foster family placement. The LTC service packages that are currently being trialed and tested in the pilot regions cover from 7 to 28 hours services per week at home depending on the need level (the LTC model of 2020, paragraph 44); or not less than 28 hours services in combination with home and semi-stationary services including daycare centers (the LTC model of 2020, paragraph 45) . The services are provided predominantly by the state.

Since 2020, chosen private medical institutions have been involved in the LTC system providing domiciliary medical and social services. According to the federal project "Older Generation", there are plans to expand the share of nongovernmental organizations in the LTC system to 15.4% in 2022, and up to 20.1% in 2024 (the Ministry of Labor and Social Affairs 2021 b, 3).

#### c. Financing

LTC is financed through the federal budget; budgets of the federal subjects of the Russian Federation; the funds of the Compulsory Medical Insurance system; the Social Insurance Fund of the Russian Federation.

In case more extensive care is needed than that covered by the LTC package, a citizen can be placed in stationary care facilities or opt for receiving additional paid care services beyond the free-of-charge LTC service packages according to Federal Law No. 442-FZ.

#### d. Regulation

The implementation of LTC system is regulated by a number of Laws, including:

- » Federal Law No. 181-FZ of 24.11.1995 "On Social Protection of People with Disabilities in the Russian Federation" with all related amendments;

- » Federal Law No. 152-FZ of 27.07.2006 "On Personal Data" with all related amendments;
- » Federal Law No. 323-FZ of 21.11.2011 "On Basic Health Protection of the Citizens in the Russian Federation" with all related amendments,
- » Federal Law No. 273-FZ of 29.12.2012 "On Education in the Russian Federation" with all related amendments
- » Federal Law No. 442-FZ of 28.12.2013 "On the Basic Principles of Social Services for Citizens in the Russian Federation" with all related amendments and legal acts;
- » legal acts of the Federal subjects of Russia.

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