

Report on plan for promoting the availability and development of long-term care services in Latvia

In accordance to the Council recommendation on access to affordable high-quality long-term care¹

1. Context and baseline

The **context section** should aim to establish the **baseline** for reporting. As such, it should outline the specificities of the LTC system design and **identify the gaps or remaining challenges** in relation to the policy objectives of the Recommendations.

1.1. *Diagnosis of the gaps and remaining challenges*

This section provides a **brief assessment of the national situation** in relation to the building blocks of the LTC Recommendation, identifies **challenges to be addressed** (if there are any). To the extent possible, the assessment, identification of challenges and good practices should be mapped with the relevant articles/ letters of the Recommendation. It could rely, inter alia, on Semester Country Reports/ Country Specific Recommendations/ National Reform Programmes/ Recovery and Resilience Plans, 2023 SPC Annual Report, 2021 EC-SPC report on LTC.

The aim of the *European Commission's Council Recommendations*¹ on access to affordable high-quality long-term care (hereinafter - Council Recommendation) is to improve access to affordable and high-quality long-term care for all people who need it. In order to promote the achievement of this goal, each member state develops a set of measures that promote the availability, quality and adequacy of long-term care services in the country, promote the attraction of employees and their current situation, as well as improve the situation related to long-term care management, monitoring and reporting.

Considering that health care and social care are separated in Latvia, according to the current situation, the evaluation applies to all types of long-term social services, including services at the person's place of residence (care at home, day care center service, group home (apartment) service) and services in long-term social care institution.

The goal of Latvia's social policy² - "to increase the availability of community-based services, promote the persons transition to community-based or family-oriented services, while improving the quality of services provided in long-term social care institutions in accordance with the individual needs and self-care abilities of the person" is consistent with the *European care strategy*³ and *Council recommendations*¹. Social policy development planning document "*Social protection and labor market policy guidelines 2021-2027*"⁴ (hereinafter - the Guidelines) provides the promotion of social protection of the population, the reduction of income inequality and poverty, the development of accessible social services that meet individual needs and the system of legal support, and the measures included in them contribute to the creation of a modern and accessible social service system, which, among other things, improves the opportunities for the population to live independently and live in society. In order to ensure the implementation of the Guidelines, the "*Social Services Improvement and Development Plan 2022-2024*"⁵ has been developed and approved, which determines the measures to be taken in the short term to promote the smooth development of social services that meet the needs of individuals.

In Latvia, social services are mainly organized and provided decentralized, i.e. the municipality is responsible for the availability and provision of services, incl. for long-term social services. The state organizes and provides long-term social care and social rehabilitation services in the institution (hereinafter - long-term care institution) for the following groups of society - children and adult persons with severe and very severe mental disorders, adult blind persons, children up to the age of 2 who have been left without dependent parents, as well as children up to the age of 4, with severe or very severe mental disorders, functional disorders or combined disorders, and for whom it is not possible to provide care in family. Other long-term care services – care in a long-term care institution for other target groups, care at home, day care center, group home

¹ Council recommendation on access to affordable high-quality long-term care. <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A52022DC0441>

² Ministry of Welfare: Social services, <https://www.lm.gov.lv/lv/socialie-pakalpojumi-0>

³ A European Care Strategy for caregivers and care receivers. https://ec.europa.eu/commission/presscorner/detail/en/ip_22_5169

⁴ Approved by the Cabinet of Ministers 01.09.2021. order no. 616 "On Social Protection and Labor Market Policy Guidelines 2021-2027". Available: <https://likumi.lv/ta/id/325828-par-socialas-aizsardzibas-un-darba-tirgus-politikas-pamatnostadnem-2021-2027-gadam>

⁵ Approved by the Cabinet of Ministers on 30.03.2022. order no. 231 "On the Social Services Improvement and Development Plan 2022-2024". Available: <https://likumi.lv/ta/id/331256-par-socialo-pakalpojumu-pilnveidosanas-un-attistibas-planu-2022-2024-gadam>

(apartment), respite care, etc. - are organized and provided in the municipality or with the financial support of the municipality. However, in order to promote the development of certain community-based services, co-financing is provided from the state budget to municipalities for the provision of services, e.g. for the creation and operation of a day care center for persons with mental disorders, a care service for children with severe and very severe functional disabilities for whom the State Commission has determined disability and issued an opinion on the need for special care.

The Ministry of Welfare, as the leading ministry of the sector, ensures the development of laws and regulations, maintains the register of social service providers, as well as provides control functions of social services, while the municipality, according to the Law on Municipalities, is obliged to provide support to its residents in solving social problems, including being responsible for the citizens opportunities to receive social services and social assistance.

According to the Law on Municipalities, the provision of social services is an autonomous function of the municipality. The municipality itself decides on the services to be provided, the content and the way in which residents can receive services. Accordingly, in the context of Latvia, local governments would be directly responsible for the implementation of the *Council's recommendation on the need to expand the offer of long-term care services, including by developing and improving care at home and community-based care*.

However, the situation in municipalities differs and each municipality, according to its financial capabilities and set priorities, provides social services of various sizes. After the Administrative territorial reform implemented in 2021, when the number of municipalities was reduced from 119 to 43 municipalities, the availability of social services increased, however, all services are still not available in all municipalities. In order to promote the availability of services throughout the country, various support measures for local governments have been implemented so far, for example, during the 2014-2020 European Structural and Investment Fund and Cohesion Fund planning period, to improve the availability of community-based services, 70 projects were implemented in 39 municipalities with ERDF support, where investments were made in a total of 228 community-based social service infrastructures - daycare centers, group homes (apartments), family-oriented care services, etc., giving municipalities the opportunity to expand the range of available services and the number of people who received support. Also, in the 2021-2027 planning period, it is planned to develop more and more accessible social services that meet individual needs, incl. long-term social services for people with limited ability to take care of themselves due to both functional impairments and age, paying special attention to people with very severe functional impairments, expanding and developing community-based social services, as well as *promoting regional coverage in the provision of services*. Also, there is currently a coordination process at the government level regarding the amendments to the Law on Social Services and Social Assistance, determining the mandatory range of social services in the municipality, both equalizing the availability of services and reducing territorial differences.

As one of the good examples, to promote the ability of individuals to participate in community life and daily activities, including to receive the support they need, to foster the independence of individuals and increase the ability to engage in self-care, home life-related or social activities is the project "Support measures for people with disabilities to ensure the accessibility of the housing environment" implemented with the support of RRF funding. Within the framework of the project, 259 persons of working age with movement and mobility impairments are provided with home adaptations so that the person can move independently in the home, as well as be able to get in and out of it, in order to promote and increase the persons' independence and ability to engage in daily and outdoor activities, incl. in employment, receiving services, etc. The project is currently in the implementation stage and it is expected that by the middle of 2026, 259 persons with disabilities will be provided with housing adaptation by providing an accessible place of residence, in this way promoting the mobility of persons in the home environment and outside, reducing the risk of social exclusion of persons, providing the opportunity for persons to receive necessary services closer to the place of residence.

In relation to the financial availability of services, the regulation in Latvia states that the client or his dependent is obliged to pay for the long-term social care service provided by the municipality, but if the client or his dependent is unable to pay for the service, the service is financed from the municipality's budget. According to the 2023 OECD assessment and data compilation on *Adequate social protection in long-term care*⁶, it was identified that in Latvia, the costs of care for persons with very high care needs are higher than the person's income, and if local government support is not provided or the person has no dependents, the person is not

6Mutual learning workshop on adequate social protection in long-term care [Measuring social protection for long-term care \(oecd.org\)](https://www.oecd.org/publications/measuring-social-protection-for-long-term-care/)

able to cover care expenses. Also in the *2021 long-term care report*⁷ (hereinafter – 2021 long-term care report) jointly developed and published by the *Social Protection Committee and European Commission* it was identified that financial reasons for not using professional homecare services were mentioned by 37.9% of respondents, and the unavailability of services by 16.2%, in 2016, which indicates the limitations of the availability of services related to both the financial capabilities of individuals and the availability of services as such. Since 2016, the availability of services has increased, which is also found in this report - there has been a significant increase in homecare provision in both cities and rural municipalities. However, in 2018, municipalities paid – either in part or in full – for 96 % of the costs of social care. Financial support by local authorities for homecare doubled during 2014-2018. LTC recipients are highly dependent on the financial capacity of municipal budgets, which vary greatly within the country. Payments by the municipalities are crucial for ensuring LTC for older people. The growing spending on residential care centres for older people may become a rather challenging issue for municipalities in future. When evaluating the preliminary data on the use of funds in the provision of long-term institutional care services in 14 Latvian municipalities, comparing the costs of the service in 2022 with the costs of 2023, it has been concluded that the costs of the service, with a slight increase in the number of recipients, have increased by an average of 26 million/euro, or 14.3%, but the cost of long-term home care at the same period have increased by 9.5 million/euro, or 22.7%, indicating a significant financial investment from municipalities in providing long-term care services. In addition, the burden on municipal budgets is expected to increase due to population aging and depopulation. Due to the mentioned problems, it is essential to plan improvements in the system in order to promote the financial availability of services, for example, by evaluating the possibilities of introducing social care risk insurance, as well as by analyzing and planning the necessary support for municipalities, so that long-term care services are provided and become even more accessible to the persons for whom they are necessary.

In addition, it should also be pointed out that, taking into account both the existing service payment procedure and cultural customs, where it is assumed that a loved one takes care of the relatives to be cared for, as well as due to other factors, people often do not turn to the social service of their municipality at all to inform about their care needs, or information about the need for support is provided late, when a great deal of support is already needed. This indicates that local governments do not have enough objective information about the true condition of their residents and the number of people who really need care - the information is only about those persons who have applied for support in the social service. It also indicates the ignorance of citizens about the availability of support or other aspects that influence their willingness to ask for support. Incomplete data complicates the possibility of adequately planning the future development of services both for the municipality itself and for the country as a whole, which closely resonates with the necessary improvements mentioned in the *Council's recommendations to promote that long-term care services are in a timely manner, comprehensive and affordable*.

In connection with the availability of information and data, *Council recommendations, European care strategy* and other documents also widely reflect the need to expand the use of digital tools, both by promoting the provision of innovative services and by expanding the implementation of digital tools in the provision and planning of care records. The *2023 Social Protection Committee Annual Report*⁸ also states that digitalization and other innovative solutions can help improve working conditions as well as empower longer independent living at home. *2021 long-term care report* mentions that systematic monitoring of care processes by the Ministry of Welfare, and evaluation of public policies in the field, would be rather useful. Although work on digitalization of processes is ongoing in Latvia, nevertheless, taking into account the above, as well as being aware of the current situation, it is necessary to strengthen the use of digital tools used in the industry, including, for example, ensuring the creation of an appropriate care accounting platform that is understandable and usable for every employee involved in the care process. Thus, it is planned to create an informational system "e-care", which ensures the accounting of clients, their needs and limitations, provides an opportunity to plan and predict potential client needs and changes in the number of clients, as well as ensures high-quality collection and storage of information about the overall situation and individual service provision places, both in municipalities and in the country as a whole.

7 The 2021 Long-term care report. <https://ec.europa.eu/social/main.jsp?catId=738&langId=en&pubId=8396>

8 Social Protection Committee Annual Report 2023. <https://ec.europa.eu/social/BlobServlet?docId=27173&langId=en>

In *Council recommendation* on the 2023 National Reform Program of Latvia and delivering a Council opinion on the Stability Program of Latvia⁹ Recommendation 1 indicated that in 2023 and 2024 Latvia was recommended – “(..) to strengthen the adequacy of health care and social protection”. Taking into account the aforementioned recommendation and referring to the *Council recommendations* on the *need to increase coherence with other policy areas*, activities have already been carried out in 2023 to improve the interaction between health and social spheres, for example, within the framework of the state budget, persons with palliative care (hospice) needs are provided with a mobile team palliative care service at the person's place of residence, where persons are provided with integrated health and social care, incl. support is also provided for relatives, incl. during the mourning period¹⁰. Also, since the beginning of 2024, a pilot project - a psychosocial rehabilitation service - has been implemented for children with autistic spectrum disorders, within the framework of which 100 children, after being diagnosed with autism or suspected of having autistic spectrum disorders and after receiving an early intervention program in a medical institution, are provided with maintenance therapy, for example, ABA therapy, occupational therapist, speech therapist or audio-speech therapist classes, providing a multidisciplinary and interdisciplinary approach.

After the results of the integrated inspection of the Health Inspectorate and the Ministry of Welfare "On the quality of care provided to clients in social care institutions"¹¹ carried out in 2020, it has been concluded that in long-term care institutions, the proportion of clients with very severe care limitations is increasing, and an integral part of the care of such clients is complex and responsible treatment processes, which requires personnel with medical education and caregivers with education and skills to care for clients with specific needs. Taking this into account, as well as referring to the *European Care Strategy*, which mentions that *long-term care services that are integrated improve quality of life and health outcomes and can contribute to cost-effectiveness*, work has been initiated to establish health points in long-term care institutions with 49 or more client places to increase the availability of healthcare professionals and the provision of care appropriate to health and functional capacity needs.

Although various activities and projects are implemented in cooperation with the health care sector, it should be taken into account that social care services, including long-term care services, are financed from the budget of the social services field (Ministry of Welfare or local government budget), while health care services are financed from the budget of the Ministry of Health. Taking into account the distributed responsibilities and limited financial means for each area, cooperation between ministries is still rather complicated, long and extensive discussions are necessary on the development of existing and new services, and there are often difficulties in agreeing on the distribution of funding, considering that funding comes from two individual ministries. This, in turn, limits the development and provision of appropriate, person-needs-oriented services and indicates that, in general, it is necessary to continue to develop and improve the provision of multidisciplinary and cross-sectoral services (health care + social care) in order to promote the provision of appropriate support focused on the person's needs and abilities at the place of residence or in an institution.

European care strategy and *Council recommendations* also highlight another important problem - the availability of labor - which is related to the insufficient workforce involved in care, the proportion of women in care, the difficult working conditions, as well as low wages, lack of social protection, etc. In *2021 long-term care report* it was identified that in Latvia, as is the case across the OECD and the EU-27 Member States, most workers are middle-aged women. Women represent more than 90% of the LTC workforce in Latvia, unchanged since 2011. The high staff turnover is due to low pay, difficult working conditions, and the low prestige of the caring profession. In order to improve the workforce situation in long-term care, the *Council recommendations* encourage member states to *ensure fair working conditions and skills development for existing and future care workers*, where in Latvia, an example of good practice is the general agreement concluded between the Ministry of Welfare and the trade unions representing social workers. The agreement regulates the working and rest time of the employees of the state-funded long-term care institutions, wages, raising the qualifications of the employees and social guarantees for the employees involved in the care. However, this agreement applies only to workers in state social care centers and long-term care institutions that have a contract with the state for the provision of social care services, while such agreements are a rare practice in local governments. It is essential to continue work on improving the skills and knowledge of

9 Recommendation for a COUNCIL RECOMMENDATION on the 2023 National Reform Programme of Latvia and delivering a Council opinion on the Stability Programme of Latvia. <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A52023DC0614>

10 Cabinet of Ministers 20.02.2024. regulations no. 112 "Paliatīvās aprūpes noteikumi". <https://likumi.lv/ta/id/349961-paliativas-aprupes-noteikumi>

11 2020 integrated inspection of the Ministry of Health and Welfare "On the quality of care provided to clients in social care institutions" <https://www.lm.gov.lv/lv/media/21933/download?attachment>

caregivers, incl. providing care training for specific target groups, promoting education and further education training, promoting skills recognition and career development opportunities to improve the workforce situation.

A large proportion of care needs are provided within the family, i.e. a relative or informal caregiver takes care of the person. As caregiving needs increase, there is an increasing risk that loved ones are forced to reduce their work load or terminate employment due to the caregiving burden, where caregiving is more often carried out by women. It is also stated in the *2021 long-term care report* - A large proportion of care at home is provided informally by family members, relatives, or neighbors. In 2016, the share of people spending 20 or more hours per week on providing informal care or assistance was 33.7 % (26.3 % for men and 37.6 % for women) which was much higher than in the EU-27 (22.2 %). An additional risk identified in the *2021 long-term care report* - Where personal care is provided by family members, the municipality may provide psychological support, counselling, and training, and, if necessary, material support to these family members. As qualification requirements for informal caregivers are not defined, there is no assessment of their skills, resources, and so on. Nor is there a national-level system for assessing the needs of informal caregivers as part of the needs assessment of someone in need of care. The use of material support given for home care services is neither controlled nor monitored at an institutional level. The *Council's recommendations* indicate that it is necessary to support informal caregivers by providing training, counseling, psychological and other types of support, which is implemented in Latvia, but, as already mentioned, adequate monitoring and control of the existing situation is not provided. So, in fact, it is necessary to improve the situation of informal caregivers by improving the identification of the necessary support, the recognition of existing skills and abilities, as well as the additional need for certain skills and knowledge.

As one of the good examples, to improve the knowledge and skills of informal caregivers about providing care is the pilot project implemented by the State Agency for Social Integration, which was launched in mid-2023. In the framework of the pilot project, training modules for informal caregivers are implemented, providing practical and theoretical knowledge on care provision. Within the framework of the pilot project, it is planned to train 100 informal caregivers, where after the end of the training, which will end in the middle of 2025, the developed competence development programs will be improved and approved, further providing training to informal caregivers at the expense of the state budget.

Principle 18 of the European Pillar of Social Rights¹² stipulates that everyone has the right to high quality long-term care services (...). In Latvia, social service providers must be registered in the register of social service providers, so they must meet the requirements set out in the regulatory acts, and it is also necessary to periodically evaluate the services, incl. evaluating client satisfaction with the service. Although the service quality criteria have been determined, it can be said that the currently existing service quality criteria are general, they do not provide full information about the quality of the service in its various aspects, and it is necessary to revise them by setting higher quality criteria and standards in all long-term care services, including care home services, adapting them to the particularities of the respective environment, which is mentioned in the *Council's recommendations*. It is also necessary to strengthen the overall service quality assessment system in order to promote high-quality, person-centered service provision, providing the service in a respectful and safe manner for both the person and the caregiver. Thus, with the support of the ESF+ fund, it is planned to implement a project to increase the efficiency and quality of social services in Latvia in order to determine quality and efficiency criteria corresponding to the specifics of various social services.

It can be concluded that in Latvia, as in the whole of Europe, there are significant signs of the aging of society, as a result of which the demand for long-term care is also increasing. However, the coverage of social services in the country is uneven and the availability of social services, including long-term social services, varies across the country. Also, as life expectancy increases, incl. for persons with very severe functional disorders, there is a growing demand for social services integrated with health care, which must be significantly strengthened in Latvia. As the general level of well-being increases, so do the demands on the social care service and the client's quality of life, which requires adapting to the new requirements and reviewing and changing the elements characterizing the quality of the existing services and the evaluation approach, which are also relevant in the Latvian situation. The general increase in prices also contributes to the increase in the price of the service, which makes it difficult for both the person himself and the municipality to cover the expenses related to care. The different regional availability of services, as well as the increase in service costs,

12 Joint proclamation of the institutions on the European Pillar of Social Rights (OV C 428, 13.12.2017., 10.p.).

have negative consequences for the person and the family, where the person either does not receive full support in the necessary care, or family members are forced to reduce their workload or quit their jobs in order to provide the person with the necessary support. However, informal caregivers often lack the necessary knowledge and skills and need targeted support to promote skills and knowledge. The strengthening of skills and knowledge, as well as the provision of targeted support, also need to be strengthened for the workforce already in care, who, in connection with the performance of daily work duties, have an increased risk of burnout and high job turnover. It is also necessary to promote the salary level, which currently does not contribute to the influx of care workers and the sector lacks professional labor. With the development of the use of various digital solutions both in the processes of social service organization and service provision, it is necessary to make large financial investments for the development and application of such solutions, especially those related to both the collection and accumulation of data and the use of data in the planning of further service development, but financial possibilities are very limited. Also, care workers have reduced skills and abilities in using digital tools, which in general hinders the introduction and appropriate use of such tools in the care process, and it is necessary to promote and strengthen knowledge in the use of such tools.

Taking into account the mentioned problems and challenges and in order to promote the availability and quality of long-term care services, a *Plan for promoting the availability and development of long-term care services for 2024-2029*¹³ (hereinafter - the Plan) has been developed, where activities are developed in accordance with the *European care strategy*³ and the *Council recommendations*¹, as well as in accordance with the current medium-term planning documents – Guidelines⁴ and Social Services Improvement and Development Plan 2022-2024¹⁴.

1.2. Stakeholders' involvement

This section explains **how the various stakeholders were involved** in reviewing national LTC policy in relation with the LTC Recommendation and in defining national measures to address the identified challenges.

Long-term care issues are discussed in the Social Services Development Council, which is a collegial, consultative and coordinating institution established in the Ministry of Welfare in 2014 to promote the sustainable and balanced development of social services. The Council includes the Ministry of Welfare, the Ministry of Health, municipalities, non-governmental organizations and social service providers. In cases where the regulations of the Minister's cabinet determine the duty of the council to supervise the activities of one of the EU funds, the composition of the council is expanded and representatives of the institutions specified in the regulations are included.

On the other hand, in order to develop *the Plan* in accordance with the *Council recommendations*, the Ministry of Welfare, as the leading ministry of the sector, created an expert working group, which involved representatives of the state administration sector - the Ministry of Welfare, the Ministry of Health, the Ministry of Smart Administration and Regional Development, the regional and municipal administration sector – Kurzeme planning region representatives and Valmiera district, social service providers - Riga social care institutions, the Latvian Samaritans Association, “Rūpju bērns” (“Care child”) representatives of the city of Rīga, and representatives of local governments and industry organizations - Latvian Union of Local Governments, Latvian Association of Social Workers, Association of Latvian Large Cities and Latvian Federation of Pensioners representatives.

The working group discussed the current situation in the sector and the necessary improvements - in the availability, quality and compliance of long-term care services to client needs, employee recruitment, professional qualifications and motivation, as well as issues related to long-term care management, monitoring and reporting, arising from the *Council recommendations*.

As a result of the discussions, *the Plan* was developed. *The Plan* was initially announced for public consultation, giving the citizens the opportunity to express their opinion and vision about the limitations identified in the Plan and the planned actions to improve the situation, and was then submitted for inter-ministerial coordination. According to the opinions received from other involved ministries, the plan has been clarified and has been submitted to the Cabinet of Ministers for approval.

13 Reconciliation process link - https://tapportals.mk.gov.lv/legal_acts/37eb2adb-efd0-4c3e-87bc-bc4dfd311173

14 Approved by the Cabinet of Ministers on 30.03.2022. order no. 231 "On the Social Services Improvement and Development Plan 2022-2024". Available: <https://likumi.lv/ta/id/331256-par-socialo-pakalpojumu-pilnveidosanas-un-attistibas-planu-2022-2024-gadam>

2. Policy objectives and measures (to be) taken

The section on **overall policy response and measures** (to be) taken would explain how the key objectives of the Recommendation are followed up in the national context, by providing details on **how the Member State intends to close the gaps**, if any, in relation to the specific provisions of the Recommendation. This should be underpinned by an **outline of the measures** adopted or planned to be adopted, including, to the extent possible, information on the type of measure, target group, timeline, funding, expected impact etc. To ensure synergies and contain the administrative burden, cross-references can be made as relevant to additional sources providing more detailed information for the relevant measures reported.

2.1. Overall policy response

This section describes how the gaps identified in relation with the objectives of the Recommendation have been/ will be addressed. It provides a breakdown of the overall policy response into a list of concrete measures, mapped to the extent possible with the relevant articles/ letters of the Recommendation.

The main areas of action of *the Plan* are: compliance, availability and quality of long-term care services, caregivers, as well as long-term care management, monitoring and reporting and the implementation of digital solutions that are consistent with the goals and objectives resulting from the *European care strategy, Council recommendations*, national planning documents and the national, regional and local situation.

Although more attention is paid to the development of community-based social services in Latvia, it cannot be denied that it is also necessary to provide quality long-term care services to clients whose full-fledged care at home is ineffective and burdensome, including the development of quality services in long-term care institutions. Thus, the Plan includes both measures for the development of community-based services, as well as for the improvement of the quality of services in long-term care institutions and the development of integrated (social care and health care) services. Also, the Plan sets out tasks that envisage reviewing and improving service quality criteria, evaluating service payment and payment procedures, as well as carrying out other activities to promote the compliance, availability and quality of long-term care services. The plan also includes tasks for improving and promoting the situation of formal and informal caregivers, which are related to strengthening skills and knowledge, as well as improving and expanding the currently available support. Also, it includes tasks related to management, monitoring and reporting processes in order to improve quality information gathering, storage and needs planning, including expanding the implementation and use of digital tools in social service provision sites, and other tasks, which are described in more detail in the next section.

2.2. Detailed description of the measures

*This section provides further details for each of the measures listed in the previous section. For each measure, MS should provide a detailed description. This could include, for example, information on the **aim, type** (e.g. legislative reform, investment, etc.), **target group** (definition and size), **results and impact** (expected or achieved), **timeline**, **financial resources** (national and/ or EU funding), **implementing body(ies)** and **cooperation with stakeholders**, **evaluation** and **cross-linkages with other measures**.*

The Plan envisages various systemic improvements and new initiatives, which are expected to be implemented by 2029. The implementation of the measures included in the Plan is planned from the state budget, EU funds, as well as from local government funds in accordance with the financial capabilities of each local government. It is currently not possible to allocate specific funding for individual measures, as their implementation results from a larger measure or is provided within the salary/administrative capacity of the existing state budget institution. The Plan also includes such measures, the implementation of which is planned with the co-financing of EU funds, some of them are planned as part of the implementation of wider measures.

Adequacy, accessibility and quality of long-term care services

Promote the creation of a family-oriented service for adults.

Purpose/Type – To create new, family-oriented places of service provision.

Target group – Recipients of social services, municipalities, social service providers.

Planned results – To build new service provision places for 852 seniors with functional limitations, promoting the ability of individuals to continue engaging in self-care activities as much as possible and promoting the receipt of services in a family-oriented environment.

Time, funding – It is planned that by the end of 2026, new service provision places closer to a family environment will be built, which will be implemented within the framework of RRF funding and within the budget of local governments.

Implementing body – The Ministry of Welfare, municipalities, state and municipal long-term care institutions, social service providers.

Provide social services appropriate to clients' self-care abilities and objective needs.

Purpose/Type – Improve existing or develop new client needs assessment methods in order to promote the provision of social services appropriate to the client's abilities and needs.

Target group – Social services recipients, social services providers

Planned results – Based on the Latvian and international practice in the field of monitoring and efficiency of social services identified in the evaluation of the quality monitoring and effectiveness assessment system of social services, to improve the methods of assessing client needs in accordance with the latest knowledge in social care, promoting the allocation and provision of services appropriate to a person's abilities and needs, incl. improving the possibilities of information transfer between a person and an organization or institution and reducing the risk of clients neglect.

Time, funding – It is expected that by 2028, with the support of ESF+ funding, a feasibility study will be carried out on Latvian and international practice in the field of monitoring and evaluating the effectiveness of social services, and proposals will be developed for improving the methods of assessing client needs. Until 2029, it is planned to develop and introduce improved or new client assessment methods and to improve and facilitate the transfer of information between the client and an organization or institution.

Implementing body – The Ministry of Welfare in cooperation with local governments.

To improve the independent living opportunities of persons with mental disorders.

Purpose/Type - Promote the improvement of opportunities for independent living by providing the necessary support in decision-making.

Target group – Persons with mental disorders, social service providers.

Planned results – Persons with mental disorders have the opportunity to receive support in decision-making in areas such as protection of rights and interests, finance, daily life, health care, etc., thereby promoting informed decision-making, inclusion in society and independent living opportunities.

Time, funding – In order to promote the improvement of the independent living opportunities of the target group, since the end of 2023, the service of support person in decision-making has been provided at the expense of the state budget. However, the funding allocated for the provision of the service is less than originally requested, indicating that funding from the state budget will be necessary.

Implementing body – Ministry of Welfare, municipalities, social service providers.

Ensure the minimum basket of social services and, within it, the availability of long-term care services in the municipality.

Purpose/Type – Introduce the minimal social services basket in municipalities.

Target group – Social services recipients, social services providers, municipalities

Planned results – Adopted amendments to the Law on Social Services and Social Assistance, determining the minimum basket of social services in the municipality and providing co-financing for municipalities to support the provision of social services, thereby promoting the availability of services to everyone who needs services and reducing regional differences.

Time, funding – In order to achieve the planned task, it is expected that in 2024 amendments will be made to the Law on Social Services and Social Assistance, determining the minimum basket of social services in local governments. Also, being aware of the limited funds of local governments, in 2024, additional state budget funds will be requested for the allocation of co-financing to municipalities, in order to promote the capacity of municipalities to ensure the services included in the basket of social services - for the development of respite services in municipalities, providing co-financing to municipalities in the amount of 50% for children with disabilities who have State Commissions opinion on the need for special care, respite service provided at the child's place of residence (apartment) or institution, family assistant service.

Implementing body – Ministry of Welfare, municipalities.

Evaluate the procedure for paying social services and introduce new payment models for social services and review the regulatory acts regulating the processes of providing long-term care services.

Purpose/Type – Introduce new payment models for social services, incl. evaluating care risk insurance options.

Target group – Social services recipients, social services providers, Ministry of Welfare, municipalities.

Planned results – An evaluation of long-term social care financing models is carried out, providing proposals for the introduction of a sustainable financing model and an improved payment and payment system for social services, promoting the ability of individuals to afford and receive long-term care services according to the person's wishes and needs. incl. promoting that client have the opportunity to choose a service provider, implementing a person-centered approach in providing long-term care.

Time, funding – As part of the proposed task, in 2024, an evaluation of payment models for social services has been started. The evaluation is carried out through EU funds and state budget funds, involving both local governments and social service providers in the evaluation. Based on the evaluation results, it is planned to improve the payment and payment system for social services until 2029.

Implementing body – Ministry of Welfare, municipalities, social services providers, NGOs.

Improve service quality assessment and ensure compliance monitoring.

Purpose/Type – Review the existing quality assessment criteria for long-term services and social services and develop a quality monitoring and efficiency assessment system for social services.

Target group – Social services recipients, social services providers, Ministry of Welfare, municipalities.

Planned results – In order to achieve the planned goal, it is planned to carry out an evaluation of the existing social service quality monitoring and efficiency evaluation system, and based on the results of the evaluation, proposals will be put forward for the improvement of the existing social service quality evaluation and monitoring system and the efficiency evaluation system. It is expected that, in addition to the general quality standards of social services, specific standards will be developed at least for out-of-family care and long-term care services in accordance with the *Council's recommendation*, that is for long-term care service in an institution, incl. for a family-oriented service, a group home (apartment) service, a nursing home service, a respite service, a day care center service and a specialized workshop service. Based on the proposed proposals, it is planned to implement a pilot project to test the improved service quality and efficiency evaluation system, promoting that long-term care social services are of high quality, meet the needs of the individual and the service achieves its planned goal. In addition, it is planned to make adjustments in the improvement of the national social policy monitoring information system in order to ensure adequate data collection, accumulation and processing.

Time, funding – In the period from 2024-2025, with the support of ESF+ funding, it is planned to carry out a feasibility study on Latvian and international practice in the field of monitoring and evaluating the effectiveness of social services. By the end of 2028, within the framework of ESF+ funding and available state budget funds, it is planned to develop and approve in pilot projects a system for monitoring the quality of social services and evaluating their effectiveness, making appropriate adjustments to the state social policy monitoring information system.

Implementing body – Ministry of Welfare in cooperation with social service providers.

Ensure the integrity of health and social care services in long-term care services.

Purpose/Type – To promote the possibilities of receiving integrated healthcare and social care services in social care institutions.

Target group – Long-term care institutions service providers, social services recipients.

Planned results – It is expected that Health Points will be established in long-term care institutions with 49+ clients, ensuring the availability of health care specialists and improving the receipt of integrated health and social care services for clients of long-term care institutions. A pilot project on an integrated organizational and financing model will be implemented and an integrated financing model for health care provision in long-term care institutions will be implemented.

Time, funding – By 2026, it is planned to create Health Points in long-term care institutions. Until the end of 2027, it is planned to implement a pilot project on an integrated organization and financing model and to introduce an integrated financing model for the provision of health care in institutions, which is planned to be implemented at the expense of the state budget.

Implementing body – Ministry of Welfare, Ministry of Health, service providers of long-term care institutions.

Expand innovative approaches in care services, including by applying technological solutions.

Purpose/Type – Promote the development of innovative social services, incl. promoting the application of technological solutions.

Target group – Long-term care institutions service providers, social services recipients.

Planned results – Promote innovative approaches in the provision and provision of social services and promote the development of new long-term and social services, incl. improving regional coverage and service availability in regions. In order to achieve the planned goal, the ESF+ project "Support for new approaches in the provision of community-based social services" has been launched at the end of 2023. Within the framework of the project, it is expected that social service providers will be able to apply for funding for the implementation of ideas in the provision of innovative community-based social services. Service providers, whose innovative ideas will be supported, will implement a pilot project for the introduction of social innovation. Within the framework of the project, social service providers can develop social innovation ideas for different target groups, and can also offer various innovative, digital solutions in the provision of services, as well as they can address specific problems that could be solved through innovative ideas, for example, regional availability of social services. After the implementation and evaluation of the results of all the supported social innovation pilot projects, the most effective solutions for the provision of social services based on social innovation in society will be determined and the possibilities of their implementation in the long term will be determined.

Time, funding – In order to achieve the planned results, it is expected that innovative projects in the field of social services will be implemented by the end of 2028, which will be implemented with the funding support of the ESF+ fund, as well as with the support of the state budget funding. Funds from the state budget will be needed to ensure the sustainability of the projects.

Implementing body – Ministry of Welfare, Social Integration Fund, municipalities, social service providers.

Improve the provision of technical aids and digital and technology provision in long-term care institutions and the general public.

Purpose/Type - Expand the use of digital tools in long-term care institutions and among social service providers, expand the provision of technical aids in long-term care institutions and society in general.

Target group - Long-term care institutions service providers, social services recipients.

Planned results - Increased use of digital tools and availability of technical aids in long-term care institutions, reducing the risk of injury to employees and clients and facilitating client care and supervision. The availability

of new and smart assistive technologies and aids to the general public has been promoted, improving the safety and supervision of persons and promoting the stay of persons and the receipt of services in the home environment or closer to the place of residence.

Time, funding - It is expected that the provision of technical aids and technologies will be improved gradually, within the framework of existing budget funds, incl. regularly reviewing the current needs of long-term care institutions or residents. In addition, it is also planned to make a request for financial resources from the state budget in order to expand the offer of technical aids received from the state budget.

Implementing body – Ministry of Welfare, municipalities, social service providers.

Promote public information and increase the prestige of the profession of long-term care specialists.

Purpose/Type – To inform the public about social services and their importance.

Target group – Society, social service providers, municipalities, existing and potential recipients of social services.

Planned results – Reduced stereotypes/prejudices about clients and their relatives who have chosen to provide long-term care for their loved ones at home or in an institutional environment, society's attitude towards social services and their recipients is more tolerant, easier and faster to search for opportunities to receive services, more knowledgeable, qualified specialists in various fields who are able to provide consultations to potential clients, improved communication between individuals and specialists.

Time, funding – The activities are planned to be implemented within the existing funds.

Implementing body – Social service providers, municipalities, NGOs, educational institutions that provide 1st and 2nd level higher professional education in the social field.

Formal and informal caregivers

Formal caregivers

Improve the compliance of qualification raising measures with the needs of providing social services and increase the competence of personnel involved in care.

Purpose/Type – To improve the knowledge and skills of nursing staff in order to improve the quality of the care provided, as well as to promote further education and qualification improvement opportunities for staff.

Target group – Social services providers.

Planned results – Care workers have wider knowledge of care strategies, incl. peculiarities of communication for persons with various types of illnesses. Wider opportunities for improving skills and knowledge and raising qualifications have been provided. The staff is trained in the use of digital solutions and assistive technologies and applies them in their daily work.

Time, funding – The activities are planned to be implemented until 2027 within the framework of ESF+ and RRF funding, as well as additional state budget funds are needed to ensure the sustainability of the events and for the further implementation of the activities on an ongoing basis.

Implementing body – Social service providers, Ministry of Welfare, Ministry of Health, State Agency for Social Integration, municipalities, NGOs.

Ensure the use of easy-to-understand, unified action algorithms in the event of risks in the care process.

Purpose/Type – Promote a clearly understandable procedure in case of occurrence of risks in institutions where there are no medical personnel or health care points.

Target group – Social services providers.

Planned results – Employees of organizations have developed internal procedures in case of occurrence of risks and have clear action algorithms in cases of occurrence of various risks.

Time, funding – The activities are planned to be implemented continuously, ensuring regular review and adjustment of the internal procedures according to the current situation, which will be implemented within the existing resources of the service providers.

Implementing body – Social service providers, municipalities, NGOs, Ministry of Welfare

Promote the availability of support for employees of social service providers.

Purpose/Type – Promote the support system and availability of support for employees involved in care, reducing the risk of employee burnout.

Target group – Social services providers.

Planned results – Monitoring of working conditions and working environment has been carried out and employee and management training has been carried out on the risk of burnout, the risks of bossing and mobbing and their recognition. Care workers are provided with supervision and employee motivation events are organized to promote the available support for existing workers and reduce the risk of leaving the job.

Time, funding – The activities are planned to be implemented within the existing funds.

Implementing body – Social service providers, Ministry of Welfare, municipalities, NGOs.

Promote the dissemination and popularization of examples of good practice.

Purpose/Type – Promote and expand the use of local and international examples of good practice in the provision of social services.

Target group – Social services providers, social services recipients, society.

Planned results – Publicly available information on long-term care and the possibilities of receiving services is available and regularly updated and supplemented.

Time, funding – The activities are planned to be implemented within the existing funds.

Implementing body – Social service providers, Ministry of Welfare, municipalities, NGOs .

Informal caregivers

Implement a support system for informal caregivers.

Purpose/Type – To identify the situation and needs of informal caregivers and to develop and approve a competence development program for informal caregivers.

Target group – Informal caregivers.

Planned results – Evidence-based information on the situation and needs of caregivers has been obtained, and a competence development program for informal caregivers has been developed and approved to improve skills and knowledge about providing care. Information channels for assistance and support to informal caregivers have been provided and expanded.

Time, funding – In order to achieve the planned results, since the middle of 2023, the training of informal caregivers has been started and is being implemented within the pilot project, which is being implemented with the support of RRF funding. The activity is carried out by specialists of the State Agency for Social Integration, who provide training for informal caregivers in the form of modules, providing practical and theoretical knowledge on providing care. Within the framework of the pilot project, it is planned to train 100 informal caregivers, where after the end of the training, which will end in the middle of 2025, the developed competence development programs will be perfected and approved, and it is expected that further training for informal caregivers will be implemented at the expense of the state budget. Also, in order to achieve the planned result, with the support of ESF+ funding, in 2024-2025, within the framework of the project, it is planned to conduct a study on the situation of informal caregivers in Latvia, learning about the resources and needs of informal caregivers, in order to promote and expand targeted support of informal caregivers through

various channels and methods, where it is expected that specific proposals for the development of informal care in Latvia will be developed by 2027.

Implementing body – Ministry of Welfare, NGOs, State Agency for Social Integration, municipalities.

Promote the development of voluntary work in long-term care.

Purpose/Type – Promote and expand the involvement of volunteers in long-term care.

Target group – Society, informal caregivers, social service providers.

Planned results – Recommendations/guidelines for the development of voluntary work will be developed, measures to attract and motivate volunteers will be organized and the provision of support for volunteer work will be expanded.

Time, funding – The activities are planned to be implemented within the existing funds.

Implementing body – Ministry of Welfare, State Employment Agency, social service providers, NGOs, municipalities.

Promote employers' understanding of the implementation/importance of inclusive working conditions.

Purpose/Type – Promote employers' understanding and attitude towards the needs of employees who care for a loved one or family member, promoting the provision of inclusive working conditions.

Target group – Employers, society, informal caregivers.

Planned results – Measures have been implemented to inform the public and employers about the needs of informal care and the burden on family members.

Time, funding – The activities are planned to be implemented within the existing funds.

Implementing body – Ministry of Welfare, Social Partners.

Long-term care management, monitoring and reporting and digital solutions

Expand the use of digital tools in planning and monitoring the care process.

Purpose/Type – Expand digital solutions and their use in long-term care institutions by determining the required amount of data and data accounting.

Target group – Social services providers.

Planned results – A platform for social service providers has been created and digital solutions have been implemented for the organization of care work, accounting, monitoring and analysis of the provided care, ensuring integrity with the data systems of state, local government and private service providers, including promoting the availability of data and information for the purposes of national policy making.

Time, funding – The activities are planned to be implemented by the end of 2027, with the support of ERDF funding.

Implementing body – Ministry of Welfare, Ministry of Smart Administration and Regional Development.

Improve the planning systems for the provision of social services and the availability of employee resources.

Purpose/Type – Expand the technical and digital provision for social service providers and improve the existing information system for collecting and analyzing data on service recipients and service provision, for effective performance of monitoring measures.

Target group – Social service providers, state, municipalities.

Planned results – A digital solution has been created for the accumulation and analysis of social services data, promoting the planning and analysis of potential service recipients in the country and municipalities and the appropriate planning of the necessary resources and the number of employees.

Time, funding – It is planned that the activities will be implemented until the end of 2027, using the available ESF+ funding support for the improvement of the information system, as well as within the existing budget funds.

Implementing body – Municipalities, Ministry of Welfare, social service providers.

Promote the use of digital solutions in organizations providing social services.

Purpose/Type – Create a digital social services accounting system in municipalities, ensuring its appropriate use and information input.

Target group – Social service providers, municipalities.

Planned results – Electronic service documentation has been implemented, where care staff are trained in its use and use it, facilitating the flow of information and improving service management and planning, as well as monitoring and execution.

Time, funding – It is planned that the activities will be implemented until the end of 2026, with the support of RRF funding and within the existing funds.

Implementing body – Ministry of Welfare, Ministry of Health, social service providers.

To improve the flow of information between specialists and sectors.

Purpose/Type – Expand and implement information exchange channels, digital solutions between specialists involved in care, as well as expand the ways of obtaining and transferring information about long-term care services.

Target group – Social service providers, society, social services recipients, healthcare professionals.

Planned results – Informing and educating health care specialists, the public, and family members about care services is being expanded and implemented, and the circulation of information about the activities performed with the client is expanded, promoting opportunities for cooperation between different departments.

Time, funding – Activities are planned to be implemented gradually, within the framework of existing funds.

Implementing body – Ministry of Welfare, Ministry of Health, social service providers.

3. Remaining challenges and needs for EU support

As a **way forward**, the report could mention potential **remaining LTC challenges not addressed** by those measures already taken/ planned. It should also highlight concrete **needs for further EU support** and **potential contributions from the Member State** to the EU level policy dialogue in the area of LTC (e.g. good practice, high-level initiatives or networking opportunities, etc.).

3.1. Remaining challenges

This section describes any potential **remaining LTC challenges not addressed** by those measures already taken/ planned. Reflections on why they cannot be addressed at national / regional level are welcome.

As the main challenges to ensure that long-term social care is of high quality, services are available to everyone who needs them, including both developing new, community-based services and improving existing services, as well as promoting the attraction of qualified and knowledgeable workforce in the sector, is financial constraint. Even now, in Latvia's situation, the general increase in prices and the cost of living does not contribute to the improvement of the situation, but on the contrary - hinders its development. The limited financial situation of local governments does not encourage their involvement in projects and new initiatives that could improve the situation of local residents who need care, and there are reasonable concerns about the further possibilities of local governments to cover care expenses for those persons who receive services with full or partial support from the local government. This, in turn, increases the risk that services will continue to be of limited availability, as well as those persons who do not qualify for municipal support, will not receive the care they need in the appropriate amount, or their relatives will be forced to provide care

on their own. Also, the international situation - the war in Ukraine, the hybrid war, or the migrant crisis at the national border - in general does not contribute to the development of long-term care services, because Latvia's main priorities are currently focused on aspects of internal and external security.

Although the activities set out in the plan are aimed at improving the situation of the existing workforce in care, there is reason to believe that the workforce situation in the sector will remain difficult. In Latvia, similar to other EU member states, mainly women are employed in caregiving and it is carried out by women, where a large part of the current workforce is of pre-retirement age. Likewise, the salary of those working in the industry is lower than the average in the country, the workload and intensity both physically and psychologically are high, which does not contribute to the influx and replacement of labor and generations in the industry. Vacancies remain unfilled for a long time, labor turnover is high and there is already a labor shortage, which means that the industry may soon face an even greater labor shortage than it is now. This, in turn, will contribute to the overloading of the existing workforce and the risk of burnout, increase the risk of injuries and injuries, as well as reduce the quality of care and customer satisfaction with the service received.

Due to the impact of the Covid-19 pandemic, it was identified that the environment of social care institutions is not adapted to such emergency situations. Social care institutions provide services to persons who mainly have high or very high care needs, including those with various health and functional limitations. During the Covid-19 pandemic, service providers faced difficulties in ensuring adequate isolation of clients from other clients, as the existing infrastructure was not adapted to such situations. Although epidemiological safety plans have been developed in long-term care institutions and, for example, during the flu season, it is possible to separate a certain number of persons from other clients, but the pandemic proved that the existing number is insufficient to ensure a safe epidemiological environment. Long-term care institutions should create such an environment, but it is not possible to implement it within the framework of existing funding.

Regarding the adaptation of the infrastructure of long-term care institutions according to environmental requirements, incl. to ensure a sustainable and energy-efficient infrastructure, large financial investments have been made in state long-term care institutions to arrange the infrastructure in accordance with the requirements of environmental sustainability, and all state long-term care institutions and their branches have been adapted accordingly, however, the situation in municipal long-term care institutions is different. Only in some municipalities has there been a targeted investment of funding also in adapting the infrastructure of long-term care institutions, and taking into account the rapidly increasing costs of care services, where the majority of the services received are covered from the municipal budget funds, there is a reason to think that in the coming years there will be no targeted investments in improving the infrastructure, but would be very necessary.

The transition to the use of digital tools in long-term care requires large financial investments. The Plan also includes tasks related to the implementation of digital solutions and assistive technologies of a long-term care institution, however, it is known that funding for the implementation of such activities is the responsibility of another ministry and it is not known whether and to what extent financial support for the implementation of digital tools will be granted directly in relation to social field.

3.2. *EU support*

This section should highlight concrete **needs for further EU support, including in relation with remaining challenges not addressed by planned/ already taken measures**, and highlight **potential contributions from your MS to the EU level policy dialogue** in the area of LTC (e.g. good practice, high-level initiatives or networking opportunities, etc.).

As mentioned in the previous section, in Latvia's situation, additional EU support would be necessary for the adaptation of the infrastructure of long-term care institutions, which are related to both ensuring sustainability and energy efficiency in buildings, and ensuring an internal environment corresponding to epidemiological safety.

Taking into account the rapid development of digital tools and their increasing use in care, which both facilitate work accounting and provide support in planning processes and needs at the level of social service providers, municipalities and the state, additional EU financial support for the implementation of digital tools would be necessary. This applies to the improvement or creation of new or existing information systems, the implementation and integration of digital tools, information systems in long-term care institutions and social

service providers. Aware of the limited financial resources, additional financial support from EU funds would be necessary to promote faster improvement and implementation of processes.

Also, significant support would be necessary in connection with the provision of workforce training in the development of skills and knowledge, training of new skills and knowledge, as well as in the use of digital tools, thus also promoting the availability and quality of long-term care services. As well as various methodological support, guidelines, dissemination of examples of good practice among member states has been useful up to now and is still a supported and necessary practice.