

Future trends in French long-term care policy: The *Libault Report*

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Six months after the launch of a national consultation, the Libault Report (issued in March 2019) finally paves the way for the much-needed reform of the French long-term care system. The Report reflects the diverse opinions of the stakeholders concerned and contains 175 measures. It presents "loss of autonomy" as a social risk to be integrated into social security funding legislation and will be used as a background document for the legislative reform of long-term care policy scheduled for the end of 2019.

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Description

On 28 March 2019, six months after the launch of a major national consultation process to tackle the challenges of ageing, Dominique Libault, Councillor of State and President of the High Council of Financing for Social Protection, handed over his Report on autonomy and old age to Agnès Buzyn, Minister of Solidarity and Health. The Report outlines the foundations of "a strong, new policy on old age in France". It builds on a major national consultation carried out between September 2018 and February 2019, and involving all actors concerned with old age along with experts in the field.

The Report starts with a precise overview of policy targeted at elderly people. It highlights the high level of public funding – €23.7 billion, i.e. 1.2% of national wealth (Gross Domestic Product) – and identifies "an unclear system despite increasing public efforts and numerous innovative initiatives" (Press Pack, March 2019, p. 20). Reform is thus necessary to handle the predicted increase in public expenditure in favour of elderly people, evaluated at 1.6% of GDP in 2030. While maintaining older people in their homes and increasing freedom of choice in the organisation of care are put forward as priorities, the 175 measures presented in the Report concern both the development of quality support in the home and care in institutions. Concretely, three main strands can be identified.

The first of these consists of a series of measures aimed at reorganising the various types of existing financial support, which include:

- creating a new home-based cash benefit (to replace the current "Personal autonomy allowance" [Allocation personnalisée d'autonomie]) with three components: personal assistance, technical support and respite (for carers);
- merging healthcare and social care expenditure in residential homes to reduce the remaining amount which is payable by residents, evaluated at €1,850.

The second strand concerns the development of services in the home and in residential homes through:

- renovating residential homes and making them more open to the outside world: a renovation plan worth €3 billion has been announced;
- increasing the supervision rate in residential homes by 25%, by recruiting 80,000 employees at an estimated cost of €1.2 billion;
- creating 60,000 places in residential homes;
- developing alternatives to residential homes or home-based care, i.e. temporary accommodation and collective housing;
- creating indicators to measure the quality of services available in residential homes.

Finally, the third strand aims to increase support to the 3.9 million informal carers who provide care to older relatives. This will be done by:

- simplifying procedures and access to information;
- providing financial aid to support informal carers;
- facilitating informal carers' work/life balance.

The Report argues in favour of financing long-term care (LTC) policy through national solidarity, by recognising "loss of autonomy" as a genuine social protection risk, and including this in social security funding legislation. Recourse to private funding is presented as additional to public funding. One possibility could be to take account of a share of property assets when calculating the level of the benefit received, in order to support funding of home-based and residential care.

Outlook and commentary

In the light of demographic trends, the estimated number of elderly people eligible for the "Personal autonomy allowance" is likely to increase considerably in the coming decades: from 1,265,000 in 2015 to 1,582,000 in 2030 and 2,235,000 in 2050. The French LTC policy reform is therefore urgently needed. Announced in the early 2000s, it was launched with the 2015 Act on Adapting Society to an Ageing Population, but with a budget considered to be highly insufficient (Le Bihan 2016, IGAS 2017). The Libault Report continues in the vein of this legislation by aiming to change the negative representation of population ageing by developing a more inclusive society that fully integrates older people. Commissioned by the Minister of Solidarity and Health herself, it puts a strong emphasis on the

involvement of public authorities – at both central and local levels – in the loss of autonomy sector. The Report is a response to the current crisis in residential homes and to requests for support from families; it is thus generally the object of consensus.

The Report is conceived as a background document in preparation for legislation to reform LTC policy, scheduled for the end of 2019. This reform will have to address three key challenges.

First, the set of measures announced in the Report will require massive public funding; although difficult to evaluate, the estimated additional amount is €9.2 billion by 2030. The favoured scenario is that an existing pay deduction (the Contribution to Reducing the Social Debt [CRDS]), which will have been fully paid by 2024, will be converted into funding for loss of autonomy. Nevertheless, political and social developments due to the "yellow jacket" movement and multiple costly reform projects resulting from the "Great Debate" organised in response to this movement could call into question the availability of this funding. Alternative scenarios, such as creating new mandatory pay deductions, or extending working time by cancelling a national holiday, have so far been ruled out.

Secondly, the governance of LTC policy needs to be clarified, as it involves two main institutional actors – regional health agencies and local councils – relations between which are currently very tense.

Thirdly, the declared priority of maintaining elderly people in their home is based on the assumption that the average amount to be paid by the care user (and/or his/her family) to stay in the home is €60 per month once possible

allowances received have been deducted. This estimate is questionable since it only takes into account services defined in the care plan (drawn up as part of the Personal autonomy allowance delivery procedure) and does not include varying service prices, additional services, or the cost of informal care.

In sum, while the Libault Report is comprehensive, arguments in favour of high public investment should not be limited to highlighting existing funding and measures, or identifying difficulties. In the absence of sufficient funding to implement the recommendations put forward in the Report, the main danger is that the country will slide into a public intervention policy that primarily focuses on support to family carers.

Further reading

Libault, D., Grand âge, le temps d'agir, Concertation Grand âge et Autonomie, Ministère des solidarités et de la santé, March 2019.

Grand âge, le temps d'agir, Concertation Grand âge et Autonomie, Dossier de presse, ministère des solidarités et de la santé, 28 March 2019.

IGAS, 2017, Evaluation de la mise en œuvre de la loi d'adaptation de la société au vieillissement pour le volet domiciliaire, Tome 1, September 2017.

Le Bihan, B., France anticipates ageing society through new piece of legislation, ESPN Flash Report 2016/18, April 2016.

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