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The Long-Term Care **System in Ukraine**



Oleksandra Khudoba

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Contact: crc-countrybrief@uni-bremen.de

Postadresse / Postaddress: Postfach 33 04 40, D - 28334 Bremen

Website:

https://www.socialpolicydynamics.de

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Oleksandra Khudoba

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^{*} Lviv Regional Institute for Public Administration, lesia.khudoba@gmail.com

1. Country Overview



Source:: https://ontheworldmap.com/ukraine/ (Accessed: May 20, 2021)

- » Sub-Region: Eastern Europe
- » Capital: Kyiv
- » Official Language: Ukrainian
- » Population size. 41 902 416 (State Statistics Service of Ukraine. 2020a)
- » Share of rural population: 30,5% (UN 2021; value 2020)
- » GDP: 155,582 billion (WB 2021; value 2020; currency US\$)

- » Income group: Lower middle income (WB 2021)
- » Gini Index: 26,6 (WB 2021; value 2019)
- Colonial period and Independence: 1721 1917 fragmented and perceived as the parts of different empires; 1922-1991 as a part of the Union of Soviet Socialist Republics (the USSR); independent since 1991

1. Long-Term Care Dependency

a. Population statistics

Older population ¹			
		ntal nber	Share of total population
Population 60+	9 97	8 194	23,81%
Population 70+	4 760	0 532	11,36%
Population 80+	1 87	3 818	4,47%
Long-term care dependent population			
		ntal nber	Share of total population
People with disabilities (all III categories):	2 703	3 006	6,45%
Category I (incapable of self-care)	222	324	0,53%
Category II (partially capable of self-care, but unable to work in normal (not adapted) conditions)	900	774	2,15%
Category III (capable of self-care, but still in need of social support)	1 410	5 022	3,4%
Children with disabilities, aged 0 to 18	163	886	0,39%
Officially registered citizens in need of social services due to vulnerability ² as of 2019:	1 13	8 113	2,72%
women	822	633	1,96%
rural population	604	889	1,44%
The elderly	921	658	2,2%
People with disabilities	201	789	0,48%
War veterans, including those with disabilities	129	844	0,3%
Number of persons receiving services at specialized institutions ³ for the elderly and people with disabilities (adults, children and young people) as of end of 2019:	45	507	0,1%
adults	40	801	0,09%
	men	women	
18-35	3 137	1 <i>7</i> 83	
36-79	17 604	13 <i>7</i> 42	
80+	1 074	3 461	
children and young people	47	706	0,01%

Source: State Statistics Service of Ukraine. 2020b; State Statistics Service of Ukraine. 2019.

³ Specialized institutions include domiciliary setting for the elderly and people with disabilities, care homes for war veterans, institutions for people with mental and neurological disorders). At the end of 2019 there were 282 specialized institutions (242 for adults and 40 for children and young people).



Persons who have reached retirement age are considered as the elderly, as well as persons with a maximum of one and a half years before reaching the specified retirement age (Verkhovna Rada of Ukraine. 2003).

Vulnerability refers to the possibility of a person's life, health and family functioning being adversely affected by circumstances that they cannot overcome on their own. Vulnerability covers, for example, old age; partial or complete loss of physical activity, memory; incurable diseases, diseases requiring long-term treatment; disability. In Ukrainian Law the term "vulnerable persons" is used as "people in tough life circumstances" (Verkhovna Rada of Ukraine. 2019).

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

In accordance with the current legislation of Ukraine (Verkhovna Rada of Ukraine. 2019), permanent care (long-term care) comprises a range of medical and social services provided in specialized institutions to the following categories of persons:

- » children with disabilities aged 0 to 18;
- » people with disabilities (category I);
- » 80-year-old persons and older;
- » people with disabilities (category I-II) on account of a mental disorder who according to an assessment by the Medical Commission need permanent care.

Individuals who are not entrepreneurs and provide social care as a part of social services are paid compensation for that by the Social Welfare Department or Amalgamated Territorial Community.

The assessment of a person's / family's needs for social services includes an analysis of a person's / family's vulnerability, their level of hardship and their needs, and a summary of the type and scope of social services needed by that person / family.

Social service providers (social counsellor, social worker, social manager) are required to assess the needs of a person / family in social services. The procedure for assessing the needs of a person / family in social services is approved by the Ministry of Social Policy (Ministry of Social Policy of Ukraine. 2014). The assessment of the needs of a person / family in social services is carried out by way of analyzing documents, facts and information collected during communication with the person / family and people from their immediate circle, as well as information received from legal entities and individuals in accordance with an established procedure. Medical, pedagogical workers, psychologists, rehabilitation specialists, occupational therapists and other specialists may also contribute to needs assessments if required.

2. First Public Scheme on Long-Term Care

a. Legal introduction

Please provide information on the first law that is explicitly concerned with social protection for LTC, introducing benefits for LTC dependency.

Social services are a special type of service that provide assistance to people in need of LTC. For the first time, the concept of "social services" as well as the principles of providing social services were introduced in 2003 in the Law of Ukraine "On Social Services".

Brief summary of content	The main purpose of the introduction of social services was to replace the existing Soviet-era system of social services
Expired	January 1, 2020
Date of de jure implementation	January 1, 2004
Date the law was passed	June 19, 2003
Name and type of law	The Law of Ukraine "On Social Services" No.966-IV

b. Characteristics of the long-term care scheme at introduction

Coverage

According to the Law, citizens of Ukraine as well as foreigners and stateless persons living in Ukraine legally and who were under vulnerable life circumstances that they were unable to overcome on their own were entitled to receive social services.

Service provision

The existing state system of social services was focused mainly on care in inpatient institutions, which did not contribute to the strengthening of family relations and hampered the integration of vulnerable groups. The institutions did not make full use of quality management or assess the effectiveness of social services; therefore such services were not always beneficial to the standard and quality of life of a person for whom social services were provided.

Financing

Funding was provided centrally, i.e. the network of institutions was funded from the state budget. The centralized approach to determining the need for social services and forming a network of institutions to provide such services, was focused not on the needs of the population in social services and its scope and quality, but rather on budgetary capabilities.

Regulation

It should be noted that the quality control of the social services system had several shortcomings. There were no mechanisms to control the quality of social services or effective sanctions for inadequate quality (only the use of financial resources by state social service providers is subject to mandatory control in accordance with established standards), nor did any mechanisms exist for state and independent monitoring or the evaluation of social services and their employees. In fact, there were no quality standards for social services or any procedures for assessing the need for services either at the level of the administrative unit or the level of the institution. Service recipients and their representatives were not involved in planning or control of the quality of services provided.

Organizations responsible for governance

The authorized bodies of the social services system included:

- » At the national level Ministry of Social Policy of Ukraine the main central body of executive power that ensured the development of state policy in the field of social welfare
- » At the local level Local state administrations (Departments of Social Welfare)

3. Subsequent Major Reforms in Long-Term Care

After the first Law of Ukraine "On Social Services" came into force in 2004 the reform of the social services system got going, and has since taken place in several stages:

a. Major reform I

Name and type of law	Resolution of Cabinet of Ministers of Ukraine "On approval of the Concept for reforming the social services system" № 178-p
Date the law was passed	April 13, 2007
Date of de jure implementation	On the day of official publication
Expired	August 8, 2012
Brief summary of content	The purpose of the Concept was to reform the system of social services to increase the efficiency of its operation and bring it closer to the needs of recipients.



Socio-political context of introduction	The main tasks of the Concept focused on functioning and strategic directions of social services reform as well as on improving the regulatory framework for the organization and functioning of the social services system.
Brief summary of characteristics of the programme	The goals of the reform of the social services system were: to enhance the quality of social services and bring it closer to European standards; to introduce a mechanism for the management and regulation of the social services system to ensure its constant updating in accordance with the needs of recipients.

b. Major reform II

Name and type of law	Resolution of Cabinet of Ministers of Ukraine "On approval of the Strategy for reforming the system of social services" No. 556-p
Date the law was passed	August 8, 2012
Date of de jure implementation	On the day of official publication
Brief summary of content	The purpose of the Strategy is to ensure the availability and accessability of social services to individuals and improve the quality and efficiency of services provision.
Socio-political context of introduction	The system of providing social services was not effective at that time. The Concept was only partly implemented for want of legislative regulation on a number of issues, in particular, on standartization and identification of social services, their types and scope required.
Brief summary of characteristics of the programme	As a result of the first steps to build a new system, new accents of the Reform Strategy were identified. Existing state and municipal institutions could not meet all needs, while in some regions there were non-governmental social service providers, so the task has been to create a market for social services and set equal standards for providers of all forms of ownership and management (by establishing common criteria for social service providers). The new approaches to financing social services were introduced as a transition from the pure preservation of institutions to providing the required services. Recommendations on improving the quality of social services (including the development and implementation of state standards for social services, recommendations for monitoring and quality assessment) were drawn up.

c. Major reform III

Name and type of law	The Law of Ukraine "On social services" № 2671-VIII
Date the law was passed	January 17, 2019
Date of de jure implementation	January 1, 2020
Brief summary of content	This Law defines the basic organizational and legal framework for the provision of social services for vulnerable persons / families. This Law came into force while the administrative reform (decentralization of power) was in the active process of implementation and the powers to provide social services to the population were devolved to local authorities, to make it as close as possible to recipients.
Socio-political context of introduction	For the first time, social services were considered in three areas: 1) preventing hardship and vulnerability; 2) overcoming hardship and vulnerability; 3) minimizing the negative consequences of the aforementioned.
Brief summary of characteristics of the programme	The system of social services and the process of its organization, planning and monitoring has been improved; a list of 17 basic social services to be provided at the community level and a list of categories of persons to whom services are provided at the expense of budget funds were drawn up; the powers of the authorities at central and local levels were detailed; a register of recipients and providers of social services was drawn up together with the introduction of uniform requirements for all providers of social services; competitive mechanisms for the organization of service provision were introduced.

d. Major reform IV

Name and type of law	Resolution of Cabinet of Ministers of Ukraine "Some issues of the National Social Service of Ukraine" No. 783
Date the law was passed	August 26, 2020
Date of de jure implementation	On the day of official publication
Brief summary of content	The purpose is to make the social welfare system more focused and effective, to ensure the protection of children's rights and to develop quality services for citizens in need of state support.
Socio-political context of introduction	The aim is to establish a new network for setting common standards of social support and monitoring their compliance.
Brief summary of characteristics of the programme	The new institution (the National Social Service of Ukraine) is intended to promote the development of high-quality, citizen-oriented social services, as well as manage the sphere of social welfare in a new way.

4. Description of Current Long-Term Care System

a. Organizational structure

Social welfare for persons in need of long-term care (social services and medical support) is regulated by various normative acts, which can be tentatively divided into two groups – care provided at the place of residence, and care provided at specialized institutions. This complex legislation determines providers of social services, payment mechanisms for these services, activities and requirements for the provision of social services.

The mechanisms for providing social services for people in need of long-term care and how it is organized in Ukraine can be seen in Figure 1 (p. 9).

b. Service provision

It is legally established that institutions and individuals, private entrepreneurs, as well as their associations listed in the register of providers and recipients of social services (an automated information and telecommunications system developed by the Ministry of Social Policy) can be providers of social services. Providers of social services belong to the public / municipal or private sectors (NGOs, charitable foundations or religious organizations, entrepreneurs and self-employed. Individuals who provide social care services on a non-commercial basis receive compensation from the state/government if they: 1) are qualified and provide social services in compliance with established state standards; 2) provide these social services without having any training if they are care givers to a member/members of their family who is/are:

- » a person with disabilities (Category I);
- » children with disabilities;
- » elderly with cognitive impairments.

Under certain circumstances a person may be denied domiciliary social services if there are medical contraindications. These contraindications, which are listed and approved by the central executive body (Ministry of Healthcare), include:

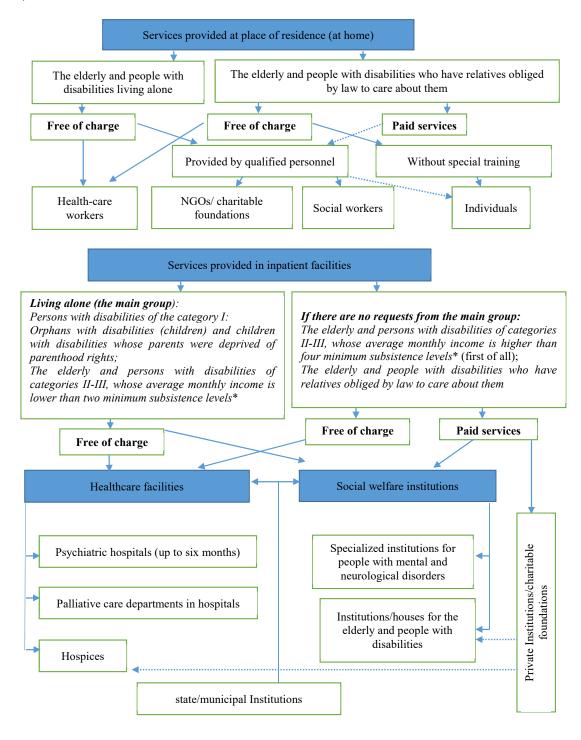
- » the need for round-the-clock third-party care of citizens
- » infectious diseases (Active TB Disease);
- » abuse of psychoactive substances, alcohol;
- » mental illnesses that require a special dispensary registration.

In these and other cases social services can be provided at institutions or hospitals such as the following:

- » hospices;
- » other hospitals with a department or designated unit for palliative patients;
- » specialized healthcare institutions (centres) for medical rehabilitation and palliative care for children;
- » mobile palliative care teams affiliated to a hospital



Figure 1. Organizational structures of providing social services for people in need of long-term care at home and in inpatient facilities



^{*}According to the Law of Ukraine "On the State Budget of Ukraine for 2021", monthly *minimum subsistence level was set* per person in 2021 in the amount of UAH 2,189 as of January 1 (approximately \$80 at January 2021 exchange rate)

Palliative care is supported by health care institutions that provide palliative care regardless of the form of ownership and affiliation and entrepreneurs who have received a license to conduct business in medical practice. To provide palliative care in inpatient departments, a license to provide drugs, psychotropic substances and precursors is also required (Ministry of Healthcare of Ukraine. 2020).

Patients with HIV-infection/ AIDS are treated in palliative wards at specialized (infectious, tuberculosis) hospitals (Ministry of Healthcare of Ukraine. 2007). Palliative care as a consulting service for this group of patients can be provided in medical institutions of any form of ownership through various organizational forms of medical care, including day hospital, specialized institutions (hospices) and at home.

c. Financing

Social services are financed both from budget funds (state and local budgets) and from other sources (paid services, social funds, charitable assistance and other services not prohibited by law). The cost of social services is determined in accordance with the Guidelines of the Ministry of Social Policy (Ministry of Social Policy of Ukraine. 2015). The organization of social services at the expense of budget funds can be carried out through two types of mechanisms:

- » non-competitive maintenance of state and municipal institutions, support by public and charitable organization;
- » competitive through social procurement, public-private partnership, tendered social projects, social programmes, etc.

Responsibility for planning, financing and organizing the provision of basic social services rests with local authorities and local governments.

d. Regulation

The social services system in Ukraine is regulated primarily by the Law of Ukraine "On Social Services" (2019), which establishes the principles of the social services system, as well as a number of laws governing social welfare and social services to various categories of citizens. By-laws on various aspects of social services (both the organization of their provision and the content of services) include Resolutions of the Cabinet of Ministers of Ukraine, orders of the Ministry of Social Policy, the Ministry of Healthcare and other central authorities.

The authorized bodies of the social services system at the present stage include:

at the national level

- » Ministry of Social Policy of Ukraine the main central body of executive power that ensures the development of state policy in the field of social welfare, whose activities are aimed at coordinating the actions of local state administrations, self-government bodies and social service providers, and the approval of state standards of social services;
- » The National Social Service of Ukraine (the new institution created in 2020) manages the provision of social services and ensures their development, first of all, at the level of local communities, where services are most needed. Its activity will promote the development of good quality, citizen-oriented social services.

at the local level

- » Local authorities (Regional State Administrations) ensure the smooth interaction between social service providers and bodies, institutions, establishments and private entrepreneurs who, within the bounds of their remit, provide assistance at the regional level; exercising control over the targeted use of budget aimed at financing social services;
- Executive bodies of city councils, councils of amalgamated territorial communities determine the needs of the population in social services within the administrative community; provide the public with information about available services, their content and procedures for provision; finally, ensure, based on the results of the assessment of the needs of a person / family, the provision of basic social services to the person / family in accordance with those needs.



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