



# LTC SPENDING IN OECD COUNTRIES THROUGH THE CRISIS

Plus: the impact of spending decisions and some memories of the 2013 UK spending review

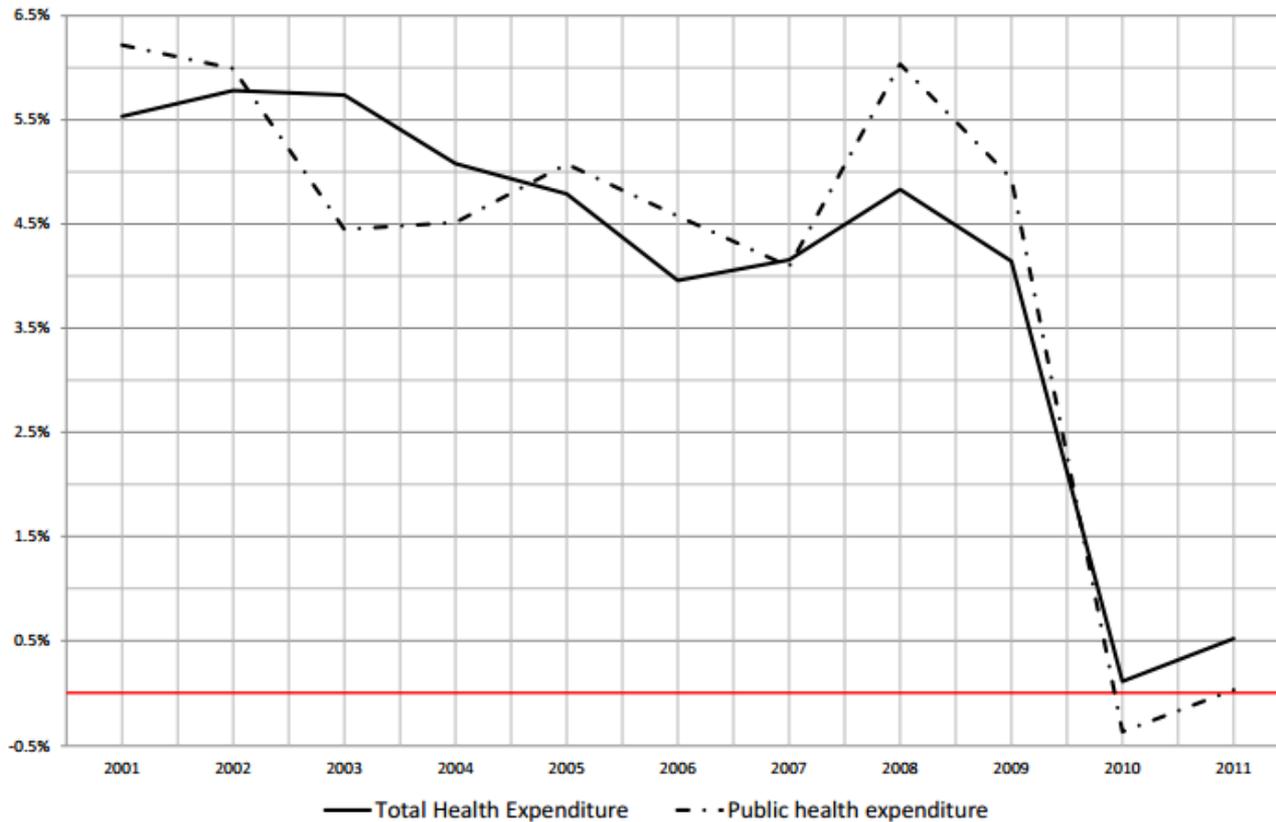


# AN OVERVIEW OF LTC SPENDING THROUGH THE CRISIS IN OECD COUNTRIES



# The financial crisis has had a major impact on health spending

Figure 1. Average OECD health expenditure growth rates from 2000 to 2011, public and total

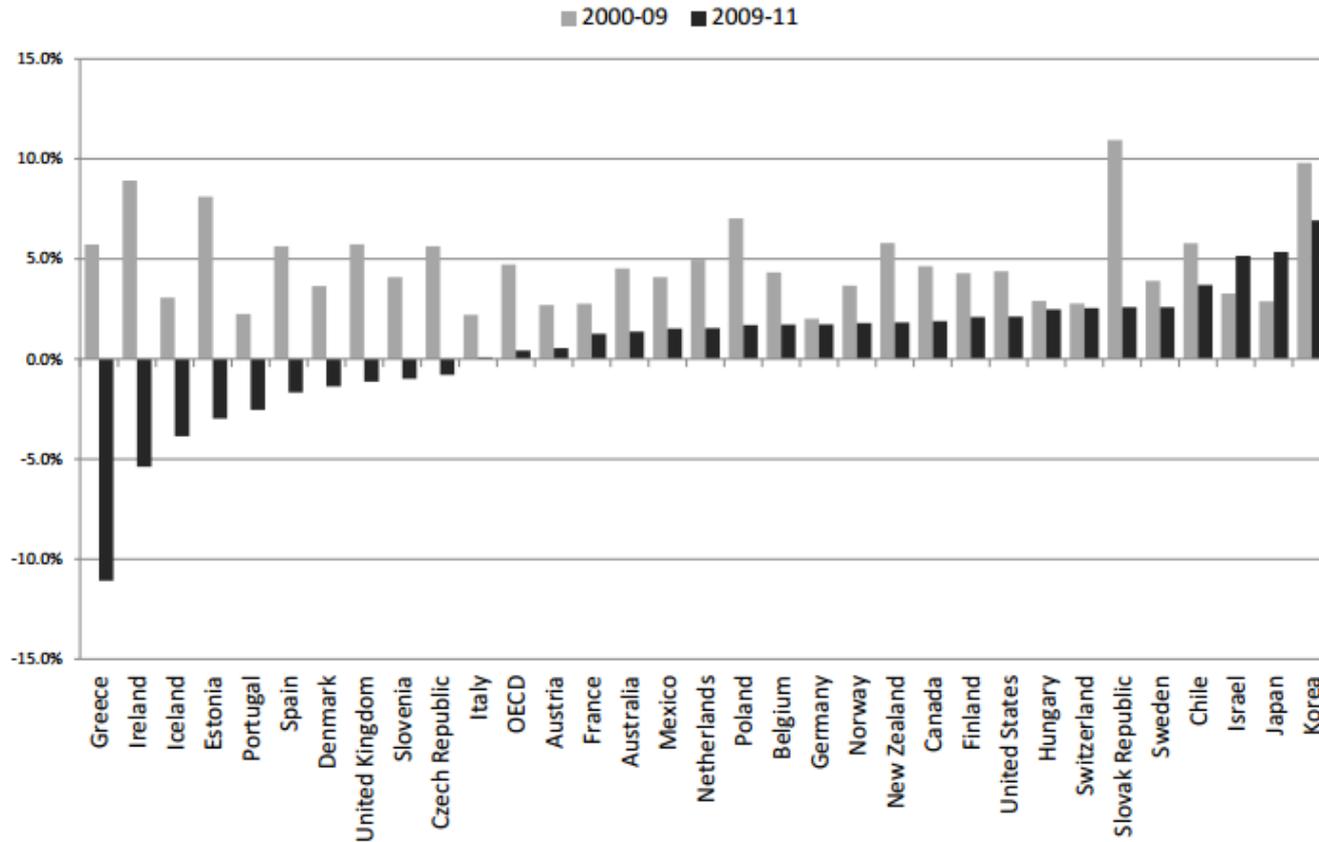


Source: OECD Health Statistics 2013



# Although there is a lot of variation between countries

Figure 2. Average annual growth in health spending across OECD countries, 2000-2011



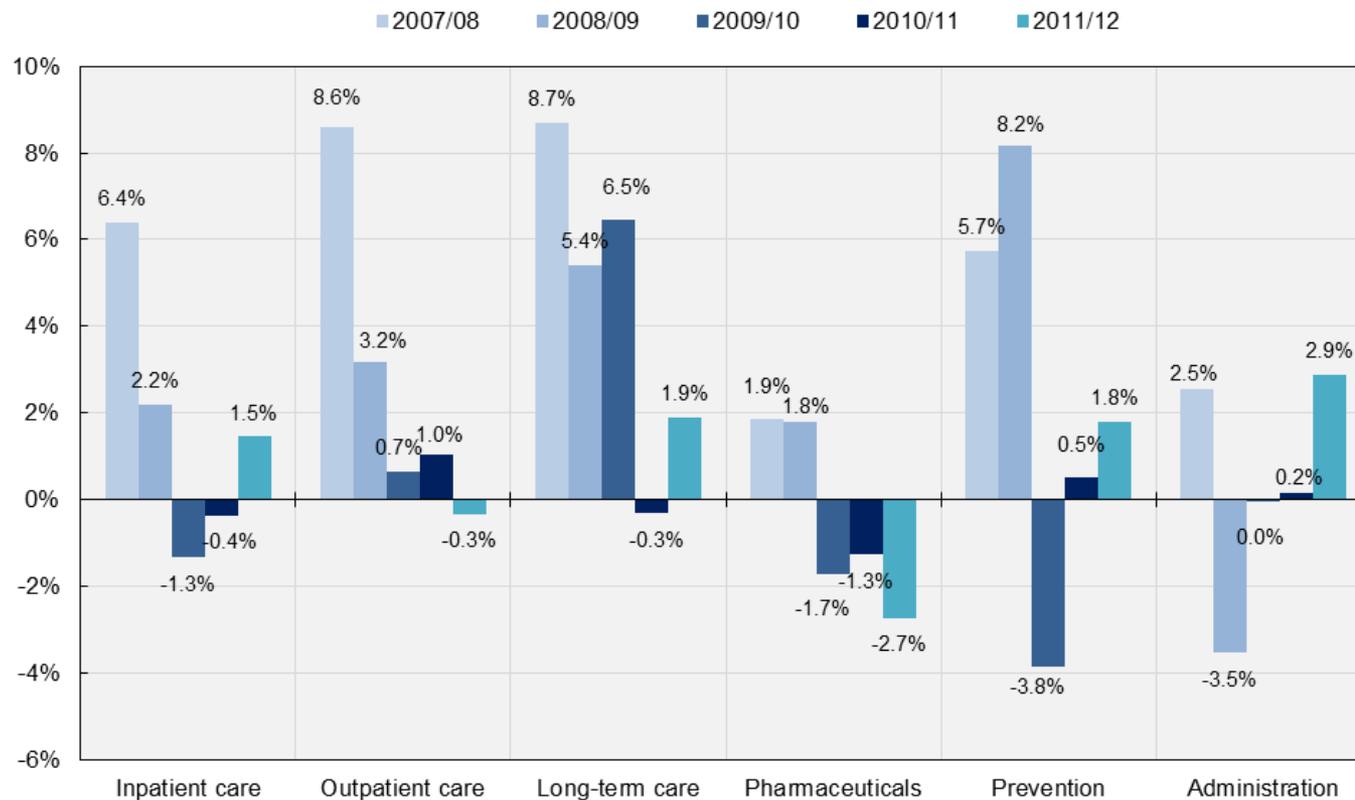
Note: Growth rates refer to 2009-10 rather than 2009-11 for Australia, Japan, Mexico and Slovak Republic.

Source: OECD Health Statistics 2013



# LTC spending has held up better than other parts of health spending

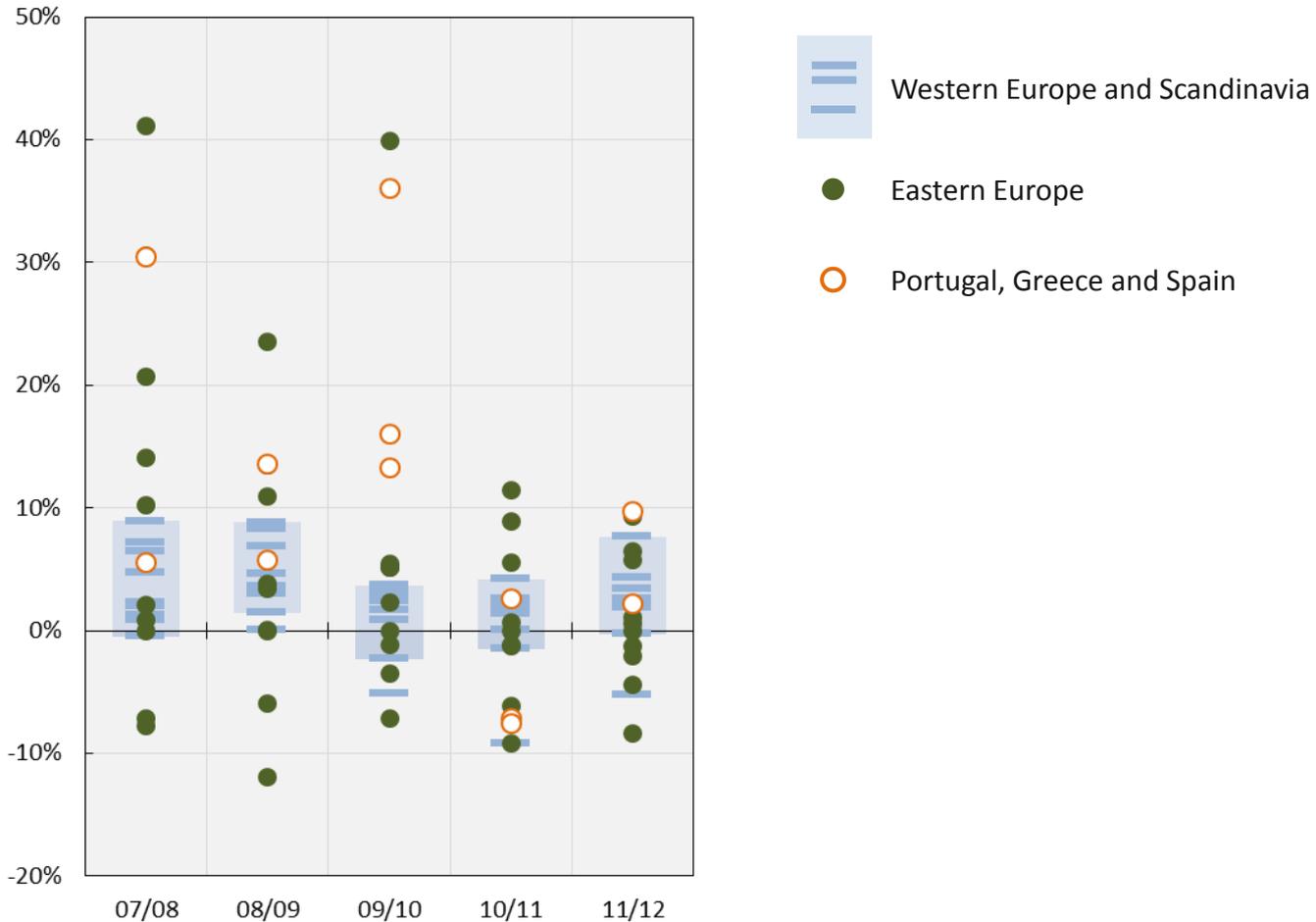
Average real annual growth rates of spending for selected components, EU average





# But averages can hide a world of sins

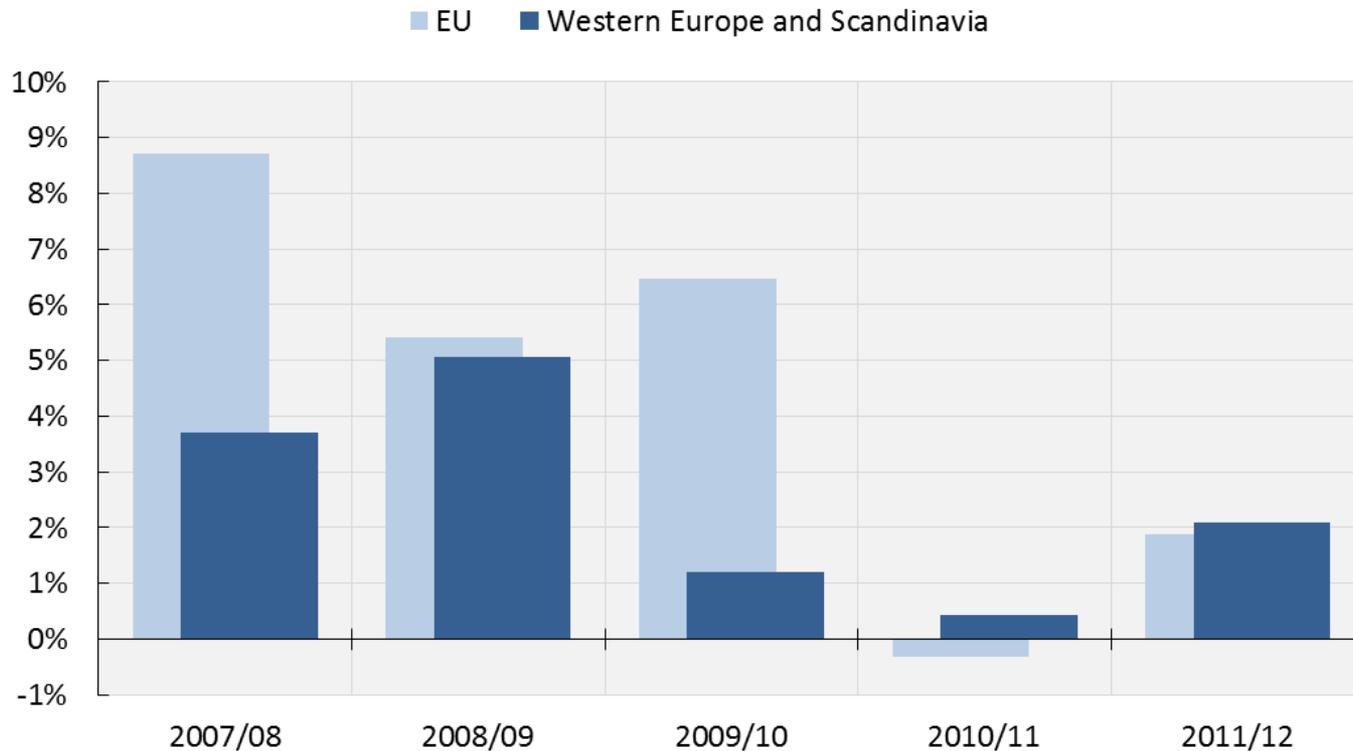
Average real annual growth rates of LTC spending in EU countries





# Spending growth in Western Europe and Scandinavia slowed from 2009-11

Average real annual growth rates of LTC spending

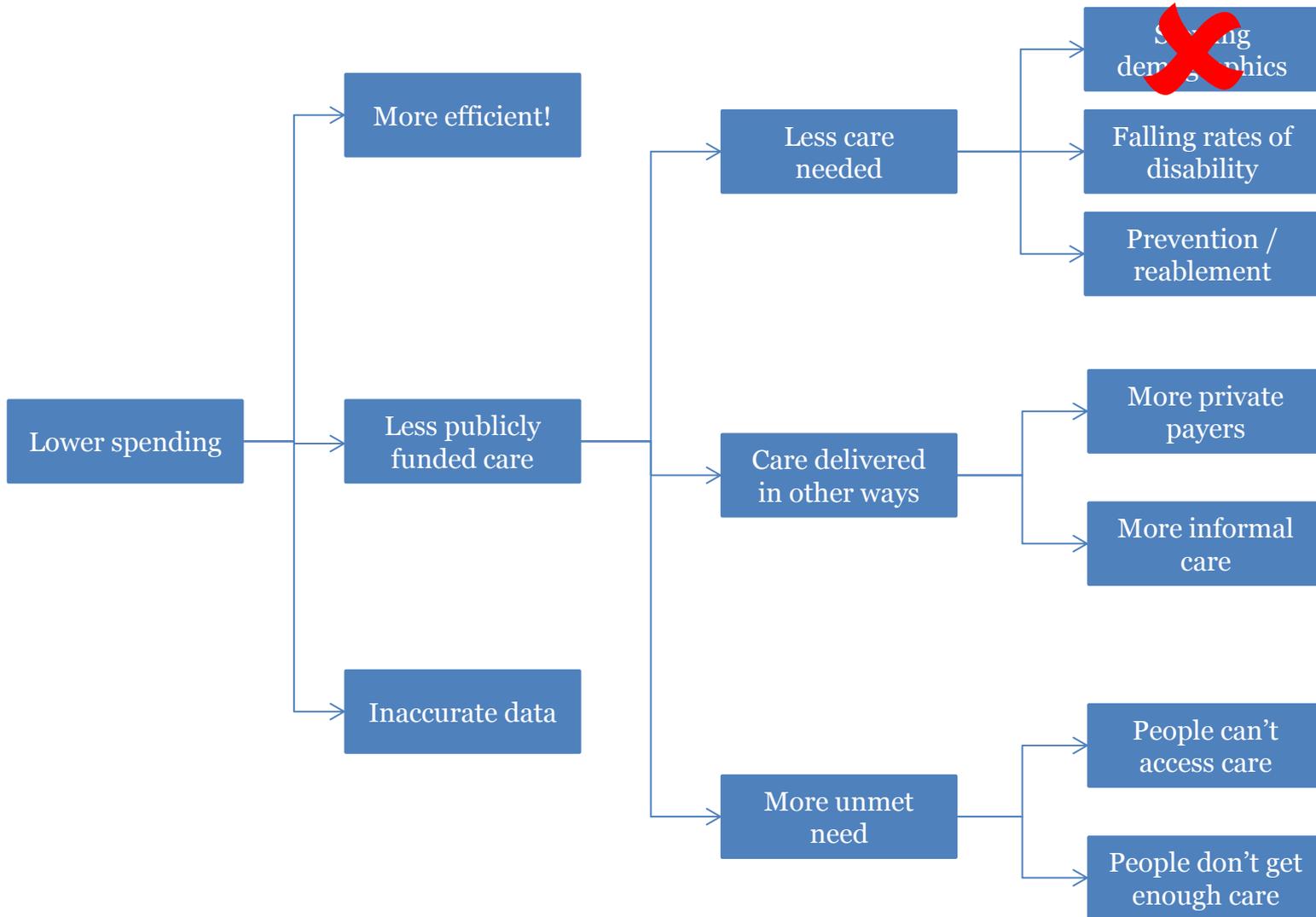




# THE IMPACT OF LOWER SPENDING GROWTH



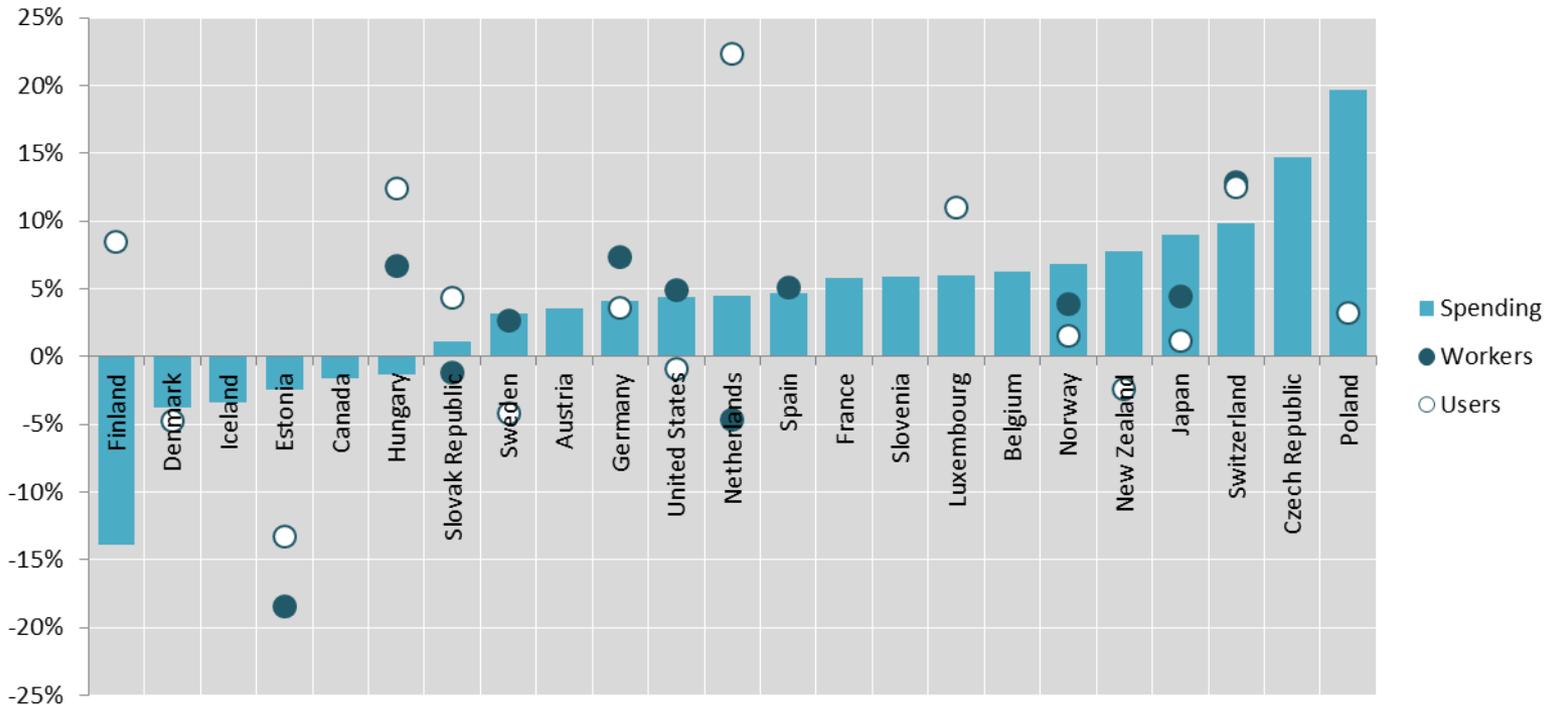
# There are lots of explanations for lower spending, but which is true?





# To see the impact of spending changes we can look at staff and user numbers

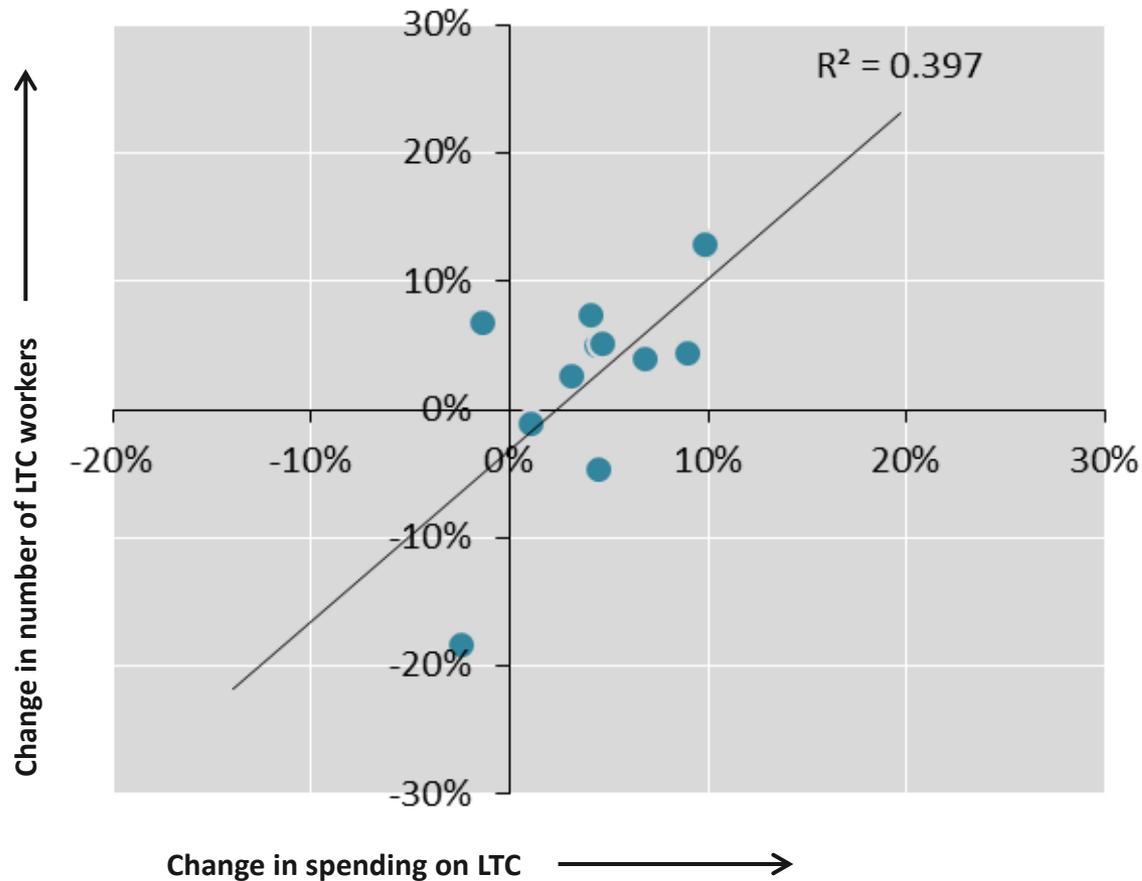
Changes in LTC spending, staffing and user numbers, 2009-2011





# Less spending generally means fewer LTC workers

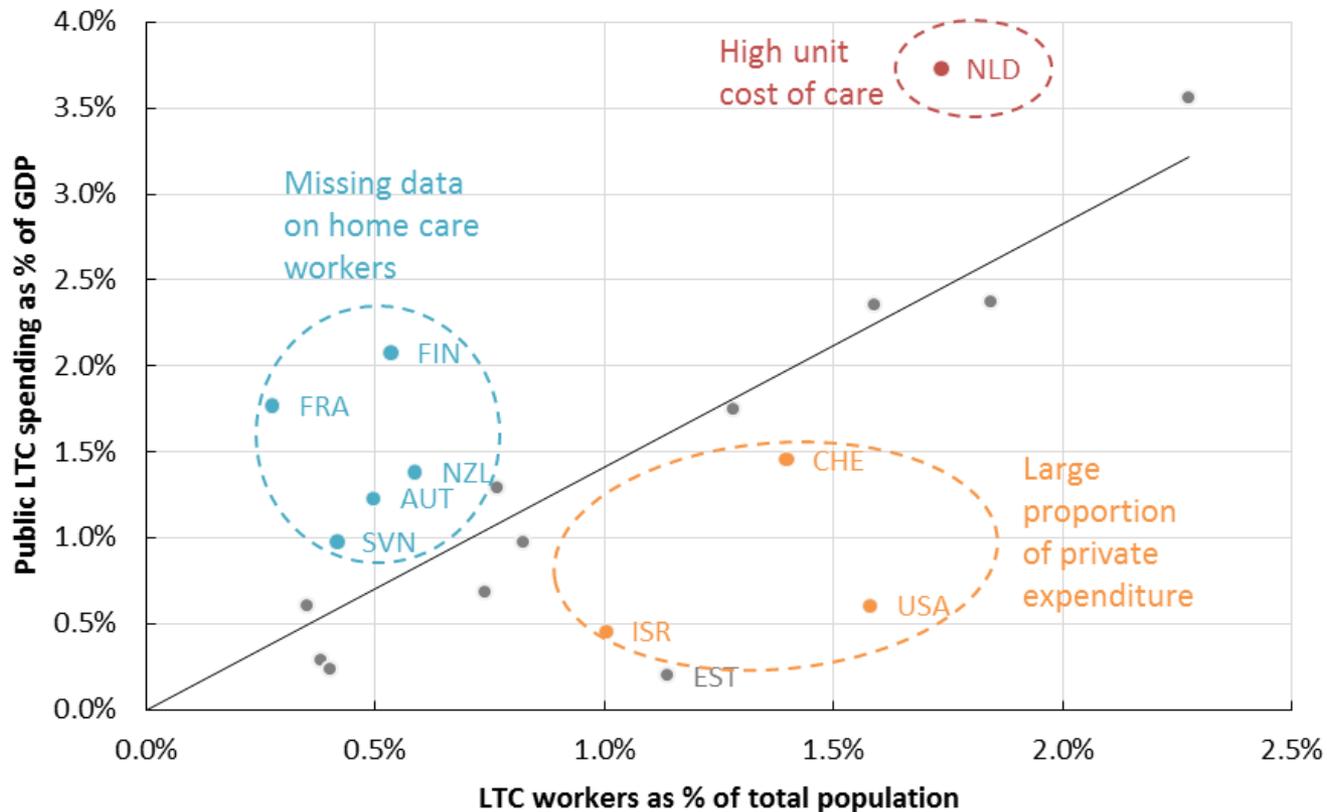
Changes in LTC spending and staffing, 2009-2011





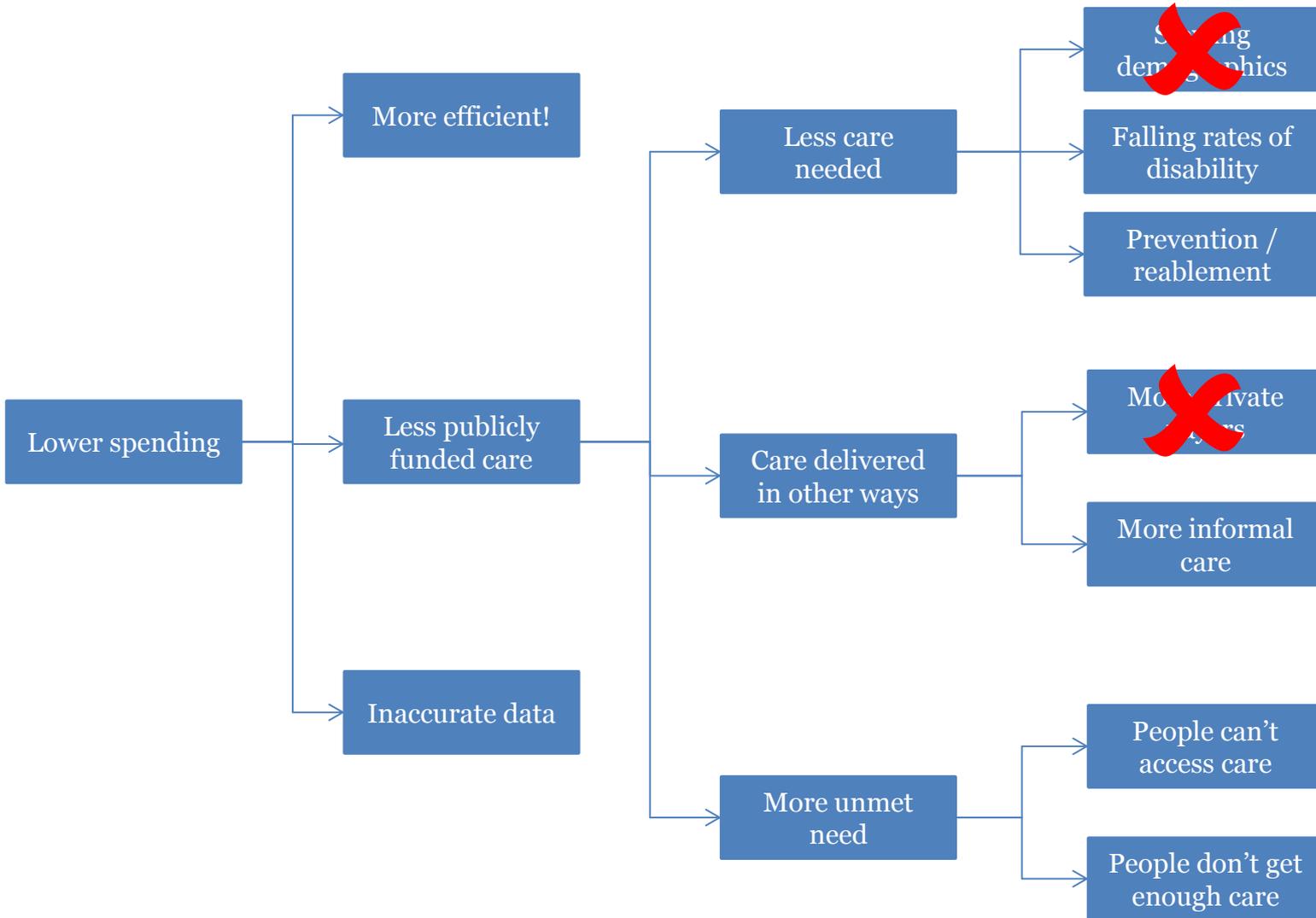
# That shouldn't be a surprise, since LTC costs are mostly labour

Public expenditure on LTC and LTC workers, 2011 or nearest year





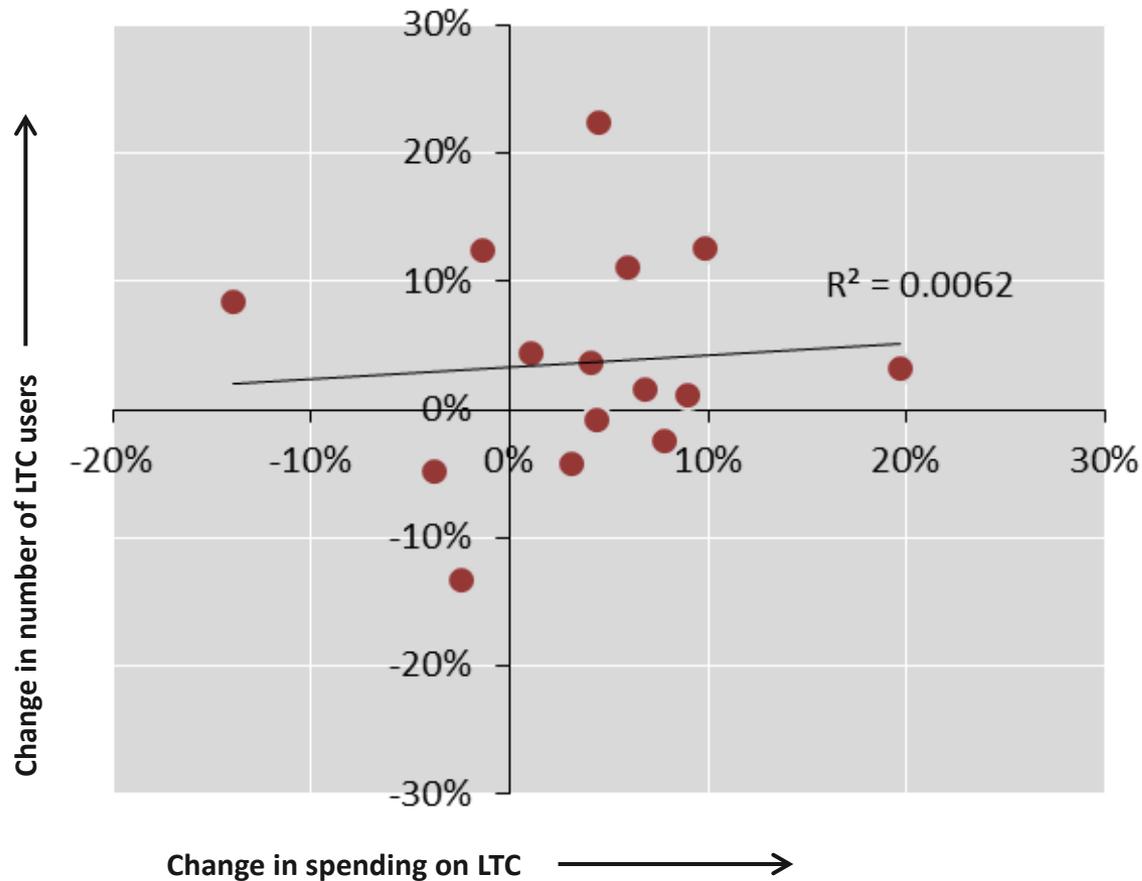
# So it doesn't look like private spending has substituted for public





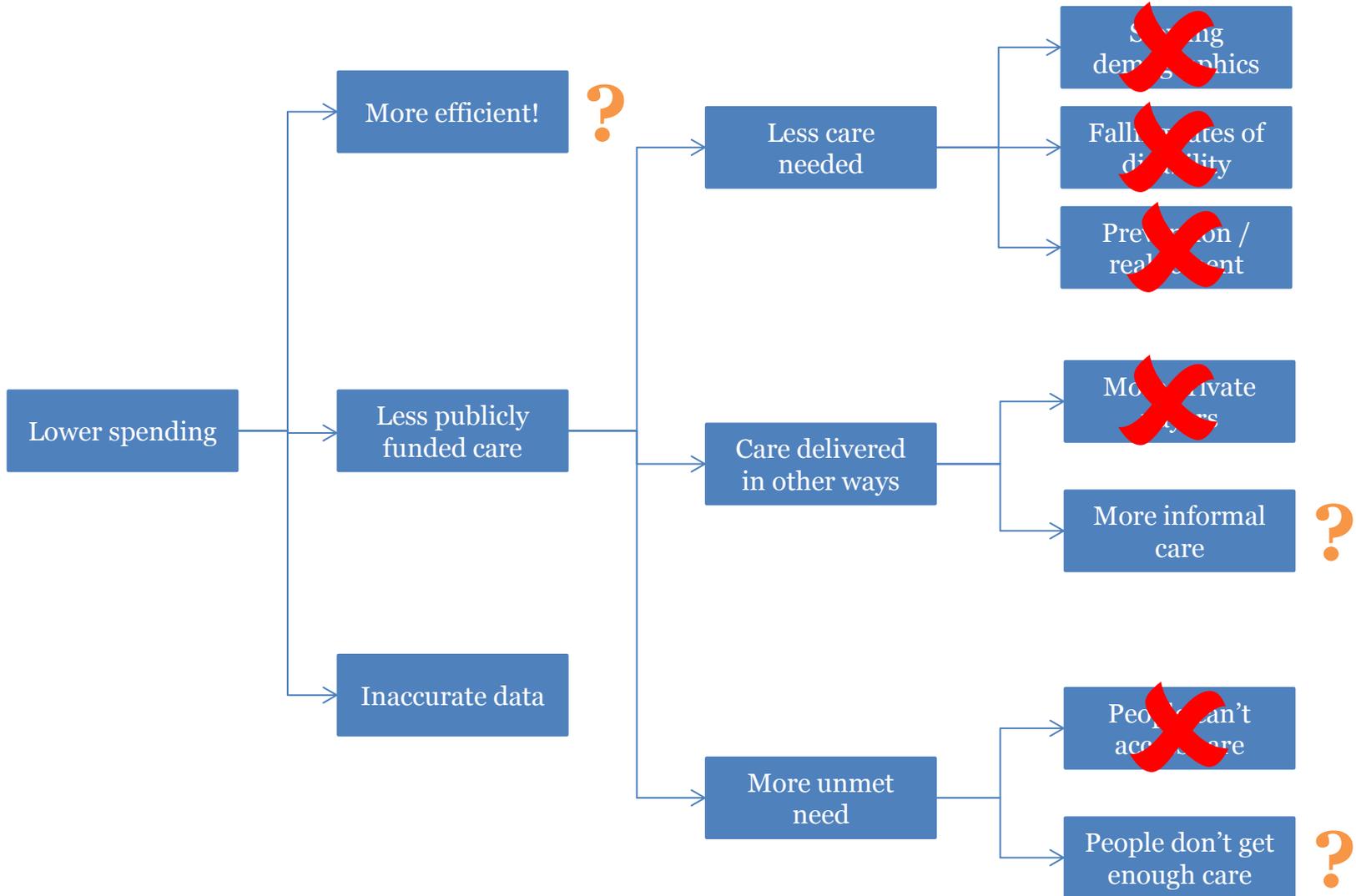
# Does less spending and fewer staff mean fewer people get care?

Changes in LTC spending and user numbers, 2009-2011





# But this still doesn't get us very far in adjudicating between explanations



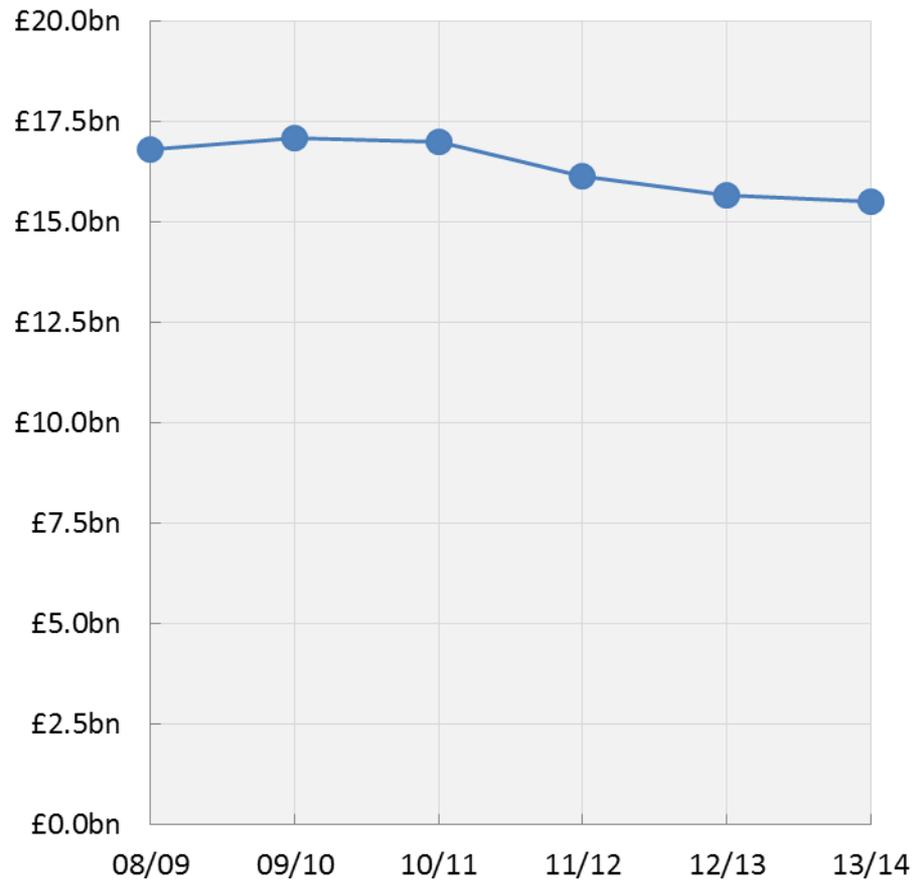


# THE IMPACT OF REDUCED SPENDING IN ENGLAND AND THE 2013 SPENDING REVIEW



# Social care spending in England has fallen

Social care spending in England (13/14 prices)

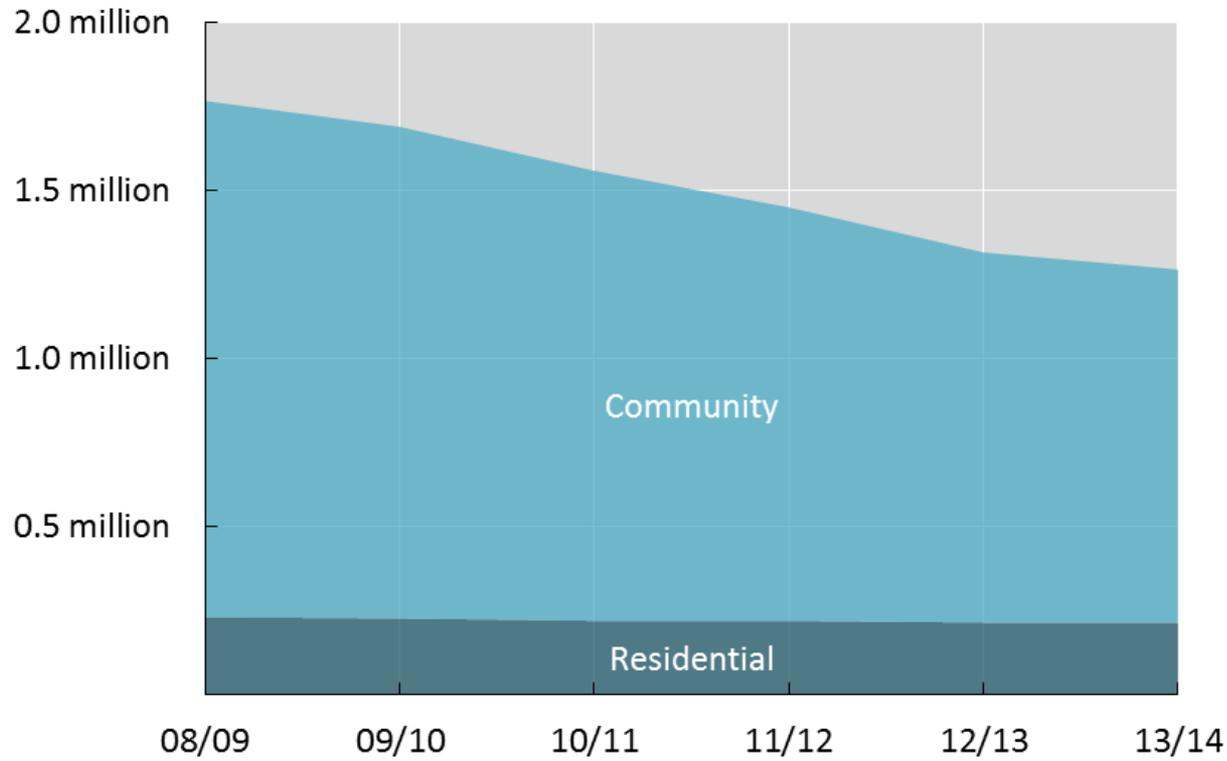


Source: Health and Social Care Information Centre



# This has been accompanied by a collapse in user numbers

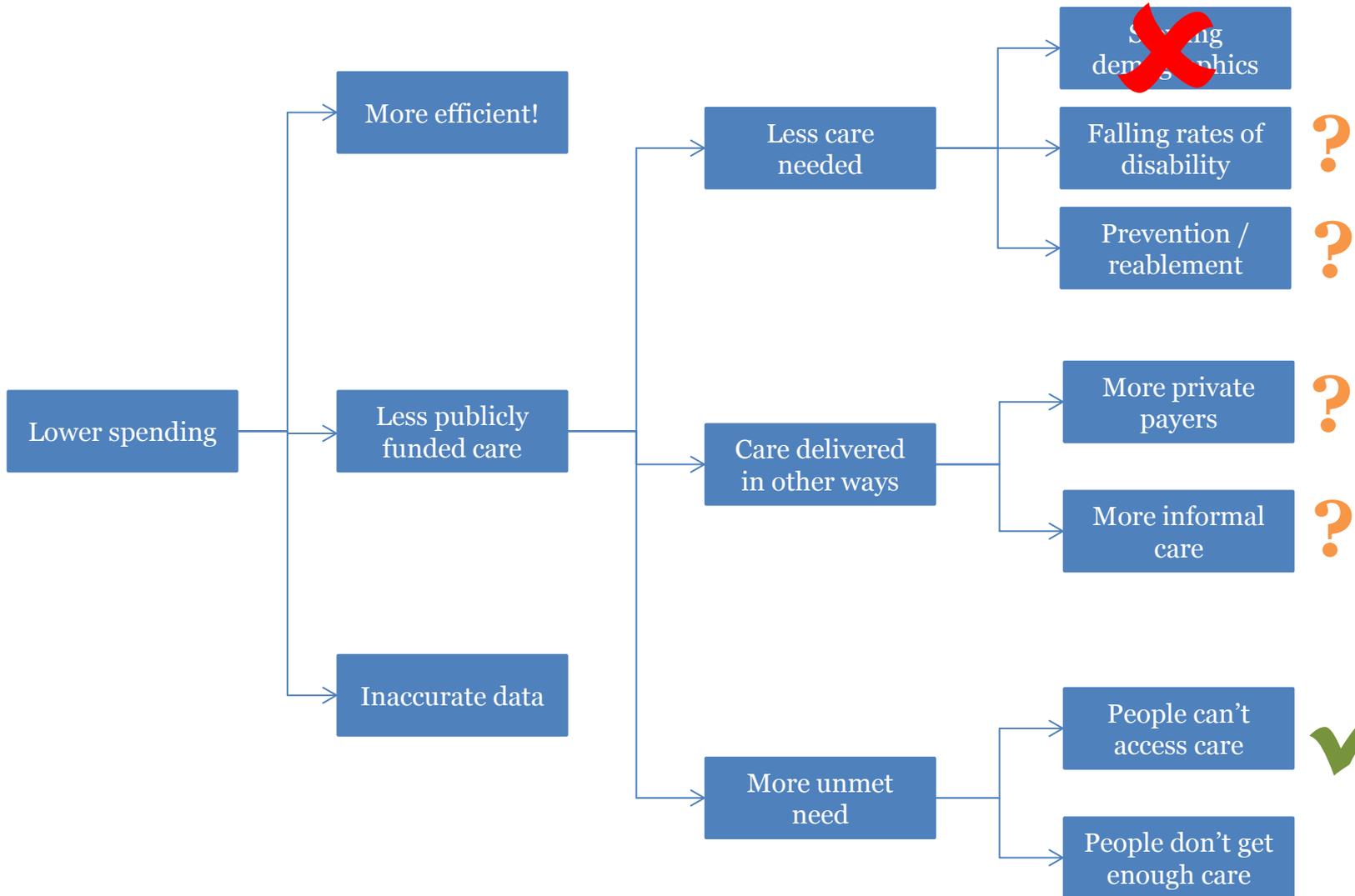
Social care users in England



Source: Health and Social Care Information Centre



# But there are still competing explanations and no conclusive proof





# What could be done to understand what's really going on?

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- Start at a national level – don't run before we can walk.
- We need more data. We have analysed existing data to death without conclusively answering these questions.
- Improve data on outcomes – both for people who get LTC and those who don't.

## An example for England

- Study comparing different parts of the country with different patterns of spending / user numbers over the last few years
- Look at local data (held by local government), talk to social workers, users, disabled people who cannot access services
- Establish whether access has been restricted; whether people in care get less; and what happens to those denied care

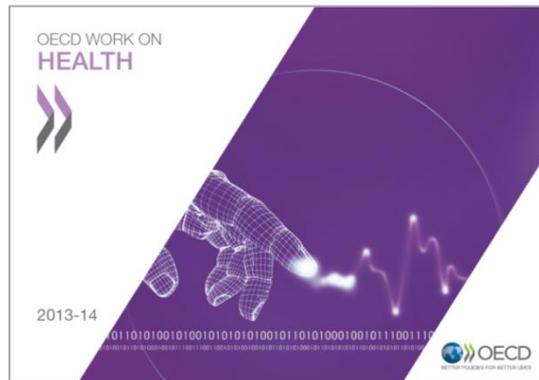


# Thank you

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Contact: [tim.muir@oecd.org](mailto:tim.muir@oecd.org)

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