# GATEWAY TO GLOBAL AGING DATA

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# Gateway Policy Explorer: Long-Term Care Series

# **Czech Republic**

# Long-Term Care Cash Benefit Plan Details 2007-2024

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# **Preface**

This document is intended for researchers who want to understand the evolution of policy or the policy in place at a particular point in time. This document is not intended for financial advice or to aid in decision-making. The authors have made significant effort to identify and collect historical information pertaining to these policies, to accurately represent these policies, and to communicate how policies may interact to determine legal requirements, eligibility for benefits, and/or benefits levels. The policies presented in this document focus on rules applicable to most individuals aged 50 and older from 1992. Many systems include special policies or alternative eligibility rules for specific groups. We encourage all users to complete their own review of literature in this area depending on the research questions they have in mind.

If you have feedback or questions or identify an error, please contact policy@g2aging.org.

# Background — Gateway Policy Explorer: Long-Term Care Series

The Gateway Policy Explorer (http://g2aging.org/policy-explorer) is part of the Gateway to Global Aging Data (http://g2aging.org) project. The Long-Term Care Series captures historical policy that affects the birth cohorts of respondents in the surveys covered by the Gateway. It was motivated by the rapid evolution of policies affecting older people across the world. As the Health and Retirement Study (HRS) began in 1992 and many of the international network of studies (HRS-INS) cover more than a decade, understanding the policies in place at the time of the survey has become more demanding for researchers.

Why are we tracking past policy? Individuals make choices based on current policies and the outcomes we see today may reflect responses to past policies. When interpreting the survey responses of individuals, an understanding of the policy environment under which those individuals operate is critical. The collection of contextual information in the Gateway Policy Explorer aims to support researchers who want to understand or use policy changes in their research and provide context for longitudinal or cross-country differences. Over the period 2023–2026 the Gateway Policy Explorer will be expanded to include information on retirement, long-term care, education, and other policies affecting the life cycle.

The key dimensions to the *Gateway Policy Explorer: Long-Term Care Series* are country and time. In the United States, policy is reported at the state level. We prioritize data collection for each country or state based on its first interview wave and are continuing to expand our data collection back in time to 1992, the earliest survey date in the HRS-INS.

A separate document, like this one, is developed for each country or state and each broad category of policies covered in the *Gateway Policy Explorer: Long-Term Care Series*.

# **Czech Republic**

Cash Benefits
Plan details 2007-2024 \* †

In the Czech Republic, individuals with care needs can receive financial support through a single cash benefit called the Care Allowance [Příspěvek na péči]. Introduced in 2007, the Care Allowance is administered through the social services system. Individuals are typically eligible for cash benefits through the social services system as long as they are a permanent resident of the Czech Republic. Dependence is evaluated using 36 activities and 129 sub-activities related to self-care and self-sufficiency.

In 2012, a new care needs assessment was introduced, reducing the number of activities from 36 to 10 and the number of sub-activities from 129 to 53. The new assessment focuses on managing basic life needs, whereas the previous assessment addressed the need for assistance or supervision with self-care and self-sufficiency activities. Dependence levels, coverage criteria, allowance provision, and user charges remain unchanged. Cash allowances are not subject to taxation and are not means-tested.

# **Key Dates**

First law: 2006

Major changes since 2006: 2012

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<sup>\*</sup> If you have questions or suggestions, please contact policy@g2aging.org.

betailed information and definitions are provided in tables, formulas and a glossary at the end of this document. To facilitate switching back and forth, this document is designed with hyperlinks. Most PDF readers have shortcuts that permit a reader to return to the previous location after selecting a hyperlink. In Adobe Acrobat on a PC: "Alt" + "

", In Adobe Acrobat on a MAC: "command" + "

", In Preview on a MAC: "command" + "

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# Chapter 1: Policy enacted 2007-2011

#### **Overview**

During this period, the Czech Republic provided long-term care (LTC) cash benefits through its social services system.

The Social Services Act [Zákon o sociálních službách] is the key legal framework for social support in the Czech Republic. Organized at the national level by the Ministry of Labor and Social Affairs, and at the local level by municipalities, the Social Services Act provides a wide range of benefits, including the Care Allowance [Příspěvek na péči]. Individuals are eligible for cash benefits through the social services system as long as they are a permanent resident of the Czech Republic and are over the age of one. The allowance amount varies depending on the individual's level of dependence and age. In 2007, the allowances for individuals 18 years or older ranged from 2,000 CZK to 11,000 CZK. There are four levels of dependence that are based on the number of self-care and self-sufficiency activities for which an individual requires assistance. Dependence is evaluated using 36 activities and 129 sub-activities, with a minimum qualification level of 1, which requires individuals 18 years or older to need assistance with more than 12 activities and individuals under 18 to need assistance with more than 4 activities. Cash allowances are not subject to taxation and are not means-tested.

Before the Care Allowance was introduced in 2007, individuals could receive an increase in their disability pension, referred to as the "incapacity benefit," under the Social Security Act of 1988 [Zákon o sociálním zabezpečení]. The increase in the disability pension was determined by the degree of incapacity: partial, moderate, or complete (Ministry of the Interior, 1988). Details of disability benefits are not included in this document.

This policy period (chapter) provides details on cash benefits covered by the Czech Social Services Act from 2007 to 2011.

#### **Statutory basis**

Act No. 108/2006 - Social Services Act (Zákon č. 108/2006 - Zákon o sociálních službách) (Ministry of the Interior, 2006a)

Decree No. 505/2006 - Decree implementing the Act on Social Services (Vyhláška č. 505/2006 - Vyhláška, kterou se provádějí některá ustanovení zákona o sociálních službách) (Ministry of the Interior, 2006b)

# **Financing**

#### Source of financing

The Care Allowance provided under the Social Services Act is funded by the state budget (Ministry of the Interior, 2006a, §7).

# Coverage

This section discusses the scope of risks covered and the requirements to be eligible for benefits when the need for care arises. Dependence requirements are discussed in the later section on *Benefit Eligibility*.

# **Risk covered definition**

The Social Services Act covers care needs related to aging, health, disability, and social wellbeing (Ministry of the Interior, 2006a, §§1-3).

#### Eligible population

An individual is covered under the social services system if all of the following conditions are satisfied (Ministry of the Interior, 2006a, §4)—

- Citizenship or residence requirement:[1] Is a permanent resident of the Czech Republic
- Age requirement: [2] None
- · Income or resource requirement: None

# **Benefit**

#### **Cash Benefit**

The Care Allowance [Příspěvek na péči] is a monthly cash benefit for individuals who are unable to care for themselves and need support from others. The amount varies depending on the individual's level of dependence and age. In 2007, the allowance amounts were as follows (Ministry of the Interior, 2006a, §§7, 11):

- · Individuals 18 or older
  - ♦ Level 1 (mild dependence): 2,000 CZK
  - ♦ Level 2 (moderate dependence): 4,000 CZK
  - ♦ Level 3 (severe dependence): 8,000 CZK
  - ♦ Level 4 (complete dependence): 11,000 CZK
- · Individuals under 18
  - ♦ Level 1 (mild dependence): 3,000 CZK
  - ♦ Level 2 (moderate dependence): 5,000 CZK
  - ♦ Level 3 (severe dependence): 9,000 CZK
  - ♦ Level 4 (complete dependence): 11,000 CZK

Care Allowance amounts by dependence level from 2007 to 2024 can be found in Table 1 for individuals under the age of 18 and Table 2 for individuals 18 years or older.

# **Discretionary Use**

Discretionary use is not permitted—individuals must ensure that the funds are used for their intended care needs. The municipal office in the beneficiary's area managed the verification process. They collect information on who provided the assistance (e.g., a family member or social care assistant), the type of support given, and whether the assistance is appropriate for the beneficiary's care needs based on their level of dependence. To confirm proper use of the allowance, employees of the regional branch conduct home visits for social evaluations. During these visits, beneficiaries can be asked to provide proof of expenditure, which may include receipts or documentation for payments made to individuals or organizations. The law does not specify how often these investigations are conducted (Ministry of the Interior, 2006a, §§25-29).

#### **Provision of care**

The municipality deposits the allowance into the qualified beneficiary's bank account (Ministry of the Interior, 2006a, §18).

# **Benefit Eligibility**

# **Qualifying period**

None

# Minimum level of dependence

The minimum level of dependence is Level 1 (mild dependence), defined as requiring assistance or supervision for more than 4 activities of self-care and self-sufficiency for individuals under 18 (more than 5 activities before August 2009), or for more than 12 activities for those aged 18 and older (Ministry of the Interior, 2006a, §8).

# **Duration of benefit**

Beneficiaries continue to receive the allowance as long as they satisfy the coverage criteria (see Coverage section) (Ministry of the Interior, 2006b, §15).

# **Means testing**

None

### Age requirement

The Social Services Act does not have an age requirement to receive benefits. However, to receive the Care Allowance, individuals must be at least 1 year old (Ministry of the Interior, 2006a, §7).

# **Care Needs Assessment**

#### **Definition of dependence**

Dependence is based on the need for assistance or supervision to perform self-care and self-sufficiency activities. Individuals are classified into levels of dependence based on the number of self-care and self-sufficiency activities in which they require assistance or supervision (Ministry of the Interior, 2006a, §8):

- · Individuals under 18
  - Level 1 (mild dependence): More than 4 activities (more than 5 activities before August 2009)
  - ♦ Level 2 (moderate dependence): More than 10 activities
  - ♦ Level 3 (severe dependence): More than 15 activities
  - Level 4 (complete dependence): More than 20 activities
- · Individuals 18 or older
  - ♦ Level 1 (mild dependence): More than 12 activities
  - ♦ Level 2 (moderate dependence): More than 18 activities
  - ♦ Level 3 (severe dependence): More than 24 activities
  - Level 4 (complete dependence): More than 30 activities

# **Evaluation of dependence**

The evaluation of dependence is based on an individual's need for assistance or supervision in performing self-care and self-sufficiency activities. There are 36 activities: 18 related to self-care and 18 related to self-sufficiency. Each activity consists of specific sub-activities, totaling 129 sub-activities. Box 1, Box 2, Box 3, and Box 4 list the self-care and self-sufficiency activities along with their respective sub-activities. For each activity, the evaluator assesses whether the person can perform it independently, reliably, and repeatedly, as well as recognize the need for the activity. If an individual is only partially able to perform any of the required actions, they are deemed unable to complete the activity (Ministry of the Interior, 2006a, §9). To determine an individual's level of dependence, the number of activities in which they require assistance or supervision is summed. However, the legislation does not specify how sub-activities are assessed in relation to the main activities. For example, it does not clarify how many sub-activities an individual must be unable to perform to be considered in need of help with that activity (Ministry of the Interior, 2006b, §1, Annex 1).

## **Evaluators**

Physicians from district social security administration offices evaluate dependence (Ministry of the Interior, 2006b, §21).

#### **Benefit limitations**

# Can you mix LTC benefits?

The Social Services Act does not specify any restrictions on combining in-kind benefits with cash benefits, suggesting that in-kind benefits can be combined with cash benefits. For instance, individuals can receive the Care Allowance under the Social Services Act and receive in-kind benefits through the Social Services Act or Public Health Insurance Act (Ministry of the Interior, 2006a, 2006b).

#### Is there free choice between cash and benefits in-kind?

The Social Services Act does not specify any restrictions on choosing between in-kind benefits and cash benefits, suggesting that they can be combined depending on the type of benefit (Ministry of the Interior, 2006a, 2006b).

# Can you receive LTC benefits with other social security benefits?

From 2008, individuals cannot receive the Care Allowance while receiving institutional care in a hospital or specialized treatment facility for an entire calendar month or longer. This does not apply to social service facilities, such as nursing homes (Ministry of the Interior, 2006a, §14a).

Chapter 1: Policy enacted 2007-2011

#### **User costs**

### **User charges**

None

# **Taxation of benefits**

Not subject to taxation

# Chapter 2: Policy enacted 2012-2024

#### Policy change in 2012

In 2012, a new care needs assessment was introduced, reducing the number of activities from 36 to 10 and the number of sub-activities from 129 to 53. The new assessment focuses on managing basic life needs, whereas the previous assessment addressed the need for assistance or supervision with self-care and self-sufficiency activities. Additionally, the new assessment clarified how sub-activities are assessed in relation to the activities. Individuals are considered unable to manage a basic life need activity if they cannot perform at least one associated sub-activity. There are still four levels of dependence, each defined by the number of basic life needs an individual is unable to manage. Cash benefit amounts continue to vary based on the level of dependence and age. Coverage criteria, allowance provision, and user charges remain unchanged.

### Other reforms during this period include:

• Act No. 366/2011 of December 1995, effective January 2012, transferred the responsibility for verifying the proper use of the Care Allowance from municipal offices in the beneficiary's area to the regional branches of the Labor Office of the Czech Republic (Ministry of the Interior, 2012).

#### **Overview**

During this period, the Czech Republic provided long-term care (LTC) cash benefits through its social services system.

The Social Services Act [Zákon o sociálních službách] is the key legal framework for social support in the Czech Republic. Organized at the national level by the Ministry of Labor and Social Affairs, and at the local level by municipalities, the Social Services Act provides a wide range of benefits, including the Care Allowance [Příspěvek na péči]. Individuals are eligible for cash benefits through the social services system as long as they are a permanent resident of the Czech Republic and are over the age of one. The allowance amount varies depending on the individual's level of dependence and age. In 2022, the allowances for individuals 18 years or older ranged from 880 CZK to 19,200 CZK. There are four levels of dependence that are defined by the number of basic life needs an individual is unable to manage on their own. Dependence is evaluated based on 10 activities and 53 sub-activities, with a minimum qualification level of 1, which requires individuals 18 years or older to be unable to manage 3 to 4 basic life needs and individuals under the age of 18 must be unable to manage 3 basic life needs. Cash allowances are not subject to taxation and are not means-tested.

This policy period (chapter) provides details on cash benefits covered by the Czech Social Services Act from 2012 to 2024.

#### **Statutory basis**

Act No. 108/2006 - Social Services Act (Zákon č. 108/2006 - Zákon o sociálních službách) (Ministry of the Interior, 2006a)

Decree No. 505/2006 - Decree implementing the Act on Social Services (Vyhláška č. 505/2006 - Vyhláška, kterou se provádějí některá ustanovení zákona o sociálních službách) (Ministry of the Interior, 2006b)

# **Financing**

# Source of financing

The Care Allowance provided under the Social Services Act is funded by the state budget (Ministry of the Interior, 2006a, §7).

### Coverage

This section discusses the scope of risks covered and the requirements to be eligible for benefits when the need for care arises. Dependence requirements are discussed in the later section on *Benefit Eligibility*.

### **Risk covered definition**

The Social Services Act covers care needs related to aging, health, disability, and social wellbeing (Ministry of the Interior, 2006a, §§1-3).

# Eligible population

An individual is covered under the social services system if all of the following conditions are satisfied (Ministry of the Interior, 2006a, §4)—

- Citizenship or residence requirement: [1] Is a permanent resident of the Czech Republic
- Age requirement:[2] None
- · Income or resource requirement: None

#### Benefit

#### **Cash Benefit**

The Care Allowance [Příspěvek na péči] is a monthly cash benefit for individuals who are unable to care for themselves and need support from others. The amount varies depending on the individual's level of dependence and age. In 2022, the allowance amounts were as follows (Ministry of the Interior, 2006a, §§7, 11):

- · Individuals 18 or older
  - ♦ Level 1 (mild dependence): 880 CZK
  - ♦ Level 2 (moderate dependence): 4,400 CZK
  - ♦ Level 3 (severe dependence): 12,800 CZK
  - ♦ Level 4 (complete dependence): 19,200 CZK
- · Individuals under 18
  - ♦ Level 1 (mild dependence): 3,300 CZK
  - ♦ Level 2 (moderate dependence): 6,600 CZK
  - ♦ Level 3 (severe dependence): 13,900 CZK
  - ♦ Level 4 (complete dependence): 19,200 CZK

Care Allowance amounts by dependence level from 2007 to 2024 can be found in Table 1 for individuals under the age of 18 and Table 2 for individuals 18 years or older.

#### **Discretionary Use**

Discretionary use is not permitted—individuals must ensure that the funds are used for their intended care needs. Regional branches of the Labor Office of the Czech Republic verify how the allowance was used to ensure it was used for assistance. They collect information on who provided the assistance (e.g., a family member or social care assistant), the type of support given, and whether the assistance is appropriate for the beneficiary's care needs based on their level of dependence. To confirm proper use of the allowance, employees of the regional branch conduct home visits for social evaluations. During these visits, beneficiaries can be asked to provide proof of expenditure, which may include receipts or documentation for payments made to individuals or organizations. The law does not specify how often these investigations are conducted (Ministry of the Interior, 2006a, §\$25-29).

## **Provision of care**

The municipality deposits the allowance into the qualified beneficiary's bank account (Ministry of the Interior, 2006a, §18).

# **Benefit Eligibility**

# **Qualifying period**

None

# Minimum level of dependence

The minimum level of dependence is Level 1 (mild dependence), defined as the inability to manage 3 basic life needs for individuals under 18, or 3 to 4 basic life needs for those aged 18 and older (Ministry of the Interior, 2006a, §8).

#### **Duration of benefit**

Beneficiaries continue to receive the allowance as long as they satisfy the coverage criteria (see Coverage section) (Ministry of the Interior, 2006b, §15).

# **Means testing**

None

# Age requirement

The Social Services Act does not have an age requirement to receive benefits. However, to receive the Care Allowance, individuals must be at least 1 year old (Ministry of the Interior, 2006a, §7).

# **Care Needs Assessment**

#### **Definition of dependence**

Dependence is based on the inability to manage ten basic life needs. Individuals are categorized into dependence levels according to the number of basic life needs they are unable to manage (Ministry of the Interior, 2006a, §8):

- · Individuals under 18
  - ♦ Level 1 (mild dependence): 3 basic life needs
  - ♦ Level 2 (moderate dependence): 4-5 basic life needs
  - ♦ Level 3 (severe dependence): 6-7 basic life needs
  - ♦ Level 4 (complete dependence): 8-9 basic life needs
- · Individuals 18 or older
  - ♦ Level 1 (mild dependence): 3-4 basic life needs
  - ♦ Level 2 (moderate dependence): 5-6 basic life needs
  - ♦ Level 3 (severe dependence): 7-8 basic life needs
  - ♦ Level 4 (complete dependence): 9-10 basic life needs

#### **Evaluation of dependence**

The evaluation of dependence is based on an individual's ability to meet basic life needs. There are ten basic life needs, each associated with sub-activities related to that need. There are 53 sub-activities and individuals are considered unable to manage a basic life need if they cannot perform at least one associated sub-activity. The ten basic life needs are (Ministry of the Interior, 2006b, §2a, Annex 1):

- 1. Mobility
- 2. Orientation
- 3. Communication
- 4. Meals
- 5. Dressing and putting on shoes
- 6. Personal hygiene
- 7. Managing physiological needs
- 8. Managing healthcare related tasks
- 9. Managing personal and social tasks
- 10. Managing household tasks

For details on the sub-activities related to each basic living need, please refer to Box 5 and Box 6. Several factors related to basic life needs are considered, including physical and mental health, sensory abilities, speech, and skin condition. Additionally, physiological systems such as circulatory and respiratory functions, as well as neuromusculoskeletal functions that affect both gross and fine motor skills, are also taken into account (Ministry of the Interior, 2006b, §1). Individuals are categorized into dependence levels according to the number of basic life needs they are unable to manage.

## **Evaluators**

Before 2024, physicians from district social security administration offices evaluated dependence. From 2024, physicians from the Institute of Health Assessment evaluate dependence (Ministry of the Interior, 2006b, §21).

# **Benefit limitations**

# Can you mix LTC benefits?

The Social Services Act does not specify any restrictions on combining in-kind benefits with cash benefits, suggesting that in-kind benefits can be combined with cash benefits. For instance, individuals can receive the Care Allowance under the Social Services Act and receive in-kind benefits through the Social Services Act or Public Health Insurance Act (Ministry of the Interior, 2006a, 2006b).

### Is there free choice between cash and benefits in-kind?

The Social Services Act does not specify any restrictions on choosing between in-kind benefits and cash benefits, suggesting that they can be combined depending on the type of benefit (Ministry of the Interior, 2006a, 2006b).

# Can you receive LTC benefits with other social security benefits?

From 2008, individuals cannot receive the Care Allowance while receiving institutional care in a hospital or specialized treatment facility for an entire calendar month or longer. This does not apply to social service facilities, such as nursing homes (Ministry of the Interior, 2006a, §14a).

# **User costs**

**User charges** 

None

# **Taxation of benefits**

Not subject to taxation

# **Tables and Formulas**

Table 1: Monthly Care Allowance for Individuals Under 18 Years (2007-2024)

Year	Level 1	Level 2	Level 3	Level 4
Jan 2007 - Jul 2009	3,000 CZK	5,000 CZK	9,000 CZK	11,000 CZK
Aug 2009 - Dec 2011	3,000	5,000	9,000	12,000
Jan 2012 - Jul 2016	3,000	6,000	9,000	12,000
Aug 2016 - Mar 2019	3,300	6,600	9,900	13,200
Apr 2019 - Jun 2019	3,300	6,600	9,900	19,200 (13,200)
Jul 2019 - Dec 2021	3,300	6,600	13,900 (9,900)	19,200 (13,200)
Jan 2022 - Jun 2024	3,300	6,600	13,900	19,200
From Jul 2024	3,300	7,400	16,100	27,000 (23,000)

Source: §11 of Ministry of the Interior (2006a)

**Notes:** The values in parentheses indicate Care Allowance amounts for individuals receiving residential care under the Social Services Act.

Table 2: Monthly Care Allowance for Individuals 18 Years or Older (2007-2024)

Year	Level 1	Level 2	Level 3	Level 4
Jan 2007 - Jul 2009	2,000 CZK	4,000 CZK	8,000 CZK	11,000 CZK
Aug 2009 - Dec 2010	2,000	4,000	8,000	12,000
Jan 2011 - Jul 2016	800	4,000	8,000	12,000
Aug 2016 - Mar 2019	880	4,400	8,800	13,200
Apr 2019 - Jun 2019	880	4,400	8,800	19,200 (13,200)
Jul 2019 - Dec 2021	880	4,400	12,800 (8,800)	19,200 (13,200)
Jan 2022 - Jun 2024	880	4,400	12,800	19,200
From Jul 2024	880	4,900	14,800	27,000 (23,000)

Source: §11 of Ministry of the Interior (2006a)

**Notes:** The values in parentheses indicate Care Allowance amounts for individuals receiving residential care under the Social Services Act.

### Box 1: Self-Care and Self-Sufficiency Activities (2007-2011) (Part 1 of 4)

- Preparing food
  - Distinguishing between different types of food and drinks
  - Selecting beverages
  - Choosing simple ready-made foods based on need and purpose
  - Unwrapping food
  - Opening beverages
- · Serving and portioning food
  - Serving food as part of the usual daily routine
  - Plating food into a bowl or on a plate and transferring it
  - Dividing food into smaller pieces using at least a spoon
  - Mixing and pouring liquids
  - Grasping a drink container
  - Safely and reliably transferring a drink, bottle, cup, or other container
  - Establishing a meal plan that includes the daily administration of specially composed food, quantity, frequency, or therapeutic nutritional supplements
- · Eating and drinking
  - Bringing food to the mouth using at least a spoon
  - Bringing a drink to the mouth
  - Consuming food and drink in the usual manner
- · Washing
  - Washing hands and face
  - Wiping oneself
- · Bathing or showering
  - Performing general hygiene, including hair care
  - Caring for the skin
- · Mouth care, hair, nails, and shaving
  - Cleaning teeth or dentures
  - Combing hair
  - Cleaning, cutting, or filing nails
  - Shaving
- · Using the toilet and physiologic needs
  - ⋄ Managing urine and feces
  - Assuming a suitable position when addressing physiological needs
  - Managing clothing before and after using the toilet
  - Cleaning oneself after addressing physiological needs
  - Locating a toilet
- Getting out of bed, lying down, and changing positions
  - Changing body position from lying to sitting or standing, and vice versa, possibly with support
  - Adjusting position from sitting to sitting
  - Shifting position from side to side
- Sitting
  - ♦ Remain seated for at least 30 minutes
  - Maintaining the body in the desired position during prolonged sitting

Source: Annex 1 of Ministry of the Interior (2006b)

**Notes:** The evaluation of dependence is based on an individual's need for assistance or supervision in performing self-care and self-sufficiency activities. There are 36 activities: 18 related to self-care and 18 related to self-sufficiency. Each activity consists of specific sub-activities, totaling 129 sub-activities. This box lists the self-care activities only. Activities are adapted when assessing children. For detailed information about the adjustments, users should refer to the legislation.

# Box 2: Self-Care and Self-Sufficiency Activities (2007-2011) (Part 2 of 4)

- Standing
  - Standing, possibly with support from a compensatory aid
  - Standing, possibly with support, for at least 10 minutes
- · Moving daily necessities
  - Performing coordinated activities while handling objects
  - Distinguishing between different objects
  - Grasping an object with one or both hands
  - Lifting an object from a table or the ground
  - Moving an object from one location to another
  - Locating items
- Walking
  - Walking, possibly with the use of compensatory aids
  - Walking within the apartment
  - Walking in the immediate vicinity of the residence
  - Maintaining the desired direction while walking
  - Navigating around obstacles
- · Going up and down the stairs
  - Going up and down the stairs, possibly using an upper limb support or a compensatory aid
- · Choosing clothing and recognizing their correct layering
  - Choosing clothing suitable for the situation, environment, and climate
  - Recognizing individual pieces of clothing
  - Layering clothes in the correct order
- · Dressing and undressing including taking off shoes
  - Putting on underwear and outerwear on different parts of the body
  - Wearing appropriate shoes
  - Removing clothing from the upper and lower body
  - ♦ Taking off shoes
- · Orientation in the natural environment
  - ♦ Orienting oneself in the apartment, possibly with the use of a compensatory aid
  - Navigating around the house, possibly with the use of a compensatory aid
  - Recognizing loved ones
  - Exiting the apartment or facility where the person is staying
  - Returning to the apartment or facility where the person is staying
  - Distinguishing sounds and their direction
- · Performing a simple treatment
  - Caring for the skin
  - Using or replacing an orthopedic or compensatory device or other medical equipment
  - ⋄ Following a specific diet
  - ♦ Performing exercises
  - Measuring body temperature and testing for glycosuria and ketone bodies in urine
  - Seeking or requesting assistance
- · Compliance with a treatment regimen
  - Following the instructions of the attending physician
  - Preparing medications and recognizing the correct medicine
  - Regularly taking prescribed medications
  - ♦ Administering injections, measuring blood glucose, and determining the current dose of insulin
  - Performing inhalation treatments and applying bandages
  - Engaging in rehabilitation or speech therapy exercises

Source: Annex 1 of Ministry of the Interior (2006b)

**Notes:** The evaluation of dependence is based on an individual's need for assistance or supervision in performing self-care and self-sufficiency activities. There are 36 activities: 18 related to self-care and 18 related to self-sufficiency. Each activity consists of specific sub-activities, totaling 129 sub-activities. This box lists the self-care activities only. Activities are adapted when assessing children. For detailed information about the adjustments, users should refer to the legislation.

# Box 3: Self-Care and Self-Sufficiency Activities (2007-2011) (Part 3 of 4)

- Verbal and written communication
  - Receiving and producing meaningful spoken messages and intelligible speech, using compensatory aids such as hearing aids
  - Receiving and producing meaningful written messages, possibly with the help of compensatory aids like glasses
  - Understanding the meaning and content of received and communicated messages
  - Communicating through gestures and sounds
- · Orientation in time, place, and environment
  - Distinguishing between familiar people and strangers
  - ⋄ Telling time
  - Recognizing the time of day
  - ♦ Orienting oneself in the place of residence, school environment, or workplace
  - Reaching the intended destination
  - Distinguishing sounds from outside the natural environment
- · Managing money or other valuables
  - Understanding the value of money
  - Recognizing individual banknotes and coins
  - Distinguishing the value of different items
- Taking care of personal matters
  - Communicating and negotiating with schools or educational institutions and interest organizations
  - Engaging in negotiations with employers, public authorities, medical facilities, and banks
  - Acquiring services
  - Completing and resolving documents and forms
- · Time management and planning
  - ♦ Following a regular day and night routine
  - Planning and organizing personal activities throughout the day and week
  - Balancing time between work, home activities, and leisure
  - Adjusting the day and night routine to meet treatment and care needs
- · Engaging in age-appropriate social activities
  - Participating in preschool and school education, and acquiring new skills
  - Engaging in activities based on interests and local opportunities, including games, sports, culture, and recreation
  - Forming and maintaining relationships with others based on needs and interests
- · Procuring food and common items
  - Planning purchases
  - Locating the appropriate store
  - Selecting goods
  - ⋄ Completing payment for purchases
  - Carrying home regular purchases
  - Storing purchased items
- Cooking and heating a simple meal
  - ♦ Creating a meal plan
  - Washing and chopping necessary raw ingredients
  - Measuring raw materials and ingredients
  - Preparing a simple hot meal using a limited number of ingredients and straightforward procedures with an appliance
  - Heating a simple meal
- Washing dishes
  - Washing and drying dishes
  - ♦ Storing clean dishes in their designated place

Source: Annex 1 of Ministry of the Interior (2006b)

**Notes:** The evaluation of dependence is based on an individual's need for assistance or supervision in performing self-care and self-sufficiency activities. There are 36 activities: 18 related to self-care and 18 related to self-sufficiency. Each activity consists of specific sub-activities, totaling 129 sub-activities. This box lists the self-sufficiency activities only. Activities are adapted when assessing children. For detailed information about the adjustments, users should refer to the legislation.

# Box 4: Self-Care and Self-Sufficiency Activities (2007-2011) (Part 4 of 4)

- · Routine household cleaning
  - Performing mechanical or machine cleaning of surfaces, furniture, and floors in the apartment
- · Laundry care
  - Sorting laundry into clean and dirty
  - ♦ Folding laundry
  - Storing laundry in its designated place
- · Washing laundry
  - Identifying different types of laundry
  - Hand-washing small laundry items
  - ♦ Drying laundry
- · Bed maintenance
  - Making the bed
  - Changing the bedding
- · Operating common household appliances
  - Turning common household appliances on and off, such as radios, televisions, refrigerators, kettles, and microwave ovens
  - ♦ Making telephone calls
- · Handling taps and switches
  - Operating taps and switches
  - Identifying different taps and switches
  - Manually using faucets, lever handles, and electrical switches
- · Handling locks and operating windows and doors
  - Locking and unlocking doors
  - Operating handles and mechanisms for opening and closing windows
- · Maintaining order in the household, waste management
  - Maintaining cleanliness of household equipment
  - Sorting waste
  - Disposing of waste in designated areas
- · Simple household tasks
  - Operating heating
  - Doing laundry
  - ⋄ Ironing clothes

Source: Annex 1 of Ministry of the Interior (2006b)

**Notes:** The evaluation of dependence is based on an individual's need for assistance or supervision in performing self-care and self-sufficiency activities. There are 36 activities: 18 related to self-care and 18 related to self-sufficiency. Each activity consists of specific sub-activities, totaling 129 sub-activities. This box lists the self-sufficiency activities only. Activities are adapted when assessing children. For detailed information about the adjustments, users should refer to the legislation.

# Box 5: Basic Life Needs (2012-2024) (Part 1 of 2)

- Mobility
  - Getting up and sitting down
  - ♦ Standing
  - Adjusting positions
  - Walking inside the house or on normal terrain for at least 200 meters (even an uneven surfaces)
  - ⋄ Opening and closing doors
  - Walking up and down one flight of stairs
  - Using and getting on and off transportation
- Orientation
  - Recognizing and distinguishing through sight and hearing
  - Having adequate mental competence
  - Orientation in time, place, and person
  - Orienting oneself in the natural social environment
  - Orienting oneself in usual situations and react appropriately in them
- Communication
  - Expressing oneself clearly in spoken language and communicating with others using a range of vocabulary appropriate for one's age and social status
  - Understanding the content of received and communicated
  - Writing a short message
  - Understanding commonly used basic visual symbols and sound signals
  - Using a common means of communication
- Meals
  - Choosing a ready-made drink and food for consumption
  - Pouring a drink
  - Dividing and serving food into smaller pieces
  - Eating and drinking
  - ♦ Following a prescribed diet
  - ♦ Consuming food as part of a typical daily routine
  - ♦ Moving drinks and food to the place of consumption
- · Dressing and putting on shoes
  - Choosing clothing and footwear suitable for the circumstances
  - Identifying the front and back of clothing and layering them correctly
  - Dressing and putting on shoes
  - Undressing and removing shoes
  - Managing clothing in relation to daily routines
- Personal hygiene
  - Using hygiene equipment
  - Washing and drying individual parts of the body
  - ⋄ Performing general hygiene
  - Combing hair, practicing oral hygiene, shaving
- · Managing physiological needs
  - Using the toilet in a timely manner
  - Taking a suitable position
  - Emptying the bladder or bowels
  - Cleaning up afterwards
  - Using hygiene products

Source: Annex 1 of Ministry of the Interior (2006b)

**Notes:** The evaluation of dependence is based on an individual's ability to meet basic life needs. There are ten basic life needs, each associated with sub-activities related to that need. There are 53 sub-activities. An individual is considered unable to manage a basic life need if they cannot perform at least one associated sub-activity.

#### Box 6: Basic Life Needs (2012-2024) (Part 2 of 2)

- · Managing healthcare related tasks
  - ⋄ Following an established treatment regimen
  - Carrying out prescribed preventive, curative, and therapeutic rehabilitation and nursing procedures, and using necessary medications or aids
  - Recognizing a health problem and, if necessary, seeking or calling for help
- · Managing personal and social tasks
  - Establishing contacts and relationships with others
  - Planning and organizing personal activities
  - Engaging with the social environment
  - ⋄ Establishing and following a daily schedule
  - Carrying out age-appropriate activities in the environment, such as education, employment, leisure activities, and managing personal affairs
- · Managing household tasks
  - Managing money within the framework of personal income and the household
  - Manipulating everyday objects
  - Doing regular shopping
  - ⋄ Controlling common household appliances
  - Cooking a simple hot meal and preparing drinks
  - Performing routine household chores, including laundry and washing dishes
  - Operating the heating
  - Maintaining order

Source: Annex 1 of Ministry of the Interior (2006b)

**Notes**: The evaluation of dependence is based on an individual's ability to meet basic life needs. There are ten basic life needs, each associated with sub-activities related to that need. There are 53 sub-activities. An individual is considered unable to manage a basic life need if they cannot perform at least one associated sub-activity.

# **Sources**

This section records key sources consulted when we collected the institutional details reported in this document. Archived versions of these sources are available at the Gateway Policy Explorer website (http://g2aging.org/policy-explorer).

- Ministry of Internal Affairs and Communications (2024). Příspěvek na péči [Care Allowance]. Available in Czech. As of October 9, 2024. [Link]
- Ministry of the Interior (1988). ZÁKON ze dne 16. června 1988 o sociálním zabezpečení [LAW dated June 16, 1988 on social security]. Available in Czech. As of October 9, 2024. [Link]
- Ministry of the Interior (2006a). Zákon č. 108/2006 Sb. Zákon o sociálních službách [Act No. 108/2006 Coll. Social Services Act]. Available in Czech. As of October 9, 2024. [Link]
- Ministry of the Interior (2006b). VYHLÁŠKA ze dne 15. listopadu 2006, kterou se provádějí některá ustanovení zákona o sociálních službách [DECREE of November 15, 2006, by which some provisions of the Act on Social Services are implemented]. Available in Czech. As of October 9, 2024. [Link]
- Ministry of the Interior (2012). Zákon č. 366/2011 Sb. Zákon, kterým se mění zákon č. 111/2006 Sb., o pomoci v hmotné nouzi, ve znění pozdějších předpisů, zákon č. 108/2006 Sb., o sociálních službách, ve znění pozdějších předpisů, zákon č. 117/1995 Sb., o státní sociální podpoře, ve znění pozdějších předpisů, a další související zákony [Act No. 366/2011 Coll. Act amending Act No. 111/2006 Coll., on assistance in material need, as amended, Act No. 108/2006 Coll., on social services, as amended, Act No. 117/1995 Coll., on state social support, as amended, and other related acts]. Available in Czech. As of October 9, 2024. [Link]

Sowa, A. (2010). The System of Long-Term Care in the Czech Republic. Available in English. As of October 9, 2024. [Link]

# **Glossary of terms**

This section summarizes key definitions from the main text. To facilitate switching back and forth, this document is designed with hyperlinks. Most PDF readers have shortcuts that permit a reader to return to the previous location after selecting a hyperlink. In Adobe Acrobat on a PC: "Alt" + " $\leftarrow$ "; In Adobe Acrobat on a MAC: "command" + " $\leftarrow$ "; In Preview on a MAC: "command" + "[".

Activities of daily living (ADL): A common set of activities related to personal care used to assess independence, including bathing or showering, dressing, getting in and out of bed or a chair, walking, using the toilet, and eating.

Institute of Health Assessment (Institut posuzování zdravotního stavu - IPZS): Created in 2024, IPZS is an agency under the Czech Social Security Administration. It evaluates the health status and work capacity of individuals to determine eligibility for social security benefits, including the provision of disability cards and the Care Allowance.

Labor Office of the Czech Republic (Úřad práce ČR): The Labor Office of the Czech Republic is a nationwide administrative body created in 2011. It operates under the Ministry of Labor and Social Affairs, overseeing different benefits and related administrative proceedings. The office comprises a general directorate, regional branches, and contact offices, all led by directors. It handles initial administrative decisions, with appeals directed to the Ministry.

**Public Health Insurance (Veřejné zdravotní pojištění):** The Czech Republic's public health insurance system provides universal coverage to all residents and is funded through mandatory contributions from employers, employees, self-employed individuals, state-insured individuals, and individuals without taxable income. It ensures access to a wide range of medical services, including preventive care, hospital treatment, medications, and LTC.

# **Notes**

This section reports notes from the main text. To facilitate switching back and forth, this document is designed with hyperlinks. Most PDF readers have shortcuts that permit a reader to return to the previous location after selecting a hyperlink. In Adobe Acrobat on a PC: "Alt" + " $\leftarrow$ "; In Adobe Acrobat on a MAC: "command" + " $\leftarrow$ "; In Preview on a MAC: "command" + " $^{\prime}$ ".

- 1. Individuals who are not permanent residents can meet the residence requirement of the Social Services Act by fulfilling one of the following conditions: being granted asylum, being a foreigner who holds a long-term residence permit for more than 3 months, or being a citizen and a family member of a citizen of a member state of the European Union.
- 2. The Social Services Act does not have an age requirement to receive LTC benefits. However, individuals must be over the age of 1 to receive the Care Allowance.

# **Version information**

Current Version: 1.0 (February 2025)

**Version History** 

· 1.0 (February 2025): First version.

# **Additional resources**

The following resources provide additional details for the interested reader:

Ministry of the Interior. Available in Czech. As of November 2, 2024.

Available at: https://www.e-sbirka.cz/

Features: Offers access to both current and historical versions of laws, including those relevant to long-term care (LTC), in the Czech Republic

Sowa, A (2010). The System of Long-Term Care in the Czech Republic. Available in Czech. As of November 2, 2024.

Available at: https://papers.ssrn.com/sol3/papers.cfm?abstract\_id=1710618

Features: Provides an overview of long-term care in the Czech Republic, detailing the regulations governing it and the benefits available to individuals

Ministry of Internal Affairs and Communications. Available in Czech. As of November 2, 2024.

Available at: https://www.mpsv.cz/-/prispevek-na-peci

Features: Provides current information about the Care Allowance including benefit amounts, activities evaluated, and qualification criteria