SENIORS HOUSING SOCIETY OF ALBERTA HOME CARE FOR OUR SENIORS

Position Paper for <u>Home Care Services for Seniors</u> in Supportive Living and Designated Assisted Living Buildings

Background Information for stakeholders to support the following recommendation:

Alberta Health and Wellness, Alberta Health Services and Operators must work in consultation and collaboration to immediately establish a Home Care funding system which more fairly compensates Operators to care for seniors.

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1. Background:

Starting with the Broda Report and subsequently the Demographic Planning Commission and the Continuing Care Strategy, home care was envisioned to play a very important role in enabling seniors to "age in place". Quoting from the Executive Summary of the December 2008 Final Report of the Demographic Planning Commission – Alberta Seniors & Community Supports:

"Albertans are concerned about health care access, particularly as they age and anticipate needing more health services. They expressed special concern about the shortage of health care workers, rising out-of-pocket costs and the organization of the health system.....

Home care, home support (such as yard work and house cleaning), and personal care services will be in higher demand. The private sector can meet much of this demand, but some seniors will not be able to obtain services from the private sector. The Alberta government, municipal governments and not-for-profit agencies must ensure subsidized and low-cost services are available for seniors in need. Policy makers also need to ensure the continued strength of not-for-profit agencies and reasonable access to services in both urban and rural areas. Programs and services must be available to seniors when they need them, and designed in ways that address their needs."

Demographic Planning Commission, Dec 2008, AB Seniors & Community Supports, http://www.seniors.gov.ab.ca/Seniors/tomorrow/ExecutiveSummary.pdf

Notwithstanding the capacity of some seniors to pay directly for services, we should be reminded that all Albertans, regardless of income, should have and are entitled to have access to the same quality of care and level of support. The seniors who have contributed to Alberta's health care system, through their taxes and premium payments for Alberta Health Care, have a right to receive adequate care services.

Our members, many of whom are not-for-profit organizations, are providing home care to one of the most vulnerable populations in the province – our seniors, including those with low to mid-incomes. In addition to affordable accommodation and hospitality services:

- We ensure the senior's safety through hiring qualified, caring staff to provide services and monitor their conditions on a daily basis.
- We advocate for more care as needs change.
- We provide needed home care services through site-based home care contracts with Alberta Health Services.
- We are able to maintain seniors in their own communities so they do not have to move away from families and friends and the community supports they have helped build and now need.

It is our positions that without the proper care these services provide, a senior's health will quickly deteriorate causing an escalated burden on hospital, long-term and emergency services, (emergency calls, trips to emergency rooms, wait times). The taxpayer then carries the burden.

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2. Our Concerns:

The members of the Seniors Housing Society of Alberta (SHSA) are concerned with the effect the follow issues will have on the provision of proper care to our Residents:

- An apparent planned reduction in home care services,
- The offloading, to operators, personal care costs that support seniors to remain independent,
- Inconsistencies within Home Care Case Managers and Home Care Offices,

We believe the work we are doing is being undervalued by government.

a. Reduction in Home Care Services

SHSA members house and provide care to Residents with the average age of approximately 83 (See Appendix A). As Operators, we have an obligation to each Resident to ensure not only his/her physical well-being, but also his/her mental, emotional, and spiritual condition.

As they age, seniors are slower to react and our staff in their effort to provide personal care services as professionally and respectfully as possible, need to take the time required based on the client's condition to provide the care. In addition, as their needs increase, seniors and their families require more and more time from Operators to manage their stay. <u>The trend to reduce home care services indicates that the term "client centered care" touted in the Continuing Care Strategy is in name only. Rather, economics, not the clients, are the focus.</u>

Currently, many seniors receive insufficient care because Operators simply cannot afford to meet the increasing care needs of each elderly and frail Resident without the cooperation of AHS. The times authorized by AHS for Home Care services are inadequate, for example:

• Five (5) minutes for medication administration

(All staff are required to wash their hands before and after administering medications to Residents. In addition, the staff are required to adhere to the "5 Rights: right patient, right time and frequency of administration, right dose, right route of administration, and right drug." In many cases, a Resident is not waiting for the HCA to provide his/her medication; the HCA may need to get a glass of water for the Resident or inform the Resident to sit-up if he/she is lying down.)

- 15 minutes for bath assist
- No authorization for meal escorts
- No authorization for toileting
- No authorization of O2 tank changes

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b. Offloading of Costs

To prevent seniors from living at risk as home care services are reduced, operators are faced with either:

- Absorbing the costs to provide the needed care, or
- Privately charging privately the seniors, or
- Leaving the care to the senior or his/her family.

Unfortunately, none of these are viable solutions to prevent risk for many seniors living in our facilities.

- Operators cannot continue to be asked to fund operating deficits resulting from inadequate funding for the services needed by and provided to the Residents
- Many of the Residents are low income seniors on a fixed income and simply cannot afford to pay for the two-tiered health system evolving as a result of current government funding policy
- Very few family members are trained to aid needed services such as transfer techniques for toileting, etc.

c. Inconsistencies

Operators continue to face an overwhelming amount of inconsistency not only between each Home Care Case Manager, but also between each Home Care Office Branch. The average number of Home Care Managers each facility must deal with is 6. While we recognize that many of these Case Managers may have a heavy case load, we believe that addressing specific inefficiencies can mitigate this issue.

• One Case Manager – One Facility

Minimizing the number of Case Managers that a facility works in partnership with will standardize the process and expectation from both sides. (See Appendix A).

3. Our Recommendation

Alberta Health and Wellness, Alberta Health Services and Operators must work in consultation and collaboration to immediately establish a Home Care funding system which more fairly compensates operators to care for seniors.

Alberta Health Services has indicated that the home care funding methodology changes will take place in two years. This is an urgent concern that must be evaluated now. Reducing funding in a continuing care system where Operators have consistently been under-funded for providing valuable care is placing seniors at risk and needs immediate attention.