

How can our continuing care system help Albertans age well?

Presentation based on our Research Project:

“Key Issues & Possibilities in Continuing Care in Alberta” 2015

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Introduction and Agenda

- ▶ Introductions and purpose
- ▶ Background and methods for “Key Issues and Visions for Continuing Care”
- ▶ Discussion: What are key issues in continuing care in Alberta for you, your family or people with whom you work?
 - ▶ What research participants said
- ▶ What is your vision for a better continuing care system?
 - ▶ What research participants said
- ▶ How can we all participate in improving our continuing care system?
 - ▶ Discussion and wrap up

Key Issues & Possibilities in Continuing Care in Alberta - Background

- ▶ Social workers told us they were concerned about the care people received and how the system worked
- ▶ Other reports reflected similar concerns. For example:
 - ❖ Auditor General of Alberta, 2014, 2016 and A
 - ❖ Alberta Health Services Continuing Care Resolution Team, Final Report 2014

Study purpose

- ▶ Through in depth interviews and focus groups to learn more about perspectives on continuing care
- ▶ To use this learning to add to knowledge and to generate conversations that can help lead to better care.



Research questions

The questions we asked were:

1. What are the key issues in continuing care in Alberta?
2. What is your vision for better continuing care?
What would an improved system look like?
3. Who needs to be involved in making the vision a reality?

Study methods

- ▶ We conducted in depth Individual and focus group interviews between August 2014 and November 2015.
- ▶ A total of 82 individuals participated
 - ▶ 17 formal care providers
 - ▶ 65 informal care providers (family and friends) and engaged citizens

I. What do you think are the Key Issues

- ▶ Discussion with workshop participants



I. Key Issues - What our participants said: **CAPACITY AND APPROPRIATENESS**

- ▶ Availability and appropriateness of placements

“My mother- in-law went from a lodge to another and then another...and every change was so difficult for her. .. I want to be able to go in a place and just progress through the same place, dealing with the same staff in the same environment with outdoor space and good food..” -

Engaged Citizen, Family member



Key issues, What our participants said: QUALITY of CARE

- ▶ Neglect, abuse, and safety concerns
- ▶ Tensions between recommended practices and actual practices when time and staff are limited
- ▶ Quality of food



Key issues, What our participants said: POLICIES AND PRACTICES IMPACTING FRONT LINE CARE

- ▶ Lack of adequate training
- ▶ Staff not being paid enough, staffing shortages and the lack of continuity of care
- ▶ Staff feeling powerless/ voiceless



Key issues, What our participants said: POLICIES AND PRACTICES IMPACTING FRONT LINE care

“ . . . because of the wages and stuff, there is such high turnover. So, you are not always getting the same person every day”

(Formal Care Provider, Nurse Educator)



Key Issues, What our participants said: QUALITY OF LIFE

- ▶ Lack of focus on improving or maintaining wellness
- ▶ Lack of choice, dignity and respect, emphasis on the bio-medical model
- ▶ Funding models, administrative priorities and attitudes focus on care that is task-oriented rather than relationship-based
- ▶ Little time allowed for care relationships to be built between staff and client/families.
- ▶ Little recognition of supports needed for specific groups,



Key Issues, What our participants said: QUALITY OF LIFE (2)

"There does not seem to be enough time to do the physical care, and there is definitely not enough time to do any of the emotional care." (Formal Care Provider, Nurse)

"I also think that we as nurses and healthcare aides and as the whole caring profession need just to understand that the care and the relationship that we have is as equally important as the medicines we dispense or the dressings that we change." -Formal Care Provider, Nurse

II. What is your vision for a continuing care system that helps Albertans age well

- ▶ Discussion with workshop participants

II. What our participants said: Their vision for continuing care

- ▶ Put quality of life at the forefront
- ▶ Ensure quality of care: foster a culture of care: individualized care, built on dignity, respect and empathy, communication, good relationships and continuity

What our participants said: Their vision for continuing care (2)

- ▶ Build capacity and appropriateness: so that people can find a facility appropriate to their needs and located in the community they love, one that will let spouses with different care needs be together, and one that will allow for the continuity of care, as a person's abilities change over time.
- ▶ Improve inclusion and diversity: mandatory sexual diversity and cultural competency training for staff, LGBTQ friendly spaces, staff who speak the languages of residents/clients

What our participants said: Their vision for continuing care (3)

- ▶ Ensure policies and practices that focus on building the capacity of staff to provide respectful care with a focus on strong communication and what is important to the individual.
- ▶ Ensure a community approach rather than a hierarchy with residents, clients and families at the bottom.
- ▶ Enhance community and societal engagement.
- ▶ Shift the culture in our ideas about aging, old age, and continuing care
- ▶ Increase advocacy for system improvement, increased seniors housing and age-and dementia friendly communities.

What our participants said: Their vision for continuing care (4)

- ▶ Focus on preventative health
- ▶ Fund and support home care so that it is adequate and accessible
- ▶ More subsidies for renovations, more day programs, community-based personal support systems for people living alone, more help for caregivers
- ▶ Improve facility design and more innovative program design

How can we participate in improving our continuing care system?

- ▶ There are great research studies, excellent models, and good initiatives but we are not consistently putting what we know into practice and meeting the goals of high quality care and life.
- ▶ What are the barriers to change? What is missing?
- ▶ Who needs to be involved? What can we do?
- ▶ What is one action that each of us can take?

Wrap up - Comments

- ▶ A strong vision for continuing care is needed to guide what we do
- ▶ A continuing care advocacy program, perhaps working in conjunction with the offices of Seniors Advocate/Health Advocate and in future reporting to legislature could help ensure quality.
- ▶ How can Health and Social Care systems to work together with communities - ultimately having seamless and coordinated programs/services?
- ▶ Other
- ▶ Thank you. Please keep the conversations going!

Thank you for being here!

Please email Linda.McFarlane@yahoo.com if you would like a copy of this report.

