

Early Experiences with Planning and Operationalizing an Innovative Needs-Based Home Care Agency In BC

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Planning & Research	Model Development	Launch: Go Live	Evaluation
Phase 1	Phase 2	Phase 3	Phase 4
Sept-Oct 13	Oct - Dec 13	Jan 14	Ongoing
 Industry landscape What do seniors need? What do they get? Where are the gaps? 	 Programs & services to address client needs & gaps Infrastructure Innovations Interdisciplinary team 	 Operationalizing the model Test and tweak 	 Evaluate and improve the model Early experiences

Planning & Research: Industry Landscape

Demographics



By the year **2036**, **25%** of the Canadian population will be

65 or older



Source: Canadian Institute for Health Information, 2012

The Predicament





The Reality



Health Care Spending



- Spending on home care
- Spending on other health care

Source: Canadian Institute for Health Information, 2012

Other Challenges





- Shortage of trained staff
- Informal Caregivers
- Wait times (ER)
- Transitional care
- Medication safety
- Self Care Management of chronic conditions

Planning & Research: The Need

What Do Seniors Want?



- 1 To live, heal and age 'at home'
- 2 Timely access to reliable quality services
- **3** Flexibility and choice
- 4 Information and support for self-care
- 5 Seamless, integrated care



What Do Seniors Need?





services

The Gaps



"When I have a problem I don't know who to go to, and nobody calls me back."

"They won't tell me when they're coming. I have to be home all day."

"They don't listen to what is important to me."



The Gaps continued





"They won't give me what I need. I came home from hospital...was promised care... and nobody came."

"I've had 20 nurses come through my home in the last month and I have to tell my story each time... and I'm dying."

Scorecard: How Are We Doing?



	WISH LIST	REALITY
1	To live, heal and age 'at home'	Barriers and insufficient services to support "aging in place"
2	Timely access to reliable quality home care services	In BC ~ 5% health care budget is devoted to home care
3	Flexibility and choice	Limited–system driven, not client driven
4	Information and support for self-care	Seldom part of traditional home health
5	Seamless, integrated care	Difficult to navigate

Model Development: The Solution

25% 18% Mixed Formal Informal 15% 4 5 1 10% 1 7% 7% 13 13 6% 1 11 2 3 Managing Affairs Housework Meal Medical Total Transportation Personal Preparation Care Support

The Needs



Infrastructure: Partnerships





Comparison to Traditional Models



	WISH LIST	TRADITIONAL	OUR MODEL
1	Age in place	Limited access	Client driven
			Comprehensive
2	Timely access to reliable quality services	Variable	24 hour support
3	Flexibility and choice	Limited	Extensive
4	Information and support for self-care	Variable	Self-directed care plans
5	Integrated care and support	Variable	Emerging technology

Model Development: Full Suite of Services

Program and Services









The basics:

- Housekeeping
- Laundry
- Repairs and maintenance
- Gardening
- Pet care...

Transportation:

- Shopping and errands
- meal delivery
- Driving (medical appointments)







We help with personal activities of daily living:

- Companionship
- Bathing and spa services
- Dressing and personal grooming
- Fitness and mobility
- Medication management
- Respite and live-in
- Meal preparation









- End-of-life care
- Home from hospital
- Dementia care
- Therapy and rehabilitation
- Foot and wound care





- Education and management of chronic conditions (for clients and informal care givers)
- One-on-one and group self-care education and management (getting those with chronic conditions back to daily living)
- Caregiver support
- Employee wellness programs
- Foot and wound care clinics



Right People: Interdisciplinary Team



- Clinical and management
 - Physicians, nurse
 practitioners, OT,
 physiotherapists, dietitians,
 kinesiologists, pharmacists,
 holistic practitioners, wound
 and foot care clinicians...
- LPNs and RNS
- Home care assistants (levels 1 and 2)

Note: Insured, licensed and thoroughly screened.

Corporate Agency Model

- 175+ Highly qualified staff
 throughout Metro Vancouver
 (400 by 2015)
- Geared to provide on call, casual, contract services to community and LTC
- Administration support (staffing and scheduling, payroll, claims management, HR, education and training, project management)





Technology and Innovations





"Go Live": Operationalizing the Model

Recap



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Evaluation: Early Experiences

Evaluation: CQI





Evaluation: Client Experience





Evaluation: Employee Satisfaction



The Model: Core Services







care at home services

Questions?

"Age is opportunity no less than youth itself." Henry Wadsworth Longfellow

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