



OCT 16 2012

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Ms. Kim Carter
Ombudsperson
947 Fort St
PO Box 9039 Stn Prov Govt
Victoria BC V8W 9A5

Dear Ms. Carter:

I am responding to an email, received from Ms. Carly Hyman, Manager of Systemic Investigations, on August 31, 2012, requesting a six month update to the Ministry of Health's (the Ministry) response to *The Best of Care: Getting in Right for Seniors in British Columbia (Part 2)*(the Report). As you are aware, the Ministry released *Improving the Care of BC Seniors: An Action Plan* (the Action Plan) in February 2012. The Action Plan was informed by the findings and recommendations in the Report and addresses the key areas of improvement you identified. The Ministry shares your commitment to the provision of high quality seniors' care and meeting our commitments in the Action Plan is one of the Ministry's highest priorities. I am pleased to provide you with an update on the Ministry's progress in implementing the Action Plan.

The commitments in the Action Plan are grouped into six thematic areas:

1. To provide appropriate avenues to have complaints heard and dealt with in a fair manner;
2. To improve the scope, quality and access to the information seniors and their families need to understand and access services in a timely and informed way;
3. To ensure more consistent delivery of care across services;
4. To improve the protection of vulnerable seniors from abuse and neglect;
5. To provide flexible services to meet care needs: and,
6. To modernize the home and community care system to provide sustainable and lasting improvements that will better serve seniors across the province.

It is important to note that the Action Plan is embedded within a larger strategy, the Ministry's Innovation and Change Agenda. This transformative plan will position the health sector to better meet changing population needs and continue to deliver high quality health services to British Columbians in a way that can be sustained into the future. The Ministry's current Service Plan describes the four broad key priorities for the Innovation and Change Agenda:

1. Effective health promotion, prevention and self management;
2. The majority of British Columbia's health needs will be met by high quality primary and community based health care and support services;

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3. British Columbians will have access to high quality hospital and residential services when needed; and
4. Improved innovation, productivity and efficiency in the delivery of health services to seniors.

While many aspects of the Innovation and Change Agenda will improve care for seniors, the work associated with the second priority – known as Integrated Primary and Community Care (IPCC) – is most directly relevant to the focus of the Report. IPCC aims to re-design health service delivery in communities to recognize the diverse needs of different populations that directly involves physicians, patients, community members and health authority professionals. This work will improve the coordination of care for seniors at the community level to provide patients with better care and experiences. IPCC focuses on four key population groups, one of which is seniors.

The Ministry has accomplished much since the release of the Report and the Seniors' Action Plan. Some of the key accomplishments aimed at improving services to seniors are summarized under each of the Action Plan themes:

Concerns and Complaints - It is important that seniors and their families are able to raise concerns and complaints about home and community care, have them taken seriously, and have them handled in a respectful and timely fashion. Your report made several recommendations on how the Ministry and health authorities can improve processes for seniors and their families to raise concerns or complaints about the services or care they are receiving. Recently completed actions include:

- The Seniors' Health Care Support Line was established in June 2012, to allow seniors and their families, or other concerned individuals, to report concerns about care. This toll-free phone line is intended to supplement existing care concern avenues with dedicated support for seniors with complex needs. Seniors will benefit from: improved navigation with care concerns to appropriate health system channels; improved access to support for unresolved care concerns; increased confidence in the ability of the Ministry to provide help when needed to resolve care concerns; and, improved understanding of gaps and barriers in the health system that may impact effective resolution of seniors' care concerns and complaints. Callers with non-care concerns are assisted in directing their enquiry to the appropriate organization for follow-up.
- From May 2012 to July 2012, the Ministry consulted with seniors, families and other stakeholders around the province on the potential mandate and functions of a new Office of the Seniors' Advocate. The consultations are now complete. There were 22 public and stakeholder consultations held in 9 communities – including 1 in a residential care facility and 1 in an independent living facility – with a total of over 500 participants. The Ministry received 117 written submissions by mail and email, and 12 electronic survey responses. The input received will inform government's decision about how to implement the Office of the Seniors' Advocate.

- The Ministry's redesigned Home and Community Care website has a section dedicated to concerns and complaints regarding all home and community care services including home support, assisted living and residential care services. This section is easily accessible from the website's home page, and provides a brief description of and direct links to various offices that can assist seniors and their families with pursuing timely resolution of concerns or making a formal complaint including the Patient Care Quality Offices, the Assisted Living Registrar, Community Care Licensing Offices, the Seniors Health Care Support Line and your office.

Information – It is important that seniors and their families can easily access and understand all of the information they need to make informed choices about their care. Your report identified several situations where seniors and their families would benefit from improvements to the scope and quality of and access to the information they need to understand services, and how to access them in a timely and informed way. Recently completed actions include:

- In April 2012, the Ministry released *My Voice*, a comprehensive kit containing advance care planning information and tools to help people prepare for their future health care. Having a voice in decisions about one's future health care treatment is important. There may come a time when, due to illness or injury, people are not capable of expressing their wishes for their health care treatment to their health care providers. When people have conversations with loved ones about their wishes for health care in advance of being incapable, and then document their wishes, they are making an advance care plan. Making and sharing an advance care plan ensures that family or friends and health care providers will know the health care treatments that a person would accept or refuse if they were capable of deciding for themselves. When someone else is asked to make a health care decision for an individual, the law requires that person to respect the known wishes of the individual. Advance care planning information and tools are now available online, and through health authorities.
- On September 28, 2012, the Ministry launched major changes to both the SeniorsBC and the Home and Community Care websites. We heard from seniors, caregivers and families that government's online information resources, for seniors and about seniors' care, are difficult to navigate and hard to find. Now navigating and finding information on the two websites is made easier by organizing content by topics of interest to seniors and their families and presenting information in plain language with useful hyperlinks to other resources.
- The Report also found that improvements were needed to ensure people are provided with useful information about publicly funded home and community care services. More content has been added to the Home and Community Care website to support people in making informed decisions about their care, and covers topics such as eligibility criteria for publicly subsidized services; how to arrange for care; costs for services, including specific information about the hardship waiver application process and how pension income splitting can affect the rates seniors pay; detailed descriptions of each service type; accountability for health, safety and quality of care; as well as how to have concerns and complaints addressed. The site also provides general information about accessing care and support options from private providers.

- All health authorities now provide online access to summary inspection reports for routine and follow-up inspections of residential care facilities licensed under the *Community Care and Assisted Living Act* (CCALA) or licensed or designated under the *Hospital Act* that include information relating to substantiated complaints, as well as inspections. In September 2012, the Assisted Living Registrar began to post substantiated complaint information reports, following an investigation, that provide a high level summary of information on assisted living residences and may result in loss of registration if not remedied. These reports include the type of concern or complaints reported to the Registry, and are presented in a way that does not compromise the personal privacy of residents. These facility and residence reports will assist seniors and their families as they explore their care options and also ensure that areas of concern are appropriately remedied. Access to these reports is through the new Home and Community Care website under the Accountability section.
- The 10th edition of the BC Seniors' Guide (English version) was released on October 1, 2012. The latest guide contains updates to many services and programs that have changed since the last guide was published in 2009. The Guide includes a new section on benefits and provides information on new seniors' resources and services. It also provides tips on healthy aging and encourages seniors to plan ahead for future needs. Distribution of French, Chinese and Punjabi versions of the guide will begin in December 2012.

Standards and Quality Management - It is important that consistent standards are established for all seniors' care services, protected by inspection and enforcement. The Report also identified situations where seniors could benefit from greater consistency in standards across home and community care programs and in the application and enforcement of these standards by the Ministry and health authorities. Recently completed actions include:

- The Ministry committed to putting a plan in place by January 2013, to standardize benefits and protections to all residential care clients, regardless of where care is received. In May 2012, changes were made to the Residential Care Regulation (under the CCALA), to specify that when a person is paying in advance for the cost of their care, they are entitled to a written statement that informs them about the refund policies of the facility. Persons looking for care are to be provided with information about whether all, or part, of their prepayment will be refunded. While the CCALA has had this requirement for many years, there was a lack of clarity about which facilities had this requirement. The regulation now specifies each care type licensed under the CCALA to which these requirements apply, providing greater clarity and transparency as well as additional consumer protection.

- In July 2012, the Ministry amended the Patients' Bill of Rights Regulation to provide more standardized protections and benefits for persons receiving residential care services in private hospitals and extended care facilities regulated by the *Hospital Act* (the Act). With this change, regulatory requirements under the Act will be more consistent with protections provided by the Residential Care Regulation (under the CCALE) in the following ways: an operator must advise persons who are being admitted of all fees, charges, and policies, and provide an avenue to file concerns or complaints; persons in care must not be subject to any abuse or neglect, including deprivation of nourishment; an operator must respect personal privacy and belongings; persons in care have the right to receive visitors and to communicate with them privately; persons in care must be provided with a fair and effective process to express concerns or complaints and to ensure a prompt response; and an individualized plan of care must be developed and monitored on a regular basis. The Ministry continues to work on standardizing protection and benefits and will provide a plan by January 2013, to address other inconsistencies.
- In April 2012, the Ministry and health authorities began increasing the focus of residential facility inspectors on high risk areas and ensuring any necessary changes are made to maintain safety. A new Risk Assessment Tool (the Tool) was developed by the Ministry together with health authorities and includes a Facility Risk Rating that assigns a value of low, medium or high risk to the facility. With information from the Tool, licensing officers work with the facility operator to identify the actions and preventative measures needed to protect residents. The tool is now in use with Fraser Health Authority, Northern Health Authority, Vancouver Island Health Authority (VIHA) and Interior Health Authority and will be in place in Vancouver Coastal Health Authority later in fall 2012.
- Following the restructuring of the client rate structure for residential care services in 2010, government committed to ensuring that any additional revenues would be invested to improved residential care services. In March 2012, health authorities reported on the first year of implementation. Reinvestments include increased residential care-staffing, as well as investments in education, specialized services and equipment. Health authorities have reported investments of more than \$45 million from the revised residential care rates and from additional funds allocated to quality improvements from health authority budgets. Health authorities reported that increases in direct care staffing after the two-year implementation will result in more than 1,000 full-time equivalent positions by the end of fiscal 2011/12. Staffing increases include professional and non-professional staff such as nurses, residential care aides, physiotherapists, occupational therapists and social workers.

Protection - The Action Plan committed to strategies and measures to provide seniors with protections from abuse and neglect. The Report identified situations where seniors require greater protection from abuse and neglect. Recently completed actions include:

- The Ministry concluded extensive public consultations on elder abuse in June 2012. A provincial strategy and action plan is under development for release by government in the fall of 2012.

- In February 2012, the province provided \$1.4 million to the BC Association of Community Response Networks (CRN) to expand activity in up to 100 communities across the province over 3 years. The CRN is made up of concerned individuals, groups and agencies that come together at a community level to promote a coordinated community response to adult abuse and neglect. This funding is supporting prevention and education activities, in collaboration with local stakeholders, to reduce elder abuse and neglect in BC.
- In July 2012, the Minister of Health announced a review of the Care Aide Registry to examine the strengths and weaknesses of the current system and to provide the Ministry with recommendations. A report is expected later in fall 2012.

Flexible Services - It is important that seniors have access to the majority of their care needs and support within their own communities. The Report identified several opportunities to better meet the needs of seniors in their communities. Recently completed actions include:

- The Ministry, in collaboration with health authorities, developed new clinical guidelines for frail seniors in hospital, to make sure they receive the best care to support recovery. The guidelines explain best practices for six areas of care: cognitive functioning, pain management, mobility, nutrition and hydration, medication management, and bowel and bladder management. When these areas are well looked after while a person is in hospital, it helps maintain independence and functional mobility, and get home sooner. The clinical guidelines will be implemented in the health authorities over the coming year.
- In April 2012, training for family physicians and home health teams providing end of life care was strengthened. New training materials are now available to help physicians and home health teams improve the quality of care of patients with life-limiting and chronic illnesses. Physicians learn how to identify patients who could benefit from a palliative approach to care. They also improve their communication skills for advance care planning conversations and improve collaboration with specialists, patients, families and caregivers. This program helps to strengthen family physician and home health team knowledge about end of life care and support for patients and families facing life-limiting illness.
- Also in April 2012, after-hours palliative tele-nursing support to caregivers and families in their home became available province wide. The after-hours palliative nursing service (AHPNS) complements (and does not replace) the existing services available during the day for those nearing the end of their life, and their families. The hours of operation are from 9:00 pm to 8:00 am Pacific Time, seven days a week. Initially in Kelowna, the Vancouver community and Victoria, current after-hours palliative services remain in place and palliative patients in those areas do not call the provincial AHPNS. This service helps seniors and their families access support for their care needs within their own community.

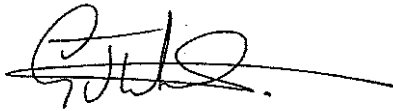
- Two resource documents were developed in response to identified needs within service delivery areas for seniors. *Meeting Seniors' Mental Health Care Needs in British Columbia: A Resource Document (2012)* is a resource for those in the province involved in providing care to seniors, including planners, program managers, policy makers, mental health and other health professionals. Given the rapidly growing number and proportion of people over the age of 65 in BC, including those with mental health problems, this resource document serves an important need. A related document, *Improving BC's Care for Persons with Dementia in Emergency Departments and Acute Care Hospitals: Findings and Recommendations (2011)*, is designed for health authorities to address services in this area.
- In February 2012, the Ministry provided the United Way with \$15 million to establish Better at Home, an initiative to provide seniors with support services that will allow them to remain in their own homes longer. The program offers simple services such as housekeeping, grocery shopping, friendly visits, yard work, home repair, snow removal and transportation to appointments. The services are non-medical in nature, and are supplemental to home health care services. In September 2012, the United Way of the Lower Mainland (UWLM) announced the first 18 communities that may eventually be associated with the Better at Home program. Over the next year, a total of approximately 60 Better at Home sites are expected to be announced across the province.
- In September 2012, the Ministry developed a new policy that provides health authorities with increased flexibility to offer the option of residing together in residential care when it is in their best interests and after exploring all other options to maintain the spousal relationship. The new policy recognizes the importance of the spousal relationship on their health and well-being during a time of significant change and the need to be sensitive and responsive to the needs of both spouses.
- Under the IPCC, health authorities are implementing enhanced home-based support programs to support seniors to remain in their own homes. Pilot projects are being expanded in four health authorities, working together with physicians and community services to ensure that all available supports are integrated into a care plan that meets the needs of seniors and their families and caregivers.

As this update demonstrates, at the six-month mark, the Ministry is making significant progress in all areas of the Action Plan. Our initial efforts are focused on actions that will contribute to improving administrative fairness and access to information within the context of the current legislative and regulatory framework. For example, the updated websites improve the access to and quality of the information seniors and their families need to understand and navigate the system. The Seniors' Health Care Support line, implemented in June 2012, enhances seniors' opportunities to raise concerns or complaints and ensure they are heard. And we are making progress in improving the alignment of key benefits and protections for seniors in both *Hospital Act* and CCALA facilities.

We will continue to work through the commitments in the Action Plan over the next 18 months, and in particular on the 6th theme of the Action Plan: modernization, which is aimed at ensuring that BC's home and community care system is sustainable and continues to meet the needs of BC's seniors.

The Ministry will provide a comprehensive report on the Action Plan and progress on the Ombudsperson's report in February 2013. I trust that this six month update and our planned report in February 2013, demonstrates the Ministry's commitment to ensuring that BC's home and community care system continues to meet the needs of BC seniors.

Sincerely,

A handwritten signature in black ink, appearing to read 'G. Whitmarsh', with a long horizontal stroke extending to the right.

Graham Whitmarsh
Deputy Minister