

{ SENIORS }

The Current Situation

Alberta’s seniors built our province and deserve access to the supports they need to age with dignity. As health needs increase, Albertans should be able to count on excellent pharmaceutical coverage and a quality continuing care system without worrying about financial hardship.

Our continuing care system is rife with problems of inadequate or inappropriate staffing, reports of neglect and abuse, gaps in care, wait times, unnecessary transitions, preventable hospitalizations, inappropriate pharmaceutical use, and more. Whether the underlying cause is a failure of policy or a failure of policy implementation, it is clear the system needs improvement. Despite the attention given to seniors’ care issues, the system continues to suffer, with a significant presence of private, for-profit care and the downloading of costs from government budgets to seniors and their families.

In recent decades, the system has become increasingly complex and confusing for Albertans to navigate, in part due to constantly changing terminology and a lack of transparent reporting. “Continuing care” now refers to a variety of living models (see Figure 1). These models range from Home Living, where individuals live independently but are assessed as having serious health needs requiring Home Care support, to facility-based long-term care, where residents are charged a daily fee that covers the cost of basic accommodation, as well as medications and medical supplies and equipment.

Starting in 2003, the creation of Supportive Living residences led to the separation of health care and

accommodation costs; some health care would be covered by the government, but other costs would not be. Albertans who would have gone to long-term care were instead sent to Supportive Living, where the costs of pharmaceuticals and medical equipment and supplies are offloaded to the individual or family.

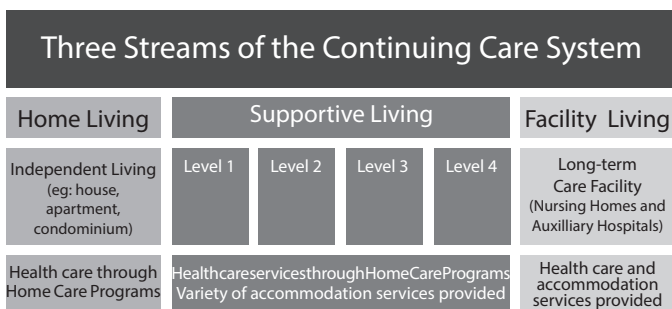
Instead of public bodies operating Supportive Living facilities and services, most are operated by private corporations and organizations contracted by government and subsidized with public funding. These operators led the creation of the care and accommodation standards still largely in place today, which are not adequately monitored or enforced for quality and to ensure safety of residents, their families, and staff. Further, care standards themselves, as well as monitoring and public reporting, do not guarantee quality of care or quality of life for the residents.

Until the 2017 announcement of 345 of a promised 2,000 new public long-term care beds, the Government of Alberta had for more than a decade focused solely on funding private organizations and corporations to build and operate new Supportive Living facilities.

Home care services are now approved only as a last resort and are intended only to supplement what can be provided by others, downloading even more costs on to patients’ families. However, the 2016-17 provincial budget significantly increased home care funding, which could be used to strengthen home care and make it more available to those who need it.

The existing Seniors Drug Plan, despite governments’ attempts to alter it, remains a universal program. However, it covers only a very limited selection of prescription drugs, resulting in high out-of-pocket costs for basic health care-related expenses.

Clearly, the status quo is inadequate and has been made worse in many ways. A new path is needed to ensure Alberta’s seniors receive the care they need and deserve.



Source: Continuing Care Health Services Standards, 2013

Figure 1



Priorities for Advancing the Public Interest

The Vision: Develop an integrated and comprehensive public system across the entire continuum of seniors' care ensuring that all seniors have access to dignified and quality care that meets individual health and social needs in their home communities when they need it.

The Government of Alberta should take the following actions to ensure the seniors who built our province can live with the dignity they deserve:

1. Address the needs across all streams of continuing care

- Increase the general public's awareness and understanding of how Alberta's continuing care system works
- Make continuing care comprehensive and fully integrated by developing a new, more responsive Vision and Master Plan that avoids relocating residents when their care needs change
- Ensure that provided services are adequately resourced, monitored, and evaluated
- Evaluate how the system can better meet the needs of specific demographic groups, including early-onset dementia, Indigenous, LGBTQ, and English Language Learner patients
- Expand the roles of the Health Advocate and Seniors Advocate to allow direct intervention in unsatisfactory situations
- Ensure any changes to the system by government, its agencies, and other care providers are subject to high standards of transparency and accountability

2. Improve the quality of all residential seniors' care

- Improve monitoring of residential seniors' care by prioritizing health, safety, and quality of life outcomes
- Phase out private ownership and operation of residential seniors' care
- Disclose the contracts between Alberta Health Services and private facility operators to the public
- Ensure effective Resident and Family Councils are present in every residential care facility in the province to improve care quality and provide a means for residents and their families to address unsatisfactory situations
- Allow for quicker adjustments to individual care plans in response to changes in needs
- Change measures of hours of care per resident to "hours worked" rather than "hours paid"
- Strengthen the facility inspection process by creating an independent oversight body to ensure compliance with care standards and providing for unannounced inspections
- Base care provided on the medical, rehabilitative, social, and overall health needs of individual residents

3. Reform home care services

- Implement the government's promise to introduce a new model for expanded public home care, guided by meaningful consultation with seniors, families, and directly-involved medical staff
- Phase out corporate, for-profit home care providers to ensure quality care is the top priority
- Ensure Albertans receiving home care have their health care needs met without charge to the patient

4. Strengthen pharmaceutical coverage

- Expand the list of pharmaceuticals covered by the Seniors Drug Plan to include all appropriate pharmaceuticals prescribed by a doctor or other approved prescriber
- Fully integrate pharmaceutical coverage into the public health care system, ensuring access to prescription drugs is not based on a patient's ability to pay or care setting