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Healthy Aging: Caring for Seniors and Those Living With Chronic Disease



Canada's population is rapidly aging, with one in seven Canadians over the age of 65 (Canadian Healthcare Association [CHA], 2009). The Canadian Institute for Health Information (CIHI) estimates that by 2036, 24.5% of Canadians will be aged 65 or older (CIHI, 2008). The number of Canadians aged 80 years or older has grown rapidly in recent years and now surpasses one million (CHA, 2009).

Aging and the Health Care System

The risk of chronic disease and disability increases with advancing age. In response to an aging population and the increased demands for health services associated with chronic conditions, jurisdictions across Canada are transforming their health systems and using more integrated, proactive approaches to health service delivery (Health Council of Canada, 2008).

With our rapidly aging population, the reality is that many more seniors will find it necessary to rely on our health care system. At present there are not enough acute care, chronic care, or long term care beds available, hence the wait times we continually witness. Our health care system as it exists today is not sustainable. Health care expenditures continue to grow, consuming more and more of our provinces' and territories' annual budgets. While just 13% of Canadians are seniors, it is estimated they consume 44% of provincial and territorial government health care spending (CIHI, 2008). These expenditures will grow exponentially as our baby boomer generation reaches its senior years.

Our health care services have evolved along a "find it and fix it" mentality. This works well for short-term problems, but it does not address the complex, ongoing needs of people as they go through the aging process and who are most often living with one or more chronic diseases. We require a paradigm

shift in our approach to managing the effects of aging and its accompanying chronic diseases. This shift must focus on a model of patient education and self-management that has home care nurses and home support staff working side-by-side with doctors, pharmacists, occupational therapists, physiotherapists, and other health care professionals. When team members combine expertise, they can enhance their patient's level of understanding, improve treatment compliance, and support self-help solutions.

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Part of the solution is to provide more home care. Between 1994–1995 and 2003–2004, total spending on Canada's publicly funded home care more than doubled from \$1.6 billion to \$3.4 billion (CIHI, 2007). Yet it is believed that 4–5 million Canadians are providing care for a family member with long-term health problems (Canadian Home Care Association, 2008). A very real consequence of this phenomenon is that the caregiver's health may deteriorate, adding an additional burden on our health care system.

Living with a chronic disease, or just aging in general, makes it hard for seniors to live safely and independently at home. It is a challenge for their families to manage their needs for care. However, seniors living with chronic diseases can remain safely at home with proper support. CHA recently released the policy brief *Home Care in Canada: From the Margins to the Mainstream*. It cites four reasons why home care is now finally in the mainstream:

1. People generally prefer to receive care at home.
2. Canada is an aging nation with increasing rates of chronic disease.
3. Current technology allows us to offer more care at home.
4. Governments are trying to contain their health care budgets, and home is generally perceived to be lower-cost care. (CHA, 2009)

Self-Management

Canadians are starting to understand they must take control of their own health care, and rely on health professionals for advice, treatment, and guidance when appropriate. Early diagnosis of a disease or condition is vital, and many pharmacies and employers now offer special clinics for detection of conditions such as diabetes, osteoporosis, cholesterol, high blood pressure, and respiratory problems.

Seniors have little control over the changes in their bodies as they go through the aging process: some factors are genetic and some are related to one or more chronic disease processes. However, seniors can make some simple lifestyle changes that

will slow down the effects of aging and chronic disease and minimize the risks to their safety. Identifying risks and making plans to minimize those risks are key to maintaining health and independence.

Traditionally, when it came to treatment and education on the disease process, the professional was the expert and the patient would be expected to comply with the professional's advice to achieve the best results. An alternate approach is the Stanford model for chronic disease management that is based on self-management by the patient. Patients are the expert in

their own lives, and in conjunction with health care professionals, they can be empowered to set goals and learn strategies to improve or at least maintain their health.

Over the past 25 years, We Care Health Services has developed expertise in caring for clients in their home as they age. At We Care, our goal is to provide a variety of services for seniors to enable them to live as independently as possible for as long as possible in a safe home of their choice. We believe that by providing seniors with education on how to manage and minimize the effects of aging and chronic disease, we will support their goal to "keep on going."

We Care has comprehensive tools in place to assess both the physical health of patients as they go through the aging process and their safety living in their homes. These assessments provide valuable information to ensure any changes are addressed and managed. This action minimizes or (preferably) prevents complications related to the senior's health and safety, and reduces the possibility that the individual will have to be admitted to hospital or long term care.

The assessment and reassessment of patient health and safety is essential to the achievement of quality outcomes for the patients we support in the community. In addition to our assessment processes, we support independent healthy aging by employing two basic strategies: (1) educating our staff to focus on interventions for healthy aging and to understand how to help seniors set goals that are realistic and achievable, and (2) empowering the elderly and their families to self-manage.

We Care has invested in training programs dedicated to educating health care staff on the aging process, chronic disease processes, and the ways they can assist seniors to maintain healthy lives as active members of the community. Our programs include Diabetes, Brain Injury, Alzheimer's/Dementia, Advanced Foot Care, and Palliative Care.

To help seniors remain safe in their homes, We Care (with the support of SAFE Communities Partnership in Sault Ste. Marie) distributes the *Independent Living Guide*, which out-

lines some of the factors that contribute to healthy aging. It helps seniors recognize safety risks and provides information to reduce the chances of injury in and around one's home. This 24-page guide is distributed free of charge throughout Canada.

To further support independent living, we will release a new guide in January 2010 that will provide insights and guidance for seniors who are living with chronic disease and need support to self-manage their disease. The *Healthy Aging Guide* will include information on participation and active thinking, healthy eating and oral health, communicating effectively with your health care professional, being active, using medications appropriately, managing physical symptoms, managing depression, and accessing community resources.

Technology

One of the factors driving home care to the mainstream of our health care system is that "current technology allows us to offer more care at home" (CHA, 2009). We Care, with our partner Healthanywhere (a division of Igeacare Systems Inc.), has pioneered a new technology called Re-ACT. This innovative program allows seniors to take their vital signs, such as blood pressure, pulse, glucose, blood oxygen, and weight, in their homes and instantly transmit the results to our We Care monitoring station using wireless Bluetooth connections. When results (measurements) fall outside the client's predetermined parameters, a nurse provides the appropriate intervention. These interventions may include a check-in telephone call to review the client's information and recent





We Care client Irene Jones uses a Re-ACT device to record and relay blood pressure and pulse measurements directly to the We Care monitoring station.

activities, a home visit, or a referral to the family doctor or other health care specialist. Using the system is as easy as using a Touch-Tone telephone. Engaging with clients remotely has the added advantage of allowing our nursing staff to provide consulting services, including medication reminders and diet/exercise planning, in a manner that is more cost effective than a home visit.

Since July 2008, a total of 110 clients with a combined total of 202 chronic diseases have been admitted to the program at the North Simcoe Muskoka Community Care Access Centre in Ontario. Evaluations of the most recent six-month monitoring indicate that 98% of clients were maintained in the community. In fact, two clients removed their names from the long term care waiting list because they felt safe and secure at home given their new knowledge and confidence in managing their disease. Healthier food choices, increase in exercise, decrease in smoking, and medication compliance were cited as improvements. The direct cost savings achieved through Re-ACT are also notable: in a three-month period, clients required 564 less hours of community care access centre nursing visits and 120 less hours in personal support visits.

The same technology has recently been installed in long term care facilities to monitor the vital signs of selected frail elderly residents. Many of these residents have multiple chronic diseases and have a history of hospitalization or readmission to the emergency department. Personal care staff at the facilities take the vital sign measurements, which are automatically sent wirelessly through to the We Care monitoring station. The objectives of this program are similar to Re-ACT: to keep clients safe and secure in their home of choice.

Aging should be a positive experience. Longer life must be accompanied by continuing opportunities for health, participation, and security. Seniors have much to offer society and want to be active in their communities. We Care believes that by supporting seniors to make simple lifestyle changes, they can continue to be vital members of their communities. Through education focused on self-management partnered with appropriate clinical assessment and technology for early detection of potential disease complications, the future of seniors can be improved. Q

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