CLOSE TO HOME:

A Strategy for Long-Term Care and Community Support Services **2012**





MESSAGE FROM THE MINISTER

Revitalizing and strengthening Newfoundland and Labrador's long-term care and community support services system throughout the province has been a priority for the Provincial Government and will continue to be a focus in years to come. To that end, I am pleased to present *Close to Home: A Strategy for Long-Term Care and Community Support Services*. This strategy will provide guidance as we continue to move forward to bring together all components of long-term care and community support services into an integrated system that provides support for individuals.

The average age of residents in Newfoundland and Labrador is increasing, making access to quality care and support through the provincial long-term care and community support services system vital. We will strive to enhance the continuum of services for persons with a disability and to improve access to long-term care and community support services.

Province-wide consultations provided us with an opportunity to visit many communities in our province and speak with individuals and groups about improvements they would like to see in the system. The priority directions of this strategy incorporate suggestions brought forward during the consultation process.

The long-term care and community support services system is broad and encompasses long-term care facilities, personal care homes, residential services for persons with disabilities and a variety of services in the home. This strategy is an ongoing flexible plan that will continue to respond to and make fiscally responsible improvements to our system over the next ten years.

Sincerely,

Susan Quelivan

Honourable Susan Sullivan
MHA, Grand Falls-Windsor-Buchans
Minister of Health and Community Services
Minister Responsible for Aging and Seniors

PART 1

INTRODUCTION

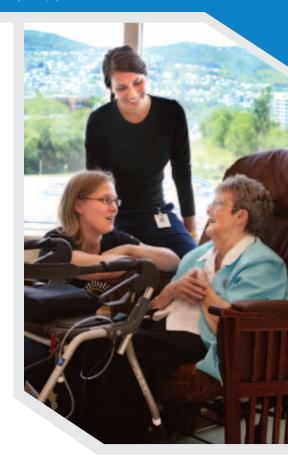
The long-term care and community support services system provides services to seniors, adults and children with disabilities, and individuals requiring professional services while at home or following hospitalization. It includes services provided in the home, residential options, personal care homes and long-term care facilities. The system is diverse, multi-faceted, complex and touches the lives of most people in the province at some time in their lives.

As the population ages and care needs become increasingly complex, it is clear that more people will require some form of support. A system that provides quality service within the province's fiscal reality will ensure services are available into the future. Therefore, new and enhanced services must be cost effective and sustainable.

The need to improve and enhance the system has been acknowledged by the Provincial Government, and over the past six years there have been substantial investments to implement many of those improvements. This strategy builds on those investments and outlines a plan that will continue to guide the future direction of the long-term care and community support services system. To assist with the development of this plan, in August and September 2010, the Department of Health and Community Services held province-wide public consultations to obtain feedback on the discussion document titled, *Close to Home: A Strategy for Long-Term Care and Community Support Services*. This document contained the proposed vision, mission and guiding principles as well as the service delivery model that forms the foundation of the provincial long-term care and community support services strategy.

Individuals and groups who participated in the consultations stated that having support and assistance as close to their home and community as possible, should be a key objective in developing and providing services. As well, individuals want choice in living in a place that maximizes independence. This feedback was taken into consideration in the development of the first province-wide long-term care and community support services strategy which outlines the Government of Newfoundland and Labrador's vision for continuing to enhance long-term care and community support services for residents of the province.

This strategy outlines the priority directions, goals and actions that will respond to current needs and prepare for future challenges. It will take



Personal Care Home Program Investments 2006-2012

Subsidy Rate Increases \$11.4M

New Subsidies \$7.9M

Grant Programs
for Operators \$2.0M

\$21.3M

Home Support Program Investments 2006-2012

Subsidy Rate Increases \$60.8M

Program Growth \$48.1M

Short-Term Acute

Home Care Program \$1.1M

\$110.0M

Long-Term Care and Community Support Services System Investments 2006-2012

Financial Assessment
Changes \$26.3M
Implementation
of InterRAI \$3.9M
Palliative End-of-Life
Services \$1.3M
Caregiver Programming \$0.1M
\$31.6M

Building and Renovation Investments 2006-2012

From 2006 to 2012, government has invested \$315.7 million in capital projects related to Long-Term Care Facilities.

time to realize the full extent of changes made in the system given the size and complexity of the programs and services of which it is comprised. This strategy focuses on the next ten years, to 2022, with ongoing monitoring and evaluation of the effectiveness of policy and program initiatives which will provide the evidence to make future changes while ensuring the system remains sustainable. Moving forward, the strategy must remain flexible to be able to adapt to new challenges, meet the needs of the public, and adjust in response to the ongoing evaluation of implemented changes.

The Government of Newfoundland and Labrador understands that individuals place a high value on health and independence and recognizes that prevention is the primary response necessary to preserve these important qualities. The long-term care and community support services strategy is one of several Provincial Government strategies that link together to form a solid and progressive foundation of health and social policy. These strategies include the Healthy Aging Policy Framework, Provincial Wellness Plan, Policy Framework for Chronic Disease Prevention and Management, Social Housing Plan, Poverty Reduction Strategy, Working Together for Mental Health and the inclusion strategy for persons with disabilities, Access. Inclusion. Equality. These are designed to work together to improve the health and well being for the citizens of this province and are of particular benefit to the individuals who access the long-term care and community support services system.

PROVINCIAL GOVERNMENT INVESTMENTS

The Provincial Government continues to make significant strategic investments in the long-term care and community support services system, investing \$480 million of new funding in the last six years. Through these investments, there have been improvements to infrastructure, improved wages for home support workers, improved access to home support services and medical supplies and equipment, increased stability of and access to personal care homes and increased access to supports for palliative and end-of-life care.

The long-term care and community support services system is challenged by increasing demand for service as well as expectations for increased subsidization. As the population ages, the cost to provide services will increase across the whole long-term care and community support services system. It is estimated that if there is no action to refocus the system to expand support options, by 2022, 984 new long-term care beds will be required. These new beds would require, based on current operating costs, an expenditure of approximately \$126 million annually¹. This expenditure does not include the approximately \$400 million capital investment which would also be required.

¹These projections are based on population trends to 2022 and current long-term care utilization patterns. The estimated operating cost is based on the indexed current cost.

LONG-TERM CARE AND COMMUNITY SUPPORT SERVICES SYSTEM

The long-term care and community support services system offers an array of programs and support services designed to provide individuals with the opportunity to live as independently as possible within the services provided. The system is complex and expansive in its scope and impact. Every year, over 20,000 individuals avail of long-term care and community support services in Newfoundland and Labrador with an annual operating cost of approximately \$600 million. This represents approximately 20 per cent of the Department of Health and Community Services' budget and more than seven per cent of the total provincial budget.

Presently in Newfoundland and Labrador, there are 2,814 long-term care facility beds and 4,370 licensed personal care home beds. More than 7,700 people received home support services during 2011-12 and more than 1,000 individuals are supported in other residential arrangements. It is estimated that the long-term care and community support services system employs more than 6,000 people in both the public and private sectors. A description of long-term care and community support services is provided in Appendix A.

Long-term care and community support services are not publicly-funded insured services under the *Canada Health Act* in the same way as medical and hospital services. Therefore, individuals are expected to contribute, according to their resources, to the cost of many services they access. The Government of Newfoundland and Labrador provides funding for an array of subsidies to ensure an individual's ability to pay is not a barrier to receiving the services they need.

SERVICE PROVIDERS

A variety of groups and individuals work together to ensure people receive the care and support they need. Caregivers such as family, friends and volunteers, the regional health authorities and the private and non-profit sectors all play a part in supporting individuals.



Family and Informal Caregivers

Support provided by family and informal caregivers accounts for the largest portion of help provided to individuals requiring assistance. Family and friends form the backbone of support to seniors, and individuals with disabilities to maintain their independence. Family and informal caregivers support individuals with their activities of daily living in a variety of ways, such as providing personal care, meal preparation, visiting, helping with shopping/banking or helping individuals navigate the health and social services system.

Regional Health Authorities

The regional health authorities are responsible for assessment and placement in personal care homes, long-term care facilities and other residential options. Regional health authorities also license personal care homes and approve home support agencies as well as monitor the quality of the services in each program area they administer. Individuals may be referred to or contact the regional health authorities directly to access long-term care and community support services. Professional staff work with the individual and family to determine the services best suited to support them. Regional health authorities' staff provide professional and clinical services such as nursing, social work, physiotherapy, occupational therapy and nutritional consultation. Many non-clinical services are also administered by the regional health authorities such as the Special Assistance Program and the allocation of subsidies for home support services, personal care homes and long-term care facilities. Faith-based organizations provide services to residents in cooperation with Eastern Health in six long-term care facilities. These organizations have been providing long-term care services for many years.

Aboriginal Organizations/Government

Various supportive services are provided by the Aboriginal governments and organizations to Aboriginal populations across the province. These services are often funded by the Federal Government and include home support services, preventative services, such as clinics or day support programs, as well as drug coverage.

Private Sector

The private sector plays a significant role in providing services and residential options for individuals who access the long-term care and community support services system. The private sector operates personal care homes and home support agencies and other services which are integral to the long-term care and community support services system. Private persons also provide service to individuals in the form of alternate family care homes and board and lodging arrangements.

Volunteer/Non-Profit Sector

Working closely with all other service providers, volunteer organizations play a vital role in supporting individuals, particularly seniors, to remain active and involved in their communities. By providing opportunities for socialization and recreational activities that focus on wellness and prevention, these organizations enable individuals to maintain health and independence. Volunteers also decrease social isolation by visiting individuals who are unable to participate in community activities.

Throughout the province, non-profit organizations provide assistance to individuals to help them remain independent. Services offered by community partners support people in a variety of ways—from providing physical assistance and equipment to offering support and information to individuals and their families. As well, non-profit boards operate cooperative apartments for the accommodation and care of people with disabilities.

WHY WE NEED A STRATEGY

The long-term care and community support services system is being challenged with societal and demographic changes compounded by an increase in the prevalence of chronic disease. A strategy that identifies these challenges, plans for them and properly aligns investments, is critical to sustain a quality system in the future. The plan needs to be flexible and capable of change to accommodate solutions to unforeseen challenges.

Changing Communities

Traditionally, support for managing the activities of daily living for seniors and people with disabilities was provided by family, church and community. A variety of formal services evolved over time to meet the needs of individuals who required care and support. Informal services provide the foundation for the current long-term care and community support services system; however, our society continues to change. Families are smaller, children are more mobile, caregiving parents are aging, chronic disease is increasing and the fact that the rate of disability increases with age, all signal that pressure will be put on the public system to provide increased levels of assistance.

Shifting Demographics

Nationally and internationally populations are aging. While the rate of aging varies across Canada, Newfoundland and Labrador's population is one that is rapidly aging due to lower birth rates and past migration patterns. The number of seniors and persons with disabilities in the province has consistently increased over the past five years. Currently,

there are approximately 80,000 seniors living in the province, representing approximately 16 per cent of the population residing in both urban and rural settings. It is anticipated that the number of seniors in the province will continue to increase, representing 23 per cent of the population by 2022.

The January 2011, report commissioned by the Benefits and Services Working Group of the Federal-Provincial-Territorial Ministries Responsible for Social Services entitled *Supports and Services for Adults and Children Aged 5-14 with Disabilities* provided an analysis of data from the last two *Participation and Activity Limitation Surveys* (PALS 2001 and 2006). This analysis showed disability rates among working age adults are rising rapidly, in step with an aging population. It also highlighted that the rate of disability increases with age; while the rate for adults 35-44 years of age is 10 per cent, it increases to 56 per cent for seniors over 75 years of age. A geographically dispersed population with increasing disabilities will put pressure on the long-term care and community support services system to deliver more services.

While age alone is not a predictor of the need for services, an individual is more likely to develop a chronic disease or dementia and need services as they age. Given the aging demographic, it is reasonable to assume that utilization of existing services will increase and additional service models may have to be developed.

Chronic Disease Prevalence

Chronic diseases have a big impact on individuals, their families, and the health and community services system. Chronic diseases such as diabetes, heart disease, arthritis, and cancer become more common with age. Poor health habits and physical inactivity contribute to the high rates of chronic disease in this province. When people have more than one chronic disease, management of their health can become complex and they may require more health and support services.

Another indicator for the need to plan for future service demands is the increasing incidence of dementia—the loss of memory, judgment and reasoning. Individuals who have dementia and their families often require support and assistance through the long-term care and community support services system and eventual admission to a long-term care facility. The Alzheimer's Society of Canada advises that the number of Canadians with dementia will increase significantly over the next 20 years. As the incidence of dementia increases, so too will the need for a range of programs and services to meet the needs of that growing population.

WHAT WE HEARD

The Provincial Government has been working on revitalizing the longterm care and community support services system and has developed this plan to continue to guide the programs and services to be responsive and sustainable into the future. Key to revitalizing the system was hearing from stakeholders about what an improved long-term care and community support services system should look like. Twenty public consultation sessions were held in 19 communities across the province during August and September 2010 with over 500 people attending these sessions. One hundred and ninety eight written submissions and phone calls were received. In addition, 6 roundtable consultations were hosted by the Minister of Health and Community Services with stakeholder groups such as seniors' representatives, community of persons with disabilities, personal care home owners, employee representatives and regional health authorities' officials. The feedback received offered valuable insight on directions for change to improve the quality of life for individuals and families.

Following are some themes that evolved during the course of the consultations and suggested changes. These themes have been considered in shaping the strategy's priority directions, goals and the actions to achieve these goals.

Increased support for people to remain independent in their homes

During the consultations, many individuals reinforced their desire to remain at home for as long as possible. People stated that home support services and specialized equipment should be made available at a level that would keep them independent in their home and that there should be fewer restrictions on accessing programs and services.

Increased residential options for people to remain in their communities

People said that more options need to be available when an individual is no longer able to remain in his or her own home. They also asked that arrangements such as affordable housing with supports and assisted living be considered. These options would support the individual requiring assistance while maintaining his or her independence.



Improved coordination and communication among service providers

Individuals and service providers stated that long-term care and community support services are fragmented and uncoordinated. People expressed a desire to more fully understand what services are available to them. They would also like to see an improved process for sharing information when moving from one service to another. It was suggested that there should be staff available to help individuals navigate the system and ensure a more seamless delivery of services. Several people also commented that a "one-stop" approach for finding the right service should be implemented.

Improved quality of life for residents in long-term care facilities

Individuals would like to see a more appropriate staffing level and skill mix in long-term care facilities to provide quality care to residents. Enhancements to recreational activities, socialization and community inclusion activities would positively impact the quality of residents' lives; to this end, increased programming and recreation staff were requested. Improvements in infrastructure and amenities were also requested as it was felt that physical surroundings also impact the quality of life of residents in long-term care facilities.

Enhanced role for personal care homes

A number of presentations and submissions proposed that personal care homes should be licensed to admit residents who have higher care needs. It was reported that personal care homes require increased funding to remain viable, especially smaller homes and those in isolated areas. It was suggested that the increased utilization of the personal care home sector would allow individuals to remain in, or closer to, their communities.

Less cost to the individual requiring care

A number of people brought forward suggestions on how to make services less costly for individuals, from reducing the individual's portion of payment to eliminating financial assessments for certain services. Other individuals supported new funding approaches such as an income-based financial assessment for long-term care facilities and individualized funding based on assessment. People also suggested providing the individual with block funding and allowing that person to spend it how they wish to meet his or her care and support needs.

Better rehabilitation services throughout the whole system

The need for increased rehabilitation programs, services and staffing in all areas was brought forward throughout the consultation process, as was the need to maximize independence regardless of service location.

Improved education and training for all service providers and other human resource issues

People said that recruitment and retention initiatives are needed to ensure the right number of people with the right skills are available to provide for a growing number of individuals that need care in the future, particularly in rural areas and in the home and community-based sectors. An increased number of professionals with specialized knowledge is needed. As well, there is a need to build multidisciplinary teams with an enhanced emphasis on allied health professionals such as physiotherapists, occupational therapists, dietitians and speech language pathologists. A number of people expressed concern regarding the availability and training of home support workers.

Increased support for caregivers

Many caregivers contributed to the consultations and delivered the message that more assistance needs to be provided to those friends and family members who provide care. Suggestions provided included increased respite services, increased support services, increased day programming and compensation of family members as caregivers.

Impact on health care services

A large number of contributors spoke about family members having to remain in hospital longer than necessary due to insufficient community supports or an available long-term care facility bed. This can negatively impact the acute care system's ability to accommodate admissions for surgical and medical treatments. Ideas regarding the need for more long-term care beds and increased options for individuals to return to or remain in the community were raised for consideration.







PARTII

VISION, MISSION AND GUIDING PRINCIPLES

The vision and mission statements as well as the guiding principles and the person-centred model of care described below were endorsed through the consultation process and will provide direction for the continued evolution of the long-term care and community support services system.

Vision

Individuals and families requiring long-term care and community support services will achieve optimal independence and quality of life in their homes and communities.

Mission

Individuals and families receiving long-term care and community support services will be assisted in a manner that:

- addresses health and social needs:
- optimizes rights and participation in decision making;
- encourages choice, independence and mobility; and,
- demonstrates standards of quality in all aspects of service provision.

Guiding Principles

The following guiding principles set out the ideals that will assist and guide the Department of Health and Community Services in the development of policies and programs.

1. Person-Centred, Needs-Based and Individualized

Person-centred means that service, as identified by the individual and approved by the regional health authority, is provided to maintain a person's independence. The range of choices available should be sufficient to ensure that an individualized plan may be developed.

2. Family Involvement and Support

Families are the front line of support for individuals in need of assistance and involvement at all stages of the support planning process should be encouraged. Families will be recognized as constructive, cooperative partners complementing other assistance that supports the individual.

3. Accessible

As a province-wide system, long-term care and community support services provides supports and services to individuals who request assistance with the activities of daily living. To the degree possible, components of the system are available and accessible to individuals regardless of geographic location and without discrimination on any basis.

4. Flexible and Responsive To Changing Needs

The care and service needs of a person will often change over time. Appropriate services should be accessible when needed at the level necessary to maintain independence and as close to the individual's home as possible. The long-term care and community support services system should have the necessary flexibility to meet a person's changing circumstances.

5. Accountable

The Department of Health and Community Services and the regional health authorities must be accountable for the quality of the programs and services provided. Monitoring effectiveness and efficiency by measuring outcomes is key to ensuring the system is doing what it is intended to do. As well, regular review of policies and legislative requirements ensures that the system is operating in the best interests of individuals and that it is changed as necessary. The Department of Health and Community Services is also accountable for ensuring all programs and services are provided within the fiscal capacity of the province.

6. Fair and Just

Individuals and their families will be treated with dignity and respect in their dealings with the long-term care and community support services system. They can expect to be treated equitably and professionally at all stages of their involvement. Unique cultural and linguistic needs of all Newfoundlanders and Labradorians will be recognized and respected.



Person-Centred Model of Care

The Person-Centred Model of Care acknowledges the strengths and capacities of an individual while identifying the services required to improve independence. The model focuses on working with individuals to establish a plan to match services with identified needs utilizing a varied range of services. One of the primary goals of a person-centred system is to ensure individuals receive supports early enough to prevent crisis or deterioration. In this model, long-term care facilities would be available for those who have the most significant care needs, but the focus is on supporting individuals in their homes and communities.



PART III

PRIORITY DIRECTIONS

The long-term care and community support services system is complex and far reaching in its scope. Continuing to transform this system over the next ten years in anticipation of future demands and pressures requires a clear focus. The Provincial Government has identified five priority directions that will be focal points for transforming the long-term care and community support services system:

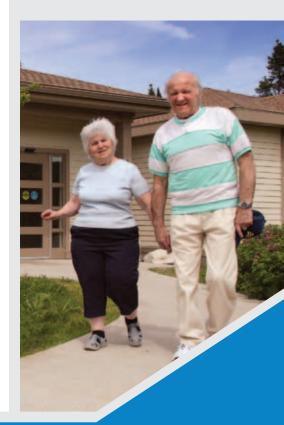
- 1. Healthy Living and Wellness
- 2. Person-Centred Service
- 3. Family and Informal Caregiving Support
- 4. Quality Services and Service Delivery
- 5. System Sustainability

Each of these directions highlight an overarching strategic challenge that requires action to achieve the strategy's vision "Individuals and families requiring long-term care and community support services will achieve optimal independence and quality of life in their homes and communities." Each priority direction gives rise to a variety of goals that specify what is being worked towards and lists the actions that will be taken to achieve the goal. Actions may be chosen throughout the implementation of the strategy to accomplish the identified desired change. As well, further actions to achieve the goals may be considered to align with fiscal and other circumstances of the province.

Through these priority directions, the system will be refocused towards increased investments in areas that will keep people healthy; enhance home and community-based services; and, delay or prevent institutional placement. This is a necessary shift in financial and policy focus that will enable services to continue to be provided as demographic and chronic disease challenges increase.







1.0 HEALTHY LIVING AND WELLNESS

It is important that the first priority direction of the long-term care and community support services strategy reflects the Provincial Government's commitment to enhance healthy living and wellness for all individuals. Investments in healthy living and wellness may delay, or prevent, the need for long-term care and community support services. This commitment, which is fully developed in other Provincial Government strategies, specifically the *Provincial Healthy Aging Policy Framework*, the *Chronic Disease Prevention and Management Policy Framework* and the *Provincial Wellness Plan*, is endorsed here and provides the foundation for these strategies to work in tandem with the long-term care and community support services strategy. Actions to achieve the goals listed under this priority direction are being advanced through the above strategies.

Other cross-departmental strategies such as the *Poverty Reduction Strategy, Social Housing Plan* and the *Recreation and Sport Strategy* also support individuals to keep them healthy and active.

Embracing healthy living and wellness means supporting people to be active, make healthy choices, and be engaged members of their community, thereby supporting people to take action in all aspects of their personal health and care to the greatest extent possible. This means working with people on individual, community, and societal levels to support them in taking ownership of their health.

HEALTHY LIVING AND WELLNESS GOALS

1.1 To support individuals to achieve and maintain good health and well-being. The actions to achieve the goal are designed to support individuals across their lifespan so that they can remain as healthy as possible within their own homes and communities.

Actions to Achieve the Goal

- 1.1.1 Continue to address the priorities of the *Provincial Wellness Plan*: healthy eating, physical activity, tobacco control, injury prevention, mental health promotion, environmental health, child and youth development and health protection.
- 1.1.2 Continue to fund initiatives to support the creation of age-friendly communities.
- 1.1.3 Partner with community organizations to improve transportation options for seniors and persons with disabilities.

- 1.1.4 Promote initiatives regarding the prevention of seniors falls through community-based programming, and increase public awareness of both the importance of falls prevention and the contributing risk factors including personal behaviours and changes to one's environment that can help prevent falls.
- **1.2** To create and maximize opportunities for individuals with chronic disease to reach optimum health. These actions support the goal by targeting individual behaviour and providing the individual and their family with information, tools and services that will help manage their chronic disease.

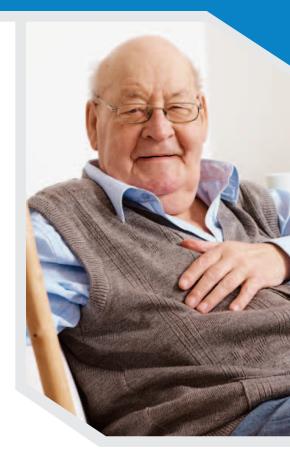
Actions to Achieve the Goal

- 1.2.1 Ensure the Provincial Chronic Disease Self-Management Program includes a focus on seniors and persons with disabilities.
- 1.2.2 Increase professional development opportunities for service providers to promote self-management.
- 1.2.3 Implement actions of the *Chronic Disease Prevention and Management Policy Framework* that support the long-term care and community support services strategy including measures aimed at community screening and community-based prevention clinics.
- 1.2.4 Partner with the Newfoundland and Labrador Medical Association to enhance physician services to individuals with one or more chronic diseases.

WHAT WE HAVE DONE

Since 2006, the Provincial Government has undertaken a wide range of initiatives to improve wellness and prevent illness and injury including the *Provincial Wellness Plan*, the *Provincial Healthy Aging Framework*, the *Cancer Control Policy Framework* and the *Chronic Disease Prevention and Management Policy Framework*.

The Provincial Wellness Plan was announced in 2006. A key initiative of the plan is the Provincial Wellness Grants program. In 2011-12 \$500,000 was awarded to community organizations to further wellness initiatives. The Provincial Government also continued its support of chronic disease management through \$400,000 in grants to organizations that focus on healthy living and chronic disease management including the Food Security Network of Newfoundland and Labrador, the Canadian Diabetes Association Newfoundland and Labrador Region, the Arthritis Society of Newfoundland and Labrador, Easter Seals, and other community organizations.







The *Provincial Healthy Aging Framework*, launched in 2007, awards \$200,000 annually through the Age-Friendly Newfoundland and Labrador grant program to seniors' organizations and municipalities to support healthy aging programs and initiatives. Over 100 grants have been awarded by the Department of Tourism, Culture and Recreation through their Seniors' Community Recreation Grants launched in 2009. In 2008, *Ageless*, a public awareness campaign, was launched to promote positive images and attitudes towards aging. The Healthy Aging Research Program provides up to \$200,000 per year to support research projects.

In 2010, Gaining Ground: A Provincial Cancer Control Policy Framework for Newfoundland and Labrador was released. The goal of the framework is to provide key policy directions to guide cancer control efforts in the province in the coming years. This framework provides a foundation upon which the Provincial Government, the regional health authorities and community-based organizations can build specific action plans that will strategically focus on advancing and improving cancer control in Newfoundland and Labrador.

In 2011, Improving Health Together: A Policy Framework for Chronic Disease Prevention and Management was released. The framework outlines a long-term and comprehensive approach to assist those at risk for or living with a chronic disease. At the same time, an investment of \$500,000 was announced for the implementation of the Provincial Chronic Disease Self-Management Program, Improving Health: My Way. This program is a key initiative of the policy framework and provides education and skill development for people living with a chronic disease.

Enhancements have been made to the Newfoundland and Labrador Prescription Drug Program that benefit seniors and others, including the provision of the newest component, the Assurance Plan. This plan offers protection against the financial burden of eligible high drug costs, whether from the cost of one extremely high-cost drug or the combined cost of different drugs.

The Department provides \$2.8 million annually to support many community agencies such as the Coalition for Persons with Disabilities, Independent Living Resource Centre and the Seniors Resource Centre. These agencies play an important role to individuals who receive services in the long-term care and community support services system.

Approximately \$140,000 was provided in 2011-12 to more than 60 seniors groups throughout the province to support programming that keep seniors active and engaged in their communities. These groups have a significant impact on peoples' lives and are vital to support seniors to remain active and independent.

2.0 PERSON-CENTRED SERVICE

While one of the primary goals of the health care system is for individuals to remain healthy and independent, there are times when assistance and support is needed. When service and/or residential options are required, an individual's preference must be considered in the provision of the most appropriate type and level of assistance. This priority direction continues to build on existing home and residential models that support a personcentred service approach.

Recognizing the multiple pressures on the system, including patients in acute care waiting for appropriate community options, the challenge for the Provincial Government is to design a fiscally sustainable long-term care and community support services system that responds to individual needs with a variety of supports and services. A number of actions will be implemented to provide increased choice for individuals requiring post acute care. These actions will assist a person to live as independently as possible, close to home, within available resources.



2.1 To enhance the availability of services to support individuals in their homes. Supporting individuals to live in their homes with the appropriate level of services and supports helps maximize their independence and supports individual choice.

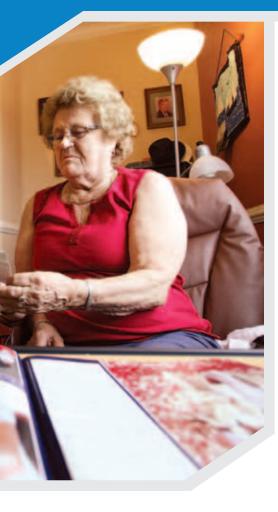
Actions to Achieve the Goal

- 2.1.1 Complete a review of the Home Support Program.
- 2.1.2 Partner with the Newfoundland and Labrador Medical Association to enhance physician home-visiting.
- 2.1.3 Develop programs to assist individuals with their property maintenance.
- 2.1.4 Enhance the Special Assistance Program and the availability of assistive devices.
- **2.2 To increase the types of living arrangements available.** A broader array of residential models will help individuals receive the appropriate level of services in the most appropriate and fiscally sustainable setting.

Actions to Achieve the Goal

- 2.2.1 Identify and expand cooperative, congregate, supportive housing and other living arrangements in partnership with regional health authorities, Newfoundland and Labrador Housing Corporation and community partners.
- 2.2.2 Expand community-based models of service delivery.





- 2.2.3 Review residential service models for individuals with a disability.
- 2.2.4 Increase recruitment of and enhance support to alternate family care homes.
- 2.2.5 Evaluate the impact of supporting assisted living and other residential models.
- 2.3 To enhance the community emergency response to individuals in crisis to assist them to remain at home. Immediate support in a crisis situation can prevent unnecessary admissions to acute care facilities and helps individuals continue to live in their own homes and communities.

Actions to Achieve the Goal

- 2.3.1 Develop and implement a multi-disciplinary community rapid response program.
- 2.3.2 Improve access to community support services for individuals, including those presenting at emergency departments, who could be supported at home.
- 2.3.3 Expand use and promotion of HealthLine services and personal emergency response devices.
- 2.4 To increase the focus on restorative and rehabilitative care to ensure individuals receive service to help them live at their highest level of ability. Rehabilitative services help individuals improve or maintain their level of ability, thereby maximizing their independence.

Actions to Achieve the Goal

- 2.4.1 Expand assessment and restorative care services.
- 2.4.2 Increase access to physiotherapy, occupational therapy, and other rehabilitative allied health services.
- 2.4.3 Improve assessment of the need for rehabilitation in acute care upon admission.
- 2.4.4 Improve discharge planning upon admission to an acute care centre.
- 2.4.5 Enhance the coordination of rehabilitative services across all program areas.
- **2.5 To enhance the role of personal care homes.** Personal care homes play a very important role in providing care to seniors allowing them to remain in or close to their own communities.

Actions to Achieve the Goal

2.5.1 Partner with personal care home associations and operators to develop enhanced services for residents with higher care needs.

- 2.5.2 Expand the role of personal care homes to include community outreach services such as the delivery of day support programs.
- 2.5.3 Continue to evaluate the funding model for personal care homes.
- **2.6** To ensure the most suitable type and level of support in the most appropriate location. Identifying the appropriate level of support in the right place supports sustainability of the system by utilizing more cost-effective services where appropriate.

Actions to Achieve the Goal

- 2.6.1 Finalize implementation of the standardized electronic assessment instruments.
- 2.6.2 Develop indicators for all service options to determine the appropriate level or place of service.
- 2.6.3 Increase monitoring and auditing of assessment data to ensure appropriate use of service delivery models.
- 2.6.4 Review the appropriateness and adequacy of service criteria and rates paid to private service providers.
- 2.7 To increase palliative end-of-life services and capacity. Palliative care ensures individuals are comfortable and treated with dignity when the end of their life is near and the needs of family are considered.

Actions to Achieve the Goal

- 2.7.1 Increase the number of palliative care comfort units in long-term care facilities and health care centres.
- 2.7.2 Continue to build on the regional health authorities integrated teams and networks to improve service delivery.
- 2.7.3 Review the medication coverage for palliative care symptom control.
- 2.7.4 Increase palliative care services in the community.



WHAT WE HAVE DONE

Since 2006, the Provincial Government has made significant new investments to support individual choice in the long-term care and community support services system. Over the past six years, \$7.9 million in funding has created approximately 1,300 new personal care home subsidies. In the Home Support Program, \$1.1 million of new funding was provided to introduce a Short-Term Acute Home Care Program focusing on reducing the length of stay in acute care facilities as well as activities to prevent hospital admissions. In addition to these investments, changes to the Special Assistance Program eligibility criteria expanded access to the services to a broader group of individuals. As well, a \$3.9 million investment was announced for the implementation of interRAI, an electronic assessment tool which will assist staff in ensuring individuals are offered the most appropriate service options. Expansion of the Palliative End-of-Life Services available in the community is helping to provide individuals the supports they require to remain close to home.

In keeping with the person-centred model of service delivery, all these initiatives are targeted to provide more options for individuals and their families as they make decisions in determining what services best fit their needs.

lew Funding to Support Person-Centre Service 2006-2012 (in millions)	
Personal Care Homes - New Subsidies	\$7.9
Home Support Program - Short-Term Acute Home Care	\$1.1
Long-Term Care and Community Suppo Services System	ort
- Changes to Special Assistance Program	\$1.25
- Implementation of interRAI	\$3.9
- Palliative End-of-Life Services	\$1.3
	\$6.45
Total Investments	\$15.45

Excerpt from Appendix B

3.0 FAMILY AND INFORMAL CAREGIVING SUPPORT

A family or informal caregiver is an individual who provides care and support to a family member, friend or neighbour. Family caregivers are important in the lives of people who need assistance with activities of daily living. Caregivers provide a broad range of support to enhance a family member's life and enable them to remain at home. An increase in the number of individuals needing assistance in the province will mean a greater need for more family and friends to provide informal assistance.

The population providing informal supports is aging and there are generally fewer family members to share caregiving responsibilities than in past generations. Smaller family size and increased mobility of children contribute to fewer personal and family supports for the caregiver to draw upon.

Family and informal caregivers in Newfoundland and Labrador can avail of home support services that provide care for individuals requiring assistance as well as respite to allow the caregiver time for themselves. Respite is an important service component and is also available through the use of long-term care facilities and personal care homes, as well as through programs offered by community groups.

Caregiving is a cornerstone of the long-term care and community support services system. Therefore, recognizing and assisting family and informal caregivers is a priority direction under the strategy to enable them to continue their important role. Recognizing changing demographics and changing family structures, the Provincial Government will develop policies that support individuals who care for family members by providing assistance and compensation to family caregivers.



FAMILY AND INFORMAL CAREGIVING SUPPORT GOALS

3.1 To improve support to family and informal caregivers. Family and informal caregivers enable individuals to remain in their own homes and communities, maintain health and require less publicly-funded services which enables a greater distribution of resources.

Actions to Achieve the Goal

- 3.1.1 Increase the availability of day support programs in the community.
- 3.1.2 Implement a policy which gives clients the choice to pay family for their home support service based on their assessed need.
- 3.1.3 Improve information regarding availability of and access to services for caregivers.
- 3.1.4 Increase respite options in long-term care facilities and personal care homes.
- 3.1.5 Explore increased community respite options for caregivers.
- 3.1.6 Expand education and training opportunities for caregivers that focus on how to provide care for their own well-being.
- 3.1.7 Implement a caregiver assessment as part of the standardized assessment to identify services needed to support family caregivers.
- 3.1.8 Complete a needs assessment focusing on caregiving parents of adults with disabilities to assess future service requirements.
- **3.2** To increase community capacity to provide care for those who need it. Communities need to recognize the value of caregivers and support them in a variety of ways.

Actions to Achieve the Goal

- 3.2.1 Increase partnerships with community organizations to support caregivers.
- 3.2.2 Conduct a community caregiver needs assessment to determine how best to assist caregivers.
- 3.2.3 Educate community and all service providers on the importance and value of caregiving.
- 3.2.4 Launch a public education campaign that recognizes the contribution of caregivers.

WHAT WE HAVE DONE

In 2007, the Provincial Government announced an increase to the monthly payments for individuals in the community support services sector who were in a board and lodging arrangement with a relative. This initiative resulted in \$6.5 million in new funding to eliminate a previous inequity in the rates being paid to non-relatives versus relatives.

Since 2006, the Department of Health and Community Services has been providing \$40,000 in annual funding for the Seniors Resource Centre to continue with their Caregivers Out of Isolation program. This program reaches out to caregivers across the province, forming a network of support. In 2010-11, the department also provided the Seniors Resource Centre with \$60,000 in one-time funding to partner with the regional health authorities to provide information sessions across the province to bring relevant information to caregivers in their communities.

The introduction of the Income Based Financial Assessment in December of 2009 considerably increased access to the Seniors Home Support Program, as the number of clients has more than doubled since the introduction of this assessment. Many individuals who were formerly relying solely on family and informal caregivers are now accessing subsidized services to meet some of their care needs, thus supporting family and informal caregivers.

Respite is available throughout the province to complement the care provided by family caregivers and provide breaks from caregiving responsibilities. These breaks are important in helping caregivers to continue in their caregiving roles. Access to facility-based respite care is arranged through the regional health authorities.

New Funding to Support Family and Informal Caregivers 2006-2012 (in millions) Long-Term Care and Community Support Services System - Increase to Board and Lodging relative rate \$6.5 - Caregivers – Seniors Resource Centre \$0.1 Total Investments \$6.6

Excerpt from Appendix B





4.0 QUALITY SERVICES AND SERVICE DELIVERY

Quality is important to service recipients as well as service providers. Individuals and families value the quality of services that they receive in terms of positive outcomes, ease of access, appropriate delivery and safe location. Service providers must have the skills and abilities to deliver these services in a safe, appropriate and timely manner.

The long-term care and community support services system provides many diverse programs and services to individuals with varying levels of need and vulnerability, in a variety of settings. The delivery of quality services is a complex but critical component and is the focus of this priority direction.

QUALITY SERVICES AND SERVICE DELIVERY GOALS

4.1 To strengthen the capacity of the long-term care and community support services workforce to provide high quality care. Having a workforce with the right number of service providers with the right skills and abilities available to individuals when needed, is key to the ability to deliver quality services in the long-term care and community support services system.

Actions to Achieve the Goal

- 4.1.1 Improve workforce planning.
- 4.1.2 Define staffing levels and skill mix for services.
- 4.1.3 Review the establishment of educational standards in community support services and personal care homes.
- 4.1.4 Increase professional development opportunities for all service providers.
- **4.2** To increase service coordination and integration to ensure seamless transitions as individuals access various services. A coordinated system is easy to navigate, uses time and resources efficiently and produces better outcomes for the individuals who use it. Satisfaction with the service will be higher if people know what services are available to them and can easily access them.

Actions to Achieve the Goal

- 4.2.1 Ensure the Electronic Health Record and/or other case management solutions support communication between service providers.
- 4.2.2 Enhance case management to assist individuals to navigate the system.

- 4.2.3 Implement policies which ensure service planning appropriately involves individuals, family and support persons.
- 4.2.4 Promote public education and awareness of available services.
- **4.3** To ensure provincially-owned or licensed residences meet current and future standards. Where a person resides, including the safety of the building, the amenities available and the availability of assistance when needed, contributes significantly to an individual's quality of life.

Actions to Achieve the Goal

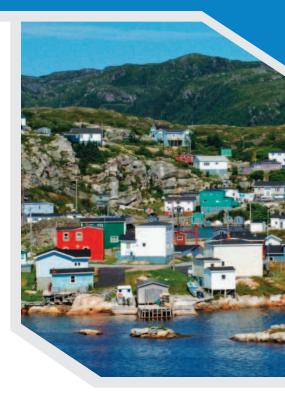
- 4.3.1 Continue to modernize long-term care facilities.
- 4.3.2 Create a consistent inspection policy for all public and licensed facilities.
- **4.4** To increase the focus on quality of life in all aspects of long-term care and community support services. Environments which support and enhance life for all individuals will be achieved through actions which create environments that are inclusive and support different interests and special needs.

Actions to Achieve the Goal

- 4.4.1 Increase access to social/recreational programming.
- 4.4.2 Increase services and programming for residents with dementia in long-term care facilities.
- 4.4.3 Review service funding for access to social/community activities.
- 4.4.4 Enhance client satisfaction processes to ensure individuals and their families are encouraged to provide feedback on the services they receive.
- **4.5** To modernize the legislative and regulatory framework for all sectors of the system to ensure a focus on quality outcomes. Enhancements to legislation and a more comprehensive and standardized approach will ensure individuals receive quality services in an efficient manner and appropriate environment that improves their life experiences.

Actions to Achieve the Goal

- 4.5.1 Develop a modernized and streamlined legislative and regulatory framework for the long-term care and community support services system.
- 4.5.2 Review and update the provincial standards that guide the delivery of long-term care and community support services.
- 4.5.3 Enhance the monitoring and evaluation framework.





WHAT WE HAVE DONE

Since 2006, the Provincial Government has focused on investments in the Home Support Program to increase the home support hourly subsidy rate from \$8.04 per hour in April 1, 2006, to \$12.25 per hour effective July 1, 2012. This will result in home support workers earning \$2.25 more per hour than minimum wage earners. Similarly, increases have been made to the personal care home monthly subsidy rate, allowing personal care home operators to invest in quality initiatives within their homes.

In addition, increases in the amount of liquid assets an individual receiving service is able to retain and increases to the personal allowance to \$150 per month, has contributed to the quality of life for individuals. Clients of community support services and residents in long-term care facilities and personal care homes now have more money to spend as they wish.

New Funding to Support Quality Initiatives 2006-2012 (in millions)	
Home Support Program	
- Subsidy Rate Increases	\$60.8
Long-Term Care and Community Su Services System - Increase Personal Allowance	ipport \$2.1
La conserva Allera della Litta dell'Accesso	\$1.25
 Increase Allowable Liquid Assets Human Resources for the Community Supp 	oort
•	\$0.9

Excerpt from Appendix B

5.0 SYSTEM SUSTAINABILITY

The aging population and the increasing number of persons with disabilities will continue to challenge the health and community services system. Providing services in the future will require funding to be invested in home, rehabilitation and community residential options as alternatives to reduce the demand for long-term care beds. With these new investments, it is recognized, there will be an ongoing need for long-term care facilities, thus ensuring sufficient, appropriate beds will be a consideration of the strategy.

All long-term care and community support services areas have a responsibility to ensure they are providing the right level of care in the most appropriate and cost-effective setting. The Department of Health and Community Services will monitor costs and be accountable for a sustainable system.

SYSTEM SUSTAINABILITY GOALS

5.1 To ensure long-term care and community support services are provided based on need and program criteria and are affordable and sustainable. Utilizing the most cost-effective services that appropriately meet an individual's needs is key to a sustainable system.

Actions to Achieve the Goal

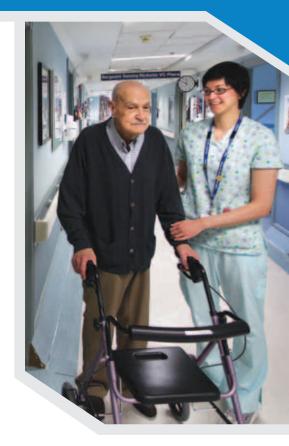
- 5.1.1 Continued implementation of assessment tools to ensure better identification of need to support service delivery.
- 5.1.2 Review alternate funding models.
- 5.1.3 Review financial assessment processes.
- 5.2 To ensure an adequate supply of long-term care facility beds to meet the population needs. Individuals sometimes remain in inappropriate settings longer than necessary due to unavailable long-term care facility beds. Improved projection and planning for long-term care beds will inform capital development, providing greater accessibility to individuals requiring residential services.

Actions to Achieve the Goal

- 5.2.1 Improve bed projection modeling to assist the department in determining the number and location of publicly-built and funded long-term care facilities needed in the future.
- 5.2.2 Enhance regional planning for service delivery with a focus on provincial consistency.
- 5.2.3 Review the placement policy of access to the first available long-term care bed when medically discharged from hospital to ensure efficient use of beds that are available in the region.

WHAT WE HAVE DONE

New long-term care facilities have opened in Clarenville, Corner Brook and Happy Valley-Goose Bay in the last few years. Work began in 2010 to build a new facility in the St. John's area, that will replace two existing long-term care facilities and will offer 456 beds. New facilities are also being constructed in Lewisporte and Carbonear. In addition to these facilities, investments have also been made in existing long-term care facilities for renovations and to purchase new equipment.



In the last several years, the financial assessment process for several sectors has been changed to make services more affordable to individuals. The 2009 implementation of the Income Test financial assessment for the Home Support and Special Assistance Programs has had a significant impact on individuals. It has resulted in substantial reductions in individual contributions to services. More than 1,800 individuals are accessing these services since its introduction.

In the personal care home sector there have been increases to the monthly subsidy rate from \$1,135 in 2006 to \$1,800 in 2011. The 2011 implementation of two new subsidization programs, the Isolation Grant Program and the Small Home Subsidy Program reinforces government's commitment to supporting home owners with small operations or who are located in remote areas of the province. Each of these initiatives support individuals in being able to access services close to home.

New Funding to Support System Sustainability 2006-2012 (in millions)	
Personal Care Homes - Rate Increases - Equalization Grants	\$11.4 \$0.2
- Isolation Grants - Small Home Subsidy Program	\$1.0 \$0.8 \$13.4
Home Support Program	
 Program Growth Changes to the Financial Assessment Changes to Home Support Ceilings 	\$48.1 \$10.5 \$2.6
	\$61.2
Long-Term Care Facilities	
Investments in New Long-Term Care FacilitiesChanges to the Financial Assessment	\$315.7 \$1.8
	\$317.5
Long-Term Care and Community Support Services System	:
- SCWA Financial Assessment Changes	\$0.2
- Implementation of Income Test	\$0.1
	\$0.3
Total Investments	\$392.4

Excerpt from Appendix B

PART IV

LOOKING TO THE FUTURE

Moving in the directions set out in this strategy requires cooperation among departments and agencies of the Provincial Government, the regional health authorities, service providers, the long-term care and community support services workforce, individuals receiving service, their families and caregivers, as well as the general public.

The Provincial Government has a leadership role to play in making this strategy a reality and leading system change. The Department of Health and Community Services will engage partners in new, more cooperative and collaborative ways and ensure change continues to be based on evidence and best practices. The department will report to the public on its plans to advance the priority directions as well as progress on implementation.

The Department of Health and Community Services will:

- enhance data collection to support evidence-based system change and to evaluate the impact of the strategy;
- implement an accountability framework, including public reporting every three years, to monitor the implementation of this strategy; and,
- engage individuals receiving service, partners, content experts and key stakeholders to assess progress and adjust the course as new issues emerge.

This strategy sets out a comprehensive set of goals and actions to achieve the goals, that will guide the Provincial Government and its partners and stakeholders in improving the long-term care and community support services system to better reflect the needs of individuals and their families. The implementation of the strategy will be undertaken in a fiscally-responsible way and priorities may need to be aligned to reflect provincial fiscal circumstances.



Once fully implemented, the Provincial Government intends that:

- Individuals will have more support to remain as healthy as possible and be supported to manage their health to maximize their wellbeing and maintain their independence;
- The long-term care and community support services system will
 offer more choice for individuals who need support to stay at home
 or as close to home as possible. The supports they receive will be
 more tailored to better identify and support an individual's needs.
 The network of services will be expanded and the system will be
 more integrated and appear seamless to those accessing services;
- Families and informal caregivers will have more support to continue in their caregiving roles. Communities will have increased capacity to support caregivers and there will be increased emphasis on maintaining and supporting the health and well-being of caregivers;
- There will be an increased focus to support workforce training and professional development in all parts of the long-term care and community support services continuum; and,
- The long-term care and community support services system will be sustainable into the future. People will access the services they need earlier, remain at home or near their communities longer and placement in a long-term care facility will continue to be available for those who have the most significant care needs.

The vision is clear, providing services will offer maximum independence and quality of life for individuals in their homes and communities. The Provincial Government will continue to offer leadership and guidance as the long-term care and community support services strategy is implemented.

APPENDICES

APPENDIX A: PROGRAMS AND SERVICES

The **Home Support Program** supports eligible individuals of all ages in the community. Individuals have the option to purchase these services from an agency or hire their own workers to assist them at home. These services consist of respite, assistance with personal care, meal preparation and household management. Shared living arrangements can be set up with individuals who require home support and choose to share the cost of a living arrangement and home support staff with another person.

Respite care is the provision of short-term, temporary relief to those who are caring for family members. This may occur through the provision of support either in the home, community or through a facility. Day programs, although limited in availability, provide assistance with personal care, meals and recreational activities primarily for seniors who need support. Where available, regional health authorities administer day programs through long-term care facilities.

The **Special Assistance Program** provides medical aids and equipment designed to assist eligible individuals who require health supplies, oxygen, orthotics and equipment. This is intended to promote the continued independence of individuals.

The **Special Child Welfare Allowance Program** is designed to provide assistance to eligible families with a child under the age of 18 with an intellectual or physical disability. This assistance helps offset some of the additional costs incurred when a family cares for a child with a disability at home.

Personal care homes are private, for-profit, residential settings primarily for seniors. These residences provide personal care and accommodation for a monthly rate, are monitored and licensed by regional health authorities and can accommodate five to 100 individuals.

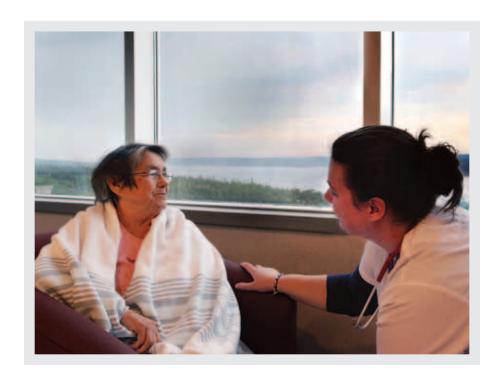
The **Alternate Family Care Program** provides accommodation and support for adults with intellectual disabilities who are no longer able to reside in their family home. This model continues to support those individuals in a home environment.

Other community services support individuals to live in a home-like atmosphere in the community. These arrangements include:

- Board and Lodging Supplements to assist eligible individuals residing with relatives or non-relatives. Supplements are available based on assessed need and provided by regional health authorities.
- Co-operative apartments which are private residential homes for the accommodation and care of adults with intellectual disabilities or behavioural challenges. They are usually operated by communitybased boards of directors and funded by the Provincial Government.
- Individual living arrangements, which in certain circumstances, provide opportunities for individuals with intellectual disabilities to reside in the community. Funding for rent, equipment and supportive services is provided. Arrangements usually support one individual per home but can be shared.

Long-term care facilities are publicly-funded facilities operated by regional health authorities that provide care and accommodation primarily to seniors who have high medical care needs.

Protective community residences are homes for people with mild to moderate dementia that are operated by the regional health authority under the long-term care facility in the community.



APPENDIX B:

New Funding to the Long-Term Care and Community Support Services System - 2006-2012 (in millions)

(in millions)	
Investments in Operating	
Personal Care Homes	
- Rate Increases	\$11.4
- New Subsidies	\$7.9
- Equalization Grants	\$0.2
- Isolation Grants	\$1.0
- Small Home Subsidy Program	\$0.8
, -	\$21.3
Home Support Program	
- Subsidy Rate Increase	\$60.8
- Program Growth	\$48.1
- Changes to the Financial Assessment	\$10.5
- Short-Term Acute Home Care	\$1.1
- Changes to Home Support Ceilings	\$2.6
	\$123.1
Long-Term Care Facilities	
- Changes to the Financial Assessment	\$1.8
	\$1.8
Other Long-Term Care and Community	
Support Services Investments	
- SCWA Financial Assessment Changes	\$0.2
- Increase to B/L Relative Rate	\$6.5
 Human Resources for the Community Support Services S 	
- Caregivers – Seniors Resource Centre	\$0.1
- Changes to Special Assistance Program	\$1.25
- Implementation of interRAI	\$3.9
- Increase Allowable Liquid Assets	\$1.25
- Increase Personal Allowance	\$2.1
- Implementation of Income Test	\$0.1
- Palliative End-of-Life Services	\$1.3
	\$17.6
Investments in Capital Long-Term Care Fac	ilities
Long-Term Care Facilities	
- Investments in New Long-Term Care Facilities*	\$315.7
*This does not include the total project costs for ongoing capital projects.	\$315.7

Source: Department of Health and Community Services