

Enhancing Services for Seniors: Facilitating Hospitalized Seniors Return Home Advocacy Statement

Executive Summary

The challenges associated with providing services for our province's increasingly aging population make the organization and financing of long term care and supportive services for seniors an increasing priority for the province. For this reason, the Association of Registered Nurses of Newfoundland and Labrador (ARNNL) endorses the government's *Healthy Aging Policy Framework* in its vision of a supportive, age-friendly province which enables seniors to live independently and experience good health and well-being. As a primary provider of long term care services, Registered Nurses (RNs) have a good understanding of the needs of our aging population and the challenges that need to be addressed to improve the quality, delivery, and cost effectiveness of long term care and supportive services in the province. The following work builds on ARNNL's previous recommendations proposed in 2005 entitled, *Enhancing Services for Seniors*, whereby four broad areas were proposed for government action and system reform that RNs believe will improve the quality of life for seniors requiring long term care and supportive services in the future. In keeping with this vision, the rationale and specific recommendations below are intended to highlight an important segment of long-term care services for action and reform.

Research Overview

Our long term care services system for seniors is primarily institutional based. ARNNL believes government needs to shift spending away from institutionally-based long-term care into rehabilitation and community-based support services for hospitalized seniors. This move will help ensure comprehensive, universally accessible, health and long term care services can be delivered to seniors in all settings, i.e., nursing homes, long term care facilities and, especially, their homes. Evidence has shown that delivering rehabilitation and community-based support services can reduce the number of seniors requiring costly institutional based care and improve the quality of their lives by allowing them to return to their homes and their communities.

For this reason, in January 2008, the Association embarked on a study concerning the health impacts of institutionally-based services for seniors. The study indicates that over the last decade an increased utilization of long term care beds for post-hospitalized seniors is due to a lack of discharge options – rather than a significant decrease in the functional independence of seniors. As a result, an increase proportion of long term care expenditures have been spent on the early institutionalization of seniors.

Recommendations: A Framework for Change

Mission:

To shift spending away from institutionally-based long-term care into rehabilitation and community-based support services to promote the values of inclusiveness, health promotion and localized care for seniors.

Objective 1:

Promote the vision and principles of the *Provincial Healthy Aging Policy Framework* through strategic program initiatives that will provide seniors with alternatives to institutionally-based long-term care.

Programs

1. Implement a Geriatric Assessment & Rehabilitation Program (GARP) to maximize the function of hospitalized seniors and discharge them to the community:
 - A comprehensive evaluation and management program for in-patients that continues post-discharge via a full continuum of services (Program 2). The program is restorative and rehabilitative in its focus and endeavours to facilitate a senior's ability to return to their own home.
2. Implement an Enhanced Home-Support Services Program (EHSSP) that enables seniors to remain in their homes via a full continuum of services while promoting independence and reducing the number of preventable injuries:
 - nursing care; pharmacy care (drug profiling); rehabilitative care (physiotherapy, occupational therapy, social work and nutritional services); respite services for informal caregivers; palliative care; respiratory care; services related to day-to-day activities (for example, help with dressing, personal hygiene, meal preparation and getting around inside and outside the home); services related to routine household tasks.
3. Implement a Supportive Living Communities Program (SLCP) within the existing *Canada-Newfoundland and Labrador Affordable Housing Agreement* to create new spaces for seniors throughout the province that enables independence while providing security.
 - Supportive Living incorporates the provision of services such as 24-hour monitoring, emergency response, security, meals, housekeeping, and life enrichment activities.

Objective 2:

Increase investments in human resources to reflect the dynamics of community-based settings for services and programs provided to seniors.

Programs:

1. Invest in the training, recruitment, and retention of primary health care practitioners in the provision of services and programs to seniors in a community-based setting. (i.e. Pharmacists, Clinical Nurse Specialists, Registered Nurses, Licensed Practical Nurses, Physiotherapists, Occupational Therapists, and Social Workers).
2. Aid and enable both formal and informal caregivers via economic and social support systems.
3. Provide more incentives for Newfoundlanders and Labradorians to volunteer in the seniors sector.

Program Outcomes

The above programs in conjunction will:

- increase functional status of seniors;
- improve quality of life for seniors;
- reduce the rate of nursing home placement;
- reduce length of initial hospital stay and subsequent readmissions;
- provide support for informal and formal caregivers; and
- reduce direct costs of hospitalized seniors.

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