Advancing Continuing Care

A Blueprint to Support System Change

Focused on what matters most to families.

Manitoba
As the baby boom generation continues to age into its retirement years, our province must prepare for the challenges this demographic shift will bring.

In 2010, about 13.6 per cent of Manitobans were aged 65 or older. This percentage is expected to double in the next 25 years. Serving a larger proportion of older Manitobans means that health care authorities must plan ahead to address:

- more chronic disease
- higher health care costs
- greater competition for health care workers
- maintenance of service quality and access to health care services
- increasing need for new, expensive technologies and treatments

**Promoting Independent Living**

Most people with chronic illnesses or disabilities want to continue to live in their own homes, as independently as possible, for as long as possible. Since 2006, Manitoba’s Aging in Place Long Term Care Strategy has helped seniors and others do this by providing health care in their homes or in community based, home-like settings.

As our population grows older, we must build on that success by reviewing the strategy to ensure it continues to meet the needs of Manitobans, now and in the foreseeable future.

In February 2011, the province introduced Achieving Healthy Aging, a renewed, long term care plan to meet growing demands for services for seniors. It provides Manitobans with more choice, more independence and a better quality of life.

Advancing Continuing Care – A Blueprint to Support System Change supports the renewed long term plan. It incorporates strategies for aging in place at home, long term care and the range of community supports along the continuum. The Blueprint proposes innovative solutions that promote seniors’ health by:

- helping people stay at home by investing in community supports and focusing on wellness, capacity building and restoration when delivering home care
- improving access to home care
- strengthening co-operation among health care partners
- expanding options for community based housing as alternatives to personal care homes (PCH)
- ensuring there are enough long term care beds to meet the needs of Manitobans
- developing new, innovative ways of delivering services to improve care for PCH residents
- making better use of technology to help improve the quality and co-ordination of care, make informed decisions and develop policy
Advancing Continuing Care focuses on four main principles:

- individual involvement in all care decisions
- closer co-ordination and communication between various health care sectors to help prevent service gaps
- all care programs emphasize individual recovery to allow people to live as independently as possible
- all actions and decisions are made in the individual’s best interests

Implementation of The Blueprint will:

- promote and support an efficient, effective health care system
- allow Manitobans to live as independently as possible by providing appropriate supports
- reduce health care costs by reducing Manitobans’ need for more expensive, long term or acute care services

Planning for the Future

The Blueprint was developed by Manitoba Health in collaboration with key stakeholders, such as provincial committees, government departments, regional health authorities, private agencies, community groups and health care providers.

The Blueprint is a five year plan for the province. It focuses on matching the needs of individuals and their caregivers with local supports, which will help people avoid unnecessary loss of independence and quality of life through premature admission to PCHs or hospitals. It will also build and support a more sustainable health care system. Change is critical to deliver care and services that improve the lives of Manitoba seniors and others with chronic illnesses and disabilities.

Trends, Challenges and Opportunities

Manitoba Health conducted an environmental scan to identify the most significant trends, challenges and opportunities affecting the continuing care sector. Extensive research, including input from key stakeholders, confirmed that Manitoba is facing many of the same challenges as other jurisdictions, outlined earlier in this report. The research identified four key factors affecting those challenges.
Demographics
The number of Manitobans needing continuing care is expected to increase significantly in the coming years. Right now, the greatest users of home based care are seniors aged 65 and over. Based on past patterns, and considering the aging of the baby boomers (ex: those born between approximately 1946 and 1964), the demand for long term care will increase exponentially. Baby boomers tend to have stronger preferences for independent living, greater autonomy and choice in services, which will further impact system challenges.

An increase in the number of older Manitobans will mean chronic diseases – the major cause of death and disability worldwide – will be more prevalent in future years. This trend will greatly affect the health care system and its sustainability.

The ethnic and linguistic profiles of Manitobans of all ages are also changing, reflecting immigration patterns in previous decades. Increased diversity among people aged 75 and older will present the long term care sector – and the continuing care system – with new challenges. Innovative approaches, greater cultural sensitivity and more supports will be needed.

Providing Services
Quality health care depends on accessing the right care in the right place at the right time. Facility based care and home based care are important elements of the health care continuum. We need both sectors to be well managed, staffed, funded and functioning.

The current system focuses on treatment and cure, not on maximizing wellness. This reality presents many questions about the values, sustainability and funding models of today’s health care.

Research increasingly shows home based care can improve a client’s quality of life. It can often be a cost effective substitute for PCHs and hospital care. We must emphasize capacity building, more flexibility and access to a broader range of services, such as:

- long term care
- preventive/restorative care
- acute care
- palliative care

PCHs should reflect home life and emphasize dignity and respect. Privacy, flexibility and the right to manage one’s own risk should be the cornerstones of facility based long term care. Services must also put more emphasis on the psychological, social and spiritual elements of life.
Human Resources

Health care needs are most effectively addressed by a team of qualified staff to deliver front line services. Recruitment, retention and access to a stable, consistent, appropriately trained workforce are among the most critical issues facing the continuing care sector. Human resource management will become even more challenging as the population ages, service needs increase and the labour pool shrinks.

The continuing care sector must be equipped to:

- meet the needs of individuals with complex health challenges
- support efforts to move patients out of acute care
- implement community housing options for seniors

Health System Funding

The organization and structure of health care systems can have a significant impact on how effective, efficient and costly they are. Manitobans must have accessible, safe, high quality care. This means we must re-examine how we fund health care and how we can make the most of our health care investment.
Considering the present and anticipated needs of Manitobans, information from stakeholders and current research and best practices, *Advancing Continuing Care* includes seven action areas.

**Action Area #1**

**Helping people stay at home by investing in community supports and focusing on wellness, capacity building and restoration when delivering home care services**

We are promoting independence and choice for Manitobans by investing in community supports and focusing on wellness and capacity building when delivering home care services. By helping people get better, we help them live independently and reduce their dependence on home care services and hospitals.

Manitoba is:

- developing an enhanced role for home care case co-ordinators that helps clients navigate through the health care system and ensures effective, efficient use of resources
- increasing home care service hours
- providing more education and training for staff and caregivers
- developing a made-in-Manitoba restorative model of home care that focuses on improving client’s functions, while meeting their health care needs
- expanding palliative care
- reviewing and enhancing delivery of in-home and outside respite for clients and caregivers
- developing a home care/community human resources strategy to address anticipated volume and complexity of client care needs
- expanding and developing innovative, diverse community service options

**Action Area #2**

**Improving access to home care**

We believe it is important to address the challenges of providing home care to Manitobans living in rural or remote settings. Accessing services also depends on helping people make appropriate, informed decisions about the most appropriate care and living arrangements for their needs.

Manitoba is:

- improving access to home care across the province through best practice strategies for rural and remote home care programs focusing on:
  - partnerships
  - communication
  - caregiver supports
  - transportation and travel for staff
considering best use of technology to improve service to people receiving home care

using client feedback to develop a wide range of innovative health information resources

**Action Area #3**

**Working together with health care partners to help people age in place**

We believe a continuum of care is the best way to help Manitobans live as independently as possible for as long as possible. This continuum includes services to seniors, home care, supportive care, long term care, primary care, and acute care – all working together to provide seamless care to Manitobans.

Manitoba is:

- developing and implementing activities to include relevant stakeholders
- partnering with relevant providers to address mental health and disability issues of community clients
- enhancing supportive care
- promoting integrated care delivery system/transition points
- improving communication/partnerships between primary care and home care providers
- researching and implementing innovative teamwork models
- implementing and evaluating new models
- establishing partnerships to provide seamless, comprehensive care

**Action Area #4**

**Improving options for community based housing as alternatives to PCHs**

Manitoba is:

- developing and completing a housing framework
- evaluating housing with services incorporating need for specialized supports
- reviewing housing policies
- establishing a funding model to keep pace with cost of living and wage settlements
- partnering with Manitoba Housing and Community Development to explore options
- developing partnerships with municipalities and the non-profit sector
- developing innovative design and business strategies for smaller communities
- marketing and managing housing options based on right fit
- reviewing relevant legislation/accountability mechanisms
evaluating support for seniors in group living and support services to seniors
  - expanding funding for meal programs, home maintenance, shopping, etc.
  - reviewing program roles, staffing, service levels and data collection
increasing capacity and flexibility of housing with services
demonstrating alternate housing models in rural areas
making decisions based on evaluations, reviews and demonstrations
making progress in establishing new funding and funding models
establishing new housing

devolving specialized environments and services for unique populations such as those with dementia
enhancing community housing and service options for people with challenging behaviours
basing decisions on analysis
assessing the results of planning

Action Area #5

Ensuring there are enough long term care beds to meet the needs of Manitobans

Manitoba is:

- analyzing the number and quality of long term care beds
- implementing a plan to ensure individuals’ timely transition from hospital
- co-ordinating housing option planning with demonstrated need for PCH beds
- marketing and managing housing options based on right fit
Action Area #6

Developing innovative ways to deliver services to improve care for PCH residents

Manitobans admitted to PCHs in the future are expected to have higher health care needs than previous residents, adding additional pressures on staff and facilities. Baby boomers are likely to expect better accommodation and more recreation services, so PCH providers will need to adapt.

Manitoba is:

- reviewing PCH staffing and developing a human resources strategy
- requiring all new PCHs to accommodate special populations
- investing in special support teams to help residents with dementia
- investing in geriatric mental health/psychological resources
- investing in dementia education for staff
- promoting nurse practitioners in PCHs
- using leading practices in elder care
- developing alternate care and housing models for younger people
- enhancing PCH teaching capacity
- making progress on described human resources issues and in hiring new positions
- continuing to enhance education for staff and creating learning/processes to support culture of caring
- establishing new options for target populations
Action Area #7

Using special technology to improve the quality, co-ordination of care

Making greater use of information technology will improve communication among health care team members, resulting in better service. The short term investment in supportive technology can result in long term cost savings.

Manitoba is:
- implementing electronic clinical information system in home care and PCH
- establishing electronic linkages
- improving the provincial PCH wait list system
- building decision support systems to facilitate the use of electronic information to support effective planning
- mobilizing technology to improve efficiency and outcomes
- developing health information tools/navigation
- developing accountability mechanisms
- implementing electronic client records
- introducing and evaluating innovative technology

Toward the Future

The Advancing Continuing Care plan will help improve the lives of Manitobans. It will also help support the sustainability of the overall health care system. The Advancing Continuing Care action areas build on existing strengths and partnerships. They provide direction for increasing system capacity through innovation, efficiencies and the most effective use of resources. The result will be a better, more efficient continuum of programs and services to meet the needs of Manitobans, present and future.