

A Vision for Change:
“Aging in Place”

Coalition for
Seniors and
Nursing Home
Residents’ Rights

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The Coalition for Seniors and Nursing Home Residents Rights was established in 2004 to lobby the removal of assets from the calculation of nursing care. Prior to 2006, all liquid assets of both spouses were used to cover the cost of nursing care services. On October 3, 2006, the Liberal government made the change to exclude assets.

The Coalition is comprised of more than 50 groups, led by an eighteen (18) member board who come together to endorse and promote shared principles. It is a non-partisan, non-sectarian umbrella organization whose purpose is to achieve, improve and maintain affordable and accessible programs that enhance the quality of life for seniors and their families. It that strives to enhance the well-being of seniors and residents living in nursing care facilities who require various types of service depending on the levels of care as determined by their needs.

“Aging in place” is "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level. It is about where you live for years, in the community of your choice. It also means growing older without having to move from your community to a health care environment. The needs and abilities of older seniors change gradually over time. When they change it varies from one person to the next. Many can remain active and independent. Independence and security can be tied to the financial ability to remain in their own home or community.

Fifteen years from now, over 25% of the population of New Brunswick will be 65 years of age or older. With an aging population, it is more important than ever to have public services that will allow seniors to maintain their independence as long as possible. A vision for change will have an impact on peoples' lives and will enhance the quality of life for seniors, residents of nursing care facilities and their families.

The Vision and Mission of the Coalition is to ensure that seniors and residents, no matter where they reside in New Brunswick, age in respect and dignity with quality of life. Its purpose is to provide programs that are affordable, accessible and maintained for the aging population. It is essential for seniors to stay in their home environment as long as possible.

In August, 2012 the provincial government announced it would invest an additional \$4.4 million to increase funding to home support agencies to \$16.00 per hour, with the increase, agencies were required to pay workers a minimum hourly rate of \$11.00 to come into effect for October 1, 2011.

This vision is not to eliminate or restrict other services that are required to ensure the aging population to live with respect and dignity; however, this is to illustrate the important elements that require immediate government attention. In New Brunswick the proportion of seniors increased by fifteen (15%) over the last five (5) years, while the number of children decreased by four (4%).

Public Home Care & Home Support Workers

There are four strategic pillars to begin the process, so that aging in place can be accommodated:

- Provide for a Public Home Care
- Home Support Workers (better working conditions)
- Nursing Care Fees (Protect assets)
- Ombudsman Jurisdiction - Better Protection for Seniors

For seniors to remain in their home as long as possible, it is critical to ensure home support workers are provided improved working conditions, so they may provide the quality care to those who require the service. It is important to incorporate home support workers under the umbrella of the Regional Health Authorities so that public services are provided for continuity and efficiency. The vast majority of home support workers do not have:

- Sick leave
- Employees benefits
- A pension plan
- Working hours are not guaranteed
- Travel allowances for some are only 12 cents a km, they are not paid for time spent traveling between clients

In a recent survey by the New Brunswick Health Council, the New Brunswick Extra-Mural Program, which provides in-home health care to individuals of all ages, has received a glowing endorsement. The Extra-Mural program and home support workers would enhance each other's work by providing the essential services for seniors needed to live at home.

These two groups are instrumental in supporting the aging population to live independently and safely in their homes. It would be more economical to provide more services in home as opposed to having seniors using acute hospital beds to the average cost of \$1000 per day per person. The nursing home wait list in October indicates 813 with 541 in acute hospital beds.

Unfortunately, the quality and availability of home support services in New Brunswick varies greatly from one region to another. This is because the government leaves it to the private sector to provide this service which is so important for thousands of New Brunswickers.

There are 57 private agencies that provide these services. Some have only a few employees, and others have several hundreds. There are significant retention and recruitment problems that affect home support workers, resulting in constant staff turnover.

Many elderly, who have been treated in hospital, continue to occupy acute-care hospital beds even though they should be cared for, with proper support, in their home and in the community. They have nowhere to go because of the lack of home support services.

Home support workers are a huge part of the services for the elderly but again, without adequate working conditions, training and value for their worth, there tends to be a high turnover of this support. This has a high impact on the care that is required for those that need the service.

The elderly do not adjust well when there is a high turnover of staff support. Getting to know those that care for you is a critical piece of elder care.

With a public funded home care program, under the auspices of the Regional Health Authority the cost to taxpayers and the challenges for the government will continue. Keeping them in the hospital is wasteful because the cost of their care in an acute-care hospital is higher than in the community. This also disrupts urgent acute-care services when there are not enough hospital beds.

Recommendations:

Home Care

- Incorporate home support workers under the umbrella of the Regional Health Authorities. A good example is the New Brunswick's Extra-Mural Program, which provides in-home health care to individuals of all ages. The program must be comprehensive, based on non-profit or public delivery and be accessible for all.
- A key element in developing this program is to set national training standards for caregivers and minimum hours of care given to type of individuals. To set the standards, examples of best practices and standard delivery and fully funded programs can be found in the Manitoba model. Established in its present form in 1974, it is the oldest comprehensive, province-wide, universal home care program in Canada. Another model would be the Federal program for the Veterans which assist veterans to remain in their own homes and communities with an emphasis of independent living.
- The New Brunswick government must call for the Federal Government in cooperation with the provinces, to implement a National Home Care Program with standards and provisions of core services comparable from province to province. Home support workers and home care go hand in hand with programs that include professional services such as nursing, occupational therapy and social work and personal care services to assist in daily activities.

➤ Nursing Care Fees

As of January, 2005, the province of Nova Scotia set the pace for nursing home reform joining the list of Canadian jurisdictions, including Ontario, British Columbia, Alberta, Saskatchewan, and Manitoba, where asset liquidation requirements have been entirely phased out. Prince Edward Island followed thereafter. In the Yukon assets were never considered. The ability of these provinces to contribute to nursing home costs is based simply on an income test. The Coalition values these changes with great approval.

With the removal of assets in New Brunswick in 2006, the nursing home daily fees changed to \$70 per day. Since then fees have increased by 38% and will increase to \$113 per day effective April, 2014. A resident retains \$108 per month from their income for personal needs; this amount was last increased in 2007. This is also a concern for the well-being of their care and personal hygiene. The Coalition is concerned with the present direction that the New Brunswick Government is taking with the on-going increases since the removal of assets.

Long-term care ranges from levels 1-4. Nursing home care is required for Level 3 and 4. Level 3 requires prompt guidance and assistance throughout the activity or someone else to perform the activity. Level 4 are medically stable but have difficulties with cognition and or behavior. All levels require 24 hour supervision.

In New Brunswick, special care homes are private and licensed by the province to care for level 1 and 2 residents who are generally mobile and require some assistance with supervision and personal care activities of daily living.

In regions where the waiting list for nursing home placements is more acute, a few special care homes have been expressly authorized to provide enhanced services for seniors who have a diagnosis of dementia and require assistance with all aspects of daily life but have no complex medical needs requiring on-going nursing care supervision. These individuals are assessed at Level 3B. There are currently, 222 beds in the province, not including the 343 specialized beds recently announced.

Special care homes subsidized daily fees increased up to \$75.50 per day effective April, 2012. A resident retains \$135 per month for personal needs from their income. This allowance was last increased in 2007. For these residents this creates undue difficulties to provide for other essentials they may require.

While the province subsidizes long-term care for those who lack the means to pay for it, the Coalition does not favor a target approach under which income and assets are used for those who have the ability to pay. The province must look at the best practises established in other provinces, which are much lower and more affordable for those requiring the service.

Recommendations:

- That the government protect the seizing of assets to not consider the calculation for nursing care. That the daily fees be comparable with other provinces.
- That the government establish a Long-Term Care Act that would house all policies affecting seniors.
- That the personal allowance be increased to \$288 per month for nursing care facilities. (Nursing Home and Special Care Home)

➤ **Ombudsman Jurisdiction – Better Protection for Seniors**

Premier Alward, during the 2010 election campaign, pledged, that if elected, the Ombudsmen would be able to monitor nursing and, special care homes and home care services as part of a new seniors' Charter of Rights. He and his party pledged to establish a 1-800-SENIORS, toll-free hotline for people over the age of 65 looking for government information and services.

The Coalition is concerned because we are talking about a very vulnerable population, who deserve to have a voice, particularly when they are often unable to voice their own concerns or to defend their own interests. Investigations have been on-going for decades and yet there is still neglect and abuse going on in nursing care facilities.

The oversight of the Ombudsman to investigate without reprisals for seniors and long-term care facilities is a critical piece caring for the elderly. (According to the Department of Social Development Summary of Adult Protection Report in 2008-2010, there were 46 incidents. (These are the latest statistic available.)

Eight (8) provinces have the jurisdiction to investigate long-term care and nursing care facilities. New Brunswick has fallen behind in the oversight of investigating issues of concern to seniors and those living in nursing care facilities.

Recommendations :

- That the oversight to investigate without reprisals for seniors and long-term care facilities be the responsibility of the office of the Ombudsman with sufficient resources.
- That an advocate for seniors be established in the office of the Ombudsman as part of the Seniors Charter of Rights with a 1-800- SENIORS toll free line with sufficient resources to provide government information and services.

Charges for Long Term Care Facilities – Canada

Province/territory	Income	daily / monthly fees	Retain Personal Allowance	
British Columbia	Net income – as reported income tax return	Low income -\$932.00 min \$3,102.80 max per month \$82.82 per day. Short term stay \$31.06 per day. January 2011-2012	\$325.00	Coalition for Seniors' and Nursing Home Residents' Rights August 21, 2012 Note: see endnotes links for additional information.
Alberta	Income not applicable Veteran disability not included	Standard room :\$45.85 per day \$1,395: per month Semi-private: \$48.40 \$1,472; Private: \$55.90-\$1700 February 2011-2012	\$315.00 - handicap \$265.00	
Saskatchewan	Income tested - tax return Veteran Disability not included *pays standard resident charge plus 50% of the portion of income between \$1,194-\$2,962	\$1014.00 min - \$1,931 max per month \$34.71 min per day - \$64.37 max per day. April 1, 2012	\$216.00 - \$1096.00 depending on income.	
Manitoba	Net Income - tax assessment Veteran's Disability not included	\$32.50 - \$76.00 per day \$1007.50 - \$2356 max per month August 2012 – July 2013	\$288.00	
Ontario	Co-payment, subsidy available for basic accommodation Exceptional circumstance for low income Veteran's Disability Included	\$55.04 per day. basic \$1,674.14 per month Semi-private; \$63.04 -1917.47 Private room \$73.04 - \$2,221.64 Preferred accommodation additional \$9 for Semi-Private \$19.75 per day for private room July 1, 2012	\$132.00	
Quebec	Category of room /or person ability to pay. Liquid assets, property, monthly income, and family situation taken into account when unable to pay.	\$1,063.80 standard room; (three or more beds); \$1,431.00 semi-private (two beds); \$1,711.80 private room; January 2012	\$197.00	
New Brunswick	Total Income (family) Veteran's Disability linked to service related injury	\$101 per day July 1, 2012 July 2013, \$107, July 1, 2014 \$113 May 1, 2012	\$108.00	
Nova Scotia	Net income - tax return excludes GST and Veterans disability pensions	Nursing Homes \$99.00/day Residential Care \$61.00 / day Community based Options \$49.50 /day Respite \$31.00 per day November , 2011	\$235.00	
Prince Edward Island	Net annual income less \$26,500 may qualify for subsidy - Tax return required Veteran Disability not included	Manors & Private \$77.60 per day government subsidy. Net income \$30,000 or less qualify for subsidy January 2012	Subsidized residents only. \$103.00	
Newfoundland/ Labrador	Total income & liquid assets, individual keeps \$10,000 couples keeps \$20,000 liquid assets. Income over \$2800 used towards monthly rate.	\$2800 / month most residents subsidized paying average \$1000/ month towards the \$2800 April 2010	\$150.00.	
Yukon	All medical supplies and laundry covered	\$18.00 - \$21.00 per day	\$100.00	

References

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