

Claims and Facts About Home and Community Health Care in BC

In an undated page on its website, the BC Government lists what it has done to assist seniors:
http://www.gov.bc.ca/yourbc/seniors_care/sc_seniors.html?src=/seniors/sc_seniors.html

CCPA’s fact check of these claims is based on research from *An Uncertain Future for Seniors: BC’s Restructuring of Home & Community Health Care, 2001-2008*, by Marcy Cohen, Jeremy Tate & Jennifer Baumbusch, published April 15, 2009.

	BC Government website states:	CCPA fact check:
1	<p>The Province has created 11,314 new or replacement beds for residential care and assisted living since 2001.</p> <p><i>Note:</i> The province has also stated elsewhere that it has built 5,424 <i>net</i> residential care beds, assisted living and supportive housing units.</p>	<p>There is no public reporting of on the number of residential care making it unnecessarily difficult to accurately assess the net number of new beds built since 2001 (ie, the number of new beds after accounting for cuts/closures, and not counting replacement beds). We obtained bed numbers from both the BC Ministry of Health Services and from each of the health authorities via Freedom of Information requests. The health authorities reported significantly <i>fewer</i> beds than the Ministry.</p> <p>In order to reconcile the numbers, the study’s authors verified them facility-by-facility. We conclude that the health authority bed numbers are accurate, and that the province is over-counting beds.</p> <p>The Ministry’s bed numbers are artificially high because they include:</p> <ul style="list-style-type: none"> • Supportive housing units: should not be included because there is no care component – they are not “long-term care” or “residential care” by any accepted definition; and, • Beds were inaccurately reported and ineligible beds were counted: Ineligible beds include convalescent care, group homes, independent living units and mental health facilities. <p>For more information on over-counting, see page 25 and Appendix E on page 59, which lists every facility where a significant discrepancy in bed numbers was uncovered with detail about the Ministry’s error.</p> <p>Bottom line – the beds equation since 2001:</p> <ul style="list-style-type: none"> + The province has added 4,393 new assisted living beds; – There are 804 fewer residential care beds; = Correct net number of new beds added since 2001: 3,589. <p>Even assuming that assisted living is an adequate substitute for residential care (it is not), the province has fallen short of its 5,000 bed promise by 1,411 beds.</p> <p>Given increases in the number of seniors, the province should have built 6,815 net new beds by 2008 to meet the needs of an aging population.</p> <p>Replacement beds don’t add any new capacity to the system and should not be counted.</p> <p>For more detail, see pages 19 to 26.</p>

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2	Wait times to access residential care have decreased from one year in 2001 to 30-90 days today.	<p>The waitlist process is completely different than it was in 2001 and meaningful comparisons are impossible. In the past people could be waitlisted in anticipation that they might need care down the road, and admissions were based on how long a person had waited. Seniors also had some choice about their preferred placement.</p> <p>Now only individuals who require care within 3 months are eligible to be waitlisted at all. Admission is based on urgency of need. While the system allows selection of a preferred facility, if that facility does not have a vacancy the person must accept the “first available bed” in another facility and occupy it within 48 hours. If the first available bed is turned down, the person is removed from the priority access list.</p> <p>(For more on wait lists, see page 31.)</p> <p>Today there are 804 fewer residential care beds than there were in 2001. Access to residential care (defined as the number of beds per 1,000 seniors age 75+) has declined by 20.5% since 2001.</p>
3	Your B.C. Government added \$247 million to the home support/home care budget bringing the total to \$651 million this year – a 61 per cent increase since 2001.	<p>These numbers combine home support (personal care services such as bathing, help with medications, etc) with home care (home nursing and community rehabilitation). Combining these numbers hides more than it reveals.</p> <p>While funding for home care increased by 113 percent, funding for home support increased by only 34 percent. However, the number of seniors has grown rapidly since 2001 (15% increase in seniors aged 75-84 and 43% increase in seniors 85 and over).</p> <p>Access (defined as clients per 1,000 seniors 75+) to home support dropped by 30%. Access to home nursing dropped by 11%. Access to community rehab increased by 25% since 2001.</p> <p>BC has fallen well below the national average in terms of per capita spending on home health services. (See Table 12, page 40.)</p>
4	Your B.C. Government has increased funding for residential care and assisted living by almost \$440 million – a 37 per cent increase since 2001.	<p>This is correct.</p> <p>However, BC made the lowest per capita increases in overall health care funding of any province in Canada between 2001 and 2007.</p> <p>(See page 43)</p>
5	Sixty-three per cent of residential care clients pay the lowest daily rate for residential care – \$29.90/day – one of the lowest client rates in all of	<p>Most seniors in residential care are low-income, and therefore can’t afford to pay extra for services not provided by the care facility. At present many essential services such as wheel chairs, palliative care services, and rehabilitation services are not covered in most residential care facilities (see pages 32-37).</p> <p>The median income for seniors 65+ was \$21,113 in 2005.</p>

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	Canada.	
6	Approximately 72 per cent of all recipients of home support pay absolutely no charge at all.	Similarly, most home support recipients are low income. This means they cannot afford to pay privately for the basic services such as cleaning, meal preparation and transportation. Today, these services are much less likely to be provided by home support agencies and the health authorities than they were in the past, and home support services are increasingly focused on those with more complex needs (see pages 38-40).
7	The number of publicly subsidized hospice beds in B.C. has increased by 366 per cent, from 57 in 2001 to 266 today.	Still only 1 percent of the people dying each year have access to hospice care.
8	Health authority licensing officials, operating independently, monitor all seniors' facilities and inspect them on a regular basis to ensure they are held to high legislated standards.	Licensing does provide an important service. However the reports on facilities violations and substantiated complaints are not available to the public despite the fact that the Minister of Health promised to make them public more than a year ago now.
9	Your B.C. Government is committed to establishing a registry for residential care aides so that British Columbians will be confident that when a care aide is disciplined by one care facility, it's tracked and shows up if they attempt to work at another care facility.	Not covered by the research study.
10	By fall 2008, Patient Care Quality Review Boards will be established for all health authorities to provide a clear, consistent, timely and transparent	Not covered by the research study.

	BC Government website states:	CCPA fact check:
	process for patients to register complaints about care quality in the health system, including the residential care system.	
11	Your B.C. Government is establishing ActNowBC seniors community parks designed especially for seniors to help them stay mobile, physically active and healthy.	Not covered by the study.
12	\$70 million in funding provided for a study to determine effects of Alzheimer's medications on patients with dementia.	Not covered by the study.

Canadian Centre for Policy Alternatives

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