



# Navigating the Health System

ML Burke, Seniors Resource Coordinator

# CHOOSING TO AGE IN PLACE

Most seniors would like to remain in their homes for as long as possible. To do this, a clear plan needs to be in place.

- Have the Living Will conversation with your loved ones.
- Assess your home and property to age in place.
- Look at your finances and what care services you may need.
- Assess your social supports such as family, friends, co-op neighbours.
- Consider proximity to transit, shops, medical services and a hospital.

# FINANCIAL CONSIDERATIONS

- Can your co-op assist with necessary adaptations to your interior?
- Would you consider sharing your home with another co-op member?
- If your annual income is under \$30,000, you may be eligible for homecare services.
- You might rent to a student for a reduced rate in exchange for a little help in and around your home.

# IDENTIFY YOUR SOCIAL SUPPORTS

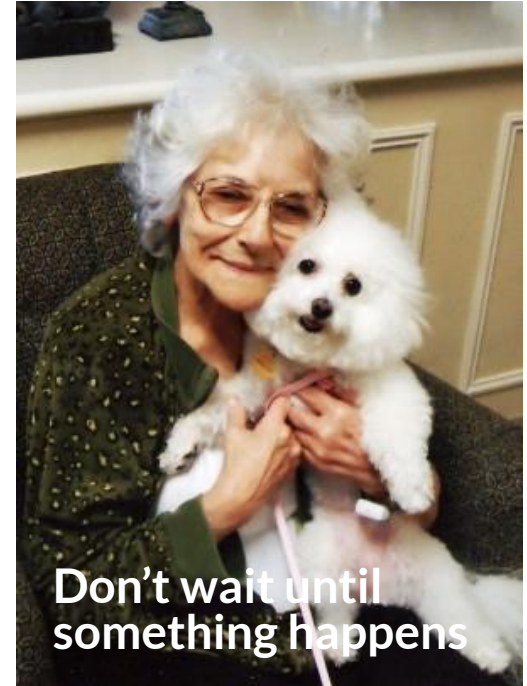


## People and Places / Getting Around

- The trouble with aging is losing those who go before us.
- Make sure you have access to transportation, medical services, food markets and other shops.
- Being isolated is bad for your health, especially your mental health.

# NAVIGATING THE HEALTH SYSTEM

- BC's Five Health Authorities all operate in similar ways. A Case Manager is the coordinator of your entire health care team, which includes doctors and other medical specialists.
- Case Managers (CMs) are assigned geographically by your home address.
- If discharged from hospital, a social worker will act as your case manager until your own CM is contacted.
- If you need homecare services, you or your advocate can call the local Health Authority to register with a Case Manager.



# BC'S HEALTH AUTHORITIES

## **Vancouver Island Health (VIHA)**

- Greater Victoria, Southern Gulf Islands, Central, North Island, West Coast

## **Northern Health (NHA)**

- Northeast, Northern Interior, Northwest, Haida Gwaii. From Atlin in the North to Quesnel and Valemont in the South

## **First Nations Health (FNHA)**

- Fraser Salish, Interior, Northern, Vancouver Coastal, Vancouver Island

## **Vancouver Coastal Health (VCH)**

- Vancouver, Richmond, North Shore, Sunshine Coast, Powell River, Coast Garibaldi, Sea-To-Sky, Bella Bella, Bella Coola

## **Fraser Health (FHA)**

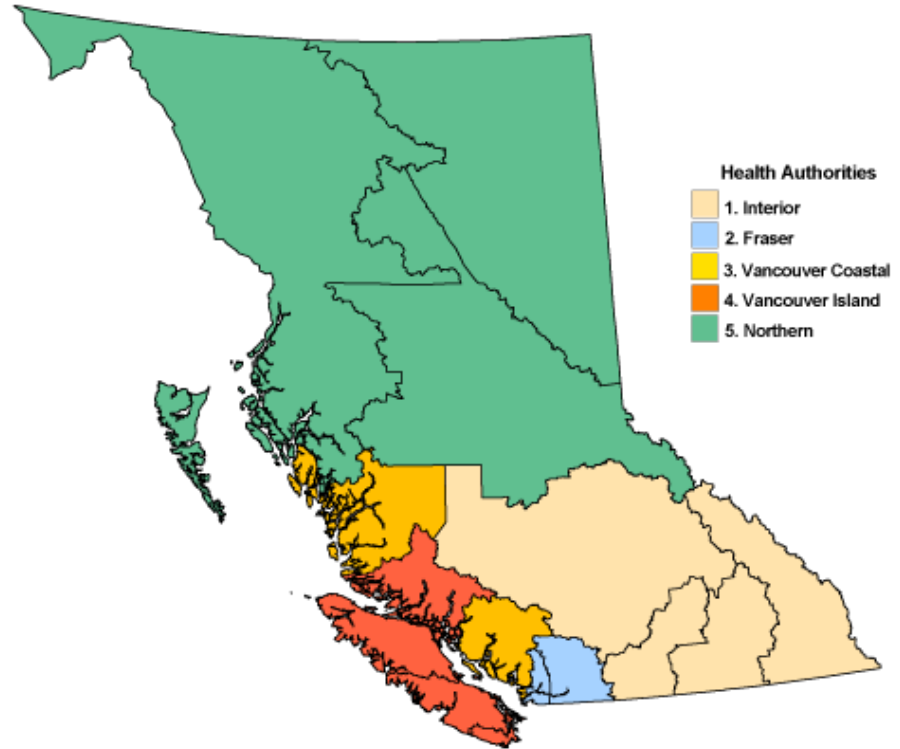
- Burnaby, Tri-Cities, Delta, Surrey, Langley, Maple Ridge, Fraser Valley

## **Interior Health (IH)**

- Okanagan, Kootenay-Boundary, Thompson-Cariboo-Shuswap

# BC's Five Health Authorities + One

The First Nations Health Authority operates in all five regions. It is a collaborative partnership between BC's First Nations communities and the BC Ministry of Health.



# VCH HOME SUPPORT (604) 675-3980

Home support services include:

- Personal care
- Safety
- End of life care
- Prevention of health decline
- Help with safe discharge from hospital

Personal care includes assistance with:

- Grooming and hygiene
- Bathing
- Mobility lifts and transfers
- Medications
- Nutritional assistance
- Family and caregiver respite.





# (POST-HOSPITAL) CONVALESCENT CARE

- If you are released from hospital with no supports at home, you may be referred to a convalescence center or recovery hospital.
- This service is not guaranteed as it depends on the availability of beds.
- If the patient is well enough and has a few days of live-in help at home, Home Care services can be ordered by the hospital social worker. This usually takes a few days to set-up.



# BETTER AT HOME – A SUBSIDIZED PROGRAM

**Better at Home** is a program that helps seniors with simple day-to-day non-medical tasks so they can continue to live independently at home and remain connected to their community.

- Services may include **light housekeeping, transportation, minor home repairs, friendly visiting, yard work.**
- If your annual income as a single senior is under \$30,000, the hourly rate is reduced based on a sliding scale.
- There may be waitlists.



United Way helping seniors  
remain independent.

# CISL

**CSIL (Choice in Supports for Independent Living)** is a self-managed care option where funds are provided to eligible clients to purchase and manage their own home support services.

## To qualify for CSIL funding you must:

- Be 19 years of age or older
- Be approved for Home Support services through your case manager
- Require daily personal assistance
- Be medically and functionally stable
- Be able to direct all aspects of your care, or have an alternate decision maker to do this for you
- Be able to direct and manage the CSIL contract obligations, or have an alternate decision maker to do this for you

The amount you receive is determined by your case manager.

# ASSISTED LIVING - PUBLIC



- Similar to living in a hotel with meals served in a dining room and weekly housekeeping provided.
- Health and recreation programs are offered. Some allow pets if the resident is able to look after them.
- Publicly funded A/L homes cost 70% of your net income. Private A/L homes are \$1,500 to \$7,000
- Eligibility for publicly funded A/L is determined by your Case Manager.
- There are wait lists.

# SPECIAL CARE OR MEMORY CARE

- Similar to Assisted Living within a secure environment.
- Full secure residential care is required which costs 80% of resident's Net Income.
- We need to create dementia villages for this 5 – 10 year progressive brain disease.



# RESIDENTIAL CARE

- **Long-term care** – for adults requiring 24-hour personal care and nursing services
- **Hospice, Palliative Care** – end of life care for the terminally ill, usually in a more home-like setting
- **Mental health and substance use** – for those who suffer from severe addictions and mental health issues
- **Community living** – rehabilitation services for adults with developmental disabilities
- **Acquired injury** – for adults who have sustained a brain injury



# WAIT LISTS – HOW LONG? HOW MUCH?

## *For Subsidized Assisted Living and Complex Residential Care*

- If your Case Manager determines you need more care your name will go onto the “**next appropriate available bed**” list. There could be a wait list from 2 weeks – 6 months, depending on the urgency of your needs.
- **When the call comes you must be ready to accept and move into that available bed within 24 – 48 hours.**
- **If you turn down the placement, your name will go to the bottom of the list or be removed from the priority wait list entirely.**
- If you accept a placement which is far away or not suitable, you can ask your CM for a transfer to a facility of your choosing when a bed becomes available.
- Private care homes are accessed directly and are less likely to have waitlists. Cost is \$1,500 - \$10,000. Some people start in private care while waiting for public care. The maximum charged in public care is \$3,240.

# ADVOCACY FOR SENIORS

- Isobel MacKenzie is the Seniors Advocate for BC. Her office reports to the Minister of Health but is independent of it. She looks at the **systemic issues** affecting seniors and makes recommendations. Many reports are on the website. [www.seniorsadvocatebc.ca](http://www.seniorsadvocatebc.ca)
- Jay Chalke is BC's Ombudsperson. This independent office responds to enquiries and complaints from **individuals** of all ages. The website has a large seniors section. [www.bcombudsperson.ca](http://www.bcombudsperson.ca)
- Public Guardian and Trustee: For individuals in need with no supports, public trustees take on management of their affairs. [www.trustee.bc.ca](http://www.trustee.bc.ca)
- Local municipal and non-profit service agencies like 411 Seniors, West End Seniors Network, etc., provide advocacy and counselling services.



