

Home Health Services

November 2016

Home health services is the umbrella term for “all professional and non-professional health services provided to individuals within their homes. This includes home support, home care and community rehabilitation services.”¹

In British Columbia (B.C.), home care typically refers to those services provided by professional nurses through health authorities, while home support typically refers to the non-medical services provided by community health workers.²

Background

There is consensus among government, advocates, healthcare professionals and researchers that shifting the focus of healthcare from the acute to the community setting is required. One of the key priorities to support this shift includes improving the accessibility and availability of home care and home support services for British Columbians. Accessible and available home care and home support allows for the management of chronic diseases, provides opportunities for health promotion, reduces the use of emergency departments, allows seniors to age in place, and ensures that high quality end-of-life care can be accessed within one’s home and community.³ However, many British Columbians are currently unable to access publicly subsidized home health services.

While home health services are provided to British Columbians with varying needs across the lifespan including those with developmental disabilities, neurological conditions, interventional type needs, and palliative care needs, seniors continue to be the largest group accessing home care services. Lack of access to home care and home support is an issue across B.C., as the senior population currently makes up 17.5% of the province’s population, and is projected to reach approximately a quarter of the B.C. population in 2036.⁴ While many B.C. seniors enjoy good health, cognitive and physical challenges do arise throughout the aging process, and greater access to home health services is essential in providing seniors with the opportunity to age actively and healthily within their homes and communities.⁵

Currently, eligibility criteria for publicly subsidized home care and home support continues to be strict, only allowing access to those with the highest level of need. As indicated by the Office of the Seniors Advocate, home support hours decreased in three of five health authorities between 2014/2015.⁶ While the Seniors Advocate reported an increase of 5.1% in home care services for clients over the age of 75 during 2014/2015, nursing recognizes that many British Columbians such as seniors with moderate level needs who require home health services are still not receiving the support they need. Nursing also knows that many individuals who require home care and home support are often going without, or incurring high costs through out-of-pocket payments, which negatively impacts their health and well-being.

1 Cohen, M., & Franko, J. (2015). *Living up to the promise: Addressing the high costs of underfunding and fragmentation in B.C.’s home support system*.

2 Barnes, S., Vogt, H., Bradbury, J., & Flanders, M. (2012). *The Best Of Care: Getting It Right for Seniors In British Columbia (Part 2) (Vol. 1)*

3 Canadian Home Care Association. (2015). *Home Care in Canada: Advancing Quality Improvement and Integrated Care*.

4 Office of the Seniors Advocate. (2015). *Seniors’ Housing in B.C.*

5 Cohen, M., & Franko, J. (2015). *Living up to the promise: Addressing the high costs of underfunding and fragmentation in B.C.’s home support system*.

6 Office of the Seniors Advocate. (2016). *Monitoring Seniors’ Services*.



Issues Brief

Nurses practicing within the community see the devastating effects of inadequate home care supports on a daily basis through their interactions with patients and family members. Nurses practicing in acute care also see these issues being translated into high numbers of alternate level of care (those residing in hospital due to a lack of home support and residential care) patients within hospitals.⁷

Increasing the accessibility and availability of home care supports for British Columbians will require better use of health human resources. Healthcare professionals should be utilized to their full scope, and the roles of other providers who have not historically provided home care must be further explored. As a member of the BC Coalition of Nursing Associations, ARNBC knows that both intra-professional and interprofessional collaboration is needed in order to improve all aspects of community health, such as home health services.

Key Messages:

- Home health services across B.C. are currently not meeting the needs of British Columbians.
- The senior population makes up the largest group of British Columbians who access home care services, and home health services across the province must be ready to meet the growing needs of this population – and this growing population.
- Inadequate home care and home support impacts the health and well-being of British Columbians when they are forced to prolong hospital stays, use emergency departments for non-emergent needs, and are placed into residential care prematurely.
- Nurses see the negative consequences of inadequate access to home care services across the continuum of care. They know that bridging existing gaps requires interprofessional collaboration, and that all healthcare providers must be utilized to their full scope.

Share your perspectives:

1. What innovative models outside of the publicly subsidized system can help bridge the existing gaps in home health services?
2. What solutions exist within nursing to bridge the current gaps in availability and accessibility of home health services?
3. What key stakeholders should ARNBC collaborate with?

Further Reading

- Canadian Nurses Association. (2016). [Community Health Care](#).

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⁷ Cohen, M. (2012). *Caring for B.C.'s aging population: Improving healthcare for all*. Canadian Centre for Policy Alternatives, B.C. Office.

