Direct Client Funding (DCF) Program: Ultimate Client Choice CHCA Summit 2011

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Healthiest people ~ Healthiest communities ~ Exceptional service

Outline

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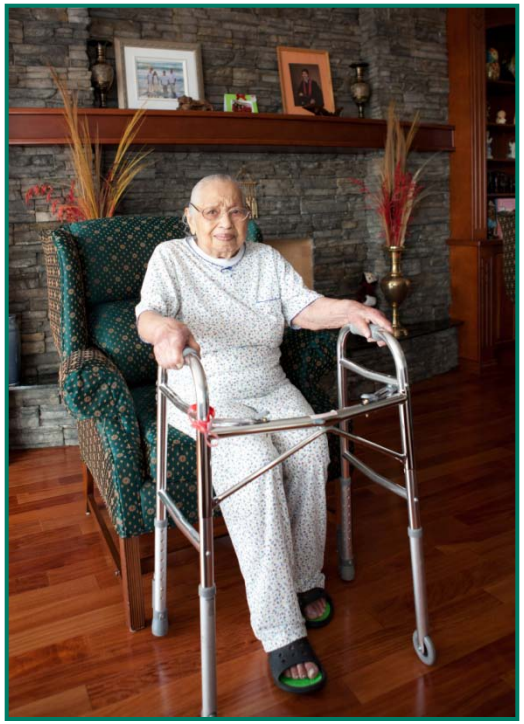
Client Stories

Program Background

- A two year pilot project; initiative of the Saskatoon Health Region Long Term Care task force
- Begun in October of 2009; currently extended until October 2012
- Provides funding and support to clients eligible for LTC placement to engage appropriate services so that their care needs can be maintained in the community



DCF Program – Ultimate Client Choice

DCF provides funding and support that allows people, even those with complex care needs, to be maintained in the community

DCF Program – Ultimate Client Choice

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Since November 2009, **total of 44 people** have been enrolled, from either acute care or LTC, into the community on DCF Program

Currently, **25 DCF clients** continue to be Long Term Care (LTC) eligible and are living in the community with supports their caregivers, SHR and private service providers

Program Objectives

- **Client-centered Service** ("Patient First")
- **Element of a Broader LTC Strategy**
  - Broadening of Alternatives to LTC Placement ("Menu of Options")
- **Address Acute and LTC Wait List Pressures**
  - Meet MoH target of reducing ALC days
  - Optimize Acute Care capacity (ALC, LOS) and LTC capacity
- **Reduce future capital expansion, operating costs**
  - Reduce LTC institutionalization rates
  - Defer capital construction of new beds
  - Reduce operational expenditures compared to traditional LTC

Key Success Factors

- **Flexibility – client choice**; client control
- **Ongoing monitoring & follow up** – intensive case management; ensures safety and care needs being met

  CPAS Coordination
  - Operating guidelines design, client assessment, service coordination, regular follow up ongoing monitoring for quality of care and safety of clients

  Community OT
  - Assessment in acute and again at home, for equipment and safety

  Home Care Nursing
  - client assessment; caregiver education
- Continuing Care and Seniors' Health
  - Vision, strategic direction, program design, resourcing and evaluation
- Finance
  - Quick turnaround with funds disbursement to clients for urgent access
- Tax Exempt
  - Funds received by clients are income tax exempt

Key Elements

- Supportive and available family
- Client or family member who is able to manage finances and provide or arrange for 24 hr supervision
- Desire of client and family to return to the community, to live in their own home
- Desire to pursue alternative to LTC placement
- Care needs that are manageable safely in the community, with DCF added support

Access Criteria

To qualify for DCF Program, an individual must

- Be a resident of Saskatchewan and reside in the City of Saskatoon or within 15 km of the city limits. Must have lived in Saskatoon for a minimum of one year
- Have a valid Saskatchewan Health Services number
- Meet Saskatoon Urban LTC criteria
- Be age 60 or older

Access Criteria *(cont'd)*

- Presently be waiting for LTC in an acute care bed in Saskatoon or be a resident of a Saskatoon LTC facility for a minimum of 3 months
- Not be eligible to receive, or be reimbursed for, services provided from any other person or agency
- Have cognitive ability or readily available support to manage funds for providing care
- Client or guardian must understand care needs and have a plan to meet them

Client Profile

Primary Diagnosis

Dementia – 9 of 34 (26 %)
CVA – 6 of 34 (18 %)
Cancer – 6 of 34 (18 %)
Diabetic complications – 4 of 34 (12 %)
CHF – 3 of 34 (7%)
Post polio complications – 1 of 34 (4%)
Osteoarthritis – 1 of 34 (3%)
ABI/haematoma – 1 of 34 (3%)
MS – 1 of 34 (3%)
Comp of a # – 1 of 34 (3%)
Vertigo/falls – 1 of 34 (3%)

Client Profile *(cont'd)*

27 females and 17 males have been placed on DCF

Average age: 80 yrs (as of May 25, 2011)

Of the 25 people currently on DCF :
~ 40% classified as an F
~ 16% classified as an E
~ 16% classified as an D
~ 28% classified as an C

Client Profile *(cont'd)*

Total of 19 Clients are no longer on DCF

- 9 clients died at home with support from family, Palliative Care Nursing or private services
- 6 clients died in hospital
- 4 clients admitted to LTC due to changed caregiver situations changed
- 1 client (age 92) improved, and is now supported with home care

What Funding is Available?

- Funding is based on the client's **level of care** and **income** as assessed by SHR's Client Patient Access Services (CPAS) Long Term Care Panel
- Payments are made monthly, directly to client from Saskatoon Health Region
- Funding must be used for the care of the client

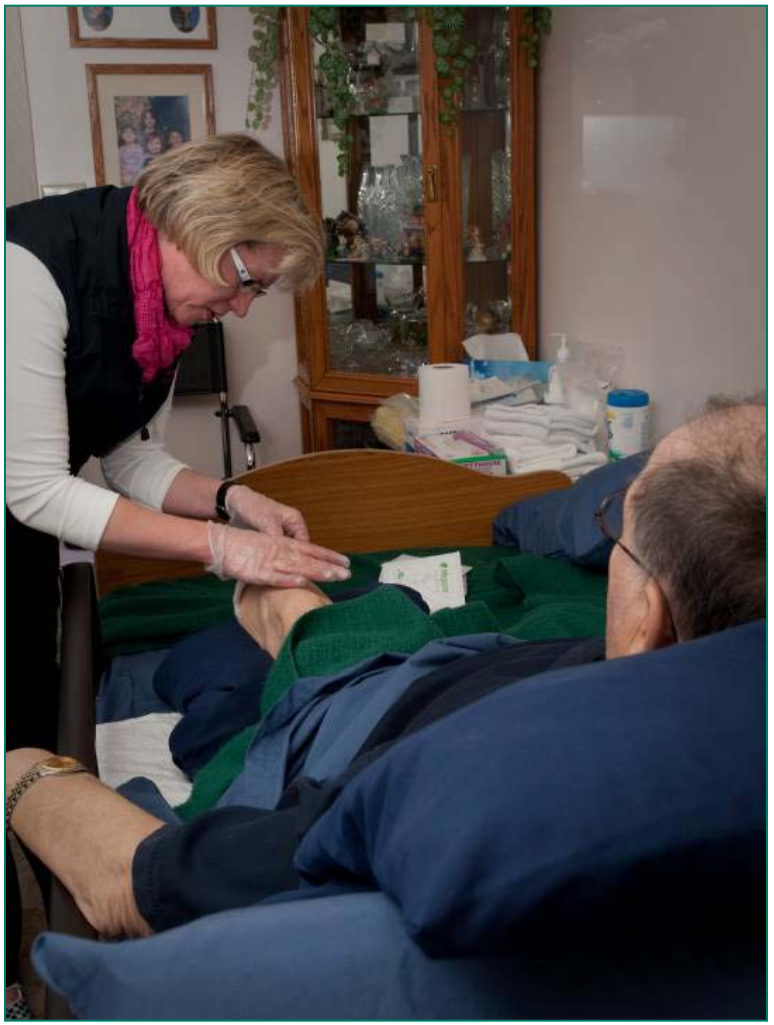
How can the funds be utilized?

- Funds can be used to hire services, including family members as caregivers, to meet the care needs of a Client
- Funds can also be used to augment private agencies fees such as a PCH, who agree to provide for the care needs of the Client, as outlined in the client's DCF care plan

DCF Program – Ultimate Client Choice

Families have utilized DCF funds to:

- Provide private nursing and personal care
- Supplement lost income of family members taking a leave from work
- Hire family members to provide care
- Supplement costs of additional care in a Personal Care Home



What type of Follow Up can DCF Client expect once they return to the community?

- The CPAS Coordinator will visit within 48 hrs of placement on DCF, and every 1-2 months to ensure safe and appropriate care of client, and that the caregiver is able to manage care

- If the caregiver is deemed as unable to manage, the client will be placed on the urgent list for LTC placement. The first bed offered must be accepted

What Resources/Supports are Available?

- Saskatoon Health Region Home Care Nursing is available on a 24 hr basis for consult
- Saskatoon Health Region Home Care Nursing is available for ongoing nursing services such as wound care, catheter changes, medication management and interventions requested by the family physician
- Community Services (Home Care Dietician, Occupational, Physical Therapy, Social Work) Set-up and Teaching

DCF Program – Ultimate Client Choice

Families are able to meet their loved ones end of life care needs in the comfort of their own homes and according to their wishes. They have the support of the Palliative Care Nursing team, private care and DCF.

Future Considerations

- Continuous improvement in partnership with clients, caregivers and clinicians/service providers
- Consultations with internal and external stakeholders
- Annual program evaluation, to ensure effectiveness and efficiencies
- Ongoing assessment of needs, appropriateness of program criteria, and potential for expansion
- Continued development of programs to meet future needs of aging population by balancing facility-based care with new and innovative, non-traditional program models ("Menu of Options")
- Dialogue at the national level: element of the national caregiver strategy?

Questions & Answers

Thank You!

For more information:

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