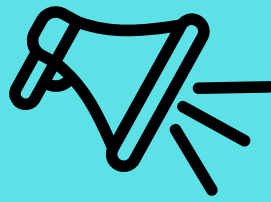


VOTE FOR IMPROVING QUALITY OF LIFE IN LONG TERM CARE



**Ask the 2024 Election Candidates
“What will you do to improve
Quality of Life in Long Term Care?”**

**COMMUNITY ENGAGEMENT
RESOURCE KIT
MARCH 2024**

Action for Reform of Residential Care BC (ARRCBC) is advocating for reform of BC’s long term care system. We are asking policy-makers and politicians how they intend to reverse decades of underfunding and improve quality of life for persons living in long term care.

With a provincial election on the horizon, we are making the following questions and scenarios available for use at candidate forums and town hall meetings, in letters to politicians and the media, and in any election conversations. If you have further suggestions, we’d love to hear from you so that we can make them available to everyone on our network. Suggestions can be emailed to arrcbc@shaw.ca



www.arrcbc.ca

1 a Staffing Numbers and Stats

- Many BC long-term care homes are experiencing difficulty recruiting and retaining staff. This means that residents are often cared for by casual staff members who do not know them well - who do not know their life story, preferences, fears and goals. Having a different caregiver every day negatively impacts quality of care and quality of life. More piece meal approaches to ongoing staffing issues are not the answer.
 - We often hear that long-term care homes are short staffed. For example in Every Voice Counts: Long Term Care Resident and Visitor Survey Results, the B.C. Seniors Advocate reported that 33% of LTC residents say they get help to eat when needed “sometimes”, “rarely” or “never”
 - If you moved into long-term care, would you be satisfied to only get a bath or shower once/week or less? 61% of residents surveyed indicated they receive a bath as often as they want only “sometimes”, “rarely” or “never” (49% “rarely” or “never”)
- Questions on Staffing**

1. We need a sustainable plan to enhance staff recruitment and retention in long-term care. What would you do to address the human resources crisis care facilities are currently experiencing?
2. What will you do to ensure public monies provided for care are only spent on care?
3. Do you support an increase in BC Staffing levels to meet the nationally recommended 4.1 hours of direct care/resident/day and what will you do to make this happen?
4. What will you do to add staffing for critical areas of personal care like bathing?

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1 b Staff Training and Education

- In the past, long-term care homes had budgets to fund the continuing education of their care staff and replace them while they were taking courses or were enrolled in workshops. Now, staff are usually expected to complete continuing education on their own time without remuneration or time off in lieu- therefore, education is not compulsory and is difficult for many staff to access.

Questions on Staff Training and Education

Would you support additional funding needed to help long-term care homes return to supporting education with scheduled replacement staffing to promote best practice in care?

1 c Staff Expertise

- Residents in long-term care can have wide-ranging medical, psychological and social needs, best met by access to a consistent team of specialized health care professionals. These include registered nurses, social workers, dietitians, occupational, physical, recreation therapists and speech language pathologists. Registered nurses are needed to provide leadership, mentoring and staff supervision and training for the care team. Physio and occupational therapists help residents to regain or maintain physical function. Without them, residents can lose their ability to walk or transfer soon after admission. Similarly, dietitians, social workers and recreation therapists each provide critical aspects of care expertise that lead to resident centered care plans that promote good quality of life for residents. Currently, there is no mandate for long-term care homes to provide these services, and some choose not to, in favour of profit. Others cannot recruit to these position because part-time roles may fail to attract candidates.

Questions on Staff Expertise

What changes would you support making to the current model of interdisciplinary staffing in long-term care to improve residents' access to essential specialized service and care?

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2 Recreation and Meaningful Activities

- In the B.C. Seniors Advocate’s 2023 survey, 61% of LTC residents say they had only “sometimes”, “rarely” or “never” participated in meaningful activities in the past week. A common complaint in long-term care is that life is lonely, boring, and the daily routine does not include meaningful activities or positive interactions with others.

Questions on Recreation and Meaningful Activities

1. Do you agree that opportunities to connect with others and to participate in meaningful activities are important for quality of life?
2. What will you do to address this serious obstacle to quality of life?

3 Food and Nutrition

- In 2023 the majority of residents surveyed by the B.C. Seniors Advocate reported that they “seldom”, “rarely” or “never” get to eat WHEN they want or WHAT they want.
- Most people who live or visit in long-term care would agree that meals are often not appetizing and, in some cases, lacking nutrition. In some facilities, food is still served in plastic containers, on hospital trays. In many care homes, there is no alternate choice if you don’t like the main entree.
- There is currently no mandated minimum budget allocations for food and funding for food is not protected from being spent on other aspects of business. As such, budgets for food in long-term care vary significantly throughout facilities in the province especially between profit-making and non-profit facilities. This large range in dollars spent does not reflect a commitment to ensure quality of care and quality of life.

Questions on Food and Nutrition

1. If you or a loved one was living in a long-term care home, would you find lack of access to foods when wanted acceptable? If not, what is your plan to change this situation?
2. Would you want your loved one to have to eat unappetizing food in an institutional, non-home like dining environment for the remainder of their life? What would you do to resolve this situation?
3. If elected, what would you do to improve accountability for a high quality, nutritionally adequate menu and mealtime experience for residents in care?

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**ARRCBC
ACTION FOR REFORM OF
RESIDENTIAL CARE BC**

4 Medications

- Despite international concern and as recently noted by the Seniors Advocate in her recent report, Every Voice Counts: Long-Term Care Resident and Visitor Survey Results 2023, use of antipsychotic and sedative medications is again increasing in B.C. long-term care homes. This is despite the fact that seniors with dementia or without a psychiatric diagnosis who take psychiatric drugs experience a high risk of adverse reactions. Medications may be used inappropriately to address resident's behaviours, instead of other more appropriate approaches that require an adequate number of trained staff. Additionally, it should be noted that B.C. is above the national average in prescribing these drugs to long-term care residents.

Questions on Medications

1. What will you do to address the inappropriate use of antipsychotic medications for persons living in long-term care?

5 Model of Care

- The current model of care in B.C. long-term care homes is institutional and dehumanizing. Activities of daily life that should be responsive to individual preferences are instead focused on facility routines and efficiency. This hospital-like approach must be replaced by a model of “relational” care - one that focusses on enabling residents to enjoy their lives, not just survive, and on quality of life, and that takes into account the special need of residents living with dementia. ARRCBC is asking the government to fund the adoption of a person-centred model of care and support long-term care homes to train their staff with its implementation.

Questions on Model of Care

1. Do you support implementing and funding a person-centred care model and how would you make it happen?

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6 Home- Like Environment and Quality of Life

- Isobel MacKenzie’s 2023 report states that “48% of LTC residents say their care home only “sometimes”, “rarely”, or “never” feels like home. this relates to issues such as lack of privacy, four bed rooms, little space for residents to visit with family, and restrictions against bringing in personal belongings and furniture.
- Many long-term care facilities do not provide easy and safe access to outdoor space.

Questions on Home- Like Environment and Quality of Life

1. Would you want to live out your last years in an institutional setting that looks and smells like a hospital? What is your plan to replace old buildings still serving as long-term care homes?
2. Is the reality of lack of easy and safe access to outdoor space acceptable? What steps will you take to change the situation?

7 Family as Partners

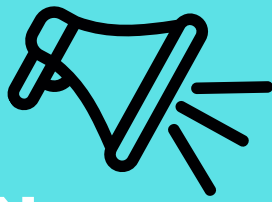
- The government has funded the recently established Independent Long-term Care Councils Association of BC (ILTCCABC) whose mission is to raise awareness about, and increase function of, resident and family councils in all B.C. long-term care homes. This group is expected to be a voice for residents and families working to resolve quality of life and quality of care issues in long-term care.

Questions on Family as Partners

What kind of support should the ILTCCABC expect from our government as they move forward?

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8 Accountability for Care

- In her recent report, *Billions More Reasons to Care: Contracted Long-Term Care-Funding Review Update*, the BC Seniors Advocate noted some concerning findings; specifically:
 - Not- for -profit facilities spent 25% more on resident direct care and 27% more on indirect care than for-profit facilities;
 - For-profit facilities spent 66% more per bed on building costs than not-for-profit facilities;
 - For-profit facilities earned 7 times as much profit as not-for-profit facilities; and
 - Not-for- profit facilities delivered 93,000 more hours of direct care than they were funded to deliver, and for-profits delivered 500,000 hours less than they were funded to deliver in 2021/22.

Question on Accountability

What will you do to ensure public monies provided for care are spent only on care?

9 System Planning

- Long term care funding has been eroding for at least twenty years. At the same time people with greater frailty and more complex care needs have been admitted to long term care homes. The working conditions of those providing care have deteriorated and staff members are more difficult to attract and retain. Concurrently, quality of care and quality of life have deteriorated. Piecemeal efforts have been made to address issues but a comprehensive plan to reform and adequately resource the long-term care system is needed.

Questions on System Planning

Would you support the development and funding of a comprehensive plan to reform the BC Long-term care system?

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