

EDGEWISE

Provincial government spending on residential care in BC fell from \$1.65 billion in 2002 to less than \$1 billion in 2012. Spending has recently rebounded to \$1.8 billion as the province makes new efforts to meet its 2009 benchmark of a minimum 3.36 hours of direct care per day to those in residential care. After eight years, that benchmark has yet to be reached in any of BC's five health authorities.

Cloutier supports an asset-based approach to providing care and services for people as they age—one that looks at facilities and communities in terms of their capabilities rather than their limitations, with quality of life a critical focus in the delivery of long-term care for frail populations.

A small study by Cloutier and others of six patients transitioning to a purpose-built dementia care unit at Royal Jubilee Hospital found that elements in a person's physical surroundings have a big impact on behaviour. Frequent pacing and "door-testing" by patients were significantly reduced for some (but not all) of those studied through important design features.

A caregiver information help sheet developed by Cloutier's research team assists those transitioning from home care into residential care. Three common phases are identified in this caregiver journey: recognizing changes; making decisions about relocation; and finding a new balance. See the help sheet at bit.ly/uvic-care-help

Watch Denise Cloutier talk about her work at bit.ly/uvic-cloutier



FEELING LIKE HOME

Cloutier at the Royal Jubilee Hospital Patient Care Centre. UVIC PHOTO SERVICES

It's time for more "heart-centred" approaches to residential care for older adults

by Jody Paterson

Research starts in the brain but works its way to the heart, says a University of Victoria health geographer whose studies of dementia and care across the lifespan have made her a passionate advocate for quality of life as people age.

"One of the wisdoms I hold is that communities that care for the most vulnerable persons are healthier for everyone who lives in them," says Denise Cloutier, whose research into how people experience life—and death—in long-term care is done in partnership with residents, families, health authorities and other academic researchers.

Health geographers like Cloutier specialize in exploring the impact of physical surroundings and communities on our lives and sense of well-being. Nobody dreams of spending their last years in a care facility, acknowledges Cloutier. But much could be done to increase the feeling of "home" in those facilities, which house almost a third of Canadians over age 85.

"So much of the residential-care system is focused on quality of care not quality of life, on tasks instead of time spent with residents,"

says Cloutier. "Personally, I think that having someone to talk to—to hold your hand, take you to social activities, help with meals—may be more important than other tasks."

The trend to contracting out food services is a perfect example, she says. It might make budgetary sense, but denies residents the familiar aromas of food cooking associated with "home."

Of the 22,000 British Columbians in residential care interviewed in a recent report from the BC Seniors Advocate last fall, Cloutier notes that only 57 per cent reported that their facilities felt like home. Forty-six per cent said no one living with them felt like a close friend. Fewer than half said staff had time for friendly conversations.

"We need to find ways to help care workers address issues of quality of life more fully, encouraging them in their daily work to make a real difference in the lives of older persons. Insufficient budgets and evaluating staff solely on tasks completed or number of medications handed out interfere with that goal," says Cloutier.

"Many staff go the extra mile every day to support quality of life for residents. But going

the extra mile for quality of life needs to be the goal every day not the exception. And staff need to be better supported in this aim."

As a professor in UVic's Department of Geography and Institute on Aging and Lifelong Health, Cloutier has researched the trajectories of urban and rural residents in long-term care; explored strategies for increasing hands-on care in facilities; and compared behavioural responses in people with dementia transitioning to new facilities.

Two current research projects are evaluating approaches to improve end-of-life care in residential care on Vancouver Island, and building capacity to promote healthy aging in the central Kootenay village of New Denver.

BC's health authorities, the Michael Smith Foundation, and the Canadian Institutes for Health Research are primary funders of Cloutier's work.

"With limited new resources, our approaches to healthy aging need to be much more strategic and creative in working toward real change," says Cloutier. "We've been talking about this for decades. The time is now for more heart-centred approaches to care."