

Making the Move to Long-term Care



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This booklet belongs to: _____

Together with our partners in long-term care across communities within Fraser Health, we commit to providing people with excellent care, comfort, and meaningful connection every day.

Hello

We know it can be both challenging and emotional to decide to make the move into long-term care.

You will likely have some questions about your new home, how you will be supported, and what care you can expect.

From first talking about moving to a care home to helping you get settled into your new home, we are here to work with you and support you every step of the way.

We believe a care home is both your home and your community. It should be a place where you get the care you need, make new friends, live your life to its fullest, and explore things that are of interest and value to you.

We hope this booklet gives you helpful information about long-term care and answers questions you might have.

If you are not sure about whether this is the right time for you to move to a care home, we invite you to talk with your care team either in the hospital or community.

Sincerely,

The Long-term Care and Assisted Living team

What is in the booklet?

Options for care	1
If you are in the hospital.....	1
If you are at home.....	1
About Long-Term Care	2
What is “long-term care”?	2
Who can live in long-term care?.....	2
What can I expect living in a care home?.....	3
What services are included in long-term care?	4
Who provides care in long-term care?	5
How much it costs	6
How much can I expect to pay?	6
Are there any other day to day costs?.....	6
How it works	7
What is the process to move into a care home?	7
What is the difference between a preferred and an interim care home?	8
What happens once I am offered a care home?	9
What if I don’t want to move to the offered care home?	10
What if I don’t want to stay in the care home I moved into?	10
What if my care needs change while waiting for my preferred care home?	10
Living in a care home	11
Who decides my plan for care?.....	11
Can I keep my family doctor?.....	11
What if I have special care needs?	11
What about meals?	12
How are my medications managed?	12
What if I need end-of-life care?	12
How can I stay involved in my care?	12
What if I have questions or concerns?	13
For more about long-term care	14
My Questions	15

Options for care

We know that most people want to live in their own homes for as long as possible. Our goal is to support people in their homes whenever possible.

If you are in the hospital

Your hospital care team and community health nurse will explore options with you and make sure you have the right supports and services in place so you can safely return home.

If your care needs change at home, let your community health nurse know so they can review your health and care needs.

If returning home to wait for a bed in long-term care is not the best option for you, we talk with you about next steps.

If you are at home

We want to make sure you have the choice to stay home if you wish. Even if your care team and community health nurse feel long-term care is the best option for you, you might still want to stay at home.

If you choose not to move to a care home, your care team works with you to make a plan to stay at home with support.

If we feel that staying home with supports is not the best option for you, your community health nurse will talk with you about next steps.

About Long-Term Care

What is “long-term care”?

Long-term care is available to adults who can no longer be cared for or care for themselves in their current home or living situation. It is for those people whose care needs are complex, who are struggling to manage their health and do every day activities, and who need access to 24-hour nursing care. Care homes offer care and support based on a person’s care needs in a safe and secure environment.

We have over 80 publicly-funded care homes within Fraser Health. All care homes in British Columbia are licensed and regulated by the Ministry of Health. They operate differently, are regulated differently, and have different resources than hospitals.

Examples of differences:

In hospitals	In care homes
Nurses provide direct care 24 hours a day.	Nurses oversee the personal care that staff provide each day.
Doctors and nurse practitioners are available 24 hours a day.	Doctors and nurse practitioners are on call and visit at least once every 3 months.
Patients can get intense therapy for rehabilitation and recovery.	Residents can get supportive therapy aimed at keeping them as active as possible.

Who can live in long-term care?

You might qualify for long-term care in these situations:

- Your care needs that are too complex or too unpredictable to safely live in your current home or living situation.
- You are currently getting home support services and your care needs are such that the number of allotted hours is not enough.

If your community health nurse believes you would benefit from being in long-term care, the nurse will start the process for this to happen.

What can I expect living in a care home?

It is a big decision to move into long-term care. It is more than just a change in your environment.

You can expect a home-like environment where you get nutritious meals, social activities, outings and events, staff on site 24 hours a day, support with personal care, and specialized care and services to those who need it, such as care at the end of life.

All rooms come with a bed and mattress, side table with drawers, a chair, and a place to keep clothing and other personal belongings. You will have either a private or shared room, depending on the care home.



Example of a room

You live in a community with others living there as your neighbours. Each area is called a neighbourhood. Some have a dining and lounge area in each neighbourhood. Others have a common area for dining and social activities.

Some care homes also have special neighbourhoods or services for specific care needs and staff need added support and training, such as for people with dementia or for people who need special equipment or medical support.

Sometimes, people with similar care needs are grouped together in a specific neighbourhood. This is to allow staff to provide more focused support and to enhance each person's experience.

What services are included in long-term care?

These are included when living in long-term care:

- personal care and help with every day activities as needed such as with bathing, dressing, and eating
- meals, options for special diets, meal replacements, and nutritional supplements
- planned social, physical, and recreational activities and outings
- common area(s) with cable, telephone, and internet services
- general personal care supplies such as soap, shampoo, and tissues
- bed linens and towels
- basic laundry services for linens and personal clothes
- routine medical supplies
- basic incontinence products if needed
- basic wheelchair if needed
- special mattress if needed

Some other services could be offered at an added cost.
See "How much it costs" on page 6.

Who provides care in long-term care?

Each care home has a care team. Your care team includes care aides, support workers, nurses, and a doctor or nurse practitioner. It might also include recreational therapists, dietitians, and other health professionals, depending on your care needs. Your care team works with you to make a plan of care to meet your needs.

Expect most of your daily care to be done by health care aides and other support workers assigned in your neighbourhood. Nurses oversee and monitor the care of all those living in the care home.

Many people wonder how they will get medical care when they move into a care home. All care homes have a group of medical professionals (medical doctors and nurse practitioners) who:

- specialize in caring for seniors
- regularly visit the care home
- provide medical care to everyone living in the care home

Some care homes have added care from these professionals at no added cost:

- physiotherapist
- occupational therapist
- social worker
- spiritual health practitioner

Other care services could be offered at an added cost.
See "How much it costs" on page 6.

How much it costs

How much can I expect to pay?

Long-term care charges a monthly fee. How much you pay depends on your “after-tax” income. To determine this, we will ask to see your recent tax return or bank statements. To allow us to do this, we will ask you to sign a form agreeing to it. If you are concerned that you might not be able to afford the monthly rate, we can talk with you about funding options.

Are there any other day to day costs?

Just like in your current home, there are other day to day costs. The care home lets you know what they offer and how much it costs. You decide what services you want.

Examples of care and other living costs:

Health care services	Other services
<ul style="list-style-type: none"> • foot care • mobile dentist • mobile hearing aid clinic • mobile optometrist • mobile walker and wheelchair tune-up 	<ul style="list-style-type: none"> • personal telephone, cable, and internet • hair dresser / barber • preferred meal replacement products and nutritional supplements • hearing aids, batteries, glasses, dentures • equipment such as a cane, walker, special wheelchair, special wheelchair cushion • extra recreational activities or supplies • companion services • transport for personal activities • decor for your personal space • dry cleaning and laundry for items needing special cleaning • preferred personal care and grooming supplies, bed linens, towels, preferred incontinence products (instead of general supplies provided)

How it works

What is the process to move into a care home?

Whether you are at home or in the hospital, the process is the same. First, your community health nurse assesses your care needs. This includes checking your mobility, memory and thinking, diet, and the amount of help you need each day to do every day activities such as dressing, bathing, and eating. Along with this, they review your income information in order to calculate your monthly rate. All of this helps us determine if long-term care is the right option for you.

If long-term care is the right option, your community health nurse submits the collected information for review so we can identify which care homes best meet your needs. When we identify care homes for you, we consider your health needs, your preferred area, along with a number of other factors.

We give you a list of care homes that can meet your care needs. You can select up to 3 care homes from the list as your preferred care home. The date that you give us your choices for preferred care homes is called your “waitlist date”. If you decline an offer for your preferred care home, this changes your “waitlist date”.

What is the difference between a preferred and an interim care home?

Whenever possible, we will try to offer you the opportunity to live in an area you want at a care home that meets your care needs. However, there are times when we ask people to consider an interim care home. This is a care home that can meet your care needs, but is not on your preferred list.

When interim care homes are used:

- Your care needs have changed and it is no longer safe for you to live in your current situation.
- You are waiting in the hospital or another facility and none of your preferred care homes have beds available.

Instead of selecting specific care homes, we would ask you to choose one or more geographic areas you would like to live in. We might offer you an interim home in one of those geographic areas until a bed comes available in one of your preferred care homes. We make sure that the interim care home is one that can meet your care needs.

Fraser Health Geographic Areas		
North	South	East
Burnaby	North Delta	Abbotsford
Coquitlam	Surrey	Agassiz
Maple Ridge	South Surrey	Aldergrove
New Westminster	South Delta	Chilliwack
Port Coquitlam	White Rock	Hope
Port Moody		Langley
		Mission

Once in an interim care home:

- You can choose to stay on the list for one of your preferred care homes. You can change your preferred care home list at any time.
- When a bed comes available in one of your preferred care homes, we let you know.
- If you like where you are, you can choose to make the interim care home your permanent home.

You are welcome to explore paying privately for home care or long-term care in either of these situations:

- You do not wish to move into in interim care home.
- You choose preferred care homes where there are no beds available.

What happens once I am offered a care home?

As soon as a bed is available, we notify you and your family.

It is our goal to help you get to your new home as quickly as possible so that you can benefit from all the services in long-term care.

Once you accept a bed

- We will ask you to move into the care home:
 - within 48 hours, for a bed in a preferred care home
 - within 72 hours, for a bed in an interim care home
- We ask you to agree to the move by signing a consent form. If you are not able to sign the form, we will ask the person assigned to be your substitute decision maker to sign it on your behalf.
- The care home team organizes your plan for care and medications.
- The hospital or community health nurse sets up a transfer date and time that works with the care home.

What if I don't want to move to the offered care home?

We want to make sure you have access to a caring, comfortable, and home-like environment as soon as possible.

If you choose not to move to the care home we offer, your care team works with you to make a plan to safely return you home or move to another interim care home. You can ask to remain on the waitlist for a bed in your preferred care home. You can also explore options for paying privately for a bed in one of your preferred care homes.

In some situations, we might ask you to pay the daily cost of care while you remain in the hospital or convalescent care unit.

What if I don't want to stay in the care home I moved into?

Speak with the director of the care home. Ask to be put on a waitlist to move to your preferred care home. In the meantime, the staff in the interim care home will continue to support your care.

What if my care needs change while waiting for my preferred care home?

Your community health nurse and care team regularly assesses your health and care needs. We check to make sure your preferred care home can give you the level of care you need. We might give you an updated list of care homes that will meet your needs. You then choose from the homes on the new list.

Living in a care home

Who decides my plan for care?

You do, with help from your care team. When you arrive, the care home staff will invite you and those important to you to take part in deciding your goals for care.

Each year afterwards, your care home has a care conference to review your plan for care. This is when your care team meets with you and those important to you. The doctor or nurse practitioner, the registered nurse, pharmacist, and other health professionals involved in your care attend the care conference. Together, you talk about your goals for care, advance care planning, and wishes for future care as your care needs change.

Can I keep my family doctor?

Yes. If you want to keep your family doctor, let the care home staff know so that your care is coordinated with your doctor. Your family doctor might not be able to offer the same type of after-hours service that the care home doctor or nurse practitioner can offer. With this in mind, we suggest the care home doctor or nurse practitioner coordinate your overall medical care. They can connect with your family doctor when needed.

What if I have special care needs?

Care home staff are trained to work with and care for people from diverse backgrounds. Care homes must hire staff who have the education and experience to care for older adults with various health needs, such as dementia, Alzheimer's disease, and other complex medical conditions.

What about meals?

Care homes work with dietitians to make a diet plan that is best suited to each person. Let the care home know if you have any food allergies, or need special food because of your health, religion, or culture.

Care homes can prepare nutritious meals and snacks that support a variety of diet needs, such as cut-up, minced, puree, and tube fed.

How are my medications managed?

The care home works with a local pharmacy to supply medications for each person. Before you move in, your existing prescriptions are faxed to the care home so they can arrange for the local pharmacy to have your medications there when you arrive. The pharmacy looks after refills of your medications and billing.

The nurses in the care home give your medications to you. The care home doctor or nurse practitioner, registered nurse, and pharmacist review your medications every 6 months, or more often if needed.

What if I need end-of-life care?

Care home staff are trained to support people who are nearing the end of their life with caring and compassion. Care home staff can provide physical, emotional, and spiritual support to you and those important to you.

How can I stay involved in my care?

Care home staff work with you and those important to you to offer the best care possible. We encourage you to go to the care home's director of care with suggestions for improving care.

What if I have questions or concerns?

- While in the hospital, speak with the community health nurse or the patient care coordinator for your hospital unit.
- At home and as a client of Home Health, speak with your community health nurse or call the Home Health Service Line at 1-855-412-2121.

For more about long-term care

Here are some online resources. Here we give you different ways to get to the resources: a web address, instructions to find the resource on the site, and a QR code to scan with a smart device's camera.

From Fraser Health

fraserhealth.ca

- [Assisted living and long-term care](#)
 - Under “Health topics” on our web site, choose either “A” or “L”. Scroll down to Assisted Living (A) or Long-term care (L). Select either to find “Assisted living and long-term care”.
 - Or use this shortened web address
tinyurl.com/FHAssistedLivingLongTermCare
- [Long-term care homes in Fraser Health](#)
 - Under “Locations and services” on our web site, select “Long-term care”. Scroll down to see the list of care homes and communities within Fraser Health area.
 - Or use this shortened web address
tinyurl.com/FHCareHomes



From the B.C. Ministry of Health

gov.bc.ca/gov/content/health

Start by selecting “Accessing health care”.

- [Long-term care options and costs](#)
 - Select “Home & Community Care”.
 - From the left sidebar, click on “Care Options and Cost”, then on “Long-term Care Services”.





www.fraserhealth.ca

This information does not replace the advice given to you by your healthcare provider.

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For more copies: patienteduc.fraserhealth.ca

