

Introduction

Island Health has one of Canada's largest and fastest growing senior populations per capita, with almost 25% of the population over the age of 65. Additionally, Island Health seniors are living longer. The average life expectancy ranges from 76.6 years in North Island to 84.8 years in the Saanich Peninsula.¹ While data specific to Island Health Indigenous people is not available, BC's average life expectancy for Status First Nations at birth is 73.4 years (2017).²



While most seniors are healthy, live independently and have little contact with the health care system beyond primary care, some may begin to experience health concerns affecting their level of activity and ability to live independently, particularly as they become more advanced in age. Older adults typically experience increasing needs for health services in the last years of life, and constitute the majority of long-term care placements and home care clients. Seniors are also notably affected by loneliness, anxiety, depression and substance use.

Health status throughout peoples' lives, and as they age, is closely linked to the Social Determinants of Health. Racism, prejudice and stigma experienced by Indigenous seniors, seniors of colour, lesbian, gay, bi-sexual, transgender, queer, two-spirited (LGBTQ2S+) seniors, seniors living with disabilities and seniors who are newer arrivals to Canada complicate access to care and services contribute to disparities in health status.

The COVID-19 pandemic has affected some older adults by increasing acute symptoms, prolonging chronic symptoms, and contributing to intensive care admission, hospitalization and fatalities. The pandemic has interrupted services and access to usual supports needed to maintain health and it is anticipated these direct and indirect threats to seniors' health will persist post COVID-19

¹ British Columbia Statistics Agency (2020) *PEOPLE 2020*. <https://bcstats.shinyapps.io/popProjApp/>

² First Nations Health Authority and Office of the Public Health Officer. 2020. https://www.fnha.ca/Documents/FNHA-PHO-First-Nations-Population-Health-and-Wellness-Agenda-Summary-of-Findings.pdf#search=population_pdf

Strategic Alignment

The British Columbia Ministry of Health sets strategic direction which guides health authorities, including Island Health, in priority setting. Service improvements and providing high-quality care for seniors is a key priority and deliverable by ensuring specialized programs for seniors with complex medical needs are available and accessible. Additionally, improving the general health and wellbeing of seniors living in the community is an important focus for health authorities. These areas align with Island Health's Strategic Framework, particularly with respect to the organizational goals of:

- Improving the Experience, Quality and Outcomes of Health and Care Services for Patients, Clients and Families; and,
- Improving the Health and Wellness of the Population.

Priority Strategies and Initiatives

Island Health's Seniors Health regional interdisciplinary team supports programs and services throughout Island Health in the community, outpatient settings, hospitals and long term care, to implement and sustain care transformation. This program applies a seniors' lens, increasing capacity through education, knowledge translation, practice support and resource development; addressing ageism through amplifying seniors' voices, sharing stories and providing data; and collaborating to support quality improvement and research.

Island Health's Seniors Health program is closely aligned with the Community Care strategic team and the Long Term Care program to ensure there is a comprehensive approach to meeting the needs of seniors' in Community and in Facilities.

Island Health's Seniors Health Strategy 2021-2026 identifies four areas building on seniors-focused work already underway across Island Health as key priorities:

- Meeting frailty, dementia and complex needs of seniors;
- Improving patient, caregiver and health care providers' experiences with service and service delivery;
- Ensuring Indigenous cultural safety; and,
- Addressing the COVID -19 impact on older adults.

These cross services continuum priorities are fully integrated with and are part of Island Health's priorities to specifically support:

- Seniors in Community
- Seniors in Emergency Departments, Acute Care and during Transitions of Care
- Seniors in Long Term Care facilities



Pages 9-11 outline specific strategies and initiatives Seniors Health, Community Health and Long Term Care will be accountable and responsible for moving forward and evaluating over the next five years with Island Health.

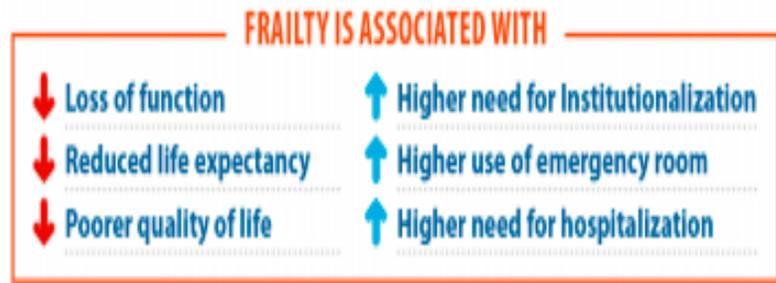
Frailty, Dementia and Complex Needs

This broad priority grouping incorporates frailty, falls, dementia, mental health and substance use in seniors. Each of these areas of care is complex, contributes to increased vulnerability, decreased function and decreased quality of life. These issues frequently overlap in the seniors' population and further complicate access to the best clinical practices in care across varying disciplines and services. Seniors Health will focus on promoting and supporting safe, competent, and consistent care for seniors with complex needs in order to reduce rapid and dramatic deterioration due to frailty.

Frailty: In Canada, 25% of the population aged 65 and older are considered clinically frail, and approximately 1 in 2 First Nations people over the age of 65 are living with frailty³. Living with frailty increases chances of hospitalization, falls, social isolation and loneliness and depression, increasing the likelihood a senior may require complex care and long term care in the future.

³ Canadian Frailty Network, <https://www.cfn-nce.ca/frailty-matters/>
<https://www.cfn-nce.ca/frailty-matters/indigenous-health/>

The early recognition, assessment and management of clinical frailty is key to prepare for future health care needs and to mitigate health care related harms to seniors.



Source: Canadian Frailty Network

Falls involving an injury can be a devastating event with abrupt consequences on seniors’ independence. Falls are the leading cause of injury related hospitalizations and deaths for BC Seniors⁴. Promoting fall reduction strategies and decreasing the impact of injuries reduces morbidity and mortality.



Dementia prevalence in Island Health for those aged 65+ is 6.4%, with rates increasing to almost 25% for those 85 years or over.⁵ The expected rapid growth in older age segments will dramatically impact the health system and families caring for these individuals. Island Health hospitalizations for patients with a primary or secondary diagnosis of dementia account for 10% of all acute care days, and 54% of all ‘Alternate Level of Care’ (ALC) days. Their average length of stay was 48 days, compared to only 8 days for the

average inpatient.⁶ Dementia in hospitalized patients is the greatest single contributor to ALC rates, but often overlooked in mitigating access and flow strategies.⁷ Ongoing efforts are required to prevent hospital admission for persons with dementia who do not present with acute illness and early diagnosis. Management of cognitive decline is key to improving clinical outcomes and the experience of persons with dementia and their caregivers.

In particular, enhanced supports are needed to better meet the care needs of seniors who live with responsive behaviours that may result from dementia.

⁴ B.C. Injury Research and Prevention Unit Injury Related Death Tool

⁵ BC Statistics Agency PEOPLE 2020, [Public Health Agency of Canada, Canadian Chronic Disease Surveillance System](#)

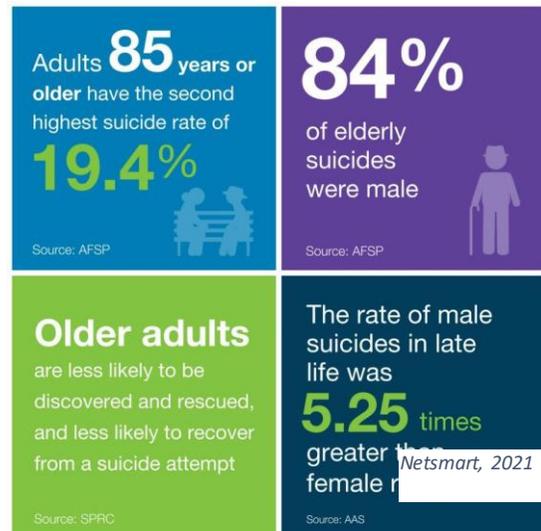
⁶ Discharge Abstract Database (DAD) via Island Health’s Enterprise Data Warehouse (EDW)

⁷ CGS JOURNAL OF CME Special Edition (Editorial) June 2021

Mental Health and Substance Use: Stigma and lack of awareness of specific age-related factors in the prevention, detection, assessment and treatment of mental illness and risky substance use in seniors negatively impacts access to appropriate care. Additionally, significant losses in later life such as declining health, dwindling independence, death of loved ones, and the feeling of being a burden to others can erode mental health and elevate suicide risk in seniors.⁸

Strengthening the care for persons with dementia and responsive behaviours involves increasing knowledge and skills of health care providers, supporting the use of the right tool at the right time, and committing to collaborative care across settings.

Increased awareness about seniors’ mental health includes early recognition and supportive interventions for anxiety, depression, risky alcohol/substance use and suicide risk. Interventions designed for younger age groups are often inappropriate for older adults.



Patient, Caregiver, and Health care Provider Experience

Ageism, the stereotyping, prejudice, and discrimination against people on the basis of their age, negatively impacts seniors’ access to services, quality of care, health outcomes, and positive patient experiences. Health care providers may be unaware of underlying negative attitudes (ageism) and how beliefs towards seniors may act as potential barriers to health equity. Increased awareness around ageism is one step to addressing systemic ageism in services.

Avoidable functional decline and harms associated with hospitalization . Hospitalization of older adults can contribute to irreversible decline in functional status which erodes quality of life and wellbeing after discharge. Readmission is a significant factor in poorer outcomes of rehabilitation after hospitalization and in mortality in the year following discharge. Early identification of seniors at high risk of adverse events within emergency departments and acute care settings will support reduced preventable hospitalization-associated disability.

⁸ Mental Health Commission of Canada, Centre for suicide prevention. 2019. Older Adults and Suicide Fact Sheet. [Fact Sheet](#)

Caregiver Resilience: Family caregivers are essential to sustaining the health care system, yet they often require additional resources or skills to cope with increasingly challenging demands. Key strategies include improved caregiver experience of the delivery of health care services by including caregivers as care partners, supporting resilience through building system competencies to support caregivers and developing an online hub to streamline access to information and resources.

Health Care Provider Experience: Seniors Health will focus on improving the experience of health care providers working with seniors with complex needs and responsive behaviours by developing education and strengthening team-based collaborative care. Implementing a **trauma informed approach** in seniors' care in all settings will further support improved experiences of patients, caregivers, and health care providers.⁹

Over the next five years, Seniors Health will focus on promoting healthy ageing and enhance the wellbeing and resilience of seniors, caregivers, and health care providers by partnering with and supporting Island Health sites with targeted strategies to improve services, programs, outcomes and experiences.

Trauma Informed Care

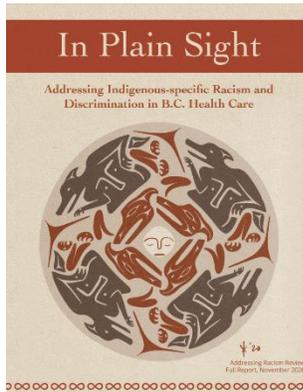
- ✓ Recognizes the prevalence and potential impacts of traumatic experiences on the lives of people accessing and working in health care
- ✓ Actively seeks to avoid re-traumatization in care interactions
- ✓ Can improve patient engagement, treatment adherence, health outcomes, and provider and staff wellbeing and resilience
- ✓ Critical when working with vulnerable populations, including seniors, who have had a disproportionate amount of exposure to trauma

Adapted from Trauma Informed Practice Guide, 2013

Indigenous Cultural Safety

Indigenous cultural safety. The Indigenous seniors population has complex health needs and faces multiple barriers and challenges to accessing health care due to poverty, cultural and linguistic differences, racism, discrimination and geography. In partnership with Indigenous Health, The First Nations Health Authority and others, Seniors Health will aim to develop strategies which address racism, promote equity oriented care, and improve health and wellness outcomes for Indigenous seniors.

⁹ British Columbia Ministry of Health. 2013. *Trauma-informed practice guide*. [BC Trauma Informed Practice Guide](#)



The 2020 report, *In Plain Sight, Addressing Indigenous-specific Racism and Discrimination in BC Health Care* gave evidence Indigenous Peoples encounter racism and do not feel safe when accessing health care.¹⁰ A key recommendation of the report is for health authorities to make progress with cultural safety at the point of care and foster cultural humility. Seniors Health is committed to seek guidance from Indigenous partners in supporting health care providers to deliver services to Indigenous seniors to improve the experience of safety, and support a shift of beliefs and behaviours towards cultural humility.

The Impact of COVID-19 on Seniors

The 2020 COVID-19 crisis has, and will continue to significantly and disproportionately impact seniors. The **psychological and social impacts** of the pandemic have been profound for seniors, and include an increase in social isolation, loneliness, anxiety and depression and has isolated seniors even more due to the measures taken to reduce the spread of the virus. In particular, in long-term care and congregate settings, visitation restrictions due to the pandemic have had negative effects on the well-being of residents and their caregivers.



Source: CBC

Seniors Health will support community partners to deliver programs designed to reduce loneliness, address other psychological and social consequences of the pandemic, and make appropriate informational and other resources accessible to seniors and community partners.

The **long term impacts** on health from COVID-19 will become more evident in the coming years. Chronic complications of COVID-19 infection, particularly in “long haulers” include a range of conditions that adversely impact health and wellbeing¹¹. Seniors Health will stay informed and respond by raising awareness and by supporting senior focused assessment and care planning. Seniors Health will work with Island

¹⁰ Mary Ellen Turpel-Lafond (2021) *In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care (Data Report)* [/In-Plain-Sight-Data-Report_Dec2020.pdf1 .pdf](#)

¹¹ Brain MR Spectroscopic Findings in 3 Consecutive Patients with COVID-19: Preliminary Observations
O. Rapalino, A. Weerasekera, S.J. Moum, K. Eikermann-Haerter, B.L. Edlow, D. Fischer, A. Torrado-Carvajal, M.L. Loggia, S.S. Mukerji, P.W. Schaefer, R.G. Gonzalez, M.H. Lev, E.-M. Ratai
American Journal of Neuroradiology Oct 2020, DOI: 10.3174/ajnr.A6877 <http://www.ajnr.org/content/early/2020/10/29/ajnr.A6877>

Health and community partners to develop new educational resources to keep pace with evolving knowledge.

Supporting Seniors in Community

Many services Island Health provides for seniors are delivered in people's homes, including in assisted living facilities. These services are aimed at supporting seniors to age-in-place at home, return home in a timely fashion from hospital admissions and delay admissions to long term care. Island Health Community Services include home support, professional services, respite programs, adult day programs, palliative end of life care and geriatric specialized services.



Opportunities exist to further improve services and programs for seniors to ensure services are accessible, age-appropriate and recognize seniors often have co-occurring medical conditions or frailty. Island Health has, and will continue to prioritize leveraging the use of technology to better support seniors in their homes through virtual care services. These virtual care services include telehealth, tele-visits, intensive home monitoring and home health monitoring. Island Health is implementing a regional remote patient monitoring team in Community Health Services which will offer an expanded scope of services to seniors from virtual visits through to virtual 'light touch' monitoring. This service, combined with the use of up to date technology, will better support seniors at home.



Supporting Seniors in Facilities

Home is often the best place for adults and seniors - even for those with complex needs. Being at home fosters optimal quality of life and promotes independence.

When health care needs increase or change, hospital or long term care facility care may be required. The COVID-19 pandemic exposed gaps in care and quality improvement opportunities in long term care across Canada. While seniors in long term care within Island Health did not experience the care crisis seen elsewhere, effective operational activities implemented in response to COVID-19 are informing Island Health's long term care strategy going forward. This includes priority focus on improving and monitoring the quality of care of seniors in facilities using standardized quality metrics.

Additionally, the long term care program has developed and is implementing a new cross organizational quality framework which standardizes the vision and understanding of quality, and partners with residents, families, operators and care providers to ensure quality is woven into every aspect of care. The Framework will ensure quality standards are set based on priorities outlined by key stakeholders (residents and families, care providers, administrators), reinforced by the Long-term Care Quality Council.

Finally, the long term care program is developing proposals for new long term care facilities in priority communities to improve access to dignified, quality and culturally appropriate care.

Hospitalizations are sometimes necessary for seniors. Seniors have additional risks in hospital, including a higher risk of infections, a greater rate of muscle loss due to increased time spent in bed, increased complications or serious, irreversible adverse effects from treatments or other iatrogenic causes, longer recovery times and declining function. Island Health is focused on avoiding unnecessary hospitalizations, reducing length of stay in hospitals and improving the quality of care in hospitals for the senior's population.

Seniors Health Priorities 2021-2026 Framework

| Focus Area: Frailty, Dementia, and Complex Needs | |
|---|--|
| Priorities | Key Strategies and Initiatives |
| Improve assessment and care planning for frailty | <ul style="list-style-type: none"> • Develop and support implementation of clinical practice guideline for frailty • Develop and evaluate clinical learning resources related to frailty • Support implementation of standardized tools for assessment of clinical frailty with a preliminary focus on acute care sites • Harness technology and virtual tools to further the assessment, monitoring and care planning of clinical frailty |
| Increase supports to seniors with complex medical conditions and/or frailty, mental health and substance use concerns and responsive behaviours | <ul style="list-style-type: none"> • Implement and evaluate a Community of Practice for Geriatric Specialty Service clinicians • Support the adoption of the appropriate use of restraints in acute care settings • Develop and evaluate online learning resources for mental health and substance use in seniors • Develop and evaluate a team-based program of learning for responsive behaviors |
| Improve timely dementia diagnosis and care | <ul style="list-style-type: none"> • Implement Primary Care Memory Service in Nanaimo and Urban Greater Victoria • Support cognitive engagement with seniors living with dementia when receiving care in acute care and community settings, harnessing technological applications in diagnosis and plan of care |

| | |
|--|---|
| Increase early identification and treatment for seniors with mental health and/or substance use concerns | <ul style="list-style-type: none"> Promote routine screening of anxiety and depression, trauma, and substance use in primary care Support dissemination and implementation of Canadian Coalition of Seniors Mental Health (CCSMH) 2019 National Substance Use Disorder Guidelines |
| Improve the recognition and response to suicide risk in seniors | <ul style="list-style-type: none"> Promote education and training on the prevention and assessment of suicide risk in seniors Adapt and update Practice Guidelines for community clinicians |
| Reduce the incidence of injuries related to falls | <ul style="list-style-type: none"> Monitor fall injury related incidents specific to seniors and frailty and work with leaders to address issues |

Focus Area: Patient, Caregiver, and Health care Provider Experience

| Priorities | Key Strategies and Initiatives |
|---|---|
| Prevent avoidable functional decline and hospital harms | <ul style="list-style-type: none"> Improve awareness and identification of delirium Promote the use of pre-hospital functional screening assessment and care planning in acute settings Reinforce best practices for responding to behavioural emergencies in acute care |
| Improve caregiver supports to sustain the client and family | <ul style="list-style-type: none"> Develop and promote dementia caregiver resources and education |
| Improve the understanding of ageism and its impact on the care of seniors amongst health care providers | <ul style="list-style-type: none"> Initiate and evaluate ageism awareness campaign with practice champions across the care continuum |
| Support the implementation of Trauma Informed Practice (TIP) in seniors' care | <ul style="list-style-type: none"> Develop and evaluate learning resources specific to seniors care Support integration of Trauma Informed principles into practice in acute care and Community Health Services settings |
| Promote Healthy Ageing | <ul style="list-style-type: none"> Develop healthy ageing resources on Seniors Health external website including: alcohol consumption, balanced nutrition, exercise, socialization, suicide prevention, and mental health promotion |
| Support improvements in documentation and communication affecting transition of care for seniors | <ul style="list-style-type: none"> Collaborate with partners to improve documentation and streamlining with the electronic health record that impact transitions of care for seniors in acute care and long term care settings |

Focus Area: Indigenous Cultural Safety

| Priorities | Key Strategies and Initiatives |
|---|--|
| Reduce the stigma and racism experienced by Indigenous and culturally diverse seniors in the health system by improving access and experience of care | <ul style="list-style-type: none"> Collaborate with, and seek guidance from Indigenous partners on initiatives that addresses racism and improve health and wellness outcomes for Indigenous seniors. Apply equity oriented care (harm reduction, trauma and violence informed care and cultural safety) in implementing staff safety tools affecting access and experience of care for indigenous seniors Promote appropriate use of clinical tools (e.g promote appropriate use of the Vancouver Island Coastal First Nations MoCA) |

| Focus Area: The Impact of COVID-19 on Seniors | |
|--|--|
| Priorities | Key Strategies and Initiatives |
| Bring attention to the psychosocial impact of COVID-19 on Seniors and Caregivers | <ul style="list-style-type: none"> • Provide resources on the Seniors Health external website to seniors and their families to support wellbeing and reduce isolation • Research and post relevant resources for health care providers and community partners. • Support community partners in their delivery of programming focused on mitigating the impact of loneliness amongst isolated seniors in the community. |
| Apply seniors lens to care for COVID “Long-Haul” patients | <ul style="list-style-type: none"> • Research, and as more information emerges, disseminate information and resources on the impacts of COVID-19 on seniors available to health care providers and community partners. • As new information emerges about the long-term effects of COVID-19, partner with Island Health and community members to adopt and ensure best practices in assessment, care planning and treatment of affected seniors. |
| Focus Area: Supporting Seniors in Community | |
| Priorities | Key Strategies and Initiatives |
| Improve home support services | <ul style="list-style-type: none"> • Redesign home support services to create one standardized hub service delivery model with standardized scheduling practices |
| Create seamless access to services | <ul style="list-style-type: none"> • Optimize community access centers to incorporate front door access to primary, community mental health and substance use services, and (geriatric) specialty services • Enhance the physician connector service to ensure linkages between community access and primary care providers |
| Responsive Clinical services | <ul style="list-style-type: none"> • Expand rapid response capabilities in CHS teams • Expand enhanced discharge teams • Expand core CHS services to support medically complex clients at home |
| Comprehensive Palliative, End of Life services | <ul style="list-style-type: none"> • Improve service access, quality and 24/7 responsiveness for community based palliative care • Support the development and operations of community hospice services • Support the improving the quality and delivery of MAID services in Island Health |
| Improved access to Adult Day programs and facility respite care | <ul style="list-style-type: none"> • Streamline booking processes • Expanded criteria Piercy respite hotel |
| Expanded Virtual Care services and hours | <ul style="list-style-type: none"> • Provide 7 day per services by regionalizing the virtual care team • Expand intensive home monitoring services to support early hospital discharges • Expand virtual services to include intensive diabetes monitoring, virtual palliative care support, frailty monitoring, caregiver supports |
| Optimized care in Assisted Living facilities | <ul style="list-style-type: none"> • Develop a quality framework and implement strategies to improve the delivery of services to seniors living in assisted living facilities |
| Improved transitions in care | <ul style="list-style-type: none"> • Implement the CHS I Health plan to ensure one client record |

| Focus Area: Supporting Seniors in Long Term Care Facilities | |
|--|---|
| Priorities | Key Strategies and Initiatives |
| <p>Improve the Quality of Care for seniors in long term care</p> | <p>Develop and implement the Quality Framework</p> <ul style="list-style-type: none"> • Report and address quality measures with focus on inappropriate use of anti-psychotic medication use, worsening pressure ulcers, bed turn around time and quality of life indicators • Expand the number of long term care facilities and beds in priority communities and Incorporate innovative multi-use options in all new long term care homes |