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## **Minutes – Seniors and Continuing Care Provincial Advisory Council**

Saturday, May 26<sup>th</sup>, 2018: 8:30 a.m. – 3:00 p.m. Acadia Room, Coast Edmonton Plaza – 10155 105 St NW, Edmonton

Sen	Seniors & Continuing Care Provincial Advisory Council										
$\mathbf{\nabla}$	Della Robertson	V	Gabrielle Kirk		R	Joan Monson	$\mathbf{\Sigma}$	Julie Kelndo	rfer 🗹	Ray Clark, CHAIR	
$\mathbf{\overline{\mathbf{A}}}$	Diahann Polege-Aulotte	V	Irene Pirie			$\mathbf{N}$	John Erkelens	V	Linda Grant	R	Susan Sommerfeldt
R	Fred Bosma	V	Jim Hubbard			R	Judy Long	R	Lou Hender	son 🗹	Teresa Willigar
AHS	AHS Permanent Resource Persons										
$\mathbf{N}$	David O'Brien	David O'Brien 🛛 🗹 Dennis Cleaver			$\mathbf{\Sigma}$	Jim Silvius, Dr.	Σ	Max Jajszczo	ok 🗹	Scott Fielding	
Pres	senters			AHS	;				Publi	С	
					Carol Anderson, ED Cont Care Edm Zone			2			
					Janine Sakatch, ED Community Engagement			nent			
	☐ Mary Mueller, Mgr Ad				eller, Mgr Advisory Counci	il Rel	atio				

## Minutes are DRAFT and subject to change and approval at next meeting of the Seniors & Continuing Care Provincial Advisory Council

	Agenda Item	Discussion	Action
1.	Approval of Agenda	ADDITIONS	Agenda approved
		<ul> <li>5.6 Discussion of SCC PAC Vice Chair – Ray Clark</li> </ul>	
		<ul> <li>5.7 Letter from Client – Diahann Polege-Aulotte</li> </ul>	
		• 5.8 Bouquets – SCC PAC All	
		Motion to approve Agenda with additions: John Erkelens	
		Motion seconded: Julie Kelndorfer	

	Agenda Item	Discussion	Action
		Motion carried	
2.	Quarterly Reports		
	2.1. Seniors Health SCN™	Overview of Seniors Health Strategic Clinical Network (SH SCN) activities provided by Dennis Cleaver, Executive Director Seniors Health SCN:Key initiatives:• Alberta Dementia Strategy• Appropriate use of antipsychotics (AUA) in long-term care (LTC) has reduced utilization to 17.3% (from 26.8%) with a goal of 15%• AUA in designated supportive living (DSL)• Dementia advice (within HealthLink)• Dementia/elder-friendly care (EFC)• Community Innovation grant for people impacted by dementia• Primary health care integrated community geriatric services• Clinical knowledge content management for clinical information system• Family violence (pan-SCN)• Continued support of SH research community• Capacity building for SH research• Continuation of funded research projects aligned with SCNs' platform areasNew in 2018:• Dementia/elder-friendly care in acute care provincial strategy 	Council members are encouraged to review the AHS Strategic Clinical Network pages at: https://www.albertahealthse rvices.ca/scns/scn.aspx

	Agend	la Item	Discussion	Action
			Question and answer time followed addressing queries around SH SCN involvement in elder abuse strategy; availability of provincial and federal support for dementia strategies and initiatives; technologies as support for seniors; and community-based coalitions to best support clients.	
	2.2.	Seniors Health Community Seniors Addiction Mental Health (CSAMH)	Addressed with Item 3.1	
3.	New	Business		
	3.1.	Enhancing Care in the Community - Overview	<ul> <li>Overview of CSAMH Seniors Health activities and Enhancing Care in the Community provided by Max Jajszczok, Executive Director Seniors Health:</li> <li><u>Seniors Health activities</u>: <ul> <li>Website redevelopment – easier navigation, improved interactivity and guidance; launch planned for fall 2018</li> <li>LGBTQ+ Seniors component</li> <li>AHS Apple magazine – SH fall issue committed for next three years</li> <li>Falls – often result in ED visit/transfer. Enhancing strategy including education for staff and patients/ families.</li> <li>Assessment at home – complete assessments at home rather than in acute care; shift culture thought of clients/ families; staff</li> <li>Integrated Housing &amp; Health Service Strategy &amp; Action Plan</li> </ul> </li> </ul>	
			<ul> <li>Continuing care in Indigenous communities – available at <a href="https://www.albertahealthservices.ca/cc/Page15700.aspx">https://www.albertahealthservices.ca/cc/Page15700.aspx</a></li> <li>Recording &amp; Surveillance policy/procedure – seeking assistance with materials review including consent component</li> <li>Sharing and disclosure of information – resource guide to clarify process of sharing client information</li> </ul>	

Agenda Item	Discussion	Action
	Bedded restorative care – framework developed allows clients to recover strength and function before returning home	
	<ul> <li>Medical equipment and supplies – complete current state assessment and develop recommendation for provincial approach to enhance timely service and equitable access that is fiscally responsible and sustainable</li> </ul>	
	Home Care development – basket of services and provincial consistency	
	<ul> <li>Case management – standard Case Manager profiles, education and activities; test and validate alternate case management structures and case load impacts</li> </ul>	
	<ul> <li>Home Care contract monitoring – increasing performance management and accountability of contracted home care operators</li> </ul>	
	<ul> <li>Self-managed care (SMC) – standardize provincial SMC practice across all AHS zones</li> </ul>	
	<ul> <li>Skin and wound – clinical wound care program to update/ create governance documents and resources to optimize outcomes and reduce costs</li> </ul>	
	<ul> <li>Provincial palliative/ end-of-life (PEOL) website – <u>https://www.albertahealthservices.ca/info/page14778.aspx;</u> <u>https://myhealth.alberta.ca/palliative-care</u></li> </ul>	
	<ul> <li>Advanced Care Planning/Goals of Care (ACP/GCD) – 'green sleeves'; AHS App links to information for home care providers as well as for individuals</li> </ul>	
	EMS PEOL Advanced Treat and Refer (ATR)	
	24/7 Palliative physician on-call	
	<ul> <li>Resource guide for community development of PEOL care (PEOLC) <u>https://www.albertahealthservices.ca/info/Page14904.aspx</u></li> </ul>	
	<ul> <li>Patients' death in the home: toolkits, guideline &amp; resources – for clients/ family, EMS, RCMP, etc.</li> </ul>	
	Bereavement program	
	PEOLC volunteer training and facilitator manuals	

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	Continuing Care Quality Plan	
	<ul> <li>Small sites quality improvement – investigating pilots/projects for small sites to improve model and outcomes; successful initiatives will be scaled and spread</li> </ul>	
	<ul> <li>Policy development – aligning legacy documents for provincial consistency</li> </ul>	
	Sexual misconduct review	
	<ul> <li>Resident Assessment Indicator (RAI) quality review – client assessment requires robust education and support tools</li> </ul>	
	Continuing Care Desktop (CCD)	
	Accreditation	
	Allied Health staffing in facility living	
	<ul> <li>Health technology implementation – integrate sustainable methods of providing health care utilizing technology, both existing and cutting-edge, for clients in continuing care (CC)</li> </ul>	
	Discussion followed around lack of hospice support in rural communities and activities underway to address (expansion of rural hospice [Olds model], and	
	augmentation of rural palliative in-home support via local resources where AHS cannot support).	
	Enhancing Care in the Community – overview of strategic goals and priorities	
	Stream One initiatives seek to improve ability to meet needs of clients in community through expansion of home care services, increase of community supports, and improvement of patient flow:	
	<ul> <li>Basket of services – investing to ensure all Albertans have access to home care services to meet assessed unmet clinical needs</li> </ul>	
	<ul> <li>Intensive home care – manage clients post-discharge to address short- term needs</li> </ul>	

Agenda Item	Discussion	Action
	<ul> <li>North Zone Adult Day Program (ADP) – program expansion to lessen social isolation and increase respite to reduce caregiver burnout</li> </ul>	
	<ul> <li>South Zone lodge home care funding – home care in lodge to address scheduled and unscheduled client needs</li> </ul>	
	Palliative home care expansion	
	<ul> <li>Complex care hub at Rockyview Hospital – provides alternative to hospital inpatient admission, case management, and collaboration with patients' health home</li> </ul>	
	<ul> <li>EMS community paramedic urgent/community response – maximizes scopes of practice to ATR without transfer to Emergency Department (ED)</li> </ul>	
	EMS ATR – now includes all continuing care facilities and home care	
	Home Assessment Framework	
	<ul> <li>Calgary Zone community-based alternate level of care (ALC) Unit – for clients waiting for placement who no longer require acute care</li> </ul>	
	<ul> <li>Edmonton Zone virtual hospital and integrated care teams – focuses on integrated care model for the most complex continuing care client users of acute care services</li> </ul>	
	Community hospice bed expansion	
	Calgary Zone rural in-home palliative care	
	Discussion followed including supports outside of AHS for clients seeking to remain at home (home modification, meals on wheels, home maintenance support, etc.); residential access modification program (RAMP)	
<b>3.2.</b> Priority Setting & Work Plan 2018	SCC PAC required to develop/ submit 2018/2019 Work Plan; goal for submission of completed/ approved document October 2018.	Crystal Stewart to circulate schedule of Health and
	Review of identified priorities from Orientation February 2018; review of DRAFT Addiction Mental Health Provincial Advisory Council 2018/2019 Work Plan as example/ guide.	Provincial Advisory Council meeting dates and support contact to Council membership.

Agenda It	em	Discussion				Action	
		Discussion followed including recommendation for SCC PAC focus on promotion of awareness through connection with Councils and geographically appropriate facility Resident Fa Call for volunteers for Work Plan Development Working Gro Aulotte, Teresa Willigar, John Erkelens and Linda Grant volu	AHS Health A mily Councils oup: Diahann	dvisory	for SCC PA	ewart to set C Work Plan ent Workin	n
Ор	3. Volunteer Opportunity Overview	Continuing Care Appeals Panel: Della Robertson, Ray Clark Integrated Housing & Health Services Strategy: Julie Kelndor Medical Equipment and Supplies: Julie Kelndorfer	Crystal Stewart will forward names of volunteers to appropriate working group contact.				
0.11	ture esentations	<ul> <li>SCN Overview &amp; Impacts – Tracy Wasylak</li> <li>Priority Setting Partnership – SH SCN</li> <li>Yourhealthsystem.ca demo – presenter TBD</li> <li>Minister/Deputy Minister of Health</li> </ul>			Crystal Stewart will add recommendations to Futur Presentations reference document		Future
5.5.	ce It: Elder Abuse appens	Gabrielle Kirk attended session <i>Face It: Elder Abuse Happens</i> <i>Practice, Taking Action</i> held 30 Apr-02 May at the Marriott a Edmonton with funding support from AHS SCC PAC discretic approved by Council via email 28 Feb 2018.	at River Cree	Resort in			
		Gabrielle provided an overview of the weekend and session statistics on elder abuse in Alberta and the unique challenge rural communities.					
Next Mee	ting	07/08 September 2018 Half Great Room, Sandman Hotel Calgary Airport (25 Hopew					
Adjournment		Motion to adjourn at 1610h: Della Robertson Motion seconded: John Erkelens Motion carried	Meeting a	Meeting adjourned at 1610			
Meeting E	valuation	MEETING EVALUATION 6 received of 10 possible	Excellent	Good	Average	Below Average	Poor
		Topics were related to the purpose of our Council	4	1			

Agenda Item	Discussion			Action						
	Topics were an effective use of time	4	1							
	Topics were enjoyable / interesting	4	1							
	Council member participation was	4	1							
	FEEDBACK		. I							
	What was the most valuable thing accomplished?									
	<ul> <li>had high-level intro's and then we got into r</li> <li>Having our first "real" Advisory Council mee our Council.</li> <li>Clarifying what the role of the council members</li> <li>For me, the information/question sessions so the Council.</li> <li>Information, connection, education.</li> <li>Networking with the most interesting people</li> <li>LOVED the exercise on coalition building.</li> <li>Very valuable discussions around work plan</li> </ul>	eting and feeling like bers are what is ex solidified what I shou e on this Council.	we are now get pected of me	-	-					
	What did you enjoy most at this meeting?									
	<ul> <li>Networking with the other PAC members ar covering the info (which was very complex)</li> <li>I really thought the discussion on ECC with t interesting and great engagement.</li> <li>Coalition building/Breakout discussion/Supp</li> <li>SCN Information. (2)</li> <li>Enhancing Care in the Community info.</li> </ul>	in an understandabl he 4 individuals arou	e but professior und supporting (	nal and enthusias	tic way.					
	What did you enjoy least or what would you change?									
	<ul> <li>Change the seating after the evening session so we can better know other members.</li> <li>Would love longer for presentation times so presenters can go slower and allow/encourage and provid opportunity for more discussion, questions and input.</li> </ul>									
	Other comments:									

Agenda Item	Discussion	Action	
	<ul> <li>I really appreciate the opportunity to sit on the Seniors PAC and look forwa learn my role. I also really appreciate the support to keep us organized and ask questions, clarification, etc.</li> <li>Enjoyed the sessions, the people (Council, support, presenters), the locatio</li> </ul>	provide a place/person for us to	
	<ul> <li>This will be a great Council and be very effective in dealing with seniors' iss</li> </ul>		
A great meeting!			