REPORT OF MAJOR PAN-CANADIAN HOME CARE SAFETY STUDY NOW AVAILABLE

One out of every six seniors receives home care services in Canada.

Home care is an integral component of the ongoing restructuring of healthcare in Canada. As the aging population continues to grow, there is a greater need to ensure the delivery of home care in Canada is safe. The Canadian Home Care Association (CHCA) estimates that 1.4 million Canadians received publicly funded home care services in 2011, which is an increase of 55% since 2008. Home care safety issues are only beginning to be addressed in healthcare, and it is imperative that they are better understood in order to develop policy and practice recommendations to effectively and efficiently address them. Keeping clients safe in their homes is a top priority.

The release of the Safety at Home: A Pan-Canadian Home Care Study is the first of its kind to examine adverse events in the home and includes recommendations on how to make care safer. Based on chart reviews and analysis of administrative data, the findings showed that the rate of adverse events in Canadian home care clients was 10 – 13 per cent, over a period of one year. Of these adverse events, over half were deemed preventable, the majority of which were falls, infections, or medication related incidents. It was determined that adverse events in home care happen because of: inconsistencies in the way care is planned and delivered, lack of integration within the homecare team and across sectors, and poor standardization of processes, of medication packaging, and of equipment.

Interviews with clients, caregivers and providers revealed a number of common issues:

1. The challenge of taking healthcare to a private home is not acknowledged;
2. System design issues force clients and caregivers to deal with a patchwork of services;
3. Unpaid caregivers must take on more and more responsibilities, while dealing with changes to their own health, lifestyle and role as caregiver;
4. Portable oxygen concentrators are rationed, leading to “rationed living,” especially for clients with chronic obstructive pulmonary disease (COPD);
5. Clients are “doing what it takes” to stay at home, sometimes hiding their needs for fear of being told they can no longer live independently; and
6. There is often serious decline of caregivers’ health, who are generally elderly spouses or retired children.
WHAT CAN BE DONE TO IMPROVE SAFETY AT HOME?

*The Safety at Home* study concluded with a set of recommendations to address the safety concerns that were identified.

**RECOMMENDATIONS**

**Organizations:**
- Offer unpaid caregivers training, ongoing support, counseling and health assessments;
- Implement policies and procedures to safely manage medication in the home care setting; and
- Assign to each home care client a cross-sector case manager with the authority and responsibility required to ensure the planning and delivery of a consistent quality of safe care.

**Policymakers:**
- Develop standard competencies for home support workers;
- Explore opportunities for increased collaboration between home care and institutional care;
- Build integrated, interdisciplinary healthcare teams, involving clients and their caregivers, to ensure continuity of care delivery across all healthcare sectors, with particular attention to clients discharged from hospital to home care;
- Implement a common electronic chart accessible by all caregivers from all sectors to standardize communication among disciplines and across sectors and expand the use of electronic reporting and communication tools;
- Lift restrictions on the supply of portable oxygen tanks for clients with chronic obstructive pulmonary disease (COPD); and
- Standardize medication packaging and equipment.

**Researchers:**
- Develop and pilot a national set of reportable adverse events with common definitions, forms, and processes; and
- Develop and standardize policies specific to the process and timing for risk assessments and encourage the use of tools that are presently available in Canada, such as the Resident Assessment Instrument and its Clinical Assessment Protocols to assess and mitigate the risk of an adverse event occurring.

The research team in collaboration with CPSI and national partners such as Canadian Home Care Association and Accreditation Canada will be developing tools and resources for various audiences including clients, caregivers, home care organizations, and policy makers. Watch for the launch of these tools on the CPSI website.

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