



Client-centred, community-based care for frail seniors.

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Author: Sherry Anne Chapman

Norah Keating

Jacque Eales

Author Affiliation: Department of Human Ecology, University of Alberta, Edmonton, Alberta, Canada.

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Abstract:

Compared with nursing home care, community care, which is often viewed in Canada as care at home, is assumed to be best for older adults with chronic disease or disabilities since it is seen as client-focused and less costly. As the number of frail seniors living in the community increases, governments in Canada seek to provide alternate models of nursing home care. As part of a larger initiative meant to increase the scope of community programmes, a demonstration project was conducted in western Canada to evaluate the implementation of client-centred, community-based residential care with individuals requiring nursing-home-level care. The present authors explore two main implementation challenges: whether care that is responsive to individual preferences can be provided to people who cannot assume active decision-making roles; and whether care can be centred in the community if people are living in residential care settings rather than in their own homes. Focus groups were conducted with two key stakeholder groups with varying informal (family members) and formal (programme staff) relationships with residents living in three new programmes. From content analysis, the programmes appeared successful in conveying the importance of recognising residents as individuals and of keeping them connected to the community, but fell short of implementation expectations. Three themes illustrate the challenges: (1) engaging with others in a care partnership; (2) responding to residents' preferences and care needs with limited resources; and (3) maintaining residents' connections with the community. To improve the feasibility of these programmes, some changes could be pursued within existing financial resources. However moderating the funding to bring it somewhat closer to nursing home levels could support the sustainability of community-situated programmes for frail seniors.

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