

# Introduction to Long-Term Care Handbook

Helping you make the  
best choice for your care



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# Is Long-Term Care the Right Choice for You?

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If you find that your daily care needs and health issues make it difficult to continue living in your home, it may be time for you to look at a safer alternative.

The decision to move into Long-Term care is very personal. It should be made after carefully reviewing your situation, your needs and your options.

The goal of this guide is to help answer your questions relating to Vancouver Coastal Health's (VCH) Long-Term care homes. The guide provides information on Long-Term care, and outlines the steps that you and your family need to take if you decide that Long-Term care is the best option for you.

If you have more questions after reading this guide, there is additional contact information at the back of the guide.



# What is Long-Term Care?

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You may know “Long-Term care” by a number of different names including nursing homes or retirement homes.

Long-Term care provides 24-hour professional care in a supportive environment. Trained staff assists with personal care and daily living activities, such as bathing, dressing and managing medications. Long-Term care also offers a variety of therapeutic and recreational activities. While services such as meals, laundry and housekeeping are provided for you, every effort is made to help maintain your independence. The goal of VCH is to provide a high level of clinical care in a person-centered manner.

All homes in British Columbia meet provincial quality standards and have been granted a license under either the Provincial Community Care Facilities Licensing Act or Provincial Hospital Act. They are also required to meet health, safety and fire regulations, and building codes.

## Homes fall into three categories:

- **Homes directly operated by VCH.** These are partially subsidized by the government. Additional details relating to cost are covered in the next section.
- **Homes operated by providers that have a contract with VCH.** These are supported, but not directly operated, by VCH. Most of these rooms are partially subsidized by the government, but some homes also offer private pay rooms. Private pay rooms are not subsidized, which means that all costs are covered by the resident.
- **Homes that aren’t connected with VCH.** These homes only have private pay rooms.

Because private pay homes are not connected with VCH, you need to contact these sites directly regarding information relating to their costs and services.

# How Much Does Long-Term Care Cost?

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There are two types of costs associated with living in Long-Term care: the accommodation and typical living costs.

## Rate Setting

In subsidized Long-Term care homes, the government pays for the costs directly related to your medical care, such as nurses. However, you are responsible for paying an accommodation fee towards food and room costs based on your annual income as reported on your tax return. This fee changes every year and is paid monthly. The case manager or hospital team will advise you of the monthly rate after they have completed your assessment.

When you apply, you must sign a consent form allowing the government to check your income each year with Canada Revenue Agency. If you do not sign the form, you will automatically be charged the highest rate.

You may qualify for subsidized Long-Term care if you:

- Have complex care needs and are not managing at home, even though you are using all the community resources that would provide safe care in your home or in a supportive environment;
- Require 24-hour supervision and continuous professional care;
- Need Long-Term care immediately;
- Are 19 years of age or older;
- Meet citizenship and British Columbia residency requirements.

**Only a case manager, hospital discharge or transition services coordinator can help you find out if you qualify for subsidized Long-Term care. Please see page 12 for additional contact information.**



## Typical Living Costs

There are other day-to-day costs just like those you have in your current home, which the home will charge you. The home is responsible for letting you know about these additional charges, which are different for each home. Depending on the home, these costs may include:

- Telephone, television cable or Internet charges;
- Personal hygiene and grooming products;
- Medications not covered by Pharmacare;
- Personal needs such as dry-cleaning, haircuts, and newspapers;
- Equipment or aids such as hearing aids, walkers, and wheelchairs not covered by Medicare or other benefits;
- Any health care services including optometry, podiatry (foot doctor), physiotherapy, occupational therapy, dentistry, and ambulance fees not covered by Medicare or other benefits;
- You may also be charged for services such as labelling of personal clothing.

Most homes welcome your guests for meals, and charge a fee for this service. Many also charge fees for special events or outings, such as drinks at “pub nights” or bus outings. The home will provide information about any extra costs.



# How Do I Begin the Process?

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## If You Live At Home

If you live at home, **your first step** is to contact Central Intake at 604-263-7377 if you live in Vancouver, 604-983-6740 on the North Shore, 604-278-3361 in Richmond, or 604-485-3310 in Powell River/Sunshine Coast to have request a case manager be assigned to you. The case manager will do an assessment to see if you need support at home, in a supportive living arrangement or in a Long-Term care home. The assessment is based on your physical and mental health, your ability to care for yourself, and information from you and your doctor. The case manager will explain your options, answer questions and connect you with the right people. If you need Long-Term care, your case manager will provide you with information so that you can make an informed choice to consent to admission to the care home. See further information below in the section “What Priority Access Means for You”.

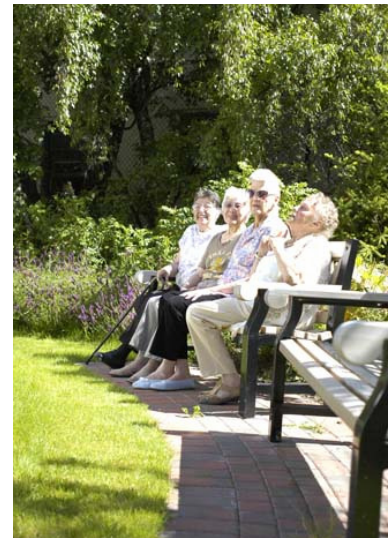
The case manager may decide, based on the assessment, that Long-Term care is not the best option for you or you may not be eligible. If this happens, there are other services available to support you, including home support services, adult day centres, respite care, and supportive housing. Your case manager will help you access these community support services.

## If You Are In The Hospital

When you no longer need the level of care that a hospital provides, the hospital team will have a care conference to help you plan your living arrangements after discharge. If Long-Term care is the best option for you, the team will complete an assessment and seek your consent. You will then be registered for Long-Term care.

## What Priority Access Means For You

In British Columbia, Long-Term care access is based on you choosing up to 3 preferred care homes. The length of waitlists is variable between homes and you may be offered a place in home that is not one of your preferred homes. You can choose to accept this interim home and continue to wait for one of your preferred homes from the interim home or you can choose to not accept this interim offer and continue to wait for one of your preferred care homes from home. This can be discussed with the case manager or, once in the home, with the home’s director of care, Long-Term care coordinator, social worker or care home consultant.



# How Do I Decide Which Home is Best For Me?

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Because every person has different needs and interests, it is important to research the homes before choosing the best one for you. Some of the things to consider include the location of the home, language spoken at the home, and programs and therapeutic activities offered. At the back of this guide, there is a list of suggested questions that you may want to ask when looking at different homes.

When you meet with your case manager, it is important that you discuss what you are looking for in a new home as it will help them better meet your needs. Not all homes may be able to meet your needs so it will be important that your selection of preferred homes can all meet your care needs. Your case manager, social worker or care home consultant will be able to provide you with more details about the services available in the care homes. Virtual tours of the care homes are available on our website. Once you have narrowed the selection, it is also a good idea for you and/or someone you trust to visit the homes that you are interested in. Homes ask that you phone ahead and book a tour, so that staff can be available to show you around and answer your questions.

Finally, individual care homes have information brochures and websites.



# What Are My Next Steps?

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## Before You Move In

When a room in a preferred care home is offered, it is expected that you will move in immediately, usually within 48 hours. If an interim home is offered, you will have up to 72 hours to decide. Because of this, it is important that you prepare in advance for the move. Some of the things that you may want to do include:

- Confirm whether your doctor will continue to provide medical care after the move or, if not, ask for a referral for another physician;
- Talk about your future wishes for medical treatment with your family and doctor;
- Review your eligibility for available benefits, such as Guaranteed Income Supplement;
- Make a list of places that will need a change of address notification, including the post office, British Columbia Medical Services Plan, bank and credit care, insurance company, magazines and newspapers;
- Arrange for friends, family, volunteers or an agency to help with packing and moving;
- Decide what personal items you would like to bring with you to the home (this may be limited due to the physical space in the home);
- Plan your budget to include the costs of Long-Term care accommodation and additional costs, such as cable, newspapers and telephone.



## Moving In – From Your Home

When a room becomes available, your case manager will call you or your contact person to offer you a room and inform you of your expected move-in date (within 48 hours for a preferred care home and within 72 hours for an interim care home. The home will also contact you to discuss when to arrive, what you should bring, your transportation arrangements, and who should come to help with moving in.

The move may be stressful, but there are steps that you can take to help ensure a smoother transition. A checklist is provided at the end of the guide that will help you keep track of helpful information. Please contact your case manager, or the home's director of care, Long-Term care coordinator or social worker if you have questions or concerns.

## Moving In – From the Hospital

If you are moving to a home from the hospital, your hospital team will work with you, your family and the home to make the arrangements for your move.



## **Becoming Comfortable In Your New Home**

Any move to a new home can be stressful. It takes time to become comfortable with your new surroundings and familiar with the people living in your new community. Support from your family and friends is very important during this time. Homes encourage your family and friends to visit, participate in activities and outings with you, and will often host events where everyone can attend.

Some suggestions for ensuring an easier transition include participating in recreational activities as this will give you the opportunity to interact with the residents and make new friends; asking the staff to take you on a tour of your new home as this will give you the chance to find out where everything is located; bringing mementos, pictures and other comforts to make your new home comfortable and familiar; and asking for the home's resident handbook, which provides information on the home, including programs and services.

Most homes hold a care conference six to eight weeks after you have moved into the home. You and your family are usually invited. At this meeting, the plan for your care is reviewed and your concerns may be discussed. The care planning process also involves discussing your specific requests for treatment, such as life support, and other important issues, such as identifying someone who can speak on your behalf if you are unable to do so. Please speak with your care team.

Your new home will offer programs and support to help during this transition time. Discuss your needs and concerns with the staff so that they are aware of how you are doing and how they can better support you. In Vancouver, each home has a care home consultant who can work closely with you.

# How Do I Transfer to a Preferred Home?

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Every effort will be made to offer you a room in one of your preferred care homes, however sometimes a room will become available in a care home that is not one of your preferred homes. If this happens, you will remain on the waitlists for your preferred care homes.

Since your needs may change while you are waiting to transfer, your care team will always verify that your preferred care home can provide the level of care you need. If your care needs have changed, your care team will help to find alternate care homes that can meet your needs. When an appropriate vacancy comes up at your preferred care home you can accept the transfer or you may decide that you want to stay where you are.

The amount of time before you can move will depend on the number of other people who are also waiting to transfer to that home. You may change your mind at any time if you want to stay at your current home.



# Do You Have More Questions?

To find out more information about Long-Term care, please visit our website at [www.vch.ca](http://www.vch.ca) and follow the Long-Term Care links. Also, don't hesitate to contact the following professionals:

- In the community: your Home Health Office

COMMUNITY	PHONE NUMBER
Bella Bella	250-957-2308
Bella Coola	250-799-5339
Gibsons	604-741-0726
North Vancouver	604-983-6700
Pemberton	604-815-6859
Powell River	604-485-3310
Richmond	604-675-3644
Sechelt	604-741-0726
Squamish	604-815-6859
Vancouver	604-263-7377
West Vancouver	604-983-6700
Whistler	604-815-6859

- If you are in a Long-Term care home, contact the director of care, care home consultant, social worker or Long-Term care coordinator.
- If you are in the hospital, contact your hospital team or discharge planner.

## Other Resources

The Ministry of Health:

*Choosing a Care Home or Home*  
[https://www2.gov.bc.ca/gov/pdf/choosing\\_a\\_residential\\_care\\_home](https://www2.gov.bc.ca/gov/pdf/choosing_a_residential_care_home)

*Home and Community Care Guide*  
[https://www.health.gov.bc.ca/Guide\\_to\\_Your\\_Care\\_Booklet2007\\_Final](https://www.health.gov.bc.ca/Guide_to_Your_Care_Booklet2007_Final)

Alzheimer Society of BC  
[www.alzheimer.ca/en/bc](http://www.alzheimer.ca/en/bc)  
604-681-6530 or 1-800-667-3742

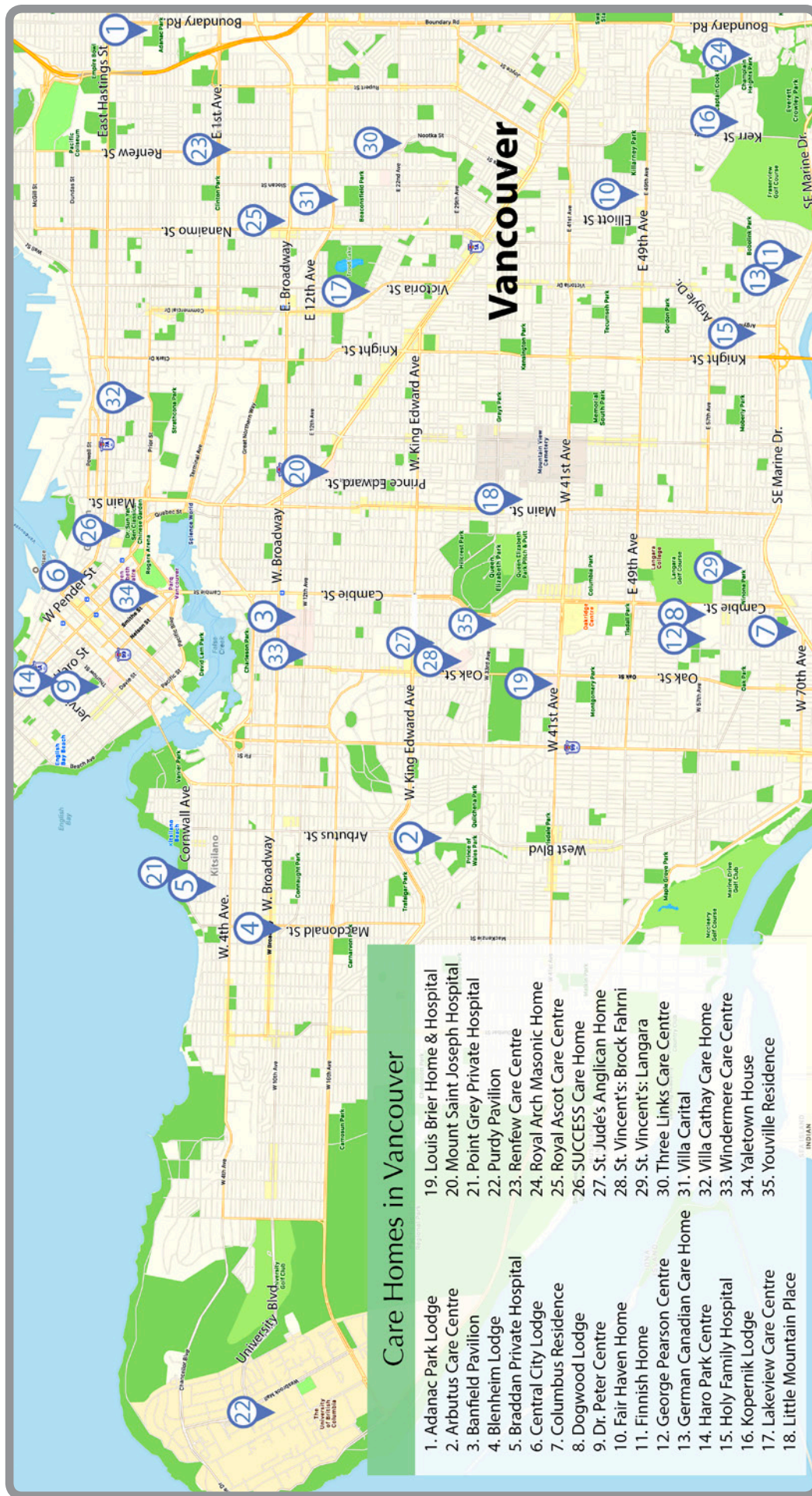
Canadian Mental Health Association, BC Division  
[www.cmha.bc.ca](http://www.cmha.bc.ca)  
604-688-3234 or 1-800-555-8222

Parkinson Society of BC  
[www.parkinson.bc.ca](http://www.parkinson.bc.ca)  
604-662-3240 or 1-800-668-3330

Canadian Cancer Society, BC Division  
<http://www.cancer.ca/en/?region=bc>  
604-872-4400 or 1-888-939-3333

Heart and Stroke Foundation  
[www.heartandstroke.ca](http://www.heartandstroke.ca)  
1-888-473-4636





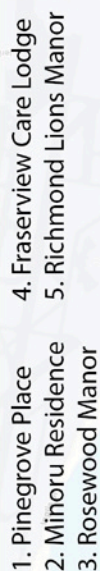


## Care Homes on North Shore / Coast Garibaldi

1. West Vancouver Care Centre
2. Inglewood Care Centre
3. Capilano Care Centre
4. Evergreen House
5. Lynn Valley Care Centre
6. Cedarview Lodge
7. Berkley Care Centre
8. Evergreen Extended Care Unit
9. Totem Lodge
10. Christenson Village
11. Hilltop House







# Choosing a Home—Suggested Questions

Name of Home: \_\_\_\_\_

Location: \_\_\_\_\_

Contact: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date Visited: \_\_\_\_\_

People I Spoke to (Name & Position): \_\_\_\_\_

## Home's Environment

Questions	Comments
Is the appearance of the building and grounds pleasant and clean? Do I feel welcome? Does the building smell fresh and odour-free?	
Are there one or more elevators? Is the building wheelchair accessible?	
Are the common areas comfortable and well used, e.g. lounge, recreation room?	
Are there areas where I can entertain visitors, have private conversations with family and friends, or just have quiet time?	
Is there an outside patio or garden area? Is it safe and secure? Can I go out when I want to?	
Can I move easily around the home? Is it easy to find my way around, e.g. clear signage? Are the corridors clear of obstacles?	
Is the noise level in the home pleasant?	
Is the home in a good location? Are there bus stops, banks, or shopping nearby?	
Is there easy parking? A covered area for dropping off/picking up residents?	
Is equipment for the residents, e.g. wheelchairs, in good working order?	
Are residents groomed and dressed for the time of day? Do they appear comfortable and at home?	
Is there activity and social interaction between residents? Do they appear friendly and happy?	
Is the staff friendly and helpful? Do they treat residents respectfully? Are they considerate of personal privacy? Are they focused on providing care and attention to residents?	

## Resident Bedrooms

Questions	Comments
Will I share a room? Is there an extra charge for a single room? What is the wait for a single room?	
Is the room cheerful, well-lit, clean and nicely decorated? Is there a window? Are the bed/chair comfortable? Is there space to move a wheelchair or walker? Can I lock my door if I wish?	
Can I bring any of my own furnishings? Can I decorate with personal mementos and pictures? Can I have my own telephone and television?	
Is there storage and closet space? Is there a locked cupboard or drawer?	
Do I have my own bathroom or place to store personal toiletries? Is it clean and accessible? Is there enough space if I need assistance?	
Can I easily call for help from the bed?	

## My Special Needs

Is my language spoken? If not, what are they doing to be able to communicate with me?	
Are there other residents who have similar cultural backgrounds?	
Is the home able to meet my religious and/or cultural needs? What religious/cultural holidays are celebrated? Will staff help me go out if I want to participate in cultural/religious programs?	
How often may I have a bath/shower? May I choose when? Can I use my own soap/shampoo?	

## Personal Services

What clothing can I send to the laundry? Do clothes need to be labelled? If there is a lot of laundry, will there be an extra charge? What about dry cleaning? Mending?	
How often does the housekeeping staff clean my bedroom?	
Is there a hairdresser? Barber?	
Does the home provide incontinence supplies without charge? What is the policy if I prefer a certain type of incontinence supply that is different from the one provided by the home?	
Does the home provide newspapers, access to email and the Internet, etc.? Is a private and accessible phone available for me to use?	
What banking and similar services are available, e.g. comfort fund, detailed statement of account?	

## Health Care Services

Questions	Comments
If my doctor can't continue caring for me after I move into the home, will the home help me find another doctor?	
How will my family and I be involved in making decisions about my care? What is the process to include us? Who do we speak with if we have questions or concerns?	
Does the Medical Coordinator have a lot of experience caring for the elderly?	
Are there Registered Nurses on duty 24 hours a day? What is the ratio of staff to residents on days, weekends, and nights?	
Does the home have experience in responding to my specific medical needs? Have they identified specific staff skills/programs/equipment that relate to my specific care and support needs?	
Who is responsible for administering medication? Is the home connected with a pharmacy?	
Does the home have regular access to specialists – dentists, foot doctors (podiatrists), physiotherapists, occupational therapists? Any other specialists? How often do they visit?	
Does staff help arrange medical appointments outside of the home and transportation?	
What are the rules about wheelchairs, walkers and electric scooters? Who does the repairs and ensures safety?	

## Food Services

Does the home have a dietician?	
Does the home serve the type of food that I like? If I need special food because of my health, religion or culture, will I be able to get it?	
Are there menu choices? Are they displayed? How often do they change?	
What are the meal times? Is it flexible if I want to eat at a different time? Are snacks or drinks available between meals?	
Is the dining room clean and pleasant? Is there a central dining room or several smaller rooms?	
Can I choose who I want to sit with?	
May I invite guests to stay for a meal? What is the cost?	
Is there an area where my guests or I can make a drink or prepare a snack?	
Are there special meals for events such as holidays?	

## Safety and Security

Questions	Comments
Are there smoke detectors? Sprinkler system? Regular fire drills? Clearly marked, well-lit exits? Current emergency plan?	
Is the building secured at all times? Is there a system to protect those at risk of wandering out?	
What are the security policies relating to valuables, emergencies, home entry/access, infection control, hand washing, etc.?	

## Activities and Programs

Does the home have a trained recreation therapist? How many activity staff is there?	
What activity programs are available? Is there a schedule? Are there extra charges? What activities can my family and friends participate in?	
Does the home have a wheelchair accessible vehicle for programs outside the home?	
Are things of normal life encouraged, e.g. hobbies, baking, gardening, and other activities?	
Does the home have any pets? Can I bring my pet to live with me? Can pets visit?	
What does the home do to help residents adjust to their new home, e.g. counselling?	
Is there a "Residents' Council" and/or a "Family Council"? What other support groups are available, both in and outside of the home?	

## General Policies

What are the rules about smoking and alcohol?	
Are friends and family welcome at any time or are there visiting hours?	
Is there a "Residents' Bill of Rights"?	
What extra costs are there, e.g. TV?	
What are the rules regarding leaving the home for a short time, e.g. vacation, hospitalization? Do I sign out when I go out for a brief time?	

## Care Philosophy

Questions	Comments
What is the home's mission statement? Philosophy of care? Vision?	
What are the home's policies on issues such as restraints, medications, resuscitation, etc.?	
Are volunteers and members of the community involved in the home?	
Are married couples housed together?	
Is there a clearly defined process for registering and resolving complaints?	
If my care needs increase to Extended Care will I have to move to a different room or home?	

### Notes



If you or your family member has additional care requirements that require a Special Care Unit, you may also want to use this checklist in addition to the general one.

## Special Care Unit

Questions	Comments
Is the Special Care Unit secure? Are the doors and windows locked? Are there detailed rules for staff to follow if a resident wanders out? Is there a separate, safe and secure outdoor area?	
Is the unit fully self-contained with dining and activity areas? Do these areas look homelike? Are colours and signs used to help residents find their way in the unit? Are there small, separate areas for residents who want to be alone?	
Is there a pathway that provides a circular walking circuit in the home, e.g. hallways that loop around? Is there plenty of walking space?	
Are all resident rooms single rooms? Are items familiar to the resident's past in their room?	
Is there a policy of "Least" or "No" restraint? (Restraints include drugs or anything that stops the resident from moving about.) How does staff manage challenging behaviours such as aggression and agitation? Are medications for behaviour used only after all other ways to solve the problem have been tried, and are they used only as short-term solutions?	
Are there the same efforts to respect privacy and dignity for residents in special care?	
Does the staff look pleasant and happy? Have they received special education and training to work with residents who have dementia?	
Are care routines flexible, e.g. does staff adjust their timing of care, such as bathing and meal times, to the needs of the residents?	
Does staff use a resident care plan that provides specific information about each resident's routine, background, preferences and other personal information that may enhance care?	
Is the family involved in care decisions, kept informed and made to feel welcome?	
Are the activity programs developed for people with dementia? Are there small group/one-to-one activities? Are there outings and bus trips?	
Is all staff committed to providing residents with opportunities for sensory stimulation?	
<b>Other comments</b>	

# Resident/Family Moving-In Checklist

Resident Name: \_\_\_\_\_ Date of Move: \_\_\_\_\_

Moving to a Long-Term home may be a stressful time for residents, their families and friends. The individual's safety and comfort can be improved by sharing accurate and timely information. However, the amount of information shared between residents, families and staff can be overwhelming. This list will help you keep track of the information that you may find helpful.

The staff person to contact for the day of moving in and the next several days is: \_\_\_\_\_

You can find the name of the nurse and care aide caring for you/your family member on the board posted at \_\_\_\_\_

(Alternatively, the name of your primary nurse is \_\_\_\_\_

and the name of your primary care aide is \_\_\_\_\_ )

Feel free to review these topics with your nurse or care aide
<input type="checkbox"/> I have received a list of phone numbers for the unit and department numbers.
<input type="checkbox"/> I have received information on Care conferences: what they are and when one will be scheduled for me.
<input type="checkbox"/> I have been introduced to other residents and their families.
<input type="checkbox"/> I have received a description of the routine of the unit, e.g. times of meals and medications.
<input type="checkbox"/> I have received information on how to personalize my room.
<input type="checkbox"/> I have received information on the Family/Residents Council – what they do and when they meet.
<input type="checkbox"/> I have received a copy of the handbook.
<input type="checkbox"/> I have received information on trust accounts, and other financial resources.
<input type="checkbox"/> I have had a tour of the home and a description of nearby shopping, restaurants, outdoor areas.
<input type="checkbox"/> I have received information on activities and on-site services available, e.g. hairdresser, pool, canteen, laundry.
<input type="checkbox"/> I have made a choice between an identification armband or card.
<input type="checkbox"/> I have discussed the level of intervention with the physician (level of care to be provided if there is a change in condition).
<input type="checkbox"/> I have been informed about personal supplies that I may need, e.g. for care of the teeth and gums.
<input type="checkbox"/> I have had my glasses, radio, hearing aids, TV, clothing, wheelchair and other personal items labeled.





Making better  
decisions together  
with patients  
and families

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or email [pchem@vch.ca](mailto:pchem@vch.ca) and quote Catalogue No. **JB.300.B36**

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to whom it was given by the health care team.

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