

Evaluation of the Long-Term Care Program and the Intermediate Care Component of the Veterans Independence Program
Audit and Evaluation Division – Veterans Affairs Canada – January 2019

Evaluation Results

<p><u>1. Need and relevance</u></p> <p>The evaluation of the Long-Term Care Program and the Intermediate Care Component of the Veterans Independence Program (hereafter referred to as the “Program”) found that VAC continues to meet its responsibility to Veterans through its financial contribution to the cost of long-term care.</p> <p>The evaluation focused on the preferred bed initiative which expedited access to long-term care for some Veterans. The evaluation determined that there is a continued need for preferred admission beds and that their use aligns with the priorities and objectives of the federal government and VAC’s strategic outcomes.</p> <p><u>2. Performance measurement and reach</u></p> <p>The preferred bed initiative has provided some Veterans with expedited access to long-term care. However, the bed distribution across the country is uneven, limited to former VAC hospitals located in urban centres, and not available in all provinces.</p>	<p>Performance measures were not developed specifically for the preferred bed initiative, making it difficult to assess success. Performance information should be collected and analyzed to inform future direction of the initiative. Clarification of governing authorities for the preferred admission beds initiative is also warranted.</p> <p><u>3. Opportunities to improve the Program</u></p> <p>VAC’s current long-term care strategy was developed during a period of strategic operating review and fiscal constraint and was aimed at cost control and containment. In recent years, the Department’s long-term care strategic direction has been to work bilaterally with provinces, health authorities and facilities to:</p> <ul style="list-style-type: none"> • monitor occupancy of contract beds and identify expected vacancies; • release contract beds when there are ongoing vacancies and no waitlists; and • alter funding to a per diem approach or re-align annual budgets based on occupancy. <p>The strategy does not fully take into consideration the changing landscape of long term care and must be renewed in light of the Department’s focus on Care, Compassion, Respect, Veteran Centric Service, and Service Excellence towards Veterans.</p>
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Recommendation	Management Response and Action Plan
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<p>Recommendation – It is recommended that the Assistant Deputy Minister, Strategic Policy and Commemoration develop and implement a renewed long-term care strategy that takes into consideration, among other things:</p> <ul style="list-style-type: none"> a) Departmental focus on care, compassion, respect, Veterans centric service, and service excellence; b) Authorities (e.g., regulations, eligibility groups, frail) c) Changing demographics (e.g., aging CAF Veterans, aging Canadian population, bed requirements); d) Funding arrangements with stakeholders (provinces, health authorities, and facilities, resource requirements); e) Data requirements and performance measures; and 	<p>To develop a renewed long term care strategy for Veterans that takes into consideration, among other things:</p> <ul style="list-style-type: none"> a) Changing demographics of Veterans and their future needs; b) Future projections for expenditures and demand; c) Mandate, authorities, and existing agreements; and, d) Federal/Provincial/Territorial responsibilities.
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f) Agreements currently in place (e.g., contract beds, preferred admission beds)	
Program Description	
<ul style="list-style-type: none"> • The Long-Term Care Program and the Intermediate Care Component of the Veterans Independence Program provide financial support to Veterans who require facility-based long-term care. • Care is provided in facilities such as nursing homes and other long-term care facilities with beds that are open to Veterans as well as other provincial residents. Care is also provided in facilities with beds designated through contractual arrangements with the province, health authority, and/or facility for priority access for World War II and Korean War Veterans. • Support is provided under the authority of the <i>Veterans Health Care Regulations</i>. • As of March 31, 2018, VAC was supporting 5,110 Veterans in approximately 1,318 nursing homes and other long-term care facilities across Canada with total expenditures of \$237,000,000. • In 2016, the Department worked with provincial partners to reach agreements to re-profile beds that respected existing program eligibilities and allowed expedited access to a broader group of Veterans at former Veterans hospitals. To date, agreements have been reached with 10 of 18 former Veterans hospitals. • Between June 2016 and June 2018, 211 Veterans accessed these beds in what is known as the preferred admission beds initiative. 	
About the Evaluation	
<p>Scope and Methodology:</p> <ul style="list-style-type: none"> • The evaluation was conducted in accordance with VAC's 2017-22 Risk-Based Audit and Evaluation Plan, and in compliance with the directive and standards specified in the Treasury Board of Canada's 2016 <i>Policy on Results</i>. • The time period covered by the evaluation was April 1, 2014 to September 30, 2018. Project work was conducted by the VAC Audit and Evaluation Division between March 2018 and September 2018. • The evaluation focused on the preferred admission beds initiative as it was the biggest change within the Program since it was last evaluated in 2013-14. 	<p>Constraints and Limitations:</p> <ul style="list-style-type: none"> • The Program has evolved over the years to accommodate Veterans' needs. • Delivery of the Program is complex with numerous eligibilities, models of funding and delivery partners (e.g., provinces and health authorities; not-for-profit; and for profit facilities etc.). • Regional, socio-economic, and demographic differences across the country result in diverse provincial long-term care systems and varying levels of demand for long-term care services. • Limited program performance measurement information has been collected and monitored since the preferred admission beds initiative was launched in June 2016. The evaluation team conducted a file review and analysed available data to support the evaluations findings and conclusions.
Evaluation Report	
http://10.199.41.150/eng/about-vac/publications-reports/reports/departmental-audit-evaluation/2019-evaluation-long-term-care-summary	