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Long-term care takes new direction

By LISA BOONSTOPPEL-POT
The Herald

For the first time, the government is undertaking a major overhaul of its health care system and how it meets the special needs of seniors and disabled persons.

It's called the 'Redirection of Long-Term Care and Support Services' and local health officials want the disabled, seniors and caregivers in Halton and Halton Hills to provide input.

"We want to expand services and improve quality," says the Ontario government.

The government is holding community consultation meetings across the province for people to say what they think.

In Halton Hills, the meetings will be held on Feb. 6 from 7:00-10:00 p.m. in the Halton Regional Police Station on Guelph St. in Georgetown and on Feb. 11 from 7:00-10:00 p.m. at the Royal Canadian Legion on Wright Avenue in Acton.

The Redirection is focusing on long-term care, which includes services such as Meals-on-Wheels, nursing, homemaking volunteer transportation and adult day programs and respite.

The government's Ministry of Health, Ministry of Community and Social Services and Ministry of Citizenship are planning to expand services and improve their quality.

Among the proposed changes will be the establishment of a service coordination agency which would help people stay at home as long as possible, and help people who want to leave hospitals, homes for the aged or nursing homes to find community alternatives.

Brenda Elias, Area Manager of Halton-Peel Community Health and Support Services is particularly interested in the service coordination agency.

"The stringent eligibility requirements for home care could become more flexible," says Halton Region Home Care Director

"Now, seniors aren't sure who to call when they need help," she said, "but if there was one agency they could call that could deal with whatever needs they have, it would really reduce the confusion."

Other changes the government is proposing is reducing the cost to individuals for homemaking services they need to live at home, for adult day programs and for care in nursing homes.

To Sandra Shadwick, Director of the Halton Region Home Care Program, this sounds like good news.

Her service provides funded care to approximately 6000 adults and 450 children a year in Halton.

But she says it could provide a lot more people with service if the Home Care Program didn't have such strict eligibility requirements.

She explained that for someone to receive funded care, they must require three professional services such as nursing, physiotherapy, occupational therapy or speech therapy.

"If someone just needs homemaking services, they don't qualify for home care," she said. "Unless they require professional services, they have to pay for support care."

"We're hoping with this redirection, it will allow us to be able to have more flexible eligibility requirements so we can meet more needs."

In its public consultation paper on the redirection, the government states "up to 90 per cent of all assistance to seniors and people with disabilities come from family and friends, not from the formal programs."

The consultation paper also confirms that "people have often expressed their preference to live at

"There should be a built-in reward for people who stay at home to take care of a loved one," says Brenda Elias



home in their own communities instead of going into a hospital, home for the aged or nursing home. Yet Ontario continues to rely on institutions, spending close to 80 per cent of the money for long-term care on them rather than improving community-based services."

But that is going to change, reveals the document.

"Funding will be provided to assist elderly people and persons with physical disabilities to live independently for as long as possible," stated the document. "The amount of new funds will be increased every year over the next five years and by 1996-97, an additional \$647 million annually will be invested in long-term care and support services."

Ms. Elias believes taking care of disabled persons and seniors at home is less costly than placing them in homes.

"Studies prove that over the long-term, home care is very cost-effective," she said.

"People make great sacrifices to stay at home and be caregivers," she said. "There should be a built-in reward for people who choose to do that—some sort of incentive for them to carry on when the going gets rough. Now, the system makes them feel penalized for doing that."

She wants to see more supportive housing built in Halton for seniors like Mr. and Mrs. Gooch.

Once the community consultation process has been completed across the province, the next step in the redirection will be the formation of Community Planning Groups.

Ms. Elias said these groups will be set up in every region to review the findings of the consultation process and put into action their recommendations.

She says in Halton, the first changes in the system could come as early as 1992-93 because Halton Region has already done a lot of preparatory work on how it can better meet the needs of its seniors.



It's obvious that Joseph and Mary Gooch of Acton share a great love and it's this love that has kept Mr. Gooch out of a nursing home or home for the aged. You see, Mr. Gooch needs constant care which is provided by Mrs. Gooch and though she

loves her husband, she admits it's hard on her. She's hoping proposed government changes to long-term care and support services will help improve both their lives. (Herald Photo by Lisa Boonstoppel-Pot)

Love means togetherness

By LISA BOONSTOPPEL-POT
The Herald

The Ontario government is giving Halton Hills residents a chance to suggest changes to its long-term care system and one Acton woman said she has lots to say.

On Feb. 6 in the Halton Regional Police Station in Georgetown and on Feb. 11 at the Royal Canadian Legion in Acton, residents will have an opportunity to provide input on the government's 'Redirection of Long-Term care and Support Service in Ontario.'

In its redirection document, the government says it is planning to expand services and improve quality of long-term care services.

Mary Gooch, of Acton, depends on these proposed changes in long-term care to change her life and plans to be at the meetings to tell her tale.

Her story is a common and sad one.

It all began the year before Mary and Joseph Gooch got married. Joseph, at the age of 62 began feeling pain in his chest. Mrs. Gooch said doctors diagnosed Mr. Gooch as having angina.

At first, the attacks were infrequent and Mr. Gooch continued with his job at the P.L. Robinson screw factory in Milton and fathered two children with Mary, who is 30 years his junior.

The attacks got progressively worse and in the last four years as Mr. Gooch entered his ninth decade, the attacks left him weak and frail.

He cannot walk without the aid of a stroller, is blind in one eye and needs physical help going to the bathroom, to bed, getting dressed and eating.

Mrs. Gooch said doctors have also diagnosed Mr. Gooch as suffering from dementia, an unsoundness of the mind resulting from organic or functional disorders.

This makes him very depressed, moody, fretful and often as helpless and demanding as a newborn baby said Mrs. Gooch.

Though Mr. Gooch, at 92, is the person who suffers with the diseases, in reality both the Gooch's are victims.

Mr. Gooch is the victim of his body but Mrs. Gooch is the victim of the system because in order to keep her husband out of an institution, she is tied to her home taking care of her husband.

"I can't send him away, it would break his heart completely," says Mary Gooch, caregiver.

"It's hard," she says simply. "I get depressed at times and frustrated that he is the way he is."

Because of the love and devotion she has for her husband, she won't consider putting him in a nursing home.

"I won't send him away because he'd hate it," she says. "It would break his heart completely."

"I'd also miss him terribly." And so, day by day, she willingly takes care of her husband even though she's sacrificing her own personal life to do it.

Fortunately, the Gooch's are eligible for in-home care and Mrs. Gooch makes use of it once a week to allow her a day to do the grocery shopping and visit friends.

Her real problem with the current health-care system is the lack of financial support and supportive-care seniors housing.

Because she has to stay home full-time to take care of her husband, she cannot maintain a job and being under age 65, doesn't receive old age pension.

They now rely on Mr. Gooch's pension but if he dies before she turns 65, she'll have to rely on her limited savings, leaving her financially vulnerable.

Her financial situation also affects her living arrangements. Now, the Gooch's live in an Acton apartment building but really, they can't afford to. They need affordable housing for seniors but there just isn't enough seniors housing in the Halton Hills area.

She has had their name on the waiting lists for all the seniors homes in the area for months and not one call for a suitable room has come.

"If I go to the meeting, I'll tell them we need more senior's apartments and more help in these apartments for the healthy spouse," she said. "It would be nice to have someone help me and make my life happier."

Until then, Mrs. Gooch will continue to support and care for her husband and wait for the time when the government will recognize the contribution she's making to the health care system and support and care for her.