

Reykjavik Home Care

challenges, obstacles, performance and quality assessment

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Presentation topics:

- A bit about Reykjavik and welfare service in Reykjavik.
- History of intergrating social and health care in home service in Reykjavik
- Obstacles in the process of intergration
- What should we gain from integration of services?
- Have we performed as expected?
- Can we do better – quality and quantity?
- future challenges in home care

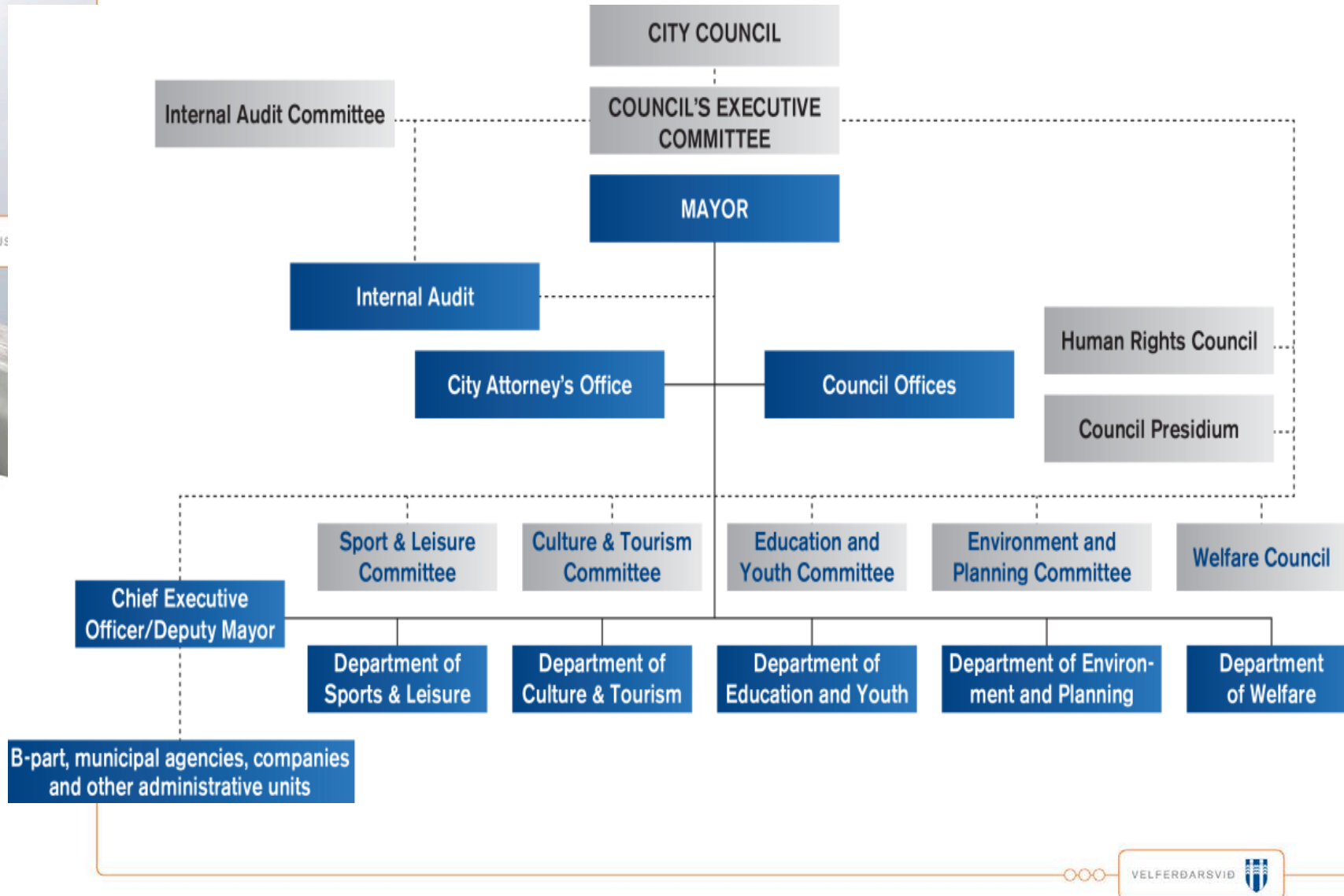


Population in Reykjavík 120.497 (37%)
Population under 18 years in Reykjavík 23% (27.082)
Population 67 and older in Reykjavík 11% (13.434)
Population Capital region 200.000

Total population in Iceland around 325.000

Number of municipalities 74

The City of Reykjavík



The department of welfare

Total budget

- 2007: 8,8 ISK billion
- 2012: 19,3 ISK billion
- 2013: 21 ISK billion
- 2014: 23 ISK billion

Total positions

- 2007: 865
- 2013: 1.545

Total working places

- 2007: Below 50, 1/3 24- hours homes
- 2013: More than 100, 2/3 24- hours homes



The antecedents of Integrating social home service and home nursing

- **Pressure from interest groups (from the year 2000)**
 - I Consultation
 - II Integration
 - Pilot project (2004-2006) division of labour and trust
 - III Home nursing from state to city (2009)
 - IV Unification (Laugardalur og Háaleiti 2011)



What happened in Iceland in 2008?

- Three largest banks **collapsed** early October 2008
- **Icelandic krona** fell by 86% in 2008
- **Inflation** went from 6% to 18% in 2008
- **Unemployment** rose very sharply in the second half of 2008 -7- fold in 7 months 1,3% in September 2008 to 9,1% in April 2009
- **Debt burden** of families and companies multiplied
- And the city was negotiating to the state to operate home nursing via contract

Obstacles

- Lack of money
- Technology
- Too much workload
- Different views and language of social and health care staff
- Professional rivalry
- Sometimes decisions are made by people who handle the money but not the service

The purpose of a unified service:

- One system is responsible=> no pointing to the other system => denser and better service



- Lesser need for nursing home placements
- Fewer unnecessary visits to hospitals and shorter stays in hospitals
- One entry point

Support for people at home*

- Information and counselling
- Preventative visits to 80+
- Social home services
- Social program at social centres
- Family, friends and neighbours
- Transport services
- Meals on wheels
- Physiotherapy
- Volunteers
- Support services
- Support families
- Rental Housing
- Nursing in the home
- Health care centers
- Day Care
- Safety button
- Churches and religion groups
- Services from NGO's
- Short term placement in a nursing home
- Assistance with alterations in the home
- specialised nursing

* Blue text: Service from Department of Welfare



Number of users 2013	Men	Women	total
Home services	1.118	2.690	3.808
Home nursing	896	1.560	2.456
Meals on wheels	373	521	894
Meals at community centres	258	515	773
Transport services for elders	129	595	724



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What should we gain?

- Profit for the community because of denser and better service
 - Fewer nursing home placements
 - Fewer unnecessary visits to hospital
 - People who need to visit hospital can come home sooner
 - We can use less specialised staff to provide more specialised service than before under the supervision of specialists

What should we gain?

- More reliable service
- Better quality
- people who need specialised service get it.



The status now

- 22% of people 67+ received social home service (2013)
- 14,6% of people 67+ received home nursing (2013)
- More users in need of home care service provided in the weekends and evenings
- More need for specialised care
- More need for specialised social support
- More need for cooperation with other service providers and support to the family

Have we performed as expected?

- Ratio of 80 years and older in institutions have dropped from 18,4% (2008) to 16% (2013)
- Average stay in hospitals (80+) dropped
- **Not fewer visits to hospital**
- cost has risen for social home service but not as much in home nursing.
- More social home care users receive also home nursing (unified service). 20%-39% from year 2009-2013

Are lot of people getting little service but nobody gets much service?

- More users get more service than before, both unified service but also help with more tasks than before
- fewer users than before get only help to clean once-twice a month. The ratio went from 74%-63% in all districts in Reykjavik from year 2009-2013. But from 74%-59% in Laugardalur Háaleiti.

More specialised care provided

- The heart patients program
 - in cooperation with Landspítali
- Home care respond team
 - when the home is in so poor state that it is difficult to provide home care, sometimes because of hoarding
 - can we do better??

Yes – we can!

- better use of technology
- use of quality indicators (RAI-HC)
- better support to family caregivers
- more specialised care to specific groups

more specialised care for the most vulnerable

- special support due to dementia
- special support due to alcohol and drug problem – damage decrease approach
- special support due to behavioral problems

Future challenges



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future challenges

- Human resources
 - men/women
 - get specialists to work in home care
- The home as a workplace
- Individualised services
 - more variety of service users

1915



1925-1930



1979



2012



Reykjavík Harbour 1917 and 2008



Vesturgata then and now 1915 and 2008



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