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Super users of home care for public nursing services in Québec, Canada

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Allocation of hours in home care is usually based on different clinical criteria. By evidence, all users do not receive the same quantity of services. However in practice, the services seemed allocated with a much skewed distribution. We conducted a descriptive study in order to examine this distribution. All persons aged 65 and over and receiving at least one intervention at home were included in analysis. At individual basis, we summed the hours of direct skilled-nursing and non-skilled services during 1 year (representing 95% of total hours) at home. Services received elsewhere than home or private residence for older persons were not included. A total of 147 024 people aged 65 and over received public home services during the year. Sorting the users by the total hours received in the year (beginning with the highest), we observed four stratum showing that 3.7% received 50% of total hours; then a portion of 7.8% received 25% of hours; a next portion of 11.7% received 15% of hours. The majority (76.8%) received the remaining 10% of hours. Summing the three first stratum represented 23.3% of users, receiving a total of 90% of hours. The high concentration of available hours of home care on a small proportion of users revealed allocation of high intensity for some users, and very low intensity for most of users. The proportion of users receiving home care was an usual indicator of distribution. The four stratum observed tend to militate for a different indicator, considering the intensity of services.

Biography

Michel Raïche, PhD, is an Associate researcher at the Research Centre on Aging, and an Associate professor at the Université de Sherbrooke, Québec, Canada. He is also consultant for the Sherbrooke Health Expertise Centre, working with the Health and Social Services Ministry in Québec.

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