



Alberta Health Advocate and Seniors' Advocate

2015-2016 Annual Report

Listen. Ask. Learn.

The Office of the Alberta Health Advocates (OAHA) consists of the Alberta Health Advocate and Mental Health Patient Advocate. The OAHA is part of a network of resolution processes that address concerns and complaints within Alberta's health services environment.

Established in 2014, the OAHA assists Albertans in dealing with concerns about health services and empowers them to be effective advocates in their own health and health care. The OAHA supports and advocates for a health care system that is responsive and accountable to the people being served.

The Health Advocate and Mental Health Patient Advocate have a reporting relationship to the Minister of Health, and the Seniors' Advocate reports to the Minister of Seniors and Housing. The Seniors' Advocate has continued to be co-located within the OAHA and the Health Advocate has responded to requests for service for both the Health Advocate and the Seniors' Advocate during this reporting period.

NOTE: The Mental Health Patient Advocate is reporting separately on activities for 2015-2016.



OUR VISION

The Office of the Alberta Health Advocate (OAHA) envisions an integrated and responsive system that empowers and supports Albertans as full participants in their care and fairly addresses their concerns about services that impact health.

OUR MISSION

The OAHA promotes self-advocacy and assists Albertans in dealing with their concerns about services impacting their health and becoming empowered and effective advocates.

OUR VALUES

Respect Integrity Compassion Engagement Excellence

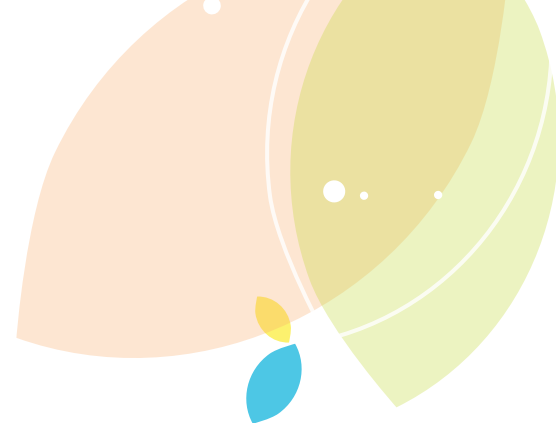


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Letter to the Minister of Health

October 1, 2016

The Honorable Sarah Hoffman
Minister of Health
423 Legislature Building
10800 97 Avenue
Edmonton, AB Canada T5K 2B6

Dear Minister Hoffman:

In accordance with the provisions of section 6(1) of the *Alberta Health Act*, it is my duty and privilege to submit to you the second annual report summarizing the activities of the Alberta Health Advocate and the Seniors' Advocate for the period from April 1, 2015 to March 31, 2016.

Respectfully submitted,

Deborah E. Prowse, Q.C.
Alberta Health Advocate
Interim Seniors' Advocate

Letter to the Minister of Seniors and Housing

October 1, 2016

The Honorable Lori Sigurdson
Minister of Seniors and Housing
423 Legislature Building
10800 97 Avenue
Edmonton, AB Canada T5K 2B6

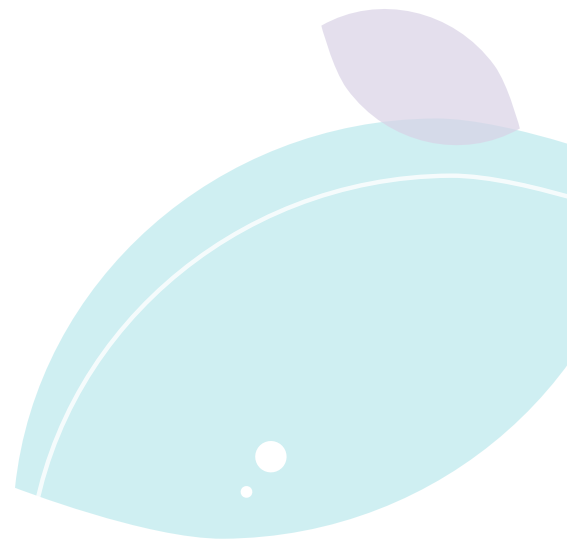
Dear Minister Sigurdson:

It is my honor to submit to you the second annual report summarizing the activities of the Seniors' Advocate for the period from April 1, 2015 to March 31, 2016.

Respectfully submitted,



Deborah E. Prowse, Q.C.
Alberta Health Advocate
Interim Seniors' Advocate



Message from the Alberta Health Advocate and Interim Seniors' Advocate



OFFICE STAFF (L to R) Lorraine D'Sylva, Jody-Lee Farrah, Wendy Armstrong, Deborah E. Prowse, Q.C., Kelly Blenkin-Church, Ashley Cormack, Thanojan Gunabalasingam, Marj Buerger (absent)

It has been a tremendous year of growth and accomplishment for Alberta's Health Advocate and Seniors' Advocate. From staffing the office, to launching our new website, participating in major initiatives to improve the health system, like the *Mental Health Review*, and establishing relationships that will enhance our contribution to Alberta's vision of health system reform. Our office has been driven by the positive results reported by individual Albertans who turned to us for direction and support when faced with challenges in their unique health care journeys.

We have listened. This past year there was a 21 per cent increase in calls to the Health Advocate. We have heard about the full scope of patient experience; from

community services and primary care practices to acute care settings through the various levels of continuing care and end-of-life services. The issues presented from Albertans have touched on all aspects of the *Health Charter*. Albertans have contacted our office to share their personal patient experiences. We have assisted in situations that have prevented families from being banned from visiting their loved ones, supported clients to become empowered in their healthcare decisions, and helped to reset expectations by providing information and support about the health care system.

We have asked. Through humble and insightful inquiry by the staff, we have realized that only by looking deeper



The Health Advocate and Seniors' Advocate:

- Served 1300 Albertans last year
- Delivered 46 presentations
- Completed 175 consultations

into the nature of the concern from the perspective of the patient/resident, the true experience can be understood and wider system learning attained. Advocacy carried out by this office has had a positive impact on the experience of individuals who have called us, and these stories have also had an impact on policy and system level improvement.

We have learned. In keeping with the Institute for Healthcare Improvements' *Triple Aim* framework, patient experience is a critical part of achieving optimal health outcomes for those we serve. Gathering their experiences allows us to be part of continual quality and safety improvement of the Alberta health system. Patient experience matters to the Health Advocate and is the core of *Alberta's Health Charter*.

Over the past year the office faced challenges with the limitations of the current database system. We have also received feedback about the limitations of the Health Advocate's mandated jurisdiction. I am encouraged by upcoming initiatives that will further support the growth and development of the Health Advocate's mandate and daily operations.

I have enjoyed the opportunity to do presentations about the *Health Charter* and interact with Albertans across the province. Each presentation has opened connections between Albertans and the Advocate. As the public profile of the Health Advocate continues to grow, I look forward to developing a communications plan that allows the Health Advocate to reach out to more communities, groups and Albertans.

Throughout the past year, the office has made progress with the support of passionate and committed staff. I wish to thank our staff for their dedication to advocacy in providing support to Albertans. I would also thank our stakeholders, community partners, the Mental Health Patient Advocate, Alberta Health and Alberta Seniors and Housing for their support of our office and the work we do.

I am honored to serve as Alberta's Health and Interim Seniors' Advocate. I know the year ahead will bring many new opportunities to continue our good work, serving and empowering Albertans, and finding effective and efficient solutions to address complex issues in healthcare ensuring its sustainability, now and into the future.

Respectfully,

Deborah E. Prowse, Q.C.
Alberta Health Advocate and Interim Seniors' Advocate



The Health Advocate

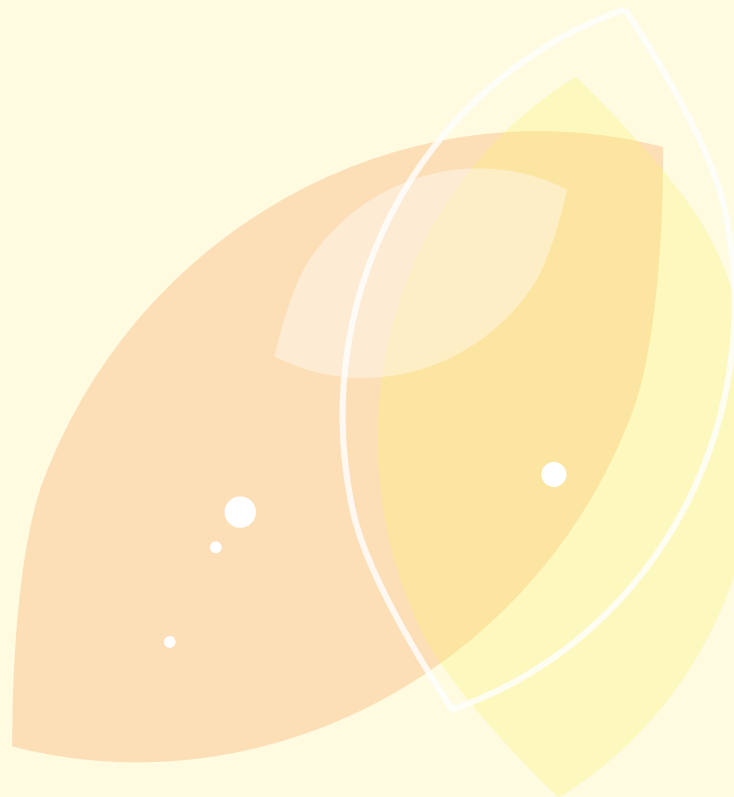
In 2014 the proclamation of the *Alberta Health Act* set out the appointment of a Health Advocate and established the Health Charter. The Health Advocate responds to inquiries from Albertans about their health care journey and experience.

Overview

The legislated functions for the Health Advocate include review, referral, navigation and education. The services of the Health Advocate exceed those of a complaint or information telephone service in that the professional staff are able to make successful connections between clients and health services, promote self-advocacy and support Albertans in dealing with their concerns about health services by:

- Listening to Albertans, assisting them in clearly identifying their concerns, looking into their experience and supporting them in finding ways to resolve concerns;
- Referring Albertans to the appropriate complaints resolution processes with information and a plan;
- Reviewing or investigating complaints under the *Alberta Health Act*;
- Finding and providing the appropriate information about health care services and programs;
- Providing education on the role of the *Health Charter* in guiding expectations of the Alberta health system; and
- Reporting to the Minister of Health on the Health Advocate's activities.

When Albertans contact our office, only information necessary to address their concern is collected. Some clients choose not to disclose demographic information, and it is not always required to provide the assistance they need. Therefore, demographic information is not always collected. As seen in several statistical measures throughout this report, the category of “undisclosed” reflects the number of files where information was either not provided or requested. Contacts with Albertans, by any method of communication, where information is provided is documented in the database system. This allows us to track and monitor information about the areas of concern, our responses and follow up. This information helps us to identify the issues and concerns that are important to Albertans and to highlight possible future areas of review by the Health Advocate.



The Alberta Health Charter

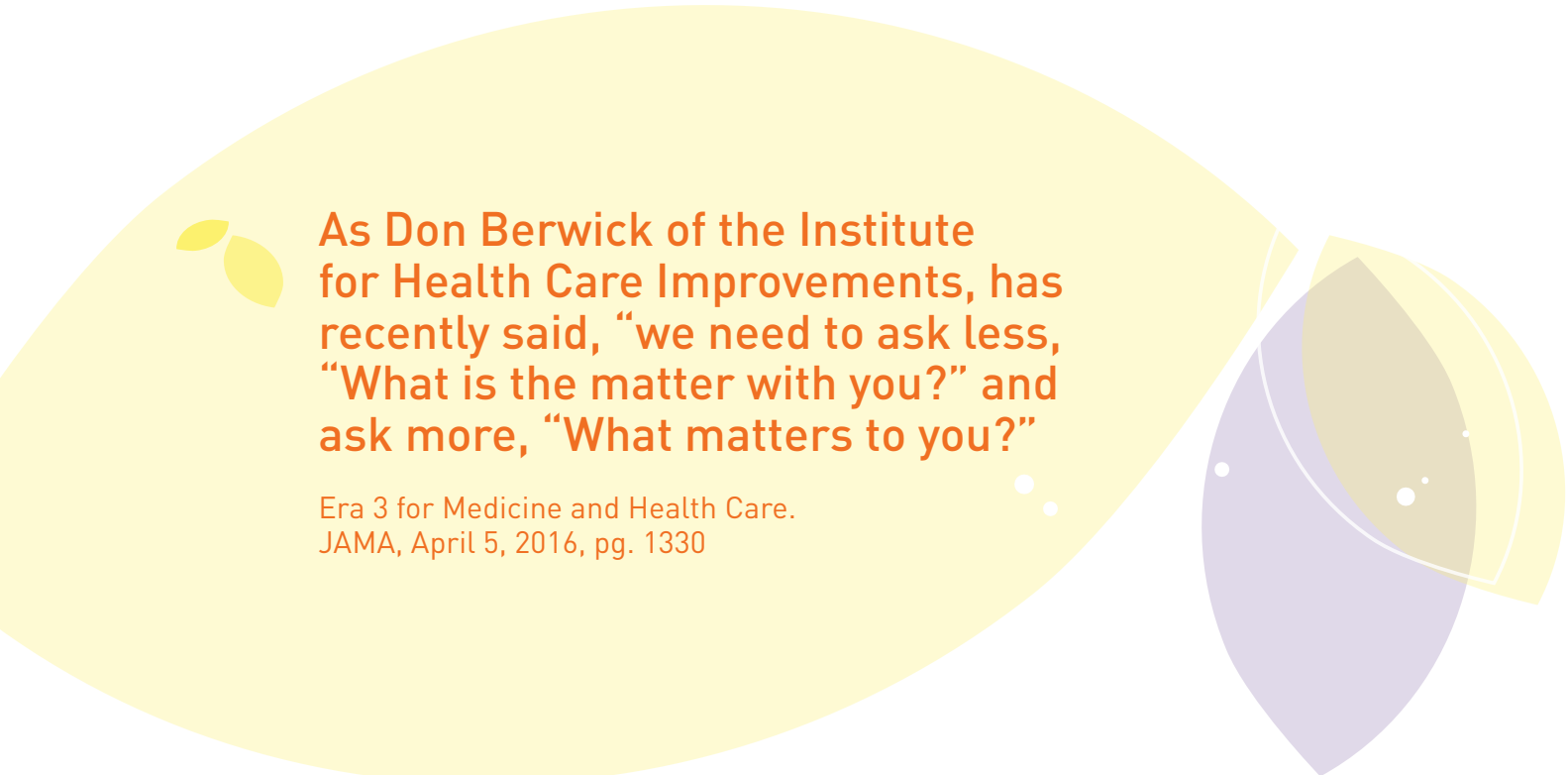
The *Alberta Health Act* (2014) introduced the *Alberta Health Charter* and the role of the Health Advocate. The *Health Charter* sets out key values, expectations and responsibilities within the health system. It is intended to guide the actions of the regional health authority (Alberta Health Services), provincial health boards, operators, health providers, professional colleges, and Albertans. It covers both publicly-funded services and those purchased through insurance or directly by individuals.

The role of the Health Advocate is to implement the *Health Charter*. The Advocate uses the first component of the *Health Charter*, entitled “When I interact with the health system” as a lens to consider concerns and complaints brought forward by Albertans for review.

The second component of the *Health Charter* entitled, “Taking my circumstances into account...” addresses the importance of patient’s being fully engaged to achieve optimal health outcomes.

The last component of the *Health Charter* recognizes the importance of the social determinants of health. This is a reminder that economic, fiscal and social policies developed by government are intricately connected to health and wellness.

The *Health Charter* is intended to be a living document. As we continue to gain experience implementing the *Health Charter*, we expect to learn how such a charter will support patients, providers, and government in understanding expectations and responsibilities within the health system.



As Don Berwick of the Institute for Health Care Improvements, has recently said, “we need to ask less, “What is the matter with you?” and ask more, “What matters to you?”

Era 3 for Medicine and Health Care.
JAMA, April 5, 2016, pg. 1330

ALBERTA'S HEALTH CHARTER



March 2014

When I interact with the health system, I expect that I will:

- Have my health status, social and economic circumstances, and personal beliefs and values acknowledged
- Be treated with respect and dignity
- Have access to team-based primary care services
- Have the confidentiality and privacy of my health information respected
- Be informed in ways that I understand so that I may make informed decisions about my health, health care and treatment
- Be able to participate fully in my health and health care
- Be supported through my care journey and helped to find and access the health services and care that I require
- Receive information on the health system and education about healthy living and wellness
- Have timely and reasonable access to safe, high quality health services and care
- Have timely and reasonable access to my personal health information
- Have the opportunity to raise concerns and receive a timely response to my concerns, without fear of retribution or an impact on my health services and care

Taking my circumstances into account and to the best of my abilities, when I interact with the health system, I understand that I will be asked to:

- Respect the rights of other patients and health providers
- Ask questions and work with providers to understand the information I am being provided
- Demonstrate that I, or my guardian and/or caregivers, understand the care plan we have developed together and that steps are being taken to follow the plan
- Treat health services as a valuable public resource
- Learn how to better access health services
- Make healthy choices in my life

As I work to be a healthy citizen within Alberta, I expect that:

- When economic, fiscal and social policies are being developed by the Alberta government, the impact of those policies on public health, wellness and prevention will be considered and steps taken to ensure that public policy is healthy policy

For more information contact the Alberta Health Advocate

P: 780-422-1812 Toll Free: 310-0000

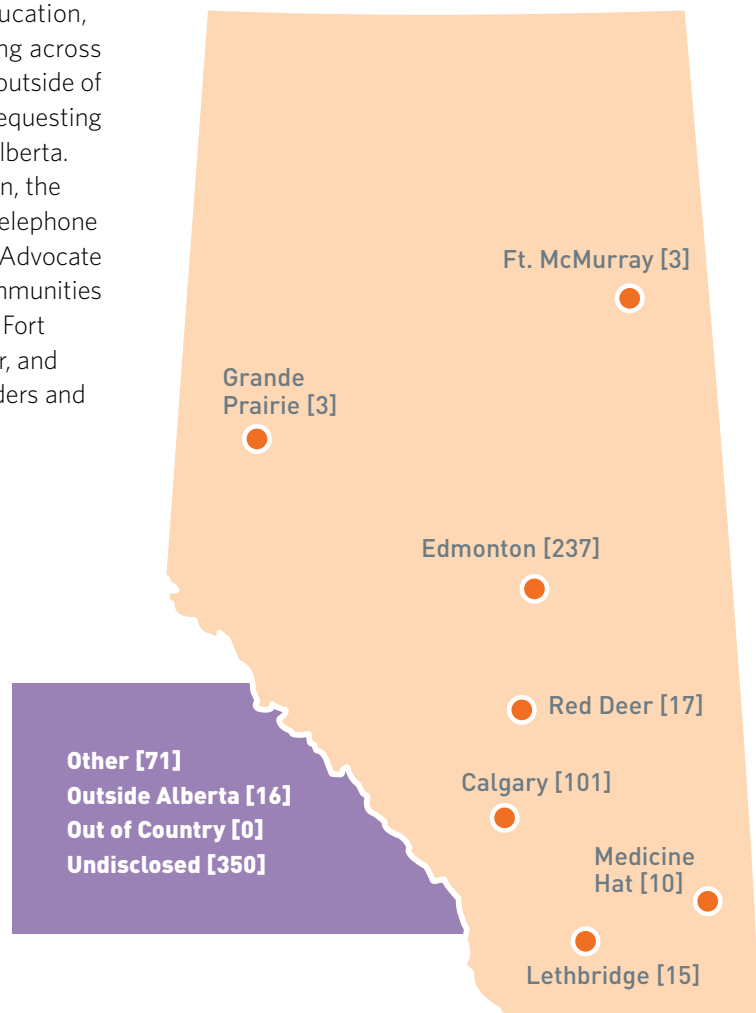
www.AlbertaHealthAdvocates.ca

Achievements of the Health Advocate

Connecting with Albertans

The Health Advocate provided advocacy services ranging from the provision of information, education, referral and review to **over 800** clients residing across Alberta. In many cases, family members living outside of Alberta have contacted the Health Advocate requesting assistance for their loved ones who reside in Alberta. With the Health Advocate located in Edmonton, the majority of connections with clients occur by telephone followed by email correspondence. The Health Advocate has been able to connect with Albertans in communities throughout the province, including Lethbridge, Fort McLeod, Olds, Hanna, Wetaskiwin, Drumheller, and Red Deer, when visiting to meet with stakeholders and to provide educational presentations.

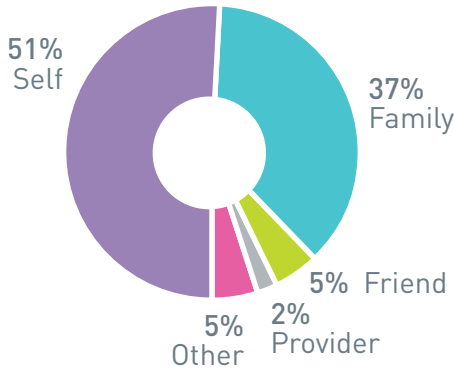
Client Distribution by Geographical Location





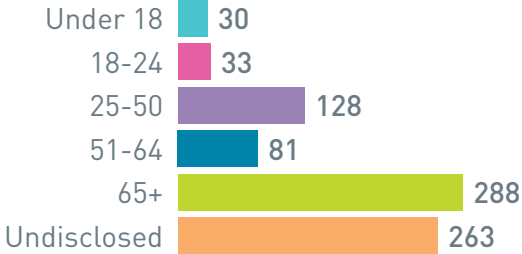
The Health Advocate received referrals from a variety of sources. In this reporting year, 51 per cent of the inquiries received were directly from clients, while 37 per cent of referrals received were from family members and friends. The remaining 12 per cent of referrals to the Health Advocate were received from health service providers, Alberta Health Services, Government of Alberta officials, MLA officials, the Alberta Ombudsman and others.

Referrals Received by the Health Advocate



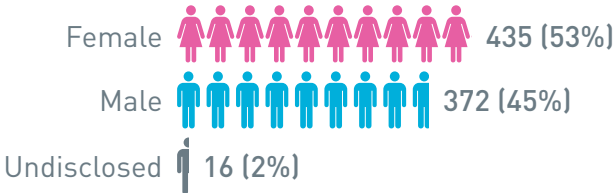
Clients served by the Health Advocate were primarily older adults with 35 per cent of clients ranging in age from 65 to 97 years. A small number of clients, representing four per cent of the total client cases, were children, adolescents and young adults, ranging in age from under 18 to 24 years. Approximately 32 per cent of clients who accessed services did not disclose age.

Client Distribution by Age



Of the clients accessing services from the Health Advocate, 53 per cent were female, while 45 per cent of clients were male. In total, two per cent of clients did not disclose their gender or the gender of the subject of the inquiry.

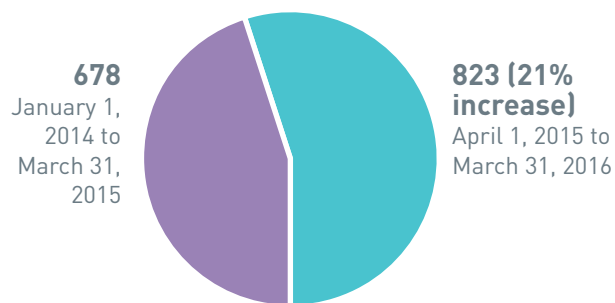
Client Distribution by Gender



We are hearing from more people

In 2015-16, the Health Advocate served 823 Albertans who contacted our office by telephone, in-person or by email. This is a 21 per cent increase in clients served from 2014-15.

Client Case Files 2015-16



We are having an impact

The Health Advocate has made a difference on a case-by-case, organizational and health system level.

The greatest impact is experienced by Albertans on a case-by-case basis. In these instances, the Health Advocate has been able to assist clients and their families to safely raise concerns they have experienced throughout their health care journey. By the very nature of health care interactions, these experiences are often very private, personal and sometimes traumatic, thereby leaving people feeling very vulnerable. Providing a valuable resource that is independent from health providers, programs and services has created a safe place for Albertans to share their story, raise concerns and find resolution.

Some examples of the outcomes achieved on a case-by-case basis are:

- A number of families in conflict, who faced visitor restrictions at a health care facility, were provided support by Health Advocate staff who assisted in building positive communication with health providers. This allowed a working relationship between the families and health providers to develop, resulting in the visitor restrictions being removed.



- A patient was denied rehabilitation services due to a misunderstanding of a policy. The policy was reviewed and the care decision was changed, allowing the patient to receive rehabilitation services.
- A patient residing in a health care facility requested the use of medical equipment that was not funded by the facility. Additionally, the patient was unable to cover the cost of the equipment with their own income. Lack of access to the medical equipment negatively affected their quality of life. Health Advocate staff provided support and guidance through the appeal process of a medical benefit program, successfully resulting in the decision to provide the funding which allows the patient to receive the medical equipment to meet their needs.

The Health Advocate has brought forward the information learned about patient experience in consultation with health system leaders, and through collaboration with organizations like Alberta Health

Services and the regulatory colleges. This work has contributed to policy development at an organizational level. A few examples are:

- Alberta Health Services (AHS) developed new policies, namely the *Daily Living Options Appeal* and the *Continuing Care Visitation and Family Presence Directive* to introduce consistent appeal processes for patients, residents and families.
- The College and Association of Registered Nurses of Alberta (CARNA) developed practice guidelines for registered nurses prescribing drugs and ordering tests.
- The College of Physicians and Surgeons of Alberta (CPSA) updated and developed new standards of practice for physicians.

On a systemic level, the Health Advocate has participated in initiatives that support health system reform and the potential positive impact on the health and well-being of all Albertans. The Health Advocate has made submissions on such topics as the *Mental Health Review*, the reform of primary care, the use of secondary health data and medical assistance in dying (MAID).

We are continuing to build

Throughout the past year, the office has continued to grow. The front line staff has increased from three to five and the Health Advocate gained an administrative support position. With the addition of a full staffing complement, the office has been successful in completing important projects to enhance the infrastructure and operation of the office, such as the our website.

The Health Advocate, Mental Health Patient Advocate and Seniors' Advocate successfully launched a new, modern and interactive website to better connect with the people we serve and the general public. The new website provides easy access to our office through an online inquiry form. The OAHA website will provide education on current health topics and connect Albertans to valuable health resources. It will also provide an opportunity for Albertans to share their stories and health experiences with those who face similar challenges in their health journey.

The Office of the Alberta Health Advocates (OAHA) Website Homepage www.albertahealthadvocates.ca



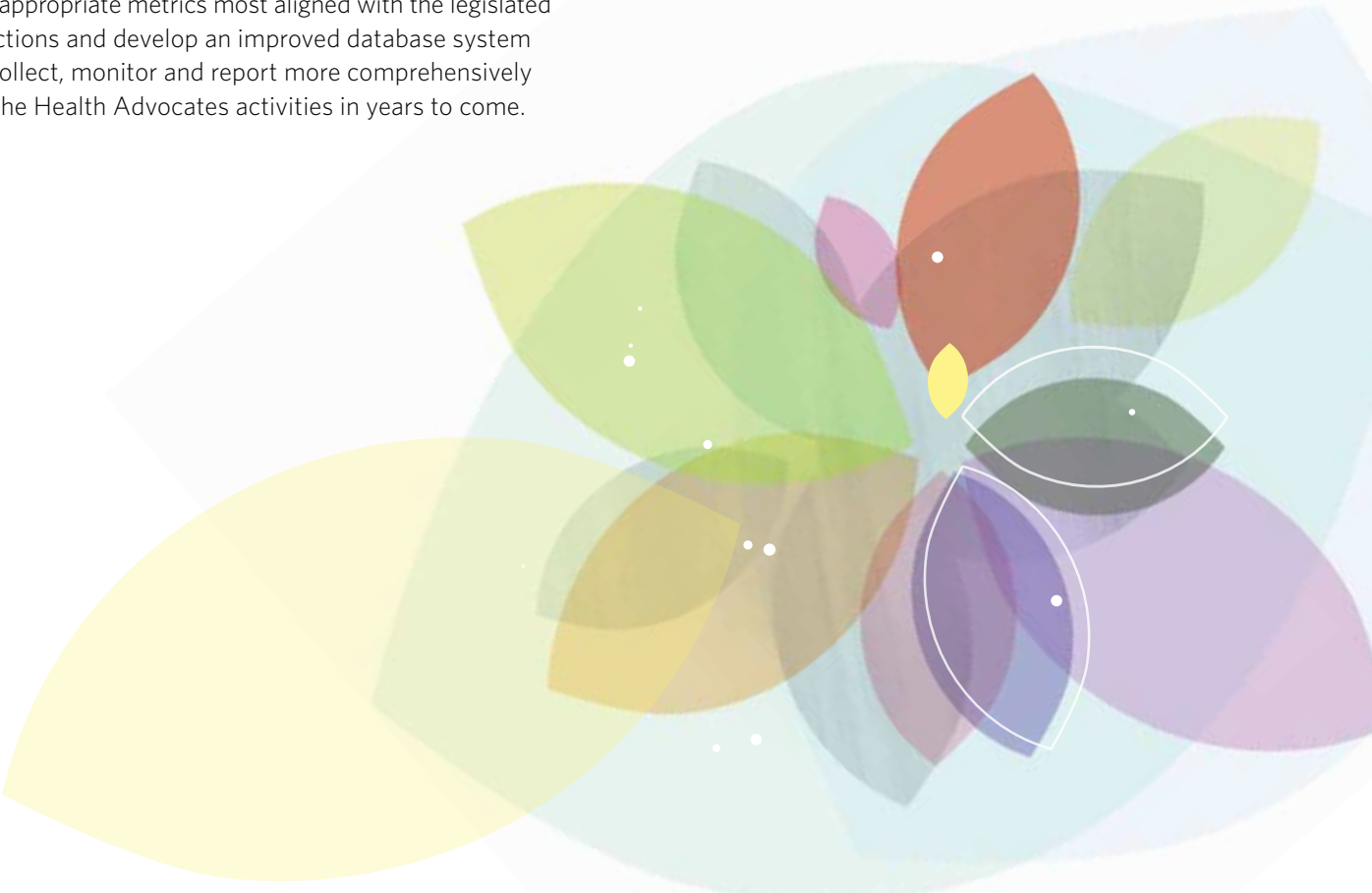
Summary of Activities for the Health Advocate

The Health Advocate opened **823** client case files in the 2015-16 reporting period; each case file represents an Albertan served. Considering the Health Advocate’s core functions, case files are categorized primarily as review, referral or navigation, although many interactions with clients may include all three activities. Education activities including presentations and consultations are captured separately from case file data.

In this reporting year, the electronic database system used by the Health Advocate continued to present limitations and challenges in the collection of data, tracking of issues and the reporting of outcomes. A current priority for the Health Advocate is to define the appropriate metrics most aligned with the legislated functions and develop an improved database system to collect, monitor and report more comprehensively on the Health Advocates activities in years to come.

Review Function

In accordance with the *Alberta Health Act*, in cases where no other dispute resolution process exists, the Health Advocate may carry out a review or investigation, with or without a complaint, into situations where someone is believed to have failed to act in a manner consistent with the *Alberta Health Charter*. In this reporting year, the Health Advocate did not conduct any formal reviews of *Health Charter* complaints. Instead, complaints brought to the attention of the Health Advocate were resolved informally and through the Advocate’s navigation and referral functions.



Informal Review Process

When an Albertan contacts the office, they can expect to speak with a Health Advocate Representative, who will listen to understand the individual's concern. Together, they will determine the issue(s) arising from the person's healthcare experience.

The Health Advocate Representative conducts a jurisdictional analysis and any necessary research to learn more about all aspects of the concern. The jurisdictional analysis will determine the appropriate agency, authority or program area to address the concern while other research conducted will determine if there are provincial or community resources, programs or services available to address the concern or support the client.

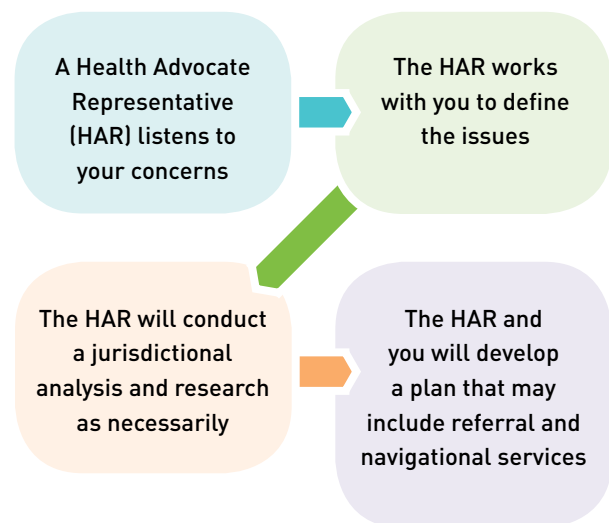
The next step is to determine if referral or navigational services are needed. The Health Advocate Representative will then work with the client to provide information learned from the analysis and research, develop a plan of action, empower the individual to act on their own behalf, provide support to navigate the system, or complete a referral to the appropriate complaint resolution process, program or service.

The outcomes of the informal review process vary and are dependent on the nature and complexity of the concern. Often, more than one resolution outcome may be applicable to any given concern. Although limited by the current database measurements, the outcomes of the informal review process include providing information, providing education, empowering clients

to self-advocate, providing a plan, completing a referral, completing a consultation and resolving the concern.

This informal review process provides a framework that allows the Health Advocate to connect with Albertans, learn from their experiences, gather and analyze important information that may lead to the resolution of individual concerns and inform health system improvements. It also provides valuable learning about Alberta's health system viewed through the lens of the *Health Charter*.

Informal Review Process



Health Charter Concerns

Through hearing about the health care experiences of Albertans, the Health Advocate staff identified *Health Charter* concerns arising from client complaints. In particular, the *Health Charter* concerns were directly related to expectations of health system interaction as set out in the Charter. Considering the complaint issues identified in the 823 case files opened this year, there were **1,189 Health Charter concerns** identified. The number of identified *Health Charter* concerns exceeds the number of client case files because often complaints consist of more than one issue. Therefore in most cases, more than one aspect of the *Health Charter* applied to the complaint.

The analysis of Health Charter concerns resulted in the following:

Health Charter Concerns

	Per cent
No Charter Concern Identified	22
Have the opportunity to raise concerns and receive a timely response to my concerns without fear of retribution or an impact on my health services and care	17
Have timely and reasonable access to safe, high quality health services and care	16
Be supported through my care journey and helped to find and access the health services and care that I require	15
Receive information on health system and education about healthy living and wellness	12
Be treated with respect and dignity	7
Have my health status, social and economic circumstances, and person beliefs and values acknowledged	5
Remainder of Charter Concerns Combined	6

A CONCERN: A family member reached out to the Health Advocate for assistance following the death of a patient in a health care facility. The family had unresolved questions about the circumstances of their loved ones death.

HOW THE HEALTH ADVOCATE HELPED: The Health Advocate listened to the story of their experience and identified the appropriate complaints processes to address the concern. The Health Advocate then assisted the family to raise their concerns and questions with the multiple authorities involved in the situation by: providing information on each specific process; providing education on what to expect when submitting a complaint; providing ongoing support through each step of the various processes; and, providing a plan to achieve resolution.

Navigation and Referral Functions

The Health Advocate is responsible to assist those who are having difficulty accessing health services and health related programs and to connect them to the appropriate resource or organization. In situations where an individual's complaint relates to another jurisdiction or complaints process, the Health Advocate is responsible to refer or connect individuals to the appropriate jurisdiction to resolve the concern.

The primary goal of the Health Advocate is to ensure that Albertans have access to appropriate, accurate and meaningful information that provides assistance, offers support and resolves concerns or questions arising from health care experiences.

Navigation

Albertans contacted the Health Advocate for assistance to navigate many service areas that exist across the spectrum of health care services, including: complaint processes; access to various health services; access to mental health and disability services; access to financial, housing and legal resources and access to health benefit programs.

From the client case files opened this year, **1133 navigation issues** were identified across **22 health service and program categories**.

Navigation Issues

	Per cent
Financial assistance and health benefit programs and services such as medication coverage, medical services, physician or clinic fees and income support programs	19
Access to health services, specifically medical related concerns including access to care services, physician and medical specialists, diagnostic services, surgery and health information such as personal health records, treatment and procedural information, and disease or medical condition information	16
Access to the mental health system programs and services	14
Complaint process related concerns including processes specific to Alberta Health Services, Government of Alberta and the professional regulated health colleges	14
Continuing care and home care services	11
Housing	7
Legal services	6
Seniors' programs and services	3
Alberta Health Services	3
Elder abuse	2
Other	5

Referral

A core function of the Health Advocate is to refer individuals to the appropriate complaint resolution process or legislated jurisdiction to address their health complaint. Or the Health Advocate may refer the client to the appropriate resource, program or service provider to meet their need. In many instances, the specific program information is provided to the individual and they act on their own behalf, while in other instances individuals may not be able to act on their own behalf. In these cases and with consent of the individual, the Health Advocate Representatives may complete consultation with health service providers and carry out referrals on behalf of individuals.

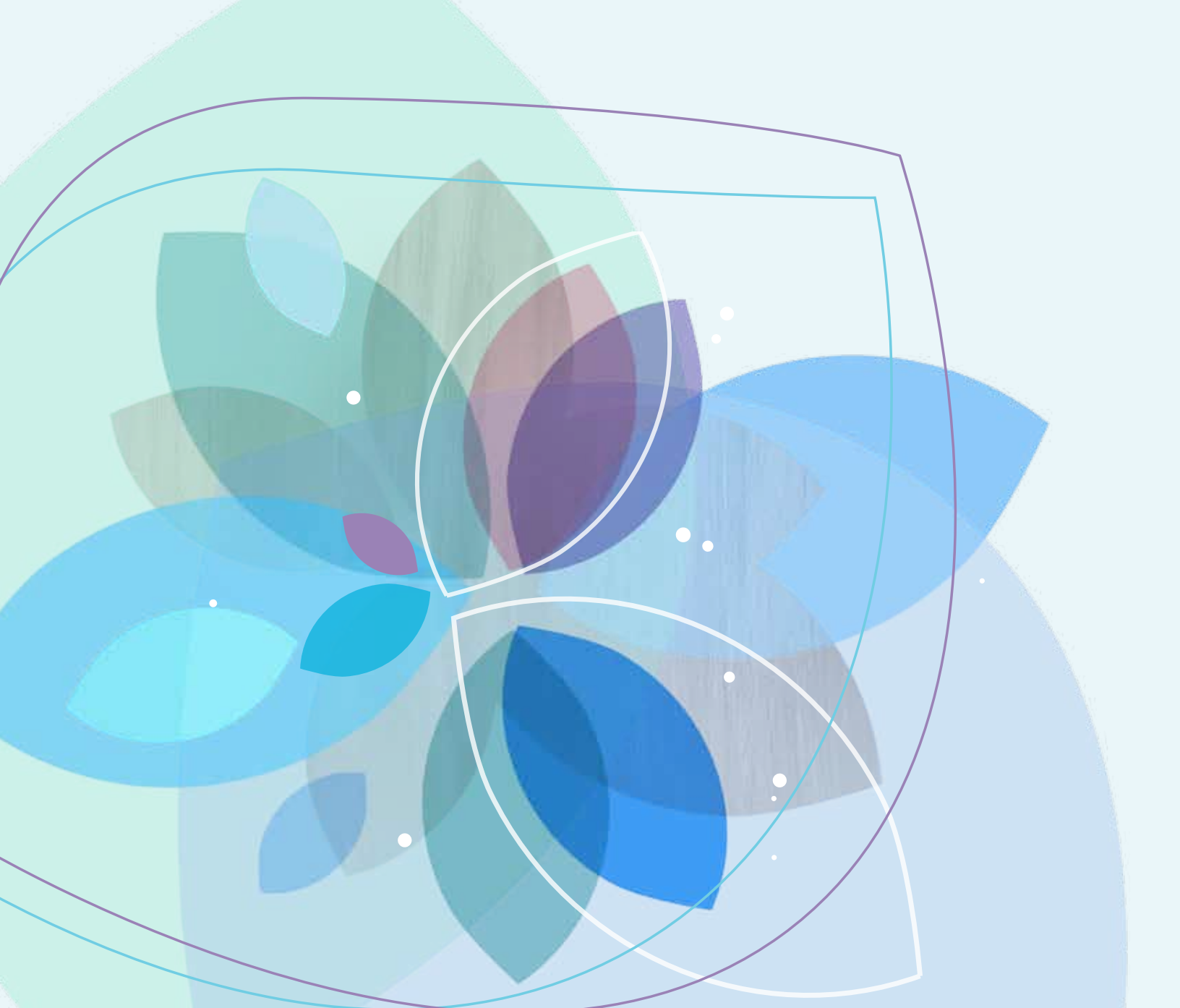
Health Advocate Representatives refer individuals to a wide variety of health, government and community programs, services and organizations. During the past year, **940** Albertans were referred successfully to **17 identified health service and program categories**.

Referral Services

	Per cent
Alberta Health Services	21
Assured Income for the Severely Handicapped	19
Non-profit community organizations	11
Mental health and addiction services	10
Alberta Seniors' Benefits program	7
Legal Services	7
The remaining referrals include: MLA's, housing services, health professional colleges, the Minister of Health, individual physicians, home care services, Alberta Health Care Insurance program and Government of Canada programs and services.	25

A CONCERN: A member of the public contacted the Health Advocate inquiring about how they could resolve a concern about their health care experience. The client's first spoken and written language was not English and this posed a barrier in their ability to interact with a complex complaint process.

HOW THE HEALTH ADVOCATE HELPED: The Health Advocate helped them to identify the specific issues of the concern, determine which complaint process was appropriate to receive the concern, and assisted them to complete the required documentation to engage the appropriate process. The Health Advocate worked with the client to develop a plan which included a script of questions and a framework to share the experience. The client reported that the assistance from the Health Advocate empowered them to effectively pursue a resolution to the concern.



The Seniors' Advocate

In 2014 a Ministerial Order set out the appointment of a Seniors' Advocate. The Seniors' Advocate will support seniors in navigating through government-funded programs and services for positive outcomes.

Overview

The activities carried out by the Seniors' Advocate are guided by the core functions described in the Ministerial Order. The Seniors' Advocate supports seniors, their families and caregivers by providing them with public education, information, navigation and referral services.

The Seniors' Advocate supports seniors, their families and caregivers by:

- Providing education about the interests and needs of seniors including: elder abuse, aging in place, age friendly communities, older workers and ageism;
- Providing information and referrals for seniors and their families to government-funded health, continuing care, and social support programs and services;
- Engaging with seniors and families about issues that are important to seniors;
- Requesting the inspection of provincial facilities, including: supportive living accommodation, long term care accommodation, auxiliary hospital, nursing home or any place under Alberta Health Services jurisdiction;
- Referring seniors and their families to appropriate programs, services and government or community resources; and
- Reporting to the Minister of Seniors and Housing on the Seniors' Advocate's activities and issues that concern seniors.

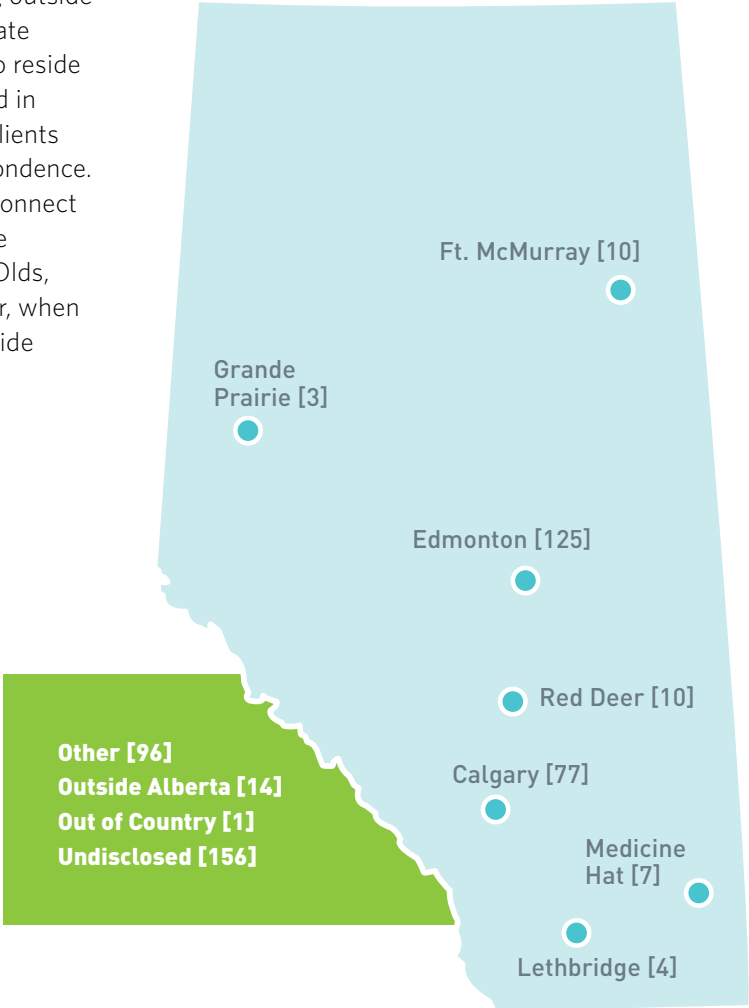
When seniors contact our office, only the information necessary to address their concern is collected. Some clients choose not to disclose demographic information, and it is not always required to provide the assistance they need. Therefore, this information is not always collected. As seen in several statistical measures throughout this report, the category of "undisclosed" reflects the number of files where information was either not provided or requested. Contacts with Albertans, by any method of communication, where information is provided is documented in the database system. This allows us to track and monitor information about the areas of concern, our responses and follow up. This information helps us to identify the issues and concerns that are important to Albertans and to highlight possible future areas of review by the Seniors' Advocate.



Connecting with Seniors

The Seniors' Advocate provided services ranging from the provision of information, navigation, education, and referral to **over 500 senior** clients throughout Alberta. In some cases, family members living outside of Alberta have contacted the Seniors' Advocate requesting assistance for their loved ones who reside in Alberta. With the Seniors' Advocate located in Edmonton, the majority of connections with clients occur by telephone followed by email correspondence. The Seniors' Advocate has also been able to connect with Albertans in communities throughout the province, including Lethbridge, Fort McLeod, Olds, Hanna, Wetaskiwin, Drumheller, and Red Deer, when visiting to meet with stakeholders and to provide educational presentations.

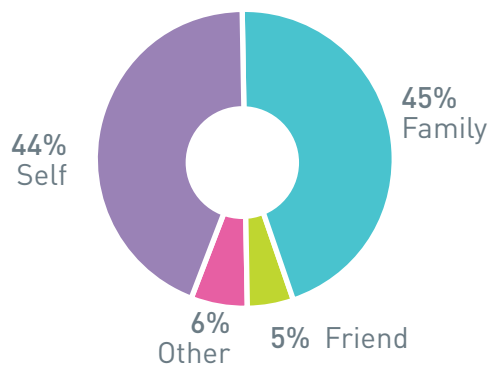
Client Distribution by Geographical Location





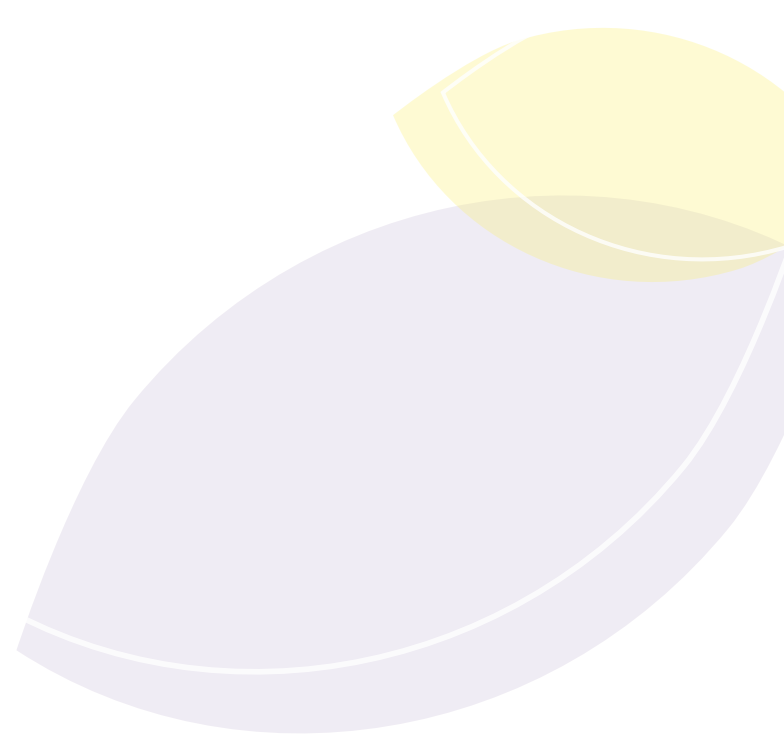
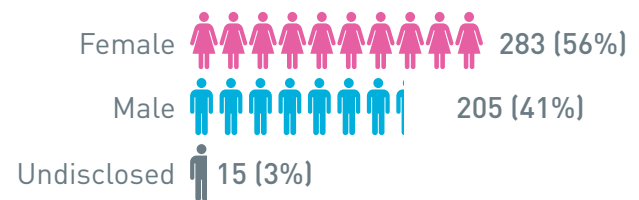
The Seniors' Advocate receives referrals from a variety of sources. In this reporting year, 50 per cent of referrals made to the Seniors' Advocate were from family members and friends; and 44 per cent were self-referrals. The remaining six per cent of referrals were from health service providers, Government of Alberta officials, MLA officials, Alberta Health Services, the Alberta Ombudsman and others.

Referrals Received by the Seniors' Advocate



Of the 503 clients accessing services from the Seniors' Advocate 283 or 56 per cent were female, while 205 or 41 per cent of clients were male. Additionally, 15 or 3 per cent of clients did not disclose their gender or that of the subject of the inquiry.

Client Distribution by Gender



Summary of Activities for the Seniors' Advocate

The Seniors' Advocate opened **503** client case files in the 2015-16 reporting year; each case file represents an Albertan served. Of these 503 client case files, 215 fell solely within the mandated jurisdiction of the Seniors' Advocate and the remaining 288 client case files were clients over the age of 65 who presented with issues falling within the Health Advocate and Seniors' Advocate jurisdictions¹. In the current database

system the assignment of the jurisdiction of these client files was determined based upon the first issue identified and further, only one jurisdiction was assigned. The combined jurisdictions of both Advocates, reflects the interplay, often heard from clients, between the social determinants of health and the health and well-being of seniors, families and communities.

A CONCERN: A senior called with health related concerns about their adult child, who has disabilities, and questions about access to social support programs. The senior, who is the primary caregiver for the adult child, was experiencing social isolation and the inability to carry out daily activities, such as, grocery shopping, participating in community activities with friends, and running errands. Caregiver stress was affecting their mental and physical health. Limited finances prevented them from accessing additional support services for their adult child.

HOW THE SENIORS' ADVOCATE HELPED: The Seniors' Advocate assisted the senior to meet with the adult child's medical specialist, resulting in a medication change leading to improved behaviour and interaction with the senior and community. Information and support were provided to ensure successful referrals to community resources and government subsidized programs, for both the adult child and the senior. These referrals would provide ongoing assistance. The Seniors' Advocate also assisted the senior to develop a plan that would address future care-giving challenges and decision-making.

1 These 288 dual jurisdiction files are not included in the data reported for the Health Advocate



A CONCERN: A family member from outside Alberta called the Seniors' Advocate with a concern about their elderly relative who resided in the family home in a rural Alberta community. The family member was concerned that their relative's health was declining and was worried about their relative's safety.

HOW THE SENIORS' ADVOCATE HELPED: The Seniors' Advocate provided information about the process to access home and continuing care services in the relative's community, contact information for local resources, and a plan on next steps.

Information and Navigation

Seniors contacted the Seniors' Advocate requesting information about many program and service areas that exist across the health and seniors' services systems. Primarily, seniors requested information about financial assistance programs and health benefit programs to assist with dental, vision and medication expenses. Seniors also requested assistance to navigate the various complex service systems including: financial assistance programs; complaints resolution processes; health services; housing; home care services; continuing care services; legal services and seniors' support resources.

The Seniors' Advocate assisted senior Albertans and their families to successfully navigate these complex systems by empowering them with correct information, providing them with a navigational plan and supporting them to become self-advocates.

There were **474** information requests and navigation issues identified for seniors across **22 health service and program categories**.

Navigation Issues and Information Requests

	Per cent
Financial assistance and health benefit programs and services such as medication coverage, medical services, physician or clinic fees, and income support programs	18
Access to health services, specifically medical related concerns including access to care services, physician and medical specialists, diagnostic services, surgery and health information such as personal health records, treatment and procedural information, and disease or medical condition information	12
Access to the mental health system, programs and services	3
Complaint process related concerns including processes specific to Alberta Health Services, Government of Alberta and the professional regulated health colleges	9
Continuing care and home care services	17
Housing	12
Legal services	5
Seniors' programs and services	8
Alberta Health Services	5
Elder abuse	4
Other	7



A CONCERN: A family member contacted the Seniors' Advocate with a concern about the management of a seniors housing complex where their relative was living. The concern related to staffing issues, safety of residents, and quality of care.

HOW THE SENIORS' ADVOCATE HELPED: It was determined that to achieve resolution of the issues, multiple agencies would need to be involved and collaboration would be required. The Seniors' Advocate assisted the family to raise their concerns with the administration of the seniors complex and made referrals to the appropriate government processes including Protection for Persons In Care, Alberta Health Accommodation Standards and Licencing, Alberta Health Services Patient Relations and to government officials in Alberta Seniors and Housing. As a result of a collaborative effort by these various resources, the staffing, safety and care issues were resolved.

Referral

Mandated referral functions of the Seniors' Advocate include:

- Referral of seniors and families to government-funded seniors' health, continuing care and social support programs and services;
- Under the *Protection for Persons in Care Act*, referral of reports of abuse involving a publically-funded service to an investigator; and
- Seniors' Advocate provides public assurance and accountability to ensure that seniors are well cared for by requesting inspections of applicable supportive living accommodations, long-term care facilities, auxiliary hospitals, nursing homes or facility under the jurisdiction of a health authority.

In carrying out the referral functions, clients are provided with specific resources, program and service information, and empowered them to take action on their own behalf. In cases where seniors are not able to act on their own behalf, they can provide consent to the Seniors' Advocate Representative who then consults directly with the appropriate service providers and completes the necessary referral on behalf of the senior or family.

The Seniors' Advocate refers seniors to a wide variety of health, government, and community organizations, programs and services. Arising from contacts with seniors and families, **477** referrals were completed to **17 identified health service and program categories in this reporting period.**


Referral Services

	Per cent
Alberta Seniors Benefits program	23
Alberta Health Services	17
Non-profit community organizations	17
Assured Income for the Severely Handicapped	12
Home care services	7
Federal government programs	5
Legal services	5
Mental health and addiction services	10
The remaining referrals include: mental health and addiction services, housing services, protection for persons in care, MLA's, health professional colleges, physicians, Alberta Health Care Insurance program	4



Resolution

When a senior, family member or caregiver makes contact with the Seniors' Advocate, the nature of the presenting concern is often complex. The resolution outcomes for complex concerns vary and are dependent on the elements contributing to the concern. Often, more than one resolution outcome may be applicable to any given concern. Resolution outcomes identified by the Seniors' Advocate to assist seniors to resolve their concerns include: providing information, providing education, empowering clients to self-advocate, providing a plan, completing a referral, completing a consultation and resolving the concern.



A CONCERN: A senior with a visual impairment moved into a seniors housing complex. After moving into the suite, the senior realized that the lighting in the unit was insufficient and interfered with activities of daily living. Administration at the housing complex denied a request to install new and improved lighting.

HOW THE SENIORS' ADVOCATE HELPED: The Seniors' Advocate assisted the senior to resolve this conflict. Conversations with the building administration resulted in an understanding of how the seniors' mental health and well-being was impacted by their inability to carry out daily activities because of the poor lighting in the unit. Ultimately, this was resolved when administration agreed to install new and appropriate lighting.

Education Services provided by the Health Advocate and Seniors' Advocate

The Health Advocate and the Seniors' Advocate (the Advocate) each have a mandate to provide education.

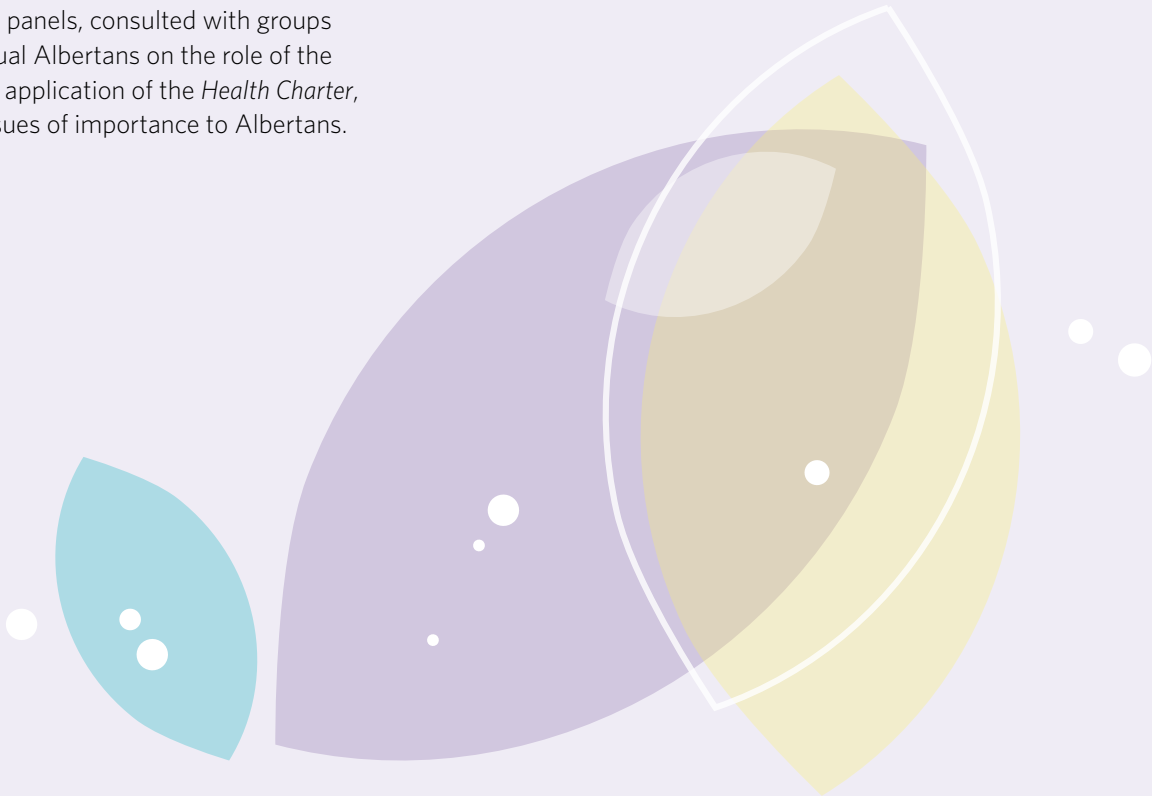
The Health Advocate is mandated to provide education on the *Alberta Health Charter* and how it applies to Alberta's health service system. The Health Advocate aims to use every interaction between health care providers, leaders and Albertans as an opportunity to educate people on roles, responsibilities and expectations within the health system.

The Seniors' Advocate is mandated to provide education about the rights, interests and needs of Seniors' including such topics as elder abuse, aging in place, age friendly communities, older workers and ageism.

While representing the Health and Seniors' Advocate portfolios, the Advocate has made formal presentations, participated in expert panels, consulted with groups and educated individual Albertans on the role of the Health Advocate, the application of the *Health Charter*, and health system issues of importance to Albertans.

The Advocate delivered **46 educational presentations** across the province to approximately **1,828 participants** including local, national and international audiences, health leaders, health service providers, Government of Alberta officials, and seniors' interest groups. Some of the Advocate's presentation highlights include:

- Accreditation Canada International Knowledge Exchange, Webinar.
- Canadian Patient Relations Conference, Toronto, ON.
- Grey Matters Conference 2015, Drumheller, AB.
- National Association of Federal Retirees, Southern Alberta



Strategic Relationships, Working Groups and Committees

The Health Advocate and Seniors' Advocate (the Advocate) over the past year has become a respected leader and advisor in the health system, seniors services system, concerns management and quality improvement ecosystems. Building strong and respected relationships, contributing to discussions on current health and seniors issues and mapping out conflict resolution pathways is key to successfully fulfilling the role of the Health and Seniors' Advocate.

In this reporting year, the Advocate has completed **175 consultations** with individuals, physicians, health leaders, health providers and policy makers on such issues as medical assistance in dying, Accreditation Canada – Client and Family Centered Care (CFCC) Standards, College of Physicians and Surgeons of Alberta *Standards of Practice*, Alberta Health Services Patient Relations *Regulations Review*, and the Alberta *Mental Health Review*.

Also, the Advocate has participated in **14 working groups and committees** that are working on initiatives or projects to support health system and seniors services improvement. The Advocate contributes to these initiatives by representing the client experience and sharing the lessons that can be learned from this experience. The working groups and committees include:

- Alberta Health, Long Term Care Committee
- Alberta Innovates, Secondary Use Data Platform, Patient Engagement, Co-Chair
- Alberta Innovates, Secondary Use Data Platform, Steering Committee
- Canadian Patient Safety Institute, Patient Safety Education Network
- Canadian Patient Safety Institute, Patient Safety Education Subgroup, Co-Chair
- College & Association of Registered Nurses of Alberta, Nurse Orders for Prescriptions and Tests Advisory Committee
- Health Information Data Governance Committee
- Health Quality Council of Alberta, Just Culture Sub-Group, Co-Chair
- Health Quality Council of Alberta, Patient Concerns Framework
- Health Quality Council of Alberta, Quality & Safety Management Framework
- Patients for Patient Safety Canada
- Alberta Health, Continuing Care Collaborative Committee
- Alberta Health, Consumer Health Leaders Group

The Health Advocate Looking Forward

The main purpose of this report is to reflect on the past year's activities of the Advocate, in accordance with the guiding legislation, and the impact these activities have had for Albertans. In doing so, it is important to also think about the priorities and goals that will be the focus for work in the year ahead.

Health Advocate Regulation Review

Through the individual casework with clients and families, we have learned that assistance and support to resolve health related concerns, and navigation through the complexities of health care, is a vital and valued service. Albertans have shared their experiences and the challenges they have faced in dealing with multiple complaints processes to have their concerns addressed. They have requested assistance from the Advocate to resolve their concerns, to intervene in finding early resolution, to provide mediation, and to facilitate discussions with other organizations to achieve a comprehensive resolution to complex challenges.

These requests for assistance from Albertans are currently outside of the legislated mandate of the Advocate. To address the needs of Albertans in this area, the Advocate will lead discussions with the Minister of Health to review and amend the *Health Advocate Regulations*, providing expansion of the Health Advocate's role to achieve enhanced resolution of concerns.

Formal Review Framework

The Health Advocate has the legislated authority to initiate and conduct reviews. This includes reviews into complaints or allegations that a person has failed to act in a manner consistent with the *Health Charter*, where no other dispute resolution processes exists. The development of a framework to guide formal *Health Charter* reviews is an ongoing initiative that will further support the review function of the Health Advocate. The development of a formal review framework is important to address gaps in the health complaints resolution system to ensure that all health services in Alberta are guided by the principles of the *Health Charter*.

Data Measurement

The Health Advocate has begun an upgrade and extension of the current database system. To complement the case management function of our work, data metrics are being developed to assist in defining and increase understanding of the issues and health system trends experienced by Albertans. Further, we are working toward developing performance measures to help improve the quality of our service, and outcomes for Albertans.



Communications and Education

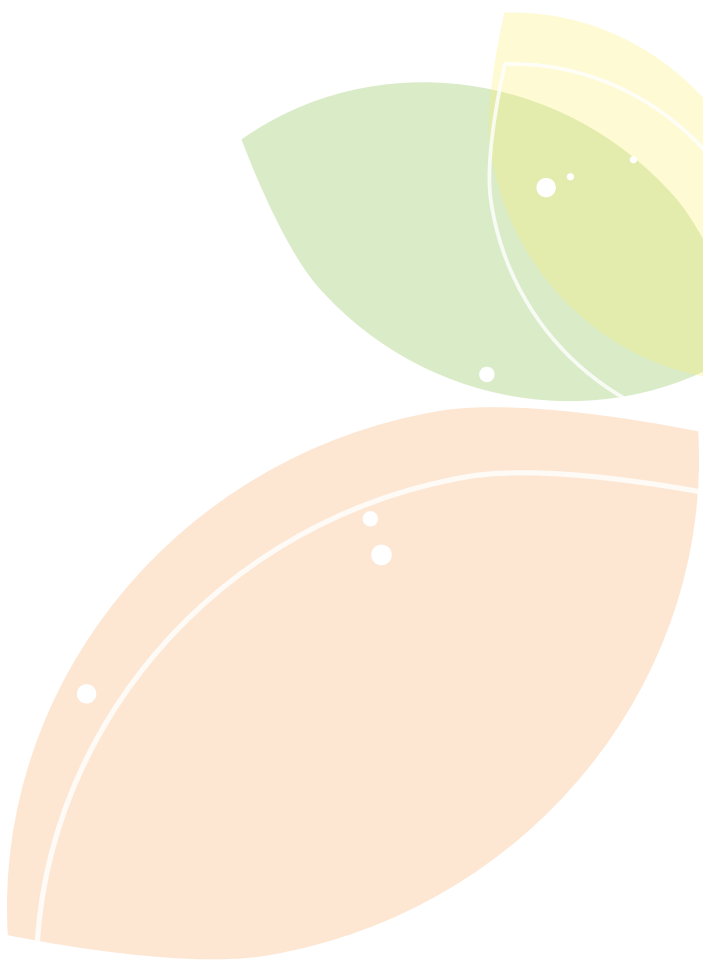
The Health Advocate has responsibility for leading the implementation of the *Health Charter*, including education and public awareness. While outreach has been an ongoing part of activities, a concerted communications and engagement strategy will include further website development for knowledge transfer about the *Health Charter* and health system issues impacting clients and families. It is hoped that further development of the website will include a story-telling framework and a dedicated page to answer health system questions posed by Albertans.

Reaching out to Vulnerable Albertans

The Health Advocate has identified and is concerned about those Albertans who interact with the health system but typically do not request assistance or bring forward concerns from their healthcare encounters. The Health Advocate has initiated contact with service providers working with Indigenous, Aboriginal and Inuit, mental health and vulnerable senior's populations. These Albertans are the most vulnerable members of our communities who may benefit the most from the support of the Health Advocate. The Health Advocate is committed to building partnerships to strengthen connection with these populations.

Transition of the Seniors Advocate

In September 2016, the first permanent Seniors Advocate will take office. The Health Advocate will provide valuable counsel and advice to support the knowledge transfer to the incoming Seniors Advocate and the further development of the Office of the Seniors Advocate.



Health Advocate Financial Summary

	2016 Budget	2016 Actual	2015 Budget	2015 Actual
Salaries and Employee Benefits	\$ 743,000	\$ 689,320	\$ 723,000	\$ 499,373
Travel and Accommodations	\$ 13,000	\$ 6,287	-	\$ 8,971
General and Administrative Services	\$ 79,000	\$ 40,598	\$ 45,000	\$ 147,581
Total	\$ 835,000	\$ 736,205	\$ 768,000	\$ 655,925

Contact Information

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E-mail: info@albertahealthadvocates.ca

We are available to assist you during regular office hours, 8:15 a.m. to 4:30 p.m. (closed from 12:00 p.m. to 1:00 p.m.) Monday through Friday. If you telephone after hours, a confidential voicemail is available to take your message.

Visit our website at:
www.albertahealthadvocates.ca



