

Protecting Home Care Facilities With Comprehensive Insurance Coverage

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Home care is a critical element of a fully integrated health care system. It provides a range of services, including short-term and long-term care, for patients in their homes. Some examples include:

- Assistance and care to older aging adults
- Short-term care for those recovering from surgery or acute medical conditions
- Long-term care for those managing complex, chronic health issues, or have special needs or a disability
- End of life care
- Rehabilitative care

As the senior population in Canada rapidly grows, continuing care systems will face higher demands. As significant growth in the seniors population is expected to continue over the next two decades, health organizations and health system administrators, care providers, and planners across the country are seeking to improve long-term sustainability for this sector.

Home Care on the Rise as Senior Population Grows

Staying at home for as long as possible can offer a better experience for many people, and can help ensure that long-term care beds are reserved for those with complex needs who require full-time care. This data can help identify where there are gaps in services and contribute to meaningful changes that improve the health care experiences of patients and families.

— Mélanie Josée Davidson, Director, Health System Performance (1)

Over the next 20 years, Canada's seniors population is expected to grow by 68% according to the Canadian Institute for Health Information. This trend will place greater demands on the continuing care sector. Between 2017 and 2037, the senior population will have grown from 6.2 million to 10.4 million. Older seniors, 75 and older, will more than double. (2)

According to Statistics Canada, Canada is experiencing a shift away from institutionalized forms of care and toward home care. (3) This allows people to stay in their home and communities, ensuring better mental well-being, lower mortality rates, and improved quality of life compared to a long-term care facility. (4)

Given the choice, most Canadians would choose to age or recover at home. CIHI found in 2018-2019, about 1 in 9 new long-term care residents potentially could have

been cared for at home, and importantly, would often have preferred to do so. This represents more than 5,000 long-term care spaces in reporting provinces and territories.

An Industry Challenged by Fragmentation

In Canada most home and community care services are delivered by provincial, territorial and some municipal governments. The federal government delivers home care services to First Nations on-reserve and Inuit in designated communities, members of the armed forces and the RCMP, federal inmates, and eligible veterans. There tends to be a patchwork of programs across the nation. Home care is not an insured service through the Canada Health Act, therefore it falls to each province and territory to implement their own terms, and while they have all implemented some measure of home care services, there are significant variations in access, costs and wait times.

There are fractures in methods across the country. Some provinces and territories have a public provider model. Some have a private model. And some have a combination. Inconsistency in methods and best practices is a problem in the face the ever-rising demand for home care.

Assuming that health services will be provided in the future as they have been in the past, health systems would need to double existing residential care capacity over the next 20 years to keep up with population growth. Clearly, this is not a feasible option. Says the Canadian Institute for Health Information, “Ensuring there is capacity to meet the pending demand of a growing population of seniors requires more than just building new beds; it means transforming the way care is provided across the continuum.” (2)

Numerous Exposures Demand Specialized Coverage

Taking care of people in their homes presents risks greater than those in a medical facility. Some of those risks might include:

Professional and General Liability Insurance

Professional liability insurance protects the organization and any acts, errors or omissions of their employees against claims of negligence or harm to the patient. Some scenarios might include:

- An employee fails to show up for a shift without contacting the agency, and if the client fails to take an important medication and suffers an injury or damage. This can be considered negligence.

- A nurse fails to administer a correct dose of a drug causing the patient's formation of blood clots. This medication error causes bodily injury to the patient due to negligence.
- A personal support worker fails to maintain dressing being used for wound chronic care, causing extensive damage to muscle tissue due to pressure ulcer. This can be considered a breach of duty of care.
- Strokes, falling down, and any number of other related incidents can be blamed on the caregiver.

Even if the claim is unfounded, this will incur costs for legal defense or settlements, which can be covered with insurance.

Non-Owned Automobile Liability Insurance

Auto-related accidents are becoming a common liability for home health care agencies. Non- owned auto coverage is a good backup in case of an auto accident involving the use of employees' vehicles during the course of business for which they are at-fault. This insurance protection helps pay for damages caused to other people or property.

Theft Bonds

Employee theft bonds protect home care organizations against financial loss in the event that an employee steals from a client.

The MedThree Advantage

MedThree makes it easy for brokers to find the right coverage for their clients in the healthcare sector. Visit our [website](#) to get started or for more information.

Content is current as of the date of broadcast and is subject to change without notice.

Sources:

1. <https://www.cihi.ca/en/1-in-9-new-long-term-care-residents-potentially-could-have-been-cared-for-at-home>
2. <https://www.cihi.ca/en/seniors-in-transition-exploring-pathways-across-the-care-continuum>
3. <https://www150.statcan.gc.ca/n1/pub/89-652-x/89-652-x2014002-eng.htm>
4. <https://www150.statcan.gc.ca/n1/pub/11-627-m/11-627-m2018031-eng.htm>