

ITEM 19
MANAGER'S REPORT NO. 77
COUNCIL MEETING 90/12/17

TO: MUNICIPAL MANAGER 1990 DECEMBER 11

FROM: ACTING CHIEF PUBLIC HEALTH INSPECTOR

SUBJECT: GROUP HOMES IN BURNABY AS A RESULT OF
DEINSTITUTIONALIZATION

PURPOSE: TO RESPOND TO QUESTIONS AND CONCERNS RAISED BY COUNCIL AT ITS 1990
NOVEMBER 13 REGULAR COUNCIL MEETING WITH REGARD TO CORRESPONDENCE
FROM THE HONOURABLE N. JACOBSEN.

RECOMMENDATION:

1. THAT this report be received for information purposes.

REPORT

At the 1990 November 13 regular Meeting of Council, correspondence was received from the Honourable N. Jacobsen regarding the placement of mentally handicapped people from institutions into the community. A number of questions were asked by Council with respect to this correspondence. The following will provide Council with a better understanding as to the status of Project Homes in Burnaby.

1.0 BURNABY GROUP HOME APPLICATIONS:

Homes developed through this program that started in 1988 are called Project Homes. The Ministry of Social Services & Housing Director for the program has indicated that MSSH staff are careful to ensure no one municipality becomes overloaded with these Project Homes. In choosing location the ministry considered the families origin and family preferences, friendships of the residents and other needs such as housing costs and availability of services. The two main facilities in the lower mainland which are being down-sized are Riverview and Woodlands. To date there are no group homes in Burnaby which are the direct result of the deinstitutionalization process of Riverview. Burnaby has, however, received a total of eight (8) group homes as a result of this program from Woodlands. Four (4) Project Homes were licensed in 1988, three (3) in 1989 and one (1) in 1990 for a total of 22 residents. There has been no indication as to the number planned for 1991. Listed below are the cumulative numbers of group homes under the same program located in the surrounding municipalities.

Burnaby	08
Vancouver	11
Surrey	13
Delta	03
North Vancouver	07
Richmond	08
Coquitlam	05

The City of New Westminster does not have any group homes from this program because suitable housing has been a problem to find. There has been an increased public awareness due to a trend called "community orientation" which brings these challenged people out into the community as a part of their life skills program. Formerly many of the clients spent their time in their residences, or sheltered workshops and segregated social functions. The move now is to integrate these people into the community.

It does not appear in comparing the numbers of group homes in other municipalities that Burnaby has received more than its fair share of these Project Homes.

2.0 TREATMENT IN AN INSTITUTIONAL SETTING:

With respect to residents receiving proper treatment as they move into less institutional settings, it is our belief that the quality of life of residents is comparable to or better than received in an institutional setting. As to the specific treatment we are in no position to compare what is now provided to what was provided in the institutional setting. Our concern is whether or not adequate treatment resources are available in the community and in some cases they are not. It should be noted that 3% of persons placed in the community have to return to Woodlands. This percentage is consistent through North America. One of the major obstacles in providing a high quality of life for these people is the lack of qualified competent staff who will remain in the position for any length of time. It is critical that the senior staff person have adequate training and experience to provide a quality program.

3.0 RESOURCES AND PROGRAMS:

With regard to there being adequate resources and programs to support these people in the community we would advise as follows.

3.1 Health Services

Currently Home Nursing Care provides nursing care to the residents as they would any other Burnaby resident. In some instances Home Care Nurses teach residential staff to carry out some basic procedures. It has been noted that these residents require more health monitoring to anticipate and prevent episodes of ill health. The MSSH has planned to bring in a Health Monitoring Program that will be in place in early 1991. This program will be a monitoring program as well as being a hands on approach and teaching residents and staff health skills and basic procedures. Dental services are available in the community. Some group home staff have requested a need for help in areas of budgeting, menu planning, therapeutic diets, nutritional and rehabilitation services, and speech pathology. The Health Department has been unable to meet the need.

3.2 Parks and Recreation

The Burnaby Parks and Recreation Department have been involved in serving this population and have developed programs to fit the needs of these residents and from all indications has been successful.

3.3 Mental Health Services

Psychiatric services are required for these Project Homes. Many of the residents have dual diagnosis (mental retardation and psychotic episodes) and require psychiatric interventions and specialized support. Help in dealing with disruptive behaviors is also required. Although the MSSH funds a professional support team which the homes can call as needed it is unclear whether there is reluctance to use the service or they are insufficient.

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4.0 CONCLUSION:

In conclusion based on information provided and observations made in the community, services to support this high needs group with a high quality of life have not been developed at a rate fast enough to meet the demand.



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ACTING CHIEF PUBLIC HEALTH INSPECTOR

KCJ/gl

cc: Medical Health Officer
Director Administrative &
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