

staff training of counsellors in this field. An effort is being made to develop a psychology oriented towards continuing education rather than seeking employment in the same type of work which may be redundant. In the past workers aged 45 and over considered themselves unemployable if their trades were phased out. It is necessary to encourage such older workers to take training.

There has been a marked improvement in the number of married women over 40 who seek and get training since elimination of the eligibility requirement for three years' experience in the labour force.

The Department forecasts that the policy to provide a "second chance" by way of continuing education will increase the number of older trainees within the next five years.

Recommendation 11

That the NES devote greater attention to the field of part-time employment with a view to discovering the nature of the demand and offering a more effective placement service.

ACTION TAKEN

Manpower Centres have a "Casual Pool" which is concerned with part-time employment of five days or less. Applicants for employment are requested to state whether they desire full or part-time employment. Counsellors are aware of agencies which employ part-time employees and an effort is made to arrange placements according to the demand.

Recommendation 26

- (a) That provincial departments of health and/or hospital commissions determine as quickly as possible the place and function of nursing homes in the total spectrum of required health facilities; and
- (b) That, assuming nursing homes to be accepted as an essential health facility, vigorous steps be taken to increase the present supply of those capable of providing a high quality of nursing and rehabilitation care; and
- (c) That approved nursing homes, operated on a non-profit basis, be made part of the hospital services system, and be included in the federal-provincial hospital insurance arrangements; and
- (d) That approved nursing homes, operated on a non-profit basis, be eligible to receive from federal-provincial sources capital grants under the hospital construction program, operating costs under the hospital insurance program to ensure the maintenance of desirable service standards and training grants to provide training for staff in rehabilitation nursing; and

- (e) That all nursing homes be licensed and supervised by a health agency and that consultation services be made available to all nursing homes by local and provincial health departments covering not only medical and nursing care including rehabilitation, but also nutrition, recreation and other important aspects of administration. The selection and in-service training of nursing home staff should receive particular attention.

ACTION TAKEN

The operation cost of nursing homes which provide hospital care is acceptable for sharing with the Federal Government under the Hospital Insurance Act. Chronic convalescent care cases are also covered where there is a medical necessity for those patients to be admitted to those institutions.*

Provinces have endeavoured to divide their care facilities into two categories: those requiring full-time nursing care, which come under the Department of Health, and those which have mainly a social need, which come under the jurisdiction of the department dealing with social services. For example, in Ottawa St. Vincent Hospital and the Perley Home come under the Health Department, whereas St. Patrick's Home is under the jurisdiction of the Department of Community and Social Services. Similarly, in Saskatchewan levels of Care 1, 2 and 3 are considered as mainly social needs and therefore come under the Department of Social Services; Levels 4, 5 and 6 have a major health component and as a result are an insured service and come under the Department of Health. The problem is in discharging patients from the health level, which is an insured service, to the social level which is the responsibility of the patient. In January 1973 the Province of Saskatchewan proposed a grant system to ease the financial burden of nursing home care on its residents. The proposed amounts were graded downward from Level III. "This new grant system represents a serious attempt by our Government to place the financing of special-care homes on a rational basis and to provide a solid base for the future development of services for the aged in the years to come."⁽¹⁾

In 1971 the responsibility of administering the British Columbia Community Care Facilities Licensing Act was transferred to the Health Branch. More recently, the Health Branch was given the major responsibility in designing, constructing and probably operating several "personal care" homes. According to 1972 planning, these will provide beds for ambulatory persons who do not require services in an extended-care hospital but who need more

* Specifically excluded are tuberculosis hospitals and sanatoria, hospitals or institutions for the mentally ill, as well as care institutions such as nursing homes and homes for the aged. The definition of "nursing homes" enters into the assessment at this stage.

(1) Government of Saskatchewan, Press Release, January 18, 1973.