

Ethical Decision-making in Community Care Services for the Elderly

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Background

- The Government provides a wide range of subsidised community care services (CCS): centre-based day care services & home-based home care services



The traditional agency-directed approach

Background

- To meet the challenges of an ageing population by enhancing CCS in Hong Kong.
- Based on the recommendations of the Elderly Commission's study on community care service (CCS) for the elderly in 2011.
- The Community Care Service Voucher Scheme for the Elderly (CCSV) was adopted by the Hong Kong Government in September 2013.

Background

The Community Care Service Voucher Scheme for the Elderly (CCSV):

- is based on a “money-follows-the-user” approach
- provides subsidy directly to service users (instead of service providers) in the form of services vouchers
- is a type of consumer-directed care (CDC)
- is an alternative option to traditional agency-directed services
- it is based on the philosophy of consumer empowerment and informed choice
- is person-and family-centered since control over service resources and decision-making is shifted away from professional workers to service users and their family caregivers

Background

- The traditional agency-directed approach works without a self-directed or consumer-directed element in which all services are selected and managed by service providers, with little or no participation from service users.
- The autonomy of impaired persons, including frail older people, is the ethical rationale for CDC.
- This decision-making should respect care recipients' wants, needs and preferences, in which care recipients should have education and support to make decisions.

The main idea behind the voucher system is that consumers are given the opportunity to make informed choices and optimise their mix of services, but this may not be true in practice.



How to facilitate older people to make informed choices and ethical decisions?

Research Study

- A qualitative research was conducted to explore how different factors and resources act, and interplay to allow older people to make informed choice and ethical decisions about the CCSV.
- Semi-structured in-depth interviews were conducted with 69 informants which include 26 CCSV users, 27 CCSV non-users and 16 professionals, over a period of 18 months.

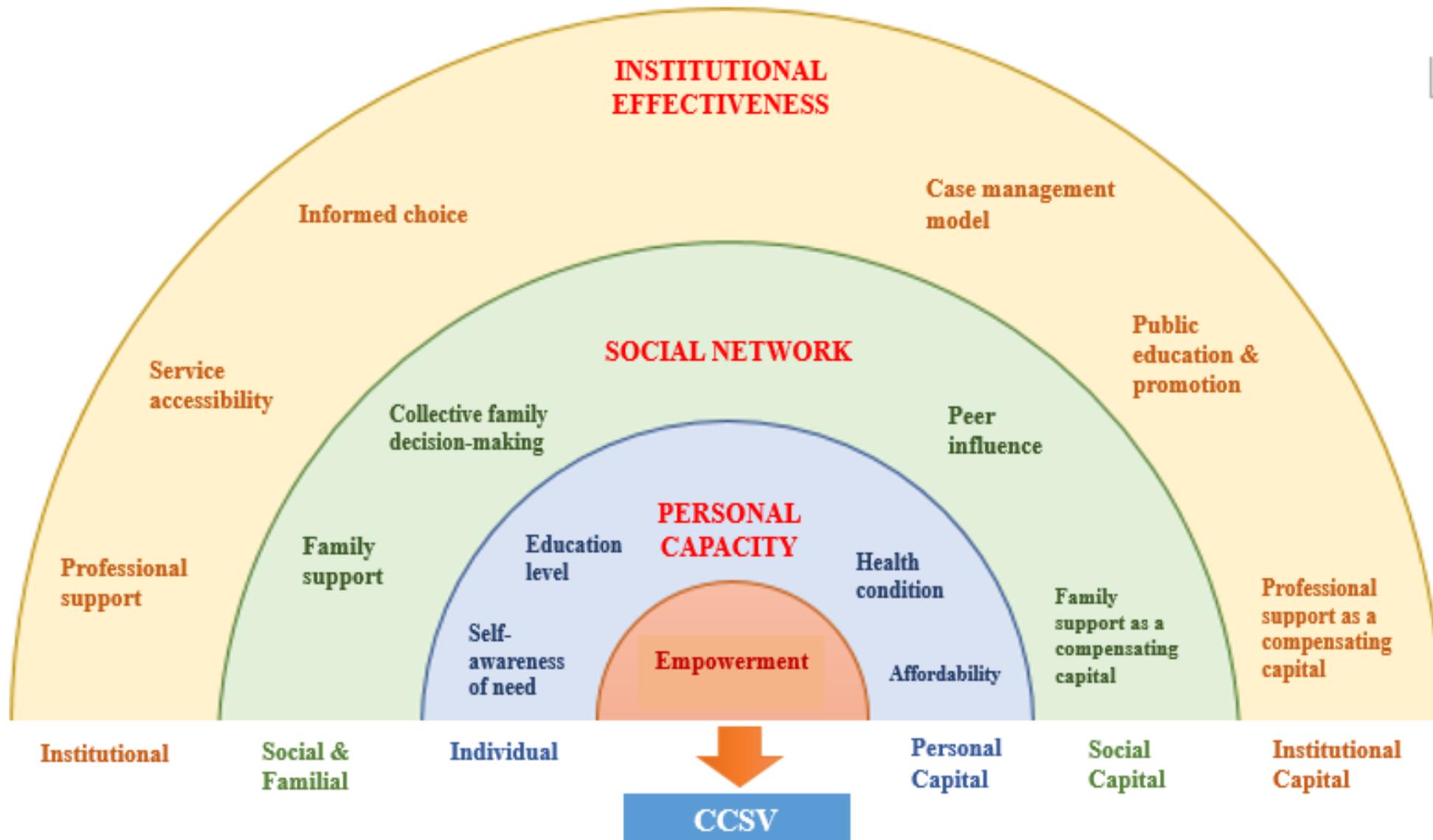
Findings

- A total of 14 themes emerged, which illustrate empowerment through the employment of different forms of capital in the practice of CCSV.
- All these themes are integrated and interrelated in the model of empowerment and used to analyse the decision-making and use of CCSV.

Frequency of Occurrence of Themes in all Stakeholder

	CCSV User (n = 26)	CCSV Non-users (n = 27)	Professional Staff (n = 16)
Sense of self awareness	9	11	18
Education level	8	17	11
Health condition	25	20	5
Affordability	8	7	14
Personal Capability	50	55	48
Family support	41	25	17
Collective family decision-making	20	0	8
Peer influence	4	2	2
Family support as compensating capital	20	0	7
Social Network	85	27	34
Professional support	25	13	19
Service accessibility	39	12	11
Informed choice	40	22	16
Prof. support as compensating capital	15	0	8
Case management model	0	0	14
Public education and promotion	0	0	10
Institutional Effectiveness	119	47	78

Empowerment Model of Community Care Service Voucher Utilisation



Findings

- CCSV users have more forms of capital than that of CCSV Non-users.
- For CCSV users, the presence of a certain kind of capital gives older people resources and support to empower them to make informed and ethical decisions regarding the CCSV.
- Different forms of capital interplay with each other, such as the way social capital (i.e. family support) compensates for the lack of cultural capital (e.g. low literacy) of CCSV users and then enables them to make informed choice and ethical decisions, and to manage to use the CCSV.
- For CCSV Non-user, nearly all of them lack at least one form of capital, and, most important, they lack compensating capital.
- Each elderly person, being a unique case, requires a specific combination of multiple forms of capital.

Discussion and Implication on Ethical Decision-making

- The Hong Kong Government may increasingly adopt such neo-liberal concepts as “consumer choice or right” in long-term care (LTC) service delivery or policy direction.
- Concerns about the capabilities of older people to make informed choices and manage CDC services.
- Concern about family decisions representing older people’s actual needs.

Discussion and implication on ethical decision-making

- A paradigm shift in the assumptions around older people is needed, in which older people can be seen as capable consumers able to self-direct and make informed choices.
- Professionals should focus on clients' strengths rather than their disabilities by advocating and empowering older people to make service-related decisions through CDC practices.
- A case manager to facilitate family decision-making including support for older people's voices, preferences and choices in care planning and care arrangements



~ The End ~
Thank you!