

THE DEVELOPMENT OF AN INTEGRATED SOCIAL HOME CARE MODEL – A BUSINESS MODEL CANVAS APPROACH

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ABSTRACT

The concept of an integrated social home care is a significant among home care within Malaysian society. It leads to varieties of meaning but for this context of study, business for silver hair society could be divided into Business Model Canvas and Social Business Model Canvas template. The effect models contribute into three (3) dimensional concept namely financial support capacity, management styles and sustainability operation. This paper will examined the integration of social inclusion into business model in BMC and or SBMC contribute to three (3) dimensional classifications which is financial support capacity, management styles and sustainability operation. A cross-sectional study was performed at duo (2) groups of SBMC and BMC conducted among officer or operator of PAWE from Jabatan Kebajikan Masyarakat and Pejabat Kebajikan Masyarakat in Klang Valley. A total of 150 officers or operator of PAWE were obtaining using UNTC-Policy Making Assessment Questionnaire and analysed using SPSS ver 21. The quantitative data from the test using likert scale (1-5) to measure the score achievement range from Strongly Disagree to Strongly Agree to get a holistic view of officer and operators' opinions. The result demonstrates the mediating relationship between policy with Home care (HC), Social Home Care (SHC), Day Care (DC), Nursing Care (NC), Community Care (CC) or Integrated Social Home Care (IHSC) of BMC and SBMC towards financial support capacity, management styles or sustainability operation dimensional classification. The result also demonstrates the direct relationship between BMC and SBMC towards financial support capacity, management styles or sustainability operation dimensional classification.

Key words: Business Model Canvas, Social Business Model Canvass, PAWE, Home care, Nursing Home Care, elderly or senior, community care, retirement home

INTRODUCTION

Since 1980 home care industry in Malaysia is significant for homeless and dependent low income elderly. (Health, 2020) It has emerge and serves from a variety segmentation customer from dependent, independent elderly, from low and middle income elderly, for rich and extremely rich elderly and family. Presently, the revolution of retirement home concept could be classified into dependent elderly (Resort and Villa concept of retirement concept), home care, nursing home care, active and productive elderly home care (Pusat Aktiviti Warga Emas - PAWE), rehabilitation care and community care. (Ali & Aziz, 2018) As key player public, government, NGOs and private will provide physical and financial resources including accommodation, food, caregivers and professional healthcare for treatment and medication, activities and facilities needed by elderly.

The definition of senior citizen

Senior citizen or "Silver Hair Society" is defined as the elderly aged 60 years and above; however, in Malaysia senior citizen is elderly aged above 55 years could be revised. (Noraini Che' Sharif, 2015);(RoslanJaafar, James, & V.Mishra, September 2019) Presently, in United Kingdom, the retirement age is 65, while the European Commission uses 60, and United States of America Bureau of Census, 60. (Bureau, 2020); (Union, 2020) The challenges need to be face by the home care provider agencies is mostly financial which leads to physical, social and technological resources. Rationally private home care serves the high level and low level of retirement home concept are meant for business purposes therefore their dependable to financial support is less significant.

The high level and low level of retirement home concept

There are two (2) types of retirement category which is high level and low level of retirement concept. The high level retirement concept is from the range of outdoor until indoor category including the resort style community and living, villa and famous residential care. The GreenAcres Retirement Village are an example of the Independent living for rich elderly which is situated in Ipoh. (Siew, 2017) This model mostly developed by corporate and private sector. This article is emphasizing medium and low level of retirement concept. These are few category of medium and low level retirement concept that will be discussed in this article including home care, nursing and rehabilitation home care and day care activity centre. (Zott, 2011) The challenges need to be face by the middle and low home care including the social home care provider is mostly financial which leads to physical, social and technological resources. This paper basically will identify the two (2) groups of SBMC and BMC relationship toward the performance of the private home care which serves the low level of retirement home concept are meant for social care or society purposes.

THE TYPES OF HOME CARE MODEL IN MALAYSIA

A retirement home is sometimes called an old people's home or old age home which is a multi-residence housing facility intended for senior citizens. (Yassin, Masram, & Khim, Aug 30, 2018) Additional facilities are provided for meals, gatherings, recreation activities, and some form of health or hospice care. (Ali & Aziz, 2018) A place in a retirement home can be paid for on a rental basis, like an apartment, or can be bought in perpetuity on the same basis as a condominium. (Ali & Aziz, 2018) There are two (2) types of retirement category or level is including high level and low level of retirement concept. Below are the definition of home care, social home care, day care, nursing care and community care.

The definition of home care

A home care is sometimes called an old people's home or old age home is a multi-residence housing facility intended for senior citizens. (Yassin, Masram, & Khim, Aug 30, 2018) Additional facilities are provided for meals, gatherings and recreation activities. The definition of home care generally means all category of homecare including the social home care, day care and active daily centre, nursing or rehabilitation care, community care where their activities are mainly will be operated in home base. (Ali & Aziz, 2018)

The definition of social home care

A social home care is called an old people's home or old age home is a multi-residence housing facility intended for senior citizens run by the NGOs. (Yassin, Masram, & Khim, Aug 30, 2018); (Richard & Ramia, 2007) Additional facilities are provided for meals, gatherings, recreation activities, and some form of health or hospice care. Most of the social home care activities are being sponsored by the government (Rumah Sri Kenangan) and the NGOs Social home care. The Rotary Foundation is a non-profit corporation that supports the efforts of Rotary International to achieve world understanding and peace through international humanitarian, educational, and cultural exchange programs. (RoslanJaafar, James, & V.Mishra, September 2019);

The definition of day care and active daily centre

A day care is sometimes called an old people's home or old age home with housing facility and activities provided for elderly. (Yassin, Masram, & Khim, Aug 30, 2018) Additional facilities are provided for meals, gatherings and recreation activities. Malaysia provides a comprehensive activities and facilities for the active and productive elderly in home care called Pusat Aktiviti Warga Emas or PAWE. (Noraini Che' Sharif, 2015); (Lim, Ng, & Basha, 2019)

The definition nursing home care

Nursing homes is also an old people's home mainly providing a wide range of care including elderly personal and custodial care, nursing care, Alzheimer, Dementia Care and elderly with minor diseases and injury which paid largely by Medicaid, Medicare or own pocket money. (Yassin, Masram, & Khim, Aug 30, 2018) Today, nearly 6% of older adults are sheltered in nursing homes that provide a wide range of care. (Horton, 09 Jul 2018)

The definition rehabilitation care

Rehabilitation care refers to the Rehabilitation Centre whereby the elderly care centre provides professional 24-hours nursing care which are handled by qualified and trained professional nurse and skill and expert caregivers. (Noraini Che' Sharif, 2015) A nursing rehabilitation care is sometimes called an old people's home or old age home is a multi-residence nursing home facility intended for senior citizens. (Yassin, Masram, & Khim, Aug 30, 2018)

The definition of community care

A community home is is a dorm or huge and large spacious that able to accommodate huge number of elderly at the same time. (Yassin, Masram, & Khim, Aug 30, 2018) Additional facilities are provided for meals, gatherings, recreation activities, and some form of health or hospice care. Table 1 below demonstrate the type of home care with the items available in each model.

Table 1: Types of integrated home care in Malaysia

Model	Services available
Home care	Long and short term care services
Social Home Care	Long and short term care services by NGOs
Day Care	Short term care activities
Nursing Care	Long and short term care services
Community Care	Long term care services by NGOs and private
Integrated Social Home Care	Long term social and short term care services

THE BUSINESS MODEL CANVAS APPROACH

The business model canvas inherited nine (9) components from Key Activities, Key Resources, Key Partner, Customer Relationship, Customer Channel, Customer Segment, Value Proposition, Income and Expenses. (CharlesBaden, FullerMary, & S.Morgan, 2010); (Pigneur, 2010) From the above types of home care which provided by varieties of agencies including government, private and NGO will be explained in BMC forms of functional approach in Integrated Social Home Care Model shown in table 2 below:

Table 2: Functional approach in Integrated Social Home Care (ISHC) Model

No	Business Model Canvas	Functional approach in Integrated Social Home Care Model
1	Key Activities	Internal resources: Physical provides the accommodation and facilities whereas Financial provides funding and financial support. (Sanderse, 2014) External resources: Social resources are including manpower and services from NGOs whereas Technological provides the support system or the available present infrastructure in home care industry including the medical treatment and record for elderly. (Sanderse, 2014)
2	Key Resources	Four (4) major resources including Internal resources and external resources. Internal resources including the physical and financial resources whereas the external resources including the social resources and technological resources.
3	Key Partner	All the relevant stake holder including the NGOs, Government, Private and Non Profit and Private associates in healthcare, financial institution, pharmacy and hospitals. (Collins, 2005)
4	Customer Relationship	Professional Healthcare and Caregivers.
5	Customer Channel	Checking into the integrated social home care thru walk-in, internet social media and from hospital referential.
6	Customer Segment	Including all the community of target customers, in the context of this services would be low level of elderly, homeless elderly and single elderly and dependent elderly.
7	Value Proposition	Model for low income elderly which required basic physical resources including accommodation, food, basic medical treatment and services. (Zott, 2011) These are the example public model including Rumah Sejahtera, Ehsan and Sri Kenangan
8	Income	Income generated from the services
9	Expenses	Expenses incurred within a month from the business operation

In collapsing the components into group of component has divided the category into four (4) Stakeholder, Customer relationship, Proposed Model and Financial Resources. (Mark W. Johnson, 2011); (Kalling, 2017) Business Model Canvas (BMC) or Social Business Model Canvas (SBMC) comprises of nine (9) components; this paper has collapsed into four (4) major groups namely stakeholder, customer relationship, and integrated proposed model, financial. (Entrepreneurship, 2018); (Laura Michelini, 2012) (MichaelMorrissa, MinetSchindehutteb, & JeffreyAllenc, 2005) The stake holder involved provides high end and moderate medical equipment including the in-house healthcare equipment namely screening instrument for checking high blood, sugar level, and cholesterol level. The stakeholder also provides the services including the professional healthcare services from government general hospital and clinic. The internal physical resources including the accommodation from low standard income accommodation until high end income standard of living.

The customer relationship services including the social resources services namely the volunteer and helper, skilled caregiver, skilled nursing and professional and specialist doctor. They provides wide range of services from the personal care which assigned to volunteer and helper, skilled caregiver, custodial care which assigned to skilled caregiver, assisted daily living which assigned to skilled volunteer and helper, assisted instrumental daily living which assigned to skilled volunteer and helper, nursing care which assign to skilled nursing and professional, medical treatment and rehabilitation services which assign to specialist and professional healthcare practitioner. The Resources inherited from the BMC approach shown in table 3 below:

Table 3: The Resources inherited from the BMC

Component BMC	Resources
Key Activity (KA)	Stakeholder
Key Resource (KR)	
Key Partner (KP)	
Customer Relationship (CR)	Customer relationship
Customer Segment (CS)	
Customer Channel (CC)	
Value Proposition (VP)	Proposed Model
Cost	Financial Resources
Revenue	

THE DEVELOPMENT OF AN INTEGRATED SOCIAL HOME CARE MODEL

As theory of activity is concern, an integrated social home care model is made up from both the day care (Value activities of resources) concept and the social care (value activities of relationship) concept. Value activity of resources and value activity of relationship made up the holistic value proposition of the services. Key Activities (KA) contributes accommodation and facilities; VP represented the final model of Rumah Sejahtera (NGO); Rumah Ehsan; Rumah Sri Kenangan; private home care and NGOs. Customer relationship is everything about serving the elderly in home care including the customer segmentation where the category of elderly is divided here and customer channel whereby the building block that describes how home care communicates with its category of home care to deliver a value proposition or the model home care. Table 4 below demonstrates the list of items, resources and dimensional on BMC and SBMC involved in business model canvas.

Table 4: The items, resources and dimensional on BMC and SBMC

Model	Items in Model	Resources	Dimensional
Home care	Long and short term care services	Stakeholder	BMC & SBMC
Social Home Care	Long and short term care services by NGOs	Stakeholder	SBMC
Day Care	Short term care activities	Stakeholder and Customer relationship	BMC
Nursing Care	Long and short term care services	Stakeholder and Customer relationship	BMC & SBMC
Community Care	Long term care services by NGOs and private	Stakeholder and Customer relationship	SBMC
Integrated Social Home Care	Long term social and short term care services	Stakeholder	BMC & SBMC

TOOLS AND METHODOLOGY

A cross-sectional study was performed at duo (2) groups of SBMC and BMC conducted among officer or operator of PAWE from Jabatan Kebajikan Masyarakat and Pejabat Kebajikan Masyarakat in Klang Valley. A total of 150 officers or operator of PAWE were obtaining using UNTC-Policy Making Assessment Questionnaire and analysed using SPSS ver 21. The quantitative data from the test using likert scale (1-5) to measure the score achievement range from Strongly Disagree to Strongly Agree to get a holistic view of officer and operators' opinions. The result demonstrates the relationship between Home care (HC), Social Home Care (SHC), Day Care (DC), Nursing Care (NC), Community Care (CC) or Integrated Social Home Care (ISHC) of BMC and SBMC towards the financial support capacity, management styles or sustainability operation dimensional classification. Table below exhibits the relationship between all types of home care with the three (3) dimensional classification of the financial support capacity, management styles or sustainability.

Table 5

	R Pearson's correlation	R Pearson's correlation	R Pearson's correlation
	Financial	Management Styles	Sustainability
SBMC			
HC, DC, SHC, CC, ISHC	0.603	0.437	0.331
BMC			
HC, DC, ISHC	0.603	0.437	0.331

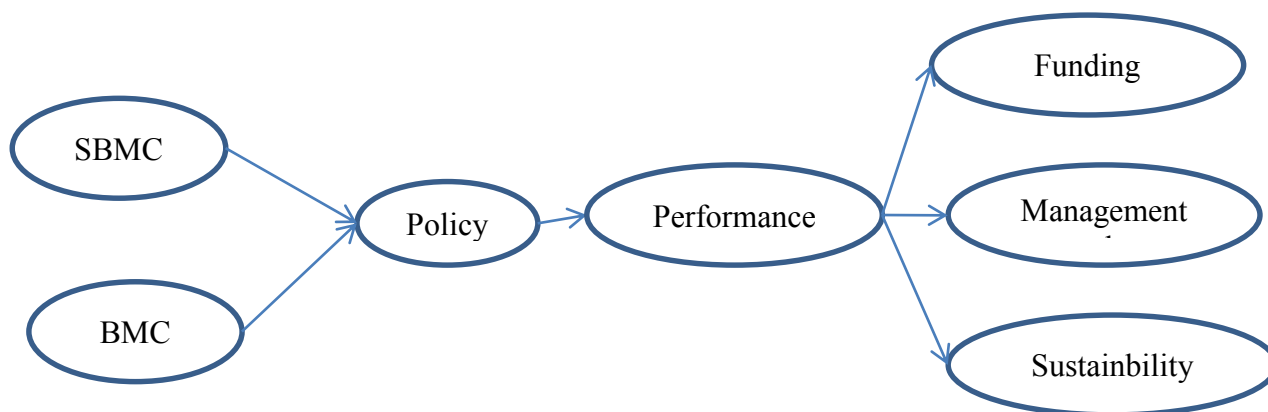
R - Pearson's
0.7 is
0.5 < x < 0.7
0.4 > x

Correlation
Strong
Moderate
Weak or no correlation

THE CONCEPTUAL FRAMEWORK

An integrated social home care (ISHC) model comprises of major model with five (5) variables including internal resources, external resources as independent variable whilst policy mediates between internal and external resources towards the performance of an ISHC. The internal resource has two (2) major templates including new proposed Social Business Model Canvas Template (SBMC for Government, NGOs and Non Profit Organization) and new proposed Business Model Canvas Template (BMC for private company). The performance of the integrated model could derive three (3) dimensional issues and aspect including fund received, management styles and sustainability. Figure 1 below exhibit the basic conceptual framework to explain the relationship between resources of home care, policy involved, performance and the dimensional effect. Figure 1 below exhibits the conceptual framework of an integrated social home care model.

Figure 1: The conceptual framework of an integrated social home care model towards the performance



Fund received

There are two (2) types of level of retirement or integrated social home care namely the high income integrated social home care including high class concept of retirement concept in villa and open space concept of retirement living. The low and medium income concept of living including the Social Home Care, Day Care, Nursing Care, Community Care. Each integrated centre provides the personal care, custodial care, rehabilitation care under the category of assisted daily living, instrumental assisted daily living.

Management styles

Good management is about innovative business should be accepting of failure and making the workplace comfortable makes happier workers for professional healthcare, caregivers, volunteer and helper.

Sustainability

SBMC or BMC that contribute to protecting environment through good stewardship practices by implementing initiatives and encourages all employees to take additional actions in fitting the 3Rs practices including Reduce, Reuse, and Recycle. Home care that utilizing green equipment for their appliance and equipment. Purchase Energy Efficient Lighting and utilize motion-controlled light sensors.

THE SOCIAL POLICY IMPLICATION OF THIS PAPER

Form the above classification, table below exhibit that business model approach of both stakeholder and customer relationship contribute the high level of retirement concept under 4 and 5 star category. Business and social business model leads to 2 and 3 star category and finally social business model leads to 1 star category which is most likely the social support business concept. The Act, (1998) on Private Healthcare Facilities and Services Act in Malaysia indicates that in promoting the integrated social home care model for elderly requires to improve the facilities of healthcare and services should be in-line with the latest trend of social care model in other parts of the world. (Roos, 2012) Table 6 below exhibit the star rating on integrated social home care:

Table 6: The Star rating on integrated social home care

Star	Value Activities	Facilities	Value Services	Resources	Dimensional
5 Star	Excellent facilities	High end medical equipment within the host of amenities	Excellent services	Stakeholder	BMC

4 Star	Above average facilities	Moderate medical equipment within the host of amenities	Above average services	Stakeholder	BMC
3 Star	Moderate facilities	High end internal physical necessities within the host of amenities	Moderate services	Stakeholder and Customer relationship	BMC & SBMC
2 Star	Shared or Subsidize facilities	Internal physical necessities within the host of amenities	Minimum services	Stakeholder and Customer relationship	BMC & SBMC
1 Star	Shared or Subsidize facilities	Internal physical necessities	Sponsored Social services	Stakeholder and Customer relationship	SBMC

THE THEORETICAL CONTRIBUTION OF THIS PAPER

The theoretical contribution, methodological contribution and practical contribution on integrated social home care are applying a model to multi-racial, multi ethnic, multi-cultural and multi religion elderly in Malaysia. As a policy makers, social entrepreneur, Home care operator, researcher and practitioner in gerontology and geriatric department could obtained are conclusive about the requirement and necessities on internal business operation and marketing operation toward the performance of the integrated social home care.

This holistic home care for society is utilizing caregiver and skilled social volunteer effectively and efficiently utilizing the physical and technological resources physical and technological resource labelled as valued added in activities or VAR (I) whereby the social resources and customer relationship management labelled as valued added in relationship or VAR (II). Both build up the building block of HOVAR or Holistic of valued added in activity and relationship or HOVAR which could be explained in below formula:

The Holistic approach of VAR (I) is the value activity of resources and VAR (II) is the value activity of customer relationship management could be representing as formulas below:

$$\begin{aligned} \text{HOVAR or Ho} &= \text{VAR is an abbreviation of} \\ \text{Ho} &= \text{VA (R1 + R2)} \\ \text{Ho} &= \text{VAR1 + VAR2} \\ \text{Where:} \\ \text{Ho} &= \text{VAR where A is activity and R1 and R2 is representing the value} \\ &\text{activity of relationship and value activity of resources} \end{aligned}$$

CONCLUSIONS

As two (2) major business model templates in Malaysia is concern this paper derived four (4) category of home care under both templates including BMC and SBMC category which is Home care, Nursing Care and, Integrated Social Home Care. The Social Home Care and Community Care falls under the SBMC and Day Care goes under BMC. BMC template has served for 5 Star and 4 Star category of star rating and 3 Star until 1 Star rating served by the SBMC templates. Nevertheless from cross-sectional study was conducted among officer or operator of PAWE from Jabatan Kebajikan Masyarakat and Pejabat Kebajikan Masyarakat in Klang Valley this paper has differentiated the contribution and acquirement for each entity of BMC and SBMC. The result demonstrates the relationship between Home care (HC), Social Home Care (SHC), Day Care (DC), Nursing Care (NC), Community Care (CC) or Integrated Social Home Care (IHSC) of BMC and SBMC towards the financial support capacity, management styles or sustainability operation dimensional classification. The varieties of model has trigger different dimensional effect where SBMC acquire fund support and able to contribute for sustainability and BMC is able to construct new management style and able to contribute for sustainability.

REFERENCES

- Act, P. H. (1998). *The Act on Private Healthcare Facilities and Services Act*. Law of Malaysia.
- Ali, S. B., & Aziz, R. A. (2018). *PENJAGAAN TIDAK FORMAL WARGA TUA: ANTARA TANGGUNGJAWAB DAN BEBAN*. eBangi.
- Bureau, U. S. (2020). <https://www.census.gov/foreign-trade/reference/guides/tradestatsinfo.html>. Retrieved from census.gov.
- CharlesBaden, FullerMary, & S.Morgan. (2010). Business Models as Models. *Long Range Planning*.
- Collins. (2005). Sustaining Social Sector Organizations. *A Companion to Organizational Anthropology*.
- Entrepreneurship, J. o. (2018). The Case for a Socially Oriented Business Model Canvas: The Social Enterprise Model Canvas. *Journal of Social Entrepreneurship*.

- Health, M. o. (2020). *moh.gov.my*. Retrieved from moh.gov.my.
- Horton, J. (09 Jul 2018). Senior Citizens in the Twenty-First-Century Public Library. *Public Library Quarterly* .
- Kalling, J. H. (2017). The business model concept: theoretical underpinnings and empirical illustrations. *European Journal of Information Systems* .
- Laura Michelini, D. F. (2012). New business models for creating shared value. *Social Responsibility Journal* .
- Lim, X. J., Ng, S. I., & Basha, N. K. (2019). To Retire or not to Retire: Intention towards Concept of Retirement Village in Malaysia. *Asian Journal of Business Research* .
- Mark W. Johnson. (2011). Reinventing Your Business Model. *Harvard Business Review* .
- MichaelMorrisa, MinetSchindehutteb, & JeffreyAllenc. (2005). The entrepreneur's business model: toward a unified perspective. *Journal of Business Research* .
- Michelini, L. (September 2012). New business models for creating shared value. *Social Responsibility Journal* .
- Noraini Che' Sharif, K. A. (2015). *PENGALAMAN DAN FAKTOR PENGABAIAN WARGA EMAS DALAM KOMUNITI*. eBangi.
- Pigneur, A. O. (2010). *Business Model Generation: A handbook for visionaries, game changers and challengers*. John Wiley and Sons, Inc.
- Richard, L., & Ramia, G. (2007). NGOs and international business research: Progress, prospects and problems. *International Journal of management reviews* .
- Roos, A. (2012). Activity theory as a theoretical framework in the study of information practices in molecular medicine. *Information Research* .
- RoslanJaafar, James, K., & V.Mishra, D. A. (September 2019). Challenges facing Malaysia pension scheme in an era of ageing population. *Finance Research Letters* .
- Sanderse, J. (2014). The business model canvas of NGOs.
- Siew, G. a. (2017). *greenacres*. Retrieved from <http://greenacres.com.my/>.
- Union, E. (2020). https://europa.eu/european-union/documents-publications_en. Retrieved from europa.eu/european-union.
- Vial, V. (2016). A Business Model Canvas for Social Enterprises. *Sains Humanika* .
- Yassin, A. M., Masram, H., & Khim, O. S. (Aug 30, 2018). Potential Development of Retirement Village in Malaysia. *International Journal of Property Sciences* .
- Zott, C. (2011). The Business Model: Recent Developments and Future Research. *Jouirnal of Managament* .